



State of Nebraska
Department of Health and Human
Services
Independent Verification and
Validation (IV&V) Services

RFP# 109035 O3

Due: November 19, 2021

TECHNICAL PROPOSAL



1311 Fort Crook Road
Suite 100
Bellevue, Nebraska 68005



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1.0 CORPORATE OVERVIEW (SECTION VI)

Software Engineering Services (SES) has reviewed and acknowledges Addendums One and Two, dated October 29, 2021 for this RFP.

A. CONTRACTOR IDENTIFICATION AND INFORMATION

- *Software Engineering Services*
- *1311 Fort Crook Road, Suite 100
Bellevue, NE 68005*
- *Corporation*
- *Incorporated in NE, 1992*
- *No Name or Form Change*

B. FINANCIAL STATEMENTS

Software Engineering Services (SES) is a privately held corporation. SES was founded in 1992 in the State of Nebraska. A Minority Owned, Service-Disabled Veteran Owned Small Business, we provide an array of consulting services to the federal and state government in addition to commercial entities. Some of our current clients include Boeing, United States Air Force, State of Florida Office of Attorney General, State of Florida Department of Law Enforcement and State of Kansas Department of Health and Environment. SES core capabilities include independent verification and validation (IV&V), cybersecurity, CMMI process improvement, project management and other IT services. SES is headquartered in Bellevue, Nebraska and has over 120 employees located in Nebraska, Texas, Colorado, and Florida.

Our 2020 Income Statement and Balance Sheet are included as evidence of our stability and financial strength. SES does not have any judgements, pending or expected litigation or financial reversals. There are no conditions known to exist that may materially affect our viability and stability. The banking reference to be contacted in regards to Software Engineering Services is listed below.

Dan Gomez, Senior VP and Loan Manager, 9290 West Dodge Road, Suite 401 Omaha NE 68114
Dan.Gomez@greatwesternbank.com; 402-293-2311 (direct)



Income Statement

Software Engineering Services Inc -2020
Income Statement
For the Twelve Months Ending December 31, 2020

	Year to Date	
Revenues		
Professional Service Revenue	\$ 16,383,626.38	97.90
Interest Income	3.00	0.00
Investment Income	<u>352,163.00</u>	2.10
Total Revenues	<u>16,735,792.38</u>	100.00
Gross Profit	<u>16,735,792.38</u>	100.00
Expenses		
Direct Labor to a Project	9,079,304.73	54.25
Direct Sub-Contractor cost	1,698,043.07	10.15
Fringe-Grp Medical Ins	664,960.86	3.97
Fringe-Disability Insurance	112,598.69	0.67
Fringe-Workers Comp Ins	80,826.55	0.48
Fringe-Life Insurance	11,937.02	0.07
Fringe-Dental	28,914.32	0.17
Fringe-Other Insurance	8,808.00	0.05
Fringe - Payroll Taxes	752,806.88	4.50
Fringe - Other	68,740.94	0.41
Facilities-Bldg Rent O/H	17,925.00	0.11
Facilities-Telephone Service	24,370.67	0.15
Facilities-Internet Service	6,544.08	0.04
Facilities-Utilities Service	29,929.56	0.18
Facilities-Water Rental	538.90	0.00
Facilities-Security	326.46	0.00
Facilities-Janitorial Services	21,842.48	0.13
Facilities:Repair & Maintenanc	40,151.62	0.24
Facilities-Bldg Repair	4,460.25	0.03
Facilities-Equipment Repair	585.00	0.00
Facilities-property Tax Bldg	71,054.55	0.42
Facilities-Gen Supplies O/H	201.78	0.00
Facilities-Office Supplies O/H	8,925.52	0.05
O/H - Technician Salaries	630,207.31	3.77

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Software Engineering Services Inc -2020
Income Statement
For the Twelve Months Ending December 31, 2020

	Year to Date	
O/H - Marketing Salaries	132,506.45	0.79
O/H- Marketing	12,994.00	0.08
O/H - Human Resources Salaries	429,856.50	2.57
O/H Recruitment	16,614.01	0.10
O/H - Travel Activities	145,968.16	0.87
O/H - Meals and Per Diem	22,495.14	0.13
O/H - Employee Relocation	970.00	0.01
O/H-Licenses & Fees	6,924.38	0.04
O/H - Office Supplies	39,806.54	0.24
G&A Auto Expense	2,567.99	0.02
G&A Bank Charges	569.82	0.00
G&A Bad Debt	258,094.57	1.54
Sales Tax Expense	1.96	0.00
G&A State Income Taxes	80,028.83	0.48
G&A Accounting Fees	38,577.51	0.23
G&A Legal Fees	9,008.40	0.05
G&A Other Professional Fees	53,295.73	0.32
G&A - Executive Salaries	88,250.00	0.53
G&A - Human Resources Salaries	154,410.74	0.92
G&A Travel	103,013.75	0.62
G&A Meals & per Diem	11,151.10	0.07
G&A Meeting & Office Exp	6,027.74	0.04
G&A Training & Seminars	16,476.44	0.10
G&A Office Supplies	52,229.44	0.31
G&A Postage & Overnight shippn	1,245.39	0.01
G&A Dues and Subscriptions	1,065.68	0.01
G&A Interest on Loans	133,147.20	0.80
Misc Expenses	16,565.76	0.10
Unallowable-Charitable Contrib	<u>13,985.00</u>	0.08
Total Expenses	<u>15,211,852.47</u>	90.89
Net Income	<u>\$ 1,523,939.91</u>	9.11

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Balance Sheet

Software Engineering Services Inc -2020
Balance Sheet
December 31, 2020

ASSETS

Current Assets	
Petty Cash	\$ 1,500.00
Regular Chkn Acct-Grt Western	2,050,093.49
GWB 5809044	144,888.96
Great Western AP- 12051872	11,443.49
Wells Fargo - chk 115-6985453	12,994.88
Client Fees Receivable	1,519,879.68
Employee Receivables	1,500.00
Other Receivables	159,781.00
Employee Advances	<u>11,074.98</u>
Total Current Assets	3,913,156.48
Property and Equipment	
Furniture and Fixtures	161,203.14
Equipment	250,351.83
Automobiles	191,451.88
Building	3,193,968.65
Building Improvements	17,885.50
Land	40,309.00
Accum. Depreciation - Furnitur	(161,203.14)
Accum. Depreciation - Equipmen	(247,321.25)
Accum. Depreciation - Automobi	(121,098.60)
Accum. Depreciation - Other	(16,554.99)
Accum. Depreciation - Building	<u>(1,000,877.02)</u>
Total Property and Equipment	2,308,115.00
Other Assets	
Other Investments	2,200,000.00
Investment in Biomedical Solut	1,000.00
investment in Cyber Systems	427,539.24
Investment in Warhawk JV	<u>(20,882.00)</u>
Total Other Assets	<u>2,607,657.24</u>
Total Assets	<u>\$ 8,828,928.72</u>

LIABILITIES AND CAPITAL

Current Liabilities	
Accounts Payable	\$ 225,466.56
Employee Benefits Payable	1,589.08
SBA Loan	2,023,580.00

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Software Engineering Services Inc -2020
Balance Sheet
December 31, 2020

Total Current Liabilities		2,250,635.64
Long-Term Liabilities		
Great W B Loan 15525475928	2,106,340.09	
Loan from Stockholders	107,481.00	
Loan 02 From Stock Holders	25,000.00	
Total Long-Term Liabilities		2,238,821.09
Total Liabilities		4,489,456.73
Capital		
Common Stock	10,000.00	
Paid-in Capital	336,922.83	
Retained Earnings	2,468,609.25	
Net Income	1,523,939.91	
Total Capital		4,339,471.99
Total Liabilities & Capital		\$ 8,828,928.72

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C. CHANGE OF OWNERSHIP

There is no change in ownership or control of SES that is anticipated during the twelve (12) months following the proposal due date.

D. OFFICE LOCATION

Office location responsible for performance pursuant to an award of a contract with the State of Nebraska:

*Software Engineering Services
1311 Fort Crook Road, Suite 100
Bellevue, NE 68005*

E. RELATIONSHIP WITH THE STATE

Software Engineering Services does not have any dealings with the State over the previous two (2) years, nor does it or any Party named in our proposal have any contracts with the state. No such contracts exist.

F. CONTRACTOR'S EMPLOYEE RELATIONS TO THE STATE

No party named in our (SES) response is or was an employee of the State within the past twenty-four (24) months.

No employee of any agency of the State of Nebraska is employed by us (SES). Additionally, we are not using subcontractors.

G. CONTRACT PERFORMANCE

Neither Software Engineering Services nor any proposed Subcontractor (N/A) has had a contract terminated for default during the past five (5) years

*At any time during the past five (5) years, Software Engineering Services **has not** had a contract terminated for convenience, non-performance, non-allocation of funds, or any other reason.*

H. SUMMARY OF CONTRACTOR'S CORPORATE EXPERIENCE

Software Engineering Services has been providing IT consulting, IV&V, project management, and process improvement services since 1991. SES has provided IV&V services to diverse states and state agencies giving us a broad and unique opportunity to learn various organizational challenges, external and internal constraints, and opportunities. During these engagements, SES IV&V Team and consultants have been involved in planning, designing, building, testing, deploying, implementing, certifying, and sustaining information systems in state government environment.



A majority of our IV&V work has been with Health and Human Service state agencies, including IV&V for MMIS modernization projects. Additionally, we have provided IV&V, Project Management Office (PMO), Quality Assurance (QA), Organizational Assessment, and management monitoring of IT systems for other social programs including Health Insurance Exchange (HIX), Eligibility and Enrollment for Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Child Support Services, Economic and Employment Services, Prevention & Protection Services, and Rehabilitation Services. Other state agencies that SES has provided IV&V services for include- Office of Attorney General (OAG), Department of Law Enforcement (DLE), Department of Health and Environment (DHE), Department of Children and Families (DCF), Department of Commerce, Office of Superintendent of Insurance, Department of Social Services (DSS), HealthNet Division (HD), and Department of Motor Vehicles (DMV).

Three recent and ongoing projects similar in scope and size to the Nebraska MMIS IV&V project are as follows:

ALABAMA MODULAR MMIS AND ELIGIBILITY & ENROLLMENT IV&V

Organization Name	State of Alabama Medicaid Agency
POC Name	Clay Gaddis
Title	MMIS Program Manger
Phone	334-242-5838
E-mail	Clay.Gaddis@medicaid.alabama.gov
Prime or Sub	Prime
Originally Scheduled Completion Date and Budget	Completion Date: 04/2018 – 03/2020 Budget: \$1,360,069.63
Actual (or currently planned) Completion Date and Actual (or currently planned) Budget	Completion Date: 04/2018 - 03/2021 Budget: \$2,062,626.97
Contractor’s Responsibilities	Alabama Medicaid Agency selected SES to perform IV&V services for both the Alabama Medicaid Modularity Implementation (AMMI) MMIS Modularity Project and the Alabama Medicaid Eligibility and Enrollment CARES Project to meet the Medicaid Enterprise Certification requirements for both the MECT and MEET tool kits as well as the projects goals and objectives. SES is engaged for a period of two years with three additional year options. The overall budget forecasted for both projects is under 1 billion dollars.

SES Tasks include:

Submission of Weekly Status Reports includes work performed and planned work for the following week regarding all CMS artifacts and meeting attended to compile observations to identify risks and issues for recommendations.

Submission of Monthly Status Reports includes work performed over the calendar month in a final format simultaneously distributed to the State and CMS. IV&V provides all analysis, product evaluations and formal deliverable reviews based upon the following criteria:

- Quality
- Alignment to project objectives
- Fidelity to State and Federal requirements
- Compliance with CMS certification requirements
- Adherence to the project plan and strategy

Submission of Quarterly Progress Reports and/or planned Operational Milestone Review Progress Reports
Certification Readiness Reports

All assessments use IV&V tools such as IV&V Checklists (based upon industry best practices such as – IEEE, ITIL, CMMI, PMBOK, HIPAA, MITA, NIST, etc., Process & Review worksheets and deliverable reviews.

SES performs analysis and reporting of oversight in the areas of Planning, Project Management, Quality Management, Training, Requirements Management, Operating Environment, Development Environment, Software Development, System and Acceptance Testing, Data Management and Operations Oversight for both projects.

As Key Performance Indicators, SES performs formal Deliverable Reviews of all CMS required artifacts for both projects. They include but are not limited to the Project Partnership Understanding documents, State Goals and Objectives (Program Charter), MITA State Self-Assessment and MITA Roadmaps, MITA Concept of Operations, MMIS Concept of Operations, Implementation Advanced Planning Documents, Risk Register/ Exception Plans, State Security Policies / Security Plans, HIPAA Privacy Impact Analysis, Project Management Plans, Schedule/ Milestones and Burn-down Charts, Test Plans, Product Demonstration Reviews, Incident Management Plans, Change Management Plans, Database Designs, Data Conversion/ Management Plans, Medicaid Continuity of Operations Plan (Business Continuity/ Contingency), Disaster Recovery Plans, Test Reports/ Validated Product Reports, System Design Documents (SDD), System Requirement Document/ Backlog of User Stories or Use Cases, Rollout Plans and HIPAA Statements.



	<p>SES has completed evaluation of the Program Management Office Request for Proposal (RFP) including Operational Change Management, Project Management and Enterprise Architecture including Testing with Performance Measures on the path to certification.</p> <p>Plans to evaluate the System Integrator, Enterprise Data Warehouse, Program Integrity, Provider Management, Member Communications and the Base Medicaid Management Information System (MMIS) implementations are underway.</p>
<p>Provide narrative descriptions to highlight the similarities between the Contractor's experience and this solicitation</p>	<p>The AL MMIS IV&V project is highly similar to the IV&V services requested by the State of Nebraska:</p> <ol style="list-style-type: none"> 1. Modular Medicaid implementation to include EVV, POS, HITECH, Interoperability and Eligibility & Enrollment/Benefits components 2. Large, complex multi-year projects across various phases in the lifecycle 3. Includes technical, business, and management dimensions of the projects and organization. 4. Heavy emphasis on stakeholder management and organizational change. 5. Desire to reduce project risk from the start. 6. Requirement for effective communication and collaboration. 7. Utilization of a hybrid staffing approach to include key staff and a relevant SME pool.

KANSAS MODULAR MEDICAID SYSTEM (KMMS IV&V)

Organization Name	Kansas Department of Health and Environment (KDHE) - Division of Health Care Finance (DHCF)
POC Name	Elizabeth Wolff
Title	Enterprise Systems Director
Start/End/Status	Initial Period: 12/2015 – 05/2019 Contract Extensions: 05/2019 – 03/2022
Phone	785-296-1319
E-mail	Elizabeth.wolff@ks.gov
Prime or Sub	Prime



Originally Scheduled Completion Date and Budget	Completion Date: 12/2015 – 05/2019 Budget: \$817,400.00
Actual (or currently planned) Completion Date and Actual (or currently planned) Budget	Completion Date: 05/2019 – 09/2022 Budget: \$1,715,745.00
Contractor’s Responsibilities	<p>SES has partnered with Kansas Department of Health and Environment (KDHE) on the Kansas Modular Medicaid System (KMMS) project as Independent Verification and Validation service provider for the past 5 years.</p> <p>SES team coordinates, plans, collaborates, and communicates with Kansas Information Technology Office (KITO) and KDHE on the scope of KMMS project goals and objectives. KMMS is a true modular implementation where Kansas is modernizing their MMIS system in Stages. KMMS is following a hybrid approach where agile methodology and Commercial-off- the-Shelf (COTS) products such as SAS, Cerner Health Analytics, and Microsoft Dynamics are being integrated to modernize MMIS.</p> <p>As KMMS IV&V partner, SES is closely aligned with the State to ensure that operational readiness federal certification milestones are fully met.</p> <p>SES is to verify and validate that the State and their vendor partners in the development and implementation of their Eligibility and Enrollment (E&E) systems are following the CMS review process including use of suggested artifacts and provided templates to help the State prepare and successfully pass three major milestone reviews.</p> <p>SES is contracted to perform monthly reports and quarterly IV&V assessments and present an objective assessment of project “health” and key findings, and CMS MMIS Certification progress to the Director of the Enterprise Project Management Office (EPMO) of the Kansas Information Technology Office (KITO), the KEES Project Steering Committee, and the Federal CMS partner.</p> <p>The SES IV&V Team reviews the Project Schedule and Resource Allocation Plan to ensure the project is progressing as planned; adequate resources are available when needed; the project team is effective in addressing critical issues that could impact the schedule or resource use; managing requirements and planning, executing, monitoring, and reporting progress towards CMS Certification of the KMMS Upgraded system.</p>
Provide narrative descriptions to highlight the similarities	<p>The KMMS IV&V project is highly similar to the IV&V services requested by the State of Nebraska:</p> <ol style="list-style-type: none"> 1. Modular Medicaid implementation to include EVV, POS, HITECH, Interoperability and Eligibility & Enrollment/Benefits components



between the Contractor's experience and this solicitation	<ol style="list-style-type: none"> 2. Large, complex multi-year projects across various phases in the lifecycle 3. Includes technical, business, and management dimensions of the projects and organization. 4. Heavy emphasis on stakeholder management and organizational change. 5. Desire to reduce project risk from the start. 6. Requirement for effective communication and collaboration. 7. Utilization of a hybrid staffing approach to include key staff and a relevant SME pool.
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FLORIDA DEPARTMENT OF LAW ENFORCEMENT (FDLE IV&V)

Organization Name	Florida Department of Law Enforcement
POC Name	Erica Wolaver
Title	Senior Management Analyst Supervisor
Phone	850-410-8511
E-Mail	Erica.Wolaver@FDLE.state.fl.us
Prime or Sub	Prime
Originally Scheduled Completion Date and Budget	Completion Date: 10/2020 - 06/2025 Budget: \$674,046.00
Actual (or currently planned) Completion Date and Actual (or currently planned) Budget	Completion Date: 10/2020 - 06/2025 Budget: \$761,118.00
Contractor's Responsibilities	<p>SES was selected as the IV&V Contractor for the FL DLE projects to oversee three concurrent FDLE initiatives to include (1) Compliance with FBI requirement to convert Uniform Crime Reporting from summary data to incident-based data; achieve legislative mandate to provide criminal justice data to the public and to provide a Uniform Arrest Affidavit for all criminal justice agencies in the state (2) Compliance with FBI requirement to convert Uniform Crime Reporting from summary data to incident-based data (3) Adherence to legislative mandate to provide criminal justice data to the public.</p> <p>SES is contracted to deliver verification and validation services under an independent reporting relationship to FDLE to ensure objectivity. SES provides</p>

	<p>detailed, structured reports, including findings of deficiencies (when observed) and recommendations for their remediation to FDLE.</p> <p>Deliverables include a comprehensive Project Management Plan, an Initial Review Report, and Periodic (quarterly) Review Reports to the Criminal Justice Information Systems office. Monthly Management Presentations to the Executive Steering Committee and/ or the Project Steering Committee are also in the scope of work.</p> <p>The full scope of work entails oversight of 42 separate task items that cover project management; quality management; requirements management; system design; and unit, system integration, and acceptance testing.</p>
<p>Provide narrative descriptions to highlight the similarities between the Contractor's experience and this solicitation</p>	<p>The FDLE IV&V project is highly similar to the IV&V services requested by the State of Nebraska:</p> <ol style="list-style-type: none"> 1. Large, complex multi-year projects across various phases in the lifecycle 2. Includes technical, business, and management dimensions of the projects and organization. 3. Heavy emphasis on stakeholder management and organizational change. 4. Desire to reduce project risk from the start. 5. Requirement for effective communication and collaboration. 6. Utilization of a hybrid staffing approach to include key staff and a relevant SME pool.

Additionally, the following table outlines the total years we have provided services similar to those requested in Nebraska MMIS IV&V RFP.

SERVICE BEING REQUESTED	YEARS OF SERVICE PROVIDED
IV&V	20 years
Risk Management	20 years
Medicaid Management Information System	20 years

Table 1: Summary of Corporate Capabilities

SES has a wealth of long-term experience in providing our clients with IV&V services to implement an objective and independent assessment of products and processes throughout the lifecycle of a project. SES's IV&V approach has proven to facilitate early detection and correction of errors, enhance management insight into risks, and ensure compliance with project performance, schedule, and budget requirements.

SES has a breadth of experience providing IV&V services to State and Federal government agencies on projects of similar size and complexity, including the capabilities listed as vital to the success of the



State of Nebraska MMIS Modernization project. In addition to our CMMI for Development Version 2.0 Maturity Level 3 Certification (which provides assurance that our focus will help you to align with the best practices required by CMS), SES is able to bring our expertise to the State of Nebraska regarding the critical phases for CMS certification and “go-live” of your MMIS Modernized system. SES’s numerous MMIS projects have all resulted in successful certification by CMS.

SES prior IV&V experience is outlined in the following tables:

- Table 2: SES MMIS and Medicaid IV&V Engagements
- Table 3: SES Non- Medicaid and Healthcare IV&V Engagements

Recent SES MMIS and Medicaid IV&V Engagements:

PERIOD OF PERFORMANCE	CLIENT	PROJECT NAME
2018 - 2021	Alabama Medicaid Agency (AMA)	State of Alabama Medicaid Enterprise Systems (MES) AMMI and AMEE IV&V
2016 - 2023	Kansas Department of Health and Environment (KDHE)	Kansas Modular Medicaid System (KMMS) IV&V
2017 - 2019	Missouri Office of Administration - ITSD	Missouri MMIS enhancements IV&V
2011 - 2017	Texas Health and Human Services Commission (TX HHSC)	Texas Health and Human Services Commission Independent Verification and Validation (TX HHSC IV&V)
2005 - 2018	Alabama Medicaid Agency	Alabama Medicaid Agency staffing support (PMO, procurement, development)
2000 - 2005	State of Iowa	Iowa Medicaid Enterprise IV&V
2012 - 2017	Kansas Department of Health and Environment (KDHE) - Division of Health Care Finance (DHCF)	Kansas Eligibility and Enrollment System (KEES) Project IV&V
2013 - 2016	MN Health and Human Services (MN HHS) and MN Depart of Commerce	Minnesota Insurance Exchange (MNsure) and Eligibility and Enrollment System Modernization (ESM)/ Integrated Service Delivery System (ISDS) IV&V
2012 - 2014	UMAS HIX/IES	State of Massachusetts Health Insurance Exchange & Integrated Eligibility Services IV&V



2014 - 2015	New Mexico Health Insurance Exchange	New Mexico Health Insurance Exchange (NMHIX) IV&V
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Table 2: SES MMIS and Medicaid IV&V Engagements

Table 3 below demonstrates depth, breadth, and diversity of IV&V experience of SES providing IV&V and Organizational Assessment services to other projects for non- Medicaid and healthcare systems.

PERIOD OF PERFORMANCE	CLIENT	PROJECT NAME
2020 - Present	Florida Department of Law Enforcement (FDLE)	Florida Incident Based Reporting System Independent Verification and Validation
2019 - Current	State of Florida Department of Legal Affairs Office of Attorney General (OAG)	Florida IT Modernization Program Independent Verification and Validation (FL ITMP IV&V)
2015 - 2018	Minnesota Department of Public Safety’s Driver and Vehicle Services (DVS)	Minnesota License and Registration System (MNLARS) Audit
2015 - 2017	Texas Department of Motor Vehicles (TxDMV)	Texas Licensing, Administration, Consumer Affairs and Enforcement (LACE) Replacement IV&V
2017 - 2018	Texas Department of Motor Vehicles (TxDMV)	TxDMV Information Technology Service Division (ITSD) and Enterprise Project Management Office (EPMO) Organizational Assessment

Table 3: SES Non-Medicaid and Healthcare IV&V Engagements

I. SUMMARY OF CONTRACTOR’S PROPOSED PERSONNEL/MANAGEMENT APPROACH

Our solution begins with our Team.

The SES approach to staffing is distinguished by the *shared experience of the team*. Our proposed core team (highlighted in the table below) is comprised of long time SES employees who have worked together on many IV&V engagements for more than a decade. The result is a high level of synergy: Before the project begins, the team has already “formed, normed, and stormed”. They know how to *perform* as a cohesive unit; they each know their role and have in fact filled multiple IV&V roles on Teams in prior engagements.



In today’s contracting environment our level of synergy and efficiency is rare, and provides significant benefits to the MMIS oversight including:

- Reduced risk and cost to accomplish all IV&V requirements
- Deep understanding, standardization, and repeatability of SES IV&V methodology
- Team cohesion that comes only from shared expectations of project engagement
- A proven Team track record of delivering successful IV&V work

As described in detail below within Section X: Organizational Staffing, our key staff has been selected their considerable experience in both IV&V and SES methodology. The SMEs to be utilized on the project enables us to address the specific areas of each project during the lifecycle. Dual Project Managers will have overlapping focus with Brittany McNair serving as the lead for the key staff and Norm Mandy functioning as lead for the SME pool as shown in our Organizational Chart.

The staffing plans created for the first quarter of the project illustrate how each resource will be engaged with the project from contract start. Please see Section X: Organizational Training for the project specific staffing plans.

SES understands that staffing changes will only be implemented upon approval from the State.

The specific details and credentials for each of our team members is captured below in their individual resumes.

Jim Moudry, CSQE – IV&V Lead
Brittany McNair – Project Manager
Norm Mandy, PMP, SSBB – Deputy Project Manager
Raj Sharma, Ph.D., CSM, CSPO, SSBB – Senior Technical Analyst
Naquisha Smith, CISSP, Security+, CHPS – Sr. Business & Testing Analyst
Michelle Shores – Medicaid/Eligibility SME
Cyrille Dabila, MCSE – Cloud/Technical SME
Nina Terhaar – Sr. IT Architect/Certification SME
Yolanda Fears – MITA SME
Michael Irons – Infrastructure SME

Table 4: SES Staff and Project Role



JIM MOUDRY, CERTIFIED SYSTEMS QUALITY ENGINEER (CSQE)		
IV&V LEAD		
CAREER SUMMARY	<p>Over 35 years combined experience in Process Engineering, Project Management, Independent Verification & Validation (IV&V), Quality Management, Test and Evaluation Management, Systems Integration, Security Management, and Training Development.</p> <p>Jim has led the following IV&V engagements: Kansas Modular Medicaid System (KMMS) IV&V, Kansas Eligibility Enforcement System (KEES) IV&V and FL Office of Attorney General (OAG) Information Technology Modernization Project (ITMP) IV&V.</p> <p>Extensive IV&V Project Management experience (Medicaid Management Information System, Health Insurance Exchange, Medicaid programs, Child Support Enforcement Systems, etc.) within various software development environments.</p> <p>Experience with assessing governance structures and providing IV&V briefings to State Legislative Committee and State Executives Management/Stakeholders.</p>	
SES EMPLOYMENT	23 Years	
CURRENT ASSIGNMENT(S)	<ul style="list-style-type: none"> Florida Office of the Attorney General (OAG) Information Technology Modernization Program (ITMP) as IV&V Project Manager and Sr. IV&V Analyst Kansas Department of Health and Environment Modular Medicaid System as IV&V Project Manager and Sr. IV&V Analyst Software Engineering Services Director of Security and Compliance 	
DETAILED WORK EXPERIENCE		
CLIENT/ ORGANIZATION	Software Engineering Services	
PROJECT	Software Engineering Services	DATES 1998 - Present
ROLE	Director of Security and Compliance, Facility Security Officer, Contracts Manager, Manager of Team Management Office, Manager of Project Management Office, CMM and CMMI Lead Appraiser, Process Improvement Engineer, Project Manager	



TASKS / RESPONSIBILITIES	As a Certified CMMI Lead Appraiser for Development and Services, has led or participated in over 35 appraisals over the last 14 years for both defense contractors, non-defense contractors, and state government agencies. State government organizations include the Alabama Medicaid Agency and the Iowa Department of Human Services.		
CLIENT / ORGANIZATION	Florida Office of the Attorney General (OAG)		
PROJECT	Information Technology Modernization Program (ITMP) Independent Verification & Validation (IV&V)	DATES	2019 - Present
ROLE	Project Manager and Sr. IV&V Analyst		
CLIENT / ORGANIZATION	Kansas Department of Health and Environment (KDHE)		
PROJECT	KS Modular Medicaid System (KMMS) IV&V	DATES	2016 - Present
ROLE	Project Manager and Sr. IV&V Analyst		
CLIENT / ORGANIZATION	Minnesota Department of Human Services (DHS)		
PROJECT	Health Information Exchange (MNsure) and Enterprise Systems Modernization (ESM) development IV&V projects	DATES	2013 - 2018
ROLE	Project Manager and Sr. IV&V Analyst		
CLIENT / ORGANIZATION	State of Kansas Department of Health & Environment (KDHE) and Department of Children & Families (DCF)		
PROJECT	Eligibility Enforcement System (KEES) development IV&V project	DATES	2012 - 2017
ROLE	Project Manager and Sr. IV&V Analyst for all three projects		
TASKS / RESPONSIBILITIES FOR FL, KS, AND MN IV&V PROJECTS	<ul style="list-style-type: none"> Led SES team in performance of scheduled IV&V services, including analysis and reporting oversight of IV&V Security and Privacy. Assisted the client in meeting privacy and security compliance requirements (compliance controls) imposed by governmental bodies, regulators, and industry mandates such as, but not limited to, the Health Insurance Portability and Accountability Act (HIPAA), HITECH Act, NIST SP800-53, and MARS-e, for the security and privacy of personally identifiable information, personal health information and any state laws which may exist concerning the privacy and/or security of information. 		

	<ul style="list-style-type: none"> Performed deliverable reviews and product evaluations on documents such as Security Policies, System Security Plan (SSP), Plan of Action Milestones (POA&M's), Security Scans, and Continuity of Operations Plan (COOP) and made recommendations on security policies and procedures for ensuring that the system is secure, and the privacy of client data is maintained. Reviewed and provided inputs on KMMS certification artifacts and MECT checklists and on new Streamlined Modular Certification intake forms and evidence files. Supported certification reviews and demonstrations. 		
CLIENT /	State of Alabama Medicaid Agency		
PROJECT	Alabama Medicaid Eligibility and Enrollment (AMEE) and Alabama Modular Medicaid Implementation (AMMI) agile development IV&V Projects	DATES	2018 - 2021
ROLE	Senior IV&V Analyst		
CLIENT / ORGANIZATION	State of TX Department of Health and Human Services (DHHS)		
PROJECT	Medicaid Management Information System development IV&V Project	DATES	2012 - 2017
CLIENT / ORGANIZATION	Iowa Department of Human Services (DHS)		
PROJECT	Individualized Services Information System (ISIS) Development IV&V and Acceptance Test	DATES	2004
ROLE	Senior IV&V Analyst		
TASKS / RESPONSIBILITIES FOR AL, TX, AND IA IV&V PROJECTS	<ul style="list-style-type: none"> Assisted the client in meeting privacy and security compliance requirements (compliance controls) imposed by governmental bodies, regulators, and industry mandates such as, but not limited to, the Health Insurance Portability and Accountability Act (HIPAA), HITECH Act, NIST SP800-53, and MARS-e, for the security and privacy of personally identifiable information, personal health information and any state laws which may exist concerning the privacy and/or security of information. 		
CLIENT / ORGANIZATION	Alabama Medicaid Agency		

PROJECT	HIPAA Privacy and Security Program Implementation	DATES	2001-2003
ROLE	Privacy and Security Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Assisted the client in meeting privacy and security compliance requirements (compliance controls) imposed by governmental bodies, regulators, and industry mandates such as, but not limited to, the Health Insurance Portability and Accountability Act (HIPAA), HITECH Act, NIST SP800-53, and MARS-e, for the security and privacy of personally identifiable information, personal health information and any state laws which may exist concerning the privacy and/or security of information. Developed Privacy and Security Policies, Procedures, and training materials. Conducted HIPAA Privacy and Security Training. 		
EDUCATION/TRAINING			
<ul style="list-style-type: none"> Master of Science, Aeronautics and Astronautics, Purdue University – June 1974 Bachelor of Science, Aeronautical Engineering, USAF Academy – June 1973 American Society for Quality: Certified Mgr. of Quality and Org Excellence (CMQ/OE) and Cert. Software Quality Engineer (CSQE). CMMI Institute Certified Standard CMMI Appraisal Methodology for PI (SCAMPI) and CMMI V2.0 Lead Appraiser (Development and Services). 			
REFERENCES			
<p>Glenn Yancey; 785-296-5643; gyancey@kdhe.ks.gov Greg Poehling; 651-431-4552 (Work); Gregory.poehling@state.mn.us Jennifer Dietrich; 210-522-5369; jennifer.dietrich@swri.org</p>			



BRITTANY MCNAIR, PMP, CBAP
PROJECT MANAGER

CAREER SUMMARY

13 years in state government IV&V and auditing across multiple sectors including transportation, driver services, and health and human services

10 years of involvement with corporate infrastructure to support IV&V projects through well-established PMO and Process Management Group

Extensive experience in assessment and compliance of IV&V deliverables and implementation

IV&V experience across industries to include HIX/HIE, MMIS, Child Support Enforcement, Vehicle license and registration

Oversight of management and functional oversight areas

Quality assurance and control of IV&V deliverables and reports for alignment with industry best practices and internal processes

SES EMPLOYMENT 13 Years

CURRENT ASSIGNMENTS State Government Solutions Group Director

DETAILED WORK EXPERIENCE

CLIENT / ORGANIZATION	State IV&V Projects /Software Engineering Services	DATES	2016 – Present
PROJECTS	State of Florida Dept of Law Enforcement IV&V – FL DLE IV&V State of Florida OAG IT Modernization IV&V – FL OAG IV&V State of Alabama Eligibility & Enrollment IV&V – AL MMIS IV&V State of Missouri MMIS IV&V State of Kansas Medicare/Medicaid Information System IV&V		
ROLE	Program Director		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Quality assurance of IV&V deliverables and reports to confirm alignment with SES methodology and processes • Leadership of enhancing SES IV&V methodology via modernized internal tools and resources • Liaison to Project Manager and SES corporate infrastructure to ensure adequate support of project objectives • Key involvement with SES Project Management Office, Quality Management Office and Process Management Group 		



CLIENT / ORGANIZATION	State of Minnesota, Dept of Public Safety/Software Engineering Services		
PROJECT	Licensing and Registration System (MNLARS)	DATES	2015 – 2018
ROLE	IV&V Analyst/ QA Rep		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Provided oversight of designated components • In depth assessment of project’s adherence to scaled agile framework (SAFe) methodology • Quality review of IV&V deliverables and reports to confirm alignment with SES methodology and processes 		
CLIENT / ORGANIZATION	State of Texas, Software Engineering Services		
PROJECT	Texas Dept of Motor Vehicles (TxDMV), Licensing, Administration, Consumer Affairs and Enforcement (LACE) IV&V	DATES	2015 – 2017
ROLE	Quality Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Provided in depth quality assurance of project reports and deliverables Confirmed that IV&V team aligned with SES oversight methodology and processes 		
CLIENT / ORGANIZATION	State of Minnesota DHS/ Software Engineering Services		
PROJECT	MN HIX – EEX IV&V Projects	DATES	2013 - 2018
ROLE	IV&V Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Provided oversight of designated IV&V oversight areas to include Quality Management, Training, Implementation, and Requirements Management • IV&V methodology included consistent alignment of findings and recommendations to industry best practices (ITIL, PMBOK, ISO, IEEE, etc.) • Compilation of quarterly deliverables to highlight project risks and issues, provide findings and recommendations, and assess implementation readiness • Assisted with formal attestations required by federal stakeholders for project gate checks 		
CLIENT / ORGANIZATION	State of New Mexico/ Software Engineering Services	DATES	2013 - 2015
PROJECTS	NM HIX IV&V Project		



ROLE	IV&V Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Adhered to SES IV&V methodology of oversight to include meeting attendance, interviews with project staff and detailed deliverable evaluation Compiled findings and observations for inclusion in Monthly and Quarterly deliverable reports to client and federal stakeholders Observed project testing and training to document IV&V process evaluations Provided QA of IV&V deliverables and reports 		
CLIENT / ORGANIZATION	State of Massachusetts, University of Massachusetts Medical School/Software Engineering Services		
PROJECT	Health Insurance Exchange and Integrated Eligibility System (HIX/IES) IV&V Services	DATES	2012 - 2014
ROLE	UAT Tester		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Functioned as UAT Tester for State of Massachusetts Health Insurance Exchange and Integrated Eligibility System (HIX/IES). Agile development User testing. Generated daily testing reports for distribution to the client stakeholders Creation and execution of test cases Collaboration with numerous subcontractors, test teams and client staff 		
CLIENT / ORGANIZATION	State of Florida, Dept of Revenue/Software Engineering Services		
PROJECT	Child Support Enforcement Automated Management System (CAMS) Phase II IV&V	DATES	2008 - 2012
PROJECT DESCRIPTION	<ul style="list-style-type: none"> SES was awarded the IV&V contract with direct reporting to the Office of Child Support Enforcement (OSCE) and Dept of Revenue Commissioner. Scope was all phases of the agile development approach through Federal certification. 		
ROLE	IV&V Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Performed QC activities on IV&V deliverables. Performed Corporate QA & QC activities for SES IV&V processes. Compiled IV&V Implementation and Operations oversight checklists. Performed product and process evaluations of IV&V project deliverables including IV&V Quarterly Reports. Compiled Task Accomplishments Plan and Monthly Financial Reports. 		

EDUCATION/CERTIFICATIONS/TRAINING

BS, Business Administration & Economics, University of Missouri

BA, International Studies, University of Missouri

Project Management Professional (PMP), Project Management Institute

Certified Business Analyst Professional (CBAP), International Institute of Business Analysis

REFERENCES

Dawn Olson; 651-297-2126; dawn.m.olson@state.mn.us

Joyce Simon; 651-201-7769; Joyce.Simon@state.mn.us

Steve Updike; 850-410-3247; updikes@flcourts.org

NORMAN MANDY, MS, PMP, SSBB

PROJECT MANAGER

CAREER SUMMARY	<p>Brings over 35 years of experience in program and project management, system analysis and development, IV&V, Quality Management, testing, and process engineering.</p> <p>15 years in state government IV&V and auditing across multiple sectors including transportation driver services and health and human services.</p> <ul style="list-style-type: none"> • Extensive experience in assessment and compliance of IV&V deliverables and implementation • Large, complex IT system design, development, test, and implementation • Program Management; technical, and testing oversight • Agile, hybrid, and waterfall lifecycles • Oversight of HIX, CMS compliance, MEET, MITA, and MMIS checklists; child support enforcement, vehicle license and registration 		
SES EMPLOYMENT	17 Years		
CURRENT ASSIGNMENTS	<ul style="list-style-type: none"> • Project Manager: State of Florida Dept of Law Enforcement IV&V • Sr. IV&V Analyst: Florida Office of Attorney General ITMP IV&V Project 		
DETAILED WORK EXPERIENCE			
CLIENT / ORGANIZATION	Florida Department of Law Enforcement (FDLE)		
PROJECT	Florida Incident Based Reporting System, Criminal Justice Data Transparency, Uniform Arrest Affidavit IV&V	DATES	2020 - Present
ROLE	IV&V Project Manager		

TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Conducted detailed analysis of client artifacts and data to provide actionable feedback for potential risks and recommendations. • Drafted, and implemented project schedule to align with client milestones. • Customized oversight methodology and tools to meet FDLE objectives. • Collected oversight data using different tools and techniques such as reviews, examination, and interviews. 		
CLIENT / ORGANIZATION	State of Alabama Medicaid Agency		
PROJECT	AL Eligibility and Enrollment IV&V AL MMIS IV&V	DATES	2018 - 2021
ROLE	Program Manager		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Program governance and portfolio management. • Represent SES at executive stakeholder meetings and CMS reviews. • Oversee transition of state IT system from vendor to in-house operations and maintenance. 		
CLIENT / ORGANIZATION	State of Missouri HealthNet Division / Software Engineering Services		
PROJECT	MO MMIS IV&V	DATES	2017 – 2019
ROLE	Project Manager		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Oversaw modernizing the MMIS to meet federal mandates and system changes to extend the life of the system. • Assessed and verified deliverable completeness, timeliness, and quality. 		
CLIENT / ORGANIZATION	State of Minnesota, Dept of Public Safety		
PROJECT	Licensing and Registration System (MNLARS)	DATES	2015 – 2018
ROLE	Audit Project Manager		

TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Provided lead analyst oversight for project management including schedule, scope, risk, quality, and cost; agile requirements, build, development, and testing; governance, project planning; monitoring and control; Evaluated technical modular program increments. • Oversaw various internal transitions (use of SAFe methodology), vendor development, in house development. • Assessed operational readiness on multiple levels, per sprint and release as well as gathering metrics as system rollout was underway. 		
CLIENT / ORGANIZATION	State of Texas		
PROJECT	Texas Dept of Motor Vehicles (TxDMV), Licensing, Administration, Consumer Affairs and Enforcement (LACE) IV&V	DATES	2015 – 2017
ROLE	Sr. IV&V Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Analyze staffing levels across all teams, current skill sets, salaries, strengths, weaknesses, threats, and opportunities and overall preparedness. • Report-out to meet the current and future demands of the TxDMV. • Identify potential efficiency gains and cost reductions because of possible organizational restructuring. • Make recommendations on organizational process realignment to obtain maximum efficiency. 		
CLIENT / ORGANIZATION	Software Engineering Services		
ROLE	Senior IV&V Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Senior IV&V Consultant for development, maintenance, and implementation of CMS, CMMI and IEEE compliant IV&V processes. • Expert in planning, risk, configuration, communication, measurement & analysis, testing, test plans, piloting, and implementation. 		
CLIENT / ORGANIZATION	Various State Agencies / Software Engineering Services	DATES	2012 - 2018
PROJECT(S)	<ul style="list-style-type: none"> • State of Kansas Eligibility and Enrollment System • State of New Mexico Health Insurance Exchange • State of Kansas Medicare/Medicaid Information System • State of Texas Licensing/Consumer Affairs/Enforcement (DMV) 		

ROLE	Project Lead / Lead Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Projects all followed the SES IV&V methodology for evaluating process implementation and effectiveness in a diverse array of governance structures; assessing gaps and risks; and providing specific recommendations to comply with industry best practices (PMBOK, CMMI, IEEE, CMS XLC, and State-specific lifecycles). The first three projects are/were Agile development environments. <ul style="list-style-type: none"> Kansas KEES program – Senior IV&V Auditor (2012 - 2013) New Mexico NMHIX project – Full-time Senior IV&V Auditor (2014) Kansas MMIS project – Senior IV&V Auditor (2016 - 2018) Texas LACE Replacement – Lead IV&V Consultant (2015 - 2017) 		
CLIENT / ORGANIZATION	State of Massachusetts, University of Massachusetts Medical School		
PROJECT	Health Insurance Exchange and Integrated Eligibility System (HIX/IES) IV&V Services	DATES	2012 - 2014
ROLE	Project Lead / IV&V Test Lead		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Full time, 18-month effort as Project Lead for State of Massachusetts Health Insurance Exchange and Integrated Eligibility System (HIX/IES). Agile development User testing. 		
CLIENT / ORGANIZATION	State of Florida, Dept of Revenue		
PROJECT	Child Support Enforcement Automated Management System (CAMS) Phase II IV&V	DATES	2008 - 2012
ROLE	Senior IV&V Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Four years' experience as senior analyst on multi-year Child Support Enforcement IV&V project providing federal oversight of \$160M State of Florida multi-year contract. Considerable operational readiness involvement with project Cutover and Go-Live, assessing the project's transition post deployment. Emphasis on PMBOK and CMMI-based audit to evaluate compliance with best practices, gap analysis, and improvement recommendations. 		

EDUCATION/CERTIFICATIONS/TRAINING

- MS, Computer Information Systems, University of Phoenix
- MS, Atmospheric Science, Colorado State University
- Certified Project Management Professional (PMP), Project Management Institute Six Sigma Black Belt (SSBB) & Lean Six Sigma, Villanova University
- Army Certified Project Manager, US Army Intelligence Center and Ft. Huachuca Certified Automated Information Systems, National Defense University

REFERENCES

Dawn Olson; 651-297-2126; dawn.m.olson@state.mn.us

Joyce Simon; 651-201-7769; Joyce.Simon@state.mn.us

Shannon Crane; 334-353-5482; Shannon.Crane@medicaid.alabama.gov



RAJ SHARMA, PH.D., CSM, CSPO, SSBB, ITIL-F

SENIOR TECHNICAL ANALYST

CAREER SUMMARY	<p>Certified Scrum Master and Certified Scrum Product Owner with wealth of knowledge in Agile methodology.</p> <p>Nearly 20 years involved in IT solutions (SDLC) with an extensive background in Quality Assurance (QA), Quality Control (QC), testing (Unit, System, Integration, Regression, Performance, User Acceptance, and End to End).</p> <p>Possesses 9 years of IV&V experience across various agencies and industries to include a variety of Agile and Hybrid lifecycle methodologies.</p> <p>Expertise in process improvement with 14 years as Lead CMMI Consultant and 3 years as Standard <i>CMMI</i> Appraisal Method for Process Improvement (<i>SCAMPI</i>) Lead Appraiser.</p>		
CORE SKILLS	<ul style="list-style-type: none"> • IV&V assessment, auditing, and compliance • Disaster Recovery planning, testing and execution. • Security Risk assessments • Organizational assessment - Performance, Processes, Infrastructure, and resources • Quality Assurance, Agile Software Development Methodologies (Scrum, Lean), CMMI V2.0, ITIL V3.0, Six Sigma, NIST Standards (Security & Risk management), and Project Management. 		
SES EMPLOYMENT	18 Years		
CURRENT ASSIGNMENT(S)	<ul style="list-style-type: none"> • Florida OAG ITMP IV&V Project as IV&V Technical Lead • Kansas Modular Medicaid System (KMMS) IV&V Project with Kansas Department of Health and Environment (KDHE) as the CMS Certification SME 		
DETAILED WORK EXPERIENCE			
CLIENT / ORGANIZATION	State of Florida Office of Attorney General / Department of Legal Affairs		
PROJECT	FL OAG IT Modernization Project (ITMP) IV&V	DATES	2019 - Present
PROJECT DESCRIPTION	<p>SES was selected as the IV&V Contractor for the FL OAG ITMP. ITMP is an enterprise-wide effort to synchronize numerous legacy programs into a modernized platform. IV&V oversight conducted via deliverable reviews, meeting attendance and interviews with project staff.</p>		
ROLE	Sr. IV&V Analyst		



TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Perform IV&V activities and develops and presents IV&V Reports to federal and state partners. • Review and provide feedback on the process, methodology, status, of the ITMP project. 		
CLIENT / ORGANIZATION	State of Kansas/Software Engineering Services		
PROJECT	Kansas Modular Medicaid System (KMMS) IV&V with KS DOH	DATES	2016 - Present
PROJECT DESCRIPTION	<ul style="list-style-type: none"> • KDHE is implementing a complete MMIS upgrade (\$215M) to meet Federal modularization technology architectural mandates. • KDHE contracted with SES to provide IV&V services including transition, project management, technical, and operations oversight areas. 		
ROLE	Sr. IV&V Technical Lead, CMS Certification SME		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Perform IV&V activities and develops and presents IV&V Reports to federal and state partners. • Review and provide feedback on the process, methodology, status, and releases on the KMMS agile methodology being followed to develop each release. 		
CLIENT / ORGANIZATION	State of Alabama / Software Engineering Services		
PROJECT	Alabama MMIS IV&V with AL Medicaid Agency	DATES	2018 - 2021
ROLE	Sr. IV&V Analyst		
TASKS/ RESPONSIBILITIES	<ul style="list-style-type: none"> • Provided oversight in different aspects of project lifecycle such as- risk management, technical (design, build, architecture, testing), release management • SME for CMS Certification using both MECT and SMC. 		
CLIENT / ORGANIZATION	Texas Department of Motor Vehicles (TxDMV)		
PROJECT	Texas Department of Motor Vehicles Information Technology Service Division (ITSD) and Enterprise Project Management Office (EPMO)- Organizational Assessment	DATES	2017 - 2018

PROJECT DESCRIPTION	<ul style="list-style-type: none"> • Conduct a study of the current state of the Information Technology Services Division and the Enterprise Project Management Office and identify trends, issues, and topics that may affect the future TxDMV mission and vision. • Conduct a best practices analysis of the Information Technology Services Division and the Enterprise Project Management Office operations and structures, assessing the relevancy to the TxDMV and the implications for implementation and adoption. • Perform an objective review and analysis of management practices, organizational structure, policies and procedures, and other variables impacting services delivery. 		
ROLE	Project Manager, Assessment Lead and Technical SME		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Drafted, reviewed, and implemented assessment interview schedule to capture assessment data. • Customized assessment methodology and tools to meet TxDMV assessment including interview scripts. • Collected assessment data using different tools and techniques such as reviews, examination, and interviews. 		
CLIENT / ORGANIZATION	State of Minnesota/Software Engineering Services	DATES	2013 – 2018
PROJECT	MN Health Insurance Exchange (MN HIX) and Eligibility and Enrollment (MN EEX) IV&V Project (MNsured/METS and ISDS)		
PROJECT DESCRIPTION	<ul style="list-style-type: none"> • SES was selected as the IV&V Contractor for the MN HIX-EEX project with the MN Department of Commerce and MN Department of Human Services (DHS). • State of Minnesota was implementing State-based exchange for her citizens - MNsure and modernizing MMIS legacy systems under Integrated Service Delivery system (ISDS) effort. 		
ROLE	Sr. IV&V Technical Lead		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Provided extensive oversight for all Project Management project plans, change requests, change control, and budget-schedule performance in an Agile development arena. • Developed and presented findings to CMS, and State Executive Management. 		
CLIENT / ORGANIZATION	State of Kansas/Software Engineering Services	DATES	2012 - 2017
PROJECT	Kansas Eligibility Enforcement system (KEES) with Kansas DOH and Environment (KDHE) and Kansas Division of Health Care Finance (KDHC)		



PROJECT DESCRIPTION	Kansas Eligibility & Enforcement System (KEES) was a total redesign, modernization, development, and implementation of an eligibility system		
ROLE	Sr. IV&V Technical Lead		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Provided extensive oversight for all 12 IV&V Oversight areas via meeting attendance, product evaluations, process evaluations, and interviews with project staff. 		
CLIENT / ORGANIZATION	State of New Mexico/Software Engineering Services	DATES	2014 - 2015
PROJECT	New Mexico Health Insurance Exchange (NMHIX)IV&V		
PROJECT DESCRIPTION	<ul style="list-style-type: none"> • NM HIX was the implementation of the CMS Federal Insurance Marketplace in compliance with ACA regulations. • SES was awarded the IV&V contract for project management and technical oversight and assessment on the NMHIX and its technology solutions partner. SES monitored compliance with CMS milestones and gate reviews. 		
ROLE	IV&V Sr. Technical Lead		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Assisted the Department in presenting progress, concerns, and recommendations to CMS. Performed oversight of NMHIX Security, Requirements Management, Development Environment, Software Development, System and Acceptance Testing, Data Management and Operating Environment. 		
EDUCATION/TRAINING			
<ul style="list-style-type: none"> • Ph.D., University of Baroda • M.S., Computer Information Systems, Bellevue University • Certified Scrum Product Owner (CSPO), Certified Scrum Master (CSM) Six Sigma Green Belt/Black Belt Certification • CMMI Institute Certified Standards CMMI Appraisal Method for Process Improvement (SCAMPI) Lead Appraiser for CMMI V1.3 and V2.0, ITIL- Foundation (ITIL-F) 			
REFERENCES			
<p>Glenn Yancey; 785-296-5643; gyancey@kdhe.ks.gov Greg Poehling; 651-431-4552 (Work); Gregory.poehling@state.mn.us Julie Federhofer; 402-544-2878;juliefederhofer@up.com</p>			



NAQUISHA SMITH, CISSP, SECURITY+			
SENIOR BUSINESS & TESTING ANALYST			
CAREER SUMMARY	Brings more than 15 years of experience in SDLC project management and IT solutions. Supported IV&V engagements for the last 8 years. Specialized in cybersecurity, testing and requirements management. 5+ years' experience in the IV&V Security Analyst role.		
CORE SKILLS	<ul style="list-style-type: none"> ● QA and Testing ● Application SDLC ● Federal Compliance ● Process Improvement ● Security auditing and analysis ● Project Management ● Requirements Analysis 		
SES EMPLOYMENT	8 Years		
CURRENT ASSIGNMENT(S)	<ul style="list-style-type: none"> ● Florida Dept of Law Enforcement IV&V Project as Sr. IV&V Analyst ● Kansas Modular Medicaid System (KMMS) IV&V with KS DOH Environment as an Sr. IV&V Analyst 		
DETAILED WORK EXPERIENCE			
CLIENT / ORGANIZATION	State of Florida Dept of Law Enforcement /Software Engineering Services		
PROJECT	Florida Incident Based Reporting System, Criminal Justice Data Transparency, Uniform Arrest Affidavit IV&V	DATES	2020 - Present
PROJECT DESCRIPTION	SES was selected as the IV&V Contractor for the FL DLE projects to oversee FDLE initiatives to comply with FBI requirement to convert Uniform Crime Reporting from summary data to incident- based data; achieve legislative mandate to provide criminal justice data to the public and to provide a Uniform Arrest Affidavit for all criminal justice agencies in the state.		
ROLE	Sr. IV&V Analyst		



TASKS/ RESPONSIBILITIES	<ul style="list-style-type: none"> ● Performs IV&V activities and develops and presents IV&V Reports to federal and state partners. ● Provide detailed assessment of IV&V oversight areas to include requirements management, application security, and systems & acceptance testing. ● Review and provide feedback on the process, methodology, status, of the FIBRS, CJDT, and UAA projects. 		
CLIENT / ORGANIZATION	State of Alabama/Software Engineering Services		
PROJECT	Alabama AMMI & AMEE IV&V	DATES	2018 - 2021
PROJECT DESCRIPTION	AMA contracted with SES to provide management and technical oversight IV&V services for the KMMS. Review and assessment of MITA standards in support IV&V analysis		
ROLE	Sr. IV&V Security/Test Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> ● Provides IV&V monthly status of AL AMMI & AMEE Projects. ● Performs oversight of AL AMMI & AMEE Disaster Recovery, Requirements Management, Application Security and Privacy and System and Acceptance Testing. ● Performs product evaluations of project deliverables and attends project meetings to obtain project status and respond to checklists questions for project health. ● Generates detailed recommendations and findings for project improvement. 		
CLIENT / ORGANIZATION	State of Missouri/Software Engineering Services		
PROJECT	Missouri MME MMIS IV&V	DATES	2017 - 2019
PROJECT DESCRIPTION	The Missouri Medicaid Enterprise (MME), operated by the MO HealthNet Division is currently modernizing the MMIS to meet federal mandates and system changes to extend the life of the system.		
ROLE	Sr. IV&V Business/Security Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> ● Provided IV&V monthly status of AL MMIS Project. ● Performed product evaluations of project deliverables and attends project meetings to obtain project status and respond to checklists questions for project health. 		
CLIENT / ORGANIZATION	State of Kansas		



PROJECT	Kansas Modular Medicaid System (KMMS) IV&V with KS DOH Environment	DATES	2016 - Present
PROJECT DESCRIPTION	KDHE contracted with SES to provide management and technical oversight IV&V services for the KMMS (\$215M) to meet Federal modularization technology architectural mandates.		
ROLE	IV&V Senior Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Performs oversight of KS MMIS Requirements Management, Software Development, Application Security and Privacy and System and Acceptance Testing. 		
CLIENT / ORGANIZATION	State of Minnesota Department of Public Safety		
PROJECT	State of Minnesota License and Registration System (MNLARS)	DATES	2015 - 2018
PROJECT DESCRIPTION	SES was brought in to provide oversight for the replacement of the MNLARS Licensing and Registration System.		
ROLE	Sr. Technical Lead Auditor		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Assessed project transition to SAFe methodology and onboarding of various vendors (development, quality, testing). Attended rollout, go-live and post operational activities for IV&V reporting. Provided quarterly data review and annual audit of the in-house Agile development. Performs evaluation of MNLARS project artifacts. Generated detailed recommendations and findings for project improvement. 		
CLIENT / ORGANIZATION	State of Texas		
PROJECT	State of Texas, TxDMV LACE Replacement System	DATES	2015 - 2017
PROJECT DESCRIPTION	SES was contracted to provide IV&V oversight for the Licensing, Administration, Consumer Affairs and Enforcement (LACE) system replacement/upgrade project effort. SES scope included review and technical compliance with key DDI requirements, design, and implementation products.		
ROLE	IV&V Sr. Software Test/Security Analysts		



TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Performed oversight of TxDMV Replacement System Requirements Management, DDI, Software Development, Application Security and System and Acceptance Testing. 		
CLIENT / ORGANIZATION	State of Minnesota Department of Human Services		
PROJECT	MN Health Insurance Exchange (MN HIX) and Eligibility and Enrollment (MN EEX) IV&V Project (MNsured/METS and ISDS)	DATES	2013 - 2018
PROJECT DESCRIPTION	SES was selected as the IV&V Contractor for the MN HIX-EEX project with the MN Department of Commerce and MN Department of Human Services (DHS).		
ROLE	IV&V Sr. Technical Lead Analyst (Security & Requirements)		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Performed oversight analysis of MN HIX-EEX Agile development project in the areas of Requirements Management, Software Development, Security and Privacy. Draft findings and recommendations associated with project releases, rollout, go-live and post operations. 		
CLIENT / ORGANIZATION	State of New Mexico/Software Engineering Services		
PROJECT	New Mexico Health Insurance Exchange (NM HIX)	DATES	2014 - 2015
PROJECT DESCRIPTION	NM HIX was the implementation of the CMS Federal Insurance Marketplace in compliance with ACA regulations. SES was awarded the IV&V contract for project management and technical oversight and assessment on the NMHIX and its technology solutions partner.		
ROLE	IV&V Sr. Technical Lead Analyst		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Performed oversight analysis and reporting to Centers for Medicare and Medicaid services (CMS) and State of New Mexico in all project management processes, including requirements management, software development, system and acceptance testing and operating environment. 		
CLIENT / ORGANIZATION	State of Massachusetts/Software Engineering Services		



PROJECT	Massachusetts Health Insurance Exchange and Integrated Eligibility System (HIX/IES)	DATES	2013 - 2014
PROJECT DESCRIPTION	SES' focus was source code review, integration and system test products, conduct of UAT, and completion of CMS directed attestation activities.		
ROLE	Lead Test Analyst/Software Engineer		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Assigned to State of Massachusetts Health Insurance Exchange and Integrated Eligibility System (HIX/IES). Provided User Acceptance Testing oversight for State of Massachusetts HIX/HIE Medicaid implementation project. 		
EDUCATION/TRAINING			
<ul style="list-style-type: none"> M.S., Project Management, Keller Graduate School of Management B.S., Computer Science, Jackson State University Certified in Healthcare Privacy and Security (CHPS) certification, 2017 CompTIA Security+ ce, 2016 Introduction to CMMI for Services; Introduction to CMMI for Development Certified Information Systems Security Professional (CISSP), 2019 			
REFERENCES			
<p>Dawn Olson; 651-297-2126; dawn.m.olson@state.mn.us Joyce Simon; 651-201-7769; Joyce.Simon@state.mn.us Greg Poehling; 651-431-4552; Gregory.poehling@state.mn.us</p>			



KATHY HOGLUND			
ENTERPRISE ARCHITECT			
CAREER SUMMARY	<p>Brings over 20 years of experience in system analysis, business analysis, system architecture, system development and maintenance, QA, testing. Specialized in data management with over 20 years in data analytics and reporting: data warehouse hardware and software administration, data model design and maintenance, data extract and loads, Business Intelligence Tools.</p> <p>Spent over 10 years in providing or responding to: enterprise architecture reviews, federal audits, IV&V reviews.</p> <p>Expertise in DDI (Design development and implementation) of Medicaid Enterprise Systems (MES) and Cash and Food Support Systems. Modular development</p> <p>Enterprise Architecture, DDI, and administration of Enterprise Data Warehouses (EDW) and Enterprise Data Analytics and Reporting tools. Modular development</p> <ul style="list-style-type: none"> • Analysis and design of data exchanges and interfaces, including system to system interfaces. • Technical integrity and validation of all DDI activities and products. Reviews based on SDLC Industry standards 		
SES EMPLOYMENT	2 years		
CURRENT ASSIGNMENT (S)	IV&V Analyst/System Architect for FDLE IV&V project		
DETAILED WORK EXPERIENCE			
CLIENT/ ORGANIZATION	Florida Department of Law Enforcement		
PROJECT	Florida Incident Based Reporting System, Criminal Justice Data Transparency, Uniform Arrest Affidavit IV&V	DATES	2020 - Present
PROJECT DESCRIPTION	SES was selected as the IV&V Contractor for the FL DLE projects to oversee FDLE initiatives to comply with FBI requirement to convert Uniform Crime Reporting from summary data to incident- based data; achieve legislative mandate to provide criminal justice data to the public and to provide a Uniform Arrest Affidavit for all criminal justice agencies in the state.		
ROLE	IV&V Analyst/System Architect		



TASKS/ RESPONSIBILITIES	<ul style="list-style-type: none"> Analyzes project artifacts and data to evaluate technical oversight areas to include software development, interface development, testing and cloud design. Review and provide feedback on the process, methodology, status, of the FIBRS, CJDT and UAA projects. Liaison between technical and management staff to synthesize data for reporting to client and stakeholders 		
CLIENT /ORGANIZATION	State of Alabama Medicaid Agency / FL Office of Attorney General		
PROJECT	AL MMIS and Eligibility & Enrollment IV&V / FL Office of Attorney General IT Modernization	DATES	2018 - 2021
PROJECT DESCRIPTION	SES was selected as the IV&V Contractor for the AL MMIS and E&E project with the Alabama Medicaid Department. SES was selected as the IV&V vendor for FL OAG IT Modernization Project.		
ROLE	Sr. Systems Architect		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Used the following standards to conduct the verification and validation of the Alabama Eligibility System and of the Alabama MMIS procurement process. <ul style="list-style-type: none"> CMS MEET (Medicaid Eligibility and Enrollment) Toolkit and Checklist CMS MEET (Medicaid Enterprise Certification Toolkit and Checklists) IEEE 12207 Standard for Information Technology – Software Life cycle processes Implementation Considerations Reviewed current and historical documents on SharePoint and on the Team Foundation Server. 		
CLIENT / ORGANIZATION	State of Minnesota Department of Human Services		
PROJECT	MN Health Insurance Exchange (MN-HIX) and Eligibility and Enrollment (MN-EEX) IV&V Project (MNsure/METS and ISDS)	DATES	2017 - 2018

PROJECT DESCRIPTION	<p>SES was selected as the IV&V Contractor for the MN HIX-EEX project with the MN Department of Commerce and MN Department of Human Services (DHS).</p> <p>In addition to Quarterly reports and daily on-site IV&V activities, SES provided attestations, and uploads to CMS portals (CMS CALT and zONE.)</p>		
ROLE	IV&V Analyst/System Architect		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Used the following standards to conduct the evaluations of the Cúram Instance Alignment and METS-MMIS Interface high-level designs: <ul style="list-style-type: none"> ○ IEEE 1074 Standard for Developing Software Life Cycle Processes ○ IEEE 12207 Standard for Information Technology – Software Life cycle processes Implementation Considerations ○ MITA 3.0 ○ Seven Conditions and Standards for CMS Enhanced Funding Requirements ○ CMS Guidance for Exchange and Medicaid Information Technology IT Systems 		
	<ul style="list-style-type: none"> ○ NIEM 3.2 ○ MN State Accessibility/Standards/Guidelines • Reviewed 500+ documents on the Project’s SharePoint sites – representing a composite of all the documents that demonstrate the management and processes for the projects. The review focused on IEEE architectural standards, MITA 3.0, and the CMS Seven Conditions and Standards. 		
CLIENT / ORGANIZATION	State of Minnesota		
PROJECT	Dept of Human Services ITS Division	DATES	1998 – 2016
PROJECT DESCRIPTION	Systems and Data Architecture for Various projects		

**TASKS /
RESPONSIBILITIES**

- **01/2013—01/2016. New Eligibility System for Minnesota’s Health Insurance Exchange and MAGI Medicaid.**
- Led the Information Architecture team through the initial analysis, requirements gathering and system development; mentor and support operations as needed.
- Data Architecture: Identify data requirements, data flows, interfaces, data models, data access options.
- Reports: gather business requirements, provides data access solutions, run reports as needed.
- System Validation: Test and match the system functionality to underlying data. Confirm data security. Work with business staff and technical/vendors to identify, prioritize and modify required changes.
- **10/2013-01/2016. Data Warehouse platform for Minnesota’s Health and Human Services eligibility programs.**
- Determined business and technical needs, write RFP. Mentor and assist the evaluation, recommendation, and implementation.
- **05/2009-01/2016. Enterprise Architecture.**
- Established consistent architecture and design standards across multiple DHS businesses.
- Liaison between technology and business, ensuring that technology and data solutions meet the needs of the business.
- Enterprise Data Architecture Domain Team: Lead. Developed data principles and data governance structures. Reviewed new systems and projects for compliance with data principles. Solicited and oversaw vendor contracts for recommendations relating to system modernization of data infrastructures and relating to data sharing and data security.
- Applications Architecture Team: Reviewed and approved new projects. Assured proposed hardware, software and processes are consistent with State, DHS, and industry standards.
- Enterprise ‘Front Door’ Priorities Team: Reviewed and approved each system’s new tasks and processes as they rise to the top of that system’s priorities/backlog. Maintained awareness of crossing functionality/stories. Assign architect or manager as needed.
- **05/2009-01/2016. Support and troubleshoot peripheral applications that require data integration.**
- Support included: Security analysis and implementation, Data analysis, Data imports, Data Modeling, Software error analysis, Hardware/software/network performance troubleshooting, training, and mentoring application owners. E.g.: BOExi reporting tool, Code 1 Geocoding, SAS, ICD 10 Analysis tools.

- **05/1998-01/2016 Emergent coverage for DBAs and Developers.**
- Included Teradata hardware/software and ETL tools, Adabase extracts, Cobal MVS programs.
- Coverage for all aspects of data warehouse hardware and software during state shut down or key personnel absence.
- MITA, Waterfall, Modified Waterfall, Agile Methodologies.

EDUCATION/TRAINING

- Masters Certificate in Teradata 2004 Programming Certificate: Brown Institute: 08/96
- Undergraduate work: University of Minnesota Carlson School of Management: 06/87

REFERENCES

Pat Callaghan; 405 Cedar Street Saint Paul MN, 651-431-4643
Maggie O’Groske; 405 Cedar Street Saint Paul MN, 651-751-7958
Steve Ritacco; Steven.Ritacco@myfloridalegal.com; 850-414-3521



MICHELLE SHORES			
MEDICAID/ ELIGIBILITY SME			
CAREER SUMMARY	<p>Holds over 20 years specifically in the healthcare marketplace. Her responsibilities include IV&V with Risk Assessments, RFP/APD Development, HIPAA/HITECH Audit & Implementations, Innovating Big Data Capabilities Delivery, Industry Partnership Development and Training Outreach.</p> <p>Tasked to assist CMS with communicating HIPAA/HITECH/MMA/ICD-10, PPACA (Meaningful Use, HIE, Quality Measures).</p>		
CORE SKILLS	<ul style="list-style-type: none"> • Medicaid • CMS certification lifecycle and checklist • Program Management; technical, and testing oversight 		
DETAILED WORK EXPERIENCE			
CLIENT / ORGANIZATION	State of Alabama / Software Engineering Services		
PROJECT	Alabama Medicaid Agency - AL MMIS IV&V and E&E	DATES	2018 - 2021
PROJECT DESCRIPTION	AMA contracted with SES to provide management and technical oversight IV&V services for the MMIS and E&E modernization initiatives.		
ROLE	IV&V Project Manager		
TASKS /RESPONSIBILITIES	<p>Responsible for both the MMIS replacement project from the initiation and planning phase and the current Eligibility & Enrollment product in production</p> <p>Provide oversight with industry best practices as well as CMS requirements for the MECT 2.3 and the MEET 1.1 tool kits.</p> <p>Manage the IV&V team of multiple resources on site and virtual.</p> <p>Develop Weekly and Monthly Status Report deliverables to the state and CMS.</p> <p>Maintain and submit Quarterly IV&V Progress Reports to the state and CMS, however, updated Monthly.</p>		
CLIENT / ORGANIZATION	Commonwealth of Kentucky Cabinet for Health and Family Services Division of Medicaid Systems		
PROJECT	KY MMIS IV&V	DATES	2017 - 2018

ROLE	Deputy Program Manager		
TASKS/ RESPONSIBILITIES	<ul style="list-style-type: none"> • Provided guidance with moved program from Yellow, due to Independent Verification and Validation (IV&V) Observations to Green in less than 4 months. • Responsible for overall Medicaid Enterprise Management System replacement MMIS under ACA expansion • Implemented new reporting structure with templates for program as well as new scheduling to meet programs deficits as well as discovered over 250 new tasks for program schedule and governance. • Delivered all artifacts and checklists under 2.1.1 • Included delivery requests for Software as a Service (SaaS) of RFPs for new Program Management Office (PMO), Systems Integrator, MMIS Core Operations and Encounters and New Medicaid Decision Support System/Data Warehouse • Researched and presented Administrative Services Organizations (ASOs) for Third Party Liability (TPL) and Pharmacy Benefit Management (PBM) type Fee for Service (FFS) implementations to Executive Management. • Initiated new Medicaid Enterprise Certification 2.2 • Liaison for the Commonwealth to Center for Medicaid/Medicare Services as well as internal Commonwealth and public facing communications • Managed new Advanced Planning Document for 10-million-dollar budget by aligning resources to deficiencies for the program. 		
CLIENT / ORGANIZATION	Data Health Advisors		
PROJECT	HIPAA Advisory Validation and Audit	DATES	2015 - 2017
ROLE	Principal		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • IV&V with Risk Assessments, HIPAA/HITECH Audit & Implementations, Innovating Big Data Capabilities Delivery, Industry Partnership Development and Training Outreach. • Engaging with State/Federal Government and commercial organizations, led the effort to provide tailored solutions to Best Practices. • Developed time tested relationships with industry leaders to offer prudent guidance mitigating risk while enabling profitability for covered and non-covered entities in the Ecosystem. 		
CLIENT / ORGANIZATION	Paragon Solutions Inc.		
CLIENT / ORGANIZATION	United Healthcare		



PROJECT	OPTUM/Knowledgent	DATES	2015 - 2015
ROLE	Business Analyst Healthcare SME		
TASKS / RESPONSIBILITIES	Produced study outlining Strategic Capabilities and Use Case documentation of data sources for new implementation of the Individual ID for Master Data Management. This ID will enable the plan to better serve the consumer their information as it pertains to demographic and medical care from cradle to grave. Other benefits include enabling Marketing the ability to "Household" and enrich current data with other sources giving a fuller picture of health.		
CLIENT / ORGANIZATION	BlueCross BlueShield of Louisiana		
PROJECT	Program Management Office Governance	DATES	2014 - 2014
ROLE	Corporate Project Manager		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> • Management and reporting to leadership of all Program Management Office Governance processes for Healthcare Reform Quality Rating System including Enrollment Survey, HEDIS Clinical Measures URAC measures and identification of Market Place Survey readiness and Benefits Open Enrollment. • Clinical Partnerships Implementation of vendor product America Well Telemedicine audio/video clinical visit Enterprise Platform for Physician Network Outreach development under the direction of the Chief Medical and Assistant Chief Medical Officers. 		
CLIENT / ORGANIZATION	Health First Health Plan	DATES	2009 - 2011
PROJECT (s) DESCRIPTION	Gap Analysis		
ROLE	Program Manager 5010		



TASKS / RESPONSIBILITIES	<ul style="list-style-type: none">• Completed Gap Analysis of all systems PACS (Hospital/Institutional, Provider/Professional, HL7 to ANSI X12 formats including 270/271 and 834) for entire Revenue Cycle• SME for Medigap Product release and Medicare Encounter COBA submission development• Created plan for business operations decisions, risk assessment including HITECH, vendor selection, all vendor reviews and management• Negotiated business unit adoption of new processes identified• Created all PMO documentation
EDUCATION/CERTIFICATIONS/TRAINING	
BA, Business Administration – University of Georgia, Athens, Georgia; 1990	
REFERENCES	
Supriya Yerra; supriyayerra@gmail.com; 210-204-8416 Shannon Crane; Shannon.Crane@medicaid.alabama.gov; 334-353-5482 Ira Shaw; Ira.Shaw@medicaid.alabama.gov; 334-353-4365	

CYRILLE DABILA, MCSE

TECHNICAL ANALYST

CAREER SUMMARY



A Microsoft Certified Solutions Expert with considerable knowledge of C#, .NET and MS SQL design and development. In the process of completing Microsoft Cloud certification.

Possesses over 15 years of .NET application development and 10 years of PowerBuilder experience. Well versed in cloud design and development; software design and development; system testing and implementation.

Designee as an Integration tools kit manager on integration projects and Architect of Greenway Medical Technologies Inc. REST/SOAP WCF web services. Architect of future web service for Windows Azure (Cloud computing). Technical leadership and support for Medicaid Agency Business Systems Modernization Projects, Decision Support.

Served as Technical Lead for numerous AL Medicaid initiatives to include Fraud & Abuse, Claims Recipient Eligibility, etc.

SES EMPLOYMENT

8 Years

CURRENT ASSIGNMENT(S)

- Technical Analyst for FDLE IV&V Project.
- In house development functioning as Database Administrator, Cloud Designer & Developer

DETAILED WORK EXPERIENCE

CLIENT/ ORGANIZATION

Florida Department of Law Enforcement

PROJECT

Florida Incident Based Reporting System, Criminal Justice Data Transparency, Uniform Arrest Affidavit IV&V

DATES

2020 - Present

PROJECT DESCRIPTION

SES was selected as the IV&V Contractor for the FL DLE projects to oversee FDLE initiatives to comply with FBI requirement to convert Uniform Crime Reporting from summary data to incident-based data; achieve legislative mandate to provide criminal justice data to the public and to provide a Uniform Arrest Affidavit for all criminal justice agencies in the state.

ROLE

Technical Analyst / Cloud SME



TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Analyzes project artifacts and data to evaluate technical oversight areas to include software development, interface development, testing and cloud design. Review and provide feedback on the process, methodology, status, of the FIBRS, CJDT and UAA projects. 		
CLIENT/ ORGANIZATION	Florida Office of Attorney General (FL OAG)		
PROJECT	IT Modernization Project (ITMP)		
PROJECT DESCRIPTION	SES was selected as the IV&V vendor for FL OAG IT Modernization Project. FL OAG is undertaking modernization of several legacy programs across the agency.		
ROLE	IV&V Technical Analyst		
TASKS/ RESPONSIBILITIES	<ul style="list-style-type: none"> Used the following standards to conduct the verification and validation of the Alabama Eligibility System and of the Alabama MMIS procurement process. <ul style="list-style-type: none"> CMS MEET (Medicaid Eligibility and Enrollment) Toolkit and Checklist CMS MECT (Medicaid Enterprise Certification Toolkit and Checklists) IEEE 12207 Standard for Information Technology – Software Life cycle processes Implementation Considerations Reviewed current and historical documents on SharePoint and on the Team Foundation Server. 		
CLIENT / ORGANIZATION	Software Engineering Services		
PROJECT	Internal Development Projects	DATES	2018 - Present
ROLE	Sr. Applications Developer / Database Administrator		
TASKS/ RESPONSIBILITIES	<ul style="list-style-type: none"> Design, development, and implementation of corporate MS Azure cloud solution Conducting testing, assessing testing results and resolving associated defects Developing and maintaining corporate websites and databases. Usage of .NET and MVC framework to architect replacement timekeeping system. Maintain continuing education and certifications in support of corporate Microsoft partnership. 		
CLIENT / ORGANIZATION	State of Alabama/Software Engineering Services		



PROJECT	Alabama Medicaid Health Systems Department	DATES	2013 - 2018
ROLE	Sr. Software Engineering in Research & Development		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Developed the application in MVC Framework and C# to meet the architectural design. Created WCF Services responsible for communicating and providing real time data from integrated server to Client application. Developed the Business Logic layer and Data Access layer using OOP concepts to provide code inheritance and encapsulation. Code Control, project related document sharing and team collaboration. Implementation of Agile methodology: participate in Daily stand-up meetings with team lead, analysts, and coordinate testing. 		
	<ul style="list-style-type: none"> Technical lead on RCO (Regional Collaboration Organization) web site, Gateway Community Living web site, NET (Non-Emergency Transportation). Business Unit: Health info Tech for Economic & Clinical Health. Technical lead on PSUR. Business Unit: SURS and Fraud & Abuse. Technical lead on NET (Non-Emergency Transportation). Business Units: Claims, Recipient eligibility. 		
CLIENT / ORGANIZATION	Greenway Medical Technologies Inc.		
PROJECT	N/A	DATES	2011 - 2013
ROLE	Sr. Software Engineering in Research and Development		
TASKS / RESPONSIBILITIES	<ul style="list-style-type: none"> Utilized PowerBuilder as an IDE tool to build .NET application. Agile development (SCRUM): experience and understanding of full product Software Development Lifecycle. Strong web services (REST/SOAP with XML/JSON) experience including web application architecture, implementation, and deployment. Understanding of C#, VB.NET, jQuery, MVC, WCF and TFS (Microsoft Team Foundation Server) experience. Experience using SQL Server 2008 / 2012 to integrate Service Oriented Architecture with applications data. Architect of OOD using EA (Enterprise Architect from Sparx). 		

EDUCATION/TRAINING

- Certified Microsoft Solutions Expert (MCSE) - Data Management & Analytics. May 2018
- Certified Microsoft Solutions Associate (MCSA) – SQL Database Development. May 2018
- Master of Science in Computer Science in Software Engineering from Colorado Technical University (CTU) graduated in March 2015.
- Bachelor of Science in Computer Science from University of Alabama at Birmingham (UAB), graduated in December 2004 with minor In Mathematics.

REFERENCES

Ivan Saldanha; ivan.rohan.saldanha@gmail.com; 334-294-1094

Atanu Guha; Atanu.Guha@adph.alabama.gov; (334) 353-5326

Renee LaRosa; Renee.LaRosa@Medicaid.Alabama.gov; 334-353-5485



NINA TERHAAR, MBA			
CERTIFICATION SME			
Relevant Experience Summary	<p>Senior technical systems architect with 30 years' experience in supporting enterprise and data warehouse systems for Minnesota Department of Human Services. Experience with leading full scale system development from requirements analysis thru implementation and operation. Provided technical oversight for parts of major HIX/Eligibility Enrollment System implementation. Extensive experience coordinating user and system requirements between multiple state agencies. System knowledge includes multi-tier platforms, web applications services, data warehouse and systems testing tools. Understand state government operations and systems communication and coordination protocols between large systems. Experience with all phases of enterprise systems testing (integration thru operational readiness) and continuity of operations. Other key knowledge areas: feasibility review, facilitation of JADs, federal reporting, accessibility, MITA, and MECT.</p>		
Detailed Work Experience			
Employer	Software Engineering Services	Dates	2016 - Present
Project	Kansas Modular Medicaid System (KMMS) Upgrade IV&V		
Role	Sr. IV&V Systems Architect and Certification Lead		
<p>Provide technical review of Kansas Modular Medicaid System (KMMS), including design, development, integration, test, implementation, and business continuity/disaster recovery plans for IV&V and certification purposes. Review and evaluate systems for compliance with state technology and accessibility standards as well as federal regulations (as applicable), i.e., MITA, MECT V2.2, and other guidance and direction received from CMS. Observe and evaluate effectiveness of various governance teams providing input and oversight to KMMS, including Steering Committee, Team Leads, Technical Architecture, and system design sessions for various modules. For the State of Kansas Medicare/Medicaid Information System (KMMS) project, we have, to date, provided 66 monthly reports and 21 quarterly IV&V assessments that present an objective assessment of project "health" and key findings, and CMS MMIS Certification progress to the Director of the Enterprise Project Management Office (EPMO) of the Kansas Information Technology Office (KITO), the KEES Project Steering Committee, and the Federal CMS partner. Act as the Certification Lead reviewing evidence and MECT checklists as well as working with the State and CMS to define appropriate evidence and demonstrations for the new Streamlined Modular Certification methodology and its Intake Forms.</p>			
Employer	Minnesota Department of Human Services – IT Services	Dates	1985 – 2015
Project	State of MN, DHS		
Role	Applications/Systems Architect, Data Warehouse/Information System Manager, Senior Systems Enterprise Team Lead, Senior Systems Analyst, LAN Administrator, Computer Operations Manager, System Analyst, IV&V Contract Manager		



Provided technical leadership for development and implementation of enterprise architecture for 8000-person state agency, keeping business and technology planning in strategic alignment. Participated in preparation and periodic updates to planning and implementation Advanced Planning Documents (PAPDs and IAPDs) for CMS. Extended Continuity of Operations Planning best practices across DHS systems. Designed and managed web-based application inventory system. Evaluated systems configurations (hardware & software) compliance with Agency. Enterprise standards and operations procedures. Provided agency-wide technical resources for accessibility and accessible technology.

Contract manager for Independent Validation and Verification (IV&V) for health care reform system implementation. Participated in agency and state Enterprise Architecture (EA) governance teams (including Steering, Application, Business, Data, Integration, Security, and Technology domains) providing communication and coordination between various the technical and business groups. Developed Requirements, design and interface specs, technical drawings, and feasibility studies. Led development of systems test and implementation plans and operational readiness reviews. Led system web application development team and managed development and operation of enterprise applications, networks, and databases/data warehouses. Managed DHS enterprise data warehouse and executive information system. Developed and coordinated all phases of implementation and operation, from initial requirements through testing to production. Developed and implemented training plans on data and tools.

Conducted and facilitated JAD sessions with stakeholders, integrated project teams and customers. Analyzed Requirements, designed, developed, and implemented a data warehouse. Created programs and procedures to extract data from various applications. Manipulated and cleansed data. Loaded data into DB2 and Oracle. Created system documentation and designed job flow. Provide data warehouse support for users from over 80 state agencies. Planned, developed, and documented warehouse test and technical audit process. Analyzed test data. Developed user documentation. Programmed reports and data extracts utilizing Advantage/DS, Crystal Reports, Microsoft Access, and Lotus. Assisted over 300 users install and utilize similar tools. Organized implementation and migration of quarterly releases of the warehouse, utilizing skills from functional analysts, data administrators and database administrators.

Set priorities and clarified user requirements. Managed all parts of implementation projects. Determine technical readiness to implement statewide administrative systems (accounting, purchasing, human resources and payroll) within 130 state agencies. Solicited, evaluated, and recommended funding for state agencies and statewide purchases for project implementation. Managed research, procurement and delivery of hardware and software at 45 different agencies. Wrote technical documentation for the User Implementation Guide for the project, including installation requirements and recommended hardware configurations. Developed preliminary implementation plan which was later expanded for state-wide use.

Performed all user support and help desk activities for the Biennial Budget System. Supported 130 state agencies and governor in preparing the state's budget for presentation to the legislature.

Researched, designed, installed, administered, maintained, and supported the agency's first local area network, as well as all other computer resources within the division, including terminal, PC, mini-computer, and mainframe access. Provided support for 75 users.

EDUCATION/TRAINING

M.B.A.- 1993. University of St. Thomas. Concentration: Information Systems.

B.A.- 1978. Augustana College. Major: Business Ed. Minor: Business Administration



2012, ITIL 3.0 Foundation certification

REFERENCES

Beth Hansen; beth.s.hanson@state.mn.us; (651) 431-3181

LouAnn Gerhardt; LGebhards@kdheks.gov; 785-296-0609

Christiane Schwartz; cschwartz@kdheks.gov; 785-368-6296



YOLANDA FEARS

MITA SME

Relevant Experience Summary	Senior business analyst and MITA expert using business use case development knowledge and Requirement's analysis skills to improve systems, software development, and project teams. Able to maximize results by applying advanced communications skills to drive process improvements and change management. Proactive manager focused on creating and maintaining high quality outcomes through continuous improvement in business processes, policies, and procedures. Employs root cause analysis to identify issues and develop process improvements. Regularly participates in RFP/APD Development.
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Detailed Work Experience

Employer	Software Engineering Services	Dates	2018 - 2021
Project	Alabama MMIS IV&V		
Role	MITA SME/ Sr. Business Analyst		
	<ul style="list-style-type: none"> • Provides oversight of Alabama E&E project by attending project meetings, product evaluations and conducting interviews. • Performs in-depth evaluation of 7 Eligibility & Enrollment MITA requirements artifacts. • Assesses project status and provides recommendations specific to MITA implementation. • Reviews artifacts and documents for submission to CMS for completeness and accuracy 		

Employer	Software Engineering Services	Dates	2012 - 2016
Project	Alabama Medicaid Agency		
Role	MITA 3.0 SSA Project Manager/Sr. Analyst		
	<ul style="list-style-type: none"> • Define Requirements to facilitate the design, implementation and maintenance of existing information technology system and future enhancements and functionalities. • Project Manager for the MITA 3.0 SS-A. • Provided management oversight to all aspects of the project including MMIS systems business processes, technical, business and information architectures and documented the process and gap analysis. • Ensure compliance with contract to assure state and federal regulations and internal standards and procedures for ICD9, ICD 10, TMSIS, National Correct Coding Initiative (NCCI) and Regional Care Organization projects (RCO). • Evaluated business processes against the MITA 3.0 Framework to establish the current maturity level. • Developed the Advanced Planning Document (APD), Request for Proposal (RFP) and MITA 3.0 project. • Gather and analyze specific user needs to define a solution and translate them into functional specifications and system design specifications • Facilitated the development of MITA SS-A document (Seven Standards and Conditions, Business Information and Technical Architecture processes, Concept of Operation, MITA Roadmap, and Gap Analysis). 		

- Create and analyze detailed technical documents to develop Requirements to modify the system using the Software Development Life Cycle (SDLC).
- Gathered business and system Requirements by analyzing and documenting business rules, source to client mapping, business and functional system processes, process flows and procurement documents and conducting gap analysis.
- Facilitated the creation of the MITA Roadmap consisting of the five-year plan for projects and initiatives that collectively move the state from its current business capabilities to the targeted future capabilities.
- Routinely meet with internal/external subject matter experts, Senior Management, and vendors to develop requirement documentation and technical Requirements to procure the optimal enhancement and modification of the system.

Employer	Cenveo, INC	Dates	2012
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Project	Employee
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Role	Business Analyst/Quality Assurance Analyst, eCommerce
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- Gathered and tested information technology system functional requirements of web-based applications. Developed quality assurance measures and testing standards for new information technology system applications, products, and enhancements to existing applications.
- Develop detailed business requirements, system documentation, workflow process and procedures, data modeling.
- Participated in application analysis, Joint Application Design (JAD) session, test strategy development, test case creation, test script development, test execution, defect tracking and reporting.
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Employer	Aflac	Dates	2011
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Project	Brightline Solutions
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Role	IT Security Analyst, IT Security Administration
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- Drafted and facilitated the implementation of information technology security systems policies and standards.
- Served as liaison with management to coordinate audits, access control assurance, regulatory consulting, and risk management.
- Project Manager on the Contractor on boarding process and delivered a process flow, timelines and handbook meeting all HIPPA and HITECH requirements.
- Provided oversight for regulatory compliance with SOX, HIPAA, GLBA, PCI, PHI, ISO, and other applicable federal and state laws or industry directives.
- Reviewed information technology security laws and regulations and communicated need for any policy and/or IT functional changes.
- Maintained corporate and divisional information security policies related to applicable federal and state laws.
- Reviewed processes and procedures within area of responsibility to ensure content compliance with applicable company, federal, state, and regulatory agency standards and guidelines.
- Provided support for internal control assessments, regulatory compliance, policy and procedures review, inspections and deficiencies support, e-discovery, and compliance implementation. Identified Information Technology security incidents and provided security briefings on stolen laptops, potential PCI, and HIPAA violations.

Employer	Aflac	Dates	2010 - 2011
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Project	Brightline Solutions		
Role	Business Process Analyst II, Field Force Reporting		
	<ul style="list-style-type: none"> • Initiated and coordinated communication with stakeholders, project sponsors, end users and subject matter experts to monitor and improve satisfaction and recommend quality/service enhancements. • Developed technical and/or online documents to meet end user needs. Ensure integration of all systems components. • Analyzed user requirements, procedures, and modifications to automate existing system. Successfully implemented and delivered divisional and strategic projects on time. • Developed documentation for system requirements, gap analysis, project schedule and requirement deliverables. • Coordinated projects of medium scope and moderate to high complexity. • Analyzed business cases for projects and preliminary investigations for project requests. Reviewed requirement specifications and provided test support and Information Technology (IT) functional systems training for users. • Created test matrix and performed research for defects and defect tracking. • Validated business requirements by creating test plans and test cases. • Performed manual and automated testing, reviewed test summary, provided testing feedback, and archived testing. • Utilized flow charts and diagrams and to present test process, scenarios, and results. 		
Employer	Total Systems Services	Dates	2001 - 2008
Project	Employee		
Role	Senior Test Analyst, TSYS IT Quality Assurance		
	<ul style="list-style-type: none"> • Analyzed business and Information Technology functional system requirements and specifications and translated the requirements into test conditions and test cases using the SDLC. • Served as a Subject Matter Expert on testing strategy, test matrix. Served as Business Analyst by requirement gatherings, defining project scope, project schedule and cost allocations. • Developed, reviewed, and approved test plans, reviewed test summary and provided testing feedback for clients and other QA testers. • Coordinated the execution of manual and automated test cases and scripts through effective use of different testing techniques and types (i.e., positive, negative, regression, system, functional, static, and dynamic). • Identified requirements, design specifications and documentation to coordinate successful, on time delivery and installation. • Validated test conditions and reviewed data values utilizing FILEAID, IMS, DB2, CICS, and TSO. • Designed and executed test cases/test scripts via Test Director or WinRunner. • Coordinated and conducted all on-line, batch, and data verification testing. 		
EDUCATION/TRAINING			
Bachelor of Science, Criminal Justice, University of Alabama			
REFERENCES			
Ira Shaw; Ira.Shaw@medicaid.alabama.gov; 334-353-4365			
Renee LaRosa; Renee.LaRosa@Medicaid.Alabama.gov; 334-353-5485			
Shannon Crane; Shannon.Crane@medicaid.alabama.gov; 334- 353-5482			



J. SUBCONTRACTORS

Software Engineering Services is fully staffed, capable and ready to successfully perform the requirements of this project. We will not be subcontracting any of the work.



2.0 TECHNICAL APPROACH

2.1 ATTACHMENT A – BUSINESS REQUIREMENTS TRACEABILITY INDEX

Attachment A Business Requirements Traceability Matrix Request for Proposal Number 109035 O3

Bidders are instructed to complete a Business Requirements Traceability Matrix for independent verification and validation (IV&V) services. Bidders are required to describe in detail how their proposed solution meets the conformance specification outlined within each Business Requirement.

The traceability matrix is used to document and track the business requirements from the proposal through testing to verify that the requirement has been completely fulfilled. The contractor will be responsible for maintaining the contract set of Baseline Requirements.

The traceability matrix should indicate how the bidder intends to comply with the requirement and the effort required to achieve that compliance. It is not sufficient for the bidder to simply state that it intends to meet the requirements of the RFP. DHHS will consider any such response to the requirements in this RFP to be non-responsive and the bid may be rejected. The narrative should provide DHHS with sufficient information to differentiate the bidder's business solution from other bidders' solutions.

The bidder must ensure that the original requirement identifier and requirement description are maintained in the traceability matrix as provided by DHHS. Failure to maintain these elements may render the bid non-responsive and result in for rejection of the bidder. How to complete the traceability matrix:

Column Description	Bidder Responsibility
Req #	The unique identifier for the requirement as assigned by DHHS, followed by the specific requirement number. This column is dictated by this RFP and must not be modified by the bidder.
Requirement	The statement of the requirement to which the bidder must respond. This column is dictated by the RFP and must not be modified by the bidder.



Project Management

Business Requirements	
Req #	Requirement
PM-1	Describe Bidder’s proven methodology, approach, and process for Project Management of Medicaid IV&V activities,
	<p>Response:</p> <p>§2.3.4 – <i>Streamlined Project Management</i> §2.3.5 – <i>Solid Lifecycle Process</i> §2.3.7 – <i>Increased Awareness, Reduced Risk</i> Appendix A – <i>Sample IV&V Project Management Plan</i> Appendix B – <i>Sample IV&V Schedule</i> Appendix E – <i>Sample Project Management Checklists</i></p>
PM-2	Include an example of an IV&V project schedule utilized on similar projects.
	<p>Response:</p> <p>Appendix B – <i>Sample IV&V Schedule</i></p>
PM-3	Describe how the IV&V bidder’s project management approach adapts to varying State governance models.
	<p>Response:</p> <p>§2.3.5 – <i>Project Startup: Initiation Tasks, Checklist Tailoring and Customization</i> §2.4.1 – <i>Experience With CMS: Report tailoring.</i> §2.4.3 checklist tailoring/customization. §2.5 – <i>Detailed Project Work Plan: Appendix A is a sample; tailored IV&V deliverable schedule/cadence per each project (Appendix B is a sample)</i></p>
PM-4	Address the bidder’s approach to meeting each requirement in a table that contains the requirement and the contractor’s approach to meeting therequirement.
	<p>Response: See PM-1 through PM-3 above in this table.</p>



Independent Assessment and Quality Assurance

Business Requirements	
Req #	Requirement
IAQ-1	Address the bidder's approach to meeting each requirement in a table that contains the requirement and the bidder's approach to meeting therequirement.
	Response: See IAQ-2 through -5 below in this table.
IAQ-2	Describe the bidder's approach in detail to IV&V including: a) project participation at the level of detail necessary to assess the project's health; b) risk, issue and opportunity management; c) deliverable review and reporting of deliverable findings
	Response: §2.3.5 – <i>Solid Lifecycle Process.</i> §2.3.7 - <i>Increased Awareness, Reduced Risk.</i> §2.3.8 – <i>Issue Management</i> Appendix E – <i>Sample Project Management Checklists: Risk Management, Issue Management</i> Appendix H – <i>Issue Management Plan Template</i>
IAQ-3	Explain past challenges and common issues along with the recommendations provided to address the issues.
	Response: Appendix G – <i>Lessons Learned/ Closure Report.</i>
IAQ-4	Provide examples of opportunities or positive risks reporting in past projects where the customer was able to capitalize.
	Response: §2.3.7 – <i>Increased Awareness, Reduced Risk.</i> Appendix I – <i>Sample of Prior Opportunities.</i>
IAQ-5	Provide examples of the bidder's deliverable review findings and issue assessments utilized on previous projects.
	Response: Appendix D – <i>Focused Deliverable Observation Report</i>

IV&V Status Meetings and Reporting

Business Requirements	
Req #	Requirement
IVV-1	Address the bidder's approach to meeting each requirement in a table that contains the requirement and the bidder's approach to meeting the requirement.
	Response: See IVV-2 through IVV-6 below in this table
IVV-2	Describe the bidder's process for capturing detailed status on project activities (i.e., scheduled tasks, risks, issues, staffing, communications, etc.) at a detailed level and reporting the information as needed based on the reporting audience.
	Response: §2.3.2 – <i>Robust Best Practices</i> , with CMMI and PMBOK as cornerstones. §2.3.5 – <i>Solid Lifecycle Process</i> : <ul style="list-style-type: none"> • Project Startup with tailoring. • Project Execution with standardized data collection, analysis, and reporting. Appendix E – <i>Sample Project Management Checklists</i> . Appendix C – <i>Sample IV&V Review Report</i> . Appendix D – <i>Focused Deliverable Observation Report</i> . Appendix F – <i>Sample CMS Certification Progress Report</i> .
IVV-3	Describe the bidder's methods for determining and reporting overall project, schedule, budget, scope and quality status (i.e. determining whether a project is red, yellow, or green, and providing defined criteria as to what constitutes each type of status)
	Response: §2.3.6 – <i>Report Cycle and Quality Control: Determining Project Progress</i> . Appendix J – <i>IV&V Report Quality Checklist</i> .
IVV-4	Provide the bidder's status report templates, including instructions and procedures for completing the templates.
	Response: Appendix J – <i>IV&V Report Quality Checklist</i> . Appendix L – <i>Report Templates</i> .
IVV-5	Provide examples of similar weekly status reports used in previous projects.
	Response: Appendix K – <i>Sample Weekly Status Report</i>
IVV-6	Provide examples of the IV&V's previous monthly status reports from other projects.
	Response: Appendix C – <i>Sample IV&V Review Report</i> (used as monthly report).

CMS and MITA Compliance

Business Requirements	
Req #	Requirement
CMC-1	Address the bidder's approach to meeting each requirement in a table that contains the requirement and the contractor's approach to meeting therequirement.
	Response: See CMC-2 through CMC-4 below in this table.
CMC-2	Describe the bidder's understanding of CMS' expectations for an IV&V contractor and approach to compliance with CMS expectations.
	Response: §2.4.1 – <i>Experience with CMS.</i> §2.4.2 – <i>Knowledge of Requested Services and Deliverables.</i>
CMC-3	Describe the bidder's approach to assessing the impacts of a project on MITA maturity levels.
	Response: §2.4.1 – <i>Experience with CMS.</i>
CMC-4	Describe the bidder's approach to monitoring for documentation, guidance, and regulations from CMS
	Response: §2.4.1 – <i>Experience with CMS.</i>

Operations and System Readiness

Business Requirements	
Req #	Requirement
OSR-1	Address the bidder's approach to meeting each requirement in a table that contains the requirement and the bidder's approach to meeting therequirement.
	Response: See OSR-2 through OSR-4 in this table below.
OSR-2	Describe the bidder's approach to operational and systems readiness.
	Response: We use dedicated Operations checklists: §2.3.5 – <i>Solid Lifecycle Process.</i>
SR-3	Provide an example of a readiness plan utilized for other projects.
	Response: §2.3.5 – <i>Solid Lifecycle Process</i> includes a description of post-implementation operations oversight. Appendix M – <i>Turnover Plan.</i>
SR-4	Provide examples of operation and system readiness review reports used on previous projects.



Business Requirements	
Req #	Requirement
	Response: Appendix N – <i>Cutover Readiness Review Checklist.</i>

IV&V Deliverables and Work Products

Business Requirements	
Req #	Requirement
IDW-1	Address the bidder’s approach to meeting each requirement in a table that contains the requirement and the bidder’s approach to meeting therequirement.
	Response: §2.6 – <i>Deliverables and Due Dates.</i>

2.2 UNDERSTANDING OF THE PROJECT REQUIREMENTS

IV&V Project	Duration
Iowa Medicaid Enterprise (IME) IV&V	2000 - 2005
Alabama Medicaid IV&V	2005 - 2021
Florida Child Support IV&V	2008 - 2012
Texas MMIS IV&V	2011 - 2017
Kansas Eligibility IV&V	2012 - 2017
Massachusetts HIX IV&V	2013 - 2014
Minnesota HIX IV&V	2013 - 2018
New Mexico HIX IV&V	2014 - 2015
Texas DMV IV&V	2015 - 2017
Minnesota DMV IV&V	2015 - 2018
Kansas MMIS IV&V	2016 - Current
Missouri MMIS IV&V	2017 - 2019
Florida OAG ITMP IV&V	2019 - Current
Florida DLE IV&V	2020 - Current

The State’s vision for Medicaid and Long-Term Care (MLTC) is an improved, re-engineered solution that will effectively support the trend toward more demand for managed care instead of fee-for-service programs. A key goal is to position MLTC for the expected increase of roughly 38% (from 240,000 to 330,000) in eligible persons under the Heritage Health Adult (HHA) initiative. Associated with that goal is the plan for significant improvements in data management that will use tools and techniques to identify trends and assist in problem-solving.

To help with successful and cost-effective program outcomes across all modules (projects), the State plans to partner with an IV&V Vendor to reduce overall project risk profiles inherent in large, complex development efforts, and to satisfy the 45 CFR 95.626 regulatory requirements as defined by the Centers for Medicare and Medicaid Services (CMS).

In compliance with Medicaid Information Technology Architecture (MITA) directives, the State is modernizing its MMIS by utilizing shared services, a common framework, and improved interoperability in a modular environment. The current plan calls for incremental migration, by subsystem, of all MMIS functionality to this new framework.

An IV&V consultant that is experienced and methodical can assist the State in turning risks into opportunities. Software Engineering Services (SES) has worked closely with other State Medicare and Medicaid departments/agencies on Modular implementations and experienced how they can introduce new risks around the associated integration and governance environments.

We have more than 20 years’ experience in the acquisition and implementation of Medicaid enterprise systems, specifically, in providing IV&V services, strategic planning, project management, and quality assurance of the solutions. Our consultants are long-term employees and experts in helping state Medicaid programs by collaborating with them and with CMS to identify ways to improve the systems that support Medicaid. We are experienced with current CMS certification reporting requirements and are one of the first IV&V consultants to navigate the new Streamlined Modular Certification (SMC) outcome-based certification methodology with State Medicare clients.

A key tenet of IV&V is “independence” – both technical and managerial – to avoid conflict of interest and ensure IV&V reviews and reports are fair and unbiased. SES is completely independent of any



software developer or contractor who may bid on MMIS development, MMIS modules, and fiscal agents performing projects. We simply do not contract with any MMIS contractor for fiscal agent services or systems, nor have we been involved in IT development project efforts for any MMIS.

To maintain independence and conflict of interest, SES understands that it is excluded from soliciting, proposing, or being awarded any project management, quality assurance, software design, development, or other manner of planning, design, development, or implementation phase activity on the MMIS Modernization project for which these IV&V services are being procured. This exclusion likewise extends to any other Nebraska project that may interact with or otherwise provide services to the MMIS modernization project or to the Department during the full term of this contract. The primary purpose of this exclusion is to ensure the IV&V service provider avoids any real or perceived conflicts of interest.

2.3 PROPOSED DEVELOPMENT APPROACH

2.3.1 Team IV&V

Our solution begins with our Team. *In today’s contracting environment our team synergy and efficiency are rare.* We view our team staffing as inseparable from our overall strategy for high performance engagement; for SES, staffing is not simply an exercise in matching qualifications to clients: As a smaller company, we deliver a core of staff *employees* who have worked together for many years on multiple IV&V projects; then we carefully develop and integrate newer staff into the core team.

The SES approach to staffing is distinguished by the *shared experience of the team.* Our proposed core team (highlighted in the table below) is comprised of long time SES employees who have worked together on many IV&V engagements. The result is a high level of synergy: Before the project begins, the team has already “formed, normed, and stormed”. They know how to *perform* as a cohesive unit; they each know their role and have in fact filled multiple IV&V roles on Teams in prior engagements.

	Jim Moudry	Raj Sharma	Norm Mandy	Brittany McNair	Naquisha Smith
Jim Moudry	-	16	16	13	8
Raj Sharma	16	-	16	13	8
Norm Mandy	16	16	-	13	8
Brittany McNair	13	13	13	-	8
Naquisha Smith	8	8	8	8	-

Table 5: SES Core Staff Experience Together (Years)

Our team staffing approach provides significant benefits to the MMIS oversight including:

- Reduced risk and cost to accomplish all IV&V requirements
- Deep understanding, standardization, and repeatability of SES IV&V methodology

- Team cohesion that comes only from shared expectations of project engagement
- A proven Team track record of delivering successful IV&V work

Project Role	Staff Name
IV&V Lead	Jim Moudry
Project Manager	Brittany McNair, PMP
Deputy Project Manager	Norm Mandy, PMP
Sr. Technical Analyst	Dr. Raj Sharma, CSM, CSPO
Sr. Business & Testing Analyst	Naquisha Smith, CISSP
Enterprise Architect	Kathy Hoglelund

Table 6: SES Staff and Project Role

Our team’s considerable experience is enhanced by the expertise of our SME pool which includes the following:

Project Role	Staff Name
Sr. IT Architect / Certification SME	Nina Terhaar, MBA
Cloud/Technical SME	Cyrille Dabila, MCSE
Eligibility/Medicaid SME	Michelle Shores
MITA SME	Yolanda Fears
Infrastructure SME	Michael Irons

Table 7: SES SME Pool and Project Role

Relevant Staff Credentials

Our staff are recognized experts in areas that significantly increase the effectiveness of IV&V services, as verified by some of the best and most well-known credentialing bodies:

- Lead Appraisers from the CMMI Institute
- Certified Information Systems Security Professional CISSP
- CompTIA
- Certified Healthcare Privacy and Security
- Project Management Professional (PMP)
- Certified System Quality Engineer (ASQ CSQE)
- Certified Scrum Master (CSM)
- Certified Product Owner (CPO)
- Six Sigma Black Belts
- Microsoft Certified System Engineer



- Microsoft Certified System Associate
- Information Technology Infrastructure Library (ITIL)- Foundation

2.3.2 Robust Best Practices

We integrate the very best business and technical practices into our checklists and our approach to conducting project oversight. SES is a Partner in the prestigious Capability Maturity Model Integration (CMMI) Institute Partner, and the CMMI is central to SES’ IV&V method; it represents a comprehensive compilation of industry best practices encompassing the spectrum of project management, systems engineering, services establishment and delivery, and acquisition/procurement best practices across the entire systems development lifecycle.

- The CMMI captures the clear majority of practices and tasks within IV&V oversight areas.
- Our method augments CMMI with specific practices from the Project Management Institute (PMI) Project Management Body of Knowledge (PMBOK) and other standards including those listed in this graphic.



Figure 1: Key Best Practices and SES Credentials

Modular Approach to MMIS Modernization

Our approach is based on prior knowledge gained in recent and ongoing MMIS IV&V work with the States of Alabama, Kansas, and Missouri; they adopted a modular approach to modernize their MMIS systems. Those project environments included both vendor and in-house development. Each time we gained a deeper understanding of the sequence, complexities, and interdependencies of planning, designing, building, testing, and deploying MMIS modules. We have provided IV&V oversight of monitoring multiple implementation schedules.

2.3.3 Independence

Our Team has the maturity and experience to understand it is possible and necessary to



collaborate with client-stakeholders *and* remain independent. After all, what benefit is there for our clients if, in the process of remaining independent, communication fails, and the project team is distracted from their project work? To be successful, IV&V must enhance the probability of project success – not act like an inspector.

One reason SES gains contract extensions and repeat engagements is the trust we earn with each client. We adhere and honor reporting relationships, roles, and responsibilities. We will never divulge the contents of our Deliverables with any other entity unless directed to do so by you, the client, or your appointed Contract Manager.

- SES has no business relationship with any development vendors or other IV&V contractors. We have no conflicts of interest.
- We understand that we succeed only when you succeed; our goal is to be your objective and independent partner.
- Our communication management plan defines responsibilities of the IV&V team members and will be included in the IV&V Management Plan deliverable.
- The IV&V Project Manager will be the sole SES point of contact
- We will submit reports solely to the office(s) to whom the Contract Manager directs us.

2.3.4 Streamlined Project Management

Our proposed IV&V Project Manager team has 12 + years of managing IV&V projects for various states- Alabama, Kansas, Florida, Minnesota, and Texas, just to name a few; the management methodologies included traditional waterfall, agile, iterative, hybrid agile, and services approaches. These engagements established the basis for the SES streamlined project management approach, from which we bring in their lessons learned.

Here is a summary of our response to the SOW [B1b] project management requirements:

	Requirements	SES Response
1	Must develop and submit comprehensive IV&V Project Management Plan(s) work product for Department approval a maximum of 30 days after the project starts and must manage and perform the IV&V services in accordance with the IV&V Project Management Plan(s).	Appendix A §2.3.5
2	Must develop IV&V project schedule(s) work products a maximum of 30 days after the projects’ start and update weekly IV&V schedules that coordinates IV&V activities with project schedules.	Appendix B §2.5
3	Must develop clear lines of communication and collaborative working relationships with project teams, project leadership, and CMS.	§2.3.3 §2.3.5 (Project Startup) Appendix A (Communication Management)

2.3.5 Solid Lifecycle Process

You *would not* hire a financial advisor who makes undisciplined investment decisions, and you *should not* hire an IV&V Vendor who lacks a disciplined, predictable approach. The right process used by the right Team will enable solutions for most problems. Our lifecycle enforces disciplined insight and oversight.

The life cycle evolved from IV&V services work both past and present; the graphic below summarizes it from project initiation to project closure.

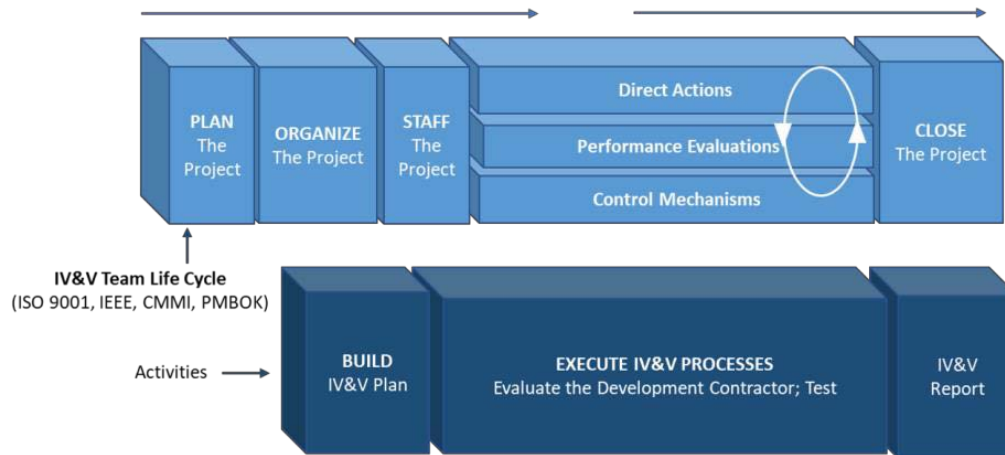


Figure 2: IV&V Life Cycle

Project Startup

For each assigned project SES performs standardized project startup activities which result in the following tangible artifacts:

- Establish and maintain clear lines of communication and collaborative working relationships with project teams, project leadership, and CMS.
- Develop and submit comprehensive IV&V Project Management Plan
- Develop the IV&V Work Plan (schedule)

The following table lists typical SES start-up activities. Refer to **Appendices A** and **B** for samples of our IV&V Management Plan and work plan Schedule, respectively.

SES IV&V INITIATION TASKS		
<ul style="list-style-type: none"> ✓ Organize and conduct IV&V Kickoff ✓ Data & Documentation Setup ✓ Prepare IV&V Oversight Checklists ✓ Develop Deliverable Control procedure 	<ul style="list-style-type: none"> ✓ Tailor the Quality Management strategy ✓ Tailor the Communications Management strategy ✓ Tailor the Risk Management strategy ✓ Integrate management and control components into Program IV&V Plan 	<ul style="list-style-type: none"> ✓ Develop IV&V Work Plan (schedule) of work packages, dependencies and estimated dates and levels of effort ✓ Perform Vendor deliverable reviews ✓ Submit Program IV&V Work Plan for Approval

Table 8: SES IV&V Startup Tasks

Assess the Environment

This consists primarily of an initial review of key documents, possibly accompanied by some clarifying interviews, and represents the beginning of data collection and analysis for the Baseline report deliverable.

Checklist Tailoring and Customization

The SES PM will collaborate with the Commonwealth and/or Project Team to tailor a complete core of oversight practices to meet the scope of work requirements for each project. The table below is a notional demonstration of compliance with many typical project functions and artifacts or deliverables. Our Team experience enables relevant and accurate interpretation of the best practices for the chosen framework. *Appendix E* contains a small sample of our project management checklists.

Oversight Area	Task Areas (IV&V Checklists)
Planning	Procurement Feasibility Study
Project Management	Project Sponsorship Management Assessment Project Management Business Process Engineering Risk Management Change Management Communication Management Configuration Management Estimating and Scheduling Personnel Project Organization

Oversight Area	Task Areas (IV&V Checklists)
	Subcontractors and External Staff
Quality Management	Quality Assurance Process Definition and Product Standards
Training	User Training and Documentation Developer Training and Documentation
Requirements Management	Requirements Management Security Requirements Requirements Analysis Interface Requirements Requirements Allocation and Specification Reverse Engineering
Applications Security	Secure Coding Architecture Design Configuration Workforce Security Contingency Plan
Operating Environment	System Hardware System Software Database Software System Capacity
Development Environment	Development Hardware Development Software
Software Development	High Level Design Detailed Design Job Control Code Unit Test
System and Acceptance Test	System Integration Test Pilot Test Interface Test Acceptance and Turnover Implementation
Data Management	Data Conversion Database Design

Oversight Area	Task Areas (IV&V Checklists)
Operations Oversight	Operational Change Tracking Customer/User Satisfaction Operational Goals Operational Documentation Ops. Processes and Activity

Table 9: Oversight and Task Area Checklists

Project Execution

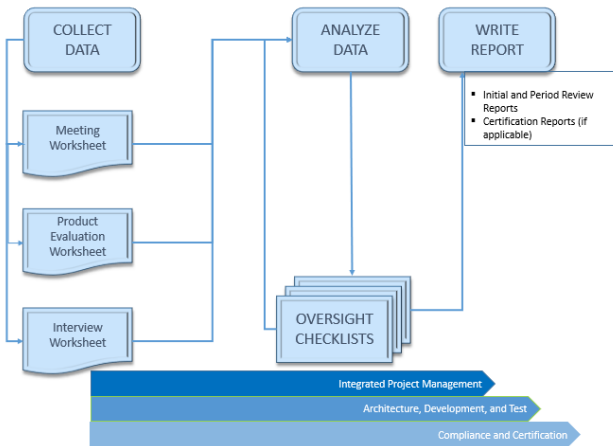
Here is a summary of our response to the SOW [B2b] Independent Assessment and Quality Assurance requirements:

	Requirements	SES Response
1	Must submit an IV&V Management Plan for each project assigned, which includes specific information on what the contractor will do, periodic reviews, timelines, anticipated resources, estimated hours, and estimated/actual budget information.	Appendix A Appendix B §2.3.5 §2.5 Organizational Staffing section.
2	Must actively participate in the projects and provide ongoing assessments of the projects to proactively identify risks, issues, and opportunities along with associated recommendations for the project team.	Requirement Approach to Organizational Staffing. §2.3.5 §2.3.7 §2.3.8
3	Must assess the progress of the projects against the planned schedules, budgets, and resource utilizations. This will include periodic assessment of the project plan/schedule on a monthly or quarterly basis (schedule will be determined based on what is appropriate for the project timeline)	§2.6 Appendix C Appendix D Appendix E Appendix K Appendix L
4	Must assess the projects' resources, managerial responsibilities, and governance structure to identify gaps and provide recommendations.	§2.3.5 Appendix C Appendix D Appendix E Appendix L
5	Must participate in all project meetings unless otherwise directed by DHHS.	Organizational Staffing section. §2.3.5 (Project Execution)
6	Must perform an independent assessment of issues where the implementation contractors and DHHS' project management organization disagree and provide the results of the assessment and recommendation to DHHS leadership.	§2.3.8 Appendix C Appendix H
7	Must perform one or more reviews of project deliverables and work products including but not limited to infrastructure, system documentation, design, working code, test scenarios, test cases, test results, plans, etc. and provide a detailed	Appendix C Appendix D Appendix E Appendix J

	Requirements	SES Response
	<p>assessment of the quality of the deliverables and work products along with recommended changes. Assessment must include a recommendation on whether DHHS should approve the work product or deliverable. Review must address at minimum the following attributes:</p> <ul style="list-style-type: none"> • Traceability and adherence to requirements • Clarity • Completeness • Consistency • Quality <p>Adherence to applicable laws, rules, and guidelines</p>	
8	Must assess project plans, processes and procedures to identify improvements and whether they are being followed.	§2.3.5 Appendix C Appendix E
9	<p>Must assess project change orders for the following:</p> <ul style="list-style-type: none"> • The change order is following the approved change management plan and processes. • The change order is within the scope of the existing contract. • Cost and resource estimates for the change order are reasonable. <p>Recommendations for alternate approaches to achieving the outcome of the change order.</p>	Agreed – Oversight checklist scope includes change management and scope management.
10	Must comply with IV&V regulatory requirements detailed in 45 CFR 95.626.	Agreed.
11	Must identify areas of un-necessary duplication and overlap between roles on the projects.	Agreed – our unified staffing approach ensures integrated data analysis for gaps and duplicates.
12	Must assess and verify requirement traceability throughout the project and system development lifecycle of the projects. Assessment and verification will occur periodically as appropriate for the project timeline	Agreed – included in our requirements management oversight checklist.
13	Must develop and monitor project performance metrics which allow tracking project completion against milestones.	Agreed. See Appendix C for sample of metrics reported. We will tailor in collaboration with you.
14	Must submit criteria for approval for defining a Critical Incident which could adversely affect the outcome of the projects.	Agreed. Project Startup tailoring.
15	Must notify the Department immediately when the IV&V Contractor discovers any Critical Incident. Provide a Contractor Critical Incident Report for each Critical Incident that summarizes the incident, how it may affect the project, notes any discrepancies found by the IV&V Contractor and provides a proposed action plan to resolve the incident and mitigate its impact.	Agreed – significant events including critical incidents will be reported immediately and included in the next weekly report.
16	Must interview and observe project management staff and developer staff and observe project meetings and activities to understand the process, procedures, and tools used.	§2.3.5 Our PM will coordinate site visit schedule, which includes interviews. We will attend all

	Requirements	SES Response
		required meetings either remotely or in person.
17	Must review and analyze all applicable and available documentation for adherence to accepted, contractually-defined industry standards.	Agreed – see Appendix D sample.

Here are the major steps of the SES IV&V process with respective inputs and outputs:



Data collection: SES gathers data from in interviews, meetings, and project deliverables and other artifacts.

Analysis: Careful analysis of available data determines the application of best practice implementation and effectiveness.

Reporting: The resulting observations, opportunities, risks, and issues are organized from the oversight area checklists and used as the primary input in writing deliverable reports to assist in MMIS monitor and control.

Figure 3: IV&V Process Flow

The three information sources used to conduct thorough IV&V are: Documentation, meeting attendance, and interviews. Together, they support effective assessments of project status and overall project wellness. SES proposes to attend key project meetings through a combination of remote and site visit collaboration. Please refer to the *Organizational Staffing* section of our proposal for more detail.

Attendance at meetings provides continuity and insight into the use and effectiveness of industry best practices. Meeting attendance will also increase our effectiveness when developing deliverable reports.

The diagram below summarizes a Streamlined Modular Certification (SMC) lifecycle for CMS compliance:

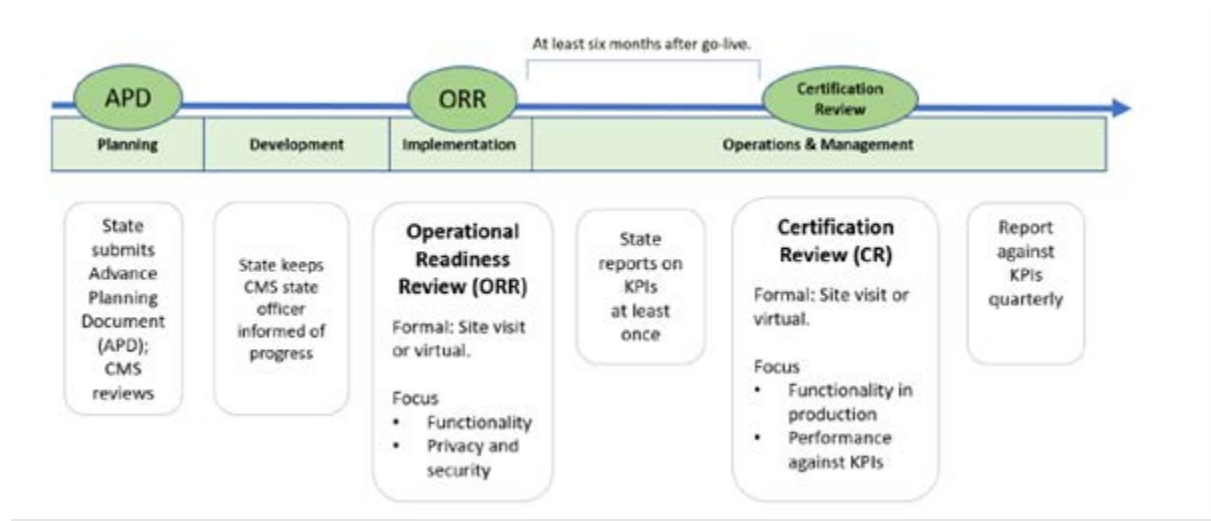


Figure 4: SMC Lifecycle for CMS Compliance

Post-Implementation Operations Oversight

Here is a summary of our response to the SOW [B5b] Operational and System Readiness requirements:

	Requirements	SES Response
1	Must assess project testing activities including test scenarios, cases, and results including traceability of testing to project requirements. Assessment must include whether additional test scenarios or cases are needed to sufficiently test the project requirements.	Agreed – testing oversight is included in our full set of IV&V checklists; a management sample is Appendix E. Appendix C for reporting. §2.3.5 for a table of all oversight task areas.
2	Must assess defect resolution and retesting activities to validate defect was appropriately resolved	Agreed – operations and operating environment oversight is included in our full set of IV&V checklists; a management sample is Appendix E. Appendix C for reporting. §2.3.5 for a table of all oversight task areas.
3	Must develop and submit a comprehensive System and Business Operations Readiness Review Plan work product for each project for Department approval a minimum of 90 days prior to the acceptance testing schedule date in the project work plan.	Agreed. Operations and operating environment oversight is included in our full set of IV&V checklists. Appendix M. Appendix N.
4	Must conduct a system and business operational readiness review and assessment and provide the results to DHHS.	Appendix N.

SES has two detailed groups of IV&V oversight checklist task areas that are dedicated to Operations Oversight and Operating Environment, respectively, and has been employing them on operations oversight for other state agencies whenever operations and maintenance are within

the scope of the IV&V contract. Additional tailoring is also employed, for example, in review and feedback on IV&V Comment Logs, Findings (Gaps), Risks, and Recommendations.

Appendix M provides a turnover plan template.

Appendix N provides a sample checklist used for readiness review analysis and reporting.

The color-coded diagram below conveys an outline of one IV&V Certification Progress Report process flow in the overall implementation and operational readiness processes that lead to successful CMS certification. By providing IV&V progress reports throughout project life cycles, DHHS will be enabled to proactively implement corrective actions as needed.

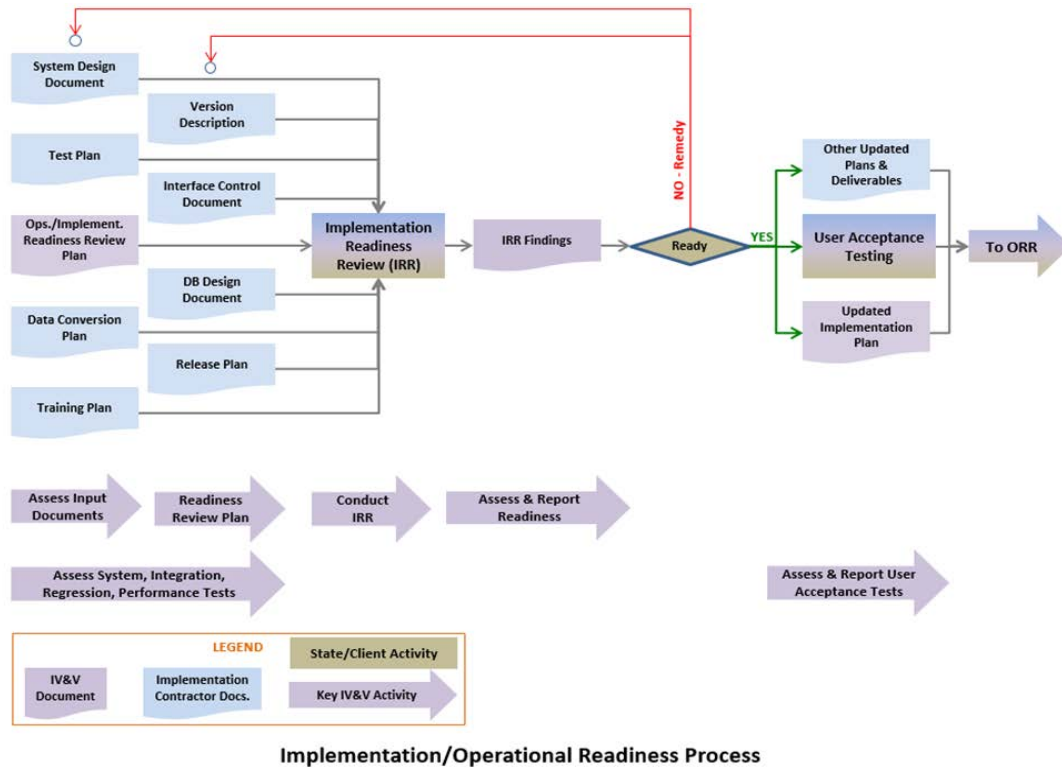


Figure 5: Implementation/Operational Readiness Process

2.3.6 Report Cycle and Quality Control

Here is a summary of our response to the SOW [B3b] IV&V Status Meetings and Reporting requirements:

	Requirements	SES Response
1	<p>Must prepare and submit a weekly status report including activities for the previous week and upcoming activities for the next two weeks that includes the following information:</p> <ul style="list-style-type: none"> Project meeting participation including an assessment of completed meetings and any recommendations 	<p>Agreed. Appendices K and L have samples of our weekly status report and reporting templates, respectively.</p>

	Requirements	SES Response
	<p>for improvement.</p> <ul style="list-style-type: none"> Planned project meetings for IV&V participation. Project deliverable review activities. Risks, issues, and opportunities which are new or have been updated since the previous submission. Updated IV&V schedule Critical incidents summarizing the incident, impact to the project, and a proposed action plan to address the incident. <p>Other IV&V activities as defined by DHHS.</p>	
2	<p>Must submit each weekly status report by the DHHS established day and time. DHHS will allow a minimum of one business day from the end of the weekly reporting period for submission.</p>	Agreed.
3	<p>Must facilitate a weekly IV&V status meeting with DHHS identified project leadership.</p>	Agreed. This will be included in our project work plan (schedule) during Startup activities.
4	<p>Must prepare and submit a maximum of five business days after month end a monthly IV&V report that includes the following:</p> <ul style="list-style-type: none"> Summary of IV&V activities for the past month. Summary of IV&V activities planned for the next month. IV&V assessment of the overall project, schedule, budget, scope, and quality status in comparison to the project teams' reported status clearly identifying any differences along with the reasoning. Additions or updates to executive level risks, issues, and opportunities along with further recommended actions. Summary assessment of project deliverables and work products reviewed in the last reporting period. <p>Other IV&V activities as defined by DHHS.</p>	Agreed. Appendix C is a sample of our similar MMIS reporting from another state.
5	<p>Must facilitate a monthly IV&V report meeting with DHHS identified leadership.</p>	Agreed. This will be included in our project work plan (schedule) during Startup activities.
6	<p>Must create the agenda and take the minutes for any IV&V meetings.</p>	Agreed.

SES will follow the reporting periods associated with project Phase Milestones for all

deliverables.

This graphic shows the summary process of gathering and consolidating data and producing IV&V reports.

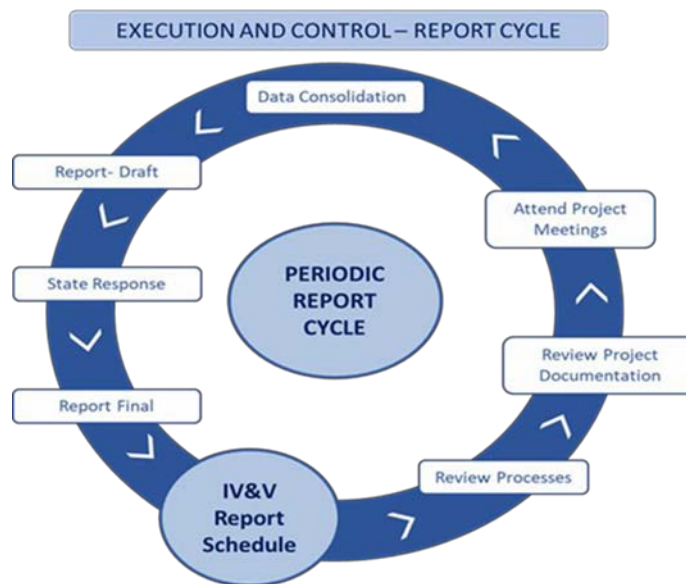


Figure 6: IV&V Report Process

Status Report Preparation

The periodic (e.g., monthly) reporting of overall project progress follows the standard process in the diagram above. Within the process is the standardized data collection and analysis shown in the IV&V process flow on the previous page.

- Data is collected by analyzing project deliverables (e.g., vendor deliverables) and other artifacts (e.g., meeting agendas and minutes, risk logs), and by attending project meetings.
- Further data collection occurs by scheduling concise interviews with project team members, as needed, to clarify data already collected.
- IV&V Team performs integrated data analysis across functional areas for further insight and to confirm preliminary findings.
- The IV&V Project Manager assembles a draft periodic report.
- Other team members and corporate QA staff perform a series of peer and quality reviews; the table below shows a common sequence for these deliverable tasks, and Appendix J – *IV&V Report Quality Checklist* is a primary resource used to identify improvements and provide feedback.

Report quality is managed using a standardized process of peer review and quality review; the following table summarizes our minimum internal deliverable preparation activity sequence.

SES IV&V Team Member	Deliverable Task
Project Manager	Initial draft report
Analysts	Section inputs
Project Manager	Consolidated draft
Program Manager	Peer review
Corporate QA	Final Review
Project Manager	Cleanup, reconcile inputs
Project Manager	Submit report

Table 10: SES IV&V Team Member and Deliverable Task

Determining Overall Project Progress

Reporting overall project progress is a bottom-up process. During data analysis the IV&V team updates existing and establishes any new opportunities and risks. In addition to analyzed data, primary guidance comes from the following tables to establish the probability, impact, and timeframe components for each opportunity and risk:

OPPORTUNITY/RISK COMPONENT DESCRIPTIONS

Probability of Occurrence

High	Highly confident the impact will occur	80% or greater certainty
Medium	Believes that the impact may occur	40% - 79% certainty
Low	Uncertain if the impact will occur	< 40% certainty

Impact of Occurrence

High	Major impact to quality, cost, and/or schedule
Medium	Significant impact to quality, cost, and/or schedule
Low	Measurable impact to quality, cost, and/or schedule

Time Criticality

Immediate	Could impact the project in the next two months
Short Term	Could impact the project in two to six months
Long Term	Could impact the project beyond six months

Exposure

Critical	Threatens existence of project if risk is realized. Requires executive or sponsor involvement to resolve.
High	Major impact to one or more project constraints (quality, cost, and schedule) if realized. May require executive or sponsor involvement to resolve/exploit.
Medium	Significant impact to at least one project constraint (quality, cost, and schedule) if realized.

	Can be mitigated/implemented without external assistance.
Low	Noticeable impact to at least one project constraint (quality, cost, and schedule) if realized. Can be mitigated/implemented without external assistance.

The IV&V team enters the next table below with the Opportunity/Risk components to arrive at an overall rating:

Opportunity/Risk Exposure Definition Matrix

Risk Exposure	Probability of Risk Occurrence	Impact of Risk Occurrence	Time Criticality
CRITICAL	High	High	Immediate or Short Term
HIGH	High	High	Long Term
	High	Medium	Immediate or Short Term
	Medium	High	Immediate or Short Term
MEDIUM	High	Medium	Long Term
	High	Low	Immediate or Short Term or Long Term
	Medium	High	Long Term
	Medium	Medium	Immediate or Short Term
	Medium	Low	Immediate
	Low	High	Immediate
	Low	Low	Immediate
LOW	Medium	Low	Short Term or Long Term
	Low	High	Short Term or Long Term
	Low	Medium	Immediate or Short Term or Long Term
	Low	Low	Immediate or Short Term or Long Term

The IV&V report is typically organized around Practice Groups, for example, practices for Planning and Managing the project may be a Practice Group. IV&V team then considers any additional observations and factors to complete a Practice Group table; here is a sample of the results of such an analysis:

Practice Area -->		Estimating	Planning	Monitoring and Controlling
<i>Practices are Documented</i>	<i>Previous Report</i>	Largely	Largely	Largely
	<i>This Report</i>	Largely	Largely	Largely
	<i>Trend</i>	◀Neutral▶	◀Neutral▶	◀Neutral▶
<i>Practices are Implemented</i>	<i>Previous Report</i>	Largely	Partially	Partially
	<i>This Report</i>	Largely	Largely	Largely
	<i>Trend</i>	◀Neutral▶	▲Positive▲	▲Positive▲
<i>Practices are Effective</i>	<i>Previous Report</i>	Largely	Partially	Partially
	<i>This Report</i>	Largely	Largely	Largely
	<i>Trend</i>	◀Neutral▶	▲Positive▲	▲Positive▲

Table 11: Planning and Managing Assessments

Legend

Largely	Partially	Not	Not Assessed
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Finally, the IV&V Team assesses the impact of the status of all Practice Groups on the overall project status, and the results are organized around the project constraints (e.g., schedule, quality, scope); here is an example:

Constraint Category	Project Status			
	Previous Report	This Report	Trend	Note
Quality			◀Neutral▶	-
Schedule			◀Neutral▶	-
Scope			◀Neutral▶	-

Table 12: Project Health Dashboard

Ensuring MMIS Quality

SES manages a refined and robust set of oversight checklist questions in a checklist area dedicated to quality assurance oversight. Each deliverable is reviewed and analyzed against standardized characteristics and criteria that can be organized into discrete areas:

- Overall product quality
- Alignment to project objectives
- Fidelity to State (and federal) requirements
- Compliance with certification requirements (if any)
- Adherence to the Project Plan
- The end result is repeatable and predictable quality assessments.

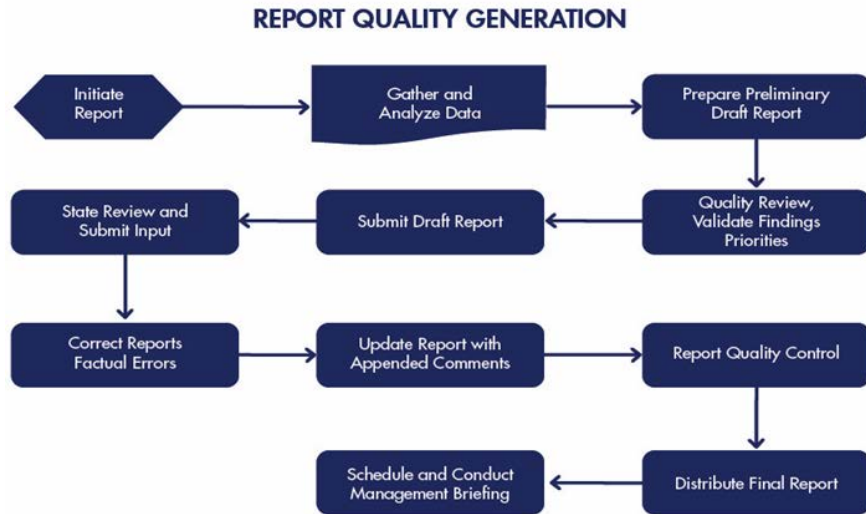


Figure 7: Report Quality Generation

2.3.7 Increased Awareness ← → Reduced Risk

IV&V will report risks discovered throughout the MMIS Modernization project including CMS

Certification Progress Reviews in the Progress Reports as required for the Medicaid Enterprise Certification Lifecycle and CMS Streamlined Modular Certification (SMC) or CMS Outcomes Based Certification (OBC).

A key focus area of our approach is to increase risk awareness risks so mitigation activity can be performed, but beyond that, to proactively identify opportunities to *avoid risk* in the future.

- **Risk** - A potential problem or threat that could affect the program's ability to meet its performance, cost, schedule, financial, or other objectives

➔ What Might Go Wrong?

- **Opportunity** - A potential enhancement or positive impact that could improve the program's ability to meet its performance, cost, schedule, financial, or other objectives

➔ What Might Be Improved?

Threats and Enhancements to our Objectives

Opportunity: Positive Risk

Virtually every risk has an implied opportunity. Furthermore, enhancements that have positive impact on project schedule, scope, cost, quality, or objectives and requirements present opportunities that should be analyzed; if the opportunity is great enough and the probability of success is high enough compared to the cost (in resources and/or dollars), then an action plan should be developed to take advantage of the benefits.

Please refer to Appendix I – *Sample of Prior Opportunities* to review recent opportunities reported by our State Government IV&V team on other projects.

Our risk management approach is executed as a continuous, forward-looking process as shown below.

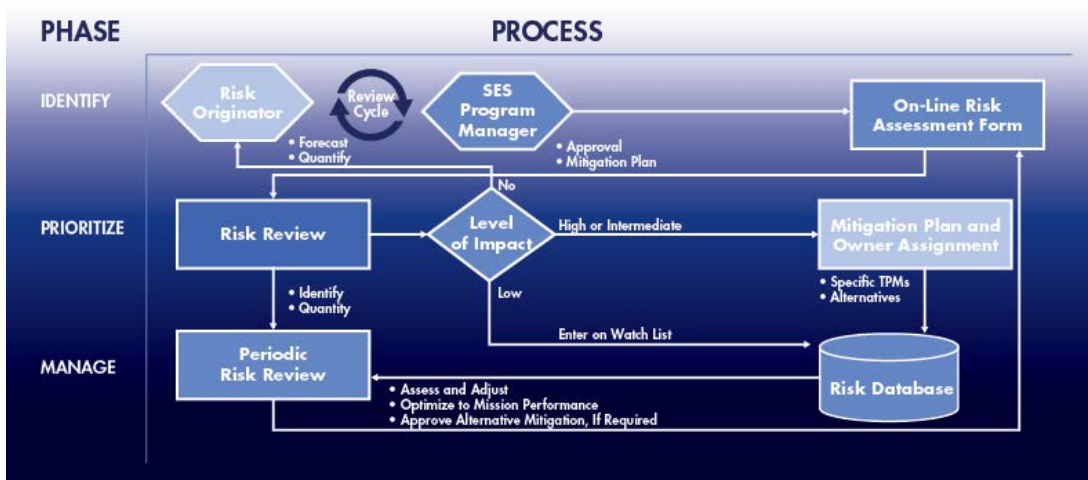


Figure 8: Risk Management Approach

To have an effective risk management program, our methodology is designed to:

- Address items that could endanger mission-critical objectives.
- Provide continuous insight that can be acted upon to mitigate risks with critical impact across the project life cycles.
- Encourage early and aggressive risk identification, and advocate for collaboration with all relevant stakeholders.
- Create and establish an environment where the team can participate in free and open disclosure and discussion of risk.

The following table lists expected risk management processes, tools, and templates:

CMMI® COMPLIANT RISK MANAGEMENT PROCESS		
SES Risk Management Process Description		
	Prepare for Risk Management Sub-process	
	Determine Risk Sources and Categories	
	Define Risk Parameters	
	Establish a Risk Management Strategy	
	Identify and Analyze Risks Sub-Process	
	Identify Risks	
	Evaluate, Categorize and Prioritize Risks	
	Mitigate Risks Sub-Process	
	Develop Risk Mitigation Plans Strategy (SP 3.1)	
	Implement Risk Mitigation Plans (SP 3.2)	
	Risk Management Key Inputs and Outputs	
	Risk Register (Risk Log)	
Risk Questionnaire		
Short Risk Taxonomy		
Risk Summary Report (Monthly IV&V Status Reports)		

Table 13: Expected Risk Management Processes, Tools and Templates

IV&V will track risks in status reporting; risks identified by IV&V *always* contain mitigation recommendations, and the status of each from IV&V perspective.



When assigning risk exposure ratings for reporting purposes, we consider probability of occurrence and potential impact as described in §2.3.6 above.

To summarize the results of our analysis and Opportunity/Risk scoring, we have included a sample risk from a prior IV&V report.

Risk Number	{REDACTED}			
Risk Description				
<p>There is a risk that...</p> <p>Test execution; applying defect fixes; and successful re-testing will not be completed in time for scheduled Releases. There will not be sufficient time for the new UAT Team to prepare plans; develop test scripts/cases; validate previous and current Program Increments and perform thorough UAT test planning and management.</p> <p><u>Progress this quarter</u> included:</p> <ul style="list-style-type: none"> ✓ Vendor staff have stepped up to lead and manage UAT ✓ UAT Tester-SMEs were identified and integrated into test activities ✓ UAT vendor presented a Plan (slide deck) with Entry/Exit criteria and staffing ✓ One UAT Closure memo (Sprint level) indicated a sign-off by the DVS Test Lead 				
Mitigation Recommendation				
<ol style="list-style-type: none"> 1. {REDACTED} approval of and adherence to a UAT Plan that includes Solid Entry and Exit criteria; roles and responsibilities; staffing; product acceptance (Go/No-Go) procedure using approved UAT Exit criteria; and written appointment of a Business resource as UAT Test Manager. 2. UAT Entry requires {REDACTED} Director or appointed Test Manager approval (e.g., memorialize in the Decision List). 3. UAT Exit occurs when the Test Manager agrees the product meets intended functionality, and remaining defects have acceptable workarounds. 4. UAT Exit is based on Exit Criteria, not a prescribed date to remain on schedule. 5. UAT Plan has a detailed schedule that explicitly includes time for defect correction and re-testing. <p>See also Risk {REDACTED}.</p>				
Risk Analysis	Probability of Occurrence	Impact of Occurrence	Time Criticality	Overall Risk Exposure
This Reporting Period	Medium	High	Immediate	HIGH
Previous Reporting Period	High	High	Short-Term	URGENT

Table 14: Sample Risk from Prior IV&V Report

2.3.8 Issue Management

Despite the best attempts to mitigate or avoid them, some risks will be realized and by definition become project issues. Further, if a risk is not identified and therefore no attempt is being made to mitigate against it, a project issue can arise.

IV&V maintains an internal issue log as the essential tool to support issue management. The Log enables proper tracking, escalation, and resolution of every issue identified. After identification, IV&V tracks its life cycle primarily through the Issue Log. Issues of sufficient impact and visibility will be followed by stakeholders since they will be analyzed in each IV&V status report.

The following table represents the relationship of the Issue Scoring Process and the resultant Issue Rating. Also included are typical issue escalation procedures, though IV&V will tailor according to each project’s organizational structure and needs.

Rating	Characterization	Recommended Escalation
Critical	Profound negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project	To: Executive Leadership From: PMO and or Project Manager(s)
High	Significant negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project	To: PMO From: Project Manager and/or Business owner
Medium	Moderate negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project	To: Project Manager / Business Owner From: Business owner / Issue Identifier
Low	Minor negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project	To: Business Owner From: Issue Identifier

Table 15: Issue Scoring Process and Issue Rating

Please also refer to Appendix H for an outline of more detailed issue management procedures.

2.4 TECHNICAL CONSIDERATIONS

Here is a summary of our response to the SOW [B4b] CMS and MITA requirements:

	Requirements	SES Response
1	Must provide IV&V services for CMS in support of the MECL in accordance with guidance released in the MECL and guidance from CMS regarding Outcomes-Based Certification (OBC).	Agreed - §2.4.1.
2	Must periodically, as needed, produce exception-based Certification Progress Reports in the format required by CMS. The report must utilize the MECL checklists and MMIS Critical Success Factors (CSFs) and must objectively illustrate the strengths and weaknesses of the project and provide recommendations for correcting any identified weakness.	Agreed. §2.4.1 Appendix F.
3	Must submit the monthly IV&V report to CMS.	Agreed.
4	Must participate in meetings with CMS as directed by CMS or DHHS.	Agreed.
5	As directed by DHHS, must coordinate and participate in the planning, preparation, and performance of CMS project reviews (readiness reviews, certification reviews, etc.).	Agreed. §2.4.1
6	In preparation for certification milestone reviews, must evaluate documents and evidence along with	Agreed. Appendix F.

	Requirements	SES Response
	any working modules / code applicable to that particular review, and complete the reviewer comments portion of the relevant Medicaid Enterprise Certification Checklists. The completed checklists are appended to the Certification Progress Report. Progress report must be delivered with the necessary lead time as required by CMS prior to the scheduled MMIS the same time they are presented to the state.	Appendix C.
7	Must periodically submit project progress data to the CMS dashboard on a schedule required by CMS.	Agreed.
8	Must assess impacts of projects to MITA business, informational, and technical architecture maturity.	Agreed. §2.4.1
9	Must track traceability of project activities and requirements through the entire project to CMS critical success factors and certification checklist criteria as applicable to the project to secure ongoing enhanced funding.	Appendix C. Appendix D. Appendix E. Appendix J.
10	Must perform all functions required by CMS for all CMS reviews.	Agreed.
11	Must coordinate certification activities for the project. Must evaluate and make recommendations about the state artifacts that are required for MMIS certification milestone reviews.	Agreed. §2.4.1
12	Must review all new or updated documentation, guidance, and rules promulgated by CMS applicable to the project and provide summary impacts to the project along with any recommendations.	Agreed. §2.4.1
13	Must perform any IV&V services and roles required by CMS or DHHS necessary to secure the enhanced funding.	Agreed. §2.4.1

Below is a summary of areas to consider due to their importance to the planned MMIS work, and how SES excels in each.

2.4.1 Experience with CMS

We understand the criticality of maintaining maximum federal funding for NE MMIS, and that our reporting must adhere to CMS requirements: *Our progress reporting follows all CMS guidelines; we will work with you and CMS to tailor all reports as needed to ensure all IV&V reporting requirements are met.*

The CMS transition process to Streamlined Modular Certification (SMC) is relatively recent, yet we are already providing MMIS IV&V to the State of Kansas as they progress with a hybrid modular implementation using components of SMC and the CMS MECT; also, we completed

an MMIS IV&V engagement with the State of Alabama as a pilot State for SMC. It is



noteworthy that both States exercised at least one option year on our IV&V contracts.

SES understands it is a prime objective to secure the maximum available, enhanced CMS funding. Our CMS reports are built to meet this objective; we have integrated the Seven (7) Conditions and Standards from CMS into our oversight checklists, and are highly skilled and experienced with CMS certification progress reporting requirements and checklists:

Medicaid, Eligibility and Enhanced Funding Task Areas	
MITA Modularity	Modular, flexible development approach; open interfaces; exposed API; business rules separate from core programming; rules are in human and machine-readable formats. Formal system development methodology; open, reusable architecture
MITA Condition	Aligns to and advances increasingly in MITA maturity for business, architecture, and data
MITA Industry Standards	Industry standards alignment; HIPAA security/privacy/transaction standards; Section 508 or greater accessibility; civil rights laws compliance; Sections 1104 and 1561 ACA standards
MITA Leverage	Solutions promote sharing, leverage, and reuse of Medicaid technologies and systems within and among States
MITA Business Results	Systems support accurate and timely claims processing including eligibility claims and adjudications; there are effective communications with providers, beneficiaries, and the public
MITA Reporting	Solutions produce transaction data, reports, and performance information that contribute to program evaluation, continuous improvement in business operations, and transparency and accountability
MITA Interoperability	Seamless coordination and integration with the federal/state Exchange; interoperable with health information exchanges, public health agencies, human services programs, and community outreach organizations

Table 16: Seven (7) Conditions and Standards from CMS

SES monitors CMS for documentation, guidance, and regulations in continuous IV&V oversight activities:

- As IV&V vendor SES remains current on proposed and modified regulations through CMS websites and the annual Medicaid Enterprise Systems Conferences.
- IV&V Checklists are built around industry best practices, government regulations and guidance).
- Plans, coordinates, and reviews specific documentation/deliverables for CMS.
- Assists NE MMIS to prepare for CMS Reviews and certifications on as needed to ensure



that NE MMIS successfully meets CMS regulations.

A complete vision should also plan for inevitable change imposed on IV&V requirements by sponsors, which frequently cannot be accurately forecast. SES has both ongoing and recently concluded IV&V engagements where the federal government imposed significant change to project management framework that impacted our state clients. Because of our experience with the federal partner, SES was able to advise and assist our clients in getting and staying in front of the industry through replanning their scopes and schedules, which resulted in:

- State of Alabama MMIS conducted their R2 review ahead of schedule and met (passed) more than 90% of CMS requirements on the initial Review.
- State of Kansas MMIS partnered with SES on a hybrid MECT/Streamlined Modular certification that gained CMS approval and maintained enhanced funding.
- State of Minnesota MMIS relied on SES for attestations that demonstrated CMS compliance and the resulting successful health insurance exchange Go-Live.

The key point in the successes above was our ability to be flexible and to collaborate with our state partners.

2.4.2 Knowledge of Requested Services and Deliverables

The majority of our IV&V work has been with Health and Human Service state agencies, including IV&V for MMIS modernization projects. Additionally, we have provided IV&V, Project Management Office (PMO), Quality Assurance (QA), Organizational Assessment, and management monitoring of IT systems for other social programs including Health Insurance Exchange (HIX), Eligibility and Enrollment for Temporary Assistance for Needy Families (TANF), Supplemental Nutrition Assistance Program (SNAP), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), Child Support Services, Economic and Employment Services, Prevention & Protection Services, and Rehabilitation Services.

We have participated and provided IV&V oversight to states to plan, conduct, and manage post readiness review work:

- CMS Certifications used both CMS Medicaid Enterprise Certification Checklists (MECT) and Streamlined Modular Certification (SMC)/ Outcomes-Based Certification (OBC).
- Assisting states for Operational Milestone Reviews (R2) and MMIS Certification Final Reviews (R3).
- Exclusive use of the MECT approach and checklists.
- Hybrid certification approach (some modules using MECT checklists and some using the SMC/OBC approach and intake forms).

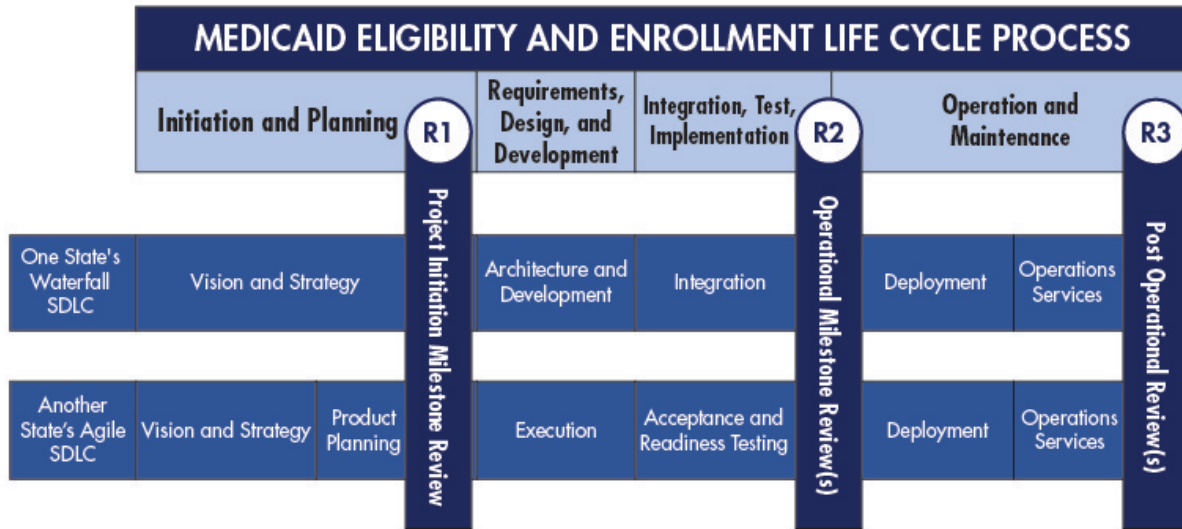


Figure 9: Medicaid Eligibility and Enrollment Life Cycle Process

We are currently helping to define the hybrid certification approach and acceptable evidence and demonstrations for the Kansas Modular Medicaid System (KMMS) R2 certification and a total SMC/OBC approach for the KMMS R3 certification review. *We will bring this experience to bear for the NE MMIS project.*

The non-MMIS state agencies for whom SES has provided IV&V services have further broadened our perspective on effective oversight; they include: Office of Attorney General (OAG), Department of Law Enforcement (DLE), Department of Health and Environment (DHE), Department of Children and Families (DCF), Department of Commerce, Office of Superintendent of Insurance, Department of Social Services (DSS), HealthNet Division (HD), and Departments of Motor Vehicles (DMV).

CMS Expectations and Compliance

CMS expects the IV&V vendor to comply with the 45 CFR §95.626 requirements for IV&V, which include:

- The IV&V vendor must be independent of any relationship with the other vendors and their subcontractors who are involved with the project and supporting the state. This includes any integration, DDI, and PMO entities.
- IV&V must provide the named Key personnel specified in their proposal.
- IV&V must complete the IV&V column of the CMS checklists, following the most current guidance and instructions from CMS for the certification approach and scope agreed to between the state and CMS.
- IV&V must submit all reports simultaneously to CMS and the state client.

Progress reporting follows CMS life cycle requirements. Refer to Appendix F – CMS Certification Progress Report, for a template that we have successfully used on other recent

MMIS engagements; we followed the CMS MECT instructions on completing the template. We will work with NE DHHS and CMS to tailor this report as needed to ensure all current certification reporting requirements are met by SES as the IV&V vendor. The Appendix F content is intended to supplement – not replace – the other deliverable requirements for weekly and monthly reporting.

The SES IV&V Team will assist in determining the appropriate CMS Checklist set that best fits the DHHS approach, customized by DHHS, and approved by CMS.

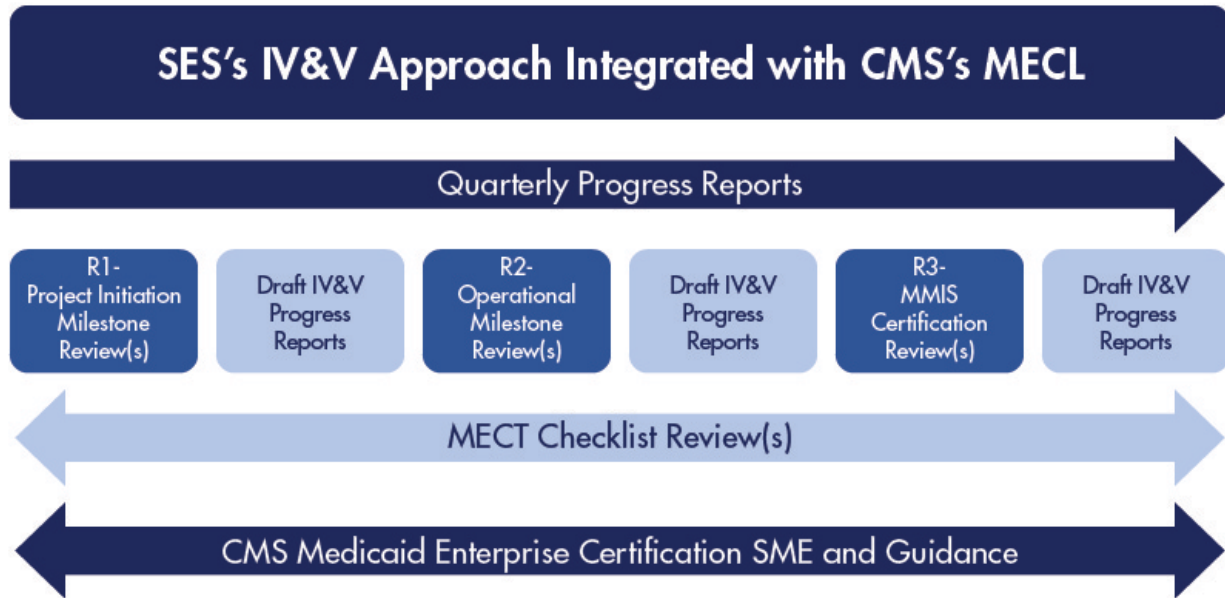


Figure 10: IV&V Approach Integrated

IV&V will use the selected checklist set to assist in the preparation of the MMIS Certification Progress Report to be submitted prior to Milestone Reviews or on at least a quarterly or semi-annual basis, as agreed to by the State and CMS. Part of these reports for Milestone Reviews will include a review of required artifacts appropriate for each milestone as outlined in the MECT's Appendix B – Required Artifacts List, or successor streamlined modular (outcome-based) certification approach. The following figure shows the flow of checklists through the Project Initiation Milestone Review, Operational Milestone Review(s), and the MMIS Certification Final Review:

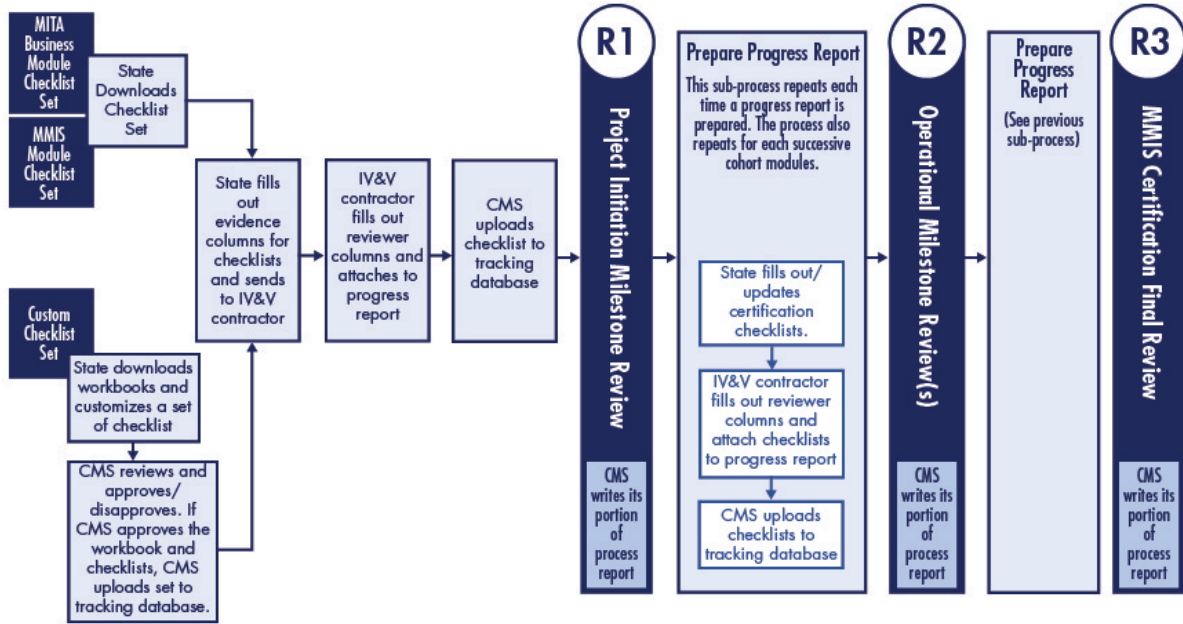


Figure 11: Medicaid Enterprise Certification Life Cycle

Following is the activity process flow for MMIS Certification and Certification Progress Reporting:

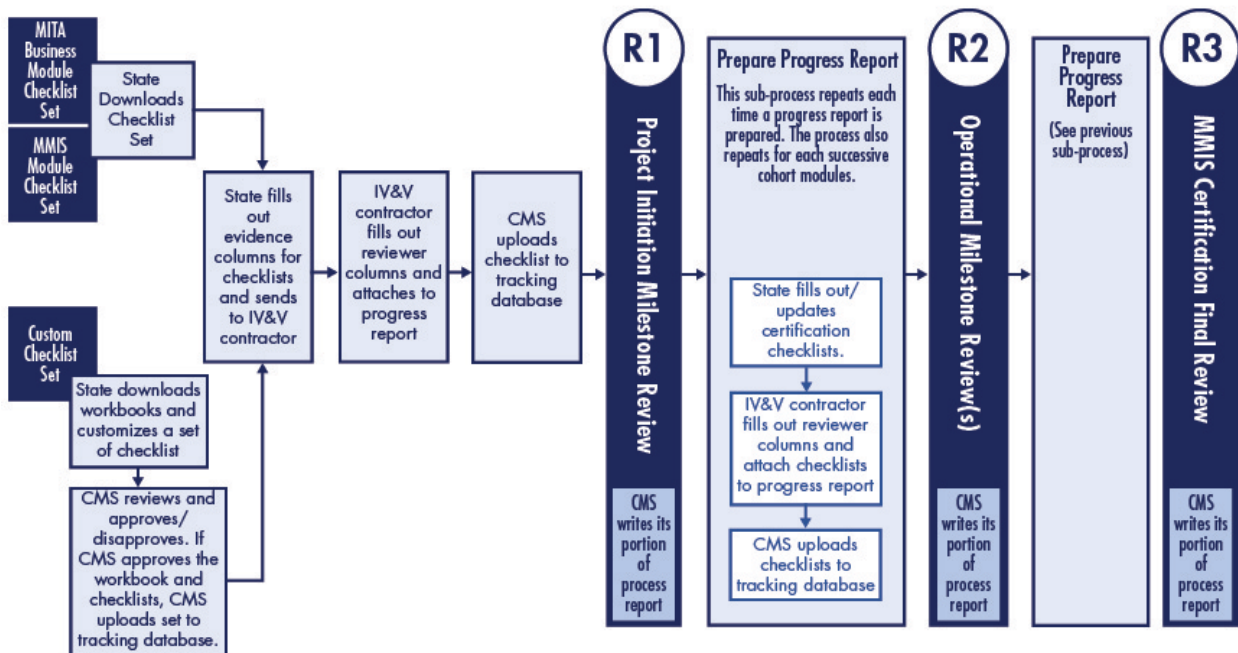


Figure 12: MMIS Certification and Certification Progress Reporting

2.5 DETAILED PROJECT WORKPLAN

During the project startup we tailor an IV&V Project Management Plan, which is a narrative plan covering the scope, schedule, staff, communications, quality, risk, and issue approach for managing the IV&V team. It includes a separate MS Project Work Plan, which is a comprehensive project schedule in work breakdown structure (WBS) format. Each work package is decomposed into discrete tasks with durations 10 days or less. In turn, each task:

- Is resourced by one or more IV&V resources.
- Is sequenced as a successor task as applicable to reflect its dependency on other task(s), thereby producing a reliable estimate of the IV&V critical path of work.
- Is tailored to the cadence of phases and milestones of your project.

We will submit both the management plan and the work plan for approval during the project startup period. Please refer to Appendix B for a sample of our IV&V schedule from another MMIS IV&V engagement.

2.6 DELIVERABLES AND DUE DATES

Here is a summary of our response to the SOW [B6b] Deliverables and Work Products requirements:

	Requirements	SES Response
1	<p>For each project, must fulfil all IV&V contractor responsibilities and submit a monthly deliverable including activities and work products completed within the month:</p> <ul style="list-style-type: none"> • The monthly IV&V report • Weekly status report materials for the month • IV&V project work product and deliverable assessments completed within the month • Critical incident reports • Requirement’s traceability matrix updates • CMS and MITA compliance activities • IV&V work plan updates <p>IV&V work products</p>	<p>Agreed. §2.6. Appendix C. The IV&V team updates CMS checklists (described in §2.4.2) for all requirements being tracked and maintains copies of all traceability updates.</p>
2	<p>Must perform work and submit work products and deliverables for State review and approval in accordance with the approved IV&V work plan scheduled dates.</p>	<p>Agreed.</p>
3	<p>Must provide a tracking capability for tracking of work product and deliverable submission and review status.</p>	<p>Agreed. The IV&V PM retains deliverable tracking numbers, and review, submittal, and approval dates.</p>
4	<p>Must submit any changes to previously approved deliverables for approval through the review process.</p>	<p>Agreed.</p>

Deliverable Reporting

The SES IV&V Project Manager is responsible for all IV&V deliverable reports. To protect the integrity and confidentiality of reporting on NE MMIS projects, the IV&V PM will *only submit reports to the persons identified in writing by the State Contract Manager* or his/her designated representative (e.g., Project Manager). IV&V PM will comply with any additional submittal instructions, for example, to submit electronically or in printed form.

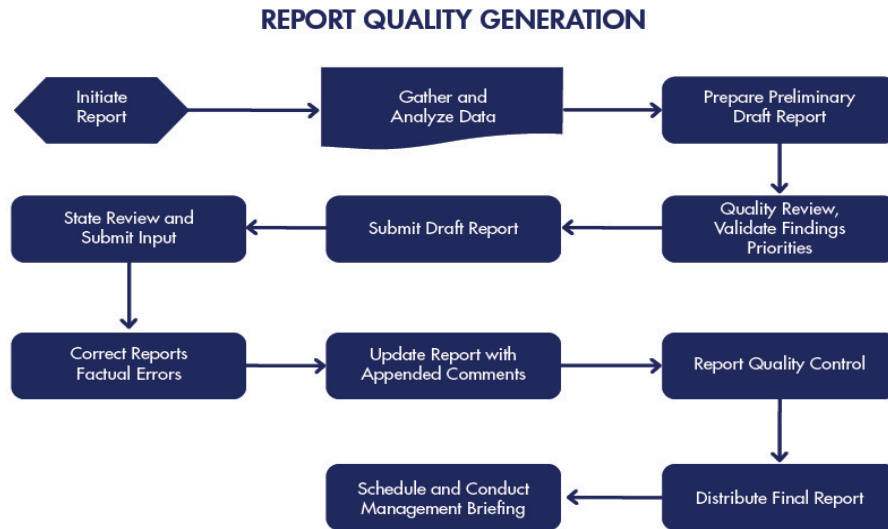


Figure 13: Deliverable Submittal and Approval Process

SOW ID	DELIVERABLE	SCHEDULE / FREQUENCY	NOTE
Pg. 30 B.1.b Requirements table	IV&V Management Plan for each project.	Initial – Within 30 days of contract award. Periodic – Monthly update.	Includes IV&V Schedule. Weekly schedules will coordinate IV&V activity per the most recent Schedule.
Pg. 32 B.2.b Requirements table #15	Critical Incident Report	Whenever an incident meets agreed-upon Critical threshold.	
Pg. 33 B.3.b Requirements table	Weekly Status Report	Weekly as established with DHHS.	Includes facilitation of weekly status meeting w/DHHS.
Pg. 33 B.3.b Requirements table	Monthly Status Report	NLT 5 th business day of the month following reported month.	Includes facilitation of monthly status report meeting w/DHHS.

SOW ID	DELIVERABLE	SCHEDULE / FREQUENCY	NOTE
Pg. 34 B.4.b Requirements table	Certification Progress Report	As needed to support CMS certification requirements.	In CMS-prescribed format. Includes participation in CMS meetings as directed. Includes CMS dashboard submittals.
Pg. 35 B.5.b Requirements table	System and Business Operations Readiness Review Plan	90 days before scheduled acceptance testing.	
Pg. 36 B.6.a Requirements table	One deliverable for approval, representing all IV&V activities per project: <ul style="list-style-type: none"> • Monthly IV&V Report • Weekly Status report materials • Assessments of deliverables and work products • Critical Incident Reports • Updated Requirements traceability Matrix • CMS and MITA compliance activities • IV&V work plan updates • IV&V work products 	Monthly.	Represents fulfillment of all IV&V responsibilities for the month. Includes additional work products, e.g., agenda and minutes of IV&V meetings, interviews.

Table 17: Deliverable Summary

2.2 Organizational Staffing

2.2.1 Requirement Approach

Requirements Approach

Here is a summary of our response to the SOW [C2] Organizational Staffing requirements:

	Requirements	SES Response
1	Must provide an organizational structure which reflects coordinated activities among DHHS, IV&V, and other contractors.	Agreed. The organizational structure of our team is shown in the organizational chart below.
2	Must provide criminal background investigations on all personnel and follow-up investigations every five years. Must report an individual who have criminal activity identified to DHHS.	Agreed.
3	Must provide all key positions identified IV.C.1.,	Agreed. The IV&V team includes all key positions listed in the RFP.
4	Must maintain an Organizational Chart and project contact list.	Agreed.



	Requirements	SES Response
5	Must acquire DHHS approval for key staff and key staff replacements.	Agreed.
6	Must not reassign or replace key personnel without the prior written approval of DHHS.	Agreed.
7	Must provide monthly IV&V staff as proposed.	Agreed. Our proposed Staffing plan demonstrates utilization of our entire IV&V team.



Staffing Plan

Our team synergy and wealth of experience and knowledge is considerable given our numerous shared engagements. The Staff Experience matrix below illustrates the comprehensive number of projects and experience each skilled member brings to the NE MMIS IV&V team. Most of our proposed staff are SES employees and a few trusted consultants. SES fully understands that our proposed team will be the same people utilized to perform the actual work and no modifications to our staffing plan would be made without prior approval from the State.

PROJECT EXPERIENCE	Jim Moudry	Brittany McNair	Raj Sharma	Norm Mandy	Naquisha Smith	Cyrille Dabila	Michelle Shores	Kathy Hoglund	Nina Terhaar	Yolanda Fears	PROJECT(S)
1. Project oversight and assessment for a large enterprise grade IT initiative	18	8	10	18	8	3	12	18	20	6	TX MMIS IV&V, MO MMIS IV&V, KS MMIS IV, AL MMIS IV&V, MNsure IV&V, MNLARS IV&V, NM HIX IV&V, FL CAMS IV&V, FL OAG IV&V, FL DLE IV&V, IA MMIS IV&V
2. MITA framework compliance assessment for an IT initiative	6	3	8	3	3	-	4	15	5	6	AL MMIS IV&V, MO MMIS IV&V, KS MMIS IV&V, TX MMIS IV&V
3. SDLC assessment for large scale MMIS	8	4	10	4	6	3	9	15	17	6	TX MMIS IV&V, MO MMIS IV&V, KS MMIS IV, AL MMIS IV&V, IA MMIS IV&V
4. Data management and security assessment for large scale MMIS	10	3	9	6	4	3	9	18	20	-	TX MMIS IV&V, MO MMIS IV&V, KS MMIS IV, AL MMIS IV&V, IA MMIS IV&V
5. Performance metrics measurement and executive level reporting	22	10	10	18	8	-	15	15	20	6	TX MMIS IV&V, MO MMIS IV&V, KS MMIS IV, AL MMIS IV&V, MNsure IV&V, MNLARS IV&V, NM HIX IV&V, FL CAMS IV&V, FL OAG IV&V, FL DLE IV&V



PROJECT EXPERIENCE	Jim Moudry	Brittany McNair	Raj Sharma	Norm Mandy	Naquisha Smith	Cyrille Dabila	Michelle Shores	Kathy Hoglund	Nina Terhaar	Yolanda Fears	PROJECT(S)
6. Process maturity audits and recommendations for large scale MMIS	15	4	8	6	4	5	9	18	5	6	TX MMIS IV&V, MO MMIS IV&V, KS MMIS IV, AL MMIS IV&V

Table 18: SES IV&V Staff Experience Matrix



Below are staffing plans structured for each project beginning with contract start date in January 2022. We believe our hybrid staffing approach will efficiently provide oversight for the project while offering significant cost savings to the State.

EVV STAFFING – 1 st THREE MONTHS		JAN '22			FEB '22				MAR '22			
Resource	Position	1/17	1/24	1/31	2/7	2/14	2/21	2/28	3/7	3/14	3/21	3/28
Jim Moudry (KEY)	IV&V Lead	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Brittany McNair (KEY)	IV&V Project Manager	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Raj Sharma (KEY)	Sr. Business Analyst & Cert. SME	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Naquisha Smith (KEY)	Sr. Test & Security Analyst	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Kath Hogle (KEY)	Enterprise Architect	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
SME POOL												
Norm Mandy (KEY)	IV&V Project Manager	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Cyrille Dabila	Cloud Development SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Yolanda Fears	MITA SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Michelle Shores	Eligibility SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Nina Terhaar	IT Architect & Certification SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support

LEGEND	Onsite	NE Offsite Support	Available Offsite
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Table 19: EVV Staffing Plan

INTEROP. STAFFING – 1 st THREE MONTHS		JAN '22			FEB '22				MAR '22			
Resource	Position	1/17	1/24	1/31	2/7	2/14	2/21	2/28	3/7	3/14	3/21	3/28
Jim Moudry (KEY)	IV&V Lead	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Brittany McNair (KEY)	IV&V Project Manager	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Raj Sharma (KEY)	Sr. Business Analyst & Cert. SME	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Naquisha Smith (KEY)	Sr. Test & Security Analyst	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Kath Hoglund (KEY)	Enterprise Architect	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
SME POOL												
Norm Mandy (KEY)	IV&V Project Manager	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Cyrille Dabila	Cloud Development SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Yolanda Fears	MITA SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Michelle Shores	Eligibility SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Nina Terhaar	IT Architect & Certification SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite

LEGEND	Onsite	NE Offsite Support	Available Offsite

Table 20: Interop Staffing Plan

IE&E/BM STAFFING – 1 st THREE MONTHS		JAN '22			FEB '22				MAR '22			
Resource	Position	1/17	1/24	1/31	2/7	2/14	2/21	2/28	3/7	3/14	3/21	3/28
Jim Moudry (KEY)	IV&V Lead	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Brittany McNair (KEY)	IV&V Project Manager	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Raj Sharma (KEY)	Sr. Business Analyst & Cert. SME	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Naquisha Smith (KEY)	Sr. Test & Security Analyst	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite



IE&E/BM STAFFING – 1 st THREE MONTHS		JAN '22			FEB '22				MAR '22			
Resource	Position	1/17	1/24	1/31	2/7	2/14	2/21	2/28	3/7	3/14	3/21	3/28
Kath Hogleund (KEY)	Enterprise Architect	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
SME POOL												
Norm Mandy (KEY)	IV&V Project Manager	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Cyrille Dabila	Cloud Development SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Yolanda Fears	MITA SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Michelle Shores	Eligibility SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Nina Terhaar	IT Architect & Certification SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support

LEGEND	Onsite	NE Offsite Support	Available Offsite
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Table 21: IE&E/BM Staffing Plan

POS DRUG STAFFING – 1 st THREE MONTHS		JAN '22			FEB '22				MAR '22			
Resource	Position	1/17	1/24	1/31	2/7	2/14	2/21	2/28	3/7	3/14	3/21	3/28
Jim Moudry (KEY)	IV&V Lead	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Brittany McNair (KEY)	IV&V Project Manager	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Raj Sharma (KEY)	Sr. Business Analyst & Cert. SME	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Naquisha Smith (KEY)	Sr. Test & Security Analyst	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
Kath Hogleund (KEY)	Enterprise Architect	Onsite	NE Offsite Support	Onsite	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	Onsite
SME POOL												
Norm Mandy (KEY)	IV&V Project Manager	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Cyrille Dabila	Cloud Development SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Yolanda Fears	MITA SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Michelle Shores	Eligibility SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support
Nina Terhaar	IT Architect & Certification SME	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support	NE Offsite Support

LEGEND	Onsite	NE Offsite Support	Available Offsite
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Table 22: POS Drug Staffing Plan



HITECH ► MES STAFFING – 1 st THREE MONTHS		JAN '22			FEB '22				MAR '22			
Resource	Position	1/17	1/24	1/31	2/7	2/14	2/21	2/28	3/7	3/14	3/21	3/28
Jim Moudry (KEY)	IV&V Lead	Onsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Brittany McNair (KEY)	IV&V Project Manager	Onsite	Available Offsite	Onsite	Available Offsite	Available Offsite	Available Offsite	Onsite	Available Offsite	Available Offsite	Available Offsite	Onsite
Raj Sharma (KEY)	Sr. Business Analyst & Cert. SME	Onsite	Available Offsite	Onsite	Available Offsite	Available Offsite	Available Offsite	Onsite	Available Offsite	Available Offsite	Available Offsite	Onsite
Naquisha Smith (KEY)	Sr. Test & Security Analyst	Onsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Kath Hoglund (KEY)	Enterprise Architect	Onsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
SME POOL												
Norm Mandy (KEY)	IV&V Project Manager	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Cyrille Dabila	Cloud Development SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Yolanda Fears	MITA SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Michelle Shores	Eligibility SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite
Nina Terhaar	IT Architect & Certification SME	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite	Available Offsite

LEGEND	Onsite	NE Offsite Support	Available Offsite

Table 23: HITECH Staffing Plan

Our proximity to Lincoln from our corporate facilities in Bellevue is a great benefit to Nebraska MLTC. Our IV&V Lead, Project Manager and Sr. Business Analyst have work locations in Bellevue which allows them to easily perform tasks off-site and travel to Lincoln as needed. Other key and SME resources are available to support on-site taskings at the State’s request. SES may also procure office space in Lincoln for our team should it become necessary over the course of the project.

Here is a summary of our response to the SOW [D2] Logistics requirements:

	Requirements	SES Response
1	Must store all work products in DHHS designated repository and using designated folder structure.	Agreed. The SES team will store all work products in the State designated repository and folder structure as we have done in the past.
2	Must have controlled access to all contractor facilities where any contract related work is performed in compliance with privacy and security requirements.	Agreed. SES is DoD contractor and required to meet Cybersecurity Maturity Model Certification (CMMC) requirements which is based upon robust NIST 800-171 standards. We are fully equipped to control access to our facilities where contract work is performed. Our corporate facility in

	Requirements	SES Response
		Bellevue is secure facility as designated by the Defense Counterintelligence and Security Agency (DCSA).

Organization Chart

The SES Organizational Chart below demonstrates the structure of the entire SES IV&V team to best align with the needs of the project. Utilization of joint Project Managers aids us in maximizing the contribution of both the key team and SME pool. As shown, the NE MMIS IV&V engagement, like all of our client projects, will have direct insight from well-established management offices within SES corporate operations to include our Project Management Office (PMO), Contract Management Office (CMO), Quality Management Office (QMO) and Resource Management Office (RMO). The ongoing support and involvement of these groups ensures that our team adheres to all contractual requirements and meets or exceeds internal quality standards and address any issues that may arise on the project.

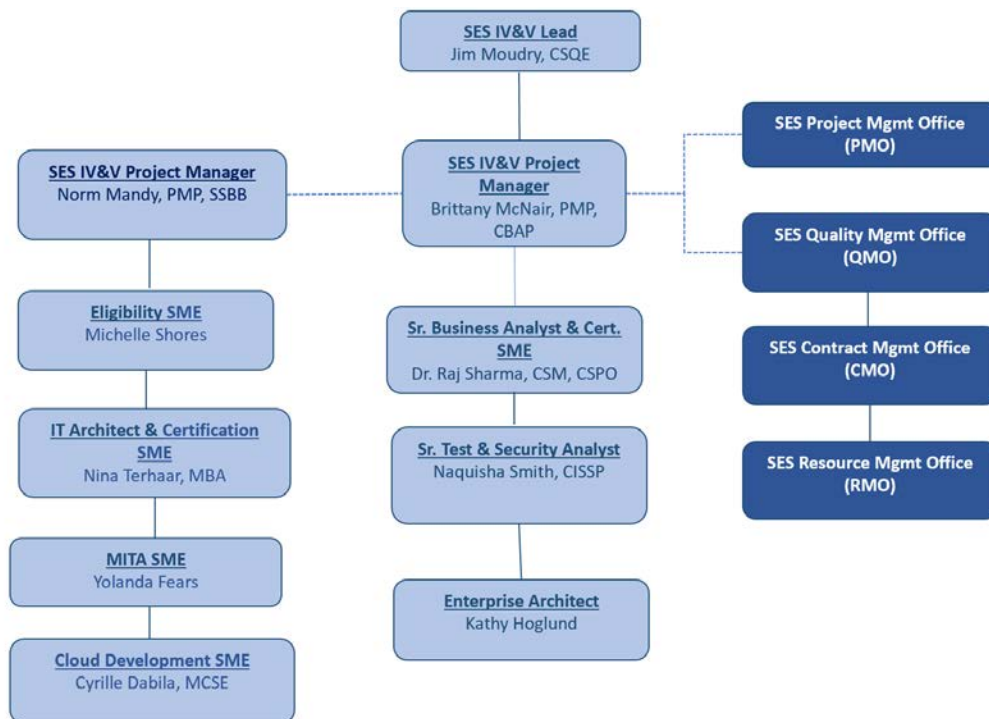


Figure 14: SES IV&V Team Organization Chart

2.2.2 Privacy and Security



Requirement Approach

Here is a summary of our response to the SOW [E2] Privacy & Security requirements:

	Requirements	SES Response
1	Must develop and submit a Privacy and Security Plan work product that includes a description of how contractor safeguards all state information that is transmitted within contractors systems (i.e. email). The plan must be approved by DHHS prior to the contractor having access to project materials.	Agreed. The organizational structure of our team is shown in the organizational chart below.
2	Must comply with all security and privacy laws, regulations, and policies, including HIPAA, and related breach notification laws and directives.	Agreed.
3	Must provide initial and ongoing privacy and security and HIPAA compliance training to all employees and contract personnel assigned to the project prior to providing access to PHI.	Agreed.
4	Must take all reasonable industry recognized methods to secure the system from un- authorized access.	Agreed. As Department of Defense (DoD) contractor, SES is Cybersecurity Maturity Model Certification (CMMC) compliant.
5	Must permanently destroy all confidential data and protected health information entrusted to the contractor for the performance of the contract upon approval of DHHS.	Agreed. SES has a defined policy for controlling unauthorized access

Strategy, Methodology and Capabilities

Software Engineering Services is a DoD contractor subject to CMMC compliance. Accordingly, we have well established policies, procedures and plans in place to apply the safeguards and controls necessary for system, physical and operational security. Our proposed IV&V Lead, Jim Moudry, has served as SES Facility Security Officer for over 15 years to support our corporate security infrastructure. The majority of our employees possess Secret or Top Secret security clearances which necessitates a clear plan and resources to ensure that our security policies and plans are properly followed. Additionally, our Project Manager, Brittany McNair, oversees the day to day security operations of our corporate network and infrastructure. This level of involvement from SES key staff allows us to meet all of the requirements defined in the RFP.

Privacy and Security Plan Sample and Template



Our sample Privacy and Security Plan and Template is included in Appendix O.

Workforce Privacy and Security Awareness

Security is at the forefront of our corporate operations. SES is required by the Defense Counterintelligence and Security Agency (DCSA) to adhere to stringent guidelines across the entire company. We have been evaluated by DCSA on an annual basis for the last 15 years in order to maintain our standing as a DoD contractor.

Our Facility Security Officer, Jim Moudry, provides both annual and monthly security training to all employees to align with the ever-evolving security threats present. Our employees have access to hundreds of security resources to include webinars, training and guidance released by the FBI, DCSA and many other federal agencies. Employees are required to confirm acknowledgement and adherence to our comprehensive set of policies at least annually.

Security Monitoring Approach

Our SES team includes a Sr. Test and Security Analyst, Naquisha Smith, who is a Certified Information Systems Security Professional (CISSP) by the International Information System Security Certification Consortium, also known as (ISC)². She is heavily involved in supporting our corporate security monitoring and scanning across our entire network. CMMC compliance includes in-depth requirements for regular monitoring, reporting and remediation which SES understands and has implemented. These controls exist in our network today and align with the expectations of the State.

As a DoD contractor for the last 20 years, SES has a well-established process for handling any potential security breach which involves our entire Security team led by our Facility Security Officer. Our Security team is further supported by an Assistant Facility Security Officer and Security Analysts.



3.0 FORM A – CONTRACTOR PROPOSAL POINT OF CONTACT

Form A
Contractor Proposal Point of Contact
Request for Proposal Number 109035 O3

Form A should be completed and submitted with each response to this solicitation. This is intended to provide the State with information on the contractor’s name and address, and the specific person(s) who are responsible for preparation of the contractor’s response.

Preparation of Response Contact Information	
Contractor Name:	Software Engineering Services
Contractor Address:	1311 Fort Crook Road, Suite 100 Bellevue, NE 68005
Contact Person & Title:	Jessica York, Proposal Manager
E-mail Address:	proposals@sessolutions.com
Telephone Number (Office):	402-292-8660
Telephone Number (Cellular):	402-490-6317
Fax Number:	402-292-3271

Each Contractor should also designate a specific contact person who will be responsible for responding to the State if any clarifications of the contractor’s response should become necessary. This will also be the person who the State contacts to set up a presentation/demonstration, if required.

Communication with the State Contact Information	
Contractor Name:	Software Engineering Services
Contractor Address:	1311 Fort Crook Road, Suite 100 Bellevue, NE 68005
Contact Person & Title:	Brittany McNair, State Government Solutions Director
E-mail Address:	bmcnair@sessolutions.com
Telephone Number (Office):	402-292-8660
Telephone Number (Cellular):	402-212-0205
Fax Number:	402-292-3271



4.0 REQUEST FOR PROPOSAL FOR CONTRACTUAL SERVICES FORM

REQUEST FOR PROPOSAL FOR CONTRACTUAL SERVICES FORM

CONTRACTOR MUST COMPLETE THE FOLLOWING

By signing this Request for Proposal for Contractual Services form, the contractor guarantees compliance with the procedures stated in this Solicitation, and agrees to the terms and conditions unless otherwise indicated in writing and certifies that contractor maintains a drug free workplace.

Per Nebraska's Transparency in Government Procurement Act, Neb. Rev Stat § 73-603 DAS is required to collect statistical information regarding the number of contracts awarded to Nebraska Contractors. This information is for statistical purposes only and will not be considered for contract award purposes.

NEBRASKA CONTRACTOR AFFIDAVIT: Bidder hereby attests that bidder is a Nebraska Contractor. "Nebraska Contractor" shall mean any bidder who has maintained a bona fide place of business and at least one employee within this state for at least the six (6) months immediately preceding the posting date of this Solicitation.

I hereby certify that I am a Resident disabled veteran or business located in a designated enterprise zone in accordance with Neb. Rev. Stat. § 73-107 and wish to have preference, if applicable, considered in the award of this contract.

I hereby certify that I am a blind person licensed by the Commission for the Blind & Visually Impaired in accordance with Neb. Rev. Stat. §71-8611 and wish to have preference considered in the award of this contract.

FORM MUST BE SIGNED USING AN INDELIBLE METHOD (NOT ELECTRONICALLY)

FIRM:	Software Engineering Services
COMPLETE ADDRESS:	1311 Fort Crook Road, Suite 100 Bellevue, NE 68005
TELEPHONE NUMBER:	402-292-8660
FAX NUMBER:	402-292-3271
DATE:	11/1/2021
SIGNATURE:	
TYPED NAME & TITLE OF SIGNER:	Brittany McNair, State Government Solutions Director



5.0 HIPAA Agreement

109035 O3

DHHS HIPAA BUSINESS ASSOCIATE AGREEMENT PROVISIONS SERVICES CONTRACTS

1. **BUSINESS ASSOCIATE.** “Business Associate” shall generally have the same meaning as the term “business associate” at 45 CFR § 160.103, and in reference to the party in this Contract, shall mean Contractor.
2. **COVERED ENTITY.** “Covered Entity” shall generally have the same meaning as the term “covered entity” at 45 CFR § 160.103, and in reference to the party to this Contract, shall mean DHHS.
3. **HIPAA RULES.** “HIPAA Rules” shall mean the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and Part 164.
4. **OTHER TERMS.** The following terms shall have the same meaning as those terms in the HIPAA Rules: Breach, Data Aggregation, Designated Record Set, Disclosure, Health Care Operations, Individual, Minimum Necessary, Notice of Privacy Practices, Protected Health Information, Required by Law, Secretary, Security Incident, Subcontractor, Unsecured Protected Health Information, and Use.
5. **THE CONTRACTOR shall do the following:**
 - 5.1. Not use or disclose Protected Health Information other than as permitted or required by this Contract or as required by law. Contractor may use Protected Health Information for the purposes of managing its internal business processes relating to its functions and performance under this Contract. Use or disclosure must be consistent with DHHS’ minimum necessary policies and procedures.
 - 5.2. Implement and maintain appropriate administrative, physical, and technical safeguards to prevent access to and the unauthorized use and disclosure of Protected Health Information. Comply with Subpart C of 45 CFR Part 164 with respect to electronic Protected Health Information, to prevent use or disclosure of Protected Health Information other than as provided for in this Contract and assess potential risks and vulnerabilities to the individual health data in its care and custody and develop, implement, and maintain reasonable security measures.
 - 5.3. To the extent Contractor is to carry out one or more of the DHHS’ obligations under Subpart E of 45 CFR Part 164, comply with the requirements of Subpart E that apply to DHHS in the performance of such obligations. Contractor may not use or disclosure Protected Health Information in a manner that would violate Subpart E of 45 CFR Part 164 if done by DHHS.
 - 5.4. In accordance with 45 CFR §§ 164.502(E)(1)(ii) and 164.308(b)(2), if applicable, ensure that any agents and subcontractors that create, receive, maintain, or transmit Protected Health Information received from DHHS, or created by or received from the Contractor on behalf of DHHS, agree in writing to the same restrictions, conditions, and requirements relating to the confidentiality, care, custody, and minimum use of Protected Health Information that apply to the Contractor with respect to such information.

5.5. Obtain reasonable assurances from the person to whom the information is disclosed that the information will remain confidential and used or further disclosed only as required by law or for the purposes for which it was disclosed to the person, and the person notifies the Contractor of any instances of which it is aware that the confidentiality of the information has been breached.

5.6. Within fifteen (15) days:

5.6.1. Make available Protected Health Information to DHHS as necessary to satisfy DHHS' obligations under 45 CFR § 164.524;

5.6.2. Make any amendment(s) to Protected Health Information as directed or agreed to by DHHS pursuant to 45 CFR § 164.526, or take other measures as necessary to satisfy DHHS' obligations under 45 CFR § 164.526;

5.6.3. Maintain and make available the information required to provide an accounting of disclosures to DHHS as necessary to satisfy DHHS' obligations under 45 CFR § 164.528.

5.7. Make its internal practices, books, and records relating to the use and disclosure of Protected Health Information received from or created or received by the Contractor on behalf of the DHHS available to the Secretary for purposes of determining compliance with the HIPAA rules. Contractor shall provide DHHS with copies of the information it has made available to the Secretary.

5.8. Report to DHHS within fifteen (15) days, any unauthorized use or disclosure of Protected Health Information made in violation of this Contract, or the HIPAA rules, including any security incident that may put electronic Protected Health Information at risk. Contractor shall, as instructed by DHHS, take immediate steps to mitigate any harmful effect of such unauthorized disclosure of Protected Health Information pursuant to the conditions of this Contract through the preparation and completion of a written Corrective Action Plan subject to the review and approval by DHHS.

The Contractor shall report any breach to the individuals affected and to the Secretary as required by the HIPAA rules.

6. TERMINATION.

6.1. DHHS may immediately terminate this Contract and any and all associated contracts if DHHS determines that the Contractor has violated a material term of this Contract.

6.2. Within thirty (30) days of expiration or termination of this Contract, or as agreed, unless Contractor requests and DHHS authorizes a longer period of time, Contractor shall return or at the written direction of DHHS destroy all Protected Health Information received from DHHS (or created or received by Contractor on behalf of DHHS) that Contractor still maintains in any form and retain no copies of such Protected Health Information. Contractor shall provide a written certification to DHHS that all such Protected Health Information has been returned or destroyed (if so instructed), whichever is deemed appropriate. If such return or destruction is determined by the DHHS be infeasible, Contractor shall use such Protected Health Information only for purposes that makes such return or destruction infeasible, and the provisions of this Contract shall survive with respect to such Protected Health Information.



6.3. The obligations of the Contractor under the Termination Section shall survive the termination of this Contract.

Signature: Brittany McManis



6.0 Terms and Conditions (Sections II - IV)

II TERMS AND CONDITIONS

If a conflict or ambiguity arises after the Addendum to Contract Award have been negotiated and agreed to, the Addendum to Contract Award shall be interpreted as follows:

1. If only one Party has a particular clause, then that clause shall control;
2. If both Parties have a similar clause, but the clauses do not conflict, the clauses shall be readtogether;
3. If both Parties have a similar clause, but the clauses conflict, the State's clause shall control.

A. GENERAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The contract resulting from this solicitation shall incorporate the following documents:

1. Request for Proposal and Addenda;
2. Amendments to the solicitation;
3. Questions and Answers;
4. Contractor's proposal (Solicitation and properly submitted documents);
5. The executed Contract and Addendum One to Contract, if applicable; and,
6. Amendments/Addendums to the Contract.

These documents constitute the entirety of the contract.

Unless otherwise specifically stated in a future contract amendment, in case of any conflict between the incorporated documents, the documents shall govern in the following order of preference with number one (1) receiving preference over all other documents and with each low er numbered document having preference over any higher numbered document: 1) Amendment to the executed Contract with the most recent dated amendment having the highest priority, 2) executed Contract and any attached Addenda, 3) Amendments to solicitation and any Questions and Answers, 4) the original solicitation document and any Addenda, and 5) the Contractor's submitted Proposal.

Any ambiguity or conflict in the contract discovered after its execution, not otherwise addressed herein, shall be resolved in accordance with the rules of contract interpretation as established in the State of Nebraska.

B. NOTIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

Contractor and State shall identify the contract manager who shall serve as the point of contact for the executed contract.

Communications regarding the executed contract shall be in writing and shall be deemed to have been given if delivered personally or mailed, by U.S. Mail, postage prepaid, return receipt requested, to the parties at their respective addresses set forth below, or at such other addresses as may be specified in writing by either of the parties. All notices, requests, or communications shall be deemed effective upon personal delivery or five (5) calendar days following deposit in the mail.

Either party may change its address for notification purposes by giving notice of the change and setting forth the new address and an effective date.

C. NOTICE (POC)

The State reserves the right to appoint a Buyer's Representative to manage [or assist the Buyer in managing] the contract on behalf of the State. The Buyer's Representative will be appointed in writing, and the appointment document will specify the extent of the Buyer's Representative authority and responsibilities. If a Buyer's Representative is appointed, the Contractor will be provided a copy of the appointment document and is expected to cooperate accordingly with the Buyer's Representative. The Buyer's Representative has no authority to bind the State to a contract, amendment, addendum, or other change or addition to the contract.

D. GOVERNING LAW (Statutory)

Notwithstanding any other provision of this contract, or any amendment or addendum(s) entered into contemporaneously or at a later time, the parties understand and agree that, (1) the State of Nebraska is a sovereign state and its authority to contract is therefore subject to limitation by the State's Constitution, statutes, common law, and regulation; (2) this contract will be interpreted and enforced under the laws of the State of Nebraska; (3) any action to enforce the provisions of this agreement must be brought in the State of Nebraska per state law; (4) the person signing this contract on behalf of the State of Nebraska does not have the authority to waive the State's sovereign immunity, statutes, common law, or regulations; (5) the indemnity, limitation of liability, remedy, and other similar provisions of the final contract, if any, are entered into subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity; and, (6) all terms and conditions of the final contract, including but not limited to the clauses concerning third party use, licenses, warranties, limitations of liability, governing law and venue, usage verification, indemnity, liability, remedy or other similar provisions of the final contract are entered into specifically subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity.



The Parties must comply with all applicable local, state and federal laws, ordinances, rules, orders, and regulations.

E. BEGINNING OF WORK

The Contractor shall not commence any billable work until a valid contract has been fully executed by the State and the successful Contractor. The Contractor will be notified in writing when work may begin.

F. AMENDMENT

This Contract may be amended in writing, within scope, upon the agreement of both parties.

G. CHANGE ORDERS OR SUBSTITUTIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			



The State and the Contractor, upon the written agreement, may make changes to the contract within the general scope of the solicitation. Changes may involve specifications, the quantity of work, or such other items as the State may find necessary or desirable. Corrections of any deliverable, service, or work required pursuant to the contract shall not be deemed a change. The Contractor may not claim forfeiture of the contract by reasons of such changes.

The Contractor shall prepare a written description of the work required due to the change and an itemized cost proposal for the change. Changes in work and the amount of compensation to be paid to the Contractor shall be determined in accordance with applicable unit prices if any, a pro-rated value, or through negotiations. The State shall not incur a price increase for changes that should have been included in the Contractor's proposal, were foreseeable, or result from difficulties with or failure of the Contractor's proposal or performance.

No change shall be implemented by the Contractor until approved by the State, and the Contract is amended to reflect the change and associated costs, if any. If there is a dispute regarding the cost, but both parties agree that immediate implementation is necessary, the change may be implemented, and cost negotiations may continue with both Parties retaining all remedies under the contract and law.

*****Contractor will not substitute any item that has been awarded without prior written approval of SPB*****

H. VENDOR PERFORMANCE REPORT(S)

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
BW			

The State may document any instance(s) of products or services delivered or performed which exceed or fail to meet the terms of the purchase order, contract, and/or solicitation specifications. The State Purchasing Bureau may contact the Vendor regarding any such report. Vendor performance report(s) will become a part of the permanent record of the Vendor.

I. NOTICE OF POTENTIAL CONTRACTOR BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
BW			

If Contractor breaches the contract or anticipates breaching the contract, the Contractor shall immediately give written notice to the State. The notice shall explain the breach or potential breach, a proposed cure, and may include a request for a waiver of the breach if so desired. The State may, in its discretion, temporarily or permanently waive the breach. By granting a waiver, the State does not forfeit any rights or remedies to which the State is entitled by law or equity,



or pursuant to the provisions of the contract. Failure to give immediate notice, however, may be grounds for denial of any request for a waiver of a breach.

J. BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

Either Party may terminate the contract, in whole or in part, if the other Party breaches its duty to perform its obligations under the contract in a timely and proper manner. Termination requires written notice of default and a thirty (30) calendar day (or longer at the non-breaching Party’s discretion considering the gravity and nature of the default) cure period. Said notice shall be delivered by Certified Mail, Return Receipt Requested, or in person with proof of delivery. Allowing time to cure a failure or breach of contract does not waive the right to immediately terminate the contract for the same or different contract breach which may occur at a different time. In case of default of the Contractor, the State may contract the service from other sources and hold the Contractor responsible for any excess cost occasioned thereby. OR In case of breach by the Contractor, the State may, without unreasonable delay, make a good faith effort to make a reasonable purchase or contract to purchased goods in substitution of those due from the contractor. The State may recover from the Contractor as damages the difference between the costs of covering the breach. Notwithstanding any clause to the contrary, the State may also recover the contract price together with any incidental or consequential damages defined in UCC Section 2-715, but less expenses saved in consequence of Contractor’s breach.

The State’s failure to make payment shall not be a breach, and the Contractor shall retain all available statutory remedies and protections.

K. NON-WAIVER OF BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The acceptance of late performance with or without objection or reservation by a Party shall not waive any rights of the Party nor constitute a waiver of the requirement of timely performance of any obligations remaining to be performed.

L. SEVERABILITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

If any term or condition of the contract is declared by a court of competent jurisdiction to be illegal or in conflict with any law, the validity of the remaining terms and conditions shall not be affected, and the rights and obligations of the parties shall be construed and enforced as if the contract did not contain the provision held to be invalid or illegal.

M. INDEMNIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

1. GENERAL

The Contractor agrees to defend, indemnify, and hold harmless the State and its employees, volunteers, agents, and its elected and appointed officials (for the purposes of this section, “the Indemnified Parties”) from and against any and all third party claims, liens, demands, damages, liability, actions, causes of action, losses, judgments, costs, and expenses of every nature, including investigation costs and expenses, settlement costs, and attorney fees and expenses (for the purposes of this section, “the Claims”), sustained or asserted against the State for personal injury, death, or property loss or damage, arising out of, resulting from, or attributable to the willful misconduct, negligence, error, or omission of the Contractor, its employees, Subcontractors, consultants, representatives, and agents, resulting from this contract, except to the extent such Contractor liability is attenuated by any action of the State which directly and proximately contributed to the Claims.

2. INTELLECTUAL PROPERTY

The Contractor agrees it will, at its sole cost and expense, defend, indemnify, and hold harmless the Indemnified Parties from and against any and all Claims, to the extent such claims arise out of, result from, or are attributable to, the actual or alleged infringement or misappropriation of any patent, copyright, trade secret, trademark, or confidential information of any third party by the Contractor or its employees, Subcontractors, consultants, representatives, and agents; provided, however, the State gives the Contractor prompt notice in writing of the claim. The Contractor may not settle any infringement Claim that will affect the State’s use of the Licensed Software or any other deliverable under this solicitation without the State’s prior written consent, which consent may be withheld for any reason.

If a judgment or settlement is obtained or reasonably anticipated against the State’s use of any intellectual property for which the Contractor has indemnified the State, the Contractor shall, at the Contractor’s sole cost and expense, promptly modify the item or items which were determined to be infringing, acquire a license or licenses on the State’s behalf to provide the necessary rights to the State to eliminate the infringement, or provide the State with a non-infringing substitute that provides the State the same functionality. At the State’s election, the actual or anticipated judgment may be treated as a breach of warranty by the Contractor, and the State may receive the remedies provided under this solicitation.

3. PERSONNEL

The Contractor shall, at its expense, indemnify and hold harmless the Indemnified Parties from and against any claim with respect to withholding taxes, worker’s compensation, employee benefits, or any other claim, demand, liability, damage, or loss of any nature relating to any of the personnel, including subcontractors and their employees, provided by the Contractor.

4. SELF-INSURANCE

The State of Nebraska is self-insured for any loss and purchases excess insurance coverage pursuant to Neb. Rev. Stat. § 81-8,239.01 (Reissue 2008). If there is a presumed loss under the provisions of this agreement, Contractor may file a claim with the Office of Risk Management pursuant to Neb. Rev. Stat. §§ 81-8,829 – 81-8,306 for review by the State Claims Board. The State retains all rights and immunities under the State Miscellaneous (Section 81-8,294), Tort (Section 81-8,209), and Contract Claim Acts (Section 81-8,302), as outlined in Neb. Rev. Stat. § 81-8,209 et seq. and under any other provisions of law and accepts liability under this agreement to the extent provided by law.

5. LEGAL REPRESENTATION

The Parties acknowledge that Attorney General for the State of Nebraska is required by statute to represent the legal interests of the State, and that any provision of this indemnity clause is subject to the statutory authority of the Attorney General.

N. ATTORNEY'S FEES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

In the event of any litigation, appeal, or other legal action to enforce any provision of the contract, the Parties agree to pay all expenses of such action, as permitted by law and if ordered by the court, including attorney's fees and costs, if the other Party prevails.

O. ASSIGNMENT, SALE, OR MERGER

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

Either Party may assign the contract upon mutual written agreement of the other Party. Such agreement shall not be unreasonably withheld.

The Contractor retains the right to enter into a sale, merger, acquisition, internal reorganization, or similar transaction involving Contractor's business. Contractor agrees to cooperate with the State in executing amendments to the contract to allow for the transaction. If a third party is involved in the transaction, the Contractor will remain responsible for performance of the contract until such time as said third party involved in the transaction agrees in writing to be contractually bound by this contract and perform all obligations of the contract.

P. CONTRACTING WITH OTHER NEBRASKA POLITICAL SUB-DIVISIONS OF THE STATE OR ANOTHER STATE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The Contractor may, but shall not be required to, allow agencies, as defined in Neb. Rev. Stat. §81-145, to use this contract. The terms and conditions, including price, of the contract may not be amended.



The State shall not be contractually obligated or liable for any contract entered into pursuant to this clause. A listing of Nebraska political subdivisions may be found at the website of the Nebraska Auditor of Public Accounts.

The Contractor may, but shall not be required to, allow other states, agencies or divisions of other states, or political subdivisions of other states to use this contract. The terms and conditions, including price, of this contract shall apply to any such contract, but may be amended upon mutual consent of the Parties. The State shall not be contractually or otherwise obligated or liable under any contract entered into pursuant to this clause. The State shall be notified if a contract is executed based upon this contract.

Q. FORCE MAJEURE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			



Neither Party shall be liable for any costs or damages, or for default resulting from its inability to perform any of its obligations under the contract due to a natural or manmade event outside the control and not the fault of the affected Party (“Force Majeure Event”). The Party so affected shall immediately make a written request for relief to the other Party and shall have the burden of proof to justify the request. The other Party may grant the relief requested; relief may not be unreasonably withheld. Labor disputes with the impacted Party’s own employees will not be considered a Force Majeure Event.

R. CONFIDENTIALITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
BM			

All materials and information provided by the Parties or acquired by a Party on behalf of the other Party shall be regarded as confidential information. All materials and information provided or acquired shall be handled in accordance with federal and state law, and ethical standards. Should said confidentiality be breached by a Party, the Party shall notify the other Party immediately of said breach and take immediate corrective action.

It is incumbent upon the Parties to inform their officers and employees of the penalties for improper disclosure imposed by the Privacy Act of 1974, 5 U.S.C. 552a. Specifically, 5 U.S.C. 552a (i)(1), which is made applicable by 5 U.S.C. 552a (m)(1), provides that any officer or employee, who by virtue of his/her employment or official position has possession of or access to agency records which contain individually identifiable information, the disclosure of which is prohibited by the Privacy Act or regulations established thereunder, and who knowing that disclosure of the specific material is prohibited, willfully discloses the material in any manner to any person or agency not entitled to receive it, shall be guilty of a misdemeanor and fined not more than \$5,000.

S. OFFICE OF PUBLIC COUNSEL (Statutory)

If it provides, under the terms of this contract and on behalf of the State of Nebraska, health and human services to individuals; service delivery; service coordination; or case management, Contractor shall submit to the jurisdiction of the Office of Public Counsel, pursuant to Neb. Rev. Stat. §§ 81-8,240 et seq. This section shall survive the termination of this contract.

T. LONG-TERM CARE OMBUDSMAN (Statutory)

Contractor must comply with the Long-Term Care Ombudsman Act, per Neb. Rev. Stat. §§ 81-2237 et seq. This section shall survive the termination of this contract.

U. EARLY TERMINATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
BM			

The contract may be terminated as follows:

1. The State and the Contractor, by mutual written agreement, may terminate the contract at any time.
2. The State, in its sole discretion, may terminate the contract for any reason upon thirty (30) calendar day’s written notice to the Contractor. Such termination shall not relieve the Contractor of warranty or other service obligations incurred under the terms of the contract. In the event of termination, the Contractor shall be entitled to payment, determined on a pro rata basis, for products or services satisfactorily performed or provided.
3. The State may terminate the contract immediately for the following reasons:
 - a. if directed to do so by statute;
 - b. Contractor has made an assignment for the benefit of creditors, has admitted in writing its inability to pay debts as they mature, or has ceased operating in the normal course of business;
 - c. a trustee or receiver of the Contractor or of any substantial part of the Contractor’s assets has been appointed by a court;
 - d. fraud, misappropriation, embezzlement, malfeasance, misfeasance, or illegal conduct pertaining to performance under the contract by its Contractor, its employees, officers, directors, or shareholders;
 - e. an involuntary proceeding has been commenced by any Party against the Contractor under any one of the chapters of Title 11 of the United States Code and (i) the proceeding has been pending for at least sixty (60) calendar days; or (ii) the Contractor has consented, either expressly or by operation of law, to the entry of an order for relief; or (iii) the Contractor has been decreed or adjudged a debtor;
 - f. a voluntary petition has been filed by the Contractor under any of the chapters of Title 11 of the United States Code;
 - g. Contractor intentionally discloses confidential information;
 - h. Contractor has or announces it will discontinue support of the deliverable; and,
 - i. In the event funding is no longer available.

V. CONTRACT CLOSEOUT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

Upon contract closeout for any reason the Contractor shall within 30 days, unless stated otherwise herein:

1. Transfer all completed or partially completed deliverables to the State;
2. Transfer ownership and title to all completed or partially completed deliverables to the State;
3. Return to the State all information and data, unless the Contractor is permitted to keep the information or data by contract or rule of law. Contractor may retain one copy of any information or data as required to comply with applicable work product documentation standards or as are automatically retained in the course of Contractor's routine back up procedures;
4. Cooperate with any successor Contractor, person or entity in the assumption of any or all of the obligations of this contract;
5. Cooperate with any successor Contractor, person or entity with the transfer of information or data related to this contract;
6. Return or vacate any state owned real or movable property; and,
7. Return all data in a mutually acceptable format and manner.

Nothing in this Section should be construed to require the Contractor to surrender intellectual property, real or personal property, or information or data owned by the Contractor for which the State has no legal claim.

III CONTRACTOR DUTIES

A. INDEPENDENT CONTRACTOR / OBLIGATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

It is agreed that the Contractor is an independent contractor and that nothing contained herein is intended or should be construed as creating or establishing a relationship of employment, agency, or a partnership.

The Contractor is solely responsible for fulfilling the contract. The Contractor or the Contractor’s representative shall be the sole point of contact regarding all contractual matters.

The Contractor shall secure, at its own expense, all personnel required to perform the services under the contract. The personnel the Contractor uses to fulfill the contract shall have no contractual or other legal relationship with the State; they shall not be considered employees of the State and shall not be entitled to any compensation, rights or benefits from the State, including but not limited to, tenure rights, medical and hospital care, sick and vacation leave, severance pay, or retirement benefits.

By-name personnel commitments made in the Contractor's proposal shall not be changed without the priorwritten approval of the State. Replacement of these personnel, if approved by the State, shall be with personnel of equal or greater ability and qualifications.

All personnel assigned by the Contractor to the contract shall be employees of the Contractor or a subcontractor and shall be fully qualified to perform the work required herein. Personnel employed by the Contractor or a subcontractor to fulfill the terms of the contract shall remain under the sole direction and control of the Contractor or the subcontractor respectively.

With respect to its employees, the Contractor agrees to be solely responsible for the following:

1. Any and all pay, benefits, and employment taxes and/or other payroll withholding;
2. Any and all vehicles used by the Contractor’s employees, including all insurance required by
state law;
3. Damages incurred by Contractor’s employees within the scope of their duties under the contract;
4. Maintaining Workers’ Compensation and health insurance that complies with state and federal
law and submitting any reports on such insurance to the extent required by governing
law ;



5. Determining the hours to be worked and the duties to be performed by the Contractor’s employees;and,
6. All claims on behalf of any person arising out of employment or alleged employment (Including without limit claims of discrimination alleged against the Contractor, its officers, agents, or subcontractors or subcontractor’s employees)

If the Contractor intends to utilize any subcontractor, the subcontractor's level of effort, tasks, and time allocation should be clearly defined in the contractor’s proposal. The Contractor shall agree that it will not utilize any subcontractors not specifically included in its proposal in the performance of the contract without the prior written authorization of the State.

The State reserves the right to require the Contractor to reassign or remove from the project any Contractor or subcontractor employee.

Contractor shall insure that the terms and conditions contained in any contract with a subcontractor does not conflict with the terms and conditions of this contract.

The Contractor shall include a similar provision, for the protection of the State, in the contract with any Subcontractor engaged to perform work on this contract.

B. EMPLOYEE WORK ELIGIBILITY STATUS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The Contractor is required and hereby agrees to use a federal immigration verification system to determine the work eligibility status of employees physically performing services within the State of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program authorized by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, 8 U.S.C. 1324a, known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of an employee.

If the Contractor is an individual or sole proprietorship, the following applies:

1. The Contractor must complete the United States Citizenship Attestation Form, available on the Department of Administrative Services website at <http://das.nebraska.gov/materiel/purchasing.html>
2. The completed United States Attestation Form should be submitted with the solicitation response.
3. If the Contractor indicates on such attestation form that he or she is a qualified alien, the Contractor agrees to provide the US Citizenship and Immigration Services documentation required to verify the Contractor’s lawful presence in the United



States using the Systematic Alien Verification for Entitlements (SAVE) Program.

4. The Contractor understands and agrees that lawful presence in the United States is required, and the Contractor may be disqualified, or the contract terminated if such lawful presence cannot be verified as required by Neb. Rev. Stat. §4-108.

C. COMPLIANCE WITH CIVIL RIGHTS LAWS AND EQUAL OPPORTUNITY EMPLOYMENT /NONDISCRIMINATION (Statutory)

The Contractor shall comply with all applicable local, state, and federal statutes and regulations regarding civil rights laws and equal opportunity employment. The Nebraska Fair Employment Practice Act prohibits Contractors of the State of Nebraska, and their Subcontractors, from discriminating against any employee or applicant for employment, with respect to hire, tenure, terms, conditions, compensation, or privileges of employment because of race, color, religion, sex, disability, marital status, or national origin (Neb. Rev. Stat. §48-1101 to 48-1125). The Contractor guarantees compliance with the Nebraska Fair Employment Practice Act, and breach of this provision shall be regarded as a material breach of contract. The Contractor shall insert a similar provision in all Subcontracts for goods and services to be covered by any contract resulting from this solicitation.

D. COOPERATION WITH OTHER CONTRACTORS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

Contractor may be required to work with or in close proximity to other contractors or individuals that may be working on same or different projects. The Contractor shall agree to cooperate with such other contractors or individuals, and shall not commit or permit any act which may interfere with the performance of work by



any other contractor or individual. Contractor is not required to compromise Contractor’s intellectual property or proprietary information unless expressly required to do so by this contract.

E. DISCOUNTS

Prices quoted shall be inclusive of ALL trade discounts. Cash discount terms of less than thirty (30) days will not be considered as part of the proposal. Cash discount periods will be computed from the date of receipt of a properly executed claim voucher or the date of completion of delivery of all items in a satisfactory condition, whichever is later.

F. PRICES

All prices, costs, and terms and conditions submitted in the proposal shall remain fixed and valid commencing on the opening date of the proposal until an award is made, or the solicitation is cancelled.

Prices submitted on the cost proposal form shall remain fixed for the life of the contract.

G. COST CLARIFICATION

The State reserves the right to review all aspects of cost for reasonableness and to request clarification of any proposal where the cost component shows significant and unsupported deviation from industry standards or in areas where detailed pricing is required.

H. PERMITS, REGULATIONS, LAWS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The contract price shall include the cost of all royalties, licenses, permits, and approvals, whether arising from patents, trademarks, copyrights or otherwise, that are in any way involved in the contract. The Contractor shall obtain and pay for all royalties, licenses, and permits, and approvals necessary for the execution of the contract. The Contractor must guarantee that it has the full legal right to the materials, supplies, equipment, software, and other items used to execute this contract.

I. OWNERSHIP OF INFORMATION AND DATA / DELIVERABLES


Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The State shall have the unlimited right to publish, duplicate, use, and disclose all information and data developed or obtained by the Contractor on behalf of the State pursuant to this contract.

The State shall own and hold exclusive title to any deliverable developed as a result of this contract. Contractor shall have no ownership interest or title, and shall not patent, license, or copyright, duplicate, transfer, sell, or exchange, the design, specifications, concept, or deliverable.



J. INSURANCE REQUIREMENTS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
			

The Contractor shall throughout the term of the contract maintain insurance as specified herein and provide the State a current Certificate of Insurance/Acord Form (COI) verifying the coverage. The Contractor shall not commence work on the contract until the insurance is in place. If Contractor subcontracts any portion of the Contract the Contractor must, throughout the term of the contract, either:

1. Provide equivalent insurance for each subcontractor and provide a COI verifying the coverage for the subcontractor;
2. Require each subcontractor to have equivalent insurance and provide written notice to the State that the Contractor has verified that each subcontractor has the required coverage; or,
3. Provide the State with copies of each subcontractor's Certificate of Insurance evidencing the required coverage.

The Contractor shall not allow any Subcontractor to commence work until the Subcontractor has equivalent insurance. The failure of the State to require a COI, or the failure of the Contractor to provide a COI or require subcontractor insurance shall not limit, relieve, or decrease the liability of the Contractor hereunder.

In the event that any policy written on a claims-made basis terminates or is canceled during the term of the contract or within two (2) years of termination or expiration of the contract, the contractor shall obtain an extended discovery or reporting period, or a new insurance policy, providing coverage required by this contract for the term of the contract and two (2) years following termination or expiration of the contract.

If by the terms of any insurance a mandatory deductible is, or if the Contractor elects to increase the mandatory deductible amount, the Contractor shall be responsible for payment of the amount of the deductible in the event of a paid claim.

Notwithstanding any other clause in this Contract, the State may recover up to the liability limits of the insurance policies required herein.

1. WORKERS' COMPENSATION INSURANCE

The Contractor shall take out and maintain during the life of this contract the statutory Workers' Compensation and Employer's Liability Insurance for all of the contractors' employees to be engaged in work on the project under this contract and, in case any such work is sublet, the Contractor shall require the Subcontractor similarly to provide Worker's Compensation and Employer's Liability Insurance for all of the Subcontractor's employees to be engaged in such work. This policy shall be written to meet the statutory requirements for the state in which the work is to be performed, including Occupational Disease. **The policy shall include a waiver of subrogation in favor of the State. The COI shall contain the mandatory COI subrogation waiver language found hereinafter.** The amounts of such insurance shall not be less than the limits stated hereinafter. For employees working in the State of Nebraska,



the policy must be written by an entity authorized by the State of Nebraska Department of Insurance to write Workers' Compensation and Employer's Liability Insurance for Nebraska employees.

2. COMMERCIAL GENERAL LIABILITY INSURANCE AND COMMERCIAL AUTOMOBILE LIABILITY INSURANCE

The Contractor shall take out and maintain during the life of this contract such Commercial General Liability Insurance and Commercial Automobile Liability Insurance as shall protect Contractor and any Subcontractor performing work covered by this contract from claims for damages for bodily injury, including death, as well as from claims for property damage, which may arise from operations under this contract, whether such operation be by the Contractor or by any Subcontractor or by anyone directly or indirectly employed by either of them, and the amounts of such insurance shall not be less than limits stated hereinafter.

The Commercial General Liability Insurance shall be written on an **occurrence basis**, and provide Premises/Operations, Products/Completed Operations, Independent Contractors, Personal Injury, and Contractual Liability coverage. **The policy shall include the State, and others as required by the contract documents as Additional Insured(s). This policy shall be primary, and any insurance or self-insurance carried by the State shall be considered secondary and non-contributory. The COI shall contain the mandatory COI liability waiver language found hereinafter.** The Commercial Automobile Liability Insurance shall be written to cover all Owned, Non-owned, and Hired vehicles.

REQUIRED INSURANCE COVERAGE		
COMMERCIAL GENERAL LIABILITY		
General Aggregate		\$2,000,000
Products/Completed Aggregate	Operations	\$2,000,000
Personal/Advertising Injury		\$1,000,000 per occurrence
Bodily Injury/Property Damage		\$1,000,000 per occurrence
Medical Payments		\$10,000 any one person
Damage to Rented Premises (Fire)		\$300,000 each occurrence
Contractual		Included
XCU Liability (Explosion, Collapse, and Underground Damage)		Included
Independent Contractors		Included
Abuse & Molestation		Included
WORKER'S COMPENSATION		
Employers Liability Limits		\$500K/\$500K/\$500K
Statutory Limits- All States		Statutory - State of Nebraska
USL&H Endorsement		Statutory
Voluntary Compensation		Statutory
COMMERCIAL AUTOMOBILE LIABILITY		
Bodily Injury/Property Damage		\$1,000,000 combined single limit
Include All Owned, Hired & Non-Owned Automobile liability		Included
Motor Carrier Act Endorsement		Where Applicable
UMBRELLA/EXCESS LIABILITY		
Over Primary Insurance		\$5,000,000 per occurrence
COMMERCIAL CRIME		
Crime/Employee Dishonesty Including 3rd Party Fidelity		\$1,000,000
CYBER LIABILITY		
Breach of Privacy, Security Breach, Denial of Service, Remediation, Fines and Penalties		\$10,000,000
CONTRACTOR'S POLLUTION LIABILITY		



Each Occurrence/Aggregate Limit	\$2,000,000
Includes Non-Owned Disposal Sites	
MANDATORY COINSUBROGATION WAIVER LANGUAGE	
"Workers' Compensation policy shall include a waiver of subrogation in favor of the State of Nebraska."	
MANDATORY CO-LIABILITY WAIVER LANGUAGE	
"Commercial General Liability & Commercial Automobile Liability policies shall name the State of Nebraska as an Additional Insured and the policies shall be primary and any insurance or self - insurance carried by the State shall be considered secondary and non-contributory as additionally insured."	

3. EVIDENCE OF COVERAGE

The Contractor shall furnish the Contract Manager, with a certificate of insurance coverage complying w with the above requirements prior to beginning work at:

Department of Health and Human Services Attn: IV&V
 Contract Manager
 301 Centennial Mall South, 5th Floor
 Lincoln, NE 68508

These certificates or the cover sheet shall reference the RFP number, and the certificates shall include the name of the company, policy numbers, effective dates, dates of expiration, and amounts and types of coverage afforded. If the State is damaged by the failure of the Contractor to maintain such insurance, then the Contractor shall be responsible for all reasonable costs properly attributable thereto.

Reasonable notice of cancellation of any required insurance policy must be submitted to the contract manager as listed above when issued and a new coverage binder shall be submitted immediately to ensure no break in coverage.

4. DEVIATIONS

The insurance requirements are subject to limited negotiation. Negotiation typically includes, but is not necessarily limited to, the correct type of coverage, necessity for Workers' Compensation, and the type of automobile coverage carried by the Contractor.

K. NOTICE OF POTENTIAL CONTRACTOR BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
BM			

If Contractor breaches the contract or anticipates breaching the contract the Contractor shall immediately give written notice to the State. The notice shall explain the breach or potential breach and may include a request for a waiver of the breach if so desired. The State may, at its discretion, temporarily or permanently waive the breach. By granting a temporary waiver, the State does not forfeit any rights or remedies to which the State is entitled by law or equity, or pursuant to the provisions of the contract. Failure to give immediate notice, however, may be grounds for denial of any request for a waiver of a breach.

L. ANTITRUST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The Contractor hereby assigns to the State any and all claims for overcharges as to goods and/or services provided in connection with this contract resulting from antitrust violations which arise under antitrust law s of the United States and the antitrust law s of the State.

M. CONFLICT OF INTEREST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

By submitting a proposal, Bidder certifies that no relationship exists between the Bidder and any person or entity which either is, or gives the appearance of, a conflict of interest related to this Request for Proposal or project.

Bidder further certifies that Bidder will not employ any individual know n by bidder to have a conflict of interest nor shall bidder take any action or acquire any interest, either directly or indirectly, which will conflict in any manner or degree with the performance of its contractual obligations hereunder or w which creates an actual or appearance of conflict of interest.

If there is an actual or perceived conflict of interest, Bidder shall provide with its proposal a full disclosure of the facts describing such actual or perceived conflict of interest and a proposed mitigation plan for consideration. The State will then consider such disclosure and proposed mitigation plan and either approve or reject as part of the overall bid evaluation.

N. STATE PROPERTY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:

Bm			
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The Contractor shall be responsible for the proper care and custody of any State-owned property which is furnished for the Contractor's use during the performance of the contract. The Contractor shall reimburse the State for any loss or damage of such property; normal wear and tear is expected.

O. SITE RULES AND REGULATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The Contractor shall use its best efforts to ensure that its employees, agents, and Subcontractors comply with site rules and regulations while on State premises. If the Contractor must perform on-site work outside of the daily operational hours set forth by the State, it must make arrangements with

the State to ensure access to the facility and the equipment has been arranged. No additional payment will be made by the State on the basis of lack of access, unless the State fails to provide access as agreed to in writing between the State and the Contractor.

P. ADVERTISING

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The Contractor agrees not to refer to the contract award in advertising in such a manner as to state or imply that the company or its goods or services are endorsed or preferred by the State. Any publicity releases pertaining to the project shall not be issued without prior written approval from the State.

Q. NEBRASKA TECHNOLOGY ACCESS STANDARDS (Statutory)

Contractor shall review the Nebraska Technology Access Standards, found at <http://nitc.nebraska.gov/standards/2-201.html> and ensure that products and/or services provided under the contract are in compliance or will comply with the applicable standards to the greatest degree possible. In the event such standards change during the Contractor's performance, the State may create an amendment to the contract to request the contract comply with the changed standard at a cost mutually acceptable to the parties.

R. DISASTER RECOVERY/BACK UP PLAN

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

The Contractor shall have a disaster recovery and back-up plan, of which a copy should be provided upon request to the State, which includes, but is not limited to equipment, personnel, facilities, and transportation, in order to continue delivery of goods and services as specified under the specifications in the contract in the event of a disaster.

S. DRUG POLICY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

Contractor certifies it maintains a drug free workplace environment to ensure worker safety and workplace integrity. Contractor agrees to provide a copy of its drug free workplace policy at any time upon request by the State.

T. WARRANTY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
Bm			

Despite any clause to the contrary, the Contractor represents and warrants that its services hereunder shall be performed by competent personnel and shall be of professional quality consistent with generally accepted industry standards for the performance of such services and shall comply in all respects with the requirements of this Agreement. For any breach of this warranty, the Contractor shall, for a period of ninety (90) days from performance of the service, perform the services again, at no cost to Customer, or if Contractor is unable to perform the services as warranted, Contractor shall reimburse Customer the fees paid to Contractor for the unsatisfactory services. The rights and remedies of the parties under this warranty are in addition to any other rights and remedies of the parties provided by law or equity, including, without limitation actual damages, and, as applicable and awarded under the law, to a prevailing party, reasonable attorneys’ fees and costs.

IV PAYMENT

A. PROHIBITION AGAINST ADVANCE PAYMENT (Statutory)

Neb. Rev. Stat. §§81-2403 states, “[n]o goods or services shall be deemed to be received by an agency until all such goods or services are completely delivered and finally accepted by



the agency.”

B. TAXES (Statutory)

The State is not required to pay taxes and assumes no such liability as a result of this solicitation. The Contractor may request a copy of the Nebraska Department of Revenue, Nebraska Resale or Exempt Sale Certificate for Sales Tax Exemption, Form 13 for their records. Any property tax payable on the Contractor's equipment which may be installed in a state-owned facility is the responsibility of the Contractor.

C. INVOICES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
BW			

Invoices for payments must be submitted by the Contractor to the agency requesting the services with sufficient detail to support payment. The terms and conditions included in the Contractor's invoice shall be deemed to be solely for the convenience of the parties. No terms or conditions of any such invoice shall be binding upon the State, and no action by the State, including without limitation the payment of any such invoice in whole or in part, shall be construed as binding or estopping the State with respect to any such term or condition, unless the invoice term or condition has been previously agreed to by the State as an amendment to the contract.

D. INSPECTION AND APPROVAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
BW			

Final inspection and approval of all work required under the contract shall be performed by the designated State officials.

The State and/or its authorized representatives shall have the right to enter any premises where the Contractor or Subcontractor duties under the contract are being performed, and to inspect, monitor or otherwise evaluate the work being performed. All inspections and evaluations shall be at reasonable times and in a manner that will not unreasonably delay work.

E. PAYMENT (Statutory)

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:



BM			
----	--	--	--

Payment will be made by the responsible agency in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2403). The State may require the Contractor to accept payment by electronic means such as ACH deposit. In no event shall the State be responsible or liable to pay for any goods and services provided by the Contractor prior to the Effective Date of the contract, and the Contractor hereby waives any claim or cause of action for any such services.

F. LATE PAYMENT (Statutory)

The Contractor may charge the responsible agency interest for late payment in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2401 through 81-2408).

G. SUBJECT TO FUNDING / FUNDING OUT CLAUSE FOR LOSS OF APPROPRIATIONS (Statutory)

The State’s obligation to pay amounts due on the Contract for a fiscal year following the current fiscal year is contingent upon legislative appropriation of funds. Should said funds not be appropriated, the State may terminate the contract with respect to those payments for the fiscal year(s) for which such funds are not appropriated. The State will give the Contractor written notice thirty (30) calendar days prior to the effective date of termination. All obligations of the State to make payments after the termination date will cease. The Contractor shall be entitled to receive just and equitable compensation for any authorized work which has been satisfactorily completed as of the termination date. In no event shall the Contractor be paid for a loss of anticipated profit.

H. RIGHT TO AUDIT (First Paragraph is Statutory)

The State shall have the right to audit the Contractor’s performance of this contract upon a thirty (30) days’ written notice. Contractor shall utilize generally accepted accounting principles, and shall maintain the accounting records, and other records and information relevant to the contract (Information) to enable the State to audit the contract. (Neb. Rev. Stat. §84-304 et seq.) The State may audit, and the Contractor shall maintain, the Information during the term of the contract and for a period of five (5) years after the completion of this contract or until all issues or litigation are resolved, whichever is later. The Contractor shall make the Information available to the State at Contractor’s place of business or a location acceptable to both Parties during normal business hours. If this is not practical or the Contractor so elects, the Contractor may provide electronic or paper copies of the Information. The State reserves the right to examine, make copies of, and take notes on any Information relevant to this contract, regardless of the form or the Information, how it is stored, or who possesses the Information. Under no circumstance will the Contractor be required to create or maintain documents not kept in the ordinary course of contractor’s business operations, nor will contractor be required to disclose any information, including but not limited to product cost data, which is confidential or proprietary to contractor.

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within Solicitation Response (Initial)	NOTES/COMMENTS:
fm			

The Parties shall pay their own costs of the audit unless the audit finds a previously undisclosed overpayment by the State. If a previously undisclosed overpayment exceeds one-half of one percent (.5%) of the total contract billings, or if fraud, material misrepresentations, or non-performance is discovered on the part of the Contractor, the Contractor shall reimburse the State for the total costs of the audit. Overpayments and audit costs owed to the State shall be paid within ninety (90) days of written notice of the claim. The Contractor agrees to correct any material weaknesses or condition found as a result of the audit.

7.0 APPENDICES

Appendix A - Sample IV&V Management Plan

Appendix B – IV&V Schedule

Appendix C – Redacted Sample IV&V Review Report

Appendix D – Focused Deliverable Observation Report

Appendix E – Sample Project Management Checklists

Appendix F - Sample CMS Certification Progress Report

Appendix G - Sample Lessons Learned/ Closure Report

Appendix H - Issue Management Plan Template

Appendix I - Sample of Prior Opportunities

Appendix J - IV&V Report Quality Checklist

Appendix K - Sample Weekly Status Report

Appendix L – Report Templates

Appendix M – Turnover Plan

Appendix N – Cutover Readiness Checklist Sample

Appendix O – Privacy and Security Plan Template

Appendix A: Sample IV&V Management Plan



IV&V Project Plan

Version

DATE

Independent Verification and Validation Services

for

<Client>

RFP Number: <XYZ>

Deliverable Control Number: II.G.IN-1

Prepared by



Software Engineering Services
1311 Ft. Crook Road South, Suite 100
Bellevue, NE 68005

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DOCUMENT CONTROL

This is a controlled document. The control and release of this document is the responsibility of the document Owner.

Version control				
Document reference	IV&V PP	Project	<Client> and <Project>	
Version	2.0	Date	4/2/19	Owner
Document title	IV&V Project Plan			

Version History				
Version	Planned Date	Actual Date	Author	Version Description
1.01				Tracked notes and comments
1.02				Consolidated draft
1.03				Peer review of draft
1.04				IV&V Draft submittal for <Client> review
-				Due date: comments on submittal to IV&V PM
1.06				Updates based on CMS and/or <Client> feedback
1.07				Peer review of final
1.1				IV&V PP updated (final)
1.2				Draft changes for year 2
1.3				PM changes for year 2
1.4				Peer review of draft
1.5				Final draft year 2
1.5				Submittal (NLT)
-				<Client> Addendum comments
2.0				Final submittal

1.0 INTRODUCTION

The purpose of this document is to detail the Software Engineering Services (SES) plan to provide Independent Verification and Validation (IV&V) services for the <CLIENT> under contract RFP Number: <XYZ>.

This IV&V Project Plan (hereafter simply the “Plan”) includes but is not limited to:

- A narrative of planned procedures for managing and controlling IV&V activity
- Oversight method including risk management approach
- Basic tools to be used by the IV&V team
- The IV&V project Work Plan (schedule of deliverables and supporting activity with estimated dates and key resources)

This update maintains the IV&V plan and establishes the schedule for Year 2 of the IV&V contract.

1.1 Supporting <Client>

To meet increasing customer service demands, manage growing caseloads, and improve automation of processes, the <Client> is transforming the Medicaid Management System using newer technologies. SES understands that the requirement for IV&V services on this contract comes from the Centers for Medicare and Medicaid Services (CMS); by extension, SES IV&V supports the <Client>, and is a partner in the Agency’s success in executing and managing the <CLIENT> <PROJECT> and <PROJECT> program of modular projects.

IV&V formally began supporting <CLIENT> 1 April, 2018; the IV&V initial effort is for two years, ending 31 March 2020. The contract also provides for <CLIENT> to exercise up to three 1-year options, bringing the maximum contract time to five years.

1.2 Assumptions

A successful IV&V effort relies in part on effective stakeholder communication, especially between the IV&V team; <CLIENT>; CMS; and the Integration, PMO, and other module Vendors. It includes:

- State and Vendor use of the IV&V group email address (IVVSESGroup@medicaid.alab<Client>.gov) as the focal point for day-to-day communications
- On-site and remote IV&V access to all artifacts, deliverables and other State and Vendor work products
- On-Site and remote IV&V access to project meetings, demos, and other events
- Willingness of project personnel to openly participate in IV&V data clarification interviews in an atmosphere of collegiality
- Ability of the IV&V PM to prioritize data collection efforts (meetings, documentation evaluations, and interviews), and make IV&V staff work assignments

1.3 Constraints

None identified.

1.4 Risks

SES is performing continuous risk assessments and providing results in monthly IV&V status reporting. This Plan provides a summary description of SES risk management processes in the Methodology section.

2.0 IV&V APPROACH AND METHODOLOGY

2.1 Method Summary

The SES method uses a standardized, repeatable approach – efficient and designed to have minimal impact on daily project activities. It strongly supports the idea that IV&V activities should be unobtrusive to the project:

- Encompasses entire lifecycle
- Provides insight into process implementation and process effectiveness;
- Specifies project strengths to exploit;
- Defines shortfalls in project use of best practices;
- Describes project risks associated with weaknesses (forward-looking)
- Prescribes specific, actionable recommendations for improved performance and reduced project risk
- Focuses on outcomes and benefits
- Complies with 45 CFR IV&V regulations.

The SES approach *does not* require that <PROJECT> and <PROJECT> projects use a particular life cycle (e.g. agile; traditional life cycles). Our industry standard best practices apply equally well regardless of life cycle. Our Analysts are trained in the interpretation of best practice to the chosen <CLIENT> life cycle.

This Plan references a separate IV&V Work Plan (MS Project schedule with activities, dependencies, dates, and resources). We organize each phase around a deliverables-based breakdown of work.

We will update the Work Plan as needed and as requested to remain synchronized with the State and DDI schedules and, in any case, will always internally review and update IV&V scheduling at least quarterly.

The following table summarizes the relationship between IV&V PMBOK-based phases found in the Appendix A Work Plan, and the required CMS Medicaid Eligibility and Enrollment Toolkit (MEET) and Medicaid Enterprise Certification Toolkit (MECT) life cycles:

PMBOK PHASE	CMS PHASE	CMS REVIEW
Project Initiation	Initiation and Planning	-
Project Monitoring and Control	Initiation and Planning	Initiation Milestone review (R1)
Project Planning	Initiation and Planning	IV&V Progress Report(s)
Project Execution	Requirements, Design and Development,	IV&V Progress Report(s)

PMBOK PHASE	CMS PHASE	CMS REVIEW
Project Monitoring and Control	Requirements, Design and Development,	Operational Milestone Reviews (R2)
Project Execution	Integration, Test, and Implementation	IV&V Progress Report(s)
Project Monitoring and Control	Integration, Test, and Implementation	Operational Milestone Reviews (R2)
Project Monitoring and Control	Operations and Maintenance	Post Operational Review(s) (R3) Certification Review (R3)
Project Closure	-	-

2.2 IV&V Process Overview

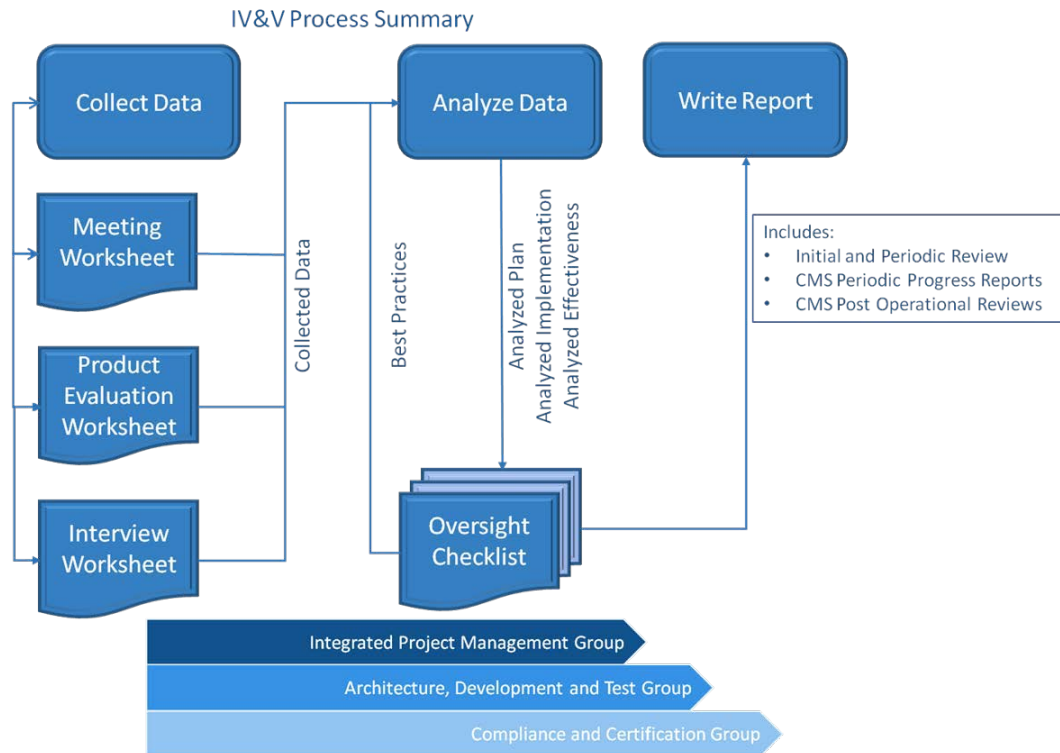
IV&V will continually assess <CLIENT> projects and their modules based on three fundamental questions:

- Is the project using documented processes/procedures?
- Is the project adhering to its processes/procedures?
- Are the processes/procedures effectively adhering to industry standards?

We use a checklist-based process, organized into oversight areas, to determine the application of best practices and to guide the data gathering and reporting process. We record results of collected data on internal worksheets (Appendix C). The IV&V Team gathers data from interviews with various project stakeholders, attendance at meetings, and evaluations of project documentation.

The diagram below summarizes the IV&V method with respective inputs and outputs; the three major execution activities are:

- Data collection: SES gathers data from in interviews, meetings, and evaluations of project deliverables and other artifacts.
- Analysis: Carefully assess available data to determine the application of best practice implementation and effectiveness.
- Reporting: The resulting Observations, Risks, and Findings are organized in the oversight area checklists and used as the primary input in writing deliverable reports. Our reports are a primary way we assist <CLIENT> and CMS to monitor and control project activity.



OVERSIGHT SCOPE

The collective set of questions in each Task Area, summarized in the table below, fully address the scope of oversight. Checklists may be modified during project execution to remain aligned to project requirements. For example, Task area questions may be updated to maintain compliance with CMS requirements.

Oversight Area	Task Area
CMS COMPLIANCE	Standards and Conditions
	Access and Delivery
	Integration and Utility
	Intermediary and Interface
	Information Architecture
	Eligibility and Enrollment (MEET)
PROJECT MANAGEMENT	Project Sponsorship

Oversight Area	Task Area
	Management Assessment
	Project Management
	Business Process Engineering
	Risk Management
	Change Management
	Communication Management
	Configuration Management
	Estimating and Scheduling
	Personnel
	Project Organization
	Subcontractors and External Staff
	<CLIENT> MEDICAID AGENCY Oversight
QUALITY MANAGEMENT	Quality Assurance
	Process Definition and Product Standards
TRAINING	User Training and Documentation
	Developer Training and Documentation
REQUIREMENTS MANAGEMENT	Requirements Management
	Security Requirements
	Requirements Analysis
	Interface Requirements
	Requirements Allocation and Specification
	Reverse Engineering
OPERATING ENVIRONMENT	System Hardware

Oversight Area	Task Area
	System Software
	Database Software
	System Capacity
DEVELOPMENT ENVIRONMENT	Development Hardware
	Development Software
SOFTWARE DEVELOPMENT	High Level Design
	Detailed Design
	Job Control
	Code
	Unit Test
SYSTEM AND ACCEPTANCE TESTING	System Integration Test
	Pilot Test
	Interface Test
	Acceptance and Turnover
DATA MANAGEMENT	Data Conversion
	Database Design
OPERATIONS OVERSIGHT	Operational Change Tracking
	Customer and User Operational Satisfaction
	Operational Goals
	Operational Documentation
	Operational Processes and Activity
Project Planning	Procurement
	Feasibility Studies

2.3 Data Collection

Worksheets are the primary tool used to standardize our data collection. For each project activity, the IV&V Analyst:

1. *Prepares* by recording logistical information; researching and recording best practices contained in relevant Oversight Checklists; and reviewing any advance documentation such as agendas or meeting handouts.
2. *Performs* by reading/attending/interviewing as planned; and recording gathered data.
3. *Records results* through analysis of data against best practices, looking for adherence to documented process and effectiveness of practices.
4. *Stores* the finalized worksheet for audit purposes.

COLLECTION TOOLS

Consolidated data from worksheets become the basis of verifying best practice usage, identifying risks, and writing reports. Worksheets along with the oversight checklist practices they reference, provide an audit trail for IV&V reports.

Product Review Worksheet – The primary tool that IV&V analysts use to capture information when reviewing project deliverables and other key artifacts.

Project Meeting Worksheet – The primary tool that IV&V analysts use to capture information from each project meeting attended either in person or remotely.

Interview Worksheet – The primary tool that IV&V analysts use to capture information whenever conducting interviews with State and Vendor project staff.

OTHER TOOLS

SES SharePoint – We are maintaining a secure SharePoint site. It contains a separate space dedicated only to the <PROJECT>/<PROJECT> program; our own internal network administration team limits access only to IV&V and corporate team members based on the “need to know”.

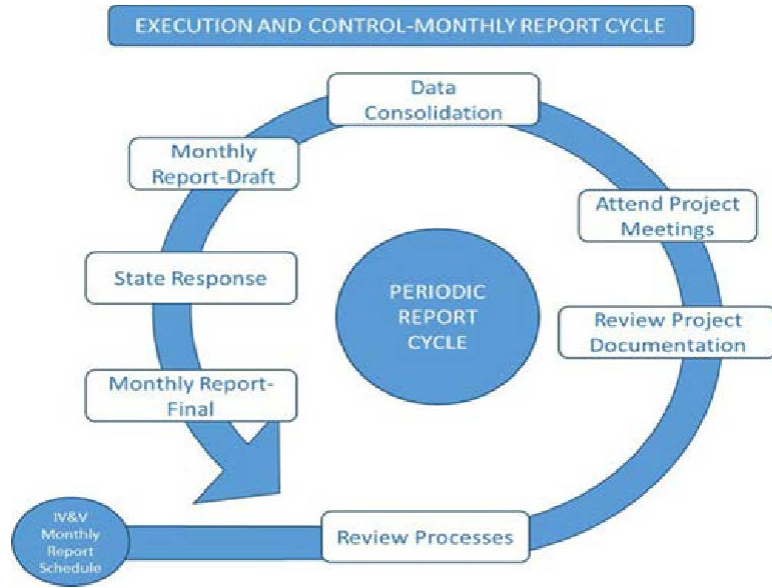
Issue and Risk Logs –The Logs are used to document, assign, track, and manage project issues and risk from IV&V’s perspective. These risks will be included in IV&V reports.

2.4 Reporting

SES will generate all required deliverables as represented in our deliverables-based Work Plan. There are weekly and monthly reporting requirements, based on collaboration with <CLIENT> and CMS; refer to the Deliverables section and Appendices E and F for details.

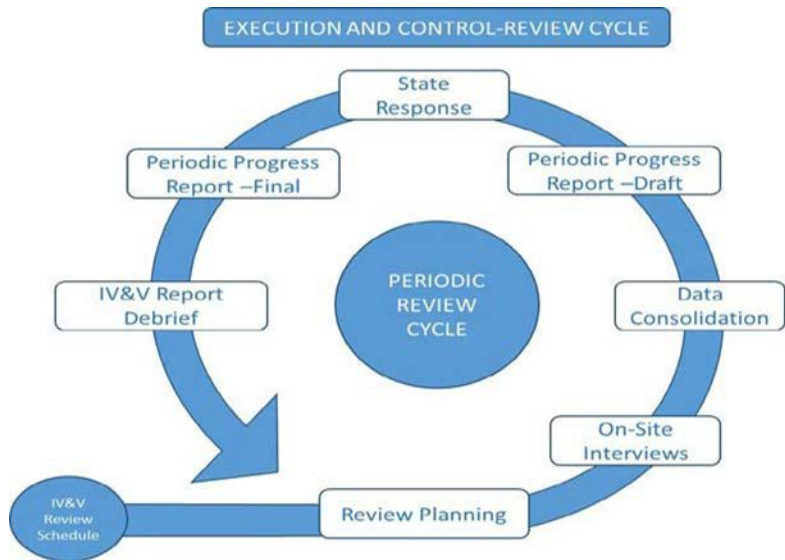
Report Cycle

The SES Team records collected data on internal worksheets; then gathers data from interviews with various project stakeholders, attendance at meetings, and evaluations of project documentation.



CMS REPORTING

IV&V includes quarterly CMS-defined progress reporting in monthly reporting, according to the MECL/MEELC as required for the <PROJECT>/<PROJECT> projects. The CMS life cycles specify IV&V reporting formats; sample reports are at Appendix C.



2.5 Communication Management

The main objective of IV&V communication management is to foster effective stakeholder interaction and coordination. It depends on clearly defined communication media and requirements. The graphic below depicts key areas of communications management including project governance.



2.5.1 ACTIVITY COORDINATION

IV&V strives to enable communication with project team members, so they are informed about activities throughout the life cycle. We anticipate cross-project communications that include effective use of tools (e.g. calendars, status reports, and touchpoint meeting minutes).

IV&V works with communication points of contact provided by the State Contract Manager for specific communications between the Medicaid <PROJECT> and <PROJECT> projects. The table below may be tailored during the project life cycle to reflect differences between <PROJECT> and <PROJECT>, and management changes to processes:

Communication Type	Description	Responsible
<PROJECT> and <PROJECT> Deliverables	Provide the IV&V Program Manager with a single project/module point of contact who will assign annual project Deliverable Reviews to IV&V	<CLIENT> IV&V Contract Manager
<PROJECT> and <PROJECT> Documents	Provide access to all deliverables, versions, working documentation, reports, minutes, and other project artifacts; includes project repositories, work environments such as Development and QA; and tools used to establish and maintain information such as requirements and testing artifacts	IV&V PM coordinate w/State and DDI Vendor PMs
OIT Meetings	Facilitate a monthly status meeting with IV&V to review and approve IV&V deliverables	Office of Information Technology

Communication Type	Description	Responsible
Scheduled Meetings and Events	Provide access to calendars and invitations to meetings, demonstrations, milestone activities, and other project events within the IV&V scope of oversight	IV&V PM coordinate w/State and Vendor PMs
Agenda for IV&V Status Meetings	Provide the IV&V PM with requested agenda items at least 24 hours in advance	State PMs
IV&V Status Meetings	Coordinate Touchpoint meetings (<PROJECT>, <PROJECT>) the first and third Wednesdays of each month (may be changed)	IV&V PM coordinate w/State and Vendor PMs
Minutes from IV&V Status Meetings	Provide meeting minutes to reflect separation of action items, issues, etc. per stakeholder	IV&V PM
Interviews	Schedule interviews at least 24 hours in advance with project team members to clarify data IV&V collected and/or confirm missing data	IV&V PM
Respond to IV&V Contract Manager and CMS	Respond to requests and inquires within one (1) business day unless otherwise agreed to.	IV&V PM
Contract Questions	Contract-related questions or concerns	IV&V Program Manager, <CLIENT> IV&V Contract Manager
Response to IV&V Monthly Reports	In the format provided by IV&V, create a single consolidated addendum of all comments and/ or corrections to errors of fact in Monthly IV&V Contractor Status Reports within 10 business days	<CLIENT> Contract Manager, <CLIENT> PMs
Contact Information	Provide project team member and other stakeholder names, titles, email addresses and phone numbers to facilitate appropriate IV&V communication channels including information on meetings and scheduling interviews	IV&V PM coordinate w/State and Vendor PMs

2.6 Risk Management

The purpose of Risk Management is to identify potential problems before they occur, so that risk-handling activities may be planned and implemented as needed across the project life-cycle, and to mitigate adverse impact to achieving project objectives.

Risk Management is (and must therefore be executed as) continuous, forward-looking, and a significant part of business and technical management processes.

To have an effective Risk Management program, our methodology is designed to:

- Address items that could endanger mission-critical objectives
- Provide continuous insight that can be acted upon to mitigate risks with critical impact across the project life cycles
- Encourage early and aggressive risk identification, and advocate for collaboration with all relevant stakeholders
- Create and establish an environment where the team can participate in free and open disclosure and discussion of risk

Within each project, there will be both internal and external risk areas. Key external risk areas include:

- Changes in Federal Rules
- State Budget Impacts

The following table lists expected Risk Management processes, tools, and templates:

CMMI® COMPLIANT RISK MANAGEMENT PROCESS	
SES Risk Management Process Description	
	Prepare for Risk Management Sub-process (RSKM SG1)
	Determine Risk Sources and Categories (SP 1.1)
	Define Risk Parameters (SP 1.2)
	Establish a Risk Management Strategy (SP 1.3)
	Identify and Analyze Risks Sub-Process (RSKM SG 2)
	Identify Risks (SP 2.1)
	Evaluate, Categorize and Prioritize Risks (SP 2.2)
	Mitigate Risks Sub-Process

	Develop Risk Mitigation Plans Strategy (SP 3.1)
	Implement Risk Mitigation Plans (SP 3.2)
Risk Management Key Inputs and Outputs	
	Risk Register (Risk Log)
	Risk Questionnaire (Our best practice oversight standards)
	Short Risk Taxonomy (Our best practice oversight standards)
	Risk Summary Report (Our required deliverables, especially Monthly IV&V Status Reports)

IV&V will enter risks into one or more logs of issues and Risks, containing data along with associated mitigation recommendations and status developed for IV&V reporting.

When assigning risk exposure ratings for reporting purposes, we consider probability of occurrence and potential impact (either as identified in the potential project impact table below or in a similarly-defined rating scale).

- Risks of a critical or catastrophic nature that have a high probability of occurrence must be resolved immediately before proceeding further (Rating: Severe – Significant).
- Contingency plans are developed and maintained for “Manage” or “Monitor” level risks (Rating: Moderate – Controllable).
- “Accept” level risks are logged into the risk database; however, no immediate mitigation action is required (Rating: Low).
- Potential Project Impact (Consequence of Occurring).

Probability of Occurrence	Negligible Impact	Marginal Impact	Critical Impact	Catastrophic Impact
70- 100%	Accept	Manage	Resolve	Resolve
40-70%	Accept	Monitor	Manage	Resolve
10-40%	Accept	Monitor	Manage	Manage
0-10%	Accept	Accept	Monitor	Monitor

Guidance on Risk Exposure Response

2.7 Issue Management

Definition of an Issue: A situation that is known to have occurred and that could affect IV&V project success.

IV&V maintains an internal issue log as the essential tool to support management of its own Issues. The Issue Log enables proper tracking, escalation, and resolution of every issue identified.

After identifying an issue, IV&V tracks its life cycle primarily through the Issue Log (refer also to the Risk Management section above). Issues of sufficient impact and visibility will be presented in monthly IV&V status reporting.

The following table represents the relationship of the Issue scoring process and the resultant Issue Rating.

Rating	Characterization	Recommended Escalation
Critical	Profound negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project	To: CIO From: PMO and or Project Manager(s)
High	Significant negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project	To: PMO From: Project Manager and/or Business owner
Medium	Moderate negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project	To: Project Manager / Business Owner From: Business owner / Issue Identifier
Low	Minor negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project	To: Business Owner From: Issue Identifier

3.0 IV&V STAFFING

The following table contains all staff expected to be engaged on the project. Table colors coincide with the Organizational Chart further below. All staff support both the <PROJECT> and <PROJECT> projects and modules.

Resource	Position	Staff Role
KEY STAFF		
	IV&V Project Manager/ Sr. IV&V Analyst	Full time on-site
	Sr. Functional/ Business Analyst	Full time on-site
	Program Manager	Part time off-/ on-site
	Sr. Tech Analyst/Architect	Part time off-/ on-site
	Lead Certification/ Eligibility SME	Part time off-/ on-site
	Account Executive	Part time off-/ on-site

Resource	Position	Staff Role
PART-TIME SME AND SUPPORT STAFF		
	Sr. Consultant & Eligibility SME	Part time as needed
	Sr. Security and Test Analyst	Part time off-/ on-site
	MITA/ Medicaid Policy SME	Part time off-/ on-site

3.1 IV&V Organization

The organizational chart identifies the simple structure of our IV&V team and primary <CLIENT> reporting relationships:



3.2 Staff Resumes

Following are [redacted] of each IV&V staff.



4.0 IV&V DELIVERABLES

IV&V Team uses the approach and methodology described above to collect, analyze, and store data needed to produce all contracted Deliverables. Each deliverable carries a unique Deliverable Control Number (DCN) to support sound management and tracking. IV&V will consistently use and reference deliverables with the DCNs in reporting, communications, and deliverable submission.

- The IV&V Work Plan at Appendix A includes a DCN reference field, and is a deliverables-based approach to our work
- Appendix B is a summary table of all contracted deliverables and is also cross-referenced to the same DCNs
- Appendices E and F are report templates developed for <CLIENT> weekly and monthly reporting, respectively

APPENDIX A: IV&V WORK PLAN

The IV&V Work Plan is a separate document maintained in Microsoft Project (.MPP) format, regularly updated. The IV&V PM will export and distribute the most recent Work Plan in PDF format. An example of our IV&V Work Plan can be found in Appendix E: IV&V Work Plan Sample.

APPENDIX B: DELIVERABLE CROSS-REFERENCE SUMMARY

Deliverable Control #	Deliverable Name	Phase	Frequency	Delivery Method
II.G.IN-1	IV&V Project Plan	Initiation	Semi-Annually	Narrative Plan, MS Proj. Sched.
II.G.PL-1	Initial Risk Assessment	Planning	Once	Monthly IV&V Report
II.G.PL-2	Initial Proj Mgmt Assess.	Planning	Once	Monthly IV&V Report
II.G.PL-3	Initial Proj. Req'ts Assess	Planning	Once	Monthly IV&V Report
II.G.PL-4	Initial Project Assessment	Planning	Once	Monthly IV&V Report
II.G.PL-5	Weekly IV&V Report	Planning, Execution	Weekly	Approved Wkly Rpt. Template
II.G.PL-6	Monthly IV&V Report	Planning, Execution	Monthly	Approved Monthly Report Template
II.G.PL-7	Eval. of RFPs & Contracts	Execution	Per event	Monthly IV&V Report
II.G.PL-8	Deliverable Forecast	Planning, Execution	Monthly	Monthly IV&V Report

Deliverable Control #	Deliverable Name	Phase	Frequency	Delivery Method
II.G.PL-9	Interim Project Progress Report	Planning	Quarterly	Monthly IV&V Report
II.G.IM-1	Architecture Review	Implementation	Monthly	Monthly IV&V Report
II.G.IM-2	Code & s/w Dev. Review	Implementation	Monthly	Monthly IV&V Report
II.G.IM-3	Test Review	Implementation	Monthly	Monthly IV&V Report
II.G.IM-4	Training Review	Implementation	Monthly	Monthly IV&V Report
II.G.IM-5	Data Mgmt Review	Implementation	Monthly	Monthly IV&V Report
II.G.IM-6	Conversion Review	Implementation	Monthly	Monthly IV&V Report
II.G.IM-7	Ops. Oversight Review	Implementation	Monthly	Monthly IV&V Report
II.G.IM-8	Cert. Readiness Review	Implementation	Per CMS requirements	Monthly IV&V Report
II.G.IM-9	SLA/ Service Preparedness/ Service Delivery Review	Implementation	Monthly	Monthly IV&V Report

Deliverable Control #	Deliverable Name	Phase	Frequency	Delivery Method
II.G.CL-1	Lessons Learned	Annually	Annually	Monthly IV&V Report
II.G.ON-1	Weekly IV&V Contractor Status Report	Ongoing	Weekly	Weekly IV&V Report
II.G.ON-2	Monthly IV&V Contractor Status Report	Ongoing	Monthly	Monthly IV&V Report
II.G.ON-3	Risk Assessment	Ongoing	Monthly	Monthly IV&V Report
II.G.ON-4	Project Mgmt. Assessment	Ongoing	Monthly	Monthly IV&V Report
II.G.ON-5	Project Req'ts Assessment	Ongoing	Monthly	Monthly IV&V Report
II.G.ON-6	Project Assessment	Ongoing	Monthly	Monthly IV&V Report
II.G.ON-7	Interim Project Progress Report	Planning	Quarterly	Monthly IV&V Report

APPENDIX C: DELIVERABLE REVIEW REPORT SAMPLE

An example of our Deliverable Review Report Sample can be found in Appendix F: Deliverable Review Sample.

APPENDIX D: RISK AND ISSUE TEMPLATES



template - Risk.docx template - Issue.docx

APPENDIX E: WEEKLY IV&V CONTRACTOR STATUS REPORT TEMPLATE



template - AL
Medicaid Weekly
IV

APPENDIX F: MONTHLY IV&V CONTRACTOR STATUS REPORT SAMPLE

An example of our Monthly IV&V Contractor Status Report Sample can be found in Appendix G: IV&V Report Sample



APPENDIX 1: DELIVERABLE REVIEW AND COMMENT FORM



template -
addendum 1
review-c

Appendix B: Sample IV&V Schedule

MN MMIS IV&V										
ID	Task Mode	WBS	SOW Deliverable ID	Task Name	Duration	Start	Finish	% Complete	Predecessors	Resource Names
1		1		MN MMIS IV&V Services	174 days?	Fri 10/1/21	Wed 6/8/22	0%		
2		1.1		Signed Task Order Received	1 day	Fri 10/1/21	Fri 10/1/21	0%		Moudry[5%]
3		1.2		Project start date	1 day	Fri 10/1/21	Fri 10/1/21	0%	25S	
4		1.3		Startup				0%		
5		1.3.1		Establish access to project repositories	2 days	Fri 10/15/21	Mon 10/18/21	0%	12	MNIT/Contract Mgr.,Moudry
6		1.3.2		Obtain required physical access	10 days	Fri 10/15/21	Thu 10/28/21	0%	12	MNIT/Contract Mgr.,Moudry
7		1.3.3		Complete required State and AMA Training Modules	9 days	Fri 10/15/21	Wed 10/27/21	0%	12	IV&V Team
8		1.3.4		Establish access to available project meetings	10 days	Fri 10/15/21	Thu 10/28/21	0%	12	MNIT/Contract Mgr.,Moudry
9		1.3.5		Kickoff/On-Boarding				0%		
10		1.3.5.1		Develop kickoff presentation	1 day	Wed 10/6/21	Wed 10/6/21	0%	3F5+2 days	MNIT/Contract Mgr.,Moudry
11		1.3.5.2		Schedule meeting and attendees	5 days	Thu 10/7/21	Wed 10/13/21	0%	10	MNIT/Contract Mgr.,Moudry
12		1.3.5.3		Facilitate On-Boarding	1 day	Thu 10/14/21	Thu 10/14/21	0%	11	MNIT/Contract Mgr.,IV&V Team
13		1.4		Planning				0%		
14		1.4.1	IM-01	IV&V Management Plan (Initial)				0%		
15		1.4.1.1		Submittal deadline	0 days	Fri 10/29/21	Fri 10/29/21	0%	2F5+20 days	
16		1.4.1.2		Decompose Timeline into WBS	2 days	Mon 10/18/21	Tue 10/19/21	0%	175S-2 days	Moudry
17		1.4.1.3		Draft Work Plan (schedule) Attachment	2 days	Wed 10/20/21	Thu 10/21/21	0%	185S-2 days	Moudry
18		1.4.1.4		Draft the narrative Plan	5 days	Fri 10/22/21	Thu 10/28/21	0%	195S-5 days	Moudry
19		1.4.1.5		Submit draft Plan	1 day	Fri 10/29/21	Fri 10/29/21	0%	15FF	Moudry
20		1.4.1.6		Review/comment period	9 days	Mon 11/1/21	Fri 11/12/21	0%	19	MNIT/Contract Mgr.
21		1.4.1.7		Update/submit final Plan	1 day	Mon 11/15/21	Mon 11/15/21	0%	20	Moudry
22		1.4.1.8	IM-01	Milestone: IV&V Management Plan Approved	0 days	Mon 11/15/21	Mon 11/15/21	0%	21	MNIT/Contract Mgr.
23		1.4.1.9	IM-02	IV&V Review Checklists (Initial)	6 days	Tue 11/16/21	Tue 11/23/21	0%		
24		1.4.1.9.1		Build Management Checklist Task Areas	2 days	Tue 11/16/21	Wed 11/17/21	0%	25FF-2 days	Hoglund,Mandy,Sharma
25		1.4.1.9.2		Build Technical Checklist Task Areas	2 days	Thu 11/18/21	Fri 11/19/21	0%	26FF-2 days	Dabila,Hoglund,Smith
26		1.4.1.9.3		Submit All initial checklists	1 day	Tue 11/23/21	Tue 11/23/21	0%	445S-5 days	Moudry
27		1.4.1.9.4	IM-02	Milestones: Checklists Approved	0 days	Tue 11/23/21	Tue 11/23/21	0%	26FF	MNIT/Contract Mgr.
28		1.4.2	IM-01	IV&V Management Plan (Periodic Review #1)	12 days	Mon 2/7/22	Wed 2/23/22	0%		
29		1.4.2.1		Submittal deadline	0 days	Tue 2/22/22	Tue 2/22/22	0%	1105S-5 days	
30		1.4.2.2		Decompose Timeline into WBS	2 days	Mon 2/7/22	Tue 2/8/22	0%	315S-2 days	Moudry
31		1.4.2.3		Draft Work Plan (schedule) Attachment	2 days	Wed 2/9/22	Thu 2/10/22	0%	325S-2 days	Moudry
32		1.4.2.4		Draft the narrative Plan	5 days	Fri 2/11/22	Fri 2/18/22	0%	335S-5 days	Moudry
33		1.4.2.5		Submit draft Plan	1 day	Mon 2/21/22	Tue 2/22/22	0%	29FF	Moudry
34		1.4.2.6		Review/comment period	1 day	Tue 2/22/22	Tue 2/22/22	0%	33	MNIT/Contract Mgr.
35		1.4.2.7		Update/submit final Plan	1 day	Wed 2/23/22	Wed 2/23/22	0%	34	Moudry
36		1.4.2.8	IM-01	Milestone: IV&V Management Plan Approved	0 days	Wed 2/23/22	Wed 2/23/22	0%	35	MNIT/Contract Mgr.
37		1.4.2.9	IM-02	IV&V Review Checklists	6 days	Mon 2/14/22	Tue 2/22/22	0%		
38		1.4.2.9.1		Build Management Checklist Task Areas	2 days	Mon 2/14/22	Wed 2/16/22	0%	39FF-2 days	Hoglund,Mandy,Sharma
39		1.4.2.9.2		Build Technical Checklist Task Areas	2 days	Thu 2/17/22	Fri 2/18/22	0%	40FF-2 days	Dabila,Hoglund,Smith
40		1.4.2.9.3		Submit All initial checklists	1 day	Tue 2/22/22	Tue 2/22/22	0%	1105S-5 days	Moudry
41		1.4.2.9.4		Milestone: Checklists Approved	0 days	Tue 2/22/22	Tue 2/22/22	0%	40FF	MNIT/Contract Mgr.
42		1.5		Execution				0%		
43		1.5.1	IM-03	IV&V Review (Initial)	46 days?	Fri 10/1/21	Tue 12/7/21	0%		
44		1.5.1.1		Site visit commences (no later than)	0 days	Tue 11/30/21	Tue 11/30/21	0%	25S+41 days	IV&V Team
45		1.5.1.2		Develop and submit site visit schedule	2 days	Tue 11/23/21	Wed 11/24/21	0%	495S-5 days	Mandy,Moudry,Sharma
46		1.5.1.3		Develop and submit interview list	2 days	Tue 11/23/21	Wed 11/24/21	0%	495S-5 days	Mandy,Sharma
47		1.5.1.4		Develop and submit list of documents to be reviewed	2 days	Tue 11/23/21	Wed 11/24/21	0%	495S-5 days	Dabila,Hoglund,Mandy,Sharma,Smith
48		1.5.1.5		Develop and submit list of meetings/activities to attend	2 days	Tue 11/23/21	Wed 11/24/21	0%	495S-5 days	Mandy,Sharma
49		1.5.1.6		Conduct site visit	5 days	Wed 12/1/21	Tue 12/7/21	0%	445S	IV&V Team
50		1.5.1.7	IM-03	Milestone: IV&V Initial Review complete	1 day?	Fri 10/1/21	Fri 10/1/21	0%		
51		1.5.2	IM-3.1	Initial IV&V Review Report				0%		
52		1.5.2.1		Submittal deadline	0 days	Wed 1/26/22	Wed 1/26/22	0%	445S+40 days	
53		1.5.2.2		Perform integrated data assessment				0%		
54		1.5.2.2.1		Project Management Task Group analyses				0%		
55		1.5.2.2.1.1		Document strengths	5 days	Mon 1/3/22	Fri 1/7/22	0%	825S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
56		1.5.2.2.1.2		Document areas for improvement				0%		
57		1.5.2.2.1.2.1		Document new risks, recommended mitigations	5 days	Mon 1/3/22	Fri 1/7/22	0%	825S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
58		1.5.2.2.1.2.2		Document new Issues, recommended actions	5 days	Mon 1/3/22	Fri 1/7/22	0%	825S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
59		1.5.2.2.1.2.3		Update existing risk progress	5 days	Mon 1/3/22	Fri 1/7/22	0%	825S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
60		1.5.2.2.1.2.4		Update existing Issue progress	5 days	Mon 1/3/22	Fri 1/7/22	0%	825S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
61		1.5.2.2.2		Quality Management Task Group analyses				0%		
62		1.5.2.2.2.1		Document strengths	5 days	Wed 1/5/22	Tue 1/11/22	0%	825S-9 days	IV&V Team
63		1.5.2.2.2.2		Document areas for improvement				0%		
64		1.5.2.2.2.2.1		Document new risks, recommended mitigations	5 days	Wed 1/5/22	Tue 1/11/22	0%	825S-9 days	IV&V Team
65		1.5.2.2.2.2.2		Document new Issues, recommended actions	5 days	Wed 1/5/22	Tue 1/11/22	0%	825S-9 days	IV&V Team
66		1.5.2.2.2.2.3		Update existing risk progress	5 days	Wed 1/5/22	Tue 1/11/22	0%	825S-9 days	IV&V Team
67		1.5.2.2.2.2.4		Update existing Issue progress	5 days	Wed 1/5/22	Tue 1/11/22	0%	825S-9 days	IV&V Team
68		1.5.2.2.3		Software Development Task Group analyses				0%		
69		1.5.2.2.3.1		Document strengths	5 days	Fri 1/7/22	Thu 1/13/22	0%	825S-7 days	Dabila,Smith,Hoglund
70		1.5.2.2.3.2		Document areas for improvement				0%		
71		1.5.2.2.3.2.1		Document new risks, recommended mitigations	5 days	Fri 1/7/22	Thu 1/13/22	0%	825S-7 days	Dabila,Smith,Hoglund
72		1.5.2.2.3.2.2		Document new Issues, recommended actions	5 days	Fri 1/7/22	Thu 1/13/22	0%	825S-7 days	Dabila,Smith,Hoglund
73		1.5.2.2.3.2.3		Update existing risk progress	5 days	Fri 1/7/22	Thu 1/13/22	0%	825S-7 days	Dabila,Smith,Hoglund
74		1.5.2.2.3.2.4		Update existing Issue progress	5 days	Fri 1/7/22	Thu 1/13/22	0%	825S-7 days	Dabila,Smith,Hoglund
75		1.5.2.2.4		Testing Task Group analyses				0%		
76		1.5.2.2.4.1		Document strengths	5 days	Tue 1/11/22	Tue 1/18/22	0%	825S-5 days	Mandy,Sharma,Smith
77		1.5.2.2.4.2		Document areas for improvement				0%		
78		1.5.2.2.4.2.1		Document new risks, recommended mitigations	5 days	Tue 1/11/22	Tue 1/18/22	0%	825S-5 days	Mandy,Sharma,Smith

MN MMIS IV&V										
ID	Task Mode	WBS	SOW Deliverable ID	Task Name	Duration	Start	Finish	% Complete	Predecessors	Resource Names
79		1.5.2.4.2.2		Document new Issues, recommended actions	5 days	Tue 1/11/22	Tue 1/18/22	0%	825S-5 days	Mandy,Sharma,Smith
80		1.5.2.4.2.3		Update existing risk progress	5 days	Tue 1/11/22	Tue 1/18/22	0%	825S-5 days	Mandy,Sharma,Smith
81		1.5.2.4.2.4		Update existing Issue progress	5 days	Tue 1/11/22	Tue 1/18/22	0%	825S-5 days	Mandy,Sharma,Smith
82		1.5.2.3		Draft the Report	3 days	Wed 1/19/22	Fri 1/21/22	0%	835S-5 days	Hoglund,Mandy,Sharma
83		1.5.2.4		Submit draft Report	1 day	Wed 1/26/22	Wed 1/26/22	0%	52FF	Moudry
84		1.5.2.5		Review/comment period	10 days	Thu 1/27/22	Wed 2/9/22	0%	83	MNIT/Contract Mgr.
85		1.5.2.6		Update/submit final Report	2 days	Thu 2/10/22	Fri 2/11/22	0%	84	Moudry
86		1.5.2.7		Milestone: Initial IV&V Review Report Approved	0 days	Fri 2/11/22	Fri 2/11/22	0%	85	MNIT/Contract Mgr.
87		1.5.2.8	IM-05	Management Briefing	4 days	Wed 2/16/22	Mon 2/21/22	0%		
93		1.5.2.9	IM-08	Monthly Reports	76 days	Thu 10/28/21	Wed 2/16/22	0%		
94		1.5.2.9.1		October Monthly Report	7 days	Thu 10/28/21	Fri 11/5/21	0%		
95		1.5.2.9.1.1		Assess Project Management Areas	2 days	Thu 10/28/21	Fri 10/29/21	0%	97FF-1 day	Hoglund,Mandy, Sharma
96		1.5.2.9.1.2		Assess Product Development Areas	2 days	Thu 10/28/21	Fri 10/29/21	0%	97FF-1 day	Dabila,Hoglund,Smith
97		1.5.2.9.1.3		Update risks and issues	2 days	Fri 10/29/21	Mon 11/1/21	0%	99FF-2 days	Dabila,Hoglund,Mandy,Sharma,Smith
98		1.5.2.9.1.4		Update recommendations	2 days	Fri 10/29/21	Mon 11/1/21	0%	99FF-2 days	Dabila,Hoglund,Mandy,Sharma,Smith
99		1.5.2.9.1.5		Update metrics assessment	1 day	Wed 11/3/21	Wed 11/3/21	0%	100FF-1 day	Mandy,Sharma
100		1.5.2.9.1.6		Draft the Report	2 days	Wed 11/3/21	Thu 11/4/21	0%	101FF-1 day	Mandy,Sharma
101		1.5.2.9.1.7		Submit Report	1 day	Fri 11/5/21	Fri 11/5/21	0%		Moudry
102		1.5.2.9.1.8	IM-08	Milestone: Monthly Report Approved	0 days	Fri 11/5/21	Fri 11/5/21	0%	101FF	MNIT/Contract Mgr.
103		1.5.2.9.2	IM-08	November Monthly Report	7 days	Mon 11/29/21	Tue 12/7/21	0%		
104		1.5.2.9.3	IM-08	December Monthly Report	7 days	Thu 12/30/21	Fri 1/7/22	0%		
105		1.5.2.9.4	IM-09	Archive Documents	2 days	Mon 2/14/22	Wed 2/16/22	0%		
106		1.5.2.9.4.1		Collect all draft & final deliverables	1 day	Mon 2/14/22	Mon 2/14/22	0%	86	Moudry,Smith
107		1.5.2.9.4.2		Submit to MNIT (digital format)	1 day	Wed 2/16/22	Wed 2/16/22	0%	106	Moudry
108		1.5.2.9.4.3	IM-09	Milestone: Initial Review Archive complete	0 days	Wed 2/16/22	Wed 2/16/22	0%	107	MNIT/Contract Mgr.
109		1.5.3	IM-04	IV&V Review (periodic #1)	10 days	Tue 2/22/22	Mon 3/7/22	0%		
110		1.5.3.1		Site visit commences (no later than)	0 days	Mon 2/28/22	Mon 2/28/22	0%	445S+62 days	IV&V Team
111		1.5.3.2		Develop and submit site visit schedule	2 days	Tue 2/22/22	Wed 2/23/22	0%	1105S-5 days	CMS ACF FNS OCSE,MNIT/Contract Mgr.
112		1.5.3.3		Develop and submit interview list	2 days	Tue 2/22/22	Wed 2/23/22	0%	1105S-5 days	CMS ACF FNS OCSE,MNIT/Contract Mgr.
113		1.5.3.4		Develop and submit list of documents to be reviewed	2 days	Tue 2/22/22	Wed 2/23/22	0%	1105S-5 days	CMS ACF FNS OCSE,MNIT/Contract Mgr.
114		1.5.3.5		Develop and submit list of meetings/activities to attend	2 days	Tue 2/22/22	Wed 2/23/22	0%	1105S-5 days	CMS ACF FNS OCSE,MNIT/Contract Mgr.
115		1.5.3.6		Conduct site visit	5 days	Tue 3/1/22	Mon 3/7/22	0%	1105S	CMS ACF FNS OCSE,MNIT/Contract Mgr.
116		1.5.3.7	IM-04	Milestone: IV&V Review complete	0 days	Mon 3/7/22	Mon 3/7/22	0%	115	
117		1.5.4	IM-4.1	Periodic IV&V Review Report	72 days	Mon 2/28/22	Wed 6/8/22	0%		
118		1.5.4.1		Submittal deadline	0 days	Mon 4/25/22	Mon 4/25/22	0%	1105S+40 days	
119		1.5.4.2		Perform integrated data assessment	11 days	Fri 4/1/22	Fri 4/15/22	0%		
120		1.5.4.2.1		Project Management Task Group analyses	5 days	Fri 4/1/22	Thu 4/7/22	0%		
121		1.5.4.2.1.1		Document strengths	5 days	Fri 4/1/22	Thu 4/7/22	0%	1485S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
122		1.5.4.2.1.2		Document areas for improvement	5 days	Fri 4/1/22	Thu 4/7/22	0%		
123		1.5.4.2.1.2.1		Document new risks, recommended mitigations	5 days	Fri 4/1/22	Thu 4/7/22	0%	1485S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
124		1.5.4.2.1.2.2		Document new Issues, recommended actions	5 days	Fri 4/1/22	Thu 4/7/22	0%	1485S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
125		1.5.4.2.1.2.3		Update existing risk progress	5 days	Fri 4/1/22	Thu 4/7/22	0%	1485S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
126		1.5.4.2.1.2.4		Update existing Issue progress	5 days	Fri 4/1/22	Thu 4/7/22	0%	1485S-11 days	Mandy[50%],Sharma[25%],Smith[25%]
127		1.5.4.2.2		Quality Management Task Group analyses	5 days	Tue 4/5/22	Mon 4/11/22	0%		
128		1.5.4.2.2.1		Document strengths	5 days	Tue 4/5/22	Mon 4/11/22	0%	1485S-9 days	IV&V Team
129		1.5.4.2.2.2		Document areas for improvement	5 days	Tue 4/5/22	Mon 4/11/22	0%		
130		1.5.4.2.2.2.1		Document new risks, recommended mitigations	5 days	Tue 4/5/22	Mon 4/11/22	0%	1485S-9 days	IV&V Team
131		1.5.4.2.2.2.2		Document new Issues, recommended actions	5 days	Tue 4/5/22	Mon 4/11/22	0%	1485S-9 days	IV&V Team
132		1.5.4.2.2.2.3		Update existing risk progress	5 days	Tue 4/5/22	Mon 4/11/22	0%	1485S-9 days	IV&V Team
133		1.5.4.2.2.2.4		Update existing Issue progress	5 days	Tue 4/5/22	Mon 4/11/22	0%	1485S-9 days	IV&V Team
134		1.5.4.2.3		Software Development Task Group analyses	5 days	Thu 4/7/22	Wed 4/13/22	0%		
135		1.5.4.2.3.1		Document strengths	5 days	Thu 4/7/22	Wed 4/13/22	0%	1485S-7 days	Dabila,Smith,Hoglund
136		1.5.4.2.3.2		Document areas for improvement	5 days	Thu 4/7/22	Wed 4/13/22	0%		
137		1.5.4.2.3.2.1		Document new risks, recommended mitigations	5 days	Thu 4/7/22	Wed 4/13/22	0%	1485S-7 days	Dabila,Smith,Hoglund
138		1.5.4.2.3.2.2		Document new Issues, recommended actions	5 days	Thu 4/7/22	Wed 4/13/22	0%	1485S-7 days	Dabila,Smith,Hoglund
139		1.5.4.2.3.2.3		Update existing risk progress	5 days	Thu 4/7/22	Wed 4/13/22	0%	1485S-7 days	Dabila,Smith,Hoglund
140		1.5.4.2.3.2.4		Update existing Issue progress	5 days	Thu 4/7/22	Wed 4/13/22	0%	1485S-7 days	Dabila,Smith,Hoglund
141		1.5.4.2.4		Testing Task Group analyses	5 days	Mon 4/11/22	Fri 4/15/22	0%		
142		1.5.4.2.4.1		Document strengths	5 days	Mon 4/11/22	Fri 4/15/22	0%	1485S-5 days	Mandy,Sharma,Smith
143		1.5.4.2.4.2		Document areas for improvement	5 days	Mon 4/11/22	Fri 4/15/22	0%		
144		1.5.4.2.4.2.1		Document new risks, recommended mitigations	5 days	Mon 4/11/22	Fri 4/15/22	0%	1485S-5 days	Mandy,Sharma,Smith
145		1.5.4.2.4.2.2		Document new Issues, recommended actions	5 days	Mon 4/11/22	Fri 4/15/22	0%	1485S-5 days	Mandy,Sharma,Smith
146		1.5.4.2.4.2.3		Update existing risk progress	5 days	Mon 4/11/22	Fri 4/15/22	0%	1485S-5 days	Mandy,Sharma,Smith
147		1.5.4.2.4.2.4		Update existing Issue progress	5 days	Mon 4/11/22	Fri 4/15/22	0%	1485S-5 days	Mandy,Sharma,Smith
148		1.5.4.3		Draft the Report	3 days	Mon 4/18/22	Wed 4/20/22	0%	1495S-5 days	Hoglund,Mandy,Sharma
149		1.5.4.4		Submit draft Report	1 day	Mon 4/25/22	Mon 4/25/22	0%	118FF	Moudry
150		1.5.4.5		Review/comment period	10 days	Tue 4/26/22	Mon 5/9/22	0%	149	MNIT/Contract Mgr.
151		1.5.4.6		Update/submit final Report	2 days	Tue 5/10/22	Wed 5/11/22	0%	150	Moudry
152		1.5.4.7	IM-4.1	Milestone: Initial IV&V Review Report Approved	0 days	Wed 5/11/22	Wed 5/11/22	0%	151	MNIT/Contract Mgr.
153		1.5.4.8	IM-05	Management Briefing	4 days	Fri 5/13/22	Wed 5/18/22	0%		
154		1.5.4.8.1		Receive request	1 day	Fri 5/13/22	Fri 5/13/22	0%	155FF-1 day	Moudry
155		1.5.4.8.2		Coordinate schedule date	1 day	Mon 5/16/22	Mon 5/16/22	0%	156FF-1 day	Moudry
156		1.5.4.8.3		Prepare review materials	2 days	Mon 5/16/22	Tue 5/17/22	0%	157FF-1 day	Mandy,Sharma
157		1.5.4.8.4		Facilitate Presentation	1 day	Wed 5/18/22	Wed 5/18/22	0%	158FF	Moudry
158		1.5.4.8.5	IM-05	Milestone: Management Briefing complete	0 days	Wed 5/18/22	Wed 5/18/22	0%	151FF+5 days	MNIT/Contract Mgr.
159		1.5.4.9		Monthly Reports	72 days	Mon 2/28/22	Wed 6/8/22	0%		
160		1.5.4.9.1	IM-08	February Monthly Report	7 days	Mon 2/28/22	Tue 3/8/22	0%		IV&V Team
161		1.5.4.9.2	IM-08	March Monthly Report	7 days	Wed 3/30/22	Thu 4/7/22	0%		IV&V Team
162		1.5.4.9.3	IM-08	April Monthly Report	7 days	Wed 3/30/22	Thu 4/7/22	0%		IV&V Team

MN MMIS IV&V										
ID	Task Mode	WBS	SOW Deliverable ID	Task Name	Duration	Start	Finish	% Complete	Predecessors	Resource Names
163		1.5.4.9.4	IM-08	May Monthly Report	7 days	Tue 5/31/22	Wed 6/8/22	0%		IV&V Team
164		1.5.4.10	IM-09	Archive Documents	2 days	Thu 5/12/22	Fri 5/13/22	0%		
165		1.5.4.10.1		Collect all draft & final deliverables	1 day	Thu 5/12/22	Thu 5/12/22	0%	152	Moudry,Smith
166		1.5.4.10.2		Submit to MNIT (digital format)	1 day	Fri 5/13/22	Fri 5/13/22	0%	165	Moudry
167		1.5.4.10.3	IM-09	Milestone: Periodic Review Archive #1 complete	0 days	Fri 5/13/22	Fri 5/13/22	0%	166	MNIT/Contract Mgr.
168		1.5.5	IM-06	MECT Checklists and/or Intake Forms	5 days	Fri 10/1/21	Thu 10/7/21	0%		
169		1.5.5.1		R1 Milestone/SMC Review (dates TBD)	5 days			0%		
170		1.5.5.1.1		Receive MECT Checklists and/or Intake Forms from MNIT	0 days			0%		MNIT/Contract Mgr.,Moudry
171		1.5.5.1.2		Complete IV&V Reviewer column	5 days			0%		IV&V Team
172		1.5.5.1.3		Submit to MNIT and CMS	1 day			0%		Moudry
173		1.5.5.2		R2 Milestone/SMC Review (dates TBD)	5 days			0%		
174		1.5.5.2.1		Receive MECT Checklists and/or Intake Forms from MNIT	0 days			0%		MNIT/Contract Mgr.,Moudry
175		1.5.5.2.2		Complete IV&V Reviewer column	5 days			0%		IV&V Team
176		1.5.5.2.3		Submit to MNIT and CMS	1 day			0%		Moudry
177		1.5.5.3		R3 Milestone/SMC Review (dates TBD)	5 days			0%		
178		1.5.5.3.1		Receive MECT Checklists and/or Intake Forms from MNIT	0 days			0%		MNIT/Contract Mgr.,Moudry
179		1.5.5.3.2		Complete IV&V Reviewer column	5 days			0%		IV&V Team
180		1.5.5.3.3		Submit to MNIT and CMS	1 day			0%		Moudry
181		1.5.5.3.4	IM-10	Anomaly Reports	2 days			0%		
182		1.5.5.3.4.1		Analyze anomaly upon occurrence	1 day			0%		IV&V Team
183		1.5.5.3.4.2		Write Report if anomaly is confirmed	1 day			0%	182	Haglund,Mandy
184		1.5.5.3.4.3		Submit Report	0 days			0%	183	Moudry
185		1.5.5.3.4.4	IM-10	Milestone: Anomaly Report complete	0 days			0%	184	MNIT/Contract Mgr.

Appendix C: Sample IV&V Review Report

Modular Medicaid System

Independent Verification & Validation (IV&V)

Quarterly Report 17

(February 1, 2020 – April 30, 2020)

V1.0

May 21, 2020

Prepared by:



Software Engineering Services

1311 Ft. Crook Road South, Suite 100

Bellevue, NE 68005

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Document Control

This is a controlled document. The control and release of this document is the responsibility of the document owner.

Version control			
Document reference	-IVV-QR-17	Project	Modular Medicaid System
Version	1.0	Date	05-21-20
Document title	IV&V Quarter 17 Report		
Version History			
Version	Date	Author	Comment
0.9	05/07/2020	Jim Moudry	Submittal for State Review and Comment
1.0	05/21/2020	Jim Moudry	Final incorporating State and DXC comments shown in Appendix F. <ul style="list-style-type: none"> - Updated Section 1.3.2 to show “three” new findings vs. “two” new findings. - Corrected new finding numbers in Table 1.3.2.1. - Section 3.1: Within Finding F-M-17-01, separated the finding into two sub-findings: F-M-17-01.a for Quality of Test Cases and F-M-17-01.b for Quality of Software Delivered for Testing.

We have reviewed and agreed to the information described in this document and referenced attachments.

Monthly Status Report (MSR)-15 IV&V		Approval	
Name	Title	Date	Signature
Jim Moudry	IV&V Project Manager, SES	05/21/2020	<i>Jim Moudry</i>
Raj Sharma	Quality Management Office (QMO), SES	05/21/2020	<i>Raj Sharma</i>
	PMO Chair, [REDACTED]		

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1. Executive Summary

Software Engineering Services (SES) produced this *Quarterly Independent Verification and Validation (IV&V) Report on the ██████ Modular Medicaid System Project* (hereafter abbreviated ██████) under contract for the ██████ Independent Verification and Validation (IV&V) Services. IV&V is conducted on a limited basis with a report provided monthly and quarterly. IV&V is limited to document reviews and a one-week site visit each quarter to attend project meetings and interview project participants and stakeholders in the areas of Management, Development, Implementation, and Operations. During the course of this project, ██████. New findings, observations, and status updates to previous findings, will now use the term ██████. Findings and observations prior to the ██████. This IV&V observation period began on 1 February 2020 and continued with online review of documentation, meeting attendance over the telephone, and on-site visits through 30 April 2020. The review resulted in new findings and recommendations in the Project Implementation oversight area.

1.1 Overall Project Health

The overall project health (using Green, Yellow, Red color ratings) as of the data cutoff date, 30 April 2020, is shown below for the areas of Project Scope, Schedule, Cost, Staffing, and Quality.

Scope: RED

- As of the April 27, 2020 Weekly Status Report, eight individual modules and the overall scope are red based on remaining CR hours exceeding individual module allocations and the 5,237-hour overall allocation by 2,060 hours.

Schedule: RED

- The 04/27/20 status report showed 17.03% late tasks (up from 13.43% last quarter) with the following modules reporting close to or over 10% late tasks:

Mod 1 CRM	17.69% ↔	Mod 5 FIN	19.36% ↑	Mod 9 (all)	14.92% ↑
Mod 1 CSSP	12.64% ↓	Mod 5 DB	14.02% ↑	Testing (All)	29.34% ↑
Mod 3 Prov	12.36% ↑	Mod 7KEES	16.46% ↓	Mod 5 TPL	9.35% ↑
Mod 4 PIUR	15.54% ↑	Mod 8 DWA	33.53% ↑	Mod 6 MC	8.70% ↓
				Mod 2 Claims	9.94% ↑

Contributing to these late task percentages are:

- For Testing: ██████ requested that development of UAT Test Cases be delayed to occur much closer to each UAT test iteration, rather than all up front up to one year or more prior to the start of a UAT test iteration. There are; however, other late testing tasks, such as delays in creation of SIT Test Cases and delays in test execution completion.
 - For Module 8: Although an official re-baseline has not occurred, ██████ agreed to an entire re-planning of Module 8 activities.
 - For all Modules: Late tasks are offset to a small degree by tasks which have been executed earlier than planned. As of the 04/30/20 Late Tasks Report, overall early tasks were 2.23%.
- Based on previous SIT execution history, SIT 4 and 5 are in jeopardy of completing on time.

Cost:

GREEN

- Project is tracking and reporting against funding allocations.

Staffing:

YELLOW

- Current staffing levels are not able to produce quality code on schedule, execute test cases, and resolve defects in a timely manner. For example, every test resource is overallocated in schedules.
- Recent staff departures.

Quality:

RED

- Defects being resolved are not keeping pace with the number of defects being introduced. Current DMI is less than 75%.
- SIT, Regression, and UAT test case failure rates for certain modules are high. Refer to Findings F-PI-15-01, F-PI-16-01, and F-PI-16-02.

Project health parameter trending is shown in Table 1.1.1.

Table 1.1.1: Overall Project Health Parameters Trending

Quarter	Health Parameters				
	Scope	Schedule	Cost	Staffing	Quality
QR1	GREEN	GREEN	GREEN	GREEN	GREEN
QR2	GREEN	YELLOW	GREEN	GREEN	YELLOW
QR3	GREEN	RED	GREEN	YELLOW	YELLOW
QR4	YELLOW	RED	GREEN	YELLOW	YELLOW
QR5	YELLOW	RED	GREEN	YELLOW	YELLOW
QR6	YELLOW	RED	GREEN	YELLOW	YELLOW
QR7	YELLOW	RED	GREEN	YELLOW	YELLOW
QR8	YELLOW	RED	GREEN	YELLOW	YELLOW
QR9	YELLOW	RED	GREEN	YELLOW	YELLOW
QR10	YELLOW	YELLOW	GREEN	YELLOW	YELLOW
QR11	YELLOW	RED	GREEN	YELLOW	YELLOW
QR12	YELLOW	YELLOW	GREEN	GREEN	YELLOW
QR13	RED	RED	GREEN	GREEN	YELLOW
QR14	GREEN	YELLOW	GREEN	GREEN	YELLOW
QR15	YELLOW	YELLOW	GREEN	GREEN	YELLOW
QR16	RED	YELLOW	GREEN	YELLOW	YELLOW
QR17	RED	RED	GREEN	YELLOW	RED

1.2 Findings and Recommendations Updates

This section presents the status of findings. The findings are the result of the review and analysis of project documents; interviews with project personnel; and attendance at project meetings. A finding is defined as a weakness, deficiency, anomaly, or omission that requires corrective action.

Each finding has a reference number that includes a designator for Finding (“F”), the oversight area (e.g., “M” for Project Management, “S” for Project Scope, “PI” for Project Implementation), the report quarter identifier (e.g. 01, for Findings in Quarter 1), followed by a sequential two-digit number for the finding. Each finding includes a finding name, a description of the finding, and a background when applicable.

Other components of the findings are:

- Risks – possible risks created by the findings
- Recommendations – remedies to close the finding
- References to industry standards – applicable industry standards used in support of the finding (See Section 2.2)
- Priority – ranking to identify whether a given finding in the report is Urgent, High, Medium, or of a Low priority
- Status Update – progress observed since the last report

1.3.1 Status of Previously Reported Findings

Table 1.3.1.1: QR-1 Findings

Finding Origination Date – 03.31.2016				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-01-01 High	Lack of an Effective Lessons Learned Process		Process developed and used to collect lessons learned.	✓
F-M-01-02 High	Lack of Status Update for Milestones Without Sub-tasks		Tables have been included in the Project Weekly Status Reports showing percent complete and estimated completion dates for milestones and some sub-tasks.	✓
F-M-01-03 Medium	Inadequate Decomposition of Schedule Tasks		The duration and hours per resource are down to within 80 hours. In addition, KITO has relaxed their requirement of no more than 80 hours on tasks.	✓

Table 1.3.1.2: QR-2 Findings

Finding Origination Date – 07.15.2016				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-02-01 High	Inadequate Scope of Quality Assurance (QA) Function		<p>plans to Extend scope of QA function to include evaluating quality work processes and work products against process descriptions, standards, procedures.</p> <p>Provide metrics on turnaround time on deliverables and identify areas for improvement.</p>	✓

Finding Origination Date – 07.15.2016				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
			Enhance on-boarding process to assign mentors among BAs and [REDACTED] to ensure consistent process. Provide feedback to project staff and managers on the results of QA activities. This role will not monitor third party QA processes. In Quarter 5, [REDACTED] began to implement a SharePoint workflow process for document review with the potential to gather metrics.	
F-M-02-02 High	Inadequate Visibility into COTS Products Being Developed		List of functionality and defects coming with each release being provided. Release notes after the release. Sprint reviews/demos now being provided.	✓

Table 1.3.1.3: QR-3 Findings

Finding Origination Date – 10.07.2016				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-03-01 High	Lack of Documented Actions Outside of RV Sessions		Action Items are identified in a log and the log is reviewed on at least a monthly basis in the Joint PMO meeting.	✓
F-M-03-02 High	Lack of Visibility Into and Reporting Against Mitigation Plans		[REDACTED] risks were recently updated. Risks are consistently reviewed and updated.	✓
F-M-03-03 Urgent	Lack of Visibility Into Project Critical Path		Weekly Status Reports now include an indication of what modules are on the critical path for Stage 1 and Stage 2.	✓
F-PI-03-01 High	Lack of Visibility Into Product Team System Test		The [REDACTED] Test Team does have some limited informal visibility into [REDACTED] Product Team testing.	✓
F-PI-03-02 Medium	Lack of Common Definition of Defect Severity Levels		The [REDACTED] Test Team has shared defect priority and timeline definitions with the [REDACTED] Product Team.	✓
F-PI-03-03 High	Lack of Formal Acceptance Criteria for Product From [REDACTED] Product Team and Subcontractors		The approach for acceptance of product from the [REDACTED] Product Team and subcontractors is not going to change.	✓

Table 1.3.1.4: QR-4 Findings

Finding Origination Date – 01.31.17				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-04-01 High	Lack of Schedule Decomposition for Test Activities		Weekly test report shows burn-down charts for System Test (ST), System Integration Test (SIT), and User Acceptance Test (UAT).	✓
F-M-04-02 High	Lack of Risk Mitigation Plans		Risk mitigation plans have been attached to the appropriate risks in [REDACTED], although the plans lack detail.	✓
F-M-04-03 High	Lack of Common Understanding of Agile Touch Points for the State		Business function reviews implemented.	✓
F-M-04-04 High	Lack of Planned Accomplishments Not Started or Completed on Time		This information is available by reviewing the Microsoft Project plan; however, it is not being provided in any other summary form. Weekly project status report format and content will be changing.	✓
F-M-04-05 High	Lack of Planned Duration or Baseline Start		This information is available by reviewing the Microsoft Project plan; however, it is not being provided in any other summary form. Weekly project status report format and content will be changing.	✓
F-M-04-06 High	Lack of Color Rating for Completed Activities		This information is available by reviewing the Microsoft Project plan; however, it is not being provided in any other summary form. Weekly project status report format and content will be changing.	✓
F-S-04-01 High	Lack of Consistency in the Quality of Conducted Walkthroughs of BDD or DSD		[REDACTED] has reviewed their walkthrough process to ensure more level-setting between facilitator's and [REDACTED] participants.	✓

Table 1.3.1.5: QR-5 Findings

Finding Origination Date – 04.30.17				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-05-01 High	Lack of Detail in Mitigation Plans		Detailed mitigation plans have been developed for appropriate risks as defined in the Risk Management Plan.	✓

Finding Origination Date – 04.30.17				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-05-02 Urgent	Lack of Decomposition of Data Conversion Activities in Project Schedule for both Stages 1 and 2		Data Conversion activities are included in Stage 1 and Stage 2 schedules.	✓
F-M-05-03 High	Lack of Sharing, Tracking, Monitoring, and Reporting Data Conversion Results		has provided UAT plans that included resources and reporting for UAT.	✓
F-M-05-04 High	Absence of Both High-Level Training Roadmap and Granularity at Module Level		Information has been provided. This finding has been sufficiently remediated and is being closed.	✓
F-M-05-05 High	Lack of formal Mitigation Plan to Manage Behind-Schedule CMS Certification Activities		Certification plan has been revised to show new stage 1 go-live dates and certification in two phases (for Stage 1 modules and for Stage 2 modules).	✓
F-M-05-06 High	Lack of Alignment of CMS Certification Plan and Schedule With the Agreed Approach		A new finding regarding certification will be opened.	✓
F-M-05-07 High	Lack of Common Risk Rating Criteria for Use by all vendors		Common understanding established, but very few risks identified.	✓

Table 1.3.1.6: QR-6 Findings

Finding Origination Date – 07.31.17				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-06-01 High	Lack of Access and Visibility Into Other Dependent Plans		Detailed project plans for these areas have been provided for Stages 1 and 2.	✓
F-M-06-02 Urgent	Absence of UAT Testing Training for UAT Testing Team		Training provided to UAT Team by sufficiently remediated this finding.	✓
F-M-06-03 Urgent	Issues Management Process Not Being Followed Consistently		Much greater emphasis has been placed on entering, tracking, and reviewing issues.	✓

Finding Origination Date – 07.31.17				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-06-04 Urgent	Absence of Planning, Coordination, and Communication for █████ UAT Test Environment Setup		This was resolved for Sage 1. Will close, monitor, and re-open for Stage 2, if required.	✓
F-M-06-05 Urgent	Weekly “Testing Status Report” Does Not Include █████ UAT Testing Status		Separate █████ UAT Test Status Report is being provided.	✓
F-M-06-06 Urgent	█████ Weekly “Testing Status Report” Template Needs Enhancement to Include Other Information About Testing Activities		Report meets State’s needs.	✓
F-T-06-01 High	Absence of Configuration and Set-up Validation Checklist for Establishing UAT Test Environment at █████		Duplicate of F-PI-07-01. Will include example from this finding there.	✓

Table 1.3.1.7: QR-7 Findings

Finding Origination Date – 10.31.17				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-07-01 Urgent	Lack of Approval Before Schedule Start and Completion Dates are Changed		Will close, but will monitor.	✓
F-M-07-02 Urgent	Lack of Requirements Traceability to CMS Certification Checklist Criteria		Stage 1 RTM has been submitted and has been approved by █████.	✓
F-M-07-03 Urgent	Lack of Clear Identification of Dependencies Across and Among all Modules (Stage 1 & 2) From a Holistic Perspective		Project Plans for all Stage 1 and 2 modules provided. Logic diagrams exist and are available in █████.	✓
F-U-07-01 High	Lack of Identification of Deliverable Review and Approval Parties		A review table was added to documents showing names of those who have reviewed the document.	✓

Finding Origination Date – 10.31.17				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-PI-07-01 High	Lack of Implementation of Formal Migration/ Configuration Management Process Across Environments or Sub-systems		Updated CM Plan has been submitted and approved by [REDACTED]. DXC has placed release procedures, CMDB, and list of configurations (software, patches, web services, etc.) across environments on [REDACTED].	✓

Table 1.3.1.8: QR-8 Findings

Finding Origination Date – 01.31.18				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-08-01 Urgent	Time allocated for Stage 2 User Acceptance Testing (UAT) is likely inadequate.		This item is being tracked as a risk.	✓
F-M-08-02 Urgent	Certification planning and execution is inconsistent.		Updated R3 certification schedule published and evidence repository established.	✓
F-M-08-03 High	Lessons learned from Stage 1 project from requirements, planning, design, development, testing, and implementation appears to be missing from Stage 2 planning.		Lessons Learned have been analyzed by [REDACTED].	✓
F-M-08-04 Urgent	Stage 1 defect burn-down rate lagging.		Stage 1 is live.	✓
F-T-08-01 Urgent	Data available in All Claims Universe in Cerner has not been fully tested and/or accepted by [REDACTED] power users.		[REDACTED] has provided concurrence on all Universes.	✓
F-PI-08-01 Urgent	The detailed deployment plan for 3/12/2018 Go Live date does not include [REDACTED] needs.		Stage 1 is live.	✓
F-PI-08-02 High	A regression test suite should be created and packaged to run as an automated process whenever code is imported into the System Integration		[REDACTED] does not intend to develop an automated regression test suite.	✓

Finding Origination Date – 01.31.18				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
	Test environment, whether a major or patch release.			

Table 1.3.1.9: QR-9 Findings

Finding Origination Date – 04.30.18				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-09-01 High	Overlap of SIT and UAT Activities in Stage 2 Implementation Schedule		Risk 52 is in place. This finding will be closed.	✓
F-M-09-02 High	Need Process for Distinct Transition of Defect Ownership from DDI to Operations		Updated Integrated Implementation Plan to be updated second quarter 2020. IV&V will then review to determine if this Finding can be closed.	
F-PI-09-01 High	Reports Created by Data Warehouse Module Need to Be Validated		Reports have been validated.	✓
F-PI-09-02 Medium	Training Needs to Include Real-Life, Role-Based Scenarios		Training plans for each module include role-based scenarios.	✓

Table 1.3.1.10: QR-10 Findings

Finding Origination Date – 07.31.18				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
N/A	N/A			

Table 1.3.1.11: QR-11 Findings

Finding Origination Date – 10.31.18				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-11-01 High	Stage 2 Schedules Lack Time for Data and Environment Refreshes		Data and Environment refreshes were added to the Stage 2 schedule. IV&V will close and revisit when re-baselined schedule is released.	✓
F-M-11-02 High	Minimum Formal Transition and Knowledge Transfer Between Resources		Overcome by events. Plan for transition and knowledge transfer exists.	✓
F-PI-11-01 Medium	Lack of Test Results in ALM for Accessibility Tests		Closed for Stage 1. is considering the addition of Accessibility Test Results into ALM for Stage 2.	✓
F-PI-11-02 High	Stage 2 Testing Iterations Lack Defined Entry and Exit Criteria		Entry and Exit Criteria have been defined for Stage 2 SIT and UAT.	✓

Table 1.3.1.12: QR-12 Findings

Finding Origination Date – 1.31.19				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-12-01 Urgent	Lack of Defined RTM Impacts SIT & UAT Test Planning		Requirements traceability to test cases has been completed for SIT. The approach for UAT will be in the updated TEMP and the RTM will follow. If this becomes an issue for UAT, IV&V will open another finding.	✓
F-M-12-02 High	Lack of Single Point of Contact and Single Repository for Test Defects and Reporting		DEV test results are now being entered into ALM. Test results for Security, Accessibility, Conversion, etc. will continue to be captured outside of ALM. Each testing entity will continue to report their test results.	✓

Table 1.3.1.13: QR-13 Findings

Finding Origination Date – 04-30-19				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
N/A	N/A			

Table 1.3.1.14: QR-14 Findings

Finding Origination Date – 07.31.19				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
N/A	N/A			

Table 1.3.1.15: QR-15 Findings

Finding Origination Date – 10.31.19				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-PI-15-01 Urgent	Downstream Impacts of Late Completion of SIT IT 2 Test Execution		15 additional test resources brought on to help rectify. SIT IT 2 did not meet the re-planned burndown schedule. Need to determine impacts, if any.	
F-PI-15-02 High	Downstream Impacts of Late SIT IT 3 Test Case Completion		Test case completion was adequate to allow SIT IT 3 to begin on time without any significant impacts.	✓

Table 1.3.1.16: QR-16 Findings

Finding Origination Date – 01.31.20				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
F-M-16-01 Urgent	Capacity Planning to Ensure SIT IT 5 Testing Schedule Can be Met		Test cases are shifting from SIT IT2 and SIT IT3 to SIT IT4 and SIT IT5. This is compounded by the number of unresolved failed defects that also need to be re-tested in later iterations. In addition, SIT IT5 is only	

Finding Origination Date – 01.31.20				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
			11 weeks in duration compared to the baseline schedule of 18 weeks for the other SIT iterations. SIT IT 5 is in serious risk of not being able to complete its test cases in the time frame scheduled, putting the project go-live in very serious jeopardy.	
F-PI-16-01 Urgent	Downstream Impacts of Late Completion of SIT IT 3 Test Execution		<p>The completion date for SIT 3 has been extended to 6/12/20, pretty much matching IV&V’s projection of 6/8/20.</p> <p>█ has implemented some mitigation strategies to reduce the Test Execution Carry over from one SIT iteration to another.</p> <ul style="list-style-type: none"> • Increased Testing Staff to increase test case throughput • Initiated BFA readiness and BFA audit processes to track BFA readiness throughout the SIT iteration <p>Additional mitigation strategies being considered:</p> <ul style="list-style-type: none"> • Test execution practices have focused on 1st pass testing versus test case close out, shifting the practice to focus on the resolution of lagging defects • Reviewing defect resolution practices to implement additional resolution meetings • Continue reviewing project practices to determine other opportunities available. <p>SIT IT 3 still has some high failure rates and large number of blocked test cases.</p>	
F-PI-16-02 Urgent	Upstream Activities Leading to High UAT IT 2 Defect Rate Which Could Impact Downstream Activities		<p>The April 27, 2020 Weekly Status Report showed 92 test cases left to be executed, with 59 blocked by defects with 49 having defined fix dates.</p> <p>These are very high failure and blockage rates for UAT IT 2, potentially due to SIT IT 2 not being able to be completed prior to UAT IT 2. In addition, a large number of test cases and functionality that passed in SIT are now failing in UAT, indicating issues such as: environment configurations, system configurations, integrations, etc. between SIT and UAT. The result is that UAT IT 2 is not really performing UAT, but first-</p>	

Finding Origination Date – 01.31.20				
Number/ Priority	Finding Title	No Progress Observed	Progress Observed	Finding Closed
			time test of some functionality and user acceptance is not taking place.	

1.3.2 New Findings

IV&V has three new findings for Quarter 17.

Table 1.3.2.1: New QR-17 Findings

Number	Priority	Finding Title
F-M-17-01	Urgent	Inconsistent Software and Test Case Quality
F-M-17-02	Urgent	Lack of Progress in Defect Resolution and Management
F-M-17-03	Urgent	Overallocation of Resources in Project Schedules

1.3.3 IV&V Project Oversight Area Summaries

The scope of this report includes findings and recommendations for management, technical, implementation, and operations oversight activities. Each review report covers all relevant oversight activities with an emphasis on selected tasks that are important at the particular stage of the Project.

The following table lists the oversight activities evaluated and their scoring (as defined in Section 2.1) for the reporting period. The primary focus of these activities is on the effectiveness of processes and procedures. A rating of 'Not Rated' indicates that these task items are not applicable at this point in the project life cycle.

Table 1.3.3: IV&V Project Oversight Area Summary Ratings

Task Number	Description	Rating of Task Item and Task Number
Management Oversight		
Task Item: Project Sponsorship		
QR 1.1	Assess and recommend improvement, as needed, to assure continuous executive stakeholder buy-in, participation, support and commitment, and that open pathways of communication exist among all stakeholders.	GREEN
Task Item: Management Assessment		

Task Number	Description	Rating of Task Item and Task Number
QR 1.2	Verify and assess ██████ project management and organization; verify that lines of reporting and responsibility provide adequate technical and managerial oversight of the project.	GREEN
QR 1.3	Evaluate ██████ project progress, resources, budget, schedules, workflow, and reporting.	GREEN
QR 1.4	Assess coordination, communication, and management to verify agencies and departments are working interdependently with one another and following the ██████ communication plan.	GREEN
Task Item: Project Management		
QR 1.5	Verify that a ██████ Project Management Plan is created and being followed. Evaluate the project management plans and procedures to verify that they are developed, communicated, implemented, monitored, and complete.	GREEN
QR 1.6	Evaluate ██████ project reporting plan and actual project reports to verify project status is accurately traced using project metrics.	YELLOW
QR 1.7	Evaluate compliance with the estimating and scheduling process of the ██████ project to verify that the project budget and resources are adequate for the work-breakdown structure and schedule, and make recommendations for conformity.	YELLOW
Task Item: Time and Schedule Management		
QR 1.8	Review schedules to verify that adequate time and resources are assigned for planning, development, review, testing, and rework.	RED
QR 1.9	Verify milestones and completion dates are planned, monitored, and met.	RED
Task Item: Issue Management		
QR 1.10	Verify the existence and institutionalization of an appropriate ██████ project issue tracking mechanism that documents issues as they arise, enables communication of issues to proper stakeholders, documents a mitigation strategy as appropriate, and tracks the issue to closure.	GREEN
Task Item: Risk Management		
QR 1.11	Verify that a ██████ Project Risk Management Plan is created and being followed. Evaluate the projects risk management plans and procedures to verify that risks are identified and quantified and that mitigation plans are developed, communicated, implemented, monitored, and complete.	YELLOW
Task Item: Quality Assurance		
QR 1.12	Monitor the performance of QA by reviewing its processes and reports and performing spot checks of system documentation; assess findings and performance of the processes and reports.	RED
QR 1.13	Verify that QA has an appropriate level of independence; evaluate and make recommendations on the project's Quality Assurance plans, procedures, and organization.	YELLOW
Task Item: Organizational Change Management		

Task Number	Description	Rating of Task Item and Task Number
QR 1.14	Verify that a █████ Organizational Change Management Plan is created and being followed. Evaluate the plans and procedures to verify they are developed, communicated, implemented, monitored, and complete; and that resistance to change is anticipated and prepared for.	GREEN
Task Item: Configuration Management		
QR 1.15	Verify that a Configuration Management Plan is created and being followed. Evaluate the configuration management plans and procedures to verify they are developed, communicated, implemented, monitored, and complete. Attend change control boards when appropriate.	YELLOW
Task Item: Communication Management		
QR 1.16	Verify that a █████ Communication Plan is created and being followed. Evaluate the communication plans and strategies to verify they support communications and work product sharing between all project stakeholders; and assess if communication plans and strategies are effective, implemented, monitored, and complete.	GREEN
Task Item: Staffing Management		
QR 1.17	Verify that a detailed Project Staffing Plan is documented. Verify that the required skill sets and the clarity of the description of roles and responsibilities are appropriate. Verify that the proposed staffing levels and skill sets in the Project Staffing Plan are appropriate. Monitor ongoing changes in project staffing needs and actual staffing changes to verify that they are consistent with the staffing plan. Monitor and assess the direct involvement of the █████ Project Management Organization in the management of the █████ Project.	YELLOW

Development Oversight		
Task Item: Requirements Traceability		
QR 2.1	Review and monitor the system traceability plan and processes of system requirements through design, code, test and training, verifying it is complete, being followed, and adheres to industry standards.	YELLOW
Task Item: Technical Review		
QR 2.2	Review and analyze all project system development products, including but not limited to requirements, design, training, and implementation documentation, and vendor developed source code for accuracy, completeness, use of the agreed upon methods and tools, application of formal configuration management and compliance with agreed upon or industry standards.	GREEN
QR 2.3	Verify that requirements and design specifications are well defined and understood by the system's users.	GREEN
Task Item: System Architecture/System Performance/System Capability		
QR 2.4	Evaluate the proposed system architecture, including hardware, licensed software, database, application languages, communications and other critical components to identify potential problems and risks in meeting the anticipated/contractually	YELLOW

	required performance requirements of the system, but not limited to response time and maintainability.	
QR 2.5	Evaluate performance modeling/capacity planning and related volume and stress testing performed by the project.	YELLOW
Task Item: Testing		
QR 2.6	Monitor test execution and/or participate in test reviews.	YELLOW
QR 2.7	Review and evaluate all test plans, procedures, requirements, environment, tools, and execution for unit, integration, and pilot testing of system modules.	YELLOW
Task Item: System Development Management Process		
QR 2.8	Verify that the project implements appropriate processes for reviewing system development lifecycle products, resolving issues, and determining readiness to proceed from present phase to the next phase of the lifecycle.	YELLOW
Task Item: Interface Design and Development		
QR 2.9	Verify that proposed interfaces with █████ utilize appropriate hardware and software to adequately support data conversion and communications between the systems, and that appropriate processes for reviewing interface development are in place.	YELLOW

Implementation Oversight		
Task Item: Implementation Readiness		
QR 3.1	Review and evaluate Implementation Plan.	NOT YET
QR 3.2	Review and evaluate implementation execution against the implementation plan.	NOT YET
QR 3.3	Review and evaluate readiness assessments regarding the Implementation Plan being on schedule and prepared to transition to █████; verify the assessments are being followed.	NOT YET
Task Item: Training		
QR 3.4	Verify User Training mechanisms are planned and executed, and verify they support knowledge transfer to productive use of the new system.	GREEN
QR 3.5	Verify that all training is given on time, and evaluated and monitored for effectiveness, with additional training provided as needed.	GREEN
QR 3.6	Monitor developer-developed training, and review user and maintenance and operations documentation to verify sufficient knowledge transfer for maintenance and operation of the new system.	NOT YET
Task Item: Data Conversion		
QR 3.7	Evaluate the proposed plans, procedures, and software for data conversion. Verify effective data conversion and data cleansing plans and process related to conversion to █████ data format are in place and being followed.	YELLOW
Task Item: Interface Testing		
QR 3.8	Evaluate interface testing plans and procedures for compliance with industry standards. Monitor test execution and/or participate in test reviews.	YELLOW

Operations Oversight		
Task Item: Operational Change Tracking		
QR 4.1	Evaluate [REDACTED] change request and defect tracking processes.	GREEN
QR 4.2	Evaluate implementation of process activities, determine if processes are effective, and are being followed.	GREEN
Task Item: User Satisfaction		
QR 4.3	Evaluate user satisfaction with [REDACTED] to determine areas for improvement.	YELLOW
Task Item: Program Goals and Performance		
QR 4.4	Evaluate impact of [REDACTED] on program goals and performance standards.	NOT YET
Task Item: Plans and Processes		
QR 4.5	Evaluate operational plans and processes.	NOT YET
Task Item: Disaster Recovery		
QR 4.6	Evaluate implementation of the process activities including backup, disaster recovery, and day-to-day operations to verify the processes are being followed. <i>(DR exercise only covered a sub-set of applications outlined in the DR Plan and did not involve [REDACTED] personnel.)</i>	YELLOW

The objective of this report is to provide a point in time snapshot of the [REDACTED] Project, identify new findings, and update findings identified in previous reports. The point in time snapshot is a result of the analysis of project artifacts and activities observed from February 1, 2019 through April 30, 2020.

2. Methods of Review

The IV&V methodology is primarily focused on identifying findings, weaknesses, and/or problems that need to be corrected or that do not adhere to industry best practices. However, the [REDACTED] project is also doing things well and these major strengths or proactive activities are identified in the report. The IV&V Team analyzed each oversight area to determine the application of best practices and to guide the data gathering process. The IV&V Team gathered data from interviews with various project stakeholders, attendance at meetings, and evaluations of project documentation. See Appendix C for a complete listing of these activities.

Our examination is based on both requirements of the contract and industry best practices, including but not limited to the following:

- [REDACTED] - Project Management Methodology (PMM) Release 2.3
- Project Management Body of Knowledge (PMBOK), Seventh Edition
- Capability Maturity Model Integration (CMMI), Version 2.0
- Information Technology Information Library (ITIL) Version 3.0
- Institute for Electrical and Electronic Engineers (IEEE) 730 2002 QSAP
- IEEE 830-1998
- IEEE 1016-2009
- IEEE 1058-1998
- IEEE 1074-2006
- IEEE 12207.0-1996
- IEEE 12207.1-1997
- IEEE 12207.2-1997

- IEEE 828-2012
- IEEE 829 1998
- IEEE 1008-1987
- IEEE 1012-2012
- IEEE 1063-2001

There may be instances where ██████ contractual requirements are met, but the project could nevertheless benefit from the implementation of additional best practices from the above standards. IV&V will specify applicable best practices in our findings and observations as needed.

2.1 IV&V Scoring

The IV&V process rates Task Numbers in four oversight areas (Management, Development, Implementation, and Operations). The process and criteria used for the scoring of overall health areas in Section 1.1 and for scoring of Oversight Area Tasks in Section 1.3.3 are outlined in Appendix A.

3. Assessment Findings

The IV&V Findings, Recommendations, and assigned Priorities from the observations of the ██████ project are presented in the remainder of this document. The IV&V Team will track the progress of the ██████ project in addressing these findings and provide a status update at the end of each Quarterly Review Report. Each finding, sub-finding, and/or recommendation from the Quarterly Report is listed with its appropriate update.

Findings that contain multiple components will be closed when all components are fully addressed.

The IV&V Team assigned a priority to each finding based on an assessment of the degree and probability of impact, the likelihood of occurrence, and the time criticality of the finding in affecting the project. The prioritization criteria are defined in Appendix B.

This section includes newly opened findings, open findings from previous reporting periods, and findings that IV&V has closed during this reporting period. A status of all Findings is maintained in Appendix D. Findings that had been closed in prior reporting periods are located in Appendix E. In addition to findings with their associated recommendations, the IV&V Team has also identified project strengths and other recommendations and observations associated with the ██████ project.

3.1 Project Management

Observations:

- Overall project late tasks percentage continues to increase (17.03% this quarter vs. 13.43% last quarter). Part of this increase is due to UAT test case creation activities being pushed out later in the schedule closer to actual UAT execution start dates and a new Module 8 schedule, that KDHE agreed to.
- It does not appear that resource availability (both hardware and people) were adequately considered in planning the SIT 2 test case execution burn-down schedule. An example is the number of paper claims remaining and lack of resources (scanner and people) to complete them within the revised SIT 2 schedule.
- BFA functionalities are to be available at staggered times during SIT IT 4 and SIT IT 5, rather than all being available at the start of testing. This makes it a challenge to plan, coordinate, monitor, manage, and report test progress.
- The ability to complete SIT IT 5 testing on schedule is in real jeopardy, given:
 - SIT IT 2 first pass execution has been extended for the third time. Now forecast to complete first pass testing for approximately 2,400 test cases 5 months behind original schedule for a total of 9 months.
 - SIT IT 3 first pass execution of approximately 2,100 test cases has been extended by 2 months for a total of 6 months.
 - SIT IT 4 will have approximately 2,200 test cases (includes approximately 500 MAR/T-MSIS test cases brought forward from SIT IT 5) for execution and is scheduled for 4 months.
 - SIT IT 5 will have approximately 2,000 test cases for execution and is scheduled for 2 ½ months.
- The chart below shows the overlap of SIT IT2, SIT IT3, SIT IT4, UAT IT2, and UAT IT 3 due to delays in completion of SIT IT 2 and SIT IT 3 due to defects and code not available.

Orig baseline was 12/5/19

Iterative Testing Schedule																										
	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19	Jan-20	Feb-20	Mar-20	Apr-20	May-20	Jun-20	Jul-20	Aug-20	Sep-20	Oct-20	Nov-20	Dec-20	Jan-21	Feb-21		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24		
SIT Phase																										
SIT Iteration 1		3/4/19								8/8/19						5/8/20										
SIT Iteration 2										8/9/19					1/24/20											
SIT Iteration 3															4/9/20											
SIT Iteration 4															4/10/20											
SIT Iteration 5																										
UAT Phase																										
UAT Initiation																										
UAT Iteration 1																										
UAT Iteration 2																										
UAT Iteration 3																										
UAT Iteration 4																										
UAT Iteration 5																										

- During the IV&V April 2020 quarterly [redacted] expressed concern regarding the quality of certification artifacts. Examples: It does not appear the author had knowledge of [redacted] Claims processing as the inserted screenshots do not represent the [redacted] process. Steps are missing to show how to resolve the edits. Document information doesn't flow correctly and misses the mark.
- Consider consistent process implementation among module PMs for capturing, reporting and distributing meeting minutes and maintaining action item log/tracker. Some modules capture action items in an action item log; whereas, some capture them in meeting minutes making it more difficult to find and track status on the action items.
- The COVID-19 pandemic has impacted the ability to submit, review, and approve deliverables and implement new functionality in a timely manner. Example: Population health with [redacted] delayed.

Finding Number: F-M-09-02
Finding Name: Need Process and Plan for Transition of Defect Ownership from DDI/Product to Operations
Description: To minimize impacts on Stage 2 design and development activities, a process and plan needs to be in place for the transition of Stage 2 defect analysis and resolution from members of the [redacted] DDI and Product teams to the [redacted] Operations Team. The process needs to define responsibilities and the timeline for transition of responsibilities and activities to the Operations Team based on the number, type, and severity of defects being reported. Remaining defects found in Systems Integration Test (SIT) and User Acceptance Test (UAT) prior to production need to be re-examined for priority and impact, and new defects found after go-live, need to be triaged and prioritized by Production, not DDI.
Risks:
<ol style="list-style-type: none"> Resource conflicts between Stage 2 defect resolution and Stage 2 design and development. Potential delays in Stage 2 defect resolution impacting business operations.
Recommendation(s)
<ol style="list-style-type: none"> Establish process and plan for transition of defect ownership to Operations Team. Establish DDI and Production defect triage teams with their respective focus and defect triage criteria.

Reference(s) to Industry Standard			
Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN) and Verification & Validation (VV) practice areas.			
Capability Maturity Model Integration for Services (CMMI-SVC) V1.3: Service System Transition (SST) process area.			
Priority	Impact		Finding Origination
High	Degree	Medium	30 April 2018
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Progress Observed
Status Update	<p>07/31/2018: [REDACTED] to verify plan for Stage 1.5 and update as necessary for Stage 2. IV&V will then review.</p> <p>10/26/2018: The [REDACTED] RTM Manager and Implementation Manager will work together to develop iteration 1 of the Go Live plan. IV&V will then review to determine if this finding can be closed.</p> <p>01/25/2019: The [REDACTED] RTM Manager and Implementation Manager will work together to develop iteration 1 of the Go Live plan. IV&V will then review to determine if this finding can be closed.</p> <p>04/26/2019: Same status.</p> <p>07/26/2019: [REDACTED] RTM Manager and Implementation Manager will work together to develop iteration 1 of the Integrated Implementation Plan. IV&V will then review to determine if this finding can be closed.</p> <p>10/31/2019: Updated Integrated Implementation Plan to be updated first quarter 2020. IV&V will then review to determine if this Finding can be closed.</p> <p>01/31/2020: High-level overview of the Integrated Implementation Plan was presented. The updated Integrated Implementation Plan will be submitted the first quarter of 2020. IV&V will then review to determine if this Finding can be closed.</p> <p>04/30/2020: The updated Integrated Implementation Plan will be submitted the second quarter of 2020. IV&V will then review to determine if this Finding can be closed.</p>		

Finding Number: F-M-16-01
Finding Name: Capacity Planning to Ensure SIT IT 5 Testing Schedule Can be Met
Description: As Business Function Areas (BFA) and test cases shift to later iterations, capacity to handle those test cases in later iterations needs to be ensured, particularly for SIT IT 5, which runs from 8/14/20 to 10/28/20 (approximately 2 ½ months) compared to SIT IT 3 and 4 , which are 4 months in duration. Additionally, the deferral of test cases and carry over of defects further reduces the capacity of SIT IT 5 to execute new test cases. As shown below, test case counts for SIT IT 4 and 5 continue to increase and with the compressed schedule of SIT 5, the number of test cases will make it very challenging to complete on time.

Source/Date	SIT IT 3 (4-month duration)	SIT IT 4 (4-month duration)	SIT IT 5 (2 ½-month duration)	Total
Dec 2019 Monthly Report	2,294	1,630	1,415	8,346
Weekly Status Report 2020.01.06	2,294	1,642	1,431	8,369
Weekly Status Report 2020.01.13	2,294	1,699	1,413	8,390
Weekly Status Report 2020.01.20	2,297	1,726	1,402	8,400
Weekly Status Report 2020.01.27	2,276	1,776	1,490	8,517

Given the actual average test case execution performance rate for SIT IT 2 and 3 through 01/24/2020 of approximately 88 test cases per week, the 1,490 test cases currently in SIT IT 5 would take approximately 16.9 weeks or 3.9 months to complete, exceeding the 2 ½ month period for SIT IT 5.

Risks:

1. Either SIT IT 5 will be extended or required functionality may be missing.
2. Impacts on conduct of UAT IT 4 and 5.
3. Larger number of defects remaining at go-live impacting go-live decision or operations.
4. End-user confidence issues and reliance on legacy system.

Recommendation(s)

1. Complete full analysis of test, resource, and schedule impacts of the slipped completion of SIT IT5 on downstream test iterations and implementation activities.
2. Mature and publish the BFA tracker to include items such as: size, complexity, and impact on number of test cases being deferred.
3. Ensure an accurate listing of functionality to be delivered at the start of SIT IT 5 for each module is provided along with planned dates and plan for functionality that will come some time during the test iteration.
4. Ensure adequate resources are provided to ensure timely remediation of defects to minimize impact on UAT IT 4 and 5 and End-to-End Testing.

Reference(s) to Industry Standard

Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN) and Verification & Validation (VV) practice areas.

Priority	Impact		Finding Origination			
Urgent	Degree	High	31 January 2020			
	Probability	High	Progress Indicator			
	Time Criticality	Immediate	No Progress Observed			
Status Update	01/31/2020: N/A-new finding.					
	04/30/2020: Test cases have been shifting to later SIT Iterations due to BFA movements, test cases deferred because of code unavailable, and blocked defects with fix dates in future iterations as shown below (with data taken from the "Overall SIT Test Case Design Status" slide of the weekly status reports as shown below:					
	Date	SIT IT2	SIT IT3	SIT IT 4	SIT IT 5	TOTAL

12/30/19	2,579	2,294	1,621	1,416	7,910
2/3/20	2,549	2,276	1,799	1,521	8,145
3/2/20	2,442	2,178	1,900	1,606	8,126
3/30/20	2,423	2,098	1,726	1,775	8,448
4/27/20	2,417	2,093	1,653	1,995	8,584
Net Change	-162	-201	+32	+579	+674

As can be seen above, test cases are shifting from SIT IT2 and SIT IT3 to SIT IT4 and SIT IT5. This is compounded by the number of unresolved failed defects that also need to be re-tested in later iterations. In addition, SIT IT5 is only 11 weeks in duration compared to the baseline schedule of 18 weeks for the other SIT iterations. The realistic estimate for the SIT IT 5 test period based on historical data would range between 7.45 months (based on SIT IT2 completing 2,417 test cases in 9 months) and 5.73 months (based on SIT IT3 completing 2,094 test cases in 6 months), rather than the 2 ½ months scheduled. Given the historical test execution performance data, and the fact there are currently 1,995 test cases in SIT IT 5 (as of the 4/27/2020 Weekly Status Report), the number of test cases is likely to grow more, and that several new complex functions are being introduced with SIT IT5, SIT IT 5 is in serious risk of not being able to complete its test cases in the time frame scheduled, putting the project go-live in very serious jeopardy.

Finding Number: F-M-17-01

Finding Name: Inconsistent Software and Test Case Quality

Description: Quality of software and test case deliverables have been inconsistent throughout the project. This has had impacts on ability to complete software deliveries, documentation, defect resolution, and test execution on time. Examples are shown below

- F-M-17-01.a: Quality of Test Cases
 - In March 2020, the Quality Assurance (QA) team reviewed 1,020 SIT IT4 test cases and identified 124 issues (12.2%). They also reviewed 451 SIT IT 3 test cases and identified 50 issues (12.0%). The issues found in UAT IT 2 test cases are summarized below:

Module	Design Steps	Requirements	Expected Results	Other	Total
1	46	4	48	8	100
2	17	1			18
3	2	1			3
5 TPL	1				1
5 DR	1				1
7		1			1
Total	57	7	38	8	124

Details, to include test cases, applicable module, and descriptions of each issue may be found in the Monthly QA Report for March 2020.

Similar quality issues with test cases may also be found in the Monthly QA Reports for January and February 2020.

- F-M-17-01.b: Quality of Software Delivered for Testing

SIT IT2: Baseline schedule date for completion was 12/05/19. The 12/09/19 Weekly Status Report, the report closest to this baseline finish date, showed the following test case failure rates in SIT IT2. Failure rates above 30% are highlighted in pink. It should also be noted that, on this date, 1,157 of 2,628 test cases had not yet been run, and first pass for SIT IT2 is still not complete as of 04/40/20.

Module	Test Case Failure Rate
CRM	7.0%
CSSP	41.7%
Mod 2	24.2%
Mod 5 DR	12.5%
Mod 5 TPL	0%
Mod 6	51.6%
Mod 7	36.0%
Mod 9 UI	4.2%
Overall	21.7%

SIT IT3: Baseline schedule date for completion was 04/09/20. The 04/13/20 Weekly Status Report, the report closest to this baseline finish date, showed the following test case failure rates in SIT IT3. Failure rates above 30% are highlighted in pink. It should also be noted that, on this date, 79 of 2,362 test cases had not yet been run and 292 test cases were blocked due to defects. SIT IT 3 is still not complete as of 04/30/20.

Module	Test Case Failure Rate
CRM	2.0%
CSSP	35.1%
Mod 2	12.1%
Mod 3	17.3%
Mod 4	55.8%
Mod 5 DR	42.4%
Mod 5 FIN	6.3%
Mod 5 TPL	29.7%
Mod 6	4.2%
Mod 7	38.9%
Mod 9 UI	12.7%
Overall	23.5%

SIT IT4: SIT IT 4 began on 04/10/20 and is scheduled for completion on 08/13/20. The 04/27/20 Weekly Status Report, showing the first two weeks of testing, showed the following test case failure rates in SIT IT4. Failure rates above 30% are highlighted in pink. It should also be noted that, as of this date, 1,033 of 2,199 test cases had not yet been run and another 771 test cases were blocked (176 due to defects and 595 from code not being available).

Module	Test Case Failure Rate
CRM	12.7%
CSSP	56.3%
Mod 2	26.3%
Mod 3	44.8%
Mod 5 DR	25.9%
Mod 5 FIN	All 128 test cases blocked
Mod 5 MAR/T-MSIS	64.0%
Mod 5 TPL	33.3%
Mod 6	All 131 test cases blocked
Mod 7	42.9%
Mod 9 UI	12.5%
Overall	37.2%

UAT IT1: Baseline schedule date for completion was 12/06/19. The 12/09/19 Weekly Status Report, the report closest to this baseline finish date, showed the following test case failure rates in UAT IT 1. Failure rates above 30% are highlighted in pink.

Module	Test Case Failure Rate
CRM	12.5%
CSSP	57.1%
Mod 2	25.0%
Mod 5 TPL	18.2%
Mod 6	38.5%
Mod 7	28.8%
Overall	30.4%

UAT IT2: Baseline schedule date for completion is 05/01/20. The 04/27/20 Weekly Status Report, the report closest to this baseline finish date, showed the following test case failure rates in UAT IT2. Failure rates above 30% are highlighted in pink. It should also be noted that, on this date, 30 of 838 test cases had not yet been run and 87 test cases were blocked (64 due to defects and 23 due to incorrect or not available test data). SIT IT 3 was not complete as of 04/30/20.

Module	Test Case Failure Rate		
			Combined
CRM	33.3%	8.3	11.4
CSSP	42.4%	----	----
Mod 2	25.1%	15.4%	24.2%
Mod 5 DR	0%	----	----
Mod 5 TPL	15.4%	----	----
Mod 6	57.1%	----	----
Mod 7	61.4%	11.8%	50.0%
Overall	31.6%	12.5	29.1%

Risks:

1. Schedule impacts due to low quality and needed re-work.
2. Operational impacts due to reduced or incorrect functionality and increased work arounds.

Recommendation(s)

1. Enhance peer review process to involve appropriate reviewers, identify defects and correct them as early as possible.
2. Enhance unit and smoke testing processes with established exit criteria.
3. Implement and enforce acceptance criteria for accepting software into SIT.

Reference(s) to Industry Standard

Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN), Peer Review (PR), Product Integration (PI), Verification & Validation (VV), and Service Delivery and Management (SDM) practice areas.

Priority	Impact	Finding Origination
Urgent	Degree	High
	Probability	High
	Time Criticality	Immediate
		30 April 2020
		Progress Indicator
		N/A
Status Update	New finding.	

Finding Number: F-M-17-02

Finding Name: Lack of Progress in Defect Resolution and Management

Description: Established defect resolution timelines have not been met on the project. The schedule was based on a 16-day average defect resolution time, which has hovered in the 29 to 30-day range for the last six months, despite the addition of development and test staff to improve defect resolution turn-around.

In addition, the Defect Management Index (DMI), a measure of the number of defects closed versus the number of defect open has been in the 56-72% range during the last six months. The DMI is dependent upon the ability to close defects as well as the quality of software (the introduction of defects).

Emphasis needs to be placed on timely triage, resolution, and re-test of defects and on improving the quality of software deliverables.

As of 04/30/2020, Defect aging for open defects is as shown below: Defect aging in excess of 30 days are highlighted in red font.

Team/Severity	Count of	
	Defect ID	Average Age
AVRS	15	31.93
2-Major: No Workaround	1	8.00
4-Minor	13	32.46
5-Cosmetic	1	49.00
CRM	8	21.63
2-Major: No Workaround	1	107.00
4-Minor	7	9.43
DDI	201	29.80
2-Major: No Workaround	78	25.82
3-Major: With Workaround	18	17.28
4-Minor	95	34.67
5-Cosmetic	10	37.00
Product	105	56.49
2-Major: No Workaround	50	43.16
3-Major: With Workaround	11	51.27
4-Minor	34	70.97
5-Cosmetic	10	79.60
UI	33	42.64
2-Major: No Workaround	13	39.00
3-Major: With Workaround	1	11.00
4-Minor	15	45.33
5-Cosmetic	4	52.25
Grand Total	362	38.62

Risks:

1. Inability to keep up with defects, resolve them in a timely manner, and keep them from rolling over into later test iterations, resulting in schedule impacts.
2. Delayed go-live with significant number of defects still unresolved.
3. Operational impacts due to reduced or incorrectly working functionality and increased work arounds.
4. External stakeholders/users (MCOs, Providers, etc.) resistant to adopting use of .

Recommendation(s)			
1. Enhance defect triage, defect resolution, and defect re-test processes and include all applicable stakeholders.			
Reference(s) to Industry Standard			
Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN), Verification & Validation (VV), and Service Delivery and Management (SDM) practice areas.			
Priority	Impact		Finding Origination
Urgent	Degree	High	30 April 2020
	Probability	High	Progress Indicator
	Time Criticality	Immediate	N/A
Status Update	New finding.		

Finding Number: F-M-17-03										
Finding Name: Overallocation of Resources in Project Schedules										
<p>Description: Resources are overallocated in project schedules putting achievement of schedule activities and milestones based on these overallocations in jeopardy of being met on time.</p> <p>The tables below show individual resource over-allocations (% in excess of 100% allocation) for each of the project schedules based on 04/30/20 schedules showing actuals as of 04/24/20. Overallocation up to 50% may be acceptable, but many overallocations exceed 100%, 200%, or even 1,000-2000%, which is not physically possible given that 24hrs/day x 7 days/ wk = 168 hrs, which is 320% overallocation based on 40 hrs/week. Resources are shown by labor category or by initials for their names.</p>										
████████ Certification Project Plan										
		Overallocation								
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021	Q4 2021	Q1 2022	Q2 2022
1	Account Operations Mgr			108%	8%					
2	Tech Writer						143%			
3	PM			9%						
4	TFAL			9%			115%			
5	LE	1050%			14%	105%			30%	
6	TS	3000%	11%	112%	200%	151%	199%	622%	90%	66%

Stage 2 Data Conversion Implementation Project Plan

		Overalllocation					
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	BE	120%	29%	166%			
2	MC	101%	29%	63%	33%		
3	PS			66%	103%		
4	SS	101%	29%	63%	36%		
5	DR	214%	157%	230%	130%	51%	51%
6	PT	201%	129%	163%	190%	51%	51%
7	DG	71%					
8	CM	153%	52%	103%	60%		
9	JMC	124%		3%	17%		
10	JS	100%	100%	114%	114%	100%	

Stage 2 Communication Project Plan

		Overalllocation	
#	Resource	Q2 2020	Q3 2020
1	JM	152%	

Stage 2 – Mod 9 UI- Implementation Project Plan

		Overalllocation		
#	Resource	Q2 2020	Q3 2020	Q4 2020
1	RV	169%	67%	
2	RRB	53%	10%	10%
3	MC	100%	156%	33%
4	AK	137%	33%	33%
5	SR	123%	22%	
6	JH	200%		
7	RK	529%		
8	MV	300%	100%	100%
9	RK-1	167%		
10	VE	313%		
11	AKD	69%	50%	33%
12	RE	21%	33%	33%

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Overalllocation						
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021
1	AG		28%			
2	ANJ	63%	61%			
3	IF	86%	100%			
4	LON	91%	203%	107%	11%	
5	RP		39%			
6	SG	51%	163%	10%		
7	SKG	82%	135%			
8	MZ	57%	46%			
9	IKR	246%				

<div style="display: flex; justify-content: space-between;"> ██████████ Stage 2 Mod 4 Implementation Project Plan </div>						
Overalllocation						
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021
2	TP	39%	284%	123%		
3	RRR	121%	132%	8%	3%	
4	RRB	458%	119%			
5	SBN	362%	110%	14%		39%
6	SN	417%	150%			
8	NP	20%				

Stage 2 Implementation Project Plan											
#	Resource	Overallocation									
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021	Q4 2021	Q1 2022	Q2 2022	
1	TS	2956%	11%	112%	200%	151%	199%	622%	90%	66%	
2	LE	970%			14%	105%			30%		
3	TFAL			9%			115%				
4	PM			9%							
5	Tech Writer						143%				
6	AO			108%	8%						
7	M1 BA						22%				
8	KB						914%				
9	UG						100%				
10	M4 SAS PI Case Management						118%				
11	Portals TFAL-Sr Developer						100%				
12	DR						100%				
13	M2 TFAL						19%				
14	Product Developer						28%				
15	M1 TFAL						100%				
16	M4 SAS PI TFAL						100%				
17	Member TFAL						100%				
18	Member Developer Member UI						28%				
19	Member Developer LTC						28%				
20	Member Developer EPSDT						28%				
21	Member Adv BA						22%				
22	MC Adv BA						42%				
23	Drug Rebate Developer						28%				
24	TPL Developer						28%				
25	Claims Developer Batch Interfaces						28%				
26	Claims Adv Dev Batch Pharmacy Gap						28%				
27	Claims Adv Dev Batch Gap						19%				
28	Claims Adv BA Pharmacy						28%				
29	Claims Adv BA Edits/Audits						28%				
30	EDMS Developer						28%				
31	Correspondence Developer						28%				
32	Connect Adv Developer						28%				
33	Portal Developer						128%				
34	Remittance Advice Adv Developer						28%				
35	KK						238%				
36	Account Business Analyst						400%				
37	Account Manager						1100%				
38	Account Operations Mgr						1400%				

Stage 2 Mod 3 Implementation Project Plan						
#	Resource	Overallocation				
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021
1	BK (KJ)	92%	105%			
2	TB	134%	204%	3%	100%	153%
3	VT	481%	125%		18%	40%
4	RM	141%				73%

Stage 2 Mod 2 Implementation Project Plan

		Overalllocation				
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021
1	R	114%	26%	14%	100%	47%
2	MM	44%	325%	103%	114%	105%
3	MS	150%	184%	167%	167%	167%
4	SRVN	146%	33%	33%		
5	MU	791%	114%	118%	183%	188%
6	SKD	80%	82%	103%	93%	200%
7	DD	160%	112%	80%		
8	BC	240%	117%	43%	14%	
9	CC	63%	78%	14%	47%	
10	MSP	340%	95%	6%	3%	
11	PG	506%		41%		
12	MM-1	137%	95%	28%		
13	RKN	115%				

Stage 2 Mod 5 Dashboard Implementation Project Plan

		Overalllocation				
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021
1	SK	85%	36%			
2	JF	366%	61%			
3	VM	12%	21%	32%		
4	DA	76%				
5	VP	1482%	2%	4%		
6	SA	154%				
7	JP	143%				
8	TR	73%				
9	AG	57%	51%			
10	RC	13%				

Stage 2 Mod 5 DR Implementation Project Plan

		Overalllocation				
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021
1	CP	198%	118%	135%	4%	45%
2	AM	119%	102%	104%	71%	126%
3	RM	63%	157%	67%	63%	160%

Stage 2 Mod 5 MAR-TMSIS Implementation Project Plan

		Overalllocation					
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	FB	181%	143%	147%	13%	12%	
2	WG	154%	35%	39%	39%	35%	
3	MAR/T-MSIS Resource 4		8%				

Stage 2 Mod 5 Financial Implementation Project Plan

#	Resource	Overallocation					
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	AM	694%	391%	29%	39%	58%	58%
2	BH	171%	107%				
3	MS	543%	119%				
4	KS	524%	169%	129%	175%	138%	138%
5	R	104%	122%				
6	AS	712%	86%	105%		19%	19%
7	TT	539%	216%	188%	10%	138%	138%
8	NK	164%	98%				
9	MK	143%					
10	SC	375%	160%	93%		138%	138%
11	UG	147%	159%	53%	100%	39%	33%
12	CH	330%	117%	13%		19%	19%
13	EW	155%	75%				
14	VR	82%	122%				
15	RR	115%	62%				
16	EL	51%	80%				
17	MC	50%	80%				

Stage 2 Mod 5 TPL Implementation Project Plan

#	Resource	Overallocation					
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	IJ	487%	86%		47%	53%	
2	AG	375%	114%				
3	LK	20%	3%	5%	5%	3%	

Stage 2 Mod 6 Implementation Project Plan

#	Resource	Overallocation					
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	RL	133%	189%	263%			
2	MW	266%	188%	333%			
4	LK	20%	4%	13%	10%	7%	
5	AH	242%	266%	212%		4%	4%

Stage 2 Mod 8 Implementation Project Plan

#	Resource	Overallocation					
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	R	193%	89%	110%	115%	32%	
2	BP	197%	111%	18%	185%	11%	
3	SC	250%			14%		
4	DPR	458%					
5	AB	212%					
6	VC	273%	65%	72%	41%	53%	31%

Stage 2 Mod 7 Implementation Project Plan

		Overallocation					
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	JV	1600%	479%	554%	425%	396%	
2	LB	1400%	418%	421%	400%	325%	
3	MH	1000%	493%	468%	426%	396%	
4	RK	802%	516%	425%	400%	325%	
5	VM	523%	193%	100%	100%	25%	
6	MCV	1800%	225%	121%	100%	25%	
7	NJ	373%	109%	11%	200%	26%	
8	LB-1	6%	31%	8%	100%		
9	NS	1100%	424%	427%	402%	360%	
10	SM	270%	136%	100%	100%	25%	
11	TE	771%	209%	103%	100%	25%	
12	UG		305%		100%		
13	AK	420%	50%				
14	AN	332%	153%	100%	100%	25%	
15	CO	317%	107%	100%	100%	25%	
16	DC	490%	489%	467%	450%	384%	
17	NZ	17%					
18	ME	56%					
19	JS	343%	126%				

Stage 2 Test Case Creation Implementation Project Plan

		Overallocation					
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	PC	100%	17%				
2	MS	138%					
3	PS	34%					
4	MM	156%					
5	RD	149%					
6	AKP	141%					
7	BK	100%					
8	MP	27%					
9	SV	67%					
10	SF	10%					
11	RR	20%	17%				
12	KK	25%	4%				
13	S	4%					
14	NS	54%					
15	S-1	54%					
16	GS	4%					

Stage 2 Mod 9 SD-OXI Implementation Project Plan

		Overallocation				
#	Resource	Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021
1	HS	128%	456%	9%	8%	
2	JH	119%	679%	9%	170%	16%
3	FRH	90%	761%	5%	23%	
4	GG	11%		5%	23%	
5	TG	201%				
6	JA	188%				
7	MS	200%	300%	100%	200%	100%

Stage 2 Mod 9 Implementation Project Plan

#	Resource	Overallocation					Q3 2021
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	
1	CK	247%	266%				
2	NM	232%	119%				
3	JP	373%	231%	733%	42%		
4	RS	311%					
5	MG	18%	123%	100%	100%	100%	
6	TJ	292%	142%	158%	23%	109%	
7	JP		37%	30%			
8	AO	134%					
9	VG	379%	302%	176%	16%	17%	
10	RR	1250%	197%	113%	117%		
11	RL	200%	123%	100%	200%	100%	
12	GK	56%	175%	169%	70%	20%	
13	SP	175%					
14	BBP	728%	50%				
15	RM	316%	592%				
16	NM	1270%	135%	26%			
17	EH	112%	57%	73%			
18	DC	156%	297%	44%	21%	17%	
19	MP	261%	623%				
20	MM	200%					
21	SV	223%					
22	SA	135%					
23	S	1800%	811%				
24	MJ	106%					
25	DB	292%	97%	106%	105%	99%	
26	SK	126%	73%	271%	142%	1%	
27	RN	471%	357%				
28	SM	147%	21%	242%			
29	JN	331%	14%	43%	15%	15%	
30	KK	351%	23%	61%	29%	25%	
31	MR	26%	7%	11%	7%	7%	

Stage 2 Test Case Creation UAT Implementation Project Plan

#	Resource	Overallocation					Q3 2021
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	
1	15UAT Tester	14%	14%				
2	16UAT Tester	86%					
3	19UAT Tester	200%					
4	26UAT Tester	200%					
5	27UAT Tester	43%	43%				
6	28UAT Tester	43%	43%				
7	DE			43%			
8	AP			49%			
9	SA			71%			
10	BP			55%			

Stage 2 Test Case Execution Implementation Project Plan

#	Resource	Overallocation					
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	RD	423%	152%	140%			
2	MM	551%	166%	797%			
3	AKR	112%	67%	945%			
4	AKP	458%	133%	945%			
5	AV	348%	195%	939%			
6	EM	65%	29%				
7	SM	3650%					
8	NV	130%					
9	BK	3650%					
10	M	75%					
11	DP	85%					
12	M-1	563%	236%	47%			
13	S	138%	218%	47%			
14	3Tester	103%	24%				
15	A	151%		96%			
16	A-1	66%	128%				
17	S-1	107%					
18	S-2	252%	54%	62%			
19	S-3	861%	135%	69%			
20	V	203%	54%	62%			
21	K	361%	30%	118%			
22	P	154%		74%			
23	IG	131%					
24	SF	400%					
25	S-4	196%	17%				
26	A-2	341%	45%	3%			
27	JG	37%	3%	81%			
28	KK	86%	108%	36%			
29	RR	325%	61%	182%			
30	2Tester	102%					
31	4Tester	102%					
32	5Tester	125%	41%				
33	6Tester		128%	41%			
34	22Tester			76%			
35	8Tester		22%	158%			
36	9Tester		22%	158%			
37	10Tester		22%	158%			
38	A-3	175%	165%				
39	11Tester		30%	81%			
40	12Tester		9%	81%			
41	13Tester		13%	81%			
42	14Tester		14%				
43	15Tester			41%			
44	16Tester			41%			
45	17Tester			41%			
46	7Tester		54%	41%			
47	19Tester		21%				

#	Resource	Overalllocation					
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
48	PR	131%	202%	11%			
49	20Tester			52%			
50	21Tester			52%			
51	SB		155%				
52	RP		155%				
53	KKP		147%				
54	S-5	64%	16%				
55	HK	94%	4%				
56	PC	830%	63%				
57	A-4	93%	47%				
58	VK	900%	265%				
59	S-6	182%	74%				
60	C	54%	144%	118%			
61	N	124%	144%	118%			
62	R	145%	183%	118%			
63	NS	656%	18%				
64	MR	94%	4%				
65	MD	94%	4%				
66	PB	94%	4%				
67	VB	887%	10%				
68	SS	187%	24%				
69	SP	234%	6%				
70	JS	5%	117%				
71	RA	2%	117%				
72	SS-1	1000%	13%				
73	SR	168%					
74	KP	105%	141%				
75	P	140%					
76	R-1	526%					
77	P-1	188%	26%				
78	RG	111%	94%				
79	CPS	163%	118%				
80	P-2	115%	117%				
81	A-5		115%				
82	MK		152%				
83	S-7	269%					
84	V		119%				
85	M		117%				
86	S-8		117%				
87	P-3		113%				
88	S-9		181%				
89	K		118%				
90	S-10	66%	117%				
91	P-4		111%				
92	M-1	300%	100%				
93	VR	300%	100%				

Stage 2 Test Case Execution UAT Implementation Project Plan

#	Resource	Overalllocation					
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	DE	242%	11%		86%		
2	JB	619%	363%	152%	78%		
3	SW	113%	11%		42%		
4	VZ	349%	56%	96%	102%		
5	CH	354%	153%	51%	185%		
6	JG	243%	71%	21%	185%		
7	PS	107%	71%	161%	48%		
8	AM	88%	37%	19%	48%		
9	CC	134%		105%	48%		
10	SO	200%		19%	19%		
11	SA	106%		104%	4%		
12	AP	116%	19%	117%	17%		
13	TD			117%	43%		
14	15Tester			26%	56%		
15	16Tester	5%	16%	26%	56%		
16	17Tester	17%	16%	22%	22%		
17	OC	337%			82%		
18	18Tester	17%	16%	22%	97%		
19	KKP	11%	11%	11%	11%		
20	PS	11%					
21	RN		24%				
22	VJ	9%					
23	VJ-1	69%					
24	SR	100%					
25	LO	30%					
26	PK	59%					
27	BS	69%	200%				
28	LH	50%					

Stage 2 Training Project Plan

#	Resource	Overalllocation					
		Q2 2020	Q3 2020	Q4 2020	Q1 2021	Q2 2021	Q3 2021
1	LC		54%		6%		
2	AR	1950%		16%	17%	332%	
3	MR	22%			32%	4%	
4	TG	230%	197%	67%	204%	355%	
5	TA	64%		3%	3%		
6	MO	1750%	4%	14%	24%	25%	
7	TW	329%	4%	114%			
8	MD	700%	4%	114%			
9	JB	707%	4%	14%			
10	TG	178%	4%	14%			

It should be noted that several resources are overallocated in more than one project schedule, resulting in a compounded impact for those resources.

Risks:			
<ol style="list-style-type: none"> 1. Inability to accomplish tasks and meet project schedules. 2. Competing priorities for resources overallocated among several project schedules. 3. Compromised work quality due to overloaded resources. 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Resolve resource overallocations and conduct resource leveling to establish realistic project schedule. 2. Realign task priorities based on resource availability. 3. Consider automation of activities where appropriate, such as regression testing, etc. 			
Reference(s) to Industry Standard			
Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN), Estimation (EST), Monitor and Control (MC), and Service Delivery and Management (SDM) practice areas.			
Priority	Impact		Finding Origination
Urgent	Degree	High	30 April 2020
	Probability	High	Progress Indicator
	Time Criticality	Immediate	N/A
Status Update	New finding.		

3.2 User Involvement

Observations:

- [REDACTED] and other affected parties should participate in the annual DR exercise.

3.3 Project Organization/Staffing

Observations:

- Assign a Configuration Manager role to oversee and manage configuration issues in areas such as environments (within and across), deployment, web services (pointed to correct sources and targets), and solutions/system configurations (such as table references, etc.).
- Key staff turnover at this stage of the project may have critical impacts on project schedule. (e.g. [REDACTED] Project Manager, PIUM and Mod 5 InSight Dashboard; and UAT Manager. [REDACTED] Managed Care Team Lead, and Mod 5 TPL and Interim Provider Team Lead)
- Current staffing levels with the Product, Operations, and DDI teams do not appear to be adequate to be able to produce quality code on time, develop and execute test cases, complete integrations, resolve defects, and design and implement required change orders on schedule and in a timely manner. Examples are the lack of Operations resources to support testing of paper claims, and Product and DDI staff to develop quality code and resolve defects in a timely manner.

3.4 Technology/Technical

Observations:



- Synchronization of environment configurations remains a challenge. For example, UAT-C was pointing to wrong webservice that had not been reconfigured after SIT.
- Security Management Plan, Role Based Access Controls (RBAC) settings, Configuration Management Plan, DR/COOP Plans, and ServiceNow (Inventory of servers, services, and tools) should be updated regularly on a defined schedule.
- As [REDACTED] are working to create an RBAC baseline to be tested starting with UAT 3, the following should be considered:
 - User permission gaps in legacy should be reviewed to avoid them being inherited in Stage 2 RBAC.
 - Roles need to have appropriate levels of permissions in the system to perform their job functions and do not have extra permissions that their function does not need.
 - To support RBAC scalability, a pre-defined strategy/approach is needed to ensure that a user belonging to multiple roles does not their permissions changed or impacted by other roles.
- Need to share formal documentation with [REDACTED] about how various environments (UAT, Production like, and Production) are planned for capacity and scalability to meet [REDACTED] current and future needs.
- Conversion run time using Java Script Object Notation (JSON) files is taking much longer than expected. Slides added to [REDACTED] Weekly Status Report need to actually include action items planned to reduce conversion run times for each module, as appropriate.
 - Consider clearly identifying data conversion tasks within [REDACTED] Stage 2 Test Case Execution Implementation Project Plan to identify dependencies to assist in critical path.

3.5 Project Scope

Observations:

- Amendment 6 to the DDI contract incorporated a range of Change Orders (COs) and allowed for an additional 5,237 hrs. of Change Requests (CRs). As of April 27.2020, nine individual modules and the overall scope are red based on remaining CR hours exceeding individual module allocations and the 5,237-hour overall allocation by 2,060 hours.
- Approximately 28% of the requirements are non-functional and need to have appropriate evidence defined to show they have been satisfied.
- Module 8 Data Warehouse underwent a re-planning exercise, partly due to expanded scope.
- BFA core functionality is still being updated due to continued influx of change requests from KDHE and feedback from product walkthroughs. This is scheduled to complete in mid-August 2020.
- The chart below shows the increase in BFAs in SIT IT4 and SIT IT 5 from 03/05/20 to 04/08/20. This increase has impacts on completion of design documents, test planning and test cases, test execution, integrations and interfaces, and training documents, putting a huge strain on the schedule.

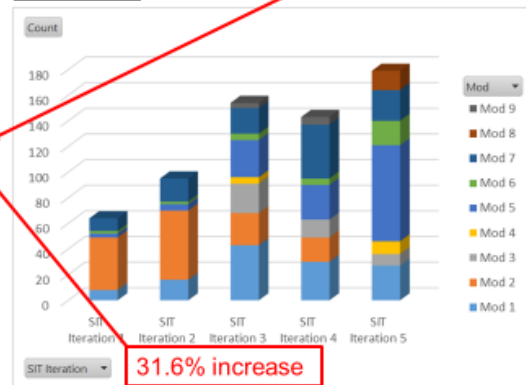
As of 04/08/2020

Row Labels	Mod 1	Mod 2	Mod 3	Mod 4	Mod 5	Mod 6	Mod 7	Mod 8	Mod 9	Total
SIT Iteration 1	8	41			3	2	10			64
SIT Iteration 2	16	54			5	2	18			95
SIT Iteration 3	43	25	23	5	29	5	20		4	154
SIT Iteration 4	30	19	14		27	5	42		6	143
SIT Iteration 5	27		9	10	75	19	24	15		179
Total	124	139	46	15	139	33	114	15	10	635

As of 03/05/2020

Row Labels	Mod 1	Mod 2	Mod 3	Mod 4	Mod 5	Mod 6	Mod 7	Mod 8	Mod 9	Total
SIT Iteration 1	8	41			3	2	10			64
SIT Iteration 2	16	54			5	2	18			95
SIT Iteration 3	44	25	23	5	29	5	23		4	158
SIT Iteration 4	29	8	13		28	6	33	7	5	129
SIT Iteration 5	15		9	10	73	18	3	8		136
Total	112	128	45	15	138	33	87	15	9	582

As of 04/08/2020



- Consider identifying/categorizing BFA's according to the origin of their sources such as CR's for Request, CR's for Design Clarification/Refinement, CR's for Requirement Clarification/Refinement, CR's for Product, etc.

3.6 Project Oversight

Observations:

- Although late task percentages are being reported, the degree of impact, percentage of work incomplete, corrective actions needed, and trending of late tasks are not tracked or reported in the weekly status report, Joint PMO, or Team Leads meetings.
- Given the continued challenges with document quality (both payment-based contractual deliverables and non-payment-based documents), an emphasis should be placed on oversight of this quality control function.

3.7 Business Impact

Observations:

- The business impact (resource requirements and manhours) of satisfying Federal reporting requirements using the need to be determined versus what those needs are under the current MMIS.
- In its *Medicaid Management Information System (MMIS) Re-procurement RFP*, stated it plans to achieve a MITA maturity level 3 for seven (7) of the MITA Business Areas within the first thirty-six (36) months of the contract and continue to achieve higher maturity levels throughout the contract term. It is not evident there has been any interim assessments or reporting of progress toward these goals.
- Business performance goals and objectives need to be defined, collected, and reported for .

3.8 Cost-Benefit

Observations:

- Identify indirect cost of identified workarounds for defects to business operations.
- Daily system performance information automatically generated for [REDACTED] staff needs to be analyzed to determine costs and benefits of [REDACTED].

3.9 Project Implementation

Observations:

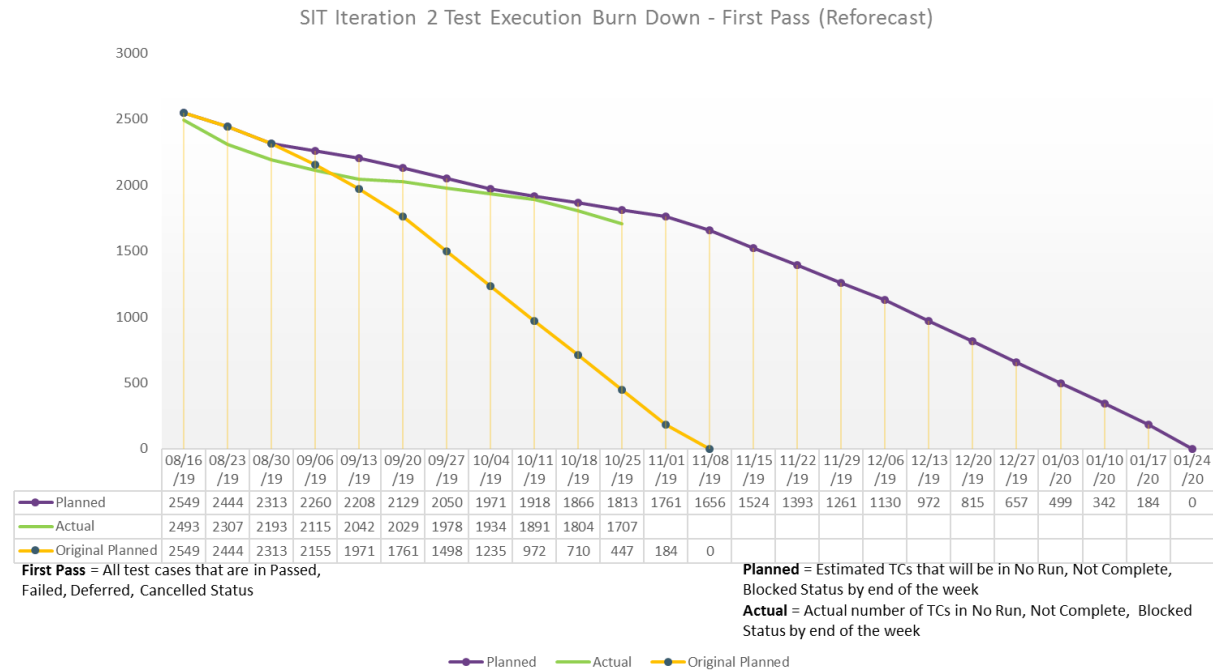
- A report content and data validation process needs to be established with defined roles for the MAR and Federal reports, such as the CMS 64. This presents a challenge as some existing reports may not be accurate.
- Synchronization of environment configurations (both environment set-up and deployment) remains an area of high concern.
- SIT appears to be using a siloed approach in that interface files are being manually created and processed rather than using the automated interface process between modules.
- Mod 2 Claims policy parallel testing is testing the pricing engine and not the full modular functionality.
- Defect resolution time continues to exceed the 16 days which went into test planning. It is currently about 30 days.
- Defect resolution has not kept pace with defect detection, so the number of open defects continues to increase. This is reflected by the Defect Management Index (DMI) of less than 80%. The longer than planned time to resolve defects and defect resolution not keeping pace with defect detection may impact downstream testing and product quality.
- Consider populating the Defect Category under the Root Cause field in ALM at time of triage (rather than at time of closing the defect) and including in management reports to [REDACTED].
- Need to assess impact of existing work arounds on operations due to defects on Stage 2
- SIT IT2 first pass execution did not meet its re-planned completion date of 01/24/2020 and is now scheduled to complete 5/8/2020, approximately five months behind its baseline schedule date of 12/05/2019.
- [REDACTED] needs to plan how external files/interfaces are going to be tested and verified during end-to-end testing.
- [REDACTED] has little line of sight into integration and interface defects.
- Consider expanding both SIT and UAT defect triage team composition to include representation from [REDACTED] Operations, [REDACTED] Product, [REDACTED] DDI, [REDACTED] Testing, [REDACTED] Testing, [REDACTED] Technical, etc.
- Stage 1 showed that data cleanup was a much larger data conversion effort than planned. Stage 2 has adopted incremental data migrations and data loads; this creates unique challenges or risks that need to be accounted for such as:
 - Rowversion columns need to be added in every table
 - Last rowversion value needs to be preserved for every migrated table
 - Insert or update operation, the values in CreatedOn & ModifiedOn columns must be updated along with other set of columns of respective table
 - In case of a heavy transactional database (such as Mod 2 Claims), change data capture will shoot up memory utilization by the database due to redundant record logging
 - Overhead to maintain the distributor
- [REDACTED] operations may not be thoroughly reviewing test cases prior to sending to [REDACTED] for review. For example, claims test cases that were cancelled should have been caught by Operations.

- ██████████ to consider reviewing UAT IT 3 TCs review comment log to analyze and group comments in common themes to develop an approach to mitigate in future UAT TCs.

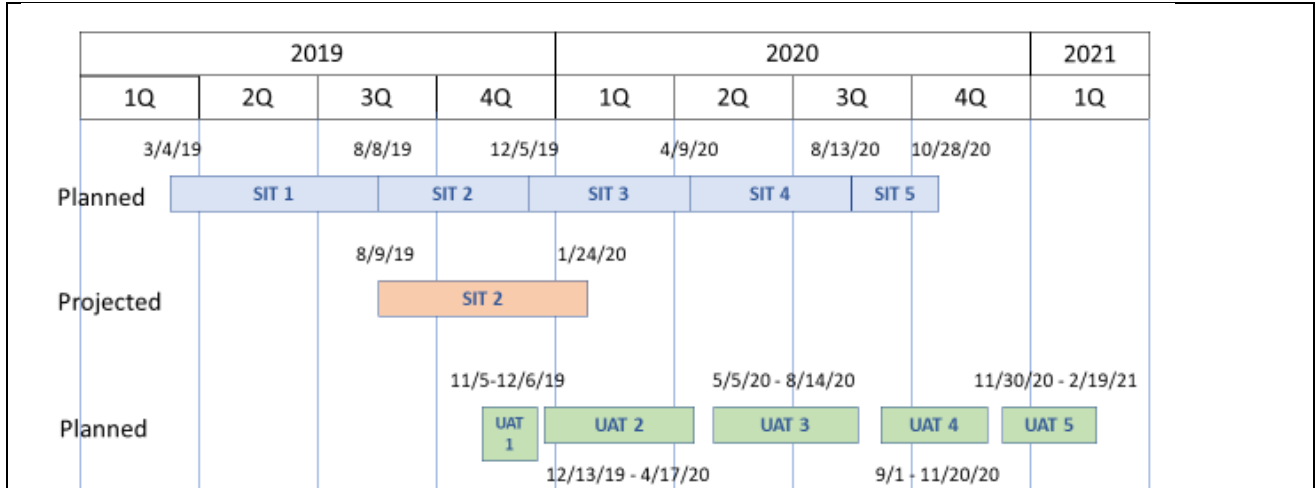
Finding Number: F-PI-15-01

Finding Name: Downstream Impacts of Late Completion of SIT IT 2 Test Execution

Description: SIT IT 2 test execution is well behind schedule with seven defects blocking the ability to execute 651 test cases. Three of these defects were open a month ago on 9/25/19. The baseline schedule has SIT IT 2 completing on 11/08/2019. As of 10/25/2019, the baseline schedule and associated burn-down called for only 447 test cases remaining to be executed. Actual test execution has 1,707 test cases remaining. ██████████ has laid out a new test case execution burn-down schedule (shown below), which has SIT 2 execution completing on 01/24/2019, or 2 ½ months behind the baseline schedule.



The testing iterations were set up to allow for the delivery and testing of certain functionality as it became available for testing in SIT before testing in the subsequent SIT and UAT iterations. This slip in SIT 2 completion needs to be analyzed for impacts on downstream testing as SIT 2 will now overlap SIT 3, UAT 1, and UAT 2, as shown below.



Risks:

1. Resource conflicts between SIT IT 2, UAT IT1, SIT IT3, and UAT IT2.
2. Incomplete testing in SIT IT 2 before starting UAT IT 2 may result in increased number of defects found in UAT further slowing down defect triage and resolution impacting downstream test execution.
3. Impacts on the ability to test planned functionality in downstream test iterations (SIT and UAT).
4. Slips to downstream test iterations with potential impact on Stage 2 go-live date.

Recommendation(s)

1. Complete full analysis of test, resource, and schedule impacts of the slipped completion of SIT IT2 on downstream test and implementation activities.
2. Provide a plan to go forward to ensure SIT iterations do not overlap their respective UAT iterations.

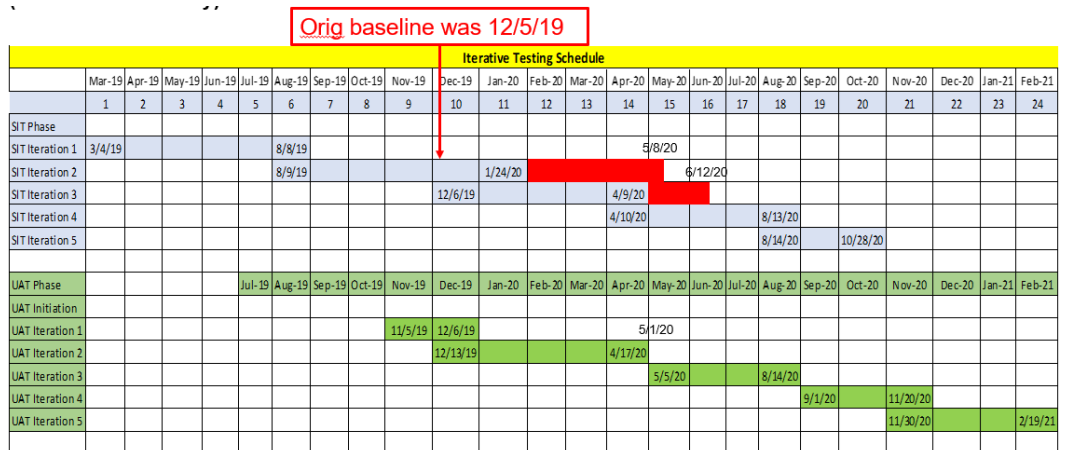
Reference(s) to Industry Standard

Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN) and Verification & Validation (VV) practice areas.

Priority	Impact	Finding Origination
Urgent	Degree	High
	Probability	High
	Time Criticality	Immediate
Status Update	<p>01/31/2020: [REDACTED] added 15 additional test resources to facilitate SIT IT 2 test execution and defect resolution; however, SIT 2 test execution still did not meet the revised completion schedule of 01/24/20 and there has been no significant difference in defect resolution times.</p> <p>SIT IT 2 test case burn-down through 01/24/2020, with 401 test cases remaining, is shown below:</p>	

- Mod 2: 9.1%
- DR: 0%
- Mod 6: 11.5%
- Mod 7: 13.4%
- Overall: 9.7%

SIT IT 2 is now not planned to complete first pass testing until 5/8/20, 15 weeks beyond the 1/24/20 re-planned date, and 21 weeks (5 months) beyond the original 12/05/19 baseline date. The April 27, 2020 Weekly Status Report shows the project has 91 test cases left to be executed, 37 test cases behind schedule to meet the new 5/8/20 SIT IT 2 first pass completion date. Of the remaining 91 test cases, 47 are blocked, leaving 44 test cases which can be executed. SIT IT 2 now overlaps SIT IT3, SIT IT4, UAT IT2, and the very start of UAT IT3, as shown below:



has implemented some mitigation strategies to reduce the Test Execution Carry over from one SIT iteration to another.

- Increased Testing Staff to increase test case throughput
- Initiated BFA readiness and BFA audit processes to track BFA readiness throughout the SIT iteration

Additional mitigation strategies being considered:

- Test execution practices have focused on 1st pass testing versus test case close out, shifting the practice to focus on the resolution of lagging defects
- Reviewing defect resolution practices to implement additional resolution meetings
- Continue reviewing project practices to determine other opportunities available.

The overlap of SIT IT 2 with SIT 3, UAT 2, and now SIT IT 4 appears to be a contributing factor in the failure rates being seen in SIT 3 and UAT 2, since certain functionality and subsequent defect resolution (if needed) was not able to happen in SIT IT 2 prior to execution in SIT 3 and UAT 2. The result is that UAT IT 2 is not really performing UAT, but first-time test of some functionality and user acceptance is not taking place.

IV&V will continue to monitor for further impacts.

1. Complete full analysis of test, resource, and schedule impacts of the slipped completion of SIT IT3 on downstream test iterations and implementation activities.
2. Ensure an accurate listing of functionality to be delivered at the start of each test iteration for each module is provided along with planned dates and plan for functionality that will come some time during the test iteration.
3. Establish entrance and exit criteria for each SIT and UAT iteration.
4. Provide a plan to go forward to ensure SIT iterations do not overlap their respective UAT iterations.

Reference(s) to Industry Standard

Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN) and Verification & Validation (VV) practice areas.

Priority	Impact	Finding Origination
Urgent	Degree	High
	Probability	High
	Time Criticality	Immediate
		Progress Indicator
		N/A

Status Update

01/31/2020: N/A-new finding.

04/30/2020: The completion date for SIT 3 has been extended to 6/12/20, pretty much matching IV&V's projection of 6/8/20. As of the April 27, 2020 Weekly Status Report, these failure rates are now:

- CSSP: 29.4%
- Mod 4: 50.0%
- DR: 36.4%
- TPL: 27.1%
- Mod 7: 31.9%
- Overall: 20.6%

As discussed in Observation 20190803, the January 27, 2020 Status Report showed a total of 928 Test Cases blocked, 525 by defect and 403 because of code not available. As of the February 3, 2020 Weekly Status Report this improved to a total of 493 blocked test cases (203 by defect and 290 by code not available). With the March 2, 2020 Weekly Status Report, there were 698 total blocked test cases (561 due to defects and 137 due to code not available).

Now, with the April 27, 2020 Weekly Status Report, there are 190 blocked test cases (all due to defects) of which 108 have defined fix dates. 114 test cases are available for testing. The summary of blocked test cases is shown below:

S2 - IT 3 Blocked By Module and Reason

		Blocked by Defect	<Total>
Mod1:CSSP	62	39 with defined fix dates	62
Mod2:Claims	40	All with defined fix dates	40
Mod3:Provider	14		14
Mod6:MC	26		26
Mod7:KEES	48	29 with defined fix dates	48
<Total>	190	108 total with defined fix dates	190

has implemented some mitigation strategies to reduce the Test Execution Carry over from one SIT iteration to another.

- Increased Testing Staff to increase test case throughput

	<ul style="list-style-type: none"> Initiated BFA readiness and BFA audit processes to track BFA readiness throughout the SIT iteration <p>Additional mitigation strategies being considered:</p> <ul style="list-style-type: none"> Test execution practices have focused on 1st pass testing versus test case close out, shifting the practice to focus on the resolution of lagging defects Reviewing defect resolution practices to implement additional resolution meetings Continue reviewing project practices to determine other opportunities available. <p>SIT IT 3 still has some high failure rates and large number of blocked test cases. IV&V will continue to monitor for impacts to downstream test activities.</p>
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Finding Number: F-PI-16-02

Finding Name: Upstream Activities Leading to High UAT IT 2 Defect Rate Which Could Impact Downstream Activities

Description: As of 01/24/2020, six weeks into UAT IT 2 testing, 256 out of 516 test cases are blocked due to defects. 99 have been executed or in process of execution as of this date, leaving 161 left that can be executed unless blocking defects are fixed. As of 01/24/2020, only one defect that impacts one blocked test case has an estimated fix date. Additionally, UAT IT 2 has seen some high test case failure rates in the following modules:

Module	12/23/19	12/30/19	1/06/20	1/13/20	1/20/20	1/27/20
CSSP				81.8%	86.7%	88.2%
Claims	100%	100%	100%	100%	100%	46.7%
Managed Care	100%	100%	66.7%	79%	57.1%	57.1%
	60%	60%	62.5%	70%	66.7%	71.0%
Overall	52.4%	52%	48.6%	58.5%	61.5%	60.4%

Contributing factors to these high failure rates could be:

- Schedule driven, rather than readiness driven, testing
- Lack of thorough upstream unit and smoke testing
- Lack of acceptance criteria or vetting of product by module teams prior to deployment into SIT environments
- Delay in completion of SIT IT 2 and the resultant overlap of SIT IT 2 and UAT IT 2, not allowing these problems to be found and potentially resolved in SIT prior to their execution in UAT

Risks:

- Inability to resolve defects within the test iteration period causing impacts to downstream testing.
- Added complexity in managing and aligning release and test environments.
- Larger number of defects remaining at go-live impacting go-live decision or operations.
- End-user confidence issues and reliance on legacy system.

Recommendation(s)

<ol style="list-style-type: none"> 1. Complete full root cause analysis and take appropriate actions to improve upstream activities to improve product quality and acceptance by module teams. 2. Establish entrance and exit criteria for each UAT iteration. 																																						
Reference(s) to Industry Standard																																						
Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN) and Verification & Validation (VV) practice areas.																																						
Priority	Impact		Finding Origination																																			
Urgent	Degree	High	31 January 2020																																			
	Probability	High	Progress Indicator																																			
	Time Criticality	Immediate	N/A																																			
Status Update	<p>01/31/2020: N/A-new finding.</p> <p>04/30/2020: As of the April 27, 2020 Weekly Status Report, these failure rates for [redacted] testing are now ([redacted] only is the first number, combined testing is the second number):</p> <table border="1"> <thead> <tr> <th>Module</th> <th>1/27/20</th> <th>2/24/20</th> <th>3/30/20</th> <th>4/27/20</th> </tr> </thead> <tbody> <tr> <td>CRM</td> <td>0% / 0%</td> <td>33.3% / 6.7%</td> <td>33.3% / 18.5%</td> <td>33.3% / 11.1%</td> </tr> <tr> <td>CSSP</td> <td>88.2%</td> <td>66.7%</td> <td>51.7%</td> <td>42.4%</td> </tr> <tr> <td>Mod 2</td> <td>46.7% / 39.7%</td> <td>23.3% / 25.6%</td> <td>28.3% / 28.8%</td> <td>25.1% / 24.2%</td> </tr> <tr> <td>Mod 6</td> <td>57.1%</td> <td>57.1%</td> <td>57.1%</td> <td>57.1%</td> </tr> <tr> <td>Mod 7</td> <td>71.0% / 64.9%</td> <td>55.8% / 54.9%</td> <td>58.5% / 50.7%</td> <td>61.4% / 50.0%</td> </tr> <tr> <td>Overall</td> <td>60.4% / 46.8%</td> <td>38.1% / 36.4%</td> <td>35.5% / 34.1%</td> <td>31.5% / 29.1%</td> </tr> </tbody> </table> <p>The March 2, 2020 Weekly Status Report showed 510 test cases left to be executed, extending the first pass test execution date 4 weeks to 05/01/2020. Of the 510 remaining test cases, 297 were blocked by defects with only 3 of those with a defined fix date.</p> <p>The April 27, 2020 Weekly Status Report showed 92 test cases left to be executed, with 59 blocked by defects with 49 having defined fix dates.</p> <p>These are very high failure and blockage rates for UAT IT 2, potentially due to SIT IT 2 not being able to be completed prior to UAT IT 2. In addition, a large number of test cases and functionality that passed in SIT are now failing in UAT, indicating issues such as: environment configurations, system configurations, integrations, etc. between SIT and UAT. The result is that UAT IT 2 is not really performing UAT, but first-time test of some functionality and user acceptance is not taking place. IV&V will continue to monitor.</p>			Module	1/27/20	2/24/20	3/30/20	4/27/20	CRM	0% / 0%	33.3% / 6.7%	33.3% / 18.5%	33.3% / 11.1%	CSSP	88.2%	66.7%	51.7%	42.4%	Mod 2	46.7% / 39.7%	23.3% / 25.6%	28.3% / 28.8%	25.1% / 24.2%	Mod 6	57.1%	57.1%	57.1%	57.1%	Mod 7	71.0% / 64.9%	55.8% / 54.9%	58.5% / 50.7%	61.4% / 50.0%	Overall	60.4% / 46.8%	38.1% / 36.4%	35.5% / 34.1%	31.5% / 29.1%
Module	1/27/20	2/24/20	3/30/20	4/27/20																																		
CRM	0% / 0%	33.3% / 6.7%	33.3% / 18.5%	33.3% / 11.1%																																		
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Mod 6	57.1%	57.1%	57.1%	57.1%																																		
Mod 7	71.0% / 64.9%	55.8% / 54.9%	58.5% / 50.7%	61.4% / 50.0%																																		
Overall	60.4% / 46.8%	38.1% / 36.4%	35.5% / 34.1%	31.5% / 29.1%																																		

3.10 Consistency Following State’s Project Management Methodology

IV&V did not have any findings in this area. The project appears to be following the State’s Project Management Methodology.

3.11 Representative Sample of Project Deliverables

A complete list of documents that IV&V reviewed during this reporting period is found in Appendix C.

3.12 Other Findings or Observations

None.

3.13 Strengths and Proactive Measures

The IV&V Team notes the following items for which the ██████ Project team has taken positive, proactive action and should be commended:

Description of Strength	
✓	Responsiveness to ██████ requests, recommendations, communications, and reporting by the DXC Mod 8.
✓	Strong and timely communications between ████████████████████ test teams.
✓	During the COVID-19 work interruption period, the collaboration between the ██████ ██████████ test teams has solidified.
✓	Plan to increase frequency of ██████ defect resolution meetings.

4. Risk Assessment and Issue Management

IV&V has identified the following risk this quarter.

Performance of RBAC testing starting in UAT IT3 may not provide adequate time to resolve permissions and access issues if RBAC is not appropriately designed and implemented to account for:

- Role explosion
- Security risk tolerance
- Scalability and dynamism

5. Recommendations for Improvement

IV&V has no further recommendations besides those previously identified in our findings.

Appendix A: Oversight Task Area Scoring Process and Criteria

The IV&V process rates Task Numbers in four oversight areas (Management, Development, Implementation, and Operations).

All data collected will be integrated into a systematic rating schema. First, each Task Number for which there is sufficient observational data will be rated according to the criteria below and indicated in Section 1.3.3 of the Quarterly IV&V Report.

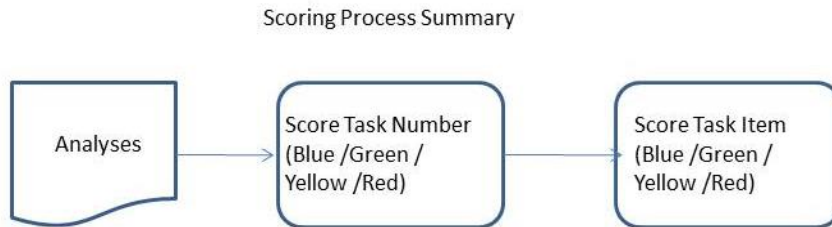
Oversight Area Score	Characterization	IV&V Scoring Guidelines
BLUE	Outstanding	<ul style="list-style-type: none"> ▪ Processes exceed expected implementation standards. ▪ Processes are fully compliant with established standard(s). ▪ There is evidence that processes are consistently used. ▪ The processes effectively achieve desired results. ▪ No other practices are recommended to enhance effectiveness. ▪ There are no Findings associated with this process. ▪ Any risk(s) are collectively low priority.
GREEN	Good	<ul style="list-style-type: none"> ▪ Processes meet expected implementation standards. ▪ Processes are largely compliant with established standard(s). ▪ There is evidence that processes are largely used. ▪ The processes largely achieve desired results. ▪ There may be other practices to enhance effectiveness. ▪ There may be one or more Findings associated with this Oversight Area. ▪ Any findings collectively do not present significant risk.
YELLOW	Marginal	<ul style="list-style-type: none"> ▪ Processes marginally meet expected implementation standards. ▪ Processes are partially compliant with established standard(s). ▪ There is evidence that the processes are only partially used. ▪ The processes do not achieve most desired results. ▪ There are other practices for effective implementation. ▪ Findings are associated with this Oversight Area. ▪ Findings collectively present significant risk.
RED	Unsatisfactory	<ul style="list-style-type: none"> ▪ Processes do not meet expected implementation standards.

		<ul style="list-style-type: none"> ▪ Processes are not compliant with established standard(s). ▪ There is evidence that the processes are not used. ▪ The processes do not achieve desired results. ▪ There are other practices for effective implementation. ▪ Findings are associated with this Oversight Area. ▪ Findings collectively present critical risk.
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Some Task Items are comprised of more than one Task Number. The IV&V Team will provide a Task Item aggregate rating based upon those Task Number ratings. A Task Item is rated:

- *Blue* when all its Task Number ratings are Blue
- *Green* when all its Task Number ratings are either Blue or Green
- *Yellow* when there is at least one Task Number rated Yellow and there are no Task Numbers with a Red rating
- *Red* when there is at least one Task Number rated Red

The process flow below summarizes the scoring methodology employed.



Any findings or recommendations identified are then associated with the focus areas or perspectives identified by the State in the IV&V Contract. Section 3 of the IV&V report summarizes findings into these focus areas:

- Project Management
- User Involvement
- Project Organization and Staffing
- Technical/Technology
- Project Scope
- Project Oversight
- Business Impact
- Cost-Benefit
- Project Implementation
- Consistency Following the State’s Project Management Methodology
- Representative Sample of Project Deliverables

Finally, overall project health ratings are determined and provided in Section 1.1 for Scope, Schedule, Cost, Staffing, and Quality based on the following:

- Task Items ratings in each IV&V Oversight Area

- Project lifecycle phase impact (objective and subjective evaluation)
- IV&V Finding(s) associated with each overall project health area
- Aging or timeliness in addressing IV&V Finding(s)
- Identified project risks associated with overall project health areas

Appendix B: Prioritization Criteria

Priority for IV&V Findings

Overall Priority	Degree of Project Impact	Probability of Project Impact	Time Criticality
URGENT	High	High	Immediate or Short Term
HIGH	High	High	Long Term
	High	Medium	Immediate or Short Term
	Medium	High	Immediate or Short Term
MEDIUM	High	Medium	Long Term
	High	Low	Immediate or Short Term or Long Term
	Medium	High	Long Term
	Medium	Medium	Immediate or Short Term or Long Term
	Medium	Low	Immediate
	Low	High	Immediate
LOW	Medium	Low	Short Term or Long Term
	Low	High	Short Term or Long Term
	Low	Medium	Immediate or Short Term or Long Term
	Low	Low	Immediate or Short Term or Long Term

DEFINITIONS

Degree of Project Impact

High	Significant negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project.
Medium	Moderate negative impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project.

Low	Minimal impact to cost, schedule, product quality, stakeholder acceptance, and/or other factors in the project.
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Probability of Project Impact

High	Highly confident the negative impact will occur (>80% certainty).
Medium	Somewhat confident the negative impact will occur (>50% certainty).
Low	Uncertain if the negative impact will occur (<50% certainty).

Time Criticality

Immediate	Finding impacts the project now, or will impact the project or require resources within the next two months.
Short Term	Finding will impact the project within the next six months.
Long Term	Finding will impact the project at a future date greater than six months.

Appendix C: Work Completed This Reporting Period

Meetings Attended	
Meeting(s)	Date of Activity
Project Joint PMO	Feb 1 – April 30, 2020
Project Steering Committee	Feb 1 – April 30, 2020
Project State Team Leads	Feb 1 – April 30, 2020
Technical Architecture Meetings	Feb 1 – April 30, 2020
Risks and Issues Review Meetings	Feb 1 – April 30, 2020
Test Meetings	Feb 1 – April 30, 2020
Business Analysis & Claims Team Weekly Meetings	Feb 1 – April 30, 2020

Interviews Conducted	
Interview	Date of Activity
Module 1 CSSP and CRM Team Interview	April 13, 2020
Module 2 Claims and Encounters Team Interview	April 13, 2020
Steering Committee Interview	April 13, 2020
Module 5 InSight Dashboard Interview	April 13, 2020
Module 5 T-MSIS Interview	April 13, 2020
Module 7 Team Interview	April 13, 2020
Module 5 Financial Interview	April 14, 2020
Module 5 MAR Team Interview	April 14, 2020
Mod 3 Provider Management Team Interview	April 14, 2020
Module 4 PIUM Interview	April 14, 2020
PMO and IV&V Findings Review	April 15, 2020
Module 1 CSSP Interview	April 15, 2020
Module 1 CRM Interview	April 15, 2020
Module 2 Claims Interview	April 15, 2020
Module 3 Provider Interview	April 15, 2020
Module 4 PIUR Interview	April 15, 2020
Module 5 Finance Interview	April 15, 2020
Module 5 MAR/T-MSIS Interview	April 15, 2020
Mod 5 Drug Rebate Interview	April 15, 2020
Mod 5 Insight Dashboard Interview	April 15, 2020

Interviews Conducted	
Interview	Date of Activity
Mod 6 Managed Care Interview	April 15, 2020
Module 7 Interview	April 15, 2020
Module 8 DWA Interview	April 15, 2020
Technical and Security Team Interview	April 15, 2020
Stage 2 Conversions Interview	April 15, 2020
ST, SIT, UAT & Regression Testing Interview	April 15, 2020
Conversion Team Interview	April 15, 2020
Module 5 TPL Team Interview	April 16, 2020
Test and QA Team Interview	April 16, 2020
Module 5 Drug Rebate Interview	April 16, 2020
Module 5 TPL Team Interview	April 16, 2020
Module 6 Managed Care Team Interview	April 16, 2020
Technical Team Interview	April 16, 2020

Documents Reviewed
Project Steering Committee Agendas and Minutes (Feb 1 – April 30, 2020)
Weekly Status Reports (Feb 1 – April 30, 2020)
Project Joint PMO Meeting Agendas and Minutes (Feb 1 – April 30, 2020)
Project State Team Leads Meeting Agendas and Minutes (Feb 1 – April 30, 2020)
RFP
QA Monthly Reports (January, February, and March 2020)
Decision Tracking Log
Issues Log (Feb 1 – April 30, 2020)
Risks Log (Feb 1 – April 30, 2020)
Configuration Management Plan
Project Management Plan
Test and Evaluation Management Plan
UAT Plan
Stage 2 Implementation Project Plan (schedule)
Risk Management Plan
Security Management Plan Stage 2 v1.2

Documents Reviewed
NIST 800-53 Risk Assessment and Gap Analysis for ██████████
Enterprise Data Warehouse (EDW) Communication Plan
CMS Guidance: Overview of Data Quality Top Priority Issues

Appendix D: Findings Log

Quarter-01 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-01-01	Lack of an Effective Lessons Learned Process	Lessons Learned process established and lessons learned captured.	03-31-16	Closed 07-15-16
F-M-01-02	Lack of Status Updates for Milestones Without Sub-tasks	N/A	03-31-16	Closed 10-31-17
F-M-01-03	Inadequate Decomposition of Schedule Tasks	Decomposition of tasks is aligned with requirements.	03-31-16	Closed 07-15-16

Quarter-02 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-02-01	Inadequate Scope of Quality Assurance (QA) Function	<p>plans to Extend scope of QA function to include evaluating quality work processes and work products against process descriptions, standards, procedures.</p> <p>Provide metrics on turnaround time on deliverables and identify areas for improvement.</p> <p>Enhance on-boarding process to assign mentors among BAs and TFALs to ensure consistent process.</p> <p>Provide feedback to project staff and managers on the results of QA activities.</p> <p>This role will not monitor third party QA processes.</p> <p>In Quarter 5, to implement a SharePoint workflow process for document review with the potential to gather metrics.</p>	07-15-16	Closed 10-31-17

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-02-02	Inadequate Visibility into COTS Products Being Developed	List of functionality and defects coming with each release being provided. Release notes after the release. Sprint reviews/demos now being provided.	07-15-16	Closed 04-30-2018

Quarter-03 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-03-01	Lack of Documented Actions Outside of RV Sessions	Action Items are identified in a log and the log is reviewed on at least a monthly basis in the Joint PMO meeting.	10-07-16	Closed 04-21-17
F-M-03-02	Lack of Visibility Into and Reporting Against Mitigation Plans	Risks are being consistently reviewed and updated.	10-07-16	Closed 04-30-2018
F-M-03-03	Lack of Visibility Into Project Critical Path	Weekly Status Reports now include an indication of what modules are on the critical path for Stage 1 and Stage 2.	10-07-16	Closed 10-31-17
F-PI-03-01	Lack of Visibility Into Product Team System Test	Test Reports being provided.	10-07-16	Closed 07-24-2017
F-PI-03-02	Lack of Common Definition of Defect Severity Levels	Common Defect Severity Levels defined.	10-07-16	Closed 07-24-2017
F-PI-03-03	Lack of Formal Acceptance Criteria for Product From Product Team and Subcontractors	N/A	10-07-16	Closed 01-31-2018

Quarter-04 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-04-01	Lack of Schedule Decomposition for Test Activities	Weekly test report shows burn-down charts for ST, SIT, and UAT.	01-13-2017	Closed 10-31-2017

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-04-02	Lack of Risk Mitigation Plans	Risk mitigation plans have been attached to the appropriate risks in [REDACTED], although the plans lack detail.	01-13-2017	Closed 04-21-17
F-M-04-03	Lack of Common Understanding of Agile Touch Points for the State	Functional area reviews implemented.	01-13-2017	Closed 07-31-18
F-M-04-04	Lack of Planned Accomplishments Not Started or Completed on Time	Separate report available on [REDACTED].	01-13-2017	Closed 07-24-2017
F-M-04-05	Lack of Planned Duration or Baseline Start	Status Report will be changed.	01-13-2017	Closed 07-24-2017
F-M-04-06	Lack of Color Rating for Completed Activities	Status Report will be changed.	01-13-2017	Closed 07-24-2017
F-S-04-01	Lack of Consistency in the Quality of Conducted Walkthroughs of BDD or DSD	[REDACTED] has reviewed their walkthrough process to ensure more level-setting between facilitator's and [REDACTED] participants.	01-13-2017	Closed 10-31-2017

Quarter-05 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-05-01	Lack of Detail in Mitigation Plans	Detailed mitigation plans being provided as required by the Risk Management Plan.	04-21-2017	Closed 01-25-19
F-M-05-02	Lack of Decomposition of Data Conversion Activities in Project Schedule	Data Conversion activities are included in Stage 1 and Stage 2 schedules.	04-21-2017	Closed 01-31-18
F-M-05-03	Lack of Sharing, Tracking, Monitoring, and Reporting Data Conversion Results	[REDACTED] has provided UAT plans that included resources and reporting for UAT.	04-21-2017	Closed 10-31-2017
F-M-05-04	Lack of Appropriate Level of Schedule Decomposition, Team Resources, Training, and Reporting for UAT	CCR-13 transferred responsibility to [REDACTED] and UAT Plans defined.	04-21-2017	Closed 07-24-2017

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-05-05	Absence of Both High-Level Training Roadmap and Granularity at Module Level	Certification plan has been revised to show new stage 1 go-live dates and certification in two phases (for Stage 1 modules and for Stage 2 modules).	04-21-2017	Closed 10-31-2017
F-M-05-06	Lack of Focused Support to Define and Manage Behind-Schedule CMS Certification Activities	A new finding regarding certification will be opened.	04-21-2017	Closed 01-31-18
F-M-05-07	Lack of Decomposition and Alignment of CMS Certification Project Plan 2017.01.23 With Agreed-upon Certification Approach	Common understanding established, but very few risks identified.	04-21-2017	Closed 01-31-18

Quarter-06 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-06-01	Lack of Access and Visibility Into Other Dependent Plans	Detailed project plans for these areas have been provided for Stages 1 and 2.	07-24-2017	Closed 10-31-2017
F-M-06-02	Absence of UAT Testing Training for UAT Testing Team	Training provided to UAT Team by Cognosante sufficiently remediated this finding.	07-24-2017	Closed 10-31-2017
F-M-06-03	Issues Management Process Not Being Followed Consistently	Much greater emphasis has been placed on entering, tracking, and reviewing issues.	07-24-2017	Closed 10-31-2017
F-M-06-04	Absence of Planning, Coordination, and Communication for UAT Test Environment Setup	This was resolved for Sage 1. Will close, monitor, and re-open for Stage 2, if required.	07-24-2017	Closed 10-31-2017
F-M-06-05	Weekly "Testing Status Report" Does Not Include UAT Testing Status	Separate UAT Test Status Report is being provided.	07-24-2017	Closed 10-31-2017
F-M-06-06	Weekly "Testing Status Report" Template Needs Enhancement to Include Other Information About Testing Activities	Report meets State's needs.	07-24-2017	Closed 01-31-18

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-T-06-01	Absence of Configuration and Set-up Validation Checklist for Establishing UAT Test Environment at [REDACTED]	Duplicate of F-PI-07-01. Will include example from this finding there.	07-24-2017	Closed 01-31-18

Quarter-07 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-07-01	Lack of Approval Before Schedule Start and Completion Dates are Changed	Will close, but will monitor.	10-31-17	Closed 01-31-18
F-M-07-02	Lack of Requirements Traceability to CMS Certification Checklist Criteria	RTM submitted by [REDACTED] E.	10-31-17	Closed 01-25-19
F-M-07-03	Lack of Clear Identification of Dependencies Across and Among all Modules (Stage 1 & 2) From a Holistic Perspective	Project Plans for all Stage 1 and 2 modules provided. Logic diagrams have been developed.	10-31-17	Closed 04-30-18
F-U-07-01	Lack of Identification of Deliverable Review and Approval Parties	Review table has been added to deliverables.	10-31-17	Closed 04-30-18
F-PI-07-01	Lack of Implementation of Formal Migration/Configuration Management Process Across Environments or Sub-systems	Updated CM Plan was submitted and approved by [REDACTED] placed release procedures, CMDB, and list of configurations (software, patches, web services, etc.) across environments on [REDACTED].	10-31-17	Closed 07-26-19

Quarter-08 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-08-01	Time allocated for Stage 2 User Acceptance Testing (UAT) is likely inadequate.	Risk 52 opened.	01-31-18	Closed 07-31-18

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-08-02	Certification planning and execution is inconsistent.	Updated R3 certification schedule published and evidence repository established.	01-31-18	Closed 10-26-18
F-M-08-03	Lessons learned from Stage 1 project from requirements, planning, design, development, testing, and implementation appears to be missing from Stage 2 planning.	Lessons Learned have been analyzed by [REDACTED]	01-31-18	Closed 10-26-18
F-M-08-04	Stage 1 defect burn-down rate lagging.	Stage 1 went live.	01-31-18	Closed 04-30-18
F-T-08-01	Data available in All Claims Universe in [REDACTED] has not been fully tested and/or accepted by [REDACTED] power users.	[REDACTED]	01-31-18	Closed 10-26-18
F-PI-08-01	The detailed deployment plan for 3/12/2018 Go Live date does not include [REDACTED] needs.	Stage 1 went live.	01-31-18	Closed 04-30-18
F-PI-08-02	A regression test suite should be created and packaged to run as an automated process whenever code is imported into the System Integration Test environment, whether a major or patch release.	[REDACTED] does not intend to develop an automated regression test suite.	01-31-18	Closed 04-30-18

Quarter-09 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-09-01	Overlap of SIT and UAT Activities in Stage 2 Implementation Schedule	Risk 52 opened.	04-30-18	Closed 07-31-18
F-M-09-02	Need Process for Distinct Transition of Defect Ownership from DDI to Operations	N/A	04-30-18	Progress Observed
F-PI-09-01	Reports Created by Data Warehouse Module Need to Be Validated	Data Warehouse reports validated by [REDACTED]	04-30-18	Closed 10-26-18
F-PI-09-02	Training Needs to Include Real-Life, Role-Based Scenarios	Module training plans include specific role-based scenarios.	04-30-18	Closed 01-25-19

Quarter-10 Findings:

No new findings for Quarter 10.

Quarter-11 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-11-01	Stage 2 Schedules Lack Time for Data and Environment Refreshes	Data and Environment refreshes were added to the Stage 2 schedule. IV&V will close and revisit when re-baselined schedule is released.	10-26-18	Closed 04-26-19
F-M-11-02	Minimum Formal Transition and Knowledge Transfer Between ██████ Resources	Overcome by events. Plan for transition and knowledge transfer exists.	10-26-18	Closed 04-26-19
F-PI-11-01	Lack of Test Results in ALM for Accessibility Tests	Closed for Stage 1. ██████ considering the addition of Accessibility Test Results into ALM for Stage 2.	10-26-18	Closed 01-25-19
F-PI-11-02	Stage 2 Testing Iterations Lack Defined Entry and Exit Criteria	Entry and Exit Criteria defined.	10-26-18	Closed 07-26-19

Quarter-12 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-12-01	Lack of Defined RTM Impacts SIT & UAT Test Planning	Requirements traceability to test cases has been completed for SIT. The approach for UAT will be in the updated TEMP and the RTM will follow. If this becomes an issue for UAT, IV&V will open another finding.	01-25-19	Closed 04-26-19

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-12-02	Lack of Single Point of Contact and Single Repository for Test Defects and Reporting	DEV test results are now being entered into ALM. Test results for Security, Accessibility, Conversion, etc. will continue to be captured outside of ALM. Each testing entity will continue to report their test results. [REDACTED] has agreed to this approach.	01-25-19	Closed 04-26-19

Quarter-13 Findings:

No new findings for Quarter 13.

Quarter-14 Findings:

No new findings for Quarter 14.

Quarter-15 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-PI-15-01	Downstream Impacts of Late Completion of SIT IT 2 Test Execution	N/A	10-31-19	Progress Observed
F-PI-15-02	Downstream Impacts of Late SIT IT 3 Test Case Completion	Test case completion was adequate to allow SIT IT 3 to begin on time without any significant impacts. This Finding is being closed.	10-31-19	Closed 01-31-20

Quarter-16 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-16-01	Capacity Planning to Ensure SIT IT 5 Testing Schedule Can be Met	N/A	01-31-20	Progress Observed
F-PI-16-01	Downstream Impacts of Late Completion of SIT IT 3 Test Execution	N/A	01-31-20	Progress Observed
F-PI-16-02	Upstream Activities Leading to High UAT IT 2 Defect Rate Which Could Impact Downstream Activities	N/A	01-31-20	Progress Observed

Quarter-17 Findings:

Finding Log				
Finding #	Finding Name	Resolution	Finding Origination	Status or Date Closed
F-M-17-01	Inconsistent Software and Document Deliverables Quality	N/A	04-30-20	New
F-M-17-02	Lack of Progress in Defect Resolution and Management	N/A	04-30-20	New
F-M-17-03	Overallocation of Resources in Project Schedules	N/A	04-30-20	New

Appendix E: Closed Findings

Closed Quarter 1: 03-31-2016:

None. First Quarterly Report.

Closed Quarter 2: 07-15-2016:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-M-01-01	Management	High	Lack of an Effective Lessons Learned Process	X
F-M-01-03	Management	High	Inadequate Decomposition of Schedule Tasks	X

Finding Number: F-M-01-01			
Finding Name: Lack of an Effective Lessons Learned Process			
Description: It is not evident that lessons learned and best practice examples are formally gathered and shared on an on-going basis and not just at the end of the project. The State requirement (for itself and contractors) is to collect lessons learned at the end of the project, but not at other points prior to project completion.			
Risks:			
<ol style="list-style-type: none"> 1. Lessons learned forgotten and not captured or shared 2. Mistakes may be repeated and successes may not be repeated 3. Opportunities for risk identification and process improvement may be missed 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Develop a process to gather lessons learned, best practices, or work product examples at periodic intervals throughout the project lifecycle 2. Establish a way to collect and store lessons learned, best practices, and work product examples in a repository that is easily accessible and searchable for project staff 3. Establish a process that requires projects to review lessons learned prior to their initiation and at various points throughout their lifecycle 			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Integrated Project Management (IPM), Project Monitoring and Control (PMC), and Organizational Process Focus (OPF) process areas.			
Priority	Impact		Finding Origination
High	Degree	Medium	31 March 2016
	Probability	High	Progress Indicator
	Time Criticality	Short term	Closed
Status Update	07/15/2016: Regular lessons learned have been scheduled at transitions between major tasks (RV sessions, design), transitions in phases, and major deliverables (BDD, DSD). Formal lessons learned sessions were conducted		

following the completion of Phase 1 RV sessions and the move to VPC. Lessons learned were captured on a standard lessons learned template and stored on [REDACTED]. This finding has been sufficiently remediated and is being closed.

Finding Number: F-M-01-03																		
Finding Name: Inadequate Decomposition of Schedule Tasks																		
<p>Description: Level of effort for scheduled tasks within the next 90 days exceeds best practice guidelines – including tasks that significantly exceed guidelines. For example, Security Architecture tasks 1101 and 1102 of the Stage I Implementation Project Plan (31 March 2016) are 360 hours each. Task 1460 for test case creation is 544 hours. Levels of effort that large are difficult to accurately estimate and track. The graphic below shows tasks within the next 90 days in the Implementation and Takeover Plans with effort greater than 80 hours.</p> <p>Risks:</p>																		
<table border="1"> <caption>Tasks Deficiencies Within 90 Days Of Project Work Plan Publish Date</caption> <thead> <tr> <th>Category</th> <th>Stage 1 Implem. PP 31 Mar 16</th> <th>Takeover Plan 1 Apr 16</th> </tr> </thead> <tbody> <tr> <td>Tasks >80 hrs</td> <td>24</td> <td>18</td> </tr> <tr> <td>Tasks > 160 hrs</td> <td>37</td> <td>2</td> </tr> <tr> <td>Tasks w/zero hrs</td> <td>4</td> <td>6</td> </tr> <tr> <td>Tasks not resourced*</td> <td>0</td> <td>0</td> </tr> </tbody> </table>		Category	Stage 1 Implem. PP 31 Mar 16	Takeover Plan 1 Apr 16	Tasks >80 hrs	24	18	Tasks > 160 hrs	37	2	Tasks w/zero hrs	4	6	Tasks not resourced*	0	0	<ol style="list-style-type: none"> 1. Tasks may not have been broken down to enough detail to ensure accurate estimates 2. Unable to track task completion status with enough granularity to determine if dates will be met 3. Task completion and schedule delays 	
Category	Stage 1 Implem. PP 31 Mar 16	Takeover Plan 1 Apr 16																
Tasks >80 hrs	24	18																
Tasks > 160 hrs	37	2																
Tasks w/zero hrs	4	6																
Tasks not resourced*	0	0																
Recommendation(s)																		
1. Decompose larger tasks in project schedules down to manageable tasks of 40-80 hours effort wherever possible																		
Reference(s) to Industry Standard																		
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP) and Integrated Project Management (IPM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.																		
Priority	Impact		Finding Origination															
Medium	Degree	Medium	31 March 2016															
	Probability	Medium	Progress Indicator															
	Time Criticality	Short-term	Closed															

Status Update	<p>07/15/16: Because of the large size of the teams on certain tasks (e.g. RV sessions) it is difficult to get the effort down to 40-80 hours. Instead, the focus has been on getting the duration and hours per resource down to within 80 hours. In addition, [REDACTED] has relaxed their requirement of no more than 80 hours on tasks. Some of the tasks have been broken into "Part 1", "Part 2", etc. which is not very descriptive, but specificity is being added to these tasks as they become closer.</p> <p>This finding has been sufficiently remediated and is being closed.</p>
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Closed Quarter 3: 10-07-2016:

None.

Closed Quarter 4: 01-13-2017:

None.

Closed Quarter 5: 04-28-2017:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-M-03-01	Management	High	Lack of Documented Actions Outside of RV Sessions	X
F-M-04-02	Management	High	Lack of Risk Mitigation Plans	X

Finding Number: F-M-03-01
Finding Name: Lack of Documented Actions Outside of RV Sessions
<p>Description: Action items (in addition to those generated in RV sessions) need to be documented formally, have an individual assigned to work the AI, have an assigned due date, and be actively reviewed and tracked. This way, assigned actions will not be lost and can be followed up on to ensure accountability in a timely manner. Example: RFP to Product to Module 3 (Provider) Requirements mapping which took an extended period of time to produce.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Ability to make timely decisions and reviews 2. Incomplete or inconsistent understanding of outstanding actions or decisions 3. Impact to other project activities and project schedule
Recommendation(s)
1. Include such action items into the existing action item log and regularly review status
Reference(s) to Industry Standard
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Monitoring and Control (PMC) and Integrated Project Management (IPM) process areas.

Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	7 Oct 2016
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>01/13/17: Although an action item log exists in [REDACTED], it has not been updated since Oct 9 and it does not include action items from all meetings. In addition, meeting minutes may include action items, but they are not tracked in the next meeting. No progress observed.</p> <p>04/28/17: The action item log in [REDACTED] is now reviewed and updated on a regular basis. It is not possible to determine if all actions items from all meetings is included in the log. This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-M-04-02			
Finding Name: Lack of Risk Mitigation Plans			
Description: Risks in [REDACTED] identify where a mitigation plan is required, as appropriate; but there are no mitigation plans attached to the risks in iTRACE.			
Risks:			
<ol style="list-style-type: none"> 1. Risks may be realized. 2. Impact to other project activities and project schedule 3. Increased project surprises and crisis management 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Perform a thorough risk review including next steps. 2. Define risk mitigation plans where required and assign owners to the risk. 3. Attach risk mitigation plans to the associated risk in [REDACTED]. 4. Actively work and track to risk mitigation plans. 5. Report progress against risk mitigation plans. 			
Reference(s) to Industry Standard			
<p>Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), and Risk Management (RSKM) process areas.</p> <p>Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>			
Priority	Impact		Finding Origination
High	Degree	Medium	20 January 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>04/28/17: Risk mitigation plans have been attached to the appropriate risks [REDACTED], although the plans lack detail. Another finding will be open regarding the level of detail of the risk mitigation plans, but this finding has been sufficiently remediated and is being closed.</p>		

Closed Quarter 6: 07-24-2017:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-PI-03-01	Project Implementation	High	Lack of Visibility Into Product Team System Test	X
F-PI-03-02	Project Implementation	Medium	Lack of Common Definition of Defect Severity Levels	X
F-M-04-04	Management	High	Lack of Planned Accomplishments Not Started or Completed on Time	X
F-M-04-05	Management	High	Lack of Planned Duration or Baseline Start	X
F-M-04-06	Management	High	Lack of Color Rating for Completed Activities	X
F-M-05-04	Management	High	Absence of Both High-Level Training Roadmap and Granularity at Module Level	X

Finding Number: F-PI-03-01			
Finding Name: Lack of Visibility Into Product Team System Test			
Description: Little visibility is provided into system test conducted by the [REDACTED] Product Team. This includes the quality of code, the functionality or test cases being executed, and the results of those tests.			
Risks:			
<ol style="list-style-type: none"> 1. Increase in rework and defect remediation 2. Inability to identify risks based on system test results 3. Functionality required by the State for each release not being addressed 4. Impact to other project activities and project schedule 			
Recommendation(s)			
1. Provide insight into system test cases being conducted and results of testing by the [REDACTED] Project Team			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Monitoring and Control (PMC), Verification (VER), and Validation (VAL) process areas. IEEE 29119-2-2013. IEEE 829-2008 Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	7 Oct 2016
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	01/13/2017: The [REDACTED] Test Team does have some limited visibility into [REDACTED] Product Team testing on an informal basis.		

	<p>04/21/2017: [REDACTED] has provided some information on their testing status in the weekly project status reports.</p> <p>07/24/2017: [REDACTED] has provided a separate weekly test report that provides more detail regarding System Test. This finding has been sufficiently remediated and is being closed.</p>
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Finding Number: F-PI-03-02

Finding Name: Lack of Common Definition of Defect Severity Levels

Description: An inconsistency may exist in defect severity definitions between various teams, such as [REDACTED] Project team, and the State QA Vendor. A common definition needs to exist to ensure clarity and consistency in reported defects so that proper prioritization is applied to remediation efforts.

Risks:

1. Incorrect prioritization of defect triage and remediation activities
2. Critical functionality not being provided
3. Impact to other project activities and project schedule

Recommendation(s)

1. Establish a common set of definitions for defect severity levels for use by the [REDACTED], and State QA Vendor and ensure all are trained in the definitions.

Reference(s) to Industry Standard

Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Verification (VER), and Validation (VAL) and Risk Management (RSKM) process areas.
 IEEE 29119-2-2013, IEEE 829-2008
 Project Management Institute Project Management Body of Knowledge, Fifth Edition.

Priority	Impact		Finding Origination
Medium	Degree	Medium	7 Oct 2016
	Probability	Medium	Progress Indicator
	Time Criticality	Immediate	Closed

Status Update	<p>01/13/2017: The [REDACTED] Product Team.</p> <p>04/21/2017: [REDACTED] teams are all using common defect prioritization definitions as they are all using ALM; however, SAS is using JIRA which has different defect severity definitions.</p> <p>07/24/2017: All entities are using common defect severity levels. This finding has been sufficiently remediated and is being closed.</p>
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Finding Number: F-M-04-04

Finding Name: Lack of Planned Accomplishments Not Started or Completed on Time

Description: [REDACTED] Weekly Status Reports include sections on “Accomplishments This Period” and “Activities Next Period”, which are good, but provide no information on what should have been

<p>accomplished the previous week or what should be taking place the following week. To provide better insight into progress, Weekly Status Report should include a section for “Planned Accomplishments This Period Not Started or Not Completed on Time”.</p>			
<p>Risks:</p> <ol style="list-style-type: none"> 1. Project team may not understand true project status and risks 2. Impact to other project activities and project schedule 3. Increased project surprises and crisis management 4. Makes planning for State SME’s availability and preparation challenging 			
<p>Recommendation(s)</p> <ol style="list-style-type: none"> 1. Include section in KMMS Weekly Status Report for “Planned Accomplishments This Period Not Started or Not Completed on Time”. 			
<p>Reference(s) to Industry Standard</p> <p>Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), and Risk Management (RSKM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>			
Priority	Impact		Finding Origination
High	Degree	Medium	20 January 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>04/21/2017: This information is available by reviewing the Microsoft Project plan; however, it is not being provided in any other summary form.</p> <p>07/24/2017: ██████ producing a Late Last Week – Current and Next Week’s Tasks Report which is being stored in ██████. This finding has been sufficiently remediated and is being closed.</p>		

<p>Finding Number: F-M-04-05</p>
<p>Finding Name: Lack of Planned Duration or Baseline Start</p>
<p>Description: ██████ Weekly Status Report, Section 3, Progress to Schedule indicates “Percent Complete”, “Baseline Complete”, “Forecast Complete”, and “Actual Complete”. It is difficult to determine if a task is on schedule or the risk of completing a task on schedule without knowing the Baseline Start and/or Duration of that task. To provide project participants and leadership with a better idea of how items are progressing against the schedule, consider adding a column for “Baseline Start” or “Duration” so a better determination can be made of the likelihood that the baseline and/or forecast completion date will be met.</p>
<p>Risks:</p> <ol style="list-style-type: none"> 1. Project team may not understand true project status and risks 2. Impact to other project activities and project schedule 3. Increased project surprises and crisis management
<p>Recommendation(s)</p> <ol style="list-style-type: none"> 1. For the tasks in the ██████ Weekly Status Report Section 3 Progress to Schedule, add a column for “Baseline Start” or “Duration”.
<p>Reference(s) to Industry Standard</p>

Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP) and Project Monitoring and Control (PMC) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	20 January 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>04/21/2017: This information is available by reviewing the Microsoft Project plan; however, it is not being provided in any other summary form.</p> <p>07/24/2017: The Weekly Status Report format and content is changing. This finding will be closed.</p>		

Finding Number: F-M-04-06			
Finding Name: Lack of Color Rating for Completed Activities			
<p>Description: Once activities in Section 3 Progress to Schedule in the Weekly Status Report are completed, any previous color rating associated with the task is removed. This removes a historical record of the performance of that particular activity and why subsequent activities may be color rated the way they are. Items that are completed should retain their color rating to show the variation in the completion date and not have the color rating go away. This will be helpful in determining the reason behind the current status of dependent tasks.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Project team may not understand true project status 2. Impact to other project activities and project schedule 			
Recommendation(s)			
1. Retain color ratings for completed tasks in Section 3 Progress to Schedule in the Weekly Status Report.			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP) and Project Monitoring and Control (PMC) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	20 January 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>04/21/2017: This information is available by reviewing the Microsoft Project plan; however, it is not being provided in any other summary form.</p> <p>07/24/2017: Completed deliverable activities drop off the weekly status report shortly after having been completed. The Weekly Status Report format and content is changing. This finding will be closed.</p>		

Finding Number: F-M-05-04

Finding Name: Absence of Both High-Level Training Roadmap and Granularity at Module Level			
Description: There is need to establish a ██████ Wide training roadmap that ties all the modules and also identifies any dependencies, as well as activities that might be on the critical path to go-live for each Stage. Additionally, the schedule identified within each module User Training Plan must be aligned with training activities listed in Stage specific Implementation Schedule(s).			
Risks:			
<ol style="list-style-type: none"> 1. Missing training goals, learning objectives, and strategy 2. Impact on curriculum architect design and development strategy 3. Missing post training User evaluation and feedback mechanism 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Provide ██████ wide training roadmap and how modules are tied together. 2. Establish a distinct ██████ enterprise wide training plan and schedule. 3. Establish mechanism to be followed to receive User feedback on delivered training. 4. Establish how post training evaluation will be captured, analyzed and corrective actions taken. 			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Integrated Project Management (IPM), and Organizational Training (OT) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	21 April 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	07/24/2017: Information has been provided. This finding has been sufficiently remediated and is being closed.		

Closed Quarter 7: 10-31-2017:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-M-01-02	Management	H	Lack of Status Updates for Milestones Without Sub-tasks	X
F-M-02-01	Management	H	Inadequate Scope of Quality Assurance (QA) Function	X
F-M-03-03	Management	U	Lack of Visibility Into Project Critical Path	X
F-M-04-01	Management	H	Lack of Schedule Decomposition for Test Activities	X
F-S-04-01	Project Scope	H	Lack of Consistency in the Quality of Conducted Walkthroughs of BDD or DSD	X
F-M-05-02	Management	U	Lack of Decomposition of Data Conversion Activities in Project Schedule	X
F-M-05-03	Management	H	Lack of Appropriate Level of Schedule Decomposition, Team Resources, Training, and Reporting for UAT	X
F-M-05-05	Management	H	Lack of formal Mitigation Plan to Manage Behind-Schedule CMS Certification Activities	X
F-M-06-01	Management	H	Lack of Access and Visibility Into Other Dependent Plans	X
F-M-06-02	Management	U	Absence of UAT Testing Training for UAT Testing Team	X
F-M-06-03	Management	U	Issues Management Process Not Being Followed Consistently	X
F-M-06-04	Management	U	Absence of Planning, Coordination, and Communication for UAT Test Environment Setup	X
F-M-06-05	Management	U	Weekly "Testing Status Report" Does Not Include UAT Testing Status	X

Finding Number: F-M-01-02
Finding Name: Lack of Status Updates for Milestones Without Sub-tasks
Description: It is not evident that percent completion is provided on an incremental basis for all milestones without sub-tasks in the schedule(s). IV&V noted that milestone activities that do not have any sub-tasks associated with them only indicate 0% or 100% complete. This does not provide a means to predict progress in meeting the milestone or to determine whether or not the milestone will be met on schedule.
Risks:
<ol style="list-style-type: none"> 1. Milestone dates may not be met without previous indications that the date was in jeopardy 2. Impact to other project activities and project schedule 3. Incomplete and/or inaccurate project progress status reported

4. Increased project surprises and crisis management			
Recommendation(s)			
1. Collect status updates and enter incremental progress toward milestones in status reports and in the schedule			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Monitoring and Control (PMC) and Integrated Project Management (IPM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	31 March 2016
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>07/15/2016: Much of the DDI Team interaction with other teams - Infrastructure team (VPC), vendors, and Product limit status progress points to milestones, which somewhat limits the tracking/reporting specificity. Going forward, the work being completed by Product is a COTS product; traditional task progress is not being supplied to the DDI team nor tracked in the schedules. To facilitate the transfer of the Release content the Product team will supply to the DDI team a list of functionality/content in each release and will also interact, periodically through the development cycle, with the DDI team to ensure we have an understanding of the content being supplied, supplying documentation as it is available. Since the Product is being developed using an Agile approach, they will report if there is any change in the Sprints content, so the DDI team can appropriately plan for any such changes. As a COTS product, full content will be delivered with full documentation upon release. As part of risk mitigation for Risk #13 (IVV-Q1-1), the PMO will work closely with the Product team to trace requirements to functionality in each release for reporting and mitigation as appropriate.</p> <p>10/20/2016: received a list of functionality in the first Product release and has mapped to BDD content and to requirements. This will be provided to the State.</p> <p>01/13/2017: The State has not received a mapping of requirements to releases. No progress observed this reporting period.</p> <p>04/21/2017: A spreadsheet with features and requirements for major releases has been provided and weekly status reports include a table with construct milestones and tasks showing percent complete and estimated completion dates.</p> <p>07/27/2017: Construct tables in weekly status reports now include some tasks under milestones.</p> <p>10/31/2017: The format of the Weekly Status Report has changed, but the report includes some tables showing percent complete and estimated completion dates for milestones and some sub-tasks. This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-M-02-01			
Finding Name: Inadequate Scope of Quality Assurance (QA) Function			
<p>Description: The ██████████ Quality Management Plan, V1.0 dated 05-27-16, defines quality scope limited to document maintenance and contract performance monitoring. However, it does not include an important aspect of quality, the objective evaluation and reporting of adherence to management and software development lifecycle processes as within the scope of the quality function.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Limited scope or coverage of Quality Assurance has the potential to negatively affect the quality of deliverables. 2. Potential of impact on schedule. 3. Possible re-work on deliverables. 4. Ineffective or inefficient processes not being improved. 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Consider expanding scope or coverage of QA. 2. Further analysis might lead to including the following in QA scope: <ol style="list-style-type: none"> a. Objectively evaluating performed processes and work products against applicable process descriptions, standards, and procedures. b. Identifying and documenting noncompliance issues. c. Providing feedback to project staff and managers on the results of quality assurance activities. d. Ensuring that noncompliance issues are addressed. 3. Consider monitoring third party QA processes. 			
Reference(s) to Industry Standard			
<ol style="list-style-type: none"> 1. CMMI-DEV v1.3; Process and Product Quality (PPQA), and Project Planning (PP) process areas 2. Project Management Institute, A Guide to the Project Management Body of Knowledge, Edition 5, 2012 			
Priority	Impact		Finding Origination
High	Degree	Medium	15 July 2016
	Probability	High	Progress Indicator
	Time Criticality	Short term	Closed
Status Update	<p>10/20/2016: ██████████ to extend the scope of QA function to include evaluating quality work processes and work products against process descriptions, standards, procedures. Provide metrics on turnaround time on deliverables and identify areas for improvement. Enhance on-boarding process to assign mentors among BAs and TFALs to ensure consistent process. Provide feedback to project staff and managers on the results of QA activities. This role will not monitor third party QA processes.</p> <p>01/13/2017: No QA metrics have been reported and no further progress observed this reporting period.</p> <p>04/21/2017: ██████████ begun to implement a SharePoint workflow for document review that can gather metrics regarding review time turnarounds.</p> <p>07/27/2017: SharePoint workflow for document review has been implemented. Metrics have not yet been collected.</p>		

	<p>10/31/2017: ██████████ to Extend scope of QA function to include evaluating quality work processes and work products against process descriptions, standards, procedures.</p> <p>Provide metrics on turnaround time on deliverables and identify areas for improvement.</p> <p>Enhance on-boarding process to assign mentors among BAs and TFALs to ensure consistent process.</p> <p>Provide feedback to project staff and managers on the results of QA activities.</p> <p>This role will not monitor third party QA processes.</p> <p>In Quarter 5, DXC began to implement a SharePoint workflow process for document review with the potential to gather metrics.</p> <p>This finding has been sufficiently remediated and is being closed.</p>
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Finding Number: F-M-03-03			
Finding Name: Lack of Visibility Into Project Critical Path			
<p>Description: Little visibility is provided into the critical path of the project without going into the Microsoft Project Schedule. Weekly status reports only state that Module 1 and Module 4 are on the critical path with no other detail. It would be beneficial to project leadership to include a graphical representation summarizing major activities/milestones on the critical path.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Ability to make timely decisions 2. Impact to other project activities and project schedule 3. Lack of visibility of the impact of activity/milestone schedule slips to the overall project schedule 			
Recommendation(s)			
1. Include graphical representation of critical path in weekly and monthly status reports			
Reference(s) to Industry Standard			
<p>Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Monitoring and Control (PMC), Risk Management (RSKM), and Integrated Project Management (IPM) process areas. IEEE 16085-2006.</p> <p>Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>			
Priority	Impact		Finding Origination
Urgent	Degree	High	7 Oct 2016
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>01/13/2017: Weekly Status Reports now include construction tables with high-level tasks with a column to indicate if the task is on the critical path. ██████████ they would look at additional ways to identify critical path.</p> <p>04/21/2017: Weekly Status Reports now include construction tables with high-level tasks with a column to indicate if the task is on the critical path, and critical path has shifted as appropriate.</p> <p>07/27/2017: Weekly Status Reports continue to show construction tables indicating tasks on the critical path, but do not show which document deliverables are on the critical path.</p>		

	10/31/2017: Weekly status reports now show gaant charts for Stage 1 and Stage 2 that indicate which modules are on the critical path. This finding has been sufficiently remediated and is being closed.
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Finding Number: F-M-04-01		
Finding Name: Lack of Schedule Decomposition for Test Activities		
Description: Test activities in the schedule are high-level and lack the details necessary to properly plan resources for testing or to be able to adequately track progress against.		
Risks:		
<ol style="list-style-type: none"> 1. Milestone dates may not be met without previous indications that the date was in jeopardy 2. Impact to other project activities and project schedule 3. Incomplete and/or inaccurate project progress status reported 4. Increased project surprises and crisis management 		
Recommendation(s)		
<ol style="list-style-type: none"> 1. Further breakdown ST, SIT, and UAT test activities in the schedule for all modules. 2. Plan resources accordingly and track progress against the decomposed test activities. 		
Reference(s) to Industry Standard		
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), and Integrated Project Management (IPM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.		
Priority	Impact	Finding Origination
High	Degree	Medium
	Probability	High
	Time Criticality	Immediate
		20 January 2017
		Progress Indicator
		Closed
Status Update	<p>04/21/2017: The test schedule in the Implementation Project Plan has not been further broken down and the [REDACTED] area does not utilize a more detailed schedule to track their activities. No progress observed.</p> <p>07/27/2017: Weekly Test Reports include test case burn-down charts for ST, SIT, and UAT.</p> <p>10/31/2017: This finding has been sufficiently remediated and is being closed.</p>	

Finding Number: F-M-05-02		
Finding Name: Lack of Decomposition of Data Conversion Activities in Project Schedule		
Description: Data Conversion activities in the schedule are high-level and lack the details necessary to properly plan resources or to be able to adequately track progress against.		
Risks:		
<ol style="list-style-type: none"> 1. Milestone dates may not be met without previous indications that the date was in jeopardy 2. Impact to other project activities and project schedule 3. Incomplete and/or inaccurate project progress status reported 4. Increased project surprises and crisis management 5. Quality and integrity issues with converted data 		

Recommendation(s)			
<ol style="list-style-type: none"> Align Stage 1 and 2 Implementation Project Schedule with Data Conversion plan. Provide details for Data Conversion tasks to resolve identified data issues and corrective action plans. Review data quality and integrity of converted data regularly in Joint PMO, Team Leads, and other meetings as appropriate. 			
Reference(s) to Industry Standard			
<p>Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Integrated Project Management (IPM), and Technical Solution (TS) process areas.</p> <p>Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>			
Priority	Impact		Finding Origination
Urgent	Degree	High	21 April 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	No Progress Observed
Status Update	<p>07/27/2017: No progress observed.</p> <p>10/31/2017: A detailed project plan for Stage 1 conversion activities is in place. This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-M-05-03			
Finding Name: Lack of Appropriate Level of Schedule Decomposition, Team Resources, Training, and Reporting for UAT			
Description: UAT activities in the schedule are high-level and lack the details necessary to properly plan resources, activities to train UAT testers, or adequately track and report progress against.			
Risks:			
<ol style="list-style-type: none"> Milestone dates may not be met without previous indications that the date was in jeopardy Impact to other project activities and project schedule Incomplete and/or inaccurate UAT and overall project progress status reported Increased UAT surprises and increased risks 			
Recommendation(s)			
1. Provide details for UAT plan and schedule loaded with resources.			
Reference(s) to Industry Standard			
<p>Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Integrated Project Management (IPM), and Validation (VAL) process areas.</p> <p>Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>			
Priority	Impact		Finding Origination
High	Degree	Medium	21 April 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed.
Status Update	<p>07/27/2017: With CCR-13, UAT responsibility shifted to [REDACTED] has provided UAT plans that included resources and reporting for UAT.</p> <p>10/31/2017: This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-M-05-05

Finding Name: Lack of formal Mitigation Plan to Manage Behind-Schedule CMS Certification Activities

Description: There are a significant number (29+) of certification tasks that are late per Certification Project Plan 2017.01.23.mpp.

ID	Task Name	% Complete	Work	Text19	Flag11	Duration	Start	Finish
0	MMIS Modernization and Fiscal Agent Operations Takeover Services Reprocurement Project - Phase II Certification	12%	12,290.92 h		No	892.78 d	Wed 6/1/16	Mon 12/30/19
2	Planning	77%	1,235.95 h		No	211.85 d	Wed 6/1/16	Fri 4/7/17
9	Certification Review Repository	84%	199.78 h		No	84.5 d	Mon 9/19/16	Tue 1/24/17
42		65%	315.5 h		No	130.9 d	Tue 9/27/16	Fri 4/7/17
53	Certification Training	39%	191.08 h		No	61.75 d	Thu 12/1/16	Fri 3/3/17
63	Execution	0%	10,919.83 h		No	845.01 d	Wed 8/3/16	Mon 12/23/19
64	Stage 1 Certification	0%	4,013 h		No	482.04 d	Wed 8/3/16	Thu 7/12/18
65	Stage 1 Certification Artifacts and Products	0%	1,090 h		No	284.28 d	Wed 8/3/16	Mon 9/25/17
66	Certification Design	0%	224 h		No	142.7 d	Wed 8/3/16	Thu 3/2/17
67	DW Analytics MOD 8 Certification Design	0%	32 h		No	142.7 d	Wed 8/3/16	Thu 3/2/17
73	PI-UR MOD 4 Certification Design	0%	32 h		No	134.81 d	Tue 8/9/16	Fri 2/24/17
79	CSS Portal MOD 1 Certification Design	0%	32 h		No	100.3 d	Wed 9/28/16	Fri 2/24/17
85	Provider Mgmt MOD 3 Certification Design	0%	32 h		No	114.1 d	Thu 9/8/16	Fri 2/24/17
91	Dashboard MOD 5 Certification Design	0%	32 h		No	124.95 d	Tue 8/23/16	Fri 2/24/17
97	Security Certification Design	0%	20 h		No	76.63 d	Tue 11/1/16	Fri 2/24/17
103	SOA Certification Design	0%	44 h		No	80.58 d	Wed 10/26/16	Fri 2/24/17
109	Certification Construct	0%	380 h		No	57.76 d	Fri 2/24/17	Thu 5/18/17
110	DW Analytics MOD 8 Certification Construct	0%	55 h		No	19.88 d	Thu 3/2/17	Thu 3/30/17
116	PI-UR MOD 4 Certification Construct	0%	55 h		No	20 d	Wed 3/29/17	Wed 4/26/17
122	CSS Portal MOD 1 Certification Construct	0%	64 h		No	25 d	Fri 2/24/17	Mon 4/3/17
128	Provider Mgmt MOD 3 Certification Construct	0%	55 h		No	20 d	Fri 2/24/17	Fri 3/24/17
140	Security Certification Construct	0%	39 h		No	20 d	Fri 2/24/17	Fri 3/24/17
146	SOA Certification Construct	0%	57 h		No	20 d	Wed 4/5/17	Wed 5/3/17
195	Stage 1 Certifications Quarterly Checklist reports	0%	816 h		No	149.25 d	Tue 2/28/17	Tue 10/3/17
196	Certification Checklist Report 1 Stage 1 Qrt 1	0%	272 h		No	24.38 d	Tue 2/28/17	Tue 4/4/17
414	Stage 2 Implementation Certifications	0%	6,906.83 h		No	675.4 d	Tue 4/11/17	Mon 12/23/19
415	Stage 2 Certification Artifacts and Products	0%	1,825 h		No	476.64 d	Tue 4/11/17	Wed 3/13/19
416	Certification Design Stage 2	0%	450 h		No	171.86 d	Tue 4/11/17	Tue 12/19/17

However, there is no published mitigation plan to manage and take corrective action to resolve the late tasks. Additionally, Certification Project Plan 2017.01.23.mpp was last updated on Jan 23, 2017. The CMS Certification schedule has several resources (some no longer with project) that are over allocated as shown below.

Resource Name	Work	Role	Group
	1,062.7 h	Account Cert Bus Analyst	Certification
	1,062.7 h	Account Cert Info Analyst	Certification
	129.8 h	Client Project Mgr Assistant	Client
	655 h	IV&V	Client
	359.97 h	Test Lead	Test
	3,383.27 h	Certification Manager	Certification
	179.88 h	Client Project Mgr	Client
	141.97 h	M3/M6 Functional PM	M3,M6
	133.97 h	Testing Mgr	Test
	359.97 h	Test Lead	Test
	253.28 h	Project Manager	PMO
	109.97 h	M5 Function PM	M5

Risks:

1. Missing due dates for CMS Certification

2. Potential impact on business, operations, and funding		
3. Miss scheduling and coordination deadlines with CMS for review activities		
Recommendation(s)		
1. Provide details mitigation plan to get back CMS Certification activities on schedule and report on them regularly.		
2. Align CMS Certification activities with agreed approach with project CMS Regional Representative.		
3. Establish schedule to update/maintain and report against the approved Certification Schedule.		
4. Review status of mitigation plan regularly in Joint PMO and Team Leads meetings as appropriate.		
Reference(s) to Industry Standard		
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Integrated Project Management (IPM), and Risk Management (RSKM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.		
Priority	Impact	Finding Origination
High	Degree	Medium
	Probability	High
	Time Criticality	Immediate
Status Update	07/27/2017: No progress observed. 10/31/2017: Certification plan has been revised to show new stage 1 go-live dates and certification in two phases (for Stage 1 modules and for Stage 2 modules). This finding has been sufficiently remediated and is being closed.	

Finding Number: F-M-06-01
Finding Name: Lack of Access and Visibility Into Other Dependent Plans
Description: ██████████ Stage 1 and 2 Implementation Project Plans list a significant number of tasks as milestones leading to the assumption that there are other dependent project plans and schedules (such as Testing, CMS Certification, Training, ██████████ UAT Test environment setup, etc.) with details behind these milestone tasks. However, ██████████ PMO and other non ██████████ stakeholders do not have access to these plans. This results in a lack of clarity about the basis on which estimated due dates for these milestones were arrived at. There is also no visibility into how the progress towards these milestones is being tracked and reported.
Risks: <ol style="list-style-type: none"> 1. Estimated due dates for these milestones may be incorrect 2. Milestone dates may not be met without previous indications that the date was in jeopardy 3. Impact to other project activities and overall project schedule 4. Incomplete and/or inaccurate project progress status reported 5. Increased project surprises and crisis management
Recommendation(s)
<ol style="list-style-type: none"> 1. Provide access to these dependent plans 2. Provide visibility into how the Stage 1 and 2 ██████████ Implementation Project Plans are tied with these dependent plans
Reference(s) to Industry Standard

Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC) and Integrated Project Management (IPM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	27 July 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	10/31/2017: Detailed project plans for these areas have been provided for Stage 1. Detailed plans for Stage 2 need to be completed. This finding has been sufficiently remediated and is being closed.		

Finding Number: F-M-06-02			
Finding Name: Absence of UAT Testing Training ████████ UAT Testing Team			
<p>Description: Review of high-level Training roadmap “Training Dates 2017-0516” does not list any planned training for ████████ UAT Testers. ████████ did provide orientation on various tools used to execute UAT Testing, such as ████████ and ALM. Both the ████████ QA teams developed their own UAT tester training. This has the potential of a disconnect and lack of common understanding between the ████████ UAT teams about UAT testing entry criteria, testing strategy, scope, coverage, execution, exit criteria, defect logging, capturing and reporting. This could impact the accuracy of UAT Test results and status reports.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Incorrect identification between incident and defect 2. UAT testers may not follow required or desired UAT Testing process 3. Disconnect between ████████ UAT testing teams on scope and coverage 4. Impact to other testing and project activities and overall project schedule 5. Incomplete and/or inaccurate UAT testing progress status reported 6. Increased risk to go-live 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Establish and provide common UAT Training to testers for both ████████ 2. Establish formal touch points between ████████ to identify identified issues, concerns, and lessons learned 			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Integrated Project Management (IPM), and Organizational Training (OT) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	27 July 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	10/31/2017: Training provided to ████████ sufficiently remediated this finding. This finding is being closed.		

Finding Number: F-M-06-03			
Finding Name: Issues Management Process Not Being Followed Consistently			
<p>Description: Review of issues raised by the [REDACTED] team indicates that established issues management process is not being followed in all cases. In order for the appropriate engagement and corrective action to be taken, senior leadership needs to be involved for appropriate action to occur. This approach creates a bottle neck impacting the project’s ability to deliver and support on-going activities in a timely manner.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Delay in actions to be taken 2. Impact to other project activities and overall project schedule 3. Increased risk to go-live 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Establish, follow, and monitor issues log for all project areas at all levels 2. Provide refresher orientation on issues management process 			
Reference(s) to Industry Standard			
<p>Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project and Monitoring and Control (PMC) process areas.</p> <p>Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>			
Priority	Impact		Finding Origination
Urgent	Degree	High	27 July 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>10/31/2017: Much greater emphasis has been placed on entering, tracking, and reviewing issues. This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-M-06-04			
Finding Name: Absence of Planning, Coordination, and Communication for [REDACTED] UAT Test Environment Setup			
<p>Description: There is an absence of formal planning, coordination, and communication documentation [REDACTED] teams with respect to establishment of the [REDACTED] UAT Test environment.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Missing identification of key stakeholders on both [REDACTED] teams 2. Missing in identification of capacity and availability of key stakeholders to perform various activities 3. Delay in starting and completing UAT Testing 4. Impact to other project activities and overall project schedule 5. Increased risk to go-live 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Establish, revise, follow, and monitor other sub-plans such as UAT environment setup plan 2. Establish, publish, and communicate UAT environment plan and schedule as needed 3. PMO to consider to monitor and report status on progress and issues of such sub-plans 			

Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project and Monitoring and Control (PMC) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	27 July 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	10/31/2017: This was resolved for Sage 1. Will close, monitor, and re-open for Stage 2, if required.		

Finding Number: F-M-06-05			
Finding Name: Weekly "Testing Status Report" Does Not Include UAT Testing Status			
Description: The published weekly "Testing Status Report" does not include UAT activities planned, executed, and status of UAT Team testing. This approach doesn't give complete or holistic status of testing activities by all (including).			
Risks:			
<ol style="list-style-type: none"> 1. Incorrect status on the progress reported, especially on UAT testing 2. Impact to other project activities and overall project schedule 3. Increased risk to go-live 			
Recommendation(s)			
1. Revise weekly "Testing Status Report" to include section on Testing activities			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project and Monitoring and Control (PMC) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	27 July 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	10/31/2017: A separate UAT Status Report is being provided. This finding has been sufficiently remediated and is being closed.		

Finding Number: F-S-04-01			
Finding Name: Lack of Consistency in Quality of Conducted Walkthroughs of BDD or DSD			
Description: There are formal walkthroughs scheduled for BDD and DSD. However, there is variation in the effectiveness of these walkthrough sessions due to:			
<ul style="list-style-type: none"> • Absence of a clear definition of purpose of each session • Inconsistency in level of preparation for the sessions • Inconsistency in the level of knowledge about COTS products among participants 			

<ul style="list-style-type: none"> Lack of holistic or overall enterprise view of the solution 			
Risks:			
<ol style="list-style-type: none"> Impact on inability to provide needed clarifications BDD and DSD may remain incomplete Impact to other project activities and project schedule 			
Recommendation(s)			
<ol style="list-style-type: none"> Send out walkthrough agenda along with invitations with clearly defined purpose and objectives to achieve Capture, analyze and report on walkthrough data such as preparation, conduct, and post action items. 			
Reference(s) to Industry Standard			
<p>Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Verification (VER) and Validation (VAL) process areas.</p> <p>Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>			
Priority	Impact		Finding Origination
High	Degree	Medium	20 January 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>04/21/2017: [REDACTED] is reviewing their walkthrough process to ensure more level-setting between facilitator's and [REDACTED] participants.</p> <p>07/27/2017: [REDACTED] continues to evaluate their walkthrough process.</p> <p>10/31/2017: [REDACTED] has reviewed their walkthrough process to ensure more level-setting between facilitator's and [REDACTED] participants. This finding has been sufficiently remediated and is being closed.</p>		

Closed Quarter 8: 01-31-2018:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-PI-03-03	Project Implementation	H	Lack of Formal Acceptance Criteria for Product From the [REDACTED] Product Team and Subcontractors	X
F-M-05-02	Management	U	Lack of Decomposition of Data Conversion Activities in Project Schedule for both Stages 1 and 2	X
F-M-05-06	Management	H	Lack of Alignment of [REDACTED] CMS Certification Plan and Schedule With the Agreed Approach	X
F-M-05-07	Management	H	Lack of Common Risk Rating Criteria for Use by all [REDACTED] vendors	X
F-M-06-06	Management	U	[REDACTED] Weekly "Testing Status Report" Template Needs Enhancement to Include Other Information About Testing Activities	X
F-T-06-01	Technical	H	Absence of Configuration and Set-up Validation Checklist for Establishing UAT Test Environment at [REDACTED]	X
F-M-07-01	Management	U	Lack of Approval Before Schedule Start and Completion Dates are Changed	X

Finding Number: F-PI-03-03			
Finding Name: Lack of Formal Acceptance Criteria for Product From [REDACTED] Product Team and Subcontractors			
Description: Formal criterion for acceptance of product from [REDACTED] Product Team Subcontractors needs to be established with the [REDACTED] Project Team to ensure the quality of products being received.			
Risks:			
<ol style="list-style-type: none"> 1. Unacceptable code quality 2. Increase in defect triage and remediation and rework activities 3. Impact to other project activities and project schedule 			
Recommendation(s)			
1. Establish a formal set of acceptance criteria for product developed or provided by the [REDACTED] Team and Subcontractors.			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Verification (VER), and Validation (VAL), and Risk Management (RSKM) process areas. IEEE 29119-2-2013. IEEE 829-2008 Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact	Finding Origination	
High	Degree	High	7 Oct 2016
	Probability	Medium	Progress Indicator

Priority	Impact		Finding Origination
Urgent	Degree	High	21 April 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>07/27/2017: No progress observed.</p> <p>10/31/2017: No progress observed.</p> <p>01/31/2018: Data conversion activities have been included in Stage 1 and 2 schedules.</p>		

Finding Number: F-M-05-06			
Finding Name: Lack of Alignment of █████ CMS Certification Plan and Schedule With the Agreed-Upon Approach			
<p>Description: The █████ Certification Management Plan V2, Approved 2016.10.26, is not in line with the proposed approach and tools to be used. Similarly, the █████ Certification Project Plan 2017.01.23.mpp was last updated on Jan 23, 2017. Additionally, both the plan and schedule need to be aligned with the agreed approach and strategy for █████ Certification as per the meeting held on April 12, 2017 with all █████ Stakeholders - CMS, █████, State PMO, and IV&V Representatives.</p> <p>Risks:</p> <ol style="list-style-type: none"> Missing due dates for CMS Certification 			
Recommendation(s)			
<ol style="list-style-type: none"> Align both Certification Plan and Schedule with agreed upon approach. Review status of mitigation plans regularly in Joint PMO and Team Leads meetings. 			
Reference(s) to Industry Standard			
<p>Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Integrated Project Management (IPM), and Risk Management (RSKM) process areas.</p> <p>Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>			
Priority	Impact		Finding Origination
High	Degree	Medium	21 April 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>07/27/2017: The Certification Schedule is in the process of being revised to align with the new certification approach.</p> <p>10/31/2017: Certification plan has been revised to show new stage 1 go-live dates and certification in two phases (for Stage 1 modules and for Stage 2 modules). Plan and schedule in process of being finalized for Stage 2.</p> <p>01/31/2018: This finding will be closed and a new finding regarding certification will be opened.</p>		

Finding Number: F-M-05-07			
Finding Name: Lack of Common Risk Rating Criteria for Use by all █████ Vendors			

<p>Description: There is a need to establish a common definition of risk impact, probability, and severity across all such as [REDACTED] to ensure that risk ratings are understood and interpreted equally by all. Common guidance for risk management strategy (i.e., at what level should mitigation plans and contingency plans be in place) also needs to be established for use by all Vendors.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Incorrect risk rating 2. Incorrect interpretation of the severity of risk on project 3. Missing critical tasks and deliverables 			
<p>Recommendation(s)</p> <ol style="list-style-type: none"> 1. Establish and publish common definition for risk impact, probability, and severity. 2. Establish and publish a common risk mitigation strategy. 			
<p>Reference(s) to Industry Standard</p> <p>Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Risk Management (RSKM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>			
Priority	Impact		Finding Origination
High	Degree	Medium	21 April 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>07/27/2017: No progress observed.</p> <p>10/31/2017: No risks from vendors are provided in the project risk register, so it is unknown if they use the same risk rating parameters. No progress observed.</p> <p>01/31/2018: Common understanding established, but very few risks identified. This finding will be closed.</p>		

<p>Finding Number: F-M-06-06</p>			
<p>Finding Name: [REDACTED] Weekly "Testing Status Report" Template Needs Enhancement to Include Other Information About Testing Activities.</p>			
<p>Description: After review of the [REDACTED] weekly "Testing Status Report" in light of industry best practices and the CMS Expedited Life Cycle (XLC) Test Summary Report template, there is the need to enhance [REDACTED] "Testing Status Report" template. This enhanced testing status report template may provide additional information to provide complete testing status.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Incomplete testing status 2. Impact to other project activities and overall project schedule 3. Increased risk to go-live 			
<p>Recommendation(s)</p> <ol style="list-style-type: none"> 1. Revise weekly "Testing Status Report" template to include sections such as Testing Scope; Testing Assumptions and Constraints; Testing Risks; Testing Environment(s); Exit Criteria for each testing type; and Summary or Conclusions. 			
<p>Reference(s) to Industry Standard</p>			

Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Verification (VER) and Validation (VAL) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	27 July 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	10/31/2017: Finding is under consideration. 01/31/2018: The report meets State needs. This finding is being closed.		

Finding Number: F-T-06-01			
Finding Name: Absence of Configuration and Set-up Validation Checklist for Establishing UAT Test Environment at [REDACTED]			
Description: During establishment of [REDACTED] Test environment, various issues were identified, such as system configuration, URL's, firewall settings, and Identification and access to sub-systems (applications and legacy), to name a few. Review of these issues regarding establishment of a stable [REDACTED] Test environment raised by the [REDACTED] Testing team with the DXC team demonstrates that there is a need to establish and use a validation checklist that will ensure that [REDACTED] Test team is fully functional to perform UAT Testing as needed. Absence of a UAT environment validation checklist is causing further delay in UAT Test execution by the [REDACTED] team.			
Risks: <ol style="list-style-type: none"> [REDACTED] Testing delayed Impact to other testing and project activities and overall project schedule Increased risk to go-live 			
Recommendation(s)			
1. Establish and use UAT environment setup and configuration validation checklist			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Technical Solution (TS), Product Integration (PI), Validation (VAL) and Project Monitoring and Control (PMC) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	27 July 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	10/31/2017: [REDACTED] a process and checklist for environment setup and configuration. 01/31/2018: Duplicate of F-PI-07-01. Will include example from this finding in F-PI-07-01.		

Finding Number: F-M-07-01			
Finding Name: Lack of Approval Before Schedule Start and Completion Dates are Changed			

Description: Several task start and completion dates in the baselined schedules have changed without prior discussion or approval to these changes.			
Risks:			
1. Inability to meet schedule			
2. Status reported against incorrect schedule dates			
Recommendation(s)			
1. Discontinue to practice of unilaterally changing task start and completion dates in the schedule.			
2. Discuss and obtain [REDACTED] before changing task start and completion dates and establish a new schedule baseline.			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP) and Project Monitoring and Control (PMC) process areas.			
Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	31 October 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	01/31/2018: Issue brought to management’s attention and has not happened since. This finding has been sufficiently remediated and is being closed.		

Closed Quarter 9: 04-30-2018:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-M-02-02	Management	H	Lack of Formal Acceptance Criteria for Product From the [REDACTED] Product Team and Subcontractors	X
F-M-0302	Management	U	Lack of Decomposition of Data Conversion Activities in Project Schedule for both Stages 1 and 2	X
F-M-07-03	Management	H	Lack of Alignment of [REDACTED] CMS Certification Plan and Schedule With the Agreed Approach	X
F-U-07-01	User Involvement	H	Lack of Common Risk Rating Criteria for Use by all [REDACTED] vendors	X
F-M-08-04	Management	U	[REDACTED] Weekly “Testing Status Report” Template Needs Enhancement to Include Other Information About Testing Activities	X
F-PI-08-01	Project Implementation	H	Absence of Configuration and Set-up Validation Checklist for Establishing UAT Test Environment at [REDACTED]	X
F-PI-08-02	Project Implementation	U	Lack of Approval Before Schedule Start and Completion Dates are Changed	X

Finding Number: F-M-02-02			
Finding Name: Inadequate Visibility into The HPE COTS Products Being Developed			
<p>Description: ██████ Stage 1 Implementation Plan does not identify tasks for planning, monitoring, and reporting activities related to products being developed by the ██████ Product team. As this is new development based on ██████ and not an existing mature COTS product, the State should have greater insight into product development. The State should be provided with release plans showing schedule, planned content/requirements being addressed, and requirements backlog for each release. Status updates should also be provided to the State showing when actual content is in jeopardy of not meeting planned content for a given release, and a detailed analysis of the impact on the backlog and schedule for future releases. If any requirement is being assigned to a future release/iteration, the State should be part of the decision-making team making decisions based on a complete detailed impact analysis. The project should also include tasks to provide the State a prototype demonstration of functionality for each iteration, so that when a product is released, there are no major surprises.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Product design and functionality may not align with State requirements and needs. 2. Potential of impact on schedule. 3. Possible re-work. 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Consider including development task details for ██████ product in the ██████ Implementation Project Plan. 2. Monitor and report against ██████ tasks. 			
Reference(s) to Industry Standard			
<ol style="list-style-type: none"> 1. CMMI-DEV v1.3; Project Planning (PP) and Project Monitoring and Control (PMC) process areas 2. Project Management Institute, A Guide to the Project Management Body of Knowledge, Edition 5, 2012 			
Priority	Impact		Finding Origination
High	Degree	Medium	15 July 2016
	Probability	High	Progress Indicator
	Time Criticality	Short term	Closed
Status Update	<p>10/20/2016: A table with Construction/Development tasks for each module has been added to the weekly status report.</p> <p>01/13/2017: No further progress this reporting period.</p> <p>04/21/2017: Tables with Construct tasks in the weekly status report include % complete, last week’s estimated completion date, this week’s estimated completion date, and actual completion date.</p> <p>07/27/2017: No further progress this reporting period.</p> <p>10/31/2017: Weekly status reports include tables for each module showing dates for milestones and some sub-tasks. State Product Owners are being assigned for each module to allow for more visibility into product development.</p> <p>01/31/2018: List of functionality and defects coming with each release being provided. Release notes after the release. Sprint reviews/demos now being provided.</p>		

	04/30/2018: List of functionality and defects coming with each release being provided. Release notes after the release. Sprint reviews/demos now being provided. This finding has been sufficiently remediated and is being closed.
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Finding Number: F-M-03-02			
Finding Name: Lack of Visibility Into and Reporting Against Mitigation Plans			
Description: Little visibility is provided into mitigation activities and status of mitigation plans for risks, issues, or corrective actions to return to or improve schedule. Weekly status reports state that mitigation activities are in progress for certain items, but do not go into detail on what the mitigation steps or progress against those mitigation steps/plans are.			
Risks:			
<ol style="list-style-type: none"> 1. Ability to make timely decisions 2. Uncertainty that mitigation steps/plan is appropriate or may need to be revised to better address the risk or issue 3. Uncertainty that mitigation is progressing in an effective manner 4. Impact to other project activities and project schedule 			
Recommendation(s)			
1. Provide details on mitigation steps/plan and status in logs and reports			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Monitoring and Control (PMC), Risk Management (RSKM), and Integrated Project Management (IPM) process areas. IEEE 16085-2006. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	7 Oct 2016
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>01/13/2017: High level risks in [REDACTED] that mitigation plans are required, but mitigation plans are not attached to those risks. In addition, weekly status reports have not added any more detail regarding mitigation plans than when this finding was written. No progress observed.</p> <p>04/21/2017: Mitigation plans are attached to risks [REDACTED], but have little detail and weekly status reports have not added any more detail regarding mitigation plans than when this finding was written.</p> <p>07/27/2017: No progress this reporting period.</p> <p>10/31/2017: No progress this reporting period.</p> <p>01/31/2018: [REDACTED] were recently updated. IV&V will monitor to ensure they are consistently reviewed and updated.</p> <p>04/30/2018: Risks are being consistently reviewed and updated. This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-M-07-03

Finding Name: Lack of Clear Identification of Dependencies Across and Among all Modules (Stage 1 & 2) From a Holistic Perspective			
Description: Stage 1 and 2 Implementation schedules identify dependencies from either a project management or technical perspective; however, it inconsistently identifies dependencies to support other parameters, such as business, data, operations, and the ability to perform end-to-end testing for Stage 1 modules and across both Stage 1 and 2 modules.			
Risks:			
<ol style="list-style-type: none"> 1. Inability to truly ensure that when Stage 1 modules go-live they function/operate as intended or planned 2. Impact on implementing cutover plan for Stage 1 modules 3. Impact on Operations Teams readiness to support Stage 1 go-live activities 4. Delay in Stage 1 go-live timeline 5. Delayed certification [REDACTED] and delayed State funding 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Establish complete Stage 1 and 2 Schedules with all dependencies identified 2. Establish a complete traceability matrix 			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Technical Solution (TS), Product Integration (PI) and Requirements Management (REQM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	31 October 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>01/31/2018: Project Plans for all Stage 1 and 2 modules provided. The Module 9 Plan is being updated to make it more structured and easier to read. Logic diagrams appear to exist, but are not [REDACTED].</p> <p>04/30/2018: Project Plans for all Stage 1 and 2 modules provided. Logic diagrams have been developed. This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-U-07-01			
Finding Name: Lack of Identification of Deliverable Review and Approval Parties			
Description: Incomplete or outdated content of some DSDs may indicate the lack of a thorough review by the Operations Team. Current DSDs do not include any indication of what parties reviewed and provided sign-off on the DSD.			
Risks:			
<ol style="list-style-type: none"> 1. Inaccurate or incomplete design documentation leading to incorrect or incomplete system functionality that does not meet State requirements and needs. 2. Delayed schedule to correct design and construction. 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Include a section in DSD documents that lists those who reviewed and provided their approval of the document (the PM, TFAL, QA, Operations, State Team Lead, State PM, etc.) 			

Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP) and Technical Solution (TS) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	High	31 October 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	01/31/2018: A review table to be added to documents showing names of those who have reviewed the document. 04/30/2018: Review table has been added to deliverables. This finding has been sufficiently remediated and is being closed.		

Finding Number: F-M-08-04

Finding Name: Stage 1 defect burn-down rate lagging.

Description: The defect burn-down rate for Stage 1 does not appear adequate to support a March 12, 2018 go-live that will meet the criteria of no Severity Level 2 defects and limited Severity Level 3 defects subject to negotiation. Defect burn-down data over the last several weeks indicates that the defect rate is going up and limited time exists to deploy defect fixes into patch releases with enough time to retest and verify corrections prior to the March 12, 2018 go-live date.
Burn-down chart from Feb 5 is shown below

Critical Stage 1 Defect Burn Down
through testing & closure of defect

Date	Open Defects (Blue)	Actuals (Red)	Forecast New Defects (Yellow)
12-Jan	14	0	0
16-Jan	0	16	0
17-Jan	0	16	0
18-Jan	0	15	0
19-Jan	12	0	10
19-Jan	0	16	0
22-Jan	0	21	0
23-Jan	0	31	0
24-Jan	0	31	0
25-Jan	0	30	0
26-Jan	10	0	15
26-Jan	0	42	0
29-Jan	0	46	0
30-Jan	0	47	0
31-Jan	0	49	0
1-Feb	0	53	0
2-Feb	0	51	0
2-Feb	12	0	8
5-Feb	0	56	0
9-Feb	8	0	4
16-Feb	8	0	2
23-Feb	6	0	1
2-Mar	6	0	0

The summary of open Severity Level 2 and 3 defects as of Feb 5, 2018 is shown below.

Open High Severity Defects – Categorized by the Defect Impact – External – Provider/Internal – Provider Business Ops / Non-Provider

Stage 1 Defect Impact Summary - All Open High Severity Defects									
Count of Defect ID	Column Labels								
Severity	1/31/2018	2/2/2018	2/5/2018	2/7/2018	2/19/2018	(blank)	2/6/2018	2/14/2018	Grand Total
External - Provider Facing									
2-Major: No Workaround			8	3	1	2		1	15
3-Major: With Workaround			1			2			3
Internal - Provider Business Ops									
2-Major: No Workaround		2	5	2	4	6			19
3-Major: With Workaround					1	6	1		8
Non-Provider									
2-Major: No Workaround				2					2
3-Major: With Workaround	1		2	3		2	1		9
Grand Total	1	2	16	10	6	18	2	1	56

As shown in the yellow shaded area above, 2 provider facing and 6 internal facing Severity Level 2 defects are not scheduled for any patch at this time. [REDACTED] still has a significant portion of end-to-end tests to run and more Severity Level 2 and 3 defects will most likely be found during that testing. In addition to the Severity Level 2 defects with no workarounds, the impacts of the Severity Level 3 defect workarounds to business need to be assessed to determine if they are acceptable. There is a good risk that the State may either have to accept some significant defects in order to go-live on March 12, 2018, or delay go-live.

Risks:

1. Significant defects at go-live.
2. Potential business impacts.
3. Potential delay in go-live date.

Recommendation(s)

1. Review defect burn-down and defect fix schedules and provide status to the State on a daily basis.
2. Assess impacts on the business of current and newly identified defects and relay this information daily.

Reference(s) to Industry Standard

Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Integrated Project Management (IPM), Verification (VER), Validation (VAL), and Risk Management (RSKM) process areas.
Project Management Institute Project Management Body of Knowledge, Sixth Edition.

Priority	Impact		Finding Origination
Urgent	Degree	High	31 January 2018
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	04/30/2018: Stage 1 is live. This finding is being closed.		

Finding Number: F-PI-08-01

Finding Name: The detailed deployment plan for 3/12/2018 Go Live date does not [REDACTED] needs.

Description: A Deployment Approach Document was distributed in mid-January with request for input and approval and an explanation that a detailed Deployment Plan would be distributed shortly. Two dry runs have been scheduled to walk through the detailed deployment plan, but that deployment appears to be missing details about communication needs [REDACTED] (metrics and communication schedule) at Go Live.

Risks:			
<ol style="list-style-type: none"> 1. ██████████ and project leadership will not have access to information expected during the critical hours and days following Go Live. 2. Web site and application metrics that ██████████ to see will not be captured. 3. Scrambling after Go Live to provide requested information will increase stress and risk of quality assurance problems in resulting communications. 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. ██████████ find out what information they and project leadership want and expect to see at Go Live. 2. ██████████ add details to the detailed deployment plan for communications (content and milestones) to project leadership. 3. ██████████ input and sign off on the detailed deployment plan. 			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Technical Solution (TS), Product Integration (PI) and Requirements Management (REQM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	31 January 2018
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	04/30/2018: Stage 1 is live. This finding is being closed.		

Finding Number: F-PI-08-02
Finding Name: A regression test suite should be created and packaged to run as an automated process whenever code is imported into the System Integration Test environment, whether a major or patch release.
Description: Regression testing ensures that previously developed and tested software still performs as expected changed or interfaced with other software. This could include changes resulting from software releases, patches, or configuration changes. Designing a regression test plan that includes automated test suites of a selected number of test cases that cover maximum functionality and then comparing the results against known exit criteria will take time to create but will improve quality of code introduced into downstream environments and reduce introduction of defects to code that previously passed tests.
Risks:
<ol style="list-style-type: none"> 1. Introduction of defects to functionality that previously passed tests. 2. Delay in finding introduced defects. 3. Missed defects in previously tested application code.
Recommendation(s)
<ol style="list-style-type: none"> 1. Create regression test plan that includes automated test suites. 2. Identify already-run test cases that can be automated for regression testing. 3. Build automated test suites over time to reduce impact on testing resources.
Reference(s) to Industry Standard
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Technical Solution (TS), Product Integration (PI) and Requirements Management (REQM) process areas.

Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	31 January 2018
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	04/30/2018: [REDACTED] intend to develop an automated regression test suite. This finding is being closed.		

Closed Quarter 10: 07-31-2018:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-M-04-03	Management	H	Lack of Common Understanding of Agile Touch Points for the State	X
F-M-08-01	Management	U	Time allocated for Stage 2 User Acceptance Testing (UAT) is likely inadequate.	X
F-M-09-01	Management	H	Overlap of SIT and UAT Activities in Stage 2 Implementation Schedule	X

Finding Number: F-M-04-03
Finding Name: Lack of Common Understanding of Agile Touch Points for the State
Description: Because of the COTS concept and the use of Agile by [REDACTED] product and does not understand where it makes sense for the State team to make interfaces with the process to obtain status and product information/demonstrations. The [REDACTED] come together to define and document what the agile methodology for the project is and to define interface points in the agile methodology where the State can be provided information regarding development status, content of upcoming releases, and demonstration of released functionality.
Risks:
<ol style="list-style-type: none"> 1. Missed schedules and RFP scope 2. Incomplete functionality 3. Rework 4. Missed continuous feedback to [REDACTED] of agile methodology
Recommendation(s)
<ol style="list-style-type: none"> 1. Meet to discuss the agile lifecycle and methodology. 2. Determine appropriate points in the process to provide information to the State. 3. Actively work and track to the development schedule(s). 4. Provide release plan/schedule and content/RFP scope for each release to the State. 5. Report progress against the plans. 6. Provide timely demonstrations of product for each release.
Reference(s) to Industry Standard

Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Technical Solution (TS), Product Integration (PI), and Requirements Management (REQM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	Medium	20 January 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>04/21/2017: [REDACTED] of features to be expected in the final releases for Stage 1; however, it is still not clear what the interaction points are and what data can be provided to the State at what points in time.</p> <p>07/27/2017: No further progress observed.</p> <p>10/31/2017: State Product Owners are being identified in order to provide more insight into product sprint activities and [REDACTED] team leads.</p> <p>01/31/2018: Sprint reviews started.</p> <p>04/30/2018: Sprint reviews started, but need to include additional information identifying requirements being addressed for that and the next sprint.</p> <p>07/31/2018: Business Function reviews include additional information identifying requirements being addressed for that and the next sprint. This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-M-08-01
Finding Name: Time allocated for Stage 2 User Acceptance Testing (UAT) is likely inadequate.
<p>Description: The Stage 2 schedule timeline has an overlap of System Integration Testing (SIT) and User Acceptance Testing (UAT), with both ending at the same time. The UAT period for Stage 2 is 5 months, or almost two months shorter than it was for Stage 1 UAT, even though Stage 2 UAT is bigger and more complex and will require many more test cases (approximately 600 test cases in Stage 2 compared to 93 in Stage 1 and 24 end-to-end test suites in Stage 2 compared to three huge test suites in Stage 1).</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. UAT will be further reduced as schedule is compacted. 2. Delay in completing Stage 2 UAT may require schedule changes, delaying modules from anticipated Go Live. 3. Stage 2 modules may go live with incomplete UAT results, questionable quality, and/or lack of complete requirements coverage. 4. Defect resolution may occur after Go Live.
Recommendation(s)
<ol style="list-style-type: none"> 1. DXC Project Management staff should [REDACTED] [REDACTED] to arrive at a realistic UAT test plan and associated milestones to ensure UAT starts and progresses on schedule. 2. Publish schedule and functionality within each release and patch to enable analysis and planning prior to receipt of code for testing.

Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Technical Solution (TS), Product Integration (PI) and Requirements Management (REQM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	31 January 2018
	Probability	High	Progress Indicator
	Time Criticality	Short-term	Closed
Status Update	04/30/2018: Test schedule was updated and is being reviewed by IV&V. 07/31/2018: Risk 52 is in place. This finding will be closed.		

Finding Number: F-M-09-01			
Finding Name: Overlap of SIT and UAT Activities in Stage 2 Implementation Schedule			
<p>Description: Stage 2 implementation project plan shows System Integration Testing (SIT) in three iterations starting March 1, 2019 and going through February 28, 20. It also shows User Acceptance Test in three iterations starting September 1, 2018 and going through February 28, 2020 and End-to-End testing going from March 1, 2020 through April 30, 2020. This schedule therefore, has SIT and UAT overlapping six months, from September 1, 2019 through February 2020. The schedule also assumes all defect fixes for iterations are delivered in business days. Given the number of defects found during Stage 1 and turn-around for those defects, the much greater size and complexity of Stage 2, the large overlap of SIT and UAT, the five day defect turnaround assumption for Stage 2, and the short 2 month end-to-end testing period ending just weeks prior to go-live; the probability of meeting the test and implementation schedule for Stage 2 with acceptable quality is low.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Increased complexity of planning, executing, and re-planning development, test, system configuration, and defect management activities. 2. Increased probability of missed test and deployment schedules. 3. Reduced quality of product components and integrated system. 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Conduct thorough analysis to determine if sufficient time is allotted for defect resolution and execution of thorough end-to-end system and user acceptance testing. 2. Ensure timely, open communication between stakeholders throughout the test planning, execution, and defect prioritization and resolution process. 			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI) V2.0: Planning (PLAN) and Verification & Validation (VV) practice areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
High	Degree	High	30 April 2018
	Probability	High	Progress Indicator
	Time Criticality	Long-Term	Closed
Status Update	07/31/2018: Risk 52 is in place. This finding will be closed.		

Closed Quarter 11: 10-31-2018:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-M-08-02	Management	U	Certification planning and execution is inconsistent.	X
F-M-08-03	Management	H	Lessons learned from Stage 1 project from requirements, planning, design, development, testing, and implementation appears to be missing from Stage 2 planning.	X
F-T-08-01	Technical	U	Data available in All Claims Universe in Cerner has not been fully tested and/or accepted [REDACTED] users.	X
F-PI-09-01	Project Implementation	H	Reports Created by Data Warehouse Module Need to Be Validated	X

Finding Number: F-M-08-02			
Finding Name: Certification planning and execution is inconsistent.			
Description: The [REDACTED] Certification Management Plan was last updated in October 2016 and it, and the [REDACTED] Certification Project Plan are out of date. Staff turnover, technology issues, and staff availability have had impacts in this area, and agreement on levels of effort and significant milestone dates is still pending.			
Risks:			
<ol style="list-style-type: none"> Unrealistic expectations for schedules for IV&V and/or federal certification. Delays in certification will delay state funding. 			
Recommendation(s)			
1. Update [REDACTED] Certification Management plan and related [REDACTED] Certification Project Plan.			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Integrated Project Management (IPM), and Risk Management (RSKM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	31 January 2018
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	04/30/2018: Stage 1 R2 certification dates have been established and checklists are being reviewed. IV&V is in the process of reviewing the newly published Stage 2 certification plan. Should complete Stage 2 certification plan by the end of May.		

	<p>07/31/2018: updated R3 schedule and provide updated evidence repository. IV&V will then review.</p> <p>10/31/2018: R3 schedule published, checklists and evidence files provided, and IV&V has completed review of artifacts and checklists. This finding is being closed.</p>
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Finding Number: F-M-08-03

Finding Name: Lessons learned from Stage 1 project from planning, design, development, testing, and implementation appear to be missing from Stage 2 planning.

Description: Lessons learned documentation was created in [redacted] for all modules EXCEPT Mod 8 (Data Warehouse) have not been updated since 2016. Significant evolution in DSD creation, Sprint reviews, UAT triage sessions, conversion documentation and review, etc. has occurred during Stage 1.

- Risks:**
1. Wasted time and effort and increased frustration required to work through issues already addressed.
 2. Reduced quality of artifacts, documents, and applications produced.

Recommendation(s)

1. Provide opportunities to staff working on Stage 1 to brainstorm on top lessons learned, providing staff to document those lessons.
2. Provide the list of lessons learned to the various Project Managers and Team Leads for consideration about effect on Stage 2 work.

Reference(s) to Industry Standard

Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Technical Solution (TS), Product Integration (PI) and Requirements Management (REQM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.

Priority	Impact		Finding Origination
High	Degree	Medium	31 January 2018
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed

Status Update	<p>04/30/2018: Lessons Learned are being collected [redacted] together to determine what should be applied for Stage 2.</p> <p>07/31/2018: [redacted] Lessons Learned to determine which can/should be implemented in Stage 2 and provided the list to [redacted]</p> <p>10/31/2018: Lessons Learned analyzed and [redacted] recommendations to [redacted] to implement. [redacted] and provided comment back [redacted]. This finding is being closed.</p>
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Finding Number: F-T-08-01

Finding Name: Data available in All Claims Universe in Cerner has not been fully tested and/or accepted by KDHE power users.

Description: Previous Mod 8 acceptance by [redacted] data warehouse and the legacy data reporting. Data [redacted]

warehouse power users in [REDACTED] little success in validating other claims data. Concerns over potential duplicate claim amounts, lack of transparency in logic [REDACTED] in creating the All Claims Universe, and lack of user experience and skill in utilizing [REDACTED].			
Risks:			
<ol style="list-style-type: none"> 1. A significant cost will be incurred to extend the current Truven contract providing access to legacy reporting beyond the current 6/30/2018 expiration date. 2. Power users at [REDACTED] to respond to requests for data and information. 3. Reports provided by the agency will be incorrect. 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Involve KDHE power users in testing the [REDACTED], with daily discussions of findings and questions. 2. Walk through Cerner logic in creating the All Claims [REDACTED] experts. 3. Develop detailed acceptance criteria for All Claims [REDACTED], and who will sign off on each criteria item. 			
Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Technical Solution (TS), Product Integration (PI) and Requirements Management (REQM) process areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.			
Priority	Impact		Finding Origination
Urgent	Degree	High	31 January 2018
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>04/30/2018: [REDACTED]. IV&V will then review results.</p> <p>07/31/2018: [REDACTED].</p> <p>10/31/2018: [REDACTED]. This finding is being closed.</p>		

Finding Number: F-PI-09-01
Finding Name: Reports Created by Data Warehouse Module Need to Be Validated
<p>Description: Testing of Data Warehouse reports prior to go-live of the system was very limited:</p> <ul style="list-style-type: none"> • Too many reports from current system that have not been [REDACTED] • Some reports cannot be replicated due to [REDACTED] • [REDACTED] • Expand training not only on how to use tool but also how the data is being utilized in Universe so that associations can be understood and evaluate impact on reports [REDACTED] <p>[REDACTED]</p> <ul style="list-style-type: none"> • Data quality is bad due to data load and other reasons. Examples of fields with bad data include: Expenditures, amount paid, and account receivables. • Finance tables don't work or are inaccurate

<ul style="list-style-type: none"> Mod 5 Finance DSD: <ul style="list-style-type: none"> Lists 2 reports now, but shows incorrect report design (Older quarterly reports are dropped instead of rollover in new report- negative adjustments are dropped and expect to go to Change Control Board for approval). School expenditure is manually entering the data from 288+ school districts although automatic updates are an RFP Requirement; however, [REDACTED] in the DSD. 			
Risks:			
<ol style="list-style-type: none"> Wasted time and effort and increased frustration required to perform rework. Inaccurate or incomplete reports. Inability to meet reporting requirements. 			
Recommendation(s)			
<ol style="list-style-type: none"> Compare reports to current reports (both standard and ad-hoc) being generated by Legacy system and RFP Requirements. [REDACTED] of reports. 			
Reference(s) to Industry Standard			
Capability Maturity Model Integration (CMMI) V2.0: Requirements Development & Management (RDM) and Validation & Verification (VV) practice areas.			
Priority	Impact		Finding Origination
High	Degree	Medium	30 April 2018
	Probability	High	Progress Indicator
	Time Criticality	Short-Term	Progress Observed
Status Update	07/31/2018: [REDACTED] [REDACTED]. 10/31/2018: [REDACTED]. This finding is being closed.		

Closed Quarter 12: 01-31-2019:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-M-05-01	Management	H	Lack of Detail in Mitigation Plans	X
F-M-07-02	Management	U	Lack of Requirements Traceability to CMS Certification Checklist Criteria	X
F-PI-09-02	Project Implementation	M	Training Needs to Include Real-Life, Role-Based Scenarios	X
F-PI-11-01	Project Implementation	M	Lack of Test Results in ALM for Accessibility Tests	X

Finding Number: F-M-05-01
Finding Name: Lack of Detail in Mitigation Plans
Description: The [REDACTED] Management Plan, Section 2.5 describes items to be included in risk mitigation or risk action plans. According to this section, risk mitigation plans are to describe the actions

in terms of resources, timing, and tasks. It further defines things to consider, such as: plan steps, plan objectives, resources required, success criteria, triggers, and plan monitoring. The risk mitigation plans for [REDACTED] not include these items and are, in many cases, very generic. Similarly, mitigation plans for impediments and issues should include detail to include action steps, owner of each step, and due dates and should have status reported in the Weekly Project Status Reports.

Risks:

1. Risks will not be properly mitigated
2. Impact to other project activities and project schedule

Recommendation(s)

1. Provide details for risk mitigation plans as defined in [REDACTED] Risk Management Plan.
2. Provide details for impediment and issue action plans.
3. Review status of mitigation plans regularly in Joint PMO and Team Leads meetings.

Reference(s) to Industry Standard

Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP), Project Monitoring and Control (PMC), Integrated Project Management (IPM), and Risk Management (RSKM) process areas.

Project Management Institute Project Management Body of Knowledge, Fifth Edition.

Priority	Impact		Finding Origination
High	Degree	Medium	21 April 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>07/27/2017: No progress observed.</p> <p>10/31/2017: No progress observed.</p> <p>01/31/2018: [REDACTED] verify if adequate detail has been added.</p> <p>04/30/2018: [REDACTED] Risk Management Plan for potential changes.</p> <p>07/31/2018: [REDACTED] risk mitigation plans and Risk Management Plan and make necessary revisions to bring them into alignment.</p> <p>10/26/2018: [REDACTED] the Risk Management Plan and is now reviewing open risks and making necessary revisions to bring risk mitigation plans into alignment with the plan. Further, [REDACTED] emphasis on creating detailed plans as new risks are identified.</p> <p>01/25/2019: [REDACTED] to include detailed mitigation plans where required by the Risk Management Plan. This Finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-M-07-02

Finding Name: Lack of Requirements Traceability to CMS Certification Checklist Criteria

Description: The current version of the Requirements Traceability Matrix (RTM) is distributed across different applications such as [REDACTED], ALM, etc. This makes traceability a challenge and puts burden on stakeholders such as [REDACTED] QA, IV&V, [REDACTED] (Interface, Certification), and CMS. Current version also increases risk of missing requirements, design decisions, and other updates throughout project

lifecycle. Hence, it is highly recommended that a comprehensive RTM is established to help the project to plan with confidence and get activities accomplished on time.

Additionally, the RTM needs to tie [REDACTED] to the CMS certification criteria and appropriate CMS certification checklists. A traceability matrix tracing the [REDACTED] requirements to sections of DSDs, [REDACTED] Stage 1 or Stage 2 implementation, CMS certification criteria numbers, and CMS Module Certification Checklists needs to be established to enable proper planning and tracking of certification progress and status.

Risks:

1. Missed traceability from requirements to product release
2. Inability to determine what [REDACTED] is being addressed in what [REDACTED] module and how that related to specific certification criteria contained in what specific certification checklist
3. Delayed certification of [REDACTED] and delayed State funding

Recommendation(s)

1. Establish a complete traceability matrix
2. Use the traceability matrix to complete appropriate certification criteria on the appropriate certification checklists and submit the appropriate checklists for review.

Reference(s) to Industry Standard

Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Project Planning (PP) and Requirements Management (REQM) process areas.
Project Management Institute Project Management Body of Knowledge, Fifth Edition.

Priority	Impact		Finding Origination
Urgent	Degree	High	31 October 2017
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>01/31/2018: RFP requirements included in CMS Certification Checklists. IV&V will verify accuracy.</p> <p>04/30/2018: RFP requirements included in all CMS Checklists, except Access and Delivery.</p> <p>07/31/2018: [REDACTED] at how traceability can be shown from requirements to design to test and back. May not be an easy way to do for Stage 1 R3.</p> <p>10/26/2018: An approved RTM is required to close this Finding. The RTM is a required Appendix B artifact for certification.</p> <p>01/25/2019: [REDACTED]. This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-PI-09-02

Finding Name: Training Needs to Include Real-Life, Role-Based Scenarios

Description: Training provided was scripted with pre- selected examples with limited real-life, role-based scenarios, information about data models, universes, and data references/associations. Examples are provided below:

- CRM Training modules (Customer Services, Grievances, Appeals, etc.)
 - Training was all same irrespective of the module

<ul style="list-style-type: none"> • Training material was generic and minimum focus was given to specific areas such as- Grievances, Appeals, and State Fair Hearing • Provider Training <ul style="list-style-type: none"> • Not much feedback from Providers • Mostly online training • Training needs to be provided by user roles, such as: <ul style="list-style-type: none"> • Data analysts • Universe builder • Reports builder <p>Risks:</p> <ol style="list-style-type: none"> 1. End-user unable or slow to adopt use of new system. 																			
<p>Recommendation(s)</p> <ol style="list-style-type: none"> 1. Provide role-based training with real-life scenarios. 2. Expand training not only on how to use tool but also how the data is being utilized in Universe so that associations can be understood and evaluate impact on reports. 3. Engage with end-users, such as Providers, to develop training materials and manage their expectations. 																			
<p>Reference(s) to Industry Standard</p> <p>Capability Maturity Model Integration (CMMI) V2.0: Organizational Training (OT), and Planning (PLAV) practice areas. Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>																			
<table border="1"> <thead> <tr> <th>Priority</th> <th>Impact</th> <th>Finding Origination</th> </tr> </thead> <tbody> <tr> <td rowspan="3">Medium</td> <td>Degree</td> <td>Medium</td> </tr> <tr> <td>Probability</td> <td>Medium</td> </tr> <tr> <td>Time Criticality</td> <td>Long-Term</td> </tr> <tr> <td></td> <td></td> <td>30 April 2018</td> </tr> <tr> <td></td> <td></td> <td>Progress Indicator</td> </tr> <tr> <td></td> <td></td> <td>Closed</td> </tr> </tbody> </table>	Priority	Impact	Finding Origination	Medium	Degree	Medium	Probability	Medium	Time Criticality	Long-Term			30 April 2018			Progress Indicator			Closed
Priority	Impact	Finding Origination																	
Medium	Degree	Medium																	
	Probability	Medium																	
	Time Criticality	Long-Term																	
		30 April 2018																	
		Progress Indicator																	
		Closed																	
<p>Status Update</p> <p>07/31/2018: On 7/30 the [redacted] met with Operations and presented the plan to perform task analysis activities and create training materials according to functional areas.</p> <p>10/26/2018: IV&V will review to see if this item is considered in the Stage 1 lessons learned or accounted for in the MTP DED. If so, this item may be closed.</p> <p>01/25/2019: Module training plans include specific role-based scenarios. This Finding has been sufficiently remediated and is being closed.</p>																			

<p>Finding Number: F-PI-11-01</p>
<p>Finding Name: Lack of Test Results in ALM for Accessibility Tests</p>
<p>Description: Accessibility tests conducted for Stage 1 only showed “run” for test results in ALM, and did not have test reports attached in ALM. This gives the State no insight into accessibility test results and risks involved. No accessibility testing is planned for Stage 1.5. For Stage 2, the State will need access to specific accessibility test results to determine which items need fixes and which items are allowable to go into production. Consider the Voluntary Product Accessibility Templates (VPATs) provided for COTS and developed products, and provide a sign-off on accessibility.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Inability to assess accessibility results, determine risks and mitigations, and provide State sign-off.

2. Non-compliance with accessibility standards.			
Recommendation(s)			
1. Provide and make accessible accessibility test results/reports to the State.			
Reference(s) to Industry Standard			
Capability Maturity Model Integration (CMMI) V2.0: Verification & Validation (VV) practice area. Capability Maturity Model Integration for Services (CMMI-SVC) v1.3: Service System Transition (SST) process area.			
Priority	Impact		Finding Origination
Medium	Degree	High	26 October 2018
	Probability	Medium	Progress Indicator
	Time Criticality	Long-term	Closed
Status Update	01/25/2019: Closed for Stage 1. the addition of Accessibility Test Results into ALM for Stage 2.		

Closed Quarter 13: 04-26-2019:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-M-11-01	Management	High	Stage 2 Schedules Lack Time for Data and Environment Refreshes	X
F-M-11-02	Management	High	Minimum Formal Transition and Knowledge Transfer	X
F-M-12-01	Management	Urgent	Lack of Defined Stage 2 RTM Impacts SIT & UAT Test Planning	X
F-M-12-02	Management	High	Lack of Single Point of Contact and Single Repository for Test Defects and Reporting	X

Finding Number: F-M-11-01
Finding Name: Stage 2 Schedules Lack Time for Data and Environment Refreshes
Description: Stage 2 schedules do not include any time for data and environment refreshes prior to entering UAT test and end-to-end test phases. Stage 1 included periods for refreshes.
Risks:
1. Inaccurate test results and additional defects.
2. Delayed schedule.
Recommendation(s)
1. Add tasks in schedules to accomplish data and environment refreshes prior to each phase of testing.
Reference(s) to Industry Standard
Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN) and Verification and Validation (VV) practice areas. Capability Maturity Model Integration for Services (CMMI-SVC) v1.3: Service System Transition (SST) process area.

Priority	Impact		Finding Origination
High	Degree	High	26 October 2018
	Probability	Medium	Progress Indicator
	Time Criticality	Short-term	Closed
Status Update	<p>01/25/2019: Tasks for data and environment refreshes have been added to schedules. IV&V to verify adequacy.</p> <p>04/26/2019: Data and Environment refreshes were added to the Stage 2 schedule. IV&V will close and revisit when the re-baselined schedule is released.</p>		

Finding Number: F-M-11-02			
Finding Name: Minimum Formal Transition and Knowledge Transfer			
<p>Description: It has been noted that there is no evidence of formal knowledge transfer and transition planning at such as project managers change. This impacts future activities at all levels- starting at module(s). Examples: The latest Module 8 DWA PM didn't have information on the lessons learned from Stage 1 and decisions made prior to him coming in this role. The new manager repeated several times in a risk review meeting the fourth week of October that he did not have a whole lot of background on the risks identified on the project.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Potential of repeating mistakes made in Stage 1. 2. Delayed schedule. 3. Risk and uncertainty about decisions made earlier and to be made in future due to lack of information. 			
Recommendation(s)			
1. Implement formal knowledge transfer plan.			
Reference(s) to Industry Standard			
Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN) practice area			
Priority	Impact		Finding Origination
High	Degree	High	26 October 2018
	Probability	Medium	Progress Indicator
	Time Criticality	Short-term	Closed
Status Update	<p>01/25/2019: No updates were provided this quarter.</p> <p>04/26/2019: Overcome by events. Plan for transition and knowledge transfer exists. This finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-M-12-01			
Finding Name: Lack of Defined Stage 2 RTM Impacts SIT & UAT Test Planning			
<p>Description: System Integration Test (SIT) iteration 1 is scheduled to start on 3/4/19; however, not all requirements are mapped to Test Cases (TCs) and Test Cases are not mapped to requirements. This represents a risk to the project and to the test scope and schedule that loading and mapping of requirements to Test Cases will take place in a timeframe to ensure all requirements are included in TCs</p>			

<p>and, if not, that TCs can be modified or developed to cover gaps and ensure testing addresses all requirements and stays on schedule, particularly for SIT 1.</p> <p>Additionally, the existence of an RTM will enhance TC management activities, such as planning for TC development, optimization of testing necessary, and elimination of duplicate TCs and defect leakage.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Missed test coverage of requirements and functionality 2. Increased test schedule and overall schedule 3. Delayed certification of Stage 2 			
Recommendation(s)			
<ol style="list-style-type: none"> 1. Establish a complete traceability matrix 2. Use the traceability matrix for test case development and test activities. 			
Reference(s) to Industry Standard			
<p>Capability Maturity Model Integration (CMMI) V2.1: Planning (PLAN) and Requirements Development & Management (RDM) practice areas.</p> <p>Project Management Institute Project Management Body of Knowledge, Sixth Edition.</p>			
Priority	Impact		Finding Origination
Urgent	Degree	High	25 January 2019
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>04/26/2019: Requirements traceability to test cases has been completed for SIT. The approach for UAT will be in the updated TEMP and the RTM will follow. IV&V Will close this finding. If this becomes an issue for UAT, IV&V will open another finding.</p>		

Finding Number: F-M-12-02
Finding Name: Lack of Single Point of Contact and Single Repository for Test Defects and Reporting
<p>Description: Testing responsibilities and reporting are distributed among different teams (such as Data Warehouse, Conversion, Security, Accessibility, ST, SIT, Regression, UAT, etc.) rather than having one owner for the status reporting of all testing and one place for recording of defects for all types of testing. This will ensure unified reporting with a single source of truth.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Incomplete, inaccurate, and/or inconsistent reporting of test status and defects 2. Inability to evaluate impact of defects and their severity of defects on other modules 3. Negative impact on schedule due to risks 1 and 2
Recommendation(s)
<ol style="list-style-type: none"> 1. Establish a single point of contact for and a unified report with defined metrics for all types of testing. 2. Make ALM the source for capture and reporting of results for all testing.
Reference(s) to Industry Standard
<p>Capability Maturity Model Integration (CMMI) V2.0: Planning (PP), Monitoring and Control (MC), and Verification & Validation (VV) practice areas.</p> <p>Project Management Institute Project Management Body of Knowledge, Fifth Edition.</p>

Priority	Impact		Finding Origination
High	Degree	Medium	25 January 2019
	Probability	High	Progress Indicator
	Time Criticality	Short	Closed
Status Update	<p>04/26/2019: Development test results are now being entered into ALM. Test results for Security, Accessibility, Conversion, etc. will continue to be captured outside of ALM. Each testing entity will continue to report their test results.</p> <p>████████████████████ This finding has been sufficiently remediated and is being closed.</p>		

Closed Quarter 14: 07-26-2019:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-PI-07-01	Project Implementation	High	Lack of Implementation of Formal Migration/Configuration Management Process Across Environments, Sub-systems, or Applications	X
F-PI-11-02	Project Implementation	High	Stage 2 Testing Iterations Lack Defined Entry and Exit Criteria	X

Finding Number: F-PI-07-01
Finding Name: Lack of Implementation of Formal Migration/Configuration Management Process Across Environments, Sub-systems, or Applications
<p>Description: Inconsistencies, such as Oracle application configuration settings between server and client, demonstrate that the migration or configuration management process is not being consistently applied across different environments, sub-systems, or applications. There have been several instances of product releases deployed where reference tables were not updated. This may also reflect that there is either an absence or lack of enforcement of verification processes.</p> <p>Additionally, during ██████████ Test environment, various issues were identified, such as system configuration, URL's, firewall settings, and Identification and access to sub-systems (applications and legacy), to name a few. Review of these issues regarding establishment of a stable ██████████</p> <p>████████████████████ Absence of a UAT environment validation checklist is causing further delay in UAT Test execution by the ██████████.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Inconsistent configurations of environments, sub-systems, and applications 2. Increase in incorrect defect identification 3. Impact to other project activities and project schedule
Recommendation(s)
<ol style="list-style-type: none"> 1. Establish a formal verification process to ensure that appropriate steps were followed while environments, sub-systems and applications are being established or configured.

Reference(s) to Industry Standard			
Capability Maturity Model Integration for Development (CMMI-DEV) v1.3: Verification (VER), and Validation (VAL), and Risk Management (RSKM) process areas. IEEE 29119-2-2013. IEEE 829-2008 Project Management Institute Project Management Body of Knowledge, Sixth Edition.			
Priority	Impact		Finding Origination
High	Degree	High	31 Oct 2017
	Probability	Medium	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	<p>01/31/2018: Will continue to monitor.</p> <p>04/30/2018: ██████████. This continues to be a topic discussed at weekly Technical meetings.</p> <p>07/31/2018: ██████████ by 09/30/18. IV&V will then review.</p> <p>10/26/2018: Once the updated CM plan has been delivered and approved ██████████, IV&V will review and consider closing this finding.</p> <p>01/25/2019: Updated CM Plan has been submitted and approved by ██████████ release procedures, CMDB, and list of configurations (software, patches, web services, etc.) across environments.</p> <p>04/26/2019: Updated CM Plan has been submitted and approved by ██████████ release procedures, CMDB, and list of configurations (software, patches, web services, etc.) across environments ██████████. IV&V working to get access to these items.</p> <p>07/26/2019: This Finding has been sufficiently remediated and is being closed.</p>		

Finding Number: F-PI-11-02		
Finding Name: Stage 2 Testing Iterations Lack Defined Entry and Exit Criteria		
<p>Description: Entry and Exit criteria for product releases moving across ST, SIT, and UAT need to be clearly defined and followed. This includes all COTS products, including ██████████ etc.</p> <p>Such entry and exit criteria would allow the project to determine test iteration completion, readiness to enter the next test iteration, and allow better visibility into testing status.</p> <p>Risks:</p> <ol style="list-style-type: none"> 1. Incorrect reported testing status. 2. Delayed schedule. 		
Recommendation(s)		
1. Establish and publish testing iteration entry and exit criteria.		
Reference(s) to Industry Standard		
Capability Maturity Model Integration (CMMI) V2.0: Verification and Validation (VV) practice area		
Priority	Impact	Finding Origination

High	Degree	High	26 October 2018
	Probability	Medium	Progress Indicator
	Time Criticality	Short-term	Closed.
Status Update	<p>01/25/2019: Being discussed to be added to test plans.</p> <p>04/26/2019: IV&V will review to see if this is covered in updated TEMP and re-baselined plans that are now being developed.</p> <p>07/26/2019: Entrance and Exit criteria have been defined. This Finding has been sufficiently remediated and is being closed.</p>		

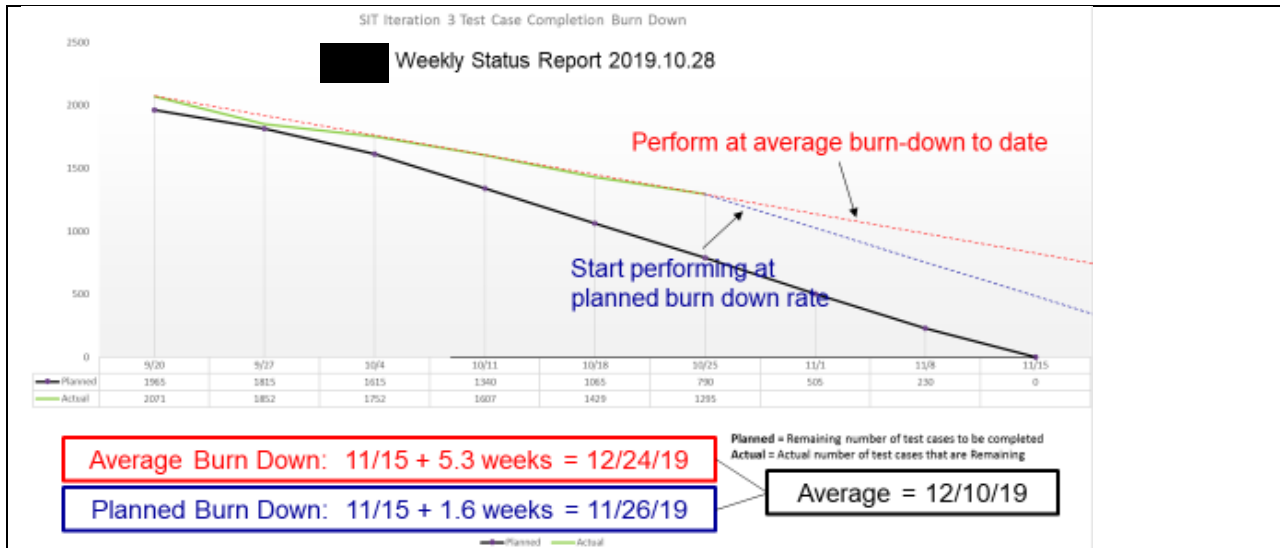
Closed Quarter 15: 10-31-2019:

None.

Closed Quarter 16: 01-31-2020:

Finding Number	Oversight Area	Priority	Finding Title	Finding Closed
F-PI-15-02	Project Implementation	High	Downstream Impacts of Late SIT IT 3 Test Case Completion	X

Finding Number: F-PI-15-02
Finding Name: Downstream Impacts of Late SIT IT 3 Test Case Completion
<p>Description: Completion of test cases for SIT Iteration (IT) 3 is behind schedule. As of 10/25/2019, SIT IT 3 test case completions were 555 behind the planned burn-down. As shown below, if test case completion continues at the burn-down rate averaged up to 10/25, the completion date will be 12/24/2019, approximately 5.3 weeks beyond the planned 11/15 completion date. If burn-down is accomplished at the planned rate starting on 10/25, test cases will be completed on 11/26/19 (approximately 1.6 weeks beyond the planned 11/14/19 completion date). Either of these completion dates puts the planned start of SIT IT3 test execution on 12/06/19 in jeopardy</p>



Risks:

1. Test case quality may not be acceptable due to short time to review the test cases prior to start of test.
2. SIT IT3 test case creation may not support planned start of SIT IT 3 on 12/06/19 resulting in a slip to the start of SIT IT 3, which could impact downstream testing dates (both SIT and UAT).

Recommendation(s)

1. Complete an analysis to determine how to complete SIT IT 3 test cases on time and impacts if test case completion cannot be completed on time.
2. Provide test cases for review in small chunks as they are completed and not in mass quantities near the end of test case completion.
3. Develop a plan for SIT IT 3 test case development and subsequent SIT and UAT test execution.

Reference(s) to Industry Standard

Capability Maturity Model Integration (CMMI) V2.0: Planning (PLAN) and Verification & Validation (VV) practice areas.

Priority	Impact		Finding Origination
High	Degree	Medium	31 October 2019
	Probability	High	Progress Indicator
	Time Criticality	Immediate	Closed
Status Update	01/31/2020: Test case completion was adequate to allow SIT IT 3 to begin on time without any significant impacts. This Finding is being closed.		

Closed Quarter 17: 04-30-2020:

None.

Number	Priority	Finding Title						
		<p>We agree with the finding and are tracking this with issue 157. [REDACTED]</p> <p>[REDACTED]</p> <p>[REDACTED]</p> <table border="1" data-bbox="369 440 1934 740"> <tr> <td data-bbox="369 440 470 740">[REDACTED]</td> <td data-bbox="470 440 571 740">[REDACTED]</td> <td data-bbox="571 440 659 740">[REDACTED]</td> <td data-bbox="659 440 877 740">[REDACTED]</td> <td data-bbox="877 440 1339 740">[REDACTED]</td> <td data-bbox="1339 440 1934 740">[REDACTED]</td> </tr> </table>	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]			
F-M-17-02	Urgent	<p>Overallocation of Resources in Project Schedules</p> <p>[REDACTED]</p> <p>[REDACTED]</p>						

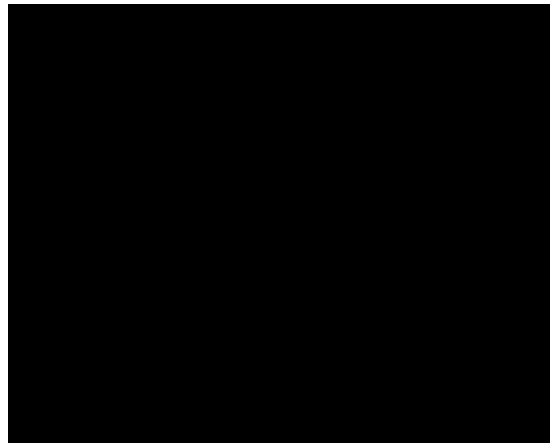
[REDACTED]

Appendix D: Sample Focused Deliverable Observation Report

IV&V Deliverable Observation Report MMIS Interface Redesign Technical Review

IV&V Deliverable Observation Report (Medicaid Management Information System Interface- Redesign)

[REDACTED] and
Integrated Service Delivery System (ISDS)
Independent Verification and Validation



State [REDACTED]

Version 1.0
July 10, 2017

Submitted by



Software Engineering Services
1311 Ft. Crook Road South, Suite 100
Bellevue, NE 68005

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Document Revision History

Version	Status*	Date Revised	Author	Date Approved	Description of Change
0.9	New	07-05-17	Moudry		Initial Report
1.0	New	07-10-17	Sharma		Initial Report

* New, Revision, Final or Cancelled

1. Introduction

Task Item 1.1.10 under the IV&V Project Management/Deliverables, for the ██████ Independent Verification and Validation (IV&V) Services Contract, states that, “If desired and requested by the Project Team, Agency, and Department, Software Engineering Services (SES) as the IV&V Service Provider will prepare and deliver a one-time, focused, specific Deliverable Observation Report (DOR) to the IV&V Contract Manager (for delivery to the State Project, etc.), presenting an analysis of a prescribed deliverable or other task not specifically referenced by this scope of work. Accordingly, ██████ requested that Software Engineering Services (SES), the IV&V Contractor, perform a focused evaluation on the technical design of the Medicaid Management System (MMIS) Interface Redesign Project under the ██████ program portfolio. This report provides the results of that evaluation.

The MMIS Redesign Project is divided into four (4) tracks and this report will address each of those four tracks. As the work is on-going, IV&V team has identified some potential queries in this report (yellow highlighted) to guide the project the kind of information still needed to provide holistic technical review.

2. Evaluation Standards and Questions

To produce this “Observation Report”, IV&V Team had followed the approach of reviewing technical documentation shared by MMIS Interface Redesign project team and follow-up question and answer session between IV&V and the project team. The review focused on IEEE architectural standards, MITA 3.0, and the CMS Seven Conditions and Standards. IV&V used the following standards to conduct its evaluation of the MMIS Interface high-level design for each of the four tracks of the project:

- IEEE 1074 Standard for Developing Software Life Cycle Processes;
- IEEE 12207 Standard for Information Technology – Software Life cycle processes Implementation Considerations
- [MITA 3.0](#)
- [Seven Conditions and Standards for CMS Enhanced Funding Requirements](#)
- [CMS Guidance for Exchange and Medicaid Information Technology IT Systems](#)
- [NIEM 3.2](#)
- ██████ [State Accessibility](#)/Standards/Guidelines

IV&V addressed the following areas and questions in its review of the MMIS Interface Design Project.

Software Development Life Cycle Management plans and Project Management. (Reference IEEE 1074 and IEEE 12207)

- Does the project documentation demonstrate that a Software Life Cycle Process was selected for the project?

- Does the Project Management documentation demonstrate planning for: resources, documentation, metrics/evaluation, system transition if necessary, and training, risk management, task management and evaluation of improvement needs?
- Do the processes include management and business oversight and sign off?

SDLM Architectural documentation. (Reference IEEE 1074 and IEEE 12207.2)

- Does the Software Design Description Document list scope, identification, system overview, document overview, referenced documents, system-wide design decisions, system architectural design, system components, concept of execution, interface design, interface identification and diagrams, (project-unique identifier of interface), requirements traceability, maintenance and retirement?

Modularity Standard.

- Does the Design Description Document demonstrate the uses of a modular, flexible approach to systems development, including the use of open interfaces and exposed Application Programming Interfaces (API)?
- Is there a separation of standardized business rule definitions from core programming; and are standardized business rule definitions available in both human and machine-readable formats?
- Does the Design Description Document demonstrate a commitment to a formal system development methodology and an open, reusable system architecture?

MITA Conditions.

- Does the Design Description Document demonstrate that the state is aligning to and is increasingly advancing in MITA maturity for business, architecture, and data?

Industry Standards Condition.

- Do the Design Description Documents ensure alignment with, and incorporation of, industry standards to include?
 - o The Health Insurance Portability and Accountability Act of 1996 (HIPAA) security, privacy and transaction standards;
 - o Accessibility standards established under section 508 of the Rehabilitation Act, or standards that provide greater accessibility for individuals with disabilities, and compliance with Federal Civil Rights laws.
 - o Standards adopted by the Secretary under section 1104 of the Affordable Care Act; and standards and protocols adopted by the Secretary under section 1561 of the Affordable Care Act.

Leverage Condition.

- Does the Design Description Document demonstrate that the State solutions promote sharing, leverage, and reuse of Medicaid technologies and systems within and among States. IE: Multi-state efforts; Availability to other states for re-user; Open source, cloud based commercial products; Minimum Customization to transfer solutions; Transition/Retirement of a duplicative system.

Business Results Condition.

- Does the Design Description Document support accurate and timely processing of claims (including claims of eligibility), adjudications, and effective communications with providers, beneficiaries, and the public.

Reporting Condition.

- Solutions should produce transaction data, reports, and performance information that contributes to program evaluation, continuous improvement in business operations, transparency and accountability.

Interoperability Condition.

- Systems must ensure seamless coordination and integration with the Exchanges (whether run by the state or federal government), and allow interoperability with health information exchanges, public health agencies, human services programs, and community organizations providing outreach and enrollment assistance services.

3. Evaluation Results, Observations and Remaining Questions

3.1 ██████-MMIS Interface Redesign: Tracks 1 and 2

Program/SDLC Phase: Requirements Gathering, Design

Evaluation Summary: The ██████-MMIS Interface Redesign documents and processes demonstrate that the project uses System Development Lifecycle methodologies, actively manages the project and is able to trace the technical redesign changes to the business requirements. The project takes steps to advance the state towards MITA maturity.

IV&V raised a number of observation/questions - none are 'show- stoppers'. Items highlighted in yellow need to be followed up on.

Product Evaluation Results/Observations/Findings:	
1	SD 1.1 Software Development Life Cycle Management plans and Project

Management.

Does the project documentation demonstrate that a Software Life Cycle Process was selected for the project? Does the Project Management documentation demonstrate planning for: resources, documentation, metrics/evaluation, system transition if necessary, and training, risk management, task management and evaluation of improvement needs? Do the processes include management and business oversight and sign off? IEEE 1074, IEEE 12207

Evaluation:A formal Software Lifecycle Process was not identified; however, the documents and processes illustrate standard adherence to a waterfall methodology, including requirements gathering, design, testing and implementation.

The 'Project Plan - [REDACTED]-MMIS Interface Redesign' document provides full project scope, overview and controls. The supporting documentation in SharePoint demonstrates planning for resource allocation, risk management, task management and improvement processes. The project management processes include management and business oversight and sign off. It does not include training.

There are two areas of observation that require further examination or later follow-up: the maintenance of systems documentation, and the identification and gathering of metrics to evaluate the project.

Results/Observations:

SD 1.1.1 Documentation

- It is not clear how the documentation is managed over time. IEEE 12207 (sect6.1)
The SharePoint working directories contain large amounts of documentation but can be duplicative in part, rewritten into other documents, or no longer in synch with each other. It is sometimes not clear which documents represent the final artifacts of the design planning and implementation. This is indicative of potential opportunity to improve on the configuration management practice communication, training, and enforcement.
- The technical architecture documentation indicates that missing design documentation (for ActiveVOS, and for eligibility business rules) was a constraint on this project.

Does the documentation for the re-architecture differ from the documentation for the original interface? How does it ensure that it is retrievable in the future? IE:

1. Is the final and referential documentation for the re-architecture identified and readily accessible by current and future business and technical staff?
2. Is it distinguishable from working documents or dated/old documents?
3. Is it in a secured, official location that will be maintained into the future?
4. Are there standards for each type of documentation? (Examples: standard templates, standard naming conventions, standard storage locations, standards for

maintenance requirements.)

⇒ State Team Input

The documentation for the technical integration had to be redeveloped because part of the integration was developed by [REDACTED], a vendor who left the project. The documentation was incomplete and the team decided to make a clean break and start over.

Documentation tracking and retrieving

- Documentation is in SharePoint. BA documents stay in the project SharePoint site, by project.
- There is not a single repository solution for the BA and Technical documentation. Project Managers and team members identify the most recent and relevant documentation based on the most recent project that made changes to those documents. SharePoint is searchable.
- Being able to track and retrieve the correct and relevant system documentation is a known issue.

Documentation Standards

- The state is moving towards standardization. It has identified templates for the software architecture documentation and for the business analyst requirements. This is a process. Standards have not been identified for supporting documentation.
- The technical documentation includes UML modeling. UML is platform independent and models can include: structure, behavior and interaction diagrams.
- There are no document naming standards.

[REDACTED]

SD 1.1.2 Metrics

Metrics have not been defined for the business impact of the project. Some technical performance metrics have been defined for Phase I and II.

⇒ State Team Input

The state is having discussions about identifying metrics.

[REDACTED]

[REDACTED] The measures identification is critical to collect, monitor and report on the improvements introduced by the redesigned interface to satisfy business needs.

The items highlighted for 1.1.1 and 1.1.2 need follow up.

exposed Application Programming Interfaces (API)?

2.1.1 Evaluation: The redesign meets the condition.

The software architecture document demonstrates that modularity is a key architectural component to the existing architecture and it is being enhanced with the redesign of the interface. The infrastructure is being enhanced with new web service clusters, and the integration level is being broken into more module components. New components include [REDACTED] web services to extract [REDACTED] data. The Web services are being exposed for internal state use.

2.1.2 Is there a separation of standardized business rule definitions from core programming; and are standardized business rule definitions available in both human and machine-readable formats?

2.1.2 Evaluation: The redesign meets this condition for portions of the redesign.

The process for the [REDACTED] portions of the web services separates the business rules definitions via the [REDACTED] DROOLS rules engine.

The remaining portions of the integration layer, mostly the MMIS side of the interface does not use a rules engine.

2.1.3 Does the Design Description Document demonstrate a commitment to a formal system development methodology and an open, reusable system architecture?

2.1.3 Evaluation: The redesign meets this condition.

The Project Plan, the [REDACTED] to MMIS Interface Re-Architecture document and the supporting documents and processes, demonstrate a commitment to a modified waterfall approach. The approach includes:

- The linear portion of an incremental waterfall framework (investigation, requirements gathering, design coding, testing, implementation, operations), formal sign-offs and project management.
- Swift and incremental installations for small fixes.

2.1 Overall Evaluation:

The design continues to bring the state forward into MITA compliance with meeting the modularity condition.

Results/Observations:

[REDACTED]

Sources:

(1) Project Plan [REDACTED]-MMIS Interface Redesign

	<p>(2) Software Architecture Document Project – ██████ to MMIS Interface Re-Architecture (3) SharePoint project site: Multiple working documents (4) ██████ – ██████ Web Services v6.22</p>
4	<p>SD 2.2. MITA Conditions. Does the Design Description Document demonstrate that the state is aligning to and is increasingly advancing in MITA maturity for business, architecture, and data?</p> <p>Evaluation: Yes, for the business architecture. The business architecture advances with this change in that, with the increased system performance and therefore reduced failures, the business is more efficient and can more accurately process eligibility and claims. (MITA Part I, Chapter 5)</p> <p>Yes, for the technical architecture. The full scope of the redesign, from increasing the web services infrastructure to modifying the interface to be web services, improves the reliability of the messaging and advances the state in the MITA condition for modularity and Interoperability. (MITA Part III, Chapter 7)</p> <p>Results/Observations:</p> <p>The state only partially meets the MITS 2.2 condition because data architecture is not advancing with this change. (MITA Part II, Chapter 6)</p> <ul style="list-style-type: none"> • The fields that pass between MMIS and ██████ do not cross reference or use NIEM data naming convention standards. (This is same as an observation cited in the MITA 2.3 Industry Standard Condition.) • Advancing for the data model requires the enterprise to coordinate and identify core data to model into the MITA mandated conceptual and logical data models. This project has not facilitated the development of the models. It is possible that the fields that pass between MMIS and ██████ could be a starting point to identify and map some of the core enterprise data. <p>Sources: (1) Project Plan ██████-MMIS Interface Redesign (2) Software Architecture Document Project – ██████ to MMIS Interface Re-Architecture (3) ██████ *multi docs* Web Service Design Document.</p>
5	<p>SD 2.3 Industry Standards Condition – Do the Design Description Documents ensure alignment with, and incorporation of, industry standards?</p> <p>2.3.1 The Health Insurance Portability and Accountability Act of 1996 (HIPAA) security, privacy and transaction standards;</p> <p>2.3.1 Evaluation: The redesign meets this condition.</p>

- The [REDACTED] Architecture document illustrates the new Web Clusters are part of the current infrastructure, within firewalls. The review assumes the original infrastructure security processes and approvals are in place.
- There are no changes to data and login access. The review assumes the original data login and data access security processes and approvals are in place.
- The Software Architecture document addresses the security of the new web services, indicating the use of secure HTTP and TLS V 1.2 encryption.

2.3.2 Accessibility standards established under section 508 of the Rehabilitation Act, or standards that provide greater accessibility for individuals with disabilities, and compliance with Federal Civil Rights laws.

2.3.2 Evaluation: The redesign project partially meets this condition. Formal Adoption of Accessibility Standards are not yet adopted.

Most of the supporting documents appear to meet the 508 and [REDACTED] recommendations that make a document more accessible. A number of charts required intervention in order for the contrast to meet accessibility requirements. This suggests that the standards are not being used uniformly.

Note: Because this is an internal interface, the interface process and web services were not evaluated for accessibility.

2.3.3 Standards adopted by the Secretary under section 1104 of the Affordable Care Act; and standards and protocols adopted by the Secretary under section 1561 of the Affordable Care Act.

2.3.3 Evaluation: The redesign project partially meets this condition.

1104 Requires HHS to adopt a single set of operating rules, 1561 calls on the secretary to develop the interoperable security standards and protocols for enrollment. The HHS secretary addresses the standards and protocols in [CMS Guidance for Exchange and Medicaid Information Technology IT Systems](#). The chief recommendation is that states use NIEM to facilitate the enrollment process and common data exchanges. NIEM standards are based on XML and standard terms, definitions and formats for data elements.

While the services that have been reviewed are using XML, they are not using or cross referencing NIEM data elements. There is no crosswalk to an alternative [REDACTED] State Standard.

Results/Observations:

The MEC-MMIS interface only partially meets the MITA industry standards conditions listed because the project is not yet formally implementing accessibility

	<p>standards, and the project is not using NIEM data element standards.</p> <p>References:</p> <ul style="list-style-type: none"> (1) ██████ – ██████ Web Services v 6.22.doc (2) Performance_Enhancement_Tasks Summar.doc (3) Software Architecture Document Project – ██████ to MMIS Interface Re-Design (4) ██████ Architecture.vsd (5) ██████ *multi docs* Web Service Design Documents (6) ██████ to MMIS InterfaceMessageMapinx.xlsm
6	<p>SD 2.4 Leverage Condition – Does the Design Description Document demonstrate that the State solutions promote sharing, leverage, and reuse of Medicaid technologies and systems within and among States. IE: Multi-state efforts; Availability to other states for re-user; Open source, cloud based commercial products; Minimum Customization to transfer solutions; Transition/Retirement of a duplicative system.</p> <p>Evaluation: As this is an internal interface, it is not being evaluated for sharing, leverage and reuse within and among state systems.</p>
7	<p>SD 2.5 Business Results Condition – Does the Design Description Document support accurate and timely processing of claims (including claims of eligibility), adjudications, and effective communications with providers, beneficiaries, and the public.</p> <p>Evaluation: Yes, the changes identified in all four phases are intended to improve the accuracy and timeliness of processing eligibility and billing processes.</p> <p>Results/Observations: None.</p> <p>Sources:</p> <ul style="list-style-type: none"> (1) Project Plan ██████-MMIS Interface Redesign (2) Software Architecture Document Project – ██████ to MMIS Interface Re-Architecture (3) SharePoint project site: Multiple working documents
8	<p>SD 2.6 Reporting Condition – Solutions should produce transaction data, reports, and performance information that contributes to program evaluation, continuous improvement in business operations, transparency and accountability.</p> <p>Evaluation:</p> <p>There were no report specifications identified in the software architecture document or the supporting documents at this time that would contribute to program evaluation, improve business operations, transparency and/or accountability.</p> <p>⇒ State Team Input The state is having discussions about identifying metrics.</p> <p>Results/Observations:</p>

	<p style="background-color: black; color: black;">[REDACTED]</p> <p style="background-color: black; color: black;">[REDACTED]</p> <p>(This is the same as finding in 1.2)</p> <p>Sources: (1) Software Architecture Document Project – [REDACTED] to MMIS Interface RE-architecture (2) Multiple SharePoint directories with supporting documentation</p>
9	<p>Interoperability Condition – Systems must ensure seamless coordination and integration with the Exchanges (whether run by the state or federal government), and allow interoperability with health information exchanges, public health agencies, human services programs, and community organizations providing outreach and enrollment assistance services.</p> <p>Evaluation: The project meets this requirement. The entire [REDACTED]-MMIS Interface Redesign is directed at ensuring the [REDACTED] and MMIS Systems integrate more accurately and more quickly.</p> <p>Results/Observations: None.</p> <p>Sources: (1) Project Plan [REDACTED]-MMIS Interface Redesign 2) Software Architecture Document Project – [REDACTED] to MMIS Interface Re-Architecture</p>

3.2 [REDACTED]-MMIS Interface Redesign: Track 3

Program/SDLC Phase: Requirements Gathering, Design

Evaluation Summary: This review is of Track 3 Fixes for the [REDACTED]-MMIS Interface (Redesign). It is to be read in conjunction with Tracks 1 and 2, so as not to repeat the architectural and system design findings that are at a higher level.

IV&V raised a number of observation/questions - none are 'show- stoppers'. Items highlighted in yellow need to be followed up on.

Product Evaluation Results/Observations/Findings:	
1	<p>SD 1.1 Software Development Life Cycle Management plans and Project Management.</p> <p>Does the project documentation demonstrate that a Software Life Cycle Process was selected for the project? Does the Project Management documentation demonstrate planning for: resources, documentation, metrics/evaluation, system transition if necessary, and training, risk management, task management and evaluation of improvement needs? Do the processes include management and business oversight and sign off? Best practices reference: IEEE 1074, IEEE 12207</p>

	<p>Evaluation: Yes, this portion of the re-design is using small, iterative processes to fix issues. Defects are tracked, grouped, prioritized and moved through the life cycle as fixes are completed.</p> <p>Business Requirements, Functional Specs, Use Case Statements, and Test Scenarios appear to use template and are therefore standardized. There are naming conventions to the document names.</p> <p>The remaining Life Cycle Management plans and Project Management is addressed in the high-level review. See Track I and Track II review.</p> <p>Results/Observations: None.</p> <p>Sources: (1) Project Plan ██████-MMIS Interface Redesign (2) Documentation that was copied to a SharePoint site. Deliverables/Fixes/*. These items include defect documentation, architectural solutions, business requirements, testing requirements, business and technical specifications, task lists, priority lists, communication processes, status reports, meeting presentations and minutes</p>
2	<p>SD 1.2 SDLM Architectural documentation. Does the Software Design Description Document list scope, identification, system overview, document overview, referenced documents, system-wide design decisions, system architectural design, system components, concept of execution, interface design, interface identification and diagrams, (project-unique identifier of interface), requirements traceability, maintenance and retirement? Best practices reference: IEEE 12207, IEEE 1074</p> <p>Evaluation: Track 3 is the implementation of the architecture and redesign reviewed in Tracks 1 and 2. The architectural findings will not be repeated in this section.</p> <p>Results/Observations: Refer Section 3.1 above for details of the IV&V review for Tracks 1 and 2.</p> <p>Sources: 1) Project Plan ██████-MMIS Interface Redesign (2) Documentation that was copied to a SharePoint site. Deliverables/Fixes/*. These items include defect documentation, architectural solutions, business requirements, testing requirements, business and technical specifications, task lists, priority lists, communication processes, status reports, meeting presentations and minutes</p>
3	<p>SD 2.1. Modularity Standard.</p> <p>2.1.1 Does the Design Description Document demonstrate the uses of a modular, flexible approach to systems development, including the use of open interfaces and exposed Application Programming Interfaces (API)?</p>

	<p>2.1.1 Evaluation: Track 3 fixes are the implementation of the API messages and services. As such, they are part of a modular, flexible approach.</p> <p>2.1.2 Is there a separation of standardized business rule definitions from core programming; and are standardized business rule definitions available in both human and machine-readable formats?</p> <p>2.1.2 Evaluation: There is separation of business rules from core programming for the [REDACTED] portion of the data collection but not for the MMIS portion of data collection.</p> <p>2.1.3 Does the Design Description Document demonstrate a commitment to a formal system development methodology and an open, reusable system architecture?</p> <p>2.1.3 Evaluation: The supporting documents and the supporting processes {development and testing processes, formal sign-offs, and the project management task documents -- in the SharePoint site}, demonstrate a commitment to a formal system development methodology. This project demonstrates a commitment to an open, reusable system architecture.</p> <p>2.1 Overall Evaluation The Track 3 Fixes project meets the MITA condition of modularity.</p> <p>Results/Observations: None.</p> <p>Sources: (1) Project Plan [REDACTED] MMIS Interface Redesign (2) Software Architecture Document Project – [REDACTED] to MMIS Interface Re-Architecture (3) SharePoint project site: Multiple working documents (4) [REDACTED] – [REDACTED] Web Services v6.22 (5) [REDACTED] to MMIS InterfaceMessageMapinx.xlsm</p>
4	<p>SD 2.2. MITA Conditions. Does the Design Description Document demonstrate that the state is aligning to and is increasingly advancing in MITA maturity for business, architecture, and data?</p> <p>Evaluation: Track 3 fixes are the implementation of the API messages and services. As such, the observations for Tracks 1 and 2 are the same observations and will not be repeated here.</p> <p>Results/Observations: Refer Section 3.1 above for details of Tracks 1 and 2 IV&V review.</p>

	<p>Sources:</p> <ul style="list-style-type: none"> (1) Project Plan ██████-MMIS Interface Redesign (2) Software Architecture Document Project – ██████ to MMIS Interface Re-Architecture (3) ██████*multi docs* Web Service Design Document.
5	<p>SD 2.3 Industry Standards Condition – Does the Design Description Document Ensures alignment with, and incorporation of, industry standards?</p> <p>2.3.1 The Health Insurance Portability and Accountability Act of 1996 (HIPAA) security, privacy and transaction standards;</p> <p>2.3.1 Evaluation: Yes, this was addressed in the Track 1 and Track 2 review. The systems architecture design includes firewalls and secure transmittal of the services.</p> <p>2.3.2 Accessibility standards established under section 508 of the Rehabilitation Act, or standards that provide greater accessibility for individuals with disabilities, and compliance with Federal Civil Rights laws.</p> <p>2.3.2 Evaluation: Note: As this is an internal interface, the interface process and web services were not evaluated for accessibility.</p> <p>Most of the documents appear to meet the 508 and ██████ recommendations that make a document more accessible. There is no documentation that indicates the accessibility checks are a formal part of the process.</p> <p>2.3.3, Standards adopted by the Secretary under section 1104 of the Affordable Care Act; and standards and protocols adopted by the Secretary under section 1561 of the Affordable Care Act.</p> <p>2.3.3 Evaluation: Track 3 fixes are the implementation of the API messages and services. As such, the observations for Track 1 and Track 2 are the same observations and will not be repeated here.</p> <p>Results/Observations:</p> <p>The ██████-MMIS interfaces only partially meet the MITA industry standards conditions listed because the project is not yet formally implementing accessibility standards, and the project is not using NIEM data element standards.</p> <p>Sources:</p> <ul style="list-style-type: none"> (1) ██████ to MMIS InterfaceMessageMapinx.xlsm (2) ██████ – ██████ Web Services v 6.22.doc (3) Performance_Enhancement_Tasks Summar.doc

	<p>integration with the Exchanges (whether run by the state or federal government), and allow interoperability with health information exchanges, public health agencies, human services programs, and community organizations providing outreach and enrollment assistance services.</p> <p>Evaluation: Track 3 of the project meets this requirement. The project identifies and fixes the interfaces problems that are causing data mismatches between the [REDACTED] MMIS and the [REDACTED] Exchange.</p> <p>Results/Observations: None.</p> <p>Sources: (1) Project Plan [REDACTED]-MMIS Interface Redesign (2) [REDACTED] to MMIS Interface Redesign Kickoff.ppt (3) Fixes/Business Requirements/*Multiple documents* (4) Fixes/Functional Spec-e-Use Cases</p>
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3.3 [REDACTED]-MMIS Interface Redesign: Track 4

Program/SDLC Phase: Requirements Gathering, Design

Evaluation Summary: This review is of Track 4- [REDACTED] Premium Fixes under the [REDACTED]-MMIS Interface (Redesign) project.

This is a newly added track; the system and software design documentation has not been updated.

IV&V raised a number of observation/questions - none are 'stoppers'. Items highlighted in yellow need to be followed up on.

Product Evaluation Results/Observations/Findings:	
1	<p>SD 1.1 Software Development Life Cycle Management plans and Project Management. Does the project documentation demonstrate that a Software Life Cycle Process was selected for the project? Does the Project Management documentation demonstrate planning for: resources, documentation, metrics/evaluation, system transition if necessary, and training, risk management, task management and evaluation of improvement needs? Do the processes include management and business oversight and sign off? Best practices reference: IEEE 1074, IEEE 12207</p> <p>Evaluation: The Task lists and the SharePoint directory documents demonstrate a Software Development Life Cycle of planning, analysis, design, testing and implementation, but a cycle is not specifically identified.</p>

	<p>Many of the project management items are referenced in the supporting documents. EG: resources, documentation, task management, business sign off.</p> <p>Documentation standards are not identified, but the documentation demonstrates some documents are using documentation standards:</p> <ul style="list-style-type: none"> o The Business Requirements and the Functional Specs Use Case Statements use a standard template. o The Test Scenarios use a standard naming convention. <p>Results/Observations:</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>[Redacted]</p> <p>Sources:</p> <ol style="list-style-type: none"> (1) Project Plan [Redacted]-MMIS Interface Redesign (2) SharePoint/Status Reports/* (2) Deliverables/[Redacted] Premiums/Business Requirements/BusinessRequirements_FC (3) Deliverables/[Redacted] Premiums/Business Requirements/Functional Spec Req Use Cases/* (4) Deliverables/[Redacted] Premiums/Business Requirements/Testing Screen Shots/* (5) Project Tools/TaskList-Track4[Redacted] Premiums.xls (6) Project Tools/Project_Resources.xls (7) Project Tools/Interface Redesign 2016-2017 Tasks.xls (8) [Redacted] To MMIS Interface Message Mapping.xls
2	<p>SD 1.2 SDLM Architectural documentation.</p> <p>Does the Software Design Description Document list scope, identification, system overview, document overview, referenced documents, system-wide design decisions, system architectural design, system components, concept of execution, interface design, interface identification and diagrams, (project-unique identifier of interface), requirements traceability, maintenance and retirement? Best practices reference: IEEE 12207, IEEE 1074</p> <p>Evaluation: An architectural system and software design was not identified.</p> <p>Results/Observations:</p> <p>[Redacted]</p>

	<p>[Redacted]</p> <p>Sources:</p> <ul style="list-style-type: none"> (1) Project Plan [Redacted]-MMIS Interface Redesign (2) SharePoint/Status Reports/* (3) Deliverables/[Redacted] Premiums/Business Requirements/BusinessRequirements_FC (4) Deliverables/[Redacted] Premiums/Business Requirements/Functional Spec Req Use Cases/* (5) Deliverables/[Redacted] Premiums/Business Requirements/Testing Screen Shots/* (6) Project Tools/TaskList-Track4[Redacted] Premiums.xls (7) Project Tools/Project_Resources.xls (8) Project Tools/Interface Redesign 2016-2017 Tasks.xls (9) [Redacted] To MMIS Interface Message Mapping.xls
3	<p>SD 2.1. Modularity Standard.</p> <p>a) Does the Design Description Document demonstrate the uses of a modular, flexible approach to systems development, including the use of open interfaces and exposed Application Programming Interfaces (API)?</p> <p>b) Is there a separation of standardized business rule definitions from core programming; and are standardized business rule definitions available in both human and machine-readable formats?</p> <p>c) Does the Design Description Document demonstrate a commitment to a formal system development methodology and an open, reusable system architecture?</p> <p>Evaluation: Design documentation has not been identified.</p> <p>Results/Observations:</p> <p>[Redacted]</p> <p>Sources: SharePoint Directories: Deliverables/*multiple documents*</p>
4	<p>SD 2.2. MITA Conditions. Does the Design Description Document demonstrate that the state is aligning to and is increasingly advancing in MITA maturity for business, architecture, and data?</p> <p>Evaluation: Design documentation has not been identified.</p> <p>Results/Observations:</p> <p>[Redacted]</p>

Appendix A: Acronym List

Acronym/Term	Description
ACA	Federal Patient Protection and Affordable Care Act
ACF FNS	Children & Families Food Nutrition Services
API	Application Programming Interfaces
BA	Business Analyst
CCIIO	Center for Consumer Information and Insurance Oversight
CMS	Center for Medicare and Medicaid Services
DOR	Deliverable Observation Report
Drools	Drools is a Business Rules Management System (BRMS) solution
HHS	Health and Human Services
HIPAA	Health Insurance Portability and Accountability Act
HTTP	Hypertext Transfer Protocol
IEEE	Institute of Electrical and Electronics Engineering
ISDS	Integrated Service Delivery System
IV&V	Independent Verification and Validation
██████	██
██████	Eligibility Technology System
MITA	Medicaid Information Technology Architecture
MMIS	Medicaid Management Information Systems
██████	Health Insurance Exchange
██████	Health Insurance Exchange
NIEM	National Information Exchange Model
OCSE	Office of Child Support Enforcement
SDD	System Design Document
SDLC	Software Development Life Cycle
SDLM	Software Development Lifecycle Management
SES	Software Engineering Services
TLS	Transport Layer Security
UI	User Interface
UML	Unified Modeling Language
USL	User Services Layer
VOS	Virtual Object System
WSDL	Web Services Description Language
XML	Extensible Markup Language

Appendix E: Sample IV&V Project Management Checklists

Task Item: Project Sponsorship

IVV-2.1	Assess and recommend improvement, as needed, to assure continuous executive stakeholder buy-in, participation, support and commitment, and that open pathways of communication exist among all stakeholders.	
2.1.1	Has the Project Management Team identified the internal and external stakeholders?	CMMI Development (CMMI-DEV, V2.0), Planning (PLAN) and Monitor and Control (MC) PMBOK 6th Edition / Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.1.2	Are business cases, project goals, objectives, and expected outcomes documented and supported by executive stakeholders?	CMMI Development (CMMI-DEV, V2.0), Estimating (EST), Planning (PLAN) and Monitor and Control (MC) PMBOK 6th Edition / Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Management Assessment

IVV-2.2	Verify and assess the project’s management and organization; verify that lines of reporting and responsibility provide adequate technical and managerial oversight of the project.	
2.2.1	Has an organization chart been published depicting project reporting relationships?	CMMI Development (CMMI-DEV, V2.0), Planning (PLAN) and Monitor and Control (MC) PMBOK 6th Edition / Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.2.2	Have project team member roles and responsibilities been assigned and documented?	CMMI Development (CMMI-DEV, V2.0), Planning (PLAN) and Monitor and Control (MC) PMBOK 6th Edition / Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Management Assessment

IVV-2.3	Assess coordination, communication, and management to verify agencies and departments are working interdependently with one another and following the communication plan.	
2.3.1	Are departments and agencies sharing information via information retrieval systems, efficient communications, and information distribution methods?	CMMI Development (CMMI-DEV, V2.0), Planning (PLAN), Configuration Management (CM), and Monitor and Control (MC) PMBOK 6th Edition / Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.3.2	Are the working interfaces and interactions among relevant stakeholders internal and external to the project planned and managed to ensure the quality and integrity of the entire Project?	CMMI Development (CMMI-DEV, V2.0), Planning (PLAN), Technical Solution (TS), Product Integration (PI), and Monitor and Control (MC) PMBOK 6th Edition / Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Project Management

IVV-2.4 Evaluate project progress, resources, budget, schedules, workflow, and reporting		
2.4.1	Does the project have the tools and equipment needed to perform project activities?	CMMI Development (CMMI-DEV, V2.0), Planning (PLAN), and Monitor and Control (MC) PMBOK 6th Edition / Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.4.2	Does a Project schedule exist with all activities, milestones, dates, estimated hours, and resources by task loaded into project management software?	CMMI Development (CMMI-DEV, V2.0), Estimating (EST), Planning (PLAN), and Monitor and Control (MC) PMBOK 6th Edition / Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Project Management

IVV-2.5	Verify that a Project Management Plan is created and being followed. Evaluate the project management plans and procedures to verify that they are developed, communicated, implemented, monitored, and complete.	
2.5.1	Does the Project Management Plan exist?	CMMI Development (CMMI-DEV, V2.0), Planning (PLAN), and Monitor and Control (MC) PMBOK 6th Edition / Project Integration Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.5.2	Does the Project Management Plan include generic plan information including: a summary of the Project's purpose, scope, and objectives; a description of any constraints or assumptions on which the Project is based; a list of Project deliverables; a summary of the Project's schedule and budget; and the methods for updating, reviewing and disseminating the PMP?	IEEE STD 1058: 1998: IEEE Standard for Software Project Management Plans CMMI Development (CMMI-DEV, V2.0), Planning (PLAN), and Monitor and Control (MC) PMBOK 6th Edition / Project Integration Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Project Management

IVV-2.6	Evaluate project reporting plan and actual project reports to verify project status is accurately traced using project metrics.	
2.6.1	Does the PMP, or documents referenced within the PMP, describe the metrics, reporting mechanisms, and control procedures necessary to measure, report, and control the requirements, schedule, budget, resources, and quality of the work processes and products?	CMMI Development (CMMI-DEV, V2.0), Planning (PLAN), Monitor and Control (MC), and Managing Performance and Measurement (MPM) IEEE STD 1058: 1998 IEEE Standard for Software Project Management Plans PMBOK 6th Edition / Project Time Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.6.2	Is the project performing variance analysis encompassing cost, schedule, scope, quality, and risk areas?	CMMI Development (CMMI-DEV, V2.0), Planning (PLAN), Risk and Opportunity Management (RSK), Peer Reviews (PR), Process Quality Assurance (PQA), Monitor and Control (MC), and Managing Performance and Measurement (MPM) IEEE STD 1058: 1998 IEEE Standard for Software Project Management Plans PMBOK 6th Edition / Project Time Management
	Results	Finding/Recommendation
Process Rating		

Effectiveness Rating		
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Task Item: Project Management

IVV-2.7	Evaluate compliance with the estimating and scheduling process of the project to verify that the project budget and resources are adequate for the work-breakdown structure and schedule, and make recommendations for conformity.	
2.7.1	Does the Schedule Management Plan exist?	<p>CMMI Development (CMMI-DEV, V2.0), Planning (PLAN), Monitor and Control (MC), and Managing Performance and Measurement (MPM)</p> <p>IEEE STD 1058: 1998 IEEE Standard for Software Project Management Plans</p> <p>PMBOK 6th Edition / Project Time Management</p>
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.7.2	Is the project following a process for making scheduled and as-needed updates to the schedule management plan?	<p>CMMI Development (CMMI-DEV, V2.0), Planning (PLAN), and Monitor and Control (MC)</p> <p>IEEE STD 1058: 1998 IEEE Standard for Software Project Management Plans</p> <p>PMBOK 6th Edition / Project Time Management</p>
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Project Management

IVV-2.8	Review schedules to verify that adequate time and resources are assigned for planning, development, review, testing, and rework.	
2.8.1	Have adequate time and resources been allotted for Project planning?	Information Technology Reform Act: Clinger Cohen Act 1996 – IT Capital Planning CMMI Development (CMMI-DEV, V2.0), Estimating (EST), and Planning (PLAN) PMBOK 6th Edition / Project Time Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.8.2	Have adequate time and resources been allotted for Project development?	Information Technology Reform Act: Clinger Cohen Act 1996 – IT Capital Planning CMMI Development (CMMI-DEV, V2.0), Estimating (EST), and Planning (PLAN) PMBOK 6th Edition / Project Time Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Project Management

IVV-2.9 Verify milestones and completion dates are planned, monitored, and met.		
2.9.1	Does the master project schedule exist and reflect and/or include project milestones and completions dates for each project phase?	CMMI Development, (CMMI-DEV, V2.0), Planning (PLAN), Monitor and Control (MC), and Managing Performance and Measurement (MPM) PMBOK 6th Edition / Project Time Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.9.2	Are milestone and completion dates supported by an industry accepted mathematical analysis tool, such as Critical Path Method, Graphical Evaluation and Review Technique, or Program Evaluation and Review Technique?	CMMI Development, (CMMI-DEV, V2.0), Planning (PLAN), and Monitor and Control (MC) PMBOK 6th Edition / Project Time Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Issue Management

IVV-2.10	Verify the existence and institutionalization of an appropriate project issue tracking mechanism that documents issues as they arise, enables communication of issues to proper stakeholders, documents a mitigation strategy as appropriate, and tracks the issue to closure.	
2.10.1	Does a documented procedure exist for managing Project issues/problems?	CMMI Development, (CMMI-DEV, V2.0), Process Asset Development (PAD), Planning (PLAN), Causal Analysis and Resolution (CAR), and Monitor and Control (MC) PMBOK 6th Edition / Project Communication Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.10.2	Does the issue/problem management process include a description of corrective action taken to resolve the reported issue/problem?	CMMI Development, (CMMI-DEV, V2.0), Planning (PLAN), Causal Analysis and Resolution (CAR), and Monitor and Control (MC) PMBOK 6th Edition / Project Communication Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Risk Management

IVV-2.11	Verify that a Project Risk Management Plan is created and being followed. Evaluate the projects risk management plans and procedures to verify that risks are identified and quantified and that mitigation plans are developed, communicated, implemented, monitored, and complete.	
2.11.1	Does the PMP, or documents referenced with the PMP, specify the Risk Management Plan for identifying, analyzing, and prioritizing risk factors?	CMMI Development, (CMMI-DEV, V2.0), Risk and Opportunity Management (RSK) PMBOK 6th Edition / Project Risk Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.11.2	Does the project Risk Management Plan include documentation of the results of the risk identification and quantification processes?	CMMI Development, (CMMI-DEV, V2.0), Risk and Opportunity Management (RSK) PMBOK 6th Edition / Project Risk Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Organizational Change Management

IVV-2.14	Verify that an Organizational Change Management Plan is created and being followed. Evaluate the plans and procedures to verify they are developed, communicated, implemented, monitored, and complete; and that resistance to change is anticipated and prepared for.	
2.14.1	Does the Organizational Change Management Plan exist?	CMMI Development, (CMMI-DEV, V2.0), Process Management (PCM), Planning (PLAN), and Monitor and Control (MC) PMBOK 6th Edition / Project HR Management, Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.14.3	Does the Organizational Change Management Plan identify the activities in which stakeholders will participate to sustain collective Project action?	CMMI Development, (CMMI-DEV, V2.0), Process Management (PCM), Planning (PLAN), and Monitor and Control (MC) PMBOK 6th Edition / Project HR Management, Project Stakeholder Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Configuration Management

IVV-2.15	Verify that a Configuration Management Plan is created and being followed. Evaluate the configuration management plans and procedures to verify they are developed, communicated, implemented, monitored, and complete. Attend change control boards when appropriate.	
2.15.1	Does the Configuration Management Plan identify a baseline of items to include under the configuration process?	IEEE 1012-2012 / Configuration Management V&V, CMMI Development, (CMMI-DEV, V2.0), Configuration Management (CM) PMBOK 6th Edition / Project Scope Management, Project Integration Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		
2.15.6	Does the Configuration Management Plan define change request procedures?	IEEE 1012-2012 / Configuration Management V&V, CMMI Development, (CMMI-DEV, V2.0), Configuration Management (CM) PMBOK 6th Edition / Project Scope Management, Project Integration Management
	Results	Finding/Recommendation
Process Rating		
Effectiveness Rating		

Task Item: Communication Management

<p>IVV-2.16</p>	<p>Verify that a Communication Plan is created and being followed. Evaluate the communication plans and strategies to verify they support communications and work product sharing between all project stakeholders; and assess if communication plans and strategies are effective, implemented, monitored, and complete.</p>	
<p>2.16.1</p>	<p>Does the Communication Plan define a filing structure for gathering and storing various types of information?</p>	<p>CMMI Development, (CMMI-DEV, V2.0), Planning (PLAN), and Monitor and Control (MC) PMBOK 6th Edition / Project Communication Management</p>
	<p>Results</p>	<p>Finding/Recommendation</p>
<p>Process Rating</p>		
<p>Effectiveness Rating</p>		
<p>2.16.2</p>	<p>Does the Communication Plan define the types of information that will be distributed by the project, its partners, and stakeholders, and to whom and how they will be distributed?</p>	<p>CMMI Development, (CMMI-DEV, V2.0), Planning (PLAN), Monitor and Control (MC), and Managing Performance and Measurement (MPM) PMBOK 6th Edition / Project Communication Management</p>
	<p>Results</p>	<p>Finding/Recommendation</p>
<p>Process Rating</p>		
<p>Effectiveness Rating</p>		

Task Item: Staffing Management

<p>IVV-2.17</p>	<p>Verify that a detailed Project Staffing Plan is documented. Verify that the required skill sets and the clarity of the description of roles and responsibilities are appropriate. Verify that the proposed staffing levels and skill sets in the Project Staffing Plan are appropriate. Monitor ongoing changes in project staffing needs and actual staffing changes to verify that they are consistent with the staffing plan. Monitor and assess the direct involvement of the Project Management Organization in the management of the project.</p>	
<p>2.17.2</p>	<p>Does the staffing plan include the plans for acquiring the staff, the number of staff required, and the duration of need for each phase of the project?</p>	<p>IEEE 1012-2012: Supply Planning CMMI Development, (CMMI-DEV, V2.0), Estimating (EST), Planning (PLAN), Monitor and Control (MC), and Managing Performance and Measurement (MPM) PMBOK 6th Edition / Project Communication Management, Project HR Management</p>
	<p>Results</p>	<p>Finding/Recommendation</p>
<p>Process Rating</p>		
<p>Effectiveness Rating</p>		
<p>2.17.3</p>	<p>Does the staffing plan include the skills, knowledge, training, and experience of personnel?</p>	<p>IEEE 1012-2012: Supply Planning CMMI Development, (CMMI-DEV, V2.0), Estimating (EST), Planning (PLAN), Monitor and Control (MC), and Managing Performance and Measurement (MPM) PMBOK 6th Edition / Project Communication Management, Project HR Management</p>
	<p>Results</p>	<p>Finding/Recommendation</p>
<p>Process Rating</p>		

Effectiveness Rating		
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SECURITY ASSESSMENT CHECKLISTSAMPLE

Security Management Oversight IV&V Checklist					Task Item:		SM		
					Date Issued/Last Revised:		04.30.2020		
					Prepared By:		Project Manager		
Task Item: SM-6 SECURITY REQUIREMENTS		Evaluate and make recommendations project policies and procedures for ensuring that the system is secure and that the privacy of client data is maintained.							
		Assessment of the Process				Assessment of Effectiveness			
		RED	YELLOW	GREEN	BLUE	RED	YELLOW	GREEN	BLUE
SM-6.1		Does the Project provide for management of safety, security, privacy and other critical requirements of the software products or services? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Program Management (PM) Family and System and Services Acquisition (SA) Family.</i>							
		Results				Finding/Recommendation			
AOP Rating:									
		Sources:							
AOE Rating:									

SM-6.2	Does the project have security policies (rules for need-to-know and access to information at each project organization level)? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Program Management (PM) Family.</i>	
	Results	Finding/Recommendation
AOP Rating:	Sources:	
AOE Rating:		
SM-6.3	Do Project characteristics include safety or security considerations in the operational environment? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Assessment and Authorization (CA) Family</i>	
	Results	Finding/Recommendation
AOP Rating:	Sources:	
AOE Rating:		
SM-6.4	Do the security access procedures include security controls on the system to ensure the hardware and software components are protected from unauthorized use, modification, and disclosures, and to verify the accountability of the authorized users? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and</i>	

	<i>Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Access Controls (AC) Family and Audit and Accountability (AU) Family</i>	
	Results	Finding/Recommendation
AOP Rating:	Sources:	

Task Item: SM-8 SECURITY REQUIREMENTS	Evaluate the project's security and risk analysis.							
	Assessment of the Process				Assessment of Effectiveness			
	RED	YELLOW	GREEN	BLUE	RED	YELLOW	GREEN	BLUE
SM-8.1	Does the Project utilize tools such as checklists, flowcharts, interviews, questionnaires, and testing to identify information security risks and threats to the confidentiality, integrity, and availability of information? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Risk Assessment (RA) Family</i>							
	Results				Finding/Recommendation			
AOP Rating:	Sources:							
AOE Rating:								
SM-8.2	Has adequate time been allotted to conduct Information Security Risk Analysis activities, such as vulnerability and penetration testing, threat identification and characterization, and the prioritizing of external and internal security risks to the project? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and</i>							

<i>Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Risk Assessment (RA) Family</i>		
	Results	Finding/Recommendation
AOP Rating:	Not evaluated this period. Sources:	
AOE Rating:		
SM-8.3	Has the project developed and documented a security planning policy that addresses purpose, scope, roles, responsibilities, management commitment, coordination among organizational entities, and compliance; and Procedures to facilitate the implementation of the security planning policy and associated security planning controls? <i>National Institute of Standards and Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Planning (PL) Family</i>	
	Results	Finding/Recommendation
AOP Rating:	Not evaluated this period. Sources:	
AOE Rating:		

Task Item: SM-9 SECURITY REQUIREMENTS	Verify that processes and equipment are in place to back up client and project data and files and archive them safely at appropriate intervals.							
	Assessment of the Process				Assessment of Effectiveness			
	RED	YELLOW	GREEN	BLUE	RED	YELLOW	GREEN	BLUE
SM-9.1	Does the Disaster Recovery Plan include identification of the disaster recovery team and a contact list; recovery operation procedures; procedures for establishing an alternative site including voice and data communications and mail., and support equipment; plans for replacement of computer equipment; procedures for storage and retrieval of software, data, documentation, and vital records off-site; and logistics of moving staff, data, documentation, etc.? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Contingency Planning Family.</i>							
	Results				Finding/Recommendation			
AOP Rating:	Sources:							
AOE Rating:								
SM-9.2	Does the Disaster Recovery Plan describe the establishment of a system backup schedule? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Contingency Planning (CP) Family</i>							

	Results	Finding/Recommendation
AOP Rating:	Sources:	

AOE Rating:		
SM-9.3	Does the Disaster Recovery Plan describe procedures for restart/recovery and continuity of operations? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Contingency Planning Family</i>	
	Results	Finding/Recommendation
AOP Rating:	Sources:	
AOE Rating:		
SM-9.4	Does the Disaster Recovery Plan describe equipment support; plans for replacement of computer equipment; procedures for storage and retrieval of software, data, documentation, and vital records off-site; and logistics of moving staff, data and documentation? <i>Best Practice Reference: International Organization for Standardization / International Electrotechnical Commission (ISO/IEC) 27001:2013; National Institute of Standards and Technology (NIST) Special Publication 800-53 Rev 4, Security and Privacy Controls for Federal Information Systems and Organizations, Contingency Planning (CP) Family.</i>	
	Results	Finding/Recommendation
AOP Rating:	Sources:	

General Information							
<p>Instructions: This section includes the general information for the progress report. IV&V contractor is to fill out all sections of this IV&V tab. Please ensure information provided here matches with the Project Partnership Understanding (PPU). For all dates, please use MM/DD/YYYY format.</p>							
State/Territory		State Primary POC		Submitter Email	jmoudry@sessolutions.com	PPU Completed & Sent to CMS?	Yes
Project Name		State Primary POC Email		Submitter Phone	402-292-8660, ext. 217	Date PPU sent to CMS	8/23/2018
Program Name		Submitter Name	Jim Moudry	Submitter Company Name	Software Engineering Services	Date IV&V on Board	11/16/2015
Progress Report Date	11/23/2020	Submitter Title/Role	IV&V Project Manager			Next Progress Report Date	12/7/2020
Select Report Type	Monthly Progress						

Summary of Project Progress and Status	
<p>Instructions: Briefly summarize the state's status and its progress. The summary should cover entire project, not just the modules which are planned to be reviewed during a milestone review.</p>	
<p>Stage 1 went live on March 12, 2018. Stage 1.5 went into production on December 31, 2018. The Stage 1 R2 Certification Milestone Review was held June 19-20, 2018 and the R3 Milestone Review was held March 26-27, 2019. Stage 2 go-live was scheduled for 05/2020; however, a large number of legacy change orders needed to be added to scope, so a 13 month contract extension was signed by the State on March 29, 2019. Because of this, a complete re-planning and re-baselining effort was conducted by (entity) and completed on June 4, 2019.</p> <p>Another contract amendment is in work to extend testing for current scope by two months due to the large number of defects found, slower than expected defect resolution, and late delivery of functionality for testing. Additionally, the amendment extends the project another four months in order to implement additional scope from added CMS and legislative mandates. This would move the Stage 2 go-live date to Jan 18, 2022.</p> <p>As the data below, taken from the October 29, 2020 Late Tasks Report, shows, late tasks continued to exceed 10% (xx.xx%), putting the project schedule in a Red status. Project Quality is Red due to the test case failure rate, number of defects being closed not keeping pace with the number of defects open, and defect resolution time exceeding the planned time for resolution, resulting in a growing number of open defects.</p> <p>There were 4 open IV&V Observations and seven open IV&V Findings going into this report. No observations are being open or closed with this report.</p>	

Budget & Schedule Metrics							
<p>Instructions: Provide budgetary and schedule measurements below.</p> <ul style="list-style-type: none"> - Earned Value metrics are the CMS-preferred metrics for budget and schedule. If state uses Earned Value metrics, enter the information in row#23 for the entire project. - However, if the state does not use Earned Value metrics, please enter the metrics the state does use, variance against the state's expected or target value for each, and the most recent measurement for each state metric (rows # 27 and below) - For each state metric provided, indicate whether that metric is for module/cohort of modules or whether the metric applies to the MMIS project as a whole. - States are encouraged to discuss with their Regional Office analysts which metrics they intend to track so that the IV&V contractor can report them here. - Example industry metrics are shown for reference. 							
Total Budget	\$102,500,995	Earned Value (EV)		Cost Variance (%)		Schedule Variance (%)	
Example Metrics for Considerations	Name of State Metric	Value	Variance Against Expected or Target Value	Name of the Applicable Module / Cohort of Modules / MMIS Project			

Planned value Actual cost Return on Investment Cost performance index Cost of managing processes Planned hours of work vs actual Overdue project tasks Schedule performance index Percentage of missed milestones Percentage of tasks complete	Early Tasks	98	2.27%	
	Future Tasks	1,164	27.01%	
	Late Tasks	1,270	29.47%	Has gone up consistently every month from 4.43% at the end
	On-Time Tasks	1,331	30.88%	
	Future Early Tasks	447	10.37%	
	Total Tasks	4,310		

Comments	<p>Late tasks noted above are tasks that have a forecasted end date later than the current baseline finish date. Of note from the statistics above: Late tasks have increased from 4.43% the end of June 2019 to 29.47% on the October 29, 2020 Late Tasks Report. Late tasks therefore exceed the 20% threshold putting project schedule at Red. Total tasks decreased from 14,602 at the end of June 2019 to 4,310 by October 29, 2020. With the October 29, 2020 Late Tasks Report, 131 of the 1,270 late tasks (or 10.3%, up from 7.6% last month) are on the critical path.</p> <p>An overall Cost Variance and Schedule Variance are extremely difficult to calculate given the number of individual project schedules with links between each.</p>
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Life Cycle Status and Schedule

Instructions: This section aids CMS in planning milestone reviews. Dates are understood to be approximate and should be updated in future quarterly reports as state schedules become more refined.

-- For each module, start by selecting a Life Cycle Status from the drop-down menu, even for modules for which no development is planned.

-- If you select Life Cycle Status as "No plans for development," then the R1, R2, R3 date cells will become gray and you do not need to fill out any dates.

-- If a state is transitioning into a late phase of the MECL and its CMS MMIS analyst has stated that a milestone will not be necessary, then select the status dropdown that indicates that milestone as completed and leave the date column for that milestone review and any reviews leading up to that review blank. For example, if the CMS analyst has said that R1 and R2 are not necessary, select "R2: Operational M.R. Completed" and leave the R1 and R2 date cells blank. The anticipated R3 date should be filled in.

-- For all other cases, use the drop-down menu to indicate the status of the module. Enter the anticipated or actual dates for each milestone, including future milestone reviews. Do not enter a date range. For all dates, please use MM/DD/YYYY.

-- After a milestone review, be sure to update the entry to reflect the last date of the milestone review as it may have changed from the anticipated date, and update the Life Cycle Status drop-down selection.

-- If state has custom module not listed below, enter the information of this module in the "Additional Modules" section.

	Life Cycle Status	Target or Actual IAPD Approval Date	Target or Actual DDI Start Date	Target or Actual Date for R1	Target or Actual Date for R2	Target or Actual Go-Live Date	Target or Actual Date for R3
MMIS Functional Modules							
Member Enrollment	R1: Operational M.R. Completed	9/23/2014	11/1/2015		5/21/2021	7/6/2021	3/18/2022
FFS Claims & Adjudication	R1: Operational M.R. Completed	9/23/2014	11/1/2015		5/21/2021	7/6/2021	3/18/2022
Pharmacy	R1: Operational M.R. Completed	9/23/2014	11/1/2015		5/21/2021	7/6/2021	3/18/2022
Third Party Liability	R1: Operational M.R. Completed	9/23/2014	11/1/2015		5/21/2021	7/6/2021	3/18/2022
Care Management	R1: Operational M.R. Completed	9/23/2014	11/1/2015		5/21/2021	7/6/2021	3/18/2022
Program Integrity	R1: Operational M.R. Completed	9/23/2014	11/1/2015		5/21/2021	7/6/2021	3/18/2022
Decision Support System	R2: Operational M.R. Completed	9/23/2014	11/1/2015		6/20/2018	3/12/2018	3/27/2019
Reference Data Management	R1: Operational M.R. Completed	9/23/2014	11/1/2015		5/21/2021	7/6/2021	3/18/2022
Provider Management	R2: Operational M.R. Completed	9/23/2014	11/1/2015		6/20/2018	3/12/2018	3/27/2019
Registries	No plans for development						

Additional Modules							
<Custom Module>							
<Custom Module>							
<Custom Module>							
<Custom Module>							
<Custom Module>							
Comments	<p>R1 was not applicable for this project. Dates for the Stage 2 R2 and R3 milestone reviews above reflect the June 2019 schedule with the 13-month extension and do not account for the upcoming contract amendment that will slip those dates by another six months. R2 and R3 dates for DSS and Provider Management reflect go-live for these modules in Stage 1 of the project.</p>						
	<p>To date, 173 total project risks have been identified and posted to the risk log. Of these, 16 have been realized, 113 have been closed, and 44 remain open. Three risks were closed and one new risks was open in the month of October 2020. No changes were made to the impact or probability of existing risks. Open risks with ratings of 3 or higher for both probalility and impact are shown below.</p>						
	<p>IV&V has not identified any new risks this month to be considered by the project for addition to the project risk log.</p>						

Risks							
<p>Instructions: List important programmatic or technical risks across the entire project, not just for modules to be reviewed during the next milestone review. Use a unique Risk ID and provide the risk title and a description, being sure to indicate if it is a project or module level risk. For previously reported risks, use the same Risk ID, title, and description and update the remaining fields. Pick appropriate values from the probability (1 = Not Likely to 5 = Nearly Certain) and impact (1 = Minimal to 5 = Severe) drop-down menus. Based on your selection, the risk score will be calculated automatically.</p> <p>Provide the resolution date in the Target or Actual Resolution Date column (MM/DD/YYYY format).</p> <p>Provide the mitigation plan information (include details) and its status in the Mitigation Plan and Status column.</p> <p>(Due to Excel limitations, text boxes may not expand when filled with data beyond the size of the cell. Data will be captured even if not completely visible.)</p>							
Risk ID #	Risk Title	Description	Probability	Impact	Risk Score	Target or Actual Resolution Date (If Applicable)	Mitigation Plan & Status
2	Federal and State Changes	Unforeseen Federal and State Rule/Policy changes	5	4	5-4	7/6/2021	Monitor Federal Rules Policy changes through our policy process and make sure that the
107	Regression Testing in Cycles	Since project doesn't incorporate full	3	3	3-3	2/15/2021	9/18/20: Next Review Date: 11/18/20. Regression Cycle 3
146	UAT Roles Testing	Because the full testing of UAT Roles	3	3	3-3	12/24/2020	10/16/20: New Review Date: 12/24/20: Roles testing is
151	Overlap of UAT IT5 and (entity) E2E	The approved project schedule contains a 22 (entity) resource	5	5	5-5	2/1/2021	10/6/20: Next Review Date 2/1/21. Reviewed at 10/6/20
157	KDHE resource constraints with other	(entity) resource constraints with other	3	3	3-3	7/6/2021	9/22/20: Reviewed at (entity) Risk Review. Agreed to
158	(entity) resource constraints with other	(entity) resource constraints with other	5	3	5-3	7/6/2021	2/26/20: Next Review Date: 3/24/20. (entity) requested to
159	Training Materials may not be complete	Because of the volume of training	4	4	4-4	7/6/2021	9/24/20: Next Review Date: 10/31/20. This will close when
160	The number of needed training classes	The number of needed training	4	4	4-4	7/6/2021	9/24/20: Next Review Date: 2/28/21. (entity) continues to
161	COVID-19 Pandemic	Due to the COVID-19 Pandemic there may	5	3	5-3	9/20/2020	9/22/20: Changing impact from High to Medium. Return to the
162	Conversion Timeline	If Conversions cannot be completed in the	3	4	3-4	4/6/2021	10/1/20: Next review date 11/13/20. Expect to have
166	COVID-19 impacts on training	If, due to COVID-19, Training Team is	3	4	3-4	2/28/2021	9/24/20: Next Review Date: 2/28/21. (entity) Training Team
168	MCO Construction Schedule	The MCOs may not be able to complete	5	4	5-4	12/1/2020	10/22/20: (entity) working to provide estimates for newly
169	PGA Dashboards impacted by ongoing T-	Dashboards make use of xxx data. The	5	4	5-4	11/20/2020	10/22/20: Probable Impact Date moved from 10/23/20 to
202005-01	Inability to complete SIT 4 on schedule	Delays in completion of previous SIT	5	4	5-4		Newly identified by IV&V with the May report.
170	Delays to Mod 8 possible from changes	With the decision to assess retaining the	4	4	4-4		10/2/20: Next review date: Weekly. (entities) are
172	New BFAs	If new BFAs are identified, it causes	5	5	5-5	2/19/2021	10/22/20: Two new BFAs added and one removed this
					-		
					-		
					-		
					-		

Recommendations				
<p>Instructions: List programmatic or technical recommendations for the state regarding the overall project and/or any module in any phase of planning, development, deployment or operation. Recommendations can be based on cost, schedule, technical, risk, or other factors. (Due to Excel limitations, text boxes may not expand when filled with data beyond the size of the cell. Data will be captured even if not completely visible.)</p>				
Recommendation #	Date of Recommendation	Recommendation	Resolved?	Comments / Resolution

Programmatic Checklist						
<p>Instructions: Review the state's compliance with each criterion and complete the IV&V columns. For all dates, please use MM/DD/YYYY format. If 'Not Assessed' is selected from the Reviewer Assessment column, give a justification for this in the Reviewer Comments column. Due to Excel limitations, text box may not expand when filled with data beyond the size of the cell. Data will be captured even if not completely visible. If you need to review all data in a cell, double click the cell and use the down arrow from your keyboard to navigate.</p>						
Category	Ref #	Review Criteria	IV&V Columns			
			Review Date	Reviewer Name	Reviewer Assessment	Reviewer Comments
Governance	S&C.MS.15	The state uses an SDLC.	9/30/2017	Moudry	Meets	KMMS Contractor uses a combination of SDLC and Agile Development. Pursuing ways to
Governance	S&C.MC.1	The State Medicaid Agency (SMA) develops its MITA Roadmap and uses a completed MITA SS-A for evaluation of its As-Is and identification of its To-Be capabilities for Business, Information, and Technical Architectures and the Standards and Conditions for Medicaid IT.	10/31/2017	Moudry	Meets	A MITA 3.0 SS-A and Roadmap have been completed and identified the As-Is and To-be capabilities.
Governance	IA.DMS.1	The SMA demonstrates its adoption of the governance process and structure to promote trusted data governance, data stewards, data owners, data policy, and controls redundancy within the intrastate.	10/31/2017	Moudry	Meets	The SMA follows State of Kansas IT Standards as created and maintained by the Kansas Information Technology Office .
Governance	IA.DS.3	The SMA documents information exchanges in trading partner agreements as specified in 45 CFR 162.915.	10/31/2017	Moudry	Meets	The MMIS is in compliance with trading partner agreements are used with the entities who contract to use Medicaid data. The KDH DUCF (Department of
Outreach & Support	S&C.BRC.2	The SMA communicates effectively with providers, members, and the public.	9/30/2017	Moudry	Meets	A formal publication process is followed when policy changes are made. Publication can be through
Outreach & Support	S&C.BRC.9	The system of interest utilizes a web-based, person-centric system for outreach, where providers, applicants, and members provide feedback on, and an assessment of, accessibility, ease of use, and appropriateness of decisions.	3/29/2019	Moudry	Partially Meets	The Customer Self Service Portal (CSSP) module will perform this function. Member access will not be available until completion of Stage 2.
Outreach & Support	S&C.RC.3	The SMA demonstrates that it provides timely information transaction processing, and ensures high availability and quick response to customer requests.	3/8/2018	Moudry	Meets	Performance standards are in place for such requests as tracked in the Customer Request Management piece of the CSSP used by DYC
Outreach & Support	S&C.RC.4	The SMA provides system decision logic and coding used by eligibility to the public.	10/31/2017	Moudry	Partially Meets	
Outreach & Support	TA.FR.5	The system of interest provides online assistance to users to support effective use of data query, data analysis, and report formatting capabilities.	10/31/2017	Moudry	Meets	The Data Warehouse module provides this online support.
Outreach & Support	TA.LG.3	The system of interest provides services that manage the delivery of event messages to several business services and to people/roles/contexts interested in a condition and change of behavior of interest.	3/29/2019	Moudry	Meets	The workflow management system provides message notifications to users when action is needed on their part. The CSSP module has mass email notice capability.
Process	S&C.RC.5	The SMA has a process for identifying errors and promptly correcting them. The SMA is capable of producing audit trails of decisions.	3/29/2019	Moudry	Meets	Yes, these are requirements of the KMMS system.

Process	TA.BPM.2	The SMA aligns business workflows for Medicaid and Exchange business operations and requirements by using BPM standards (e.g., Business Process Execution Language [BPEL]).	3/29/2019	Moudry	Meets	KMMS uses workflow standards.
Process	TA.CM.1	The SMA implements software configuration management practices and identifies intrastate configuration items and baselines.	9/30/2017	Moudry	Meets	DXC follows these practices as required by the RFP and by relevant State IT policies. The KMMS system is used by intrastate agencies - KDHE.
Process	TA.CM.3	The SMA uses build management, process management, and environment management through the SDLC.	3/29/2019	Moudry	Meets	DXC is using these management processes in the development of KMMS. Documentation of the process is required by RFP.
Process	TA.DAM.6.1	The SMA performs data management storage optimization and consolidation techniques.	3/29/2019	Moudry	Meets	DXC is performing these techniques in the development of KMMS.
Process	TA.UT.1	The system of interest introduces versioning, mediation, and distributed systems.	3/29/2019	Moudry	Meets	DXC tracks versioning on the documentation repository - iTrace.
Process	MES.PR.1	In preparation for a milestone review, the SMA has provided all artifacts required for that review (see Required Artifacts List in the Toolkit). If the names of the artifacts differ from what they are named in the Required Artifacts List, then the SMA has provided a mapping between the names of the artifacts in the Required Artifacts List and what the state calls the artifacts.	3/29/2019	Moudry	Meets	Yes, these artifacts have been provided and mapped for Stage 1 milestone reviews.
Reuse	S&C.LC.1	The SMA participates in a multi-state effort and shares (or provides a method to share) its reusable components, to promote the sharing, leverage, and reuse of Medicaid technology and systems.	10/31/2017	Moudry	Meets	Kansas participates in the CMS co-hort group and others dedicated to sharing RFPs, APDs, and other helpful planning documentation to be leveraged among states.
Reuse	S&C.LC.5	The SMA identifies and evaluates commercial or open-source solutions and plans for cloud computing.	10/31/2017	Moudry	Meets	KiwiMS is being built with several COTS products (SAS for Program Integrity, Cerner Data Warehouse, Microsoft Dynamics).
Reuse	S&C.LC.8	The SMA minimizes the need for ground-up or customization solutions.	3/29/2019	Moudry	Meets	Re-use/modernization and use of existing COTS solutions was used as much as possible.
RFP/Contract/ Acquisition	IA.DS.4	As Per SMM Part 11, the state documents and follows the RFP development process, contract development process, and proposal evaluation plan.	9/30/2017	Moudry	Meets	RFP, evaluation plan and contract for KMMS were approved in 2014 and awarded in November 2015 to DXC. This process is followed with all projects involving
RFP/Contract/ Acquisition	S&C.BRC.12	The SMA has service level agreements (SLAs) in place and evaluates system and contractor performance against those SLAs. When SLAs are not met, the SMA creates and executes plans of action with milestones (POAMs).	9/30/2017	Moudry	Meets	SLAs are part of the DXC Contract and others managed by the KDHE contract unit.
RFP/Contract/ Acquisition	S&C.MS.5	Modularity is adequately accounted for in the SMA acquisition process.	9/30/2017	Moudry	Meets	KMMS consists of eight separate modules with implementation planned in two stages.
RFP/Contract/ Acquisition	S&C.MS.6	The RFP does not impose technology-specific solutions and will allow for evolving requirements.	9/30/2017	Moudry	Meets	Innovation was encouraged in the RFP awarded in 2015. Technology was not limited to a specific solution.

Security	TA.SP.64	The system of interest conducts user authentication by using public key infrastructures (PKIs) in conformance with the MITA Framework, industry standards, and other nationally recognized standards.	3/29/2019	Moudry	Meets	Has been incorporated.
Security	TA.SP.65	For the system of interest's use of PKIs, the solution follows standard practices, such as the use of accepted certification authorities and the documented Certificate Policy (CP) and Certification Practice Statement (CPS), which include the key escrow strategy. The system of interest's PKI implementation uses foundational technical standards, such as X.509 Certificate format and Public Key Cryptography Standard (PKCS).	3/29/2019	Moudry	Meets	KMMS uses a strong authentication sign-on process through Oracle Identify Management.
Security	TA.SP.75	The system of interest employs malicious code protection mechanisms at IT system information system entry and exit points, and at workstations, servers, or mobile computing devices on the network, to detect and eradicate malicious code. The system of interest utilizes network scanning tools, intrusion detection and prevention systems, and end-point protections, such as firewalls and host-based intrusion detection systems, to identify and prevent the use of prohibited functions, ports, protocols, and services.	3/29/2019	Moudry	Meets	The KMMS RFP requires these protective mechanisms which were tested with Penetration Testing by Novocoast, a vendor proposed by DXC and approved by KDHE. The testing was done in summer of 2017 for Stage 1.
Security	TA.SP.78	The system allows only authorized staff members to do manual deletions and overrides of alerts/edits.	3/29/2019	Moudry	Meets	KMMS requires this in the various modules enforced by a performance requirement for audit trails.

General Information					
<p>Instructions: CMS team members should fill out the General Information section. For all dates, please use MM/DD/YYYY format. CMS Comments are not required for regular quarterly reports. (An analyst should at least acknowledge to the IV&V contractor and state that they received the report.)</p> <p>Review Type and cells D6 and E6 are auto filled, based on the response from IV&V tab Review Type. Please enter date of your response in cell I6. If you have comments, enter them in the General Comments section. If the report was prepared for a milestone review, all sections should be filled out. Due to Excel limitations, text box may not expand when filled with data beyond the size of the cell. Data will be captured even if not completely visible. If you need to review all data in a cell, double click the cell and use the down arrow from your keyboard to navigate.</p>					
Review Type	Monthly Progress		Date		

Milestone Review Team					
<p>Instructions: Leave blank if this is not given in response to a milestone review (it will turn gray when quarterly report is selected as Review Type, by the IV&V contractor in the IV&V tab). Use drop-down menu (Role & Organization Columns) to select/update Milestone Review Team.</p>					
Role	Name	Organization	Role	Name	Organization
If "Other" was selected, please explain.		<Insert additional information here, if necessary.>			

CMS Comments
<p>Instructions: This section can be used for both Quarterly Report responses and Milestone Review summaries. Provide any high-level CMS comments in the text box below. Your response should focus on potential risks and issues.</p>
General Comments
<p>Include general comments here. This may include CMS comments for project progress, and any risks and issues.</p> <p>>> Delete these instructions prior to entering data. For copy and paste, first double click this cell and then paste.</p>

>> For copy and paste, first double click this cell and then paste.
 >> Due to Excel limitations, text box may not expand when filled with data beyond the size of the cell. Data will be captured even if not completely visible.
 >> If you need to review all data in this box, double click this box first and use the down arrow from your keyboard to navigate.

Instructions: The sections below are for milestone review responses regarding specific checklists.
 >> Select the desired checklist in the green cells (e.g. row # 37), using the drop down menu, to provide Observations, Findings, Corrective Actions and Recommendations for that checklist.
 >> For each checklist, all Observations/Findings/Corrective Actions/Recommendations should be compiled into one entry/section below.

Definitions
 >> **Observation** – A statement where the reviewer notes good practices by the state and/or opportunities for improvement.
 >> **Finding** – This is a condition that requires attention by the state. There may or may not be findings. A finding could impact certification and may require the state to identify and implement a corrective action plan (CAP). A finding requires a response by the state, and in cases where a CAP is necessary, a timeline by which the CAP will be fully operational. In severe cases, the state may need to implement a workaround until the permanent CAP has been implemented.
 >> **Corrective Action** – One or more steps intended to remedy findings. The reviewer should suggest types of actions needed to remedy the findings. (If there are findings, the state may need to propose a CAP, CMS will review and approve/disapprove the CAP, and once finalized, the state will execute the CAP.)
 >> **Recommendation** – Advice offered by the reviewer to address weaknesses or to highlight opportunities for improvement.

Select the Desired Checklist Here with the Drop-Down Menu

Observations	<Enter CMS comments here for the checklist selected above, in yellow>
Findings	<Enter CMS comments here for the item selected above, in yellow>
Corrective Actions	<Enter CMS comments here for the item selected above, in yellow>
Recommendations	<Enter CMS comments here for the item selected above, in yellow>

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Select the Desired Checklist Here with the Drop-Down Menu	
Observations	<Enter CMS comments here for the item selected above, in yellow>
Findings	<Enter CMS comments here for the item selected above, in yellow>
Corrective Actions	<Enter CMS comments here for the item selected above, in yellow>
Recommendations	<Enter CMS comments here for the item selected above, in yellow>
Select the Desired Checklist Here with the Drop-Down Menu	
Observations	<Enter CMS comments here for the item selected above, in yellow>
Findings	<Enter CMS comments here for the item selected above, in yellow>
Corrective Actions	<Enter CMS comments here for the item selected above, in yellow>
Recommendations	<Enter CMS comments here for the item selected above, in yellow>

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Findings	<Enter CMS comments here for the item selected above, in yellow>
Corrective Actions	<Enter CMS comments here for the item selected above, in yellow>

Recommendations	<Enter CMS comments here for the item selected above, in yellow>
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Corrective Actions	<Enter CMS comments here for the item selected above, in yellow>
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Corrective Actions	<Enter CMS comments here for the item selected above, in yellow>
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Findings	<Enter CMS comments here for the item selected above, in yellow>
Corrective Actions	<Enter CMS comments here for the item selected above, in yellow>

Recommendations	<Enter CMS comments here for the item selected above, in yellow>

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Observations	<Enter CMS comments here for the item selected above, in yellow>
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Corrective Actions	<Enter CMS comments here for the item selected above, in yellow>
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Corrective Actions	<Enter CMS comments here for the item selected above, in yellow>
Recommendations	<Enter CMS comments here for the item selected above, in yellow>

Project Lessons Learned

30 June 2018

Submitted by



Lesson Learned Name	Integration Touch Points Not Fully Verified
Lesson Learned Number	LL-10
IV&V Oversight Area(s)	Development
PMBOK Knowledge Area(s)	Project Integration Management, Scope Management, Time Management, Quality Management, Human Resource Management
Project Phase(s)	Project Preparation, BluePrint, Realization
ITN Topic(s)	Requirements, Design and Testing
<p>Problem and Impact: The Project Team did not adequately verify the data integrity and accuracy of integration touch points among process areas early enough in the project life cycle to be fully effective. Touch points should have been addressed during development and design, not delayed until the implementation phase of the project.</p> <p>Integration touch points were addressed at the end of the Joint Application Development (JAD) sessions; however, there was insufficient time allotted to perform the tasks of verifying their integrity and accuracy. Later during functional design, integration touch points were not individually addressed.</p> <p>Failure to address points at which process areas met negatively impacted integration testing; the test team was able to pass only 2032 of 2669 scripts (76%) for UAT. End-to-end testing was also not performed as expected during User Acceptance Testing (UAT) due to time constraints.</p> <p>Resolution and Benefits: The problem was partially resolved. The Compliance Process area reviewed the JAD Session Reports for the Financial, Establishment, and Case Process areas. In addition, the Compliance Process personnel attended 3 Integration Meetings held by the Vendor. At the end of the JAD Sessions, attendees met on a Saturday as a consolidated team to identify the integration points, update the process flows, and write system requirements.</p> <p>During the functional design meetings, there were Business Process Owners that discussed integration points as an add-on to the meetings. During Integration Testing, all expected test scenarios were not successfully executed. End-to-end testing was executed during Cycle-3 of Integration Testing, where 16 test scenarios were executed to validate touch points but using simulated data instead of production data. During User Acceptance Testing, the testers for Network also used simulated data instead of production data for interfaces and did a manual hand-off to the associated business process areas. The true test for verifying the data for integrity and accuracy between business process areas at the points of integration was at Go-Live.</p> <p>Lesson Learned and Recommendations: Create tasks and allow time in the Project Schedule to identify, review, and verify data, integrity, and accuracy of the requirements and functional design for the integration touch points between business process areas. Identify integration touch points between business process areas during the requirements gathering sessions to ensure that the requirements are written to the satisfaction of each business process area where touch points exist. Include a separate review of the functional specifications that integrate between business process areas in the Business Blueprint. In the Master Test Plan, identify a strategy for testing the integration touch points between process areas for both Integration Testing and User Acceptance Testing. Conduct end-to-end testing using production data prior to Go-Live.</p>	

Lesson Learned Name	Insufficient Knowledge Transfer Activities
Lesson Learned Number	LL-16
IV&V Oversight Area(s)	Implementation
PMBOK Knowledge Area(s)	Human Resource Management
Project Phase(s)	Business BluePrint, Realization, Final Prep, Go Live and Support
ITN Topic(s)	Training
<p>Problem and Impact: Knowledge Transfer activities were not sufficient to ensure staff readiness for post Go-Live operational support.</p> <p>Knowledge Transfer (KT) sessions were a way for DEPARTMENT participants to gain job-relevant knowledge and skills. KT started early in the Business Blueprint phase of the project. There were 7 KT cycles. The goals of KT as stated in the Knowledge Transfer Plan included enabling DEPARTMENT participants with new knowledge and skills that would sustain business transformation after the consultants leave; and reducing or mitigating project risk through joint ownership and accountability.</p> <p>The vendor mentor and DEPARTMENT participants jointly established planned activities and performance goals. But as the vendor's focus turned to Integration Testing and User Acceptance Testing, KT teams failed to reach their goals. Incomplete KT activities were carried forward to the next cycle. Adjustments were made to DEPARTMENT and the vendor partnerships due to the testing activities. Continuity of knowledge was lost as DEPARTMENT changed participants' midway, either because a participant had departed or was moved to another team. The vendor also changed mentors as resources rolled off the project. The DEPARTMENT participants also did not get sufficient hands-on involvement. The Mentor and DEPARTMENT participants were also matrixed to other project activities including Cutover and Go-Live.</p> <p>Resolution and Benefits: The Project team met after the end of all 7 KT cycles to resolve concerns. The vendor Project Manager suggested identifying key areas where immediate Knowledge Transfer sessions were necessary. KT continued even after the formal end of KT activities. KT was also included in CM300 Amendment 5 contract. In Attachment O, Scope of Work for Operations and Maintenance, Task #2.2.23, Knowledge Transfer, stated that this task dealt with transfer of project information to department staff and other Operations and Maintenance partners, including communication and documentation of specific skills and unique knowledge required to operate, maintain and enhance the PROJECT system.</p> <p>Lesson Learned and Recommendations: IV&V observed that project leadership support dropped towards the end of the Realization phase of the project. This was evident in the lack of mid-cycle progress reports and insufficient KT activities. Providing continuous project leadership support would serve to underline the importance of KT activities in providing post Go-Live operational support and motivate the participants.</p> <p>IV&V recommends the following for a thorough and beneficial Knowledge Transfer:</p> <ol style="list-style-type: none"> 1. Complete knowledge transfer activities prior to Go-Live 2. Provide continuous project leadership support, including adequate prioritization and resorting so that KT activities are not pushed aside 3. Provide hands-on involvement by having participants perform project activities to limit project risk and improve success of outcomes 4. Hold the KT team accountable for their progress 5. Select participants who will be available for the duration of the project as well as the post-production effort 	

Lesson Learned Name	Project Pilot Planning
Lesson Learned Number	LL-17
IV&V Oversight Area(s)	Implementation
PMBOK Knowledge Area(s)	Project Integration Management, Human Resource Management, Time Management
Project Phase(s)	Realization, Go Live
ITN Topic(s)	Implementation
<p>Problem and Impact: The Pilot Phase of the State project proved challenging as it related to integration of the SAP systems and the Pilot organization. According to Appendix D of the B211- Rollout Strategy Plan, the Pilot Preparation period was planned as a mechanism to convert the PROJECT Phase I and STATE production systems; during that period, all cases, members and associated data were to be converted to and verified in the new SAP PROJECT. However, a complete exercising of the PROJECT did not happen during pilot. The 175 planned scenarios were incomplete in their coverage of PROJECT processes; indeed, there was no process area whose functionality was completely represented in the scenario set. Noteworthy functions for which there were significant gaps included Establishment and Reporting process areas, and the Payer Coupon, and VRU File interfaces. One missing requirement was a drilldown capability in querying functionality; it resulted in an unknown interaction of PROJECT modules, and an associated issue when work flows were executed that were unintended for certain business scenarios. Further, of the 175 planned Pilot scenarios, only 108 were executed. Thus, there were significant gaps in the scope of end-to-end integrated system testing as the Pilot concluded and the project team prepared for the Go Live. Of the functionality that was tested, the project team was unable to resolve one-third (168 of 509) of the identified defects as Pilot was winding down.</p> <p>Resolution and Benefits: The project team tested a subset of PROJECT functionality, and – with no specific, quantified exit criteria based on functionality satisfactorily completed – was able to exit the pilot phase. The Project Team resolved approximately 67% of the identified Pilot defects prior to Go Live</p> <p>Lesson Learned and Recommendations: The lessons learned from this issue include:</p> <ol style="list-style-type: none"> 1. Ensure the Pilot includes testing the end-to-end integration of all impacted systems. 2. Construct pilot plans and test scripts in coordination with business partners and build a detailed Pilot schedule with resourced activities that demonstrates complete coverage of Pilot scenario execution, validation, and reporting. 3. Establish specific exit criteria for system piloting and perform scope verification to ensure that all requirements have been included in the delivered system. 4. Resolve defects as soon as possible – preferably prior to implementation – to improve product effectiveness upon implementation. 	

Lesson Learned Name	Integration of Training with Project Processes
Lesson Learned Number	LL-18
IV&V Oversight Area(s)	Implementation
PMBOK Knowledge Area(s)	Project Integration Management, Communications Management
Project Phase(s)	Go Live and Support
ITN Topic(s)	Communications, Deliverables, Design, Staff, Training
<p>Problem and Impact: There were a large number of changes needed to the training materials due to a variety of activities and outcomes, including project change requests, defects, and trainer comments received. The PROJECT Training team was not consistently receiving the Impact Analysis (IA) of Change Requests (CR) in order to assess the impact to training. More so, the Support Request for Change process did not allow adequate time to complete the IA for the CR, and to make the updates to the training once the CR had completed User Acceptance Testing (UAT). Constant changes in Interstate Initiating, Order Entry, and other functional areas that were in flux made it difficult to pinpoint the impact to training.</p> <p>The PROJECT vendor, Vendor Consulting, was tasked with updates to training materials pertaining to change requests, defects and User Productivity Kit (UPK) simulations, while Operational Procedures and Training (OPT) staff handled other changes. None of the training materials were stored on the project shared drive, but were housed on the vendor document repository, Vendor's eRoom. It was anticipated that the OPT staff would take responsibility for updating all training materials once Vendor staff had off-boarded, and the training materials would be migrated from the eRoom at the end of the warranty period. However, without a thorough Knowledge Transfer and configuration management process, OPT staff may not be equipped with the skills and artifacts necessary to successfully maintain the training materials.</p> <p>Resolution and Benefits: The Training Manager planned to attend the meetings associated with change requests to ensure that the training impact was assessed. In order to maximize the time allotted in the Support Request for Change process, training staff suggested (1) identifying the courses and procedures to be updated prior to UAT, and (2) revising the training materials once the functional specifications were updated.</p> <p>Lesson Learned and Recommendations: It is suggested that the time allotted in the Support Request for Change process for updating training materials and conducting training is extended because as little as 1 day was scheduled for training updates. Additionally, conducting a thorough Knowledge Transfer for OPT staff to gain the knowledge necessary to maintain the training materials - particularly the specialized skills associated with the Computer Based Training (CBT)/UPK simulations - may prove beneficial. Lastly, the facilitation of a complete document migration from the vendor document depository to the project's secure FileHold document repository would ensure that staff is supplied with the comprehensive archive of training materials.</p>	

Lesson Learned Name	Project Implementation Planning
Lesson Learned Number	LL-19
IV&V Oversight Area(s)	Implementation
PMBOK Knowledge Area(s)	Project Integration Management, Human Resource Management, Time Management
Project Phase(s)	Project Preparation, Realization, Go Live
ITN Topic(s)	Implementation
<p>Problem and Impact: The State Project experienced difficulties and setbacks during project implementation and Go Live. Changes to the implementation date, along with the incompleteness of both the testing and Pilot phases, contributed to the difficulties; the project's inability to resolve the large number of defects from those earlier phases of the project before Go-Live led to a predictably large number of production defects. The Public Assistance interface that went into production precipitated significant issues. Also, external partners were not ready for early Go-Live. For all of those reasons, functionality was phased in whenever it was ready instead of via the Big Bang approach as defined in the B211 – Rollout Strategy Plan deliverable.</p> <p>But the roots of the implementation planning problems extended back to well before the B211 was written; in fact, the problems trace to the very beginning of the PROJECT Phase II effort, for which there was never established a requirement that either Vendor or DEPARTMENT would develop a formal implementation plan. That deficiency was identified as an IV&V finding during the first year of the Project, on 31 March 2009. It took the Project Team more than two years to resolve the deficiency and by that time the project was well into its Integration Testing activities.</p> <p>These setbacks impacted the business ability to properly notify customers and stakeholders of the impending changes, resulting in frustrations for citizens and unclear role responsibilities for the Operations and Maintenance (O&M) teams downstream.</p> <p>Resolution and Benefits: At least in part as a response to the IV&V finding – No Project Implementation Plan, DEPARTMENT approved and baseline an Implementation Plan on 17 June 2011. The State Project Team worked through the issues as they occurred.</p> <p>There was a significant number of workarounds in place for functionality that went into production at Go-Live. Because of lack of testing of the batch schedule either in UAT or Pilot, the project struggled but persevered with batch job issues. The defects and change requests from earlier phases of the project had to be prioritized and scheduled by business. Untested functionality was tested and released into production post Go-Live; Vendor resources were resolving UAT and production defects in parallel, working on change requests, and modifying Functional Specifications.</p> <p>As an additional response to the missing production functionality, the role of the Vendor evolved to include O&M Task Order work.</p>	

Lesson Learned and Recommendations: The lessons learned going forth is to ensure that there is a schedule with a well-defined expectation for developing and publishing a plan to implement the various parts of the project. Recommendations to avoid this issue from occurring include:

1. Create and follow an implementation plan with integrated, resourced work packages in the project schedule early in the project to increase awareness and planning.
2. Assess the implementation impact to customers and stakeholders and plan appropriately to reduce negative outcome during deployment and scheduling.
3. Timely communicate and obtain buy-in for deployment plans and temporary work-around solutions from stakeholders.
4. Adequately project and plan for impact to operations and maintenance teams to minimize cost increases.

Lesson Learned Name	Customer and User Satisfaction Metrics Needed
Lesson Learned Number	LL-20
IV&V Oversight Area(s)	Operations
PMBOK Knowledge Area(s)	Project Integration Management, Communications Management
Project Phase(s)	Project Preparation, Go Live and Support
ITN Topic(s)	Evaluation Methodology, Staff, Workforce Transition, Quality Assurance, Communications

Problem and Impact: There were no defined metrics from the STATE system for customer and user satisfaction; the metrics were needed to determine gaps between the STATE system and PROJECT Phase II system. Project staff cited that differences between the processing on each system resulted in metrics that were not directly comparable. However, without baseline historical data from the old system, it was difficult to quantitatively determine the impact of the new system to quality and productivity, and thus to identify areas for improvement.

Resolution and Benefits: The project team solicited PROJECT Phase II user satisfaction metrics via the PROJECT Annual Survey that was distributed to all employees. The PROJECT Annual Survey employed the use of questions regarding organizational change management, communications, implementation, training, work units, and supervisors while also allowing respondents to utilize free text responses. The project team indicated the possibility of using the same questions in a subsequent survey once the PROJECT Phase II system was fully deployed. Utilizing consistent survey questions to assess user satisfaction at determined checkpoints held the promise of capturing PROJECT Phase II metrics at various intervals during its life cycle that will later be necessary for direct comparison.

Lesson Learned and Recommendations: Determine how baseline metrics will be captured from the old system and define corresponding measurements on the new system that will be directly comparable. System latency, response times, the elapsed time to complete tasks, and other indicators of system performance should be assessed. The resulting metrics should be analyzed to ascertain the effect of the new system on users and customers. Validation of PROJECT key goals, including more expedient processes and maximized automation, will necessitate the analysis of baseline and existing metrics.

Appendix H: Issue Management Plan Template

Project Management Office (PMO)

Issue Management Plan

[DATE]

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1 ISSUE MANAGEMENT

It is a project management best practice to maintain an issue log as the essential tool to support Issue Management. The Issue Log ensures the proper tracking, escalation and resolution of each and every issue identified. This document outlines the use of the Issue log in Issue Management.

Definition of an Issue: A situation that is known to have occurred and that could affect project success.

2 ISSUE RECORDS

For the purpose of this project, Issue Records will be consolidated into an Issue Log. Issue Records detail all the issues identified during the life of the project as well as: their grading in terms of urgency for resolution and seriousness of impact on the project; action plans for resolving each issue; and the costs and responsibilities of the prescribed plans and subsequent results. The PMO has adopted a strategy of tracking issues as such in a log and presenting issues identified as medium and high level for publishing to the weekly status report and/or Issue Register upon request and escalation to the executive team for review and support.

Records include:

- a unique identifier for each issue
- a description of each issue and how it will affect the project
- an assessment of the urgency for resolution and the seriousness/potential impact on the project (medium, high, critical)
- a grading of each issue according to an issue assessment table (Issue Prioritization)
- who is responsible for resolving the issue
- an outline of proposed actions

Issue Records will be maintained throughout the project however, as risk records will change regularly as existing issues are re-graded in the light of the effectiveness of the mitigation strategy, and new risks are identified, issues should be resolved as soon as possible and will either be immediately resolved or escalated until resolution.

Use of the Issue Log

The *Issue Log* has been developed to:

- provide a useful tool for managing and reducing the issues identified before and during the project;
- document issue mitigation strategies being pursued in response to the identified issues and their grading in terms of likelihood and seriousness;
- provide the Executive Team, Staff and vendor teams with a documented framework from which issue status can be reported
- ensure the communication of issue management issues to key stakeholders and between the various project vendors
- provide a mechanism for seeking and acting on feedback to encourage the involvement of the key stakeholders and project vendors

- identify the mitigation actions required for implementation of the issue management plan and associated costing

The issue log will be reviewed weekly.

2.1 Source of Issue Information

The PMO and Project Vendors have agreed to maintain an Issue Log. These issue logs will track and categorize all issues identified. The PMOs of each Vendor and will review these issues weekly and ensure their resolution. Issues identified as High or Critical will be escalated in the Weekly Status report and Executive Management for resolution support.

3 ASSUMPTIONS/CONSTRAINTS/RISKS

3.1 Assumptions

The Issue Management Plan is based on the following key assumptions. Any changes to these assumptions may require future revisions of the Issue Management Plan.

- All Project participants will follow the Issue Management Plan.
- The Issue Management Plan will be a baseline document. If any changes are needed to the Issue Management Plan, it will be subject to the Change Management Process.
- The Issue Management Plan will be followed during the implementation of the Exchange Project as well as during post-implementation, if within scope.

3.2 Constraints

The major constraints facing Issue Management are:

- The Project is constrained by time so issues must be resolved as soon as possible to limit the detriment to the project schedule and risk to the critical path.
- The modular development approach creates additional challenges.
- The Project is constrained by management resources, the oversight, control, management, and mitigation of identified issues will be the shared responsibility of the PMO roles of the vendors/contractors.

3.3 Risks

The primary Risk of the Issue Management is the modular approach and distributed task structure may create a challenge for thorough identification and response plans for all possible issues. These issues may not be identified or addressed properly if ownership is perceived as shared or unclear.

3.4 Risk Mitigation

To mitigate the primary Risk identified above:

1. All Vendors, Contractors and the PMO will identify, log and monitor issues.
2. The PMO role will assume the Issue Management role.
3. All identified issues will be made available for Issue Management in the project repository.
4. All issues captured will be consolidated into a single master Issue Log
5. The above consolidation will occur weekly and will be available for review in conjunction with the weekly status report.

4 ISSUE LOG

To promote overall issue visibility, alleviate issue duplication, and appropriately escalate information, the PMO will consolidate issues of High (Pink) and Critical (Red) Category into a weekly Project Issue Log.

These issues will be presented in the weekly Status Report Dashboard and uploaded to project and CMS (if deemed advantageous) each week to facilitate the running record of Issue Management and provide evidence of regular Issue management activity. The weekly Project Status Report Dashboard ensures visibility for all project participants and stakeholders.

The following section represents the minimum information for issue record retention and should be considered the baseline for issue information. However, should additional information be deemed valuable, the PMO Manager may dictate additional attributes be included.

4.1 Issue Tracking

To ensure complete issue records and standardization of issue management, all issue logs and the issue register, will be comprised of the following and reported in the following order.

Issue Tracking – All issue logs will be comprised of the following in the following order		
Order	Item	Details
1	Issue ID	This ID must be unique, to assure this, all issue ID's will be comprised of: <ul style="list-style-type: none"> a. A vendor/contractor/function abbreviation, e.g. PMO. b. A numeric value that will not be reissued with the resolution of an issue, i.e. 1,2,3...n, etc.
2	Title	Titles should be formulated as a phrased length synopsis of the issue being identified.
3	Description	A narrative synopsis of the issue being identified providing enough detail and background information to inform the reader of the issue while being restricted to approximately 4-5 sentences in length.
4	Urgency Rating	See 4.1.2 Issue Rating below
5	Impact Rating	See 4.1.2 Issue Rating below
6	Issue Prioritization	See 4.1.3 Issue Categorization below
7	Open Date	The date the issue was identified and added to the log or register. If the Status is closed, include the Closing Date (the date the issue was resolved)
8	Impact Summary	A narrative synopsis of the impact the issue has on the business providing enough detail and background information to inform the reader of the impact while being restricted to approximately 4-5 sentences in length
9	Action Plan	Brief description of the preventative or contingency based precautions being taken. Action plans are required of all Issues maintained on the log.
10	Owner	The name, or role, of the individual responsible to monitor and mitigate the issue.
11	Status	See 4.1.1 Issue Status
12	Identified By	The name of the individual or organization who identified the issue
13	Resolution	A narrative synopsis of the resolution of the issue providing enough detail and background information to inform the reader of the resolution while being restricted to approximately 4-5 sentences in length
14	Expected Resolution Date	All issues must identify an expected date for when issue will be resolved. This date should reflect a realistic date that is set as soon as possible given the issue urgency and complexity of the action plan.
15	Last Updated	Date the issue was last updated.

4.1.1 Issue Rating

All Issues will be evaluated based on Urgency and Impact

Issue Rating – Used to Determine Issue Categorization			
Status	Definition		
Urgency	Level denoting how quickly this issue need to be resolved		
Impact	Overall net effect on the completion of the project. Primary factors to consider include scope, timeline, and budget.		
Urgency and Impact (U&I) are identified as one of three (3) levels			
1 – Medium		2 - High	3 - Critical

4.1.2 Issue Prioritization

The following table represents the relationship of the Issue Rating scoring process and the resultant Issue Category.

Issue Prioritization Table

Urgency	3 - Critical	Pink	Pink	Red
	2 - High	Yellow	Pink	Pink
	1 - Medium	Yellow	Yellow	Pink
		1 –Medium	2 - High	3 - Critical
		Impact		

Categorization – Issue Categories Explained		
Category	Definition	Escalation Management
Yellow	Medium: The issue is manageable and/or most likely would not affect the schedule and quality parameters of the project.	Business Owners; Issue identifier must notify the appropriate business owner immediately upon reporting the issue
Pink	High: The issue may require additional resources and/or escalation for resolution as it may affect the schedule or quality of the project.	Project Manager; Business owner must notify the project manager immediately upon escalating an issue to Pink
Red	Critical: The Issue will have significant impact on project success and requires immediate escalation and resources to resolve.	PMO; Project Manager and/or Business owner must notify the PMO immediately upon escalating an issue to Red

4.1.3 Issue Status

Issue Status will be identified as one of the following:

Status – State of the Issue Identified	
Status	Definition
Active	This is used to identify an issue that has been assigned an Owner and is being actively monitored.
Closed	An issue that has been resolved

Version Table			
Version	Date	Revised By	Details

5 REVISION HISTORY

6 PROJECT APPROVAL SIGN OFFS

Project Sponsor

Date

Project Manager

Date

Stakeholder

Date

7 APPENDIX

Issue Log Example

Issue ID	Parent Risk ID	Description	Urgency	Impact	Priority <i>(Urgency and Impact)</i>	Open Date <i>(If Status is Closed include Closing Date)</i>	Impact Summary	Action Plan	Owner <i>(Responsible for mitigation)</i>	Status	Identified By	Resolution	Expected Resolution Date	Last Updated

Appendix I: Sample of Prior Opportunities

IV&V Identifier	[redacted]			
Title	Capacity and Availability Planning			
Risk/Opportunity Description				
<p>[PROJECT] may realize opportunities and benefits by measuring and managing the system and personnel availabilities and capacities, which include: Reduced Resource Costs, ensuring resource availability and creating resource reserves, increased project Skills Inventory management, and identifying Skill Shortages ahead of time.</p> <p>IT system and personnel resources have been identified in multiple project plans; however, it was not clear that measurement data or other planning efforts were used to ensure performance in the following areas:</p> <ul style="list-style-type: none"> ▪ Information Technology (IT) system availability can/will meet established standards or thresholds; for example: system response time, downtime, and uptime. ▪ Proactive system activity planning based on project capacity; for example: moving planned testing to avoid scheduled unavailability periods. ▪ Personnel resources are planned such that particular skill sets are matched and made available to perform the work when needed. 				
Mitigation Recommendation and Status This Reporting Period				
<ol style="list-style-type: none"> 1. Establish measurable standards or thresholds for IT system capacity and availability. <i>Still needed.</i> 2. Monitor and report the IT system capacity and availability against the established standards. <i>Still needed.</i> 3. Proactively plan IT resources and personnel skills to optimize availability per the schedule. [CLIENT] <i>informed Information Technology Services (ITS) receives the most recent schedules for each of the projects as they are finalized. The Projects Office holds regular meetings with ITS in order to proactively plan resources to meet the needs of the schedule. IV&V will continue to monitor communication logs and meeting agendas.</i> 				
Risk Analysis	Probability of Occurrence	Impact of Occurrence	Time Criticality	Overall Exposure
This Reporting Period	Low	Medium	Long Term	LOW
Previous Reporting Period	Medium	Medium	Short Term	MEDIUM

IV&V Identifier	[redacted]			
Title	Expand Deliverable Acceptance Process			
Risk/Opportunity Description				
Review of [PROJECT] Deliverable Acceptance Plan v1.1 includes deliverable review process ; however, it can be improved, resulting in rework minimized and deliverable quality improved :				
<ul style="list-style-type: none"> ▪ Analyze deliverable peer reviews to identify ways to avoid or minimize future rework. ▪ Add deliverable acceptance as a report dashboard (e.g., planned, approved, rejected, number of iterations prior to approval) 				
Mitigation Recommendation and Status This Reporting Period				
<ol style="list-style-type: none"> 1. Update Deliverable Acceptance process with recommendations. 2. Deploy and monitor revised acceptance process (e.g., with a dashboard or summary in monthly or quarterly reports). 				
[PROJECT] project provided multiple samples of completed deliverable checklists. IV&V is closing this Opportunity, which is sufficiently implemented.				
Risk Analysis	Probability of Occurrence	Impact of Occurrence	Time Criticality	Overall Exposure
This Reporting Period	Low	Medium	Short Term	LOW
Previous Reporting Period	Low	Medium	Short Term	LOW

IV&V Identifier	[redacted]			
Title	DDI performance measures for business objectives			
Risk/Opportunity Description				
<p>The [PROJECT] employed metrics in planning and reporting. Examples included: Vendor SOW Amendment #1 Deliverable Performance Measures, Yes/No status reporting on project constraints (e.g., budget, schedule, scope), and Key Performance Indicator (KPI) reporting. However, metrics were not identified to demonstrate progress in achieving business objectives. There is an opportunity to align KPI's with business objectives so that there is assurance the objectives are being achieved through the lifecycle.</p>				
Mitigation Recommendation and Status This Reporting Period				
<ol style="list-style-type: none"> 1. Identify select business objectives to be measured, e.g., from the Charter Section 2.2 – Business Objectives and/or the Schedule IV-B Section III-Success Criteria table. 2. Determine [CLIENT]-approved measure(s) that can demonstrate progress in meeting selected objectives. 3. Analyze data and use the measures to report progress to Project and Executive Steering Committees and include metrics in Monthly and/ or Quarterly reporting. <p>[PROJECT] <i>provided a business objectives workbook that tracked the Charter/ Schedule IV-B Section 2 objectives and their completion status. IV&V will continue to monitor for the use of performance measure(s) to report progress in achieving objectives based on the workbook data.</i></p>				
Risk Analysis	Probability of Occurrence	Impact of Occurrence	Time Criticality	Overall Exposure
This Reporting Period	Medium	Medium	Long-Term	MEDIUM
Previous Reporting Period	Medium	Medium	Long-Term	MEDIUM

IV&V Identifier	[redacted]			
Title	Plan and execute a peer review process			
Risk/Opportunity Description				
<p>IV&V examined [PROJECT] <i>Quality Management Plan v1.1</i> and <i>Deliverable Acceptance Plan</i> but did not find a documented process to conduct, collect, track, analyze, and report peer review data. Peer reviews help ensure quality assurance activities are planned and performed throughout the life cycle. The project has the opportunity to reduce rework time and cost by proactively peer-reviewing work products throughout the life cycle.</p>				
Mitigation Recommendation and Status This Reporting Period				
<ol style="list-style-type: none"> 1. Establish written requirements for product and process peer reviews through the life cycle. <i>The Deliverable and Test Tracking Process documented an outline of steps for peer review. It included a sample log, and the project teams affirmed its use. This recommendation is largely addressed.</i> 2. Plan, schedule, and conduct peer reviews. <i>[CLIENT] planned and performed reviews using Document Completeness and Correctness Checklists.</i> 3. Collect, track, analyze, and report peer review data to continuously improve. <i>The Deliverable and Test Tracking Process documents included logs; Lessons Learned and subsequent Action Log entries verified peer review data were actively supporting continuous improvement efforts. This recommendation is satisfied.</i> 4. Take corrective action based on analysis of peer reviews to identify improvements. <i>The Deliverable and Test Tracking Process documents included logs from which improvements were identified – see Recommendation #3 immediately above; corrective actions were managed in the project RAID logs. This recommendation is satisfied.</i> <p><i>This opportunity has been sufficiently implemented.</i></p>				
Risk Analysis	Probability of Occurrence	Impact of Occurrence	Time Criticality	Overall Exposure
This Reporting Period	Low	Medium	Long-Term	LOW
Previous Reporting Period	Low	Medium	Long-Term	LOW

IV&V Identifier	[redacted]			
Title	Expand risk log template			
Risk/Opportunity Description				
Risk management plan and risk log updates and implemented process changes can improve project risk management by: Updating risk priority assignment procedure, adding fields (columns) to the risk register, and using risks to reduce future project risk.				
Mitigation Recommendation and Status This Reporting Period				
Revise the Risk Management Plan and Risk Log and implement improvements:				
<ol style="list-style-type: none"> 1. Prioritize risks and opportunities according to their probability and impact of occurrence, at a minimum. <i>Risk Log included probability and impact.</i> 2. Add fields (columns) in the Risk Log: Trigger (event/situation that could cause the risk to occur); planned dates to accomplish each step for risks with mitigation strategies; and planned dates to review each entry in the Log. <i>The Risk Log included a column to identify triggers; however, there was no guidance on how to identify triggers, and the column was not populated.</i> 3. Improve efficiency of staff work on risk management by developing mitigation or capitalization strategies for items that can be successfully mitigated/implemented, offer the best return on resource investment, and whose exposure rating is the highest. <i>The Risk Log prioritized each risk.</i> 4. Cross feed lessons learned from the risk/opportunity efforts to improve future projects, e.g., via the [CLIENT] Program Management Office. <i>[PROJECT] began documenting Lessons Learned during the first calendar Quarter of 2021 as a worksheet in the [PROJECT] Log workbook. Action Log provided evidence of cross feed/use of Lessons Learned for future improvement.</i> 				
<i>This opportunity has been sufficiently implemented.</i>				
Risk Analysis	Probability of Occurrence	Impact of Occurrence	Time Criticality	Overall Exposure
This Reporting Period	-	-	-	CLOSED
Previous Reporting Period	Low	Medium	Short-Term	LOW

Appendix J: IV&V Report Quality Checklist

Use these checklist items when providing input and when performing peer review of SES project deliverables.

DESCRIPTION	NOTE OR EXAMPLE
General	
Use the baseline template to create the document	
Writing style	
Report what we observed during the past period; state what 'was', not what 'is'	"PM approved requests" instead of "PM approves requests"
Write in the active voice (subject-verb-object) where reasonable	Say "IV&V conducted three interviews" Avoid "Three interviews were conducted"
Capitalize a word when used as proper name or title	IV&V submitted a letter fulfilling requirement for attestation IV&V submitted the AL VLP v37 Step 1 Attestation letter
Numbers are spelled where required	Example: Thirty days later, ... (must be spelled to begin a sentence) Example: IV&V required three interviews and conducted 30 product evaluations (must be spelled for numbers less than nine, but 10 or larger can be numbers)
Appearance	
Text is Calibri 12-font for all narrative	
One space (not two) after a period, semicolon, or colon Multiple corrections made (two spaces after period)	
Readability	
Title page is a dedicated separate page	
The Document Control / History begins on a new page	

DESCRIPTION	NOTE OR EXAMPLE
General	
Use the baseline template to create the document	
The Table of Contents begins on a new page	
Each major header begins on a new page Correction made for Section 4 to begin on new page	Generally, this is all Level 1 headers, and may include Level 2 headers Use the Page Break feature to retain desired start points at top of page
Each appendix begins on a new page	
Any addendums begin on a new page	
Tables	
Header fill color is standardized throughout document	
Table text is Calibri 11-font text	Can be smaller if there is a lot of text (but first try being more concise)
Number of lines of text in table rows is three or less wherever possible, and generally of consistent height; there are no paragraphs	Reduce text quantity, adjust column widths, and or break up into separate rows
Bullets	
Generally, bullet shape is be the same throughout the document	<ul style="list-style-type: none"> ▪ Different bullet may be used to draw more attention to it, if needed
Each sentence begins with a capital letter	
Sentences do not have punctuation at the end	Exception: Use punctuation of there is more than one sentence
Bullets consume only one line	Reduce text quantity, or break into multiple phrases (bullets)
Consistency and Standardization	
Dates of an event are the same when referenced more than once	
Define each acronym upon its first appearance	

DESCRIPTION	NOTE OR EXAMPLE
General	
Use the baseline template to create the document	
The Acronyms appendix (if it exists) includes all acronyms defined in the document	
Document version and date is the same throughout	Title page, page headers in all sections, Document Control page, appendices
The document's main body references each appendix at least once	
Appendix references are to the correct document	
AL MMIS specific items	
Artifacts Reviewed Appendix C Monthly Report; the options for "Evaluation Type" are	<p>"Formal Evaluation". These correspond to all project documents for which we produced a Product Evaluation worksheet, not submitted to client. NOTE: I changed Karen's entries, assuming they are all of this type (she had used the phrase "Product Evaluation")</p> <p>"Deliverable Review". All documents we performed an AMA-requested Deliverable Review in the standard format, submitted to client.</p> <p>"Product Inspection". Any project artifact we loaded to our SharePoint repository and reviewed/inspected, but did not do either a Product Evaluation Worksheet or a Deliverable Review.</p>
Acronyms List	Each analyst must update any newly discovered acronyms for each monthly report.

Appendix K: Sample Weekly Status Report

CLIENT

**Independent Verification and Validation (IV&V) for the
State MME/MMIS**

**Final Weekly Status Report
July 11, 2016**



1311 Fort Crook Rd South, Suite 100
Bellevue, NE 68005

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Document Control

This is a controlled document. The control and release of this document is the responsibility of the document owner.

Version control					
Document reference	WSR-06	Project	STATE Modular Medicaid System (CLIENT)		
Version	1.0	Date	07-11-16	Owner	Jim Moudry
Document title	Weekly Status Report (WSR) IV&V CLIENT				
Version History					
Version	Date	Author	Comment		
0.1	07/05/2016	Moudry	Draft for State Review		
1.0	07/11/2016	Moudry	Final Weekly Report		

We have reviewed and agreed to the information described in this document and referenced attachments.

Weekly Status Report (WSR)-01 IV&V CLIENT Approval			
Name	Title	Date	Signature
Jim Moudry	IV&V Project Manager, SES	07/11/16	<i>Jim Moudry</i>
Raj Sharma	Quality Management Office (QMO), SES	07/11/16	<i>Raj Sharma</i>
	PMO Chair, CLIENT		

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1 – CLIENT Project Quality

1.1 Project Summary

This report is an independent assessment of the strengths, risks and key issues associated with the CLIENT, STATE Modular Medicaid System (CLIENT). The following table provides a summary of the project for the June 2016 Weekly status report.

Current Phase (Stage 1):	Requirements Analysis, Definition, and Validation
Accomplishments This Reporting Period (June 2016):	<ul style="list-style-type: none"> ▪ DDI VENDOR delivered the following documents in June: <ul style="list-style-type: none"> ○ Module 1 System Testing Plan on 06/03/16 (Baseline completion date was 06/20/16) ○ Module 3 System Testing Plan on 06/03/16 (Baseline completion date was 06/20/16) ○ Module 4 System Testing Plan on 06/03/16 (Baseline completion date was 06/20/16) ○ Module 5 System Testing Plan on 06/09/16 (Baseline completion date was 06/20/16) ○ Module 8 System Testing Plan on 06/03/16 (Baseline completion date was 06/20/16) ○ Technical and Global Requirements Validation Document (RVD) on 06/03/16 ○ Project Management RVD on 06/03/16 ○ Test Evaluation Plan Management on 06/09/16 ▪ The Takeover move to the VPC went live on 06/26/16. Phone upgrade as part of takeover has slipped to 8/5/16. ▪ Stage 1 BDD and RVD documents submission delayed for modules 1, 4, & 8. ▪ The State and DDI VENDOR continued weekly status report reviews that included discussion of accomplishments, planned activities, deliverable status, risks, and issues. ▪ CLIENT Team Leads status meetings also continued weekly. ▪ Joint CLIENT/DDI VENDOR PMO meetings continue on a weekly basis. ▪ Project Steering Committee Meetings held on June. ▪ Change Control Board (CCB) held its first meeting June 21 and approved three of four Change Requests presented. The other is

Planned Accomplishments for Next Reporting Period (July 2016)	Contract Deliverables: <ul style="list-style-type: none"> • Module 1 Business Design Document (BDD) approval by the State is expected 7/6. Last month the expected approval date was 6/21. • Module 3 BDD approval by the State is expected 7/1. Last month the expected approval date was 6/21. • Module 5 BDD approval by the State is expected 7/11. Last month the expected approval date was 6/21. • Module 1 Detailed System Design (DSD) – Delivery to State expected 7/21. • Module 3 DSD – Delivery to State is tracking ahead of the baseline delivery date of 8/3, with a forecast delivery date of 7/21. • Module 4 DSD – Delivery to State has slipped from 6/28 to 7/7 due to DDI VENDOR internal review of the document taking longer than expected. • Module 5 DSD – Delivery to State slipped from 6/17 to 7/7 due to DDI VENDOR internal review of the document taking longer than expected. • Module 8 DSD – Delivery to State slipped from 6/22 to 7/7 due to late changes to the content by Cerner and DDI VENDOR internal review of the document taking longer than expected. • Quality Management Plan and Test and Evaluation Management Plan approvals. • Requirements Validation sessions for Module 2, Claims, start July 12. 			
Biggest Project Challenges:	<ul style="list-style-type: none"> • Integration of modular components. • Phased implementation approach to synchronize IT modules with MITA business approach (e.g., Pharmacy can span across multiple modules). • Unforeseen Federal rules/policy changes 			
Project Status/ Performance	Performance Indicator Panel Key			
Overall:	GREEN Green: no substantive risk identified Yellow: substantive risk identified and must be actively managed Red: identified issue – requires timely resolution			
SCOPE	SCHEDULE	COST	QUALITY	STAFFING

The following table lists the status of key indicators contributing to the color ratings shown above.

Key indicators		
Indicator(s)	Value	Comment
Is the project approach sound?	Yes	The overall project approach is based on industry leading practices, methodologies, and tools.

Is the project on time?	No	<p>Submission of BDD and RVD documents for modules 1, 4, and 8 are behind schedule resulting in Stage 1 SPI of 0.90, was 0.91 the end of last month.</p> <p>The SPI for Stage 2 was 1.41 on May 30. On June 27, it was 0.95. There is a delay in the Stage 2 Implementation Plan due to a resource constraint with the system architect and team working the VPC move and the Modernization setup tasks. With VPC go-live on June 26, it is expected that the Stage Implementation SPI will begin to improve.</p>
Is the project on budget?	Yes	Project is currently on budget.
Is scope being managed so there is no scope creep?	Yes	Scope is actively managed. Stage 1 RV sessions have validated scope.
Are the project's future risks identified?	Yes	A joint State/DDI VENDOR risk register is being maintained.
Are the project's risks being evaluated and mitigated on a regular basis?	Yes	Risks are being evaluated, updated and reported weekly.
Is project process and product quality being managed and does quality meet defined quality standards and requirements?	Yes	Work products delivered to date are of acceptable quality.
Are key staff positions filled in a timely manner? Is staff turnover proactively managed? Are adequate resources provided to accomplish tasks and maintain project schedule?	Yes	All key positions are filled. There is some concern of the adequacy in staffing because the Stage 2 Implementation Plan schedule suffered due to system architect and his team working the VPC move and Modernization setup tasks. This should correct now that the VPC move is complete.
Are there new or emerging technological solutions that will affect the project's technology assumptions?	Unknown	Modular approach and new and emerging technology assumptions were considered during the proposal evaluation process. Risk #3 documents risk around the modular approach.

1.2 Observations

1.2.1 NEW OBSERVATIONS

The following tables identify new observations for this reporting period. The first table identifies observations needing corrective action and the second table identifies positive observations that do not need corrective action, but need to be continued.

Observations Requiring Corrective Action:

Observation #	Description
201606-01	The new CMS Medicaid Enterprise Certification Toolkit and Lifecycle were released in March 2016 and the DDI VENDOR Certification Management Plan and schedule have not yet been updated so planning for certification activities may be finalized. This observation relates to Risk # 4 mitigation, which has not been updated since the risk was entered.
201606-02	In Weekly Status Report Section 3- Progress to Schedule, the table has three dates- Baseline Completion, Forecast Completion, and Actual Completion. Is there a clear definition for these dates? If a deliverable has Forecast Completion and/or Actual Completion dates that are after the Baseline Completion date, does this mean that the deliverable is behind schedule?
201606-03	The Change Control Request (CCR) Form has the following fields/data elements: Description of Requested Change, Requirement Text (to be copied into a new requirement if necessary and the CCR is approved), Pricing Impact (if any), and Conditions for approval; however, it may need additional fields/data elements such as Impact on Scope, Duration, Resources, Deliverables, Processes, and Quality to ensure all elements of a complete change impact analysis are considered.
201606-04	Detailed System Design (DSD) document submittals for Modules 4, 5, and 8 are being delayed due to DDI VENDOR internal document review taking longer than estimated due to the size of the documents. In addition, the Stage 2 Implementation Plan schedule suffered due to the system architect and his team working the VPC move and Modernization setup tasks in lieu of the Stage 2 tasks. This would indicate that perhaps estimation factors (size, complexity, connectivity, availability, structure, overlap of tasks, skills, environments, tools, associated risks, and rationale) were not properly estimated in order to assure staff capacity and availability to perform these activities in the time frames estimated.

Positive Observations Not Requiring Corrective Action:

Observation #	Description
201606-05	Proactive communication and interaction by DDI VENDOR with key stakeholders (State and Federal partners).

201606-06	The DDI VENDOR/CLIENT project is adaptable to address needs identified by key stakeholders such as updates to weekly status report layout.
201606-07	The State and DDI VENDOR have identified and documented several “Lessons Learned” from the Takeover move to VPC and are in the process of analyzing those lessons learned to determine how they could be applied to subsequent activities.

1.2.2 PREVIOUS OBSERVATIONS

The following tables provide a running tally of previous open IV&V observations regarding the CLIENT project. The first table identifies observations needing corrective action and the second table identifies positive observations that do not need corrective action, but need to be continued. Each observation will be uniquely numbered to represent the month it was initiated and will run in order from the oldest to the newest. Observations that have been closed are included in Appendix B.

Observations That Required Corrective Action:

Observation #	Description	What’s Been Done	What’s Still Needed	Status
201603-02	Level of effort for scheduled tasks within the next 90 days exceeds best practice guidelines – some significantly exceed guidelines. For example, Security Architecture tasks 1101 and 1102 of the Stage I Implementation Project Plan (31 March 2016) are 360 hours each. Task 1460 for test case creation is 544 hours. Levels of effort that large are difficult to accurately estimate and track.	Because of the large size of the teams on certain tasks (e.g. RV sessions), it was difficult to get the effort down to 40-80 hours. Instead, we have focused on getting the duration and hours per resource down to within 80 hours. In addition, KITO has relaxed their requirement of no more than 80 hours on tasks. Some of the tasks have been broken into "Part 1", "Part 2", etc. which is not very descriptive.	Add specificity to tasks that have been broken down into “Part 1”, “Part 2”,etc.	In Progress

Observation #	Description	What's Been Done	What's Still Needed	Status
201604-01	There appear to be discrepancies among deliverables submittal and approval dates in Section 2 and Section 3 of the weekly status report and the project calendar. Need to ensure these dates are all aligned. In addition, it would be helpful to retain dates for items that are designated as complete in the Deliverables table in section 3 of the status report.	Dates in Sections 2 and 3 (now Sections 3 and 5) now align and match.	When items in the table in Section 5 are completed, the table only reflects "Complete" and the date is dropped. Part of the recommendation was to also show the completion date for these items.	Positive Progress
201605-01	In the May 30, 2016 Weekly Status Report, Schedule Performance Index (SPI) values for each module reported in Section 5 and 6.2 do not match. For example, the SPI for Module 3 is reported as 0.79 in Section 5 and as 0.90 in Section 6.2.	Quality control improvements were implemented to cross-check this information to identify and correct discrepancies. Values matched in the June 6 Weekly Status Report. The June 13 report again had some discrepancies, but the June 20 and 27 reports did not.	Continue to monitor to ensure SPI values are correctly reported in Weekly Status Reports and there are no conflicts between values reported in the two sections of the report. This observation will be closed after six weeks with no discrepancies in SPI values.	Positive Progress
201605-02	The Weekly Executive Status Report required by the CLIENT Communication Management Plan is not being submitted.	The format/content for the Weekly Executive Status Report has been agreed by the State and DDI VENDOR and the first report is scheduled to be provided by July 10 for the month of June.	Monitor that the first Weekly Executive Status Report is submitted in July. This observation may then be closed.	Positive Progress

Observations That Originally Required No Corrective Action:

Observation #	Description	What's Been Done	What's Still Needed	Status
---------------	-------------	------------------	---------------------	--------

201601-04	Requirements Validation (RV) process is well understood and being followed. RV meetings are on schedule and appear to provide a good platform to ensure a reconciliation of requirements to the RFP and a common understanding of the requirements between DDI VENDOR and the State.	Continued productive RV process	Monitor for Stage 2	On-going
201605-05	DDI VENDOR and the State have taken IV&V findings, observations, and recommendations into careful consideration and have established an excel spreadsheet to track considerations, actions, and progress being made to address each of the IV&V items. Several IV&V items have been implemented by the project.	The tracking spreadsheet is being maintained.	Continue to monitor and track.	On-going
201605-06	The State and DDI VENDOR have identified and documented several "Lessons Learned" from the Requirements Validation (RV) sessions with the intention of using the lessons learned for the upcoming Stage 2 RV sessions.	Lessons Learned have been reviewed are being used for planning the Stage 2 RV sessions.	Analyze how the lessons learned are being utilized for the Stage 2 RV sessions.	On-going

1.3 Risks

The following table summarizes the risks identified by the project and by IV&V as indicated. Two new risks (14 and 15) were added in June, one of which (14) was subsequently closed. There were no changes to Probability or Impact ratings for any of the previously existing risks in June 2016. Refer to the project risk log for more detailed information about project risks.

Risk #	Description	Probability	Impact	Mitigation Plan and What's Been Done
1.	Scope Management for Legacy System Changes - During DDI, there will continue to be changes made to the legacy system; there is a risk since the scope of these future changes is unknown at this time. DDI VENDOR assumes they will use system modification hours to perform the work to add these changes to the new CLIENT. There is also a risk that changes would be missed because multiple systems.	Moderate	Medium	DDI VENDOR plans to monitor changes through the change control process. Module teams will review outstanding CSR's that are on hold/deferred, and will include those in Requirements
2.	Federal Changes - Unforeseen Federal Rule/Policy changes during the course of the project could impact schedule and cost.	Moderate	Medium	Monitor Federal Rules/Policy changes through our policy teams and make sure that the potential changes are identified according to the Change Control Process.
3.	Modular development, because this is new and no State has done this before, there is a risk for unforeseen changes that could impact schedule and cost.	Moderate	High	Monitor changes during Requirements Validation, Design, and Development for schedule impacts.
4.	Certification – CMS has released updates to certification guidelines to a modular approach. Guidelines were not finalized/completed by the schedule creation and drafting of Certification Management Plan. CLIENT project team should evaluate changes for impacts to schedule, scope, budget, and/or certification strategy.	Moderate	Medium	DDI VENDOR has a dedicated Certification Manager who will perform a detailed review of the new CMS Guidelines will be conducted when the guidelines are published in early 2016. The Certification Management Plan will be updated to reflect changes in the guidelines. (Although the new CMS Medicaid Enterprise Certification Lifecycle and Toolkit were released in March 2016, the Certification Management Plan and Schedule have not yet been updated.)
5.	Off-Shore Risk – Access PHI - Because of Off-Shore resources being used on this project there is a Risk of Off-Shore resources accessing PHI.	Low	Medium	This is mitigated by making sure that Off-Shore staff never has access to a production system. All testing that needs “real” data would be scrubbed before putting into a development or testing environment.

Risk #	Description	Probability	Impact	Mitigation Plan and What's Been Done
6.	Off-Shore Risk – Transmitting PHI - Because of Off-Shore resources being used on this project there is a Risk of Off-Shore resources transmitting PHI or issues over email.	Low	Medium	This is mitigated by not making PHI available or necessary for Off-Shore workers. If PHI is transferred by e-mail (not Off-Shore) the DDI VENDOR process is to use Zixmail for transmitting PHI so encrypted on both ends. This ensures email is Secure.
7.	State availability of key staff and decision makers during RV sessions	Low	Medium	DDI VENDOR will publish the session agenda and requirements that will be covered for each session. • State leadership will ensure that key staff and decision makers will be present as necessary for the meeting sessions. Will utilize the State Team Leads as much as possible for this responsibility. • State leadership will request that the scheduled requirements be shifted if necessary to accommodate schedules for key leadership to attend. • Unresolved issues and action items will be escalated as necessary, according to the escalation process.
8.	Background Checks	Low	Medium	Monitor through DDI VENDOR HR.
9	PR2 Revamp project. The new Federal Managed Care Ruling was released on 04/25/2016. It is expected that this ruling will require that providers be enrolled in Medicaid and be issued a single Medicaid ID number in order to participate in Medicaid managed care. CLIENT and DDI VENDOR are implementing a PR2 Revamp project to accomplish this. This will require a great deal of coordination between DDI VENDOR and the three managed care plans and subcontractors. Possible impact to resources and schedule.	Moderate	Medium	Analyzing impact of the published ruling. Closely monitor throughout the lifecycle of the project for interdependencies and potential points of impact.

Risk #	Description	Probability	Impact	Mitigation Plan and What's Been Done
10	Impact of New Federal Managed Care Ruling. The new Federal Managed Care Ruling was released 04/25/2016. It is expected that the ruling may require several changes that may impact CLIENT. One such expected change is that providers be enrolled in Medicaid and be issued a single Medicaid ID number in order to participate in Medicaid managed care (see Risk 9). There may be other changes that come out of this new ruling. Possible impact to resources and schedule.	Moderate	Medium	Analyzing impact of the published ruling. Closely monitor throughout the lifecycle of the project for interdependencies and potential points of impact.
11	Fitness of use. The use of COTS products in modular MMIS approach introduces risk of either too much customization (not truly interoperable and capable of future competition) or too little customization (not full meeting the State's needs and limiting the State's options in the future). (This was suggested by the quarterly IV&V report in April 2016.)	Moderate	Medium	Monitor fitness of use, addressing State's needs and gaps, through requirements validation and design. Involve the Stare team as much as possible to proactively create UAT test cases with real world situations to address any issues with gaps as early as possible.
12	State availability of key staff and decision makers for project activities. (This was suggested by the quarterly IV&V report in April 2016.)	Moderate	Medium	Closely monitor, working proactively to address potential resource constraints as soon as possible.

Risk #	Description	Probability	Impact	Mitigation Plan and What's Been Done
13	Visibility into Product Agile development. Because CLIENT and CLIENT Project Leadership are not embedded with the DDI VENDOR Product Scrum development teams, there is a Risk of undetected errors in design and development over the 3-month deliverable review cycles. (This was a recommended risk from the IV&V Quarterly Report April 2016.)	Moderate	Medium	DDI VENDOR PMO will work closely with Product Team to trace requirements to functionality in each release for reporting and mitigation, as appropriate.
14	Because the critical path is not identified/verified between the CLIENT schedule for takeover and Stage, IV&V recommends identifying dependencies between the respective component schedules, and tracking and reporting on the critical path of the overall MMIS program schedule. (This was recommended risk 04-01 from the IV&V April 2016 Weekly Report.)	Moderate	Medium	Decision was made in Joint PMO Meeting on 6/6/2016 to move the remaining Modernization setup and development tasks from the Takeover to Stage 1 schedule to allow for clear identification of dependencies and delineation of the critical path. This was completed on 6/9/2016. The risk was subsequently closed.
15	Because delays in finalizing Business Associate Agreements (BAA) and Memorandums of Understanding (MoU) with business partners could result in schedule slips and delay in execution of project activities, the IV&V recommends identifying required BAA and MoU's and laying out plans to revise or establish them to support the accomplishment of scheduled project activities. (This was recommended risk 05-01 from the IV&V May 2016 Weekly Report.)	Moderate	Medium	Risk is being reviewed for identification of appropriate mitigation activities.

No new risks identified in this Weekly report.

1.4 Project Performance Metrics

The metrics included in this section will vary according to project phase and major activity.

Requirements

Stage 1 requirement validation activities have concluded. The table below depicts total requirements across modules and functions for Stage 1.

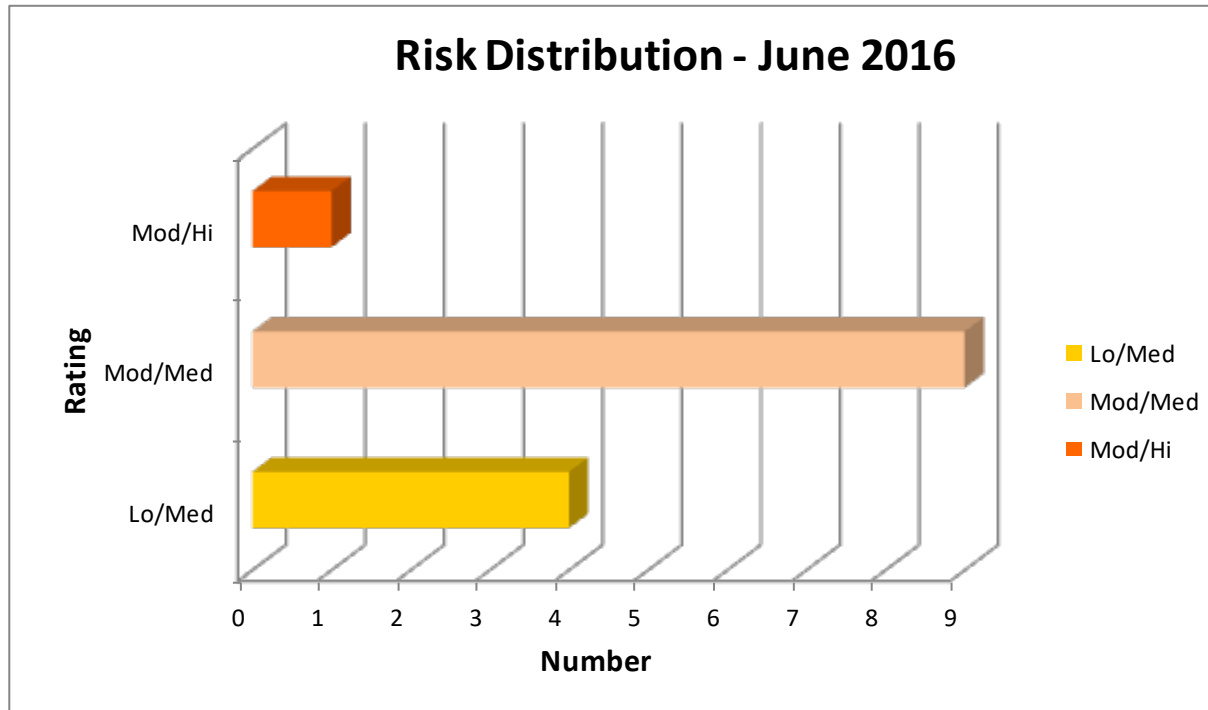
	Mod 1 CSSP	Mod 3 Prov Mgmt	Mod 4 PI/UR	Mod 5 Dashboard	Mod 8 DW	PM	Tech	Takeover	Ops	Total
Total # Reviewed	207	106	87	54	136	255	617	251	89	1802
# Signed Off	205	105	56	54	132	254	566	246	87	1705
# of Action Items	0	0	0	0	0	0	0	0	0	0
# of Ready for Review	0	0	0	0	0	0	0	0	0	0
# of Cancelled	0	1	28	0	1	0	0	4	2	36
# Duplicate	1	0	0	0	2	0	51	1	0	55
# of Deferred	0	0	0	0	0	1	0	0	0	1
# of Transferred	1	0	3	0	1	0	0	0	0	5
# Need to Review	0	0	0	0	0	0	0	0	0	0

1,705 of 1,802 total requirements have been signed off. The breakdown of the 97 requirements that have not been signed off is shown below:

Category	Number
Duplicate	55
Cancelled	36
Transferred	5
Deferred	1
Total	101

Requirements validation activities for Stage 2 will begin on Jul 12th for Module 2, Claims.

Risks



Two new risks were identified by the project in June, with one of them closing prior to end of June, resulting one added Moderate/Medium risk displayed in the chart above. Risk ratings for the previous risks were unchanged in June.

Project Work Plan (from mpp files)		
Active Tasks 90 Days Ahead	Tasks >80 hrs	Tasks > 160 hrs
KMMS Takeover Plan 29 Jun 16	4	2
KMMS Stage 1 Implem. PP 30 Jun 16	151	72
KMMS Stage 2 Implem. PP 29 Jun 16	25	16

07112016

Schedule

This Work Plan graphic summarizes some of the key features of scheduled activities/tasks that can impact the ability to accurately estimate project activity; in this case all activities are during the next 90 days (July-Sep 2016).

Ideally there would be no tasks meeting the graphed criteria in the forward looking 90-day period. However, as explained in Observation 201603-02 on page 6, because of the large size of the teams on certain tasks (e.g. RV sessions), it is difficult to get the effort down to 40-80 hours. Instead, the project focus is on getting the duration and hours per resource down to within 80 hours. In addition, KITO has relaxed their requirement of no more than 80 hours on tasks.

2 – IV&V Activity Summary

Interview(s) Conducted	None.
Meetings Attended	<p>Joint CLIENT/DDI VENDOR PMO meetings</p> <p>Team Leads meetings</p> <p>Steering Committee meetings</p> <p>RV Follow-up meetings</p> <p>Meeting on New CMS MMIS Certification Requirements</p> <p>Technical Architecture meeting</p>
Artifacts Reviewed	<p>Risk Register</p> <p>Issues and Decisions Register</p> <p>CLIENT Communication Management Plan</p> <p>CLIENT Certification Project Plan (schedule)</p> <p>CLIENT PM Oversight Project Plan (schedule)</p> <p>CLIENT Takeover Project Plan (schedule)</p> <p>CLIENT Stage 1 Implementation Project Plan (schedule)</p> <p>CLIENT Stage 2 Implementation Project Plan (schedule)</p> <p>Module 1 Business Design Document (BDD)</p> <p>Module 4 BDD</p> <p>Module 5 BDD</p> <p>Module 8 BDD</p> <p>Module 1 Requirements Validation Document (RVD)</p> <p>Module 3 RVD</p> <p>Module 5 RVD</p> <p>Weekly Status Reports</p> <p>Weekly Project Calendar</p> <p>Joint PMO Meeting Agendas and Minutes</p> <p>Steering Committee Agenda and Minutes</p>
Obstructions or Barriers to IV&V	None
Recommended Priorities for Next Reporting Period	<p>Project Management</p> <p>Requirements Development and Management</p> <p>Quality Management</p> <p>Risks and Issues Management</p> <p>Design</p>

Appendix B: Closed IV&V Observations

Observations That Required Corrective Action:

Observation #	Description	What's Been Done	What's Still Needed	Status
201601-01	DDI VENDOR Quality Assurance (QA) Manager and Testing Manager positions are not yet filled.	QA Manager and Test Manager positions have been filled.	Nothing.	Complete. Closed.
201601-02	Several Virtual Private/Public Cloud (VPC) move tasks with baseline finish dates in January showed either 25% or 0% complete status at the end of the month and showed new later estimated completion dates. For example, testing activity was not specified.	<p>Need for more comprehensive testing was identified. The impact was assessed to determine that completion of VPC activities and VPC go-live would be delayed to 6/26.</p> <p>Continuing to track in WSRs and Steering Committee.</p> <p>Modernization setup tasks were moved out of the Takeover scheduled and into the Stage 1 schedule. This allows for a clear view of the clear critical path in Stage 1.</p> <p>VPC go-live completed on 6-26-1016.</p>	Nothing	Complete. Closed.
201601-03	The role of the DDI VENDOR Product team in the project and their relationship with the DDI VENDOR Systems Integration team and the State project team is not clear to all project participants.	Role and relationship of the DDI VENDOR Product Team with the State Integration Team have been clarified.	Nothing.	Complete. Closed.

Observation #	Description	What's Been Done	What's Still Needed	Status
201603-01	The Takeover and Implementation Project Plans' respective time periods (11/2/15-6/5/16 and 11/2/15-10/2/17) overlap; however, it is not clear that activity dependencies between them are completely known. The overall Stage 1 critical path to implementation is therefore difficult to ascertain, leaving in question the reliability of the estimated project completion dates.	Modernization setup tasks were moved out of the Takeover scheduled and into the Stage 1 schedule. This allows for a clear view of the clear critical path in Stage 1.	Nothing.	Complete. Closed.
201604-02	Weekly Status Report Section 2 Progress to Schedule currently has a column titled "Forecast/Actual Completion". It is difficult to know if the dates shown in this column are forecast and not yet met or actual and completed. Recommend separating this column into two columns, one titled "Forecast Completion" and the other titled "Actual Completion".	Beginning with the May 16, 2016 weekly status report, two columns were presented; one for "Forecast Completion" and the other for "Actual Completion."	Nothing.	Complete. Closed.
201604-03	The project status report should include graphs showing Schedule Performance Index (SPI) trending from week to week.	Overall Takeover and Stage 1 SPI trending was included starting with the May 16, 2016 report; and individual Module SPI trending was included starting with the May 23, 2016 report.	Nothing	Complete. Closed.

Observation #	Description	What's Been Done	What's Still Needed	Status
201604-04	Weekly Status Report should include a section for "Planned Accomplishments This Period Not Started or Not Completed on Time".	Although not a separate section, the "Progress to Schedule" Section and Table includes columns for "Baseline Completion", "Forecast Completion", and "Actual Completion"; making it possible to determine deliverable tasks that are behind schedule.	Nothing	Complete. Closed.
201604-05	The DDI vendor should address SPI values less than 1.0 by providing a recommended action plan to return the schedule performance to an acceptable level (≥ 1).	The Weekly Status Report now includes a section detailing plans to return SPI to an acceptable level at both the stage and individual module levels.	Nothing	Complete. Closed.

Observations That Originally Required No Corrective Action:

Observation #	Description	What's Been Done	What's Still Needed	Status
201601-05	Risks are being identified, analyzed, and updated on a weekly basis.	Continued effective risk process	N/A	Complete. Closed.
201601-06	Project governance and escalation process is well documented and understood.	No change	N/A	Complete. Closed.
201602-01	iTrace repository is relatively easy to navigate.	No change	N/A	Complete. Closed.
201604-06	Transition from the departing DDI VENDOR DDI Manager to the incoming DDI Manager had a sufficient period of overlap to ensure a smooth turnover with sufficient knowledge transfer.	Overlap period occurred and a smooth transition was made to the new DDI Manager.	N/A	Complete. Closed.

201605-04	<p>Several improvements were made to the weekly project stature report to include:</p> <ul style="list-style-type: none"> • Addition of a “Dashboard” Section with current and prior color status for “Overall Project”, “Schedule”, “Scope”, “Resources”, “Communications & Change Management”, “Technical Issues”, and “Quality Issues”. • Addition of “Actual Completion” and “G/Y/R” Color Rating columns to the “Progress to Schedule” Section. • Addition of “Schedule Performance Index (SPI), Earned Value (EV), and Planned Value (PV)” Section showing these values for Takeover and each Module. • Addition of “Schedule Performance Index Trend” Section showing the week-to-week value and trending for SPI for Takeover, Stage 1, and Stage 2 followed by a discussion of factors leading to the SPI and high-level mitigation plan to improve SPI for each area. • Addition of a “Status by Module” Section describing accomplishments, slipped dates, mitigation activities, and forecast completions dates on a module-by-module basis. 	<p>Additional positive improvements have been continued to be implemented.</p>	<p>Nothing.</p>	<p>Complete. Closed.</p>
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Appendix B: State Comments to Weekly Report

DDI VENDOR/State Corrective Action Plan in response to IV&V findings is provided below.

Appendix L: Report Templates

Contents

1. Weekly Status Report
2. Deliverable Review Report
3. Monthly Progress Report

TEMPLATE

Weekly IV&V Contractor Status Report

Week Ending [DATE]

Version x.y

Independent Verification and Validation Services

for

[Agency]

RFP Number:

Deliverable Control Numbers:

Prepared by



Status of Planned Work This Week

Meetings

Project	Planned Meetings	Status	Note
			-
			-

Documentation

Project	Planned Activities	Artifact / Deliverable	Status	Note
				-

Interviews

Project	Planned Interviews	Interviewee(s)	Status	Note
AMMI	Project Roadmap	Shannon Crane	Canceled	IV&V determined the interview is not needed at this time

CMS Milestone Activity

-

Other Planned Work

-

TEMPLATE

Additional Work Accomplished This week

-
-

Planned Work Next Week

Issues and Risks to Planned IV&V Work

-

Meetings

Project	Planned Meetings	Note
		-
		-

Documentation

Project	Planned Activities	Artifact / Deliverable	Note
			-

Interviews

Project	Planned Interviews	Interviewee(s)	Status	Note

CMS Milestone Activity

-

Other Planned Work

-

TEMPLATE

Staffing Plan Next Week

Resource	Position	Status

TEMPLATE

IV&V Assessment Report Comment Log

Item No.	Section/Page	Reviewer's Comments	Reviewer Name	IV&V Response

Document Control

Version	Date Submitted	Author	Description of Change
0.1			Initial Draft
0.2			SES Quality Assurance
0.3			Draft submittal
1.0			Final w/ corrections of errors of fact

Deliverable Review

of the **[Title of Deliverable being reviewed]**
Independent Verification and Validation Services

Prepared for

[AGENCY]

RFP Number:

[DATE]

Prepared by



Software Engineering Services
1311 Ft. Crook Road South, Suite 100
Bellevue, NE 68005

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<u>1.2 Background and Scope</u>	5
<u>2. Summary of Assessment Results</u>	6
<u>2.1 Product Quality</u>	6
<u>2.2 Alignment to Project Objectives</u>	6
<u>2.3 Fidelity to State and Federal Requirements</u>	6
<u>2.4 Compliance with CMS Certification Requirements</u>	7
<u>2.5 Adherence to Project Plan and Strategy</u>	7

Document Control

This is a controlled document. The control and release of this document is the responsibility of the document Owner.

Version control			
Tasking Received Date		Project	
Tasking Assigned Date		Due Date (Assigned + 10 business days)	Owner
Document title		Document Review of:	

Version History				
Version	Planned Date	Actual Date	Author	Version Description
0.1			IV&V Team	Initial draft from product assessment worksheet
0.3			SES QA	Peer review
1.0			SES PM	Submittal as Final

1. Summary

Software Engineering Services (SES) is providing Independent Verification and Validation (IV&V) Services for [agency and dates]. A focus of these services is to evaluate deliverables produced by the State and its vendors for the Modular Medicaid Implementation (MMIS) project.

1.1 Purpose

The purpose of this work product is to document results of Software Engineering Services (SES) IV&V team review and assessment of the subject [work product name] of the [module name]

1.2 Background and Scope

The RFP requires review of project deliverables; specifically, IV&V assesses deliverables based on certain minimum criteria listed below:

- Quality
- Alignment to project objectives
- Fidelity to State and Federal requirements
- Compliance with CMS certification requirements
- Adherence to the project plan and strategy

2. Summary of Assessment Results

This section of the work product presents a summary of our current analysis of [name of work product].

2.1 Product Quality

The following table is IV&V assessment of the work product quality.

Quality Criteria / Process	IV&V Assessment	Quality Assessment Comment
(From oversight checklists or project criteria)	Fully Met	
	Largely Met	
	Partially Met	
	Not Met	

2.2 Alignment to Project Objectives

The following table is IV&V assessment of work product alignment to project objectives.

Project Objective	IV&V Assessment	Comment on Alignment to Objective
(From project documents e.g., charter)	Fully Met	
	Largely Met	
	Partially Met	
	Not Met	

2.3 Fidelity to State and Federal Requirements

The following table is IV&V assessment of work product consistency or fidelity with State and/or Federal Requirements.

State/ Federal Requirement	IV&V Assessment	Comment on Fidelity to Requirement
(e.g., from IAPD, PPU, CMS, etc.)	Fully Met	
https://www.cms.gov/Research-Statistics-Data-and-Systems/CMS-Information-Technology/XLC/Artifacts.html#ArtifactsA-H CMS Artifact Templates	Largely Met	
	Partially Met	
	Not Met	

2.4 Compliance with CMS Certification Requirements

The following table is IV&V assessment of work product compliance with CMS certification requirements.

CMS Certification Requirement (e.g., from CMS checklists)	IV&V Assessment	Comment on Certification Requirement
	Fully Met	
	Largely Met	
	Partially Met	
	Not Met	

2.5 Adherence to Project Plan and Strategy

The following table is IV&V assessment of work product adherence to the project's Plan and [Agency] strategy to stay on Plan.

Characteristic of Project Plan or Strategy (e.g., from IAPD, PPU, State/Vendor Plan)	IV&V Assessment	Comment on Adherence to PP / Strategy
	Fully Met	
	Largely Met	
	Partially Met	
	Not Met	

Monthly Progress Report

CMS provides progress the report template and instructions for required monthly progress reporting, for example, as included in the Medicaid Enterprise Certification Toolkit (MECT) or Streamlined Modular Certification (SMC) guidance.

IV&V Turnover Plan

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I. APPROACH

SES will describe and communicate the vital tasks and activities essential to transition IV&V responsibilities and requirements to a successor vendor.

II. ASSUMPTIONS

SES will:

- A. Maintain access to physical and logical systems during the transition period
- B. Communicate with the Fiscal Agent to support the development of final work products and deliverables
- C. Introduce and/or train NE DHHS and/or a new IV&V successor vendor on accessing project artifacts in the document repository

NE DHHS and/or a new IV&V successor vendor will continue to:

- A. Ensure that the Fiscal Agent's software designs, developments, and implementations meet NE DHHS's specifications
- B. Employ industry best practices methodologies and principles
- C. Engage in written and verbal communication regarding present IV&V work products and deliverables

III. EXECUTIVE SUMMARY

The intent of this Turnover Plan is to effectively communicate and document IV&V tasks/activities related to the turnover of responsibilities to NE DHHS and/or a new IV&V successor vendor; it is a roadmap for transitioning all IV&V processes to NE DHHS and/or a new IV&V successor vendor; and will comprehensively outline the schedule, activities, and resource requirements associated with the transition of IV&V functions.

IV. BACKGROUND

[This section will summarize SES IV&V efforts on the project]

V. IV&V Deliverables

[This section will list all IV&V deliverables; their frequency and other characteristics]

VI. CURRENT SES ORGANIZATION

[This section will include the SES organizational chart during the project prior to turnover]

VII. TRANSITION TEAM

The IV&V transition effort will include all roles from the following table:

Transition Role	Transition Resource
Project Transition Leader	IV&V PM
Project Transition Team	[IV&V team members]
NE DHHS Stakeholder	[NE DHHS staff]
SES successor vendor	[Successor staff]

The Project Transition Leader will corroborate with NE DHHS to identify and determine the training requirements for the IV&V tools and applications employed by SES during the IV&V function. NE DHHS will determine the skill sets and training needs of the new SES successor vendor.

VIII. TRANSITION ACTIVITY DETAIL

Transition Task/Activity	Transition Team Assigned	Proposed Date of Delivery
Identify project work products and deliverables due prior to and during transition. See Appendix A for a list of work products and deliverables	Project Transition Leader	<p>For turnover to NE DHHS - Two weeks prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - One week post new IV&V vendor contract execution</p>
Coordinate transition planning meeting	Project Transition Leader	<p>For turnover to NE DHHS - Two weeks prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - One week post new IV&V vendor contract execution</p>
Facilitate and Attend transition planning meeting	Project Transition Leader Project Transition Team	<p>For turnover to NE DHHS - Two weeks prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - One week post new IV&V vendor contract execution</p>
Provide access to TeamSES tools so NE DHHS/new vendor can copy any to all documentation necessary for continued IV&V support	Project Transition Leader	<p>For turnover to NE DHHS - Two weeks prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - One week post new IV&V vendor contract execution</p>
Review project Turnover Plan with NE DHHS and/or a new IV&V successor vendor	Project Transition Leader	<p>For turnover to NE DHHS - One week prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - Two weeks post new IV&V vendor contract</p>

Transition Task/Activity	Transition Team Assigned	Proposed Date of Delivery
		execution
Review list of project work products and deliverables with NE DHHS and/or a new IV&V successor vendor	Project Transition Leader	<p>For turnover to NE DHHS - One week prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - Two weeks post new IV&V vendor contract execution</p>
Provide data collected during the contract used for the analyses and compilation for deliverables	Project Transition Leader Project Transition Team	<p>For turnover to NE DHHS - One week prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - Two weeks post new IV&V vendor contract execution</p>
Determine training needs and develop training plans	Project Transition Leader Project Transition Team	<p>For turnover to NE DHHS - One week prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - Two weeks post new IV&V vendor contract execution</p>
Facilitate training for NE DHHS and/or a new IV&V successor vendor	Project Transition Team	<p>For turnover to NE DHHS - One week prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - Two weeks post new IV&V vendor contract execution</p>
Inform as to Lessons Learned	Project Transition Team	<p>For turnover to NE DHHS - One week prior to SES' contract end date</p> <p>For turnover to a new IV&V successor vendor - Two weeks post new IV&V vendor contract</p>

Transition Task/Activity	Transition Team Assigned	Proposed Date of Delivery
		execution

IX. COMMUNICATION PLAN

Project Stakeholder	Method of Communication	Frequency of Communication
Project Transition Team with NE DHHS Stakeholders	Face-to-face informal meetings	<p>For turn over to NE DHHS - Daily for two weeks prior to existing SES contract expiration</p> <p>For turn over to a new IV&V successor vendor - Daily after new IV&V vendor contract execution until transition complete</p>
Project Transition Team with NE DHHS Stakeholders	Project Turnover Status Meeting	<p>For turn over to NE DHHS - Daily for two weeks prior to existing SES contract expiration</p> <p>For turn over to a new IV&V successor vendor - Daily after new IV&V vendor contract execution until transition complete</p>
Project Transition Leader	Project Turnover Status Reports	<p>For turn over to NE DHHS - Weekly until transition complete</p> <p>For turn over to a new IV&V successor vendor - Weekly after new IV&V vendor contract execution until transition complete</p>

X. SUPPORT PLAN

A SES support contact information and request form will be provided during the transition along with any necessary training in its use.

XI. DOCUMENT REVISION HISTORY

Date	Author (s)	Modification	Version

Appendix N: Cutover Readiness Checklist Sample

Critical Path Item	Success Criteria	Workaround/ Contingency Plan	Planned Start Date	Planned End Date	Responsible Party	Health Score	Rating Criteria	Comments/Corrective Action	Status
1-Issues						Red	1+ Red = Red 0 Red but 1+ Yellow = Yellow		
1.1	Project Issues	All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off.	Assess each open issue on a case-by-case basis. Employ acceptable work around or contingency plan.			Green	Green = 0 issues or acceptable workarounds Red = 1+ Emergency or High		Completed
1.2	Schedule Issues	-All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off. -Implementation strategy and timeline for Fleet and Surplus is documented and finalized	See Above			Red			In Progress - Behind Schedule
1.3	Budget Issues	All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off.	See Above			Green	See Above	-Finalize hosting price with GTA -Provide budget documentation to Sherrie Southern	In Progress - On Schedule
1.4	Business Objectives Issues	All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off.	See Above			Yellow	See Above	-Communicate/distribute Go-Live definition document (completed 2006/11/30) -Understand Stakeholder's expectations -Address next step/phase based on expectations	In Progress - On Schedule
1.5	Organizational Readiness Issues	-All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off.	See Above			Red	See Above		
1.6	Tech/Security Issues	See Item 1.1 Above	See Above			Green	See Above		Completed
1.7	Upgrade Issues	See Item 1.1 Above	See Above			Green	See Above		Completed
1.8	Other Issues	See Item 1.1 Above	See Above			Green	See Above		Completed
2-Risks									
2.1	Project Risks	All critical risks are closed or mitigation strategies have been implemented.					Yellow = no mitigation OR no work around. Red = do not have either mitigation or work around		
2.1.1							See above		
2.1.2							See above		
2.1.3							See above		
2.1.4							See above		

2.1.5								See above	
3-Application Readiness								1+ Red = Red 0 Red but 1+ Yellow = Yellow	

Critical Path Item	Success Criteria	Workaround/ Contingency Plan	Planned Start Date	Planned End Date	Responsible Party	Health Score	Rating Criteria	Comments/Corrective Action	Status	
3.1	Functional Test	-All functional scripts completed successfully; -Functional testing conducted in all environments; -Success criteria documented								
3.2	User Acceptance / Regression Testing (module 1)	-UAT agency testers identified and scheduled -UAT Test Scripts identified -Successful pass of all UAT Test Scripts -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects	Assess each function not successfully tested and determine if acceptable workaround can be employed				Red	Yellow = Medium without work around or low with no target completion date. Red = 1+ Emerg or High and/or less than 90% test cond passed	Business Owner must sign-off/accept UAT	In Progress - Behind Schedule
3.2.1										
	User Acceptance / Regression Testing (module 2)	-UAT agency testers identified and scheduled -UAT Test Scripts identified -Successful pass of all UAT Test Scripts -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects	Same as above				Red		Business Owner must sign-off/accept UAT	Not Started - Behind Schedule
3.3	Functions									
	Workflow	-Workflow successfully tested -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects -Business Owner signed-off on application functionality					Green			In Progress - On Schedule
	Reports	-All Reports successfully completed -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects -Reports are ready for migration. -Business Owner signed-off on application functionality					Yellow			In Progress - On Schedule
	Screens	-All Screens developed -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects -Business Owner signed-off on application functionality					Green			In Progress - On Schedule

3.4	Security	-100% of end-user security configured in X environment. -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects						Yellow = Medium without work around or low with no target completion date. More than 1 in a module - Red OR <90% configured	
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Critical Path Item	Success Criteria	Workaround/Contingency Plan	Planned Start Date	Planned End Date	Responsible Party	Health Score	Rating Criteria	Comments/Corrective Action	Status
3.4.1	System Security Plan	-Security Plan developed and approved							
3.8	Defects	-No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects	Assess each Defect not successfully tested and determine if acceptable workaround can be employed					Yellow = Medium without work around or low with no target completion date. More than 1 in a module - Red	
3.9	Decommission Legacy System(s)	-List of decommission apps/ functions completed and approved -Agreement with legacy vendor in place -Migration procedures created -Legacy environment shut down -Backups of legacy systems taken							

4-Technical Infrastructure Readiness						Green	1+ Red = Red 0 Red but 1+ Yellow = Yellow		
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4.1	Hardware								
4.1.1	Web Servers	-Production servers installed, tested, and stable -Production servers available during scheduled hours				Green	Green = Pass Yellow = at Risk - list reasons Red = Fail		Completed
4.1.2	Application Servers	-Application servers installed, tested, and stable -Application servers available during scheduled hours				Green	See Above		Completed
4.1.3	Infrastructure Hosting	-Operational Readiness Checklist complete and accepted by Business Owner; -System performance meets success metrics; -Final configuration documented and changes to CSP accepted by Business Owner/CIO							
4.2	Software								
4.2.1	Additional Software	All required additional software identified, installed and tested				Yellow	See Above		In Progress - On Schedule

4.2.2	Patches & Fixes	-Software patched to most current version - Post production patches and/or fixes scheduled					Green	See Above		Completed
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5-Third Party Readiness							Red	1+ Red = Red 0 Red but 1+ Yellow = Yellow		
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5.1	Inbound Interfaces (may need to add sections for Outbound as well)									
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Critical Path Item	Success Criteria	Workaround/ Contingency Plan	Planned Start Date	Planned End Date	Responsible Party	Health Score	Rating Criteria	Comments/Corrective Action	Status
5.1.1	1 - Technical Test Complete 2 - Functional Test Complete 3 - Third Party Confirmation Received 4 - Rollback procedures and communications prepared and discussed					Red	- X tests conducted successfully - sign-off from external partner - fewer than X data errors		In Progress - Behind Schedule
5.1.1.1	MOU executed between ___ and for ongoing maintenance and support issues								
5.1.2	1 - Technical Test Complete 2 - Functional Test Complete 3 - Third Party Confirmation Received 4 - Rollback procedures and communications prepared and discussed					Red	See Above		In Progress - Behind Schedule
5.1.2.1	MOU executed between ___ and for ongoing maintenance and support issues								
5.2	Overall Connectivity	1 - Connectivity to 3rd parties established	N/A			Green	See Above		Completed

6-Training							1+ Red = Red 0 Red but 1+ Yellow = Yellow		
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6.1	Training	-Training Fixes completed for on-line materials; -SME review completed -Published and available online -End Users Identified -Communications sent to end users -Surveys completed				Yellow	Yellow = Survey results unclear Red = sessions not executed or survey results show dissatisfaction		In Progress - Behind Schedule
6.1.1	Instructor-Led Training	-Document and Accept the training approach. - Training scheduled; - Training conducted; - X% of students successfully utilizing application (or passed course test, etc.)	Conduct make-up training sessions post go-live			Red	Yellow = Survey results unclear or 80 - 90% key users attended Red = <80% key users attended or sessions not executed or survey results show dissatisfaction		

6.3	Ongoing Training Support	-Responsibility for support assigned -Handoff conducted								
7-Operational Readiness								1+ Red = Red 0 Red but 1+ Yellow = Yellow		
7.1	Operations Test									

Critical Path Item		Success Criteria	Workaround/ Contingency Plan	Planned Start Date	Planned End Date	Responsible Party	Health Score	Rating Criteria	Comments/Corrective Action	Status
7.1.1	Help Desk	-Help Desk Staff have been identified and trained -Knowledge Transfer plans completed and scheduled for sign-off -Help desk tools identified and in-place -Transition date from temporary to full-time staff set	Project team to provide support on temporary basis				Red	Green = Pass Yellow = at Risk - list reasons Red = Fail		In Progress - Behind Schedule
7.1.1.1	Help Desk (if applicable)	-Instructions have been provided to Help Desk personnel; -Escalation processes defined and documented; -								
7.1.2	System Supportability	-Documentation exists for systems operations, maintenance, and support -Application support staff trained -Staff can operate and maintain system -Processes are in place for new development and configuration change requests -Schedules for delivered patches and fixes are in place					Red	See Above		
7.1.3	System Recoverability	-Documentation exists for back-up, recovery, and error procedures -Areas that encounter errors have been documented -The infrastructure is recoverable and the staff has adequately performed and tested the procedure X times					Red	See Above		
7.2	System Administration	-Admin role and responsibility documented; -Admin(s) assigned; -User coordinators trained; -New user processes documented and communicated					Yellow			
7.3	Deployment Test									
7.3.1	Deployment Plan	A detailed deployment plan has been documented, communicated and activities scheduled	N/A					See Above		

Critical Path Item	Success Criteria	Workaround/ Contingency Plan	Planned Start Date	Planned End Date	Responsible Party	Health Score	Rating Criteria	Comments/Corrective Action	Status
7.3.2	Test Moves to Production	-Minimum of X test moves have been conducted -Upgraded environment adequately tested -Last Test Move (including all upgrade deployment activities) completed in X days or less -Deployment tasks timed and migration calendar prepared	Increase go-live window					See Above	
7.3.3	Ready for Final Move to Production	-Technical staff required on site or remote access identified and scheduled -Functional staff required on site or remote access identified and scheduled -Communication procedures and on-call roster developed and communicated -Facilities and equipment available for upgrade weekend(s) (no power or equipment outages scheduled)				Red	See Above		
7.3.4	Configuration	-Configuration items complete -Migration scripts prepared and adequately tested -Manual configuration tasks identified and timing known	N/A				See Above		
7.3.5	Security	-Security set-up complete -Migration scripts prepared and adequately tested -Manual security tasks identified and timing known	N/A				See Above		
7.3.6	Data Conversion	-Scrub of data complete and accepted by Business Owner -Migration scripts prepared and adequately tested (X times) -Manual conversion tasks identified and timing known -Record rejects process defined and ownership assigned							
7.3.7	Data Archival	-Archival strategy for production environment complete and sign-off obtained							
7.4	Deployment Verification Test								
7.4.1	System	-	N/A				See Above		

Critical Path Item	Success Criteria	Workaround/ Contingency Plan	Planned Start Date	Planned End Date	Responsible Party	Health Score	Rating Criteria	Comments/Corrective Action	Status
7.4.2	Configuration / Set up	-Interfaces are installed -Configurations are migrated -Development objects are migrated -Security is migrated / set up	N/A				See Above		
7.4.3	Functionality	-Identify transactions to be entered using live production data -Interfaces function properly -Configurations function properly -Development objects function properly -Security functions properly	N/A				See Above		
7.4.4	Data	-Conversions are complete -Data is reconciled	Determine which, if any, conversions can be performed after go-live.				See Above		
8-Organizational Readiness							1+ Red = Red 0 Red but 1+ Yellow = Yellow		
8.1	Agencies/End Users								
8.1.1	Policies and Procedures	-Policies and procedures defined, documented and communicated -New policies are incorporated into training	N/A				Green = Pass Yellow = at Risk - list reasons Red = Fail		
8.1.2	User Readiness Assessment	-All application and customer support personnel in place; -Communications plan executed; -End-user groups established; -Contingency strategies in place for user issues	N/A				Yellow = 75 - 85% sign-off Red = <75%		
8.1.3	After go-live Stabilization Meetings	-Schedule after go-live stabilization check-in meetings -Set up bridge line -Communicate to Users logistics	N/A				Green = Pass Yellow = at Risk - list reasons Red = Fail		
8.2	Functional Hand-off Meetings	All Functional hand-off meetings have occurred							
8.3	Communications								
8.3.1	Executive Communications	Communications prepared for Identified stakeholders regarding project/go-live: -1 month prior to go-live -2 weeks prior to go-live -Day before go-live -Go-live day	N/A				See Above		
8.3.2	End User Communications	Communications and procedures for enforcing freezes are complete (i.e., new vendors, PO's, Chartfield values, vouchers, development).	N/A				See Above		
8.3.3	External Communications	3rd Party interface owners (internal and external) notified of schedule	N/A				See Above		
8.4	Data Exception Process	FSS staff provided exception handling procedures							
8.5	Go-Live Contingency Plan								

Critical Path Item	Success Criteria	Workaround/ Contingency Plan	Planned Start Date	Planned End Date	Responsible Party	Health Score	Rating Criteria	Comments/Corrective Action	Status
8.5.1	Organizational Budgets	-Contract costs for extending legacy defined; -Extension of implementation vendor calculated; -Other cost impacts defined	N/A				See Above		
8.5.2	Interfaces		N/A				See Above		
8.5.3	Communications	Go-No-Go communications prepared for all impacted audiences (Project Team, Agencies, External Users, etc.)	N/A				See Above		
Overall							Green = go forward with upgrade; Red = cease upgrade		

Critical Path Item		Success Criteria																		
1-Issues																				
1.1	Project Issues	All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off.																		
1.2	Schedule Issues	-All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off. -Implementation strategy and timeline for Fleet and Surplus is documented and finalized																		
1.3	Budget Issues	All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off.																		
1.4	Business Objectives Issues	All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off.																		
1.5	Organizational Readiness Issues	-All critical Steering Committee and High/Medium priority issues are closed or deferred. If the resolution changes the design, the design is complete and signed-off.																		
1.6	Tech/Security Issues	See Item 1.1 Above																		
1.7	Upgrade Issues	See Item 1.1 Above																		
1.8	Other Issues	See Item 1.1 Above																		
2-Risks																				
2.1	Project Risks	All critical risks are closed or mitigation strategies have been implemented.																		
2.1.1																				
2.1.2																				
2.1.3																				
2.1.4																				
2.1.5																				
3-Application Readiness																				

Critical Path Item		Success Criteria																
3.1	Functional Test	-All functional scripts completed successfully; -Functional testing conducted in all environments; -Success criteria documented																
3.2	User Acceptance / Regression Testing (module 1)	-UAT agency testers identified and scheduled -UAT Test Scripts identified -Successful pass of all UAT Test Scripts -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects																
3.2.1																		
	User Acceptance / Regression Testing (module 2)	-UAT agency testers identified and scheduled -UAT Test Scripts identified -Successful pass of all UAT Test Scripts -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects																
3.3	Functions																	
	Workflow	-Workflow successfully tested -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects -Business Owner signed-off on application functionality																
	Reports	-All Reports successfully completed -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects -Reports are ready for migration. -Business Owner signed-off on application functionality																
	Screens	-All Screens developed -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects -Business Owner signed-off on application functionality																
3.4	Security	-100% of end-user security configured in X environment. -No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects																

Critical Path Item		Success Criteria																
3.4.1	System Security Plan	-Security Plan developed and approved																
3.8	Defects	-No outstanding Severity Level 1 and/or 2 Defects -Workarounds in place for all Severity level 3 and/or 4 Defects -Target completion date identified for all level 3 and/or 4 Defects																
3.9	Decommission Legacy System(s)	-List of decommission apps/ functions completed and approved -Agreement with legacy vendor in place -Migration procedures created -Legacy environment shut down -Backups of legacy systems taken																

4-Technical Infrastructure Readiness

4.1	Hardware																	
4.1.1	Web Servers	-Production servers installed, tested, and stable -Production servers available during scheduled hours																
4.1.2	Application Servers	-Application servers installed, tested, and stable -Application servers available during scheduled hours																
4.1.3	Infrastructure Hosting	-Operational Readiness Checklist complete and accepted by Business Owner; -System performance meets success metrics; -Final configuration documented and changes to CSP accepted by Business Owner/CIO																
4.2	Software																	
4.2.1	Additional Software	All required additional software identified, installed and tested																
4.2.2	Patches & Fixes	-Software patched to most current version - Post production patches and/or fixes scheduled																

5-Third Party Readiness

5.1	Inbound Interfaces (may need to add sections for Outbound as well)																	
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Critical Path Item		Success Criteria															
5.1.1		1 - Technical Test Complete 2 - Functional Test Complete 3 - Third Party Confirmation Received 4 - Rollback procedures and communications prepared and discussed															
5.1.1.1		MOU executed between ___ and for ongoing maintenance and support issues															
5.1.2		1 - Technical Test Complete 2 - Functional Test Complete 3 - Third Party Confirmation Received 4 - Rollback procedures and communications prepared and discussed															
5.1.2.1		MOU executed between ___ and for ongoing maintenance and support issues															
5.2	Overall Connectivity	1 - Connectivity to 3rd parties established															

6-Training

6.1	Training	-Training Fixes completed for on-line materials; -SME review completed -Published and available online -End Users Identified -Communications sent to end users -Surveys completed															
6.1.1	Instructor-Led Training	-Document and Accept the training approach. - Training scheduled; - Training conducted; - X% of students successfully utilizing application (or passed course test, etc.)															
6.3	Ongoing Training Support	-Responsibility for support assigned -Handoff conducted															

7-Operational Readiness

7.1	Operations Test																
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Critical Path Item		Success Criteria														
7.1.1	Help Desk	-Help Desk Staff have been identified and trained -Knowledge Transfer plans completed and scheduled for sign-off -Help desk tools identified and in-place -Transition date from temporary to full-time staff set														
7.1.1.1	Help Desk (if applicable)	-Instructions have been provided to Help Desk personnel; -Escalation processes defined and documented; -														
7.1.2	System Supportability	-Documentation exists for systems operations, maintenance, and support -Application support staff trained -Staff can operate and maintain system -Processes are in place for new development and configuration change requests -Schedules for delivered patches and fixes are in place														
7.1.3	System Recoverability	-Documentation exists for back-up, recovery, and error procedures -Areas that encounter errors have been documented -The infrastructure is recoverable and the staff has adequately performed and tested the procedure X times														
7.2	System Administration	-Admin role and responsibility documented; -Admin(s) assigned; -User coordinators trained; -New user processes documented and communicated														
7.3	Deployment Test															
7.3.1	Deployment Plan	A detailed deployment plan has been documented, communicated and activities scheduled														

Critical Path Item		Success Criteria															
7.3.2	Test Moves to Production	-Minimum of X test moves have been conducted -Upgraded environment adequately tested -Last Test Move (including all upgrade deployment activities) completed in X days or less -Deployment tasks timed and migration calendar prepared															
7.3.3	Ready for Final Move to Production	-Technical staff required on site or remote access identified and scheduled -Functional staff required on site or remote access identified and scheduled -Communication procedures and on-call roster developed and communicated -Facilities and equipment available for upgrade weekend(s) (no power or equipment outages scheduled)															
7.3.4	Configuration	-Configuration items complete -Migration scripts prepared and adequately tested -Manual configuration tasks identified and timing known															
7.3.5	Security	-Security set-up complete -Migration scripts prepared and adequately tested -Manual security tasks identified and timing known															
7.3.6	Data Conversion	-Scrub of data complete and accepted by Business Owner -Migration scripts prepared and adequately tested (X times) -Manual conversion tasks identified and timing known -Record rejects process defined and ownership assigned															
7.3.7	Data Archival	-Archival strategy for production environment complete and sign-off obtained															
7.4	Deployment Verification Test																
7.4.1	System	-															

Critical Path Item		Success Criteria																		
7.4.2	Configuration / Set up	-Interfaces are installed -Configurations are migrated -Development objects are migrated -Security is migrated / set up																		
7.4.3	Functionality	-Identify transactions to be entered using live production data -Interfaces function properly -Configurations function properly -Development objects function properly -Security functions properly																		
7.4.4	Data	-Conversions are complete -Data is reconciled																		

8-Organizational Readiness

8.1	Agencies/End Users																			
8.1.1	Policies and Procedures	-Policies and procedures defined, documented and communicated -New policies are incorporated into training																		
8.1.2	User Readiness Assessment	-All application and customer support personnel in place; -Communications plan executed; -End-user groups established; -Contingency strategies in place for user issues																		
8.1.3	After go-live Stabilization Meetings	-Schedule after go-live stabilization check-in meetings -Set up bridge line -Communicate to Users logistics																		
8.2	Functional Hand-off Meetings		All Functional hand-off meetings have occurred																	
8.3	Communications																			
8.3.1	Executive Communications	Communications prepared for Identified stakeholders regarding project/go-live: -1 month prior to go-live -2 weeks prior to go-live -Day before go-live -Go-live day																		
8.3.2	End User Communications	Communications and procedures for enforcing freezes are complete (i.e., new vendors, PO's, Chartfield values, vouchers, development).																		
8.3.3	External Communications	3rd Party interface owners (internal and external) notified of schedule																		
8.4	Data Exception Process		FSS staff provided exception handling procedures																	
8.5	Go-Live Contingency Plan																			

Critical Path Item		Success Criteria													
8.5.1	Organizational Budgets	-Contract costs for extending legacy defined; -Extension of implementation vendor calculated; -Other cost impacts defined													
8.5.2	Interfaces														
8.5.3	Communications	Go-No-Go communications prepared for all impacted audiences (Project Team, Agencies, External Users, etc.)													
Overall															

Privacy and Security Plan

State of Nebraska

Independent Verification and Validation Services

Prepared by:



Software Engineering Services

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Document Control

This is a controlled document. The control and release of this document is the responsibility of the document owner.

Version control			
Document reference		Project	
Version	0.1	Date	Owner
Document title	Privacy and Security Plan Template		
Version History			
Version	Date	Author	Comment

We have reviewed and agreed to the information described in this document and referenced attachments.

Approval			
Name	Title	Date	Signature

1. Introduction

1.1 Purpose

Summarize the document's purpose in the project context, for example, to support a Client's CMS review or certification requirement.

1.2 Overview

Provide a brief overview of its contents.

1.3 Scope

State the Plan's scope. Include as needed: The applicable timeframe or project life cycle(s); and/or project or program phase(s).

1.4 Roles and Responsibilities

List roles and responsibilities of IV&V, the State/Client Team, the DDI/SI Vendor, and any other vendor(s) as applicable including: PMO, QA.

2. Assessment Method

Describe the methodology to perform oversight of project security and privacy. Include:

- a. SES IV&V methodology or a reference to the appropriate SS Project Management Plan component that defines methodology. Include: Worksheets and checklists usage; and data gathering through meetings, product evaluations, and interviews.*
- b. Integration of SES' security/privacy checklist question sets with CMS-provided checklists.*

2.1 Prepare the Security Plan

Prepare to meet the unique security requirements by tailoring this document to the project/program.

3. Assess the Security Controls and Preparedness

The main content of this section is on the IV&V oversight of security planning and execution effectiveness according to the standards contained in IV&V and/or CMS checklists, as applicable.

4. Assess the Processes

The focus is on security processes/procedures documentation, and the project team's adherence to those plans and procedures according to the standards contained in IV&V and/or CMS checklists, as applicable.

Appendix A – CMS Security Requirements Checklist

SECURITY REQUIREMENTS CHECKLIST

Security Requirement Checklist	Able to meet Requirement	Not able to meet Requirement	Justification for not meeting requirements
1. Application must be able to integrate with standard DHS network structures, both physical & logical	Check X as appropriate	Check X as appropriate	
a. Adherence to DHS’s Zones of Control Architecture.			
b. Standardized Network and application user authentication.			
c. Use of DHS standard remote access connectivity, if needed			
d. Use of DHS standard encryption for protected data in transit.			
e. Limit the session time for inactivity per agency policy.			
2. Applications and servers must employ a secure configuration and hardening			
a. Adherence to Server Control standards			
b. Use only system components, ports, and processes required by the application.			
c. Apply all up to date security patches and updates.			
d. Disable all default accounts.			
e. Implement a compliant patch management process.			

Security Requirement Checklist	Able to meet Requirement	Not able to meet Requirement	Justification for not meeting requirements
f. Remove test data from production systems.			
g. Use service accounts with limited application and system access.			
h. Utilize DHS standard server images where available.			
i. Follow agency standard change control procedures			
3. Application secure coding practices			
a. Do not expose unneeded information such as traces, failure information, and data.			
b. Test for security errors in code and fix prior to production cutover.			
c. Utilize state-based variables.			
d. Assure no protected information is returned in error messages.			
e. Do not store database connections, passwords, keys or private information in plain text in source code, configuration files, or tables.			
f. Do not store private data in cookies, query strings, or form fields.			
4. Application must perform input validation.			
a. Validate input data by type, length, format and range.			
b. Use of minimum/maximum field lengths and values, and valid data ranges.			
c. Identify required fields.			

Security Requirement Checklist	Able to meet Requirement	Not able to meet Requirement	Justification for not meeting requirements
d. No use of hidden fields.			
e. Validate URL information			
f. No protected information in URLs			
5. Application user authentication			
a. Require individually unique user and administrator accounts with strong passwords or pin.			
b. Force user to change password upon initial use, for system assigned passwords.			
c. Meet or exceed agency password policy requirements			
d. Automatic lock-out after a period of inactivity the meets required agency timeout standard.			
e. Identify privileged accounts that service or administer user accounts			
6. Application user authorization			
a. All accounts must be related to a role, and the role describes what permissions a user has, which limits access to data to the minimum necessary to do the work.			
b. Identify and separate privileges for different roles - Administrator and User			
c. Restrict access to system level resources and restrict privileges to minimum necessary access/capability.			
7. Application auditing and logging			
a. Provide appropriate agency, HIPAA and			

IV&V Security Plan Template

Security Requirement Checklist	Able to meet Requirement	Not able to meet Requirement	Justification for not meeting requirements
legislatively mandated logging and auditing capabilities.			
b. Capture key parameters for auditing and logging per agency policy including login, unsuccessful login attempts, time, user, type of modification, file/data modified, and deletions.			
c. Record inserts and updates that are aborted when event handler identifies invalid input.			
d. Protect audit logs from alteration.			
e. Develop a process to review unauthorized login attempts.			

Appendix B – CMS Security and Privacy (Business) Checklist

CMS Checklist Background

1. Within the Health Insurance Portability and Accountability Act (HIPAA) there are two separate Rules governing Privacy and Security.
 - a. The Privacy Rule deals with the Rights of individuals to safeguard the privacy of their health care information. Privacy Rule compliance is under the jurisdiction of the Office for Civil Rights.
 - b. The Security Rule deals with the requirements of facilities, systems, and processes to safeguard information for which it is liable.
2. There is an overlap between parts of the Privacy Rule and the Security Rule. The overlap occurs when the MMIS is the vehicle or enabler of the process that enforces the Privacy requirements. For this reason, Privacy and Security requirements are combined into one checklist.
3. MMIS certification focuses on system functionality. To enforce compliance with the full range of Privacy and Security requirements, the Medicaid agency uses a range of reports, alerts, audits, and surveys. These are beyond the scope of MMIS certification. This checklist focuses on those functions within an MMIS that demonstrate the agency's ability to meet the system-related requirements of Privacy.

Sources for the criteria in this checklist are as follows:

IBP – Industry Best Practice. Items are selected from RFPs for MMISs developed by states and approved by CMS.

CFR – Code of Federal Regulations, available from

<http://www.access.gpo.gov/uscode/title42/title42.html>. Includes HIPAA Security and Privacy rules.

SP1 – CONTROL ACCESS TO SYSTEM AND DATA					
	Criteria	Source	Y	N	Comments
SP1.1	Verifies identity of all users, denies access to invalid users. For example: - Requires unique sign-on (ID and password) - Requires authentication of the receiving entity prior to a system initiated session, such as transmitting responses to eligibility inquiries	CFR			

SP1 – CONTROL ACCESS TO SYSTEM AND DATA					
	Criteria	Source	Y	N	Comments
SP1.2					
SP1.3					
SP1.4					

SP2 – PROTECT THE CONFIDENTIALITY AND INTEGRITY OF ePHI					
	Criteria	Source	Y	N	Comments
SP2.1					

SP3 – MONITOR SYSTEM ACTIVITY AND ACT ON SECURITY INCIDENTS					
	Criteria	Source	Y	N	Comments
SP3.1					

SP4 – SUPPORT INDIVIDUAL RIGHTS					
	Criteria	Source	Y	N	Comments
SP3.1					

Appendix C – SES IV&V Security Oversight Checklist Augmentation

(See separate IV&V Oversight Checklists for Security Management and Application Security)