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12/12/2022 10 of 532

Community Care Business Program Management Review (PMR) #1

07/28/2020

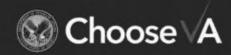




U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

- OCC Priority Project Review
 - OCC Data Governance
 - VA/DoD Advanced Payment and Referral Standardization
 - One Consult 2.0
 - Indian/Tribal Health Coordination (ITHC)
 - Advanced Medical Cost Management System (AMCMS)
 - Urgent Care Integrated Project Team
 - Provider Profile Management System (PPMS)
 - Community Care Reimbursement System (CCRS)
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- · Number of data policies, practices, and standards established
- Percent of data issues resolved
- Number of completed data initiatives in data governance project portfolio
- · Percent of data initiatives that meet or exceed established initiative targets

Accomplishments

7/6/2020 **NOMINATED DATA GOVERNANCE GROUP**

7/7/2020 CCSC DATA GOVERNANCE

PROJECT APPROVAL

7/8/20 KICKED OFF DATA **GOVERNANCE PROJECT**

7/15/2020 **ADOPTED CONTINUOUS** LEARNING APPROACH

Upcoming Milestones

8/5/2020 **DEFINE OVERARCHING DATA** GOVERNANCE STRATEGIC PRIORITIES GOVERNANCE CHARTER

8/12/2020 **FINALIZE DATA** 8/19/2020 **IDENTIFY A DATA-RELATED GOVERNANCE PORTFOLIO**

OCC Business Dependencies

Pending Dependency Management Analysis

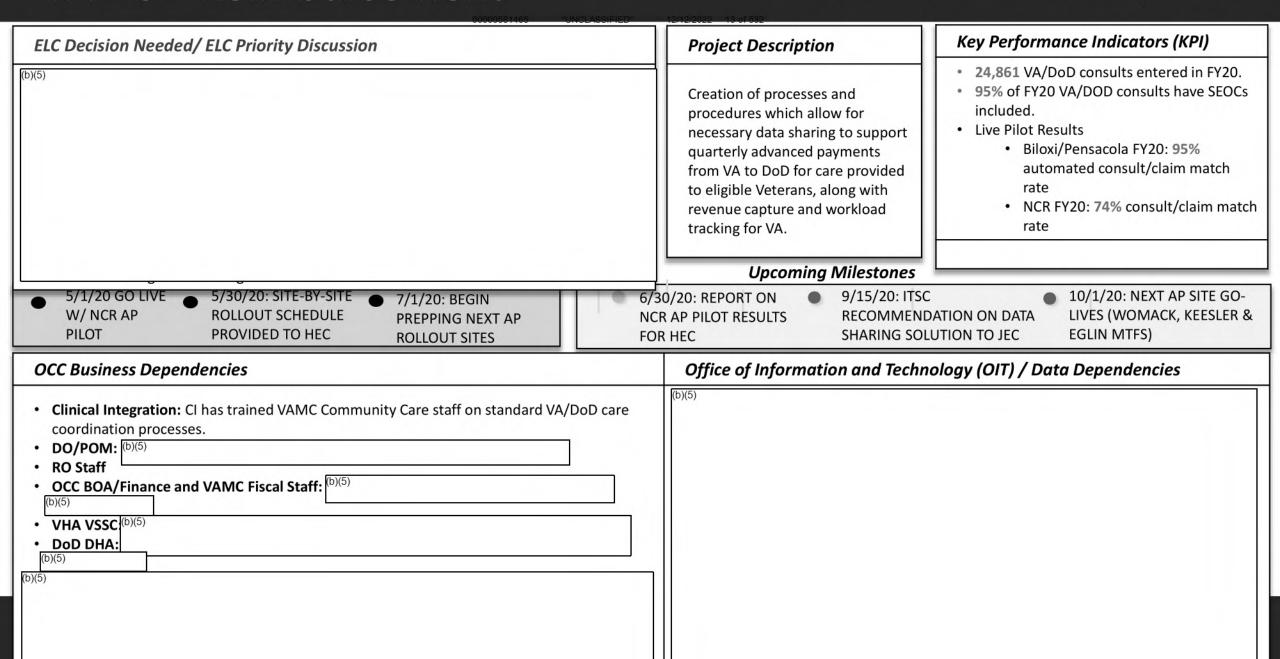
(b)(5)

OIT / Data Dependencies

Pending Dependency Management Analysis

VA DoD Reimbursement

Project Phase – Development



One Consult 2.0

Executive Leadership Committee (ELC) Decision Needed Priority Discussion	/
DECISION: No decision requested at this time	
• (b)(5)	

Project Description

One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies

Key Performance Indicators (KPI)

- DST integrated into CPRS- Q1 FY 21
- CTB integrated into CPRS- Q2 FY 21
- DST use of new drive time CC eligibility API estimated mid August (30 days after FRN publication)

Accomplishments

RECEIVED APPROVAL FROM BUSINESS TO UTILIZE EXISTING CAPABILITIES WITHIN DST

RELEASED UPDATE THAT
ADDED CC AVERAGE WAIT
TIMES TO THE DST
DASHBOARD

DEPLOYMENT OF CTB 1.9.0072 OVER 30 DAYS, BEGAN 7/14/20 CBT V1.9.0072
ANNOUNCEMNT AND
FGB UPDATES
COMPLETED

DST DRIVE TIME TO
BE ENABLED 30
DAYS AFTER FRN
PUBLICATION

TEAM CONTINUES TO CAPTURE REQUIREMENTS FOR WEB BASED PLATFORM.

DST OFFCE HOURS CONTINUE 7/20/2020.

Upcoming Milestones

TESTING / NATIONAL DEPLOYMENT OF CTB V1.9.0076. TESTING 9/16/2020, NATIONAL DEPLOYMENT 10/03/2020

OCC Business Dependencies

(b)(5)

OIT / Data Dependencies

(b)(5)





Indian-Tribal Health Coordination

Development

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)
(1)This project's training activities were impacted by COVID-19 and were/are on hold until the partners are free to resume. VA staff training was moved to self-paced PPT and sent to the field on 7/17. (b)(5) Discussion (b)(5)	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted
Accomplishments	Upcoming Milestones	
ADVISORY BOARD MTG STAKEHOLDER VIRTUAL CONSULTATION IHS,	30/20 RESTART 9/30/20 CLEAR /THP RE-TRAINING EXECUTION OF RTUALLY) EXPANSION M	HS/THP COORDINATION
OCC Business Dependencies	OIT / Data Dependencies	
(b)(5)	N/A Risk: Mitigation:	





AMCMS

Deployment

ELC Decision Needed/ ELC Priority Discussion	
4.0	

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Upon deployment, key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- **FM Metrics:** Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

6/17-6/24 UAT DATA
VALIDATION ROUND I
EXECUTED

 7/10 UAT TEST SCRIPTS UPDATED 6/24-7/15 INCORPORATION OF CHANGES & DATA VALIDATION FIXES BASED ON UAT FEEDBACK 7/15-7/25 UAT DATA VALIDATION ROUND II EXECUTION 8/21 UAT TEST
EVALUATION
REPORT

Upcoming Milestones

8/25 NATIONAL DEPLOYMENT GATE REVIEW MEETING

 8/26/20 BEGIN FIELD NATIONAL DEPLOYMENT

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)

Urgent Care IPT

National Deployment

ELC Decision Needed/ ELC Priority Discussion	00000001400 CHGEASSIFIE	Project Description	Key Performance Indicators (KPI)
(b)(5)		Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.	• 5,688 total probable UC visits in Region 1, as of 5/31/2020
Accomplishments		Upcoming Milestones	
O6/08/20 REGION 2/3 GO LIVE DATE FINALIZED AS 8/4 O7/15/20 REGION 2/3 COMMS RELEASED	08/04/20 REGION 2 TRANSITION	08/04/20 REGION 3 TRANSITION TRANSITION 108/31/20 REGION 4 TRANSITION	
OCC Business Dependencies		Office of Information Technology / Data	Dependencies
Clinical Integration: N/A Delivery Operations: N/A Provider Relations and Services (PRS): (b)(5) Communications: (b)(5) (b)(5)		RISK: N/A Mitigation: N/A	

El	LC Decision Needed/ ELC Priority Discussion
•	Priority Discussion: (b)(5)

Project Description

Provider Profile Management
System (PPMS): A consolidated
repository to house provider
information for multiple
community network and federal
partner provide along with a tool
to allow VA staff to view and
manage that information.

Upcoming Milestones

Key Performance Indicators (KPI)

Power BI functionality exceeded license capability for reporting previous metrics.

Accomplishments

● 5/22/20 PPMS 8.0 GO-LIVE 6/30/20
DEV CONTRACT
AWARDED JUNE

7/1/20 URGENT CARE LEGACY RE-ROUTE

7/7/20 PPMS 8.1 GO- 7/23/20 HOTFIX 8.1.1.1 RELEASE 7/29/20
 COMMUNITY PROVIDER
 LOCATOR (CPL) RELEASE

08/11/20 PPMS 9.0 NATIONAL GATEWAY REVIEW 08/20/20 PPMS 9.0 GO-LIVE

OCC Business Dependencies

- Clinical Integration
- Network Management
- Community Care Network
- Delivery Operations
- Revenue Operations
- VAMC/CPO & Pharmacy - (b)(5)

b)(5)

OIT / Data Dependencies

VA U.S. Departme
Veteraris Ficility
Office of Communication



CCRS

National Deployment

• No ELC Decision Requests for July • No ELC Decision Requests for July

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicators (KPI)

CCN Payment Metrics as of July 17, 2020

- Region 1: Invoices Received 1,329,157, Confirmed Paid 825,256, Sent for Payment 27,528, "No Action" Optum denials 409,257
- Region 2: Invoices Received 759,546, Confirmed Paid 464,651, Sent for Payment 23,090, "No Action" Optum denials 242,340
- Region 3: Invoices Received 176,601, Confirmed Paid 72,137, Sent for Payment – 4,983, "No Action" Optum denials – 94,192
- Region 4: Invoices Received 1,347, Confirmed Paid 241, Sent for Payment 299, "No Action" TriWest denials 563
- The total Invoice Amount Paid/Sent for Payment: \$984,680,609.20

Accomplishments Upcoming Milestones 06/23/2020 SUSPENSION 07/06/2020 PMPM ADMIN 07/09/2020 CCRS 07/17/2020 UPDATE 07/14/2020 NATIONAL 07/17/2020 UPDATE 07/16/2020 RELEASE ■ FEES FOR RESUBMISSIONS OF SUSPENSION OF 270 **USER ACCEPTANCE** KMS AND TRAINING **USER GUIDES AND DEPLOYMENT GATE CCRS 11.4 TO** DAY DENIAL REASON **IMPLEMENTED STARTING** DOCS FOR CCRS 11.4 TESTING 11.4 REVIEW (GO, NO GO **LESSONS LEARNED PRODUCTION** APPROVED BY ELC WITH MAY DECISION) **CCRS 11.4 OCC** Business Dependencies OIT / Data Dependencies (b)(5)Clinical Integration (Facility CC Staff and VAMC RN Staff) Delivery Operations/Payment Oversight and Management (Invoice Processing Staff) (b)(5) • Revenue Operations (Facility Revenue, RUR, and CPAC Staff):((b)(5) • Finance (OCC Finance and Informatics Staff) (b)(5) VAMC / Fiscal Budget Staff: (b)(5) (b)(5)

Appendix





Cerner OCC Integration

Development

ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Manage all necessary integrations to TBD: Focusing on timeliness No ELC decisions needed or priority discussion topics at this appropriately measures and qualitative time. operationalize Cerner surveys EHR into OCC clinical operations processes These dates are subject to **Accomplishments Upcoming Milestones** change due to COVID-19 uncertainty CSS: **Super User Training:** ORA: IV3: **TBD awaiting OEHRM Decision** Go Live 8/21/2020 9/7/2020 8/10/2020 7/27/2020 **OCC Business Dependencies** OIT / Data Dependencies Highlight OIT/Data Dependencies: **Highlight OCC Business Dependencies:** -Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5) -Payment Operations Management -Revenue Operations (Facility Revenue, RUR, and CPAC Staff) -Women's Health (IVF and Infertility) (b)(5)





Community Care Network

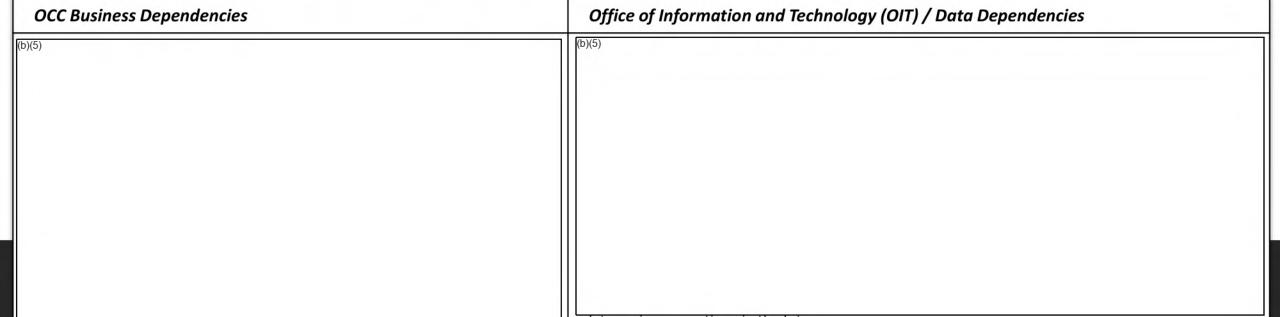
SHCD GO-LIVE

Deployment

CUTOVER FROM PC3

ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Region 3 Gradual Transition - CCN Referral # Complete regional • Week 1: May 18 - 22, 2020 deployments to Total Referrals = 4,965* Total Rejects = 10 achieve CCN in Regions Week 2: May 25-29, 2020 1 – 6 and consolidate Total Referrals = 5,084* Total Rejects = 10 regional operations No ELC decisions needed or priority discussion topics at this time. Week 3: June 1-5, 2020 support as transitions Total Referrals = 7,743* Total Rejects = 18** complete to focus on Region 4 R4P1 Go Live - CCN Referral # stabilizing and Week 1: June 8-12, 2020 optimization. Total Referrals = 842 Total Rejects = 45 **Accomplishments Upcoming Milestones** 08/31/20 R4 06/16/20 R3P2 08/04/20 R2 & R3 08/11/20 R4P3 08/25/20 R4P4 SHCD 07/21/20 R4P2 SHCD GO-LIVE **URGENT CARE URGENT CARE**

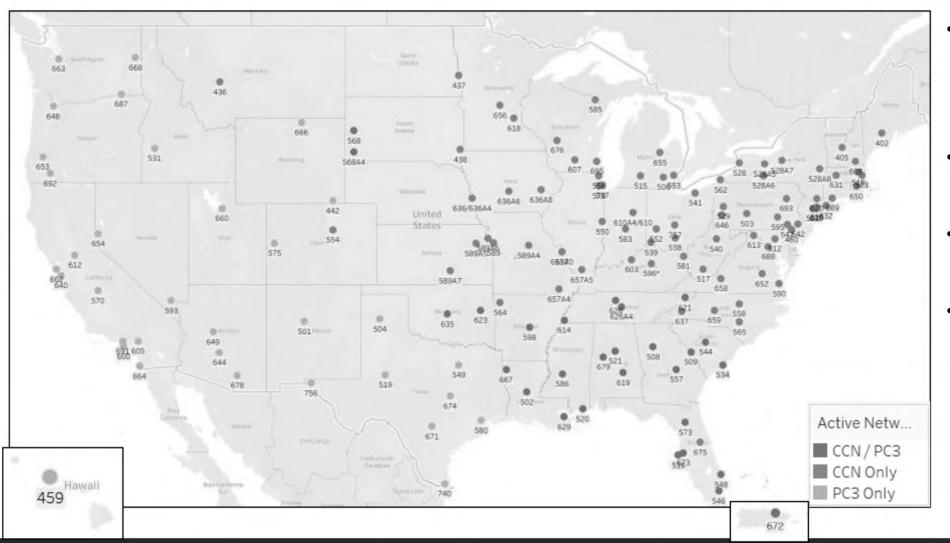
CUTOVER FROM PC3



SHCD GO-LIVE

GO-LIVE

National Network Deployment Progress – As of 7/6/2020



- (b)(5)
- Regions 1, 2, and 3 are fully deployed
- Region 4 Phase 1 deployed on 6/8/2020
- Covid-19 is impacting the national deployment progress and provider recruitment progress

14



Region 3 Update

January 7 2020: Go-Live for Two Sites May 18 – June 15: Gradual

SHCD – Phase 1

January 7, 2020

Fayetteville, AR

Orlando, FL

Transition

Throughout the Gradual Transition, and continuing post-go-live, Optum is working to contract with key Region 3 providers.

Recent wins include:

- VISN 7: University of Alabama (received verbal agreement)
- VISN 16: Willis-Knighton Health System

June 16: Full Region 3

Deploymeall remaining R3 sites)

June 16, 2020

Alexandria, LA

Atlanta, GA

August, GA

Bay Pines, FL

Biloxi, MS Central Arkansas, AR Birmingham, AL Columbia, SC Central Alabama Memphis, TN Charleston, SC Murfreesboro, TN Dublin, GA Nashville, TN Jackson, MS Miami, FL New Orleans, LA Mountain Home, TN Shreveport, LA Muskogee, OK Tuscaloosa, AL N. Florida / S. Georgia

Oklahoma City, OK San Juan, PR Tampa, FL

West Palm Beach, FL

July 17:

cutover

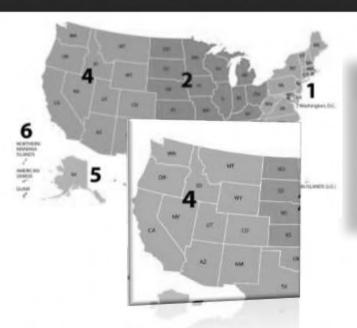
30-day PC3

period ends

Region 3 Activities

- CAST calls continue for another two weeks until sites transition to the monthly network adequacy calls
- Optum and Network Management are reviewing the **16 requests for PC3 extensions.** Some sites are reporting gaps in specific specialties whereas others are requesting for specific providers. Final decisions will be made this week.
- Optum is holding network reviews with individual sites that have concerns with the network. These meetings will focus in
 on certain specialties and outstanding issue tracker items.

Region 4 Update



SHCD - Phase 1 (2 VAMCs)

June 8, 2020

VISN 19 - 2 VAMCs

- Montana (436)
- · Eastern Colorado, CO (554)

Phase 2 (13 VAMCs)

July 21, 2020 VISN 17 - 7 VAMCs

Amarillo, TX (504)

El Paso, TX (756)

Texas Valley Coastal (740

Central Texas (674) North Texas (549)

South Texas (671) West Texas (519)

Shreveport, LA (667) astal (740) catchment area VISN 19 – 4 VAMCs

> Cheyenne, WY (442) Sheridan, WY (666)

VISN 16 - 2 VAMC

Houston, TX (580)
Texas counties aligned to

Salt Lake City, UT (660) Grand Junction, CO (575)

Phase 3 (14 VAMCs)

August 11, 2020

VISN 20 – 7 VAMCs Portland, OR (648) Puget Sound, WA (663)

Roseburg, OR (653) Spokane, WA (668)

White City, OR (692) Walla Walla, WA (687)

Boise, ID (531)

VISN 21 - 7 VAMC

Fresno, CA (570) Reno, NV (654) San Francisco, CA (662)

Northern California (612) Palo Alto, CA (640)

Southern Nevada (593) Honolulu, HI (459)

Phase 4 (8 VAMCs)

August 25, 2020 VISN 22 – 8 VAMCs

Loma Linda, CA (605) Long Beach, CA (600)

New Mexico (501)

New Mexico (501

Northern Arizona (649) Phoenix, AZ (644)

Con Diago CA

San Diego, CA (664)

Southern Arizona (678)

Greater LA, CA (691)

16

Region 4 SHCD

- ✓ Region 4 Phase 2 deploying on July 21, 2020
- ✓ Collaborating with TriWest to prepare Phase 2 and 3 sites for CCN Go live through predeployment meeting series
- ✓ Planning and conducting sequence of e-learnings, virtual training sessions, and just in time refresher trainings to ensure site staff are ready to use CCN systems and tools for Go Live
- ✓ Increasing messaging on differences between CCN and PC3 to level set site expectations
- ✓ Updating deployment approach for Phase 2-4 Command Center based on Phase 1 lessons learned; scaling to account for increased number of Go-Live sites
- ✓ Developing proactive referral tracking approach to determine trends: network gaps, COVID-19 impact vs field utilization

ELC Decision Needed/ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 35/80 Users
- CCN Accreditation Waivers UI: 25/30 Users
- CCN Complaints & Grievances UI: 24/54 Users
- CCN Congressional Inquiries UI: 27/42 Users
- CCN Corrective Action Plans (CAPs) UI: 25/30 Users
- CCN Network Adequacy Deviations UI: 25/51 Users

Accomplishments

04/01/2020 **EPRS Build 4** 04/28/2020 **EPRS Build 5B**

05/18/2020 UAT complete for **Build 5C IDA Reports** 06/26/2020

 UAT complete for **Build 5D IDA Reports** 06/26/2020 EPRS Build 5.1

Upcoming Milestones

Future Build/Release Planning Underway

OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	(b)(5)

Development

ELC Decision Needed/ ELC Priority Discussion No ELC decisions needed or priority discussion topics at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- 2,223,145: Total Referrals FY 2020
- 186,901: Total Referral FY 2019
- 16,581: Total number of VA user accounts provisioned
- 13,381: Number of Community Providers provisioned
- 4,903: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,270: Support Ticket Count for June
- 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning-VA; Provisioning-CP; Related to Production Outage

Accomplishments

07/10/2020 CTB V1.9.0072 ND 07/20/2020 **RELEASE 9.0 ND**

08/25/2020 07/21/2020 COVID REFERRAL EXT RELEASE 10.0 CCSC BATCHING COMPLETE PRESENTATION

(b)(5)

08/25/2020 **RELEASE 10.0 FIELD** NOTIFICATION

Upcoming Milestones

9/14/2020 **RELEASE 10.0 ND** OCT 2020 **RELEASE 11.0 ND**

OCC Business Dependencies

Highlight OCC Business Dependencies:

- COVID19 Referral Extension: Issue found on 6/12/2020 with certain SEOC versions used in referral extension was addressed via a development script; Referral batching with downstream system was resumed on 6/29 and completed on 7/21/2020, ahead of scheduled by 3 days
- Clinical Integration (CI Field Support Director & Assistants): (b)(5)
- Delivery Operations/POM: (b)(5) (b)(5)

(b)(5)

- Finance (OCC Finance and Informatics Staff): (b)(5)
- Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)

OIT / Data Dependencies

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for GEC Documents task and EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Overview of Release 9.0 Enhancements

- Release 9 contains several general HSRM enhancements in addition to reporting enhancements and critical HSRM Task list enhancements, which will make task list management more efficient and user friendly.
- Training and communications are being developed to ensure proper task management utilization.

General HSRM Enhancements

- **Referral Date**: Change to Referral Date logic to reflect the start date to be the date the consult is 'Sent to HSRM' from CPRS
- Clinically Indicated Date: Removal of validation check logic for CID field
- Multiple Veteran Addresses: Addition of Residential Address

Task Management Enhancements

- Enhanced filtering by Veteran Last name
 - Search for specific Veteran by last name
 - Filter task list by Alpha Split
- "Clean slate": Tasks greater than 10 days old will be archived from the task list
- Addition of referral number on task list
- · Search task list by referral number
- Search task list by assigned user
- Add Level of Care Coordination to Priority field on task list
- Sort/filter by Level of Care Coordination/Priority
- Medical documentation task enhancements: 5 New dispositions for documents loaded to VistA

Reports Enhancements

- o Community Provider User Provisioning Report:
 - Added Community Facility parameter and removed the affiliation parameter
 - City and state added to the report
- Community Provider Referral Summary Report:
 - Veteran's date of birth added to the report
- Optional Task Report
 - Region added to the report





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) – Phase 2

National Deployment

ELC Decision Needed/ ELC Priority Discussion

The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

 No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1)
 AR PATCH NATIONALLY
 RELEASED
- 06/02/20 IB 675 NATIONALLY RELEASED
- 06/05/20 SIX MONTH EXTENSION STARTED
- 08/03/20 IB PATCH 677 NATIONALLY RELEASING
- 08/31/20 IB PATCH 678 NATIONALLY RELEASING
- FOUR ADDITIONAL IB/AR PATCHES TARGETED FOR DEVELOPMENT AND NATIONAL RELEASE
- 12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

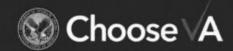
• No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Upcoming Milestones

• Downstream Dependency – None at this time.

(b)(5)



CPAC Document Scanning

National Deployment

ELC Decision Needed/ ELC Priority Discussion		
(b)(5)		

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 10/09/19 UPDATED PERFORMANCE
 DESCRIPTIONS AND UNION APPROVAL FOR
 CPAC DEPLOYMENT RECEIVED
- 03/31/20 FINAL 9957
 ACCESS REQUEST
 SUBMITTED
- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS

Upcoming Milestones

 07/24/20 PROJECT COMPLETE

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and Technology / Data Dependencies





ELC Decision Needed/ ELC Priority Discussion	Project Descri	iption	Key Performance Inc	dicators (KPI)
• Priority Discussion: No	Community C		static eligibility to CC daily to TPA and CCN • <i>Metric 2:</i> Tracking of accurate eligibility de Quality Report) <i>100%</i>	f Veteran eligibility to ensure eterminations (ESCC Data
Accomplishments		U	Ipcoming Milestones	
SUNSET APPROVED FOR DEPLOYED ELIGI GRANDFATHER SOLUTION OF NOT FUNCTIONALITY OF CO	020 COMPLETED BILITY ANALYSIS C DATA FOR CTED REFERRALS	REGARDING BUSINESS NOT EN RULES FOR PREVENTING VETERA	O ES RELEASE TO D STATIC ELIGIBILITY TO IROLLED COVERED ANS AND INCLUDE COPY ORDS IN ELIGIBILITY FILE	08/2020 ES RELEASE TO AUTOMATE COLLATERAL OF VETERAN PROCESS TO INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE (PHASE I
OCC Business Dependencies		Office of Information and Techn	nology (OIT) / Data De	ependencies
 Highlight OCC Business Dependencies: Clinical Integration (Business Owners) System Engineering Management (SEM) — (b)(5) 		(b)(5)		

(b)(5)

Business Intelligence Service Line (BISL) (b)(5)
 Community Care Contractor (CCN) – (b)(5)

• VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office



Retail Pharmacy Program

Sustainment

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods	 Metric 1: over 100,000 Veteran's vaccinated Metric 2: Vaccinate 125,000 next year Metric 3: Reimburse Walgreens 99% accuracy Metric 4: Continued Outreach to Rural Veterans
Accomplishments	Upcoming Milestones	
FILE/INVOICE SENT	/1/2020 CLOSE OUT RETAIL HARMACY	
OCC Business Dependencies	Office of Information and Techn	ology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(5)	RISK: N/A	





VA DoD Revenue Standardization

Project Phase – Development

Project Description Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion the VHA support DoD Reimbursement pilots with a web based tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment **DECISION**: No new decisions needed from Revenue Operations regarding back end process batch processing, invoice Methodology. at this time. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 8/1/20 VSSC 9/1/20 SEM 10/01/20 FUNCTIONAL 5/15/2020 SEM **2019 SEM BUSINESS VALIDATION OF DOD** SHAREPOINT TOOL **USER TESTING** SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE DATA COMPLETE **TESTING** COMPLETE **OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies (b)(5)There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff). (b)(5)

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation Updates

Project Name	Date Presented at PMR	Decision	Status
Comprehensive Disaster Recovery Plans	6/23	Approved	Intake
ePrescribing	6/23	Approved	Intake
CAVE	7/14	Approved	CCSC, 7/28, approval to move to project development
Veteran Credit Database Program	Scheduled for 8/11	Pending	TBD



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"I INCL ACCIDION"

12/12/2022 37 of 532

Community Care Business Program Management Review (PMR) #1

07/28/2020



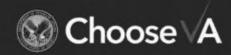


U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

Agenda

- OCC Priority Project Review
 - OCC Data Governance
 - VA/DoD Advanced Payment and Referral Standardization
 - One Consult 2.0
 - Indian/Tribal Health Coordination (ITHC)
 - Advanced Medical Cost Management System (AMCMS)
 - Urgent Care Integrated Project Team
 - Provider Profile Management System (PPMS)
 - Community Care Reimbursement System (CCRS)
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- · Number of data policies, practices, and standards established
- · Percent of data issues resolved
- · Number of completed data initiatives in data governance project portfolio
- · Percent of data initiatives that meet or exceed established initiative targets

Accomplishments

7/6/2020 **NOMINATED DATA GOVERNANCE GROUP**

7/7/2020 CCSC DATA GOVERNANCE PROJECT APPROVAL

7/8/20 KICKED OFF DATA **GOVERNANCE PROJECT**

7/15/2020 **ADOPTED CONTINUOUS** LEARNING APPROACH

Upcoming Milestones

8/5/2020 **DEFINE OVERARCHING DATA** GOVERNANCE STRATEGIC PRIORITIES GOVERNANCE CHARTER

8/12/2020 **FINALIZE DATA** 8/19/2020 **IDENTIFY A DATA-RELATED GOVERNANCE PORTFOLIO**

OCC Business Dependencies

(b)(5)

OIT / Data Dependencies

VA DoD Reimbursement

Project Phase – Development

Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion **Project Description** 24,861 VA/DoD consults entered in FY20. (b)(5)95% of FY20 VA/DOD consults have SEOCs Creation of processes and included. procedures which allow for Live Pilot Results necessary data sharing to support • Biloxi/Pensacola FY20: 95% quarterly advanced payments from VA to DoD for care provided automated consult/claim match to eligible Veterans, along with rate • NCR FY20: 74% consult/claim match revenue capture and workload rate tracking for VA. **Upcoming Milestones** 10/1/20: NEXT AP SITE GO-6/30/20: REPORT ON 9/15/20: ITSC 5/1/20 GO LIVE 5/30/20: SITE-BY-SITE 7/1/20: BEGIN W/ NCR AP **ROLLOUT SCHEDULE RECOMMENDATION ON DATA** LIVES (WOMACK, KEESLER & NCR AP PILOT RESULTS PREPPING NEXT AP **PILOT** PROVIDED TO HEC SHARING SOLUTION TO JEC **EGLIN MTFS)** FOR HEC **ROLLOUT SITES OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies Clinical Integration: CI has trained VAMC Community Care staff on standard VA/DoD care coordination processes. DO/POM: (b)(5) RO Staff • OCC BOA/Finance and VAMC Fiscal Staff: (b)(5) VHA VSSC (b)(5) DoD DHA: (b)(5)(b)(5)

One Consult 2.0

Executive Leadership Priority Discussion	Committee (ELC) Decision Needed /
DECISION: No decision i	requested at this time
• (b)(5)	

Project Description

One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies

Key Performance Indicators (KPI)

- DST integrated into CPRS- Q1 FY 21
- CTB integrated into CPRS- Q2 FY 21
- DST use of new drive time CC eligibility API estimated mid August (30 days after FRN publication)

Accomplishments

RECEIVED APPROVAL FROM BUSINESS TO **UTILIZE EXISTING** CAPABILITIES WITHIN DST RELEASED UPDATE THAT ADDED CC AVERAGE WAIT TIMES TO THE DST DASHBOARD

DEPLOYMENT OF CTB 1.9.0072 OVER 30 DAYS, BEGAN 7/14/20

CBT V1.9.0072 ANNOUNCEMNT AND **FGB UPDATES** COMPLETED

DST DRIVE TIME TO BE ENABLED 30 DAYS AFTER FRN **PUBLICATION**

TEAM CONTINUES TO CAPTURE REQUIREMENTS FOR WEB BASED PLATFORM. **DST OFFCE HOURS** CONTINUE 7/20/2020.

TESTING / NATIONAL DEPLOYMENT OF CTB V1.9.0076. TESTING 9/16/2020, NATIONAL **DEPLOYMENT 10/03/2020**

(b)(5)	
	A.4

OIT / Data Dependencies

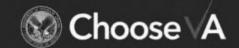


Upcoming Milestones

Indian-Tribal Health Coordination

Development

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)	
(1)This project's training activities were impacted by COVID-19 and were/are on hold until the partners are free to resume. VA staff training was moved to self-paced PPT and sent to the field on 7/17. (b)(5) Discussion (b)(5)	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted 	
Accomplishments	Upcoming Milestones		
ADVISORY BOARD MTG STAKEHOLDER VIRTUAL CONSULTATION IHS/	30/20 RESTART 9/30/20 CLEAR /THP RE-TRAINING EXECUTION OF EXPANSION MATERIAL EXPANSION MA	- IHS/THP COORDINATION	
OCC Business Dependencies	OIT / Data Dependencies		
(b)(5)	N/A Risk: Mitigation:		





AMCMS

Deployment

ELC Decision Needed/ ELC Priority Discussion				
(b)(5)				

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Upon deployment, key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- **FM Metrics:** Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

6/17-6/24 UAT DATA
VALIDATION ROUND I
EXECUTED

 7/10 UAT TEST SCRIPTS UPDATED 6/24-7/15 INCORPORATION OF CHANGES & DATA VALIDATION FIXES BASED ON UAT FEEDBACK 7/15-7/25 UAT DATA
VALIDATION ROUND II
EXECUTION

8/21 UAT TEST
EVALUATION
REPORT

Upcoming Milestones

8/25 NATIONAL DEPLOYMENT GATE REVIEW MEETING

 8/26/20 BEGIN FIELD NATIONAL DEPLOYMENT

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

0)(5)			
A Total			

Urgent Care IPT

National Deployment

ELC Decision Needed/ ELC Priority Discussion	00000881465 "UNGLASSIF	Project Description	Key Performance Indicators (KPI)
(b)(5)		Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.	as of 5/31/2020
Accomplishments		Upcoming Milestones	=
O6/08/20 REGION 2/3 GO LIVE DATE FINALIZED AS 8/4 O7/15/20 REGION 2/3 COMMS RELEASED	08/04/20 REGION 2 TRANSITION	08/04/20 REGION 3 TRANSITION TRANSITION TRANSITION	
OCC Business Dependencies		Office of Information Technology / Da	ita Dependencies
Clinical Integration: N/A Delivery Operations: N/A (b)(5)		RISK: N/A Mitigation: N/A	

ELC Decision Needed/ ELC Priority Discussion (b)(5)

Project Description

Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information. **Key Performance Indicators (KPI)**

Power BI functionality exceeded license capability for reporting previous metrics.

Accomplishments

- 5/22/20PPMS 8.0GO-LIVE
- 6/30/20
 DEV CONTRACT
 AWARDED JUNE
 - OCT U
 - 7/1/20 URGENT CARE LEGACY RE-ROUTE
- 7/7/20 PPMS 8.1 GO-
- 7/23/20 HOTFIX 8.1.1.1 RELEASE
- 7/29/20
 COMMUNITY PROVIDER
 LOCATOR (CPL) RELEASE

Upcoming Milestones

- 08/11/20 PPMS 9.0 NATIONAL GATEWAY REVIEW
- 08/20/20
 PPMS 9.0
 GO-LIVE

OCC Business Dependencies

- Clinical Integration
- Network Management
- Community Care Network
- Delivery Operations
- Revenue Operations
- VAMC/CPO & Pharmacy - (b)(5)

(b)(5)

OIT / Data Dependencies

(b)(5)





CCRS

National Deployment

* No ELC Decision Requests for July

Accomplishments

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Upcoming Milestones

Key Performance Indicators (KPI)

CCN Payment Metrics as of July 17, 2020

- Region 1: Invoices Received 1,329,157, Confirmed Paid 825,256, Sent for Payment 27,528, "No Action" Optum denials 409,257
- Region 2: Invoices Received 759,546, Confirmed Paid 464,651, Sent for Payment 23,090, "No Action" Optum denials 242,340
- Region 3: Invoices Received 176,601, Confirmed Paid 72,137, Sent for Payment – 4,983, "No Action" Optum denials – 94,192
- Region 4: Invoices Received 1,347, Confirmed Paid 241, Sent for Payment 299, "No Action" TriWest denials 563
- The total Invoice Amount Paid/Sent for Payment: \$984,680,609.20

06/23/2020 SUSPENSION 07/06/2020 PMPM ADMIN 07/09/2020 CCRS 07/14/2020 NATIONAL _ 07/16/2020 RELEASE 07/17/2020 UPDATE 07/17/2020 UPDATE **OF SUSPENSION OF 270** ■ FEES FOR RESUBMISSIONS **USER ACCEPTANCE** KMS AND TRAINING **DEPLOYMENT GATE USER GUIDES AND CCRS 11.4 TO** DAY DENIAL REASON **IMPLEMENTED STARTING** DOCS FOR CCRS 11.4 **TESTING 11.4** REVIEW (GO, NO GO **LESSONS LEARNED PRODUCTION** APPROVED BY ELC WITH MAY DECISION) **CCRS 11.4 OCC** Business Dependencies OIT / Data Dependencies Clinical Integration (Facility CC Staff and VAMC RN Staff) Delivery Operations/Payment Oversight and Management (Invoice Processing Staff) [(b)(5) Revenue Operations (Facility Revenue, RUR, and CPAC Staff): (b)(5) • Finance (OCC Finance and Informatics Staff) (b)(5) VAMC / Fiscal Budget Staff: (b)(5) (b)(5)

Appendix





Cerner OCC Integration

Development

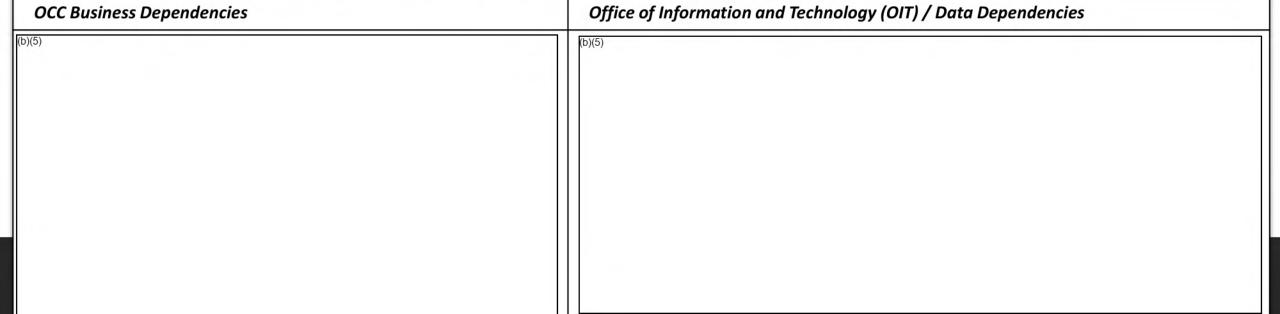
ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Manage all necessary integrations to TBD: Focusing on timeliness No ELC decisions needed or priority discussion topics at this appropriately measures and qualitative time. operationalize Cerner surveys EHR into OCC clinical operations processes These dates are subject to **Accomplishments Upcoming Milestones** change due to COVID-19 uncertainty CSS: **Super User Training:** ORA: IV3: **TBD** awaiting **OEHRM** Decision Go Live 8/21/2020 9/7/2020 8/10/2020 7/27/2020 **OCC** Business Dependencies OIT / Data Dependencies **Highlight OCC Business Dependencies:** -Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5) -Payment Operations Management -Revenue Operations (Facility Revenue, RUR, and CPAC Staff) -Women's Health (IVF and Infertility) (b)(5)



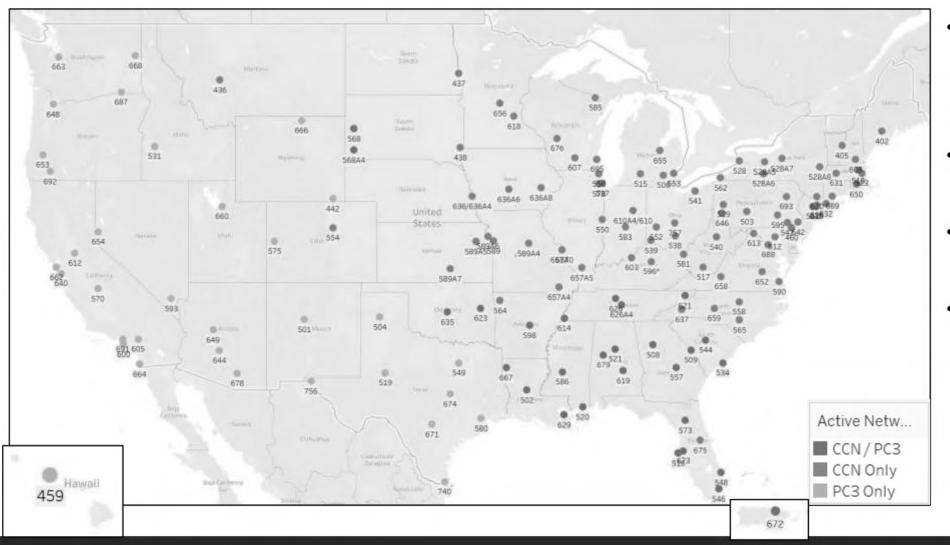
Community Care Network

Deployment

ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Region 3 Gradual Transition - CCN Referral # Complete regional • Week 1: May 18 - 22, 2020 deployments to Total Referrals = 4,965* Total Rejects = 10 achieve CCN in Regions Week 2: May 25-29, 2020 1 – 6 and consolidate Total Referrals = 5,084* Total Rejects = 10 regional operations No ELC decisions needed or priority discussion topics at this time. Week 3: June 1-5, 2020 support as transitions Total Referrals = 7,743* Total Rejects = 18** complete to focus on Region 4 R4P1 Go Live - CCN Referral # stabilizing and Week 1: June 8-12, 2020 optimization. Total Referrals = 842 Total Rejects = 45 **Accomplishments Upcoming Milestones** 08/31/20 R4 06/16/20 R3P2 08/04/20 R2 & R3 08/11/20 R4P3 08/25/20 R4P4 SHCD 07/21/20 R4P2 SHCD GO-LIVE **URGENT CARE URGENT CARE** SHCD GO-LIVE **GO-LIVE** SHCD GO-LIVE **CUTOVER FROM PC3 CUTOVER FROM PC3**



National Network Deployment Progress – As of 7/6/2020



- (b)(5)
- Regions 1, 2, and 3 are fully deployed
- Region 4 Phase 1 deployed on 6/8/2020
- Covid-19 is impacting the national deployment progress and provider recruitment progress

Region 3 Update

January 7 2020: Go-Live for Two Sites May 18 – June 15: Gradual



Transition

Throughout the Gradual Transition, and continuing post-go-live, Optum is working to contract with key Region 3 providers.

Recent wins include:

- VISN 7: University of Alabama (received verbal agreement)
- VISN 16: Willis-Knighton Health System

June 16: Full Region 3

Deploymeal remaining R3 sites)

June 16, 2020

Atlanta, GA

August, GA

Bay Pines, FL

Biloxi, MS Central Arkansas, AR Birmingham, AL Columbia, SC Central Alabama Memphis, TN Charleston, SC Murfreesboro, TN Dublin, GA Nashville, TN Jackson, MS Miami, FL New Orleans, LA Mountain Home, TN Shreveport, LA Muskogee, OK Tuscaloosa, AL N. Florida / S. Georgia Alexandria, LA

Oklahoma City, OK San Juan, PR Tampa, FL **July 17:**

cutover

30-day PC3

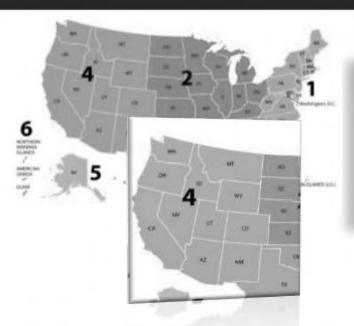
period ends

West Palm Beach, FL

Region 3 Activities

- CAST calls continue for another two weeks until sites transition to the monthly network adequacy calls
- Optum and Network Management are reviewing the **16 requests for PC3 extensions.** Some sites are reporting gaps in specific specialties whereas others are requesting for specific providers. Final decisions will be made this week.
- Optum is holding network reviews with individual sites that have concerns with the network. These meetings will focus in
 on certain specialties and outstanding issue tracker items.

Region 4 Update



SHCD - Phase 1 (2 VAMCs)

June 8, 2020

VISN 19 - 2 VAMCs

- Montana (436)
- · Eastern Colorado, CO (554)

Phase 2 (13 VAMCs)

July 21, 2020 VISN 17 - 7 VAMCs

Amarillo, TX (504)

El Paso, TX (756) Texas Valley Coastal (740

Central Texas (674) North Texas (549) South Texas (671)

West Texas (519)

VISN 16 - 2 VAMC

Houston, TX (580) Texas counties aligned to Shreveport, LA (667)

catchment area

VISN 19 - 4 VAMCs

Cheyenne, WY (442) Sheridan, WY (666) Salt Lake City, UT (660) Grand Junction, CO (575)

Spokane, WA (668) White City, OR (692)

Walla Walla, WA (687) Boise, ID (531)

Phase 3 (14 VAMCs)

August 11, 2020

VISN 20 - 7 VAMCs Portland, OR (648) Puget Sound, WA (663) Roseburg, OR (653)

VISN 21 - 7 VAMC

Fresno, CA (570) Reno, NV (654) San Francisco, CA (662) Northern California (612) Palo Alto, CA (640) Southern Nevada (593) Honolulu, HI (459)

Phase 4 (8 VAMCs)

Loma Linda, CA (605)

August 25, 2020 VISN 22 - 8 VAMCs

Long Beach, CA (600) New Mexico (501) Northern Arizona (649)

Phoenix, AZ (644)

San Diego, CA (664)

Southern Arizona (678)

Greater LA, CA (691)

16

Region 4 SHCD

- Region 4 Phase 2 deploying on July 21, 2020
- Collaborating with TriWest to prepare Phase 2 and 3 sites for CCN Go live through predeployment meeting series
- Planning and conducting sequence of e-learnings, virtual training sessions, and just in time refresher trainings to ensure site staff are ready to use CCN systems and tools for Go Live
- Increasing messaging on differences between CCN and PC3 to level set site expectations
- Updating deployment approach for Phase 2-4 Command Center based on Phase 1 lessons learned; scaling to account for increased number of Go-Live sites
- Developing proactive referral tracking approach to determine trends: network gaps, COVID-19 impact vs field utilization





ELC Decision Needed/ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 35/80 Users
- CCN Accreditation Waivers UI: 25/30 Users
- CCN Complaints & Grievances UI: 24/54 Users
- CCN Congressional Inquiries UI: 27/42 Users
- CCN Corrective Action Plans (CAPs) UI: 25/30 Users
- CCN Network Adequacy Deviations UI: 25/51 Users

Accomplishments

04/01/2020 EPRS Build 4 04/28/2020
 EPRS Build 51

) 5B 05/18/2020
UAT complete for
Build 5C IDA Reports

06/26/2020

UAT complete for Build 5D IDA Reports

06/26/2020 EPRS Build 5.1 **Upcoming Milestones**

Future Build/Release Planning Underway

Project Dependencies • Community Care Contract Administration (CCCA) • Community Care Network Management (NM): (D)(5) (D)(5)

Development

No ELC decisions needed or priority discussion topics at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- 2,223,145: Total Referrals FY 2020
- **186,901**: Total Referral FY 2019
- **16,581**: Total number of VA user accounts provisioned
- **13,381**: Number of Community Providers provisioned
- **4,903**: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,270: Support Ticket Count for June
- 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning-VA; Provisioning- CP; Related to Production Outage

Accomplishments

07/10/2020 CTB V1.9.0072 ND 07/20/2020 RELEASE 9.0 ND

- 07/21/2020 08/25/2020
 COVID REFERRAL EXT RELEASE 10.0 CCSC
 BATCHING COMPLETE PRESENTATION
- 08/25/2020 RELEASE 10.0 FIELD NOTIFICATION

Upcoming Milestones

- 9/14/2020
 RELEASE 10.0 ND
- OCT 2020 RELEASE 11.0 ND

OCC Business Dependencies

Highlight OCC Business Dependencies:

- COVID19 Referral Extension: Issue found on 6/12/2020 with certain SEOC versions used in referral
 extension was addressed via a development script; Referral batching with downstream system was
 resumed on 6/29 and completed on 7/21/2020, ahead of scheduled by 3 days
- Clinical Integration (CI Field Support Director & Assistants): (b)(5)
- Delivery Operations/POM: (b)(5)
- Finance (OCC Finance and Informatics Staff) (b)(5)
- Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)

0)(5)

OIT / Data Dependencies

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for GEC Documents task and EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Overview of Release 9.0 Enhancements

- Release 9 contains several general HSRM enhancements in addition to reporting enhancements and critical HSRM Task list enhancements, which will make task list management more efficient and user friendly.
- Training and communications are being developed to ensure proper task management utilization.

General HSRM Enhancements

- **Referral Date**: Change to Referral Date logic to reflect the start date to be the date the consult is 'Sent to HSRM' from CPRS
- Clinically Indicated Date: Removal of validation check logic for CID field
- Multiple Veteran Addresses: Addition of Residential Address

Task Management Enhancements

- Enhanced filtering by Veteran Last name
 - Search for specific Veteran by last name
 - Filter task list by Alpha Split
- "Clean slate": Tasks greater than 10 days old will be archived from the task list
- Addition of referral number on task list
- · Search task list by referral number
- Search task list by assigned user
- Add Level of Care Coordination to Priority field on task list
- Sort/filter by Level of Care Coordination/Priority
- Medical documentation task enhancements: 5 New dispositions for documents loaded to VistA

Reports Enhancements

- o Community Provider User Provisioning Report:
 - Added Community Facility parameter and removed the affiliation parameter
 - City and state added to the report
- Community Provider Referral Summary Report:
 - Veteran's date of birth added to the report
- Optional Task Report
 - Region added to the report





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) – Phase 2

National Deployment

ELC Decision Needed/ ELC Priority Discussion

The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

 No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1)
 AR PATCH NATIONALLY
 RELEASED
- 06/02/20 IB 675 NATIONALLY RELEASED
- 06/05/20 SIX MONTH EXTENSION STARTED
- 08/03/20 IB PATCH 677 NATIONALLY RELEASING
- 08/31/20 IB PATCH 678 NATIONALLY RELEASING
- FOUR ADDITIONAL IB/AR PATCHES TARGETED FOR DEVELOPMENT AND NATIONAL RELEASE
- 12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Upcoming Milestones

• Downstream Dependency – None at this time.



CPAC Document Scanning

National Deployment

ELC Decision Needed/ ELC Priority Discussion		
(b)(5)		
	• N	

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 10/09/19 UPDATED PERFORMANCE
 DESCRIPTIONS AND UNION APPROVAL FOR
 CPAC DEPLOYMENT RECEIVED
- 03/31/20 FINAL 9957 ACCESS REQUEST SUBMITTED
- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS

(b)(5)

Upcoming Milestones

 07/24/20 PROJECT COMPLETE

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and Technology / Data Dependencies



ELIGIBILITY

BASED ON CARE

(b)(5)

ELC Decision Needed/ ELC Priority Discussion	Project Description	Кеу
• Priority Discussion: No	The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.	• N st d • N a
Accomplishments		Upcon
● 06/2020 ● 06/2020 RSD ● 06/2020 ● SUNSET APPROVED FOR DEPLOYED GRANDFATHER SOLUTION OF NOT FUNCTIONALITY	ELIGIBILITY ANALYSIS	20 ES R ND STAT NROLLE

REJECTED REFERRALS

Performance Indicators (KPI)

- Metric 1: Communicate the Community Care tatic eligibility to CCN and TPA (eligibility files sent aily to TPA and CCN) 100%
- **Metric 2:** Tracking of Veteran eligibility to ensure ccurate eligibility determinations (ESCC Data (uality Report) 100% daily

ning Milestones

DATA **OCC Business Dependencies** · Highlight OCC Business Dependencies: Clinical Integration (Business Owners) (b)(5) System Engineering Management (SEM) Business Intelligence Service Line (BISL) -(b)(5) Community Care Contractor (CCN) - (b)(5) VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO) (b)(5)

ENROLLED COVERED

VETERANS

FOR THE 6 AND 12

MONTH HARDSHIP

RULES FOR PREVENTING APPROVAL OF REFERRALS FOR INELIGIBLE VETERANS

ELEASE TO IC ELIGIBILITY TO D COVERED VETERANS AND INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE

08/2020 ES RELEASE TO **AUTOMATE COLLATERAL OF** VETERAN PROCESS TO **INCLUDE COPY OF RECORDS** IN ELIGIBILITY FILE (PHASE I)

Office of Information and Technology (OIT) / Data Dependencies





Retail Pharmacy Program

Sustainment

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods	 Metric 1: over 100,000 Veteran's vaccinated Metric 2: Vaccinate 125,000 next year Metric 3: Reimburse Walgreens 99% accuracy Metric 4: Continued Outreach to Rural Veterans
Accomplishments	Upcoming Milestones 8/1/2020 CLOSE	
FILE/INVOICE SENT	OUT RETAIL PHARMACY	
OCC Business Dependencies	Office of Information and Techn	ology (OIT) / Data Dependencies
(b)(5) (b)(6) (b)(5)	RISK: N/A	





VA DoD Revenue Standardization

Project Phase – Development

Project Description Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion the VHA support DoD Reimbursement pilots with a web based tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment **DECISION**: No new decisions needed from Revenue Operations regarding back end process batch processing, invoice Methodology. at this time. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 8/1/20 VSSC 9/1/20 SEM 10/01/20 FUNCTIONAL 5/15/2020 SEM **2019 SEM BUSINESS VALIDATION OF DOD** SHAREPOINT TOOL **USER TESTING** SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE DATA COMPLETE **TESTING** COMPLETE **OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff). (b)(5)

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation Updates

Project Name	Date Presented at PMR	Decision	Status
Comprehensive Disaster Recovery Plans	6/23	Approved	Intake
ePrescribing	6/23	Approved	Intake
CAVE	7/14	Approved	CCSC, 7/28, approval to move to project development
Veteran Credit Database Program	Scheduled for 8/11	Pending	TBD



Community Care Business Program Management Review (PMR) #1

07/28/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

- OCC Priority Project Review
 - OCC Data Governance
 - VA/DoD Advanced Payment and Referral Standardization
 - One Consult 2.0
 - Indian/Tribal Health Coordination (ITHC)
 - Advanced Medical Cost Management System (AMCMS)
 - Urgent Care Integrated Project Team
 - Provider Profile Management System (PPMS)
 - Community Care Reimbursement System (CCRS)
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- · Number of data policies, practices, and standards established
- Percent of data issues resolved
- Number of completed data initiatives in data governance project portfolio
- · Percent of data initiatives that meet or exceed established initiative targets

Accomplishments

7/6/2020 **NOMINATED DATA GOVERNANCE GROUP**

7/7/2020 CCSC DATA GOVERNANCE

PROJECT APPROVAL

7/8/20 KICKED OFF DATA **GOVERNANCE PROJECT**

7/15/2020 **ADOPTED CONTINUOUS** LEARNING APPROACH

Upcoming Milestones

8/5/2020 **DEFINE OVERARCHING DATA** GOVERNANCE STRATEGIC PRIORITIES GOVERNANCE CHARTER

OIT / Data Dependencies

8/12/2020 **FINALIZE DATA** 8/19/2020 **IDENTIFY A DATA-RELATED GOVERNANCE PORTFOLIO**

OCC Business Dependencies

Pending Dependency Management Analysis

(b)(5)

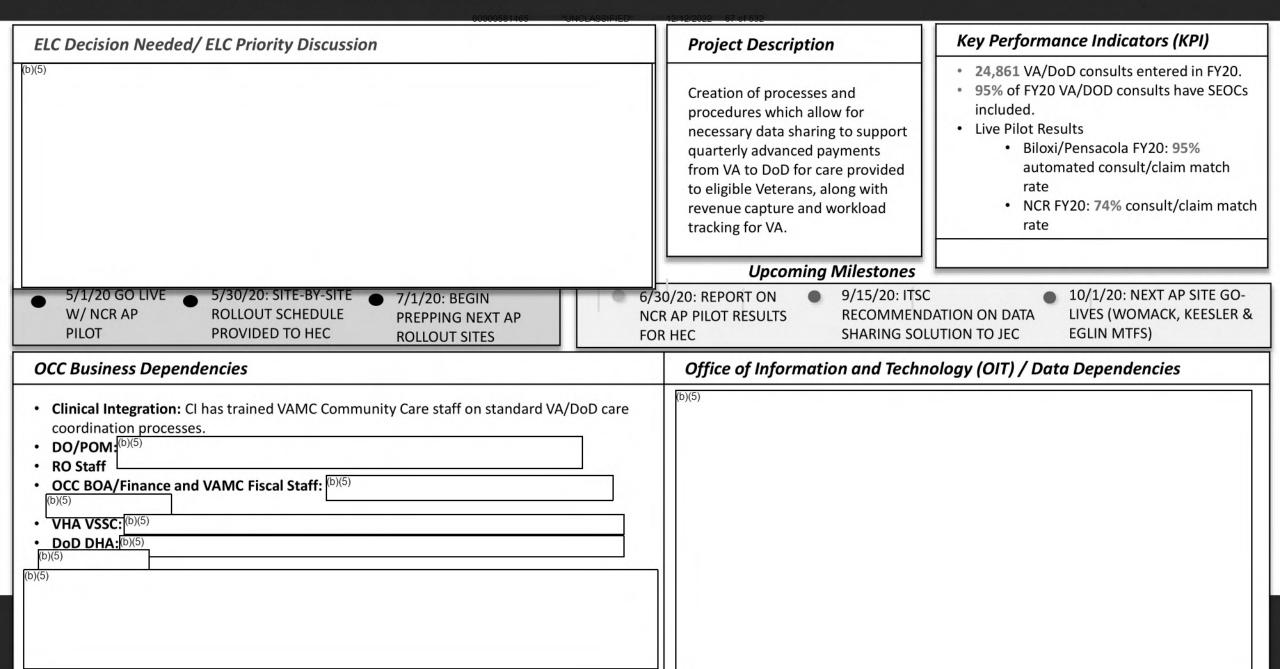
Pending Dependency Management Analysis





VA DoD Reimbursement

Project Phase – Development



One Consult 2.0

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	
DECISION: No decision requested at	this time
• (b)(5)	

Project Description

One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies

Key Performance Indicators (KPI)

- DST integrated into CPRS- Q1 FY 21
- CTB integrated into CPRS- Q2 FY 21
- DST use of new drive time CC eligibility API estimated mid August (30 days after FRN publication)

Accomplishments

RECEIVED APPROVAL FROM BUSINESS TO UTILIZE EXISTING CAPABILITIES WITHIN DST

RELEASED UPDATE THAT
ADDED CC AVERAGE WAIT
TIMES TO THE DST
DASHBOARD

DEPLOYMENT OF CTB 1.9.0072 OVER 30 DAYS, BEGAN 7/14/20 CBT V1.9.0072
ANNOUNCEMNT AND
FGB UPDATES
COMPLETED

DST DRIVE TIME TO
BE ENABLED 30
DAYS AFTER FRN
PUBLICATION

TEAM CONTINUES TO CAPTURE REQUIREMENTS FOR WEB BASED PLATFORM.

DST OFFCE HOURS CONTINUE 7/20/2020.

Upcoming Milestones

TESTING / NATIONAL DEPLOYMENT OF CTB V1.9.0076. TESTING 9/16/2020, NATIONAL DEPLOYMENT 10/03/2020

OCC Business Dependencies

(b)(5)

OIT / Data Dependencies





Indian-Tribal Health Coordination

Development

ELC Decision Needed/ ELC Priority Discussion		Project Description	Key Performance Indicators (KPI)
(1)This project's training activities were impacted by hold until the partners are free to resume. VA staff paced PPT and sent to the field on 7/17. **Discussion** (b)(5)		Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted
Accomplishments		Upcoming Milestones	
6/4/20 HELD 2 ND ADVISORY BOARD MTG 07/17/20 VA FIELD STAKEHOLDER VIRTUAL TRAINING EMAILED	CONSULTATION IHS/	TUALLY) 9/30/20 CLEAN 9/30/20 CLEAN EXECUTION OF EXPANSION M	F IHS/THP COORDINATION
OCC Business Dependencies		OIT / Data Dependencies	
(b)(5)		N/A Risk: Mitigation:	





AMCMS

Deployment

ELC Decision Needed/ ELC Priority Discussion		
(b)(5)		

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Upon deployment, key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

6/17-6/24 UAT DATA
VALIDATION ROUND I
EXECUTED

 7/10 UAT TEST SCRIPTS UPDATED 6/24-7/15 INCORPORATION OF CHANGES & DATA VALIDATION FIXES BASED ON UAT FEEDBACK 7/15-7/25 UAT DATA VALIDATION ROUND II EXECUTION 8/21 UAT TEST
EVALUATION
REPORT

Upcoming Milestones

8/25 NATIONAL DEPLOYMENT GATE REVIEW MEETING

 8/26/20 BEGIN FIELD NATIONAL DEPLOYMENT

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Urgent Care IPT

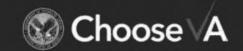
National Deployment

ELC Decision Needed/ ELC Priority Discussion			Project Description	Key Performance Indicators (KPI)
(b)(5)			Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.	• 5,688 total probable UC visits in Region 1, as of 5/31/2020
Accomplishments			Upcoming Milestones	
O6/08/20 REGION 2/3 GO LIVE DATE FINALIZED AS 8/4 O7/15/20 REGION 2/3 COMMS RELEASED	08/04/20 REGION 2 TRANSITION		08/04/20	
OCC Business Dependencies		Office	of Information Technology / Data	a Dependencies
Clinical Integration: N/A Delivery Operations: N/A Provider Relations and Services (PRS): (b)(5) Communications (b)(5) (b)(5)		(b)(5)		

Key Performance Indicators (KPI) Project Description ELC Decision Needed/ ELC Priority Discussion Provider Profile Management System (PPMS): A consolidated (b)(5)repository to house provider information for multiple Power BI functionality exceeded license community network and federal capability for reporting previous metrics. partner provide along with a tool to allow VA staff to view and manage that information. **Accomplishments Upcoming Milestones** (b)(5)7/7/20 5/22/20 6/30/20 7/1/20 PPMS 8.1 GO-**PPMS 8.0 URGENT CARE DEV CONTRACT** LIVE **GO-LIVE** LEGACY RE-ROUTE **AWARDED JUNE OCC** Business Dependencies OIT / Data Dependencies

OCC Business Dependencies

Clinical Integration
Network Management
Community Care Network
Delivery Operations
Revenue Operations
VAMC/CPO & Pharmacy - - |Di(5)|





CCRS

National Deployment

* No ELC Decision Requests for July

(b)(5)

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicators (KPI)

CCN Payment Metrics as of July 17, 2020

- Region 1: Invoices Received 1,329,157, Confirmed Paid 825,256, Sent for Payment 27,528, "No Action" Optum denials 409,257
- Region 2: Invoices Received 759,546, Confirmed Paid 464,651, Sent for Payment 23,090, "No Action" Optum denials 242,340
- Region 3: Invoices Received 176,601, Confirmed Paid 72,137, Sent for Payment – 4,983, "No Action" Optum denials – 94,192
- Region 4: Invoices Received 1,347, Confirmed Paid 241, Sent for Payment 299. "No Action" TriWest denials 563
- The total Invoice Amount Paid/Sent for Payment: \$984,680,609.20

Accomplishments

06/23/2020 SUSPENSION
OF SUSPENSION OF 270
DAY DENIAL REASON
APPROVED BY ELC

● FEES FOR RESUBMISSIONS IMPLEMENTED STARTING WITH MAY

Upcoming Milestones

OCC Business	Dependencies
--------------	--------------

- Clinical Integration (Facility CC Staff and VAMC RN Staff)
- Delivery Operations/Payment Oversight and Management (Invoice Processing Staff) : (b)(5)

Revenue Operations (Facility Revenue, RUR, and CPAC Staff):

(b)(5)

recovery efforts for CCN Invoices

- Finance (OCC Finance and Informatics Staff): (b)(5)
- VAMC / Fiscal Budget Staff: (b)(5)

(b)(5)

OIT / Data Dependencies

- Upstream Dependency Third Party Administrators (Optum, TriWest)
- Upstream Dependency Community Providers
- Upstream Dependency HSRM Project Team
- Upstream Dependency PPMS Project Team
- Upstream Dependency SEOC Database

• Downstream Dependency FMS Project Team

eam - (b)(5)

Downstream Dependency Program Integrity Team (PIT)

Appendix





Cerner OCC Integration

Development

No ELC decisions needed or priority discussion topics at this

Project Description

Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

ELC Decision Needed/ ELC Priority Discussion

time.

Upcoming Milestones

These dates are subject to change due to COVID-19

TBD awaiting **OEHRM** Decision

OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5)

(b)(5)

-Payment Operations Management
-Revenue Operations (Facility Revenue, RUR, and CPAC Staff)
-Women's Health (IVF and Infertility)

OIT / Data Dependencies





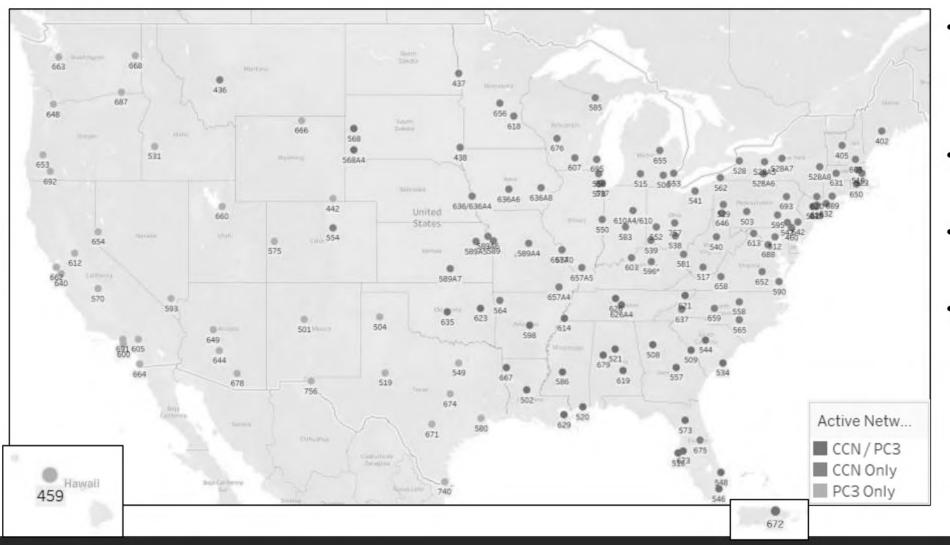
Community Care Network

Deployment

ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Region 3 Gradual Transition - CCN Referral # Complete regional • Week 1: May 18 - 22, 2020 deployments to Total Referrals = 4,965* Total Rejects = 10 achieve CCN in Regions Week 2: May 25-29, 2020 1 – 6 and consolidate Total Referrals = 5,084* Total Rejects = 10 regional operations No ELC decisions needed or priority discussion topics at this time. Week 3: June 1-5, 2020 support as transitions Total Referrals = 7,743* Total Rejects = 18** complete to focus on Region 4 R4P1 Go Live - CCN Referral # stabilizing and Week 1: June 8-12, 2020 optimization. Total Referrals = 842 Total Rejects = 45 **Accomplishments Upcoming Milestones** 08/31/20 R4 06/16/20 R3P2 08/04/20 R2 & R3 08/11/20 R4P3 08/25/20 R4P4 SHCD

07/21/20 R4P2 SHCD GO-LIVE **URGENT CARE URGENT CARE** SHCD GO-LIVE **GO-LIVE** SHCD GO-LIVE **CUTOVER FROM PC3 CUTOVER FROM PC3** Office of Information and Technology (OIT) / Data Dependencies **OCC** Business Dependencies (b)(5)(b)(5)

National Network Deployment Progress – As of 7/6/2020



- (b)(5) •
- Regions 1, 2, and 3 are fully deployed
- Region 4 Phase 1 deployed on 6/8/2020
- Covid-19 is impacting the national deployment progress and provider recruitment progress

Region 3 Update

January 7 2020: Go-Live for Two Sites May 18 – June 15: Gradual



Transition

Throughout the Gradual Transition, and continuing post-go-live, Optum is working to contract with key Region 3 providers.

Recent wins include:

- VISN 7: University of Alabama (received verbal agreement)
- VISN 16: Willis-Knighton Health System

June 16: Full Region 3

Deploymeal remaining R3 sites)

June 16, 2020

Atlanta, GA

August, GA

Bay Pines, FL

Biloxi, MS Central Arkansas, AR Birmingham, AL Columbia, SC Central Alabama Memphis, TN Charleston, SC Murfreesboro, TN Dublin, GA Nashville, TN Jackson, MS Miami, FL New Orleans, LA Mountain Home, TN Shreveport, LA Muskogee, OK Tuscaloosa, AL N. Florida / S. Georgia Alexandria, LA

Oklahoma City, OK San Juan, PR Tampa, FL **July 17:**

cutover

30-day PC3

period ends

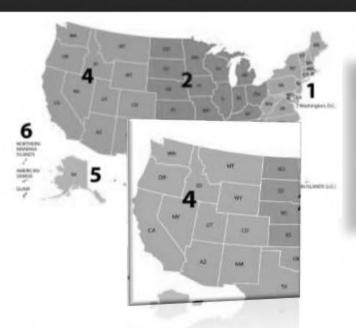
West Palm Beach, FL

Region 3 Activities

- CAST calls continue for another two weeks until sites transition to the monthly network adequacy calls
- Optum and Network Management are reviewing the **16 requests for PC3 extensions.** Some sites are reporting gaps in specific specialties whereas others are requesting for specific providers. Final decisions will be made this week.
- Optum is holding network reviews with individual sites that have concerns with the network. These meetings will focus in
 on certain specialties and outstanding issue tracker items.



Region 4 Update



SHCD - Phase 1 (2 VAMCs)

June 8, 2020

VISN 19 - 2 VAMCs

- Montana (436)
- · Eastern Colorado, CO (554)

Phase 2 (13 VAMCs)

July 21, 2020 VISN 17 - 7 VAMCs

Amarillo, TX (504) El Paso, TX (756)

Texas Valley Coastal (740

Central Texas (674) North Texas (549) South Texas (671)

West Texas (519)

VISN 16 - 2 VAMC

Houston, TX (580) Texas counties aligned to Shreveport, LA (667)

catchment area

VISN 19 - 4 VAMCs

Cheyenne, WY (442) Sheridan, WY (666) Salt Lake City, UT (660) Grand Junction, CO (575)

White City, OR (692)

Boise, ID (531)

Phase 3 (14 VAMCs)

August 11, 2020

VISN 20 - 7 VAMCs Portland, OR (648) Puget Sound, WA (663) Roseburg, OR (653) Spokane, WA (668)

Walla Walla, WA (687)

VISN 21 - 7 VAMC

Fresno, CA (570) Reno, NV (654) San Francisco, CA (662) Northern California (612) Palo Alto, CA (640) Southern Nevada (593) Honolulu, HI (459)

Phase 4 (8 VAMCs)

August 25, 2020 VISN 22 - 8 VAMCs

Long Beach, CA (600) New Mexico (501) Northern Arizona (649)

Loma Linda, CA (605)

Phoenix, AZ (644)

San Diego, CA (664)

Southern Arizona (678)

Greater LA, CA (691)

16

Region 4 SHCD

- Region 4 Phase 2 deploying on July 21, 2020
- Collaborating with TriWest to prepare Phase 2 and 3 sites for CCN Go live through predeployment meeting series
- Planning and conducting sequence of e-learnings, virtual training sessions, and just in time refresher trainings to ensure site staff are ready to use CCN systems and tools for Go Live
- Increasing messaging on differences between CCN and PC3 to level set site expectations
- Updating deployment approach for Phase 2-4 Command Center based on Phase 1 lessons learned; scaling to account for increased number of Go-Live sites
- Developing proactive referral tracking approach to determine trends: network gaps, COVID-19 impact vs field utilization





ELC Decision Needed/ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 35/80 Users
- CCN Accreditation Waivers UI: 25/30 Users
- CCN Complaints & Grievances UI: 24/54 Users
- CCN Congressional Inquiries UI: 27/42 Users
- CCN Corrective Action Plans (CAPs) UI: 25/30 Users
- CCN Network Adequacy Deviations UI: 25/51 Users

Accomplishments

04/01/2020 04/28, EPRS Build 4 EPRS E

04/28/2020 EPRS Build 5B 05/18/2020

UAT complete for Build 5C IDA Reports

06/26/2020 ● UAT complete for Build 5D IDA Reports

06/26/2020 EPRS Build 5.1 **Upcoming Milestones**

Future Build/Release Planning Underway

OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	(b)(5)



Development

ELC Decision Needed/ ELC Priority Discussion No ELC decisions needed or priority discussion topics at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Upcoming Milestones

Key Performance Indicators (KPI)

- 2,223,145: Total Referrals FY 2020
- **186,901**: Total Referral FY 2019
- **16,581**: Total number of VA user accounts provisioned
- 13,381: Number of Community Providers provisioned
- **4,903**: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,270: Support Ticket Count for June
- · 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning-VA; Provisioning- CP; Related to Production Outage

Accomplishments

07/10/2020 CTB V1.9.0072 ND 07/20/2020 RELEASE 9.0 ND

(b)(5)

OCC Business Dependencies

Highlight OCC Business Dependencies:

- COVID19 Referral Extension: Issue found on 6/12/2020 with certain SEOC versions used in referral
 extension was addressed via a development script; Referral batching with downstream system was
 resumed on 6/29 and completed on 7/21/2020, ahead of scheduled by 3 days
- Clinical Integration (CI Field Support Director & Assistants): (b)(5)
- Delivery Operations/POM: (b)(5)
- Finance (OCC Finance and Informatics Staff) (b)(5)

• Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)

(b)(5)

(b)(5)

OIT / Data Dependencies

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for GEC Documents task and EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Overview of Release 9.0 Enhancements

- Release 9 contains several general HSRM enhancements in addition to reporting enhancements and critical HSRM Task list enhancements, which will make task list management more efficient and user friendly.
- Training and communications are being developed to ensure proper task management utilization.

General HSRM Enhancements

- **Referral Date**: Change to Referral Date logic to reflect the start date to be the date the consult is 'Sent to HSRM' from CPRS
- Clinically Indicated Date: Removal of validation check logic for CID field
- Multiple Veteran Addresses: Addition of Residential Address

Task Management Enhancements

- Enhanced filtering by Veteran Last name
 - Search for specific Veteran by last name
 - Filter task list by Alpha Split
- "Clean slate": Tasks greater than 10 days old will be archived from the task list
- Addition of referral number on task list
- · Search task list by referral number
- Search task list by assigned user
- Add Level of Care Coordination to Priority field on task list
- Sort/filter by Level of Care Coordination/Priority
- Medical documentation task enhancements: 5 New dispositions for documents loaded to VistA

Reports Enhancements

- Community Provider User Provisioning Report:
 - Added Community Facility parameter and removed the affiliation parameter
 - City and state added to the report
- Community Provider Referral Summary Report:
 - Veteran's date of birth added to the report
- Optional Task Report
 - Region added to the report





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) – Phase 2

National Deployment

ELC Decision Needed/ ELC Priority Discussion

The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

 No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1)
 AR PATCH NATIONALLY
 RELEASED
- 06/02/20 IB 675 NATIONALLY RELEASED
- 06/05/20 SIX MONTH EXTENSION STARTED

(b)(5)

Upcoming Milestones

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

• Downstream Dependency – None at this time.

(b)(5)





1313

National Deployment

ELC Decision Needed/ ELC Priority Discussion	n
(b)(5)	

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 10/09/19 UPDATED PERFORMANCE
 DESCRIPTIONS AND UNION APPROVAL FOR
 CPAC DEPLOYMENT RECEIVED
- 03/31/20 FINAL 9957 ACCESS REQUEST SUBMITTED
- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS

opcoming winescones	
(b)(5)	

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and Technology / Data Dependencies

Uncoming Milestones





ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)
• Priority Discussion: No	The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.	 Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100% Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily
Accomplishments		Upcoming Milestones
SUNSET APPROVED FOR DEPLOYED ELIGI GRANDFATHER SOLUTION OF NOT FUNCTIONALITY OF CO	020 COMPLETED IBILITY ANALYSIS C DATA FOR CTED REFERRALS	
OCC Business Dependencies	Office of Information and Te	echnology (OIT) / Data Dependencies
 Highlight OCC Business Dependencies: Clinical Integration (Business Owners) System Engineering Management (SEM) — (b)(5) Business Intelligence Service Line (BISL) (b)(5) Community Care Contractor (CCN) — (b)(5) VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteral (VFO) 	an Experience Office	





Retail Pharmacy Program

Sustainment

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods	 Metric 1: over 100,000 Veteran's vaccinated Metric 2: Vaccinate 125,000 next year Metric 3: Reimburse Walgreens 99% accuracy Metric 4: Continued Outreach to Rural Veterans
Accomplishments (b)(5)	Uncoming Milestones	
T/11/2020 FINAL FILE/INVOICE SENT WALGREENS		
OCC Business Dependencies	Office of Information and Techno	ology (OIT) / Data Dependencies
(b)(5) (b)(6)		
(b)(5)	RISK: N/A	



VA DoD Revenue Standardization

Project Phase – Development

Project Description Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion the VHA support DoD Reimbursement pilots with a web based tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment **DECISION**: No new decisions needed from Revenue Operations regarding back end process batch processing, invoice Methodology. at this time. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 5/15/2020 SEM **2019 SEM BUSINESS** SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE COMPLETE **OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation Updates

Project Name	Date Presented at PMR	Decision	Status
Comprehensive Disaster Recovery Plans	6/23	Approved	Intake
ePrescribing	6/23	Approved	Intake
CAVE	7/14	Approved	CCSC, 7/28, approval to move to project development
Veteran Credit Database Program	Scheduled for 8/11	Pending	TBD



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"LINCLASSIFIED"

12/12/2022 91 of 532

Community Care Business Program Management Review (PMR) #1

07/28/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

Agenda

- OCC Priority Project Review
 - OCC Data Governance
 - VA/DoD Advanced Payment and Referral Standardization
 - One Consult 2.0
 - Indian/Tribal Health Coordination (ITHC)
 - Advanced Medical Cost Management System (AMCMS)
 - Urgent Care Integrated Project Team
 - Provider Profile Management System (PPMS)
 - Community Care Reimbursement System (CCRS)
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- · Number of data policies, practices, and standards established
- Percent of data issues resolved
- Number of completed data initiatives in data governance project portfolio
- · Percent of data initiatives that meet or exceed established initiative targets

Accomplishments

7/6/2020 **NOMINATED DATA GOVERNANCE GROUP**

7/7/2020 CCSC DATA GOVERNANCE

PROJECT APPROVAL

7/8/20

KICKED OFF DATA **GOVERNANCE PROJECT**

7/15/2020 **ADOPTED CONTINUOUS** LEARNING APPROACH

Upcoming Milestones

8/5/2020 **DEFINE OVERARCHING DATA** GOVERNANCE STRATEGIC PRIORITIES GOVERNANCE CHARTER

8/12/2020 **FINALIZE DATA** 8/19/2020 **IDENTIFY A DATA-RELATED GOVERNANCE PORTFOLIO**

OCC Business Dependencies

Pending Dependency Management Analysis

(b)(5)

OIT / Data Dependencies

Pending Dependency Management Analysis

(b)(5)

VA DoD Reimbursement

Project Phase – Development

Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion **Project Description** 24,861 VA/DoD consults entered in FY20. (b)(5)95% of FY20 VA/DOD consults have SEOCs Creation of processes and included. procedures which allow for Live Pilot Results necessary data sharing to support • Biloxi/Pensacola FY20: 95% quarterly advanced payments automated consult/claim match from VA to DoD for care provided to eligible Veterans, along with rate NCR FY20: 74% consult/claim match revenue capture and workload rate tracking for VA. **Upcoming Milestones** 10/1/20: NEXT AP SITE GO-6/30/20: REPORT ON 9/15/20: ITSC 5/1/20 GO LIVE 5/30/20: SITE-BY-SITE 7/1/20: BEGIN W/ NCR AP **ROLLOUT SCHEDULE RECOMMENDATION ON DATA** LIVES (WOMACK, KEESLER & NCR AP PILOT RESULTS PREPPING NEXT AP **PILOT** PROVIDED TO HEC SHARING SOLUTION TO JEC **EGLIN MTFS)** FOR HEC **ROLLOUT SITES OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies Clinical Integration: CI has trained VAMC Community Care staff on standard VA/DoD care coordination processes. DO/POM:(b)(5) RO Staff OCC BOA/Finance and VAMC Fiscal Staff: (b)(5) • VHA VSSC: (b)(5) DoD DHA: (b)(5)

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion				
DECISION: No decision requested at this time				
• (b)(5)				

Project Description

One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies

Key Performance Indicators (KPI)

- DST integrated into CPRS- Q1 FY 21
- CTB integrated into CPRS- Q2 FY 21
- DST use of new drive time CC eligibility API estimated mid August (30 days after FRN publication)

Accomplishments

RECEIVED APPROVAL FROM BUSINESS TO UTILIZE EXISTING CAPABILITIES WITHIN DST

RELEASED UPDATE THAT ADDED CC AVERAGE WAIT TIMES TO THE DST DASHBOARD DEPLOYMENT OF CTB 1.9.0072 OVER 30 DAYS, BEGAN 7/14/20 CBT V1.9.0072
ANNOUNCEMNT AND
FGB UPDATES
COMPLETED

DST DRIVE TIME TO
BE ENABLED 30
DAYS AFTER FRN
PUBLICATION

TEAM CONTINUES TO CAPTURE REQUIREMENTS FOR WEB BASED PLATFORM.

DST OFFCE HOURS CONTINUE 7/20/2020.

Upcoming Milestones

TESTING / NATIONAL DEPLOYMENT OF CTB V1.9.0076. TESTING 9/16/2020, NATIONAL DEPLOYMENT 10/03/2020

OCC Business Dependencies

0)(5)

OIT / Data Dependencies

(b)(5)

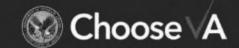




Indian-Tribal Health Coordination

Development

ELC Decision Needed/ ELC Priority Discussion	UVVVVVV VIVOLASSI IEU	Project Description		Key Performance Indicators (KPI)
(1)This project's training activities were impacted by CC hold until the partners are free to resume. VA staff trai paced PPT and sent to the field on 7/17. Discussion (b)(5)		Integrate the IHS/THP Reimbursement Agreemer (RAP) operations with othe efforts. Tasks included exe advisory board and develo Coordination Plan; hosting VA staff training; continuous communication efforts; pro expansion; and communit and engagement	er OCC ecuting an oping a Care g tribal and us ogram	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted
Accomplishments		Upcoming Mil	lestones	
6/4/20 HELD 2 ND ADVISORY BOARD MTG 07/17/20 VA FIELD STAKEHOLDER VIRTUAL TRAINING FMAILED	CONSULTATION IHS/T	THP RE-TRAINING EX	/30/20 CLEAR XECUTION OF XPANSION MC	IHS/THP COORDINATION
OCC Business Dependencies		OIT / Data Dependend	cies	
		N/A Risk: Mitigation:		





AMCMS

Deployment

ELC Decision Needed/ ELC Priority Discussion					
(b)(5)					

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Upon deployment, key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- O 6/17-6/24 UAT DATA
 VALIDATION ROUND I
 EXECUTED

 O 7/10 UAT TEST
 SCRIPTS
 UPDATED
- 6/24-7/15 INCORPORATION OF CHANGES & DATA VALIDATION FIXES BASED ON UAT FEEDBACK
- 7/15-7/25 UAT DATA
 VALIDATION ROUND II
 EXECUTION
- 8/21 UAT TEST
 EVALUATION
 REPORT

Upcoming Milestones

- 8/25 NATIONAL DEPLOYMENT GATE REVIEW MEETING
- 8/26/20 BEGIN FIELD NATIONAL DEPLOYMENT

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)				

Urgent Care IPT

National Deployment

ELC Decision Needed/ ELC Priority Discussion	00000001460 UNGEASSIE		Project Description	Key Performance Indicators (KPI)
(b)(5)			Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.	• 5,688 total probable UC visits in Region 1, as of 5/31/2020
Accomplishments			Upcoming Milestones	
O6/08/20 REGION 2/3 GO LIVE DATE FINALIZED AS 8/4 O7/15/20 REGION 2/3 COMMS RELEASED	08/04/20 REGION 2 TRANSITION	•	08/04/20	
OCC Business Dependencies			e of Information Technology / Dat	ra Dependencies
Clinical Integration: N/A Delivery Operations: N/A (b)(5)	(b)((5)		
		RISK:	N/A ation: N/A	

National Deployment

ELC Decision Needed/ ELC Priority Discussion (b)(5)

Project Description

Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information.

Upcoming Milestones

Key Performance Indicators (KPI)

Power BI functionality exceeded license capability for reporting previous metrics.

Accomplishments

- 5/22/20 **PPMS 8.0 GO-LIVE**
- 6/30/20 **DEV CONTRACT AWARDED JUNE**

7/1/20 **URGENT CARE** LEGACY RE-ROUTE

7/7/20 PPMS 8.1 GO-LIVE

- 7/23/20 HOTFIX 8.1.1.1 RELEASE
- 7/29/20 COMMUNITY PROVIDER LOCATOR (CPL) RELEASE
- 08/11/20 PPMS 9.0 NATIONAL **GATEWAY REVIEW**
- 08/20/20 **PPMS 9.0 GO-LIVE**

OCC Business Dependencies

- Clinical Integration
- **Network Management**
- Community Care Network
- **Delivery Operations**
- **Revenue Operations**

(b)(5)VAMC/CPO & Pharmacy -

(b)(5)

OIT / Data Dependencies



National Deployment

ELC Decision Needed/ ELC Priority Discussion No ELC Decision Requests for July

Accomplishments

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicators (KPI)

CCN Payment Metrics as of July 17, 2020

- Region 1: Invoices Received 1,329,157, Confirmed Paid -825,256, Sent for Payment - 27,528, "No Action" Optum denials -409.257
- Region 2: Invoices Received 759,546, Confirmed Paid -464,651, Sent for Payment - 23,090, "No Action" Optum denials -242,340
- Region 3: Invoices Received 176,601, Confirmed Paid 72,137, Sent for Payment – 4,983, "No Action" Optum denials – 94,192
- Region 4: Invoices Received 1,347, Confirmed Paid 241, Sent for Payment - 299, "No Action" TriWest denials - 563
- The total Invoice Amount Paid/Sent for Payment: \$984,680,609.20

Upcoming Milestones 06/23/2020 SUSPENSION 07/06/2020 PMPM ADMIN 07/09/2020 CCRS 07/17/2020 UPDATE 07/14/2020 NATIONAL 07/17/2020 UPDATE 07/16/2020 RELEASE ■ FEES FOR RESUBMISSIONS OF SUSPENSION OF 270 **USER ACCEPTANCE** KMS AND TRAINING **DEPLOYMENT GATE USER GUIDES AND CCRS 11.4 TO IMPLEMENTED STARTING** DOCS FOR CCRS 11.4 DAY DENIAL REASON TESTING 11.4 REVIEW (GO, NO GO **LESSONS LEARNED PRODUCTION** APPROVED BY ELC WITH MAY DECISION) **CCRS 11.4 OCC** Business Dependencies OIT / Data Dependencies Clinical Integration (Facility CC Staff and VAMC RN Staff) (b)(5)Delivery Operations/Payment Oversight and Management (Invoice Processing Staff) Revenue Operations (Facility Revenue, RUR, and CPAC Staff): (b)(5) Finance (OCC Finance and Informatics Staff): (b)(5) VAMC / Fiscal Budget Staff: (b)(5)

Appendix





Cerner OCC Integration

Development

ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Manage all necessary integrations to TBD: Focusing on timeliness No ELC decisions needed or priority discussion topics at this appropriately measures and qualitative time. operationalize Cerner surveys EHR into OCC clinical operations processes These dates are subject to **Accomplishments Upcoming Milestones** change due to COVID-19 uncertainty CSS: **Super User Training:** ORA: IV3: **TBD** awaiting **OEHRM** Decision Go Live 8/21/2020 9/7/2020 8/10/2020 7/27/2020 **OCC Business Dependencies** OIT / Data Dependencies **Highlight OCC Business Dependencies:** -Clinical Integration and Mann Grandstaff Facility CC Staff. (b)(5) -Payment Operations Management -Revenue Operations (Facility Revenue, RUR, and CPAC Staff) -Women's Health (IVF and Infertility) (b)(5)





Community Care Network

Deployment

ELC Decision Needed/ ELC Priority Discussion Complete regional deployments to regional operations No ELC decisions needed or priority discussion topics at this time.

Project Description

achieve CCN in Regions 1 – 6 and consolidate support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

Region 3 Gradual Transition - CCN Referral

- Week 1: May 18 22, 2020
 - Total Referrals = 4,965* Total Rejects = 10
- Week 2: May 25-29, 2020
 - Total Referrals = 5,084* Total Rejects = 10
- Week 3: June 1-5, 2020
 - Total Referrals = 7,743* Total Rejects = 18**

Region 4 R4P1 Go Live - CCN Referral

- Week 1: June 8-12, 2020
 - Total Referrals = 842 Total Rejects = 45

Accomplishments

06/16/20 R3P2 SHCD GO-LIVE

07/21/20 R4P2 SHCD GO-LIVE

08/04/20 R2 & R3 **URGENT CARE CUTOVER FROM PC3**

08/11/20 R4P3 SHCD GO-LIVE

08/25/20 R4P4 SHCD **GO-LIVE**

Upcoming Milestones

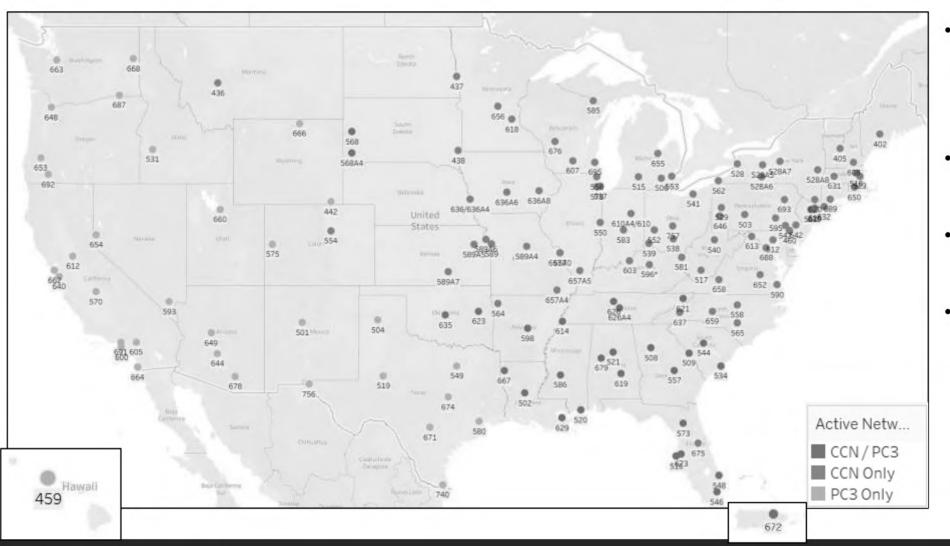
08/31/20 R4 **URGENT CARE CUTOVER FROM PC3**

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)(b)(5)

National Network Deployment Progress – As of 7/6/2020



- (b)(5)
- Regions 1, 2, and 3 are fully deployed
- Region 4 Phase 1 deployed on 6/8/2020
- Covid-19 is impacting the national deployment progress and provider recruitment progress

Region 3 Update

January 7 2020: Go-Live for Two Sites May 18 – June 15: Gradual



Transition

Throughout the Gradual Transition, and continuing post-go-live, Optum is working to contract with key Region 3 providers.

Recent wins include:

- VISN 7: University of Alabama (received verbal agreement)
- VISN 16: Willis-Knighton Health System

June 16: Full Region 3

Deploymeall remaining R3 sites)

June 16, 2020

Atlanta, GA

August, GA

Bay Pines, FL

Biloxi, MS Central Arkansas, AR Birmingham, AL Columbia, SC Central Alabama Memphis, TN Charleston, SC Murfreesboro, TN Dublin, GA Nashville, TN Jackson, MS Miami, FL New Orleans, LA Mountain Home, TN Shreveport, LA Muskogee, OK Tuscaloosa, AL N. Florida / S. Georgia Alexandria, LA Oklahoma City, OK

> San Juan, PR Tampa, FL

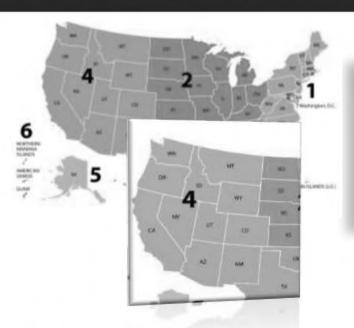
West Palm Beach, FL

July 17: 30-day PC3 cutover period ends

Region 3 Activities

- CAST calls continue for another two weeks until sites transition to the monthly network adequacy calls
- Optum and Network Management are reviewing the **16 requests for PC3 extensions.** Some sites are reporting gaps in specific specialties whereas others are requesting for specific providers. Final decisions will be made this week.
- Optum is holding network reviews with individual sites that have concerns with the network. These meetings will focus in
 on certain specialties and outstanding issue tracker items.

Region 4 Update



SHCD - Phase 1 (2 VAMCs)

June 8, 2020

VISN 19 - 2 VAMCs

- Montana (436)
- · Eastern Colorado, CO (554)

Phase 2 (13 VAMCs)

July 21, 2020 VISN 17 - 7 VAMCs

Amarillo, TX (504)

El Paso, TX (756)

Texas Valley Coastal (740 Central Texas (674)

North Texas (549)

South Texas (671) West Texas (519)

VISN 16 - 2 VAMC

Houston, TX (580) Texas counties aligned to

Shreveport, LA (667) catchment area

VISN 19 - 4 VAMCs

Cheyenne, WY (442) Sheridan, WY (666) Salt Lake City, UT (660)

Grand Junction, CO (575)

Walla Walla, WA (687)

Spokane, WA (668)

Phase 3 (14 VAMCs)

August 11, 2020

VISN 20 - 7 VAMCs Portland, OR (648)

Puget Sound, WA (663) Roseburg, OR (653)

White City, OR (692)

Boise, ID (531)

VISN 21 - 7 VAMC

Fresno, CA (570) Reno, NV (654) San Francisco, CA (662)

Northern California (612)

Palo Alto, CA (640) Southern Nevada (593)

Honolulu, HI (459)

Phase 4 (8 VAMCs)

August 25, 2020 VISN 22 - 8 VAMCs

Loma Linda, CA (605)

Long Beach, CA (600)

New Mexico (501)

Northern Arizona (649)

Phoenix, AZ (644)

San Diego, CA (664)

Southern Arizona (678)

Greater LA, CA (691)

16

Region 4 SHCD

- Region 4 Phase 2 deploying on July 21, 2020
- Collaborating with TriWest to prepare Phase 2 and 3 sites for CCN Go live through predeployment meeting series
- Planning and conducting sequence of e-learnings, virtual training sessions, and just in time refresher trainings to ensure site staff are ready to use CCN systems and tools for Go Live
- Increasing messaging on differences between CCN and PC3 to level set site expectations
- Updating deployment approach for Phase 2-4 Command Center based on Phase 1 lessons learned; scaling to account for increased number of Go-Live sites
- Developing proactive referral tracking approach to determine trends: network gaps, COVID-19 impact vs field utilization





ELC Decision Needed/ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 35/80 Users
- CCN Accreditation Waivers UI: 25/30 Users
- CCN Complaints & Grievances UI: 24/54 Users
- CCN Congressional Inquiries UI: 27/42 Users
- CCN Corrective Action Plans (CAPs) UI: 25/30 Users
- CCN Network Adequacy Deviations UI: 25/51 Users

Accomplishments

04/01/2020 EPRS Build 4 04/28/2020
 EPRS Build 5

3

05/18/2020
UAT complete for
Build 5C IDA Reports

06/26/2020

 UAT complete for Build 5D IDA Reports 06/26/2020 EPRS Build 5.1 **Upcoming Milestones**

Future Build/Release Planning Underway

Project Dependencies Community Care Contract Administration (CCCA): (D)(S) Community Care Network Management (NM): (D)(S) (D)(S)

Development

ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Upcoming Milestones

Key Performance Indicators (KPI)

- 2,223,145: Total Referrals FY 2020
- **186,901**: Total Referral FY 2019
- **16,581**: Total number of VA user accounts provisioned
- **13,381**: Number of Community Providers provisioned
- **4,903**: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,270: Support Ticket Count for June
- 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning-VA; Provisioning- CP; Related to Production Outage

Accomplishments

07/10/2020 CTB V1.9.0072 ND 07/20/2020 RELEASE 9.0 ND

07/21/2020
 COVID REFERRAL EXT RELEASE 10.0 C
 BATCHING COMPLETE PRESENTATION

08/25/2020 • 08/25/2020
RELEASE 10.0 CCSC RELEASE 10.0 FIELD
PRESENTATION NOTIFICATION

9/14/2020
 RELEASE 10.0 ND

OCT 2020 RELEASE 11.0 ND

OCC Business Dependencies

Highlight OCC Business Dependencies:

• **COVID19 Referral Extension:** Issue found on 6/12/2020 with certain SEOC versions used in referral extension was addressed via a development script; Referral batching with downstream system was resumed on 6/29 and completed on 7/21/2020, ahead of scheduled by 3 days

• Clinical Integration (CI Field Support Director & Assistants): (b)(5)
(b)(5)
• Delivery Operations/POM: (b)(5)

(b)(5)

(b)(5)

Finance (OCC Finance and Informatics Staff)

Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)

OIT / Data Dependencies

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for GEC Documents task and EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Overview of Release 9.0 Enhancements

- Release 9 contains several general HSRM enhancements in addition to reporting enhancements and critical HSRM Task list enhancements, which will make task list management more efficient and user friendly.
- Training and communications are being developed to ensure proper task management utilization.

General HSRM Enhancements

- **Referral Date**: Change to Referral Date logic to reflect the start date to be the date the consult is 'Sent to HSRM' from CPRS
- Clinically Indicated Date: Removal of validation check logic for CID field
- Multiple Veteran Addresses: Addition of Residential Address

Task Management Enhancements

- Enhanced filtering by Veteran Last name
 - Search for specific Veteran by last name
 - Filter task list by Alpha Split
- "Clean slate": Tasks greater than 10 days old will be archived from the task list
- Addition of referral number on task list
- · Search task list by referral number
- Search task list by assigned user
- Add Level of Care Coordination to Priority field on task list
- Sort/filter by Level of Care Coordination/Priority
- Medical documentation task enhancements: 5 New dispositions for documents loaded to VistA

Reports Enhancements

- Community Provider User Provisioning Report:
 - Added Community Facility parameter and removed the affiliation parameter
 - City and state added to the report
- Community Provider Referral Summary Report:
 - Veteran's date of birth added to the report
- Optional Task Report
 - Region added to the report





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) – Phase 2

National Deployment

ELC Decision Needed/ ELC Priority Discussion

 The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

 No specific KPI's were identified for this phase of the project.

Accomplishments

- O5/18/20 (2) IB & (1)
 AR PATCH NATIONALLY
 RELEASED
- 06/02/20 IB 675 NATIONALLY RELEASED
- 06/05/20 SIX MONTH EXTENSION STARTED
- 08/03/20 IB PATCH 677 NATIONALLY RELEASING
- 08/31/20 IB PATCH 678 NATIONALLY RELEASING
- FOUR ADDITIONAL IB/AR PATCHES TARGETED FOR DEVELOPMENT AND NATIONAL RELEASE
- 12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Upcoming Milestones

• Downstream Dependency – None at this time.

(b)(5)





CPAC Document Scanning

National Deployment

ELC Decision Needed/ ELC Priority Discussion				
		3		
(b)(5)				

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 10/09/19 UPDATED PERFORMANCE
 DESCRIPTIONS AND UNION APPROVAL FOR
 CPAC DEPLOYMENT RECEIVED
- 03/31/20 FINAL 9957
 ACCESS REQUEST
 SUBMITTED
- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS

Upcoming Milestones

 07/24/20 PROJECT COMPLETE

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and	Technology /	' Data Depend	encies
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(b)(5)





ELC Decision Needed/ ELC Priority Discussion	Project Descrip	tion	Key Performance Indicators (KPI)	
• Priority Discussion: No	The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.		 Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100% Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily 	
Accomplishments			Upcoming Milestones	
SUNSET APPROVED FOR DEPLOYED ELIGI GRANDFATHER SOLUTION OF NOT FUNCTIONALITY OF CO	2020 COMPLETED IBILITY ANALYSIS IC DATA FOR ICTED REFERRALS	REGARDING BUSINESS NOT E RULES FOR PREVENTING VETER	020 ES RELEASE TO ND STATIC ELIGIBILITY TO ENROLLED COVERED RANS AND INCLUDE COPY ECORDS IN ELIGIBILITY FILE 08/2020 ES RELEASE TO AUTOMATE COLLATERAL OF VETERAN PROCESS TO INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE	
OCC Business Dependencies		Office of Information and Tec	hnology (OIT) / Data Dependencies	
 Highlight OCC Business Dependencies: Clinical Integration (Business Owners) System Engineering Management (SEM) - (b)(5) Business Intelligence Service Line (BISL) (b)(5) Community Care Contractor (CCN) (c)(5) VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Vetera (VFO) 		b)(5)		

Retail Pharmacy Program

Sustainment

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods	 Metric 1: over 100,000 Veteran's vaccinated Metric 2: Vaccinate 125,000 next year Metric 3: Reimburse Walgreens 99% accuracy Metric 4: Continued Outreach to Rural Veterans
Accomplishments	Upcoming Milestones	
FILE/INVOICE SENT	1/2020 CLOSE UT RETAIL HARMACY	
OCC Business Dependencies	Office of Information and Techno	ology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(6)	RISK: N/A	





VA DoD Revenue Standardization

Project Phase – Development

Project Description Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion the VHA support DoD Reimbursement pilots with a web based tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment **DECISION**: No new decisions needed from Revenue Operations regarding back end process batch processing, invoice Methodology. at this time. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 9/1/20 SEM 10/01/20 FUNCTIONAL 8/1/20 VSSC 5/15/2020 SEM **2019 SEM BUSINESS VALIDATION OF DOD** SHAREPOINT TOOL **USER TESTING** SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE DATA COMPLETE **TESTING** COMPLETE **OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff)

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation Updates

Project Name	Date Presented at PMR	Decision	Status
Comprehensive Disaster Recovery Plans	6/23	Approved	Intake
ePrescribing	6/23	Approved	Intake
CAVE	7/14	Approved	CCSC, 7/28, approval to move to project development
Veteran Credit Database Program	Scheduled for 8/11	Pending	TBD



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"LINCLASSIFIED"

12/12/2022 118 of 532

OCC Bi-Monthly Business PMR #1

09/22/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

Agenda

- Project Idea Evaluation
 - Integrated Product Environment (IPE)
- OCC Priority Project Review
 - Enterprise Program Reporting System (EPRS)
 - HealthShare Referral Manager (HSRM)
 - Provider Profile Management System
 - Urgent Care Implementation
 - One Consult 2.0
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





Integrated Product Environment (IPE)

Originator & Date: CHIO / 9/14/2020	BOA (b)(6)	Scope Definition: Integra	ated Product Er	nvironment for isolated and end	l to end testing	ਤੂ of various CCN related p	rojects.
Impediments to OC	C			Additional Impact			
Business Ops & Admin:	OPS Resource	impacts		Policy Impact:	No current i	impacts identified.	
		777		Funding Impact:	Future (b)(5)		
Delivery Ops: DO systems			(b)(£		(5)		
Revenue Ops:	RO systems						
				Impact on Other OCC	(b)(5)		
Clinical & Network Mgmt:	CNM projects: PPMS, CCRA, EPRS, AMCMS, OCC-CERNER, CCN, CAVE, ePrescribing, etc.		Projects:	1			
			Impact if Project Idea Not	(b)(5)			
OCC Leadership (Includes IDA and BIC):	IDA – No curren BIC - (b)(5)	t impacts identified.		Approved:			
Recommended OC	C Strategic F	Priority Alignment	Recomme	ended Project Designat	ion Reco	mmended Busines	s Owner
Innovate Business Model			occ		CHIO /	ВОА	
Discussion:		(b)(6)	(b)(5)				
(b)(5) (b)(5)		(-/,-/					





Enterprise Program Reporting System (EPRS)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	
(b)(5)	E b
Accomplishments	L

Project Description

PRS delivers a series of customuilt user interface (UI) screens and eporting system data integrations or administering the CCN contract.

Key Performance Indicators (KPI)

Quality Check UI: 39/80 Users (Δ = +2)

Upcoming Milestones

- CCN Accreditation Waivers UI: 30/30 Users ($\Delta = +3$)
- CCN Complaints & Grievances UI: 28/54 Users (Δ = +2)
- CCN Congressional Inquiries UI: 30/42 Users (Δ = +1)
- CCN Corrective Action Plans (CAPs) UI: 28/30 Users (Δ = +1)
- CCN Network Adequacy Deviations UI: 27/51 Users (Δ = +1)

08/25/2020 EPRS SharePoint Server **Pre-Prod Migration** 08/20/2020 EPRS

- Release 6.0 D: EDI 837
 - Data Layer Rework
- 08/28/2020 EPRS
- Release 7.0 D: EPRS Data Integration (eCAMs)
- 09/28/2020: EPRS Pre-Prod

R10.0 & 10.1: UIs for

- Complaints, & N.A. Deviations
- 09/30/2020 EPRS Pre-
- Prod R11.0: Network Management UI
- 10/05/2020: EPRS Prod R 9.0:
- EPRS Tech. Data Integration for
- **HSRM**

OIT / Data Dependencies **OCC** Business Dependencies **Project Dependencies** Data Dependencies • Community Care Contract Administration (CCCA) (b)(5) • Community Care Network Management (NM) (b)(5) (b)(5)

HealthShare Referral Manager

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion DECISION: No ELC decisions needed at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- **2,841,420**: Total Referrals FY 2020
- 185,691: Total Referral FY 2019
- 17,830: Total number of VA user accounts provisioned
- **16,541**: Number of Community Providers provisioned
- **5,783**: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,073: Support Ticket Count for August
- · 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning- CP; Provisioning-VA;
 VistA Write Back/ Appointment Question

Accomplishments

08/28/2020 RELEASE 10 FIELD NOTIFICATION 9/14/2020 RELEASE 10 ND

09/21/2020
 CAEC PORTAL

09/26/2020
 CERNER SCHEDULING
 MESSAGE GO-LIVE

 10/24/2020 CERNER SPOKANE GO-LIVE

Upcoming Milestones

11/1/2020
 RELEASE 11 UAT

11/23/2020
 RELEASE 11 ND

OCC Business Dependencies

Highlight OCC Business Dependencies: Clinical Integration (CI Field Support Director & Assistants): (b)(5)

• Delivery Operations/POM (b)(5)

Finance (OCC Finance and Informatics Staff (b)(5)

• Revenue Operations (Facility Revenue, RUR, and CPAC Staff): (b)(5)

(b)(5)

OIT / Data Dependencies

(b)(5)

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Provider Profile Management System (PPMS)

Dev/Ops

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
• Priority Discussion: (b)(5)	Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information. NETWORK ACTIVE Providers A/39/2020 P = V P Schange P Services V/19/2020 P = V P P Schange P V/19/2020 P V/10 P
Accomplishments	Upcoming Nationes 1,841,979 1,797,125 44,854 2% 12,123,360
 7/14/20 7/27/20 7/29/20 08/11/20 8/11/20 08/20/20 08/25/2020 VA.GOV SPRINT 25 8.1.1.1 NATIONA NATIONAL SPRINT GO-LIVE SPRINT 28 RELEASE L RELEASE GATEWAY 27 	08/20/2020 −
OCC Business Dependencies REVIEW	OIT / Data Dependencies
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy (b)(5) 	(b)(5)

Urgent Care IPT

Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

Implementation Updates:

- 1. CCN Urgent Care for Regions 2 and 3 went live on 9/1.
- 2. R2/3 Webinars held on 8/25 and 8/27, with over 400 participants at each session.
- 3. Worked with DEPO to ensure Veterans can access pharmacy locations for urgent care prescriptions and flu shots on VA.gov Provider Locator.

Project Description

Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.

Upcoming Milestones

Key Performance Indicators (KPI)

- 1,710 total Veteran calls to confirm eligibility from 09/01/2020-09/07/2020.
- 392 total UC authorizations in R2 from 09/01/2020-09/07/2020.
- 1,014 total UC authorizations in R3 from 09/01/2020-09/07/2020.

Accomplishments

08/30/20 OPTUM R2/3 PROVIDER FILE INGESTED BY PPMS 09/01/20 REGIONS 2/3 GO-LIVE

(b)(5)

09/25/20 REGION 4 COMMS RELEASE 09/30/20 REGION 4 UC CCN GO-LIVE

OCC Business Dependencies

(b)(5) (b)(5)

Office of Information Technology / Data Dependencies





One Consult 2.0

Development

Executive Leadership Committee (ELC) Decision Needed /	Project Description Key Performance Indicators (KPI)
Priority Discussion DECISION: No decision requested at this time (b)(5)	One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies
Accomplishments	Upcoming Milestones
CTB 1.9.0076 ENABLED COMPLETED CTB 1.9.0076 FULL SITE IOC LIGHTHOUSE DST MAPPING GO NO GO: BEGAN: API DRIVE TABLE 9/15/2020 9/1/2020 TIME IN DST: UPDATES: 9/10/2020	TEAM CONTINUES TO CTB V1.9.0076: CTB V1.9.0076 DST OFFICE CAPTURE CONCLUDE FULL SITE NATIONAL HOURS REQUIREMENTS FOR IOC: 9/14/2020 DEPLOYMENT: CONTINUE: WEB BASED 9/18/2020 9/21/2020 PLATFORM
OCC Business Dependencies (b)(5)	OIT / Data Dependencies (b)(5)



- Release will add "Unable to Schedule" requirements to include options from the Add Comments workflow
- Release will include more descriptive text in the consult factors that describe why user is unable to schedule a consult
- Release will fix the Clinical Review Option (CC Referrals) scheduling options that are being cached when Receiving Consults and user does not select a scheduling option
- Release will address unable to enter text (ex. "t+30") issue
- Release will address telehealth options not showing up when internal consults are triaged
- National release projected to begin 9/18/2020



- New version of Consult Toolbox in a DevSecOps model that will eliminate the long and costly desktop deployment process.
- The scope will include user validated requirements and existing backlog items.
- Minimally Viable Product projected to be completed 9/25/2020
 - National Deployment not expected until November/December 2020



Appendix

Project Status Update





Cerner OCC Integration Project

Development

DECISION: No ELC decisions needed at this time.

Priority Discussion

• DECISION: No ELC decisions needed at this time.

Project Description

Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

- Cerner Referral Manager Functional Testing: 8/17/2020 – 8/28/2020
- Exploratory Testing:8/24/2020 8/29/2020
- Super User Training: 8/10/2020-8/29/2020
- ORA: 9/7/2020
- End User Training (Spokane): 9/28/2020
- HSRM SIU Interface Go-Live: End of September
- IOC Go Live: 10/24/2020

OCC Business Dependencies

Highlight OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5)

-Payment Operations Management

- -Revenue Operations (Facility Revenue, RUR, and CPAC Staff)
- -Women's Health (IVF and Infertility)

b)(5)

OIT / Data Dependencies

Highlight OIT/Data Dependencies:



Upcoming Milestones

Community Care Reimbursement System (CCRS)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicators (KPI)

CCN Payment Metrics as of September 4, 2020

- Region 1: Invoices Received 1,881,790, Confirmed Paid 1,195,248, Sent for Payment 45,314, "No Action" Optum denials 523,766
- Region 2: Invoices Received 1,319,275, Confirmed Paid 845,062, Sent for Payment – 52,031, "No Action" Optum denials - 352,273 Region 3: Invoices Received – 411,988, Confirmed Paid – 196,103,
- Sent for Payment 12,303, "No Action" Optum denials 183,202

 Region 4: Invoices Received 79,998, Confirmed Paid 23,348
- Region 4: Invoices Received 79,998, Confirmed Paid 23,348, Sent for Payment – 9,984, "No Action" TriWest denials - 15,325

The total Invoice Amount Paid/Sent for Payment: \$1,728,313,422.92.

Accomplishments

09/01/2020 CCRS 12.2 COMMUNICATIONS SENT 09/03/2020 RELEASE CCRS 12.2 TO PRODUCTION 09/09/2020 CCRS USER ACCEPTANCE TESTING 12.3 09/22/2020 RELEASE CCRS 12.3 TO PRODUCTION 10/1/2020 CCRS USER ACCEPTANCE TESTING 12.4

Upcoming Milestones

10/15/2020 RELEASE CCRS 12.4 TO PRODUCTION 10/16/2020 UPDATE KMS, TRAINING DOCS, AND LESSONS LEARNED FOR CCRS 12.4

OCC Business Dependencies

- Clinical Integration (Facility CC Staff and VAMC RN Staff)
 Delivery Operations/Payment Oversight and Management (Invoice Processing Staff): ((b)(5)
- Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)
 Finance (OCC Finance and Informatics Staff) (b)(5)
- VAMC / Fiscal Budget Staff: (b)(5)

(0)(0)

(b)(5)

OIT / Data Dependencies

Community Care Network

Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

- Region 2 and 3 initiated Urgent Care cutover from PC3 on September 1st
- Regions 1 4 reached full HCD with the deployment of Region 4; Region 4 reached full HCD with Phase 4 deployment on August 25th
 - CCN use continues to increase for all sites in Phase 1, 2, and 3 for Region 4
 - Post deployment refresher trainings and office hours are in development
- R4 Urgent Care cut over is now 9/30/2020

Accomplishments

06/08/20 R4P1 SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

GO-LIVE

● 06/16/20 R3P2 ■ 07/21/20 R4P2 ■ 08/11/20 R4P3 ■ 08/25/20 R4P4 SHCD ■ 09/01/20 R2 & R3 URGENT CARE CUTOVER FROM PC3

Upcoming Milestones

09/30/20 R4 URGENT CARE **CUTOVER FROM PC3**

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
No ELC decisions needed. (b)(5) Discussion Tribal consultation on the CC approach was delivered 8/25 and the public has until 9/25 for written comment. Program office presented to the BIMS on 9/11. The annual tribal training is scheduled for the week of 9/15.	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement Wetric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted
Accomplishments	Upcoming Milestones
STAKETIOEDER VIRTOAL PHARMACY MOD	20 BIM ATION ON RAP STATUS 09/18/2020 09/15/2020 11/13/20 CC PLAN FINALIZED AND BEGIN RETRAINING IMPLEMENTATION
OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	N/A Risk: Mitigation:



AMCMS

Project Development

Executive Leadership Committee (ELC) Decision Needed / **Priority Discussion**

DECISION: No ELC decisions needed at this time.

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

(b)(5)

Key Performance Indicators (KPI)

Key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- 8/19-8/28 PHASE 8/28-9/1 GENERATED III UAT (STALE REFERRAL LOGIC) **COST ESTIMATES**
 - 9/2 COMPLETED **UPDATED MODEL** AMCMS/VA ESD INTEGRATION
- 8/27-9/14 TRAIN THE TRAINER **SESSIONS**
- 9/11 STALE REFERRAL LOGIC **UAT RE-TESTING**
- 9/16-9/23 AMCMS VIRTUAL WEBINAR **TRAININGS**

Upcoming Milestones

- 9/22 NATIONAL DEPLOYMENT **GATE REVIEW**
- 9/30 LESSONS **LEARNED** UPDATE

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Need	ded / Priority Discussion	Project Description	Key Performance Indicators (KPI) Metric 1: Process for unscheduled outage notification Metric 2: COOPs developed Metric 3: COOP Policy developed Metric 4: Repository complete Metric 5: KMS and SOPs updated	
• DECISION: No ELC decisions needed at this time.		The project scope is to develop a standardized Continuity of Operations Plan (COOP) policy, in addition, the creation of a COOP document for each OCC Directorate. In parallel, to the policy/plans, the development and implementation of an electronic single repository.		
Accomplishments		Upcoming Milestones		
08/04/2020 – APPROVED FOR GO AT CCSC 08/13/2020 – KICK- OFF PROJECT MEETING	DIRECTORATES		10/20- COOP	
OCC Business Dependencies - Lite		Office of Information and Techn	nology (OIT) / Data Dependencies - Lite	
Highlight OCC Business Dependencies: (b)(5)		• Highlight OIT/Data Dependencies	;;	
(b)(5)		(b)(5)		



OCC Data Governance Project

Initiation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- Frequency data reported as accessible timely, complete, accurate and reliable
- Percent of compliance with policies
- Percent of systems achieving established performance metrics
- Percent of systems with complete documentation

Accomplishments

9/2/2020 SYSTEMS DOCUMENTS GAP ANALYSIS 9/30/2020
CREATE TECHNOLOGY AND DATA
GOVERNANCE ROAD MAP

10/14/2020 DRAFT DATA GOVERNANCE STRUCTURE ROLES/ RESPONSIBILITIES

Upcoming Milestones

10/28/2020
 OBTAIN APPROVAL SYSTEMS
 DOCUMENTATION STANDARD

OCC Business Dependencies

Upstream Dependencies

Upstream Dependencies

OIT / Data Dependencies

(b)(5)

Enrollment System Community Care (ESCC)

Development

Executive Leadership Committee (ELC) Decision Needed / **Priority Discussion**

DECISION: No ELC decisions needed at this time.

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

■09/20 PRODUCTION **RELEASE FOR CC COLLATERAL OF VETERANS AND NOT** ENROLLED COVERED **VETERANS**

 09/20 MET WITH TW AND OPTUM TO DISCUSS SUMMARY OF **CHANGES TO ELIGIBILITY FILE**

COMPLETED RFM FOR NEW VCE CODES AND SUBMITTED TO **COR TEAM**

■09/2020 COLLABORATED WITH ELIGIBILITY OIT **TEAM TO PAUSE RELEASE** OF LINKING SPONSOR OF **COLLATERAL OF VETERANS**

09/2020 ES RELEASE TO **EXPAND STATIC ELIGIBILITY TO** NOT ENROLLED COVERED VETERANS AND INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE

Upcoming Milestones

• 09/2020 ES RELEASE TO **AUTOMATE COLLATERAL OF VETERAN PROCESS TO** INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE (PHASE I)

OCC Business Dependencies

- **Highlight OCC Business Dependencies:**
- Clinical Integration (Business Owners) System Engineering Management (SEM) -
- Business Intelligence Service Line (B<u>ISL</u>) (b)(5)
- Community Care Contractor (CCN) (b)(5)
- VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO)

Issue:

Mitigation:

Office of Information and Technology (OIT) / Data Dependencies

•	Highlight OIT/Data Dependencies:	
5)		

Issue

Mitigation:



Retail Pharmacy Program

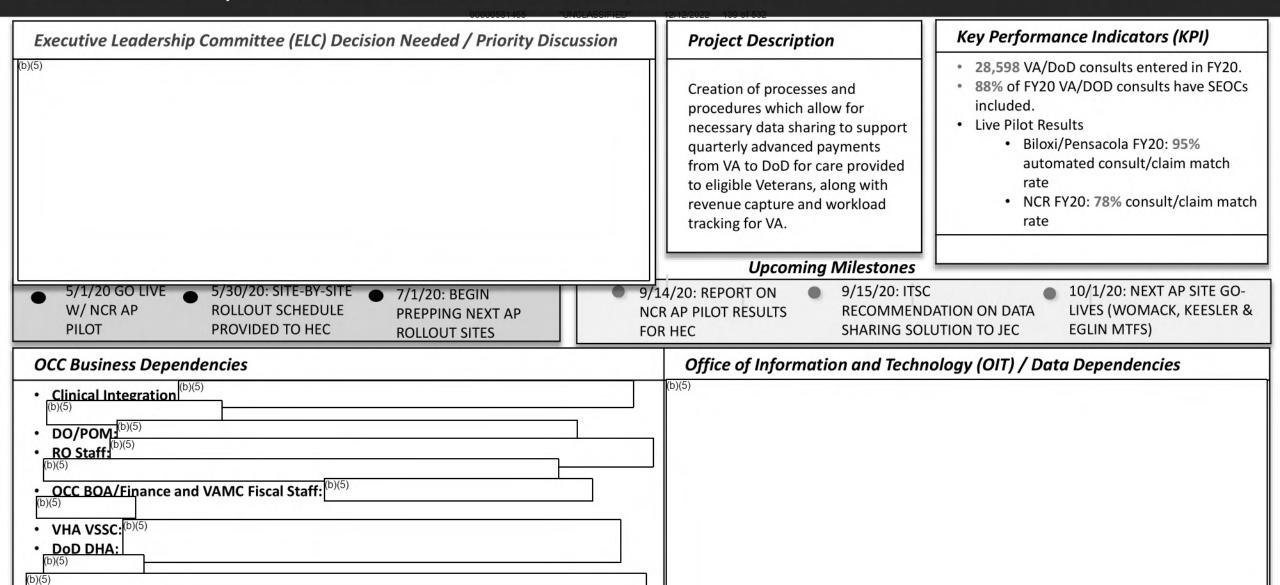
Close Out

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
DECISION: No ELC decisions needed at this time.	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods • Metric 1: over 100,000 Veteran's vaccinated • Metric 2:Reimburse Walgreens 99% accuracy
Accomplishments	Upcoming Milestones
FILE/INVOICE SENT	J1/2020 CLOSE JT RETAIL HARMACY
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies
• (b)(5) • (b)(5) (b)(5) (b)(5) RISK: Mitigation:	RISK:



VA DoD Payment and Referral Standardization

Development



VA DoD Revenue Standardization

Development

Project Description Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Key Performance Indicators (KPI)** the VHA DoD support Reimbursement pilots with a webbased tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment batch processing, DECISION: No ELC decisions needed at this time. invoice Methodology. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 5/15/2020 SEM 8/31/20 VSSC VALIDATION 9/1/20 SEM **2019 SEM BUSINESS** 10/01/20 FUNCTIONAL SHAREPOINT TOOL SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE OF DOD DATA COMPLETE **USER TESTING** COMPLETE **TESTING OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

Community Care Integrated Billing and Accounts Receivable (CC IB/AR) - Phase 2

Project Phase – Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

 The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

· No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1) AR PATCH NATIONALLY **RELEASED**
- **NATIONALLY RELEASED**
- 06/02/20 IB 675 **a** 08/13/20 IB 677 NATIONALLY **RELEASED**
- 09/10/20 IB PATCH **678 NATIONALLY RELEASED**
- 09/30/20 AR PATCH **361 NATIONALLY** RELEASING
 - AR PATCH 372 & IB PATCH 682 ARE IN DEVELOPMENT AND NATIONAL RELEASE IS TARGETED FOR 10/19/20

Upcoming Milestones

12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

· No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Downstream Dependency - None at this time.

(b)(5)

CPAC Document Scanning

Project Phase – Close Out

Executive Leadership Committee (ELC) Decision Nee	ded / Priority Discussion
(b)(5)	
	- "I

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

(b)(5)

- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS
- 06/15/20 CPAC VIRTUAL TRAINING BEGINS
- 07/09/20 TRAINING SESSION FOR WFD AND POLICY ANALYST COMPLETE
- 07/24/20 MAIL
 ROOM CLERK
 TRAINING COMPLETE
- 08/27/20 PRODUCTION SCANS COMPLETE
- 08/28/20 PROJECT COMPLETE

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and Technology / Data Dependencies





Appendix

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Decision	Ops Notified	CCSC Presentation Date	Ops PM Resource Assigned
ePrescribing	6/19	6/23	Approved	6/29	9/14	8/24 (b)(6)
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	7/20 (b)(6)
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	7/21
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A
Community Care Claims SSN Reduction	7/21	8/11	Approved	8/13	TBD	TBD
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	TBD	TBD	TBD	TBD	TBD
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD
Integrated Product Environment	9/14	9/22	TBD	TBD	TBD	TBD





PMR 1 Projects

EHRM

Office of Community Care (OCC)/Cerner Integration

Implement CCN

Community Care Claims Reimbursement (CCRS)

Community Care Network (CCN)

Enterprise Program Reporting System (EPRS)

Indian/Tribal Health Coordination (ITHC)

Innovate Business Model

Advanced Medical Cost Management System (AMCMS)

Community Care Referral and Authorization System (CCR&A)

One Consult 2.0

Provider Profile Management System (PPMS)

OCC Data Governance

OCC Continuity of Operations Plan (COOP)

MISSION Support

Community Care Integrated Billing and Accounts Receivable (CC IB/AR) Phase 2

CPAC Document Scanning

Enrollment System Community Care

Urgent Care Integrated Project Team

Other

Retail Pharmacy Influenza Program

VA/DoD Advanced Payment and Referral Standardization

VA/DoD Revenue Standardization





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12/12/2022 146 of 532

Community Care Business Program Management Review (PMR) #1

10/27/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

- Hot Topics
 - Payer Electronic Data Interchange (EDI) Prioritization
- OCC Priority Project Review
 - VA/DoD Referral Standardization
 - Community Care Reimbursement System (CCRS)
 - Enterprise Program Reporting System (EPRS)
 - Urgent Care IPT
- Appendix
 - Project Review
 - Project Idea Evaluation Updates
 - Veteran Credit Updates





Hot Topic: Payer Electronic Data Interchange (EDI) Prioritization

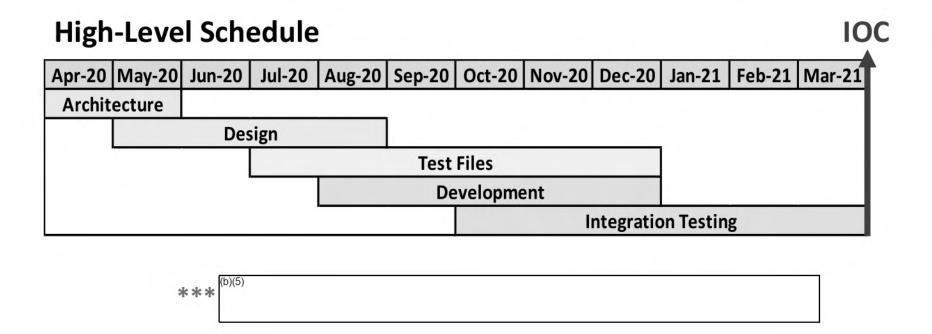




Current Payer EDI Priorities

Claims XM Development and Implementation

- Three Product Teams; 95% dedicated to Claims XM.
- Estimated completion on or about 1 April 21.
- Key Stakeholders Delivery Operations (Veteran Family Member Program).







Remaining Payer EDI Priorities/Stakeholders

- EPRS (Parser)
 - o 837 work complete / 835 work remains.
 - Key Stakeholders Provider Relations and Services, Chief Informatics Office.
- CAVE
 - O (b)(5)
 - Key Stakeholders Clinical Integration, Delivery Operations, Chief Informatics Office.
- ARS
 - (b)(5)
 - o Key Stakeholders Delivery Operations, both POM and VFMP Staff.
- Community Care Billing SSN Reduction
 - O (b)(5)
 - o Key Stakeholders Delivery Operations, Revenue, HSRM team.



Prioritization Decision

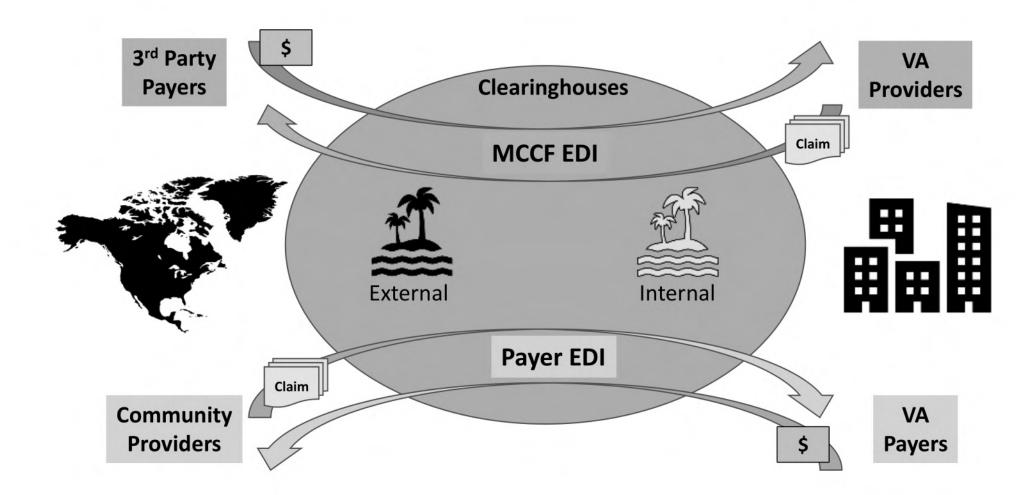
Backlog Prioritization (1-4)

____EPRS (Parser)

____CAVE

___ARS

Community Care Billing SSN Reduction



Payer EDI Recent Highlights

- Oracle Upgrade (May 2020)
 - Updated Servers, Operating System, and Application Software
 - Zero EDI system failures since upgrade
- Backlog Elimination (August 2020)
 - Eliminated 1.5M claim backlog in 8 weeks
 - Increased capability to support 10x average daily rate

- Fee Payment Processing System (FPPS) MVP (August 2020)
 - Upgrade required to meet OIT security requirements
 - Limited capability restored while FBCS is retired





Priority Project Review





VA DoD Referral Standardization

Phased Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion (b)(5)

Project Description

Creation of processes and procedures which allow for necessary data sharing to support quarterly advanced payments from VA to DoD for care provided to eligible Veterans, along with revenue capture and workload tracking for VA.

Upcoming Milestones

Key Performance Indicators (KPI)

- 35,846 VA/DoD consults entered since FY20; 6,665 currently open
- 97% of open VA/DoD consults are in scheduled status
- · Live Pilot Results:
 - Biloxi/Pensacola FY20: 95% automated consult/claim clean match rate
 - NCR FY20: 70% consult/claim clean match rate

Accomplishments

- W/NCR AP **PILOT**
- 5/1/20 GO LIVE _ 9/14/20: REPORT ON _ NCR AP PILOT RESULTS FOR HEC
- 10/8/20 : CARE COORDINATION SOP UPDATE RELEASE (HSRM USE) & TRAINING
- 11/18/20: HEC APPROVAL OF NEXT AP SITES GO-LIVE
- 11/30/20: CAREPOINT **EXCEPTIONS CLAIMS** WORKLIST ROLLOUT
- 12/1/20: NEXT AP SITE GO-LIVES (WOMACK, KEESLER/ EGLIN/TYNDALL MTFS)

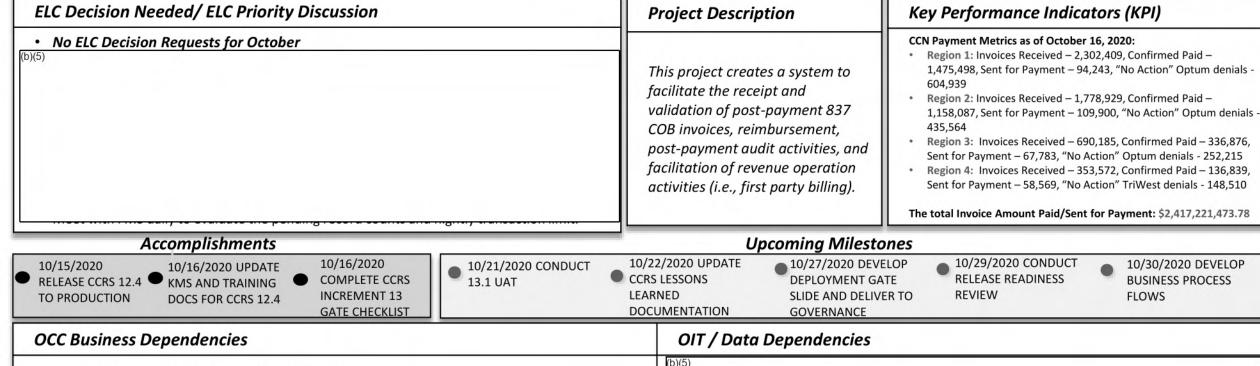
OCC Business Dependencies

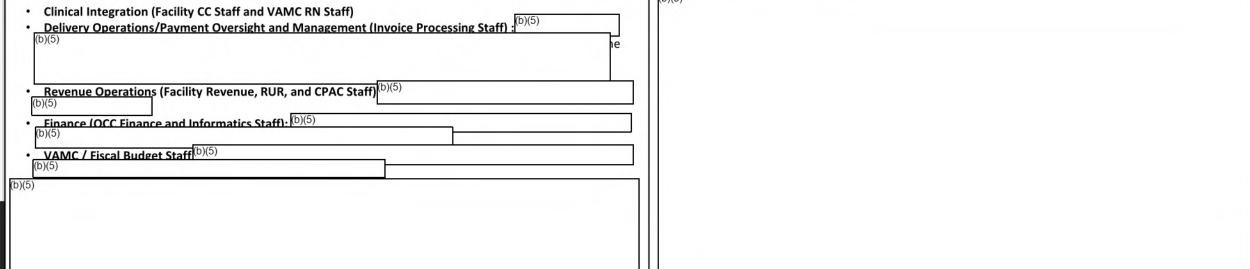
- Clinical Integration: CI has trained VAMC Community Care staff on standard VA/DoD care coordination processes. Recently trained field on HSRM use for DoD DO/POM (b)(5) • RO Staff: (b)(5) • OCC BOA/Finance and VAMC Fiscal Staff: (b)(5)
- VHA VSSC (b)(5)
- DoD DHA:

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

National Deployment





For ELC Awarene	SS .	
b)(5)		
		- 1
		- 4

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 42/80 Users (Δ = +1)
- CCN Accreditation Waivers UI: 31/30 Users (No change)
- CCN Complaints & Grievances UI: 29/54 Users (No change)
- CCN Congressional Inquiries UI: 31/42 Users (No change)
- CCN Corrective Action Plans (CAPs) UI: 29/30 Users ($\Delta = +1$)
- CCN Network Adequacy Deviations UI: 28/51 Users (No change)

Accomplishments

08/20/2020 EPRS Release 6.0 D: EDI 837
 7.0 D: EPRS Data Data Layer Rework

08/28/2020 EPRS Release 09/30/2020: EPRS Pre-

Integration (eCAMs)

Prod R10.0: Complaints

UI & Quality Check

10/14/2020: EPRS SQA R10.1:

Congressional Inquiries & N.A. Deviations

10/29/2020: EPRS Prod R10.0: Complaints UI &

Quality Check

12/04/2020: EPRS Prod

Upcoming Milestones

R12.0: EPRS Technical Data R10.1: Congressional Integration for CCRS

12/16/2020: EPRS Prod

Inquiries & N.A. Deviations

OCC Business Dependencies

Project Dependencies

• Community Care Contract Administration/Support (CCCA/S) (b)(5)

• Community Care Network Management (NM)(b)(5)

OIT / Data Dependencies

Data Dependencies







National Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

Implementation Updates:

- 1. R4 Webinar held on 9/23 and 9/24, with over 500 participants at each session.
- 2. CCN Urgent Care for Region 4 went live on 9/30.
- 3. Region 4 Office Hours and Daily sync up held on go-live week to support implementation.

Project Description

Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.

Upcoming Milestones

Key Performance Indicators (KPI)

- Average Urgent Care authorizations:
 - Region 1: 1,400 per week
 - Region 2: 600 per week
 - Region 3: 1,350 per week
 - Region 4: 900 per week
- Average of 350 Urgent Care calls to VA Call Center per day

Accomplishments

09/29/20 CCN URGENT CARE REGION 4 KICK OFF 09/30/2020 CCN
 URGENT CARE
 REGION 4 GO-LIVE

TBD: REGION 5 UC

OCC Business	Depend	encies
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· No Business Dependencies identified.

(b)(5)

Office of Information Technology / Data Dependencies

(b)(5)

Appendix

PMR Project Slides





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

- Cerner Referral Manager Functional Testing: 8/17/2020 – 8/28/2020
- Exploratory Testing: 8/24/2020 8/29/2020
- Super User Training: 8/10/2020-8/29/2020
- ORA: 9/7/2020
- End User Training (Spokane): 9/28/2020
- HSRM SIU Interface Go-Live: End of September
- IOC Go Live: 10/24/2020

Upcoming Milestones

OCC Business Dependencies

Highlight OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5)

(b)(5)

-Payment Operations Management

-Revenue Operations (Facility Revenue, RUR, and CPAC Staff)

-Women's Health (IVF and Infertility)

(b)(5)

OIT / Data Dependencies

V.S. Department of Veterans Affair
Veterans Health Administration
Office of Community Care



Community Care Network

Post Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

• DECISION: No ELC decisions needed at this time.

Project Description

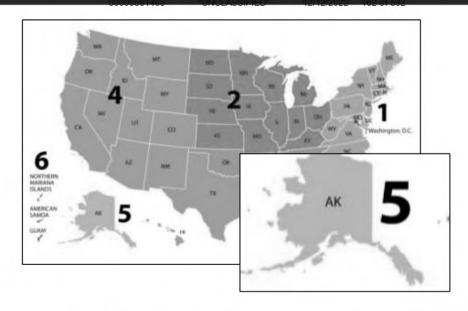
Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

- CCN is fully deployed across 49 states within Regions 1-4.
- As of September 30, 2020, Urgent Care is live across CCN Regions 1-4.
- CCN Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1.

Accomplishments Upcoming Milestones 06/08/20 R4P1 ● 06/16/20 R3P2 ● 07/21/20 R4P2 ● 08/11/20 R4P3 ● 08/25/20 R4P4 SHCD ● 09/01/20 R2 & R3 URGENT ● 09/30/20 R4 URGENT 04/01/21 R5 SHCD SHCD GO-LIVE SHCD GO-LIVE SHCD GO-LIVE CARE CUTOVER FROM PC3 CARE CUTOVER FROM PC3 SHCD GO-LIVE **GO-LIVE GO-LIVE** Office of Information and Technology (OIT) / Data Dependencies **OCC** Business Dependencies (b)(5)

Region 5 Announcement

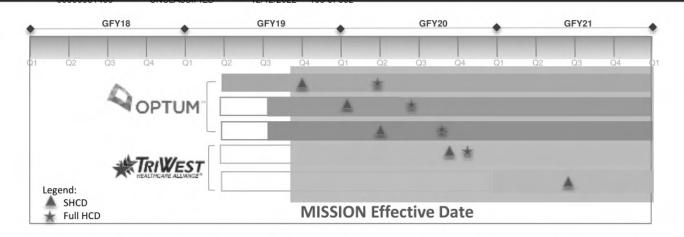


- Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1/2020.
- The Post Award Meeting is scheduled for 10/19/2020.
- The Kickoff Meeting is scheduled for 11/4/2020.
- Region 5 has a Veteran population of more than 68,000 with more than 33,000 Veterans enrolled in healthcare.





CCN Contract Award and Implementation Update



CCN Regions



- Awarded 12/28/18, start of health care delivery (SHCD) 6/26/19, full deployment by 12/28/19
- Awarded 12/28/18, protest filed 1/22/19, protest resolved 5/2/19, performance resumed 5/6/19, SHCD 10/7/19, full deployment by 4/9/20
- Awarded 12/28/18, protest resolved 5/3/19, appeal with the US Court of Federal Claims, stay of performance to Optum lifted on 7/22; SHCD on 10/7/19, full HCD achieved by 6/22/20
- Pre-Award protest dismissed; award made 8/6/19, SHCD 6/8/20, full HCD achieved 8/31/2020
- Awarded 10/1, Post Award Meeting 10/19, Kick-off Meeting 11/4, SHCD March 2021, full HCD by 4/1/21
- R6 Pre-Solicitation



Indian-Tribal Health Coordination

National Deployment

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ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)	
No ELC decisions needed. Accomplishments: • Agreement modification was completed. Among the items it expands reimbursement to include telehealth and COVID related services by third party partners to IHS/THP sites (AKA PRC). • CC approach – Draft final pan completed and will be sent for wider VA concurrence week of 10/21/20. • Program office presented to the BIMS on 9/11. • The annual tribal retraining held week of 9/15. • Internal controls SOP completed	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted 	
Accomplishments		Upcoming Milestones	
HARMACY MOD	09/23/2020 IHS/THP ATION ON RAP STATUS VIRTUAL RETRAINING		
OCC Business Dependencies	OIT / Data Dependencies		
(b)(5)	N/A Risk: Mitigation:		

Executive Leadership Committee (ELC) Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- 9/28-10/5 STALE REFERRAL LOGIC **UAT ROUND 4**
- 10/8 UAT TEST **EVALUATION** REPORT APPROVED
- 10/9 VISN 8 **KICKOFF MEETING**
 - 10/13 NATIONAL **DEPLOYMENT GATE REVIEW APPROVAL**
- 10/19 NATIONAL **DEPLOYMENT OF AMCMS MODEL**
- 10/19-10/26 AMCMS 10/21 NETWORK VIRTUAL WEBINAR **TRAININGS**

Upcoming Milestones

- MANAGEMENT REQUIREMENTS GATHERING
- 10/27 LESSONS **LEARNED UPDATE**

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)

Development

ELC Decision Needed/ ELC Priority Discussion N/A

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- 3,210,309: Total Referrals FY 2020 (Through 10/9/2020)
- 185,645: Total Referrals FY 2019
- 18,229: Total number of VA user accounts provisioned
- 18,320: Number of Community Providers provisioned
- 6,569: Number of unique Community Provider locations
- 148: Number of VAMC sites actively using HSRM
- 5,272: Support Ticket Count for September
- Top 3 Support Ticket Categories for September:
 - 1. Provisioning/needs access-VAMC

 - 2. Provisioning/needs access-community provider
 - 3. Training/knowledge issue

Accomplishments

09/26/2020 **CERNER SCHEDULING MESSAGE GO-LIVE**

10/19/2020 **RELEASE 11 UAT** START

10/24/2020 **CERNER SPOKANE GO-LIVE**

10/28/2020 CAEC 1.5 GO/NO **GO PRESENTATION** NOVEMBER 2020 CAEC 1.5 ND RELEASE

Upcoming Milestones

11/13/2020 RELEASE 11 GO/NO GO **PRESENTATION**

11/23/2020 **RELEASE 11 ND**

OCC Business Dependencies

Highlight OCC Business Dependencies:

• Clinical Integration (CI Field Support Director & Assistants) ((b)(5) (b)(5) Delivery Operations/POM (b)(5) · Finance (OCC Finance and Informatics Staff) • Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)

OIT / Data Dependencies

Highlight OIT/Data Dependencies: Upstream (U) Downstream (D)

Overview of Release 11.0 Enhancements

 Release 11 will contain several general HSRM enhancements in addition to HL7, MVI, Task Management, and Offline Referral Form enhancements. All of which will increase HSRM usability and efficiency.

HL7 Messaging

- Add Appointment Scheduled Method to HL7 SIU Outbound
- Add Treating Specialty to HL7 SIU Message
- SIU Message to Cerner Contain Scheduling and Cancellation Notes

Task Management Enhancements

Create new manual task- ""Message VA to VA""

MVI

- MVI Audit Trail: Display Veteran Data changes from MVI
- MVI Integration: Receive Veteran Demographic updates from MVI

Reporting

- Add Level of Care to the CI Tasking Reports
 - Community Wait Times Report Enhancements, and adds "Recorded Date"

Community Provider Provisioning Enhancements

- The ability to provision community providers by NPIs.
- Referral lists would only display referrals where the assigned care provider NPI matches.

Offline Referral Form

- Prevent users from being able to generate an Offline Referral Form if there is no provider assigned
 - Message displayed instructing the user to add a provider

Veteran Eligibility Status workflow

- Eligible status Referral workflow as normal
- Non-Eligible status Program authority locked and ability to refresh eligibility data

Additional HSRM Enhancements

- FY22-FY23 Bene Travel Program Authority
- Limit ability to change Affiliation for CCN1-6 Users
- Make Provider a required field unless there is an optional task
- Add Appointment Date Timestamp to Data Feed
- Enable/Disable interfaces via task
- Modify logic to trigger downstream update to a referral; when any value changes on the Referral Detail Page or Appointments are recorded
- Notify CCRS of Affiliation Changes
- Refactor Task API for General CCRA Use
- Improve Error log handling by blocking any outgoing messages where providers do not have an email listed on their provider profile
- Allocate Revenue tasks for further review- Modifiable Due Dates (Tickle Feature)
- Pre-cert Auto Task Due Date Update
- Remove taxonomy code from PPMS Provider Search results, display only the description
- Add date range to audit trail filters



Overview of Release 10.0 Enhancements

 Release 10 contains general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- **Remove all statuses except Approved** from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Executive Leadership Committee (ELC) Decision Needed /	Project Description	Key Performance Indicators (KPI)
Priority Discussion DECISION: No decision requested at this time (b)(5)	One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies	 DST integrated into CPRS- Q1 FY 21 CTB integrated into CPRS- Q2 FY 21
Accomplishments		g Milestones
CTB 1.9.0077 CTB 1.9.0077 DST MAPPING COMPLETED CTB V2.0 CTB V2.0 SP DEVELOPMENT SQA TESTING TABLE REQUIREMENTS 1 DEVELOPM COMPLETED: COMPLETED: UPDATES GATHERING AND COMPLETED 10/05/2020 10/13/2020 WENT LIVE: WIREFRAMES: 10/9/2020 10/1/2020 10/9/2020	NATIONAL ROLLOUT PRE-PROD IOC TESTING DEV COMPLETE COMPLETE: 10/28/2020 CO	CTB v2.0 DST OFFICE VELOPMENT CONSULT HOURS MPLETE FACTORS CONTINUE: 24/2020 DISCUSSION 10/19/2020 CONTINUES
OCC Business Dependencies	OIT / Data Dependencies	



ELC Decision Needed/ ELC Priority Discussion	Project Description NETWORK ALTER 18/1/2020 16/1 1 Change 18/1/2020 16/1/
• Priority Discussion: (b)(5)	Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information.
Accomplishments	Upcoming Milestones
PPMS 8.1 VA.GOV HOTFIX 8.1.1.1 VA CPL PPMS 9.0 VA.GOV PPMS 9.0 GO-LIVE SPRINT 25 RELEASE NATIONAL NATIONAL SPRINT 27 GO-LIVE RELEASE GATEWAY	 ● 08/20/2020 – ● 8/25/2020 ● 09/8/2020 ● 09/15/20 ● 09/25/20 10/27/20 ● 11/5/20 9/9/2020
OCC Business Dependencies	OIT / Data Dependencies
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy (b)(5) 	(b)(5)

ELC Decision Needed/ ELC Priority Discussion

Decision: None

Priority Discussion: None

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- · Frequency data reported as accessible timely, complete, accurate and reliable
- Percent of compliance with policies
- Percent of systems achieving established performance metrics
- · Percent of systems with complete documentation

Accomplishments

10/7/2020 SPONSORED ISSUES TRACKER DG WORKGROUP GOVERNANCE ROAD MAP

10/14/2020 **APPROVED TECH & DATA**

10/16/2020 **INITIATED E-REPOS DATA USABILITY ANALYSIS**

10/21/2020 APPROVED STANDARD SYSTEMS ARTIFACTS

10/30/2020 DRAFT DATA GOVERNANCE **COMMUNICATION PLAN**

Upcoming Milestones

11/18/2020 CHANGE MANAGEMENT SPONSOR PLAN

11/25/2020 DRAFT DATA GOVERNANCE STRUCTURE

OCC Busi		
Upstream	Dependencies	

• VA Data Governance: (b)(5) • **OIT** (b)(5) (b)(5)(b)(5)

OIT / Data Dependencie.	S
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Upstream Dependencies

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Need	ded / Priority Discussion	Project Description	Key Performance Indicators (KPI)
DECISION: NO ELC decision currently		The project scope is to develop a standardized Continuity of Operations Plan (COOP) Appendix for all mission critical OCC systems and functions. Also, a standardized process for scheduled and unscheduled system outage with an After-Action Report.	 Metric 1: Process for unscheduled outage notification Metric 2: COOPs developed Metric 3: Repository complete Metric 4: KMS and SOPs updated
Accomplishments		Upcoming Milestones	
O8/04/2020 – O8/13/2020 – KICK- APPROVED FOR GO AT OFF PROJECT CCSC MEETING 10/27/20 – DIRECTORATES SYSTEMS/FUNCTIONS			10/20- COOP /ELOPMENT
OCC Business Dependencies - Lite		Office of Information and Techn	ology (OIT) / Data Dependencies - Lite
Highlight OCC Business Dependencies: (b)(5)		• Highlight OIT/Data Dependencies	:



Community Care Integrated Billing and Accounts Receivable (CC IB/AR) - Phase 2

National Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

 The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

• No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1) AR PATCH NATIONALLY RELEASED
 - 06/02/20 IB 675 **NATIONALLY RELEASED**
- **NATIONALLY RELEASED**
- NATIONALLY RELEASED
- **NATIONALLY** RELEASED
- 08/13/20 IB 677 09/10/20 IB 678 09/30/20 AR 361 10/19/20 IB 682 NATIONALLY **RELEASED**
- **Upcoming Milestones** AR 372 & IB 689 ARE NATIONALLY

RELEASING ON 11/09 & 11/04

12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

· No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Downstream Dependency – None at this time.

Enrollment System Community Care (ESCC)

Development

Executive Leadership Committee (ELC)
Decision Needed / Priority Discussion

DECISION:

No ELC decisions needed or priority discussion topics at this time.

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

09 09/2020 ES RELEASE TO EXPAND
STATIC ELIGIBILITY TO NOT ENROLLED
COVERED VETERANS (INCLUDE COPY
OF RECORDS IN ELIGIBILITY FILE IS
TURNED OFF UNTIL CONTRACT MOD
IS COMPLETED)

● 09/2020 SUCCESSFUL MEETING WITH TW AND OPTUM TO DISCUSS SUMMARY OF CHANGES TO ELIGIBILITY FILE

●10/2020 CC ELIGIBILITY VCE MODIFICATION SENT TO CCN CONTRACTORS. AWAITING FINAL APPROVAL **11/2020 TURN ON ES/VISTA
FUNCTIONALITY TO AUTOMATE
COLLATERAL OF VETERAN ELIGIBILITY
(INCLUDE COPY OF RECORDS IN
ELIGIBILITY FILE IS TURNED OFF UNTIL
CONTRACT MOD IS COMPLETED)

Upcoming Milestones

OCC Business Dependencies

- Highlight OCC Business Dependencies:
- Clinical Integration (Business Owners)
- System Engineering Management (SEM) (b)(5)
- Business Intelligence Service Line (BISL) (b)(5)
- Community Care Contractor (CCN) (b)(5)
- VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO)

Issue:

Mitigation:

Office of Information and Technology (OIT) / Data Dependenc	ies
---	-----

• Highlight OIT/Data Dependencies:

Issue

Mitigation:





Development

Project Description Key Performance Indicators (KPI) Executive Leadership Committee (ELC) Decision Needed / Priority Discussion the VHA support DoD Reimbursement pilots with a webbased tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment **DECISION**: No new decisions needed from Revenue Operations regarding back end process batch processing, invoice Methodology. at this time. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 11/1 DOD APPROVED 10/31 VSSC CONTINUATION 5/15/2020 SEM 2019 SEM BUSINESS 8/31/20 VSSC VALIDATION OF VALIDATING AND CODING EXPANSION SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE OF DOD DATA COMPLETE OUTCOME/DECISION OF DOD DATA COMPLETE **OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Project Description Key Performance Indicators (KPI)** Allows eligible Veterans access to Metric 1: over 100,000 Veteran's "no cost" Quadrivalent Influenza vaccinated None vaccinations at Retail Pharmacies Metric 2:Reimburse Walgreens 99% in their neighborhoods accuracy **Accomplishments Upcoming Milestones** 10/30/2020 CLOSE 8/11/2020 FINAL **OUT RETAIL** FILE/INVOICE SENT DHADNAACV

WALGREENS	TIANWACT
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(5)	RISK:
RISK:	
Mitigation:	





Appendix

Project Idea Evaluation Updates





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Decision	Ops Notified	CCSC Presentation Date	CCSC Go / No Go	Ops PM Resource Assigned
Integrated Product Environment (IPE)	9/14	9/22	Approved	9/24	10/20	Go	10/9
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD	Resource not available until Nov. 1st
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	On Hold	TBD	TBD	TBD	TBD	TBD
Community Care Billing SSN Reduction	7/21	8/11	Approved	8/13	10/20	Go	10/2 (b)(6)
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A	N/A
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	Go	7/21
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	Go	7/20 (b)(6)
ePrescribing	6/19	6/23	Approved	6/29	9/15	Go	8/24 (b)(6)

Veteran Credit Database

Deferred Project

Vecerari ereare bacabase				
Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description	Key Performance Indicators (KPI)		
 DECISION: No current ELC decision required at this time. BACKGROUND: Enactment of Law on 5/24/2018 – Implementation Deadline 5/24/2019 	To provide oversight for ongoing policy and IT funding efforts in conjunction with Sec. 302 Protecting Veterans Credit Protection Act of 2018 including efforts to obtain legislative relief.	ongoing policy and IT funding efforts in conjunction with Sec. 302 Protecting Veterans Credit Protection Act of 2018 including efforts to obtain and paper claims are paid within 45 days. Metric 2: Ensures Veteran cost share and deductibles a adjudicated accurately. Metric 3: 100% of information furnished to credit reporting agencies will be verified Veteran responsible debt. Metric 4: Decrease in Appeals and Calls for improperly		
Accomplishments	Upcoming N	Ailestones		
VIPR V18-00312-000 for automated solution submitted. Status as of 1/08/2020 –Unfunded Request/Pending Resources • JANUARY 2021	L-LEGISLATIVE RELIEF REQUEST FO	R FY23 LEGISLATIVE CYCLE WILL BE SUBMITTED.		
OCC Business Dependencies	Office of Information a	nd Technology (OIT) / Data Dependencies		
• Highlight OCC Business Dependencies: (5)	(b)(5)			

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"LINCLASSIFIED"

12/12/2022 180 of 532

Community Care Business Program Management Review (PMR) #1

07/28/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

Agenda

- OCC Priority Project Review
 - OCC Data Governance
 - VA/DoD Advanced Payment and Referral Standardization
 - One Consult 2.0
 - Indian/Tribal Health Coordination (ITHC)
 - Advanced Medical Cost Management System (AMCMS)
 - Urgent Care Integrated Project Team
 - Provider Profile Management System (PPMS)
 - Community Care Reimbursement System (CCRS)
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- · Number of data policies, practices, and standards established
- · Percent of data issues resolved
- Number of completed data initiatives in data governance project portfolio
- · Percent of data initiatives that meet or exceed established initiative targets

Accomplishments

7/6/2020 **NOMINATED DATA GOVERNANCE GROUP**

7/7/2020 CCSC DATA GOVERNANCE

PROJECT APPROVAL

7/8/20 KICKED OFF DATA **GOVERNANCE PROJECT**

7/15/2020 **ADOPTED CONTINUOUS** LEARNING APPROACH

Upcoming Milestones

8/5/2020 **DEFINE OVERARCHING DATA** GOVERNANCE STRATEGIC PRIORITIES GOVERNANCE CHARTER

8/12/2020 **FINALIZE DATA** 8/19/2020 **IDENTIFY A DATA-RELATED GOVERNANCE PORTFOLIO**

OCC Business Dependencies

Pending Dependency Management Analysis

(b)(5)

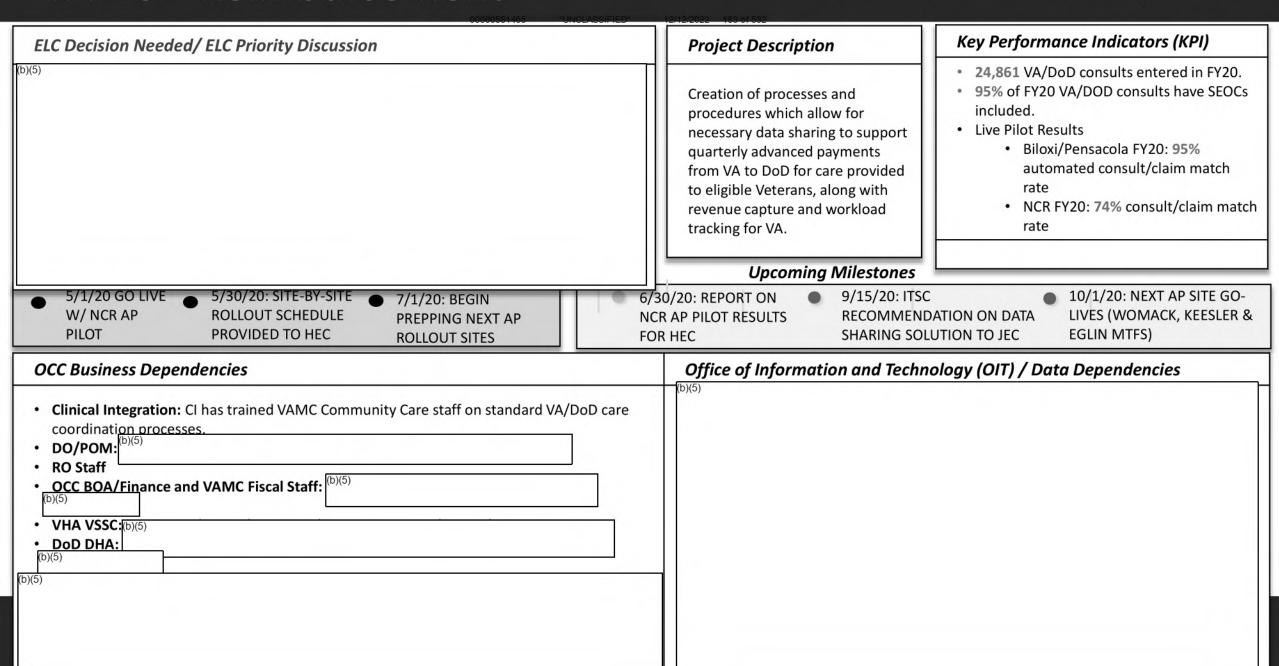
OI	T	Data	Depend	lencies





VA DoD Reimbursement

Project Phase – Development



Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	
DECISION: No decision requested at this time	
•(b)(5)	

Project Description

One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies

Key Performance Indicators (KPI)

- DST integrated into CPRS- Q1 FY 21
- CTB integrated into CPRS- Q2 FY 21
- DST use of new drive time CC eligibility API estimated mid August (30 days after FRN publication)

Accomplishments

RECEIVED APPROVAL FROM BUSINESS TO UTILIZE EXISTING CAPABILITIES WITHIN DST RELEASED UPDATE THAT ADDED CC AVERAGE WAIT TIMES TO THE DST DASHBOARD DEPLOYMENT OF CTB 1.9.0072 OVER 30 DAYS, BEGAN 7/14/20 CBT V1.9.0072
ANNOUNCEMNT AND
FGB UPDATES
COMPLETED

DST DRIVE TIME TO
BE ENABLED 30
DAYS AFTER FRN
PUBLICATION

TEAM CONTINUES TO CAPTURE REQUIREMENTS FOR WEB BASED PLATFORM.

DST OFFCE HOURS CONTINUE 7/20/2020.

Upcoming Milestones

TESTING / NATIONAL DEPLOYMENT OF CTB V1.9.0076. TESTING 9/16/2020, NATIONAL DEPLOYMENT 10/03/2020

OCC Business Dependencies

(b)(5)

OIT / Data Dependencies

	١.
(b)(5	,



Indian-Tribal Health Coordination

Development

ELC Decision Needed/ ELC Priority Discussion	9000000 0100 0311E0 11E	Project Description	Key Performance Indicators (KPI)
(1)This project's training activities were impacted be hold until the partners are free to resume. VA staff paced PPT and sent to the field on 7/17 (b)(5) Discussion (b)(5)		Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted
Accomplishments		Upcoming Milestones	
6/4/20 HELD 2 ND ADVISORY BOARD MTG 07/17/20 VA FIELD STAKEHOLDER VIRTUAL TRAINING EMAILED	08/20/20 TRIBAL CONSULTATION (VIRTUALLY) 08/30/20 RESTART 9/30/20 CLEARANCE AND 11/30/20 CARE EXECUTION OF IHS/THP COORDINATION EXPANSION MOD PLAN FINALIZED		HS/THP COORDINATION
OCC Business Dependencies		OIT / Data Dependencies	
(b)(5)		N/A Risk: Mitigation:	





AMCMS

Deployment

ELC Decision Needed/ ELC Priority Discussion			
(b)(5)			
1			

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Upon deployment, key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- 6/17-6/24 UAT DATA 7/
 VALIDATION ROUND I SC
 EXECUTED UF
- 7/10 UAT TEST SCRIPTS UPDATED
- 6/24-7/15 INCORPORATION OF CHANGES & DATA VALIDATION FIXES BASED ON UAT FEEDBACK
- 7/15-7/25 UAT DATA
 VALIDATION ROUND II
 EXECUTION
- 8/21 UAT TEST
 EVALUATION
 REPORT

Upcoming Milestones

- 8/25 NATIONAL DEPLOYMENT GATE REVIEW MEETING
- 8/26/20 BEGIN FIELD NATIONAL DEPLOYMENT

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Urgent Care IPT

National Deployment

ELC Decision Needed/ ELC Priority Discussion	USUUUSTIIUS SIIGENSSIITES	Project Description	Key Performance Indicators (KPI)
(b)(5)		Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.	• 5,688 total probable UC visits in Region 1, as of 5/31/2020
Accomplishments		Upcoming Milestones	
O6/08/20 REGION 2/3 GO LIVE DATE FINALIZED AS 8/4 O7/15/20 REGION 2/3 COMMS RELEASED	08/04/20 REGION 2 TRANSITION	08/04/20	
OCC Business Dependencies	Offi	ice of Information Technology / Data	Dependencies
Clinical Integration: N/A Delivery Operations: N/A Provider Relations and Services (PRS): (b)(5) Communications: (b)(5) (b)(5) (b)(5)	(b)(5)	(: N/A	
		igation: N/A	

ELC Decision Needed/ ELC Priority Discussion **Priority Discussion:** (b)(5)

Project Description

Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information.

Key Performance Indicators (KPI)

Power BI functionality exceeded license capability for reporting previous metrics.

Accomplishments

- 5/22/20 **PPMS 8.0 GO-LIVE**
- 6/30/20 **DEV CONTRACT**

AWARDED JUNE

7/1/20

URGENT CARE LEGACY RE-ROUTE

7/7/20 PPMS 8.1 GO-LIVE

7/23/20 HOTFIX 8.1.1.1 RELEASE

7/29/20 **COMMUNITY PROVIDER** LOCATOR (CPL) RELEASE

Upcoming Milestones

- 08/11/20 PPMS 9.0 NATIONAL **GATEWAY REVIEW**
- 08/20/20 **PPMS 9.0 GO-LIVE**

OCC Business Dependencies

- Clinical Integration
- **Network Management**
- Community Care Network
- **Delivery Operations**
- **Revenue Operations**
- (b)(5)VAMC/CPO & Pharmacy

(b)(5)

OIT / Data Dependencies

(b)(5)



CCRS

National Deployment

ELC Decision Needed/ ELC Priority Discussion • No ELC Decision Requests for July

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicators (KPI)

CCN Payment Metrics as of July 17, 2020

- Region 1: Invoices Received 1,329,157, Confirmed Paid 825,256, Sent for Payment 27,528, "No Action" Optum denials 409,257
- Region 2: Invoices Received 759,546, Confirmed Paid 464,651, Sent for Payment 23,090, "No Action" Optum denials 242,340
- Region 3: Invoices Received 176,601, Confirmed Paid 72,137, Sent for Payment – 4,983, "No Action" Optum denials – 94,192
- Region 4: Invoices Received 1,347, Confirmed Paid 241, Sent for Payment 299, "No Action" TriWest denials 563
- The total Invoice Amount Paid/Sent for Payment: \$984,680,609.20

Accomplishments

06/23/2020 SUSPENSION
OF SUSPENSION OF 270
DAY DENIAL REASON
APPROVED BY ELC

07/06/2020 PMPM ADMIN

■ FEES FOR RESUBMISSIONS
IMPLEMENTED STARTING
WITH MAY

07/09/2020 CCRS USER ACCEPTANCE TESTING 11.4 07/14/2020 NATIONAL DEPLOYMENT GATE REVIEW (GO, NO GO DECISION)

 07/16/2020 RELEASE CCRS 11.4 TO PRODUCTION

Upcoming Milestones

07/17/2020 UPDATE USER GUIDES AND LESSONS LEARNED CCRS 11.4 07/17/2020 UPDATE KMS AND TRAINING DOCS FOR CCRS 11.4

OCC Business Dependencies

Clinical Integration (Facility CC Staff and VAMC RN Staff)
 Delivery Operations/Payment Oversight and Management (Invoice Processing Staff)

• Revenue Operations (Facility Revenue, RUR, and CPAC Staff):

(b)(5)

• Finance (OCC Finance and Informatics Staff):
(b)(5)

• VAMC / Fiscal Budget Staff:
(b)(5)

OIT / Data Dependencies

Appendix





Cerner OCC Integration

Development

ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Manage all necessary integrations to TBD: Focusing on timeliness No ELC decisions needed or priority discussion topics at this appropriately measures and qualitative time. operationalize Cerner surveys EHR into OCC clinical operations processes These dates are subject to **Accomplishments Upcoming Milestones** change due to COVID-19 uncertainty CSS: **Super User Training:** ORA: IV3: **TBD** awaiting **OEHRM** Decision Go Live 8/21/2020 9/7/2020 8/10/2020 7/27/2020 **OCC** Business Dependencies OIT / Data Dependencies **Highlight OCC Business Dependencies:** -Clinical Integration and Mann Grandstaff Facility CC Staff: SMEs (b)(5) -Payment Operations Management -Revenue Operations (Facility Revenue, RUR, and CPAC Staff) -Women's Health (IVF and Infertility) (b)(5)



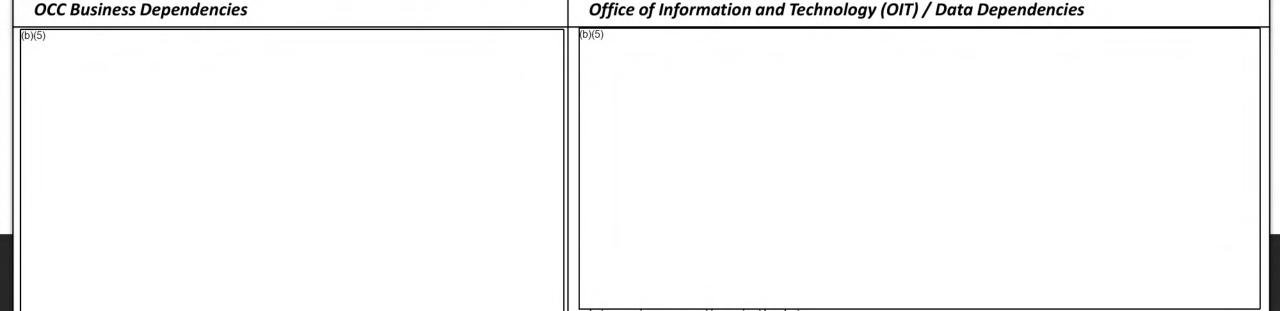
Community Care Network

Deployment

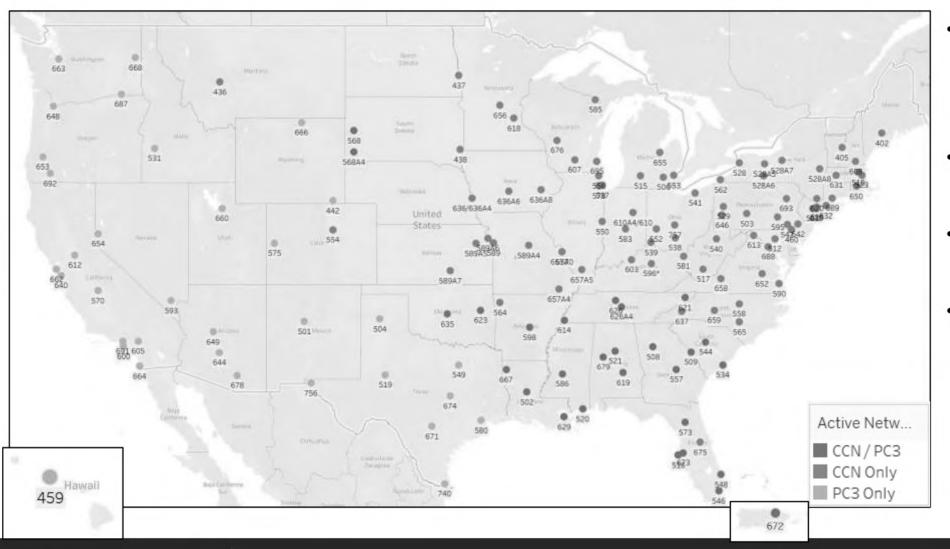
CUTOVER FROM PC3

ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Region 3 Gradual Transition - CCN Referral # Complete regional • Week 1: May 18 - 22, 2020 deployments to Total Referrals = 4,965* Total Rejects = 10 achieve CCN in Regions Week 2: May 25-29, 2020 1 – 6 and consolidate Total Referrals = 5,084* Total Rejects = 10 regional operations No ELC decisions needed or priority discussion topics at this time. Week 3: June 1-5, 2020 support as transitions Total Referrals = 7,743* Total Rejects = 18** complete to focus on Region 4 R4P1 Go Live - CCN Referral # stabilizing and Week 1: June 8-12, 2020 optimization. Total Referrals = 842 Total Rejects = 45 **Accomplishments Upcoming Milestones** 08/31/20 R4 06/16/20 R3P2 08/04/20 R2 & R3 08/11/20 R4P3 08/25/20 R4P4 SHCD 07/21/20 R4P2 SHCD GO-LIVE **URGENT CARE URGENT CARE** SHCD GO-LIVE **GO-LIVE** SHCD GO-LIVE

CUTOVER FROM PC3



National Network Deployment Progress – As of 7/6/2020



- (b)(5)
 - Regions 1, 2, and 3 are fully deployed
 - Region 4 Phase 1 deployed on 6/8/2020
- Covid-19 is impacting the national deployment progress and provider recruitment progress

Region 3 Update

January 7 2020: Go-Live for Two Sites May 18 – June 15: Gradual



Transition

Throughout the Gradual Transition, and continuing post-go-live, Optum is working to contract with key Region 3 providers.

Recent wins include:

- VISN 7: University of Alabama (received verbal agreement)
- VISN 16: Willis-Knighton Health System

June 16: Full Region 3

Deploymeal remaining R3 sites)

June 16, 2020

Atlanta, GA

August, GA

Bay Pines, FL

Biloxi, MS Central Arkansas, AR Birmingham, AL Columbia, SC Central Alabama Memphis, TN Charleston, SC Murfreesboro, TN Dublin, GA Nashville, TN Jackson, MS Miami, FL New Orleans, LA Mountain Home, TN Shreveport, LA Muskogee, OK Tuscaloosa, AL N. Florida / S. Georgia Alexandria, LA Oklahoma City, OK

> San Juan, PR Tampa, FL

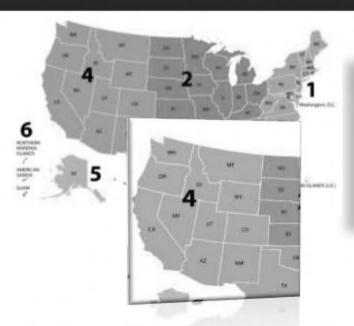
West Palm Beach, FL

July 17: 30-day PC3 cutover period ends

Region 3 Activities

- CAST calls continue for another two weeks until sites transition to the monthly network adequacy calls
- Optum and Network Management are reviewing the **16 requests for PC3 extensions.** Some sites are reporting gaps in specific specialties whereas others are requesting for specific providers. Final decisions will be made this week.
- Optum is holding network reviews with individual sites that have concerns with the network. These meetings will focus in
 on certain specialties and outstanding issue tracker items.

Region 4 Update



SHCD - Phase 1 (2 VAMCs)

June 8, 2020

VISN 19 - 2 VAMCs

- Montana (436)
- · Eastern Colorado, CO (554)

Phase 2 (13 VAMCs)

July 21, 2020

VISN 17 - 7 VAMCs Amarillo, TX (504)

El Paso, TX (756)

Texas Valley Coastal (740

Central Texas (674) North Texas (549)

South Texas (671) West Texas (519)

VISN 16 - 2 VAMC

Houston, TX (580) Texas counties aligned to

Shreveport, LA (667) catchment area

VISN 19 - 4 VAMCs

Cheyenne, WY (442) Sheridan, WY (666) Salt Lake City, UT (660)

Grand Junction, CO (575)

Phase 3 (14 VAMCs)

August 11, 2020

VISN 20 - 7 VAMCs Portland, OR (648) Puget Sound, WA (663) Roseburg, OR (653)

Spokane, WA (668) White City, OR (692)

Walla Walla, WA (687)

Boise, ID (531)

VISN 21 - 7 VAMC

Fresno, CA (570) Reno, NV (654) San Francisco, CA (662) Northern California (612) Palo Alto, CA (640) Southern Nevada (593)

August 25, 2020 Honolulu, HI (459) VISN 22 - 8 VAMCs

> Loma Linda, CA (605) Long Beach, CA (600)

Phase 4 (8 VAMCs)

New Mexico (501)

Northern Arizona (649)

Phoenix, AZ (644)

San Diego, CA (664)

Southern Arizona (678)

Greater LA, CA (691)

16

Region 4 SHCD

- Region 4 Phase 2 deploying on July 21, 2020
- Collaborating with TriWest to prepare Phase 2 and 3 sites for CCN Go live through predeployment meeting series
- Planning and conducting sequence of e-learnings, virtual training sessions, and just in time refresher trainings to ensure site staff are ready to use CCN systems and tools for Go Live
- Increasing messaging on differences between CCN and PC3 to level set site expectations
- Updating deployment approach for Phase 2-4 Command Center based on Phase 1 lessons learned; scaling to account for increased number of Go-Live sites
- Developing proactive referral tracking approach to determine trends: network gaps, COVID-19 impact vs field utilization





ELC Decision Needed/ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 35/80 Users
- CCN Accreditation Waivers UI: 25/30 Users
- CCN Complaints & Grievances UI: 24/54 Users
- CCN Congressional Inquiries UI: 27/42 Users
- CCN Corrective Action Plans (CAPs) UI: 25/30 Users
- CCN Network Adequacy Deviations UI: 25/51 Users

Accomplishments

04/28/2020 EPRS Build 5B 05/18/2020UAT complete for Build 5C IDA Reports

06/26/2020 ■ UAT complete for Build 5D IDA Reports

06/26/2020 EPRS Build 5.1 **Upcoming Milestones**

Future Build/Release Planning Underway

OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	(b)(5)

Development

ELC Decision Needed/ ELC Priority Discussion No ELC decisions needed or priority discussion topics at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

OIT / Data Dependencies

Key Performance Indicators (KPI)

- 2,223,145: Total Referrals FY 2020
- 186,901: Total Referral FY 2019
- 16,581: Total number of VA user accounts provisioned
- 13,381: Number of Community Providers provisioned
- 4,903: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,270: Support Ticket Count for June
- 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning-VA; Provisioning-CP; Related to Production Outage

Accomplishments

07/10/2020 CTB V1.9.0072 ND 07/20/2020 **RELEASE 9.0 ND**

- 08/25/2020 07/21/2020 COVID REFERRAL EXT RELEASE 10.0 CCSC BATCHING COMPLETE PRESENTATION
- 08/25/2020 **RELEASE 10.0 FIELD NOTIFICATION**

Upcoming Milestones

- 9/14/2020 **RELEASE 10.0 ND**
- OCT 2020 **RELEASE 11.0 ND**

OCC Business Dependencies

Highlight OCC Business Dependencies:

- COVID19 Referral Extension: Issue found on 6/12/2020 with certain SEOC versions used in referral extension was addressed via a development script; Referral batching with downstream system was resumed on 6/29 and completed on 7/21/2020, ahead of scheduled by 3 days
- Clinical Integration (CI Field Support Director & Assistants): (b)(5)
- Delivery Operations/POM (b)(5)

(b)(5)

(-/(-/	
Revenue Operations (Facility Revenue, RUR, and CPAC Staff	(b)(5
(b)(5)	1

• Finance (OCC Finance and Informatics Staff) (b)(5)

(b)(5)

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for GEC Documents task and EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Overview of Release 9.0 Enhancements

- Release 9 contains several general HSRM enhancements in addition to reporting enhancements and critical HSRM Task list enhancements, which will make task list management more efficient and user friendly.
- Training and communications are being developed to ensure proper task management utilization.

General HSRM Enhancements

- Referral Date: Change to Referral Date logic to reflect the start date to be the date the consult is 'Sent to HSRM' from CPRS
- Clinically Indicated Date: Removal of validation check logic for CID field
- Multiple Veteran Addresses: Addition of Residential Address

Task Management Enhancements

- Enhanced filtering by Veteran Last name
 - Search for specific Veteran by last name
 - Filter task list by Alpha Split
- "Clean slate": Tasks greater than 10 days old will be archived from the task list
- Addition of referral number on task list
- Search task list by referral number
- Search task list by assigned user
- Add Level of Care Coordination to Priority field on task list
- Sort/filter by Level of Care Coordination/Priority
- Medical documentation task enhancements: 5 New dispositions for documents loaded to VistA

Reports Enhancements

- o Community Provider User Provisioning Report:
 - Added Community Facility parameter and removed the affiliation parameter
 - City and state added to the report
- Community Provider Referral Summary Report:
 - Veteran's date of birth added to the report
- Optional Task Report
 - Region added to the report





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) – Phase 2

National Deployment

ELC Decision Needed/ ELC Priority Discussion

The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

 No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1)
 AR PATCH NATIONALLY
 RELEASED
- 06/02/20 IB 675 NATIONALLY RELEASED
- 06/05/20 SIX MONTH EXTENSION STARTED
- 08/03/20 IB PATCH 677 NATIONALLY RELEASING
- 08/31/20 IB PATCH 678 NATIONALLY RELEASING
- FOUR ADDITIONAL IB/AR PATCHES TARGETED FOR DEVELOPMENT AND NATIONAL RELEASE
- 12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Upcoming Milestones

Downstream Dependency – None at this time.

(b)(5)





1429

National Deployment

ELC Decision Needed/ ELC Priority Discussion (b)(5)

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 10/09/19 UPDATED PERFORMANCE
 DESCRIPTIONS AND UNION APPROVAL FOR
 CPAC DEPLOYMENT RECEIVED
- 03/31/20 FINAL 9957
 ACCESS REQUEST
 SUBMITTED
- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS

Upcoming Milestones

07/24/20 PROJECT COMPLETE

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and Technology / Data Dependencies

(b)(5)

ELC Decision Needed/ ELC Priority Discussion	Project Descri	ption	Key Performance Indicators (KPI)	
• Priority Discussion: No	The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.		 Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100% Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily 	
Accomplishments			Upcoming Milestones	
SUNSET APPROVED FOR DEPLOYED ELIGI GRANDFATHER SOLUTION OF NOT FUNCTIONALITY OF CO	020 COMPLETED IBILITY ANALYSIS C DATA FOR CTED REFERRALS	REGARDING BUSINESS NOT RULES FOR PREVENTING VETE	020 ES RELEASE TO ND STATIC ELIGIBILITY TO ENROLLED COVERED RANS AND INCLUDE COPY ECORDS IN ELIGIBILITY FILE 08/2020 ES RELEASE TO AUTOMATE COLLATERAL OF VETERAN PROCESS TO INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE IN ELIGIBILITY FILE (PHASE I	
OCC Business Dependencies			hnology (OIT) / Data Dependencies	
Highlight OCC Business Dependencies: Clinical Integration (Business Owners) System Engineering Management (SEM) — (b)(5) Business Intelligence Service Line (BISL) (b)(5) Community Care Contractor (CCN) — (b)(5)		(b)(5)		

(b)(5)

• VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office



Retail Pharmacy Program

Sustainment

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods	 Metric 1: over 100,000 Veteran's vaccinated Metric 2: Vaccinate 125,000 next year Metric 3: Reimburse Walgreens 99% accuracy Metric 4: Continued Outreach to Rural Veterans
FILE/INVOICE SENT	Upcoming Milestones 1,2020 CLOSE UT RETAIL HARMACY	
OCC Business Dependencies	Office of Information and Techno	ology (OIT) / Data Dependencies
(b)(5) (b)(6) (b)(5)	RISK: N/A	





Project Phase – Development

Project Description Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion the VHA support DoD Reimbursement pilots with a web based tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment **DECISION**: No new decisions needed from Revenue Operations regarding back end process batch processing, invoice Methodology. at this time. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 9/1/20 SEM 10/01/20 FUNCTIONAL 8/1/20 VSSC 5/15/2020 SEM **2019 SEM BUSINESS VALIDATION OF DOD** SHAREPOINT TOOL **USER TESTING** SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE DATA COMPLETE **TESTING** COMPLETE **OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation Updates

Project Name	Date Presented at PMR	Decision	Status
Comprehensive Disaster Recovery Plans	6/23	Approved	Intake
ePrescribing	6/23	Approved	Intake
CAVE	7/14	Approved	CCSC, 7/28, approval to move to project development
Veteran Credit Database Program	Scheduled for 8/11	Pending	TBD



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"UNCLASSIFIED"

12/12/2022 207 of 532

OCC Bi-Monthly Business PMR #1

09/22/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

Agenda

- Project Idea Evaluation
 - Integrated Product Environment (IPE)
- OCC Priority Project Review
 - Enterprise Program Reporting System (EPRS)
 - HealthShare Referral Manager (HSRM)
 - Provider Profile Management System
 - Urgent Care Implementation
 - o One Consult 2.0
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





Integrated Product Environment (IPE)

Originator & Date: CHIO /	BOA ^{(b)(6)}	Scope Definition: Integra	ted Product En	vironment for isolated and end	to end testing of various CCN related projects.	
9/14/2020 Impediments to OC	С	70.71		Additional Impact		
Business Ops & Admin:	OPS Resource	mpacts		Policy Impact:	No current impacts identified.	
Delivery Ops:	DO systems			Funding Impact:	Future - (b)(5)	
Revenue Ops: RO systems Clinical & Network Mgmt: CNM projects: PPMS, CCRA, EPRS, AMC CERNER, CCN, CAVE, ePrescribing, etc.		Impact on Other OCC Projects:				
			MS, OCC-	Impact if Project Idea Not		
OCC Leadership (Includes IDA and BIC):	IDA — <u>No curren</u> BIC - ^{(b)(5)} _{(b)(5)}	t impacts identified.		Approved:		
Recommended OC	C Strategic F	Priority Alignment	Recomme	nded Project Designati	on Recommended Business Owner	
Innovate Business Model			occ		CHIO / BOA	
Discussion: (b)(5)		(b)(6))(5)			





Enterprise Program Reporting System (EPRS)

Development

		00000581465 "UNCLA	ASSIFIED" 12/12/2022 210 of 532
Executive Leaders	hip Committee (ELC) Decisio	n Needed / Priority	Project Description
(b)(5)	Accomplish	ments	EPRS delivers a series of custom- built user interface (UI) screens an reporting system data integrations for administering the CCN contract
	, recomplisin	nents	
08/25/2020 EPRS	08/20/2020 EPRS	08/28/2020 EPRS	09/28/2020: EPRS Pre-Prod
SharePoint Server	Release 6.0 D: EDI 837	Release 7.0 D: EPRS Data	R10.0 & 10.1: UIs for

nd

Key Performance Indicators (KPI)

- Quality Check UI: 39/80 Users (Δ = +2)
- CCN Accreditation Waivers UI: 30/30 Users ($\Delta = +3$)
- CCN Complaints & Grievances UI: 28/54 Users (Δ = +2)
- CCN Congressional Inquiries UI: 30/42 Users ($\Delta = +1$)
- CCN Corrective Action Plans (CAPs) UI: 28/30 Users ($\Delta = +1$)
- CCN Network Adequacy Deviations UI: 27/51 Users ($\Delta = +1$)

Upcoming Milestones

08/25/2020 EPRS
SharePoint Server
Pre-Prod Migration

Data Layer Rework

Integration (eCAMs)

Complaints, & N.A. Deviations

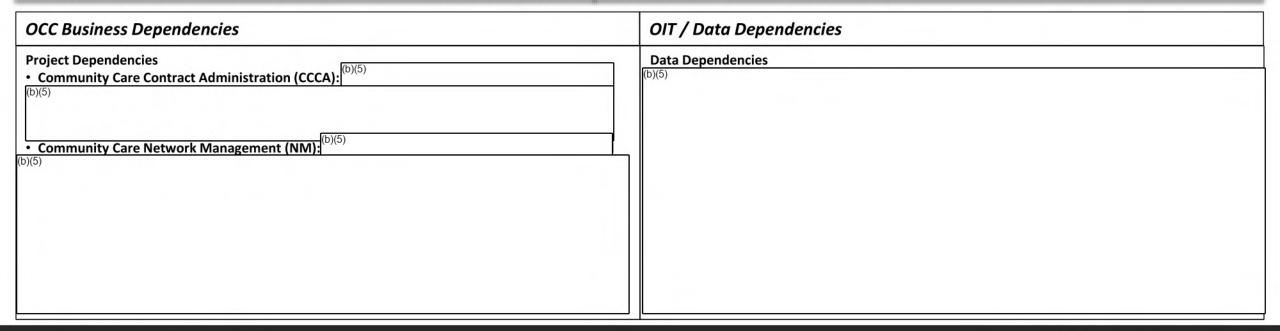
09/30/2020 EPRS Pre-

Prod R11.0: Network Management UI

10/05/2020: EPRS Prod R 9.0:

EPRS Tech. Data Integration for

HSRM



HealthShare Referral Manager

Development

DECISION: No ELC decisions needed at this time.

Priority Discussion

• DECISION: No ELC decisions needed at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- 2,841,420: Total Referrals FY 2020
- 185,691: Total Referral FY 2019
- **17,830**: Total number of VA user accounts provisioned
- **16,541**: Number of Community Providers provisioned
- **5,783**: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,073: Support Ticket Count for August
- 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning- CP; Provisioning-VA; VistA Write Back/ Appointment Question

Accomplishments

08/28/2020 RELEASE 10 FIELD NOTIFICATION 9/14/2020 RELEASE 10 ND

09/21/2020
 CAEC PORTAL

09/26/2020
 CERNER SCHEDULING
 MESSAGE GO-LIVE

 10/24/2020 CERNER SPOKANE GO-LIVE

Upcoming Milestones

11/1/2020
 RELEASE 11 UAT

11/23/2020
 RELEASE 11 ND

OCC Business Dependencies

Highlight OCC Business Dependencies: Clinical Integration (CI Field Support Director & Assistants) (b)(5)

• Delivery Operations/POM (b)(5) (b)(5)

Finance (OCC Finance and Informatics Staff)

Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)

(b)(5)

OIT / Data Dependencies

(0)(3)

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Provider Profile Management System (PPMS)

Dev/Ops

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
• Priority Discussion: (b)(5)	Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information. NETWORK ACTIVE Provider (S/19/2/020 P Ser/CES) 326,871 319,442 7,429 2% 1,429,919 Not reported CCN Region 1 326,871 319,442 7,429 2% 1,429,919 Not reported CCN Region 2 17,7070 165,961 11.154 7% 641,966 CCN Region 3 17,7070 1
Accomplishments	Upcoming Marestories 1,841,979 1,797,125 44,854 2% 12,123,360
 ↑7/14/20 ↑7/27/20 ↑7/29/20 ○ 08/11/20 ○ 8/11/20 ○ 08/20/20 ○ 8/25/2020 ○ VA.GOV ○ PPMS 9.0 ○ VA.GOV ○ SPRINT 25 ○ RELEASE ○ LRELEASE ○ GATEWAY ○ 08/20/20 ○ 8/25/2020 ○ VA.GOV ○ SPRINT 28 ○ SPRINT 28 	08/20/2020 − ● 09/8/2020 ● 09/15/20 ● 09/25/20 ● 10/27/20 ● 11/5/20 9/9/2020 VA.GOV PPMS 9.1 PPMS 9.1 PPMS 10 PPMS 10 PIE RESTART SPRINT 29 NATIONAL GO-LIVE NATIONAL GO-LIVE PRIORITY SITES GATE REVIEW GATE REVIEW
OCC Business Dependencies REVIEW	OIT / Data Dependencies
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy - (b)(5) 	(b)(5)

Urgent Care IPT

Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

Implementation Updates:

- 1. CCN Urgent Care for Regions 2 and 3 went live on 9/1.
- 2. R2/3 Webinars held on 8/25 and 8/27, with over 400 participants at each session.
- 3. Worked with DEPO to ensure Veterans can access pharmacy locations for urgent care prescriptions and flu shots on VA.gov Provider Locator.

Project Description

Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.

Upcoming Milestones

Key Performance Indicators (KPI)

- 1,710 total Veteran calls to confirm eligibility from 09/01/2020-09/07/2020.
- 392 total UC authorizations in R2 from 09/01/2020-09/07/2020.
- 1,014 total UC authorizations in R3 from 09/01/2020-09/07/2020.

Accomplishments

08/30/20 OPTUM R2/3 PROVIDER FILE INGESTED BY PPMS 09/01/20 REGIONS
 2/3 GO-LIVE

09/25/20 REGION 4 COMMS RELEASE 09/30/20 REGION 4 UC CCN GO-LIVE

OCC Business Dependencies

• Communications: (b)(5)
(b)(5)

Office of Information Technology / Data Dependencies





One Consult 2.0

Development

Executive Leadership Committee (ELC) Decision Needed /				Project	Description		Key Pe	rformance Indicators	(KPI)
Priority Discussion DECISION: No decision requested at this time (b)(5) Accomplishments CTB 1.9.0076 FULL SITE IOC ENABLED LIGHTHOUSE COMPLETED DST MAPPING CTB 1.9.0076 GO NO GO:			One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies		 DST integrated into CPRS- Q1 FY 21 CTB integrated into CPRS- Q2 FY 21 DST use of new drive time CC eligibility API to begin 9/10/2020 				
	Acc	omplishments			Upcoming Milestones				
					TEAM CONTINUES TO CAPTURE REQUIREMENTS FOR WEB BASED PLATFORM	CTB V1.9.0076: CONCLUDE FULL SITE IOC: 9/14/2020	CTB V1.9.0076 NATIONAL DEPLOYMENT: 9/18/2020	DST OFFICE HOURS CONTINUE: 9/21/2020	
OCC Busines	ss Dependencies			OIT / Dat	a Dependencies				
(b)(5)				(b)(5)					



- Release will add "Unable to Schedule" requirements to include options from the Add Comments workflow
- Release will include more descriptive text in the consult factors that describe why user is unable to schedule a consult
- Release will fix the Clinical Review Option (CC Referrals) scheduling options that are being cached when Receiving Consults and user does not select a scheduling option
- Release will address unable to enter text (ex. "t+30") issue
- Release will address telehealth options not showing up when internal consults are triaged
- National release projected to begin 9/18/2020



- New version of Consult Toolbox in a DevSecOps model that will eliminate the long and costly desktop deployment process.
- The scope will include user validated requirements and existing backlog items.
- Minimally Viable Product projected to be completed 9/25/2020
 - National Deployment not expected until November/December 2020



Appendix

Project Status Update





Cerner OCC Integration Project

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Project Description** Manage all necessary integrations to appropriately **DECISION:** No ELC decisions needed at this time. operationalize Cerner surveys EHR into OCC clinical operations processes **Upcoming Milestones**

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative

Accomplishments

- **Cerner Referral Manager Functional Testing:** 8/17/2020 - 8/28/2020
- Exploratory Testing: 8/24/2020 - 8/29/2020
- Super User Training: 8/10/2020-8/29/2020
- ORA: 9/7/2020
- **End User Training (Spokane):** 9/28/2020
- **HSRM SIU Interface Go-Live: End of September**
- **IOC Go Live:** 10/24/2020

OCC Business Dependencies

Highlight OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff: SMEs (D)(5)

-Payment Operations Management

-Revenue Operations (Facility Revenue, RUR, and CPAC Staff)

-Women's Health (IVF and Infertility)

OIT / Data Dependencies

(b)(5)





Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

• **DECISION:** No ELC decisions needed at this time.

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicators (KPI)

CCN Payment Metrics as of September 4, 2020

- Region 1: Invoices Received 1,881,790, Confirmed Paid 1,195,248, Sent for Payment 45,314, "No Action" Optum denials 523,766
- Region 2: Invoices Received 1,319,275, Confirmed Paid 845,062, Sent for Payment – 52,031, "No Action" Optum denials - 352,273
- Region 3: Invoices Received 411,988, Confirmed Paid 196,103, Sent for Payment 12,303, "No Action" Optum denials 183,202
- Region 4: Invoices Received 79,998, Confirmed Paid 23,348, Sent for Payment – 9,984, "No Action" TriWest denials - 15,325

The total Invoice Amount Paid/Sent for Payment: \$1,728,313,422.92.

Accomplishments

09/01/2020 CCRS 12.2 COMMUNICATIONS SENT

09/03/2020 RELEASE CCRS 12.2 TO PRODUCTION 09/09/2020 CCRS USER ACCEPTANCE TESTING 12.3 09/22/2020 RELEASE CCRS 12.3 TO PRODUCTION 10/1/2020 CCRS USER ACCEPTANCE TESTING 12.4

Upcoming Milestones

10/15/2020 RELEASE CCRS 12.4 TO PRODUCTION 10/16/2020 UPDATE KMS, TRAINING DOCS, AND LESSONS LEARNED FOR CCRS 12.4

OCC Business Dependencies

- Clinical Integration (Facility CC Staff and VAMC RN Staff)
- Delivery Operations/Payment Oversight and Management (Invoice Processing Staff) (b)(5)
- Revenue Operations (Facility Revenue, RUR, and CPAC Staff): (b)(5)
- Finance (OCC Finance and Informatics Staff) (b)(5)
- VAMC / Fiscal Budget Staff: (b)(5)

(D)(D)

OIT / Data Dependencies

(b)(5)

Community Care Network

Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

- Region 2 and 3 initiated Urgent Care cutover from PC3 on September 1st
- Regions 1 4 reached full HCD with the deployment of Region 4; Region 4 reached full HCD with Phase 4 deployment on August 25th
 - CCN use continues to increase for all sites in Phase 1, 2, and 3 for Region 4
 - Post deployment refresher trainings and office hours are in development
- R4 Urgent Care cut over is now 9/30/2020

Accomplishments

06/08/20 R4P1 SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

GO-LIVE

● 06/16/20 R3P2 ■ 07/21/20 R4P2 ■ 08/11/20 R4P3 ■ 08/25/20 R4P4 SHCD ■ 09/01/20 R2 & R3 URGENT CARE CUTOVER FROM PC3

Upcoming Milestones

09/30/20 R4 URGENT CARE **CUTOVER FROM PC3**

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

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Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
No ELC decisions needed. (b)(5) Tribal consultation on the CC approach was delivered 8/25 and the public has until 9/25 for written comment. Program office presented to the BIMS on 9/11. The annual tribal training is scheduled for the week of 9/15.	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement - Metric 1: Advisory Board meetings - Metric 2: Care Coordination Plan developed - Metric 3: Annual re-trainings conducted
Accomplishments	Upcoming Milestones
STAKEHOLDER VIRTOAL PHARMACY MOD TRIBAL CONSOLIATION	09/18/2020 09/15/2020 11/13/20 CC PLAN ATION ON RAP STATUS 09/18/2020 11/13/20 CC PLAN FINALIZED AND BEGIN RETRAINING IMPLEMENTATION
OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	N/A Risk: Mitigation:





Project Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- **FM Metrics:** Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

8/19-8/28 PHASE 8/28-9/1 GENERATED UPDATED MODEL
REFERRAL LOGIC) COST ESTIMATES

ED • 9/2 COMPLETED AMCMS/VA ESD INTEGRATION

8/27-9/14 TRAIN
 THE TRAINER
 SESSIONS

9/11 STALE REFERRAL LOGIC UAT RE-TESTING 9/16-9/23 AMCMS VIRTUAL WEBINAR TRAININGS

Upcoming Milestones

 9/22 NATIONAL DEPLOYMENT GATE REVIEW

9/30 LESSONS LEARNED UPDATE

OCC Business Dependencies

• (b)(5)

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion		Project Description		Key Performance Indicators (KPI)	
• DECISION: No ELC decisions needed at this time.		The project scope is to de standardized Continuity of Operations Plan (COOP) p addition, the creation of a document for each OCC Directorate. In parallel, to policy/plans, the development implementation of an electronic single repositor	f olicy, in COOP the ment	notification • Metric 2: Co • Metric 3: Co • Metric 4: Ro	rocess for unscheduled outage n OOPs developed OOP Policy developed epository complete MS and SOPs updated
Accomplishments		Upcoming Mil	estones		
08/04/2020 – APPROVED FOR GO AT CCSC 08/13/2020 – KICK-OFF PROJECT MEETING	● 10/27/20 −	11/10/20- NOTIFICATION OF UNSCHEDULED SYSTEM OUTAGE PROCESS		/20- COOP OPMENT	12/15/20 – COOPPOLICY DEVELOPMENT
OCC Business Dependencies - Lite		Office of Information	and Technol	logy (OIT) / Do	ata Dependencies - Lite
Highlight OCC Business Dependencies: (b)(5)		• Highlight OIT/Data Dep	pendencies:		



OCC Data Governance Project

Initiation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

OIT / Data Dependencies

Key Performance Indicators (KPI)

- Frequency data reported as accessible timely, complete, accurate and reliable
- · Percent of compliance with policies
- Percent of systems achieving established performance metrics
- Percent of systems with complete documentation

Accomplishments

9/2/2020 SYSTEMS DOCUMENTS GAP ANALYSIS 9/30/2020
CREATE TECHNOLOGY AND DATA
GOVERNANCE ROAD MAP

10/14/2020 DRAFT DATA GOVERNANCE STRUCTURE ROLES/ RESPONSIBILITIES

Upcoming Milestones

10/28/2020
 OBTAIN APPROVAL SYSTEMS
 DOCUMENTATION STANDARD

OCC Business	Dependencies
--------------	--------------

(b)(5)

)(5)

Enrollment System Community Care (ESCC)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

• **DECISION:** No ELC decisions needed at this time.

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

**O9/20 PRODUCTION RELEASE FOR CC COLLATERAL OF VETERANS AND NOT ENROLLED COVERED VETERANS

09/20 MET WITH

TW AND OPTUM

TO DISCUSS

SUMMARY OF

CHANGES TO

ELIGIBILITY FILE

COMPLETED RFM FOR NEW VCE CODES AND SUBMITTED TO COR TEAM 09/2020 COLLABORATED
WITH ELIGIBILITY OIT
TEAM TO PAUSE RELEASE
OF LINKING SPONSOR OF
COLLATERAL OF VETERANS

09/2020 ES RELEASE TO
EXPAND STATIC ELIGIBILITY TO
NOT ENROLLED COVERED
VETERANS AND INCLUDE COPY
OF RECORDS IN ELIGIBILITY FILE

Upcoming Milestones

● 09/2020 ES RELEASE TO
AUTOMATE COLLATERAL OF
VETERAN PROCESS TO
INCLUDE COPY OF RECORDS
IN ELIGIBILITY FILE (PHASE I)

OCC Business Dependencies

- Highlight OCC Business Dependencies:
- · Clinical Integration (Business Owners)
- System Engineering Management (SEM) (b)(5)
- Business Intelligence Service Line (BISI) (b)(5)
 Community Care Contractor (CCN)
- VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO)

Issue:

Mitigation:

Office of Information and Technology (OIT) / Data Dependencies

				. 4
Issue				
Issue Mitigation:				

Retail Pharmacy Program

Close Out

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
• DECISION: No ELC decisions needed at this time.	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods • Metric 1: over 100,000 Veteran's vaccinated • Metric 2:Reimburse Walgreens 99% accuracy
Accomplishments	Upcoming Milestones
FILE/INVOICE SENT	J1/2020 CLOSE JT RETAIL JARMACY
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(5) RISK: Mitigation:	RISK:





VA DoD Payment and Referral Standardization

Development

Key Performance Indicators (KPI) Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Project Description** 28,598 VA/DoD consults entered in FY20. (b)(5)88% of FY20 VA/DOD consults have SEOCs Creation of processes and included. procedures which allow for Live Pilot Results necessary data sharing to support Biloxi/Pensacola FY20: 95% quarterly advanced payments automated consult/claim match from VA to DoD for care provided to eligible Veterans, along with rate NCR FY20: 78% consult/claim match revenue capture and workload rate tracking for VA. **Upcoming Milestones** 10/1/20: NEXT AP SITE GO-5/1/20 GO LIVE 5/30/20: SITE-BY-SITE 9/14/20: REPORT ON 9/15/20: ITSC 7/1/20: BEGIN W/NCRAP **ROLLOUT SCHEDULE** LIVES (WOMACK, KEESLER & **RECOMMENDATION ON DATA** NCR AP PILOT RESULTS PREPPING NEXT AP **PILOT** PROVIDED TO HEC SHARING SOLUTION TO JEC **EGLIN MTFS)** FOR HEC **ROLLOUT SITES OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies Clinical Integration: CI has trained VAMC Community Care staff on standard VA/DoD care coordination processes. DO/POM (b)(5) RO Staff: (b)(5) OCC BOA/Finance and VAMC Fiscal Staff: (b)(5) (b)(5) VHA VSSC (b)(5) DoD DHA: (b)(5)

VA DoD Revenue Standardization

Development

Project Description Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Key Performance Indicators (KPI)** the VHA DoD support Reimbursement pilots with a webbased tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment batch processing, DECISION: No ELC decisions needed at this time. invoice Methodology. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 5/15/2020 SEM 8/31/20 VSSC VALIDATION 9/1/20 SEM **2019 SEM BUSINESS** 10/01/20 FUNCTIONAL SHAREPOINT DEVELOPMENT SHAREPOINT TOOL ANALYST TASKS COMPLETE OF DOD DATA COMPLETE **USER TESTING** COMPLETE **TESTING OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

Community Care Integrated Billing and Accounts Receivable (CC IB/AR) - Phase 2

Project Phase – Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

 The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

· No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1) AR PATCH NATIONALLY **RELEASED**
- **NATIONALLY RELEASED**
- 06/02/20 IB 675 **a** 08/13/20 IB 677 NATIONALLY **RELEASED**
- 09/10/20 IB PATCH **678 NATIONALLY RELEASED**
- 09/30/20 AR PATCH **361 NATIONALLY** RELEASING
- AR PATCH 372 & IB PATCH 682 ARE IN DEVELOPMENT AND NATIONAL RELEASE IS TARGETED FOR 10/19/20

Upcoming Milestones

12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

· No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Downstream Dependency – None at this time.

(b)(5)



CPAC Document Scanning

Project Phase – Close Out

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion		

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS
- 06/15/20 CPAC VIRTUAL TRAINING BEGINS
- 07/09/20 TRAINING SESSION FOR WFD AND POLICY ANALYST COMPLETE
- 07/24/20 MAIL
 ROOM CLERK
 TRAINING COMPLETE
- 08/27/20 PRODUCTION SCANS COMPLETE

Office of Information and Technology / Data Dependencies

 08/28/20 PROJECT COMPLETE

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.



Appendix

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Decision	Ops Notified	CCSC Presentation Date	Ops PM Resource Assigned
ePrescribing	6/19	6/23	Approved	6/29	9/14	8/24 (b)(6)
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	7/20 (b)(6)
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	7/21
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A
Community Care Claims SSN Reduction	7/21	8/11	Approved	8/13	TBD	TBD
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	TBD	TBD	TBD	TBD	TBD
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD
Integrated Product Environment	9/14	9/22	TBD	TBD	TBD	TBD





EHRM

Office of Community Care (OCC)/Cerner Integration

Implement CCN

Community Care Claims Reimbursement (CCRS)

Community Care Network (CCN)

Enterprise Program Reporting System (EPRS)

Indian/Tribal Health Coordination (ITHC)

Innovate Business Model

Advanced Medical Cost Management System (AMCMS)

Community Care Referral and Authorization System (CCR&A)

One Consult 2.0

Provider Profile Management System (PPMS)

OCC Data Governance

OCC Continuity of Operations Plan (COOP)

MISSION Support

Community Care Integrated Billing and Accounts Receivable (CC IB/AR) Phase 2

CPAC Document Scanning

Enrollment System Community Care

Urgent Care Integrated Project Team

Other

Retail Pharmacy Influenza Program

VA/DoD Advanced Payment and Referral Standardization

VA/DoD Revenue Standardization





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"LINCLASSIFIED"

12/12/2022 235 of 532

Community Care Business Program Management Review (PMR) #1

10/27/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

- Hot Topics
 - Payer Electronic Data Interchange (EDI) Prioritization
- OCC Priority Project Review
 - VA/DoD Referral Standardization
 - Community Care Reimbursement System (CCRS)
 - Enterprise Program Reporting System (EPRS)
 - Urgent Care IPT
- Appendix
 - Project Review
 - Project Idea Evaluation Updates
 - Veteran Credit Updates





Hot Topic: Payer Electronic Data Interchange (EDI) Prioritization

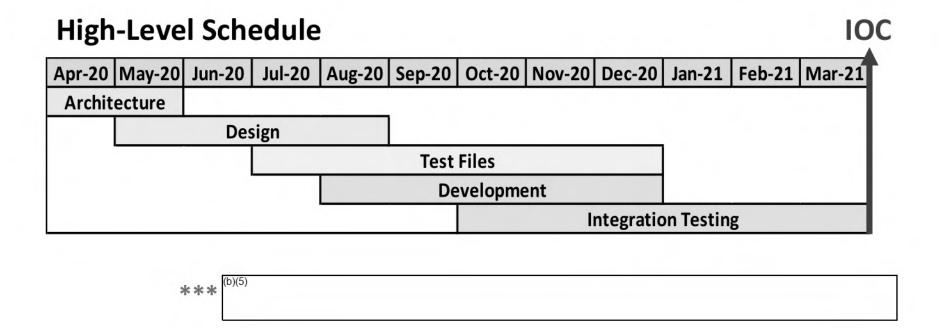




Current Payer EDI Priorities

Claims XM Development and Implementation

- Three Product Teams; 95% dedicated to Claims XM.
- Estimated completion on or about 1 April 21.
- Key Stakeholders Delivery Operations (Veteran Family Member Program).







Remaining Payer EDI Priorities/Stakeholders

- EPRS (Parser)
 - 837 work complete / 835 work remains.
 - Key Stakeholders Provider Relations and Services, Chief Informatics Office.
- CAVE
 - O (b)(5)
 - Key Stakeholders Clinical Integration, Delivery Operations, Chief Informatics Office.
- ARS
 - (b)(5)
 - Key Stakeholders Delivery Operations, both POM and VFMP Staff.
- Community Care Billing SSN Reduction
 - O (b)(5)
 - Key Stakeholders Delivery Operations, Revenue, HSRM team.

Prioritization Decision

Backlog Prioritization (1-4)

____EPRS (Parser)

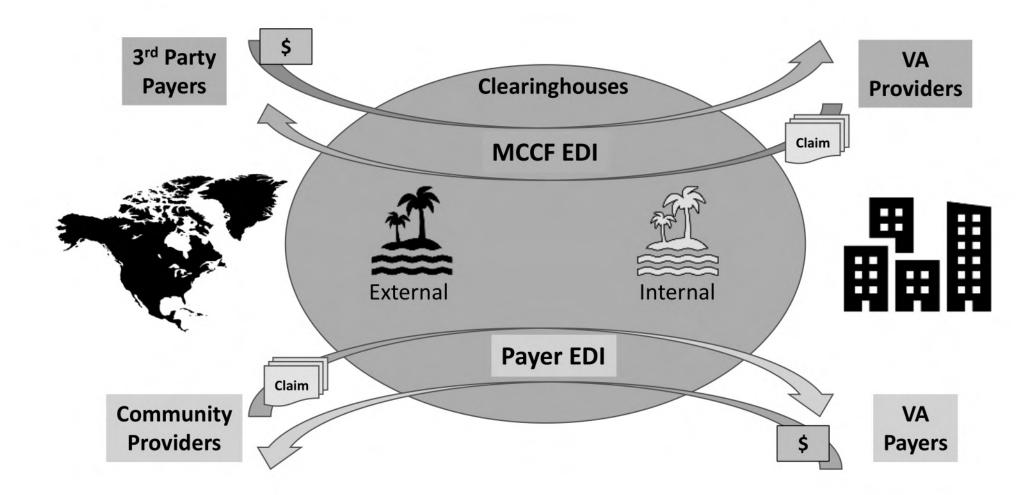
____CAVE

___ARS

Community Care Billing SSN Reduction



EDI Flow







Payer EDI Recent Highlights

- Oracle Upgrade (May 2020)
 - Updated Servers, Operating System, and Application Software
 - Zero EDI system failures since upgrade
- Backlog Elimination (August 2020)
 - Eliminated 1.5M claim backlog in 8 weeks
 - Increased capability to support 10x average daily rate

- Fee Payment Processing System (FPPS) MVP (August 2020)
 - Upgrade required to meet OIT security requirements
 - Limited capability restored while FBCS is retired





Priority Project Review





VA DoD Referral Standardization

Phased Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description	Key Performand
(b)(5)	Creation of processes and procedures which allow for necessary data sharing to support quarterly advanced payments from VA to DoD for care provided to eligible Veterans, along with revenue capture and workload tracking for VA.	 35,846 VA/DoD FY20; 6,665 cur 97% of open VA scheduled statu Live Pilot Result Biloxi/Pe automate match rate NCR FY2 match rate
Accomplishments	Upcoming Milestones	
5/1/20 GO LIVE 9/14/20: REPORT ON 10/8/20 : CARE COORDINATION W/ NCR AP PILOT RESULTS SOP UPDATE RELEASE (HSRM USE)	● 11/18/20: HEC	

ce Indicators (KPI)

- consults entered since rently open
- /DoD consults are in
- - ensacola FY20: 95% ted consult/claim clean ate
 - 20: 70% consult/claim clean ate

- SITES GO-LIVE
- **WORKLIST ROLLOUT**
- 20: NEXT AP SITE GO-LIVES MACK, KEESLER/ EGLIN/TYNDALL MTFS)

OCC Business Dependencies

Clinical Integration: CI has trained VAMC Community Care staff on standard VA/DoD care coordination processes. Recently trained field on HSRM use for DoD

& TRAINING

DO/POM:(b)(5)

PILOT

- RO Staff: (b)(5)
- OCC BOA/Finance and VAMC Fiscal Staff: (b)(5)

(b)(5)

VHA VSSC^{(b)(5)}

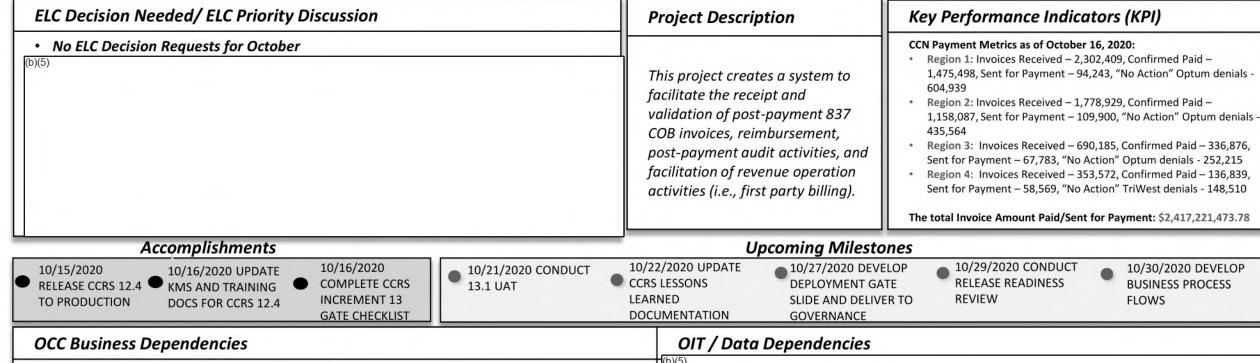
DoD DHA (b)(5)

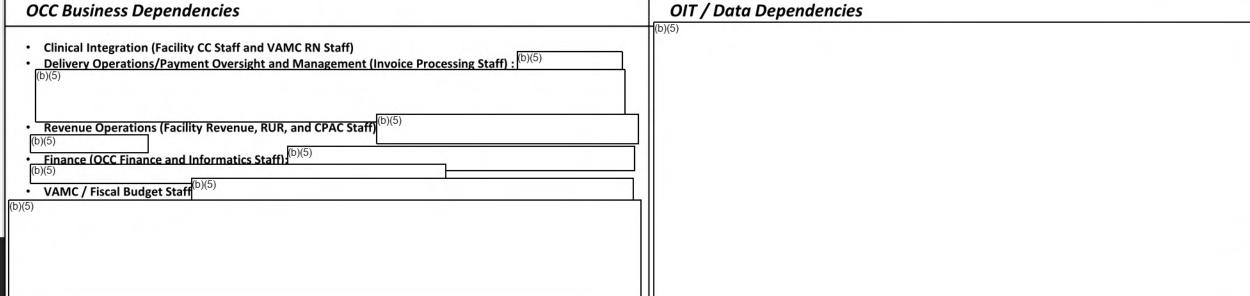
FOR HEC

Office of Information and Technology (OIT) / Data Dependencies

Community Care Reimbursement System (CCRS)

National Deployment

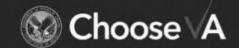




Enterprise Program Reporting System (EPRS)

Development

00005814	65 "UNCLASSIFIED" 12/12/2022 246 of 532		
For ELC Awareness	Project Description	Key Performance Indicators (KPI)	
	EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.	 Quality Check UI: 42/80 Users (Δ = +1) CCN Accreditation Waivers UI: 31/30 Users (No change) CCN Complaints & Grievances UI: 29/54 Users (No change) CCN Congressional Inquiries UI: 31/42 Users (No change) CCN Corrective Action Plans (CAPs) UI: 29/30 Users (Δ = +1) CCN Network Adequacy Deviations UI: 28/51 Users (No change) 	
Accomplishments		Upcoming Milestones	
08/20/2020 EPRS 08/28/2020 EPRS Release 09/30/2020: EPRS Pre- Release 6.0 D: EDI 837 7.0 D: EPRS Data Prod R10.0: Complaints Data Layer Rework Integration (eCAMs) UI & Quality Check	10/14/2020: EPRS SQA R10.1: 10/29/2020: EPR Congressional Inquiries & R10.0: Complain N.A. Deviations Quality Check		
OCC Business Dependencies	OIT / Data Dependencies		
Project Dependencies • Community Care Contract Administration/Support (CCCA/S) (b)(5) • Community Care Network Management (NM) (b)(5) (b)(5)	(b)(5)		





Urgent Care IPT

National Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

Implementation Updates:

- 1. R4 Webinar held on 9/23 and 9/24, with over 500 participants at each session.
- 2. CCN Urgent Care for Region 4 went live on 9/30.
- 3. Region 4 Office Hours and Daily sync up held on go-live week to support implementation.

Project Description

Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.

Upcoming Milestones

Key Performance Indicators (KPI)

- Average Urgent Care authorizations:
 - Region 1: 1,400 per week
 - Region 2: 600 per week
 - Region 3: 1,350 per week
 - Region 4: 900 per week
- Average of 350 Urgent Care calls to VA Call Center per day

Accomplishments

09/29/20 CCN URGENT CARE REGION 4 KICK OFF 09/30/2020 CCN
 URGENT CARE
 REGION 4 GO-LIVE

TBD: REGION 5 UC

OCC Business Dependencies

· No Business Dependencies identified.

(b)(5)

Office of Information Technology / Data Dependencies

(p)(g

Appendix

PMR Project Slides





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

- Cerner Referral Manager **Functional Testing:** 8/17/2020 - 8/28/2020
- **Exploratory Testing:** 8/24/2020 - 8/29/2020
- **Super User Training:** 8/10/2020-8/29/2020
- ORA: 9/7/2020
- End User Training (Spokane): 9/28/2020
- **HSRM SIU Interface Go-Live: End of September**
- **IOC Go Live:** 10/24/2020

Upcoming Milestones

OCC Business I	Depena	lencies
----------------	--------	---------

Highlight OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5)

-Payment Operations Management

-Revenue Operations (Facility Revenue, RUR, and CPAC Staff)

-Women's Health (IVF and Infertility)

OIT / Data Dependencies





Community Care Network

Post Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

• **DECISION:** No ELC decisions needed at this time.

Project Description

Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

- CCN is fully deployed across 49 states within Regions 1-
- As of September 30, 2020, Urgent Care is live across CCN Regions 1-4.
- · CCN Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1.

Accomplishments

06/08/20 R4P1 SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

(b)(5)

GO-LIVE

● 06/16/20 R3P2 ● 07/21/20 R4P2 ● 08/11/20 R4P3 ● 08/25/20 R4P4 SHCD ● 09/01/20 R2 & R3 URGENT ● 09/30/20 R4 URGENT CARE CUTOVER FROM PC3

CARE CUTOVER FROM PC3

 04/01/21 R5 SHCD **GO-LIVE**

Upcoming Milestones

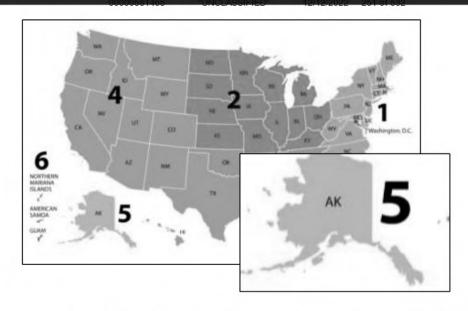
OCC Business Dependencies

Post Deployment of CCN

- Network Management (b)(5)
- Clinical Integration (b)(5)
- Contract Administration (b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Region 5 Announcement

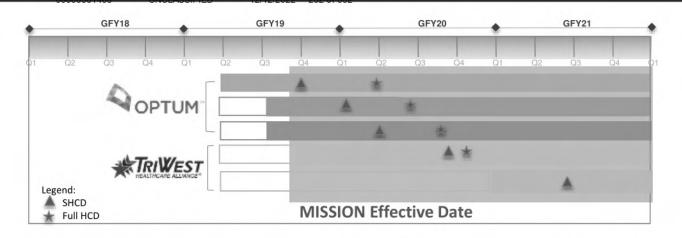


- Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1/2020.
- The Post Award Meeting is scheduled for 10/19/2020.
- The Kickoff Meeting is scheduled for 11/4/2020.
- Region 5 has a Veteran population of more than 68,000 with more than 33,000 Veterans enrolled in healthcare.





CCN Contract Award and Implementation Update



CCN Regions



- Awarded 12/28/18, start of health care delivery (SHCD) 6/26/19, full deployment by 12/28/19
- Awarded 12/28/18, protest filed 1/22/19, protest resolved 5/2/19, performance resumed 5/6/19, SHCD 10/7/19, full deployment by 4/9/20
- Awarded 12/28/18, protest resolved 5/3/19, appeal with the US Court of Federal Claims, stay of performance to Optum lifted on 7/22; SHCD on 10/7/19, full HCD achieved by 6/22/20
- Pre-Award protest dismissed; award made 8/6/19, SHCD 6/8/20, full HCD achieved 8/31/2020
- Awarded 10/1, Post Award Meeting 10/19, Kick-off Meeting 11/4, SHCD March 2021, full HCD by 4/1/21
- R6 Pre-Solicitation



Indian-Tribal Health Coordination

National Deployment

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ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)
No ELC decisions needed. Accomplishments: • Agreement modification was completed. Among the items it expands reimbursement to include telehealth and COVID related services by third party partners to IHS/THP sites (AKA PRC). • CC approach – Draft final pan completed and will be sent for wider VA concurrence week of 10/21/20. • Program office presented to the BIMS on 9/11. • The annual tribal retraining held week of 9/15. • Internal controls SOP completed	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted
Accomplishments		Upcoming Milestones
PHARMACY MOD	09/23/2020 IHS/THP O9/23/2020 IHS/THP VIRTUAL RETRAINING	
OCC Business Dependencies	OIT / Data Dependencies	
(b)(5)	N/A Risk: Mitigation:	





Executive Leadership Committee (ELC) Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- 9/28-10/5 STALE REFERRAL LOGIC **UAT ROUND 4**
- 10/8 UAT TEST **EVALUATION** REPORT APPROVED
- 10/9 VISN 8 **KICKOFF MEETING**
- 10/13 NATIONAL **DEPLOYMENT GATE REVIEW APPROVAL**
- 10/19 NATIONAL **DEPLOYMENT OF AMCMS MODEL**
- 10/19-10/26 AMCMS 10/21 NETWORK VIRTUAL WEBINAR **TRAININGS**

Upcoming Milestones

- MANAGEMENT REQUIREMENTS GATHERING
- 10/27 LESSONS **LEARNED** UPDATE

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

ELC Decision Needed/ ELC Priority Discussion N/A

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- 3,210,309: Total Referrals FY 2020 (Through 10/9/2020)
- 185,645: Total Referrals FY 2019
- 18,229: Total number of VA user accounts provisioned
- 18,320: Number of Community Providers provisioned
- 6,569: Number of unique Community Provider locations
- 148: Number of VAMC sites actively using HSRM
- 5,272: Support Ticket Count for September
- Top 3 Support Ticket Categories for September:
 - 1. Provisioning/needs access-VAMC
 - 2. Provisioning/needs access-community provider
 - 3. Training/knowledge issue

Accomplishments

09/26/2020 CERNER SCHEDULING MESSAGE GO-LIVE 10/19/2020 RELEASE 11 UAT START

- 10/24/2020 CERNER SPOKANE GO-LIVE
- 10/28/2020 CAEC 1.5 GO/NO GO PRESENTATION
- NOVEMBER 2020
 CAEC 1.5 ND RELEASE

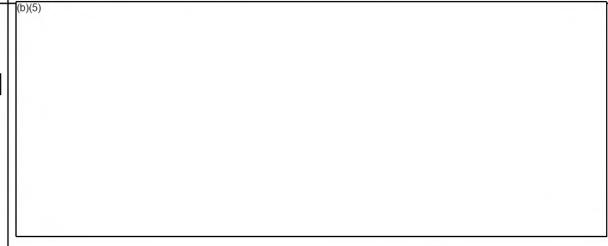
Upcoming Milestones

- 11/13/2020 RELEASE 11 GO/NO GO PRESENTATION
- 11/23/2020 RELEASE 11 ND

OCC Business Dependencies

* Clinical Integration (CI Field Support Director & Assistants) (b)(5) * Delivery Operations/POM: (b)(5) * Einance IOCC Finance and Informatics Staff): (b)(5) * Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5) (b)(5)

OIT / Data Dependencies



Overview of Release 11.0 Enhancements

 Release 11 will contain several general HSRM enhancements in addition to HL7, MVI, Task Management, and Offline Referral Form enhancements. All of which will increase HSRM usability and efficiency.

HL7 Messaging

- Add Appointment Scheduled Method to HL7 SIU Outbound
- Add Treating Specialty to HL7 SIU Message
- SIU Message to Cerner Contain Scheduling and Cancellation Notes

Task Management Enhancements

Create new manual task- ""Message VA to VA""

MVI

- MVI Audit Trail: Display Veteran Data changes from MVI
 - MVI Integration: Receive Veteran Demographic updates from MVI

Reporting

- Add Level of Care to the CI Tasking Reports
 - Community Wait Times Report Enhancements, and adds "Recorded Date"

Community Provider Provisioning Enhancements

- The ability to provision community providers by NPIs.
- Referral lists would only display referrals where the assigned care provider NPI matches.

Offline Referral Form

- Prevent users from being able to generate an Offline Referral Form if there is no provider assigned
- Message displayed instructing the user to add a provider

Veteran Eligibility Status workflow

- Eligible status Referral workflow as normal
- Non-Eligible status Program authority locked and ability to refresh eligibility data

Additional HSRM Enhancements

- FY22-FY23 Bene Travel Program Authority
- Limit ability to change Affiliation for CCN1-6 Users
- Make Provider a required field unless there is an optional task
- Add Appointment Date Timestamp to Data Feed
- Enable/Disable interfaces via task
- Modify logic to trigger downstream update to a referral; when any value changes on the Referral Detail Page or Appointments are recorded
- Notify CCRS of Affiliation Changes
- Refactor Task API for General CCRA Use
- Improve Error log handling by blocking any outgoing messages where providers do not have an email listed on their provider profile
- Allocate Revenue tasks for further review- Modifiable Due Dates (Tickle Feature)
- Pre-cert Auto Task Due Date Update
- Remove taxonomy code from PPMS Provider Search results, display only the description
- Add date range to audit trail filters



Overview of Release 10.0 Enhancements

 Release 10 contains general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- **Remove all statuses except Approved** from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





One Consult 2.0

Development

Executive Leadership Committee (ELC) Decision Needed /	Project Description Key Performance Indicators (KPI)
Priority Discussion DECISION: No decision requested at this time (b)(5)	One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies
Accomplishments	Upcoming Milestones
CTB 1.9.0077 CTB 1.9.0077 DST MAPPING COMPLETED CTB V2.0 SPRIN REQUIREMENTS 1 DEVELOPMENT COMPLETED: UPDATES GATHERING AND COMPLETED: 10/05/2020 10/13/2020 WENT LIVE: WIREFRAMES: 10/9/2020 10/9/2020	
OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	(b)(5)



ELC Decision Needed/ ELC Priority Discussion	Project Description
• Priority Discussion: (b)(5)	Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information.
Accomplishments	Upcoming Milestones
PPMS 8.1 VA.GOV HOTFIX 8.1.1.1 VA CPL PPMS 9.0 VA.GOV PPMS 9.0 9/9 GO-LIVE SPRINT 25 RELEASE NATIONAL NATIONAL SPRINT 27 GO-LIVE PIE	2/20/2020 − ● 8/25/2020 ● 09/8/2020 ● 09/15/20 ● 09/25/20 ● 10/27/20 ● 11/5/20 9/2020 VA.GOV VA.GOV PPMS 9.1 PPMS 9.1 PPMS 10 PPMS 1
OCC Business Dependencies	OIT / Data Dependencies
Clinical Integration	(b)(5)

(b)(5)

Network ManagementCommunity Care Network

VAMC/CPO & Pharmacy -

Delivery OperationsRevenue Operations

(b)(5)

ELC Decision Needed/ ELC Priority Discussion

Decision: None

Priority Discussion: None

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- Frequency data reported as accessible timely, complete, accurate and reliable
- · Percent of compliance with policies
- Percent of systems achieving established performance metrics
- Percent of systems with complete documentation

Accomplishments

10/14/2020 APPROVED TECH & DATA GOVERNANCE ROAD MAP 10/16/2020
INITIATED E-REPOS DATA
USABILITY ANALYSIS

10/21/2020 APPROVED STANDARD SYSTEMS ARTIFACTS

(b)(5)

DRAFT DATA GOVERNANCE COMMUNICATION PLAN

Upcoming Milestones

11/18/2020
 CHANGE MANAGEMENT
 SPONSOR PLAN

 11/25/2020
 NT DRAFT DATA GOVERNANCE STRUCTURE

OCC Business Dependencies

• VA Data Governance: (b)(5)

• **OIT:**(b)(5)

(b)(5)

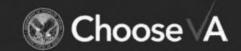
OIT / Data Dependencies

- 1	

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Need	ded / Priority Discussion	Project Description	Key Performance Indicators (KPI)
DECISION: NO ELC decision currently		The project scope is to develop a standardized Continuity of Operations Plan (COOP) Appendix for all mission critical OCC systems and functions. Also, a standardized process for scheduled and unscheduled system outage with an After-Action Report.	 Metric 1: Process for unscheduled outage notification Metric 2: COOPs developed Metric 3: Repository complete Metric 4: KMS and SOPs updated
Accomplishments		Upcoming Milestones	
08/04/2020 – APPROVED FOR GO AT CCSC 08/13/2020 – KICK-OFF PROJECT MEETING	DIRECTORATES		0/20- COOP ELOPMENT
OCC Business Dependencies - Lite		Office of Information and Techno	ology (OIT) / Data Dependencies - Lite
Highlight OCC Business Dependencies: (b)(5) (b)(5)		• Highlight OIT/Data Dependencies: (b)(5) (b)(5)	





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) - Phase 2

National Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

 The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

· No specific KPI's were identified for this phase of the project.

Upcoming Milestones

Accomplishments

- 05/18/20 (2) IB & (1) AR PATCH NATIONALLY RELEASED
 - 06/02/20 IB 675 **NATIONALLY RELEASED**
- **NATIONALLY RELEASED**
- NATIONALLY RELEASED
- **NATIONALLY** RELEASED
- 08/13/20 IB 677 09/10/20 IB 678 09/30/20 AR 361 10/19/20 IB 682 NATIONALLY **RELEASED**
- AR 372 & IB 689 ARE NATIONALLY 12/04/20 RELEASING ON 11/09 & 11/04
 - CONTRACT COMPLETED

OCC Business Dependencies

· No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Downstream Dependency - None at this time.

(b)(5)



Enrollment System Community Care (ESCC)

Development

Executive Leadership Committee (ELC)
Decision Needed / Priority Discussion

DECISION:

No ELC decisions needed or priority discussion topics at this time.

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

09 09/2020 ES RELEASE TO EXPAND
STATIC ELIGIBILITY TO NOT ENROLLED
COVERED VETERANS (INCLUDE COPY
OF RECORDS IN ELIGIBILITY FILE IS
TURNED OFF UNTIL CONTRACT MOD
IS COMPLETED)

09/2020 SUCCESSFUL
 MEETING WITH TW
 AND OPTUM TO
 DISCUSS SUMMARY
 OF CHANGES TO
 ELIGIBILITY FILE

●10/2020 CC ELIGIBILITY
VCE MODIFICATION SENT
TO CCN CONTRACTORS.
AWAITING FINAL
APPROVAL

**11/2020 TURN ON ES/VISTA
FUNCTIONALITY TO AUTOMATE
COLLATERAL OF VETERAN ELIGIBILITY
(INCLUDE COPY OF RECORDS IN
ELIGIBILITY FILE IS TURNED OFF UNTIL
CONTRACT MOD IS COMPLETED)

Upcoming Milestones

OCC Business Dependencies

- Highlight OCC Business Dependencies:
 Clinical Integration (Business Owners)
- <u>System Engine</u>ering Management (SEM) -
- Business Intelligence Service Line (BISL) (b)(5)
- Community Care Contractor (CCN) (b)(5)
- VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO)

Issue:

Mitigation:

Office o	f Information and	Technology (OIT)	/ Data Dependencies
(b)(5)			

Issue
Mitigation:





Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No new decisions needed from Revenue Operations regarding back end process at this time.

Project Description

the VHA DoD support Reimbursement pilots with a webbased tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly batch processing, invoice streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports.

Key Performance Indicators (KPI)

Align with the VA/DoD Advanced Payment Methodology.

Accomplishments

2019 SEM BUSINESS ANALYST TASKS COMPLETE

5/15/2020 SEM SHAREPOINT DEVELOPMENT COMPLETE

8/31/20 VSSC VALIDATION OF DOD DATA COMPLETE

Upcoming Milestones

10/31 VSSC CONTINUATION OF VALIDATING AND CODING OF DOD DATA

11/1 DOD APPROVED **EXPANSION** OUTCOME/DECISION

OCC Business Dependencies

- There are no dependencies to other OCC Directorates.
- Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

Office of Information and Technology (OIT) / Data Dependencies

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description	Key Performance Indicators (KPI)
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods	 Metric 1: over 100,000 Veteran's vaccinated Metric 2:Reimburse Walgreens 99% accuracy
<u> Accomplishments</u>	Upcoming Milestones	
8/11/2020 FINAL FILE/INVOICE SENT WALGREENS	10/30/2020 CLOSE OUT RETAIL PHARMACY	•
OCC Business Dependencies	Office of Information and Techn	ology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(5)		

RISK:

RISK:

Mitigation:



Appendix

Project Idea Evaluation Updates





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Decision	Ops Notified	CCSC Presentation Date	CCSC Go / No Go	Ops PM Resource Assigned
Integrated Product Environment (IPE)	9/14	9/22	Approved	9/24	10/20	Go	10/9 (b)(6)
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD	Resource not available until Nov. 1st
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	On Hold	TBD	TBD	TBD	TBD	TBD
Community Care Billing SSN Reduction	7/21	8/11	Approved	8/13	10/20	Go	10/2
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A	N/A
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	Go	7/21
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	Go	7/20 (b)(6)
ePrescribing	6/19	6/23	Approved	6/29	9/15	Go	8/24 (b)(6)





Veteran Credit Database

Deferred Project

veterari ereart batabase		
Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description	Key Performance Indicators (KPI)
• DECISION: No current ELC decision required at this time. • BACKGROUND: • Enactment of Law on 5/24/2018 – Implementation Deadline 5/24/2019 5)	To provide oversight for ongoing policy and IT funding efforts in conjunction with Sec. 302 Protecting Veterans Credit Protection Act of 2018 including efforts to obtain legislative relief.	 Metric 1: The electronic VA claims are paid within 30 days and paper claims are paid within 45 days. Metric 2: Ensures Veteran cost share and deductibles are adjudicated accurately. Metric 3: 100% of information furnished to credit reporting agencies will be verified Veteran responsible debt. Metric 4: Decrease in Appeals and Calls for improperly reported debt.
Accomplishments	Upcoming N	Milestones
VIPR V18-00312-000 for automated solution submitted. Status as of 1/08/2020 –Unfunded Request/Pending Resources • JANUARY 2021	L-LEGISLATIVE RELIEF REQUEST FO	R FY23 LEGISLATIVE CYCLE WILL BE SUBMITTED.
OCC Business Dependencies	Office of Information a	nd Technology (OIT) / Data Dependencies
(5)	(b)(5)	

00000581465

"LINCLASSIFIED"

12/12/2022 269 of 532

Community Care Business Program Management Review (PMR) #1

11/24/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

- Project Idea Evaluation (PIE)
 - VA Provider CCN Retail Pharmacy Capability
 - Referral Based Obligations
- OCC Priority Project Review
 - VA/DoD Advanced Payment and Referral Standardization
 - Provider Profile Management System (PPMS)
 - Community Care Reimbursement System (CCRS)
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





Project Idea Evaluation (PIE)

- VA Provider CCN Retail Pharmacy Capability
 - Referral Based Obligations





VA Provider CCN Retail Pharmacy Capability

		24107-241-24-201-101-2				ı	
Originator & Date: 11/10/2020		Scope: OCC to support the operation বাধি পিছ পার্তা fieation (Initially in Region 4) to allow Veterans who need an immediately needed (urgent/emergent) prescriptions prescribed by a VA provider to be filled at a CCN retail community pharmacy when access to a VA pharmacy is not possible for Regions 1, 2, 3 and 4.					
	40			Additional Impact			
Business Ops & Admin:	(b)(5)			Policy Impact:	No Additional Impacts identified	•	
Delivery Ops:				Funding Impact / Status:	(b)(5)		
Revenue Ops:				Impact on Other OCC Projects:			
Clinical & Network Mgmt:							
OCC Leadership (Includes IDA and BIC):				Impact if Project Idea Not Approved:			
Community Care Network (Contract Mod):	has been provid	Iready in place for Region 4 ded for implementation date n progress for Regions 1-3.				_	
Recommended OCC	Strategic I	Priority Alignment	Recommen	nded Project Designation	n Becommended Business Owner	ĺ	

Recommended OCC Strategic Priority Alignment	Recommended Project Designation	Recommended Business Owner
Implement Community Care Network (CCN) Improve Customer Service	OCC Directorate Managed	(b)(6)

Discussion:





Referral Based Obligations

Originator & Date: (b)(6) 11/17/2	020	Scope Definition: OCC nee Community Care programs	eds to assess a	ind establish an interim	and long	-term process fo	r recording oblig	ations for
Impact				Additional Impact				
Business Ops & Admin:	(b)(5)			Policy Impact:	(b)(5)			
Delivery Ops:	CCRS,	FMS, eCAMS, PIT		Funding Impact / Status:				
Revenue Ops:	No impact identified at this time.			Impact on Other OCC Projects:				
Clinical & Network Mgmt:	(b)(5)							
OCC Leadership (Includes IDA and BIC):				Impact if Project Idea Not Approved:				
Community Care Network (Contract Mod):								
Recommended OC	C Strat	egic Priority Alignment	Recomme	nded Project Desig	nation	Recommend	led Business	Owner
Improve Claims Processing & Innovate Business Model		OCC Managed			(b)(6)			
Discussion:								

OCC Policy, OCC Finance, and Portfolio Managers Vote Count: All Yes votes received (no dissents).

Priority Project Review

Project Status Slides





ELC Decision Needed/Priority Discussion					Project Description	on		Key Performan	nce Indicator
(b)(5)			for necess advanced provided t	ary da paymo o eligi	ta sharing to supents from VA to	DoD for care ong with revenue		 40,009 VA/DoD const FY20 6,160 open VA/DOD Live Pilot Results for validation: Biloxi VAMC/Pens NCR Region: 74% 	consults. AP auto claims sacola NH: 96%
Accomp	olishments:					Milestones:			
2020-10-05: SOP Update Release (VA HSRM use)	2020-10-08: Updated Care Coordination Training	Appro	11-27: HEC oval of Next AP go-live	● E>	020-12-18: CarePoint sceptions Claims Forklist Rollout	2020-12-23: VA/DoD Leadership Meeting: FY21 Q2 Rollouts	•	2021-01-01: AP FY21 Q2 Rollouts	2021-04-01: AP FY21 Q Rollouts
(h)/E)	OCC Business Dependencies		1			Office of Information and	d Te	chnologies/Data Depend	encies
(b)(5) • • • • Risks					(b)(5)				



Risk:



Provider Profile Management System (PPMS)

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator
(b)(5)	Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information.	CCN Network growth Provider processing capacity - backlog monitoring
Accomplishments:	Milestones:	
2020-11-10: PIE - UAT 2020-11-13: PIE - Go-Live 2020-12-07: PPMS 10.1 WRJ UAT	2020-12-08: PPMS 10.1 2020-12-15: F Go/No-Go Priority Sites	PIE Restart 2020-12-17: PPMS 10.1 Go-Live
OCC Business Dependencies	Office of Information and Techr	nologies/Data Dependencies
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy (b)(5) Risks 	(b)(5) Issues No Issues Found	





ELC Decision Needed/Priority Discussion

For awareness:

CCRS implemented a temporary bypass the PPMS check to mitigate payments being denied. CCRS is establishing a grace period (72 hrs) for ER services due to the high denial volume based on misaligned validity dates on the referral.

Project Description

CCRS: A system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, postpayment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicator

CCN Payment Metrics as of November 20, 2020: Region 1: Invoices Received - 2,899,265, Confirmed Paid -1,967,817, Sent for Payment - 84,184, "No Action" Optum denials - 716.105

Region 2: Invoices Received - 2,449,478, Confirmed Paid -1,729,199, Sent for Payment - 100,245, "No Action" Optum denials - 540.310

Region 3: Invoices Received - 1,173,375, Confirmed Paid -717,423, Sent for Payment – 75,102, "No Action" Optum denials - 353.692

Region 4: Invoices Received - 802,202, Confirmed Paid -474,834, Sent for Payment - 95,770, "No Action" TriWest denials - 203,698

The total Invoice Amount Paid/Sent for Payment: \$3,465,670,309,41

Accomplishments:

2020-10-15: CCRS Release 12.4

2020-11-05: CCRS

Release 13.1

2020-12-03: CCRS Release 13.2

2020-12-17: CCRS Release 13.3

Milestones:

2021-01-07: CCRS Release

13.4

OCC Business Dependencies

CCRA, FMS, PPMS, PIT, and MVI

Risks

(b)(5)

Office of Information and Technologies/Data Dependencies

CCRA, SEOC, PPMS, MVI, EDI, DAS, and CCN Contractors

Issues



Appendix

Project Status Slides





ELC Decision Needed/Priority Discussion

No ELC decisions needed or priority discussion topics at this time

Project Description

This project establishes a Data Governance Program to ensure reliable, dependable, consistent, and well documented data. It includes creating a structure, adopting standards and policies that drive how data are used and maintained to ensure data quality.

Key Performance Indicator

- Number of data policies, practices, and standards established
- Percent of data issues resolved
- Number of completed data initiatives in data governance project portfolio
- Percent of data initiatives that meet or exceed established initiative targets

Accomplishments:

2020-10-21: Approved standard Systems Artifacts

2020-11-09: Confirmed e-repos data usability

2020-11-09: Draft **Data Governance** Communication Plan 2020-11-25: Draft

Milestones:

Data Governance Structure

2020-11-30: Change Management Sponsor Plan

OCC Business Dependencies

(b)(5)

Office of Information and Technologies/Data Dependencies

(b)(5)

-- No Issues Found --





ELC Decision Needed/ ELC Priority Discussion **Project Description** Manage all necessary integrations to No ELC decisions needed or priority discussion topics at this time. appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

- (Spokane) IOC Go Live: 10/24/2020
- Mann-GrandStaff VAMC

 Completed first iteration of lessons learned with OCM: 11/05/2020
- **HSRM Release 11** (interface updates for HSRM, may not be in effect until Cerner CS2): 11/24/2020
- Chalmers P. Wylie VA ACC (Columbus) Go Live: Spring 2021

Upcoming Milestones

- Jonathan M. Wainwright Memorial VAMC (Walla Walla) Go Live: Spring 2021
- White City VAMC Go Live: Spring 2021

OCC Business Dependencies

-Clinical Integration and Mann Grandstaff Facility CC Staff (b)(5)

OI I	/	Data	Depen	iaencies	



ELC Decision Needed/Priority Discussion

No ELC decision was needed or priority discussion topics during this time period. **Project Description**

Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicator

- CCN is fully deployed across 49 states within Regions 1-4.
- Regions 1-3 all reported more than 92% of referrals through CCN, remaining consistent with prior weeks.
- Region 4 continues to see a positive trend in CCN utilization (+87% last week in October).
- As of September 30, 2020, Urgent Care is live across CCN Regions 1-4.
- CCN Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1.

Accomplishments:

2020-09-01: R2 & R3 URGENT CARE CUTOVER CARE CUTOVER FROM FROM PC3

2020-09-30: R4 URGENT

2021-04-01: R5 HCD

OCC Business Dependencies

Office of	Information	and Tec	hnologi	es/Data [Depende	ncie

(b)(5)

Issues

-- No Issues Found --

Milestones:





ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator	
(b)(5)	EPRS delivers a series of custom-built user interface (UI) screens and reporting system and data integrations for administering the CCN contract.	 Quality Check UI: 42/80 Users (Δ = +1) CCN Accreditation Waivers UI: 31/30 Users (No change) CCN Complaints & Grievances UI: 29/54 Users (No change) CCN Congressional Inquiries UI: 31/42 Users (No change) CCN Corrective Action Plans (CAPs) UI: 29/30 Users (Δ = +1) CCN Network Adequacy Deviations UI: 28/51 Users (No change) 	
Accomplishments:	Milestones:		
2020-08-28: 7.0 D: eCAMS – Technical Release 2020-09-01: 8.0 - Attach U v007/v003 2020-10-28: 10.0 - Complaints & R4 QC	2020-11-24: EPRS Prod 2020-11-25: EPRS Pre-Prod 2020-12-04: R12.0: R10.1: Congressional R10.2: Accreditation Waivers EPRS Technical Release: CCRS	2020-12-14: EPRS Pre-Prod 2020-12-23: Build 9.0 D: Technical Release: HSRM	
OCC Business Dependencies	Office of Information and	d Technologies/Data Dependencies	
(b)(5)	(b)(5)		



Risks -- No Risks Found --



No ELC decision is needed or priority discussion topics at this time

Project Description

Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts **Key Performance Indicator**

- 1. Advisory Board meetings
- 2. Care Coordination Plan developed
- 3. Annual re-trainings conducted

Accomplishments:

2020-09-23: Tribe and VA

staff retraining

2020-12-03: CC Plan Adopted

2020-12-03. CC Flair Adopted

OCC Business Dependencies

Office of Information and Technologies/Data Dependencies

Milestones:

- None-Upstream
- None-Downstream

Issues

-- No Issues Found --

2020-09-11: Brief BIMs



ELC Decision Needed/Priority Discussion Project Description Key Performance Indicator Upon deployment, key financial & utilization metrics Deploy AMCMS (SaaS) product that integrates tracked include, but are not limited to: Community Care management through data • UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid analytics to accurately forecast, monitor and No ELC decisions needed or priority discussion topics at per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED control Community Care's medical services. this time. Visits Resulting in Inpatient Admission, Expenditures VISN 8 Nat. Insurance File model. per CC Provider. • FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget. Accomplishments: Milestones: 2020-12-04: Payment 2020-12-04: Phase 3 2020-12-07: Phase 3 2020-11-30: VISN 8 2020-10-26: AMCMS Virtual 2020-11-12: Lessons Requirements Gathering User Guide Scenario Review Finish **ATO Finalization** Webinar Trainings Learned Completed Development **OCC Business Dependencies** Office of Information and Technologies/Data Dependencies (b)(5)-- No Business Dependencies Found --(b)(5)





ELC Decision Needed/Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicator

- 3,659,485: Total Referrals FY 2020 (through 10/31/2020)
- 185,601: Total Referral FY 2019
- 18,761: Total number of VA user accounts provisioned
- 22,923: Number of Community Provider user accounts provisioned
- 10,024: Number of unique Community Provider NPIs
- 148: Number of VAMC sites actively using HSRM
- 5,195: Support Ticket Count for October

Accomplishments:

2020-11-13: Release 11 Go/No Go Presentation

2020-11-17: CAEC 2.0
Go/No Go Presentation

2020-11-20: CAEC 2.0 National Deployment

2020-11-23: Release 11
National Deployment

Milestones:

2021-01-25: Release 12
National Deployment (IRIS)

(b)(5)

Risks
-- No Risks Found --

(b)(5)		
<u>Issues</u> No Issues Found		

Office of Information and Technologies/Data Dependencies





Project Description

<u>Issues</u>

-- No Issues Found --

ELC Decision Needed/Priority Discussion

Project Phase - National Deployment

Key Performance Indicator

No ELC decisions needed or priority discussion topics at this time.		enhancer Consult T (DST) and	sult 2.0 project comb ment and developme foolbox (CBT), Decision d SEOC Database und ment umbrella.	ent activities for on Support Tool			
Accompl	ishments:				Milestones:		
national Deployment of CTB Training And Comms For v2.0 production 1.9.0078 Na		2020-12-01: CTB 1.9.0078 National Rollout begins	2020-12-23: SEOC DB Cloud Migration	2021-01-15: CTB 2.0 Deployment	2021-04-01: CTB v2.0 available to field users		
	OCC Business Depend	dencies			Office of Informa	tion and Technologies/Da	ta Dependencies
(b)(5)					(b)(5)		



ELC Decisio	on Needed/Priority Discussion		Project Description	Key Performance Indicator				
No ELC decisions need time	ded or priority discussions at this	Continuity of	cope is to develop a standardized Operations Plan (COOP) Appendix n critical OCC systems and	Metric 1: Communication Strategy Metric 2: Phase I – Prepare Complete Metric 3: Phase II – Respond Complete Metric 4: Phase III – Recover Complete Metric 5: Development of Exercise, Maintenance, and Communication Plan Metric 6: COOP Appendixes complete for each Directorate				
Accor	mplishments:		Milestones:					
2020-08-04: CCSC Go/No-Go		2020-11-25: Developme Communication Strateg		are 2021-01-06: Phase II Respond Complete				
	OCC Business Dependencies		Office of Information and	d Technologies/Data Dependencies				
(b)(5)			(b)(5)					
Risks			lssues (b)(5)					
(b)(5)								





ELC Decision Needed/Priority Discussion								

No ELC decisions needed or priority discussion topics at this time.

Project Description

Develop an Integrated Product
Environment for isolated E2E and UAT

Key Performance Indicator

KPIs are currently being reviewed and finalized with Executive Owner and Business Sponsor

Accomplishments:

2020-11-19: Project Kickoff

- 2020-12-01: Stakeholder Assessment
- 2020-12-03: Data Dependencies

Office of Information and Technologies/Data Dependencies

(b)(5)

OCC Business Dependencies

• (b)(5)

Milestones:

Issues

-- No Issues Found --

Community Care Integrated Billing and Accounts Receivable (CC IB/AR) Phase 2

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion	UNCLASSIFIED	Project Description	Key Performance Indicator	
No ELC Decisions needed or priority discussion topic this time.	cs at VistA Integrat Receivable (A	ted Billing (IB) and Accounts	* No specific KPI's were identified for this phase of the project.	
Accomplishments:		Milestones:		
2020-11-04: IB 689 2020-11-12: AR 372 Nationally Released Nationally Released	Current Contract	2020-12-05: 3 2020-12-11: RFP Month Extension for new contract Contract Begins issued	2021-01-29: New 2021-03-05: 3 Contract Awarded Month Extension Contract Ends	
OCC Business Dependencies		Office of Information and	d Technologies/Data Dependencies	
 No business dependencies outside of Rev (RO) were identified for this phase of the Risks (b)(5) 		No data dependencies a Issues	at this time.	
		No project issues at this	time.	



Enrollment System Community Care

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator
No ELC decisions needed or priority discussion topics at this time.	The ESCC project provides automation for Community static eligibility determinations allowing ES to determin communicate and track Veteran eligibility.	
Accomplishments:	Mileston	nes:
2020-11-13: Successfully completed technical evaluation for CCN VCE static eligibility within 24 2020-11-17: ES CC Hardship Information from Cerner was tested in SQA (Team Liberty)	2020-12-16: Turn on ES Parameter to share CC Collateral Eligibility 2020-12-16: National VistA functionality	al Release of 2020-12-20: VistA IOC sites testing functionality
hours	Office of Information	n and Technologies/Data Dependencies
OCC Business Dependencies	(b)(5)	
• (b)(5) •		
Risks No Risks Found	<u>Issues</u> No Issues Found	





ELC Decision Needed/Priority Discussion

No ELC Decisions needed or priority discussion topics at this

Project Description

The VA/DoD Advanced Payment methodology produces a standardized flat file of DoD claim elements which can be utilized to standardized revenue processes for billing on those DOD claims across the nation.

Key Performance Indicator

Align with the VA/DoD Advanced Payment Methodology.

Accomplishments:

2019-10-11: Gate 3

2020-10-30: VSSC Data

Validation

2020-11-27: DoD Approved **Expansion Outcome**

2020-12-31: VSSC Data Validation

Milestones:

2021-03-05: Project Start/Finish

OCC Business Dependencies

No Business dependencies at this time

Risks

time

-- No Risks Found --

Office of Information and Technologies/Data Dependencies

No OI&T Data dependencies at this time.

Issues

-- No Issues Found --





Appendix

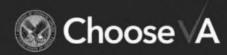
Project Status Slides





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Idea Decision	Ops Notified	CCSC Presentation Date	CCSC Project Go / No Go	Ops PM Resource Assigned
Referral Based Obligations	11/17	11/24	TBD	TBD	TBD	TBD	TBD
VA Provider CCN Retail Pharmacy Capability	11/10	11/24	TBD	TBD	TBD	TBD	TBD
Community Care Customer Portal (Self Service)	10/30	11/10	Approved	11/16	TBD	TBD	TBD
Integrated Product Environment (IPE)	9/14	9/22	Approved	9/24	10/20	Go	10/9 (b)(6)
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD	Projected Resource
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	On Hold	TBD	TBD	TBD	TBD	TBD
Community Care Billing SSN Reduction	7/21	8/11	Approved	8/13	10/20	Go	10/2





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Idea Decision	Ops Notified	CCSC Presentation Date	CCSC Project Go / No Go	Ops PM Resource Assigned
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A	N/A
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	Go	7/21 (b)(6)
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	Go	7/20 (b)(6)
ePrescribing	6/19	6/23	Approved	6/29	9/15	Go	8/24





			Deferred Project
Executive Leadership Committee (ELC) Decision Needed /	Priority Discussion	Project Description	Key Performance Indicators (KPI)
DECISION: No current ELC decision required at this time. BACKGROUND: Fnactment of I aw on 5/24/2018 – Implementation Deadline 5/24/2019 Food		To provide oversight for ongoing policy and IT funding efforts in conjunction with Sec. 302 Protecting Veterans Credit Protection Act of 2018 including efforts to obtain legislative relief.	 Metric 1: The electronic VA claims are paid within 30 days and paper claims are paid within 45 days. Metric 2: Ensures Veteran cost share and deductibles are adjudicated accurately. Metric 3: 100% of information furnished to credit reporting agencies will be verified Veteran responsible debt. Metric 4: Decrease in Appeals and Calls for improperly reported debt.
Accomplishments		Upcoming M	ilestones
VIPR V18-00312-000 for automated solution submitted. Status as of 1/08/2020 –Unfunded Request/Pending Resources	• JANUARY 2021-	-LEGISLATIVE RELIEF REQUEST FOR	R FY23 LEGISLATIVE CYCLE WILL BE SUBMITTED.
OCC Business Dependencies		Office of Information ar	nd Technology (OIT) / Data Dependencies
(5)		(b)(5)	





"LINCLASSIFIED"

12/12/2022 297 of 532

Community Care Business Program Management Review (PMR) #1

07/28/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

Agenda

- OCC Priority Project Review
 - OCC Data Governance
 - VA/DoD Advanced Payment and Referral Standardization
 - One Consult 2.0
 - Indian/Tribal Health Coordination (ITHC)
 - Advanced Medical Cost Management System (AMCMS)
 - Urgent Care Integrated Project Team
 - Provider Profile Management System (PPMS)
 - Community Care Reimbursement System (CCRS)
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- · Number of data policies, practices, and standards established
- Percent of data issues resolved
- Number of completed data initiatives in data governance project portfolio
- · Percent of data initiatives that meet or exceed established initiative targets

Accomplishments

7/6/2020 **NOMINATED DATA GOVERNANCE GROUP**

7/7/2020 CCSC DATA GOVERNANCE

PROJECT APPROVAL

7/8/20 KICKED OFF DATA **GOVERNANCE PROJECT**

7/15/2020 **ADOPTED CONTINUOUS** LEARNING APPROACH

Upcoming Milestones

8/5/2020 **DEFINE OVERARCHING DATA** GOVERNANCE STRATEGIC PRIORITIES GOVERNANCE CHARTER

8/12/2020 **FINALIZE DATA** 8/19/2020 **IDENTIFY A DATA-RELATED GOVERNANCE PORTFOLIO**

OCC Business Dependencies

Pending Dependency Management Analysis

(b)(5)

OIT / Data Dependencies

Pending Dependency Management Analysis

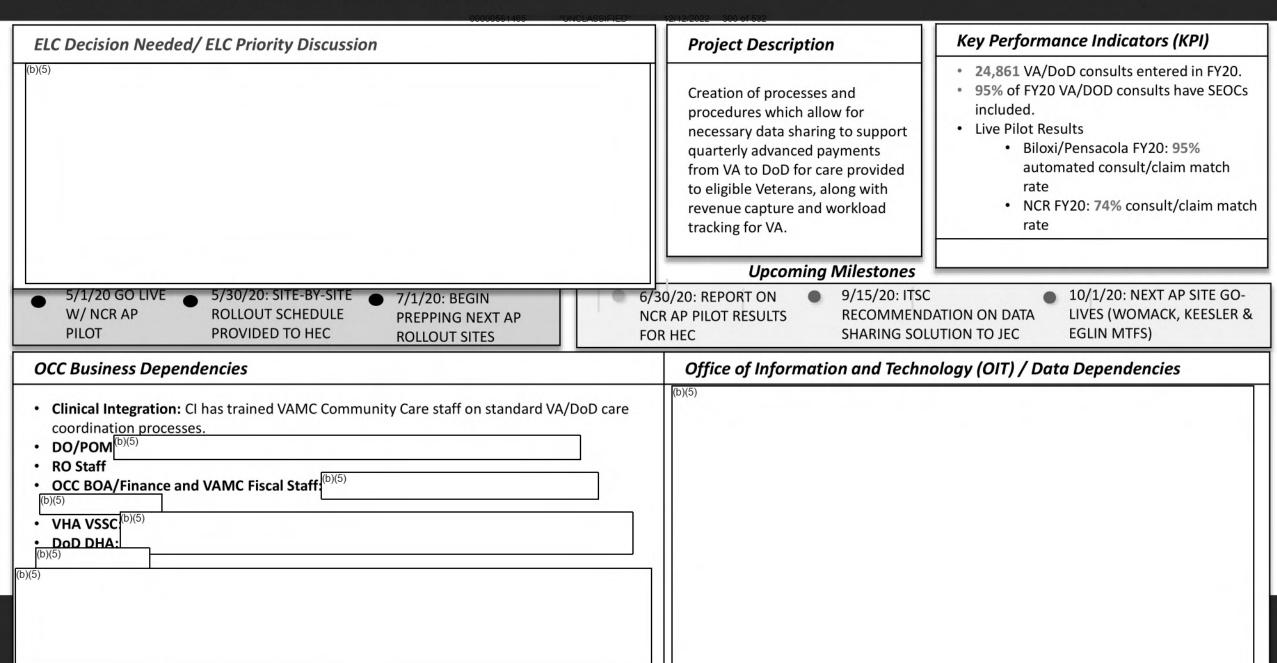
(b)(5)





VA DoD Reimbursement

Project Phase – Development



One Consult 2.0

	Executive Leadership Committee (ELC) Decision Needed , Priority Discussion			
Di	ECISION: No decision requested at this time			
(b)(5				

Project Description

One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies

Key Performance Indicators (KPI)

- DST integrated into CPRS- Q1 FY 21
- CTB integrated into CPRS- Q2 FY 21
- DST use of new drive time CC eligibility API estimated mid August (30 days after FRN publication)

Accomplishments

RECEIVED APPROVAL FROM BUSINESS TO UTILIZE EXISTING CAPABILITIES WITHIN DST

RELEASED UPDATE THAT
ADDED CC AVERAGE WAIT
TIMES TO THE DST
DASHBOARD

DEPLOYMENT OF CTB 1.9.0072 OVER 30 DAYS, BEGAN 7/14/20 CBT V1.9.0072
ANNOUNCEMNT AND
FGB UPDATES
COMPLETED

(b)(5)

DST DRIVE TIME TO
BE ENABLED 30
DAYS AFTER FRN
PUBLICATION

TEAM CONTINUES TO CAPTURE REQUIREMENTS FOR WEB BASED PLATFORM.

DST OFFCE HOURS CONTINUE 7/20/2020.

Upcoming Milestones

TESTING / NATIONAL DEPLOYMENT OF CTB V1.9.0076. TESTING 9/16/2020, NATIONAL DEPLOYMENT 10/03/2020

OCC Business Dependencie	occ	Business	Depend	encie
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(b)(5)

OIT / Data Dependencies

Choose	VΑ



Indian-Tribal Health Coordination

Development

ELC Decision Needed/ ELC Priority Discussion	VUVVSSI IES SINSLASSIFIES A	Project Description		Key Performa	ance Indicators (KPI)
(1)This project's training activities were impacted b hold until the partners are free to resume. VA staff paced PPT and sent to the field on 7/17. (b)(5) Discussion (b)(5)	그래 이렇게 하면 이 기가 있다고 하는 일이 되었다면 하는 것이 되었다면 살았다. 이 경기에 가지 않는데 그 그 때문에 없는데 그렇게 되었다면 하는데 하는데 없다면 없다면 없다면 다른데 없다면	Integrate the IHS/THP Reimbursement Agreeme (RAP) operations with oth efforts. Tasks included ex advisory board and develor Coordination Plan; hostin VA staff training; continuo communication efforts; p expansion; and communication engagement	her OCC kecuting an oping a Care ng tribal and ous orogram	• Metric 2: Ca	dvisory Board meetings are Coordination Plan developed anual re-trainings conducted
Accomplishments		Upcoming M	lilestones		
6/4/20 HELD 2 ND ADVISORY BOARD MTG 07/17/20 VA FIELD STAKEHOLDER VIRTUAL TRAINING EMAILED	CONSULTATION IHS/	THP RE-TRAINING E	9/30/20 CLEARA EXECUTION OF EXPANSION MO	IHS/THP	11/30/20 CARE COORDINATION PLAN FINALIZED
OCC Business Dependencies		OIT / Data Dependen	ncies		
(b)(5)		N/A Risk: Mitigation:			





AMCMS

Deployment

ELC Decision Needed/ ELC Priority Discussion				
(b)(5)				

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Upon deployment, key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- 6/17-6/24 UAT DATA
 VALIDATION ROUND I
 EXECUTED

 7/10 UAT TEST
 SCRIPTS
 UPDATED
- 6/24-7/15 INCORPORATION OF CHANGES & DATA VALIDATION FIXES BASED ON UAT FEEDBACK
- 7/15-7/25 UAT DATA
 VALIDATION ROUND II
 EXECUTION
- 8/21 UAT TEST
 EVALUATION
 REPORT

Upcoming Milestones

- 8/25 NATIONAL DEPLOYMENT GATE REVIEW MEETING
- 8/26/20 BEGIN FIELD NATIONAL DEPLOYMENT

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

o)(5)

Urgent Care IPT

National Deployment

ELC Decision Needed/ ELC Priority Discussion	0000001100	Project Description	Key Performance Indicators (KPI)
(b)(5)		Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.	• 5,688 total probable UC visits in Region 1, as of 5/31/2020
Accomplishments		Upcoming Milestones	
O6/08/20 REGION 2/3 GO LIVE DATE FINALIZED AS 8/4 O7/15/20 REGION 2/3 COMMS RELEASED	08/04/20 REGION 2 TRANSITION	08/04/20 08/31/20 REGION 3 REGION 4 TRANSITION TRANSITION	
OCC Business Dependencies	(Office of Information Technology / Data	Dependencies
Clinical Integration: N/A Delivery Operations: N/A Provider Relations and Services (PRS): (b)(5) Communications: (b)(5) (b)(5)	(b)(5		
(files)		RISK: N/A Mitigation: N/A	

ELC Decision Needed/ ELC Priority Discussion **Priority Discussion:**

Project Description

Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information.

Upcoming Milestones

Key Performance Indicators (KPI)

Power BI functionality exceeded license capability for reporting previous metrics.

Accomplishments

- 5/22/20 **PPMS 8.0 GO-LIVE**
- 6/30/20 **DEV CONTRACT AWARDED JUNE**

7/1/20 **URGENT CARE** LEGACY RE-ROUTE

7/7/20 PPMS 8.1 GO-LIVE

- 7/23/20 HOTFIX 8.1.1.1 RELEASE
- 7/29/20 COMMUNITY PROVIDER LOCATOR (CPL) RELEASE
- 08/11/20 PPMS 9.0 NATIONAL **GATEWAY REVIEW**
- 08/20/20 **PPMS 9.0 GO-LIVE**

OCC Business Dependencies

- Clinical Integration
- **Network Management**
- Community Care Network
- **Delivery Operations**
- **Revenue Operations**
 - (b)(5)VAMC/CPO & Pharmacy

(b)(5)

OIT / Data Dependencies

(b)(5)





CCRS

National Deployment

ELC Decision Needed/ ELC Priority Discussion

No ELC Decision Requests for July

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

OIT / Data Dependencies

Key Performance Indicators (KPI)

CCN Payment Metrics as of July 17, 2020

- Region 1: Invoices Received 1,329,157, Confirmed Paid 825,256, Sent for Payment 27,528, "No Action" Optum denials 409,257
- Region 2: Invoices Received 759,546, Confirmed Paid 464,651, Sent for Payment 23,090, "No Action" Optum denials 242,340
- Region 3: Invoices Received 176,601, Confirmed Paid 72,137, Sent for Payment – 4,983, "No Action" Optum denials – 94,192
- Region 4: Invoices Received 1,347, Confirmed Paid 241, Sent for Payment 299, "No Action" TriWest denials 563
- The total Invoice Amount Paid/Sent for Payment: \$984,680,609.20

Accomplishments

06/23/2020 SUSPENSION
OF SUSPENSION OF 270
DAY DENIAL REASON
APPROVED BY ELC

07/06/2020 PMPM ADMIN

■ FEES FOR RESUBMISSIONS
IMPLEMENTED STARTING
WITH MAY

07/09/2020 CCRS USER ACCEPTANCE TESTING 11.4 07/14/2020 NATIONAL DEPLOYMENT GATE REVIEW (GO, NO GO DECISION)

O7/16/2020 RELEASE CCRS 11.4 TO PRODUCTION

Upcoming Milestones

07/17/2020 UPDATE USER GUIDES AND LESSONS LEARNED CCRS 11.4 07/17/2020 UPDATE KMS AND TRAINING DOCS FOR CCRS 11.4

OCC Business Dependencies

- Clinical Integration (Facility CC Staff and VAMC RN Staff)
- Delivery Operations/Payment Oversight and Management (Invoice Processing Staff) (b)(5)
- Revenue Operations (Facility Revenue, RUR, and CPAC Staff): (b)(5)
 Finance (OCC Finance and Informatics Staff) (b)(5)
- VAMC / Fiscal Budget Staff: (b)(5)

(b)(5)

(b)(5)

Appendix





Cerner OCC Integration

Development

ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Manage all necessary integrations to TBD: Focusing on timeliness No ELC decisions needed or priority discussion topics at this appropriately measures and qualitative time. operationalize Cerner surveys EHR into OCC clinical operations processes These dates are subject to **Accomplishments Upcoming Milestones** change due to COVID-19 uncertainty CSS: **Super User Training:** ORA: IV3: **TBD** awaiting **OEHRM** Decision Go Live 8/21/2020 9/7/2020 8/10/2020 7/27/2020 **OCC Business Dependencies** OIT / Data Dependencies **Highlight OCC Business Dependencies:** Highlight OIT/Data Dependencies: -Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5) -Payment Operations Management -Revenue Operations (Facility Revenue, RUR, and CPAC Staff) -Women's Health (IVF and Infertility)



Community Care Network

Deployment

ELC Decision Needed/ ELC Priority Discussion No ELC decisions needed or priority discussion topics at this time.

Project Description

Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

Region 3 Gradual Transition - CCN Referral

- Week 1: May 18 22, 2020
 - Total Referrals = 4,965* Total Rejects = 10
- Week 2: May 25-29, 2020
 - Total Referrals = 5,084* Total Rejects = 10
- Week 3: June 1-5, 2020
 - Total Referrals = 7,743* Total Rejects = 18**

Region 4 R4P1 Go Live - CCN Referral

- Week 1: June 8-12, 2020
 - Total Referrals = 842 Total Rejects = 45

Accomplishments

06/16/20 R3P2 SHCD GO-LIVE

07/21/20 R4P2 SHCD GO-LIVE 08/04/20 R2 & R3 URGENT CARE CUTOVER FROM PC3

(b)(5)

08/11/20 R4P3
 SHCD GO-LIVE

08/25/20 R4P4 SHCD
 GO-LIVE

Upcoming Milestones

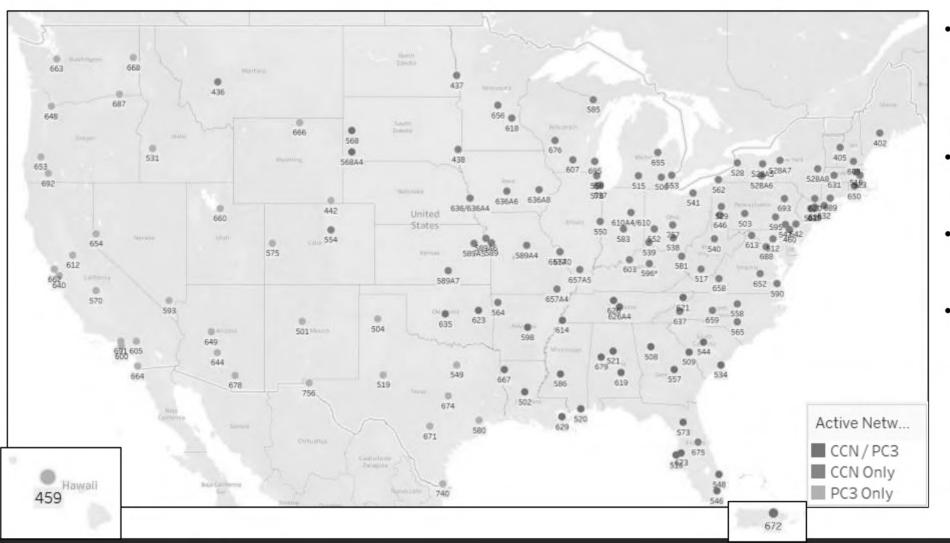
08/31/20 R4 URGENT CARE CUTOVER FROM PC3

OCC Business Dependencies

(5)

Office of Information and Technology (OIT) / Data Dependencies

National Network Deployment Progress – As of 7/6/2020



- (b)(5)
- Regions 1, 2, and 3 are fully deployed
- Region 4 Phase 1 deployed on 6/8/2020
- Covid-19 is impacting the national deployment progress and provider recruitment progress

14

Region 3 Update

January 7 2020: Go-Live for Two Sites May 18 – June 15: Gradual



Transition

Throughout the Gradual Transition, and continuing post-go-live, Optum is working to contract with key Region 3 providers.

Recent wins include:

- VISN 7: University of Alabama (received verbal agreement)
- VISN 16: Willis-Knighton Health System

June 16: Full Region 3

Deploymeall remaining R3 sites)

June 16, 2020

Atlanta, GA

August, GA

Bay Pines, FL

Biloxi, MS Central Arkansas, AR Birmingham, AL Columbia, SC Central Alabama Memphis, TN Charleston, SC Murfreesboro, TN Dublin, GA Nashville, TN Jackson, MS Miami, FL New Orleans, LA Mountain Home, TN Shreveport, LA Muskogee, OK Tuscaloosa, AL N. Florida / S. Georgia Alexandria, LA Oklahoma City, OK

> San Juan, PR Tampa, FL West Palm Beach, FL

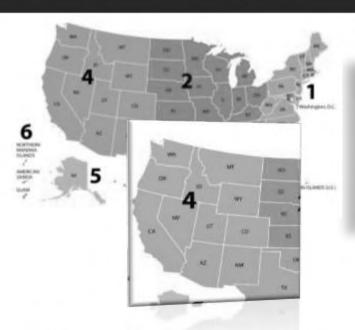
Region 3 Activities

- CAST calls continue for another two weeks until sites transition to the monthly network adequacy calls
- Optum and Network Management are reviewing the **16 requests for PC3 extensions.** Some sites are reporting gaps in specific specialties whereas others are requesting for specific providers. Final decisions will be made this week.
- Optum is holding network reviews with individual sites that have concerns with the network. These meetings will focus in
 on certain specialties and outstanding issue tracker items.

30-day PC3 cutover period ends

July 17:

Region 4 Update



SHCD – Phase 1 (2 VAMCs)

June 8, 2020

VISN 19 - 2 VAMCs

- Montana (436)
- · Eastern Colorado, CO (554)

Phase 2 (13 VAMCs)

July 21, 2020 VISN 17 - 7 VAMCs

Amarillo, TX (504)

El Paso, TX (756)

Texas Valley Coastal (740 Central Texas (674)

North Texas (549) South Texas (671)

West Texas (519)

VISN 16 - 2 VAMC

Houston, TX (580) Texas counties aligned to

Shreveport, LA (667) catchment area

VISN 19 - 4 VAMCs

Cheyenne, WY (442) Sheridan, WY (666) Salt Lake City, UT (660) Grand Junction, CO (575)

August 11, 2020

VISN 20 – 7 VAMCs
Portland, OR (648)
Puget Sound, WA (663)
Roseburg, OR (653)
Spokane, WA (668)

White City, OR (692) Walla Walla, WA (687)

Boise, ID (531)

Phase 3 (14 VAMCs)

Cs VISN 21 – 7 VAMC

Fresno, CA (570) Reno, NV (654) San Francisco, CA (662) Northern California (612) Palo Alto, CA (640) Southern Nevada (593)

Southern Nevada (593)
Honolulu, HI (459)

August 25, 2020

VISN 22 – 8 VAMCs

Loma Linda, CA (605) Long Beach, CA (600)

Phase 4 (8 VAMCs)

New Mexico (501)

Northern Arizona (649)

Phoenix, AZ (644)

San Diego, CA (664)

Southern Arizona (678)

Greater LA, CA (691)

16

Region 4 SHCD

- ✓ Region 4 Phase 2 deploying on July 21, 2020
- ✓ Collaborating with TriWest to prepare Phase 2 and 3 sites for CCN Go live through predeployment meeting series
- ✓ Planning and conducting sequence of e-learnings, virtual training sessions, and just in time refresher trainings to ensure site staff are ready to use CCN systems and tools for Go Live
- ✓ Increasing messaging on differences between CCN and PC3 to level set site expectations
- ✓ Updating deployment approach for Phase 2-4 Command Center based on Phase 1 lessons learned; scaling to account for increased number of Go-Live sites
- ✓ Developing proactive referral tracking approach to determine trends: network gaps, COVID-19 impact vs field utilization





ELC Decision Needed/ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 35/80 Users
- CCN Accreditation Waivers UI: 25/30 Users
- CCN Complaints & Grievances UI: 24/54 Users
- CCN Congressional Inquiries UI: 27/42 Users
- CCN Corrective Action Plans (CAPs) UI: 25/30 Users
- CCN Network Adequacy Deviations UI: 25/51 Users

Accomplishments

04/01/2020 **EPRS Build 4** 04/28/2020 **EPRS Build 5B**

05/18/2020 UAT complete for

Build 5C IDA Reports

06/26/2020 UAT complete for **Build 5D IDA Reports**

06/26/2020 EPRS Build 5.1

Upcoming Milestones

Future Build/Release Planning Underway

OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	(b)(5)

ELC Decision Needed/ ELC Priority Discussion No ELC decisions needed or priority discussion topics at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- 2,223,145: Total Referrals FY 2020
- 186,901: Total Referral FY 2019
- 16,581: Total number of VA user accounts provisioned
- 13,381: Number of Community Providers provisioned
- 4,903: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,270: Support Ticket Count for June
- 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning-VA; Provisioning-CP; Related to Production Outage

Accomplishments

07/10/2020 CTB V1.9.0072 ND 07/20/2020 **RELEASE 9.0 ND**

- 07/21/2020 COVID REFERRAL EXT BATCHING COMPLETE PRESENTATION
- 08/25/2020 RELEASE 10.0 CCSC
- 08/25/2020 **RELEASE 10.0 FIELD** NOTIFICATION

Upcoming Milestones

- 9/14/2020 **RELEASE 10.0 ND**
- OCT 2020 **RELEASE 11.0 ND**

OCC Business Dependencies

Highlight OCC Business Dependencies:

- COVID19 Referral Extension: Issue found on 6/12/2020 with certain SEOC versions used in referral extension was addressed via a development script; Referral batching with downstream system was resumed on 6/29 and completed on 7/21/2020, ahead of scheduled by 3 days
- Clinical Integration (CI Field Support Director & Assistants): (b)(5)
- Delivery Operations/POM (b)(5) (b)(5)

(b)(5)

• Finance (OCC Finance and Informatics Staff): (b)(5)

Revenue Operations (Facility Revenue, RUR, and CPAC Staff): (b)(5)

OIT / Data Dependencies (b)(5)

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for GEC Documents task and EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Overview of Release 9.0 Enhancements

- Release 9 contains several general HSRM enhancements in addition to reporting enhancements and critical HSRM Task list enhancements, which will make task list management more efficient and user friendly.
- Training and communications are being developed to ensure proper task management utilization.

General HSRM Enhancements

- **Referral Date**: Change to Referral Date logic to reflect the start date to be the date the consult is 'Sent to HSRM' from CPRS
- Clinically Indicated Date: Removal of validation check logic for CID field
- Multiple Veteran Addresses: Addition of Residential Address

Task Management Enhancements

- Enhanced filtering by Veteran Last name
 - Search for specific Veteran by last name
 - Filter task list by Alpha Split
- "Clean slate": Tasks greater than 10 days old will be archived from the task list
- Addition of referral number on task list
- Search task list by referral number
- Search task list by assigned user
- Add Level of Care Coordination to Priority field on task list
- Sort/filter by Level of Care Coordination/Priority
- Medical documentation task enhancements: 5 New dispositions for documents loaded to VistA

Reports Enhancements

- o Community Provider User Provisioning Report:
 - Added Community Facility parameter and removed the affiliation parameter
 - City and state added to the report
- Community Provider Referral Summary Report:
 - Veteran's date of birth added to the report
- Optional Task Report
 - Region added to the report





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) – Phase 2

National Deployment

ELC Decision Needed/ ELC Priority Discussion

The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

 No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1)
 AR PATCH NATIONALLY
 RELEASED
- 06/02/20 IB 675 NATIONALLY RELEASED
- 06/05/20 SIX
 MONTH EXTENSION
 STARTED
- 08/03/20 IB PATCH 677 NATIONALLY RELEASING
- 08/31/20 IB PATCH 678 NATIONALLY RELEASING
- FOUR ADDITIONAL IB/AR PATCHES TARGETED FOR DEVELOPMENT AND NATIONAL RELEASE
- 12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Upcoming Milestones

• Downstream Dependency – None at this time.

(b)(5)



CPAC Document Scanning

National Deployment

ELC Decision Needed/ ELC Priority Discussion		
(b)(5)		

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 10/09/19 UPDATED PERFORMANCE **DESCRIPTIONS AND UNION APPROVAL FOR** CPAC DEPLOYMENT RECEIVED
- 03/31/20 FINAL 9957 **ACCESS REQUEST SUBMITTED**
- 04/24/20 FSC COMPLETES **KOFAX UPDATES TO CPAC SCANNERS**

Upcoming Milestones

07/24/20 PROJECT COMPLETE

OCC Business Dependencies

· No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and Technology / Data Dependencies



ELC Decision Needed/ ELC Priority Discussion		
(b)(5)		
Priority Discussion: No		

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

(b)(5)

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- *Metric 2:* Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

- 06/2020 **SUNSET GRANDFATHER ELIGIBILITY BASED ON CARE VETERANS**
 - **06/2020** 06/2020 RSD **DEPLOYED** APPROVED FOR **SOLUTION OF NOT FUNCTIONALITY** FOR THE 6 AND 12 **ENROLLED COVERED** MONTH HARDSHIP
- 07/2020 COMPLETED **ELIGIBILITY ANALYSIS** OF CC DATA FOR **REJECTED REFERRALS**
- 08/2020 COLLABORATING WITH HSRM TEAMS **REGARDING BUSINESS** RULES FOR PREVENTING APPROVAL OF REFERRALS
- 08/2020 ES RELEASE TO **EXPAND STATIC ELIGIBILITY TO NOT ENROLLED COVERED** VETERANS AND INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE

Upcoming Milestones

08/2020 ES RELEASE TO **AUTOMATE COLLATERAL OF VETERAN PROCESS TO INCLUDE COPY OF RECORDS** IN ELIGIBILITY FILE (PHASE I)

OCC Business Dependencies

DATA

- **Highlight OCC Business Dependencies:**
- Clinical Integration (Business Owners) System Engineering Management (SEM)
- Business Intelligence Service Line (BISL) (b)(5)
- Community Care Contractor (CCN) -
- VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO) (b)(5)

hoose A



FOR INELIGIBLE VETERANS

Office of Information and Technology (OIT) / Data Dependencies

Retail Pharmacy Program

Sustainment

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods	 Metric 1: over 100,000 Veteran's vaccinated Metric 2: Vaccinate 125,000 next year Metric 3: Reimburse Walgreens 99% accuracy Metric 4: Continued Outreach to Rural Veterans
Accomplishments	Upcoming Milestones	
FILE/INVOICE SENT	8/1/2020 CLOSE OUT RETAIL PHARMACY	
OCC Business Dependencies	Office of Information and Techno	ology (OIT) / Data Dependencies
(b)(5) (b)(6) (b)(5)	RISK: N/A	





VA DoD Revenue Standardization

Project Phase – Development

Project Description Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion the VHA support DoD Reimbursement pilots with a web based tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment **DECISION**: No new decisions needed from Revenue Operations regarding back end process batch processing, invoice Methodology. at this time. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 8/1/20 VSSC 9/1/20 SEM ■ 10/01/20 FUNCTIONAL 5/15/2020 SEM **2019 SEM BUSINESS VALIDATION OF DOD** SHAREPOINT TOOL **USER TESTING** SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE **DATA COMPLETE TESTING** COMPLETE **OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation Updates

Project Name	Date Presented at PMR	Decision	Status
Comprehensive Disaster Recovery Plans	6/23	Approved	Intake
ePrescribing	6/23	Approved	Intake
CAVE	7/14	Approved	CCSC, 7/28, approval to move to project development
Veteran Credit Database Program	Scheduled for 8/11	Pending	TBD



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"LINCLASSIFIED"

12/12/2022 324 of 532

OCC Bi-Monthly Business PMR #1

09/22/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

Agenda

- Project Idea Evaluation
 - Integrated Product Environment (IPE)
- OCC Priority Project Review
 - Enterprise Program Reporting System (EPRS)
 - HealthShare Referral Manager (HSRM)
 - Provider Profile Management System
 - Urgent Care Implementation
 - One Consult 2.0
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





Integrated Product Environment (IPE)

Impediments to OC	С		Additional Impact		
Business Ops & Admin: OPS Resource impacts			Policy Impact:	No current impacts identified.	
Delivery Ops:	DO systems		Funding Impact:	Future - (b)(5)	
Revenue Ops:	RO systems		Impact on Other OCC		
Clinical & Network Mgmt:	CNM projects: PPMS, CCRA, EPRS, A CERNER, CCN, CAVE, ePrescribing, e		Projects: Impact if Project Idea Not		
OCC Leadership (Includes IDA and BIC):	IDA – No current impacts identified. BIC - (b)(5)		Approved:		
Recommended OC	C Strategic Priority Alignmer	nt Recomme	ended Project Designat	ion Recommended Business Owner	
Innovate Business Model		occ		CHIO / BOA	





Enterprise Program Reporting System (EPRS)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority			Project Description	Key Performance Indicators (KPI)	
Discussion (b)(5)			EPRS delivers a series of custom- built user interface (UI) screens and reporting system data integrations for administering the CCN contract.	 Quality Check UI: 39/80 Users (Δ = +2) CCN Accreditation Waivers UI: 30/30 Users (Δ = +3) CCN Complaints & Grievances UI: 28/54 Users (Δ = +2) CCN Congressional Inquiries UI: 30/42 Users (Δ = +1) CCN Corrective Action Plans (CAPs) UI: 28/30 Users (Δ = +1) CCN Network Adequacy Deviations UI: 27/51 Users (Δ = +1) 	
Accomplishments			Upcoming Milestones		
08/25/2020 EPRS SharePoint Server Pre-Prod Migration	08/20/2020 EPRS ● Release 6.0 D: EDI 837 Data Layer Rework	08/28/2020 EPRS ● Release 7.0 D: EPRS Data Integration (eCAMs)	R10.0 & 10.1: UIs for P	10/05/2020: EPRS Prod R 9.0: Prod R11.0: Network Management UI 10/05/2020: EPRS Prod R 9.0: EPRS Tech. Data Integration for HSRM	
OCC Business Dependen	dencies		OIT / Data Dependencies		
Project Dependencies • Community Care Contra	act Administration (CCCA): (b)(5)		Data Dependencies (b)(5)		

Community Care Network Management (NM): (b)(5)



HealthShare Referral Manager

Development

DECISION: No ELC decisions needed at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- 2,841,420: Total Referrals FY 2020
- 185,691: Total Referral FY 2019
- 17,830: Total number of VA user accounts provisioned
- **16,541**: Number of Community Providers provisioned
- **5,783**: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,073: Support Ticket Count for August
- 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning- CP; Provisioning-VA; VistA Write Back/ Appointment Question

Accomplishments

08/28/2020 RELEASE 10 FIELD NOTIFICATION 9/14/2020 RELEASE 10 ND

09/21/2020
 CAEC PORTAL

09/26/2020
 CERNER SCHEDULING
 MESSAGE GO-LIVE

 10/24/2020 CERNER SPOKANE GO-LIVE

Upcoming Milestones

11/1/2020
 RELEASE 11 UAT

• 11/23/2020 RELEASE 11 ND

OCC Business Dependencies

Highlight OCC Business Dependencies: • Clinical Integration (CI Field Support Director & Assistants) (b)(5)

Delivery Operations/POM (b)(5)
 (b)(5)
 Finance (UCC Finance and Informatics Staff): (b)(5)
 Revenue Operations (Facility Revenue, RUR, and CPAC Staff): (b)(5)
(b)(5)

OIT / Data Dependencies

(b)(5)

(b)(5)

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- · CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Provider Profile Management System (PPMS)

Dev/Ops

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)		
• Priority Discussion: (b)(5)	Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information. NETWORK ACTIVE Provider (S/17/2/2020 P Set/Les States St		
Accomplishments	Upcoming Minestones 1,841,979 1,797,125 44,854 2% 12,123,360		
 ↑/14/20 ↑/29/20 ↑/20/20 ↑/29/20 ↑/29/20	08/20/2020 −		
OCC Business Dependencies REVIEW	OIT / Data Dependencies		
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy (b)(5) 	(b)(5)		

Urgent Care IPT

Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

Implementation Updates:

- 1. CCN Urgent Care for Regions 2 and 3 went live on 9/1.
- 2. R2/3 Webinars held on 8/25 and 8/27, with over 400 participants at each session.
- 3. Worked with DEPO to ensure Veterans can access pharmacy locations for urgent care prescriptions and flu shots on VA.gov Provider Locator.

Project Description

Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.

Upcoming Milestones

Key Performance Indicators (KPI)

- 1,710 total Veteran calls to confirm eligibility from 09/01/2020-09/07/2020.
- 392 total UC authorizations in R2 from 09/01/2020-09/07/2020.
- 1,014 total UC authorizations in R3 from 09/01/2020-09/07/2020.

Accomplishments

08/30/20 OPTUM R2/3 PROVIDER FILE INGESTED BY PPMS 09/01/20 REGIONS
 2/3 GO-LIVE

09/25/20 REGION 4 COMMS RELEASE 09/30/20 REGION 4 UC CCN GO-LIVE

OCC Business Dependencies

• Communications: (b)(5)

b)(5)

Office of Information Technology / Data Dependencies

(b)(5)



One Consult 2.0

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion				
DECISION: No decision requested at this time (b)(5)				

Project Description

One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies

Key Performance Indicators (KPI)

- DST integrated into CPRS- Q1 FY 21
- CTB integrated into CPRS- Q2 FY 21
- DST use of new drive time CC eligibility API to begin 9/10/2020

Accomplishments

CTB 1.9.0076 **FULL SITE IOC** BEGAN: 9/1/2020

ENABLED LIGHTHOUSE API DRIVE TIME IN DST: 9/10/2020

COMPLETED **DST MAPPING** TABLE **UPDATES:** 9/11/2020

CTB 1.9.0076 GO NO GO: 9/15/2020

TEAM CONTINUES TO CAPTURE REQUIREMENTS FOR WEB BASED **PLATFORM**

Upcoming Milestones CTB V1.9.0076: CONCLUDE FULL SITE IOC: 9/14/2020

CTB V1.9.0076 NATIONAL DEPLOYMENT: 9/18/2020

DST OFFICE **HOURS** CONTINUE: 9/21/2020

OCC Business Dependencies

(b)(5)

OIT / Data Dependencies





- Release will add "Unable to Schedule" requirements to include options from the Add Comments workflow
- Release will include more descriptive text in the consult factors that describe why user is unable to schedule a consult
- Release will fix the Clinical Review Option (CC Referrals) scheduling options that are being cached when Receiving Consults and user does not select a scheduling option
- Release will address unable to enter text (ex. "t+30") issue
- Release will address telehealth options not showing up when internal consults are triaged
- National release projected to begin 9/18/2020

Overview of CTB Phase II

- New version of Consult Toolbox in a DevSecOps model that will eliminate the long and costly desktop deployment process.
- The scope will include user validated requirements and existing backlog items.
- Minimally Viable Product projected to be completed 9/25/2020
 - National Deployment not expected until November/December 2020



Appendix

Project Status Update





Cerner OCC Integration Project

Development

• DECISION: No ELC decisions needed at this time.

Project

Project

Mana
integra
appro
opera
EHR i

Project Description

Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

Cerner Referral Manager Functional Testing: 8/17/2020 – 8/28/2020 Exploratory Testing: 8/24/2020 – 8/29/2020 Super User Training: 8/10/2020-8/29/2020

ORA: 9/7/2020 End User Training (Spokane): 9/28/2020

Upcoming Milestones

HSRM SIU Interface Go-Live: End of September IOC Go Live: 10/24/2020

OCC Business Dependencies

Highlight OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5)

(0)(0)

-Payment Operations Management

-Revenue Operations (Facility Revenue, RUR, and CPAC Staff)

-Women's Health (IVF and Infertility)

b)(5)

OIT / Data Dependencies (b)(5)





Community Care Reimbursement System (CCRS)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicators (KPI)

CCN Payment Metrics as of September 4, 2020

- Region 1: Invoices Received 1,881,790, Confirmed Paid 1,195,248, Sent for Payment 45,314, "No Action" Optum denials 523,766
- Region 2: Invoices Received 1,319,275, Confirmed Paid 845,062, Sent for Payment – 52,031, "No Action" Optum denials - 352,273
- Region 3: Invoices Received 411,988, Confirmed Paid 196,103, Sent for Payment – 12,303, "No Action" Optum denials - 183,202
- Region 4: Invoices Received 79,998, Confirmed Paid 23,348, Sent for Payment – 9,984, "No Action" TriWest denials - 15,325

The total Invoice Amount Paid/Sent for Payment: \$1,728,313,422.92.

Accomplishments

09/01/2020 CCRS 12.2 COMMUNICATIONS SENT 09/03/2020 RELEASE CCRS 12.2 TO PRODUCTION 09/09/2020 CCRS USER ACCEPTANCE TESTING 12.3 09/22/2020 RELEASE CCRS 12.3 TO PRODUCTION 10/1/2020 CCRS USER ACCEPTANCE TESTING 12.4

Upcoming Milestones

10/15/2020 RELEASE CCRS 12.4 TO PRODUCTION 10/16/2020 UPDATE KMS, TRAINING DOCS, AND LESSONS LEARNED FOR CCRS 12.4

OCC Business Dependencies

- Clinical Integration (Facility CC Staff and VAMC RN Staff)
- Delivery Operations/Payment Oversight and Management (Invoice Processing Staff) (b)(5)
- Revenue Operations (Facility Revenue, RUR, and CPAC Staff):

 (b)(5)
 Finance (OCC Finance and Informatics Staff)
- VAMC / Fiscal Budget Staff:
 (b)(5)

0)(3)

OIT / Data Dependencies

(b)(5)

Community Care Network

Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

- Region 2 and 3 initiated Urgent Care cutover from PC3 on September 1st
- Regions 1 4 reached full HCD with the deployment of Region 4; Region 4 reached full HCD with Phase 4 deployment on August 25th
 - CCN use continues to increase for all sites in Phase 1, 2, and 3 for Region 4
 - Post deployment refresher trainings and office hours are in development
- R4 Urgent Care cut over is now 9/30/2020

Accomplishments

06/08/20 R4P1 SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

GO-LIVE

● 06/16/20 R3P2 ■ 07/21/20 R4P2 ■ 08/11/20 R4P3 ■ 08/25/20 R4P4 SHCD ■ 09/01/20 R2 & R3 URGENT CARE CUTOVER FROM PC3

Upcoming Milestones

09/30/20 R4 URGENT CARE **CUTOVER FROM PC3**

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
No ELC decisions needed. (b)(5) Tribal consultation on the CC approach was delivered 8/25 and the public has until 9/25 for written comment. Program office presented to the BIMS on 9/11. The annual tribal training is scheduled for the week of 9/15.	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement * Metric 1: Advisory Board meetings * Metric 2: Care Coordination Plan developed * Metric 3: Annual re-trainings conducted
Accomplishments	Upcoming Milestones
O7/17/20 VA FIELD 7/2020 ALASKA STAKEHOLDER VIRTUAL TRAINING EMAILED 7/2020 ALASKA PHARMACY MOD TRIBAL CONSULTATION ON CC APPROACH 9/11/20 PRESENTA IHS/THP II	
OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	N/A Risk: Mitigation:





Project Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

(b)(5)

Key Performance Indicators (KPI)

Key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- 8/19-8/28 PHASE
 8/28-9/1 GENERATED

 III UAT (STALE UPDATED MODEL

 REFERRAL LOGIC) COST ESTIMATES
- 9/2 COMPLETED 8/27-9/14 TRAIN
 AMCMS/VA ESD THE TRAINER
 INTEGRATION SESSIONS
- 9/11 STALE
 REFERRAL LOGIC
 UAT RE-TESTING
- 9/16-9/23 AMCMS VIRTUAL WEBINAR TRAININGS

Upcoming Milestones

- 9/22 NATIONAL DEPLOYMENT GATE REVIEW
- 9/30 LESSONS LEARNED UPDATE

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Continuity of Operations Plan (COOP)

Development

DECISION: No ELC decisions needed at this time.		Project Description	Key Performance Indicators (KPI)
		The project scope is to develop a standardized Continuity of Operations Plan (COOP) policy, in addition, the creation of a COOP document for each OCC Directorate. In parallel, to the policy/plans, the development and implementation of an electronic single repository.	 Metric 1: Process for unscheduled outage notification Metric 2: COOPs developed Metric 3: COOP Policy developed Metric 4: Repository complete Metric 5: KMS and SOPs updated
Accomplishments		Upcoming Milestones	
08/04/2020 – APPROVED FOR GO AT CCSC 08/13/2020 – KICK-OFF PROJECT MEETING	DIRECTORATES		10/20- COOP 12/15/20 – COOP /ELOPMENT POLICY DEVELOPMENT
OCC Business Dependencies - Lite		Office of Information and Techn	nology (OIT) / Data Dependencies - Lite
Highlight OCC Business Dependencies:		Highlight OIT/Data Dependencies (b)(5)	:

(b)(5)



OCC Data Governance Project

Initiation

Executive Leadership Committee (ELC) Decision Needed / **Priority Discussion**

DECISION: No ELC decisions needed at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

OIT / Data Dependencies

Key Performance Indicators (KPI)

- Frequency data reported as accessible timely, complete, accurate and reliable
- · Percent of compliance with policies
- · Percent of systems achieving established performance metrics
- · Percent of systems with complete documentation

Accomplishments

8/26/20 FINALIZED STRATEGIC BEGAN PTF ENTRY FOR **PRIORITIES**

8/31/2020 **CCRS & PCM CLAIMS** 9/2/2020 SYSTEMS DOCUMENTS **GAP ANALYSIS**

9/30/2020 CREATE TECHNOLOGY AND DATA **GOVERNANCE ROAD MAP**

10/14/2020 DRAFT DATA GOVERNANCE STRUCTURE ROLES/ RESPONSIBILITIES

Upcoming Milestones

0 10/28/2020 **OBTAIN APPROVAL SYSTEMS DOCUMENTATION STANDARD**

осс	Busi	ness	Dep	oen	den	cies

(b)(5)

(b)(5)

Enrollment System Community Care(ESCC)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

• **DECISION:** No ELC decisions needed at this time.

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

O9/20 PRODUCTION
RELEASE FOR CC
COLLATERAL OF
VETERANS AND NOT
ENROLLED COVERED
VETERANS

09/20 MET WITH

TW AND OPTUM

TO DISCUSS

SUMMARY OF

CHANGES TO

ELIGIBILITY FILE

COMPLETED RFM FOR NEW VCE CODES AND SUBMITTED TO COR TEAM 09/2020 COLLABORATED
WITH ELIGIBILITY OIT
TEAM TO PAUSE RELEASE
OF LINKING SPONSOR OF
COLLATERAL OF VETERANS

09/2020 ES RELEASE TO
EXPAND STATIC ELIGIBILITY TO
NOT ENROLLED COVERED
VETERANS AND INCLUDE COPY
OF RECORDS IN ELIGIBILITY FILE

Upcoming Milestones

● 09/2020 ES RELEASE TO
AUTOMATE COLLATERAL OF
VETERAN PROCESS TO
INCLUDE COPY OF RECORDS
IN ELIGIBILITY FILE (PHASE I)

OCC Business Dependencies

- Highlight OCC Business Dependencies:
- · Clinical Integration (Business Owners)
- System Engineering Management (SEM) (b)(5)
- Business Intelligence Service Line (BISL) (b)(5)
- Community Care Contractor (CCN) (b)(5)
- VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO)

Issue:

Mitigation:

Office of Information and Technology (OIT) / Data Dependencies

Jeans

Issue

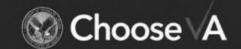
(b)(5)

Mitigation:

Retail Pharmacy Program

Close Out

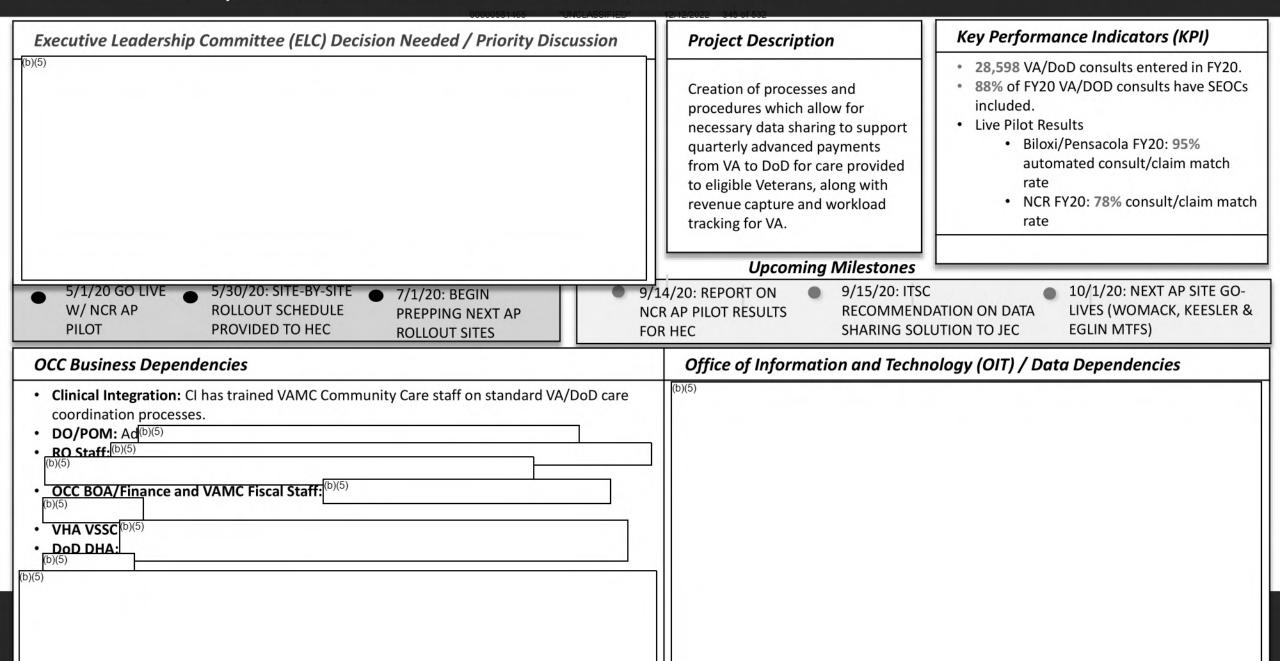
Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
DECISION: No ELC decisions needed at this time.	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods • Metric 1: over 100,000 Veteran's vaccinated • Metric 2:Reimburse Walgreens 99% accuracy
Accomplishments	Upcoming Milestones
FILE/INVOICE SENT	0/1/2020 CLOSE • • • • • • • • • • • • • • • • • • •
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(5) (b)(5)	RISK:
Mitigation:	





VA DoD Payment and Referral Standardization

Development



VA DoD Revenue Standardization

Development

Project Description Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Key Performance Indicators (KPI)** the VHA DoD support Reimbursement pilots with a webbased tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment batch processing, DECISION: No ELC decisions needed at this time. invoice Methodology. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 5/15/2020 SEM 8/31/20 VSSC VALIDATION 9/1/20 SEM **2019 SEM BUSINESS** 10/01/20 FUNCTIONAL SHAREPOINT TOOL SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE OF DOD DATA COMPLETE **USER TESTING** COMPLETE **TESTING OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies (b)(5)There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff). (b)(5)

Community Care Integrated Billing and Accounts Receivable (CC IB/AR) - Phase 2

Project Phase – Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

 The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

· No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1) AR PATCH NATIONALLY **RELEASED**
- **NATIONALLY RELEASED**
- 06/02/20 IB 675 **a** 08/13/20 IB 677 NATIONALLY **RELEASED**
- 09/10/20 IB PATCH **678 NATIONALLY RELEASED**
- 09/30/20 AR PATCH **361 NATIONALLY** RELEASING
- AR PATCH 372 & IB PATCH 682 ARE IN DEVELOPMENT AND NATIONAL RELEASE IS TARGETED FOR 10/19/20

Upcoming Milestones

12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

· No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Downstream Dependency – None at this time.

(b)(5)

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion				
(b)(5)				

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS
- 06/15/20 CPAC VIRTUAL TRAINING BEGINS
- 07/09/20 TRAINING SESSION FOR WFD AND POLICY ANALYST COMPLETE
- 07/24/20 MAIL
 ROOM CLERK
 TRAINING COMPLETE
- 08/27/20 PRODUCTION SCANS COMPLETE
- 08/28/20 PROJECT COMPLETE

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and Technology / Data Dependencies

this

Appendix

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Decision	Ops Notified	CCSC Presentation Date	Ops PM Resource Assigned
ePrescribing	6/19	6/23	Approved	6/29	9/14	8/24 (b)(6)
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	7/20 (b)(6)
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	7/21
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A
Community Care Claims SSN Reduction	7/21	8/11	Approved	8/13	TBD	TBD
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	TBD	TBD	TBD	TBD	TBD
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD
Integrated Product Environment	9/14	9/22	TBD	TBD	TBD	TBD





PMR 1 Projects

EHRM

Office of Community Care (OCC)/Cerner Integration

Implement CCN

Community Care Claims Reimbursement (CCRS)

Community Care Network (CCN)

Enterprise Program Reporting System (EPRS)

Indian/Tribal Health Coordination (ITHC)

Innovate Business Model

Advanced Medical Cost Management System (AMCMS)

Community Care Referral and Authorization System (CCR&A)

One Consult 2.0

Provider Profile Management System (PPMS)

OCC Data Governance

OCC Continuity of Operations Plan (COOP)

MISSION Support

Community Care Integrated Billing and Accounts Receivable (CC IB/AR) Phase 2

CPAC Document Scanning

Enrollment System Community Care

Urgent Care Integrated Project Team

Other

Retail Pharmacy Influenza Program

VA/DoD Advanced Payment and Referral Standardization

VA/DoD Revenue Standardization





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12/12/2022 352 of 532

Community Care Business Program Management Review (PMR) #1

10/27/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

- Hot Topics
 - Payer Electronic Data Interchange (EDI) Prioritization
- OCC Priority Project Review
 - VA/DoD Referral Standardization
 - Community Care Reimbursement System (CCRS)
 - Enterprise Program Reporting System (EPRS)
 - Urgent Care IPT
- Appendix
 - Project Review
 - Project Idea Evaluation Updates
 - Veteran Credit Updates





Hot Topic: Payer Electronic Data Interchange (EDI) Prioritization

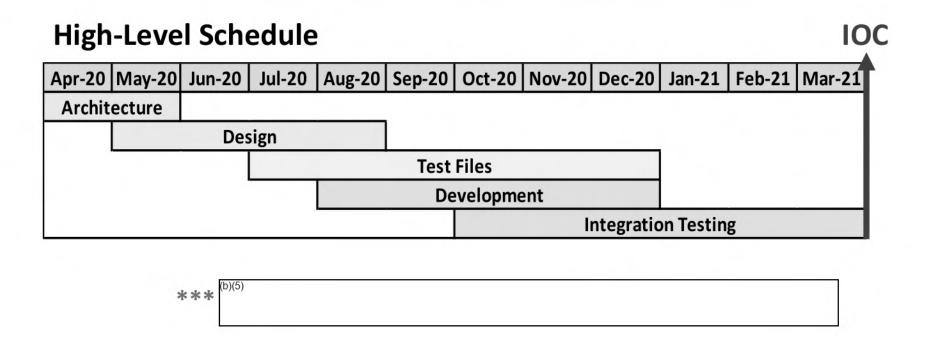




Current Payer EDI Priorities

Claims XM Development and Implementation

- Three Product Teams; 95% dedicated to Claims XM.
- Estimated completion on or about 1 April 21.
- Key Stakeholders Delivery Operations (Veteran Family Member Program).







Remaining Payer EDI Priorities/Stakeholders

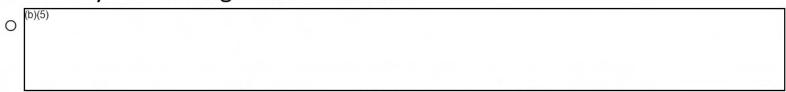
- EPRS (Parser)
 - o 837 work complete / 835 work remains.
 - o Key Stakeholders Provider Relations and Services, Chief Informatics Office.
- CAVE



- Key Stakeholders Clinical Integration, Delivery Operations, Chief Informatics Office.
- ARS

(b)(5)

- Key Stakeholders Delivery Operations, both POM and VFMP Staff.
- Community Care Billing SSN Reduction



o Key Stakeholders - Delivery Operations, Revenue, HSRM team.



Prioritization Decision

Backlog Prioritization (1-4)

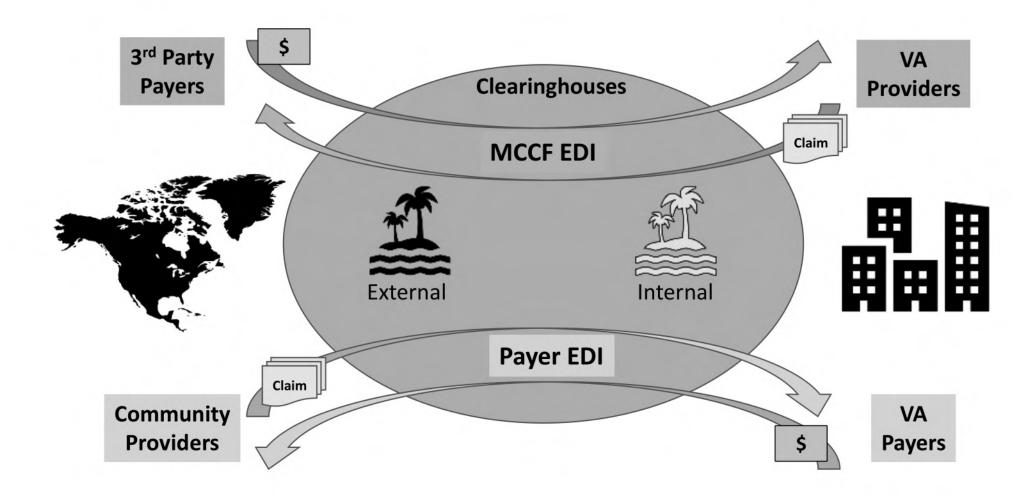
____EPRS (Parser)

____CAVE

___ARS

Community Care Billing SSN Reduction









Payer EDI Recent Highlights

- Oracle Upgrade (May 2020)
 - Updated Servers, Operating System, and Application Software
 - Zero EDI system failures since upgrade
- Backlog Elimination (August 2020)
 - Eliminated 1.5M claim backlog in 8 weeks
 - Increased capability to support 10x average daily rate

- Fee Payment Processing System (FPPS) MVP (August 2020)
 - Upgrade required to meet OIT security requirements
 - Limited capability restored while FBCS is retired





Priority Project Review





VA DoD Referral Standardization

Phased Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion				
b)(5)				
Accomplishm				

Project Description

Creation of processes and procedures which allow for necessary data sharing to support quarterly advanced payments from VA to DoD for care provided to eligible Veterans, along with revenue capture and workload tracking for VA.

Upcoming Milestones

Key Performance Indicators (KPI)

- 35,846 VA/DoD consults entered since FY20; 6,665 currently open
- 97% of open VA/DoD consults are in scheduled status
- · Live Pilot Results:
 - Biloxi/Pensacola FY20: 95% automated consult/claim clean match rate
 - NCR FY20: 70% consult/claim clean match rate

Accomplishments

- W/ NCR AP **PILOT**
 - 5/1/20 GO LIVE _ 9/14/20: REPORT ON _ NCR AP PILOT RESULTS FOR HEC
 - 10/8/20 : CARE COORDINATION SOP UPDATE RELEASE (HSRM USE) & TRAINING
- 11/18/20: HEC APPROVAL OF NEXT AP SITES GO-LIVE

11/30/20: CAREPOINT **EXCEPTIONS CLAIMS WORKLIST ROLLOUT**

12/1/20: NEXT AP SITE GO-LIVES (WOMACK, KEESLER/ EGLIN/TYNDALL MTFS)

OCC Business Dependencies

 Clinical Integration: CI has trained VAMC Co 	mmunity Care staff on standard VA/DoD care
coordination processes. Recently trained fie	ld on HSRM use for DoD
• DO/POM (b)(5)	
• RO Staff: (0)(5)	<u></u>
(b)(5)	
OCC BOA/Finance and VAMC Fiscal Staff: OCC BOA/Finance and VAMC Fiscal Staff:	(5)
(b)(5)	
VHA VSSC (b)(5)	
• DoD DHA:	
(b)(5)	
(5)	

Office of Information and Technology (OIT) / Data Dependencies

Community Care Reimbursement System (CCRS)

(b)(5)

(b)(5)

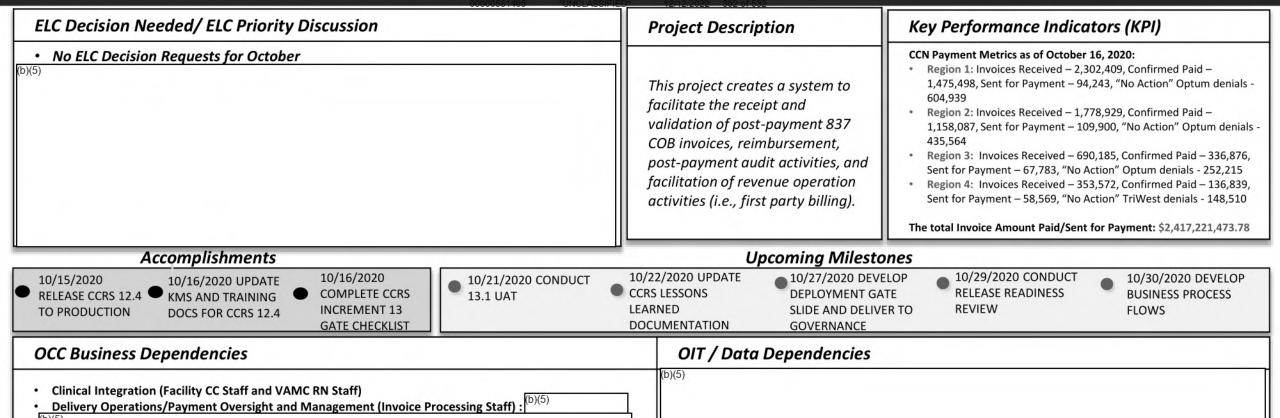
for CCN Invoices

VAMC / Fiscal Budget Staff (b)(5)

Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)

Finance (OCC Finance and Informatics Staff): (b)(5)

National Deployment



For ELC Awarene	?SS	
0)(5)		
		ll l
		- 11

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 42/80 Users (Δ = +1)
- CCN Accreditation Waivers UI: 31/30 Users (No change)
- CCN Complaints & Grievances UI: 29/54 Users (No change)
- CCN Congressional Inquiries UI: 31/42 Users (No change)
- CCN Corrective Action Plans (CAPs) UI: 29/30 Users ($\Delta = +1$)
- CCN Network Adequacy Deviations UI: 28/51 Users (No change)

Accomplishments

08/20/2020 EPRS Release 6.0 D: EDI 837
 7.0 D: EPRS Data Data Layer Rework

08/28/2020 EPRS Release 09/30/2020: EPRS Pre-

Integration (eCAMs)

Prod R10.0: Complaints **UI & Quality Check**

10/14/2020: EPRS SQA R10.1:

Congressional Inquiries & N.A. Deviations

10/29/2020: EPRS Prod R10.0: Complaints UI &

Quality Check

12/04/2020: EPRS Prod

Upcoming Milestones

R12.0: EPRS Technical Data R10.1: Congressional Integration for CCRS

12/16/2020: EPRS Prod

Inquiries & N.A. Deviations

OCC Business Dependencies

Project Dependencies

• Community Care Contract Administration/Support (CCCA/S) (b)(5)

Community Care Network Management (NM): (b)(5)

OIT / Data Dependencies





Urgent Care IPT

National Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

Implementation Updates:

- 1. R4 Webinar held on 9/23 and 9/24, with over 500 participants at each session.
- 2. CCN Urgent Care for Region 4 went live on 9/30.
- 3. Region 4 Office Hours and Daily sync up held on go-live week to support implementation.

Project Description

Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.

Upcoming Milestones

Key Performance Indicators (KPI)

- Average Urgent Care authorizations:
 - Region 1: 1,400 per week
 - Region 2: 600 per week
 - Region 3: 1,350 per week
 - Region 4: 900 per week
- Average of 350 Urgent Care calls to VA Call Center per day

Accomplishments

- 09/29/20 CCN URGENT CARE REGION 4 KICK OFF
- 09/30/2020 CCN
 URGENT CARE
 REGION 4 GO-LIVE

TBD: REGION 5 UC

OCC Business Dependencies

· No Business Dependencies identified.

(b)(5)

Office of Information Technology / Data Dependencies

(b)(5

Appendix

PMR Project Slides





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

Cerner Referral Manager Functional Testing: 8/17/2020 – 8/28/2020 Exploratory Testing: 8/24/2020 – 8/29/2020

Super User Training: 8/10/2020-8/29/2020

ORA: 9/7/2020 End User Training (Spokane): 9/28/2020

HSRM SIU Interface Go-Live: End of September

IOC Go Live: 10/24/2020

Upcoming Milestones

OCC Business Dependencies

Highlight OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5)

-Payment Operations Management

-Revenue Operations (Facility Revenue, RUR, and CPAC Staff)

-Women's Health (IVF and Infertility)

b)(5)

OIT / Data Dependencies

Community Care Network

Post Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

• **DECISION:** No ELC decisions needed at this time.

Project Description

Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

- CCN is fully deployed across 49 states within Regions 1-
- As of September 30, 2020, Urgent Care is live across CCN Regions 1-4.
- · CCN Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1.

Accomplishments

06/08/20 R4P1 SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

(b)(5)

GO-LIVE

● 06/16/20 R3P2 ● 07/21/20 R4P2 ● 08/11/20 R4P3 ● 08/25/20 R4P4 SHCD ● 09/01/20 R2 & R3 URGENT ● 09/30/20 R4 URGENT CARE CUTOVER FROM PC3

CARE CUTOVER FROM PC3

 04/01/21 R5 SHCD **GO-LIVE**

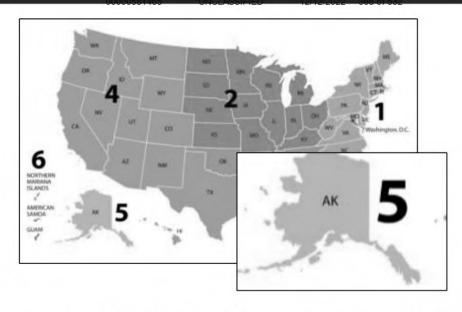
Upcoming Milestones

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

Post Deployment of CCN Network Management (b)(5) Clinical Integration (b)(5) Contract Administration(b)(5)

Region 5 Announcement

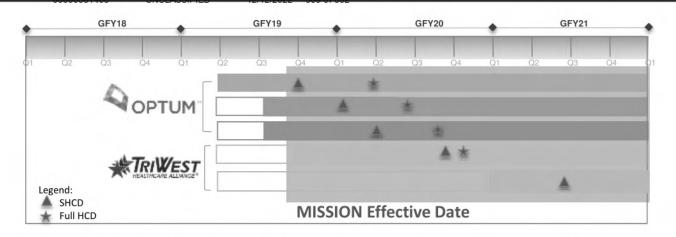


- Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1/2020.
- The Post Award Meeting is scheduled for 10/19/2020.
- The Kickoff Meeting is scheduled for 11/4/2020.
- Region 5 has a Veteran population of more than 68,000 with more than 33,000 Veterans enrolled in healthcare.





CCN Contract Award and Implementation Update



CCN Regions



- Awarded 12/28/18, start of health care delivery (SHCD) 6/26/19, full deployment by 12/28/19
- Awarded 12/28/18, protest filed 1/22/19, protest resolved 5/2/19, performance resumed 5/6/19, SHCD 10/7/19, full deployment by 4/9/20
- Awarded 12/28/18, protest resolved 5/3/19, appeal with the US Court of Federal Claims, stay of performance to Optum lifted on 7/22; SHCD on 10/7/19, full HCD achieved by 6/22/20
- Pre-Award protest dismissed; award made 8/6/19, SHCD 6/8/20, full HCD achieved 8/31/2020
- Awarded 10/1, Post Award Meeting 10/19, Kick-off Meeting 11/4, SHCD March 2021, full HCD by 4/1/21
- R6 Pre-Solicitation



Indian-Tribal Health Coordination

National Deployment

00000581465 "UNCLASSIFIED"	12/12/2022 - 370 of 582
ELC Decision Needed/ ELC Priority Discussion	Project Description Key Performance Indicators (KPI)
No ELC decisions needed. Accomplishments: • Agreement modification was completed. Among the items it expands reimbursement to include telehealth and COVID related services by third party partners to IHS/THP sites (AKA PRC). • CC approach – Draft final pan completed and will be sent for wider VA concurrence week of 10/21/20. • Program office presented to the BIMS on 9/11. • The annual tribal retraining held week of 9/15. • Internal controls SOP completed	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement - Metric 1: Advisory Board meetings - Metric 2: Care Coordination Plan developed - Metric 3: Annual re-trainings conducted
Accomplishments	Upcoming Milestones
PHARMACY MOD TRIBLE CONSOLIATION	09/23/2020 IHS/THP ATION ON RAP STATUS 09/23/2020 IHS/THP VIRTUAL RETRAINING
OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	N/A Risk: Mitigation:





Executive Leadership Committee (ELC) Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- 9/28-10/5 STALE REFERRAL LOGIC **UAT ROUND 4**
- 10/8 UAT TEST **EVALUATION** REPORT APPROVED
- 10/9 VISN 8 **KICKOFF MEETING**
- 10/13 NATIONAL **DEPLOYMENT GATE REVIEW APPROVAL**
- 10/19 NATIONAL **DEPLOYMENT OF AMCMS MODEL**
- 10/19-10/26 AMCMS 10/21 NETWORK VIRTUAL WEBINAR **TRAININGS**

Upcoming Milestones

- MANAGEMENT REQUIREMENTS GATHERING
- 10/27 LESSONS **LEARNED** UPDATE

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

N/A ELC Decision Needed/ ELC Priority Discussion

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- 3,210,309: Total Referrals FY 2020 (Through 10/9/2020)
- 185,645: Total Referrals FY 2019
- 18,229: Total number of VA user accounts provisioned
- 18,320: Number of Community Providers provisioned
- 6,569: Number of unique Community Provider locations
- 148: Number of VAMC sites actively using HSRM
- 5,272: Support Ticket Count for September
- Top 3 Support Ticket Categories for September:
 - 1. Provisioning/needs access-VAMC
 - 2. Provisioning/needs access-community provider
 - 3. Training/knowledge issue

Accomplishments

09/26/2020 CERNER SCHEDULING MESSAGE GO-LIVE 10/19/2020 RELEASE 11 UAT START

- 10/24/2020
 CERNER SPOKANE
 GO-LIVE
- 10/28/2020 CAEC 1.5 GO/NO GO PRESENTATION
- NOVEMBER 2020 CAEC 1.5 ND RELEASE

Upcoming Milestones

- 11/13/2020 RELEASE 11 GO/NO GO PRESENTATION
- 11/23/2020 RELEASE 11 ND

OCC Business Dependencies

Highlight OCC Business Dependencies: Clinical Integration (CI Field Support Director & Assistants): Delivery Operations/POM3 Delivery Operations/POM3 Finance (OCC Finance and Informatics Staff): Revenue Operations (Facility Revenue, RUR, and CPAC Staff): (b)(5) Revenue Operations (Facility Revenue, RUR, and CPAC Staff): (b)(5)

OIT / Data Dependencies



Overview of Release 11.0 Enhancements

 Release 11 will contain several general HSRM enhancements in addition to HL7, MVI, Task Management, and Offline Referral Form enhancements. All of which will increase HSRM usability and efficiency.

HL7 Messaging

- Add Appointment Scheduled Method to HL7 SIU Outbound
- Add Treating Specialty to HL7 SIU Message
- SIU Message to Cerner Contain Scheduling and Cancellation Notes

Task Management Enhancements

Create new manual task- ""Message VA to VA""

MVI

- MVI Audit Trail: Display Veteran Data changes from MVI
- MVI Integration: Receive Veteran Demographic updates from MVI

Reporting

- Add Level of Care to the CI Tasking Reports
 - Community Wait Times Report Enhancements, and adds "Recorded Date"

Community Provider Provisioning Enhancements

- The ability to provision community providers by NPIs.
- Referral lists would only display referrals where the assigned care provider NPI matches.

Offline Referral Form

- Prevent users from being able to generate an Offline Referral Form if there is no provider assigned
 - Message displayed instructing the user to add a provider

Veteran Eligibility Status workflow

- Eligible status Referral workflow as normal
- Non-Eligible status Program authority locked and ability to refresh eligibility data

Additional HSRM Enhancements

- FY22-FY23 Bene Travel Program Authority
- Limit ability to change Affiliation for CCN1-6 Users
- Make Provider a required field unless there is an optional task
- Add Appointment Date Timestamp to Data Feed
- Enable/Disable interfaces via task
- Modify logic to trigger downstream update to a referral; when any value changes on the Referral Detail Page or Appointments are recorded
- Notify CCRS of Affiliation Changes
- Refactor Task API for General CCRA Use
- Improve Error log handling by blocking any outgoing messages where providers do not have an email listed on their provider profile
- Allocate Revenue tasks for further review- Modifiable Due Dates (Tickle Feature)
- Pre-cert Auto Task Due Date Update
- Remove taxonomy code from PPMS Provider Search results, display only the description
 - Add date range to audit trail filters



Overview of Release 10.0 Enhancements

 Release 10 contains general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





One Consult 2.0

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description	Key Performance Indicators (KPI)		
DECISION: No decision requested at this time (b)(5)	One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies	 DST integrated into CPRS- Q1 FY 21 CTB integrated into CPRS- Q2 FY 21 		
Accomplishments	Upcoming Milestones			
CTB 1.9.0077 CTB 1.9.0077 DST MAPPING COMPLETED CTB V2.0 CTB V2.0 SPRING DEVELOPMENT SQA TESTING TABLE REQUIREMENTS 1 DEVELOPMENT COMPLETED: UPDATES GATHERING AND COMPLETED: 10/05/2020 10/13/2020 WENT LIVE: WIREFRAMES: 10/9/2020 10/1/2020 10/1/2020	CTB V1.9.0076: CTB V1.9.0077: CTB V2	CTB v2.0 DST OFFICE COMSULT HOURS ETE FACTORS CONTINUE:		
OCC Business Dependencies	OIT / Data Dependencies			



ELC Decision Needed/ ELC Priority Discussion	Project Description 167W00K Acres 167W2022 167X 1 Change F 167X 167
• Priority Discussion: (b)(5)	Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information.
Accomplishments	Upcoming Milestones
PPMS 8.1 VA.GOV HOTFIX 8.1.1.1 VA CPL PPMS 9.0 VA.GOV PPMS 9.0 9/9 GO-LIVE SPRINT 25 RELEASE NATIONAL NATIONAL SPRINT 27 GO-LIVE PIE	8/20/2020 — ● 8/25/2020 ● 09/8/2020 ● 09/15/20 ● 09/25/20 ■ 10/27/20 ● 11/5/20 PPMS 9.1 PPMS 9.1 PPMS 10 PPMS 10 PPMS 10 NATIONAL GO-LIVE GATE REVIEW GATE REVIEW
OCC Business Dependencies	OIT / Data Dependencies
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacv - (b)(5) 	(b)(5)



ELC Decision Needed/ ELC Priority Discussion

Decision: None

Priority Discussion: None

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- · Frequency data reported as accessible timely, complete, accurate and reliable
- Percent of compliance with policies
- Percent of systems achieving established performance metrics
- · Percent of systems with complete documentation

Accomplishments

10/7/2020 SPONSORED ISSUES TRACKER DG WORKGROUP GOVERNANCE ROAD MAP

10/14/2020 **APPROVED TECH & DATA**

10/16/2020 **INITIATED E-REPOS DATA USABILITY ANALYSIS**

10/21/2020 **APPROVED STANDARD** SYSTEMS ARTIFACTS

10/30/2020 DRAFT DATA GOVERNANCE **COMMUNICATION PLAN**

Upcoming Milestones

11/18/2020 CHANGE MANAGEMENT SPONSOR PLAN

11/25/2020 DRAFT DATA GOVERNANCE STRUCTURE

OCC Business Dependencies

Upstream Dependencies

- VA Data Governance (b)(5)
- **OIT** (b)(5) (b)(5)

(b)(5)

OIT / Data Dependencies

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Need	Project Description Key Performance Indicators (KP				
DECISION: NO ELC decision currently		The project scope is to destandardized Continuity of Operations Plan (COOP) A for all mission critical OCC and functions. Also, a standardized process for scheduled and unschedule system outage with an Aft Action Report.	f ppendix systems	 Metric 1: Process for unscheduled outage notification Metric 2: COOPs developed Metric 3: Repository complete Metric 4: KMS and SOPs updated 	
Accomplishments		Upcoming Mile	estones		
08/04/2020 – APPROVED FOR GO AT CCSC 08/13/2020 – KICK-OFF PROJECT MEETING	10/27/20 – DIRECTORATES SYSTEMS/FUNCTIONS	11/10/20- NOTIFICATION OF UNSCHEDULED SYSTEM OUTAGE PROCESS		.0/20- COOP ELOPMENT	
OCC Business Dependencies - Lite		Office of Information of	and Techno	ology (OIT) / Data Dependencies - Lite	
Highlight OCC Business Dependencies:		Highlight OIT/Data Dep	pendencies:		

(b)(5)



(b)(5)



Community Care Integrated Billing and Accounts Receivable (CC IB/AR) - Phase 2

National Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

 The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

· No specific KPI's were identified for this phase of the project.

Upcoming Milestones

Accomplishments

- 05/18/20 (2) IB & (1) AR PATCH NATIONALLY RELEASED
 - 06/02/20 IB 675 **NATIONALLY RELEASED**
- **NATIONALLY RELEASED**
- NATIONALLY RELEASED
- **NATIONALLY** RELEASED

(b)(5)

- 08/13/20 IB 677 09/10/20 IB 678 09/30/20 AR 361 10/19/20 IB 682 NATIONALLY **RELEASED**
- AR 372 & IB 689 ARE NATIONALLY RELEASING ON 11/09 & 11/04
 - **12/04/20** CONTRACT COMPLETED

OCC Business Dependencies

· No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Downstream Dependency – None at this time.

Enrollment System Community Care (ESCC)

Development

Executive Leadership Committee (ELC)
Decision Needed / Priority Discussion

DECISION:

No ELC decisions needed or priority discussion topics at this time.

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

09 09/2020 ES RELEASE TO EXPAND STATIC ELIGIBILITY TO NOT ENROLLED COVERED VETERANS (INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE IS TURNED OFF UNTIL CONTRACT MOD IS COMPLETED) ● 09/2020 SUCCESSFUL MEETING WITH TW AND OPTUM TO DISCUSS SUMMARY OF CHANGES TO ELIGIBILITY FILE

●10/2020 CC ELIGIBILITY

VCE MODIFICATION SENT

TO CCN CONTRACTORS.

AWAITING FINAL

APPROVAL

■11/2020 TURN ON ES/VISTA
FUNCTIONALITY TO AUTOMATE
COLLATERAL OF VETERAN ELIGIBILITY
(INCLUDE COPY OF RECORDS IN
ELIGIBILITY FILE IS TURNED OFF UNTIL
CONTRACT MOD IS COMPLETED)

Upcoming Milestones

OCC Business Dependencies

- Highlight OCC Business Dependencies:
 Clinical Integration (Business Owners)
 System Engineering Management (SEM) (b)(5)
- Business Intelligence Service Line (BISL) (b)(5)
- Community Care Contractor (CCN) (b)(5)
- VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO)

Issue:

Mitigation:

Office of Information and	Technology (OIT) /	' Data Dependencies
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Issue Mitigation:

VA DoD Revenue Standardization

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No new decisions needed from Revenue Operations regarding back end process at this time.

Project Description

the VHA DoD support Reimbursement pilots with a webbased tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly batch processing, invoice streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports.

Key Performance Indicators (KPI)

Align with the VA/DoD Advanced Payment Methodology.

Accomplishments

2019 SEM BUSINESS ANALYST TASKS COMPLETE

5/15/2020 SEM SHAREPOINT DEVELOPMENT COMPLETE

8/31/20 VSSC VALIDATION OF DOD DATA COMPLETE

Upcoming Milestones

10/31 VSSC CONTINUATION OF VALIDATING AND CODING OF DOD DATA

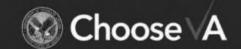
11/1 DOD APPROVED **EXPANSION** OUTCOME/DECISION

OCC Business Dependencies

- There are no dependencies to other OCC Directorates.
- Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

Office of Information and Technology (OIT) / Data Dependencies

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods • Metric 1: over 100,000 Veteran's vaccinated • Metric 2:Reimburse Walgreens 99% accuracy
Accomplishments	Upcoming Milestones
FILE/INVOICE SENT	JT RETAIL IARMACY
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies
(b)(5) (b)(6) (b)(5) (b)(5) (d)(5) (d)(7) (d)(8) (d	RISK:





Appendix

Project Idea Evaluation Updates





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Decision	Ops Notified	CCSC Presentation Date	CCSC Go / No Go	Ops PM Resource Assigned
Integrated Product Environment (IPE)	9/14	9/22	Approved	9/24	10/20	Go	10/9
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD	Resource not available until Nov. 1st
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	On Hold	TBD	TBD	TBD	TBD	TBD
Community Care Billing SSN Reduction	7/21	8/11	Approved	8/13	10/20	Go	10/2 (b)(6)
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A	N/A
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	Go	7/21
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	Go	7/20 (b)(6)
ePrescribing	6/19	6/23	Approved	6/29	9/15	Go	8/24

Veteran Credit Database

Deferred Project

veteran erean bataba	D0000581465 "1 INCL ASSISTE						
Executive Leadership Committee (ELC) Decision Needed / I	Priority Discussion	Project Description	Key Performance Indicators (KPI)				
 DECISION: No current ELC decision required at this time. BACKGROUND: Enactment of Law on 5/24/2018 – Implementation Deadlin 	e 5/24/2019	To provide oversight for ongoing policy and IT funding efforts in conjunction with Sec. 302 Protecting Veterans Credit Protection Act of 2018 including efforts to obtain legislative relief.	 g policy and IT g efforts in ction with Sec. 302 ing Veterans Credit ition Act of 2018 ng efforts to obtain and paper claims are paid within 45 days. Metric 2: Ensures Veteran cost share and deductibles are adjudicated accurately. Metric 3: 100% of information furnished to credit reporting agencies will be verified Veteran responsible debt. Metric 4: Decrease in Appeals and Calls for improperly 				
Accomplishments	_	Upcoming M	lilestones				
VIPR V18-00312-000 for automated solution submitted. Status as of 1/08/2020 –Unfunded Request/Pending Resources	• JANUARY 2021	L-LEGISLATIVE RELIEF REQUEST FO	R FY23 LEGISLATIVE CYCLE WILL BE SUBMITTED.				
OCC Business Dependencies		Office of Information a	nd Technology (OIT) / Data Dependencies				
)(5)		(b)(5)					

0000581465

"LINCLASSIFIED"

12/12/2022 386 of 532

Community Care Business Program Management Review (PMR) #1

11/24/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

- Project Idea Evaluation (PIE)
 - VA Provider CCN Retail Pharmacy Capability
 - Referral Based Obligations
- OCC Priority Project Review
 - VA/DoD Advanced Payment and Referral Standardization
 - Provider Profile Management System (PPMS)
 - Community Care Reimbursement System (CCRS)
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





Project Idea Evaluation (PIE)

- VA Provider CCN Retail Pharmacy Capability
 - Referral Based Obligations





VA Provider CCN Retail Pharmacy Capability

Originator & Date: 11/1	needed (urgent/emergent)	he operation প্রাপ্তারি কার্ত্তর বিশ্বাক কর্মি কার্ত্তর (Initially in Region 4) to allow Veterans who need an immediately prescriptions prescribed by a VA provider to be filled at a CCN retail community pharmacy when access ssible for Regions 1, 2, 3 and 4.			
		Additional Impact			
Business Ops & Admin:	(b)(5)	Policy Impact:	No Additional Impacts identified		
Delivery Ops:		Funding Impact / Status:	(b)(5)		
Revenue Ops:		Impact on Other OCC Projects:			
Clinical & Network Mgmt:					
OCC Leadership (Includes IDA and BIC):		Impact if Project Idea Not Approved:			
Community Care Network (Contract Mod):	Contract Mod already in place for Region 4 has been provided for implementation date Contract mod in progress for Regions 1-3.				
Recommended OCC	Strategic Priority Alignment	Recommended Project Designation	n Recommended Business Owner		

Recommended OCC Strategic Priority Alignment	Recommended Project Designation	Recommended Business Owner
Implement Community Care Network (CCN) Improve Customer Service	OCC Directorate Managed	(b)(6)



Discussion:



Referral Based Obligations

(b)(6)	-	000005814	65 "UNCLASSIFIED"	12/12/2022. 390 of 532.		
Originator & Date: 11/17/2	020	Scope Definition: OCC nee Community Care programs	eds to assess a	nd establish an interim and lo	ng-term process for reco	ording obligations for
Impact				Additional Impact		
Business Ops & Admin:	(b)(5)			Policy Impact: (b)(5)		-7
Delivery Ops:	CCRS, F	FMS, eCAMS, PIT		Funding Impact / Status:		
Revenue Ops:	No impact identified at this time.			Impact on Other OCC Projects:		
Clinical & Network Mgmt:	(b)(5)		14			
OCC Leadership						
(Includes IDA and BIC):				Impact if Project Idea Not Approved:		
Community Care Network (Contract Mod):						
Recommended OC	C Strate	egic Priority Alignment	Recommer	nded Project Designation		Business Owner
Improve Claims Processing	& Innovat	e Business Model	OCC Managed		(b)(6)	
Discussion:						

OCC Policy, OCC Finance, and Portfolio Managers Vote Count: All Yes votes received (no dissents).

Priority Project Review

Project Status Slides





(b)(5)				Project Description	n		Key Performanc	e Indicator
			Creation of processes and procedures which allow for necessary data sharing to support quarterly advanced payments from VA to DoD for care provided to eligible Veterans, along with revenue capture and workload tracking for VA.			 40,009 VA/DoD consults entered since FY20 6,160 open VA/DOD consults. Live Pilot Results for AP auto claims validation: Biloxi VAMC/Pensacola NH: 96% NCR Region: 74% 		
Accom	nplishments:				Milestones:			
2020-10-05: SOP Update Release (VA HSRM use)	2020-10-08: Updated Care Coordination Training	Appro	11-27: HEC oval of Next AP go-live	2020-12-18: CarePoint Exceptions Claims Worklist Rollout	2020-12-23: VA/DoD Leadership Meeting: FY21 Q2 Rollouts	2021- Rollo	-01-01: AP FY21 Q2 outs	2021-04-01: AP FY21 Q Rollouts
	OCC Business Dependencies				Office of Information and	l Technolo	gies/Data Depende	ncies
• (b)(5) • Risks Risk: (b)(5)				(b)(5)				



Provider Profile Management System (PPMS)

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion	Project Description Key Performance Indicator	Key Performance Indicator	
(b)(5)	Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information. CCN Network growth Provider processing capacity - backlog monitoring		
Accomplishments:	Milestones:		
2020-11-10: PIE - UAT 2020-11-13: PIE - Go-Live 2020-12-07: PPMS 10.1 WRJ UAT	2020-12-08: PPMS 10.1 2020-12-15: PIE Restart 2020-12-17: PPMS 10.1 Go/No-Go Priority Sites Go-Live		
OCC Business Dependencies	Office of Information and Technologies/Data Dependencies		
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy (b)(5) Risks 	(b)(5) Issues		





ELC Decision Needed/Priority Discussion

For awareness:

CCRS implemented a temporary bypass the PPMS check to mitigate payments being denied. CCRS is establishing a grace period (72 hrs) for ER services due to the high denial volume based on misaligned validity dates on the referral.

Project Description

CCRS: A system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, postpayment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicator

CCN Payment Metrics as of November 20, 2020: **Region 1:** Invoices Received – 2,899,265, Confirmed Paid – 1,967,817, Sent for Payment – 84,184, "No Action" Optum denials - 716.105

Region 2: Invoices Received – 2,449,478, Confirmed Paid – 1,729,199, Sent for Payment – 100,245, "No Action" Optum denials - 540.310

Region 3: Invoices Received – 1,173,375, Confirmed Paid – 717,423, Sent for Payment – 75,102, "No Action" Optum denials - 353.692

Region 4: Invoices Received – 802,202, Confirmed Paid – 474,834, Sent for Payment – 95,770, "No Action" TriWest denials - 203,698

The total Invoice Amount Paid/Sent for Payment: \$3,465,670,309.41

Accomplishments:

2020-10-15: CCRS Release 12.4 2020-11-05: CCRS Release 13.1

1-05: CCRS 2020-12-03: CCRS Release 13.1

2020-12-17: CCRS Release 13.3

Milestones:

2021-01-07: CCRS Release 13.4

OCC Business Dependencies

CCRA, FMS, PPMS, PIT, and MVI

Risks

(b)(5)

Office of Information and Technologies/Data Dependencies

CCRA, SEOC, PPMS, MVI, EDI, DAS, and CCN Contractors

Issues

(b)(5)

Appendix

Project Status Slides





ELC Decision Needed/Priority Discussion

No ELC decisions needed or priority discussion topics at this time

Project Description

This project establishes a Data Governance Program to ensure reliable, dependable, consistent, and well documented data. It includes creating a structure, adopting standards and policies that drive how data are used and maintained to ensure data quality.

Key Performance Indicator

- Number of data policies, practices, and standards established
- Percent of data issues resolved
- Number of completed data initiatives in data governance project portfolio
- Percent of data initiatives that meet or exceed established initiative targets

Accomplishments:

2020-10-21: Approved standard Systems
Artifacts

2020-11-09: Confirmed e-repos data usability

2020-11-09: Draft
Data Governance
Communication Plan

Milestones:

2020-11-25: Draft Data Governance Structure 2020-11-30: Change
 Management Sponsor Plan

OCC Business Dependencies

(b)(5)

Office of Information and Technologies/Data Dependencies

(b)(5)

Issues
-- No Issues Found --



ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

- (Spokane) IOC Go Live: 10/24/2020
- Mann-GrandStaff VAMC

 Completed first iteration of lessons learned with OCM: 11/05/2020
- **HSRM Release 11** (interface updates for HSRM, may not be in effect until Cerner CS2): 11/24/2020
- **Upcoming Milestones** Chalmers P. Wylie VA ACC

(Columbus) Go Live: Spring 2021

- Jonathan M. Wainwright Memorial VAMC (Walla Walla) Go Live: Spring 2021
- White City VAMC Go Live: Spring 2021

OCC Business Dependencies

-Clinical Integration and Mann Grandstaff Facility CC Staff

OIT / Data Dependencies

ELC Decision Needed/Priority Discussion

No ELC decision was needed or priority discussion topics during this time period. **Project Description**

Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicator

- CCN is fully deployed across 49 states within Regions 1-4.
- Regions 1-3 all reported more than 92% of referrals through CCN, remaining consistent with prior weeks.
- Region 4 continues to see a positive trend in CCN utilization (+87% last week in October).
- As of September 30, 2020, Urgent Care is live across CCN Regions 1-4.
- CCN Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1.

Accomplishments:

2020-09-01: R2 & R3 FROM PC3

2020-09-30: R4 URGENT

2021-04-01: R5 HCD

OCC Business Dependencies

Office of Information and Technologies/Data Dependencies

Issues

(b)(5)

-- No Issues Found --

Milestones:





ELC Decision Needed/Priority Discussion	Project Description Key Performance Indicator
(b)(5)	 EPRS delivers a series of custom-built user interface (UI) screens and reporting system and data integrations for administering the CCN contract. Quality Check UI: 42/80 Users (Δ = +1) CCN Accreditation Waivers UI: 31/30 Users (No change) CCN Complaints & Grievances UI: 29/54 Users (No change) CCN Congressional Inquiries UI: 31/42 Users (No change) CCN Corrective Action Plans (CAPs) UI: 29/Users (Δ = +1) CCN Network Adequacy Deviations UI: 28/Users (No change)
Accomplishments:	Milestones:
2020-08-28: 7.0 D: eCAMS – Technical Release	
OCC Business Dependen	Office of Information and Technologies/Data Dependencies
(6)(5)	(b)(5)



Risks -- No Risks Found --



No ELC decision is needed or priority discussion topics at this time

Project Description

Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts **Key Performance Indicator**

- 1. Advisory Board meetings
- 2. Care Coordination Plan developed
- 3. Annual re-trainings conducted

Accomplishments:

2020-09-11: Brief BIMs 2020-09-23: Tribe and VA

staff retraining

2020-12-03: CC Plan Adopted

OCC Business Dependencies
(b)(5)

Office of Information and Technologies/Data Dependencies

Milestones:

- None-Upstream
- None-Downstream

<u>Issues</u>



ELC Decision Needed/Priority Discussion	Project Description Key Performance Indi	Upon deployment, key financial & utilization metrics tracked include, but are not limited to: UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider. FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget	
No ELC decisions needed or priority discussion topics at this time.	Deploy AMCMS (SaaS) product that integrates Community Care management through data analytics to accurately forecast, monitor and control Community Care's medical services. VISN 8 Nat. Insurance File model. tracked include, but are not limited • UM Metrics: Average Paid per Cla Number of Claims per Referral, Average Cost per CoC, per SEOC, Average Length of Stay, Foreign Visits Resulting in Inpatient Admissis per CC Provider. • FM Metrics: Spent/Obligated Am		
Accomplishments:	Milestones:		
2020 10 20. Alvicivis virtual 2020-11-12. LESSOIIS	2020-11-30: VISN 8 2020-12-04: Payment 2020-12-04: Phase 3 2020-12-04: Phase 3 User Governor Company of the Com		
OCC Business Dependencies	Office of Information and Technologies/Data Dependencies		
No Business Dependencies Found (b)(5)	(b)(5)		



FIC	D : - :	NI I	/D::	D:
ELC	Decision	Needed	Priority	Discussion
				2100001011

No ELC decisions needed or priority discussion topics at this time.

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicator

- 3,659,485: Total Referrals FY 2020 (through 10/31/2020)
- 185,601: Total Referral FY 2019
- 18,761: Total number of VA user accounts provisioned
- 22,923: Number of Community Provider user accounts provisioned
- 10,024: Number of unique Community Provider NPIs
- 148: Number of VAMC sites actively using
- 5,195: Support Ticket Count for October

Accomplishments:

2020-11-13: Release 11 Go/No Go Presentation

2020-11-17: CAEC 2.0 Go/No Go Presentation

2020-11-20: CAEC 2.0 National Deployment 2020-11-23: Release 11 National Deployment

Milestones:

Office of Information and Technologies/Data Dependencies

2021-01-25: Release 12 National Deployment (IRIS)

OCC Business Dependencies

-- No Risks Found --

Risks

(b)(5)

Issues



Project Phase - National Deployment

No ELC decisions needed or priority discussion topics at this time.

ELC Decision Needed/Priority Discussion

Project Description

One Consult 2.0 project combines continuing enhancement and development activities for Consult Toolbox (CBT), Decision Support Tool (DST) and SEOC Database under a single project management umbrella.

Key Performance Indicator

CTB integrated into CPRS- Q3 FY21 Metrics for CTB v2.0 are under development

Accomplishments:

- 10/23/2020: completed national Deployment of CTB 1.9.0076
- 10/26/2020: Began Training And Comms For CTB V2.0
- 2020-01-15: CTBv2.0 production"Dark Release"
- 2020-12-01: CTB 1.9.0078 National Rollout begins
- 2020-12-23: SEOC DB Cloud Migration

Milestones:

- 2021-01-15: CTB 2.0

 Deployment
- 2021-04-01: CTB v2.0 available to field users

OCC Business Dependencies
(b)(5)

Office of Information and Technologies/Data Dependencies

(b)(5)

<u>Issues</u>

ELC Decision Needed/Priority Discussion			Project Description	Key Performance Indicator	
No ELC decisions needed or priority discussions at this time		Continuity of C	cope is to develop a standardized Operations Plan (COOP) Appendix n critical OCC systems and	Metric 1: Communication Strategy Metric 2: Phase I – Prepare Complete Metric 3: Phase II – Respond Complete Metric 4: Phase III – Recover Complete Metric 5: Development of Exercise, Maintenance, and Communication Plan Metric 6: COOP Appendixes complete for each Directorate	
Accomplishments:			Milestones:		
2020-08-04: CCSC • Go/No-Go		2020-11-25: Developme Communication Strategy		2021-01-06: Phase II Respond Complete	
	OCC Business Dependencies		Office of Information and	d Technologies/Data Dependencies	
(b)(5) Risks (b)(5)			(b)(5) Issues		





ELC Decision Needed/Priority Discussion			2 7

No ELC decisions needed or priority discussion topics at this time.

Project Description

Develop an Integrated Product
Environment for isolated E2E and UAT

Key Performance Indicator

KPIs are currently being reviewed and finalized with Executive Owner and Business Sponsor

Accomplishments:

2020-11-19: Project Kickoff

2020-12-01: Stakeholder Assessment

2020-12-03: Data Dependencies

OCC Business Dependencies			
(b)(5)			
		V	

Office of Information and Technologies/Data Depe			
(b)(5)			

Milestones:

<u>Issues</u>





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) Phase 2

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion		+	Project Description		Key Performance Indicator	
			ntegrated Billing (IB) and Accounts able (AR) updates.		* No specific KPI's were identified for this phase of the project.	
Accomplishments:				Milestones:		
2020-11-04: IB 689 2020-11-12: AR 372 Nationally Released Nationally Released		ent Contract 🌘 N	020-12-05: 3 Nonth Extension Contract Begins	2020-12-11: RFP for new contract issued	2021-01-29: New Contract Awarded 2021-03-05: 3 Month Extension Contract Ends	
OCC Business Dependencies			Office of Information and Technologies/Data Dependencies			
No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project. Risks (b)(5)			No data dependencies at this time. Issues			
			No proj	ect issues at this	time.	



Enrollment System Community Care

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion	Project Description Key Performance Indicator
No ELC decisions needed or priority discussion topics at this time.	The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility. 1. Communicate the Community Care eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100% 2. Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily
Accomplishments:	Milestones:
2020-11-13: Successfully completed technical evaluation for CCN VCE static eligibility within 24 hours 2020-11-17: ES CC Hardship Information from Cerner was tested in SQA (Team Liberty)	2020-12-16: Turn on ES Parameter to share CC Collateral Eligibility 2020-12-16: National Release of vistA functionality 2020-12-20: VistA IOC sites testing functionality Office of Information and Technologies/Data Dependencies
OCC Business Dependencies	(b)(5)
• (b)(5) • (Risks	<u>Issues</u>
No Risks Found	No Issues Found





ELC Decision Needed/Priority Discussion

No ELC Decisions needed or priority discussion topics at this

Project Description

The VA/DoD Advanced Payment methodology produces a standardized flat file of DoD claim elements which can be utilized to standardized revenue processes for billing on those DOD claims across the nation.

Key Performance Indicator

Align with the VA/DoD Advanced Payment Methodology.

Accomplishments:

2019-10-11: Gate 3

2020-10-30: VSSC Data Validation

2020-11-27: DoD Approved **Expansion Outcome**

2020-12-31: VSSC Data Validation

Milestones:

2021-03-05: Project Start/Finish

OCC Business Dependencies

No Business dependencies at this time

Risks

time

-- No Risks Found --

Office of Information and Technologies/Data Dependencies

No OI&T Data dependencies at this time.

Issues

-- No Issues Found --





Appendix

Project Status Slides





Project Name	Received by PIE Team	Presented at PMR	PMR Idea Decision	Ops Notified	CCSC Presentation Date	CCSC Project Go / No Go	Ops PM Resource Assigned
Referral Based Obligations	11/17	11/24	TBD	TBD	TBD	TBD	TBD
VA Provider CCN Retail Pharmacy Capability	11/10	11/24	TBD	TBD	TBD	TBD	TBD
Community Care Customer Portal (Self Service)	10/30	11/10	Approved	11/16	TBD	TBD	TBD
Integrated Product Environment (IPE)	9/14	9/22	Approved	9/24	10/20	Go	10/9
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD	Projected Resource
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	On Hold	TBD	TBD	TBD	TBD	TBD
Community Care Billing SSN Reduction	7/21	8/11	Approved	8/13	10/20	Go	10/2

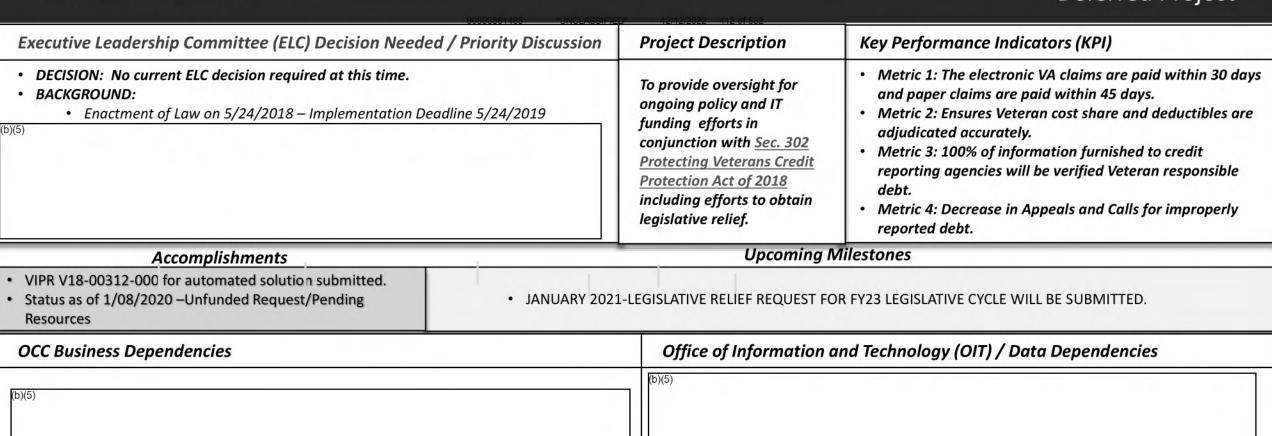




Project Name	Received by PIE Team	Presented at PMR	PMR Idea Decision	Ops Notified	CCSC Presentation Date	CCSC Project Go / No Go	Ops PM Resource Assigned
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A	N/A
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	Go	7/21 (b)(6)
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	Go	7/20 (b)(6)
ePrescribing	6/19	6/23	Approved	6/29	9/15	Go	8/24 (b)(6)











From:	00000581465 "UNCLASSI	FIED" 12/12/2022 414 of 532
Subject: To:	(b)(6)	CHILD TANADA MINIMA
10.	(OCC NM); VHA OCC BOA PPS Leade	ership (b)(6)
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	(b)(6)	@erpi.net'; (b)(6)
	(b)(6)	Matthews, Kameron; Upton, Mark T.;
	(b)(6) @guidehouse.com'	(b)(6) @quidehouse.com'; (b)(6)
		Reed, Susan A. (b)(6)
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		Business Information Technology Solutions (BITS), LLC);(b)(6)
		isory Partners (b)(6)
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	iturederaladvisory.com, ju)(c	©federaladvisory.com (b)(6) (Federal Advisory Information Technology Solutions (BITS), LLC) (b)(6)
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Attached:		y Care Project Management Review (PMR) #1.pptx
Good morni	ng, All,	
		Community Care Project Management Review (PMR). Agenda and
presenters b	pelow:	
	- 1	
-	Evaluations:	
• CCN	Veteran Pharmacy Care (ELC Awareness) Executive Sponsor (b)(6)	
• EV21	Key Initiative – Clinical Documentation In	mnravamant
	Executive Sponsor: Ms. Susan Reed	nprovement
	ulance Routing Optimization (ARO)	
	Executive Sponsor: (b)(6)	1
	ject Review:	J
		(AMCMS): Executive Sponsor Request. FY 21 Payment Data
		d for Incomplete data of 837COB via CDW-PIT.
	Executive Sponsor: (b)(6)	Business Sponsor:(b)(6)
		est. OCC alignment to Dr. Stone Data Strategy and Governance
	orandum, dated 12/2/2020.	
0	Executive Sponsor: Dr. Mark Upton; Bu	ısiness Sponsor: (b)(6)
		dardization:* ELC Priority Discussion: Dr. Stone provided
appro	oval for AP expansion to identified FY21 site	es on 12/3.
0	(-)(0)	ssiness Sponsor: (b)(6)

Thank you!

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12/12/2022 416 of 532

Community Care Business Program Management Review (PMR) #1

12/22/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

Project Idea Evaluation

- Email address update PIE Submission
- CCN Veteran Pharmacy Information Card
- FY 21 Key Initiative Clinical Documentation Improvement
- Ambulance Routing Optimization (ARO)

OCC Priority Project Review

- Advanced Medical Cost Management Solution (AMCMS)
- OCC Data Governance
- VA/DoD Advanced Payment and Referral Standardization

Appendix

- Project Review
- Project Idea Evaluation Updates





The email address for Project Idea Submissions has changed:

- Previous Address
 ©va.gov
- New Address @va.gov
- The old address has not been linked to the new address so users should make changes/updates to their address book of the change.
- Project Ideas submitted to the old address will continue to be received and will be processed.



CCN Veteran Pharmacy Information Card

Originator & Date: 12/	1/2020		cope Definition: Consolidate the CCN pharmacy billing information to provide Veterans the information to pick up their escription (referred care, urgent care, and flu shot) into one "card" to improve Veteran and network retail pharmacy experiences					
				Additional Impact				
Business Ops & Admin:	No Impa	acts at this time		Policy Impact:	No Impacts			
Delivery Ops:	(b)(5)	(b)(5)		No Impacts (b)(5)	_			
Revenue Ops:				Impact on Other OCC Projects:				
Clinical & Network Mgmt:	No Impa	acts at this time						
OCC Leadership (Includes IDA and BIC):				Impact if Project Idea Not Approved:				
Community Care Network (Contract Mod):	(b)(5)							
Recommended OC	C Strat	egic Priority Alignment	Recommer	nded Project Designa	ation Recommended Business Owner			
Improve Customer Service, Implement Community Care Network (CCN)		OCC Directora	ite Managed / Network Manag	gement (b)(6)				
Discussion:						_		

PPS resources not requested – Presented for ELC Awareness Directorate PM – (b)(6)

FY 21 Key Initiative: Clinical Documentation Improvement

Originator & Date: 12/3/2020 Susan Reed **Scope Definition**: VA Provider national training, tracking, standardization to improve the quality of data entered in CPRS to increase accuracy and revenue to include Telehealth.

			Additional Impact	
Business Ops & Admin:	No Impacts		Policy Impact:	No Impacts at this time
Delivery Ops:	No Impacts		Funding Impact / Status:	No Impacts at this time
Revenue Ops:	(b)(5)		Impact on Other OCC Projects:	No Impacts at this time
Clinical & Network Mgmt:				
	(b)(6) b)(5)		Impact if Project Idea Not Approved:	(b)(6)
OCC Leadership (Includes IDA and BIC):	BIC - No Impacts			
Community Care Network (Contract Mod):	No Impact			
Recommended OCC	Strategic Priority Alignment	Recommer	nded Project Designation	on Recommended Business Owner
Innovate Business Model, Ir	nprove Customer Service	OCC Ma	naged / Revenue Operations	(b)(6)

Discussion:

OCC Policy, OCC Finance, and Portfolio Managers Vote Count: All Yes votes received. No dissents.





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-		
	4	
	-	

Originator & Date	e: 12/10/20
(b)(6)	
	J

Scope Definition: Veterans calling an ambulance for emergency are routed to the appropriate emergency care provider utilizing EMS routing software to access VA-based eligibility and billing information as appropriate. (VA location closest, notify VA, identify if they have an active referral, etc.)

Additional Impact

impacis		53	Additional impact			Sumai -
Business Ops & Admin:	(b)(5)		Policy Impact:	No impacts at this ti	ime. (b)(5)	(b)(6)
			Funding Impact / Status:	(b)(5)		
Delivery Ops:						
			Impact on Other OCC Projects:			
Revenue Ops:						
Clinical & Network Mgmt:			Impact if Project Idea Not Approved:			
OCC Leadership (Includes IDA and BIC):						
Community Care Network (Contract Mod):	No impacts at this time.					
Recommended OCC Strategic Priority Alignment		Recommer	nded Project Design	ation Recom	mended Business C	wner
Innovate Business Model		OCC Managed Project/ Clinical Integration (b)(6))(6)	
Discussion: (b)(5)						

OCC Policy, OCC Finance, and Portfolio Managers Vote: Yes



Priority Project Review

Project Status Slides





ELC Decision Needed/Priority Discussion (b)(5)		Project Description Deploy AMCMS (SaaS) product that integrates Community Care management through data analytics accurately forecast, monitor and control Community Care's medical services. VISN 8 Nat. Insurance File model.	Number of AMCMS Access Requests - Number of users granted access – 10	
Accomplishments:			Milestones:	
2020-11-12: Lessons Learned Completed 2020-12-07: VISN 8 Stakeholder Assessment	2021-01-0 Gathering	04: Phase 3 Requirements	2021-01-04: VISN 8 ATO Finalization	2021-01-15: Phase 3 User Guide Development
OCC Business Dependencies			Office of Information and Tech	nologies/Data Dependencies
No elevated Business Dependencies at this time (b)(5)		(b)(5)		





ELC Decision Needed/Priority Discussion

ELC Discussion - OCC alignment to Dr. Stone Data Strategy and Governance Memorandum dated 12/2/2020

ELC Decision - ELC agree to serve as interim OCC Data Governance Council

Project Description

This project establishes a Data
Governance Program to ensure
reliable, dependable, consistent, and
well documented data. It includes
creating a structure, adopting
standards and policies that drive how
data are used and maintained to
ensure data quality.

(b)(5)

Key Performance Indicator

- Number of data policies, practices, and standards established
- Percent of data issues resolved
- Number of completed data initiatives in data governance project portfolio
- Percent of data initiatives that meet or exceed established initiative targets

Accomplishments:

2020-12-04: OCC-OIT Innovation Work Group 2020-12-14: Change Management Prosci Analysis 2020-12-22: Obtain ELC agreement to Serve as Interim Data Governance Council

2020-12-31: OCC Data Governance Concept of Operation Rough Draft

Milestones:

 2021-03-30: Begin Data Management & Data Quality Capability Maturity Assessment

OCC Business Dependencies

(b)(5)

Office of Information and Technologies/Data Dependencies

No Issues to elevate at this time





(b)(5)		Project Description Creation of processes and procedures which allow for necessary data sharing to support quarterly advanced payments from VA to DoD for care provided to eligible Veterans, along with revenue capture and workload tracking for VA.		 Key Performance Indicator 42,734 VA/DoD consults entered since start of FY20 5,857 open VA/DOD consults. Results for claim auto-validation (Biloxi VAMC/Pensacola NH): FY20-FY21: 95% Results for claim auto-validation (VISN 5/NCR Region) FY20-FY21: 76% 			
Accomplishments:				Milestones:			
2020-10-08: Updated Care Coordination Training 2020-12-03: HEC Approval of Next AP sites go-live	2021-01-01: Rollouts - Na Rollout Begin	ational 🛑 🔀	021-01-07: AP iscal/Recon Webinar	2021-01-30: CarePoint 2021-03-31: SFTP Exceptions Claims Utilization for Major Data Exchanges 2021-04-01: AP FY21 Q3 Rollouts			
OCC Business Dependencies				Office of Information and Technologies/Data Dependencies			
(b)(5)			(b)(5)				





Appendix

Project Status Slides





Office of Community Care Cerner Integration

Project Phase - Phased Implementation

ELC Decision Needed/Priority Discussion	Project	t Description	Key Performance Indicator
No ELC decisions needed or priority discussion topics at this time.		ssary integrations to perationalize Cerner nical operations	TBD: (b)(5)
Accomplishments:			Milestones:
2020-11-05: Completed first iteration of project lessons learned with OCM 2020-12-04: OCC Cerner team developed 9 training artifacts	2021-04-15: Chalmers P. Wyl (Columbus) Go Live	lie VA ACC 20	D21-05-15: Jonathan M. Wainwright lemorial VAMC (Walla Walla) Go Live 2021-06-21: White City VAMC Go Live
OCC Business Dependencies			Office of Information and Technologies/Data Dependencies
(b)(5)		(b)(5)	





Community Care Referral and Authorization System (CCR&A)

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion Project Description Key Performance Indicator HealthShare Referral Manager (HSRM) 3,844,844: Total Referrals FY 2020 (through 11/30/2020) No ELC decisions needed or priority discussion topics at this time. is an enterprise-wide COTS system in 185,562: Total Referrals FY 2019 support of community care used by 19,155: Total number of VA user accounts provisioned community care staff to generate 26,546: Number of Community Provider user accounts provisioned referrals and authorizations for 11,417: Number of unique Community Provider NPIs Veterans receiving care in the 148: Number of VAMC sites actively using HSRM 5,071: Support Ticket Count for November community. Accomplishments: Milestones: 2020-11-20: CAEC 2.0 National 2020-11-23: Release 11 2020-12-21: Optional Task Hot Fix 2020-12-21: R11 Lessons Learned 2021-02-08: R12 National Deployment National Deployment Deployment **OCC Business Dependencies** Office of Information and Technologies/Data Dependencies (b)(5) (b)(5)No Issues to elevate at this time

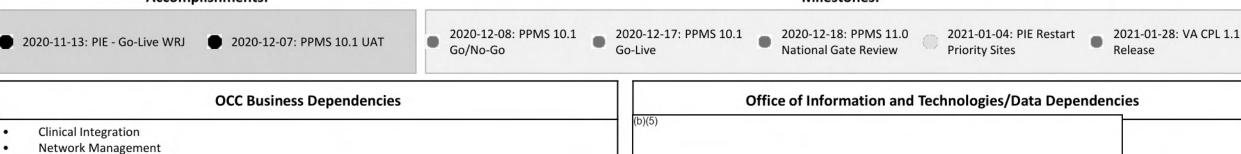
Project Phase - National Deployment

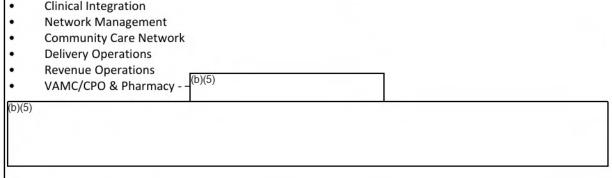
ELC Decision Needed/Priority Discussion		Proje	ect Description		Key Performance	Indicator
No ELC decisions needed or prior	continuing enh development a Toolbox (CBT), (DST) and SEO	One Consult 2.0 project combines continuing enhancement and development activities for Consult Toolbox (CBT), Decision Support Tool (DST) and SEOC Database under a single project management umbrella.		CTB integrated into CPRS- Q3 FY21 Metrics for CTB v2.0 are under development		
Acco	omplishments:			Mile	estones:	
2020-11-15: C6 Report Technical Release	2020-12-15: CTB v1.9.0078 National Deployment	2021-01-15: CTB v2.0 Production "Dark Release"		SEOC DB Cloud	2021-02-15: Training and Comms for CTB v2.0	2021-04-02: CTB v2.0 Deployment
	OCC Business Dependencies			Office of Inf	ormation and Technologies/Da	ata Dependencies
(b)(5)			(b)(5)			





ELC Decision Needed/Priority Discussion Project Description Key Performance Indicator No Priority Discussion or ELC Decisions Required. Provider Profile Management System Average Lead Time for Accepted (Completed) User Stories and Defects): Scheduled (PPMS): A consolidated repository to Deployment -35 Days; Hotfix - 3 Days house provider information for multiple Average Release Cadence to Production: 15 Days Mean Time to Restore: 19 Hours community network and federal partner provide along with a tool to Release Fail Percentage: 0 allow VA staff to view and manage that Provisioned Licensed Users: 13,720 Average Weekly CCN Data Import Transactions to PPMS/Per Region: 0/18 thru 10/24: information. Region 1 – 98; Region 2 – 96; Region 3 – 80; Region 4 – 126 Stories Accepted v. Stories Completed per Sprint: 100% - Sprint 2, R 10.1 **Accomplishments:** Milestones:











ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator	
No ELC decisions needed or priority discussion topics at this time.	The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.	Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100% Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily	
Accomplishments:		Milestones:	
2020-12-10: 12/09/2020 2020-12-16: National Release of VistA functionality	 2021-02-20: Configurable list of OHI for suppression 		
OCC Business Dependencies		Office of Information and Technologies/Data Dependencies	
(b)(5)	(b)(5)		
No Risks to elevate at this time	No Issues to eleva	ate at this time	





ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator			
No ELC decisions needed or priority discussion topics at this time.	Develop an end-to-end (E2E) integration environment prior to UAT/Prod. Anticipated benefits include identification of integration issues prior to Production, reduction of project specific hot-fixes, and enhanced system and data monitoring	<5% of defects/bugs captured in UAT/Prod (post-IPE) testing, with zero critical or higher status <5% unscheduled downtime for the IPE systems integration environment 90% of code automatically deployed within IPE systems integration environment			
Accomplishments:	Milestones:				
	23: Requirements for allity Agreements 2020-12-30: St Communication				
OCC Business Dependencies		Office of Information and Technologies/Data Dependencies			
(b)(5)	(b)(5) No Issues to eleva	te at this time			





Enterprise Program Reporting System (EPRS)

Project Phase - Phased Implementation

ELC Decision Needed/Priority Discussion No ELC decisions needed or priority discussion topics at this time.			Project Description	Key Performance Indicator
		user inte reportin	livers a series of custom-built erface (UI) screens and g system and data integrations inistering the CCN contract.	Quality Check UI: 61/80 Users (Δ = +15) CCN Accreditation Waivers UI: 48/30 Users (Δ = +16) CCN Complaints & Grievances UI: 45/54 Users (Δ = +15) CCN Congressional Inquiries UI: 47/42 Users (Δ = +17) CCN Corrective Action Plans (CAPs) UI: 45/30 Users (Δ = +15) CCN Network Adequacy Deviations UI: 43/51 Users (Δ = +14)
Accom	plishments:			Milestones:
2020-11-24: R12.0D: EPRS Technical Release: CCRS	2020-12-11: Pre-Prod R10.2: Accreditation Waivers & CAPs enhancements	2020-12-28: Pre-Proc R10.3- Congressional Enhancements		D: 2021-01-20: Prod R10.2 - Waivers & CAPs 2021-02-03: Prod R10.3 - Congressional UI enhancements 2021-03-01: Build 11.0: Network Management UI - Pre-Prod
	OCC Business Dependencies			Office of Information and Technologies/Data Dependencies
(b)(5)			(b)(5)	





ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator
No ELC Decision Needed at this time.	A system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).	Metric 1-Improved payment timeliness Metric 2- Improved Pre-Payment Analysis (Contribute to High Performing Network while decreasing Fraud, Waste & Abuse Metric 3-Decrease financial risk or burden on VA as a result of improved payment timeliness
Accomplishments:		Milestones:
© 2020-12-15: CCRS Release 13.3 © 2020-12-17: CCRS Release 13.3 © Demo	1: CCRS Release 13.4 2021-01-07: 0	CCRS Release 13.4
OCC Business Dependencies		Office of Information and Technologies/Data Dependencies
CCRA, FMS, PPMS, PIT, and MVI	CCRA, SEC	C, PPMS, MVI, EDI, DAS, and CCN Contractors
(b)(5)	(b)(5)	





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) Phase 2

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator	
No ELC Decisions needed or priority discussion topics at this time.	VistA Integrated Billing (IB) and Accounts Receivable (AR) updates.	* No specific KPI's were identified for this phase of the project.	
Accomplishments:		Milestones:	
2020-12-04: Current Contract PoP Ends 2020-12-05: 3 Month Extension Contract Begins 2021-01-13	1: AR Patch and Release 2021-01-15: RFP for new contract issued	2021-02-01: AR Patch 377 National Release 2021-03-03: New Contract Awarded 2021-03-05: 3 Month Extension Contract Ends	
OCC Business Dependencies		Office of Information and Technologies/Data Dependencies	
No business dependencies outside of Revenue Operations (RO) were identified for this project. (b)(5)	phase of the • No data depo	endencies at this time.	





ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator		
No ELC decisions needed or priority discussions at this time	Continuity of Operations Plan (COOP) for all mission critical OCC systems. The COOP will outline the necessary steps Metric 2: Phase II- Metric 3: Phase III Metric 4: COOPs C	Metric 1: Phase I – Prepare Complete Metric 2: Phase II – Respond Complete Metric 3: Phase III – Recover Complete Metric 4: COOPs Completed Metric 5: COOP Policy Completed		
Accomplishments:	Milesto	ones:		
2020-08-13: Project Kick-off meeting 2020-11-16: COOP template completed Prepare	i: Phase I 2020-12-30: Phase II 2021-01-13: Recover Con			
OCC Business Dependencies	Office of Inform	nation and Technologies/Data Dependencies		
(b)(5)	(b)(5)			





ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator			
No ELC Decisions needed or priority discussion topics at this time.	The VA/DoD Advanced Payment methodology produces a standardized flat file of DoD claim elements which can be utilized to standardized revenue processes for billing on those DOD claims across the nation.	Align with the VA/DoD Advanced Payment Methodology.			
Accomplishments:		Milestones:			
2020-10-30: VSSC Data Validation 2020-12-03: 2020-11-27: HEC Approval of Next AP sites golive	2020-12-31: VSSC Data Validation	2021-03-05: Project Start/Finish			
OCC Business Dependencies		Office of Information and Technologies/Data Dependencies			
(b)(5) No Risks to elevate at this time	No OI&T Da No Issues to elevate	ta dependencies at this time.			





Appendix





Project Name	Received by PIE Team	Presented at PMR	PMR Idea Decision	PPS Notified	CCSC Presentation Date	CCSC Project Go / No Go	PPS PM Resource Assigned
Ambulance Routing Optimization (ARO)	12/10	12/22	TBD	TBD	TBD	TBD	TBD
Proposed Clinical Integration Interaction Plan with WellHive	12/7	Awaiting further discussion	TBD	TBD	TBD	TBD	TBD
FY 21 Key Initiative; Clinical Documentation Improvement	12/3	12/22	TBD	TBD	TBD	TBD	TBD
Referral Based Obligations	11/17	11/24	Approved	11/30	TBD	TBD	TBD
Consolidated Advanced Reporting Solutions (CARS)	11/3	N/A	Discontinued	N/A	N/A	N/A	N/A
Community Care Customer Portal (Self Service)	10/30	11/10	Approved	11/16	TBD	TBD	TBD
Integrated Product Environment (IPE)	9/14	9/22	Approved	9/24	10/20	Go	10/9 (b)(6)
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD	12/11 (b)(6)





Project Name	Received by PIE Team	Presented at PMR	PMR Idea Decision	PPS Notified	CCSC Presentation Date	CCSC Project Go / No Go	PPS PM Resource Assigned
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	On Hold	TBD	TBD	TBD	TBD	TBD
Community Care Billing SSN Reduction	7/21	8/11	Approved	8/13	10/20	Go	10/2 (b)(6)
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A	N/A
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	Go	7/21 (b)(6)
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	Go	7/20 (b)(6)

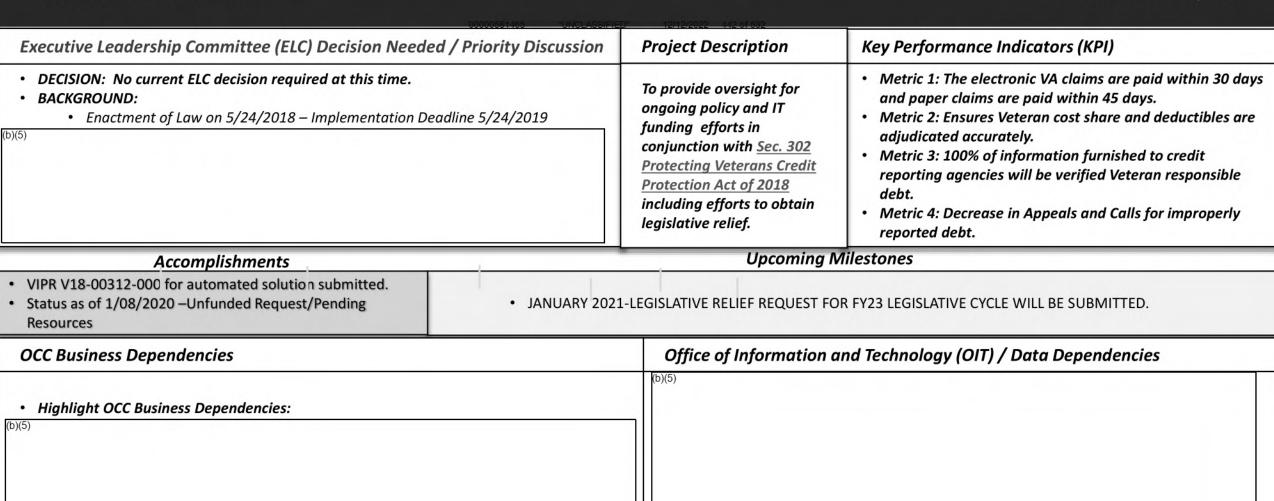




Project Name	Received by PIE Team	Presented at PMR	PMR Idea Decision	Ops Notified	CCSC Presentation Date	CCSC Project Go / No Go	Ops PM Resource Assigned
ePrescribing	6/19	6/23	Approved	6/29	9/15	Go	8/24 (b)(6)











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12/12/2022 444 of 532

Community Care Business Program Management Review (PMR) #1

07/28/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

- OCC Priority Project Review
 - OCC Data Governance
 - VA/DoD Advanced Payment and Referral Standardization
 - One Consult 2.0
 - Indian/Tribal Health Coordination (ITHC)
 - Advanced Medical Cost Management System (AMCMS)
 - Urgent Care Integrated Project Team
 - Provider Profile Management System (PPMS)
 - Community Care Reimbursement System (CCRS)
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- · Number of data policies, practices, and standards established
- Percent of data issues resolved
- Number of completed data initiatives in data governance project portfolio
- · Percent of data initiatives that meet or exceed established initiative targets

Accomplishments

7/6/2020 **NOMINATED DATA GOVERNANCE GROUP**

7/7/2020 CCSC DATA GOVERNANCE

PROJECT APPROVAL

7/8/20 KICKED OFF DATA **GOVERNANCE PROJECT**

7/15/2020 **ADOPTED CONTINUOUS** LEARNING APPROACH

Upcoming Milestones

8/5/2020 **DEFINE OVERARCHING DATA** GOVERNANCE STRATEGIC PRIORITIES GOVERNANCE CHARTER

8/12/2020 **FINALIZE DATA** 8/19/2020 **IDENTIFY A DATA-RELATED GOVERNANCE PORTFOLIO**

OCC Business Dependencies

Pending Dependency Management Analysis

(b)(5)

OIT / Data Dependencies

VA DoD Reimbursement

Project Phase – Development

Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion **Project Description** (b)(5)24,861 VA/DoD consults entered in FY20. 95% of FY20 VA/DOD consults have SEOCs Creation of processes and included. procedures which allow for Live Pilot Results necessary data sharing to support • Biloxi/Pensacola FY20: 95% quarterly advanced payments automated consult/claim match from VA to DoD for care provided to eligible Veterans, along with rate • NCR FY20: 74% consult/claim match revenue capture and workload rate tracking for VA. **Upcoming Milestones** 5/1/20 GO LIVE 10/1/20: NEXT AP SITE GO-5/30/20: SITE-BY-SITE 9/15/20: ITSC 6/30/20: REPORT ON 7/1/20: BEGIN W/NCRAP **ROLLOUT SCHEDULE RECOMMENDATION ON DATA** LIVES (WOMACK, KEESLER & NCR AP PILOT RESULTS PREPPING NEXT AP **PILOT** PROVIDED TO HEC SHARING SOLUTION TO JEC **EGLIN MTFS)** FOR HEC **ROLLOUT SITES OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies Clinical Integration: CI has trained VAMC Community Care staff on standard VA/DoD care coordination processes. DO/POM: (b)(5) RO Staff • OCC BOA/Finance and VAMC Fiscal Staff: VHA VSSC: (b)(5) DoD DHA: (b)(5)

Executive Leadership Committee (ELC) Decision Needed Priority Discussion	1/
DECICION. No decision as accepted at this time.	
DECISION: No decision requested at this time (b)(5)	
	- (

Project Description

One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies

Key Performance Indicators (KPI)

- DST integrated into CPRS- Q1 FY 21
- CTB integrated into CPRS- Q2 FY 21
- DST use of new drive time CC eligibility API estimated mid August (30 days after FRN publication)

Accomplishments

RECEIVED APPROVAL
FROM BUSINESS TO
UTILIZE EXISTING
CAPABILITIES WITHIN DST

RELEASED UPDATE THAT
ADDED CC AVERAGE WAIT
TIMES TO THE DST
DASHBOARD

DEPLOYMENT OF CTB 1.9.0072 OVER 30 DAYS, BEGAN 7/14/20 CBT V1.9.0072
ANNOUNCEMNT AND
FGB UPDATES
COMPLETED

(b)(5)

DST DRIVE TIME TO
BE ENABLED 30
DAYS AFTER FRN
PUBLICATION

TEAM CONTINUES TO CAPTURE REQUIREMENTS FOR WEB BASED PLATFORM.

DST OFFCE HOURS CONTINUE 7/20/2020.

Upcoming Milestones

TESTING / NATIONAL DEPLOYMENT OF CTB V1.9.0076. TESTING 9/16/2020, NATIONAL DEPLOYMENT 10/03/2020

occ	Business	Depend	lencies

(b)(5)

OIT / Data Dependencies

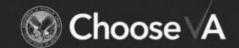




Indian-Tribal Health Coordination

Development

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)	
(1)This project's training activities were impacted by COVID-thold until the partners are free to resume. VA staff training to paced PPT and sent to the field on 7/17. (b)(5) Discussion (b)(5)	19 and were/are on was moved to self-	Integrate the IHS/THP Reimbursement Agreement Pro (RAP) operations with other OC efforts. Tasks included executin advisory board and developing Coordination Plan; hosting triba VA staff training; continuous communication efforts; program expansion; and community Ou and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed al and Metric 3: Annual re-trainings conducted
Accomplishments		Upcoming Milesto	ones
ADVISORY BOARD MTG STAKEHOLDER VIRTUAL COI	NSULTATION IHS/	THP RE-TRAINING EXECU	20 CLEARANCE AND 11/30/20 CARE ITION OF IHS/THP COORDINATION ISION MOD PLAN FINALIZED
OCC Business Dependencies		OIT / Data Dependencies	
(b)(5)		N/A Risk: Mitigation:	





AMCMS

Deployment

ELC Decision Needed/ ELC Priority Discussion				
(b)(5)				
			0.1	

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Upon deployment, key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- 6/17-6/24 UAT DATA
 VALIDATION ROUND I
 EXECUTED
- 7/10 UAT TEST SCRIPTS UPDATED
- 6/24-7/15 INCORPORATION OF CHANGES & DATA VALIDATION FIXES BASED ON UAT FEEDBACK
- 7/15-7/25 UAT DATA VALIDATION ROUND II EXECUTION
- 8/21 UAT TEST
 EVALUATION
 REPORT

Upcoming Milestones

- 8/25 NATIONAL DEPLOYMENT GATE REVIEW MEETING
- 8/26/20 BEGIN FIELD NATIONAL DEPLOYMENT

OCC Business Dependencies

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies



Urgent Care IPT

National Deployment

	00000581465 "UNCLASSIFIED"	12/12/2022 451 of 532	
ELC Decision Needed/ ELC Priority Discussion		Project Description	Key Performance Indicators (KPI)
(b)(5)		Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.	• 5,688 total probable UC visits in Region 1, as of 5/31/2020
Accomplishments		Upcoming Milestones	
06/08/20 REGION 2/3 GO LIVE DATE FINALIZED AS 8/4 O7/15/20 REGION 2/3 COMMS RELEASED	08/04/20 REGION 2 TRANSITION	08/04/20 08/31/20 REGION 3 REGION 4 TRANSITION TRANSITION	
OCC Business Dependencies	Office	e of Information Technology / Data	Dependencies
Clinical Integration: N/A Delivery Operations: N/A Provider Relations and Services (PRS): Communications: (b)(5) (b)(5) (b)(5)	(b)(5)	N/A	

ELC Decision Needed/ ELC Priority Discussion **Priority Discussion:**

Project Description

Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information.

Key Performance Indicators (KPI)

Power BI functionality exceeded license capability for reporting previous metrics.

Accomplishments

- 5/22/20 **PPMS 8.0 GO-LIVE**
- 6/30/20 **DEV CONTRACT AWARDED JUNE**

7/1/20 **URGENT CARE LEGACY RE-ROUTE**

7/7/20 PPMS 8.1 GO-LIVE

- 7/23/20 HOTFIX 8.1.1.1 RELEASE
- 7/29/20 **COMMUNITY PROVIDER** LOCATOR (CPL) RELEASE

Upcoming Milestones

- 08/11/20 PPMS 9.0 NATIONAL **GATEWAY REVIEW**
- 08/20/20 **PPMS 9.0 GO-LIVE**

OCC Business Dependencies

- Clinical Integration
- **Network Management**
- Community Care Network
- **Delivery Operations**
- **Revenue Operations**
 - (b)(5)VAMC/CPO & Pharmacy -

OIT / Data Dependencies



CCRS

National Deployment

ELC Decision Needed/ ELC Priority Discussion • No ELC Decision Requests for July

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicators (KPI)

CCN Payment Metrics as of July 17, 2020

- Region 1: Invoices Received 1,329,157, Confirmed Paid 825,256, Sent for Payment 27,528, "No Action" Optum denials 409,257
- Region 2: Invoices Received 759,546, Confirmed Paid 464,651, Sent for Payment 23,090, "No Action" Optum denials 242,340
- Region 3: Invoices Received 176,601, Confirmed Paid 72,137, Sent for Payment – 4,983, "No Action" Optum denials – 94,192
- Region 4: Invoices Received 1,347, Confirmed Paid 241, Sent for Payment 299, "No Action" TriWest denials 563
- The total Invoice Amount Paid/Sent for Payment: \$984,680,609.20

Accomplishments

06/23/2020 SUSPENSION
OF SUSPENSION OF 270
DAY DENIAL REASON
APPROVED BY ELC

07/06/2020 PMPM ADMIN

■ FEES FOR RESUBMISSIONS
IMPLEMENTED STARTING
WITH MAY

07/09/2020 CCRS USER ACCEPTANCE TESTING 11.4 07/14/2020 NATIONAL DEPLOYMENT GATE REVIEW (GO, NO GO DECISION)

O7/16/2020 RELEASE CCRS 11.4 TO PRODUCTION

Upcoming Milestones

07/17/2020 UPDATE USER GUIDES AND LESSONS LEARNED CCRS 11.4 07/17/2020 UPDATE KMS AND TRAINING DOCS FOR CCRS 11.4

OCC Business Dependencies

Clinical Integration (Facility CC Staff and VAMC RN Staff) Delivery Operations/Payment Oversight and Management (Invoice Processing Staff)

• Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)
• Finance (OCC Finance and Informatics Staff) (b)(5)
• VAMC / Fiscal Budget Staff (b)(5)
(b)(5)

OIT / Data Dependencies

(b)(5)

Appendix





Cerner OCC Integration

Development

ELC Decision Needed/ ELC Priority Discussion **Project Description Key Performance Indicators (KPI)** Manage all necessary integrations to TBD: Focusing on timeliness No ELC decisions needed or priority discussion topics at this appropriately measures and qualitative time. operationalize Cerner surveys EHR into OCC clinical operations processes These dates are subject to **Accomplishments Upcoming Milestones** change due to COVID-19 uncertainty CSS: **Super User Training:** ORA: IV3: **TBD awaiting OEHRM Decision** Go Live 8/21/2020 9/7/2020 8/10/2020 7/27/2020 **OCC** Business Dependencies OIT / Data Dependencies **Highlight OCC Business Dependencies:** -Clinical Integration and Mann Grandstaff Facility CC Staff (b)(5) -Payment Operations Management -Revenue Operations (Facility Revenue, RUR, and CPAC Staff) -Women's Health (IVF and Infertility)



Community Care Network

Deployment

ELC Decision Needed/ ELC Priority Discussion No ELC decisions needed or priority discussion topics at this time.

Project Description

Complete regional deployments to achieve CCN in Regions 1-6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

Region 3 Gradual Transition - CCN Referral

- Week 1: May 18 22, 2020
 - Total Referrals = 4,965* Total Rejects = 10
- Week 2: May 25-29, 2020
 - Total Referrals = 5,084* Total Rejects = 10
- Week 3: June 1-5, 2020
 - Total Referrals = 7,743* Total Rejects = 18**

Region 4 R4P1 Go Live - CCN Referral

- Week 1: June 8-12, 2020
 - Total Referrals = 842 Total Rejects = 45

Accomplishments

06/16/20 R3P2 SHCD GO-LIVE

07/21/20 R4P2 SHCD GO-LIVE 08/04/20 R2 & R3 URGENT CARE CUTOVER FROM PC3

 08/11/20 R4P3 SHCD GO-LIVE 08/25/20 R4P4 SHCD
 GO-LIVE

Upcoming Milestones

08/31/20 R4
URGENT CARE
CUTOVER FROM PC3

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)

National Network Deployment Progress – As of 7/6/2020



- (b)(5) ●
 - Regions 1, 2, and 3 are fully deployed
 - Region 4 Phase 1 deployed on 6/8/2020
 - Covid-19 is impacting the national deployment progress and provider recruitment progress

14

Region 3 Update

January 7 2020: Go-Live for Two Sites May 18 – June 15: Gradual

SHCD – Phase 1

January 7, 2020

Fayetteville, AR

Orlando, FL

Transition

Throughout the Gradual Transition, and continuing post-go-live, Optum is working to contract with key Region 3 providers.

Recent wins include:

- VISN 7: University of Alabama (received verbal agreement)
- VISN 16: Willis-Knighton Health System

June 16: Full Region 3

Deploymeal remaining R3 sites)

June 16, 2020

Atlanta, GA

August, GA

Bay Pines, FL

Biloxi, MS Central Arkansas, AR Birmingham, AL Columbia, SC Central Alabama Memphis, TN Charleston, SC Murfreesboro, TN Dublin, GA Nashville, TN Jackson, MS Miami, FL New Orleans, LA Mountain Home, TN Shreveport, LA Muskogee, OK Tuscaloosa, AL N. Florida / S. Georgia Alexandria, LA Oklahoma City, OK

> San Juan, PR Tampa, FL

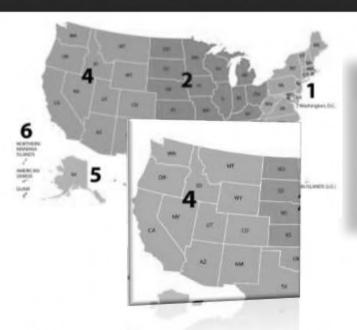
West Palm Beach, FL

July 17: 30-day PC3 cutover period ends

Region 3 Activities

- CAST calls continue for another two weeks until sites transition to the monthly network adequacy calls
- Optum and Network Management are reviewing the **16 requests for PC3 extensions.** Some sites are reporting gaps in specific specialties whereas others are requesting for specific providers. Final decisions will be made this week.
- Optum is holding network reviews with individual sites that have concerns with the network. These meetings will focus in
 on certain specialties and outstanding issue tracker items.

Region 4 Update



SHCD - Phase 1 (2 VAMCs)

June 8, 2020

VISN 19 - 2 VAMCs

- Montana (436)
- · Eastern Colorado, CO (554)

Phase 2 (13 VAMCs)

July 21, 2020 VISN 17 - 7 VAMCs

Amarillo, TX (504) El Paso, TX (756)

Texas Valley Coastal (740

Central Texas (674) North Texas (549)

South Texas (671) West Texas (519)

VISN 16 - 2 VAMC

Houston, TX (580) Texas counties aligned to Shreveport, LA (667) catchment area

VISN 19 - 4 VAMCs

Cheyenne, WY (442) Sheridan, WY (666) Salt Lake City, UT (660) Grand Junction, CO (575)

Phase 3 (14 VAMCs)

August 11, 2020 VISN 20 - 7 VAMCs

Boise, ID (531)

Portland, OR (648) Puget Sound, WA (663) Roseburg, OR (653) Spokane, WA (668) White City, OR (692) Walla Walla, WA (687)

VISN 21 - 7 VAMC

Fresno, CA (570) Reno, NV (654) San Francisco, CA (662) Northern California (612) Palo Alto, CA (640) Southern Nevada (593) Honolulu, HI (459)

Phase 4 (8 VAMCs)

August 25, 2020 VISN 22 - 8 VAMCs

Loma Linda, CA (605) Long Beach, CA (600) New Mexico (501) Northern Arizona (649) Phoenix, AZ (644) San Diego, CA (664)

Southern Arizona (678)

16

Greater LA, CA (691)

Region 4 SHCD

- Region 4 Phase 2 deploying on July 21, 2020
- Collaborating with TriWest to prepare Phase 2 and 3 sites for CCN Go live through predeployment meeting series
- Planning and conducting sequence of e-learnings, virtual training sessions, and just in time refresher trainings to ensure site staff are ready to use CCN systems and tools for Go Live
- Increasing messaging on differences between CCN and PC3 to level set site expectations
- Updating deployment approach for Phase 2-4 Command Center based on Phase 1 lessons learned; scaling to account for increased number of Go-Live sites
- Developing proactive referral tracking approach to determine trends: network gaps, COVID-19 impact vs field utilization

ELC Decision Needed/ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 35/80 Users
- CCN Accreditation Waivers UI: 25/30 Users
- CCN Complaints & Grievances UI: 24/54 Users
- CCN Congressional Inquiries UI: 27/42 Users
- CCN Corrective Action Plans (CAPs) UI: 25/30 Users
- CCN Network Adequacy Deviations UI: 25/51 Users

Accomplishments

04/01/2020 **EPRS Build 4** 04/28/2020 **EPRS Build 5B**

05/18/2020 UAT complete for

Build 5C IDA Reports

06/26/2020 UAT complete for **Build 5D IDA Reports**

06/26/2020 EPRS Build 5.1

Upcoming Milestones

Future Build/Release Planning Underway

OCC Business Dependencies

(b)(5)

OIT / Data Dependencies



Development

ELC Decision Needed/ ELC Priority Discussion

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Upcoming Milestones

Key Performance Indicators (KPI)

- 2,223,145: Total Referrals FY 2020
- 186,901: Total Referral FY 2019
- 16,581: Total number of VA user accounts provisioned
- 13,381: Number of Community Providers provisioned
- 4,903: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,270: Support Ticket Count for June
- 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning-VA; Provisioning-CP; Related to Production Outage

Accomplishments

No ELC decisions needed or priority discussion topics at this time.

07/10/2020 CTB V1.9.0072 ND 07/20/2020 **RELEASE 9.0 ND**

- 08/25/2020 07/21/2020 COVID REFERRAL EXT BATCHING COMPLETE PRESENTATION
 - 08/25/2020 RELEASE 10.0 CCSC **RELEASE 10.0 FIELD** NOTIFICATION
- 9/14/2020 **RELEASE 10.0 ND**
- OCT 2020 **RELEASE 11.0 ND**

OCC Business Dependencies

(b)(5)

Highlight OCC Business Dependencies:

- COVID19 Referral Extension: Issue found on 6/12/2020 with certain SEOC versions used in referral extension was addressed via a development script; Referral batching with downstream system was resumed on 6/29 and completed on 7/21/2020, ahead of scheduled by 3 days
- Clinical Integration (CI Field Support Director & Assistants): (b)(5)

(b)(5)Delivery Operations/POM: (b)(5) • Finance (OCC Finance and Informatics Staff) (b)(5)

Revenue Operations (Facility Revenue, RUR, and CPAC Staff) ((b)(5) (b)(5)

OIT / Data Dependencies

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- · CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for GEC Documents task and EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Overview of Release 9.0 Enhancements

- Release 9 contains several general HSRM enhancements in addition to reporting enhancements and critical HSRM Task list enhancements, which will make task list management more efficient and user friendly.
- Training and communications are being developed to ensure proper task management utilization.

General HSRM Enhancements

- Referral Date: Change to Referral Date logic to reflect the start date to be the date the consult is 'Sent to HSRM' from CPRS
- Clinically Indicated Date: Removal of validation check logic for CID field
- Multiple Veteran Addresses: Addition of Residential Address

Task Management Enhancements

- Enhanced filtering by Veteran Last name
 - Search for specific Veteran by last name
 - Filter task list by Alpha Split
- "Clean slate": Tasks greater than 10 days old will be archived from the task list
- Addition of referral number on task list
- · Search task list by referral number
- Search task list by assigned user
- Add Level of Care Coordination to Priority field on task list
- Sort/filter by Level of Care Coordination/Priority
- Medical documentation task enhancements: 5 New dispositions for documents loaded to VistA

Reports Enhancements

- o Community Provider User Provisioning Report:
 - Added Community Facility parameter and removed the affiliation parameter
 - City and state added to the report
- Community Provider Referral Summary Report:
 - Veteran's date of birth added to the report
- Optional Task Report
 - Region added to the report





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) – Phase 2

National Deployment

ELC Decision Needed/ ELC Priority Discussion

The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

 No specific KPI's were identified for this phase of the project.

Accomplishments

- O5/18/20 (2) IB & (1)
 AR PATCH NATIONALLY
 RELEASED
- 06/02/20 IB 675 NATIONALLY RELEASED
- 06/05/20 SIX MONTH EXTENSION STARTED
- 08/03/20 IB PATCH 677 NATIONALLY RELEASING
- 08/31/20 IB PATCH 678 NATIONALLY RELEASING
- FOUR ADDITIONAL IB/AR PATCHES TARGETED FOR DEVELOPMENT AND NATIONAL RELEASE
- 12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Upcoming Milestones

Downstream Dependency – None at this time.

(b)(5)





CPAC Document Scanning

National Deployment

ELC Decision Needed/ ELC Priority Discussion				
(b)(5)				
		<i>-</i> 4		

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- · Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 10/09/19 UPDATED PERFORMANCE
 DESCRIPTIONS AND UNION APPROVAL FOR
 CPAC DEPLOYMENT RECEIVED
- 03/31/20 FINAL 9957
 ACCESS REQUEST
 SUBMITTED
- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS

Upcoming Milestones

07/24/20 PROJECT COMPLETE

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and Technology / Data Dependencies

ELC Decision Needed/ ELC Priority Discussion				
(b)(5)				
Priority Discussion: No				

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

06/2020 SUNSET GRANDFATHER ELIGIBILITY BASED ON CARE

DATA

06/2020 RSD

APPROVED FOR

SOLUTION OF NOT

ENROLLED COVERED

VETERANS

● 06/2020
DEPLOYED
FUNCTIONALITY
D FOR THE 6 AND 12
MONTH HARDSHIP

07/2020 COMPLETED ELIGIBILITY ANALYSIS OF CC DATA FOR REJECTED REFERRALS 08/2020 COLLABORATING
WITH HSRM TEAMS
REGARDING BUSINESS
RULES FOR PREVENTING
APPROVAL OF REFERRALS
FOR INELIGIBLE VETERANS

08/2020 ES RELEASE TO
EXPAND STATIC ELIGIBILITY TO
NOT ENROLLED COVERED
VETERANS AND INCLUDE COPY
OF RECORDS IN ELIGIBILITY FILE

Upcoming Milestones

08/2020 ES RELEASE TO AUTOMATE COLLATERAL OF VETERAN PROCESS TO INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE (PHASE I)

OCC Business Dependencies

- Highlight OCC Business Dependencies:
- Clinical Integration (Business Owners)
- System Engineering Management (SEM) (b)(5)
- Business Intelligence Service Line (BISL) (b)(5)
- Community Care Contractor (CCN) (b)(5)
- VA Master Patient Index (MPI) , Office of Policy and Planning (PSSG), Veteran Experience Office (VEO)

 (b)(5)

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)



Retail Pharmacy Program

Sustainment

ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)	
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacie in their neighborhoods	 Metric 1: over 100,000 Veteran's vaccinated Metric 2: Vaccinate 125,000 next year Metric 3: Reimburse Walgreens 99% accuracy Metric 4: Continued Outreach to Rural Veterans 	
Accomplishments	Upcoming Mileston	es	
7/11/2020 FINAL FILE/INVOICE SENT WALGREENS	8/1/2020 CLOSE OUT RETAIL PHARMACY		
OCC Business Dependencies	Office of Information and Te	chnology (OIT) / Data Dependencies	
(b)(5) (b)(5) (b)(5)	RISK: N/A		





VA DoD Revenue Standardization

Project Phase – Development

Project Description Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion the VHA support DoD Reimbursement pilots with a web based tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment **DECISION**: No new decisions needed from Revenue Operations regarding back end process batch processing, invoice Methodology. at this time. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 8/1/20 VSSC 9/1/20 SEM 10/01/20 FUNCTIONAL 5/15/2020 SEM **2019 SEM BUSINESS VALIDATION OF DOD** SHAREPOINT TOOL **USER TESTING** SHAREPOINT DEVELOPMENT ANALYST TASKS COMPLETE DATA COMPLETE **TESTING** COMPLETE **OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies (b)(5)There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation Updates

Project Name	Date Presented at PMR	Decision	Status
Comprehensive Disaster Recovery Plans	6/23	Approved	Intake
ePrescribing	6/23	Approved	Intake
CAVE	7/14	Approved	CCSC, 7/28, approval to move to project development
Veteran Credit Database Program	Scheduled for 8/11	Pending	TBD



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"LINCLASSIFIED"

12/12/2022 471 of 532

OCC Bi-Monthly Business PMR #1

09/22/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

Agenda

- Project Idea Evaluation
 - Integrated Product Environment (IPE)
- OCC Priority Project Review
 - Enterprise Program Reporting System (EPRS)
 - HealthShare Referral Manager (HSRM)
 - Provider Profile Management System
 - Urgent Care Implementation
 - One Consult 2.0
- Appendix
 - Project Review
 - Project Idea Evaluation Updates





Integrated Product Environment (IPE)

		000058136	5 "LINCLASSIEJED"	12/12/2022 473 of 532		
<u>Originator & Date:</u> CHIO / 19/14/2020	BOA (b)(6)	Scope Definition: Integra	ted Product En	vironment for isolated and end	to end testing of various CCN related projects.	
Impediments to OC	С			Additional Impact		
Business Ops & Admin:	OPS Resource	impacts		Policy Impact:	No current impacts identified.	
				Funding Impact:	Future - (b)(5)	
Delivery Ops:	DO systems				(b)(5)	
Revenue Ops:	RO systems					
				Impact on Other OCC		
Clinical & Network Mgmt: CNM projects: PPMS, CCRA, EPRS, AN		MS, OCC-	Projects:			
	CERNER, CCN	, CAVE, ePrescribing, etc.		Impact if Project Idea Not	7	
OCC Leadership (Includes IDA and BIC):	IDA – No curren BIC - (b)(5)	t impacts identified.	$\overline{}$	Approved:		
Recommended OC	C Strategic F	Priority Alignment	Recomme	nded Project Designati	ion Recommended Business Owner	
Innovate Business Model			occ		CHIO / BOA	
Discussion:		(b)(6)	(b)(5)			 1
(b)(5)		(5)(6)	10)(0)			





Enterprise Program Reporting System (EPRS)

Development

· · · · · · · · · · · · · · · · · · ·	Committee (ELC) Decisio	n Needed / Priority	Proj	ect Description	Key Performance Indicators (KPI)
(b)(5)			built repo	delivers a series of custom- user interface (UI) screens and rting system data integrations dministering the CCN contract.	 Quality Check UI: 39/80 Users (Δ = +2) CCN Accreditation Waivers UI: 30/30 Users (Δ = +3) CCN Complaints & Grievances UI: 28/54 Users (Δ = +2) CCN Congressional Inquiries UI: 30/42 Users (Δ = +1) CCN Corrective Action Plans (CAPs) UI: 28/30 Users (Δ = +1) CCN Network Adequacy Deviations UI: 27/51 Users (Δ = +1)
Accompnishments				Upcoming Milestones	
08/25/2020 EPRS 08/20/2020 EPRS 08/28/2020 EPRS 08/28/2020 EPRS 08/28/2020 EPRS 08/28/2020 EPRS Release 6.0 D: EDI 837 Pre-Prod Migration Data Layer Rework Integration (eCAMs)		R	L0.0 & 10.1: UIs for Pro	/30/2020 EPRS Pre- od R11.0 : Network EPRS Tech. Data Integration for anagement UI HSRM	
OCC Business Depend	dencies			OIT / Data Dependencies	
Project Dependencies • Community Care Contract (b)(5) • Community Care Network	ct Administration (CCCA) (b)(5)			Data Dependencies (b)(5)	



HealthShare Referral Manager

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Project Description** HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by **DECISION:** No ELC decisions needed at this time. community care staff to generate referrals and authorizations for Veterans receiving care in the community. **Accomplishments Upcoming Milestones**

Key Performance Indicators (KPI)

- 2,841,420: Total Referrals FY 2020
- 185,691: Total Referral FY 2019
- 17,830: Total number of VA user accounts provisioned
- 16,541: Number of Community Providers provisioned
- 5,783: Number of unique Community Provider locations
- 148: Number of sites actively using HSRM
- 5,073: Support Ticket Count for August
- 2,000: Monthly VA Ticket Budget
- Top 3 Categories: Provisioning-CP; Provisioning-VA; VistA Write Back/ Appointment Question

08/28/2020 **RELEASE 10 FIELD NOTIFICATION**

9/14/2020 **RELEASE 10 ND**

909/21/2020 CAEC PORTAL **09/26/2020 CERNER SCHEDULING MESSAGE GO-LIVE**

10/24/2020 **CERNER SPOKANE GO-LIVE**

11/1/2020 RELEASE 11 UAT **11/23/2020 RELEASE 11 ND**

OCC Business Dependencies

Highlight OCC Business Dependencies: • Clinical Integration (CI Field Support Director & Assistants): ((b)(5)

Delivery Operations/POM:(b)(5)

(b)(5)

Finance (OCC Finance and Informatics Staff) (b)(5)

Revenue Operations (Facility Revenue, RUR, and CPAC Staff(0)(5)

OIT / Data Dependencies

Overview of Release 10.0 Enhancements

 Release 10 will contain a number of general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- Remove all statuses except Approved from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

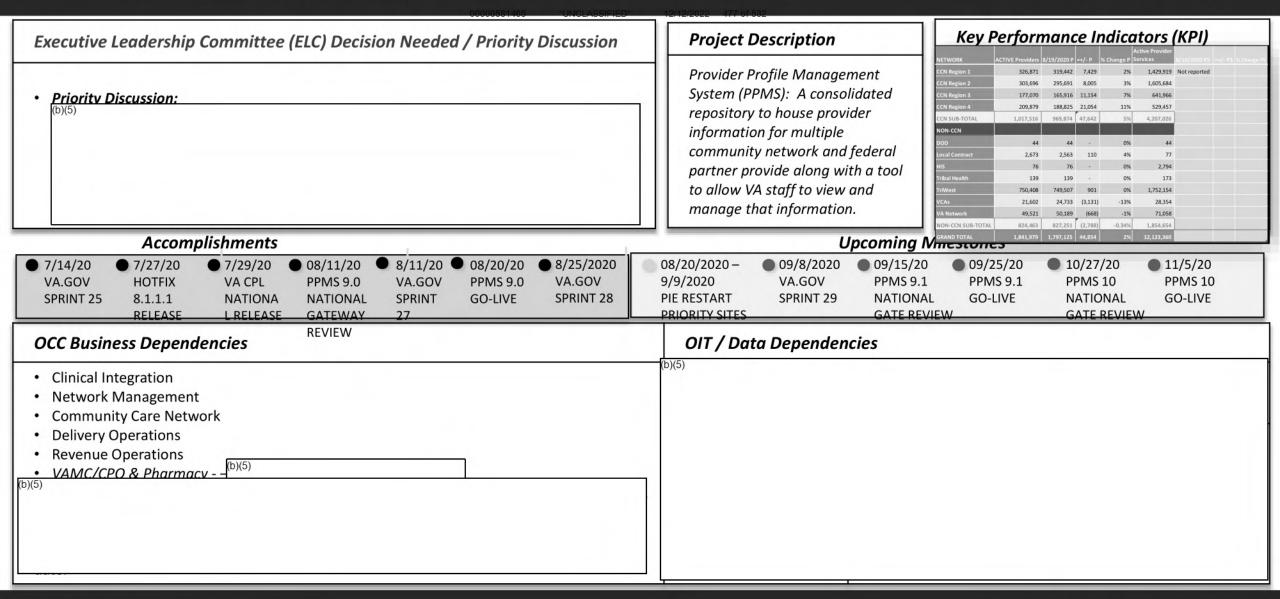
- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Provider Profile Management System (PPMS)

Dev/Ops



Urgent Care IPT

Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

Implementation Updates:

- 1. CCN Urgent Care for Regions 2 and 3 went live on 9/1.
- 2. R2/3 Webinars held on 8/25 and 8/27, with over 400 participants at each session.
- 3. Worked with DEPO to ensure Veterans can access pharmacy locations for urgent care prescriptions and flu shots on VA.gov Provider Locator.

Project Description

Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.

Upcoming Milestones

Key Performance Indicators (KPI)

- 1,710 total Veteran calls to confirm eligibility from 09/01/2020-09/07/2020.
- 392 total UC authorizations in R2 from 09/01/2020-09/07/2020.
- 1,014 total UC authorizations in R3 from 09/01/2020-09/07/2020.

Accomplishments

08/30/20 OPTUM R2/3 PROVIDER FILE INGESTED BY PPMS 09/01/20 REGIONS
 2/3 GO-LIVE

09/25/20 REGION 4 COMMS RELEASE 09/30/20 REGION 4 UC CCN GO-LIVE

OCC Business Dependencies

• Communications: (b)(5)

0)(5)

Office of Information Technology / Data Dependencies

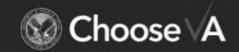
(b)(5)

One Consult 2.0

Development

	ship Committee (ELC) Dec	ision Needed /	Project Description Key Performance Indicators (R	(PI)	
DECISION: No decision (b)(5)	ion requested at this time		The focus of One Consult 2.0 is to replace Consult Toolbox • CTB integrated into CPRS- Q2 FY	 DST integrated into CPRS- Q1 FY 21 CTB integrated into CPRS- Q2 FY 21 DST use of new drive time CC eligibility API to begin 9/10/2020 	
	Accomplishments		Upcoming Milestones		
FULL SITE IOC LIC BEGAN: AP 9/1/2020 TII	ABLED COMPLETED DST MAPPING I DRIVE TABLE UPDATES: 10/2020 9/11/2020	GO NO GO: 9/15/2020	TEAM CONTINUES TO CTB V1.9.0076: CTB V1.9.0076 DST OFFICE CAPTURE CONCLUDE FULL SITE NATIONAL HOURS REQUIREMENTS FOR IOC: 9/14/2020 DEPLOYMENT: CONTINUE: WEB BASED 9/18/2020 9/21/2020 PLATFORM		
OCC Business Depe	endencies		OIT / Data Dependencies		







- Release will add "Unable to Schedule" requirements to include options from the Add Comments workflow
- Release will include more descriptive text in the consult factors that describe why user is unable to schedule a consult
- Release will fix the Clinical Review Option (CC Referrals) scheduling options that are being cached when Receiving Consults and user does not select a scheduling option
- Release will address unable to enter text (ex. "t+30") issue
- Release will address telehealth options not showing up when internal consults are triaged
- National release projected to begin 9/18/2020

Overview of CTB Phase II

- New version of Consult Toolbox in a DevSecOps model that will eliminate the long and costly desktop deployment process.
- The scope will include user validated requirements and existing backlog items.
- Minimally Viable Product projected to be completed 9/25/2020
 - National Deployment not expected until November/December 2020



Appendix

Project Status Update





Cerner OCC Integration Project

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion
 DECISION: No ELC decisions needed at this time.

Project Description

Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

Cerner Referral Manager Functional Testing: 8/17/2020 – 8/28/2020 Exploratory Testing: 8/24/2020 – 8/29/2020 Super User Training: 8/10/2020-8/29/2020

ORA: 9/7/2020 End User Training (Spokane): 9/28/2020

Upcoming Milestones

HSRM SIU Interface Go-Live: End of September IOC Go Live: 10/24/2020

OCC Business Dependencies

Highlight OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff: (b)(5)

(D)(D)

-Payment Operations Management

-Revenue Operations (Facility Revenue, RUR, and CPAC Staff)

-Women's Health (IVF and Infertility)

(b)/5)







Community Care Reimbursement System (CCRS)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

This project creates a system to facilitate the receipt and validation of post-payment 837 COB invoices, reimbursement, post-payment audit activities, and facilitation of revenue operation activities (i.e., first party billing).

Key Performance Indicators (KPI)

CCN Payment Metrics as of September 4, 2020

- Region 1: Invoices Received 1,881,790, Confirmed Paid 1,195,248, Sent for Payment 45,314, "No Action" Optum denials 523,766
- Region 2: Invoices Received 1,319,275, Confirmed Paid 845,062, Sent for Payment – 52,031, "No Action" Optum denials - 352,273
- Region 3: Invoices Received 411,988, Confirmed Paid 196,103, Sent for Payment 12,303, "No Action" Optum denials 183,202
- Region 4: Invoices Received 79,998, Confirmed Paid 23,348, Sent for Payment – 9,984, "No Action" TriWest denials - 15,325

The total Invoice Amount Paid/Sent for Payment: \$1,728,313,422.92.

Accomplishments

09/01/2020 CCRS 12.2 COMMUNICATIONS SENT

09/03/2020 RELEASE CCRS 12.2 TO PRODUCTION 09/09/2020 CCRS USER ACCEPTANCE TESTING 12.3 09/22/2020 RELEASE CCRS 12.3 TO PRODUCTION

(b)(5)

 10/1/2020 CCRS USER ACCEPTANCE TESTING 12.4

Upcoming Milestones

10/15/2020 RELEASE CCRS 12.4 TO PRODUCTION 10/16/2020 UPDATE KMS, TRAINING DOCS, AND LESSONS LEARNED FOR CCRS 12.4

OCC Business Dependencies

0(5)

OIT / Data Dependencies

Community Care Network

Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

Complete regional deployments to achieve CCN in Regions 1 – 6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

- Region 2 and 3 initiated Urgent Care cutover from PC3 on September 1st
- Regions 1 4 reached full HCD with the deployment of Region 4; Region 4 reached full HCD with Phase 4 deployment on August 25th
 - CCN use continues to increase for all sites in Phase 1, 2, and 3 for Region 4
 - Post deployment refresher trainings and office hours are in development
- R4 Urgent Care cut over is now 9/30/2020

Accomplishments

06/08/20 R4P1 SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

SHCD GO-LIVE

GO-LIVE

● 06/16/20 R3P2 ■ 07/21/20 R4P2 ■ 08/11/20 R4P3 ■ 08/25/20 R4P4 SHCD ■ 09/01/20 R2 & R3 URGENT CARE CUTOVER FROM PC3

Upcoming Milestones

09/30/20 R4 URGENT CARE **CUTOVER FROM PC3**

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
No ELC decisions needed. (b)(5) Discussion Tribal consultation on the CC approach was delivered 8/25 and the public has until 9/25 for written comment. Program office presented to the BIMS on 9/11. The annual tribal training is scheduled for the week of 9/15.	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement * Metric 1: Advisory Board meetings * Metric 2: Care Coordination Plan developed * Metric 3: Annual re-trainings conducted
Accomplishments	Upcoming Milestones
O7/17/20 VA FIELD 7/2020 ALASKA 8/252020 HOSTED 09/11/20 STAKEHOLDER VIRTUAL PHARMACY MOD TRIBAL CONSULTATION ON CC APPROACH IHS/THP II	
OCC Business Dependencies	OIT / Data Dependencies
(b)(5)	N/A Risk: Mitigation:



AMCMS

Project Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No ELC decisions needed at this time.

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

(b)(5)

Key Performance Indicators (KPI)

Key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- **FM Metrics:** Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

8/19-8/28 PHASE 8/28-9/1 GENERATED UPDATED MODEL
REFERRAL LOGIC) COST ESTIMATES

9/2 COMPLETED
AMCMS/VA ESD
INTEGRATION

8/27-9/14 TRAIN
 THE TRAINER
 SESSIONS

9/11 STALE REFERRAL LOGIC UAT RE-TESTING 9/16-9/23 AMCMS VIRTUAL WEBINAR TRAININGS

Upcoming Milestones

 9/22 NATIONAL DEPLOYMENT GATE REVIEW

9/30 LESSONS LEARNED UPDATE

OCC Business Dependencies

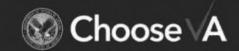
Office of Information and Technology (OIT) / Data Dependencies

• (b)(5)

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Need	ded / Priority Discussion	Project Description Key Performance Indicators (KPI)				
• DECISION: No ELC decisions needed at this time.		The project scope is to develop a standardized Continuity of Operations Plan (COOP) policy, in addition, the creation of a COOP document for each OCC Directorate. In parallel, to the policy/plans, the development and implementation of an electronic single repository. • Metric 1: Process for unschedulation of incomplete of the policy developed of the policy developed of the policy plans, the development and implementation of an electronic single repository.				
Accomplishments		Upcoming Milestones				
08/04/2020 – APPROVED FOR GO AT CCSC 08/13/2020 – KICK-OFF PROJECT MEETING	DIRECTORATES OF		0/20- COOP 12/15/20 – COOP POLICY DEVELOPMENT			
OCC Business Dependencies - Lite		Office of Information and Techno	ology (OIT) / Data Dependencies - Lite			
Hiahliaht OCC Business Dependencies: (b)(5) (b)(5)		• Highlight OIT/Data Dependencies: (b)(5)				





OCC Data Governance Project

Initiation

Executive Leadership Committee (ELC) Decision Needed / **Priority Discussion**

DECISION: No ELC decisions needed at this time.

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

OIT / Data Dependencies

Key Performance Indicators (KPI)

- Frequency data reported as accessible timely, complete, accurate and reliable
- Percent of compliance with policies
- Percent of systems achieving established performance metrics
- · Percent of systems with complete documentation

Accomplishments

8/26/20 FINALIZED STRATEGIC BEGAN PTF ENTRY FOR **PRIORITIES**

8/31/2020 **CCRS & PCM CLAIMS** 9/2/2020 SYSTEMS DOCUMENTS **GAP ANALYSIS**

9/30/2020 CREATE TECHNOLOGY AND DATA **GOVERNANCE ROAD MAP**

10/14/2020 DRAFT DATA GOVERNANCE STRUCTURE ROLES/ RESPONSIBILITIES

Upcoming Milestones

10/28/2020 **OBTAIN APPROVAL SYSTEMS DOCUMENTATION STANDARD**

0	СС	В	usi	ness	De	pe	nd	en	ci	es

(b)(5)

(b)(5)

Enrollment System Community Care (ESCC)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

• **DECISION:** No ELC decisions needed at this time.

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

(b)(5)

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

O9/20 PRODUCTION
RELEASE FOR CC
COLLATERAL OF
VETERANS AND NOT
ENROLLED COVERED
VETERANS

09/20 MET WITH

TW AND OPTUM

TO DISCUSS

SUMMARY OF

CHANGES TO

ELIGIBILITY FILE

COMPLETED RFM FOR NEW VCE CODES AND SUBMITTED TO COR TEAM 09/2020 COLLABORATED
WITH ELIGIBILITY OIT
TEAM TO PAUSE RELEASE
OF LINKING SPONSOR OF
COLLATERAL OF VETERANS

09/2020 ES RELEASE TO
EXPAND STATIC ELIGIBILITY TO
NOT ENROLLED COVERED
VETERANS AND INCLUDE COPY
OF RECORDS IN ELIGIBILITY FILE

Upcoming Milestones

● 09/2020 ES RELEASE TO
AUTOMATE COLLATERAL OF
VETERAN PROCESS TO
INCLUDE COPY OF RECORDS
IN ELIGIBILITY FILE (PHASE I)

OCC Business Dependencies

- Highlight OCC Business Dependencies:
- Clinical Integration (Business Owners)
- Business Intelligence Service Line (BISL) (b)(5)
- Community Care Contractor (CCN) (b)(5)

System Engineering Management (SEM) -

 VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO)

Issue:

Mitigation:

Office of Information and	Technology (OIT) /	Data Dependencies
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Issue Mitigation:

Retail Pharmacy Program

Close Out

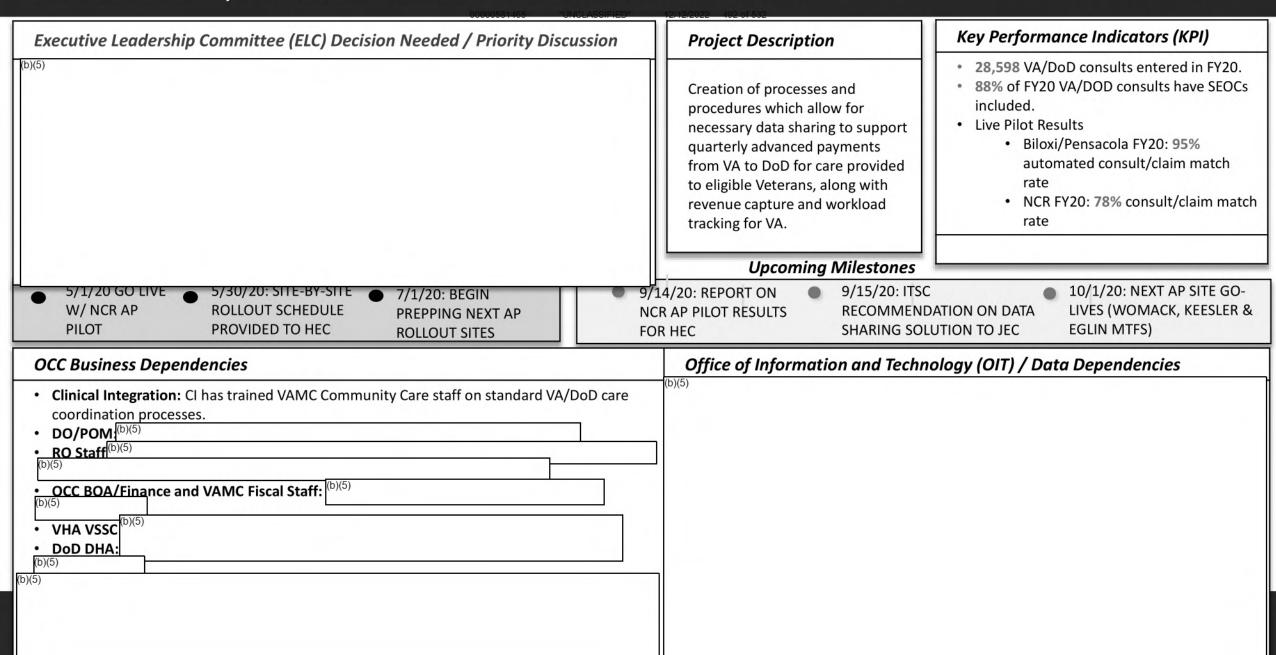
Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
DECISION: No ELC decisions needed at this time.	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods • Metric 1: over 100,000 Veteran's vaccinated • Metric 2:Reimburse Walgreens 99% accuracy
Accomplishments	Upcoming Milestones
FILE/INVOICE SENT	0/1/2020 CLOSE UT RETAIL HARMACY
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(5) RISK: Mitigation:	RISK:





VA DoD Payment and Referral Standardization

Development



VA DoD Revenue Standardization

Development

Project Description Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Key Performance Indicators (KPI)** the VHA DoD support Reimbursement pilots with a webbased tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly Align with the VA/DoD Advanced Payment batch processing, DECISION: No ELC decisions needed at this time. invoice Methodology. streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports. **Upcoming Milestones Accomplishments** 5/15/2020 SEM 8/31/20 VSSC VALIDATION 9/1/20 SEM **2019 SEM BUSINESS** 10/01/20 FUNCTIONAL SHAREPOINT DEVELOPMENT SHAREPOINT TOOL ANALYST TASKS COMPLETE OF DOD DATA COMPLETE **USER TESTING** COMPLETE **TESTING OCC** Business Dependencies Office of Information and Technology (OIT) / Data Dependencies There are no dependencies to other OCC Directorates. Revenue Operations (Facility Revenue, RUR, and CPAC Staff). (b)(5)

Community Care Integrated Billing and Accounts Receivable (CC IB/AR) - Phase 2

Project Phase – Implementation

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

 The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

· No specific KPI's were identified for this phase of the project.

Accomplishments

- 05/18/20 (2) IB & (1) AR PATCH NATIONALLY **RELEASED**
- **NATIONALLY RELEASED**
- 06/02/20 IB 675 **a** 08/13/20 IB 677 NATIONALLY **RELEASED**
- 09/10/20 IB PATCH **678 NATIONALLY RELEASED**
- 09/30/20 AR PATCH **361 NATIONALLY** RELEASING
- AR PATCH 372 & IB PATCH 682 ARE IN DEVELOPMENT AND NATIONAL RELEASE IS TARGETED FOR 10/19/20

Upcoming Milestones

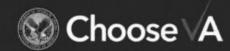
12/04/20 CONTRACT COMPLETED

OCC Business Dependencies

· No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Downstream Dependency – None at this time.





CPAC Document Scanning

Project Phase – Close Out

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion							
(b)(5)							
	* 1						

Project Description

Implement a document scanning solution using the FSC as the scanned image repository allowing each CPAC facility to meet documentation retention requirements, eliminate warehouse capacity/backlog issues and access scanned documents electronically.

Key Performance Indicators (KPI)

- Elimination of shipping costs associated with current FSC Service Level Agreement (SLA).
- Approximately 50% reduction in per page SLA scanning cost.
- Easier document retention management.
- ~90% decrease in conversion time paper to electronic.
- 100% decrease in shipment damages.

Accomplishments

- 04/24/20 FSC COMPLETES KOFAX UPDATES TO CPAC SCANNERS
- 06/15/20 CPAC VIRTUAL TRAINING BEGINS
- 07/09/20 TRAINING SESSION FOR WFD AND POLICY ANALYST COMPLETE
- 07/24/20 MAIL
 ROOM CLERK
 TRAINING COMPLETE
- 08/27/20 PRODUCTION SCANS COMPLETE
- 08/28/20 PROJECT COMPLETE

OCC Business Dependencies

• No business dependencies outside of Revenue Operations (RO) were identified for this project.

Office of Information and Technology / Data Dependencies



Appendix

Project Idea Evaluation (PIE) Updates





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Decision	Ops Notified	CCSC Presentation Date	Ops PM Resource Assigned
ePrescribing	6/19	6/23	Approved	6/29	9/14	8/24 (b)(6)
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	7/20 (b)(6)
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	7/21
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A
Community Care Claims SSN Reduction	7/21	8/11	Approved	8/13	TBD	TBD
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	TBD	TBD	TBD	TBD	TBD
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD
Integrated Product Environment	9/14	9/22	TBD	TBD	TBD	TBD





PMR 1 Projects

EHRM

Office of Community Care (OCC)/Cerner Integration

Implement CCN

Community Care Claims Reimbursement (CCRS)

Community Care Network (CCN)

Enterprise Program Reporting System (EPRS)

Indian/Tribal Health Coordination (ITHC)

Innovate Business Model

Advanced Medical Cost Management System (AMCMS)

Community Care Referral and Authorization System (CCR&A)

One Consult 2.0

Provider Profile Management System (PPMS)

OCC Data Governance

OCC Continuity of Operations Plan (COOP)

MISSION Support

Community Care Integrated Billing and Accounts Receivable (CC IB/AR) Phase 2

CPAC Document Scanning

Enrollment System Community Care

Urgent Care Integrated Project Team

Other

Retail Pharmacy Influenza Program

VA/DoD Advanced Payment and Referral Standardization

VA/DoD Revenue Standardization





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"UNCLASSIFIED"

12/12/2022 499 of 532

Community Care Business Program Management Review (PMR) #1

10/27/2020





U.S. Department of Veterans Affairs

Veterans Health Administration Office of Community Care

- Hot Topics
 - Payer Electronic Data Interchange (EDI) Prioritization
- OCC Priority Project Review
 - VA/DoD Referral Standardization
 - Community Care Reimbursement System (CCRS)
 - Enterprise Program Reporting System (EPRS)
 - Urgent Care IPT
- Appendix
 - Project Review
 - Project Idea Evaluation Updates
 - Veteran Credit Updates





Hot Topic: Payer Electronic Data Interchange (EDI) Prioritization

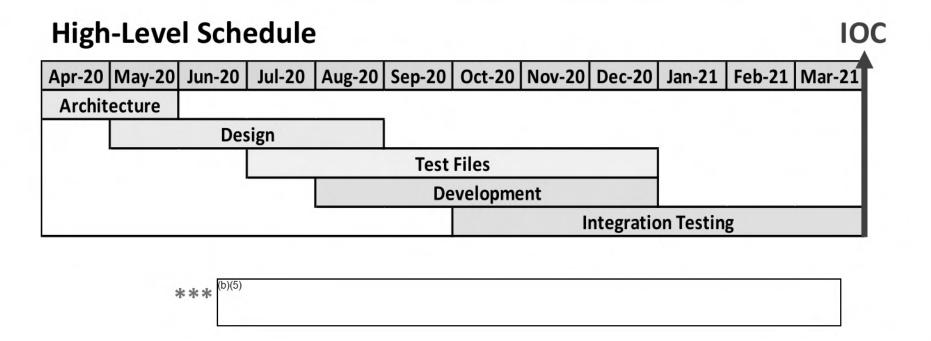




Current Payer EDI Priorities

Claims XM Development and Implementation

- Three Product Teams; 95% dedicated to Claims XM.
- Estimated completion on or about 1 April 21.
- Key Stakeholders Delivery Operations (Veteran Family Member Program).







Remaining Payer EDI Priorities/Stakeholders

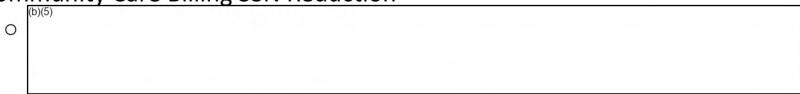
- EPRS (Parser)
 - o 837 work complete / 835 work remains.
 - Key Stakeholders Provider Relations and Services, Chief Informatics Office.

CAVE				
(b)(5)				
0				

- o Key Stakeholders Clinical Integration, Delivery Operations, Chief Informatics Office.
- ARS_____

O (b)(5)

- Key Stakeholders Delivery Operations, both POM and VFMP Staff.
- Community Care Billing SSN Reduction



o Key Stakeholders – Delivery Operations, Revenue, HSRM team.

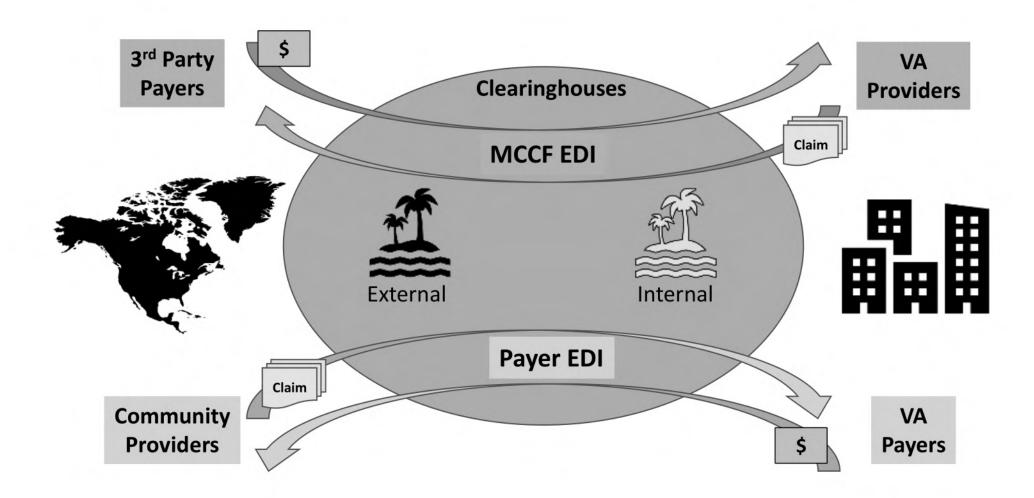
Prioritization Decision

Backlog Prioritization (1-4)
____EPRS (Parser)

CAVE

____ARS

____Community Care Billing SSN Reduction







Payer EDI Recent Highlights

- Oracle Upgrade (May 2020)
 - Updated Servers, Operating System, and Application Software
 - Zero EDI system failures since upgrade
- Backlog Elimination (August 2020)
 - Eliminated 1.5M claim backlog in 8 weeks
 - Increased capability to support 10x average daily rate

- Fee Payment Processing System (FPPS) MVP (August 2020)
 - Upgrade required to meet OIT security requirements
 - Limited capability restored while FBCS is retired





Priority Project Review





VA DoD Referral Standardization

Phased Implementation

Executive Leadership Committee (ELC)	Decision Needed / Priority Discussion
b)(5)	

Project Description

Creation of processes and procedures which allow for necessary data sharing to support quarterly advanced payments from VA to DoD for care provided to eligible Veterans, along with revenue capture and workload tracking for VA.

Upcoming Milestones

Key Performance Indicators (KPI)

- 35,846 VA/DoD consults entered since FY20; 6,665 currently open
- 97% of open VA/DoD consults are in scheduled status
- · Live Pilot Results:
 - Biloxi/Pensacola FY20: 95% automated consult/claim clean match rate
 - NCR FY20: 70% consult/claim clean match rate

Accomplishments

- W/ NCR AP PILOT
- 5/1/20 GO LIVE _ 9/14/20: REPORT ON _ NCR AP PILOT RESULTS FOR HEC
- 10/8/20 : CARE COORDINATION SOP UPDATE RELEASE (HSRM USE) & TRAINING
- 11/18/20: HEC APPROVAL OF NEXT AP SITES GO-LIVE
- 11/30/20: CAREPOINT **EXCEPTIONS CLAIMS WORKLIST ROLLOUT**
- 12/1/20: NEXT AP SITE GO-LIVES (WOMACK, KEESLER/ EGLIN/TYNDALL MTFS)

OCC Business Dependencies

- Clinical Integration: CI has trained VAMC Community Care staff on standard VA/DoD care coordination processes. Recently trained field on HSRM use for DoD
- DO/POM: (b)(5)
- RO Staff (b)(5)
- OCC BOA/Finance and VAMC Fiscal Staff:
- VHA VSSC (b)(5)
- DoD DHA:

Office of Information and Technology (OIT) / Data Dependencies

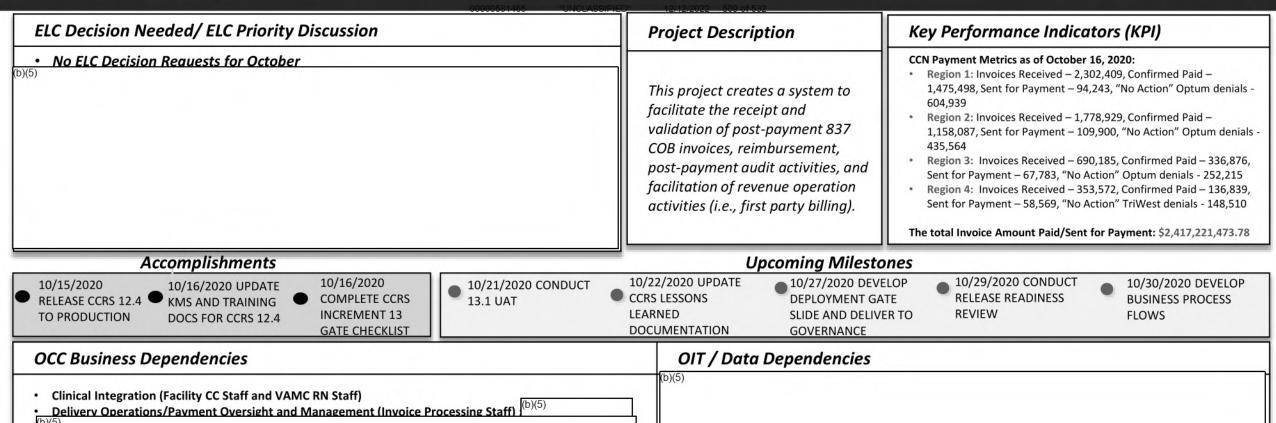
(b)(5)

Revenue Operations (Facility Revenue, RUR, and CPAC Staff) (b)(5)

• Finance (OCC Finance and Informatics Staff) (b)(5)

VAMC / Fiscal Budget Staff: (b)(5)

National Deployment



For ELC Awareness

Project Description

EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integrations for administering the CCN contract.

Key Performance Indicators (KPI)

- Quality Check UI: 42/80 Users (Δ = +1)
- CCN Accreditation Waivers UI: 31/30 Users (No change)
- CCN Complaints & Grievances UI: 29/54 Users (No change)
- CCN Congressional Inquiries UI: 31/42 Users (No change)
- CCN Corrective Action Plans (CAPs) UI: 29/30 Users ($\Delta = +1$)
- CCN Network Adequacy Deviations UI: 28/51 Users (No change)

Accomplishments

08/20/2020 EPRS Release 6.0 D: EDI 837
 7.0 D: EPRS Data Data Layer Rework

08/28/2020 EPRS Release 09/30/2020: EPRS Pre-

Integration (eCAMs)

Prod R10.0: Complaints

UI & Quality Check

10/14/2020: EPRS SQA R10.1:

Congressional Inquiries & N.A. Deviations

10/29/2020: EPRS Prod R10.0: Complaints UI &

Quality Check

12/04/2020: EPRS Prod

Upcoming Milestones

R12.0: EPRS Technical Data R10.1: Congressional Integration for CCRS

12/16/2020: EPRS Prod

Inquiries & N.A. Deviations

OCC Business Dependencies

Project Dependencies

• Community Care Contract Administration/Support (CCCA/S): (b)(5)

• Community Care Network Management (NM) (b)(5)

OIT / Data Dependencies





Urgent Care IPT

National Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

Implementation Updates:

- 1. R4 Webinar held on 9/23 and 9/24, with over 500 participants at each session.
- 2. CCN Urgent Care for Region 4 went live on 9/30.
- 3. Region 4 Office Hours and Daily sync up held on go-live week to support implementation.

Project Description

Coordinates the transition of urgent care benefit from PC3 to CCN. Work coordinated under the Urgent Care IPT falls into three categories: operations, contract modifications, and CCN transition.

Upcoming Milestones

Key Performance Indicators (KPI)

- Average Urgent Care authorizations:
 - Region 1: 1,400 per week
 - Region 2: 600 per week
 - Region 3: 1,350 per week
 - Region 4: 900 per week
- Average of 350 Urgent Care calls to VA Call Center per day

Accomplishments

09/29/20 CCN URGENT CARE REGION 4 KICK OFF 09/30/2020 CCN
 URGENT CARE
 REGION 4 GO-LIVE

(b)(5)

TBD: REGION 5 UC CCN GO-LIVE

OCC Business Dependencies

Office of Information Technology / Data Dependencies

· No Business Dependencies identified.

(b)(5)





Appendix

PMR Project Slides





Cerner OCC Integration Project

Project Development

ELC Decision Needed/ ELC Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes

Key Performance Indicators (KPI)

TBD: Focusing on timeliness measures and qualitative surveys

Accomplishments

- **Cerner Referral Manager Functional Testing:** 8/17/2020 - 8/28/2020
- **Exploratory Testing:** 8/24/2020 - 8/29/2020
- **Super User Training:** 8/10/2020-8/29/2020
- ORA: 9/7/2020
- End User Training (Spokane): 9/28/2020
- **HSRM SIU Interface Go-Live: End of September**
- **IOC Go Live:** 10/24/2020

Upcoming Milestones

OCC Business	Depend	encies
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Highlight OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff (b)(5)

- -Payment Operations Management
- -Revenue Operations (Facility Revenue, RUR, and CPAC Staff)

-Women's Health (IVF and Infertility)

OIT / Data Dependencies

Community Care Network

Post Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

• **DECISION:** No ELC decisions needed at this time.

Project Description

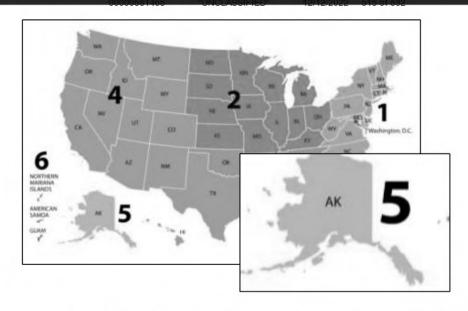
Complete regional deployments to achieve CCN in Regions 1-6 and consolidate regional operations support as transitions complete to focus on stabilizing and optimization.

Key Performance Indicators (KPI)

- CCN is fully deployed across 49 states within Regions 1-4.
- As of September 30, 2020, Urgent Care is live across CCN Regions 1-4.
- CCN Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1.

Accomplishments Upcoming Milestones 06/08/20 R4P1 ● 06/16/20 R3P2 ● 07/21/20 R4P2 ● 08/11/20 R4P3 ● 08/25/20 R4P4 SHCD ● 09/01/20 R2 & R3 URGENT ● 09/30/20 R4 URGENT 04/01/21 R5 SHCD SHCD GO-LIVE SHCD GO-LIVE SHCD GO-LIVE CARE CUTOVER FROM PC3 CARE CUTOVER FROM PC3 **GO-LIVE** SHCD GO-LIVE **GO-LIVE** Office of Information and Technology (OIT) / Data Dependencies **OCC** Business Dependencies (b)(5)• Network Management Clinical Integration (b)(5) Contract Administration (b)(5)

Region 5 Announcement

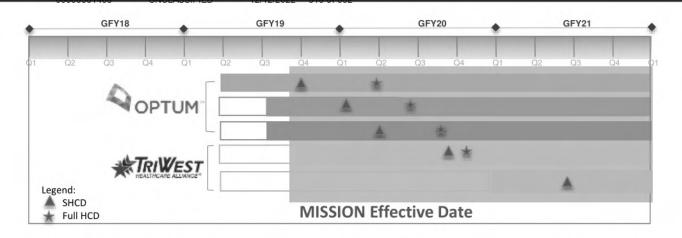


- Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1/2020.
- The Post Award Meeting is scheduled for 10/19/2020.
- The Kickoff Meeting is scheduled for 11/4/2020.
- Region 5 has a Veteran population of more than 68,000 with more than 33,000 Veterans enrolled in healthcare.





CCN Contract Award and Implementation Update



CCN Regions



- Awarded 12/28/18, start of health care delivery (SHCD) 6/26/19, full deployment by 12/28/19
- Awarded 12/28/18, protest filed 1/22/19, protest resolved 5/2/19, performance resumed 5/6/19, SHCD 10/7/19, full deployment by 4/9/20
- Awarded 12/28/18, protest resolved 5/3/19, appeal with the US Court of Federal Claims, stay of performance to Optum lifted on 7/22; SHCD on 10/7/19, full HCD achieved by 6/22/20
- Pre-Award protest dismissed; award made 8/6/19, SHCD 6/8/20, full HCD achieved 8/31/2020
- Awarded 10/1, Post Award Meeting 10/19, Kick-off Meeting 11/4, SHCD March 2021, full HCD by 4/1/21
- R6 Pre-Solicitation



Indian-Tribal Health Coordination

National Deployment

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ELC Decision Needed/ ELC Priority Discussion	Project Description	Key Performance Indicators (KPI)	
No ELC decisions needed. Accomplishments: • Agreement modification was completed. Among the items it expands reimbursement to include telehealth and COVID related services by third party partners to IHS/THP sites (AKA PRC). • CC approach – Draft final pan completed and will be sent for wider VA concurrence week of 10/21/20. • Program office presented to the BIMS on 9/11. • The annual tribal retraining held week of 9/15. • Internal controls SOP completed	Integrate the IHS/THP Reimbursement Agreement Program (RAP) operations with other OCC efforts. Tasks included executing an advisory board and developing a Care Coordination Plan; hosting tribal and VA staff training; continuous communication efforts; program expansion; and community Outreach and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted 	
Accomplishments		Upcoming Milestones	
PHARMACY MOD	09/23/2020 IHS/THP ATION ON RAP STATUS VIRTUAL RETRAINING		
OCC Business Dependencies	OIT / Data Dependencies		
(b)(5)	N/A Risk: Mitigation:		





Executive Leadership Committee (ELC) Priority Discussion

No ELC decisions needed or priority discussion topics at this time.

Project Description

Deploy AMCMS Software as a Service (SaaS) product that integrates financial, medical, and utilization management through data analytics to accurately forecast, monitor and control Community Care's medical services.

Key Performance Indicators (KPI)

Key financial & utilization metrics tracked include, but are not limited to:

- UM Metrics: Average Paid per Claim, Average Number of Claims per Referral, Average Total Paid per Referral, Average Cost per CoC, Average Cost per SEOC, Average Length of Stay, Percent of ED Visits Resulting in Inpatient Admission, Expenditures per CC Provider.
- FM Metrics: Spent/Obligated Amounts versus Total Available Budget, Projected Total Expenditures versus Total Available Budget.

Accomplishments

- 9/28-10/5 STALE REFERRAL LOGIC **UAT ROUND 4**
- 10/8 UAT TEST **EVALUATION** REPORT APPROVED
- 10/9 VISN 8 **KICKOFF MEETING**
 - 10/13 NATIONAL **DEPLOYMENT GATE REVIEW APPROVAL**
- 10/19 NATIONAL **DEPLOYMENT OF AMCMS MODEL**
- 10/19-10/26 AMCMS 10/21 NETWORK VIRTUAL WEBINAR **TRAININGS**

Upcoming Milestones

- MANAGEMENT REQUIREMENTS GATHERING
- 10/27 LESSONS **LEARNED** UPDATE

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

ELC Decision Needed/ ELC Priority Discussion N/A

Project Description

HealthShare Referral Manager (HSRM) is an enterprise-wide COTS system in support of community care used by community care staff to generate referrals and authorizations for Veterans receiving care in the community.

Key Performance Indicators (KPI)

- 3,210,309: Total Referrals FY 2020 (Through 10/9/2020)
- 185,645: Total Referrals FY 2019
- 18,229: Total number of VA user accounts provisioned
- 18,320: Number of Community Providers provisioned
- 6,569: Number of unique Community Provider locations
- 148: Number of VAMC sites actively using HSRM
- 5,272: Support Ticket Count for September
- Top 3 Support Ticket Categories for September:
 - 1. Provisioning/needs access-VAMC
 - 2. Provisioning/needs access-community provider
 - 3. Training/knowledge issue

Accomplishments

09/26/2020 CERNER SCHEDULING MESSAGE GO-LIVE 10/19/2020 RELEASE 11 UAT START

10/24/2020
 CERNER SPOKANE
 GO-LIVE

■ 10/28/2020 CAEC 1.5 GO/NO GO PRESENTATION NOVEMBER 2020CAEC 1.5 ND RELEASE

Upcoming Milestones

11/13/2020 RELEASE 11 GO/NO GO PRESENTATION ● 11/23/2020 RELEASE 11 ND

OCC Business Dependencies

Clinical Integration (CI Field Support Director & Assistants)

 Delivery Operations/POM

 Einance (OCC Finance and Informatics Staff):

 Revenue Operations (Facility Revenue, RUR, and CPAC Staff):

OIT / Data Dependencies

(b)(5)

Overview of Release 11.0 Enhancements

 Release 11 will contain several general HSRM enhancements in addition to HL7, MVI, Task Management, and Offline Referral Form enhancements. All of which will increase HSRM usability and efficiency.

HL7 Messaging

- Add Appointment Scheduled Method to HL7 SIU Outbound
- Add Treating Specialty to HL7 SIU Message
- SIU Message to Cerner Contain Scheduling and Cancellation Notes

Task Management Enhancements

Create new manual task- ""Message VA to VA""

MVI

- MVI Audit Trail: Display Veteran Data changes from MVI
 - MVI Integration: Receive Veteran Demographic updates from MVI

Reporting

- Add Level of Care to the CI Tasking Reports
 - Community Wait Times Report Enhancements, and adds "Recorded Date"

Community Provider Provisioning Enhancements

- The ability to provision community providers by NPIs.
- Referral lists would only display referrals where the assigned care provider NPI matches.

Offline Referral Form

- Prevent users from being able to generate an Offline Referral Form if there is no provider assigned
 - Message displayed instructing the user to add a provider

Veteran Eligibility Status workflow

- Eligible status Referral workflow as normal
- Non-Eligible status Program authority locked and ability to refresh eligibility data

Additional HSRM Enhancements

- FY22-FY23 Bene Travel Program Authority
- Limit ability to change Affiliation for CCN1-6 Users
- Make Provider a required field unless there is an optional task
- Add Appointment Date Timestamp to Data Feed
- Enable/Disable interfaces via task
- Modify logic to trigger downstream update to a referral; when any value changes on the Referral Detail Page or Appointments are recorded
- Notify CCRS of Affiliation Changes
- Refactor Task API for General CCRA Use
- Improve Error log handling by blocking any outgoing messages where providers do not have an email listed on their provider profile
- Allocate Revenue tasks for further review- Modifiable Due Dates (Tickle Feature)
- Pre-cert Auto Task Due Date Update
- Remove taxonomy code from PPMS Provider Search results, display only the description
- Add date range to audit trail filters



Overview of Release 10.0 Enhancements

 Release 10 contains general HSRM enhancements in addition to Community Provider Profile enhancements, Revenue Tasking enhancements and enhancements to the HSRM Task List. All of which will increase HSRM usability and efficiency.

General HSRM Enhancements

- Offline Referral edits to include the display of multiple Appointments/Providers and other enhancements
- Suspended Referrals: enhanced restrictions on user ability to make updates to suspended referrals
- **Remove all statuses except Approved** from the status drop down when the referral is in a Suspended status
- Enable ability to email reports for VA users to prevent the timeout errors. Emails will be limited to 40 MB, as this is a VA email limitation
- Scheduling Comments added to the HL7 feed to writeback to CPRS
- Appointment Time Zone added for appointments recorded in HSRM
- Optional Tasks: OT read only for CCN security groups
- Optional Tasks: added OT search to referral screen
- CAC Logins: ability for DoD users with CAC cards to access HSRM

Task Management Enhancements

- Search on Referral by Category of Care
- Auto assignment of new referrals by SSN, Category of Care, and Veteran Surname
- Modified Task Triggers for EOC Complete follow up for medical documentation tasks
- Follow up with Veteran: Change from Automated Task to Manual Task

Revenue Tasking Enhancements

- Precertification Workflow: Turn off trigger PRCT triggers for Precertification Task
- "Clean Slate" Revenue Task List: Precertification Tasks greater than 10 days old, where the task status is Pending, and Task Comments field is blank will be archived from the task list

Community Provider enhancements

- Provisioning Enhancements: provision community providers by NPI and location
- Limit referral status dropdown to Accept, Reject, first Appointment Made and Initial Care Given





Executive Leadership Committee (ELC) Decision Needed /	Project Description	Ке
Priority Discussion DECISION: No decision requested at this time (b)(5)	One Consult 2.0 was approved for project intake by the Community Care Steering Committee on March 31, 2020. The focus of One Consult 2.0 is to replace Consult Toolbox with a web application that follows a DevOps model, in order to eliminate the long and costly desktop deployment process of Consult Toolbox. The new web app will include user-validated requirements and existing Consult Toolbox backlog items, while filling any additional gaps within the existing system. It also pulls in DST and SEOC DB into ONE project and highlights their interdependencies	•
Accomplishments	Upcoming Mil	estoi

(b)(5)

Performance Indicators (KPI)

- OST integrated into CPRS- Q1 FY 21
- TB integrated into CPRS- Q2 FY 21

DEVELOPMENT COMPLETED: 10/05/2020

SQA TESTING COMPLETED: 10/13/2020

DST MAPPING TABLE **UPDATES** WENT LIVE:

COMPLETED CTB V2.0 REQUIREMENTS **GATHERING AND** WIREFRAMES: 10/1/2020 10/9/2020

CTB V2.0 SPRINT 1 DEVELOPMENT COMPLETED: 10/9/2020

CTB V1.9.0076: NATIONAL ROLLOUT COMPLETE 10/23/2020

CTB V1.9.0077: PRE-PROD IOC TESTING COMPLETE: 10/28/2020 CTB V2.0 DEVELOPMENT COMPLETE 12/24/2020

CTB v2.0 CONSULT **FACTORS** DISCUSSION CONTINUES

DST OFFICE HOURS CONTINUE: 10/19/2020

OCC Business Dependencies

OIT / Data Dependencies

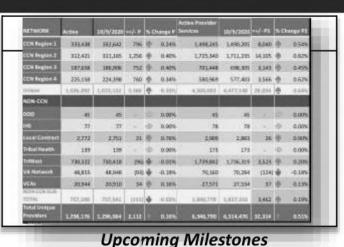




ELC Decision Needed/ ELC Priority Discussion	
• Priority Discussion:	
(0)(0)	

Project Description

Provider Profile Management System (PPMS): A consolidated repository to house provider information for multiple community network and federal partner provide along with a tool to allow VA staff to view and manage that information.



Accomplishments ● 7/29/20 **●** 08/11/20 **●** 8/11/20 08/20/20 ■ 08/20/2020 - ■ 8/25/2020 ■ 09/8/2020 09/15/20 10/27/20 7/7/20 7/14/20 **7/27/20** 09/25/20 11/5/20 9/9/2020 **PPMS 10 PPMS 8.1** VA.GOV HOTFIX 8.1.1.1 VA CPL **PPMS 9.0** VA.GOV **PPMS 9.0** VA.GOV VA.GOV **PPMS 9.1 PPMS 9.1** PPMS 10 NATIONAL NATIONAL PIE RESTART NATIONAL **GO-LIVE GO-LIVE SPRINT 25** RELEASE SPRINT 27 **GO-LIVE SPRINT 28** SPRINT 29 **GO-LIVE NATIONAL PRIORITY SITES GATE REVIEW** GATE REVIEW **GATEWAY** RELEASE REVIEW

(b)(5)

OCC Business Dependencies

- Clinical Integration
- **Network Management**
- Community Care Network
- **Delivery Operations**
- **Revenue Operations**

VAMC/CPO & Pharmacy

(b)(5)

OIT / Data Dependencies



ELC Decision Needed/ ELC Priority Discussion

Decision: None

Priority Discussion: None

Project Description

Establish OCC Data Governance to ensure data are reliable, dependable, consistent, and well documented. OCC Data Governance will include standards and policies that drive how data are used and maintained to reduce misuse and misreporting of data and increase the credibility and the quality of that data to support high-quality, consistent, and timely data to drive accurate decision-making.

Key Performance Indicators (KPI)

- Frequency data reported as accessible timely, complete, accurate and reliable
- Percent of compliance with policies
- Percent of systems achieving established performance metrics
- · Percent of systems with complete documentation

Accomplishments

10/7/2020 SPONSORED ISSUES TRACKER DG WORKGROUP GOVERNANCE ROAD MAP

10/14/2020 **APPROVED TECH & DATA**

10/16/2020 **INITIATED E-REPOS DATA USABILITY ANALYSIS**

10/21/2020 **APPROVED STANDARD** SYSTEMS ARTIFACTS

(b)(5)

10/30/2020 DRAFT DATA GOVERNANCE **COMMUNICATION PLAN**

Upcoming Milestones

11/18/2020 **CHANGE MANAGEMENT** SPONSOR PLAN

11/25/2020 DRAFT DATA GOVERNANCE STRUCTURE

OCC Business Dependencies

Upstream Dependencies • <u>VA Data G</u>overnance: (b)(5)

• **OIT** (b)(5)

OIT / Data Dependencies

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Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Need	ed / Priority Discussion	Project Description	Key Performance Indicators (KPI)
DECISION: NO ELC decision currently		The project scope is to develop a standardized Continuity of Operations Plan (COOP) Appendix for all mission critical OCC systems and functions. Also, a standardized process for scheduled and unscheduled system outage with an After-Action Report.	 Metric 1: Process for unscheduled outage notification Metric 2: COOPs developed Metric 3: Repository complete Metric 4: KMS and SOPs updated
Accomplishments		Upcoming Milestones	
08/04/2020 – APPROVED FOR GO AT CCSC 08/13/2020 – KICK-OFF PROJECT MEETING	DIRECTORATES		0/20- COOP ELOPMENT
OCC Business Dependencies - Lite		Office of Information and Techno	ology (OIT) / Data Dependencies - Lite
Highlight OCC Business Dependencies: (b)(5) (b)(5)		• Highlight OIT/Data Dependencies: (b)(5) (b)(5)	





Community Care Integrated Billing and Accounts Receivable (CC IB/AR) - Phase 2

National Deployment

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

 The initial contract period ended on 06/04/20. A six-month extension to continue the VistA Integrated Billing (IB) and Accounts Receivable (AR) updates was approved and awarded. This extension will run through 12/04/20 and will provide IB/AR patches with requested and mandated enhancements for all 130+ VistA instances.

Project Description

VistA Integrated Billing (IB) and Accounts Receivable (AR) enhancements for administration of copay benefit, billing system collection updates and modification of VistA reports in support of MISSION Act and COVID requirements.

Key Performance Indicators (KPI)

• No specific KPI's were identified for this phase of the project.

Upcoming Milestones

Accomplishments

- 05/18/20 (2) IB & (1) AR PATCH NATIONALLY RELEASED
 - 06/02/20 IB 675 **NATIONALLY RELEASED**
 - **NATIONALLY RELEASED**
- NATIONALLY RELEASED
- **NATIONALLY** RELEASED
- 08/13/20 IB 677 09/10/20 IB 678 09/30/20 AR 361 10/19/20 IB 682 NATIONALLY **RELEASED**
- AR 372 & IB 689 ARE NATIONALLY RELEASING ON 11/09 & 11/04
- **12/04/20** CONTRACT COMPLETED

OCC Business Dependencies

· No business dependencies outside of Revenue Operations (RO) were identified for this phase of the project.

Office of Information and Technology / Data Dependencies

Downstream Dependency – None at this time.

(b)(5)



Enrollment System Community Care (ESCC)

Development

Executive Leadership Committee (ELC) **Decision Needed / Priority Discussion**

DECISION:

• No ELC decisions needed or priority discussion topics at this time.

Project Description

 The ESCC project provides automation for Community Care static eligibility determinations allowing ES to determine, communicate and track Veteran eligibility.

Key Performance Indicators (KPI)

- Metric 1: Communicate the Community Care static eligibility to CCN and TPA (eligibility files sent daily to TPA and CCN) 100%
- Metric 2: Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily

Accomplishments

09 09/2020 ES RELEASE TO EXPAND STATIC ELIGIBILITY TO NOT ENROLLED COVERED VETERANS (INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE IS TURNED OFF UNTIL CONTRACT MOD IS COMPLETED)

■ 09/2020 SUCCESSFUL **MEETING WITH TW** AND OPTUM TO **DISCUSS SUMMARY OF CHANGES TO ELIGIBILITY FILE**

■10/2020 CC ELIGIBILITY VCE MODIFICATION SENT TO CCN CONTRACTORS. **AWAITING FINAL APPROVAL**

11/2020 TURN ON ES/VISTA **FUNCTIONALITY TO AUTOMATE COLLATERAL OF VETERAN ELIGIBILITY** (INCLUDE COPY OF RECORDS IN **ELIGIBILITY FILE IS TURNED OFF UNTIL CONTRACT MOD IS COMPLETED)**

Upcoming Milestones

OCC Business Dependencies

- · Highlight OCC Business Dependencies: Clinical Integration (Business Owners)
- System Engineering Management (SEM)
- Business Intelligence Service Line (BISL) (b)(5) Community Care Contractor (CCN) -
- VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteran Experience Office (VEO)

Issue:

Mitigation:

Office of Information and Technology (OIT) / Data Dependencies	Office of	f Information a	nd Technology (OIT) ,	/ Data Dependencies
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Issue

(b)(5)

Mitigation:





VA DoD Revenue Standardization

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

DECISION: No new decisions needed from Revenue Operations regarding back end process at this time.

Project Description

the VHA support DoD Reimbursement pilots with a webbased tool, standardize use of Intragovernmental Payment and Collection System (IPAC), standardized monthly batch processing, invoice streamlined trackable process from authorization of care through to invoice payment and reconciliation, monthly and quarterly reconciliation reports.

Key Performance Indicators (KPI)

Align with the VA/DoD Advanced Payment Methodology.

Accomplishments

2019 SEM BUSINESS ANALYST TASKS COMPLETE

5/15/2020 SEM SHAREPOINT DEVELOPMENT COMPLETE

8/31/20 VSSC VALIDATION OF DOD DATA COMPLETE

Upcoming Milestones

10/31 VSSC CONTINUATION OF VALIDATING AND CODING OF DOD DATA

11/1 DOD APPROVED **EXPANSION** OUTCOME/DECISION

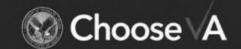
OCC Business Dependencies

- There are no dependencies to other OCC Directorates.
- Revenue Operations (Facility Revenue, RUR, and CPAC Staff).

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
• None	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods • Metric 1: over 100,000 Veteran's vaccinated • Metric 2:Reimburse Walgreens 99% accuracy
Accomplishments	Upcoming Milestones
FILE/INVOICE SENT	/30/2020 CLOSE IT RETAIL ARMACY
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(5) (b)(5) RISK: Mitigation:	RISK:





Appendix

Project Idea Evaluation Updates





Project Idea Evaluation (PIE) Updates

Project Name	Received by PIE Team	Presented at PMR	PMR Decision	Ops Notified	CCSC Presentation Date	CCSC Go / No Go	Ops PM Resource Assigned
Integrated Product Environment (IPE)	9/14	9/22	Approved	9/24	10/20	Go	10/9 (b)(6)
CP&E Close Out	8/26	9/8	Approved	9/14	TBD	TBD	Resource not available until Nov. 1st
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	On Hold	TBD	TBD	TBD	TBD	TBD
Community Care Billing SSN Reduction	7/21	8/11	Approved	8/13	10/20	Go	10/2
Veteran Credit Database Program	7/16	8/11	Deferred	8/13	N/A	N/A	N/A
Community Administration of Vaccine Encounters (CAVE)	6/23	7/14	Approved	7/16	7/28	Go	7/21
Comprehensive Disaster Recovery Plans / OCC Continuity Of Operations Plan (COOP)	6/19	6/23	Approved	6/29	8/04	Go	7/20 (b)(6)
ePrescribing	6/19	6/23	Approved	6/29	9/15	Go	8/24





Veteran Credit Database

Deferred Project

Veterari ereare batabase					
Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description	Key Performance Indicators (KPI)			
DECISION: No current ELC decision required at this time. BACKGROUND: • Enactment of Law on 5/24/2018 – Implementation Deadline 5/24/2019 (5)	 Metric 1: The electronic VA claims are paid within and paper claims are paid within 45 days. Metric 2: Ensures Veteran cost share and deductile adjudicated accurately. Metric 3: 100% of information furnished to credit reporting agencies will be verified Veteran response debt. Metric 4: Decrease in Appeals and Calls for improve reported debt. 				
Accomplishments	Upcoming Milestones				
VIPR V18-00312-000 for automated solution submitted. Status as of 1/08/2020 –Unfunded Request/Pending Resources • JANUARY 2021	L-LEGISLATIVE RELIEF REQUEST FO	R FY23 LEGISLATIVE CYCLE WILL BE SUBMITTED.			
OCC Business Dependencies	Office of Information a	nd Technology (OIT) / Data Dependencies			
5)	(b)(5)				