

In Reply Refer To: FOIA Request 21-06268-F

January 10, 2023

Ryan Mulvey Americans For Prosperity Foundation 1310 N. Courthouse Rd Arlington, VA, 22201

Dear Mr. Mulvey:

This letter is the sixth email production in response to your May 27, 2021, request under the Freedom of Information Act (FOIA), 5 U.S.C. § 552, submitted to the Department of Veterans Affairs (VA) Veterans Health Administration (VHA) Central Office FOIA Office, requesting the following records:

- 1. "Records reflecting aggregate totals and percentages for pending and completed appointment wait times and related data, as previously disclosed in summary form at the Veterans Health Administration ("VHA") "Patient Access Data" portal, https://www.va.gov/health/accessaudit.asp. The time period for this item is March 1, 2021 to the present records that reflect the requested data on a monthly basis (e.g., total number of scheduled appointments for each month of the requested time period) or per reporting period. If month-by-month or period-by-period data is unavailable, please provide the requested data in the form otherwise maintained by the agency. If responsive records are kept in a CSV or Excel format, please produce the records in their native format.
- All records concerning the VHA's decision to eliminate proactive disclosure of patient access in nation-wide summary form, as previously available at the "Patient Access Data" portal, https://www.va.gov/health/access-audit.asp. The time period for this item of the request is January 1, 2021 to the present.
- 3. All guidance documents, legal opinions, administrative orders, directives, or policy statements issued by the VA concerning any of the following topics:
 - Interpretation of the VCCP regulations and designated access standards, including the agency's method for calculating wait times (e.g., discussion of the difference between "date of request," "patient preferred date," and "clinically indicated date");
 - The process by which the VA obtains patient consent to schedule an appointment outside the 20-/28-period established by the VCCP designated access standards;
 - c. Limiting or dissuading veterans from using community care; and
 - The impact of the COVID-19 pandemic on administration of the VCCP.

- 4. All records reflecting communications between or amongst any of the following entities, offices, or components concerning any of the topics listed in Item Three: (a) VHA, (b) VA Office of the Secretary, (c) VA Office of General Counsel, (d) White House Office of Management and Budget, (e) White House Domestic Policy Council, or (f) Office of the White House Counsel.
- 5. All records concerning congressional requests or inquiries pertaining to any of the topics listed in Item Three. This item includes, but is not limited to, records originating with any Member or entity of Congress, formal agency responses thereto, and internal VA communications regarding the congressional request or inquiry. Searches should be conducted, at a minimum, within the VHA, VA Office of the Secretary, VA Office of General Counsel, and VA Office of Public and Intergovernmental Affairs."

Additionally, on or around May 28, 2021; fourteen (14) VA Medical Center FOIA Offices received the following requests:

"Pursuant to the Freedom of Information Act, 5 U.S.C. § 552 ("FOIA"), AFPF hereby requests access to the following categories of records concerning operation of the (previously indicated) VA Medical Center hospital. The time period for all items of this request is January 1, 2020 to the present. Please note: to the extent an item of this request seeks data (i.e., Items 1–7 and 9), please provide records reflecting that data on a monthly basis (e.g., total number of scheduled appointments for each month of the requested time period). If month-by-month data is unavailable, please provide the requested data in the aggregate or in the form otherwise maintained by the agency. If responsive records are kept in a CSV or Excel format, please produce the records in their native format.

- 1. Records reflecting the total number of appointments scheduled.
- 2. Records reflecting the total number of appointments completed.
- 3. Records reflecting the total number of appointments cancelled:
 - a. By a VA health care provider; and
 - b. By a patient.
- 4. Records reflecting the total number and percentage of appointments for primary care, mental health care, or non-institutional extended care services scheduled:
 - a. Within 20 days of a patient's date of request; and
 - b. Over 20 days of a patient's date of request.
- 5. Records reflecting the total number and percentage of appointments for specialty care scheduled:
 - a. Within 28 days of a patient's date of request; and
 - b. Over 28 days of a patient's date of request.
- 6. Records reflecting the total number of patients who, in consultation with a VA health care provider, agreed to schedule an appointment outside the 20-/28-day period established by the VCCP designated access standards.
- 7. Records reflecting the total number of patients who refused to schedule an appointment outside the 20-/28-day period established by the VCCP designated access standards.

8. All records reflecting the policies and practices for documenting whether a patient agrees or refuses to schedule an appointment outside the 20-/28-day period established by the VCCP designated access standards. This item would include, for example, any blank, standardized form(s) for memorializing such patient consent.

1/10/2023

- 9. Records reflecting the total number and percentage of patients:
 - a. Eligible for community care under the VCCP;
 - b. Who have elected to receive community care under the VCCP; and
 - c. Who have declined to receive community care under the VCCP.
- 10. All guidance documents, legal opinions, administrative orders, directives, policy statements, or communications exchanged between the (previously indicated) VA Medical Center hospital and the Veterans Health Administration, VA Office of General Counsel, VA Office of the Secretary, White House Office of Management and Budget, or White House Domestic Policy Council concerning:
 - Interpretation of the VCCP regulations and designated access standards, including the agency's method for calculating wait times (e.g., discussion of the difference between "date of request," "patient preferred date," and "clinically indicated date");
 - The process by which the VA obtains patient consent to schedule an appointment outside the 20-/28-period established by the VCCP designated access standards;
 - c. Limiting or dissuading veterans from using community care; and
 - d. The impact of the COVID-19 pandemic on administration of the VCCP."

Consolidation:

Per communication in or about September 2021, we notified you through counsel that we consolidated all of the above-mentioned FOIA requests into one tracking number, 21-06268-F (appearing at the top of this letter), for ease of use and tracking post litigation filing. Any further communication will be under FOIA tracking number 21-06268-F.

Search Terms:

As agreed upon on in discussions and memorialized in writing (via email) around May 16, 2022, the parties agreed on the following search terms and custodians:

Search Item	Search Terms	Custodians
Search #1, <u>HQ</u> FOIA ITEM 2	[("access to care" OR "patient access") AND ("data" OR "numbers")] AND ("website" OR "site" OR "portal") AND ("transfer" OR "move" OR "shift" OR "relocate" OR "create date" OR "inspector general")	KirshLiebermanHudsonOshinskiStone

Coord #2 IIO	("MISSION A et? OD "MCCD" OD	. V:l
Search #2, HQ FOIA ITEM 3a & 4-5 and VAMCs FOIA Item 10a (W/O CACMI)	("MISSION Act" OR "VCCP" OR "Veterans Community Care") AND ("date of request" OR "request date" OR "patient preferred date" OR "create date" OR "clinically indicated date" OR "patient indicated date" OR "wait time standard" OR "access standard" OR "file entry date" OR "community care eligibility") AND [("guidance" OR "direct*" OR "policy" OR "memo*") OR ("inquiry" OR "request" OR "question" OR "inspector general")]	 Kirsh Upton Matthews Boyd Cunningham Lieberman Greenstone MacDonald Tucker Bradsher Sauber Hudson Blauert Henson Powers Raftery Stone Clancy Oshinksi Wilkie (x2) McDonough (x2)
Search #3, HQ FOIA ITEM 3a & 4-5 and VAMCs FOIA Item 10a	("MISSION Act" OR "VCCP" OR "Veterans Community Care") AND ("date of request" OR "request date" OR "patient preferred date" OR "create date" OR "clinically indicated date" OR "patient indicated date" OR "wait time standard" OR "access standard" OR "file entry date" OR "community care eligibility") AND [("guidance" OR "direct*" OR "policy" OR "memo*") OR ("inquiry" OR "request" OR "question" OR "inspector general")] AND "VHACACMI@va.gov"	Mary Fields
Search #4, HQ FOIA ITEM 3b & 4-5 and VAMCs FOIA ITEM 10b	("VCCP" OR "Community Care" OR "MISSION Act") AND ("access standards" OR "wait times") AND [("method*" OR "calculat*") AND ("process" OR "procedure" OR "direct*" OR "policy" OR "memo*")]	 Upton Matthews Boyd Cunningham Lieberman Greenstone MacDonald Tucker Bradsher

		 Hudson Blauert Powers Henson Raftery Stone Clancy Oshinski Wilkie (x2) McDonough (x2)
Search #5, HQ FOIA ITEM 3c & 4-5 and VAMCs FOIA ITEM 10c	[("community care wait time") AND ("eligible" OR "eligibility")] AND ("script" OR "referral coordination initiative")	 Kirsh Upton Matthews Boyd Cunningham Lieberman Greenstone MacDonald Tucker Bradsher Sauber Hudson Blauert Henson Powers Raftery Stone Clancy Oshinksi Wilkie (x2) McDonough (x2)
Search #6, HQ FOIA ITEM 3c & 4-5 and VAMCs FOIA ITEM 10c (w/VHACACMI)	(("community care wait time") AND ("eligible" OR "eligibility")AND ("eligible" OR "eligibility")) AND ("script" OR "referral coordination initiative") AND " whacacmi@va.gov "	Mary Fields

Search #7, HQ	[("COVID*" OR "pandemic") AND	 Kirsh
FOIA ITEM 3d &	("VCCP" OR "community care" OR	 Matthews
4-5 and VAMCs	"MISSION Act")]	 Boyd
FOIA ITEM 10d	ANTE ((6 1	 Sauber
	AND ("referral management" OR "consult	 Hudson
	management" OR "eligibility" OR "wait	 Hipolit
	time standard" OR "access standard" OR	 Blauert
	"pause")	 Upton
		 Tucker
		 Bradsher
		 Powers
		 Henson
		 Raftery
		 Stone
		 Wilkie (x2)
		 McDonough (x2)

Email Production:

In addition to the production outlined below, we are also enclosing Bates page 1648 with revised redactions. In particular, we have revised one redaction previously marked as justified under Exemption 6, which was a typographical error, to now Exemption 5.

This production is in response to Search #4 of your request.

Search #4-

- 3. All guidance documents, legal opinions, administrative orders, directives, or policy statements issued by the VA concerning any of the following topics:
 - The process by which the VA obtains patient consent to schedule an appointment outside the 20-/28-period established by the VCCP designated access standards;
- 4. "All records reflecting communications between or amongst any of the following entities, offices, or components concerning any of the topics listed in Item Three: (a) VHA, (b) VA Office of the Secretary, (c) VA Office of General Counsel, (d) White House Office of Management and Budget, (e) White House Domestic Policy Council, or (f) Office of the White House Counsel."
- 5. "All records concerning congressional requests or inquiries pertaining to any of the topics listed in item three. This item includes, but is not limited to, records originating with any Member or entity of Congress, formal agency responses thereto, and internal VA communications regarding the congressional request or inquiry. Searches should be conducted, at a minimum, within the VHA, VA Office

of the Secretary, VA Office of General Counsel, and VA Office of Public and Intergovernmental Affairs."

- 10. All guidance documents, legal opinions, administrative orders, directives, policy statements, or communications exchanged between the (previously indicated) VA Medical Center hospital and the Veterans Health Administration, VA Office of General Counsel, VA Office of the Secretary, White House Office of Management and Budget, or White House Domestic Policy Council concerning:
 - The process by which the VA obtains patient consent to schedule an appointment outside the 20-/28-period established by the VCCP designated access standards;

The time period for this item of the request is January 1, 2020 to the present.

As noted above, the search terms include:

("VCCP" OR "Community Care" OR "MISSION Act") AND ("access standards" OR "wait times") AND [("method*" OR "calculat*") AND ("process" OR "procedure" OR "direct*" OR "policy" OR "memo*")]

These search terms were applied to the following custodian mailboxes:

- Mark Upton
- Kameron Matthews
- Teresa Bovd
- Kristen Cunningham
- Steven Lieberman
- Clinton Greenstone
- Jennifer MacDonald
- Brooks Tucker
- Tanya Bradsher
- Richard Sauber
- William Hudson, Jr.
- Susan Blauert
- Pamela Powers
- Christopher Henson
- Meghan Raftery
- Richard Stone
- Carolyn Clancy
- Renee Oshinski
- Robert Wilkie (x2)
- Denis McDonough (x2)

We processed fifteen (15) pages as non-responsive for this search. There were also two (2) blank pages that appeared in this search and were not processed. Additionally, we processed five hundred and twenty-eight (528) responsive pages for this search. The Bates numbers for this dataset start at number 1761 and are located at the top center of the pages. The Bates numbering appears on the top center of the documents, any additional numbering that appear are original to the documents.

Determination:

My review of the documents revealed that they contained information that falls within the disclosure protections of FOIA Exemption 5 U.S.C. § 552(b)(5) and FOIA Exemption 6, 5 U.S.C. § 552(b)(6).

FOIA Exemption 5 provides that an agency need not disclose "inter-agency or intra-agency memorandums or letters that would not be available by law to a party other than an agency in litigation with the agency." Thus, Exemption 5 shields agency-created records that would be protected from civil discovery by a recognized evidentiary or discovery privilege.

Accordingly, Exemption 5 includes the deliberative-process privilege. That privilege covers records reflecting advisory opinions, recommendations, and deliberations that comprise part of a process by which governmental decisions and policies are formulated. Stated more concretely, the deliberative-process privilege exempts an agency record from disclosure under FOIA if the information it contains is both pre-decisional and deliberative.

My review of the records identified as responsive to your FOIA request reveals that they contain information that falls within the protection of Exemption 5. The recommendations, forecasted project dependencies, and risks and mitigation factors within the enclosed records marked with Exemption 5 redactions are pre-decisional, as they were expressed in advance of their relevant agency decisions. Furthermore, the redacted portions are deliberative because they contain the unadopted opinions of VA personnel participating in the decision-making process. Release of this information would cause injury to the deliberative process, as the release of the pre-decisional records to the public would negatively impact frank discussion on matters of policy between agency personnel. Consequently, VA denies your request for this information under FOIA Exemption 5, 5 U.S.C. § 552(b)(5).

FOIA Exemption 6 permits VA to withhold a document or information contained within a document if disclosure of the information would constitute a clearly unwarranted invasion of a living individual's personal privacy. Stated another way, VA may withhold information under FOIA Exemption 6 where disclosure of the information, either by itself or in conjunction with other information available to either the public or the FOIA requester, would result in an unwarranted invasion of an individual's personal privacy without contributing significantly to the public's understanding of the activities of the federal government.

More specifically, the information I am withholding, as indicated on the enclosed documents, under FOIA Exemption 6 consists of: employee names, employee titles, employee email addresses, and connection and direct dial in information for employee meetings, as the individuals associated with this information have a personal privacy interest in it.

The coverage of FOIA Exemption 6 is absolute unless the FOIA requester can demonstrate a countervailing public interest in the requested information by demonstrating that the individual is in a position to provide the requested information to members of the general public and that the information requested contributes significantly to the public's understanding of the activities of the Federal government. Additionally, the requester must demonstrate how the public's need to understand the information significantly outweighs the privacy interest of the person to whom the information pertains. Upon consideration of the materials provided, I have not been able to identify a countervailing public interest of sufficient magnitude to outweigh the privacy interest in this case. The individuals associated with this information have a personal privacy interest in information that outweighs any public interest served by disclosure of their identities under FOIA. Consequently, I am denying your request for this information under FOIA Exemption 6, 5 U.S.C. § 552 (b)(6).

Thank you for your interest in VA. If you have any further questions, please feel free to contact me at (785) 230-8430 or via email at stacy.ekis@va.gov.

Sincerely,

Stacy Ekis VHA FOIA Officer

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Enclosures:

FY 21 Key Initiative: Clinical Documentation Improvement

Originator	&	Date:	12/3/202
Susan Ree	Ы		

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)(5)
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	mprove Customer Service	OCC Ma	anaged / Revenue Operations	(b)(6)

Discussion:

OCC Policy, OCC Finance, and Portfolio Managers Vote Count: All Yes votes received. No dissents.





From: Subject:	(b)(6)	00000584262 "UNCLASS	SIFIED" 1/10/2023		
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	T.; (b)(6)	@guidehouse.com';(@guidehouse.com'; (b)(6)	
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	(BITS), LLC);	(b)(6)		ederal Advisory Partners)	Diduoris
Attached:		ember (2020).Community Car			
Agenda:					
 Proje 	ct Idea Evaluation	(PIE)			
0	VA Provider CCN	Retail Pharmacy Capability			
	Referral Based Ob				
	Priority Project Rev		A CONTRACTOR		
		ed Payment and Referral Stan			
		Management System (PPMS)			
0	Community Care	Reimbursement System (CCF	RS)		
Thank you!					
Please do n	ot forward this me	eting invitation.			
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00000584262

"I INCLASSIEIED"

1/10/2022

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	0/2020		prescriptions pre	মালিn of the শাওবাfication (Initially escribed by a VA provider to be f ns 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:				7 6			
OCC Leadership (Includes IDA and BIC):				Impact if Project Idea Not Approved:			
Community Care Network (Contract Mod):	has been provi	already in place for Region 4 ded for implementation date n progress for Regions 1-3.					
Recommended OCC	Strategic	Priority Alignment	Recommer	nded Project Designati	on Recom	mended Busines	s Owner
Implement Community Care Improve Customer Service	Network (CCN)		OCC Directorat	e Managed	(b)(6)		



Discussion:



Referral Based Obligations

Originator & Date: (b)(6) 11/17/20	020	Scope Definition: OCC nee Community Care programs	eds to assess a	nd establish an interim	and long-	term process for re	cording obligation	ns 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 impa	act identified at this time.	-1	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	Recommer	nded Project Design	nation	Recommended	Business Ow	ner
Improve Claims Processing	& Innova	te 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		Key Performance Indicator		
(b)(5)		fo ad pr	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	plishments:				Milestones:		
2020-10-05: SOP Update Release (VA HSRM use)	2020-10-08: Updated Care Coordination Training	2020-11-27 Approval of sites go-live	Next AP	2020-12-18: CarePoint Exceptions Claims Worklist Rollout	2020-12-23: VA/DoD Leadership Meeting: FY21 Q2 Rollouts	2021-01-01: AP FY21 Q2 Rollouts	2021-04-01: AP FY21 C Rollouts
(b)(5)	OCC Business Dependencies				Office of Information and	d Technologies/Data Dependo	encies
• (************************************				(b)(5)			



Risks 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: 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

2020-12-03: CCRS Release

2020-12-17: CCRS Release 13.3

Milestones:

2021-01-07: CCRS Release 13.4

13.2

OCC Business Dependencies

CCRA, FMS, PPMS, PIT, and MVI

Risks

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

Milestones:

2020-11-25: Draft Data Governance Structure 2020-11-30: Change
 Management Sponsor Plan

OCC Business Dependencies

Office of Information and Technologies/Data Dependencies

Issues

(b)(5)

-- 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

Upcoming Milestones

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
- 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)

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

(b)(5)

Issues

-- No Issues Found --

Milestones:





Enterprise Program Reporting System (EPRS)

Project Phase - Phased Implementation

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.	(No change) CCN Congressional Inquiries UI: 31/42 Users (No change)	
Accomplishments:	Milestones:		
2020-08-28: 7.0 D: eCAMS – Technical Release	2020-11-24: EPRS Prod 2020-11-25: EPRS Pre-Prod 2020-12-04: R12.0: EPRS Technical R10.1: Congressional & CAPs enhancements Release: CCRS	2020-12-14: EPRS Pre-Prod R10.3- Congressional UI 9.0 D: Technical Enhancements Release: HSRM	
OCC Business Dependencies	Office of Information and Tec	hnologies/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:

2020-09-11: Brief BIMs 2020-09-23: Tribe and VA staff retraining

2020-12-03: CC Plan Adopted

OCC Business Dependencies

Office of Information and Technologies/Data Dependencies

- None-Upstream
 - None-Downstream

Milestones:

Issues

-- No Issues Found --



(b)(5)



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 Scenario Review Finish Requirements Gathering User Guide **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
- 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)

OCC Business Dependencies

Risks

(b)(5)

-- No Risks Found --

Office of Information and Technologies/Data Dependencies

Issues

(b)(5)

-- No Issues Found --



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: CTB v2.0 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 Office of Information and Technologies/Data Dependencies (b)(5)Issues -- No Issues Found --



No ELC decisions needed or priority discussions at this time		Project Description		key Performance Indicator		
		The project scope is to development of Operations Plan for all mission critical OCC systems.	an (COOP) Appendix	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		
Accon	mplishments:	J L	Milestones:			
2020-08-04: CCSC Go/No-Go			2020-12-16: Phase I Prepai Complete	re 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

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

OCC Business Dependencies

(b)(5)

Milestones:

<u>Issues</u>

-- No Issues Found --





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 topic this time.	cs at VistA Integra Receivable (A	ated Billing (IB) and Accounts 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	2020-12-04: Current Contract PoP Ends	2020-12-05: 3 Month Extension Contract Begins 2020-12-11: RFP for new contract issued	2021-01-29: New Contract Awarded 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. 		No data dependencies at this time.				
<u>Risks</u> ● (b)(5)		<u>Issues</u>				
		No project issues at this	time.			





Enrollment System Community Care

Project Phase - National Deployment

No ELC decisions needed or priority discussion topics at this time.		Project Description	Key Performance Indicator			
		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 			
Accomplis	shments:	Milestones:				
2020-11-13: Successfully completed technical evaluation for CCN VCE static eligibility within 24 hours		2020-12-16: Turn on ES Parameter to 2020-12-16: National Release of 2020-12-20: VistA IOC sites testing share CC Collateral Eligibility VistA functionality functionality Office of Information and Technologies/Data Dependencies				
OCC	C Business Dependencies	(b)(5)				
• (b)(5) • (B)(5) • (B)(5) • (B)(5)		Issues 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

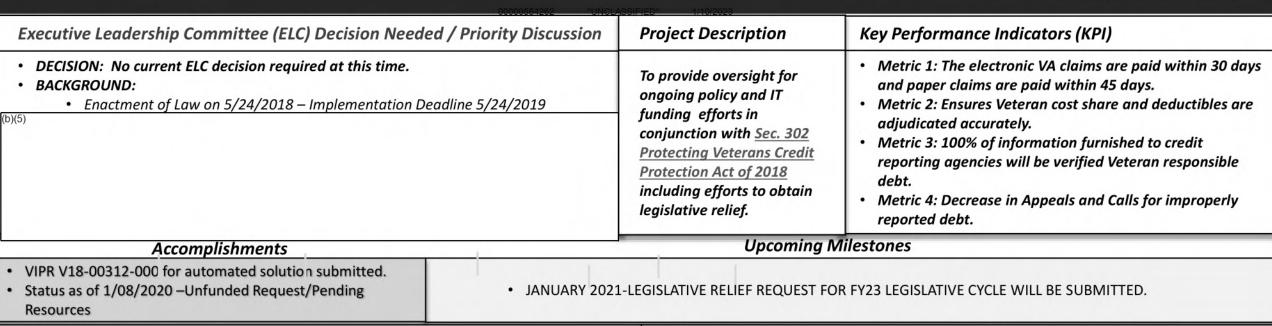
Project Name	Received by PIE Team	Presented at PMR	PMR Idea Decision	Ops Notified	CCSC Presentation Date	CCSC Project Go / No Go	Ops PM Resource Assigned
Referral Based Obligations	11/17	11/24	TBD	TBD	TBD	TBD	TBD
VA Provider CCN Retail Pharmacy Capability	11/10	11/24	TBD	TBD	TBD	TBD	TBD
Community Care 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	(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 (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
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)





OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies				
(b)(5)	(b)(5)				





From:						
Subject:	00000584262 "UNCLASSIFIED" 1/10/2023 (b)(6)					
То:	(OCC NM); VHA OCC BOA PPS Leadership; (b)(6)					
	(b)(6)					
	(b)(6) Matthous Kamaran: Lipton Mark T-(b)(6)					
	(b)(6) ; Matthews, Kameron; Upton, Mark T.;(b)(6)					
	(b)(6); VHA OCC BOA PPS Leadership; (b)(6)					
	(b)(6)					
	(b)(6) VHA 10D1 OCM; (b)(6) @erpi.net'; (b)(6)					
	(b)(6) (b)(6) Matthews Kameron: Linton Mark T					
	(b)(6) Matthews, Kameron; Upton, Mark T.; (b)(6) @guidehouse.com'; (b)(6) @guidehouse.com'; (b)(6)					
	(b)(6) Reed, Susan A.; (b)(6)					
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Cc:	(b)(6) (Federal					
O C.	Advisory Partners) (b)(6) (Business Information Technology Solutions (BITS), LLC): (b)(6)					
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	(b)(6) @federaladvisory.com (b)(6) @federaladvisory.com (b)(6) Federal Advisory Partners (b)(6) (Business Information Technology Solutions (BITS) II C)(b)(6)					
	Partners) (b)(6) (Business Information Technology Solutions (BITS), LLC) (b)(6) (Federal Advisory Partners (b)(6)					
Attached:	20201222.December (2020).Community Care Project Management Review (PMR) #1.pptx					
,	2020 122213 33311 (2020): Softmanity Sale Fragest Management Ferrent (Firmly In Appell					
Good morni	ng, All,					
Please see a	ttached presentation for this afternoon's Community Care Project Management Review (PMR). Agenda and					
presenters b	pelow:					
	Evaluations:					
	/eteran Pharmacy Care (ELC Awareness)					
	Executive Sponsor (b)(6)					
	Key Initiative – Clinical Documentation Improvement					
	Executive Sponsor: Ms. Susan Reed					
	Ilance Routing Optimization (ARO) Executive Sponsor: (b)(6)					
	ect Review:					
	nced Medical Cost Management Solution (AMCMS): Executive Sponsor Request. FY 21 Payment Data					
	and Delivery Operations assistance needed for Incomplete data of 837COB via CDW-PIT.					
	Executive Sponsor: (b)(6) Business Sponsor: (b)(6)					
	Data Governance: Business Sponsor Request. OCC alignment to Dr. Stone Data Strategy and Governance					
	prandum, dated 12/2/2020.					
	Executive Sponsor: Dr. Mark Upton; Business Sponsor: (b)(6)					
	oD Advanced Payment and Referral Standardization:* ELC Priority Discussion: Dr. Stone provided					
	oval for AP expansion to identified EV21 sites on 12/3.					
0	Executive Sponsor: (b)(6) Business Sponsor: (b)(6)					

Thank you!

oin Microsoft Teams Meeting	"UNCLASSIFIED"	1/10/2023
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00000584262

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1/10/2023

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 (b)(6)
 @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/	<u>riginator & Date</u> : 12/1/2020 <u>Scope Definition</u> : Consolidate the CCN pharmacy billing information to provide Veterans the information to pick up their prescription (referred care, urgent care, and flu shot) into one "card" to improve Veteran and network retail pharmacy experiences							
Barting Property	27.7			Additional Impact				
Business Ops & Admin:	No Impa	acts at this time		Policy Impact:	No Im	pacts		
Delivery Ops:	(b)(5)			Funding Impact / Status:	No Im	pacts. (b)(5)		
Revenue Ops:				Impact on Other OCC Projects:				
Clinical & Network Mgmt:	No Impa	acts at this time						
OCC Leadership (Includes IDA and BIC):	No Impa	act at this time		Impact if Project Idea Not Approved:				
Community Care Network (Contract Mod):	(b)(5)							
Recommended OC	C Strat	egic Priority Alignment	Recommer	nded Project Designa	tion	Recommended Bu	ısiness Ow	ner
Improve Customer Service, Implement Community Care Network (CCN)		OCC Directorate Managed / Network Management						

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:	n			
			Impact if Project Idea Not Approved:	(b)(5)
OCC Leadership (Includes IDA and BIC):	(b)(5) (b)(6) BIC - No Impacts			
Community Care Network (Contract Mod):	No Impact			
Recommended OCC	Strategic Priority Alignment	Recommen	ded Project Designation	n Recommended Business Owner
Innovate Business Model, Ir	mprove 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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Originator & Date	: 12/10/2
(b)(6)	

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.)

Impacts		Additional Impact			
Business Ops & Admin:	(b)(5)	Policy Impact:	No impacts at this time	e. (b)(5)	(b)(6)
		Funding Impact / Status:	(b)(5)		
Delivery Ops:					
		Impact on Other OCC Projects:			
Revenue Ops:			4		
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	Recommended Project Design	ation Recomm	ended Business	Owner

Innovate Business Model

OCC Managed Project/ Clinical Integration

Discussion:

(b)(6)

(b)(5)

OCC Policy, OCC Finance, and Portfolio Managers Vote: Yes

Choose A

V.S. Department of Veterans Affail

Veterans Health Administration

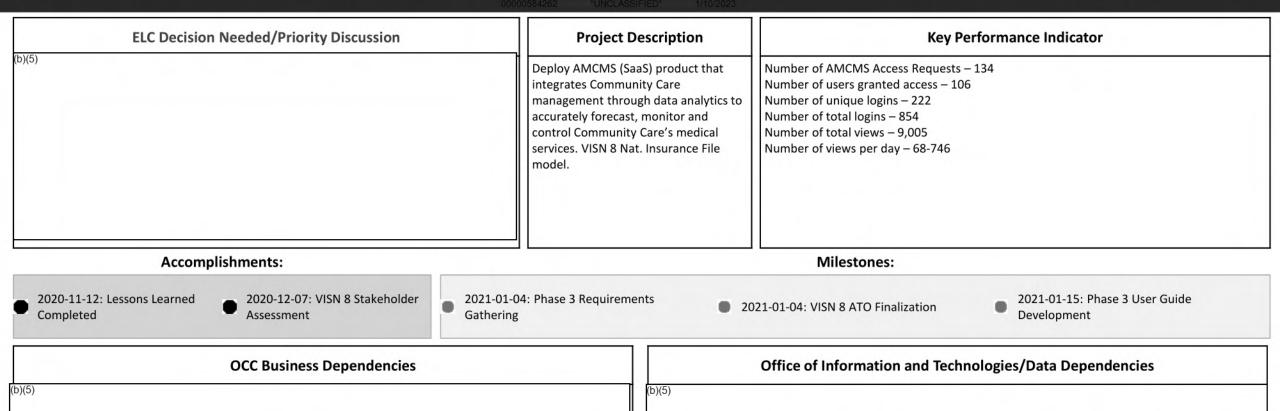
Office of Community Core

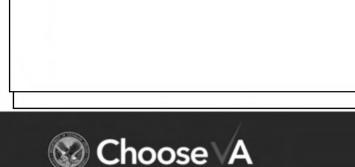
Priority Project Review

Project Status Slides











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





ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator	
(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.	 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: Undated Care 2020-12-03: HEC Approval of	01: AP FY21 Q2 - National egins 2021-01-07: AP Fiscal/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 Description	Key Performance Indicator
No ELC decisions needed or priority discussion topics at this time.	Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes.	TBD: (b)(5)
Accomplishments:		Milestones:
	021-04-15: Chalmers P. Wylie VA ACC olumbus) Go Live	221-05-15: Jonathan M. Wainwright emorial VAMC (Walla Walla) Go Live
OCC Business Dependencies		Office of Information and Technologies/Data Dependencies
(b)(5)	(b)(5)	





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)No Issues to elevate at this time

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.	Toolbox (CBT), De (DST) and SEOC D	ncement and ivities for Consult ecision Support Tool	CTB integrated into CPRS- Q3 FY21 Metrics for CTB v2.0 are under development	
Accomplishments:			Milestones:	
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"	2021-01-17: S Migration	SEOC DB Cloud 2021-02-15: Training and Comms for CTB v2.0 Deployment	
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 Priority Discussion or ELC Decisions Required.	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.	Average Lead Time for Accepted (Completed) User Stories and Defects): Scheduled Deployment -35 Days; Hotfix - 3 Days Average Release Cadence to Production: 15 Days Mean Time to Restore: 19 Hours Release Fail Percentage: 0 Provisioned Licensed Users: 13,720 Average Weekly CCN Data Import Transactions to PPMS/Per Region: 0/18 thru 10/24: 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:

No Issues to elevate at this time

2021-01-04: PIE Restart 2020-12-08: PPMS 10.1 2020-12-17: PPMS 10.1 2020-12-18: PPMS 11.0 2021-01-28: VA CPL 1.1 2020-11-13: PIE - Go-Live WRJ 2020-12-07: PPMS 10.1 UAT Go/No-Go Go-Live National Gate Review **Priority Sites** Release Office of Information and Technologies/Data Dependencies **OCC Business Dependencies** (b)(5)**Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations** (b)(5)VAMC/CPO & Pharmacy -



(b)(5)



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:	11	Milestones:	
2020-12-10: 12/09/2020 2020-12-16: National Release of VistA functionality	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 eleve	ate at this time	



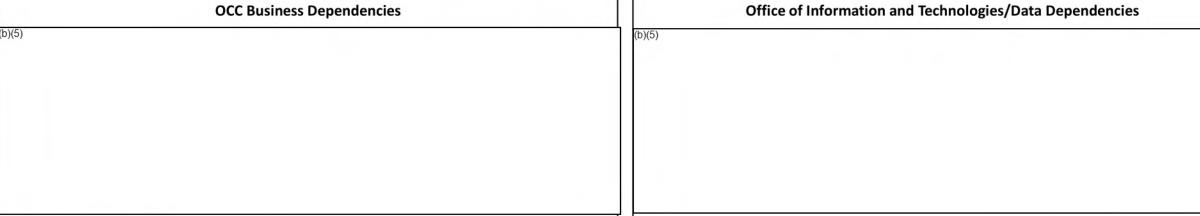


ELC Decision Needed/Priority Discussion	Project Description	<5% unscheduled downtime for the IPE systems integration environment		
No ELC decisions needed or priority discussion topics at this time.	Develop an end-to-end (E2E) integration environment prior to UAT/Prod. Anticipated benefits include identification of integration issues prior to Production, reduction of project specific hot-fixes, and enhanced system and data monitoring			
Accomplishments:		Milestones:		
	20-12-23: Requirements for 2020-12-30: 5 Communicationality Agreements			
OCC Business Dependencies		Office of Information and Technologies/Data Dependencies		
(b)(5)	No Issues to elev	ate at this time		





ELC Decision Needed/Priority Discussion		1	Project Description Key Performance Indicator		nance Indicator
No ELC decisions needed or priorit	y discussion topics at this time.	user inte reporting	vers a series of custom-built rface (UI) screens and g system and data integrations nistering the CCN contract.	Quality Check UI: 61/80 Users (Δ = +15) CCN Accreditation Waivers UI: 48/30 Users CCN Complaints & Grievances UI: 45/54 Users CCN Congressional Inquiries UI: 47/42 Users CCN Corrective Action Plans (CAPs) UI: 45/3 CCN Network Adequacy Deviations UI: 43/5	ers ($\Delta = +15$) 5 ($\Delta = +17$) 0 Users ($\Delta = +15$)
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-Prod R10.3- Congressional Enhancements		2021-01-20: Prod R10.2 - Waivers & CAPs - Congr	2-03: Prod R10.3 essional UI ements 2021-03-01: Build 11.0: Network Management UI - Pre-Prod
(b)(5)	OCC Business Dependencies		(b)(5)	Office of Information and Technolog	ies/Data Dependencies







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 timeline		
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: CC	CRS Release 13.4		
OCC Business Dependencies		- 2 3	Office of Information and Technologies/Data Dependencies		
CCRA, FMS, PPMS, PIT, and MVI	•		, 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:
	-11: AR Patch 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 the project. (b)(5)	• No data dep	pendencies at this time.





Project Description	Key Performance Indicator		
Development of standardized Continuity of Operations Plan (COOP) for all mission critical OCC systems. The COOP will outline the necessary steps to prepare for, respond to, and recover from IT system failures.	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		
	Milestones:		
2020-12-16: Phase I Prepare Complete 2020-12-30: Phase II Respond Complete	2021-01-13: Phase III Recover Complete 2021-01-27: COOPs complete 2021-01-27: COOP Policy Complete		
	Office of Information and Technologies/Data Dependencies		
(b)(5)			
	Development of standardized Continuity of Operations Plan (COOP) for all mission critical OCC systems. The COOP will outline the necessary steps to prepare for, respond to, and recover from IT system failures. 2020-12-16: Phase I Prepare Complete 2020-12-30: Phase II Respond Complete		





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				
No Risks to elevate at this time	No OI&T D No Issues to eleva	ata 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
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)



veteran credit Database		SSIFIED* 1/10/2023	
Executive Leadership Committee (ELC) Decision Needed / Prio	ority 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 (b)(5)		 Metric 1: The electronic VA claims are paid with and paper claims are paid within 45 days. Metric 2: Ensures Veteran cost share and deduct adjudicated accurately. Metric 3: 100% of information furnished to create reporting agencies will be verified Veteran respondebt. Metric 4: Decrease in Appeals and Calls for imparented 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
• Highlight OCC Business Dependencies: (b)(5)		(b)(5)	





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

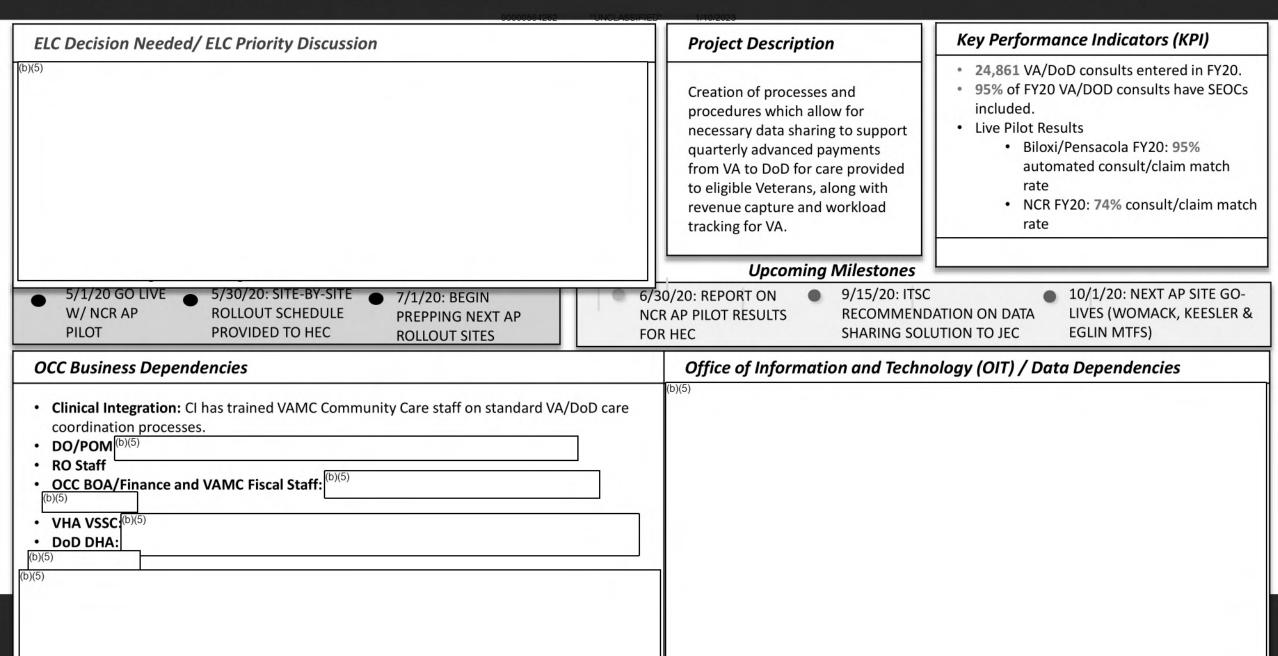
(b)(5)





VA DoD Reimbursement

Project Phase – Development



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 Decis	ion Needed/ ELC Pric	ority Discussion	333333 T292 STAGE (SSI) IES	Project Description	Key Performance Indicators (KPI)
Discussion		are free to resume VA staff	y COVID-19 and were/are on training was moved to self-	Integrate the IHS/THP Reimbursement Agreement Progr (RAP) operations with other OCC efforts. Tasks included executing advisory board and developing a C Coordination Plan; hosting tribal a VA staff training; continuous communication efforts; program expansion; and community Outre and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted
	Accomplishmen	its		Upcoming Mileston	es
	A/20 HELD 2 ND SORY BOARD MTG	07/17/20 VA FIELD STAKEHOLDER VIRTUAL TRAINING EMAILED	CONSULTATION		CLEARANCE AND 11/30/20 CARE ON OF IHS/THP COORDINATION PLAN FINALIZED
	ness Dependencies			OIT / Data Dependencies	
(b)(5)				N/A Risk: Mitigation:	





AMCMS

Deployment

ELC Decision Needed/ ELC Priority Discussion					
(b)(5)					
10					
)					
11					
A					

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

	00000584262 "UNCLASSIFIE	D" 1/10/2023	
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 08/31/20 REGION 3 REGION 4 TRANSITION TRANSITION	
OCC Business Dependencies	Offic	ce 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)		: N/A	

ELC Decision Needed/ ELC Priority Discussion	0000001202	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.	Power BI functionality exceeded license capability for reporting previous metrics.
Accomplishments		Upcoming Milestones	
● 5/22/20 ● 6/30/20 ● 7/1/20 ● 7/7/20 PPMS 8.0 DEV CONTRACT URGENT CARE PPMS 8.1 GO-GO-LIVE AWARDED JUNE LEGACY RE-ROUTE LIVE	• 7/23/20 HOTFIX 8.1.1.1 RELEASE	 7/29/20 COMMUNITY PROVIDER LOCATOR (CPL) RELEASE 	08/11/20 08/20/20 PPMS 9.0 NATIONAL PPMS 9.0 GATEWAY REVIEW GO-LIVE
OCC Business Dependencies		OIT / Data Dependencies	
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy - (b)(5) 		(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): (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)

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:** 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) (b)(5)

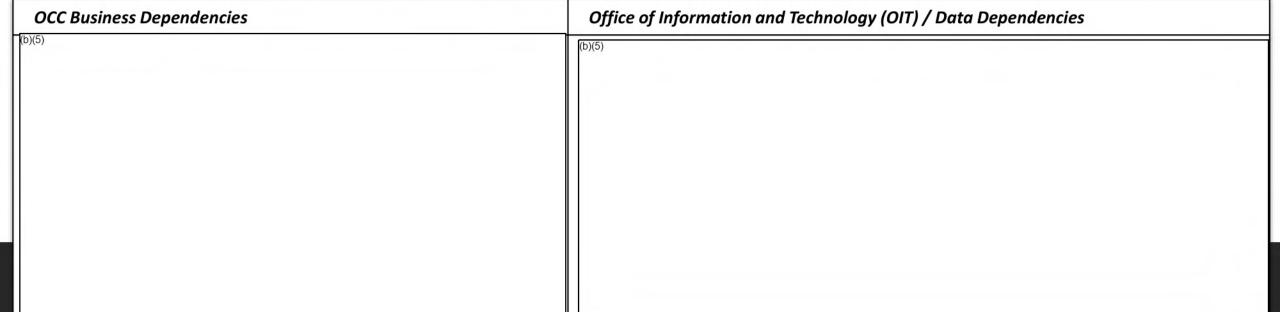




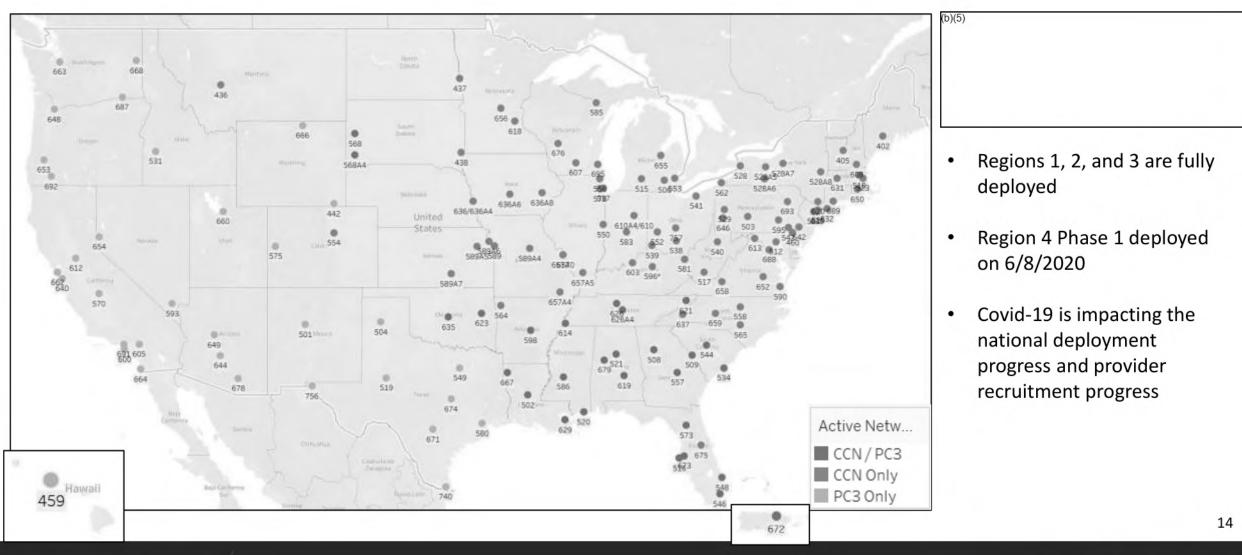
Community Care Network

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**

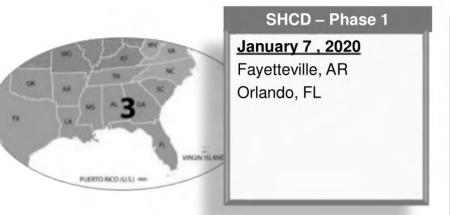


National Network Deployment Progress – As of 7/6/2020



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

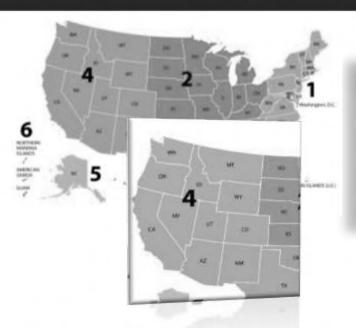
West Palm Beach, FL

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)

South Texas (671)

North Texas (549)

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)

Roseburg, OR (653) 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 VISN 21 - 7 VAMC

Fresno, CA (570) Reno, NV (654) San Francisco, CA (662) Palo Alto, CA (640)

Honolulu, HI (459)

Portland, OR (648)

Puget Sound, WA (663)

Northern California (612)

Southern Nevada (593)

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

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



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)

(b)(6)

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**

- 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) (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) (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		
(b)(5)		
	A	

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





	00000584262 "UNCLASS	FIED" 1/10/2023		
ELC Decision Needed/ ELC Priority Discussion	Project Description		Key Performance Indicators (KPI)	
(b)(5)	Community Ca	ect provides automation for are static eligibility determinations determine, communicate and track lity.	 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	
O6/2020 O6/2020 RSD O6/2020 O7/2020 COMPLETED SUNSET APPROVED FOR DEPLOYED ELIGIBILITY ANALYSIS GRANDFATHER SOLUTION OF NOT FUNCTIONALITY ELIGIBILITY ENROLLED COVERED FOR THE 6 AND 12 BASED ON CARE VETERANS MONTH HARDSHIP DATA O7/2020 COMPLETED ELIGIBILITY ANALYSIS OF CC DATA FOR REJECTED 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 O8/2020 ES RELEASE TO AUTOMATE COLLATERAL OF VETERAN PROCESS TO INCLUDE COPY OF RECORDS IN ELIGIBILITY FILE IN ELIGIBILITY FILE (PHASE I	
OCC Business Dependencies		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)(b)(5) VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Veteral (VEO) 	n Experience Office	(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	
7/11/2020 FINAL FILE/INVOICE SENT	8/1/2020 CLOSE OUT RETAIL	
WALGREENS	PHARMACY	
OCC Business Dependencies	Office of Information and Techn	nology (OIT) / Data Dependencies
(b)(5) (b)(6) (b)(5)	RISK: N/A	





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

(b)(5)

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.

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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1/10/2023

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 / I	BOA (b)(6)	Scope Definition: Integra	ated Product Er	nvironment for isolated and end	to end testing of various CCN related projects.
Impediments to OC	C	Carrier -		Additional Impact	
Business Ops & Admin: OPS Resource impacts			Policy Impact:	No current impacts identified.	
Delivery Ops:	DO systems				Future - (b)(5)
Revenue Ops:	RO systems		Impact on Other OCC		
Clinical & Network Mgmt: CNM projects: PPMS, CCRA, EPRS, AMCN CERNER, CCN, CAVE, ePrescribing, etc.		SMS, OCC-	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 F	Priority Alignment	Recomme	ended Project Designati	ion Recommended Business Owner
Innovate Business Model			occ		CHIO / BOA
Discussion: (b)(5)		[b)(6)	(b)(5)		,





Enterprise Program Reporting System (EPRS)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority			Project Description	Key Performance Indicators (KPI)	
(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 Pr	9/30/2020 EPRS Pre- rod R11.0 : Network EPRS Tech. Data Integration for Hanagement UI HSRM	
			*		
OCC Business Depend	dencies		OIT / Data Dependencies		
Project Dependencies	/b)/5)		Data Dependencies		
• Community Care Contract Administration (CCCA): (b)(5)			(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)

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 Provider 3/3/2/2020 P 1-/2 P % Change P Services 1/3/2020 P 1/2
Accomplishments	Upcoming National 1,841,979 1,797,125 44,854 2% 12,123,360
 7/14/20 √7/27/20 √7/29/20 √8/11/20 √8/20/20 √8/25/2020 √8/	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

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

ENABLED

9/10/2020

CTB 1.9.0076 **FULL SITE IOC** LIGHTHOUSE BEGAN: API DRIVE 9/1/2020 TIME IN DST:

Accomplishments 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

OIT / Data Dependencies

(b)(5)





Overview of Release 1.9.0076 Enhancements

- 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
 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 Dependencie	25
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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)

h)/5)

OIT / Data Dependencies





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):
(b)(5)

VAMC / Fiscal Budget Staff:
(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**

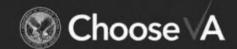
OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)(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
STAKEHOLDER VIRTOAL PHARMACY MOD	20 BIM ATION ON EXECUTION OF IHS/THP VIRTUAL FINALIZED AND BEGIN MODIFICATION 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 • III UAT (STALE **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**

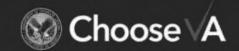
9/30 LESSONS **LEARNED** UPDATE

Office of Information and Technology (OIT) / Data Dependencies **OCC** Business Dependencies (b)(5)(b)(5)

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Nee	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 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	■ 10/27/20 − ■ 11/10/20- NOTIFICATION ■ 11/10/20 DIRECTORATES OF UNSCHEDULED DEVELOR SYSTEMS/FUNCTIONS SYSTEM OUTAGE PROCESS	
OCC Business Dependencies - Lite	Office of Information and Technolog	ogy (OIT) / Data Dependencies - Lite
Highlight OCC Business Dependencies: (b)(5) (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.

OIT / Data Dependencies

Upstream 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

Upstream 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

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

Highlight OIT/Data Dependencies

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:

• System Engineering Management (SEM) -

- Clinical Integration (Business Owners)
- 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:





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	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

Key Performance Indicators (KPI) Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Project Description** 28,598 VA/DoD consults entered in FY20. 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** 5/1/20 GO LIVE 10/1/20: NEXT AP SITE GO-5/30/20: SITE-BY-SITE 9/14/20: REPORT ON 9/15/20: ITSC 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: (b)(5) **DO/POM:**(b)(5) RO Staff: (b)(5) (b)(5) OCC BOA/Finance and VAMC Fiscal Staff: (b)(5) (b)(5)VHA VSSC: (b)(5) DoD DHA (b)(5) (b)(5)

VA DoD Revenue Standardization

Development

Project Description Key Performance Indicators (KPI) Executive Leadership Committee (ELC) Decision Needed / Priority Discussion 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.

(b)(5)



CPAC Document Scanning

Project Phase – Close Out

Executive Leadership Comm	ittee (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

project.

- 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

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





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"

1/10/2023

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

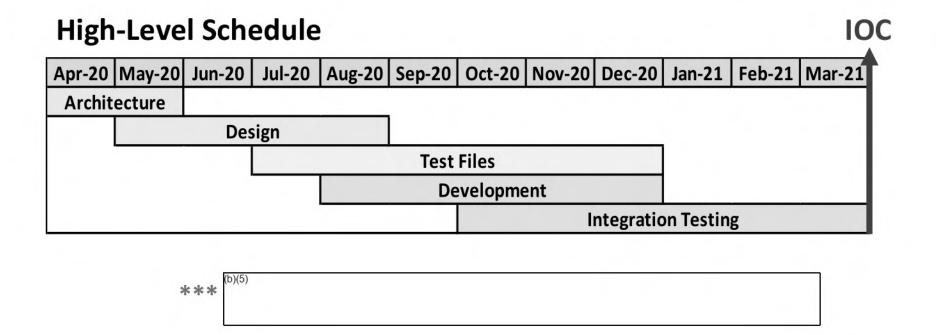




Current Payer EDI Priorities

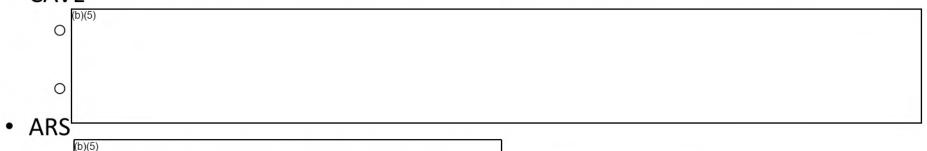
Claims XM Development and Implementation

- 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 Key Stakeholders Delivery Operations, both POM and VFMP Staff.
- Community Care Billing SSN Reduction



o Key Stakeholders - Delivery Operations, Revenue, HSRM team.



Prioritization Decision

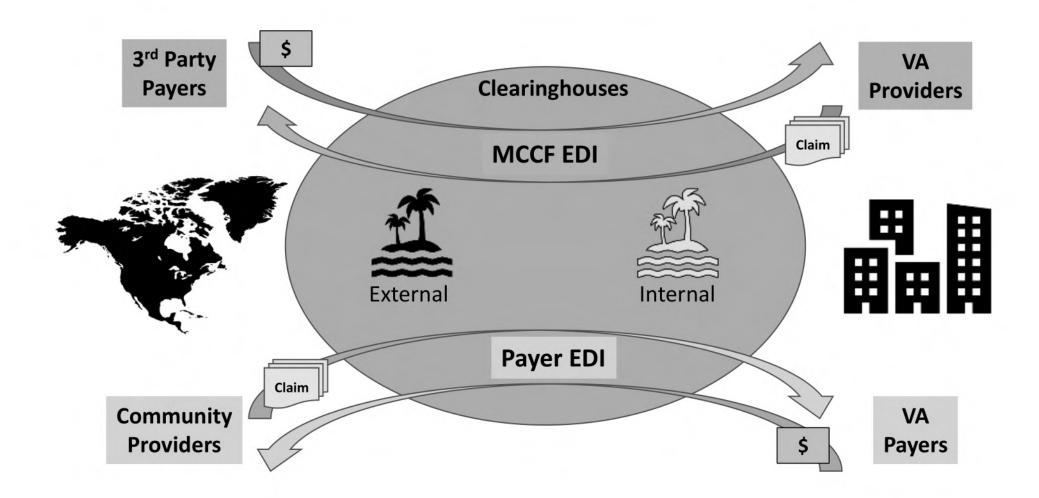
Backlog Prioritization (1-4)

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
)(5)	
	lich monte.

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

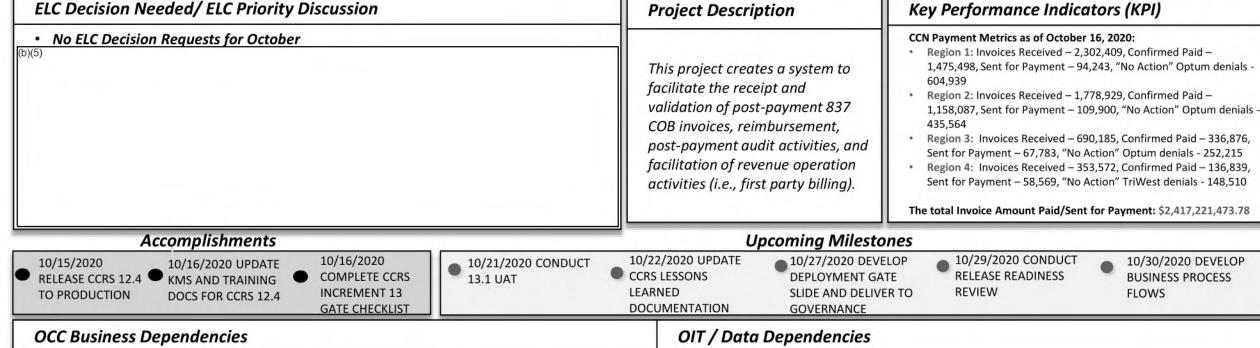
- Clinical Integration: CI has trained VAMC Community Care staff on standard VA/DoD care coordination processes. Recently trained field on HSRM use for DoD DO/POM:(b)(5) • RO Staff: (b)(5) • OCC BOA/Finance and VAMC Fiscal Staff: (b)(5)
- VHA VSSC^{(b)(5)}
- DoD DHA:

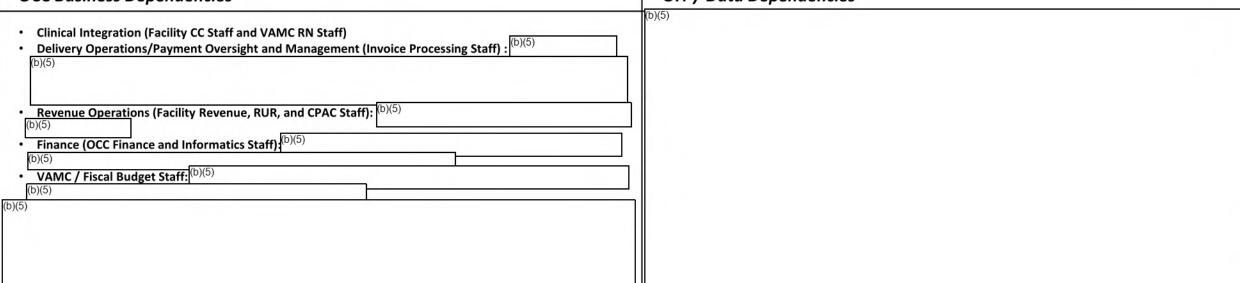
(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Community Care Reimbursement System (CCRS)

National Deployment





For ELC Awarenes	ss	
b)(5)		

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

Upcoming Milestones

Inquiries & N.A. Deviations

12/16/2020: EPRS Prod

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





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





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 Eacility CC Staff(b)(5)

-Payment Operations Management

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

-Women's Health (IVF and Infertility)

h)(5)







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

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

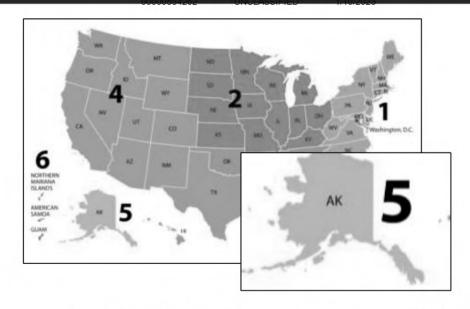
 04/01/21 R5 SHCD **GO-LIVE**

Upcoming Milestones

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

Region 5 Announcement

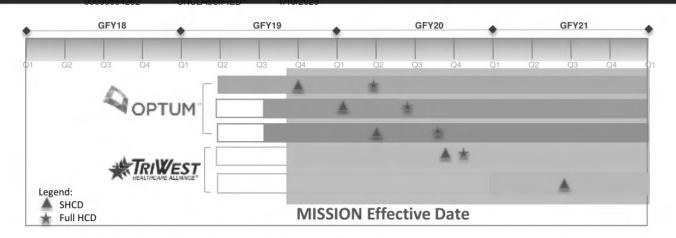


- Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1/2020.
- The Post Award Meeting is scheduled for 10/19/2020.
- The Kickoff Meeting is scheduled for 11/4/2020.
- Region 5 has a Veteran population of more than 68,000 with more than 33,000 Veterans enrolled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

0000584262 "UNCLASSIFIED	4 4/40/2023	
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
● 07/17/20 VA FIELD	09/23/2020 IHS/THP ATION ON RAP STATUS VIRTUAL RETRAINING	11/16/2020 CC PLAN FINALIZED
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

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) (D)(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





Executive Leadership Committee (ELC) Decision Needed	Project Description	Key Perfo
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 integ
Accomplishments	Upcoming M	ilestones

(b)(5)

Key Performance Indicators (KPI)

- DST integrated into CPRS- Q1 FY 21
- CTB integrated into CPRS- Q2 FY 21

CTB 1.9.0077
DEVELOPMENT
COMPLETED:
10/05/2020

CTB 1.9.0077 SQA TESTING COMPLETED: 10/13/2020 DST MAPPING TABLE UPDATES WENT LIVE: 10/1/2020 COMPLETED CTB V2.0
REQUIREMENTS
GATHERING AND
WIREFRAMES:
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

DEVELOPMENT
COMPLETE
12/24/2020

CTB v2.0 CONSULT FACTORS DISCUSSION CONTINUES DST OFFICE HOURS CONTINUE: 10/19/2020

OCC Business Dependencies

(b)(5)

OIT / Data Dependencies

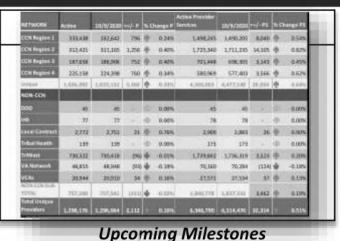




• Priority Discussion: (b)(5)	

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.



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**
 - (b)(5)

VAMC/CPO & Pharmacy

OIT / Data Dependencies

Choose A



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

OIT / Data Dependencies

Unstream Denendencies

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Project Description Key Performance Indicators (KPI)** The project scope is to develop a standardized Continuity of Operations Plan (COOP) Appendix Metric 1: Process for unscheduled outage DECISION: NO ELC decision currently for all mission critical OCC systems notification and functions. Also, a Metric 2: COOPs developed standardized process for Metric 3: Repository complete scheduled and unscheduled Metric 4: KMS and SOPs updated system outage with an After-Action Report. **Accomplishments Upcoming Milestones** 08/04/2020 -08/13/2020 - KICK-10/27/20 -11/10/20- NOTIFICATION 11/10/20- COOP APPROVED FOR GO AT **OFF PROJECT DIRECTORATES** OF UNSCHEDULED DEVELOPMENT CCSC SYSTEMS/FUNCTIONS **MEETING** SYSTEM OUTAGE PROCESS Office of Information and Technology (OIT) / Data Dependencies - Lite **OCC Business Dependencies - Lite** Highlight OCC Business Dependencies: Highlight OIT/Data Dependencies:



(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.





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)
- (b)(5)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 Dependenci	ogy (OIT) / Data Dependencies
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Highlight OIT/Data Dependencies:

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 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).

Office of Information and Technology (OIT) / Data Dependencies

Executive Leadership Committee (ELC) Decision Needed / Pric	rity 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 Milestone	5
8/11/2020 FINAL FILE/INVOICE SENT WALGREENS	10/30/2020 CLOSE OUT RETAIL PHARMACY	•
OCC Business Dependencies	Office of Information and Ted	hnology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(6) (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	(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 ereant 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 	 Metric 1: The electronic VA claims are paid with and paper claims are paid within 45 days. Metric 2: Ensures Veteran cost share and dedu adjudicated accurately. Metric 3: 100% of information furnished to cre reporting agencies will be verified Veteran residebt. Metric 4: Decrease in Appeals and Calls for impreported debt. 			
Accomplishments	Upcoming N	lilestones		
VIPR V18-00312-000 for automated solution submitted. Status as of 1/08/2020 –Unfunded Request/Pending Resources • JANUARY 2021	1-LEGISLATIVE RELIEF REQUEST FOI	R FY23 LEGISLATIVE CYCLE WILL BE SUBMITTED.		
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies			
• Highlight OCC Business Dependencies: 5)	(b)(5)			

00000584262

"LINCLASSIFIED"

1/10/2023

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)

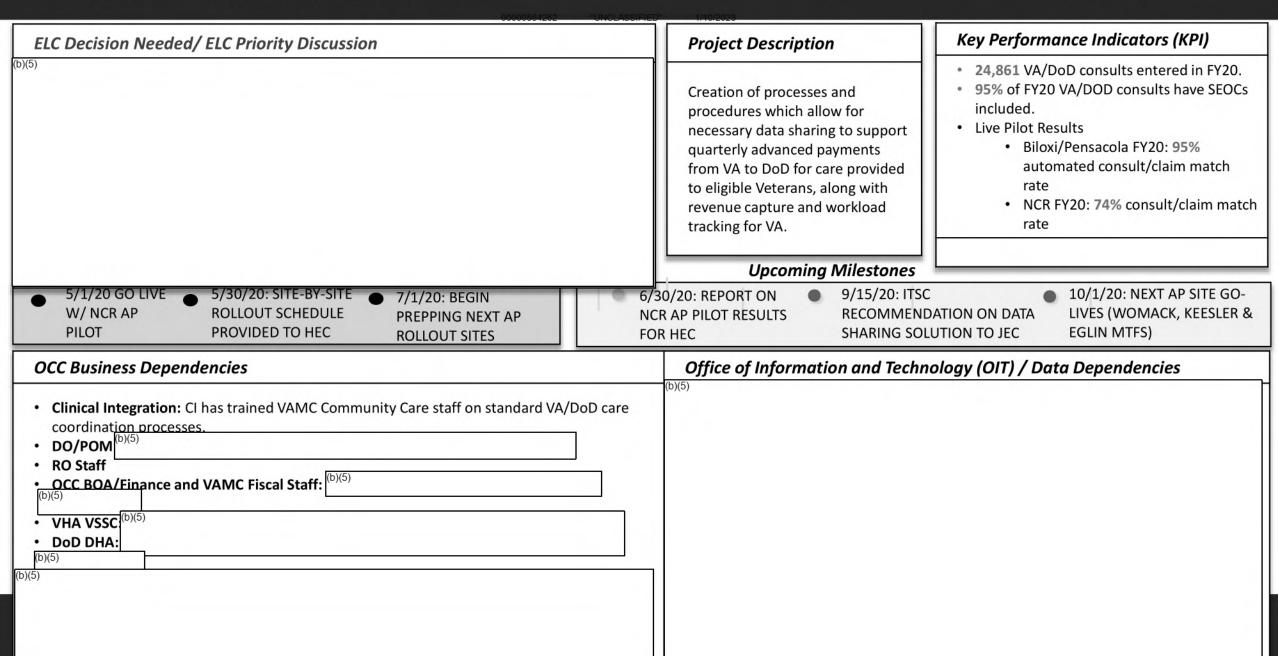
OIT / Data Dependencies

(b)(5)



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





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/arc hold until the partners are free to resume. VA staff training was moved to se 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 08/20/20 TRIBAL CONSULTATION (VIRTUAL)	IHS/	0/20 RESTART 9/30/20 CLEAR THP RE-TRAINING EXECUTION OF TUALLY) EXPANSION MO	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)					
(a)					

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
SCRIPTS
UPDATED

7/10 UAT TEST
 5CRIPTS
 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

Office of Information and Technology (OIT) / Data Dependencies

Upcoming Milestones

8/25 NATIONAL
DEPLOYMENT GATE
REVIEW MEETING

 8/26/20 BEGIN FIELD NATIONAL DEPLOYMENT

OCC Business Dependencies

(b)(5)

b)(5)



Urgent Care IPT

National Deployment

ELC Decision Needed/ ELC Priority Discussion	0000001202 01102 10011 122	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 COMMS RELEASED	08/04/20 REGION 2 TRANSITION	08/04/20 08/31/20 REGION 3 REGION 4 TRANSITION TRANSITION	
OCC Business Dependencies	Offic	e 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 gation: 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 -

OIT / Data Dependencies





CCRS

National Deployment

ELC Decision Needed/ ELC Priority Discussion

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)

(b)(5)

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

No ELC Decision Requests for July

- 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)

ນ)(ວ)

(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 (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



- OCC aims to transition to CCN as soon as possible and limit the extensions of PC3 overlap/coverage
- 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

N. Florida / S. Georg Oklahoma City, OK San Juan, PR Tampa, FL

West Palm Beach, FL

Region 3 Activities

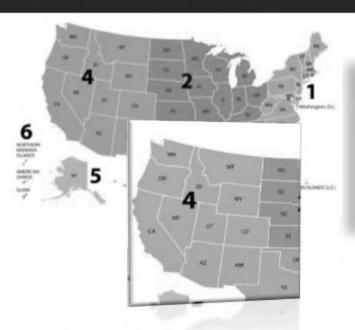
- CAST calls continue for another two weeks until sites transition to the monthly network adequacy calls
- Optum and Network Management are reviewing the **16 requests for PC3 extensions.** Some sites are reporting gaps in specific specialties whereas others are requesting for specific providers. Final 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.





July 17: 30-day PC3 cutover period ends

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) Roseburg, OR (653)

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)

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

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 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

)(5)

OIT / Data Dependencies

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 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

(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

- 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)			
		0 01	

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 Descrip	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	2020 COMPLETED IBILITY ANALYSIS IC DATA FOR ECTED 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) (b)(5) VA Master Patient Index (MPI), Office of Policy and Planning (PSSG), Vetera (VEO) 		(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 	
FILE/INVOICE SENT	Upcoming Milestones /1/2020 CLOSE OUT RETAIL HARMACY		
OCC Business Dependencies	Office of Information and Techn	ology (OIT) / Data Dependencies	
• (b)(5) • (b)(6)	RISK: N/A		





VA DoD Revenue Standardization

Project Phase – Development

ELC Decision Needed/ ELC 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 web based 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

Upcoming Milestones

8/1/20 VSSC VALIDATION OF DOD DATA COMPLETE 9/1/20 SEM SHAREPOINT TOOL TESTING 10/01/20 FUNCTIONAL USER TESTING

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

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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"LINCLASSIFIED"

1/10/2023

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	C		Additional Impact		
Business Ops & Admin: OPS Resource impacts			Policy Impact:	No current impacts identified.	
Delivery Ops:	DO systems RO systems CNM projects: PPMS, CCRA, EPRS, AMCMS, OCCCERNER, CCN, CAVE, ePrescribing, etc.		Funding Impact:	Future - (b)(5)	
Revenue Ops:			Impact on Other OCC Projects: Impact if Project Idea Not		
Clinical & Network Mgmt:					
OCC Leadership (Includes IDA and BIC):	IDA – No current impacts identified. BIC - (b)(5) (b)(5)		Approved:		
Recommended OC	C Strategic Priority Alignmen	nt Recomm	ended Project Designati	ion Recommended Business Owner	
Innovate Business Model		occ		CHIO / BOA	





Enterprise Program Reporting System (EPRS)

Development

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

Project Description

EPRS delivers a series of custombuilt user interface (UI) screens and reporting system data integrations for 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 ($\Delta = +1$)

Accomplishments

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

EPRS Tech. Data Integration for

10/05/2020: EPRS Prod R 9.0:

HSRM

OCC Business Dependencies

Project Dependencies

• Community Care Contract Administration (CCCA) (b)(5)

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

OIT / Data Dependencies

Data Dependencies

(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

• 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, ROK, 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
- 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 8/15/2020 P = 1/- P - 95 (Change P) Services			
Accomplishments	Upcoming Minestories 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 HOTFIX VA CPL PPMS 9.0 VA.GOV PPMS 9.0 VA.GOV SPRINT 25 8.1.1.1 NATIONA NATIONAL SPRINT GO-LIVE SPRINT 28 RELEASE L RELEASE GATEWAY 27 REVIEW	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			
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy - (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

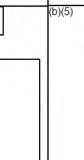
08/30/20 OPTUM R2/3 PROVIDER FILE INGESTED BY PPMS 09/01/20 REGIONS 2/3 GO-LIVE 09/25/20
 REGION 4 COMMS
 RELEASE

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 / **Priority Discussion DECISION:** No decision requested at this time

Project Description

OIT / Data Dependencies

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

CTB 1.9.0076 **FULL SITE IOC** BEGAN:

9/1/2020

ENABLED LIGHTHOUSE API DRIVE TIME IN DST: 9/10/2020

Accomplishments 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





- 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



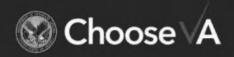
Overview of CTB Phase II

- 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

-Payment Operations Management

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

-Women's Health (IVF and Infertility)

OIT / Data Dependencies





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)

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

 Finance (OCC Finance and Informatics Staff):

 VAMC / Fiscal Budget Staff

 Delivery Operations/Payment Oversight and Management (Invoice Processing Staff)

 (b)(5)

 VAMC / Fiscal Budget Staff

 (b)(5)

 VAMC / Fiscal Budget Staff

 (b)(5)

 VAMC / Fiscal Budget Staff

 (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

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
STAKETIOEDER VIRTOAL PHARIMACY MICH	020 BIM ATION ON RAP STATUS 09/18/2020 09/15/2020 09/15/2020 11/13/20 CC PLAN FINALIZED AND BEGIN RETRAINING IMPLEMENTATION
OCC Business Dependencies	OIT / Data Dependencies
)(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.

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

III UAT (STALE REFERRAL LOGIC)

8/19-8/28 PHASE • 8/28-9/1 GENERATED • **UPDATED MODEL 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

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Project Description Key Performance Indicators (KPI)** The project scope is to develop a standardized Continuity of Metric 1: Process for unscheduled outage Operations Plan (COOP) policy, in notification addition, the creation of a COOP Metric 2: COOPs developed DECISION: No ELC decisions needed at this time. document for each OCC Metric 3: COOP Policy developed Directorate. In parallel, to the Metric 4: Repository complete policy/plans, the development Metric 5: KMS and SOPs updated and implementation of an electronic single repository. **Accomplishments Upcoming Milestones** 08/04/2020 -08/13/2020 - KICK-10/27/20 -11/10/20- NOTIFICATION 12/15/20 - COOP 11/10/20- COOP APPROVED FOR GO AT **DIRECTORATES OFF PROJECT** POLICY DEVELOPMENT OF UNSCHEDULED DEVELOPMENT CCSC SYSTEMS/FUNCTIONS **MEETING** SYSTEM OUTAGE PROCESS Office of Information and Technology (OIT) / Data Dependencies - Lite **OCC Business 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.

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 10/28/2020 **OBTAIN APPROVAL SYSTEMS DOCUMENTATION STANDARD**

OCC Business Dependencies

(b)(5)

OIT / Data Dependencies

Upcoming Milestones

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

Mitigation:

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)
- 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

Issue





Retail Pharmacy Program

Close Out

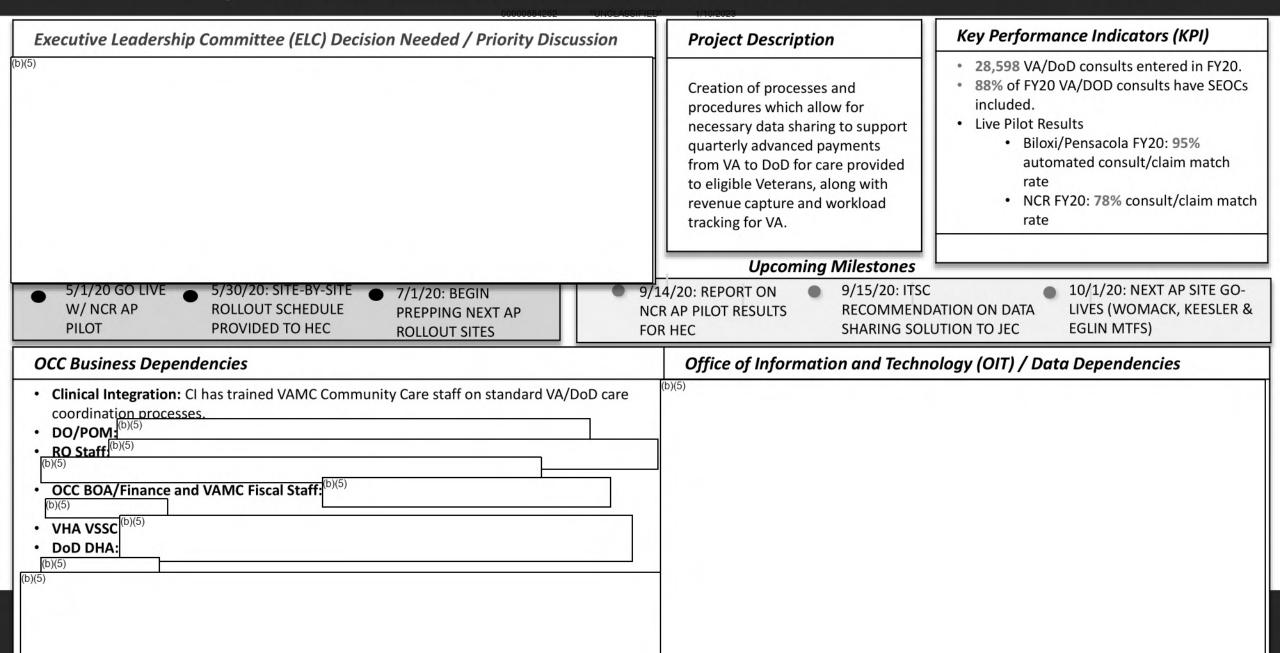
Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
DECISION: No ELC decisions needed at this time.	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods • Metric 1: over 100,000 Veteran's vaccinated • Metric 2:Reimburse Walgreens 99% accuracy
FILE/INVOICE SENT	Upcoming Milestones 0/1/2020 CLOSE OUT 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

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

• **DECISION:** No ELC decisions needed 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

9/1/20 SEM SHAREPOINT TOOL TESTING 10/01/20 FUNCTIONAL USER TESTING

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

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.





Executive Leadership Committee (ELC) Decision Needed / Priority Discussion

 Deployment of this project is dependent on completion of training previously identified for delivery by the Financial Service Center (FSC). The training will now be accomplished by internal CPAC resources due to optional training tasks included in the FSC contract requiring funding from the CPAC organization.

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

b)(5)

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 (b)(6)
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"

1/10/2023

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

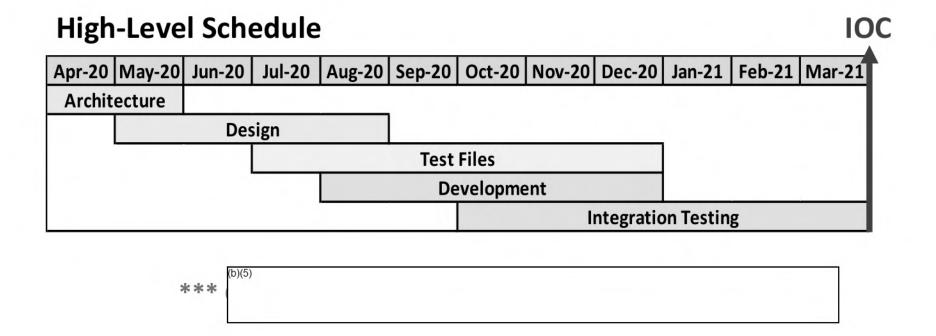




Current Payer EDI Priorities

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).



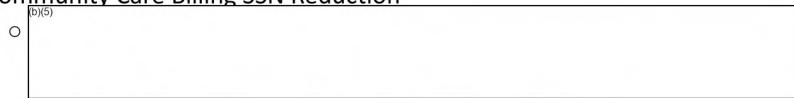


Remaining Payer EDI Priorities/Stakeholders

- EPRS (Parser)
 - o 837 work complete / 835 work remains.
 - Key Stakeholders Provider Relations and Services, Chief Informatics Office.
- CAVE



- 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.



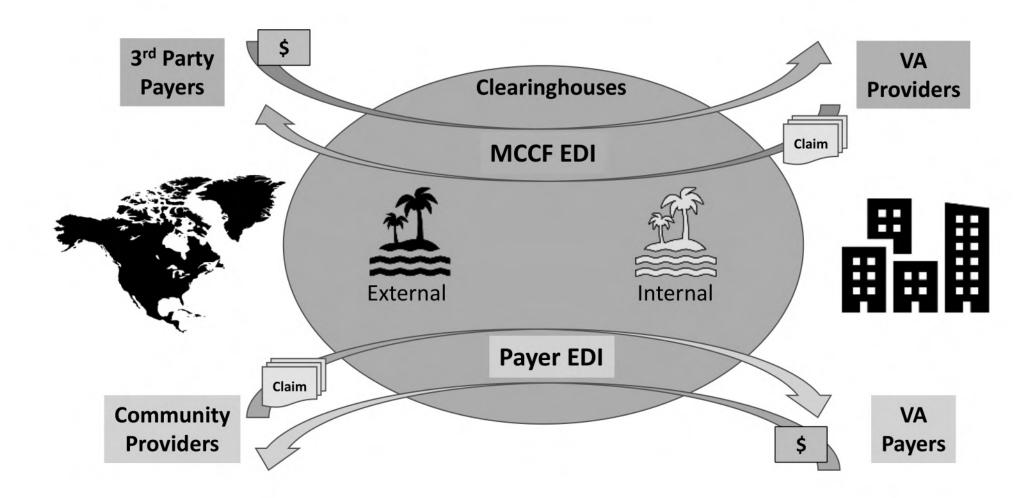
Prioritization Decision

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)

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

DoD DHA: (b)(5)

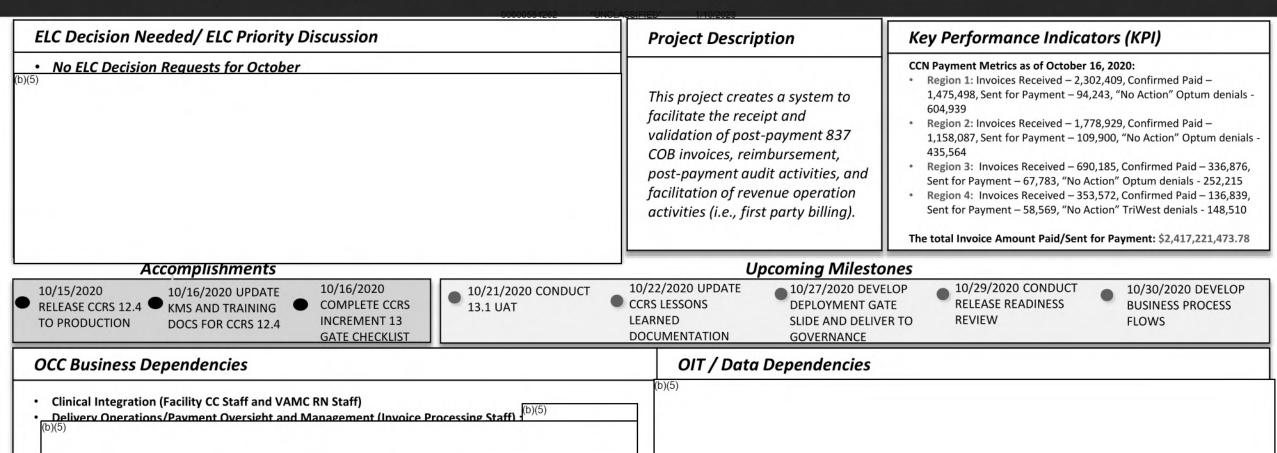
Office of Information and Technology (OIT) / Data Dependencies

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

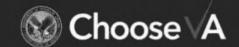
• Finance (OCC Finance and Informatics Staff) (b)(5)

VAMC / Fiscal Budget Staff

National Deployment



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For ELC Awareness	Project Description	Key Performance Indicators (KPI)		
(b)(5)	 • 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 = • CCN Network Adequacy Deviations UI: 28/51 Users (No 			
Accomplishments		Upcoming Milestones		
08/20/2020 EPRS Release 6.0 D: EDI 837 7.0 D: EPRS Data Data Layer Rework Integration (eCAMs) 09/30/2020: EPRS Pre				
OCC Business Dependencies	OIT / Data Dependencie	S		
Project Dependencies • Community Care Contract Administration/Support (CCCA/S) (b)(5) • Community Care Network Management (NM) (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





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:

Alphined Integration and Mann Grandstaff Facility CC Staff

-Payment Operations Management

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

-Women's Health (IVF and Infertility)

h\/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

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**

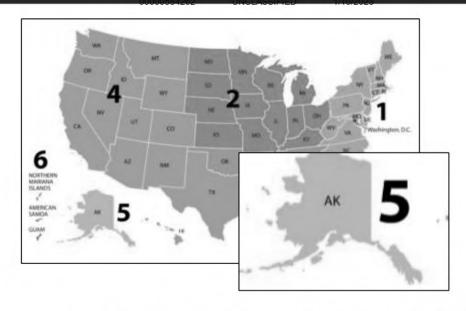
Upcoming Milestones

OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)Post Deployment of CCN Network Management (b)(5) Clinical Integration (b)(5) Contract Administration (b)(5) Provider Payment (b)(5) • Referral Monitoring and Management (b)(5)

Region 5 Announcement

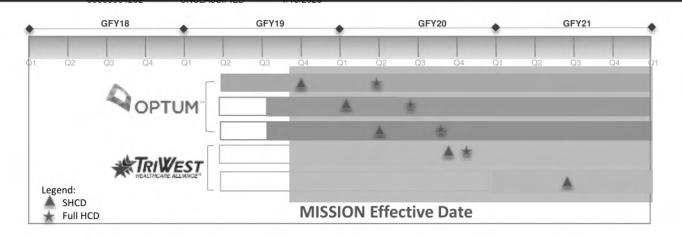


- Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1/2020.
- The Post Award Meeting is scheduled for 10/19/2020.
- The Kickoff Meeting is scheduled for 11/4/2020.
- Region 5 has a Veteran population of more than 68,000 with more than 33,000 Veterans enrolled 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	
STAKEHOLDER VIRTOAL PHARMACY MOD TRIBAL CONSOLIATION	09/23/2020 IHS/THP OP/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 VIRTUAL WEBINAR **TRAININGS**

Upcoming Milestones

- 10/21 NETWORK MANAGEMENT REQUIREMENTS GATHERING
- 10/27 LESSONS **LEARNED UPDATE**

OCC Business Dependencies

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

(b)(5)

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

Highlight OCC Business Dependencies: Clinical Integration (CI Field Support Director & Assistants) 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 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 / Priority Discussion					
DECISIO	V: No decision requested at this time				
b)(5)	W Wo decision requested at tims time				

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

Accomplishments

CTB 1.9.0077 DEVELOPMENT COMPLETED: 10/05/2020

CTB 1.9.0077 SQA TESTING COMPLETED: 10/13/2020

DST MAPPING TABLE UPDATES WENT LIVE: 10/1/2020 COMPLETED CTB V2.0 REQUIREMENTS GATHERING AND WIREFRAMES: 10/9/2020

2.0 CTB V2.0 SPRINT
1 DEVELOPMENT
COMPLETED:
10/9/2020

CTB V1.9.0076:
NATIONAL ROLLOUT
COMPLETE
10/23/2020

OCTB V1.9.0077:
PRE-PROD IOC TESTING
COMPLETE: 10/28/2020

CTB V2.0
DEVELOPMENT
COMPLETE
12/24/2020

Upcoming Milestones

CTB v2.0 CONSULT FACTORS DISCUSSION CONTINUES

DST OFFICE HOURS CONTINUE: 10/19/2020

OCC Business Dependencies

)(o)

OIT / Data Dependencies

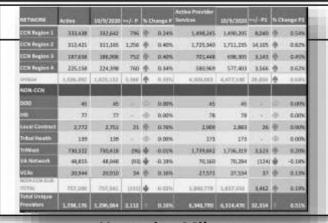




ELC Decision Needed/ ELC Priority Dis	scussion
• Priority Discussion:	
Accomplishments	

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 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** 09/25/20 11/5/20 **7/27/20** 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 OIT / Data Dependencies **OCC Business Dependencies** (b)(5)Clinical Integration

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

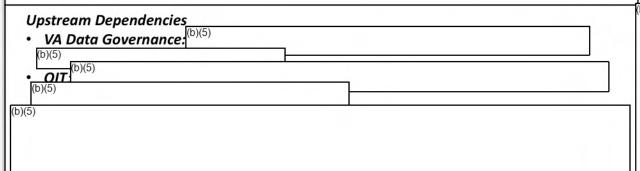
10/30/2020 DRAFT DATA GOVERNANCE **COMMUNICATION PLAN**

Upcoming Milestones

11/18/2020 CHANGE MANAGEMENT SPONSOR PLAN

11/25/2020 DRAFT DATA GOVERNANCE STRUCTURE

OCC Business Dependencies



OIT / Data Dependencies

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Nee	ded / Priority Discussion Project Descript	Project Description Key Performance Indicators (KPI)				
DECISION: NO ELC decision currently	The project scope is standardized Contin Operations Plan (Continuation of the formula of the for	 Metric 1: Process for unscheduled outage notification Metric 2: COOPs developed Metric 3: Repository complete Metric 4: KMS and SOPs updated 				
Accomplishments	Upcomin	g Milestones				
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 PROCES 	DEVELOPMENT				
OCC Business Dependencies - Lite	Office of Informa	ation and Technology (OIT) / Data Dependencies - Lite				
Highlight OCC Business Dependencies: (b)(5)	• Highlight OIT/Do	nta 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.

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.

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) - (D)(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

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 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).

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
	Upcoming Milestones 0/30/2020 CLOSE • • •
TIEE/ HTT OTCE SELTT	UT RETAIL HARMACY
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies
(b)(5) (b)(5) (b)(5) (b)(5) (b)(6) (b)(5)	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 (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	(b)(6)

Veteran Credit Database

Deferred Project

veteran erean batab	00000584262 "UNCLA	.SSIFIED* 1/10/2025			
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.	 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 Milestones			
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 a	nd Technology (OIT) / Data Dependencies		
3)		(b)(6)			

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"LINCLASSIFIED"

1/10/2023

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/	10/2020		prescriptions pre	escribed by a VA provider to be t	y in Region 4) to allow Veterans who need an immediately filled at a CCN retail community pharmacy when access
				Additional Impact	
Business Ops & Admin:	(b)(5)			Policy Impact:	No Additional Impacts identified
Delivery Ops:				Funding Impact / Status:	(b)(5)
Revenue Ops:				mpact on Other OCC Projects:	
Clinical & Network Mgmt:					
OCC Leadership (Includes IDA and BIC):				mpact 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 OC	C Strategic F	Priority Alignment	Recommer	nded Project Designati	tion Recommended Business Owner
Implement Community Care	Network (CCN)		OCC Directorat	e Managed	(b)(6)







Referral Based Obligations

		0000						
Originator & Date: (b)(6) (b)(6) 11/17/20	020	Scope Definition: OCC need Community Care programs	ds to assess a	and establish an interim	and long	-term process for re-	cording obligations	for
Impact				Additional Impact				
Business Ops & Admin:	CHIO A	MCMS, FMS, FSC dashboards may	y be impacted	Policy Impact:	(b)(5)			
Delivery Ops:	CCRS, I	CCRS, FMS, eCAMS, PIT		Funding Impact / Status:				
Revenue Ops:		act identified at this time.		Impact on Other OCC Projects:				H
Clinical & Network Mgmt:	(b)(5)							
OCC Leadership (Includes IDA and BIC):				Impact if Project Idea				
Community Care Network (Contract Mod):				Not Approved:				
Recommended OC	C Strat	egic Priority Alignment	Recomme	nded Project Desig		Recommended	Business Own	er
Improve Claims Processing	& Innova	e Business Model	OCC Managed	t		(b)(6)		
Discussion:								
OCC Policy, OCC Finance	, and Por	rtfolio Managers Vote Count: All Y	Yes votes receive	ed (no dissents).				

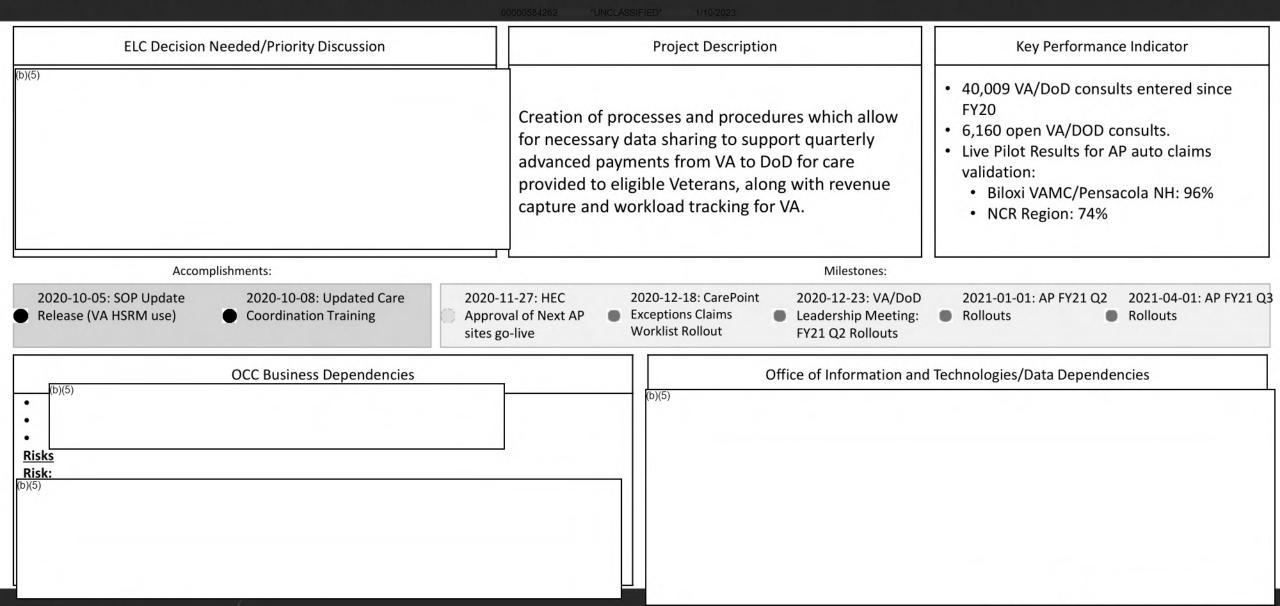
Office of Commu

Priority Project Review

Project Status Slides









Provider Profile Management System (PPMS)

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator
	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 WRJ 2020-12-07: PPMS 10.1 UAT	2020-12-08: PPMS 10.1 2020-12-15: P Go/No-Go Priority Sites	PIE Restart 2020-12-17: PPMS 10.1 Go-Live
OCC Business Dependencies	Office of Information and Techn	nologies/Data Dependencies
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy - 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 13.2

2020-12-03: CCRS Release

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

(b)(5)

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: ChangeManagement Sponsor Plan

OCC Business Dependencies

be business bependences

Office of Information and Technologies/Data Dependencies

<u>Issues</u>

(b)(5)

-- 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

Upcoming Milestones

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

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)

OIT / Data Dependencies

Community Care Network (CCN)

Project Phase - National Deployment

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

(b)(5)

Office of Information and Technologies/Data Dependencies

(b)(5)

Issues

-- No Issues Found --

Milestones:





ELC Decision Needed/Priority Discussion					Project Description	-1		Key Performance	Indicator	
(b)(5)				interface (U	I) so	series of custom-built creens and reporting s ns for administering th	system and	 Quality Check UI: 42/80 Users (Δ = +1) CCN Accreditation Waivers UI: 31/30 Users (No change) CCN Complaints & Grievances UI: 29/54 Us (No change) CCN Congressional Inquiries UI: 31/42 User (No change) CCN Corrective Action Plans (CAPs) UI: 29/3 Users (Δ = +1) CCN Network Adequacy Deviations UI: 28/5 Users (No change) 		ers UI: 31/30 Users ances UI: 29/54 Users ries UI: 31/42 Users ans (CAPs) UI: 29/30
	Accomplishments:					Milestones:				
2020-08-28: 7.0 D: eCAMS – Technical Release	• 2020-09-01: 8.0 - Attach U v007/v003	Occ 2020-10-28: 10.0 - Complaints & R4 QC	R10.1:	.1-24: EPRS Prod Congressional es & N.A. Deviations	R	020-11-25: EPRS Pre-Prod 10.2: Accreditation Waivers CAPs enhancements	2020-12-04: R12.0: EPRS Technical Release: CCRS	0	2020-12-14: EPRS Pre-Prod R10.3- Congressional UI Enhancements	2020-12-23: Build 9.0 D: Technical Release: HSRM
	OCC Bus	iness Dependencies					f Information and	d Tec	chnologies/Data Dependend	cies
(b)(5)						(b)(5)				



Risks -- No Risks Found --



Indian/Tribal Health Coordination (ITHC)

Project Phase - Phased **Implementation**

ELC Decision Needed/Priority Discussion

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

(b)(5)

2020-09-23: Tribe and VA staff retraining

2020-12-03: CC Plan Adopted

OCC Business Dependencies

Office of Information and Technologies/Data Dependencies

Milestones:

- None-Upstream
- None-Downstream

Issues

-- No Issues Found --





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

Project Description

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.

Key Performance Indicator

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: 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 -- No Business Dependencies Found --(b)(5)



this time.



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
- 5,195: Support Ticket Count for October

Accomplishments:

2020-11-13: Release 11 Go/No Go Presentation

2020-11-17: CAFC 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

Risks

(b)(5)

-- No Issues Found --

Issues

-- No Risks Found --



Project Phase - National Deployment

ELC Decision Needed/Priority Discussion

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

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

(b)(5)

- 10/26/2020: Began Training And Comms For CTB V2.0
- Began 2020-01-15: CTB v2.0 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

Office of Information and Technologies/Data Dependencies

2021-04-01: CTB v2.0 available to field users

OCC Business Dependencies

(b)(5)

1 ...

<u>Issues</u> -- No Issues Found --

ELC Decision Needed/Priority Discussion				Project De	scription	Key Performance Indicator		
No ELC decisions needed or priority discussions at this time Accomplishments:		his		Operations	evelop a standardized Plan (COOP) Appendix C systems and	Metric 2: P Metric 3: P Metric 4: P Metric 5: D Maintenan	Communication Strategy Phase I – Prepare Complete Phase II – Respond Complete Phase III – Recover Complete Pevelopment of Exercise, Ice, and Communication Plan COOP Appendixes complete for Itorate	
					Milestones:			
2020-08-04: CCSC • Go/No-Go	2020-08-13: Project Kick-off meeting	_	.1-25: Developme unication Strategy		2020-12-16: Phase I Prepa Complete		021-01-06: Phase II Respond omplete	
	OCC Business Dependencies				Office of Information and	d Technologies/I	Data Dependencies	
Risks b)(5)				(b)(5) Issues				





ELC Decision Needed/Priority Discussion **Project Description Key Performance Indicator** No ELC decisions needed or priority discussion Develop an Integrated Product Environment for isolated E2E and UAT topics at this time. Sponsor Accomplishments: Milestones: 2020-11-19: Project Kickoff 2020-12-01: Stakeholder Assessment

KPIs are currently being reviewed and finalized with **Executive Owner and Business**

2020-12-03: Data Dependencies

OCC Business Dependencies Office of Information and Technologies/Data Dependencies 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 Project Description Key Performance Indicator No ELC Decisions needed or priority discussion topics at * No specific KPI's were identified for VistA Integrated Billing (IB) and Accounts Receivable (AR) updates. this phase of the project. this time. Accomplishments: Milestones: 2020-11-04: IB 689 2020-11-12: AR 372 2020-12-04: 2020-12-05: 3 2020-12-11: RFP 2021-01-29: New 2021-03-05: 3 Nationally Released Nationally Released **Current Contract** Month Extension for new contract Contract Awarded Month Extension PoP Ends **Contract Begins** issued **Contract Ends OCC Business Dependencies** Office of Information and Technologies/Data Dependencies No business dependencies outside of Revenue Operations No data dependencies at this time. (RO) were identified for this phase of the project. Risks (b)(5)Issues No project issues at this time.





Enrollment System Community Care

Project Phase - National Deployment

ELC Decision Needed/Priority Discussion Project Description Key Performance Indicator 1. Communicate the Community Care static The ESCC project provides automation for Community Care eligibility to CCN and TPA (eligibility files sent static eligibility determinations allowing ES to determine, No ELC decisions needed or priority discussion topics at this time. daily to TPA and CCN) 100% communicate and track Veteran eligibility. 2. Tracking of Veteran eligibility to ensure accurate eligibility determinations (ESCC Data Quality Report) 100% daily Accomplishments: Milestones: 2020-11-13: Successfully 2020-11-17: ES CC 2020-12-16: Turn on ES Parameter to 2020-12-16: National Release of 2020-12-20: VistA IOC sites testing completed technical Hardship Information from functionality share CC Collateral Eligibility VistA functionality evaluation for CCN VCE Cerner was tested in SQA static eligibility within 24 (Team Liberty) Office of Information and Technologies/Data Dependencies hours (b)(5)**OCC Business Dependencies** (b)(5)Risks Issues -- No Issues Found ---- No Risks Found --





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:

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

-- 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
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	(b)(6)



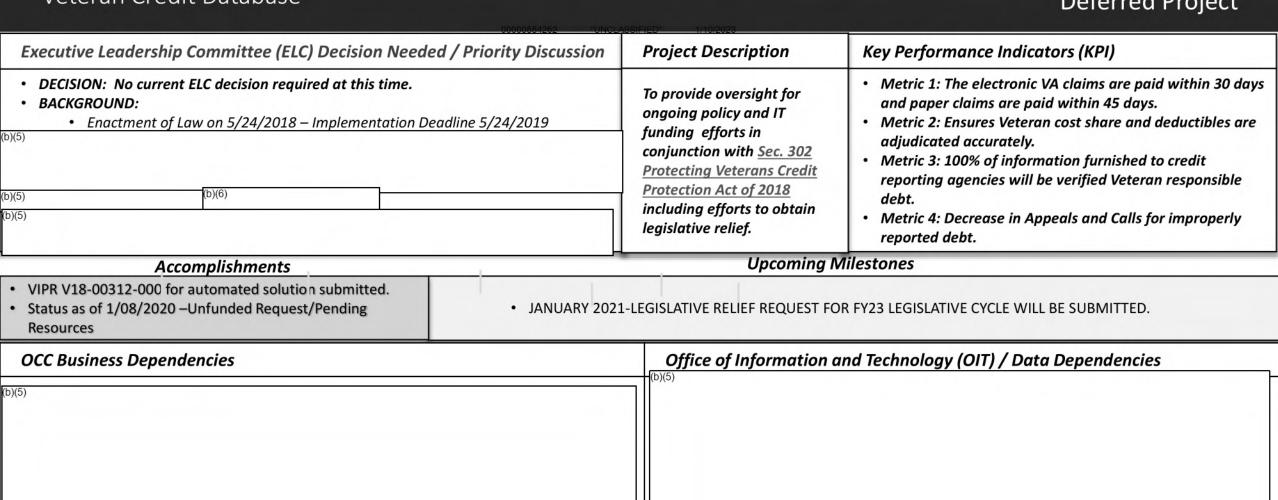


Project Idea Evaluation (PIE) Updates

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
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	(b)(6)











From:	00000584262 "LINCLASSIFIED" 1/10/2023
Subject: To:	(b)(6)
	(OCC NM): VHA OCC BOA PPS Leadership: (b)(6) (b)(6)
	(b)(6) VHA 10D1 OCM:
	(b)(6)
	(b)(6) Matthews, Kameron; Upton, Mark T.: (b)(6)
	(b)(6) (OCC NM); VHA OCC BOA PPS Leadership; (b)(6)
	(b)(6)
	(b)(6) VHA 10D1 OCM; (b)(6) @erpi.net'; (b)(6)
	(D)(6)
	(b)(6) Matthews, Kameron: <u>Upton. Mark T.:</u> (b)(6) @guidehouse.com'; (b)(6) @guidehouse.com'; (b)(6)
	(b)(6) Reed Susan A (b)(6)
	(5)(6)
Cc:	(b)(6) Advisory Portners (b)(6) (Rusiness Information Technology Solutions (RITS) 11 C)(b)(6)
	Advisory Partners) (b)(6) (Business Information Technology Solutions (BITS), LLC) (b)(6) (Federal Advisory Partners) (b)(6)
	(b)(6)
	(b)(6) @tederaladvsory.com(b)(6) @tederaladvsory.com(b)(6) (Federal Advisory
	Partners) (b)(6) Business Information Technology Solutions (BITS), LLC (b)(6) (Federal Advisory Partners) (b)(6)
Attached:	20201222.December (2020).Community Care Project Management Review (PMR) #1.pptx
Good morn	ing, All,
Please see a	attached presentation for this afternoon's Community Care Project Management Review (PMR). Agenda and
presenters	
-	a Evaluations:
	Veteran Pharmacy Care (ELC Awareness)
	Executive Sponsor: (b)(6)
	Key Initiative – Clinical Documentation Improvement Executive Sponsor: Ms. Susan Reed
	ulance Routing Optimization (ARO)
	Executive Sponsor: (b)(6)
	ject Review:
	inced Medical Cost Management Solution (AMCMS): Executive Sponsor Request. FY 21 Payment Data
	e and Delivery Operations assistance needed for Incomplete data of 837COB via CDW-PIT. Executive Sponsor: (b)(6) Business Sponsor: (b)(6)
occ	Data Governance: Business Sponsor Request. OCC alignment to Dr. Stone Data Strategy and Governance
Mem	orandum, dated 12/2/2020.
	Executive Sponsor: Dr. Mark Upton; Business Sponsor: (b)(6)
	OoD Advanced Payment and Referral Standardization:* <i>ELC Priority Discussion:</i> Dr. Stone provided
	oval for AP expansion to identified FY21 sites on 12/3. Executive Sponsor: (b)(6) Business Sponsor: (b)(6)

Thank you!

Join Microsoft Teams M	00000584262 1eeting	"UNCLASSIFIED"	1/10/2023	
<u>+1 872-701-0185</u> United States,	Chicago (Toll)			
Conference ID:(b)(6) #				
Local numbers Reset PIN Learn m	ore about Teams	Meeting options		
×				

00000584262

"LINCLASSIFIED"

4/40/2022

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 (b)(6)
 New Address (b)(6)
 @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

		Occurs Definitions Consultati	0584262 "UNCLASS	FIED" 1/10/2023	
Originator & Date: 12/	1/2020				provide Veterans the information to pick up their prove Veteran and network retail pharmacy experiences
				Additional Impact	
Business Ops & Admin:	No Imp	acts at this time		Policy Impact:	No Impacts
Delivery Ops:	(b)(5)			Funding Impact / Status:	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):	No Impa	No Impact at this time		Impact if Project Idea Not Approved:	
Community Care Network (Contract Mod):	(b)(5)				
Recommended OC	C Strat	tegic Priority Alignment	Recomme	nded Project Designa	
Improve Customer Service, (CCN)	Impleme	ent Community Care Network	OCC Directora	ate Managed / Network Manage	gement (b)(6)
Discussion: PPS resources not reques Directorate PM -	sted – Pr	esented for FLC Awareness			

FY 21 Key Initiative: Clinical Documentation Improvement

Originator	&	Date:	12	/3/202
Susan Ree	h			

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)(5)
0	(b)(5) (b)(5)		Impact if Project Idea Not Approved:	(5)(3)
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	n Recommended Business Owner
Innovate Business Model, In	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.





Orig	inator	&	Date:	12/10/2
(b)(6)				

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.)

Impacts	(b)(5)		Additional Impact					
Business Ops & Admin:	3,67				ets at this time.	(b)(5)	(b)(6)	
	11		Funding Impact / Status:	(b)(5)				
Delivery Ops:								
			Impact on Other OCC Projects:					
Revenue Ops:			•	-				
Clinical & Network Mgmt:			Impact if Project Idea Not Approved:	1				
OCC Leadership (Includes IDA and BIC):								
Community Care Network (Contract Mod):	No impacts at this time.							1
Recommended OCC	Strategic Priority Alignment	Recomme	nded Project Design	ation	Recomme	nded Business	Owner	
Innovate Business Model		OCC Mana	aged Project/ Clinical Integrat	tion	(b)(6)			

OCC Policy, OCC Finance, and Portfolio Managers Vote: Yes



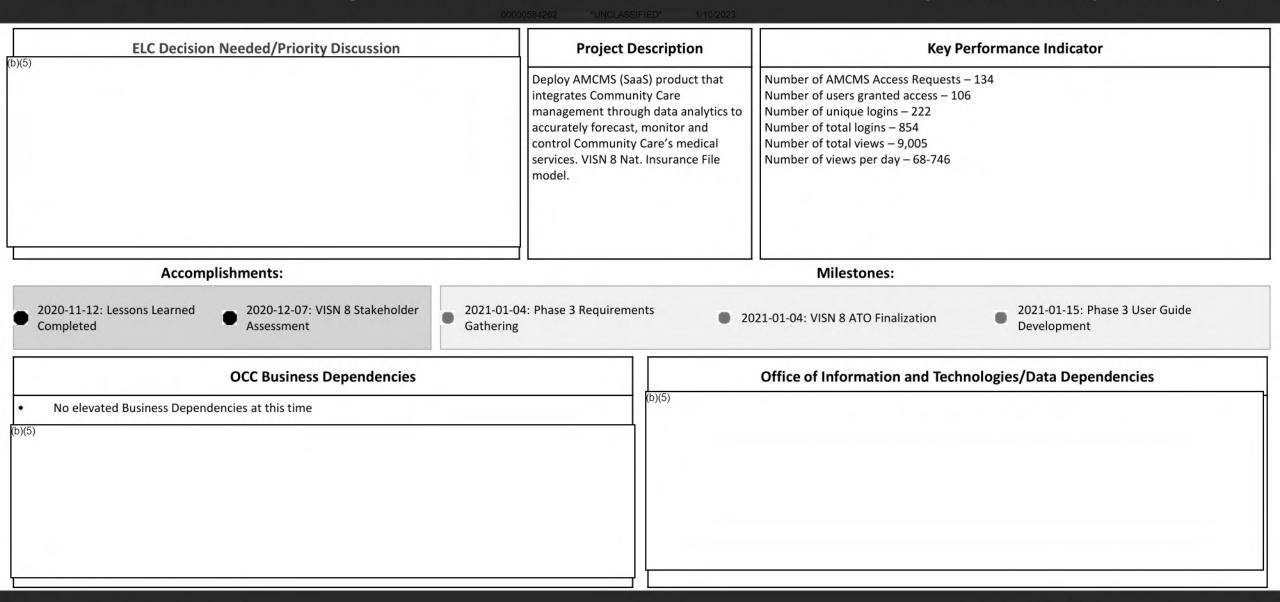
Discussion:

Priority Project Review

Project Status Slides











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

Office of Information and Technologies/Data Dependencies

- 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

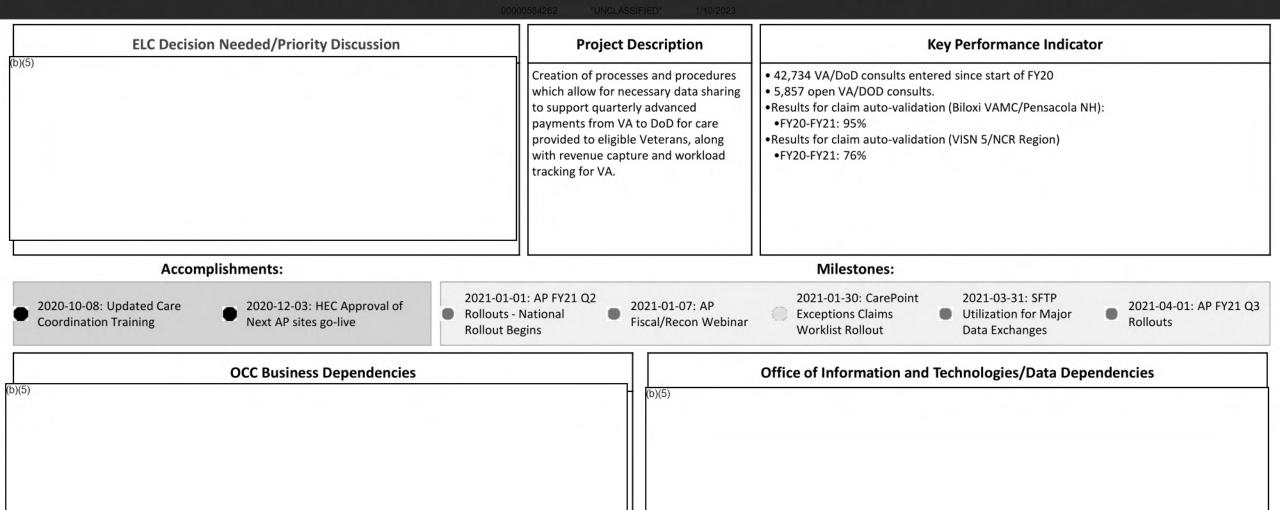
OCC Business Dependencies

(b)(5)

No Issues to elevate at this time











Appendix

Project Status Slides





Office of Community Care Cerner Integration

Project Phase - Phased Implementation

ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator		
No ELC decisions needed or priority discussion topics at this time.	Manage all necessary integrations to appropriately operationalize Cerner EHR into OCC clinical operations processes.	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 (Columbu	L5: Chalmers P. Wylie VA ACC s) Go Live	221-05-15: Jonathan M. Wainwright emorial VAMC (Walla Walla) Go Live		
OCC Business Dependencies		Office of Information and Technologies/Data Dependencies		
(b)(5)	(b)(5)			

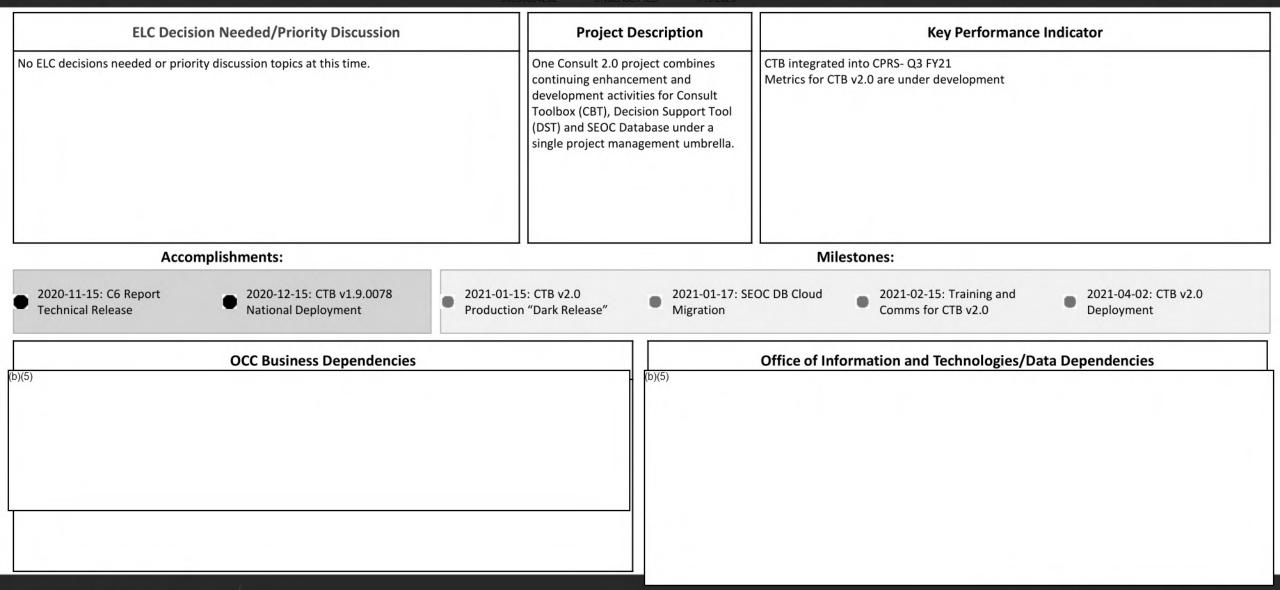




ELC Decision Needed/Priority Discussion Project Description Key Performance Indicator HealthShare Referral Manager (HSRM) 3,844,844: Total Referrals FY 2020 (through 11/30/2020) No ELC decisions needed or priority discussion topics at this time. is an enterprise-wide COTS system in 185,562: Total Referrals 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

One Consult 2.0

Project Phase - National Deployment







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 community network and federal Mean Time to Restore: 19 Hours partner provide along with a tool to Release Fail Percentage: 0 allow VA staff to view and manage that Provisioned Licensed Users: 13,720 information. Average Weekly CCN Data Import Transactions to PPMS/Per Region: 0/18 thru 10/24: 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: 2020-12-17: PPMS 10.1 2021-01-04: PIE Restart 2020-12-08: PPMS 10.1 2020-12-18: PPMS 11.0 2021-01-28: VA CPL 1.1 2020-11-13: PIE - Go-Live WRJ 2020-12-07: PPMS 10.1 UAT Go/No-Go National Gate Review **Priority Sites** Go-Live Release **OCC Business Dependencies** Office of Information and Technologies/Data Dependencies (b)(5)Clinical Integration Network Management Community Care Network **Delivery Operations Revenue Operations** (b)(5)VAMC/CPO & Pharmacy -(b)(5)

No Issues to elevate at this time





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		
	P.1 .						
Accor	mplishments:				Milestones:		
2 020-12-10: 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			Y .	No Issues to elevar	te 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% unscheduled downtime for the IPE systems integration environment		
Accomplishments:		Milestones:		
2020-12-03: Updated IMS from CCRA 2020-12-03: Data Dependencies	2020-12-23: Requirements for Functionality Agreements Communication	/11/1-11/- /X' \/\/\/P ()		
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	Project Description	Key Performance Indicator		
No ELC decisions needed or priority discussion topics at this time.	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: 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)		
Accomplishments:		Milestones:		
2020-11-24: R12.0D: EPRS Technical Release: CCRS Accreditation Waivers & CAPs R10	020-12-28: Pre-Prod 2021-01-05: Build 9.0 D 10.3- Congressional UI Technical Release: hhancements HSRM	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)			





Project Phase - Project Development

ELC Decision Needed/Priority Discussion	Project Description	Key Performance Indicator	
No ELC Decision Needed at this time.	A system to facilitate the receipt a validation of post-payment 837 Converses 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 timelines:	
Accomplishments:		Milestones:	
/11/11-17-17: ((R) Release 13 3	2020-12-21: CCRS Release 13.4 © 2021-01 Demo	-07: CCRS Release 13.4	
OCC Business Dependencies		Office of Information and Technologies/Data Dependencies	
CCRA, FMS, PPMS, PIT, and MVI		, SEOC, 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:	
	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)	• No data dep	pendencies at this time.	





Development of standardized Metric 1: Phase I – Prepare Complete
Continuity of Operations Plan (COOP) for all mission critical OCC systems. The COOP will outline the necessary steps to prepare for, respond to, and recover from IT system failures. Metric 2: Phase II – Respond Complete Metric 3: Phase III – Recover Complete Metric 4: COOPs Completed Metric 5: COOP Policy Completed
Milestones:
22-16: Phase I
Office of Information and Technologies/Data Dependencies





No ELC Decisions needed or priority discussion topics at this time.	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: 2020-10-30: VSSC Data Validation 2020-12-03: 2020-11-27: HEC Approval of Next AP sites golive	12-31: VSSC Data Validation	Milestones: 2021-03-05: Project Start/Finish
(b)(5) No Risks to elevate at this time	No OI&T Da No Issues to eleva	Office of Information and Technologies/Data Dependencies ata dependencies at this time. te 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)





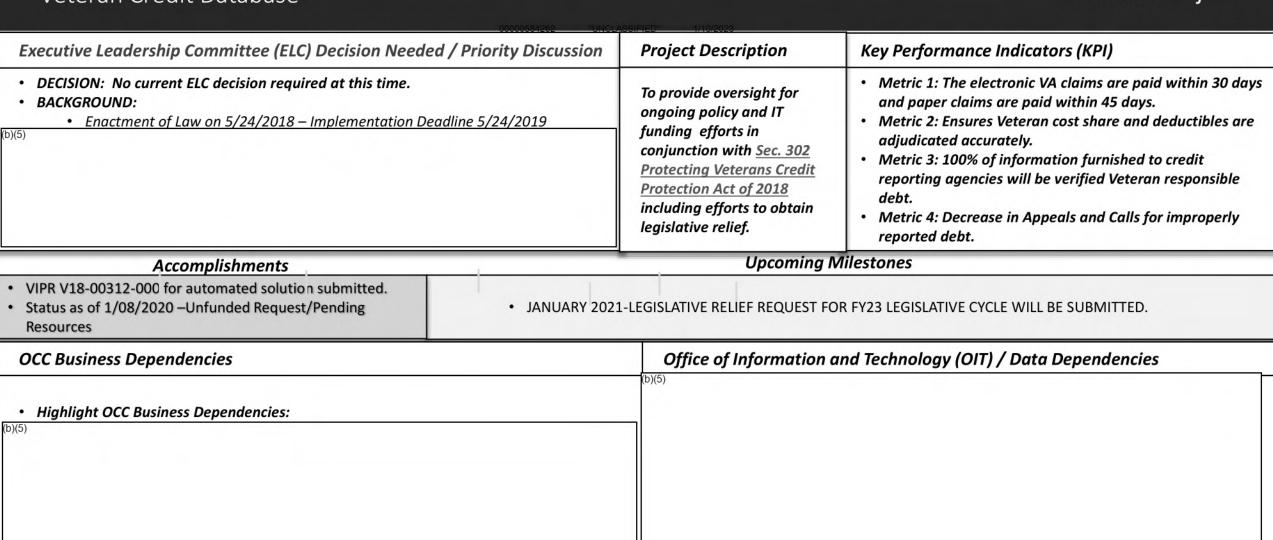
Project Name	Received by PIE Team	Presented at PMR	PMR Idea Decision	PPS Notified	CCSC Presentation Date	CCSC Project Go / No Go	PPS PM Resource Assigned
Veteran Family Member Program (VFMP) Foreign Medical Program (FMP) Electronic Fund Transfer (EFT) Payment	8/25	On Hold	TBD	TBD	TBD	TBD	TBD
Community Care Billing SSN Reduction	7/21	8/11	Approved	8/13	10/20	Go	10/2
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)





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	(b)(6)









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"LINCLASSIFIED"

1/10/2022

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





Initiation

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)

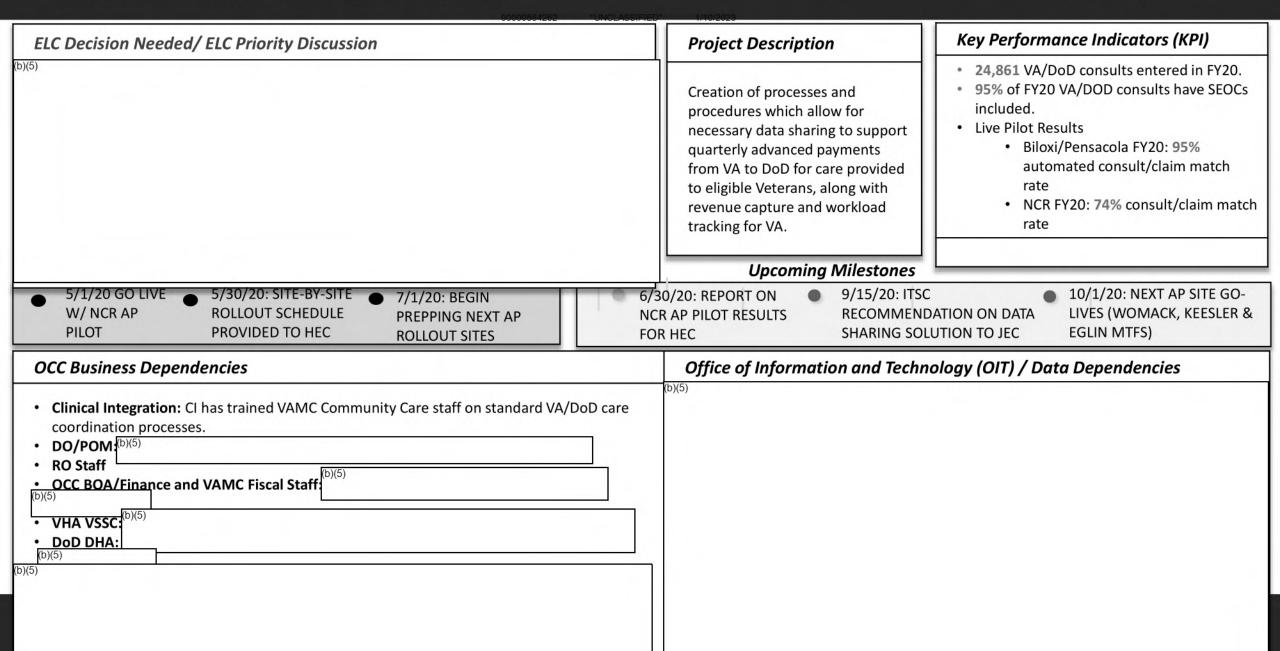
OIT / Data Dependencies

(b)(5)



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

PRECEIVED 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 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. **Discussion** (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. **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 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/	30/20 RESTART 9/30/20 CLEA THP RE-TRAINING EXECUTION C TUALLY) EXPANSION N	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)			
			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

(b)(5)





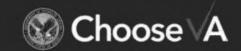
Urgent Care IPT

National Deployment

ELC Decision Needed/ ELC Priority Discussion	00000001202	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		ce 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	
		gation: N/A	

National Deployment

ELC Decision Needed/ ELC 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.	Power BI functionality exceeded license capability for reporting previous metrics.
Accomplishments		Upcoming Milestones	
● 5/22/20 ● 6/30/20 ● 7/1/20 ● 7/7/20 PPMS 8.0 DEV CONTRACT URGENT CARE PPMS 8.1 GO- GO-LIVE AWARDED JUNE LEGACY RE-ROUTE LIVE	 7/23/20 HOTFIX 8.1.1.1 RELEASE 	7/29/20COMMUNITY PROVIDERLOCATOR (CPL) RELEASE	08/11/20
OCC Business Dependencies		OIT / Data Dependencies	
 Clinical Integration Network Management Community Care Network Delivery Operations Revenue Operations VAMC/CPO & Pharmacy (b)(5) 		(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):

 VAMC / Fiscal Budget Staff:
 (b)(5)

OIT / Data Dependencies

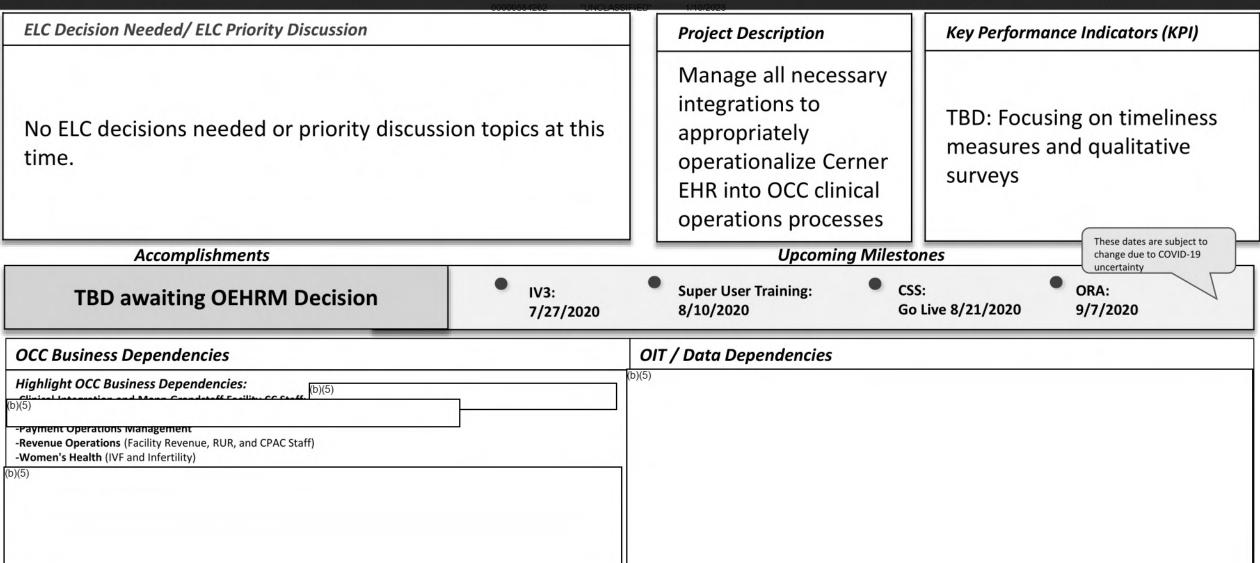
Appendix





Cerner OCC Integration

Development

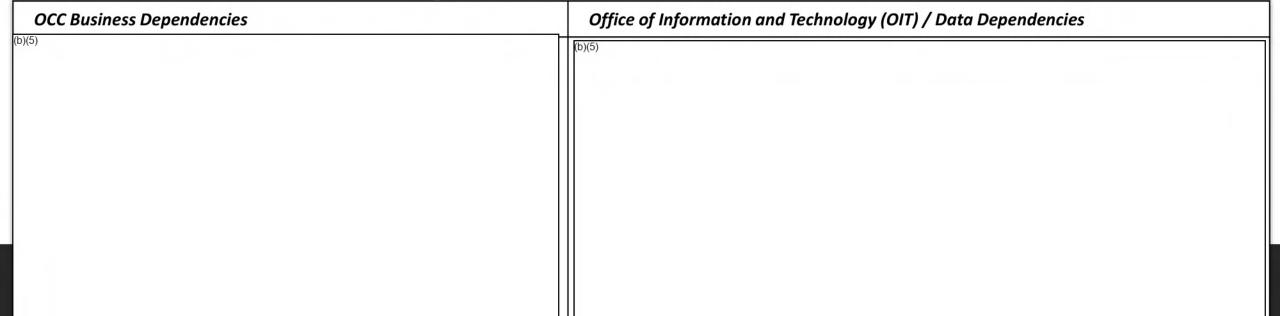




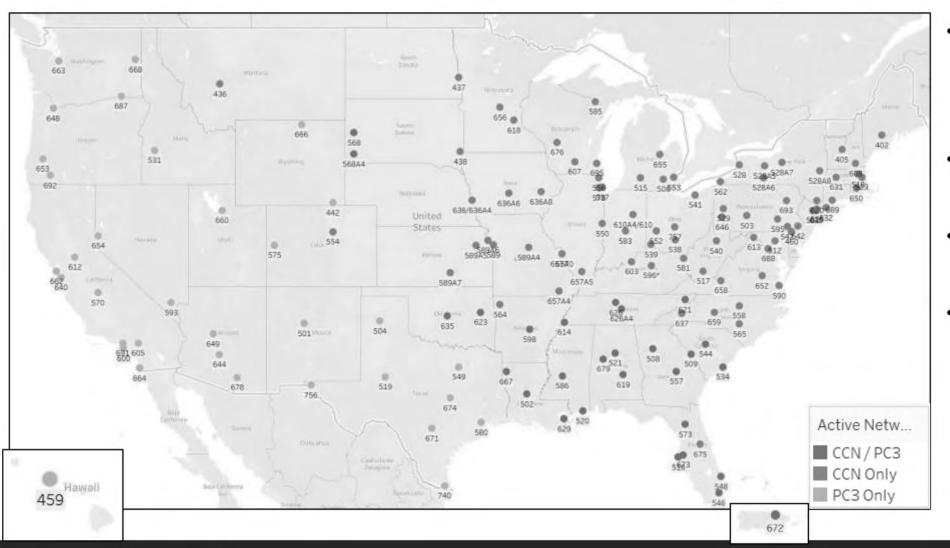
Community Care Network

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**



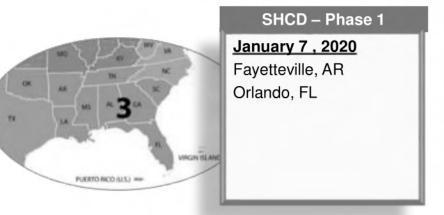
National Network Deployment Progress – As of 7/6/2020



- (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

Deployne (มีโ remaining R3 sites)

June 16, 2020

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

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. 15



Birmingham, AL Central Alabama Charleston, SC

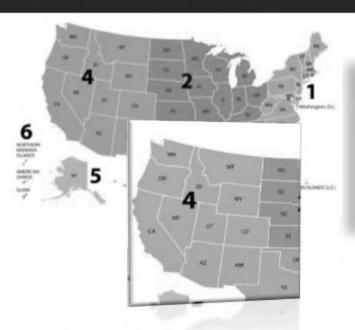
Mountain Home, TN

Alexandria, LA Atlanta, GA

August, GA

Bay Pines, FL

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) 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 **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

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**

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

OIT	/ Data	Depend	encies
/F\			

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.

(D)(D)



CPAC Document Scanning

National Deployment

ELC Decision Needed/ ELC Priority Discuss	ion
(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.

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)
- System Engineering Management (SEM) (b)(5)
- Business Intelligence Service Line (BISL) (b)(5)
- Community Care Contractor (CCN) (CCN)
- VA Master Patient Index (MPI) , Office of Policy and Planning (PSSG), Veteran Experience Office (VFO)

 (b)(5)

-

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	/1/2020 CLOSE UT 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 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 INICI ACCIEIED"

1/10/2023

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)

Impediments to OC	C	Additional Impac	et e e e e e e e e e e e e e e e e e e
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, All CERNER, CCN, CAVE, ePrescribing, et	MCMS, OCC-	
OCC Leadership (Includes IDA and BIC):	IDA – No current impacts identified. BIC - (b)(5)	Impact if Project Idea N Approved:	νοι
Recommended OC	C Strategic Priority Alignmen	t Recommended Project Desig	gnation Recommended Business Owner
Innovate Business Model		OCC	CHIO / BOA





Enterprise Program Reporting System (EPRS)

Development

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Executive Leadership Committee (ELC) Decision Needed / Priority	Project Description	Key Performance Indicators (KPI)	
(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 O8/20/2020 EPRS O8/28/2020 EPRS O8/28/2020 EPRS Release 6.0 D: EDI 837 Pre-Prod Migration Data Layer Rework O8/28/2020 EPRS Release 7.0 D: EPRS Data Integration (eCAMs)	09/28/2020: EPRS Pre-Prod 09/30/2020 EPRS Pre- R10.0 & 10.1: UIs for Prod R11.0 : Network EPRS Tech. Data Integration for Complaints, & N.A. Deviations Management UI HSRM		
OCC Business Dependencies	OIT / Data Dependencies		
Project Dependencies • Community Care Contract Administration (CCCA) (b)(5) • Community Care Network Management (NM) (b)(5) (b)(5)	Data Dependencies (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)

(b)(5)

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

OIT / Data Dependencies

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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 (3/15/2004 PE14-P P) Schange PS Services (1/15/2004 PE 14-P P) Schange PS Services (1/15/2004 PE14-P PS Sch
Accomplishments	Upcoming Marketones 1,841,979 1,797,125 44,854 2% 12,123,360
 7/14/20	08/20/2020



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

• Communications: (b)(5)

(b)(5)

(b)(5)

Office of Information Technology / Data Dependencies

One Consult 2.0

Development

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

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

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



- 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) (b)(5)	
-Payment Operations Management -Revenue Operations (Facility Revenue, RUR, and CPAC Staff) -Women's Health (IVF and Infertility)	
(b)(5)	

OIT / Data Dependencies





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

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

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
STAKETIOEDER VIRTOAL PHARMACY MOD	20 BIM ATION ON EXECUTION OF IHS/THP VIRTUAL FINALIZED AND BEGIN MODIFICATION RETRAINING IMPLEMENTATION
OCC Business Dependencies	OIT / Data Dependencies
)(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 • III UAT (STALE **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**

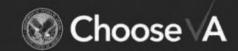
9/30 LESSONS **LEARNED** UPDATE

Office of Information and Technology (OIT) / Data Dependencies **OCC** Business Dependencies

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion **Project Description Key Performance Indicators (KPI)** The project scope is to develop a standardized Continuity of Metric 1: Process for unscheduled outage Operations Plan (COOP) policy, in notification addition, the creation of a COOP Metric 2: COOPs developed DECISION: No ELC decisions needed at this time. document for each OCC Metric 3: COOP Policy developed Directorate. In parallel, to the Metric 4: Repository complete policy/plans, the development Metric 5: KMS and SOPs updated and implementation of an electronic single repository. **Accomplishments Upcoming Milestones** 08/04/2020 -08/13/2020 - KICK-10/27/20 -11/10/20- NOTIFICATION 12/15/20 - COOP ■ 11/10/20- COOP APPROVED FOR GO AT **DIRECTORATES OFF PROJECT** OF UNSCHEDULED POLICY DEVELOPMENT DEVELOPMENT CCSC SYSTEMS/FUNCTIONS **MEETING** SYSTEM OUTAGE PROCESS Office of Information and Technology (OIT) / Data Dependencies - Lite **OCC Business Dependencies - Lite** Highlight OCC Business Dependencies: 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.

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**

(b)(5)

8/31/2020 9/2/2020 SYSTEMS DOCUMENTS **CCRS & PCM CLAIMS GAP ANALYSIS**

9/30/2020 CREATE TECHNOLOGY AND DATA **GOVERNANCE ROAD MAP**

10/14/2020 DRAFT DATA GOVERNANCE STRUCTURE ROLES/ RESPONSIBILITIES 10/28/2020 **OBTAIN APPROVAL SYSTEMS DOCUMENTATION STANDARD**

OCC Business Dependencies

OIT / Data Dependencies

Upcoming Milestones

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 (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	l Technology (OIT) /	Data Dependencies
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Issue

(b)(5)

Mitigation:

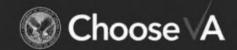




Retail Pharmacy Program

Close Out

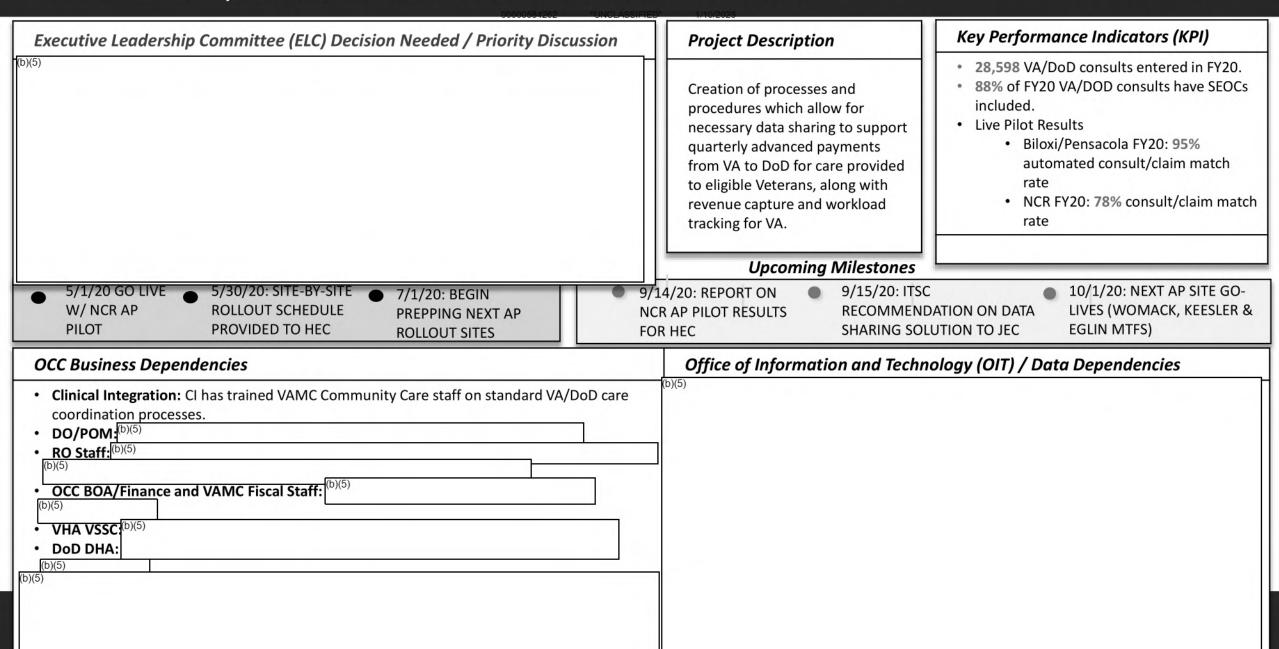
Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description Key Performance Indicators (KPI)
DECISION: No ELC decisions needed at this time.	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods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

(b)(5)





CPAC Document Scanning

Project Phase – Close Out

Executive Leadership Committee (ELC) Decision Needed / Priority Disc	cussion
(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

U.S. Department of Viveterans Health Admin



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)(5)
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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"LINCL ASSIETED"

1/10/2023

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

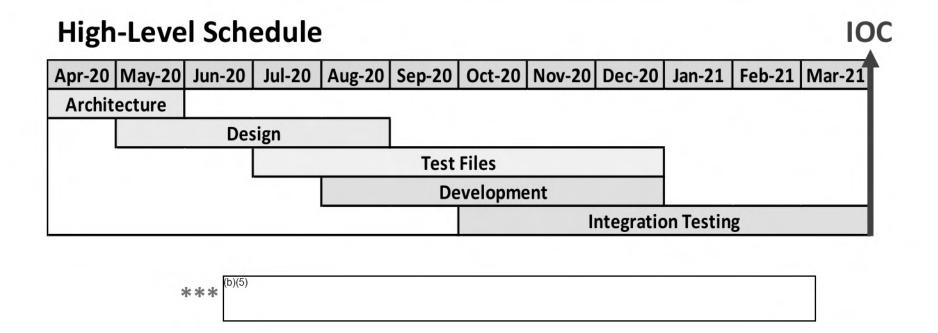




Current Payer EDI Priorities

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).





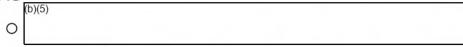


Remaining Payer EDI Priorities/Stakeholders

- EPRS (Parser)
 - o 837 work complete / 835 work remains.
 - Key Stakeholders Provider Relations and Services, Chief Informatics Office.
- CAVE



- Key Stakeholders Clinical Integration, Delivery Operations, Chief Informatics Office.
- ARS



- 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)

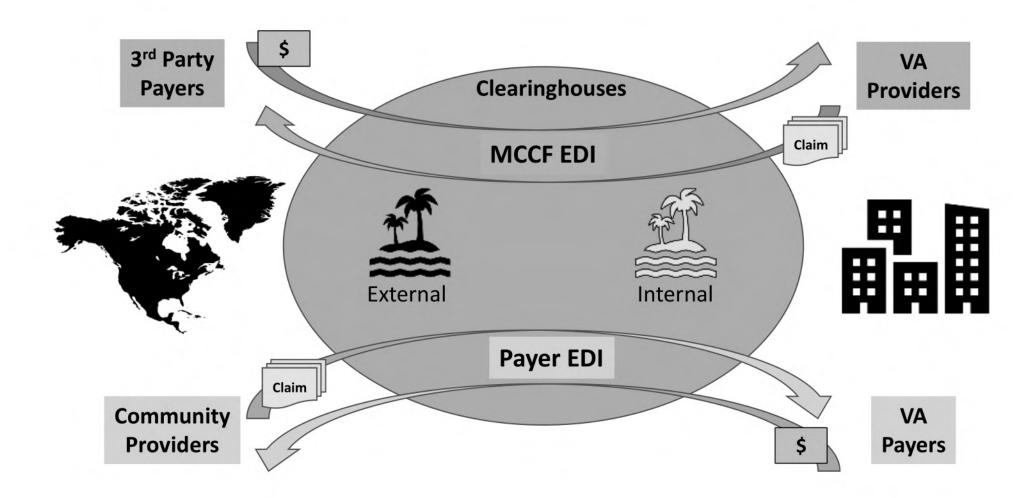
____EPRS (Parser)

____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 **Accomplishments** 5/1/20 GO LIVE _ 9/14/20: REPORT ON _ 10/8/20 : CARE COORDINATION ● 11/18/20: HEC W/ NCR AP SOP UPDATE RELEASE (HSRM USE) NCR AP PILOT RESULTS PILOT & TRAINING FOR HEC SITES GO-LIVE

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 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

Upcoming Milestones

APPROVAL OF NEXT AP

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) (b)(5)
- OCC BOA/Finance and VAMC Fiscal Staff: (b)(5)
- VHA VSSC: (b)(5)
- DoD DHA:

Office of Information and Technology (OIT) / Data Dependencies

Community Care Reimbursement System (CCRS)

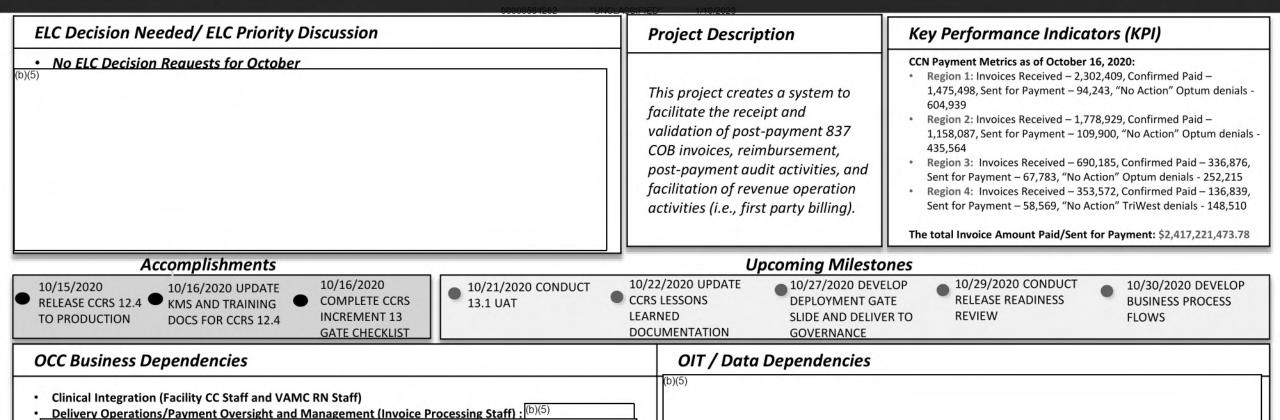
(b)(5)

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

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

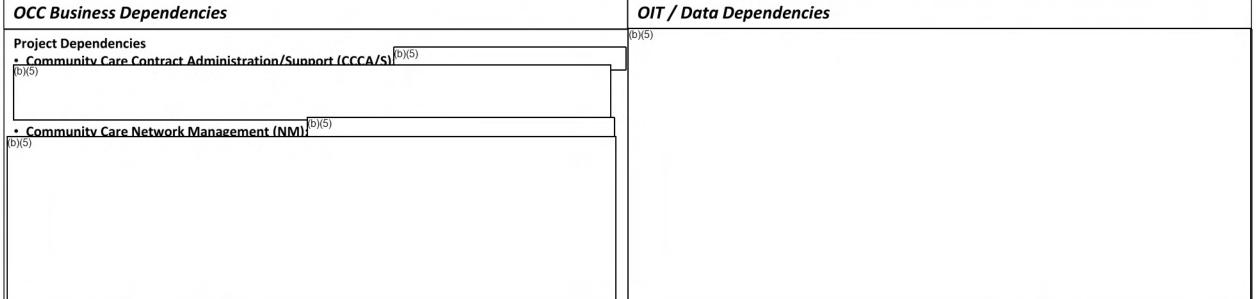
VAMC / Fiscal Budget Staff (b)(5)

National Deployment



For ELC Awareness	Project Description	Key Performance Indicators (KPI)
(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: 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-10/14/2020: EPRS SQA R10.1: 10/29/2020: EPRS Prod 12/04/2020: EPRS Prod 12/16/2020: EPRS Prod R12.0: EPRS Technical Data R10.1: Congressional Release 6.0 D: EDI 8377.0 D: EPRS Data Prod R10.0: Complaints Congressional Inquiries & R10.0: Complaints UI & Data Layer Rework Integration (eCAMs) **UI & Quality Check** N.A. Deviations **Quality Check** Integration for CCRS Inquiries & N.A. Deviations







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





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	lencies
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Highlight OCC Business Dependencies:

-Clinical Integration and Mann Grandstaff Facility CC Staff $^{(b)(5)}$

(c)(d

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

h)(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

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**

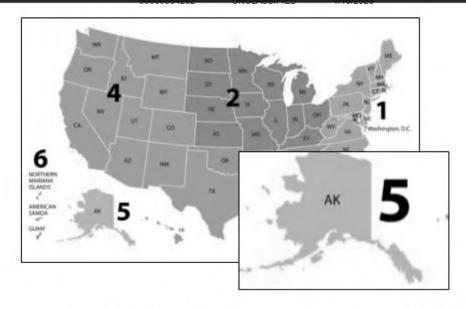
Upcoming Milestones

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

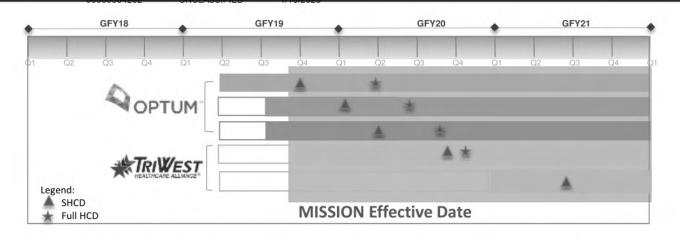


- Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1/2020.
- The Post Award Meeting is scheduled for 10/19/2020.
- The Kickoff Meeting is scheduled for 11/4/2020.
- Region 5 has a Veteran population of more than 68,000 with more than 33,000 Veterans enrolled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

0000584262 "UNCLASSIFIED	1/10/2023
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	020 BIM O9/23/2020 IHS/THP ATION ON VIRTUAL RETRAINING 11/16/2020 CC PLAN FINALIZED
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

Development

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 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

 Delivery Operations (b)(5)

 Finance (OCC Finance and Informatics Staff)

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

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

 Total CPAC Staff)

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	 DST integrated into CPRS- Q1 FY 21 CTB integrated into CPRS- Q2 FY 21
Accomplishments	Upcoming N	Milestones
CTB 1.9.0077 CTB 1.9.0077 DST MAPPING COMPLETED CTB V2.0 CTB V2.1 DEVELOPMENT SQA TESTING TABLE REQUIREMENTS 1 DEVELOPMENT COMPLETED: UPDATES GATHERING AND COMPLETED: 10/05/2020 10/13/2020 WENT LIVE: WIREFRAMES: 10/9/2020	MENT NATIONAL ROLLOUT PRE-PROD IOC TESTING DEVELO	OPMENT CONSULT HOURS LETE FACTORS CONTINUE:
OCC Business Demandancies	OIT / Data Dependencies	



0)(5)

OIT / Data Dependencies

0)(5)

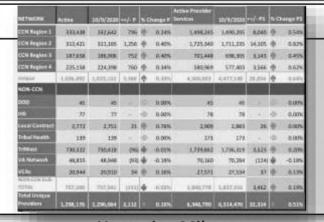




	-
Priority Discussion:	5.11
(b)(5)	

ct Description

ler Profile Management n (PPMS): A consolidated tory to house provider nation for multiple unity network and federal er provide along with a tool w VA staff to view and ge that information.



Upcoming Milestones Accomplishments ■ 08/20/2020 - ■ 8/25/2020 ■ 09/8/2020 **●** 7/29/20 **●** 08/11/20 **●** 8/11/20 08/20/20 09/15/20 10/27/20 7/7/20 **7/14/20** 09/25/20 11/5/20 **7/27/20** 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 SPRINT 25** RELEASE SPRINT 27 **GO-LIVE SPRINT 28** SPRINT 29 **GO-LIVE NATIONAL GO-LIVE PRIORITY SITES GATE REVIEW GATE REVIEW GATEWAY** RELEASE REVIEW **OCC Business Dependencies** OIT / Data Dependencies (b)(5)Clinical Integration

Network Management

Community Care Network

Delivery Operations

VAMC/CPO & Pharmacy

Revenue 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

10/7/2020 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 Governance</u>
(b)(5) • **OIT**: (b)(5) (b)(5)(b)(5)

UH	/	Data	рере	enae	ncies

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion
 DECISION: NO ELC decision currently

Project Description

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.

Upcoming Milestones

Key Performance Indicators (KPI)

- Metric 1: Process for unscheduled outage notification
- Metric 2: COOPs developed
- Metric 3: Repository complete
- Metric 4: KMS and SOPs updated

Accomplishments

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 11/10/20- COOP DEVELOPMENT

OCC Business Dependencies - Lite

• Highlight OCC Business Dependencies:

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies - Lite

• 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.

(b)(5)

Mitigation:

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
---------------------------	--------------------	--------------------------------

Issue

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

)

Retail Pharmacy Program

Project Phase – Close Out

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	D/30/2020 CLOSE UT RETAIL HARMACY
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 (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

Sociolaria Cradit Batabasa	LASSIFIED" 1/40/2023	
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.	 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	lilestones
VIPR V18-00312-000 for automated solution submitted. Status as of 1/08/2020 –Unfunded Request/Pending Resources • JANUARY 202	21-LEGISLATIVE RELIEF REQUEST FOR	R FY23 LEGISLATIVE CYCLE WILL BE SUBMITTED.
OCC Business Dependencies	Office of Information a	nd Technology (OIT) / Data Dependencies
	(b)(5)	

From: Subject:	00000584262 "UNCLASSIFIED	1/10/2023
To:	(b)(6)	
	(OCC NM); VHA OCC SEM Operations Leaders (b)(6)	hip;l ^{(b)(6)}
	(b)(6)	VHA 10D1
	OCM (b)(6)	
	(b)(6) Matthews (c	meron; Upton, Mark T.;(b)(6)
	(b)(6)	Reed, Susan A. (b)(6)
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	(OCC NM); VHA OCC BOA PPS Lea (b)(6)	idersnip; (^{e,re,r}
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Cc:	(b)(6)	(Federal
	Advisory Partners (b)(6) (Business (b)(6) (Federal Advisory Par	Information Technology Solutions (BITS), LLC) (b)(6) tners) (b)(6)
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	(b)(6) (Federal Advisory Partners) (b)(6)	Business Information Technology Solutions
Attached:	(BITS), LLC)(b)(6) 20201124.November (2020).Community Care Pr	Federal Advisory Partners) roject Management Review (PMR) v2.pptx
	,,,	
Agenda:		
	ct Idea Evaluation (PIE) VA Provider CCN Retail Pharmacy Capability	
	Referral Based Obligations	
	Priority Project Review	
	VA/DoD Advanced Payment and Referral Standard	dization
	Provider Profile Management System (PPMS)	
	Community Care Reimbursement System (CCRS)	
Thank you!		
	ot forward this meeting invitation.	
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Local numbers	Reset PIN Learn more about Teams Meeting options	

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"LINCLASSIFIED"

1/10/2022

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/	10/2020		prescriptions pre	escribed by a VA provider to be fille	Region 4) to allow Veterans who need an immediately ed at a CCN retail community pharmacy when access
Post and the	(L)(E)			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 provi	already in place for Region 4 ded for implementation date n progress for Regions 1-3.			
Recommended OCC	C Strategic	Priority Alignment	Recommer	nded Project Designation	n Recommended Business Owner
Implement Community Care Improve Customer Service	Network (CCN)		OCC Directorat	te Managed	(b)(6)
Discussion:					





Referral Based Obligations

Originator & Date: (b)(6) (b)(6) 11/17/20	020	Scope Definition: OCC nee Community Care programs	ds to assess a	nd establish an interim and long	g-term process for recording obligations for	
Impact				Additional Impact		
Business Ops & Admin:	(b)(5)			Policy Impact:		
Delivery Ops:	CCRS, I	FMS, eCAMS, PIT		Funding Impact / Status:		
Revenue Ops:	No impa	ct identified at this time.		Impact on Other OCC Projects:		
Clinical & Network Mgmt:	(b)(5)					
OCC Leadership	7					
(Includes IDA and BIC):				Impact if Project Idea Not Approved:		
Community Care Network (Contract Mod):						
Recommended OCC	C Strate	egic Priority Alignment	Recomme	nded Project Designation	Recommended Business Owner	
Improve Claims Processing	& Innovat	e Business Model	OCC Managed		(b)(6)	
Discussion:						

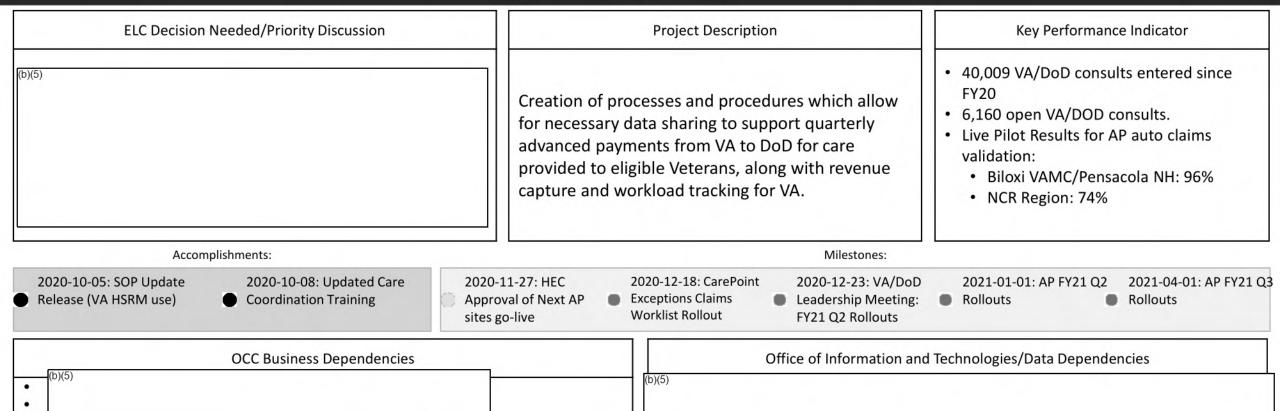
OCC Policy, OCC Finance, and Portfolio Managers Vote Count: All Yes votes received (no dissents).

Priority Project Review

Project Status Slides







Risks 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: WRJ UAT	: PPMS 10.1 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 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 13.2

2020-12-03: CCRS Release 2020-12-17: CCRS Release 13.3

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

Milestones:

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

2020-11-25: Draft Data Governance

Milestones:

Structure

2020-11-30: ChangeManagement Sponsor Plan

OCC Business Dependencies

(b)(5)

Office of Information and Technologies/Data Dependencies

<u>Issues</u>

(b)(5)

-- 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

Upcoming Milestones

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
- 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)

OIT / Data Dependencies

Community Care Network (CCN)

Project Phase - National Deployment

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 URGENT CARE CUTOVER CARE CUTOVER FROM

2021-04-01: R5 HCD

OCC Business Dependencies

(b)(5)

Office of Information and Technologies/Data Dependencies

(b)(5)

Issues

-- No Issues Found --

Milestones:





Enterprise Program Reporting System (EPRS)

Project Phase - Phased Implementation

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 User (No change) CCN Congressional Inquiries UI: 31/42 User (No change) CCN Corrective Action Plans (CAPs) UI: 29/3 Users (Δ = +1) CCN Network Adequacy Deviations UI: 28/5 Users (No change) 	ers rs 30
Accomplishments:	Milestones:	
2020-08-28: 7.0 D: eCAMS – Technical Release	2020-11-24: EPRS Prod 2020-11-25: EPRS Pre-Prod 2020-12-04: R12.0: 2020-12-14: EPRS Pre-Prod 2020-12-23: Build R10.1: Congressional R10.2: Accreditation Waivers EPRS Technical Release: CCRS Enhancements Release: HSRM	
OCC Business Dependencies	Office of Information and Technologies/Data Dependencies	
(b)(5)	(b)(5)	



Risks -- No Risks Found --



Indian/Tribal Health Coordination (ITHC)

Project Phase - Phased Implementation

ELC Decision Needed/Priority Discussion

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

Issues

-- No Issues Found --





ELC Decision Needed/Priority Discussion

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

Project Description

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. **Key Performance Indicator**

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:

2020-10-26: AMCMS Virtual Webinar Trainings

2020-11-12: Lessons Learned Completed

ATO Finalization

Milestones:

2020-12-04: Payment 2020-12-04: Phase 3
Requirements Gathering User Guide Development

OCC Business Dependencies

-- No Business Dependencies Found --

(b)(5)

(b)(5)

Office of Information and Technologies/Data Dependencies

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
- 5,195: Support Ticket Count for October

Accomplishments:

2020-11-13: Release 11 Go/No Go Presentation

2020-11-17: CAFC 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)

OCC Business Dependencies

Office of Information and Technologies/Data Dependencies

Issues

-- No Issues Found --

Risks

-- No Risks Found --



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

(b)(5)

- 10/26/2020: Began Training And Comms For CTB V2.0
- 2020-01-15: CTB v2.0 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

Office of Information and Technologies/Data Dependencies

2021-04-01: CTB v2.0 available to field users

OCC Business Dependencies

(b)(5)

Issues

-- No Issues Found --

No ELC decisions needed or priority discussions at this time			+	Project Description	Key Performance Indicator		
			The project scope is to develop a standardized Continuity of Operations Plan (COOP) Appendix for all mission critical OCC systems and functions.			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	
Accom	nplishments:			M	ilestones:		
2020-08-04: CCSC • Go/No-Go	2020-08-13: Project Kick-off meeting	_	-11-25: Developme munication Strategy		Phase I Prepa	re 2021-01-06: Phase II Respond Complete	
	OCC Business Dependencies			Office of I	nformation and	d Technologies/Data Dependencies	
(b)(5)				(b)(5)			
Risks				<u>Issues</u> (b)(5)			
(b)(5)				(0)(3)			





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

OCC Business Dependencies

(b)(5)

Milestones:

<u>Issues</u>

(b)(5)

-- No Issues Found --





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

Project Phase - National Deployment

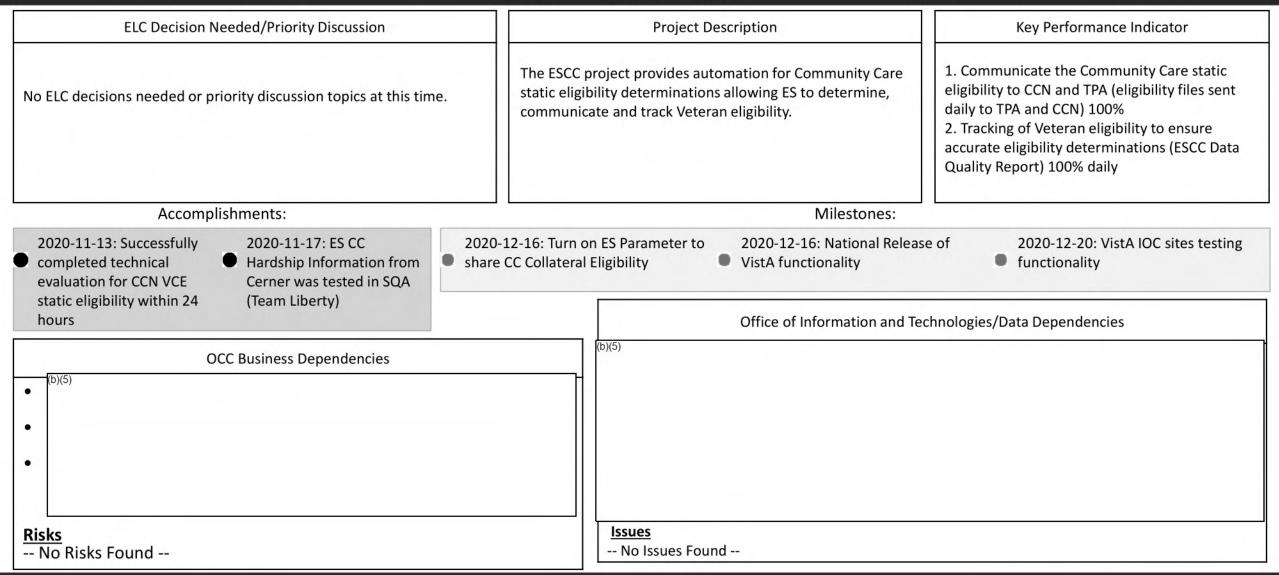
ELC Decision Needed/Priority Discussion Project Description Key Performance Indicator No ELC Decisions needed or priority discussion topics at * No specific KPI's were identified for VistA Integrated Billing (IB) and Accounts Receivable (AR) updates. this phase of the project. this time. Accomplishments: Milestones: 2020-11-04: IB 689 2020-11-12: AR 372 2020-12-04: 2020-12-05: 3 2020-12-11: RFP 2021-01-29: New 2021-03-05: 3 Nationally Released Nationally Released **Current Contract** Month Extension for new contract Contract Awarded Month Extension PoP Ends **Contract Begins** issued **Contract Ends OCC Business Dependencies** Office of Information and Technologies/Data Dependencies No business dependencies outside of Revenue Operations No data dependencies at this time. (RO) were identified for this phase of the project. Risks Issues 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 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:

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

-- No Risks Found --

2019-10-11: Gate 3

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 (b)(6)



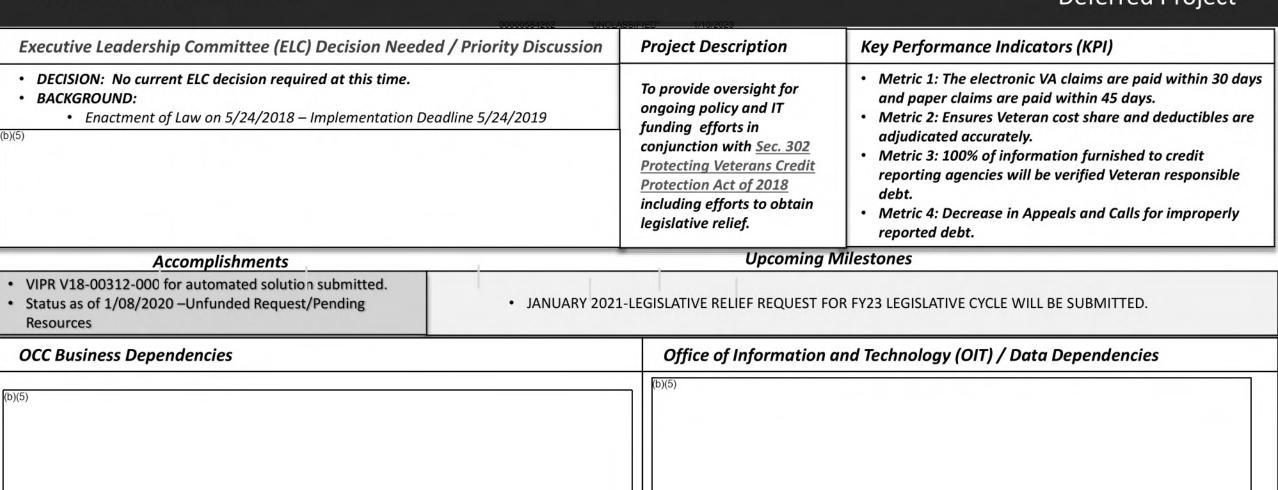


Project Idea Evaluation (PIE) Updates

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 (b)(6)











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

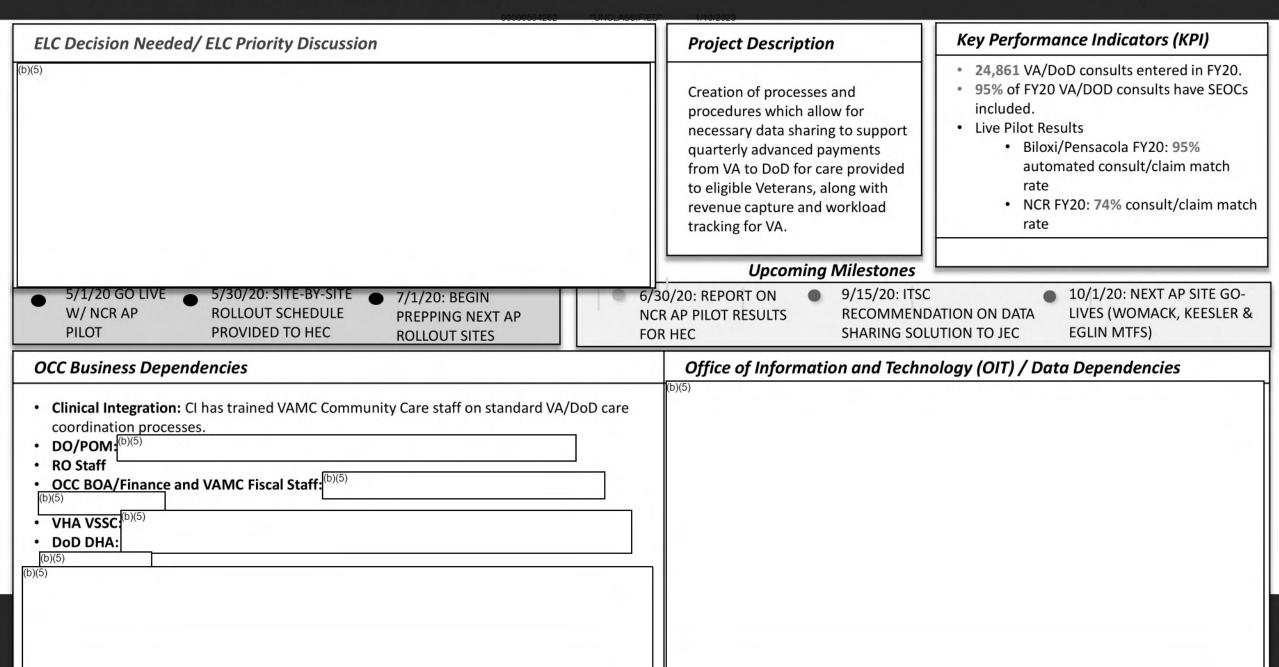
Pending Dependency Management Analysis





VA DoD Reimbursement

Project Phase – Development



One Consult 2.0

Executive Leadership Committee (ELC) Decision Neede Priority Discussion	d/
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

осс	Business	Depend	encies

)(5)

OIT / Data Dependencies

(b)(5)





Indian-Tribal Health Coordination

Development

ELC Decision Needed/ ELC Priority Discussion	0000001 <u>202</u> 0110 <u>2710011 1201</u>	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. (b)(5) Discussion (b)(5)		Integrate the IHS/THP Reimbursement Agreement Progra (RAP) operations with other OCC efforts. Tasks included executing a advisory board and developing a Ca Coordination Plan; hosting tribal ar VA staff training; continuous communication efforts; program expansion; and community Outrea and engagement	 Metric 1: Advisory Board meetings Metric 2: Care Coordination Plan developed Metric 3: Annual re-trainings conducted
Accomplishments		Upcoming Milestone	s
6/4/20 HELD 2 ND ADVISORY BOARD MTG O7/17/20 VA FIELD STAKEHOLDER VIRTUAL TRAINING EMAILED	CONSULTATION IHS/		LEARANCE AND 11/30/20 CARE N OF IHS/THP COORDINATION N MOD PLAN FINALIZED
OCC Business Dependencies		OIT / Data Dependencies	
(b)(5)		N/A Risk: Mitigation:	





AMCMS

Deployment

ELC	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
 - 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

Upcoming Milestones

Urgent Care IPT

National Deployment

ELC Decision Needed/ ELC Priority Discussion	0000000120E	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	
OCC Business Dependencies	Offic	ce 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) RISK:	: N/A gation: N/A	

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
● 5/22/20 ● 6/30/20 ● 7/1/20 ● 7/7/20 PPMS 8.0 DEV CONTRACT URGENT CARE PPMS 8.1 GO-	• 7/23/20 • 7/29/20 • HOTFIX 8.1.1.1 COMMUNITY PROVIDER

RELEASE

LIVE

LEGACY RE-ROUTE

Key Performance Indicators (KPI)

Power BI functionality exceeded license capability for reporting previous metrics.

OCC Business Dependencies

AWARDED JUNE

Clinical Integration

GO-LIVE

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

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

OIT / Data Dependencies



CCRS

National Deployment

* 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):

 Delivery Operations (Facility Revenue, RUR

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:** Highlight OIT/Data Dependencies: -Clinical Integration and Mann Grandstaff Facility CC Staff -Payment Operations Management -Revenue Operations (Facility Revenue, RUR, and CPAC Staff) -Women's Health (IVF and Infertility)



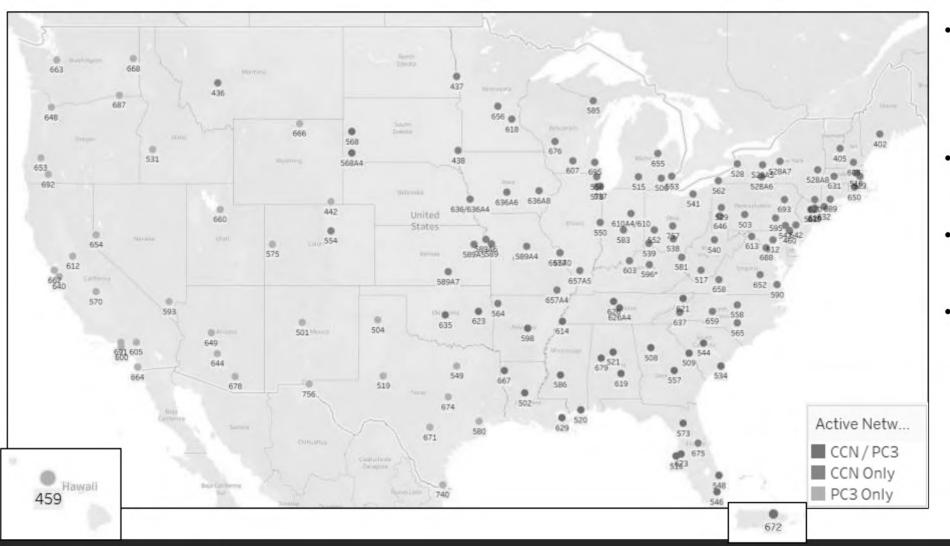
Community Care Network

Deployment

ELC Decision Needed/ ELC Priority Discussion **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 regional operations No ELC decisions needed or priority discussion topics at this time. Week 3: June 1-5, 2020 support as transitions complete to focus on stabilizing and Week 1: June 8-12, 2020 optimization.

 Total Referrals = 5,084* Total Rejects = 10 Total Referrals = 7,743* Total Rejects = 18** Region 4 R4P1 Go Live - CCN Referral # • 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 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

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

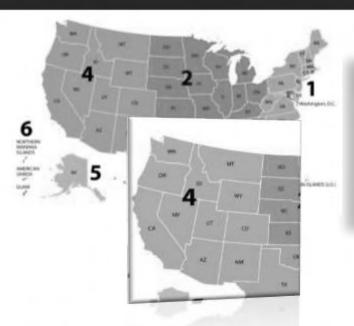
West Palm Beach, FL

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)

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

Boise, ID (531)

Phase 3 (14 VAMCs)

August 11, 2020

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

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)

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

Enterprise Program Reporting System (EPRS)

Project Phase – Development

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

 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)





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

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)

(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		
(b)(5)		
é_		

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)

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 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	
→ 7/11/2020 FINAL FILE/INVOICE SENT WALGREENS	8/1/2020 CLOSE OUT RETAIL PHARMACY	
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies	
(b)(5) (b)(5) (b)(6)	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** 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



"LINCLASSIFIED"

1/10/2023

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** (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 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-5/1/20 GO LIVE 6/30/20: REPORT ON 9/15/20: ITSC 5/30/20: SITE-BY-SITE 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 **EGLIN MTFS)** SHARING SOLUTION TO JEC 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:

One Consult 2.0

Executive Leadersh Priority Discussion	ip Committee (ELC) Decision Needed /
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)

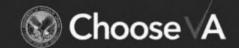




Indian-Tribal Health Coordination

Development

ELC Decision Needed/ ELC Priority Discussion		Project Description	Key Performance Indicators (KPI)
(1)This project's training activities were impacted 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 O7/17/20 VA FIELD STAKEHOLDER VIRTUAL TRAINING FMAILED	CONSULTATION IHS/1	0/20 RESTART 9/30/20 CLEAR THP RE-TRAINING EXECUTION OF TUALLY) EXPANSION MO	: 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

(b)(5)

Urgent Care IPT

National Deployment

90	0000584262 "UNCLASSIFIED"	1/10/2023	
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 07/15/20 GO LIVE DATE FINALIZED REGION 2/3	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 (b)(5)	RISK:	N/A ation: N/A	

(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
- 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



CCRS

National Deployment

Key Performance Indicators (KPI) ELC Decision Needed/ ELC Priority Discussion **Project Description** 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 This project creates a system to -409.257facilitate the receipt and Region 2: Invoices Received - 759,546, Confirmed Paid validation of post-payment 837 464,651, Sent for Payment - 23,090, "No Action" Optum denials No ELC Decision Requests for July COB invoices, reimbursement, -242,340Region 3: Invoices Received – 176,601, Confirmed Paid – 72,137, post-payment audit activities, and Sent for Payment – 4,983, "No Action" Optum denials – 94,192 facilitation of revenue operation Region 4: Invoices Received - 1,347, Confirmed Paid - 241, Sent for Payment - 299, "No Action" TriWest denials - 563 activities (i.e., first party billing). 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 **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 (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)

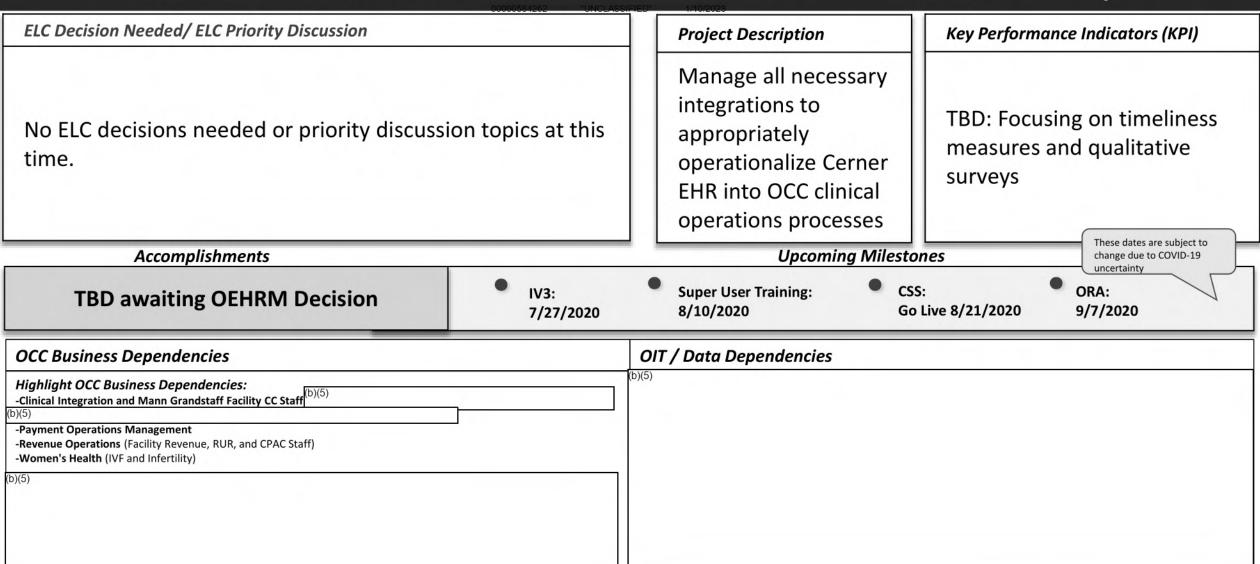
Appendix





Cerner OCC Integration

Development





Community Care Network

Deployment

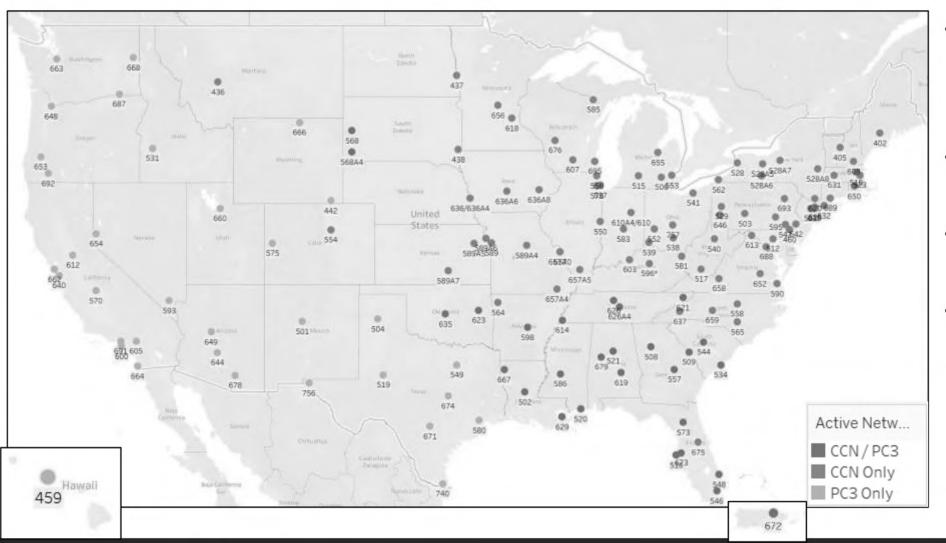
CUTOVER FROM PC3

ELC Decision Needed/ ELC Priority Discussion **Key Performance Indicators (KPI) Project Description** 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

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

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

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

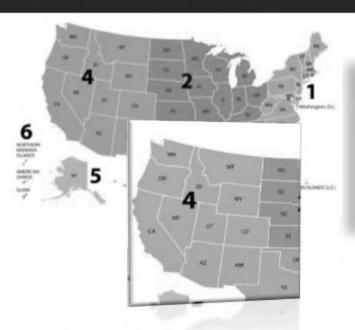
30-day PC3

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)

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)

Phase 3 (14 VAMCs)

August 11, 2020

VISN 20 - 7 VAMCs

Portland, OR (648) Puget Sound, WA (663)

Roseburg, OR (653)

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)

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

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

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
 - o 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.

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)

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 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
T/11/2020 FINAL FILE/INVOICE SENT WALGREENS	8/1/2020 CLOSE OUT RETAIL PHARMACY
OCC Business Dependencies	Office of Information and Technology (OIT) / Data Dependencies
• (b)(5) • (b)(5) (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). (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 INICI ACCIEIED"

1/10/2023

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 / 19/14/2020	BOA ^{(b)(6)}	Scope Definition: Integra	ited Product E	nvironment 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:	(b)(5)
Delivery Ops:	DO systems				
Revenue Ops:	RO systems				
				Impact on Other OCC	
Clinical & Network Mgmt:			MS, OCC-	Projects:	
	CERNER, CCN	, CAVE, ePrescribing, etc.		Impact if Project Idea Not	
OCC Leadership (Includes IDA and BIC):	IDA – <u>No current</u> BIC - (b)(5)	t impacts identified.		Approved:	
Recommended OC	C Strategic F	Priority Alignment	Recommo	ended Project Designati	ion Recommended Business Owner
Innovate Business Model			occ		CHIO / BOA
Discussion:		(b)(6)	(b)(5)		
		1			





Enterprise Program Reporting System (EPRS)

Development

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

Project Description

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

Key Performance Indicators (KPI)

• Quality Check UI: 39/80 Users ($\Delta = +2$)

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 ($\Delta = +1$)

Accomplishments

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

OCC Business Dependencies

Project Dependencies

• Community Care Contract Administration (CCCA): (b)(5)

• Community Care Network Management (NM)

0)(5)

OIT / Data Dependencies

Data Dependencies

(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**

9 09/21/2020 CAEC PORTAL **09/26/2020 CERNER SCHEDULING** MESSAGE GO-LIVE

(b)(5)

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)

• 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
- 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 4/19/2020 P 54/19 9c 5c 5c 5c 5c 5c 5c 5
Accomplishments	Upcoming National 1,841,979 1,797,125 44,854 2% 12,123,360
 7/14/20 √7/27/20 √7/29/20 √8/11/20 √8/25/2020 √	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

• Communications

(b)(5)

(b)(5)

Office of Information Technology / Data Dependencies





One Consult 2.0

Development

Executive Leadership Committee (ELC) Decision Needed / Priority Discussion		
DECISION: No decision requested at this time		
5)	$\left[\right]$	

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

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

- 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:

-Payment Operations Management

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

-Women's Health (IVF and Infertility)

OIT / Data Dependencies





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)

 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)

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**

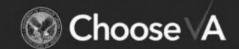
OCC Business Dependencies

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)(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
STAREHOLDER VIRTOAL PHARMACY MOD	20 BIM ATION ON EXECUTION OF IHS/THP VIRTUAL FINALIZED AND BEGIN MODIFICATION 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.

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

PATED 9/2 COMPLETED
AMCMS/VA ESD
S 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)

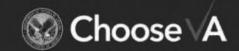
Office of Information and Technology (OIT) / Data Dependencies

(b)(5)

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Nee	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 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		LO/20- COOP 12/15/20 – COOP ELOPMENT POLICY DEVELOPMENT	
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)		





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 10/28/2020
 OBTAIN APPROVAL SYSTEMS
 DOCUMENTATION STANDARD

OCC Business Dependencies

Upstream Dependencies

OIT / Data Dependencies

Upcoming Milestones

Unstream Dependencies

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 (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

Highlight OIT/Data Dependencies:

Issue

Mitigation:





Retail Pharmacy Program

Close Out

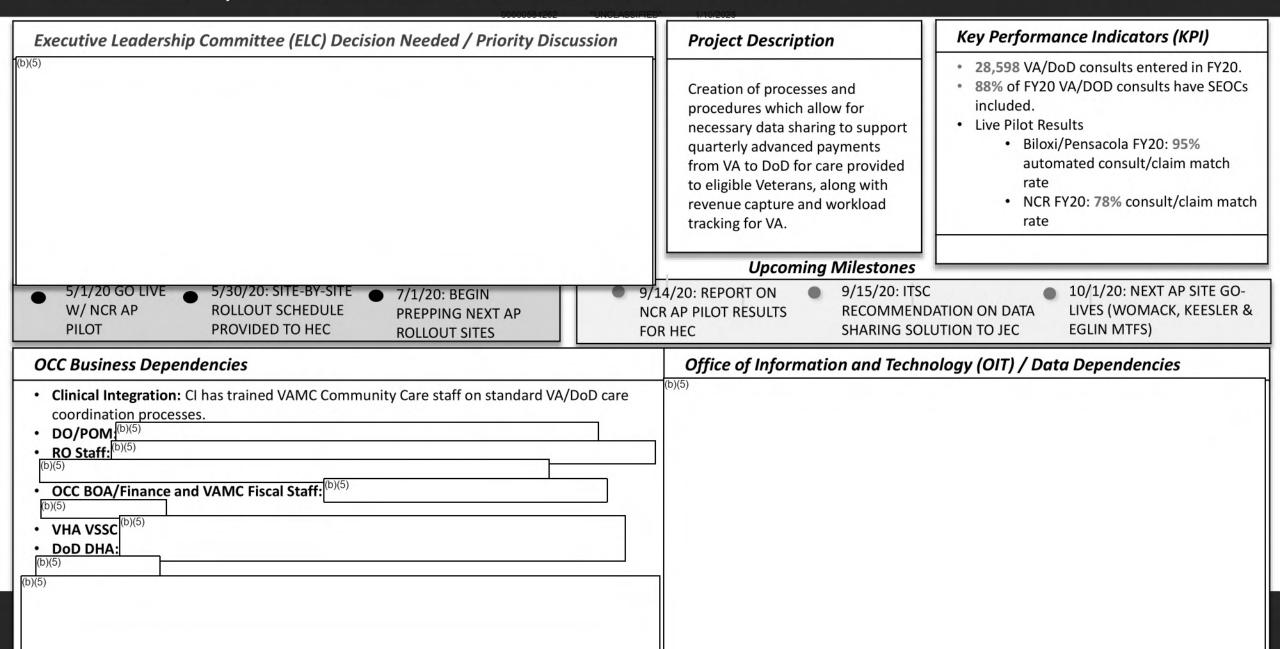
Executive Leadership Committee (ELC) Decision Needed / Priority Discussion	Project Description	Key Performance Indicators (KPI)	
• DECISION: No ELC decisions needed at this time.	Allows eligible Veterans access to "no cost" Quadrivalent Influenza vaccinations at Retail Pharmacies in their neighborhoods	 Metric 1: over 100,000 Veteran's vaccinated Metric 2:Reimburse Walgreens 99% accuracy 	
Accomplishments	Upcoming Milestones		
FILE/INVOICE SENT	D/1/2020 CLOSE UT RETAIL HARMACY	•	
OCC Business Dependencies	Office of Information and Techn	ology (OIT) / Data Dependencies	
(b)(5) (b)(5) (b)(c) (b)(6) (b)(5)	RISK:		





VA DoD Payment and Referral Standardization

Development



VA DoD Revenue Standardization

Development

Project Description Key Performance Indicators (KPI) Executive Leadership Committee (ELC) Decision Needed / Priority Discussion 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.

(b)(5)



CPAC Document Scanning

Project Phase – Close Out

Executive Leadership Co	mmittee (ELC) Decision Needed	/ Priority Discussion
(b)(5)		
		- 41
		, 19

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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"LINCLASSIFIED!

1/10/2023

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

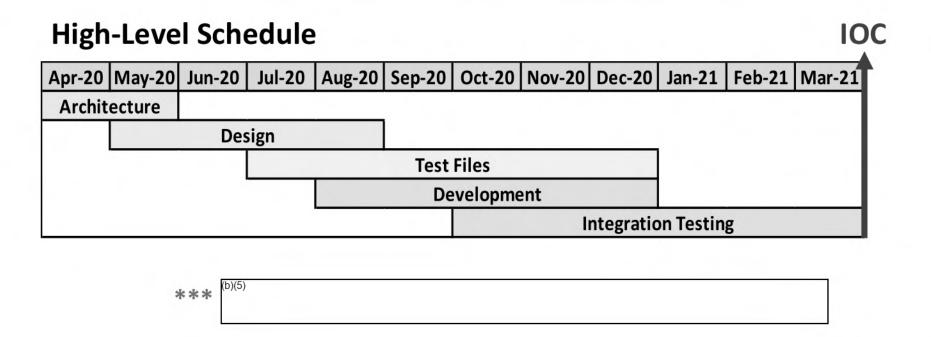




Current Payer EDI Priorities

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

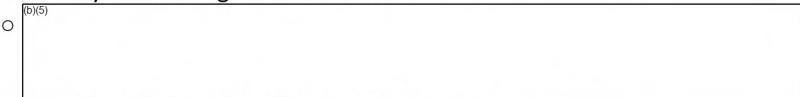
- EPRS (Parser)
 - o 837 work complete / 835 work remains.
 - Key Stakeholders Provider Relations and Services, Chief Informatics Office.
- CAVE



- Key Stakeholders Clinical Integration, Delivery Operations, Chief Informatics Office.
- ARS



- Key Stakeholders Delivery Operations, both POM and VFMP Staff.
- Community Care Billing SSN Reduction



Key Stakeholders – Delivery Operations, Revenue, HSRM team.



Prioritization Decision

Backlog Prioritization (1-4)

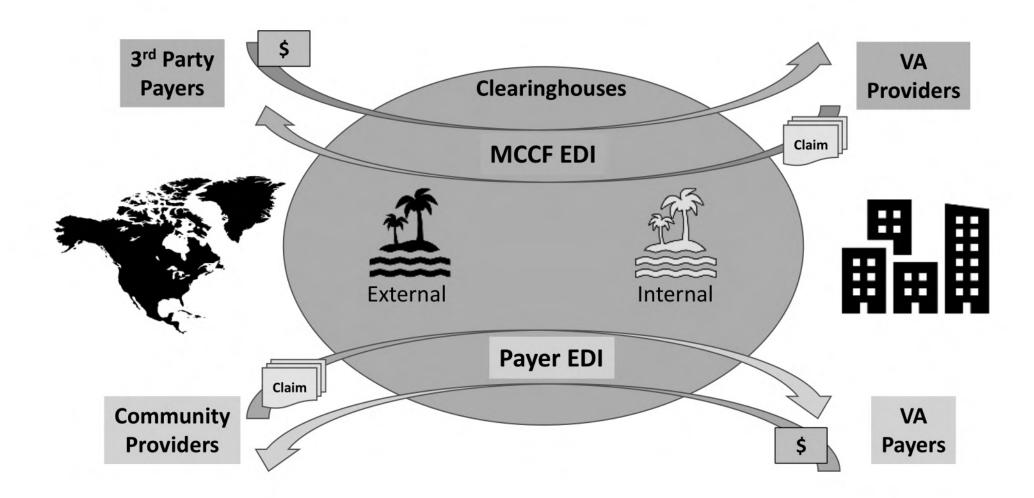
____EPRS (Parser)

____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





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

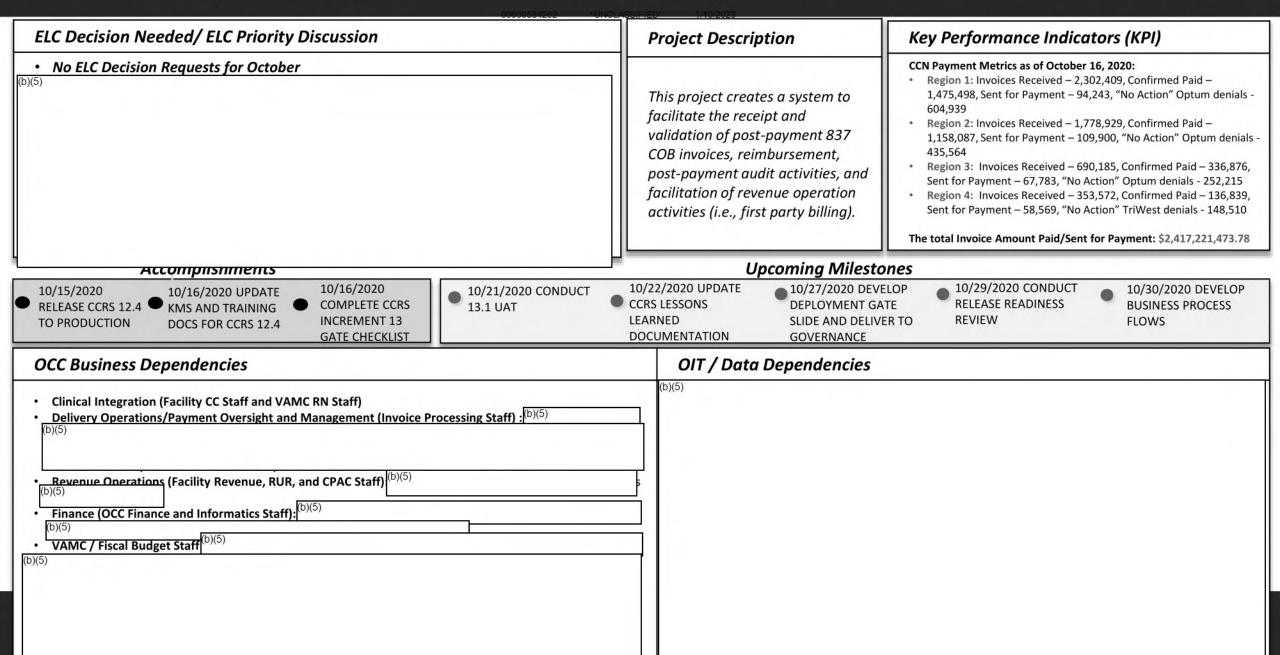
- W/NCR AP PILOT
 - 5/1/20 GO LIVE _ 9/14/20: REPORT ON _ NCR AP PILOT RESULTS FOR HEC
- 10/8/20 : CARE COORDINATION SOP UPDATE RELEASE (HSRM USE) & TRAINING
- 11/18/20: HEC APPROVAL OF NEXT AP SITES GO-LIVE
- 11/30/20: CAREPOINT **EXCEPTIONS CLAIMS** WORKLIST ROLLOUT
- 12/1/20: NEXT AP SITE GO-LIVES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

Office of Information and Technology (OIT) / Data Dependencies

National Deployment



	Project Description	Key Performance Indicators (KPI)		
	EPRS delivers a series of custom-built user interface (UI) screens and reporting system data integration 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 Congressional Inquiries & R10.0: Com N.A. Deviations Quality Che	plaints UI & R12.0: EPRS Technical Data R10.1: Congressional		
OCC Business Dependencies	OIT / Data Dependen	cies		
Project Dependencies • Community Care Contract Administration/Support (CCCA/S) (b)(5) (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 CCN GO-LIVE

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)

(b)(5)

-Payment Operations Management

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

-Women's Health (IVF and Infertility)

(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

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 ● 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

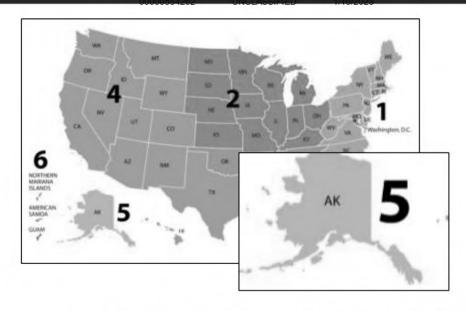
06/08/20 R4P1

SHCD GO-LIVE

Office of Information and Technology (OIT) / Data Dependencies

(b)(5)

Region 5 Announcement

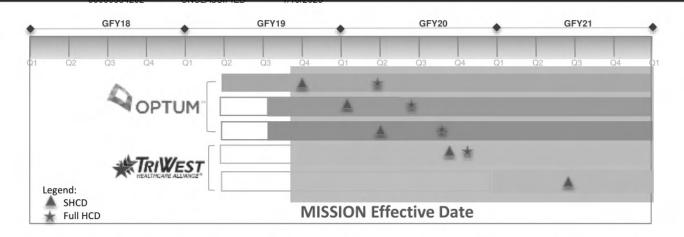


- Region 5, which includes all of Alaska, was awarded to TriWest Healthcare Alliance (TriWest) on 10/1/2020.
- The Post Award Meeting is scheduled for 10/19/2020.
- The Kickoff Meeting is scheduled for 11/4/2020.
- Region 5 has a Veteran population of more than 68,000 with more than 33,000 Veterans enrolled 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	
PHARMACY MOD TRIBLE CONSOLIATION	O20 BIM ATION ON RAP STATUS 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

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Development

N/A According to the second s

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)

Delivery Operations/POM:
(b)(5)

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

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

OIT / Data Dependencies

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

)(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





One Consult 2.0

Development

Executive Leadership Committee (ELC) Decision Needed /	Project Description	Example 1.	
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 M	ilestones	
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	(ID V1.9.00/D: 0.5 v2.5.00//.	E FACTORS CONTINUE:	
OCC Business Dependencies	OIT / Data Dependencies		



(b)(5)





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.



Accomplishments Upcoming Milestones ● 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 PIE RESTART NATIONAL **GO-LIVE GO-LIVE SPRINT 25** RELEASE NATIONAL NATIONAL SPRINT 27 **GO-LIVE** SPRINT 28 SPRINT 29 **GO-LIVE NATIONAL PRIORITY SITES GATE REVIEW GATE REVIEW GATEWAY** RELEASE REVIEW OIT / Data Dependencies **OCC Business Dependencies** Clinical Integration

Network ManagementCommunity Care Network

Delivery Operations

Revenue Operations

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

Choose A



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) (b)(5)• OIT:(b)(5) **Downstream Dependencies**

OIT / Data Dependencies

Upstream Dependencies

Continuity of Operations Plan (COOP)

Development

Executive Leadership Committee (ELC) Decision Needed / 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	■ 10/27/20 − ■ 11/10/20- NOTIFICATION ■ 11/10/20- COOP DIRECTORATES OF UNSCHEDULED DEVELOPMENT SYSTEMS/FUNCTIONS SYSTEM OUTAGE PROCESS			
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.

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
 - **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)
- 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	Office of	f Information a	nd Technology ((OIT) /	Data Dependencies
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Highlight OIT/Data Dependencies:

Issue

Mitigation:





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).

(b)(5)

Office of Information and Technology (OIT) / Data Dependencies

Project Phase – Close Out

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 **PHARMACY** WALGREENS Office of Information and Technology (OIT) / Data Dependencies **OCC Business Dependencies** (b)(6) b)(5) (b)(5)RISK:

RISK:

Mitigation:



Appendix

Project Idea Evaluation Updates





Project Idea Evaluation (PIE) Updates

		00000584263	"UNCLASSIFIED"	1/10/2023			
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	(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)



VA Veterans Health Administration Office of Community Care

Veteran Credit Database

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:		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 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)			