

# State of Rhode Island UHIP Closeout IAPD-U As Needed

## FFY 2023 Draft Submission

July 29, 2022

Rhode Island Unified Health Infrastructure Project (UHIP) Medicaid Eligibility and Enrollment (EE)  
Implementation Advanced Planning Document (IAPD)  
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Name of State: Rhode Island

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**Brief Description of Latest Version Additions/Changes/Deletions:**

Rhode Island is requesting continued Design, Development and Implementation funding from the Centers for Medicare and Medicaid Services (CMS) and the Food and Nutrition Service (FNS) to support the continued development and operations of RIBridges for work scopes that began in FFY 2022 or earlier. This request includes both DDI and M&O scope for COVID and PHE Unwinding allocations. RIBridges provides benefit access for more than 300,000 Rhode Islanders. Please see Attachment A for a timeline of changes to this IAPD. This submission includes updated project, budget, and cost-allocation details. Included are an IAPD - As Needed request for FFY 2024 and an IAPD-Update for FFY 2023.

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## SUMMARY OF IAPD UPDATES

Since this is a closeout IAPD for FFY 2022, the updates made to this document are focused on the new scope that was added to the plan after this document was submitted in July of 2021. A summary of the document changes can be found in the table below:

Document Section	Description
<b>1 - Executive Summary</b>	This section was updated to provide a high-level description of the additional business outcomes that were added to the plan.
<b>2 – Results of Activities Included in the IAPD</b>	Minor changes were made to this section to the charts and graphs to show the latest incident and problem ticket inflow and backlog data.
<b>3 - Statement of Needs &amp; Objectives of the IAPD</b>	This Section was updated to provide more detailed information regarding the enhancements added to the plan. In addition, for original scope items, a note was added to indicate if the work was complete or planned for a future release date.
<b>8 – Personnel Resource Statement</b>	Revised to include personnel changes.
<b>9 – Proposed Budget</b>	This section is updated to include the FFY 23 and FFY 24 budget. Note that this APD is extended into FFY 24 to accommodate the Public Health Unwinding end date extension.
<b>10 – Cost Allocation</b>	This section has been updated to reflect new allocations since the last APD submission and update allocations based on recipient data as of April 30, 2022.
<b>11 - Security, Interface, Disaster Recovery, and Business Continuity Planning</b>	This section has been updated to reflect the latest security, Interface, Disaster Recovery and Business Continuity Planning

# 1 EXECUTIVE SUMMARY

In Rhode Island, the Executive Office of Health & Human Services (EOHHS), the Department of Human Services (DHS) and HealthSource RI (HSRI), the State's health insurance exchange, are charged with promoting health, nurturing quality of life and supporting our most vulnerable residents by preserving and improving access to quality health coverage and care as well as ensuring efficient, effective, and timely delivery of human services. The State's work on the Unified Health Infrastructure Project (UHIP) serves approximately one third of the State and is a critical part of these efforts. Our highest priority remains ensuring that Rhode Islanders receive timely and accurate benefits.

Federal fiscal year 2021 (FFY 2021) represented another positive step forward for the UHIP project and the RIBridges system. The system reached new levels of stability despite the COVID-19 public health emergency. The incident backlog declined to a low of 69 tickets in June 2021, a reduction of 40 percent since the prior year. The backlog of system defects also declined by 34 percent as the team successfully delivered 748 problem tickets into production and 86 percent of the outstanding tickets are already scheduled for upcoming releases. These positive trends highlight the predictability and reliability of the development and testing practices across the Software Development Life Cycle (SDLC), as well as the continued effectiveness of the UHIP governance framework.

One of the most significant milestones for the State was the facilitation of the competitive procurement process which resulted in the State selecting Deloitte Consulting LLP for a three-year maintenance, operations and enhancement support contract for the RIBridges public benefits technology system.

Under this new contract, Deloitte will provide 12,600 additional hours of services and system enhancements over the initial three-year term, an estimated value of nearly \$4M. In addition, the new contract represents significant cost savings to the State and also includes the retention of key staff and enhances contractor performance standards.

Another key accomplishment for the team was the highly successful upgrade of OPA (Oracle Policy Automation), the underlying business rules engine for RIBridges. This technically complex project took many months to plan and more than 12 months to implement. During that time, the team developed an XML comparator tool which allowed the new version of the engine (v12) to run in parallel alongside production (v10) in order to flag any discrepancies without directly impacting the business or our customers. The team executed more than 3,500 test scenarios, validated more than 200,000 customer cases and found minimal defects. After a successful pilot, the cutover to production took place ahead of schedule and was implemented seamlessly. The tremendous success of this project further highlights the stability of the system as well as the maturity and consistency of our project execution capabilities.

In addition to the OPA upgrade, the technical team also completed key upgrades to the IBM Security Access Manager (ISAM), the IBM Security Identity Manager (ISIM), Security Information, the Event Management (SIEM) Capabilities and Tableau. A new "sandbox" environment was also created to allow the State to become more self-reliant in terms of data analytics and reporting.

Despite the increased attention on the OPA upgrade, the Major Releases continued to be implemented on schedule and with very high quality. In February 2021, several key enhancements were delivered in support of increasing enrollment of the Rite Share program by linking customers to existing employers. Specifically, improvements made to the Employer Search functionality have resulted in a 51 percent increase in successful searches performed on the Customer Portal and a 36 percent improvement rate on the Worker Portal. In addition, new employers are now being added 12 percent less often in the Worker Portal and 50 percent less often in the Customer Portal. The team expects these initial numbers to continue to improve over time as additional changes are made as part of the next Major Release in August 2021.

Another exciting achievement was the successful launch of the HealthyRhode mobile application (“the app”). Research indicates more than 96 percent of Rhode Island residents own a cell phone. Consequently, providing access to benefit information through mobile devices is becoming an important part of our customer service strategy. With this initial release, customers can check EBT balances, upload required documents, review benefit information and update Customer Portal passwords. The app has been downloaded more than 500+ times and has a rating of 5.0 in the Google Play Store and 4.9 in the Apple Store based on customer reviews with one customer stating, “This app made it so much easier for me to upload what was needed, and it went thru immediately! It clearly lets you know whether you've been successful or not, which is a great feature!”

In October 2021, the application was expanded to allow HealthSource RI customers to view invoices and make premium payments. As we strive to improve the overall customer experience, additional features will continue to be incorporated into the HealthyRhode app as prioritized by the Agencies.

In addition to the development of the mobile app, the State secured an important grant from FNS which allowed the State to add SMS Text Messaging to RIBridges for the SNAP program. Initial messages were delivered in October 2021 and included SNAP appointment reminders, outstanding verification documentation alerts, ABAWD timeclock alerts, recertification reminders and returned mail alerts. SMS Text messaging is another important innovation for UHIP as it helps further our commitment towards improving customer service responsiveness by reducing the disruption in benefits and simplifying communication with our customers.

The State also collaborated with Deloitte in the redesign of the Medicaid Plan Selection process to improve the overall customer experience and bring transparency to important health insurance information. By creating detailed customer journey maps, specific enhancements were identified to improve the initial selection of an MCO by guiding customers more effectively through the end-to-end process. The first phase of enhancements was delivered in October 2021 with additional improvements planned for September 2022.

In addition to the detailed work on the Medicaid Plan Selection redesign, the team also delivered other important Medicaid enhancements including the ability to track Early and Periodic Screening, Diagnostic and Treatment (EPSDT) customers receiving Medicaid via the DCYF office, preventing the entire Household from being denied Medicaid benefits due to an individual in the household failing to provide

verification for Death and improving various areas within the end-to-end business process associated with SSI cases. More details regarding these enhancements can be found in Section 2.

Throughout FFY 2021, the team continued to manage the ongoing mitigations in response to the COVID pandemic. As business needs and policies changed, the team quickly assessed new requirements and implemented solutions as quickly as possible to ensure customers continued to retain access to benefits. A few examples include: the implementation of Pandemic-EBT (P-EBT) to eligible school-age children in SNAP and non-SNAP household who were distance learning; P-EBT for childcare (children under age 6 who live in a SNAP household); the temporary cessation of Medicaid terminations and renewal activities in accordance with CMS guidance; and the ACPT policy changes. In FFY 2022, the team shifted focus towards planning and executing the COVID recovery effort to ensure customers, providers and other stakeholders receive critical information and guidance as mitigations begin to be lifted. Since the PHE end date has not yet been determined, the ongoing mitigations are continuing and planning for the PHE unwinding will continue while the execution remains on hold pending the official end date.

Along with enhancing functionality to further key business outcomes, delivering the OPA upgrade and managing COVID mitigations, the team also remained focused on the implementation of ongoing continuous process improvements. One of the key accomplishments delivered in September 2020 was Phase I of the Governance Refresh Initiative. This improvement effort applied lean principles to our governance framework in order to reduce redundancy and gain efficiency while maintaining the necessary oversight required to effectively manage a project of this complexity.

The formalization of the Center for Project Excellence (CPE) was also an important outcome of the Governance Refresh project. The CPE continues to play a key role throughout FFY 2021 as the team continues to deliver ongoing improvements across the program. The focus will be on reducing the cost of ownership through automation and modifying the SLDC to improve incident response times and time to market for system defects. In addition, the implementation of the State UAT model will also be a top priority for the team.

At the time this IAPD was originally submitted, the State had planned four major application enhancement releases planned in FFY 2022, which focused on delivering the following business outcomes:

- Implement BEERs Interface
- Implement new Policy Changes for RIW
- Address Medicaid Audit Findings
- Achieve CMS Compliance by Changing Frequency of Buy-In Reporting to Daily
- Complete Medicaid Plan Selection Roadmap
- Maintain LIHEAP Data between RIB and LIHEAP System
- Achieve Alignment across Part A/B for MPP
- Achieve FNS Compliance for SNAP ABAWD Consolidated Work Notice
- Implement HSBS Waiver Logic & Multiple Waivers
- Improve LTSS Processing

- Implement Process Improvements for Rite Share
- Continue COVID Mitigations & Implement Recovery Efforts
- Implement PTIG SMS Text Messaging
- Enhance the Child Care Portal

Since the submission of this IAPD, the State received funding through grants and other sources which allowed the team to take on additional business outcomes which required an additional Major Release. The outcomes added to the plan included the following:

- Improving the SMS/Email capabilities
- Expanding the HealthyRhode Mobile App
- Adding the ability to send digital notice stuffers
- Integrating CHAT within the HIX workflow on the Customer Portal
- Introducing the QHP Easy Enrollment and introduce SEP logic changes
- Expand the self-service capabilities by allowing auto scheduling of appointments through the Customer Portal and expanding features of the IVR
- Deliver enhancements in support of the PHE Unwinding
- Automating AVS
- Allowing Passive Renewals for Complex Medicaid

More information on these additional scope items is provided in Section 3.

Through this IAPD, Rhode Island is requesting continued funding from CMS and FNS to support the efficient maintenance and operations of our increasingly stable system as well as targeted investments in program advancements. Section 3 provides more detail on the FFY 2022 priorities the State has delivered and what work is remaining to close out this IAPD. Sections 4 and 5 outline the cost analyses conducted by the State during the development of this IAPD. Sections 6, 8, 9, and 10 respectively lay out the detailed contractor, personnel, budget and cost allocation requests for the upcoming federal fiscal year. Lastly, Section 7 provides an overview of the well-established project governance processes that will remain in place to ensure that the priorities outlined in this document are delivered holistically, on-time and on-budget.



## 2 RESULTS OF ACTIVITIES INCLUDED IN THE IAPD

FFY 2021 has marked another major step forward for UHIP. UHIP is a complex project that supports the ongoing development, maintenance and operation of RIBridges, the integrated eligibility system for more than 15 health and human service programs in Rhode Island. Currently, more than 300,000 Rhode Island residents rely on the State to accurately and efficiently provide Medicaid services, food assistance, childcare subsidies, health insurance, long-term support services and other vital social services through this system. It is critical that the resources and level of effort are maintained in a way that allows for the complete maturation of this project.

The following diagram illustrates the phased implementation of RIBridges and the shift towards Maintenance & Operations (M&O) over time:

*Table 2a. Rhode Island UHIP System Timeline (FFY basis)*

RI Bridges Phased Implementation							
Phase I		Phase II				Phase III	Phase IV
2012 - 2013	2014 – 2015	2016	2017 – 2018	2019	2020	2021	2022
Design and Initial Go Live	System Stabilization and Phase II Design	Go Live	Turn-around and Stabilization	Delivery of Baseline Release Plan	DDI for Program Priorities and M&O	Limited DDI for Specific Program Priorities and M&O	Ongoing M&O, Limited DDI for Specific Program Priorities and Strategic Investment in Modernization

Phase I of UHIP created HSRI and established Modified Adjusted Gross Income (MAGI) Medicaid eligibility capabilities. This phase was central to improving access to health insurance coverage for Rhode Islanders and achieving one of the lowest uninsured rates in the country at 3.7 percent. Medicaid expansion through RIBridges has reached 73,773 covered lives as of May 31, 2019. Based on the Kaiser Family Foundation’s review of the Census Bureau’s American Community Survey, Rhode Island is ranked second in the nation for children’s health coverage, with 98 percent of children insured. The State continues to prioritize and make progress toward strengthening access to healthcare and other critical support programs. This continued strengthening is evidenced by FFY 2020’s HSRI open enrollment period, which was the most successful enrollment period since the inception of the health exchange.

Phase II of UHIP, which included the launch of the full RIBridges system and development and execution of a robust turn-around strategy, was a significant undertaking. Over the course of Phase II, the State has made substantial progress in strengthening project governance, IT and agency operations, and vendor management and administration. Agency operational capabilities have been strengthened through improvements in technology and business processes while, at the same time, vendor administration and oversight were strengthened via contractual tools such as Key Performance Indicators (KPIs) and service level agreements (SLAs). Because of this work, timeliness and accuracy have

increased, backlogs have decreased and both incidents and technical defects have moved towards steady state levels (inflow + backlog). FFY 2020 continued to build upon the solid foundations laid in FFY 2019 and resulted in the maturation of most system components.

In Phase III of UHIP, the focus has been on maintaining and improving system stability while implementing the major OPA upgrade, delivering the enhancements required to enable the RIte Share roadmap and facilitating the M&O Request for Proposal (RFP) process. In addition, all required activities were delivered to ensure another successful Open Enrollment for HSRI. Ongoing maintenance continued to address the small changes required to ensure program compliance was maintained. As noted in more detail in Section 3, the State also reviewed the various aspects of the existing governance framework to look for opportunities to become more efficient in administering the project given all the health indicators have shifted to “green”.

Since the core functionality of RIBridges was delivered in Phase II, the current focus has shifted toward the ongoing maintenance and operations of the system. As a result of our mature incident and problem management processes, the system remains stable as illustrated by the low volume of incidents and defects being reported.

Although we have achieved our steady state targets, defects continue to be prioritized and are addressed in monthly maintenance releases per our standard release process. Providing Agency support for ongoing operational activities (i.e. Cost of Living Adjustments (COLA)) also remains a priority. A significant component of ongoing M&O activity involves maintaining and upgrading the systems infrastructure including all hardware devices (services, storage, network devices, etc.) and related software products. In Phase III, this included facilitating a major upgrade to the Oracle Policy Administration (OPA) which was implemented in the second quarter of 2021. In addition, the team continues to be focused on reducing ongoing M&O costs by introducing additional automation and implementing continuous process improvements.

One of the most significant activities also taking place in Phase III was the facilitation of the M&O Request for Proposal (RFP) Process to select an ongoing M&O Vendor and to establish a new M&O contract.

In addition to maintaining the system and ensuring ongoing stability, targeted enhancements were made to the system to help achieve several key business outcomes including:

- Increasing RIte Share program enrollment
- Streamlining MCO plan selection and bringing transparency to important health insurance information
- Improving SNAP Payment Accuracy and Supplemental Security Income (SSI) processing
- Increasing customer access to benefits and improving customer service by introducing digital notices, SMS text messaging and developing new features on the HealthyRhode Mobile App
- Continuing to support all ongoing mitigations and recovery efforts related to the pandemic

In Phase IV, we expect the focus to continue to be on M&O activities as we shift to the new contract terms. In addition, we will implement some targeted strategic investments aimed at improving the end-to-end customer experience, improving customers access to benefits, increasing worker productivity and modernizing the system.

## **FFY 2021 Program Accomplishments**

### ***System Stability***

Tremendous progress was made in FFY 2021 in maintaining and improving upon the system stability that was achieved in FFY 2020. Table 2b illustrates a continued decline in both incidents and problem tickets since October 2017. In fact, the backlog of system incidents hit a low of 69 in June of 2021 which represents a 54 percent decrease in the last 12 months alone. The weekly inflow of incidents has also continued to trend well below the steady state target of 220-270 incidents declining by 40 percent since last year to an average of 60. With the introduction of the Production Operations Daily Standup (PODS) meeting, the number of untriaged incidents also remains very low. PODs is described in more detail later in this document.

The table below has been updated to show that additional progress has been made to continue to drive down incidents.

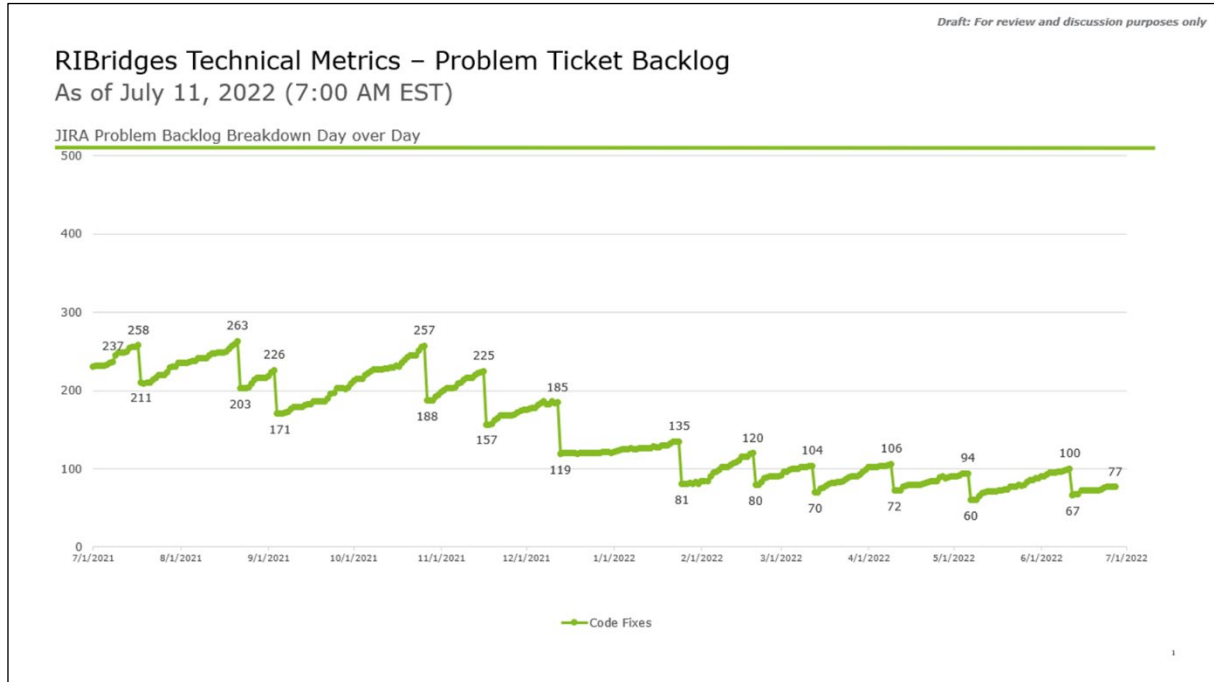
*Table 2b. UHIP IT Metrics*

Key Progress Metrics	October 2017	June 2019	Dec 2019	June 2020	June 2022
Unresolved System Incidents (backlog)	6,634	696	177	151	<b>59</b>
Untriaged Incidents	1,007	154	112	101	<b>37</b>
System Incidents Logged per week (inflow)	500+	200	165	100	<b>40</b>
Known Code Defects (backlog)	1,387	869	472	344	<b>73</b>
Code Defects Logged per week (inflow)	30+	30	30	15	<b>7</b>

Table 2b above also highlights the significant decline in the code fix backlog between October 2017 and June 2022. In the last 12 months alone, there was a 79 percent decline in the defect backlog. This is significant given the additional Major Release Scope. Our robust problem ticket workflow and the focused attention of our Theme Teams has ensured that on average, 90% percent of the tickets in the backlog have already been scheduled for upcoming releases. The weekly inflow of new defects has also continued to decline from last year.

Table 2c shown below further illustrates the steady decline in the problem ticket backlog due in large part to improvements in code quality, the monthly cadence of Patch Releases and the implementation of best practices across the problem management processes.

*Table 2c. Problem Ticket Backlog Trend*



In FFY 2022, the focus will be on improving “time to market” in order to deliver code fixes to the business more quickly. To ensure progress in this area, new performance metrics were added to the new M&O contract. These metrics can be found in Appendix I. They will be discussed in greater detail in Section 3 of this document.

**M&O KPIs**

The M&O KPIs fall under four categories:

1. Disburse benefits in a timely, accurate manner;
2. Users can process applications without interruption by system deficiencies;
3. Generate and issue accurate client notices on time; and
4. All legal and regulatory requirements are satisfied.

The KPIs are reviewed on a monthly basis at the Contract Management Meeting. They are also included in the monthly Contract Management Report which is submitted to the State for review and approval each month. Monitoring the KPIs and other performance metrics will be one of the primary responsibilities for the contract manager. The existing contract KPIs for CA-47 can be found in Attachment G.

As indicated by the latest KPI monthly performance report in Table 2d, all KPIs continue to meet or exceed the monthly targets. This includes the Cash Benefit Accuracy (KPI 1c), which previously had fallen short of the 95 percent target. This was achieved through a concerted effort to identify known failure points and to address the few remaining systemic issues impacting benefit accuracy.

With the new contract, there will be minor changes to a few of the KPIs. However, the process for measuring and reviewing the KPIs will remain unchanged.

*Table 2d. Sample Monthly KPI Metric Summary (Prior CA-47 Contract)*

<b>KPI Metric Summary</b>			<i>Draft: For review and discussion purposes only</i>																			
Month of May 2021			Target	Frequency	Measurement Method	Feb 2020	Mar 2020	Apr 2020	May 2020	Jun 2020	Jul 2020	Aug 2020	Sep 2020	Oct 2020	Nov 2020	Dec 2020	Jan 2021	Feb 2021	Mar 2021	Apr 2021	May 2021	Comments
1a Dis SNAP and Cash Benefits Timeliness	<= 2	Monthly	Deloitte	0	2	2	0	0	1	1	1	2	0	0	0	0	0	0	2	1		
1b Medical Benefits Timeliness	<= 2	Monthly	Deloitte	0	0	0	0	1	1	0	1	0	0	2	0	1	0	0	1			
1c Cash Benefit Accuracy	95%	Quarterly	State		94%						98.50%				97%			Pending				
1c SNAP Benefit Accuracy	95%	Quarterly				98%			98.50%			99%			98.5%			Pending				
1d Medical Benefits Accuracy (1/2)	97%	One-time	Deloitte	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%		
1e Medical Benefits Accuracy (2/2)	95%	Monthly	Deloitte	95.76%	98.46%	98.85%	98.54%	98.84%	98.87%	99.19%	99.18%	97.03%	99.28%	99.15%	99.09%	98.51%	99.16%	99.12%	98.79%			
1f QHP Eligibility and Enrollment Accuracy	97%	Monthly	State	99%	99%*	100%*	96%*	97%*		98.40%			99%			99.67%		Pending	Pending	Pending	Under Evaluation *These samples consisted of 100 cases per month where CA47 requires a minimum of 300 cases every other month.	
2a Worker Portal Application Processing	98%	Monthly	Deloitte	99.84%	99.73%	99.64%	99.73%	99.71%	99.43%	99.83%	99.89%	99.46%	99.75%	99.89%	99.85%	99.82%	99.79%	99.92%	99.98%			
2b Self Service Portal Application Processing	98%	Monthly	Deloitte	99.87%	99.71%	99.83%	99.78%	99.58%	99.56%	99.95%	99.95%	99.95%	99.91%	99.80%	99.72%	99.85%	99.89%	99.97%	99.93%			
3.1 Client Notice - Accuracy	98%	Quarterly	State	99%										99%			99%					
3.2 Client Notice - Timeliness	98%	Monthly	Deloitte	99.50%	99.32%	99.61%	99.76%	99.81%	99.93%	99.91%	99.91%	99.93%	99.98%	99.98%	99.91%	99.94%	99.89%	99.87%	99.93%			
4 Legal and Regulatory Requirements	98%	N/A	Deloitte	Met	Met	Met	Met	Met	Met	Met	Met	Met	Met	Met	Met	Met	Met	Met	Met	Met		

### **Service Level Agreements (SLAs)**

Service Level Agreements (SLAs) continue to be used to track performance and to hold the Vendor accountable for meeting the required service levels. The SLAs associated with CA-47 relate to the following areas:

1. Business Continuity
2. Software Deficiency
3. Open Enrollment Discrepancies
4. Development Quality
5. UAT Pass Rate

The SLAs are also reviewed on a monthly basis at the Contract Management Meeting. They are also

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included in the monthly Contract Management Report which is submitted to the State for review and approval each month. The Contract Manager will also have responsibility for monitoring performance to the SLAs and for handling any associated corrective action plans or penalties. The existing SLAs for CA-47 can be found in Attachment F.

Overall, the majority of the SLAs in FFY 2021 have continued to be met each month as depicted in the latest monthly KPI Report in Table 2e. In the few cases where SLAs were missed, the State worked with the Vendor to quickly ensure a root cause was identified, a remediation was established and that any additional “lessons learned” were incorporated into ongoing processes and procedures.

*Table 2e. Service Level Descriptions and Monthly Results*

SLA	SLA Description	Target	Jan 2021	Feb 2021	Mar 2021	Apr 2021	May 2021
5.1.1	Production Environment Hours of System Availability for Citizen facing – Business	99.90 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.2	Production Environment Hours of System Availability for Citizen facing - Non-Business	98.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.3	Production Environment Hours of System Availability for Worker facing – Business	99.90 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.4	Production Environment Hours of System Availability for Worker facing - Non-Business	98.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.5	Electronic Log Files (Maintenance)	99.5 percent Critical	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.6	Electronic Log Files (Maintenance)	95.0 percent Important	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.7	Electronic Log Files (Maintenance)	90.0 percent Normal	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.8	Electronic Log Files (Processing)	99.5 percent processed	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.9	Inbound Files	100 percent Processed	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.10	Outbound File to Data Services Hub	Less than 2 percent	0.26 percent	0.25 percent	0.22 percent	0.20 percent	0.17 percent
5.1.11	Transactions involving the user interface, business tier, or database tier	1.0 seconds	0.62 seconds	0.56 seconds	0.62 seconds	0.57 seconds	0.56 seconds
5.1.12	Back-up and Recovery Backups	100 percent Processed	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.13	Failover and Fallback Failover	Failure over will occur < 20 mins	N/A	N/A	N/A	N/A	N/A

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5.1.14	Disaster Recovery refers to major disruptions to the production environment	Site must be operational	100.00 percent	100.00 percent	100.00 percent	100.00 percent	100.00 percent
5.1.15	Severity 1 - Fatal	<=12 Hours	0 Sev 1s	0 Sev 1s	0 Sev 1s	0 Sev 1s	0 Sev 1s
5.1.16	Severity 2 - Serious	<=4 Day Average	1 Sev 2s	0 Sev 2s	0 Sev 2s	0 Sev 2s	0 Sev 2s
5.1.17	Severity 3 – Normal	Next Scheduled Release	Within agreed upon timeline	Within agreed upon timeline	Within agreed upon timeline	Within agreed upon timeline	Within agreed upon timeline
5.1.18	Severity 4 – Minor	By agreement on release schedule	N/A	N/A	N/A	N/A	N/A
5.1.19	Contractor will reconcile enrollment discrepancies to meet the targets specified in this SLA, based on the data reported in the HSRI Data Recon Hub.	>Varies month to month	1,441	763	793	692	600
5.1.20	For each planned Release, the following SIT Exit Criteria are to be met by the scheduled SIT Exit Meeting	SIT Exit Criteria Met by SIT Exit Deadline	R7.32.2: SIT Exit scheduled for 12/14/2020 and received approval on 12/14/2020.	R7.33: SIT Exit scheduled for 1/11/2021 and received approval on 1/11/2021.	R7.33.1: SIT Exit scheduled for 2/22/2021 and received approval on 2/22/2021.	R7.33.2: SIT Exit scheduled for 3/22/2021 and received approval on 3/22/2021.	R7.34: SIT Exit scheduled for 4/13/2021 and received approval on 4/13/2021.
5.1.21	All outstanding SIT entry criteria exceptions must be cured.	SIT Entry Criteria Met by SIT Exit Deadline	R7.32.2: Met. All scope items in SIT by 11/2	R7.33: Met. All scope items in SIT by 11/30	R7.33.1: Met. All scope items in SIT by 01/11	R7.33.2: Met. All scope items in SIT by 02/28	R7.34: Met. All scope items in SIT by 11/16
5.1.22	Script Pass Rate: 95 percent of all scripts/tickets passed	95 percent passed	R7.32.2: 100 percent	R7.33: 100 percent	R7.33.1: 100 percent	R7.33.2: 100 percent	R7.34: 100 percent
5.1.23	80 percent minimum pass percentage per Theme	80 percent minimum pass per theme	R7.32.2: 100 percent	R7.33: 100 percent	R7.33.1: 100 percent	R7.33.2: 100 percent	R7.34: 100 percent
5.1.24	95 percent Pass Percentage for all regression scripts (core and targeted)	95 percent passed	R7.32.2: 99.80 percent	R7.33: 100 percent	R7.33.1: 100 percent	R7.33.2: 100 percent	R7.34: 100 percent
5.1.25	No outstanding Severity 1 Deficiencies	0 Sev1	R7.32.2: 0	R7.33: 0	R7.33.1: 0	R7.33.2: 0	R7.34: 0
5.1.26	Any outstanding Severity 2 Deficiencies must be reviewed and deferred by the UHIP leadership team	0 unapproved by UHIP Leadership or without a UAT Entry Date	R7.32.2: 0 deferred	R7.33: 0 deferred	R7.33.1: 0 deferred	R7.33.2: 0 deferred	R7.34: 0 deferred
5.1.27	For Severity 1 Deficiencies, the UAT Deficiency detection rate during UAT shall not exceed 1 for patch Releases and 3 for major Releases	Patch: 1 Major: 3	R7.32.2: 0	R7.33: 0	R7.33.1: 0	R7.33.2: 0	R7.34: 0
5.1.28	For Severity 2 and 3 Deficiencies, the UAT Deficiency detection rate during UAT shall not exceed: For patch Releases: 2 percent of	Patch: 2 percent Major: 4 percent	R7.32.2: 0.98 percent	R7.33: 0.40 percent	R7.33.1: 0.47 percent	R7.33.2: 0.59 percent	R7.34: 0.43 percent



*total UAT test cases in the  
applicable Release  
For major Releases: 4 percent of  
total UAT test cases in the  
applicable Release*

As part of the M&O RFP process, the State team took the opportunity to revisit the vendor performance metrics. Later in this document, we will describe the new metrics in greater detail and provide an update in terms of how these changes will be incorporated into our contract management processes. The new performance metrics for the new M&O contract can be found in Attachment H.

### ***Additional Business Metrics***

In addition to the progress demonstrated by the IT metrics, KPIs and SLAs shown above, the following program-level business metrics also show continued positive trends as well. The stability of the system continues to enable business results across the full array of programs supported by RIBridges.

Some examples of these business metrics are listed below:

- 90 percent of Expedited SNAP applications processed timely even during COVID
- 98 percent of Non-Expedited SNAP applications processed timely
- 92 percent of Long-term Services & Supports applications processed timely
- 40 Long Term Services & Supports applications are overdue
- On Average, Eligibility Determination is provided within four days
- 100 percent Accuracy of Child Care Provider Payments
- 13,000 Medicaid Customers Auto-Renewed per Month
- 83 percent of Customers renewed coverage during Open Enrollment
- 96 percent of Customers were able to Auto-Renew their Qualified Health Plans for 2021
- ~240k Saved Annually from Digitization of Notices

### ***Summary of FFY 2021 Key Accomplishments***

To further highlight the success experienced in FFY 2021, the following examples are provided to demonstrate certain key accomplishments. The results have been broken down into two major categories: (1) RIBridges system improvements and enhancements; and (2) enhanced project management. Each category contains two subcategories as shown below in Table 2f.



Table 2f. Rhode Island UHIP Project Framework and Key FFY 2021 Accomplishments

Rhode Island UHIP Project			
RIBRIDGES		Project Management	
Business Functions	Technical (System Functions)	Administration	Process
Increased Rite Share Enrollment	Upgraded Oracle Policy Automation (OPA)	Procured M&O Vendor	Evaluated Iterative / Agile Methodologies
Enhanced Medicaid Eligibility	Upgraded IBM Security Access Manager (ISAM) product and IBM Security Identity Manager (ISIM) platform		Refreshed Governance Framework
Improved SSI Processing	Upgraded Security information and event management (SIEM) Capabilities		Introduced Production Operations Daily Stand Up
Improved SNAP Payment Accuracy	Implemented Host-based Intrusion Detection and Prevention System		
Introduced HealthyRhode Mobile App	Upgraded Tableau		
Incorporated SMS Text Messaging into RI RIBridges	Upgraded Virtualization Platform		
Continued to Support COVID Mitigations			

### **RIBRIDGES – Business Functions**

In FFY 2021, the State continued to capitalize on overall system stability to deliver enhancements to maintain system compliance, improve the customer experience, establish efficiencies for workers and reduce the ongoing cost of maintaining and operating the system. In addition, the Joint IT Team successfully implemented the OPA Upgrade ahead of schedule.

Table 2f above lists the key business outcomes that were delivered in FFY 2021, each of which is described in more detail below. These outcomes were delivered over the course of major releases and a series of patch releases per our robust release planning process.

### ***Increased Rlte Share Enrollment***

Increasing participation in the Rlte Share program was an important goal of the plan for FFY 2021. The ultimate outcome of this work was to increase Rlte Share enrollment by addressing the following areas:

- Increasing efficiency of new or renewed plan/rate information in the system through automation of processes.
  - Enhancements were made to provide the ability to automatically upload plan information, cost effectiveness, and pay levels via a template directly to RIBridges. Moreover, the system notifies employers via notices of the updated means of submitting plan information (RS-19, RS-29, RS-05). In addition, employers are now notified of upcoming renewal plans 90 days ahead of their end date.
  - Improvements were made to the efficiency of receiving information from employers and to reduce overall notice volume to employers and customers. The system was enhanced to allow the provider notice (RS-27) to be electronically indexed and available in RIBridges. Enhancements to the existing notices were made to improve the readability and accuracy of the communication.
- Increased client enrollment based on an existing employer in the system
  - The system was enhanced to allow users across Customer Portal, Data Collection and Provider Management workflows to search for employers using an updated search algorithm based on Name (including Doing Business As/ Also Known As), Federal Employer Identification Number (FEIN), and Address information in order to improve all users' ability to find existing matching employers in the system. Additional restrictions and guidance were also implemented for the users across both Portals to limit the future creation of duplicate employer records in the system, which in turn increased the efficiency of client enrollment with existing employers.
  - The DLT batch logic was updated to improve the alignment of the file matching logic to the enhanced screen Search Algorithm and similarly be based on Name (including Doing Business As/ Also Known As), FEIN, and Address. This will ultimately allow the DLT batch to find better matches to existing employers and maintain the most up to date information in the system for their records, thus reducing the manual work needed to maintain the employer information.
  - A comprehensive data clean-up activity was also completed in parallel with the system enhancements, including updates to existing case data to align to employers with active rates, de-duplication of existing employer records, updates to exiting plan information for employers, etc. These activities addressed many of the existing challenges with the current system data and provided an improved foundation for the enhancements and operational processes to support the State's business needs.
- Increase enrollment process efficiency for Rlte Share workers
  - Updates to the current functionality were made to improve Rlte Share workers' ability to efficiently enroll clients and employer, by allowing them to more quickly process multiple

enrollments for the same customer or the same employer and preventing unnecessary duplicative processes. In addition, system enhancements will prevent incorrect sanctions being applied when employment is terminated/deleted in the case date, thus preventing the need for repetitive work in a number of existing scenarios.

### ***Enhanced Medicaid Eligibility***

Addressing ongoing CMS and Rhode Island Medicaid eligibility requirements was also a focus in FFY 2021. In the December 2020 Major Release, the following items were addressed:

- To track Early and Periodic Screening, Diagnostic and Treatment (EPSDT) customers receiving Medicaid via the DCYF office, a new type of assistance and aid category code were introduced. DCYF workers are now able to indicate on behalf of new customers that they are part of the EPSDT population; they are then subsequently evaluated for Medicaid applying the 'EPSDT' rule base, consistent with policy. If determined eligible, the customer's information, including the new aid category code, are then sent downstream to the MMIS.
- To increase termination accuracy, Medicaid Eligibility Rule updates were made to prevent the entire Household from being denied Medicaid benefits due to an individual in the household failing to provide verification for Death. In situations where the Head of the Household has an unverified Death Date, notice updates were incorporated to provide an update to the Household notifying them to report a new Head of Household should there be a change in the status of the existing Head of Household as this may have an impact on their benefits.
- The most significant effort was focused on redesigning the Medicaid Plan Selection process to improve the overall customer experience and bring transparency to important health insurance information. In addition, the enhancements were focused on streamlining processes for the initial selection of an MCO by guiding customers to preferred channels (Customer Portal and HSRI) and to set-up for choice counselor capabilities. The Vendor assisted the team in creating detailed customer journey maps which informed key decision-making regarding prioritization of features and enhancements. The first phase of the project roadmap is being delivered in October 2021 with additional improvements planned in FFY 2022.

The Medicaid Program team prioritized other eligibility related enhancements through the release planning process. Some of the additional changes delivered through monthly patch releases included the following:

- Modified the Medicaid batches to exclude processing cases where a document has been uploaded within 89 days
- Adjusted the logic to ensure the 65<sup>th</sup> birthday month was assessed appropriately
- Need to generate ADR for liquid assets for MPP but changed logic to not generate an ADR for liquid assets if a client is eligible for SSI
- Created a separate MA SSI user role with the ability to update demographics

### ***Improved SSI Processing***

Prior to FFY 2021, Rhode Island's processing of SSI was inefficient. Therefore, the State addressed these high priority issues as part of the December 2020 Major Release. Per the SSI Processing Roadmap, enhancements were made to the system to improve various areas within the end-to-end business process associated with SSI cases. A few of the key enhancements associated with this important implementation effort are summarized below:

- **Improved accuracy of State Data Exchange (SDX) Batch processing:**  
The system was enhanced to improve the accuracy of the eligibility outcomes determined based on the payment status codes, and Medicaid eligibility codes combinations received in the SDX file. Moreover, the SDX process was also modified to identify auto-termination codes such as incarceration, deceased, out-of-state/country and take the corresponding termination action without triggering the Medicaid *ex parte* process. Process improvements were also made to trigger worker tasks for the unit to transition a DCYF individual into a DCYF Medicaid case during SSI terminations.
- **Updated Eligibility Determination rules for SSI Protected Classes:**  
The Income limits and eligibility determination rules for SSI Protected Classes such as Pickle Amendment enrollees, Disabled Adult Child and Widow(er) Medicaid were updated to be in compliance with the federal policy. Moreover, the Pickle multiplier values were updated to match the latest values published by SSA to accurately determine the protected amount for Pickle eligible individuals.
- **Improved Worker Efficiency by providing quick links for SDX/BENDEX Interface data:**  
While processing Medicaid cases, the workers often refer to the information provided by SSA through SDX and Beneficiary Data Exchange (BENDEX) to verify the individual's latest demographic, income, and household information to update the case with relevant information. Quick links were added to the Social Security Benefit page as a part of data collection workflow to help the workers access this information easily and efficiently without having to navigate multiple screens to look-up this data.
- **Automated Processing of auto-accreted MPP individuals received from CMS:**  
The system was enhanced to automatically create an MPP program on the SSI case for an individual who is referred by CMS via the Medicaid Buy-in file as an auto-accrete individual. When the CMS Medicaid Buy-in batch runs, the system now automatically verifies the individuals SSI status, adds MPP benefits on their SSI case based on the information provided by CMS and notifies the individual of the benefits added without requiring any worker intervention. Overall, this enhancement improved the traceability of auto-accrete MPP individuals within RIBridges, reduced workload on the unit by automatically processing these cases, accurately communicates information on client's MPP benefit status to the client and provides a way to transition the individual from MPP based on SSI to standalone MPP determination.

### ***Improved SNAP Payment Accuracy***

Initial screen changes were implemented in September 2020 to enforce required fields and produce summary screens for the worker. This was considered the first phase of changes with additional enhancements planned as part of the SNAP Reinvestment Plan which has implementations scheduled in October and December of 2021.

### ***Introduced HealthyRhode Mobile App***



In October 2020, the HealthyRhode mobile application was made available to customers in the Apple and Google Play Stores. This new mobile application gives customers an additional way of accessing select Customer Portal functionality in order to increase self-service, improve case processing times and reduce call center volumes. The primary features being delivered in the initial release of the mobile app include the ability for users to check the status of their benefits as well as their EBT card balances (SNAP and RI Works). In addition, customers can also view a list of pending documents for their case and upload the requested documents directly through their phone. Lastly, customers can reset account passwords. The app can be viewed in one of three possible languages (English, Spanish, and Portuguese) based on their phone's default language. Table 2g includes some of the mobile app screens to highlight the functionality available to customers. This was a significant step forward in delivering on the State's customer channel strategy as it offers an additional access channel for customers to utilize.

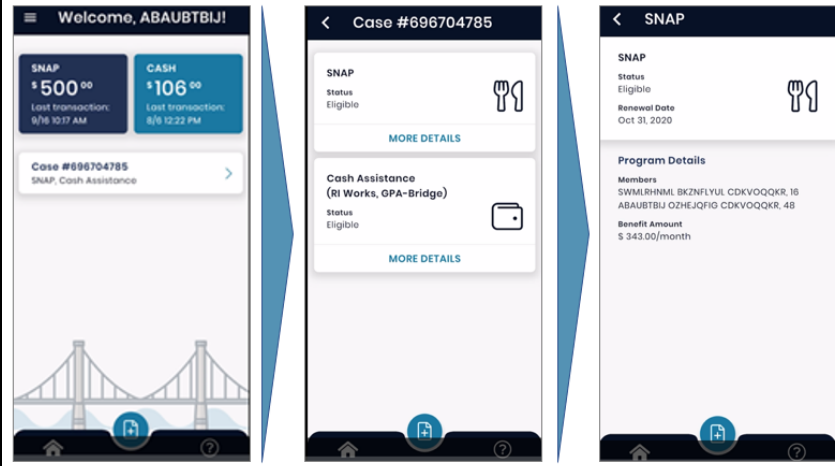
In October '21, several new features will be added to HealthyRhode to allow QHP customers to view statements and payment history. In addition, customers will also be able to submit payments via the mobile app. The State anticipates adding more functionality to this key platform going forward as we continue to expand access to benefits for our customers.

Table 2g. HealthyRhode Mobile Application Sample Screens (Initial Release)

## Mobile Application

### Overview of SNAP-Related Functionality

In the first release of the Mobile App, customers will be able to check their SNAP EBT balance and review high-level case information.



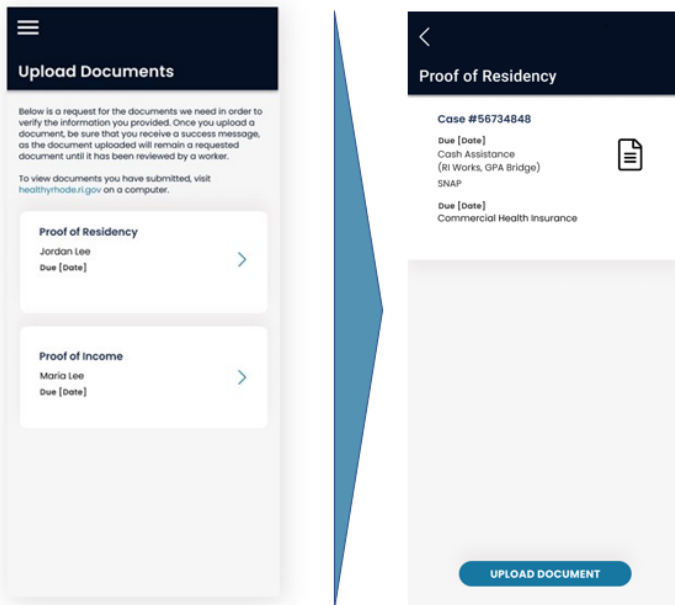
The image displays three sequential mobile application screens. The first screen, titled 'Welcome, ABAUBTBJ!', shows two balance cards: 'SNAP \$500.00' with a last transaction of 9/16 10:17 AM, and 'CASH \$106.00' with a last transaction of 8/16 12:22 PM. Below these is a case card for 'Case #696704785' (SNAP, Cash Assistance). The second screen, titled 'Case #696704785', shows 'SNAP Status Eligible' and 'Cash Assistance (RI Works, GPA-Bridge) Status Eligible'. The third screen, titled 'SNAP', shows 'Status Eligible', 'Renewal Date Oct 31, 2020', and 'Program Details' including members and a benefit amount of \$343.00/month.

#### Key SNAP Highlights

- ✓ Customers can view their current SNAP EBT balance
- ✓ The date of the last withdrawal or deposit will also be displayed
- ✓ Customers can also view associated cases and high-level eligibility information including status, members and benefit amount

## Mobile Application Overview of Document Upload Functionality

In the first release of the Mobile App, customers will also be able to upload requested documents.



### Key Upload Highlights

- ✓ Customers will see a list of any outstanding documents
- ✓ The customer can easily upload documents simply by taking a picture and clicking the upload button
- ✓ Tasks will be generated for any uploaded documents to ensure any associated case processing occurs promptly

## System Mitigations in Response to COVID-19 Pandemic

UHIP continued to respond quickly, accurately, and efficiently to the COVID-19 pandemic, in large part due to the overall stability of the system and the collaborative partnership between Deloitte and the State in coming up with creative solutions to address critical business needs brought on by the pandemic. Throughout FFY 2021, the team ensured all system mitigations continued to run seamlessly and any new mitigations were developed and implemented as quickly as possible to meet the changing demands of the business.

*Table 2h. System Mitigations in Response to COVID-19 Pandemic*

Category	High-Level Description of COVID-19 RIBridges Mitigations
CCAP	<ol style="list-style-type: none"> <li>1. Change CCAP functionality to determine payments based upon enrollment rather than attendance as a result of closure of child care facilities</li> <li>2. Waive copays for all payments made for CCAP families during COVID-19</li> <li>3. Prevent any new CCAP enrollments during the mandated closure period</li> <li>4. Increase rates for licensed and family child care providers following the mandated closure period</li> </ol>
Customer Portal	<ol style="list-style-type: none"> <li>1. Enhance the customer portal to ensure that all applications are submitted with a program request, thereby easing an operational issue during COVID-19</li> <li>2. Implement enhanced banner functionality in the customer portal to facilitate multiple dynamic messages providing key COVID-19 information to customers</li> <li>3. Expansion of customer portal load capacity to account for increased volume during the COVID-19 period</li> <li>4. Create a new income type for UI stimulus income</li> <li>5. Exclude Child Tax Credit from resources and income</li> </ol>
Medicaid	<ol style="list-style-type: none"> <li>1. Multiple system + operational changes to prevent Medicaid terminations or transitions to lower benefit (and suppress associated notices) via online or batch processes, except for in very limited circumstances (i.e. death, immigration status)</li> <li>2. Suspend sanctions for RIte Share enrollees</li> <li>3. Implemented LTSS waivers:               <ol style="list-style-type: none"> <li>a) Suspended Pre-Admission Screening and annual Resident Review (PASRR) Assessments for 30 days for long term care patients</li> <li>b) Waived copays for all non-institutional long-term care clients</li> <li>c) Extended basic personal needs allowance for all individuals that are admitted to an institution during COVID-19</li> </ol> </li> <li>4. Implement self-attestation waiver: system change to introduce a new verification type 'Waived - Self attested' as an acceptable proof for all verification points applicable to Medicaid except Citizenship &amp; Immigration</li> <li>5. Change to eligibility logic to exclude Unemployment Insurance (UI) stimulus income from Medicaid eligibility determinations, inclusive of reading the DLT file and updating RIBridges</li> <li>6. Prevent LTSS patient share increases during the COVID-19 period</li> <li>7. Extend EMER applications and prevent terminations</li> <li>8. Allow Aged, Blind and Disabled (ABD) Flex individuals 2 additional months to meet their spenddown limit</li> <li>9. Creation of a Tableau Dashboard to track cases impacted by Medicaid COVID-19 mitigations</li> </ol>
QHP	<ol style="list-style-type: none"> <li>1. Facilitate a special enrollment period for QHP</li> <li>2. Prevent monthly terminations to ensure that QHP customers continue to receive benefits</li> <li>3. Extend pend logic to QHP customers not receiving APTC</li> <li>4. Prevent MAGI customers who become QHP eligible from receiving double coverage (given that they will not be terminated for Medicaid)</li> </ol>



Category	High-Level Description of COVID-19 RIBridges Mitigations
	<ol style="list-style-type: none"> <li>Clean up of tasks prior to resuming 90 Day batch runs post OE</li> <li>Implement the APTC provisions in the American Rescue Plan (ARP) Act to increase affordability</li> </ol>
RIW	<ol style="list-style-type: none"> <li>Prevent termination of RIW benefits due to 3 months sanctions to ensure that RIW cases continue to receive benefits post the 48 months limit</li> <li>Potential one-time emergency payments to RIW families experiencing hardships</li> </ol>
SNAP	<ol style="list-style-type: none"> <li>Extension of Recert + Interim periods for SNAP</li> <li>Suspend all SNAP claims so that recoupment does not take place during the COVID-19 period</li> <li>Suspend the time limit for Able Bodied Adult Without Dependents (ABAWD) recipients</li> <li>Provide emergency allotments to address temporary food needs to bring all households up to the maximum benefit</li> <li>Meet FNS requirements for reporting related to P-EBT benefits and emergency SNAP allotments</li> <li>Provide P-EBT benefits to SNAP and non-SNAP households with children who have temporarily lost access to free or reduced-price school meals due to pandemic-related school closures</li> <li>Enhance case note functionality to increase ease of processing + reporting SNAP recertifications</li> <li>Creation of a Tableau Dashboard to track cases impacted by DHS COVID-19 mitigations</li> <li>SNAP max benefit allotment raised to 115 percent of the June 2020 value</li> <li>Implement temporary SNAP student-related exemption due to COVID</li> </ol>

## **RIBRIDGES - Technical (System Functions)**

### ***Infrastructure, Maintenance and Process Improvements***

Infrastructure, maintenance and process collectively encompass ongoing maintenance and operations of all RIBridges infrastructure, including all hardware devices (servers, storage, network devices, etc.) and non-application code software products (operating systems, commercial off-the-shelf (COTS) products, etc.). All of these systems are maintained through centralized governance operations (e.g. configuration management, capacity management, N-1 patch management, etc.). In order to continually improve the stability, performance, and security of the RIBridges environment. Additionally, over the course of FFY 2021, a wide range of RIBridges infrastructure devices, software, and processes have undergone significant improvements and upgrades to be detailed below.

As the RIBridges application has stabilized, the Joint IT Team began focusing on performance improvements in the system. In FFY 2020, a temporary performance working group (PWG) was established to identify opportunities for application performance improvement across the RIBridges stack. PWG focused on three primary objectives:

1. Improve the identification and communication of the anticipated impact of a given release upon system performance by formalizing the SDLC processes for performance testing
2. Proactively identify and remediate existing issues which have the potential to cause a user

service interruption

3. Complete performance tuning analysis to identify opportunities to improve performance of eligibility transactions including related screens and functionality

Over the course of FFY 2020 and FFY 2021, the PWG implemented process and technical changes that has improved performance of the application and reduced user service disruptions. PWG tuned webserver, app server, and enterprise service bus configurations for better performance. PWG also undertook database query review, with Eligibility, Batch, and Worker Business Process Flow queries being optimized for performance, as well as full database index recreation. The actions taken as part of PWG prepared the platform and technical teams for the operational uncertainty that came with the COVID-19 pandemic.

The pandemic necessitated a review of many of our processes and standards. RIBridges is hosted in a state data center in Warwick, RI with the disaster recovery site in Sacramento, CA; new COVID mitigation protocols were developed and implemented in order to secure the physical security of these critical operations data centers, while maintaining safety and business continuity. In order to gauge readiness for anticipated increases in customer applications, the RIBridges team ran a stress test (above and beyond our standard performance testing) to determine maximum user loads across the customer portal applications.

The pandemic mitigation also included Application Enhancements to better serve RIBridges customers. A new mobile application environment was built out leveraging our existing application architecture. DevOps processes for the lower environments were revised to support the development of the RI RIBridges mobile application, alongside infrastructure capacity expansion in order to accelerate the deployment of the mobile app for COVID-19 mitigation. The new mobile application underwent extensive security and performance testing prior to being made available in the public IOS and Android app stores.

Twilio SendGrid was a new product implemented during the pandemic, enabling customer alerts to be sent out via email instead of paper mail. These alerts directed customers to access their customer portal accounts whenever updates were made that affected them. This new SaaS platform was evaluated for its security, extensibility, and cost effectiveness prior to vendor selection, and deployed through a new build stream that is integrated with RIBridges CI/CD processes.

Finally, RIBridges also successfully completed its annual disaster recovery test in September 2020. Although this testing is performed on an annual basis, the successful results of the testing are viewed as an affirmation of the continued focus on back-up processes. The test results demonstrated a Recovery Point Objective (RPO) of 5 minutes and Recovery Time Objective (RTO) of 8 hours, far below the respective targets of 15 minutes and 48 hours respectively. Additionally, for this year's test, the scope was expanded to include more realistic business operations including access to the system (hosted on the disaster recovery (DR) environment) via laptop over the internet and including Electronic Benefits Transfer (EBT) card printing.

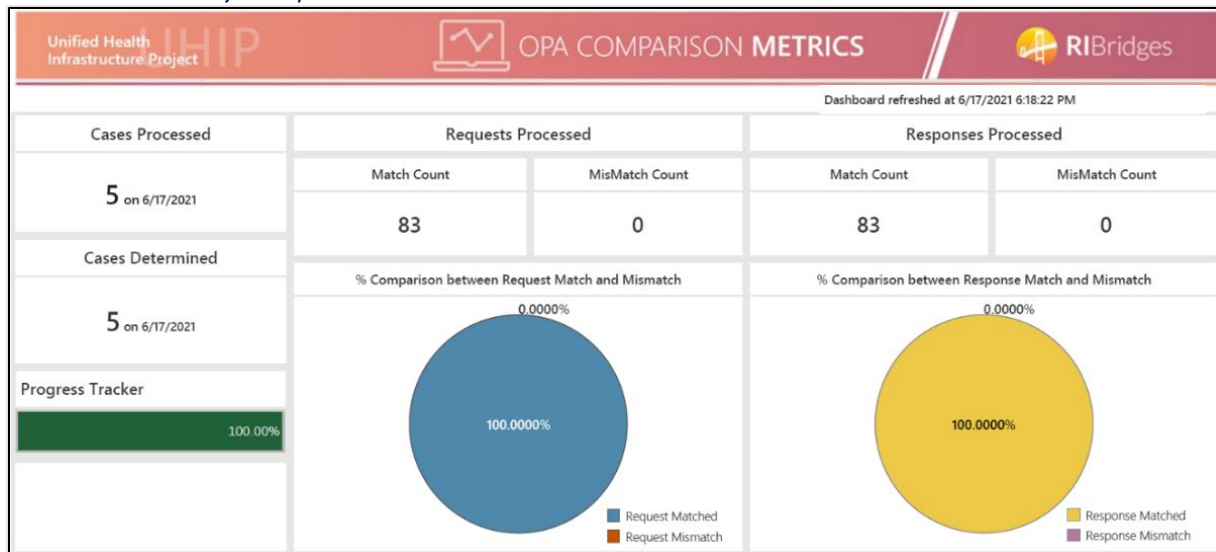
## Infrastructure Upgrades

### Oracle Policy Automation Upgrade

Oracle Policy Automation (OPA) is the business rules engine used by RIBridges. OPA runs eligibility determination rules and returns an XML response containing the eligibility determination results. The XML response information needed to be converted and mapped to a RIBridges data structure in order to be consumed by the RIBridges code.

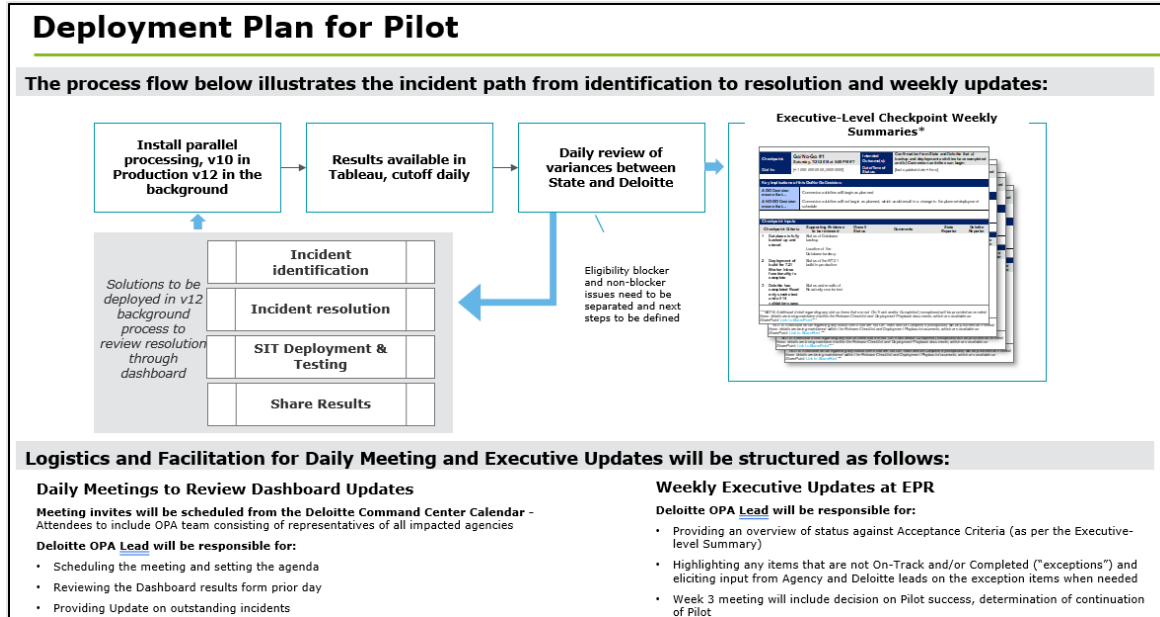
Since OPA version 10.4 reached end of life in March 2020 and Oracle had limited product support and no security patches for compliance, the Vendor worked with the State to upgrade OPA from v10 to v12. This significant upgrade was implemented in May of 2021 after an extensive development and testing effort that included running both versions of the rules engine in parallel and comparing the output via an automated XML comparator tool and publishing daily results in a Tableau dashboard as shown below in table 2i:

Table 2i. OPA Daily Comparison Metrics



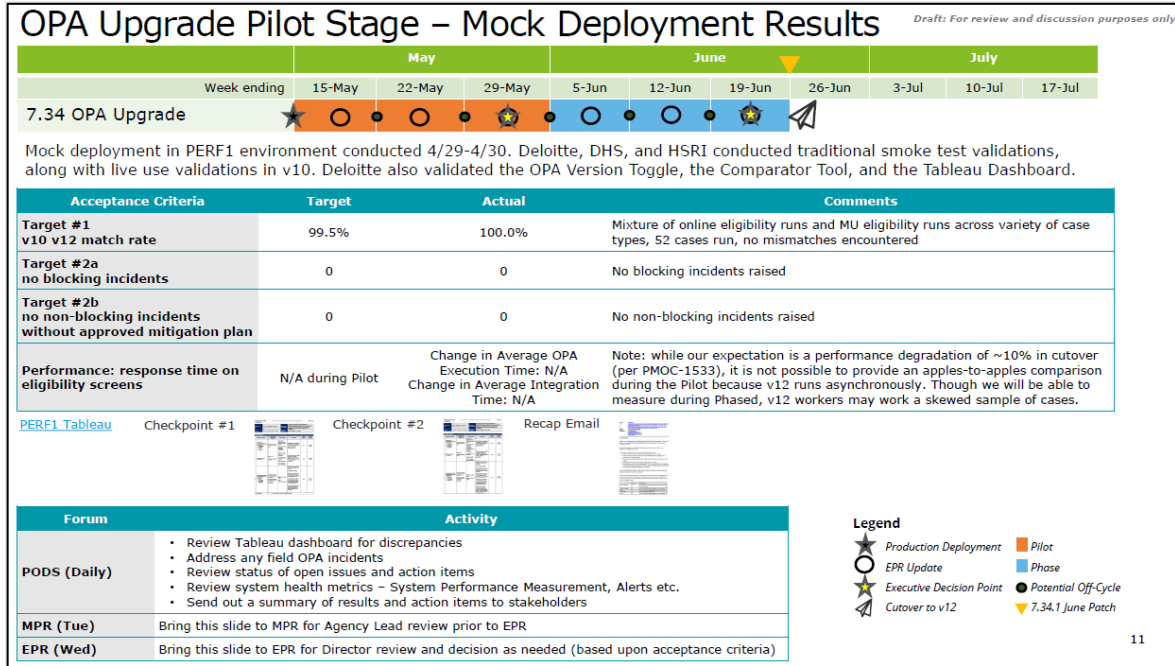
This project was technically very challenging and required the technical teams to work closely with the business to develop a comprehensive plan to perform the upgrade in a seamless manner to avoid disruption to the business. Table 2j illustrates how the robust deployment plan developed for OPA integrated key components from our governance framework to ensure transparency and to enable executive decision making prior to each stage of the rollout.

Table 2j OPA Deployment Plan



The team also conducted a mock deployment in advance of the production release to ensure all aspects of the deployment had been validated prior to the pilot (see table 2k). Based on the results, the Executive team gave approval to move ahead with the pilot / limited rollout. The cutover to v12 moved forward ahead of schedule and there have been no significant issues reported since "go live". This multi-year project was a tremendous success for the Joint IT Teams and was a testament to the detailed planning that was done up front to develop a technical approach that supported the upgrade seamlessly with little to no impact to the business.

Table 2k OPA Mock Deployment



## IBM Security Access Manager Upgraded and Java/WebSphere Upgraded for IBM Security Identity Manager

RIBridges applications leverage IBM Security Identity Manager (ISIM 6) and IBM Security Access Manager (ISAM 7) products for user provisioning and application access management. Of these two products, ISAM 7 reached End of Support (EOS) in September 2018, whereas ISIM 6 continues under active support. To continue support for ISAM 7, IBM offers Extended Support (ES) for purchase annually for three years beyond the EOS date, which would require an upgrade of ISAM prior to the end of the third year. Extended Support has been procured until November 2020. Also, Java and WebSphere Application Server version of ISIM 6 will have to be upgraded to maintain security compliance. In October 2020, ISAM was upgraded from version 7 to version 9 and ISIM 6's platform was also upgraded to WebSphere Application Server v9 and Java v8.

## Upgraded Security Information and Event Management (SIEM) Capabilities

RIBridges currently uses IBM QRadar for Security Information and Event Management (SIEM). In September 2020, QRadar's license and capabilities will be expanded to monitor all infrastructure systems in the path of FTI traffic per IRS requirements. In September 2020, IBM QRadar Vulnerability Manager (QVM) was set up to sense security vulnerabilities and prioritize remediation activities. QVM was fully integrated with the expanded QRadar Platform to use advanced analytics to enrich the results of vulnerability scans to lower risk and achieve compliance by correlating vulnerability data with network topology and connection data to intelligently manage risk. A policy engine was implemented to

automate compliance checks. QVM is now helping with the development of an optimized action plan to address security exposures to work more efficiently and decrease costs. In September 2020, QRadar Risk Manager (QRM) was set up to alert about risks by querying all network connections, compare device configurations, filter network topology, and simulate the possible effects of updating device configurations. A set of policies was defined about RIBridges network and will be monitored for changes. This was an IRS compliance requirement.

### ***TrendMicro Deep Security***

In FFY 2021, TrendMicro Deep Security was installed on virtual machines for host-based threat detection and prevention, rogue software process detection, unauthorized software process detection. This was an IRS compliance requirement. TrendMicro Deep Security also replaces the current anti-malware/anti-virus product, Symantec End Point Protection, in RIBridges.

To satisfy an additional IRS requirement, in May of 2021 an additional module was added to the TrendMicro Deep Security system: Application Control. This software maintains a list of authorized executables for each virtual machine and prevents execution of files that do not match the fingerprints in the whitelist. This enables traceable security controls for all deployed applications and scripts.

The chosen implementation will address malicious behaviors on the Host Operating System, Processes, Executables across RIBridges VMs, and will also control a list of approved applications and prevent the installation of new executables

### ***Tableau Upgrade***

RIBridges uses Tableau as the data visualization platform for dynamic and customized analytics to prioritize and target cases for worker action. The current version of Tableau Server reached end-of-life in 2021 and was upgraded in February 2021 to the latest version to maintain patch and security compliance.

### ***Storage (Primary & Backup) Expansions***

As the RIBridges system matures, more data is being retained in its databases and document repositories. Per IRS compliance, data needs to be retained for minimum seven years. The UHIP system has four types of data repositories: transactional processing database, document management repository, reporting database, and analytical processing database, which are all seeing terabytes of growth per year. Similarly, the non-production environments used for active development and testing are growing at similar rates as they are a copy of production data. The capacity of the primary storage appliance was expanded by ~80TB in June 2021.

### ***Virtualization Platform Upgrade***

VMware and vSphere is used as the virtualization platform for RIBridges to efficiently manage and utilize available physical resources available through 27 Cisco UCS physical servers. The current version of VMware vSphere will reach end of life in November 2021. In October 2021, vSphere platform, the

management center, as well as the underlying Cisco UCS firmware will be upgraded for security patch compliance and for continued technical support from the vendor with no additional cost.

### Security password expiration

Manual password expiration was conducted for the Customer Portal (CP) user base for users who had not changed passwords in the last 365 days. User password must be changed every 365 days to comply with CMS requirements. The manual exercise completed in June 2021, and since then the process to expire passwords has been auto scheduled to run each night (EST). A user whose password was expired is forced to change the password upon login. The timeline for managing password expirations is highlighted in table 21 below.

Table 21 Password Expiration Timeline for CP

2021 – Password expiration timeline for CP													Proposed automated password expiration schedule by user type				
													Automation <input type="checkbox"/> Automate password expiration				
Employee, Employer, Individual			Worker/ IES (already scheduled)			Admin, Broker, Navigator (Privileged users)											
Wednesday at 2 AM ET			Wednesday at 10 PM ET			Thursday at 10 PM ET											
<ul style="list-style-type: none"> <li>The table below shows the approximate number of identities that will undergo manual password expiration process starting February 16<sup>th</sup>, 2021 running through Sept 28<sup>th</sup>, 2021</li> <li>It is scheduled for each Tuesday and is split across 2 WAVES as shown below</li> </ul>													<b>September 2020 password expiration pilot stats.</b> 1094 Passwords expired • 109 users change password as of JAN 2021 • No issues reported from call volume perspective. Matt and Celia to add any other details				
<b>WAVE 1 : Over 60K users (as of Nov 1<sup>st</sup>, 2020)</b>																	
Employer, Employee, Individual users having Password age greater than 365 days																	
Iteration	IT01	IT02	IT03	IT04	IT05	IT06	IT07	IT08	IT09	IT10	IT11	IT12	IT13	IT14	IT15	IT16	IT17
Day	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue	Tue
Date	Feb 16	Mar 2	Mar 16	Mar 30	Apr 13	Apr 27	May 11	May 25	Jun 8	Jun 22	Jul 6	Jul 20	Aug 3	Aug 17	Aug 31	Sep 14	Sep 28
User series	A*	B*	C*	D*	E*-F*	G*-I*	J*	J*	K*	L*	M*	M*	N*-Q*	R*	S*	T*-V*	W*-Z*
Count	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K	5-6K
<b>WAVE 2 : Over 450 users (as of Nov 1<sup>st</sup>, 2020)</b>																	
Admin, Broker, Navigator users having Password age greater than 90 days																	
Iteration	Admin			Broker			Navigator										
Day	Tue			Tue			Tue										
Date	Jul 6			Jul 20			Aug 3										
> 90 days	All Admin			All Broker			All Navigator										

### Security component tune-ups

The LDAP and DB2 used by the RIBridges identity management product is heavily utilized for daily transactions such as user create, update, suspend. These frequently used components (LDAP and DB2) need a periodic tune-up and is recommended to avoid an over-the-time buildup of unwanted data indexes leading to a delayed response time to critical RIBridges identity management operations. Post October 2020 the LDAP and DB2 components are tuned each quarter for ISIM, ISAM, and DB2, thereby improving the identity management solution response times for user create, modify, and suspend transactions. Also, by introducing quarterly pruning of system generated DB2 files (a byproduct of daily identity management operations) makes the DB2 and the base server, more efficient, and less resource intense.



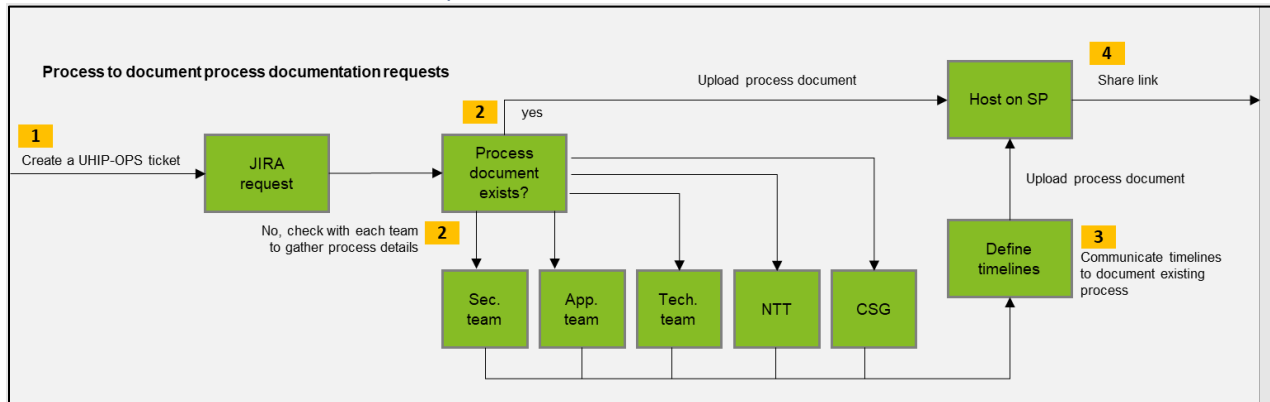
### **SIEM Executive Dashboards**

Executive dashboards were set up to display portal login counts, vulnerabilities, and TrendMicro alerts across the scanned servers. Tailored (22) use cases were developed to generate reports and/or alerts for successful and failed login attempts across each portal, service health, dormant user activity, suspicious probe events, suspicious inbound and outbound events, location reporting, etc. and 16 use cases were developed for host based intrusion detection system (IDS) and intrusion prevention system (IPS). For each vulnerability identified an email alert is sent to the tech and security teams to investigate.

### **POAM**

POAM review schedule is established, and open items are being tracked as a JIRA ticket post discussion and mutual agreement with the State leads. A process to document process documentation requests has been established and is depicted in the diagram below in table 2m.

*Table 2m Process Documentation Requests*



## **Project Management – Administration**

### **Maintenance and Operations Procurement**

One of the major accomplishments for FFY 2021 was the successful completion of the procurement process for the Maintenance and Operations Contract that resulted in a new contract that yielded significant cost savings for the State. The State issued an RFP for the Maintenance and Operations of the RIBridges system in July 2020 and received bids from three vendors. A multi-agency team with several years of experience working with the RIBridges system – comprised of seven directors and staff from DOA, DHS, HSRI and EOHHS, along with seven additional technical advisors – reviewed all three bids. In The review team scored Deloitte the highest in technical review. Table 2n illustrates the timeline and the key milestones associated with the RFP process.



*Table 2n. Maintenance and Operations RFP Timeline*

Timeline							
Sep 2019	Dec 2019	Jul 2020	Aug 2020	Sep 2020	Dec 2020	Jan/Feb 2020	~Mar/Apr 2020
Team Kickoff	Draft RFP (Feds)	RFP Posted	Vendor Q&A	Vendor Response	Tentative Award	Negotiations	Final Award Fed Submission

After a competitive procurement process, the State selected Deloitte Consulting LLP for a three-year maintenance, operations and enhancement support contract for the RIBridges public benefits technology system.

The contract, from July 2021 through June 2024, has been approved by the Centers for Medicare and Medicaid Services (CMS) and the U.S. Food and Nutrition Service (FNS). It has a fixed price of \$99.35M, which will be paid with \$41.2M in state funds and \$58.1M in federal funds.

The contract was planned to last for five years. At Governor Dan McKee's request, the initial term of this contract will instead last three years, with options to renew to monitor Deloitte's progress before moving forward with additional years.

With this new contract, Deloitte will also provide 12,600 additional hours of services and system enhancements over the three-year term, an estimated value of nearly \$4M. Additionally, the agreement includes the retention of key staff and enhanced contractor performance standards.

In addition to maintaining the system, Deloitte will continue to work with the State to deliver innovative enhancements to improve the customer experience and increase the ways Rhode Islanders can engage with the State. Examples include adding text message functionality to RIBridges to provide timely reminders and expanding the HealthyRhode Mobile App.

In section 3 of this document, we will discuss the transition to the new contract in greater detail including a summary of the changes from the prior CA-47 contract.

## **Project Management – Process**

### ***Incorporated Iterative / Agile Methodologies into the SDLC***

Throughout FFY 2021, the Joint IT Team continued to evaluate and pilot the use of certain principles of agile software development. One of the primary techniques used on projects such as RIte Share included allowing the business to view prototypes and partial functionality earlier in the SDLC cycle. The team also mapped user stories and scenarios to the delivery of specific requirements. This helped clarify the design and allowed for feedback to be incorporated prior to releasing the functionality to production. This process change was seen as a tremendous benefit to the business and we expect to

continue to approach larger projects with more complex designs in this fashion going forward. For example, the SNAP Reinvestment project which will deploy in October and December 2021, also included iterative demos and feedback sessions built into the plan along with some reserved scope to absorb design changes from those sessions.

In addition, for projects where requirements were not well understood up front, we've been incorporating extended discovery sessions to build out process flows and customer journey maps to more clearly identify the required business and system changes required to achieve the defined business outcomes. One example of this approach is the approach we took for the Medicaid Plan Selection project. This effort was extremely successful and resulted in clear priorities which informed the roadmap and timeline for improving plan selection. The team has found that spending additional time in the discovery phase has also led to reduced churn during the actual requirements phase.

### ***Improved BRR Project Kickoffs***

Another improvement we made to the SDLC process was defining a standard template and process for holding project kickoff sessions for all BRR projects. The template included the following:

- **BRR Business Objectives / Outcomes:** Previously we found the team often lacked context for what the project was supposed to achieve.
- **Guiding Principles:** Guidance from the Executive Team regarding how the team should approach each BRR.
- **BRR Core Team:** We now formally identify an overall State BRR Sponsor for each BRR. In addition, we work with the Sponsor to identify the Core Team and any additional supporting roles.
- **Roles & Responsibilities:** We've established a more formal structure to define all of the roles and associated responsibilities for the BRR team. We review these responsibilities at the kick-off to ensure all members have clear expectations on how they will contribute to the project.
- **BRR Budget:** Previously the team was not privy to the details regarding project budgets. As a result, the team wasn't always aware of how their decisions impacted the budget. Now, a budget slide with a breakout by phase is reviewed with the team at the kick-off and revisited weekly by the State Project Managers. We will discuss this in more detail below. In addition, any assumptions the Vendor made in developing the budget are also shared.
- **Design Approach, Timeline & Key Dates:** The approach and calendar for the project is also shared to ensure the team understands the timeline and the dates that need to be met to deliver the BRR on schedule.
- **Initial Requirements Overview:** The last component of the kickoff sessions includes an overview of the requirements included in the BRR along with some high-level business scenarios associated with these requirements.

The agenda and the BRR cost overview slides from the kickoff template are shown in table 2o below.

Table 2o. BRR Kickoff Template

<b>RIB-xxxxxx: [insert BRR Name] - Agenda</b>		<i>[State PM to Complete]</i>
Meeting Agenda	Time	
<b>BRR Team Kick Off</b>		
<ul style="list-style-type: none"> <li>• Goal(s) of the BRR &amp; any guiding principles/guardrails for the team (BRR owner)</li> <li>• Finalize the BRR Core Team (PM)</li> <li>• Review of the roles &amp; responsibilities (PM)</li> <li>• Review of the budget for the BRR with emphasis on reqs/design phase (Deloitte Owner)</li> <li>• Review of design approach &amp; calendar and any key dates (Deloitte Owner &amp; PM)</li> </ul>	~20 mins	
<hr/>		
<b>Initial Requirements Session</b>		
<ul style="list-style-type: none"> <li>• Overview of Requirements (Deloitte)</li> <li>• [Additional topics may be added here including a high-level review of scenarios]</li> </ul>	~40 mins	
<hr/>		
<b>Template Instructions:</b>		
<ul style="list-style-type: none"> <li>&gt; The State PM should have a pre-kickoff internal meeting with the State Agency Leads and other key stakeholders to confirm the BRR Owner, the Core BRR Team and the goals of the BRR as input to the kickoff meeting</li> <li>&gt; The State PM should work with Deloitte to determine whether the kickoff will be a standalone meeting or will be combined with the initial requirements session. In either case, the PM should ensure the agenda has at least 15-20 minutes to cover the kickoff content</li> <li>&gt; The State PM should leverage SharePoint to allow Deloitte to add their content to the kickoff deck</li> <li>&gt; Please remove the red text before finalizing the deck</li> </ul>		

*[Deloitte to Complete]*

**RIB-xxxxxx: [insert BRR Name] – BRR Project Budget**

**Overall Budget** **766 hours**

**Monthly Forecast**

JAN	FEB	MAR	APR	MAY	JUN	JUL	SEP	OCT	NOV	DEC
25	110	235	175	0	11	110	70	30	0	0

**SDLC Breakdown**

Phase	Start Date	End Date	Forecasted Hours
Design (Req + Dsn)	01/25	03/06	131
Development (TDD + Dev)	02/22	04/03	240
SIT (SIT + Reg)	04/05	07/03	200
UAT (UAT+TFP)	07/05	08/20	125
Post Prod	08/23	09/04	70

**Template Instructions:**

- Need to insert here the overall budget for the BRR along with monthly forecasts
- Show to the team the breakout by SDLC phase
- List any assumptions in developing the ROM
- Explain how this will be monitored and their role

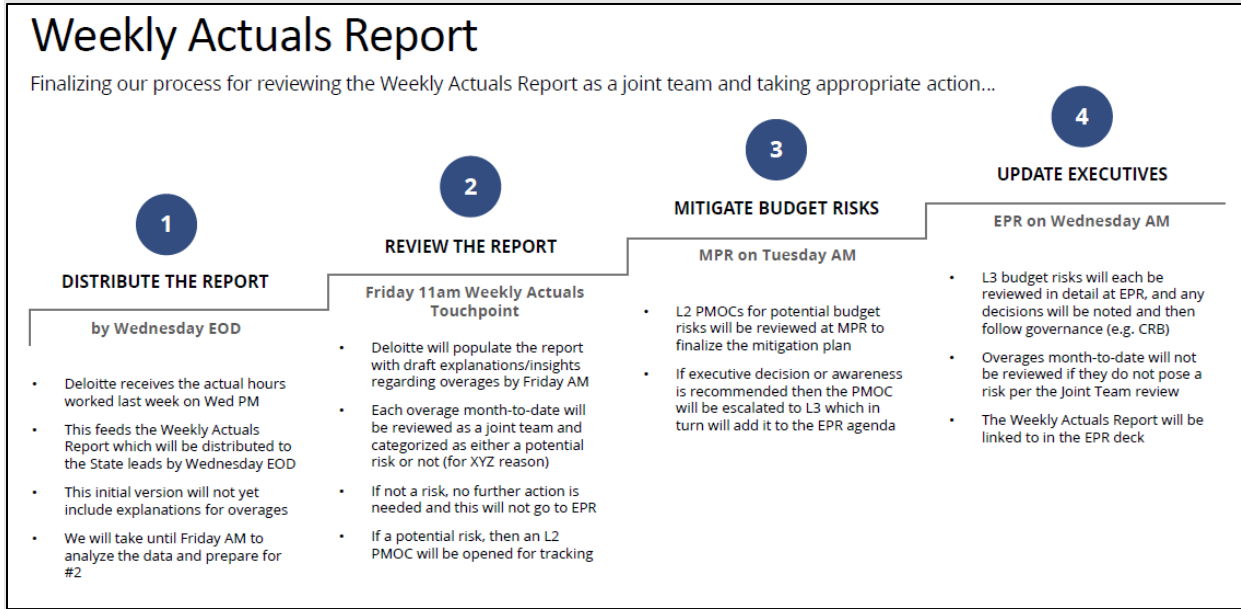
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### Improved BRR Budget Oversight

In FFY 2021, the team faced some challenges with budget overruns on some BRR projects. As a result, the State worked with the Vendor to conduct an in-depth root cause analysis to identify the key drivers for the overruns and to develop a corrective action plan.

One of the changes included developing and reviewing budgets at the project kickoff meetings (discussed above). In addition, the Joint PMO teams developed a new weekly report to compare estimated costs to actuals for each active BRR project. Typically, the State would only see this information well after the end of the month which often made it too late to make any adjustments in time to keep the project on track. An overview of the new process and a sample of the new report is shown below in table 2p. A weekly meeting was also established to discuss the report with the BRR Sponsors, PMs and other Project Leads to ensure any significant trends are immediately addressed. During this meeting, the team also determines if any additional escalations through our standard PMOC process are required.

Table 2p. Actuals Process & Sample Actuals Report



Tab 1: Executive Summary

Actuals Reporting Date: 6/19/2021						
	Sum of Prior Month Estimates	Sum of Prior Month Actuals	Sum of Variance	% Variance	Comments (if needed)	
Reporting Release	286.00	262.00	-24.00	-8%		
Tech Upgrade	405.00	352.00	-53.00	-13%		
Application Enhancement	923.00	849.75	-73.25	-8%		
<b>Total</b>	<b>1,614.00</b>	<b>1,463.75</b>	<b>-150.25</b>	<b>-9%</b>		
Row Labels	Sum of This Month Estimate	Sum of Estimated Spend To-Date	Sum of Actuals To-Date	Sum of Variance	% Variance This Month To-Date	
Reporting Release	357	227	255	28	12%	
Tech Upgrade	214	136	43	(93)	-68%	
Application Enhancement	1,758	1,119	685	(434)	-39%	
Patch Release	582	370	157	(214)	-58%	
<b>Grand Total</b>	<b>2,911</b>	<b>1,852</b>	<b>1,140</b>	<b>(713)</b>		
All BRRs with >10% variance this month to-date or >10% projected total variance:						
Delivery Track	Release Date	RIB#	Summary	% Variance This Month To-Date	Projected Total % Variance	Analysis + Recommendations
Application Enhancement	8/20/2021	RIB-102985	FNS change to SNAP EBT Benefit Expungements rules	57%	-7%	We still expect to complete below budget for this BRR. Slight overrun this month is essentially catch up given that SIT was delayed due to PMOC-1564 last month.
Application Enhancement	8/20/2021	RIB-133472	Rite Share Client Enrollment Enhancements	11%	-23%	We still expect to complete below budget for this BRR.
Patch Release	7/16/2021	RIB-132712	RIWorks Program require 6 month hardship extension	-48%	22%	No impact to State as this is monthly budget. Deloitte will review for lessons learned post deployment.
Patch Release	7/16/2021	RIB-111391	65th birthday month not being assessed for Medicaid appropriately	-92%	14%	No impact to State as this is monthly budget. Deloitte will review for lessons learned post deployment.

Executive Summary Weekly Actuals Report 6.19.21 (+)

Rhode Island Unified Health Infrastructure Project (UHIP) Medicaid Eligibility and Enrollment (EE)  
Implementation Advanced Planning Document (IAPD)  
OMB Approval Number: 0938-1268

**Tab 2: Weekly Actuals Detail**

Actuals Reporting Date: 6/19/21				Heatmap Key										
				<10% (below or approximately on target)										
				>10% but <30% (over target)										
				>30% (very over target)										
				Month of June					Total Project					
Delivery Track	Release Date	RIB#	Summary	This Month Estimate	Estimated Spend To Date	Actuals To Date	Variance	% Variance	Direct R	Total Actuals	Remaining ROM	Future Estimates	Projected Total Variance	Projected Total % Variance
Application Enhanc	8/20/2021	RIB-102985	FNS change to SNAP EBT Benefit Expur	100	64	100	36	57%	766	503	263	206	(57)	-7%
Application Enhanc	8/20/2021	RIB-133472	Rite Share Client Enrollment Enhancem	300	191	211	20	11%	1,579	769	809	445	(364)	-23%
Application Enhanc	8/20/2021	RIB-137668	CP Changes to Allow Customers to Upd	150	95	30	(65)	-68%	503	231	272	216	(56)	-11%
Application Enhanc	10/15/2021	RIB-133332	Correction to Medicaid Plan Selection	770	490	192	(299)	-61%	4,685	957	3,728	3,330	(398)	-8%
Application Enhanc	10/15/2021	RIB-137742	Mobile App Release #2: Invoice View +	255	162	31	(131)	-81%	2,548	31	2,517	2,386	(131)	-5%
Application Enhanc	N/A	AE-General	Lead + Support Hours	183	116	121	5	4%	N/A	N/A	N/A	N/A	N/A	N/A
Reinvestment	10/15/2021	Snap Re Inve	SNAP Reinvestment Release 1	2,419	1,539	881	(658)	-43%	17,689	2,121	15,569	14,900	(669)	-4%
Patch Release	7/16/2021	RIB-116854	Ability to update voter registration inf	50	32	32	0	1%	175	158	17	38	21	12%
Patch Release	7/16/2021	RIB-132712	RIWorks Program require 6 month hard	21	13	7	(6)	-48%	96	95	1	23	21	22%
Patch Release	7/16/2021	RIB-104495	MA SSI-create user role with ability to	15	10	2	(8)	-82%	119	101	18	24	7	6%
Patch Release	7/16/2021	RIB-111391	65th birthday month not being assesse	20	13	1	(12)	-92%	159	145	14	36	22	14%
Patch Release	8/20/2021	RIB-136028	RIDP/FARS Changes mandated by CMS	5	3	-	(3)	-100%	68	32	36	12	(25)	-36%
Patch Release	8/20/2021	RIB-135498	Revise Logic to Include UNUSED EBT	67	43	45	2	6%	247	175	72	94	22	9%
Patch Release	9/3/2021	RIB-126269	Need to generate ADR for liquid assets	104	66	10	(57)	-86%	247	24	223	195	(28)	-12%
Patch Release	9/3/2021	RIB-78909	SSP benefit verification letter	108	69	16	(53)	-77%	298	32	266	255	(11)	-4%
Patch Release	10/15/2021	RIB-138271	New SNAP Consolidated Work Notice	72	46	28	(18)	-39%	740	28	712	674	(38)	-5%
Patch Release	10/15/2021	RIB-136780	Translate NFP Notices/Bills and E-deliv	100	64	10	(54)	-84%	550	33	517	531	14	3%

### Refreshed Governance Framework

The State EP MO also led an initiative to refresh the governance framework for the project. The prior framework was highly successful in leading the project team through a time of significant instability and change. However, some of the processes were intentionally “heavy handed” because the structure was needed to move the project forward.

In FFY 2021, as the system continued to remain stable and the rate of change was significantly reduced, the team began to revisit the existing governance model to identify opportunities to work more efficiently while maintaining the appropriate levels of oversight.

The first phase of the Governance Refresh initiative was focused on the Executive Level Meetings. The State EP MO conducted interviews with the Executive Committee and Agency Leads to assess all of the existing meetings and associated governance processes. A sample of the assessment template can be found below in table 2q.

Table 2q. Sample Assessment Template

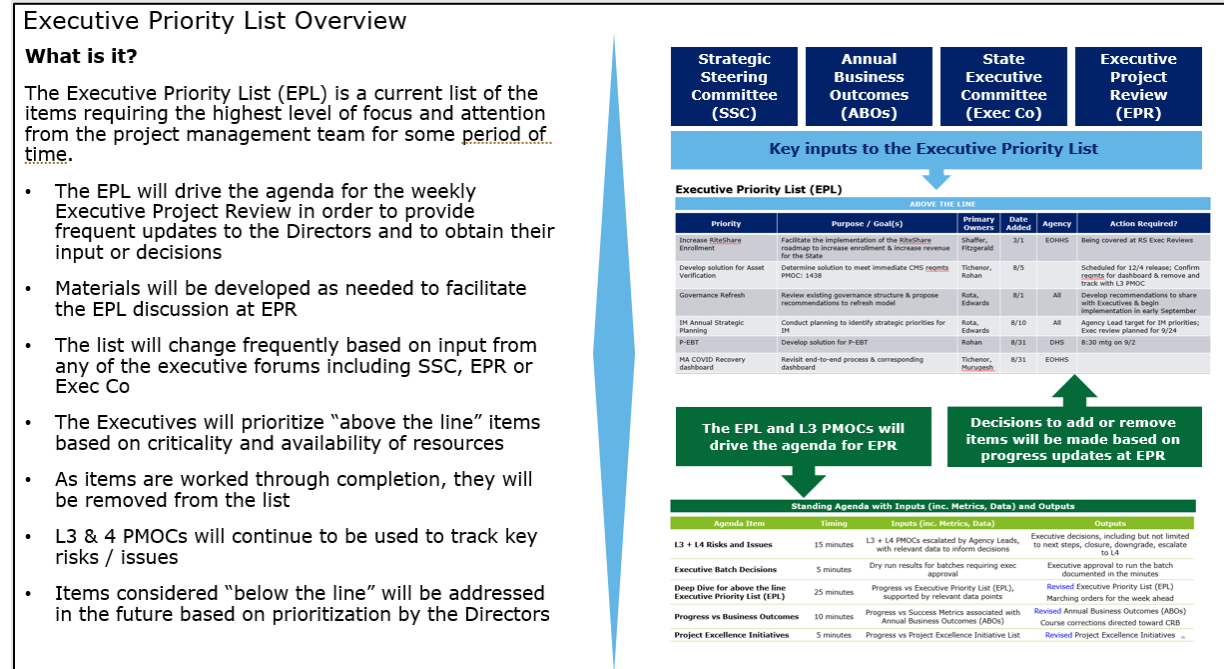
Executive Project Review (EPR)		SAMPLE Assessment Template
<p><b>Objective</b>   Provide an Executive-level forum to set and manage overall project priorities, discuss key aspects of project status and escalated risks and issues to enable executive oversight and guidance as well as informed decision-making across the all aspects of the project.</p>		
Working Well	Opportunity for Improvement	Recommended Changes
<ul style="list-style-type: none"> <li>Has been used effectively when needed to provide detailed focus on specific priorities</li> <li>Sharing data and analysis has also been extremely effective in obtaining input or decisions from the Executives</li> </ul>	<ul style="list-style-type: none"> <li>Confusion persists in terms of what topics go to IRC, EDR, EPR &amp; DExec</li> <li>No stated / formal list of "Above the Line" Priorities</li> <li>Currently, HSRI is not typically represented at the Executive level</li> </ul>	<p>☐ Clearly delineate this meeting as an Executive Meeting to establish priorities, track progress and enable informed decision-making.</p> <p style="text-align: center;"><b>Proposed Agenda</b></p> <ul style="list-style-type: none"> <li>Review Progress for Items on the "Above the Line" Priority List</li> <li>Provide high-level view of key activity across the project in next 2 weeks ("Agile Sprint") &amp; Upcoming Required Decisions</li> <li>Detailed Review and Discussion of Escalated PMOCs</li> <li>Review Key Project Metrics &amp; Recommend New Items or Adjustments to Priority List</li> </ul>
<p><b>Current Attendees:</b> Directors, PMO, Joint IT, Agency Leads, Select SMEs based on Agenda  <b>Frequency:</b> Weekly; 60 mins</p>		

The focus was on reviewing what was working well and identifying opportunities to reduce overlap and inefficiencies. Through this analysis, a set of recommendations were developed. With approval from the Executive Committee, these changes were implemented in September 2020. Some of the key changes included the following:

- The agenda & attendees were reformatted to allow EPR to become the primary Executive Meeting where escalated issues and top priority items are discussed along with high-level key status updates
- The format of the Monthly Executive meeting with Deloitte was modified to provide a forum for setting or adjusting strategic priorities and having open dialogue with Directors on key topics (i.e. Annual planning); meeting was renamed to the Strategic Steering Committee (SSC)
- An Executive Priority List (EPL) was formalized to track and communicate the "Above the Line" top priorities the team should be focused on; this is reviewed each week at EPR;
- The Agency Lead, Joint IT, IRC and MPC were combined into a weekly meeting (MPR) to eliminate redundancy across existing meetings and allow Leads to manage details which don't require escalation to Directors
- Risk / Issues (level 2s & 3s) are now being managed by the Leads at MPR which will allow for more discussion and work prior to escalation to the Directors via EPR
- The management of the project-wide process improvement initiatives are now formalized under a new Center for Project Excellence (CPE)

Table 2r provides additional details on some of these important process changes.

Table 2r. Governance Refresh Phase I Process Changes



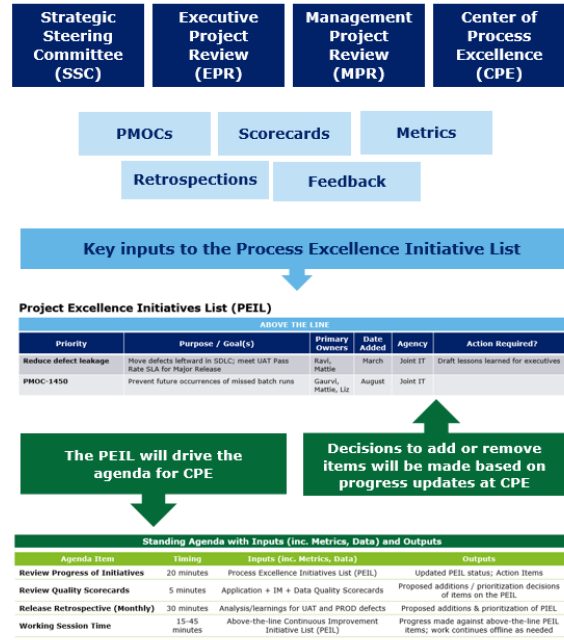


### Process Excellence Initiative List

#### What is it?

The Project Excellence Initiative List is a current list of the improvement opportunities being governed by the Center of Process Excellence (CPE).

- The PEIL will track the initiatives currently being managed by the CPE team
- Progress updates for each "above the line" initiative will be reviewed at the bi-weekly CPE meetings
- New items may be added to the list for consideration based on the team's review of scorecards, release retrospections, metrics, PMOCs or feedback sessions
- The CPE Team will prioritize "above the line" items based on criticality and availability of resources
- As items are worked through completion, they will be removed from the list but may be monitored to ensure improvement goals continue to be met
- Sub-teams may be formed to work on specific PEIL initiatives with direction from the CPE team
- The CPE team may bring forward updates to the Executive team via EPR or SSC
- Items considered "below the line" will be considered for future initiatives based on prioritization by the CPE



### Strategic Steering Committee (SSC) Charter

New Format

#### Objective

Provides a forum for strategic discussions with the Executive Leadership to review business priorities / outcomes and set overall direction for the project and ensure resources are aligned accordingly.

#### Cadence, Timing, Process

Thursday 8:30-10:00am  
 Bimonthly to start

Executives are expected to review Business + IT metrics in advance of the meeting and come prepared with observations, asks etc. This can include:

1. Contract KPIs + SLAs
2. Programmatic Metrics existing in Tableau
3. Success Metrics associated with Annual Business Outcomes
4. IT Metrics (incidents, problem tickets, data fixes, impacted cases)

#### Participants

State Chair: Celia Blue

Deloitte Chair: Ryan Fitzgerald

Agency	Executive	Lead	Other Attendees
DHS	Celia Blue		
HSRI	Lindsay Lang		
EOHHS	Ben Shaffer		
EPMO		Lori Rota	
DoIT	Jim Ritter	Lori Rota	
DoA			
Deloitte	Ryan Fitzgerald	Rohan Khopkar	Rakesh Chandrasekaran, Gaurvi Jain, Harry Edwards

#### Standing Agenda with Inputs (inc. Metrics, Data) and Outputs

Agenda Item	Timing	Inputs (inc. Metrics, Data)	Outputs
Open forum for executives to discuss business challenges or strategic topics (e.g. Annual Planning)	60 minutes	Executive observations from their advance review of business + IT metrics Annually: relevant inputs for annual planning discussions (e.g. capacity, trends)	Meeting Notes
Revisit Project Priorities	30 minutes	Executive Priority List (EPL) Annual Business Outcomes (ABOs) Process Excellence Initiatives List (PIEL)	Revised Executive Priority List (EPL) Revised Annual Business Outcomes (ABOs) Revised Process Excellence Initiatives List (PIEL)

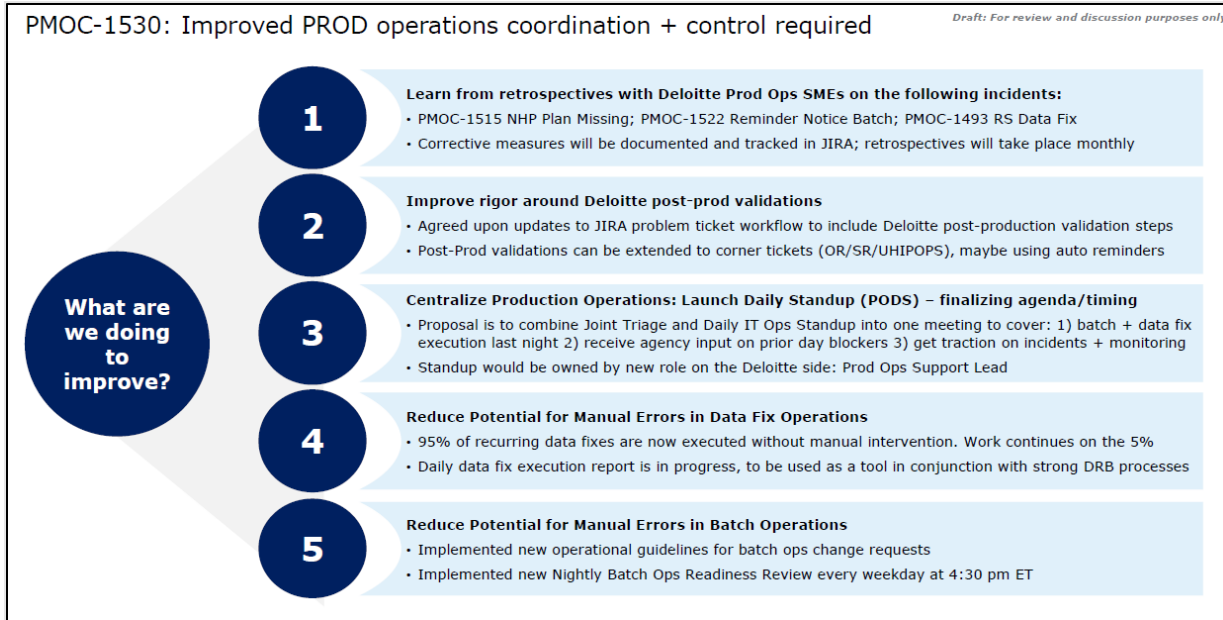
PMOC Escalation Levels				
Escalation Level	Governing Body	Description	Escalation Pathway	Examples
1	Theme Teams	General project risks / issues being managed by the theme teams	<ol style="list-style-type: none"> <li>1. Review weekly at theme team meeting</li> <li>2. If action/awareness needed from Agency Leads or Joint IT Team, escalate to L2</li> <li>3. This adds it to the MPR agenda</li> </ol>	
2	Management Project Review (MPR)	General project risks / issues requiring the attention of the management team but not requiring immediate escalation	<ol style="list-style-type: none"> <li>1. Review weekly at MPR</li> <li>2. If action/awareness needed from Executives, escalate to L3 for review at EPR</li> </ol>	<ol style="list-style-type: none"> <li>1. Recoverable scorecard risks with clear mitigation pathways; SDLC phases may be at risk but the release date itself is not</li> <li>2. Document approvals delayed</li> </ol>
3	Management Project Review (MPR) manages and prepares updates  Executive Project Review (EPR) reviews updates, makes decisions	Key project risks / issues having significant project impact requiring input or decisions from the Management Team and Directors	<ol style="list-style-type: none"> <li>1. Review weekly at MPR and EPR</li> <li>2. If risk / issue is evaluated as having significant project-wide impact, a decision may be made to escalate to L4</li> </ol>	<ol style="list-style-type: none"> <li>1. Benefit-impacting or system availability-impacting production issues or activities with a significant number of impacted cases</li> <li>2. Contractual exceptions (e.g. missed KPIs, SLAs, deadlines, or warranty concerns)</li> </ol>
4		The <u>highest level</u> project risks / issues with the potential of having <u>wide spread</u> project impact and therefore requiring the full attention of the Directors	Please note: All Level 4 PMOCs are listed in the Risks + Issues section of the Executive Status Report which is distributed to federal partners on a weekly basis	<ol style="list-style-type: none"> <li>1. Initial impact of COVID-19</li> </ol>

The second phase of the Governance Refresh Initiative will begin in Q3 2021 as part of the transition to the new M&O contract.

### ***Implementation of Production Operations Daily Stand Up***

In the first quart of 2021, the Tech Ops team identified some opportunities to improve Production Operations coordination and control (see table 2s). The team was focused on reducing or eliminating manual steps which are more prone to error and leveraging automation particularly in the scheduling of batches and recurring data fixes.

Table 2s. List of Improvements for Production Operations



One of the primary improvements was the implementation of a new Production Operations Daily Stand Up (PODS) meeting. The main purpose of this meeting was to ensure joint accountability between IT and the business for the daily health of the production system. In addition, the Vendor created a new role, Production Ops Support Lead, to lead and facilitate this working team to ensure Prod Ops continues to run smoothly. Previously, the Joint Triage team was focused on the incident workflow but there were gaps in terms of the coordination across other key areas of production operations (i.e. Batch operations, Data Fixes) the team felt needed to be addressed. Since PODS was implemented, there has been a significant improvement in addressing the incident backlog, resolving blocked cases and processing data fixes more quickly. The charter for this new stand up meeting is shown in table 2t. Looking forward, the State expects PODS to continue to play a key role in the support model for production operations.

Table 2t. Charter for Production Operations Daily Stand Up (PODS)

Production Operations Daily Standup (PODS) Charter																																													
<b>Objectives</b>			<b>Participants</b>																																										
Establish a single joint forum to take shared accountability for production health and operations from both an IT and business perspective, each and every business day. Production health and operations defined as follows: 1) Blocking Incident Triage 2) Business + IT Monitoring (inc. app performance and infrastructure) 3) Data Fix Execution 4) Batch Operations 5) Agency Ops: Exceptions Lists 6) Production Validation			<table border="1"> <thead> <tr> <th>Name</th> <th>Org</th> <th>Scope</th> <th>Speaking Role</th> </tr> </thead> <tbody> <tr> <td>Mattie Nookala</td> <td>State</td> <td>Prod Support Lead</td> <td>Assign actions, co-own prod validation</td> </tr> <tr> <td>Kate Herbst</td> <td>State</td> <td>Rep DHS Ops</td> <td>What DHS Ops needs to process cases</td> </tr> <tr> <td>Sherri Kennedy Saurabh Gosai</td> <td>State</td> <td>Rep DHS</td> <td>What DHS saw in PROD yesterday</td> </tr> <tr> <td>Jeff Schmeltz Anthony Salvo</td> <td>State</td> <td>Rep EOHHS</td> <td>What EOHHS saw in PROD yesterday</td> </tr> <tr> <td>Steph Luther Yasmin Alba</td> <td>State</td> <td>Rep HSRI</td> <td>What HSRI saw in PROD yesterday</td> </tr> <tr> <td>Liz Hathaway Sandeep Challa</td> <td>State Deloitte</td> <td>Co-own Batches</td> <td>What happened in PROD overnight What is running in PROD tonight</td> </tr> <tr> <td>Mike Patrick Tej Gudala</td> <td>State Deloitte</td> <td>Co-own Data Fixes</td> <td>What data fixes executed overnight</td> </tr> <tr> <td>Priyanka Linga</td> <td>Deloitte</td> <td>Own Incidents</td> <td>What we are doing to unblock incidents</td> </tr> <tr> <td>Rajesh Dasa</td> <td>Deloitte</td> <td>Prod Support Lead</td> <td>Assign actions, co-own prod validation What happened in PROD yesterday, Prep a readout to be sent post meeting</td> </tr> </tbody> </table>			Name	Org	Scope	Speaking Role	Mattie Nookala	State	Prod Support Lead	Assign actions, co-own prod validation	Kate Herbst	State	Rep DHS Ops	What DHS Ops needs to process cases	Sherri Kennedy Saurabh Gosai	State	Rep DHS	What DHS saw in PROD yesterday	Jeff Schmeltz Anthony Salvo	State	Rep EOHHS	What EOHHS saw in PROD yesterday	Steph Luther Yasmin Alba	State	Rep HSRI	What HSRI saw in PROD yesterday	Liz Hathaway Sandeep Challa	State Deloitte	Co-own Batches	What happened in PROD overnight What is running in PROD tonight	Mike Patrick Tej Gudala	State Deloitte	Co-own Data Fixes	What data fixes executed overnight	Priyanka Linga	Deloitte	Own Incidents	What we are doing to unblock incidents	Rajesh Dasa	Deloitte	Prod Support Lead	Assign actions, co-own prod validation What happened in PROD yesterday, Prep a readout to be sent post meeting
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<b>Principles</b>																																													
1) Mission is to get benefits unblocked ASAP and get them to customers 2) Stay on mission – this is not the meeting for walk-ons or blame game 3) Shared accountability – if you attend, you participate + take ownership 4) No custom report production – inputs must come from working software 5) If no clear resolution pathway emerges – escalate via the PMOC process																																													
Standing Agenda with Inputs (inc. Metrics, Data) and Outputs																																													
#	Question (to be asked by the facilitator)	Responsible	Timing	Inputs	Outputs																																								
1	Do you have incidents from yesterday needing urgent action? Any impacts to regular operations – more calls? More people coming in?	Agency Reps + Priyanka Linga	10 mins	<a href="#">JT Dashboard</a>	JIRA Comments																																								
2	Did you observe any disruptions via IT/business monitoring yesterday?	Rajesh Dasa	5 mins	Splunk Alerts	Incidents																																								
3	Did you observe any disruption to data fix executions overnight?	Tej + Mike	2 mins	Data Fix Execution Report	Incidents																																								
4	Did you observe any disruption to batch operations overnight? Call out any exceptions to the schedule that were added at the 4:30pm.	Sandeep Challa	3 mins	Batch Execution Summary	Incidents																																								
5	Have you validated what batches are running tonight?	Liz Hathaway	2 mins	Batch Ops Checklist	Confirmed Schedule																																								
6	Are there any new/modified batches this group should be aware of?	Liz Hathaway	1 mins	Batch Ops Checklist	Confirmed Schedule																																								
7	Have you made progress on working exception lists?	Kate Herbst	2 mins	Exception List Exec Summary	N/A																																								
8	Have you validated the things that went to PROD in the last release?	Mattie + Rajesh	5 mins	<a href="#">Release Closure Dashboard</a>	JIRA Comments																																								

## Overall System Status

Overall, RIBridges achieved system maturity in FFY 2021. The following table provides an overview of the program areas included in RIBridges, split between Phase I and Phase II. These programs are color coded by level of system maturity and substantial compliance with federal and state laws and regulations. Programs coded as green are considered mature as of the end of FFY 2021. This indicates a baseline of functionality upon which the State may continue to build in the interest of compliance or other business priorities, like cost-effectiveness. Programs coded in yellow have made major advancements towards maturity but require certain system stabilization efforts to achieve the full baseline functionality of a mature program. Finally, programs coded as red are programs that require significant effort to achieve baseline functionality. As of late FFY 2021, there are no programs classified as red or yellow.

Table 2u. RIBridges Program Components

Table Key: Green = Mature Program, Yellow = System Stabilizing

RIBridges	
Phase I	Phase II
Qualified Health Plans (QHP)	Special Medicaid
MAGI Medicaid – System Administration	Children’s Health Insurance Program (CHIP)
	Long Term Service and Support (LTSS)
	Rlte Share
	Medicare Premium Payment Program (MPP)
	Supplemental Nutrition Assistance Program (SNAP)
	Rhode Island Works (RIW)
	Child Care Assistance Program (CCAP)
	General Public Assistance (GPA)
	State Supplemental Payment Program (SSP)

The following programs changed from a category of yellow to green in FFY 2021: Rlte Share and Rhode Island Works. Major Releases in December 2020, February 2021 and August 2021 delivered additional enhancements for the Rlte Share program which enabled the business to achieve specific outcomes related to increasing enrollment by improving the search algorithms and performing substantial data clean up on employer data. Key defects were also addressed for the RIW program which allowed the KPI target to be achieved on a consistent basis.

### 3 STATEMENT OF NEEDS, OBJECTIVES, AND PROPOSED ACTIVITIES OF THE IAPD

The objective of UHIP in Rhode Island has remained constant over the life of this significant project. Broad goals such as realizing near universal health coverage, improving and modernizing access to human service benefits, improving accuracy and timeliness of provider payments and creating a no-wrong door approach for Rhode Island families to access services continue to remain as guiding principles for this project. The activities, plans and resource requests contained in this IAPD are intended to further advance UHIP towards these overarching goals while capitalizing upon the stability of the system and the new M&O contract to invest strategically in enhancements focused on improving the end-to-end customer experience while expanding customer access to benefits and increasing worker productivity. In addition, the team will continue to focus on modernizing the RIBridges system in order to reduce the total cost of ownership and ongoing support costs. Lastly, the team will refine and refresh the governance framework while continuing to drive accountability and transparency with the Vendor through ongoing performance management.

Sections 6, 8, and 10 respectively lay out the detailed contractor, personnel, and budget requests for the upcoming federal fiscal year. Section 7 of this document provides an overview of the project management and governance processes that are currently in place to ensure that as the needs are fulfilled, they are done in a way that is efficient, effective, and well-managed. These needs are divided between RIBridges priorities and project management priorities as listed below:

*Table 3a. UHIP Project Plans for FFY 2022*

Rhode Island UHIP Project			
RIBRIDGES		Project Management	
Business Functions	Technical (System Functions)	Administration	Process
Implement BEERs Interface	Application Framework Upgrade	Facilitate Execution of New Testing Procurement	Continue to Refresh Governance Framework
Implement new Policy Changes for RIW	Enterprise Service Bus Upgrade	Budget development and monitoring	Improve Time to Market of SDLC
Address Medicaid Audit Findings	Content Management Upgrade	Cost Allocation development and monitoring	Transition UAT to State In-House Model
Achieve CMS Compliance by Changing Frequency of Buy-in Reporting to Daily	Notice Generation System Upgrade	Contract management oversight	Continue to Shift Manual Reporting to Online Dashboards
Complete Medicaid Plan Selection Roadmap			Implement Continuous Improvements through the CPE

Rhode Island Unified Health Infrastructure Project (UHIP) Medicaid Eligibility and Enrollment (EE)  
 Implementation Advanced Planning Document (IAPD)  
 OMB Approval Number: 0938-1268

Rhode Island UHIP Project			
Maintain LiHeap Data between RIB and LiHeap System			
Achieve Alignment across Part A/B for MPP			
Achieve FNS Compliance for SNAP ABAWD Consolidated Work Notice			
Implement HCBS Waiver Logic & Multiple Waivers			
Improve LTSS Processing			
Implement Process Improvements for RlTe Share			
Continue COVID Mitigations & Implement Recovery Efforts			
Implement PTIG SMS Text Messaging			
Implement SNAP Plan Reinvestment Functionality			
Enhance the Child care Portal			

## **RIBridges – Business Functions**

The State will continue to capitalize on overall system stability to deliver enhancements to maintain system compliance, improve the customer experience, establish efficiencies for workers, and reduce the ongoing cost of maintaining and operating the system. In addition, As a result, the State will remain focused on a few, very specific areas in allocating Major Release scope.

Table 3a above lists the key business outcomes that have been delivered in FFY 2022, each of which is described in more detail below. These outcomes will be delivered over the course of major releases and a series of monthly patch releases as described in Section 4.

### ***Implement BEERS Interface***

Currently RIBridges validates income using earned and unearned income data received from SWICA, BENDEX, and other DLT sources. However, ACF specifically requires use of the BEERS interface. The State therefore intends to implement the BEERS interface, allowing RIBridges to request via the Beneficiary and Earnings exchange (BENDEX), and receive data in return via the BEERS interface. An ancillary goal is to automate use of the data to the extent feasible given budget constraints. And the necessary data protections will be implemented to secure access to this IRS data.

**Delivered: March 2022**

### ***Implement New Policy Changes for RIW***

The Rhode Island State Legislature's budget for SFY 2022 included several policy changes which directly impact the Rhode Island Works (RIW) program as administered through RIBridges. Specifically, the system will need to be modified to:

1. Provide a 30 percent increase to the cash benefits provided through Rhode Island Works
2. Provide a \$100 yearly clothing allowance for children to be paid for infants and toddlers who were previously excluded from eligibility
3. Exempt income from employment for six months when a parent starts a job, or until income exceeds 185 percent FPL, to improve parents' readiness for employment and retention
4. Expand eligibility to all 18-year-olds in high school (secondary school)

**Delivered: December 2021**

### ***Address Medicaid Audit Findings***

Promptly addressing any audit findings related to the Medicaid program remains a program of the RIBridges system. In FFY20 2022, the State will invest in system changes to address federal audit finding 2020-00F, which concluded that RIBridges is not currently evaluating existing health coverage in conjunction with determining CHIP eligibility. The State's most effective data source for identifying third-party insurance (automated TPL data match with private insurers) is utilized in MMIS but not RIBridges today (rather self-attestation). Therefore, the State aims to implement a loopback file from MMIS to



RIBridges containing the relevant TPL information, ensuring that workers and auditors alike can view TPL data populated in the data collection screens and then and evaluate CHIP eligibility accordingly.

**Delivery Update:** The approach for addressing the findings regarding the TPL was modified since this plan was submitted in July 2021. It was determined that the TPL loopback process does not require enhancements to RIBridges. The team will leverage our normal Service Request hours to complete any set up work that is required to enable the TPL loopback file processing to address this audit finding. The enhancement hours set aside for this work was leveraged to address some of the additional Medicaid scope items described below.

### ***Achieve CMS Compliance by Changing Frequency of Buy-In Reporting to Daily***

Rule CMS-9115-F requires a daily State-CMS data exchange to identify Medicare enrollees as well as which party (Medicare or Medicaid) is liable for paying each beneficiary's Parts A and B premiums (commonly referred to as "buy-in" files). RIBridges currently exchanges buy-in files with CMS on a monthly basis. Therefore, system changes are required to convert the accretion and deletion reporting process to daily, inclusive of changing additional information on certain screens and automating certain manual processes to facilitate this change. We anticipate this change will ultimately improve patient access to health information, improve interoperability, and reduce the burden on payers and providers.

**Delivered: March 2022**

### ***Complete Medicaid Plan Selection Roadmap***

The Medicaid Plan Selection Roadmap consists of a series of enhancements being iteratively implemented throughout FFY 2022. This important roadmap was developed via a human-centered design process which created detailed customer journey maps in consultation with key stakeholders. The overall goal is to improve the customer experience and bring transparency to important health insurance information. These changes are an important precursor to the State's planned MES system implementation.

In FFY 2022, we will make additional improvements to the plan selection process, in pursuit of these goals:

1. Better support customers through choice counseling and update customer portal to appropriately align with Medicaid plan selection and change rules
2. Reduce initial auto-enrollment and changes outside of MAPCO (due to misalignment at time of initial selection)
3. Improve customer experience during plan selection through redesign to align with relevant features and information for Medicaid plans
4. Increase efficiency of plan/rate renewal in the system through automation of processes

**Phase I Delivered: October 2021.**

**Phase II: Additional enhancements are planned for September 2022.**

### ***Update LIHEAP Data Between RIBridges and LIHEAP System***

DHS seeks to implement an automated interface to share and update data between the Hancock LIHEAP and RIBridges systems on a regular basis. This will create efficiencies for workers as they will not have to manually check the LIHEAP system when processing cases. This interface will operate similarly to the existing SWICA interface, in that it will update SUA screens when a differential response is received and either insert a mass update trigger for automated reevaluation or create a worker task as appropriate.

**Delivered: June 2022**

### ***Achieve Part A/B Alignment for MPP***

EOHHS seeks to improve the alignment between Medicare Part A and Medicare Part B for recipients of Medicare Premium Payments (MPP) through RIBridges, thereby enabling DHS workers to process MPP cases more efficiently. This outcome will be pursued by automating certain steps in the MPP application review process for QMB-eligible customers already receiving either Part A or Part B. For example, the State will automatically buy in for Part A if the client is a QMB and has buy in for part B Medicare.

**Scheduled: September 2022**

### ***Achieve FNS Compliance for SNAP ABAWD Consolidated Work Notice***

The 2018 Farm Bill requires that all State agencies provide every household where at least one individual is subject to a work requirement with a consolidated work notice. The notice must explain all applicable work requirements for household members, and the notice must be provided at times of certification, recertification, when a new member joins the household, or when a household member becomes subject to a work requirement. As part of the design process for these changes, all existing work requirements, ABAWD notices, and text will be reviewed for potential edits or discontinuation.

**Delivered: March 2022**

### ***Implement HCBS Waiver Logic & Multiple Waivers***

The State intends to change waiver logic so that it is driven by program codes, as well as to allow eligibility for multiple waivers in MMIS, in pursuit of a broader goal to improve access to Home-Care Based Services (HCBS) as federally legislated via the American Rescue Plan (ARP) Act as well as other means. MMIS does not currently allow for simultaneous enrollment in multiple waiver programs even though the client may be eligible for them, and so system changes are needed in RIBridges to allow waiver programs to overlap in with certain other waiver programs. These changes will be coordinated alongside the MMIS vendor.

**Scheduled: September 2022**

### ***Improve LTSS Processing***

LTSS processing, while drastically improved, remains a priority area for the State of Rhode Island. We have an identified an opportunity to further improve processing times, in pursuit of the following goals:

1. Identify a clear way to expedite HCBS cases
2. Improve functionality of the complete app field
3. Process BHDDH/RICLASS Group Home program cases more efficiently

**Scheduled: September 2022**

### ***Implement Process Improvements for Rite Share***

While the Rite Share program is now considered “green” – stable and efficient – as a result of the extensive improvements implemented in FFY 2021. The State has prioritized an additional targeted system changes aimed at increasing worker efficiencies and improving the overall customer experience even further. These enhancements include the following:

1. Enhance the Worker Portal and Customer Portal to restrict edits for new Employers (not known to RIBridges) when they are being added by the customer/worker
2. Reduce the volume of RS19/20 notices sent by triggering a new task instead of an RS-19/20 notice when a provider is not associated to the employer reported in the case
3. Modify prioritized Rite Share Notices to better support customers, providing more complete + accurate information

The Rite Share program team determined this planned enhancement

**Delivery Update:** Since the IAPD was submitted in July 2021, the Executives determined the primary issues for the Rite Share program were addressed with the significant enhancements made to RI Bridges in FFY 2020 and FFY 2021. As a result, the changes described above were deferred to shift resources to work on some of the higher priority items related to preparing for the PHE Unwinding including the Passive Renewals and AVS Automation BRRs. The Rite Share program team will continue to review these changes and will look to prioritize when release scope becomes available in the future.

### ***Continue COVID Mitigations & Implement Recovery Efforts***

Most system mitigations implemented in response to the onset of the COVID-19 pandemic will remain in place until the end of the federal Public Health Emergency. Until such time, Deloitte and the State will continue to maintain and operate these mitigations to prevent regular system functions from running and adversely impacting customers per PHE guidelines. In parallel, we are planning in earnest for the activities needed to recover from or “unwind” the system mitigations as the PHE comes to an end. In addition, we are planning for the expiration of certain waivers and we have successfully reopened our field offices. The team is also very focused on working across all agencies and vendors to prepare for the resumption of Medicaid Terminations and Renewals. Recognizing that this will impact a substantial volume of customers, we are seeking to appropriately distribute terminations and renewals across several months. The team is mapping out the best possible experience for customers by leveraging our

well-established ex parte process as well as other outreach efforts to help drive transitions into QHP as part of the renewal or termination process.

Some specific enhancements that are being implemented include the following:

- Creating the ability to send texts and emails via manual batches (**Delivered – March 2022**)
- Category 1 – Developed a batch which can perform the renewal process for Medicaid terminated individuals and perform the 60 day and 20 days functionality for these CAT1 population (**Delivered – March 2022**)
- Added the Opt Out Feature for SMS / Email tracking (**Delivered – March 2022**)
- Modify the BDN to include the MAGI termination notices (**Delivered – March 2022**)
- Allowing notice stuffers as email attachments for digital notices (**Delivered – June 2022**)

### ***Implement PTIG SMS Text Messaging***

The goals of this project are to increase customer service responsiveness and effectiveness for the SNAP recipients, reduce churn and disruption in benefit access, and increase digital communication between DHS and its customers. This will be accomplished by extending functionality within the RIBridges to send text messages based on opt-in customer preferences.

Automated text reminders will be an effective tool in improving responses from SNAP applicants and participants. Simple text reminders, which provide details of critical SNAP information, overdue documents or the time and location of SNAP appointments, will be effective at increasing responsiveness from the client and help to continue or expedite access to benefits. Since research indicates 96 percent of residents own a cell phone of some kind and RIBridges has details for over 50 percent of the active SNAP population on file, enabling text alerts at key points in the application and renewal processes should be an effective method in providing additional prompts to customers above and beyond normal communication channels such as paper notices. Table 3b illustrates the proposed workflow for some of the alerts being added with this initiative.

We are not requesting APD FFP funding for this work as it is funded in entirety by the FNS PTIG grant.

Table 3b. PTIG SMS Text Messaging

<p><b>Notices of SNAP Appointments</b>                  Text Messages can be used not only to send appointment confirmations, but also to remind households of upcoming appointments and provide details such as DHS office contact information, documents needed etc. to aid effective response from clients.</p>	<p><b>Proposed Workflow:</b></p>
<p><b>Returned Mail Alerts</b>                  Household addresses are not always updated on a consistent basis, especially because simplified reporting households are not required to report a change of address during the certification period. As a result, many notices are sent to outdated addresses which results in the mail being returned. Using text message alerts to notify clients that their address needs to be updated could greatly reduce this issue.</p>	<p><b>Proposed Workflow:</b></p>
<p><b>ABAWD Reminders</b>                  Able Bodied Adults Without Dependents (ABAWDs) may only receive SNAP benefits for three months within a thirty-six-month period unless exempt. Text message alerts to notify ABAWD individuals or potential ABAWD individuals of their time-limited benefits and/or policy changes that govern their exemption status will increase transparency and communication with individuals.</p>	<p><b>Proposed Workflow:</b></p>

Delivered: October 2021

### ***Improve SNAP Payment Accuracy***

In October 2021 and December 2021 major releases, we plan to implement a series of significant enhancements to RIBridges aimed at improving SNAP payment accuracy, measured via the SNAP QC rate specifically. These enhancements were identified through analysis of case errors and feedback from Supervisors and case workers, and are intended to address the following business problems:

1. The RIBridges eligibility system does not currently include 'prompts' to assist staff in the identification and resolution of case discrepancies in reported information. These discrepancies often point to unreported income or expenses, two of the highest error elements for SNAP.
2. The data collection process needs to be simplified so that staff can quickly and easily gather the data needed to make accurate eligibility determinations even if they do not remember the policy behind the questions.
3. Today, workers must check interfaces manually which takes time and attention to input data into the system accurately. To save time, workers often don't check every interface and crucial information is overlooked or entered incorrectly.
4. When high error elements are identified, policy changes, or workers need to be updated on business processes, the current distribution method does not include a component to ensure all staff have read and understand the issue or change.
5. The RIBridges system does not require eligibility workers to work all tasks associated with a case before processing eligibility, which in some cases can result in ongoing case errors.

**Delivered: October 2021 and December 2021**

### ***Enhance the Child Care Provider Portal***

Providing access to affordable Child Care while supporting a safe and efficient way to operate subsidized care is more important than ever as Rhode Island families and childcare centers cope with the challenges of the pandemic and face a "new normal." Several Child Care Assistance Program (CCAP)-specific funding sources have become available (including but not limited to \$3.5B via CARES, \$10B via CRRSA, and \$39B via ARPA) in addition to the State Child Care & Development Block Grant (CCDBG) and preschool development grants used to administer the CCAP program each year. The State intends to utilize these separate funding sources to make a series of enhancements to the Child Care Provider Portal that impacts only CCAP. The plan is likely to include the following functionality:

1. Differentiated rate to providers serving Department of Children, Youth, and Families (DCYF) foster care children
  - a. Improve the overall access, and availability of quality child care experiences for children involved in RI's child welfare system
  - b. Incentivize (and appropriately compensate) CCAP Providers who serve vulnerable, at-risk children (infant/toddler and preschool-age) involved with RI's child welfare system
2. Contactless Attendance Tracking

- a. Provide a secure, modern, and efficient mobile solution to parents and providers to check-in and check-out their children without any physical contact and while maintaining social distancing
  - b. Automate attendance reporting to reduce manual effort, increase data accuracy, and support compliance with CCAP program rules
3. Provider Self-Service and Locator
- a. Provide child care providers an enhanced and intuitive experience to report and manage attendance. Improve transparency by providing a unified view of subsidy and financial data to providers. Open effective digital communication avenues to reduce provider call volume and update them about critical program updates
  - b. Build a hassle-free Licensing experience for providers by allowing them to apply and manage their license online (integrated with existing back-office licensing workflow solutions). Promote high-quality childcare and encourage participation in the state's quality rating program
  - c. Enables families to locate providers who offer Child Care, and help them determine their provider of choice that suits the need of the family and promotes the child's holistic development

**Deferred:** The Child Care project was deferred to allow the team to deliver scope directly related to the PHE Unwinding. This work is currently planned for delivery in FFY 24.

### **New Business Outcomes**

Business outcomes were added since this IAPD was submitted in July 2021 as the State obtained additional funding via grants or other sources.

#### ***AVS Automation***

Allow the State to automatically renew cases where information can be electronically verified without worker or customer intervention. This will eliminate a manual step for many recipients each year and avoid the possibility of benefits being terminated for lack of or a delayed response. This functionality will be extremely helpful during the PHE Unwinding.

**Delivered: June 2022**

#### ***Passive Renewals for Complex Medicaid***

Functionality was delivered to allow all non-MAGI individuals to be processed via passive renewal following their initial renewal. This enhancement will also be key to reducing renewal processing during the PHE Unwinding.

**Delivered: June 2022**

### ***Special MA – OHA At Home Program***

Implemented budget article effective 7/1/21; The Governor recommendation to increase eligibility for At Home adult day health and home care services income eligibility from 200 percent to 250 percent of the FPL.

**Delivered: March 2022**

### ***MPP Buy-In***

Implement Federal guidelines requiring the State to automatically buy in for Part A if the client is a QMB and has buy in for part B Medicare.

**Scheduled: September 2022**

### ***SNAP ARPA***

There are 4 primary enhancements to be delivered by September 30, 2022, as part of the SNAP ARPA grant. They include the following:

- Automated Application Registration - In order to improve the application registration process in RIBridges and to make it an easy process for the workers, the proposal is to automate the AppReg process when the application is scanned in. Once the application registration is completed then system will generate appropriate tasks/alerts for the workers to further review and process these applications through data collection and case creation.**(Scheduled – September 2022)**
- Automated Appointment Scheduling - The appointment scheduling process in RIBridges currently relies on the workers to set up appointments. In order to allow greater flexibility to clients and reduce the number of walk-ins to the DHS offices, the State is proposing to allow clients to schedule appointments per their convenience through the customer portal. This proposal is to automate and integrate the interview scheduling process while after application registration is completed. SNAP will require an interview prior to authorizing benefits, and this feature will allow clients to schedule interviews from the customer portal. **(Scheduled – September 2022)**
- Customer Portal Appointment Enhancement - Changes to the organization of the Providence office requires an update to RIBridges to ensure SNAP customers and any associated tasks are assigned to the correct office and that SNAP customers receive accurate notification of the correct address of the office location. This update includes the creation of the new offices within RIBridges, modification of all applicable reference tables to account for the new offices, the



correct association of customers, cases and tasks to the appropriate offices, reporting changes to accommodate new offices and updating all appropriate noticing to customers to ensure proper identification and notification of new office locations. Changes also include support for customers arbitrarily impacted by case/office assignment, assisting State in moving appointment location within the system. These changes will impact customers of all programs. **(Delivered)**

- Elderly & Disabled Simplified Application (Phase I) To reduce the administrative burden on staff by lengthening certification periods for elderly and disabled households with no earned income **(Scheduled – September 2022)**

### ***HIX ARPA***

There were several key enhancements delivered in the March and June Major Releases based on the HIX ARPA Grant. These included the following:

- Application language, help text and banner updates - Improve consumer assistance activities and comfort with the customer portal by simplifying and adding help text to guide users through the application process. This will enable HSRI to address customer feedback more promptly and improve consumer notifications. **(Delivered – March 2022)**
- Changes to SEP logic when the SEP period is active - Customers will be able to access SEP easier without worker action. **(Delivered – March 2022)**
- Integrating CHAT for the HIX workflow in the Customer Portal – Delivered – March 2022)
- Adding circumstance start and end date fields for all income types - **(Delivered – June 2022)**
- QHP Easy Enrollment - Provide an option for individuals terminated from Medicaid to enroll into a no-cost or low-cost Qualified Health Plan automatically or as determined by HSRI. **(Delivered – June 2022)**

### ***Other Medicaid***

Several additional Medicaid enhancements are also being addressed in the September 2022 Major Release. They include:

- Qualified Non-Citizens being subjected to 5-year Bar
- Medicaid applicants allowed to enroll while waiting for SSN verification

**Scheduled: September 2022**

### ***Home and Community Based Services (HCBS) Planning***

Work will commence in the 4<sup>th</sup> quarter of FFY 2022 to begin planning for the HCBS Expansion. This preliminary assessment work will inform the requirements and scope of DDI work in FFY 2023 that is included in the new DDI IAPD. This is not a duplicate of what is included in the new DDI IAPD for UHIP for work commencing on or after October 1, 2023.

**Scheduled: August/September 2022**

## ***PHE Unwinding***

As the teams continue to plan for the PHE Unwinding, they have gained insights from ongoing meetings with CMS and other states in terms of additional guidance on how to best manage customers through the recovery phase. Based on this guidance, the team has identified additional enhancements and other work that will be critical to complete in preparation for the unwinding. The additional items focus on reducing call volumes, providing ongoing communication to support customers throughout the renewals process and simplifying the renewals process.

<b>PHE Unwinding Business Outcomes</b>	<b>Why It is Important to Do this Work</b>	<b>Timeline &amp; Releases Support the PHE Unwinding Plan</b>
Improve Customer Access & Usability of Customer Portal	In order to increase adoption rates of the Customer Portal, we need to improve account access which at times prevents customers from being able to login	<ul style="list-style-type: none"> <li>• Allow customers to reset usernames and passwords more easily using a one-time password <b>(Sept /Nov 2022)</b></li> <li>• Improve help feature to better support customers through the login process <b>(Nov 2022)</b></li> </ul>
Improve Customer Experience & Ensure Access to Benefits	More proactive communication with customers throughout the process will reduce calls and help provide more timely renewals	<ul style="list-style-type: none"> <li>• Enable push text notifications when renewal packets are received <b>(Nov 2022)</b></li> <li>• Add banner messages and other pertinent renewals information to the Customer Portal <b>(Nov 2022)</b></li> </ul>
Improve Renewals Process & Simplify Application Process	Simplifying the renewals process will reduce calls and will lead to more timely renewals processing	<ul style="list-style-type: none"> <li>• Archive applications to eliminate redundancy <b>(Phase I – Nov 2022)</b></li> </ul>
Improve Accuracy of Customer Contact Information & Reduce Returned Mail	Having accurate contact information is critical to serving our customers throughout the PHE Unwinding to ensure they do not lose access to benefits. These changes target processes within the mail room and back-office handling of returned mail.	<ul style="list-style-type: none"> <li>• Improvements to automation regarding mailing address validations, processing forwarding addresses and handling returned mail more effectively <b>(Phase I – Nov 2022)</b></li> <li>• Facilitate email, text and robo call campaigns to obtain updated contact information from customers <b>(Ongoing per communication plan)</b></li> </ul>

### **Enhance HealthyRhode Mobile App**

During its pilot phase in the fall of 2020, the HealthyRhode mobile app allowed targeted customers the ability to confirm their benefits, check their EBT card balance and upload required documents. A new feature was added in the fall of 2021 to allow health coverage invoices to be viewed and paid via the app. The app is now available to all customers and ratings have been extremely positive. However, further expansion of the functionality is required to reduce the need for in-person visits and phone calls especially during the PHE Unwinding. The new features will be supported by a robust marketing campaign to help drive up adoption and usage of the application. The State believes the Mobile App is very powerful channel to reach our customers which will be extremely important during the PHE Unwinding.

Mobile App Business Outcomes	Why It is Important to Do this Work	Planned Sept / Nov 2022 Release Scope
Improve Customer Access & Usability	In order to increase adoption rates of the Mobile App, we need to improve account access and document uploads which at times prevents customers from being able to login or upload forms	<ul style="list-style-type: none"> <li>• Allow customers to create accounts, recover their usernames and reset passwords</li> <li>• Also allow users to use facial recognition and fingerprints to login to the mobile app</li> <li>• Allow PDF verification documents to be uploaded</li> </ul>
Allow Easy Renewal Option	Reduce call volumes by encouraging customers to submit their renewals via the Mobile App	<ul style="list-style-type: none"> <li>• Allow customers to submit their renewals through the Mobile App if they have minimal or no changes to report</li> </ul>
Provide Customers with Key Updates & Information	Pushing automatic notifications to customers through the Mobile App, will help keep them informed regarding their benefits and it will nudge them when needed to ensure they take any necessary action to avoid loss of benefits	<ul style="list-style-type: none"> <li>• Enable Push notifications including notifying customers of key dates and information pertinent to their case</li> <li>• Push reminders when specific actions are required by customers</li> </ul>
Keep Customers Informed of the Status of their Applications or Renewals	Reduce call volumes by allowing customers to receive key status updates via the Mobile App so they are better informed of what is happening with their case	<ul style="list-style-type: none"> <li>• Allow customers to receive updates on the status of their applications, recertifications or verifications</li> <li>• Also include access to Medicaid ID information</li> </ul>

<p>Improve Accuracy of Customer Contact Information &amp; Reduce Returned Mail</p>	<p>Provides an easy method for customers to update their contact information which will reduce return mail and will enable push emails and text reminders. Having accurate contact information is critical to serving our customers throughout the PHE Unwinding to ensure they do not lose access to benefits</p>	<ul style="list-style-type: none"> <li>• Allow customers to update contact information including mailing address, email and opt in preferences for text reminders</li> </ul>
<p>Continue to Expand Adoption of Mobile App</p>	<p>Features will continue to be added to the app in alignment with Agency needs and ongoing customer feedback of the HealthyRhode app</p>	<ul style="list-style-type: none"> <li>• Some proposed additional features include enhanced EBT features (i.e., card replacements, digital EBT card), search for PCP, customer to-do list, viewing digital notices)</li> </ul>

## **RIBridges – Technical**

### ***Application Framework Upgrade***

Two third party Java frameworks that are used in the RIBridges application code base have reached end of life (EOL): Hibernate was EOL on 1/1/2017 and Spring was EOL on 12/31/2020. In order to receive new security and bugfix patches from the framework authors, the development team will be implementing the latest version of these frameworks in March of 2022. The outdated frameworks will be removed from the codebase.

**Delivered: March 2022**

### ***Enterprise Service Bus Upgrade***

Mule ESB is used to serve critical application communications internal to RIBridges as well as real time communications and file transfers to the system's trading partners. Currently, the product is running on a community version that, following the product's acquisition by Salesforce, has not been receiving regular security and bugfix patches. To maintain patch compliance and attain a higher level of incident support, the Product will be upgraded to the latest version and migrated to an enterprise license. This is planned for June 2022.

**Delivered: Phase I was implemented in June 2022.**

**Scheduled: Phase II of this upgrade is scheduled for September 2022.**

### ***Content Management Upgrade***

The current content management platform, Hyland ImageNow, reached end of life on 12/31/2017. This product is used for the scanning, indexing, and viewing of customer records and is tightly integrated with our applications in order to provide a seamless workflow for workers. The State has been under extended support from the vendor on the agreement that we will be moving to the latest solution in 2022. We have planned a product upgrade or migration to a new solution in September of 2022.

**Initially Scheduled for September 2022. This schedule is currently under review. If additional time is required, it may be delivered in a Major Release in late 2022 or in early 2023.**

### ***Notice Generation System Upgrade***

OpenText Exstream is used to design and generate paper notices for mailing to RIBridges customers. The template designer has been end-of-life since 6/30/2019; the notice generation application went end of life on 6/30/2021. Both applications will be upgraded September of 2022 in order to continue to receive security patches and bug fixes.

**Scheduled: September 2022.**

## **Project Management**

### **Facilitate Execution of New M&O Contract**

Although the new M&O contract will remain with Deloitte, there was work to be done to align to the new terms of the contract. An overview of the changes resulting from the contract is provided in table 3c.

*Table 3c. Areas Impacted by New Contract*

<b>Areas Impacted by Rollout of New Contract</b>		
<b>Focus Areas</b>	<b>Description of Change(s)</b>	<b>High-Level Impact</b>
<b>Scope of Services</b>	<ul style="list-style-type: none"> <li>Deliverables explicitly defined directly in the contract</li> <li>Deloitte is to assume responsibility for overall security scanning</li> </ul>	<ul style="list-style-type: none"> <li>Will require a transition from IV&amp;V vendor (CSG) to Deloitte</li> <li>Recent IV&amp;V contract was adjusted to account for the transition</li> </ul>
<b>Performance Management</b>	<ul style="list-style-type: none"> <li>Updated definitions of Severity Levels</li> <li>Added new and enhanced existing SLAs, KMs &amp; KPIs</li> <li>Aligns penalties for missed SLAs to severity levels</li> </ul>	<ul style="list-style-type: none"> <li>Process changes will be required for Deloitte to achieve some targets (ie. Time-to-Market)</li> <li>Penalties will not be assessed until 10/1 or later</li> <li>Existing SLAs need to continue to be measured until then</li> <li>Specific details for some of the measures require additional discussion &amp; approval</li> </ul>
<b>Value Add Services &amp; Travel Give Back Hours</b>	<ul style="list-style-type: none"> <li>3,000 hours will be available to the State annually to invest in value-add services</li> <li>800 hours per month (9,600 annually) will also be available</li> </ul>	<ul style="list-style-type: none"> <li>The new contract provides additional hours for application enhancements</li> </ul>
<b>Total Cost of Ownership</b>	<ul style="list-style-type: none"> <li>Deloitte is leveraging Continuous Improvements (CIs) in order to reduce staffing levels and total cost of ownership</li> </ul>	<ul style="list-style-type: none"> <li>The State will continue to work with Deloitte to implement Cis through the Center of Process Excellence (CPE)</li> </ul>

#### *Scope of Services*

As part of the new contract, the Scope of Services has been extended to include responsibility for security scanning that is currently being done by CSG, the State’s IV&V vendor. Deloitte Consulting will provide expanded support and maintenance of RIBridges security operations, as outlined in the July 2021 M&O Contract, to meet the State’s objective to protect the data in RIBridges. The current team actively maintains and supports the system security components and processes, including the identity and access management system (IAM), security monitoring (SIEM), MARS-E2/IRS compliance, and vulnerability management. The expanded team is expected to increase the maturity level of security operations and to maintain federal and state security & privacy compliance. The state will continue to provide a dedicated ISSO to oversee the team and assure the security objectives are met.

With the new contract, system security testing and scanning has been fully transitioned to the Deloitte team. The team has onboarded and is consuming baseline scanned files into the tools (Nessus, Fortify, Burpe Suite) to complete the initial first month scans. The team’s approach to testing and scanning will include measuring the security of the application from the perspective of a non-privileged malicious user as well as an authorized user with malicious intent. Tools will be automated, but manual processes will still be used to validate and perform penetration testing to identify true vulnerabilities. The expanded

Deloitte team will work with the state to identify potential risks in the application and associated infrastructure and prioritize corrections within CMS guidelines.

**Performance Management**

In the M&O RFP, the State shared specific performance measures by which the team would be evaluating vendor performance under the new contract. A detailed summary of these measures can be found in Appendix H and includes Service Level Agreements (SLAs), Key Measures (KMs) and Key Performance Indicators (KPIs). The list of these measures is also shown below in table 3d. Please note the following:

- “New” – indicates a new measure not tracked previously under CA-47
- “Modified” – these measures existed under CA-47 but are being revised under the new contract
- “Existing” – these measures existed under CA-47 and are not changing under the new contract

**Table 3d. New Contract Performance Measures**

New Contract: SLAs, Key Measures, and KPIs			
#	Type	Title	Change?
1	SLA	Production System Availability	Existing
2	SLA	Incident Resolution Time	New
3	SLA	Business Continuity & Disaster Recovery (BC&DR)	Existing
4	SLA	“Time to Market” for problem tickets	New
5	SLA	Application Performance	New
6	SLA	Recon Discrepancies - HSRI and MMIS	Modified
7	SLA	Defects Detected in User Acceptance Testing	Modified
8	SLA	Security SLA – Defect Injection, Controls, Patching, and Exploits	New
9	SLA	Batch Jobs Success Rate	Modified
10	SLA	Interface Success Rate	Modified
11	KM	Adherence to Release Schedule and Scope	New
12	KM	Accuracy of Rough Order of Magnitude (ROM) Estimates	New
13	KM	Staffing Attrition Rate	New
14	KM	Production Infrastructure Utilization Rates	New
15	KM	Level of Test Automation	New
16	KM	Incident Inflow Volume	New
17	KM	Problem Ticket Backlog	New
18	KM	Root Cause Analysis Delivered On-Time	New
19	KM	Incident Response Time (Severities 1 and 2)	New
20	KPI	DHS SNAP and Cash Benefits Timeliness	Existing
21	KPI	Medical Benefits Timeliness	Existing
22	KPI	SNAP and Cash Benefit Accuracy	Existing
23	KPI	Medical Benefits Accuracy-1	Modified
24	KPI	Medical Benefits Accuracy-2	Modified
25	KPI	QHP Eligibility and Enrollment Accuracy	Existing
26	KPI	Worker Portal Application Processing	Existing
27	KPI	Self-Service Portal Application Processing	Modified
28	KPI	Client Notice Accuracy and Timeliness	Existing

**SLA:** Describes the expected Information Technology (IT) service specification, service level targets, and penalties if any targets are missed

**Key Measures:** Describes the expected IT service specification and service level targets. However, there are no penalties if any targets are missed

**Key Performance Indicators (KPI):** Describes a business operations metric specification and service level that measures the efficiency and effectiveness of the vendor’s performance over time to achieve the State’s business outcomes.

Once the agreement was finalized, the State worked with Deloitte to create detailed specification documents for each of these performance measures. CSG, the State’s IV&V partner, assisted with the review of these documents and provided guidance to the State before they approved through our formal document workflow process. Once the specifications were in place, Deloitte developed the required reporting changes to begin tracking the new or modified measures and will incorporate into all relevant governance processes including our Contract Management meetings. Please note that there was a transition period for some of the SLAs as they may require process changes and baseline measures to be established. In each case, the State has worked with Deloitte to develop an acceptable transition plan. All existing measures will remain in place in the interim.

One of the most significant changes to the performance measures includes updated severity level definitions for incidents and problem tickets as well as more explicit targets for Deloitte’s initial response, the completion of the root cause analysis and the resolution. A summary of these changes is



shown in table 3e. The purpose of tightening these specific measures is to work with the Vendor to continue to innovate their existing incident and problem management practices and their maintenance SDLC in order to further improve overall responsiveness and to reduce time to market. As we continue to experience very low incident and defect backlogs, it gives the State an opportunity to set even higher standards for performance.

Table 3e. New Contract Performance Measures

Severity Definitions + Response Times (Incidents & Problems)			NEW
Severity	Definition	Ex:	
<b>1 (Fatal)</b>	The production system is down, or mission critical functionality is inoperable. Users are unable to reasonably perform their normal functions. The situation is considered an emergency.	portal outage, network outage, critical system component outage (eligibility, worker inbox)	
<b>2 (Serious)</b>	The system is usable but severely limited. Significant impact to application functionality, data, or performance which is resulting in a high number of users being unable to perform their normal functions or is resulting in a high number of customer benefits being blocked/incorrect. The is either no workaround or it is cumbersome to business operations.	scanning outage, connectivity to critical interface (e.g. FIS, MMIS) is down, notice generation not working, eligibility determination blocker or data issue resulting in large impact, external verification source unavailable	
<b>3 (Moderate)</b>	Moderate impact to application functionality, data, or performance resulting in multiple users being impacted in their normal function or resulting in a high number of customer benefits being blocked/incorrect. For application functionality issues, a readily apparent and State approved workaround exists. For performance issues, the degradation is minor and is not rendering the normal functions of the system unusable or causing a significant disruption to users.	incorrect benefit calculation for limited/very specific scenario (a small subset of a program), incorrect screen validation requiring workaround, incorrect notice fragment for limited/specific scenario	
<b>4 (Minor)</b>	Minor loss of application functionality resulting in limited or no impact to users being able to perform their normal function. A workaround is not required as a result of the limited impact.	typo with no material impact, display alignment issue	

Severity	Problems				Incidents			
	1	2	3	4	1	2	3	4
Initial Response	N/A	N/A	N/A	N/A	15 mins	1 hr	2 days	2 days
Triage/RCA	1 wk	1 wk	2 wks	2 wks	30 mins	2 hrs	2 days	2 days
Resolution	3 wks	3 wks	3 mths	3 mths	4 hrs	8 hrs	5 bdays	20 bdays
Service Level	98%		95%		100%	98%	95%	90%

In addition to the new SLAs for incident and problem management, the team has also developed tighter controls around batches and interfaces and overall systems performance. Key Measures (KMs) have also been added as new performance measures. Although there are no penalty clauses associated with these measures, they will be monitored closely and failure to meet targets will result in corrective action plans and other required escalations

Performance Metrics defined in the new contract have been implemented and the State’s newly hired Contract Manager is overseeing these key measurements on an ongoing basis.

*Value Add Services and Travel Give Back Hours*

The new contract provides additional hours for application development on an annual basis. These hours will not be charged as hourly services. The State will have discretion in terms of how these hours will be spent. These additional hours were included in our Annual Planning process for FFY 2022.

- 3,000 hours will be available to the State annually to invest in value-add or other services
- 800 hours per month (9,600 annually) will also be available

*Total Cost of Ownership*

In their response to the M&O RFP, Deloitte provided a list of Continuous Improvement opportunities (CIs) to drive more efficiencies and automation and to reduce the overall total cost of ownership. The State is already actively working with the Vendor on many of these initiatives through the Center of Process Excellence. A few examples of the CIs the team has already implemented include:



- User Session Based Time travel
- Reduce nightly batch execution time
- Automate Dry Run Reporting
- Automate Production Batch Schedule
- Single-click Build and Deploy
- Single-click Data Refresh
- Runbooks for component-specific patching process

As noted above, the Center for Process Excellence will continue to prioritize these opportunities and will provide the overall governance framework to determine how these CIs are implemented including obtaining any associated Executive level input or decision making.

### ***Continue to Refresh Governance Framework***

The State EPMO is continuing to lead Phase 2 of the Governance Refresh initiative as outlined in table 3f. We recently updated our document workflow to address a series of “pain points” which were identified by the business. These changes have already greatly improved the flow of documents and have reduced the effort required by the State in reviewing and approving changes.

The team is currently working on changes to the Leaderboard Process for BRRs and SRs. By leveraging additional features in JIRA, we expect to be able to deliver a customer friendly “drag and drop” functionality to the business. In addition, we also expect to simplify and reduce the unnecessary overhead associated with promoting service requests (SRs) through the prioritization process. The drag and drop leaderboard process has been implemented and the new SR process is being piloted in July 2022.

Another focus of the team will be to review the Theme Team model to identify specific recommendations for improving and streamlining the model. In addition, we will be assessing other governance meetings leveraging the same template we used in Phase I to also identify areas for improvement.

Lastly, we continue to look at all of our administrative processes to determine where we can gain efficiencies through automation or process changes.

Table 3f. Phased Approach to Governance Refresh

Governance Refresh Scope			
The team is reviewing the major components of the existing project governance framework as part of the overall refresh effort. Recommendations will be phased in over at least 2-3 phases.			
Executive Interviews & Reviews	Agency Lead Interviews	Internal PMO Sessions	Joint PMO Sessions
Phase 1 ✓		Phase 2	Phase 3
<ul style="list-style-type: none"> <li>Executive &amp; Management-Level Governance Meetings (i.e. Exec, IRC, EPR, MPC, Agency Leaderboard, Joint IT)</li> <li>Risk / Issue Management &amp; Escalation</li> <li>Strategic Priorities &amp; Business Outcome Tracking</li> <li>Management of Process Improvement Initiatives</li> <li>Metrics &amp; Reporting</li> </ul>		<ul style="list-style-type: none"> <li>Leaderboard Process (BRRs, SRs)</li> <li>Other Governance Meetings (ie. RPC, DRB, OCC, TCCB)</li> <li>Theme Meetings</li> <li>Document Workflow Management ✓</li> <li>Metrics &amp; Reporting</li> <li>Admin &amp; Finance Processes</li> </ul>	<ul style="list-style-type: none"> <li>TBD – any remaining opportunities for improvement</li> </ul>

### Improve Time to Market of SDLC

As noted above, in order to meet the more aggressive SLAs for problem tickets, the team will be working on refining the SDLC to improve time to market for problem tickets. As automation of testing expands and the capability of performing continuous regression testing, wait times between phases such as SIT and UAT can be reduced. The team is currently reviewing a proposal to pilot some improvements to Dev and SIT in the September '21 patch release. We expect work in this space to continue throughout FFY 2022 as the team phases in various improvements over time.

### Transition UAT to State In-House Model

Based on the significant progress that has been made in improving the quality of development and SIT, the Executive Committee has approved a new model for UAT which involves transitioning responsibility for UAT from KPMG to the State in multiple phases over the next 12 months. See table 3g for an overview of the transition plan and timeline.

As part of the plan, the State will onboard nine contract resources (7 UAT Agency Testers and 2 Testing Automation Engineers) by the end of 2021. Until then, KPMG will continue to support all UAT needs until the transition to the new resources begins in early 2022. As part of the transition, the State will also look to implement other UAT improvements including risk based UAT coverage for problem tickets, more collaboration in SIT phase, increased ownership of business resources in testing and leveraging continued improvements to automated regression testing capabilities.

This new model represents a more cost-effective solution for the State while maintaining a commitment to quality across both Major and Patch releases.

Table 3g. UAT Transition Plan

Draft: For review and discussion purposes only

Activity	Owner	Details	Pre	July	Aug	...	Dec	Jan	Feb	Mar	Apr	→
Align w/ EC on UAT Transition Plan/Approach	Jim/Avinash	<ul style="list-style-type: none"> <li>TODAY: Align on plan &amp; duration of KPMG extension</li> <li>TODAY: Align on target resource #</li> <li>TODAY: Align on draft governance model</li> </ul>										
Execute KPMG Extension	Jim/Avinash/ UHIP Finance	<ul style="list-style-type: none"> <li>4/30 Federal submission including sole source justification</li> <li>7/1 start date for new amendment</li> </ul>										
Identify Tester Procurement Vehicle	DoIT & Agencies	<ul style="list-style-type: none"> <li>Meet with purchasing to understand vehicle options (RFP, KS, Mini-bid, existing contact)</li> <li>Obtain Purchasing, Federal, &amp; EC approval</li> </ul>										
Procure Agency Testers & Automation Engineers	DoIT & Agencies	<ul style="list-style-type: none"> <li>Identify, interview, hire testers</li> </ul>										
<b>KPMG CA Phase 1 – Continue UAT Testing</b>	KPMG & Avinash	<ul style="list-style-type: none"> <li>Ongoing UAT support for CA47, CA51, CA52</li> <li>See KPMG Draft SOW Slides in Appendix</li> </ul>										
<b>KPMG CA Phase 2 – Reduced UAT &amp; Transition Execution</b>	KPMG & Avinash	<ul style="list-style-type: none"> <li>Support UAT w/ reduced coverage</li> <li>Execute transition support activities</li> <li>See KPMG Draft SOW Slides in Appendix</li> </ul>										
<b>KPMG CA Phase 2 – Exit Transition</b>	KPMG & Avinash	<ul style="list-style-type: none"> <li>Exit Transition</li> <li>See KPMG Draft SOW Slides in Appendix</li> </ul>										
<b>KPMG CA Phase 3 – As needed post-transition support</b>	KPMG & Avinash	<ul style="list-style-type: none"> <li>Limited "over the shoulder" post-transition support</li> <li>See KPMG Draft SOW Slides in Appendix</li> </ul>										
Ongoing UAT w/ New Structure	Avinash & Agencies											

**Executive Committee confirmed a 12-month KPMG extension (July 1, 2021 – June 30, 2022) with three phases of support:**

- Continuation of UAT (business as usual) to support CA51, CA52, etc. – **6 months**
- Reduced UAT Coverage and Execution of Transition – **3 months**
- Post-Transition As-Needed Support – **3 months**

KPMG Contract Ends June 2022

New BAU for UAT

The State has implemented the UAT State In-House Model and KPMG has transitioned from the project effective June 30, 2022.

### Continue to Shift Manual Reporting to Online Dashboards

The Joint PMO Team will be evaluating the reporting needs across the program in order to retire reports that no longer provide value while also replacing critical reports with online dashboards when possible. This effort supports the teams focus on applying “Lean” concepts to running the program which include reducing time spent on non-value activities, eliminating redundancies and building quality into all aspects of the governance framework. We started this activity in early 2021 and expect to rollout changes throughout FFY 2022.

One key example of a change we’ve recently incorporated into our MPR meetings is the new online dashboards for reviewing and improving release scope. This allows updates to be captured real-time in JIRA where meeting participants can see the changes “live”. In the past, the meeting was facilitated via PPT decks which required a significant amount of meeting prep and follow up to transfer decisions from meeting notes back into JIRA. This change has also allowed us to produce a weekly dashboard to capture all of the approved release changes directly from JIRA. A sample of this new JIRA dashboard can be viewed in table 3h.

Rhode Island Unified Health Infrastructure Project (UHIP) Medicaid Eligibility and Enrollment (EE)  
Implementation Advanced Planning Document (IAPD)  
OMB Approval Number: 0938-1268

**Table 3h. MPR Release Scope Dashboard**

Two Dimensional Filter Statistics: Approved Release Scope BRRs/Problem Tickets														
Issue Type	7.28	7.29.1	7.30	7.30.1	7.31.1	7.32	7.32.2	7.33	7.35	7.34.1	7.34.2	7.35.1	7.36	T:
BRR	0	0	0	0	0	0	0	0	6	0	8	2	8	24
Problem	1	1	1	1	1	2	1	1	55	1	47	49	0	157
<b>Total Unique Issues:</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>1</b>	<b>1</b>	<b>61</b>	<b>1</b>	<b>55</b>	<b>51</b>	<b>8</b>	<b>181</b>

Grouped by: Fix For Versions (all) Showing 2 of 2 statistics.

Filter Results: Release Schedule									
Summary	Solutioning Start Date	Solutioning End Date	Development Start	Development End	SIT Start	SIT End	UAT Start	UAT End	Production Deployment ↑
7.34.2	15/Feb/21	02/Apr/21	15/Mar/21	16/Apr/21	19/Apr/21	14/May/21	14/Jun/21	02/Jul/21	16/Jul/21
7/16 IM Release	05/Apr/21	23/Apr/21	03/May/21	28/May/21	31/May/21	18/Jun/21	28/Jun/21	16/Jul/21	16/Jul/21
7/29 IM Release	12/Apr/21	07/May/21	10/May/21	21/May/21	24/May/21	18/Jun/21	28/Jun/21	23/Jul/21	29/Jul/21
7.35	15/Mar/21	30/Apr/21	12/Apr/21	21/May/21	24/May/21	18/Jun/21	05/Jul/21	06/Aug/21	20/Aug/21
8/20 IM Release	03/May/21	28/May/21	31/May/21	25/Jun/21	28/Jun/21	16/Jul/21	26/Jul/21	13/Aug/21	20/Aug/21
7.35.1	03/May/21	18/Jun/21	31/May/21	02/Jul/21	05/Jul/21	23/Jul/21	09/Aug/21	27/Aug/21	03/Sep/21
9/17 IM Release	31/May/21	25/Jun/21	28/Jun/21	23/Jul/21	26/Jul/21	13/Aug/21	23/Aug/21	10/Sep/21	17/Sep/21

Filter Results: July 2021 Patch Release (R7.34.2) Proposed Scope Changes											
No matching issues found.											

Filter Results: July 2021 Patch Release (R7.34.2) Approved Scope											
T ↑	Key	Fix Version/s	Scheduled Release Date	Proposed Release Date	Summary	Themes (Issue Categories)	Status	OPA Impact?	Expected SIT Delivery Date	Expected UAT deli	
<input checked="" type="checkbox"/>	RIB-104495	7.34.2	16/Jul/21	16/Jul/21	MA SSI-create user role with ability to update demographics	MPP	UAT PASSED	No			
<input checked="" type="checkbox"/>	RIB-138675	7.34.2	16/Jul/21	16/Jul/21	Automation of Production Batch Schedule: Set 1	Batch Exceptions	UAT PASSED	No			
<input checked="" type="checkbox"/>	RIB-111391	7.34.2	16/Jul/21	16/Jul/21	65th birthday month not being assessed for Medicaid appropriately	Medicaid Eligibility	UAT PASSED	Yes			
<input checked="" type="checkbox"/>	RIB-116854	7.34.2	16/Jul/21	16/Jul/21	Ability to update voter registration information in all modes	WP UI Screen Updates/User Experience	UAT PASSED	No			

**Implement Continuous Improvements through CPE**

As mentioned above, the Center for Process Excellence (CPE) will continue to manage the continuous improvement initiatives from ideation through implementation. The CPE maintains the list of initiatives and manages the inflight work to be sure progress is made and items ultimately get completed in a reasonable timeframe. The CPE reports on these initiatives through MPR and EPR to ensure there is transparency and visibility to these important initiatives.

In addition to the CI work, the CPE team may also be called upon to conduct release retrospections or to perform root cause analysis for specific issues likely associated with PMOCs.

The structure and framework of the CPE allows the joint teams to balance the day-to-day normal activities along with these important improvement initiatives. The CPE was a very important addition to our overall governance framework and this team will continue to play a key role throughout FFY 2021.

## 4 REQUIREMENTS ANALYSIS, FEASIBILITY STUDY, AND ALTERNATIVE CONSIDERATIONS

The Annual Release Plan for FFY 2022 was finalized early in the fourth quarter of FFY 2021 following the completion of the annual planning processes described in Section 7 of this document. This plan will allow the State to continue to maintain system compliance and to continue to capitalize upon the stability of the system by investing in strategic enhancements aimed at improving the customer experience, expanding access to benefits, increasing worker productivity and efficiency as well as driving down the cost of ownership through modernization of the system. The plan was also built around the business outcomes identified as the top priorities for continued investment in FFY 2021. A high-level summary of the business outcomes was provided in Section 3. It also supports the enhancement work being funded by special grants such as the PTIG SMS Text Messaging, the SNAP Reinvestment Plan and the Child Care Portal. In addition, the plan accounts for activities that will be required to fully recover from the system mitigations implemented in response to the COVID-19 pandemic since 2019.

The FFY 2022 Release Plan will continue to be maintained through the governance structure that is described in detail in Section 7 of this document and in Attachment J. All funding decisions will continue to be made by the Executives via the Change Review Board (CRB). Please refer to table 4a for a draft of the high-level release plan:

Table 4a. FFY2022 DRAFT Release Plan

RI Bridges Release Plan through September 2022 <span style="float: right; font-size: small;">Draft: For review and discussion purposes only</span>															
DRAFT	2021						2022								
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
Parallel Releases	7.34.2	7.35	7.35.1	7.36 + 7.36.1	7.36.2	7.37 + 7.37.1	7.37.2	7.37.3	7.38 + 7.38.1	7.38.2	7.38.3	7.39 + 7.39.1	7.39.2	7.39.3	7.40 + 7.40.1
Release Type	Limited Patch	Major	Patch (Pilot)	Major + Patch	Limited Patch	Major + Patch	Patch	Patch	Major + Patch	Patch	Patch	Major + Patch	Patch	Patch	Major + Patch
BRR Capacity	550	Major + 550	700	Major + 1,800	0	Major + 2,200	1,100	1,100	~8,500 + 1,100	1,100	1,100	~8,500 + 1,100	1,100	1,100	~8,500 + 1,100
SR Capacity	567	567	567	567	567	567	567	567	567	567	567	567	567	567	567
IM Capacity	417	417	417	417	417	417	417	417	417	417	417	417	417	417	417
Tech Upgrades	Storage + Nessus		Cisco + vSphere						App Framework				Mule	Physical Server Replacement	Image Now + OpenText Extream
Application Enhancements	RS Client Enrollment		MA Plan Selection SMS Text Mobile SNAP Reinvest.		SNAP Reinvest. One Touch		Audit Findings CMS Buy-In RIW Leg.			MA Plan Selection LIHEAP MPP SNAP ABAWD		LTSS Outcomes HCBS Waiver Logic RiteShare			
COVID Recovery	Ideate	Implement Prioritized Activities + Planning			Outreach + Comms		Terminations + Renewals			Continued Renewal Cycles					
Key Business Events			SNAP FPL	AR	Open Enrollment	COLA	1095	CCAP/MA FPL					SNAP FPL	AR	

The release plan assumes there will continue to be Major Releases and Patch / Maintenance Releases. The alignment of the business outcomes to specific releases is still being discussed there is general alignment with the release schedule and the types of releases distributed across the plan. All aspects of this plan will continue to be assessed by the Joint IT Team via RPC and CPE and all BRR scope will be approved through the Change Review Board (CRB). The financial feasibility of the plan was verified by the State finance team and is detailed in sections 9 and 10 of this document.

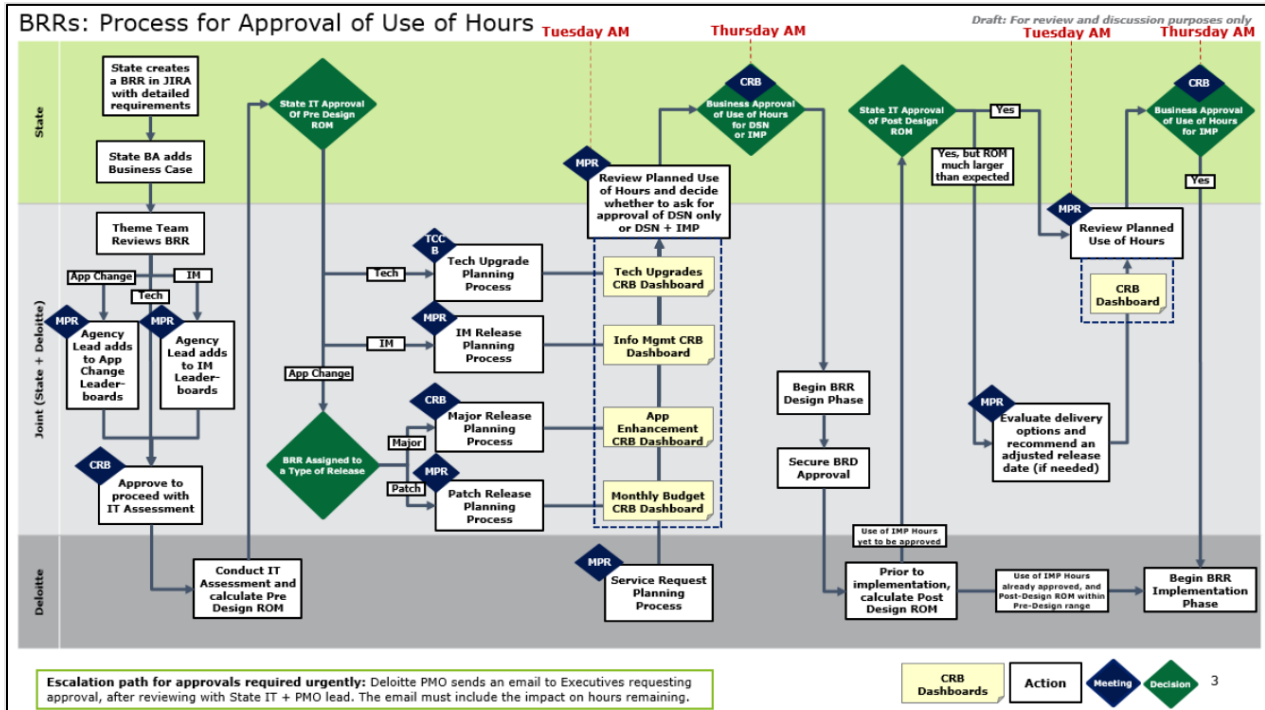
## 5 COST BENEFIT ANALYSIS

The State of Rhode Island is committed to implementing this project in compliance with federal and State law and regulation for UHIP programs served by the RIBridges system. An overall cost analysis of the UHIP project was conducted at the project inception. The State's commitment to this project has not changed or wavered.

In addition, to the overall cost analysis that was originally performed, the State has also made a commitment to responsible spending and financial management throughout the life of the project. To this end, a robust project governance structure has been developed that allows for prioritization and cost analysis at each step in the project plan and annual budget development. This governance structure is discussed in much greater detail in section 7; however, the following examples are provided as evidence of this structure in relation to cost analysis and sound financial management of the project.

1. The State continues to actively manage all of the vendor contracts associated with UHIP. Most recently, the State participated in a procurement process for the M&O contract. This was an extensive effort that resulted in significant savings for the State. In addition, the terms of the contract allow for additional control around performance management.
2. In addition to the overarching assessment of the system integrator costs, the State's IT governance process assesses costs of each business request that is brought forward through the governance process in the context of the annual budget and the annual cost allocation plan. The best example of this cost analysis can be found in the major release planning portion of the process. The following diagram demonstrates the overall process:

Table 5a. Major Release Planning Process



As part of the Annual Plan, BRR scope aligned to the Major Releases has already been approved by the Executive Committee. However, during the planning phase of each Major Release, the Executive Committee will re-confirm their business outcomes for the release. If a change or shift in priorities occurs, the Executive Committee may bring forward a potential scope change and direct the Joint IT Team to assess proposed change(s) to the Major Release in order to determine the impact within the annual budget and the currently approved cost allocation plan. Based on the assessment, the UHIP Executive Committee may approve a change to the Annual Plan for that specific Major Release. This process ensures that when release scope is set for each major release it not only complies with the functional themes that have been funded for the current fiscal year that it also complies with the established budget and cost allocation.



## 6 NATURE AND SCOPE OF ACTIVITIES

RIBridges is a complex, integrated eligibility system that combines eight major programs and more than 15 sub-programs into a single global system. As a result of both the inherent complexity and the initial system delivery issues, contracted resources continue to be necessary to support implementation and operations. These resources will be needed for development support and ongoing efforts to keep the system stable while also investing further in strategic business outcomes and system modernization. The State will continue to remain vigilant in its assessment of ongoing contractor needs and in their overall vendor management.

Contractor support is necessary to ensure a quality product is received from the SI vendor (Deloitte), to mitigate system issues until they can be fully addressed, and support State staff whose primary jobs are not technological, but rather business or program focused. It is critical that the State have appropriate levels of oversight of Deloitte’s work to ensure quality. State staffing and internal resource needs are addressed in section 8 of this IAPD-U.

The State continues to review of all contract support for the UHIP project and updates the plans for contractor usage going forward. During FFY 2020, the State developed procured IV&V services through a public bid process and developed the M&O RFP in anticipation of the current SI contract ending in 2021. The M&O RFP resulted in an award to Deloitte effective July 1, 2021. UHIP has utilized the State master price agreement with Knowledge Services to procure staff support positions. This master price agreement is based on a procurement from the National Association of State Budget Officers. Please see Attachment E for a full list of the scopes of work for the Knowledge Services vendors.

COVID work has been included in this request for services planned for Deloitte system mitigation and related recovery. . COVID work is detailed in subsequent sections. The following table shows the mapping of service areas to the IAPD-U project components framework. In addition, Attachment D, provides a mapping of contract components to these respective service areas.

Similar to last year’s submission, the contractor support is organized into four service areas: UHIP IT Management; Agency Support; Executive Project Management Office (EPMO); and Finance and Administration. These service areas have also been mapped to the overall framework utilized in this IAPD-U for results, needs, and scope of activities. The following table shows the mapping of service areas to the IAPD-U project components framework.

*Table 6a. UHIP Mapping of Service Areas to Overall Framework*

Project Components	RIBRIDGES		PROJECT OVERSIGHT	
Sub-Components	Business Functions	Technical (System Functions)	Administration	Process
Service Areas	Agency Support	UHIP IT Management	Finance and Administration	EPMO

**RIBRIDGES – Business Functions – Agency Support**

The agency support service area encompasses a wide range of activities that include both Design, Develop, and Implement (DDI) related system workarounds, issue identification, and report development as well as M&O activities for contact center and general data management. Table 3a, shown in section 3, lists all of the high-level business function plans for FFY 2022. The following table provides a high-level guide to the scope of services needed for agency support of the business functions during FFY 2022:

*Table 6b. Agency Support Service Area Details*

<b>Support Description</b>	<b>Expected Vendor(s)</b>	<b>DDI v M&amp;O</b>
IT Services for Agencies (including: incident management, leader board, etc.)	FCG and Knowledge Services (KS)	DDI
Development Operations	FCG	DDI
Report Development	FCG	DDI
Maintenance Operations	FCG	M&O
Contact Center	AHS and FCG	M&O
Data Management	FCG	M&O
Notice Production	State Services	M&O

Faulkner Consulting Group (FCG) and Knowledge Services each provide services such as the establishment of workarounds for functionality that is not yet implemented, validation of releases, and identification of gaps as reported through customer facing channels and determining appropriate solutions for those gaps.

FCG’s contract also encompasses activities such as development operations, report development and production, maintenance operations, contact center oversight, and data management.

**Contact Center**

Automated Health Systems (AHS) provides call and walk-in center services, providing telecom and Customer Relationship Management (CRM) technology to fully support the contact center activities. This includes logging escalations for system related issues and supporting issue resolution efforts, including higher volumes and longer call times related to issues with RIBridges and UAT. FCG provides oversight resources for the contact center.

**Data Management**

FCG and Knowledge Services split the task of data management for the UHIP project. Knowledge Services focuses primarily on data quality while FCG supports report development.

## **RIBRIDGES – Technical – UHIP IT Management**

Table 6c. UHIP IT Management Service Area

Support Description	Expected Vendor(s)	DDI v M&O
Architecture and Infrastructure	Deloitte	DDI
Hardware & Software	Deloitte	DDI/M&O
Application Enhancements	Deloitte	DDI
Application Maintenance	Deloitte	M&O
Fixed Price Services	Deloitte	M&O
IT Program Management	KS	DDI/M&O
UAT Testing	KPMG, AHS, & KS	DDI
Release Management	KS	DDI/M&O
Security	KS & CSG	M&O
IT Production, Batch, and Interface	KS	M&O
IT Infrastructure and Architecture	KS	DDI
IV&V	CSG	DDI
IT Data (DRB)	KS	M&O

Deloitte is responsible for DDI and M&O, including the following:

1. Architecture and infrastructure;
2. Application Enhancements;
3. Application Maintenance
4. Hardware and software;
5. Production hosting;
6. Electronic data collection and rules engine;
7. Plan management;
8. Financial management and health plan reconciliation;
9. Implementation and training support

### ***Delivery, Testing and Release Management***

While the State relies on the DDI system integrator for development, UHIP project managers maintain rigorous overall testing and UAT process to ensure that production-ready code is deployed into RIBridges. The process is intended to hold Deloitte accountable for the quality of their code and therefore, their releases. Testing oversight and execution activities include oversight of systems integrator testing activities (unit testing and SIT, and management and execution of user acceptance testing.) Executive oversight for testing is the responsibility of Lori Rota, as described in section 2.

As of February 2019, the State consolidated testing support for ease of management and cost efficiency. KPMG started providing test execution support, formerly supported by NG. Starting July 2019, KPMG began interface UAT. Knowledge Services will also provide IT staff support for UAT management and reporting. AHS will provide 4 to 8 testers. As noted above, the State has a plan to transition responsibility for UAT testing from KPMG to an in-house model. In order to support this transition, the State will be onboarding 7 UAT testers and 2 Testing Automation Engineers by the end of 2021. The State is currently evaluating procurement options with the State’s VMO however, it is likely they will be

procured through Knowledge Services as well. KPMG’s contract for UAT services ended June 30, 2022.

In addition to code fix and BRR testing, contractors also support the testing of data scripts and defect fixes required for system stability. Activities in this data support group include management and support for the Data Review Board (DRB), which has oversight and approval authority across data scripts in the system, as well as script review and testing. Management of the DRB and test and script review is provided by Knowledge Services contractors.

Release management consists of release readiness preparation and execution, including release checklists, deployment playbooks, and oversight of deployments and validations. We also emphasize business readiness for release deployment through existing governance committees like the Release Planning Committee (RPC). Management of the RPC and release planning overall is provided by Knowledge Services (KS) and validation execution is supported by KPMG and KS.

***Independent Verification and Validation (IV&V)***

CSG serves UHIP as the IV&V vendor and provides monthly and quarterly application, database and network security assessments; security source code scan and analysis and Minimum Acceptable Risk Standards for Exchange (MARS-E) 2.0 attestations. An RFP for the extension of IV&V services through October 2021 was approved by CMS and FNS in the spring of 2021. The contract also includes support for transitioning their role in security scanning and assessments to Deloitte as part of the new M&O contract.

***IT M&O***

IT M&O includes general application technical, security, and architecture maintenance. These activities are performed on a periodic basis and their planning, testing, and execution are supported in part by contract staff. KS staff support these activities as a part of the enterprise architecture group. Details of future plans for these items can be found in sections 7 and 9 of this IAPD-U.

***System Implementation Support in the Field***

Contract staff must also remain in place to provide program support for a few critical areas. This is work that is a result of system issues and will not be necessary once the system is compliant and meeting KPIs.

***Project Oversight – Administration – Finance and Administration***

Much of the work in the finance and administration service area is currently performed by State employees (listed in Attachment C) as described in section 8. Contractor services are used to support State employees as follows:

*Table 6d. Finance and Administration Service Area*

<b>Support Description</b>	<b>Expected Vendor(s)</b>	<b>DDI v M&amp;O</b>
Financial Administration and Governance	KPMG (thru 6/30/22)	DDI
Finance Budget Management	KS	DDI

**Financial Administration, Governance, and Budget Management**

EOHHS provides staffing for UHIP Finance that is accountable for contract oversight, procurement, budget and finance for UHIP. This internal staffing is supported by a small group from KPMG and KS that provides direct support for UHIP Finance in terms of report development and budget tracking. In addition, this group is supporting the implementation of the target operating model. This KPMG contract ended June 30, 2022.

The State’s Department of Administration provides procurement support in this area with a staff person in the purchasing department.

DoIT, the State’s information technology division, has hired several people who provide expertise in IT vendor procurement, contracting and oversight. Under the leadership of the State's Chief Information Officer, the Department was reorganized and a Vendor Management Office (VMO) developed. The VMO has a Statewide IT scope, serving all departments in State government. The VMO is focused broadly on strategic sourcing, contract management, vendor management, and vendor governance across all IT projects in the State. The VMO will coordinate between legal, purchasing, agencies and vendors and is currently developing a three-tiered governance model for executive, operational, and project-level oversight.

With respect to UHIP, the VMO team is working closely with UHIP Finance to coordinate the development of VMO governance in the context of UHIP governance. The VMO is taking an incremental approach as it develops its model and as capacity allows. Examples of VMO and UHIP Finance coordination include: reassignment of contract manager roles for CSG and oversight of the Knowledge Services resource management to VMO staff; agreement on roles, responsibilities, and process related to procurement and contract management; collaboration on contract review and re-negotiation; and VMO-led M&O vendor re-procurement process. In addition, the team has produced a procurement forecast for UHIP for inclusion in ongoing budgetary planning and oversight.

**Project Oversight – Process – Enterprise Project Management Office (EPMO)**

The following table provides an overview of the EPMO contract support during FFY 2022.

*Table 6e. EPMO Service Area*

<b>Support Description</b>	<b>Expected Vendor(s)</b>	<b>DDI v M&amp;O</b>
EPMO Execution and Governance Strategy	KS	DDI – 40 percent; M&O 60 percent
Business Prioritization	KS	DDI – 55 percent; M&O 45 percent
KPI Measurement & Monitoring	KPMG (contract ended 6/30/22) and KS	M&O
Theme Management	KS	DDI – 55 percent; M&O 45 percent

The State EPMO provides project management support to the theme teams, as well as to general EPMO governance activities. The primary responsibilities of the project managers (PMs) include the following:

- Monitor the inflow of new problem tickets
- Align new problem tickets to business capabilities
- Prioritize problem tickets and business capabilities
- Assess patch scope and provide feedback based on timelines
- Ensure all solutions are reviewed and approved in JIRA
- Maintain workplans to be sure tickets are solutioned according to key deadlines
- Manage the review of proposed cancellations
- Review and approve requirements for small BRRs allocated to Patches
- Identify and escalate risks and issues as needed
- Support prioritization of key enhancements
- Ensure all governance requirements are followed

Some of the key deliverables of the PMs include the following:

- JIRA Dashboards maintained for each theme
- Problem tickets aligned and prioritized to business outcomes
- Risks and Issues documented in JIRA and escalated as appropriate
- Solutions for problem tickets documented and approved
- Timely approval of document tickets
- Business cases defined as needed in BRR tickets

In addition, a limited amount of PM support is being leveraged across the PMO to assist in the day-to-day activities in partnership with the DDI vendor's PMO.

PMs are primarily sourced from KS and are aligned to the most critical themes and programs. They partner closely with the business analysts, the IT Agency Leads and the Deloitte Track Leads. The Enterprise PMO Lead, Lori Rota, is contracted through KS, and is now also the IT Program Lead. The State will engage in regular reviews of contract resourcing levels and make reductions to align capacity with demand. We will continue to evaluate existing project management resources.

The State does not currently plan to use contracted Business Analysts (BAs) to support agencies and program administrators throughout the SDLC process, but in the event that needs emerge due to project priorities, they would be aligned to programs within a Major Release.

The primary responsibilities of the Business Analysts (BAs) include the following:

- Determine business goals and success measures for each enhancement
- Document current end-to-end process steps and flows
- Identify design decisions requiring Executive input
- Develop scenarios and use cases
- Document requirements in BRRs and attach relevant documents and workflows
- Assist in prioritization of requirements
- Validate the requirements through "day-in-the-life" sessions
- Facilitate the review and approval of Business Requirement Document (BRD) and Functional

Design Document (FDD) changes

- Help to develop the Operational Readiness Assessment
- Assist in the change management activities
- Monitor post implementation issues and facilitate project acceptance

The PMO is also providing resources to assist in KPI support, which includes reviewing samples, researching failures and producing monthly updates.

BAs have been primarily sourced from FCG and KS with certain KPI support provided by KPMG. Most have prior experience working for the State of Rhode Island or in other related roles for State or federal partners. Should the need for BAs arise, the state would procure for services and follow state and federal approval processes.

### ***Planning for Long-Term Support Levels***

Since the launch of phase two, significant progress has been made to stabilize RIBridges and ensure Rhode Islanders have timely access to benefits. Further stabilization and maturity continue to be a focus, along with achieving compliance with federal and State requirements. The State developed an overall framework for resource planning that is based on system development estimates. A process is in place to assess the budget compared to actual spending and to review ongoing project resource requirements. State leadership reviews and controls costs while meeting operational needs on the UHIP project. This requires ongoing analysis and decision-making. The State will continue to explore opportunities to pare down contracts and shift to State resources whenever possible.



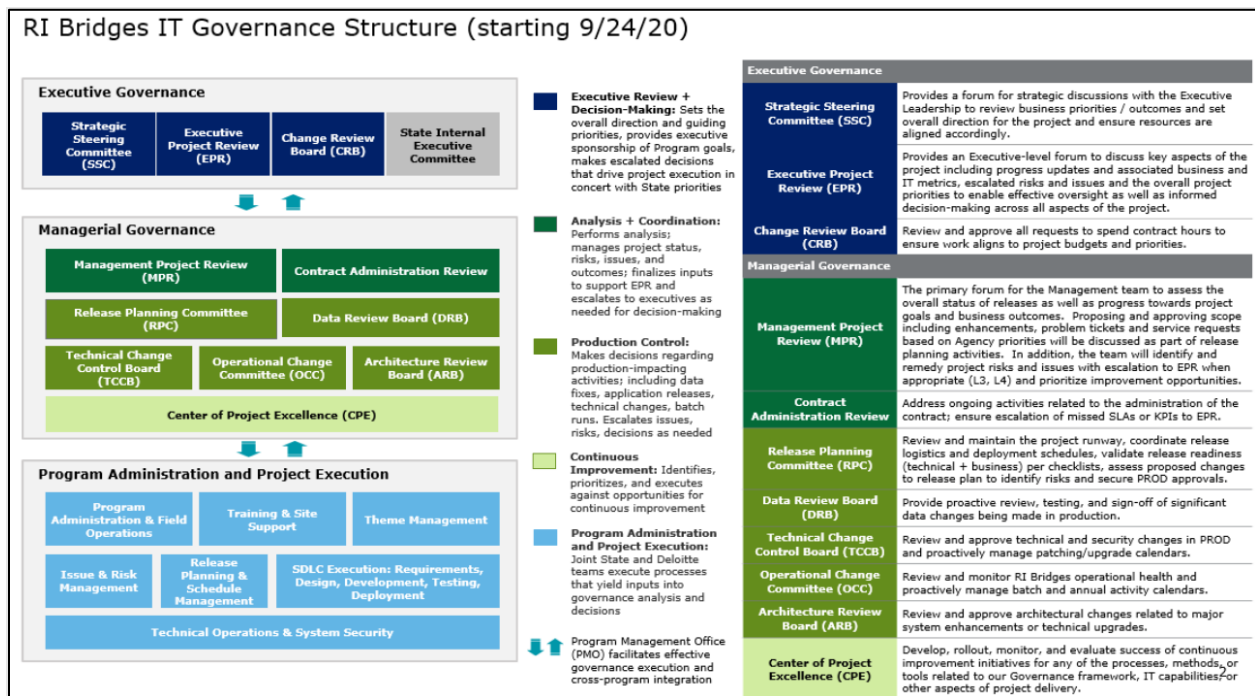
## 7 PROJECT MANAGEMENT, PLANNING, AND PROCUREMENT

As described in Section 2, the State has taken the sound project management foundations laid in FFY 2019 and continued to refine them throughout FFY 2021 as part of the Governance Refresh Initiative. The latest governance forums, artifacts, and processes are described in detail in the remainder of this section. These materials will continue to be maintained in the appropriate SharePoint repository and governed through the standard approval processes.

### Project Governance Forums

The project governance structure shown below remains in place. All aspects of the project remain fully accountable to the Executive Committee, for which the Enterprise Project Management Office Lead (EPMO) acts as a liaison. The EPMO is responsible for working with both the UHIP finance team and the technical/theme teams to ensure that the Executive Committee is properly informed and able to make educated decisions. The UHIP Executive Committee is responsible for all aspects of Contract Management and now reviews status against Contract KPIs, SLAs, Fixed Price Obligations, Hourly Services Progress, and Key Staff Changes on a monthly basis.

Figure 7a. IT Governance Structure



### Project Governance Artifacts

The State has numerous means of tracking project status and system health on a daily, weekly, and monthly basis. The following are just a few of the artifacts generated to inform key stakeholders:



- **Executive Status Report:** The weekly executive status report provides a summary-level review of the project and publishes key progress updates for the week including metrics associated with tracking business outcomes, impacted cases, and problem management. It also provides a summary of the status of each release and highlights key action items and risks or issues. A sample of the release status dashboard is shown below in table 7b.
- **Daily, Weekly, and Monthly IT Metrics Reports:** These reports contain the detailed metrics + indicators which give management-level stakeholders the information they need to closely monitor project + system health. Examples include batch execution metrics, page crash + DB error counts, application performance, as well as backlog/inflow/outflow analysis for incidents, problem tickets, and data fixes. The monthly reports are accompanied by executive-level insights into how any why the metric has changed over the course of a given month.
- **Monthly Contract Report:** The monthly contract report demonstrates adherence to every line item in CA 47, lists all work products delivered in the past month, reports against hourly-based services progress within each CRB budget, notes any key staff changes, and provides measurements for all Contract KPIs and Contract SLAs. A summary of this report is presented at the UHIP Executive Meeting with Deloitte.
- **JIRA Release Dashboards:** A JIRA dashboard is developed for each release to track scope proposals + approvals. The dashboard shows real-time changes to any tickets associated with a release. Teams use these dashboards to track the status of every component within the release. New dashboards have been added to facilitate the review and approval of scope changes in real-time at MPR.
- **Project Runway:** The runway depicts the schedule for all approved project scope. The project runway is reviewed and approved weekly at Release Planning Committee (RPC).
- **Post-Implementation Evaluation Review:** After each release, Deloitte produces a report that evaluates the implementation and whether the objectives of the release were met. The report references key metrics and contract KPIs to measure the impact to the business.

Figure 7b. Release Status Scorecard

June Patch Release (R7.34.1)  
 As of July 2, 2021

States Key: ● On-Track ● At Risk ● Off-Track - but Recoverable ● Off-Track - Decision Needed ● Complete ● Planned Start ● On Hold ◆ Gate ◆ Go/No Go

Draft: For review and discussion purposes only

		Scorecard: Release Status								
Application Release	50 Problem Tickets	Scope Definition	Solutioning	DEV	SIT	Other SYST	UAT	QBR	Stabilization	
		Complete (1/18 - 3/5)	Complete (1/18 - 3/5)	Complete (2/15 - 3/26)	Complete (3/22 - 4/16)	Complete (4/19 - 4/23)	Complete (5/17 - 6/15)	Complete (6/7 - 6/17)	Complete (6/21 - 7/2)	
	3 BRRs (Batch Run Time, Symmet Protection, IE Sunset)	Scope Definition	FDD	DEV	SIT	Other SYST	UAT	QBR	Stabilization	
		Complete (1/18 - 3/5)	N/A	Complete (2/15 - 3/19)	Complete (3/22 - 5/7)	Complete (5/3 - 5/14)	Complete (5/17 - 6/9)	Complete (6/7 - 6/17)	Complete (6/21 - 7/2)	
	APTC Policy Changes	Complete (1/18 - 3/5)	Complete (1/18 - 3/19)	Complete (3/15 - 4/9)	Complete (4/12 - 5/7)	Complete (5/10 - 5/14)	Complete (5/17 - 6/4)	Complete (6/7 - 6/17)	Complete (6/21 - 7/2)	
	Summary									
Info Mgmt	BRR LTSS Provider Report Enhancement	Release Planning	FDD Approval	DEV	SIT	SIT REGR	UAT	TFP	Deloitte Post Prod Validation	State Post Prod Validation
		Complete (4/5 - 4/9)	Complete (4/12 - 4/23)	Complete (4/26 - 5/21)	Complete (5/24 - 6/4)	Complete (5/24-6/11)	Complete (6/14 - 6/18)	Complete (6/21 - 7/9)	On-Track (7/1 - 7/9)	On-Track (7/1 - 7/9)
	BRR RIB-137488 MCO Address Changes	Complete (4/12 - 4/23)	Complete (4/19 - 5/7)	Complete (5/3 - 5/23)	Complete (5/24 - 6/4)	Complete (5/24-6/11)	Complete (6/14 - 6/18)	Complete (6/21 - 6/25)	Complete (6/21 - 7/2)	
	BRR RIB-136167 Batch Optimization - 22 IM Batches	Complete (4/12 - 4/23)	Complete (4/12 - 4/23)	Complete (4/19 - 5/28)	Complete (5/17 - 6/4)	Complete (5/31-6/11)	Complete (6/14 - 6/18)	Complete (6/21 - 6/25)	On-Track (6/21 - 7/2)	
	IM Problem Tickets	Solutioning		Development	Complete (4/26 - 5/21)	Complete (5/24 - 6/4)	Complete (5/24-6/11)	Complete (6/14 - 6/18)	Complete (6/21 - 6/25)	On-Track (6/21 - 7/2)

## Project Governance Processes

As discussed in Section 2, the Release Management Plan was developed over the course of FFY2020 in order to document all release management processes in a single location. The Release Management Plan continues to be updated on a quarterly basis. The following excerpts from this document addresses annual planning, ongoing business prioritization, and scope approval. These processes have not changed significantly in FFY 2021.

## Release Planning & Governance

The purpose of this section is to describe the governance and related processes concerning establishment and maintenance of the overall release plan (inclusive of the project runway).

### **Annual Planning: Extending the Project Runway**

The Project Runway defines the available release windows and associated deadlines for all application releases, technical upgrades, and major operational activities scheduled to take place in a given calendar year. The runway reflects the alignment of business needs (mandates, operational improvements, etc.), maintenance activity (scheduled and unplanned) with budget and resources. As such, the management of and changes to the Project Runway are executed through strict governance processes.

On an annual basis, the Joint IT Team works to create the overall draft release plan, which results in the extension of the Project Runway into the next calendar year. The method by which the plan is developed (i.e. the inputs to the process) are as follows:

- On an annual basis, State executives define strategic priorities inclusive of federal, State and

other legal mandates as well as key desired operational efficiencies. The Joint IT Team is then tasked with developing a release plan which, at a minimum, provides the State the ability to implement critical business and tech upgrades/enhancements when required and within the appropriate risk tolerances and defined budgetary guidelines.

- The Joint IT Team revisits the existing release tenets on an annual basis to evaluate whether any have lost relevance, and therefore need to be removed or edited, or whether the events and learnings of the past year have prompted the need for additional tenets.
- The Joint IT Team then consults across the project to identify any critical tech upgrades or system enhancements that must be implemented throughout the course of the next calendar year in order to keep the system operational. These activities are scheduled according to their critical deadlines before other potential upgrades or enhancements are considered for inclusion within the scope of the baseline release plan.
- In accordance with the tenets that have been established and considering both the strategic priorities of the project as well as State + Deloitte + Third Party resource constraints, the Joint IT Team develops a proposal for the type, frequency, capacity, and lifecycle of releases which take place throughout the year. Specifically, the plan determines, for each type of release (e.g. patch or major), how often the release will take place, when it will take place, how many enhancements (in terms of hours) or defect fixes it will contain, the duration of each phase of the SDLC, and any features of the release which differ from standard Release Management.
- The UHIP Executive Committee reviews and approves the draft annual release plan (specifically the extended project runway and major release scope and capacity).

### ***Annual Planning: Business Prioritization***

In order to determine the application development scope for the Annual Release Plan, Agency leadership, in conjunction with theme teams, define high priority business outcomes to be achieved in the upcoming fiscal year. The teams then work to document the necessary requirements to deliver these outcomes to the business. By leveraging the business cases to assess the value and impact of each outcome, the Executives make key decisions regarding the top priorities for the team to focus on in each FFY to continue to maintain compliance with state and federal policy changes and to invest strategically in select enhancements. Based on these prioritized business outcomes, the joint IT team recommends different scope options based on a variety of factors including available capacity of the IT teams throughout the SDLC process including the State's ability to completely and accurately conduct user acceptance testing and release readiness prior to deployment. Throughout this planning process, cost allocation and State fiscal budgets are also taken into consideration. Final recommendations for major release scope are then brought to the UHIP Executive Committee for review and approval.

During the planning phase of each Major Release, the Joint IT team will provide Agency Executives with an opportunity to re-confirm the planned outcomes and BRRs for the release. The Agency Executives will be asked to assess the Annual Plan against BRRs on their Leaderboards. If there is a change in priorities, the Agency Executives may ask the Joint IT Team to assess potential changes to the planned scope outlined in the Annual Plan. After reviewing the assessment, including any impact on cost allocation, the Agency Executives will approve the final scope of the release. This also includes

reviewing and approving problem ticket scope. The focus will be on Problem Tickets related to BRRs in the major release or Problem Tickets prioritized by Theme Teams. Once approved, all scope items associated with the Major Release will be updated in JIRA. The team then proceeds with the requirements phase for each BRR in the release. Once requirements (BRDs and FDDs) are fully signed off, the release scope is reviewed a final time to ensure any significant scope changes are reviewed and approved by the Executives. The scope of the release is considered final and the team moves forward with development of the in scope BRRs.

At times, the Executives may also approve hours for discovery sessions to assist the business in developing a set of high-level requirements to achieve specific outcomes. Generally, this approach is taken if there is a lack of clarity in terms of the current or future state vision. Specific deliverables are outlined and reviewed at CRB before this work is approved.

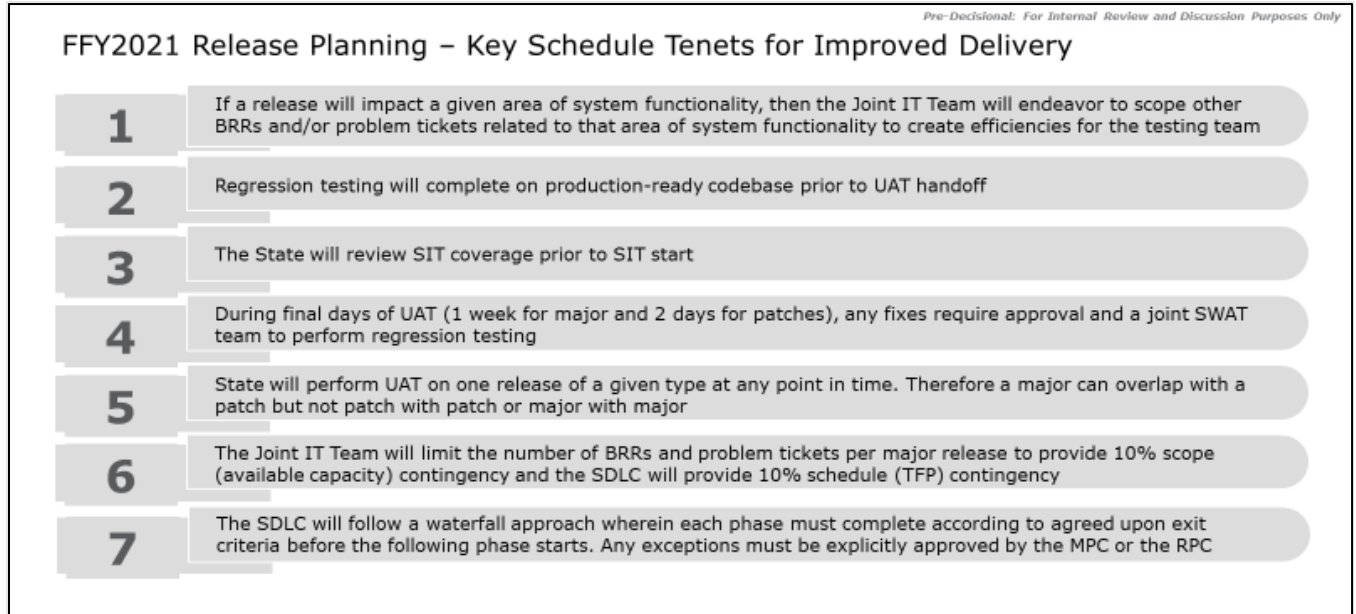
On an ongoing basis, Theme Teams and Agency IT Leads will manage the intake of BRRs not in scope of the Annual Release Plan by conducting business analysis and prioritizing these BRRs against existing priorities. Executives will then review Agency-Level Leaderboards and validate that the highest priority BRRs merit an IT assessment. If prioritized for an assessment, the Joint IT team will conduct analysis to determine whether the BRR should be deployed in a patch or a major release based on the complexity of the change, the technical feasibility and the testing resources required to perform SIT and UAT. See Section 2 for more details regarding the BRR intake process.

The annual release plan can only be updated with specific approval of the Executive Committee. State PMO will work with the Deloitte to monitor adherence to the Annual Plan to ensure no changes are made outside of the governance process and to report on progress towards the delivery of the plan and achieving the business outcomes.

### ***Release Tenets***

The release tenets guide development of the annual release plan – placing constraints upon both schedule and capacity to drive code quality. The tenets are revisited on an annual basis and are outlined below. Please note that currently there are no planned changes to the release tenets for FFY 2022. However, as we refine the SDLC and UAT transition, we will revisit these for any future updates.

Figure 7c. Release Planning – Key Schedule Tenets for Improved Delivery



## Release Types & Definitions

### Major Release

A major release is considered the implementation of a large volume of both problem and BRR tickets. A major release includes new or enhanced features and content that will be added to the system beyond resolving known defects. BRR tickets are scheduled for major releases through the release planning process which includes review and approval by the CRB.

### Patch Release

A patch release is considered the implementation of a set of software changes and supporting data fixes designed to update, fix, or improve upon current production baseline. Fixes included in patch releases include problem tickets / defects, updates for security vulnerabilities, and select small enhancements approved by CRB. Items to be included in a patch are prioritized and brought to the Maintenance Prioritization Committee (MPC) for approval and scheduling. Larger system enhancements are typically reserved for Major releases, whereas Patches are meant for addressing higher priority system issues.

### Off-Cycle Release

An off-cycle release provides immediate relief in response to SEV1/SEV2 business or technology issues. Off-cycle releases are typically planned and delivered within a week's timeframe. SEV3 issues can be included in an off-cycle release with mutual agreement from the State and Deloitte.

### Release Naming Convention

The above-mentioned release types are numbered according to the following naming convention:

Figure 7d: Release Naming Convention Slide



- The first digit reflects RIBridges Go-Live.
- The second digit refers to Major releases and is incremented with each major release.
- The third digit refers to the Patch releases and is incremented with each patch release. This number is reset with each Major release.
- The fourth digit refers to an off-cycle release. This can immediately follow a Major or Patch release, and resets after each Patch release.

### Maintain Project Runway

Within a given calendar year, changes to SDLC deadlines for any given release are reviewed and approved by the Agency Leads at the Release Planning Committee (RPC) on a weekly basis. No changes are made to the runway without them being approved by the committee. The approved version is stored in SharePoint and distributed project-wide on a weekly basis.

Major changes to the overall release plan (such as an increase or decrease in the number of releases proposed to take place) cannot be approved by the Release Planning Committee and must instead be directed to the UHIP Executive Committee.

The Joint IT Team also leverages JIRA Dashboards to manage the release scope and the release schedule. Please refer to the following sample dashboards in the table below:

Figure 7e: Release Scope and Schedule

Release Scope and Schedule										
Filter Results: Release Schedule										
Summary ↑	Status	Design Start Date	Design End Date	Development Start	Development End	SIT Start	SIT End	UAT Start	UAT End	Production Deployment
7.26	IN PROGRESS	31/Dec/18	15/Feb/19	18/Feb/19	22/Mar/19	25/Mar/19	03/May/19	06/May/19	07/Jun/19	21/Jun/19
7.26.1	IN PROGRESS			29/Apr/19	17/May/19	20/May/19	14/Jun/19	17/Jun/19	12/Jul/19	12/Jul/19
7.26.2	IN PROGRESS			20/May/19	14/Jun/19	17/Jun/19	12/Jul/19	15/Jul/19	09/Aug/19	09/Aug/19
7.26.3	IN PROGRESS			17/Jun/19	12/Jul/19	15/Jul/19	02/Aug/19	05/Aug/19	23/Aug/19	23/Aug/19
7.27	IN PROGRESS	25/Mar/19	10/May/19	13/May/19	14/Jun/19	17/Jun/19	02/Aug/19	05/Aug/19	06/Sep/19	20/Sep/19
7.27.1	OPEN			24/Jun/19	02/Aug/19	05/Aug/19	30/Aug/19	02/Sep/19	11/Oct/19	11/Oct/19
7.27.2	OPEN			12/Aug/19	13/Sep/19	16/Sep/19	11/Oct/19	14/Oct/19	08/Nov/19	08/Nov/19
7.28	OPEN	17/Jun/19	09/Aug/19	12/Aug/19	13/Sep/19	16/Sep/19	25/Oct/19	28/Oct/19	29/Nov/19	13/Dec/19

Two Dimensional Filter Statistics: Approved Release Scope			
Fix For Versions (all)	BRR	Problem	T:
7.25.4	1	29	30
7.25.5	1	34	35
7.26	31	156	187
7.26.1	3	63	66
7.26.2	1	68	69
7.26.3	1	0	1
7.27	24	136	160
7.27.1	3	86	89
7.28	24	114	138
<b>Total Unique Issues:</b>	<b>89</b>	<b>686</b>	<b>775</b>

## Release Planning Committee

The Release Planning Committee (RPC) continues to remain focused on assessing the readiness of the release(s) from both the systems and business point of view (through the utilization of detailed release checklists), as well as the readiness of technology maintenance activities and operational activities (as dictated by State policy). These activities are documented, tracked, and maintained through the Project Runway and release readiness materials. The primary purpose of this committee is to:

- Review and maintain the Project Runway and release readiness materials to ensure any technical dependencies or issues pertaining to a given release are surfaced and addressed
- Review and maintain the Project Runway and release readiness materials to ensure all technology maintenance and operational activities are properly accounted for and tracked.
- Coordinate release logistics and deployment schedules
- Validate release readiness (technical and business) per checklists
- Assess and approve changes to the release checklist, deployment timeline, and validation plan
- Escalate issues / conflicts related to the overall release plan
- Facilitate post-implementation reviews and identify improvement opportunities to the release process.

The RPC meets weekly and provides a critical role in ensuring release activities are well-planned and coordinated to ensure success. The key objectives of this meeting are as follows:



- Review and approve Project Runway which incorporates all approved system changes including project-based enhancements, M&O code fixes, data fixes, infrastructure changes, and operational activities.
- Identify and manage risks and issues in JIRA and escalate to IRC when appropriate
- Ensure all aspects of release readiness have been appropriately assessed to inform and facilitate go / no-go decision checkpoints prior to production implementation
- Review and approve release readiness and post-implementation processes (e.g., changes to release checklist)
- Communicate summary release notes and coordinate any findings from the release activity

To achieve these objectives, a standing agenda was developed to facilitate the meeting. The topics covered in each meeting are shown below:

- Review and approve changes to Project Runway
- Validate the release readiness via checklists
- Review and approve release deployment timeline
- Discuss rollback review plan (in advance of every major release)
- For awareness, review technical/infrastructure changes that were approved at TCCB
- Maintain and review calendar of upcoming validation and operational activities

### **Ongoing Business Prioritization (Release Agnostic)**

The key principle of the business prioritization process is that it takes place separate and apart from the planning process for any specific release. For example, business owners are not asked to request tickets for specific releases. Rather, they are asked to list their tickets in order of priority at the agency-level. Business prioritization is an ongoing process that continues throughout the calendar year irrespective of whether annual planning or planning for any specific release is in progress. All prioritization is relative and subject to change from day to day.

The subject of the prioritization processes are primarily BRRs and Problems, as defined below:

- **Business Requirement Request (BRR):** A code change that will require an update to both system code and system documentation. This is necessary when the system matches the FDD but does not behave as desired. BRRs are created by the State.
- **Problem Ticket (System Defect):** A code change that will make the system behave as described in existing system documentation. This is necessary when the FDD describes desired system behavior, but the system does not behave accordingly. Problem Tickets are created by Deloitte, typically during the process of triaging incidents that are logged by the State.

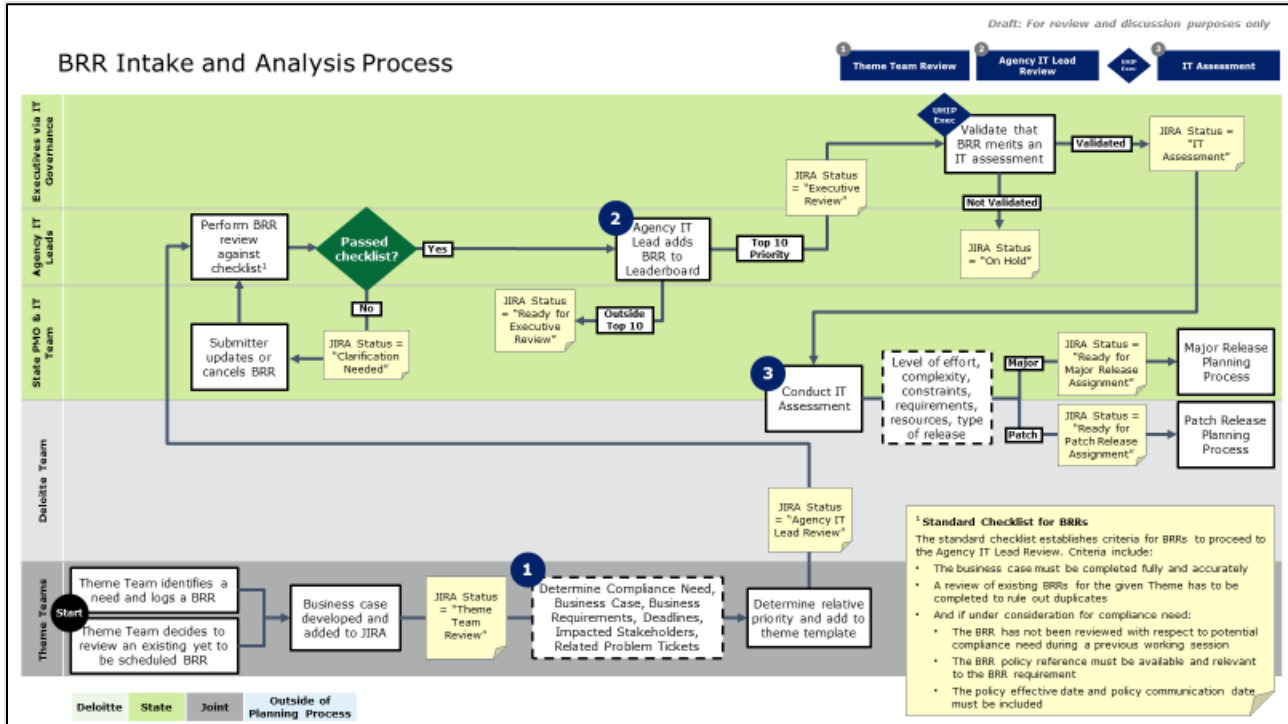
Root cause analysis of Problems and the intake and analysis of BRRs results in tickets which are either “Ready for Release Assignment” or “Withdrawal Requested”. Tickets in the former status are then considered for inclusion within any given release.

The remainder of this section describes how BRRs and Problem are prioritized and evaluated such that when scoping starts for any given release, the Joint IT Team has all the necessary inputs available to them.



BRRs are subject to a rigorous intake and analysis process to ensure that the business need and requirements are well understood before the enhancement is scoped for a release. The key steps in this process are detailed in the slide below and further described below:

Figure 7f: BRR Intake and Analysis Process Slide



- State business owners identify a need for the system to work differently. They log a BRR, or flag an existing BRR as a priority
- State business analyst (BA) or business owner completes a business case for the BRR and provides initial requirements associated with the requested change(s)
- Theme Team reviews the business case for the BRR and confirms sufficient understanding of requirements to complete an IT Assessment
- Agency Lead reviews the business case for the BRR and then force ranks that BRR against all other BRRs requested by their agency (using Agency Leaderboards in JIRA)
- Agency Leads request top ranked BRRs for an IT Assessment
- Executives approve the BRR to proceed with an IT Assessment
- Deloitte completes an IT Assessment (estimated level of effort)
- State IT Team reviews and approves the IT Assessment (estimated level of effort)

Following the completion of the above steps, the BRR moves into “Ready for Major/Patch Release Assignment” status, depending on whether the Joint IT Team determined if it could feasibly be deployed in a patch.

For problem tickets, the intake and analysis process is more streamlined. After a ticket is created, Deloitte is expected to complete root cause analysis and propose the solution within ten business days.

Then the ticket is reviewed and prioritized by the theme team (using business capability sequencing). After the solution is approved by the State, the ticket moves to “Ready for Development” status in JIRA.

The following sections provide more detail regarding specific aspects of this process.

## **Theme Team Review**

Themes are joint State + Deloitte teams tasked with managing the intake of BRRs and Problem Tickets for a given program and/or system functionality. Their primary function is to define business outcomes and then identify the necessary actions to deliver required business capabilities to achieve these outcomes. These priorities are expressed via “business capability sequencing” which is the subject of the next section.

## **Business Capability Sequencing**

Business capability sequencing is a tool which theme teams use to prioritize their work:

- Theme teams define the business outcomes they aim to achieve in a given time period
- Theme teams define which business capabilities will need to be enabled in order for that business outcome to be met
- Theme teams order those business capabilities in order of priority (typically according to the impact that any given capability will have on the business outcome). This ordering is what is referred to as the “business capability sequence”
- Theme teams define which tickets (BRRs, Problem Tickets, Service Requests, and Data Fixes) must be delivered for each business capability to be met
- These tickets are then tagged with their capability’s “business capability sequence” in JIRA
- Theme teams also define any operational activities necessary to deliver the business capability, as well as any operational impacts to the business of delivering certain tickets to production

To the extent possible, the Joint IT Team aims to deliver “whole” business capabilities to production in a single release, rather than splitting the tickets associated with one capability across multiple releases. This is to ensure that each release delivers incremental value to the business. The appropriate granularity for a business capability is therefore the lowest level that delivers useful value to the business. This business capability mapping and priority sequencing is stored in JIRA.

## **Agency Leader Boards**

After the theme team review completes, Agency Leads are asked to review the business case and assess whether the priority warrants adding the BRR to their respective Leader Board. If the BRR is added, the Agency Lead will force rank the BRR against the other BRRs already on the Leader Board requested by their Agency. This ranking is stored in the “Leaderboard Ranking” field in JIRA and this field is used to drive a dashboard which serves as a visual representation of the leader board. Agency Leads continue to adjust the ranking as BRRs are added or priorities change.

At MPR, a weekly review of the Agency Leaderboards is conducted and the Agency Leads and the Joint IT Team decide which BRRs (based upon priority as expressed by the Leader board Ranking) should be recommended to executives to proceed with an IT Assessment. When the IT Assessment completes, the BRR remains on the leader board and moves to a “Ready for Release Assignment” status. This indicates that the ticket will be considered (in priority order) by the Joint IT Team for inclusion in a future release,

subject to CRB approval from the UHIP Executive Committee.

BRRs are removed from the Leaderboard when they are assigned to a release (after receiving CRB approval) and receive a fix version in JIRA. The “Final Leaderboard Ranking” is stored to assist with measuring leader board throughput. Please note that the Leader Board process is being reviewed as part of the Phase 2 of the Governance Refresh initiative so we expect some changes to be made over the course of FFY 2022 to improve this process further.

## **IT Assessment Process**

The IT Assessment is the phase where, based upon the understanding of requirements documented in the JIRA ticket and confirmed by the theme team, the Joint IT Team develops an understanding of the technical inputs to deliver a BRR.

As part of this phase, the following assessments are completed:

- Rough Order of Magnitude (ROM) – This an estimation provided by Deloitte using an existing tool, and subsequently approved by the State
- Patch Feasibility – Assessed by both Deloitte and the State.
- Complexity Assessment – Assessed by Deloitte based on the development needed to deliver the specified requirements.
- Clarity of Requirements – Assessed by Deloitte based on requirements documented by the State.
- UAT Complexity Assessment – Assessed by the State.

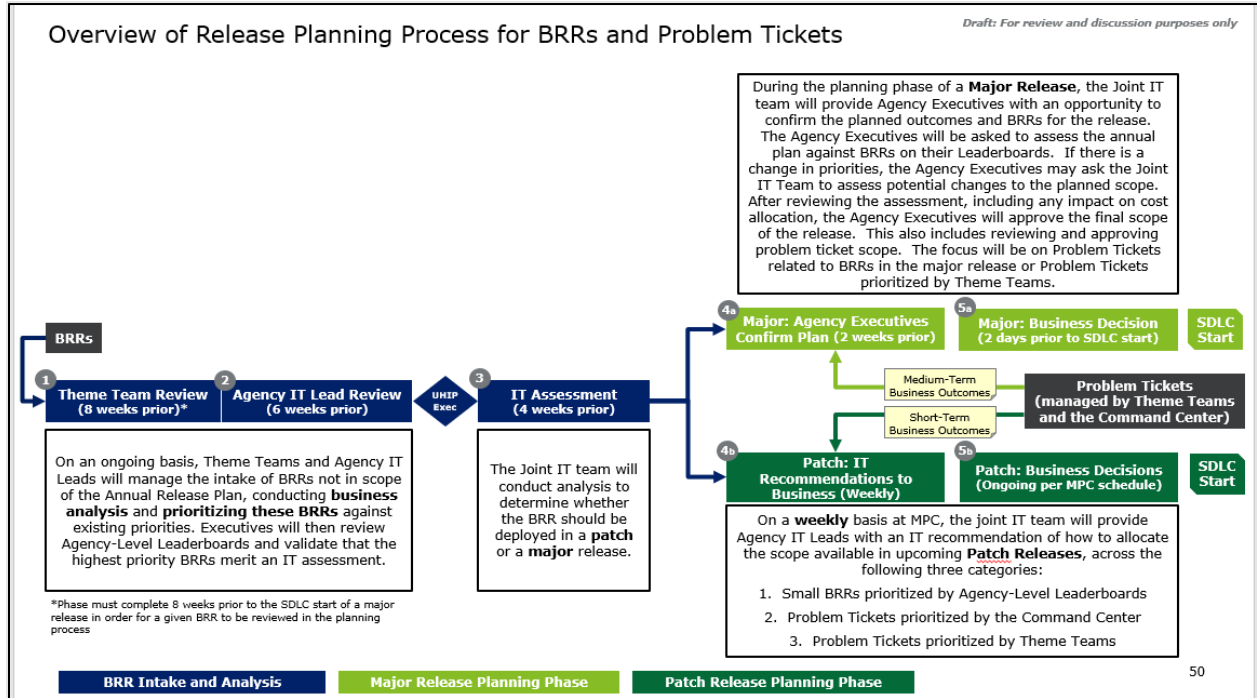
If Deloitte and the State agree that a BRR is patch feasible then the BRR status moves to “Ready for Patch Release Assignment”. If not, then the BRR moves to “Ready for Major Release Assignment”. If a BRR is especially complex or would require an extended runway to fully deliver the requirements, then the Joint IT Team can also recommend that a BRR be assigned to a long-term track.

Please note that BRRs are not assigned to a release until the Change Review Board (CRB) approves the use of hours (as reflected in the ROM) that would be required to design and/or implement the BRR.

## **Prepare & Approve Release Scope**

This section of the document describes how tickets are assigned to major or patch releases after the business prioritization process detailed in the prior section is completed. At the conclusion of that process, the Joint IT Team knows for any given ticket the priority assigned by the theme team, the priority assigned by the Agency, the level of effort required, and the feasibility of delivering in a patch release.

Figure 7g: Release Planning Process



## Major Release Planning

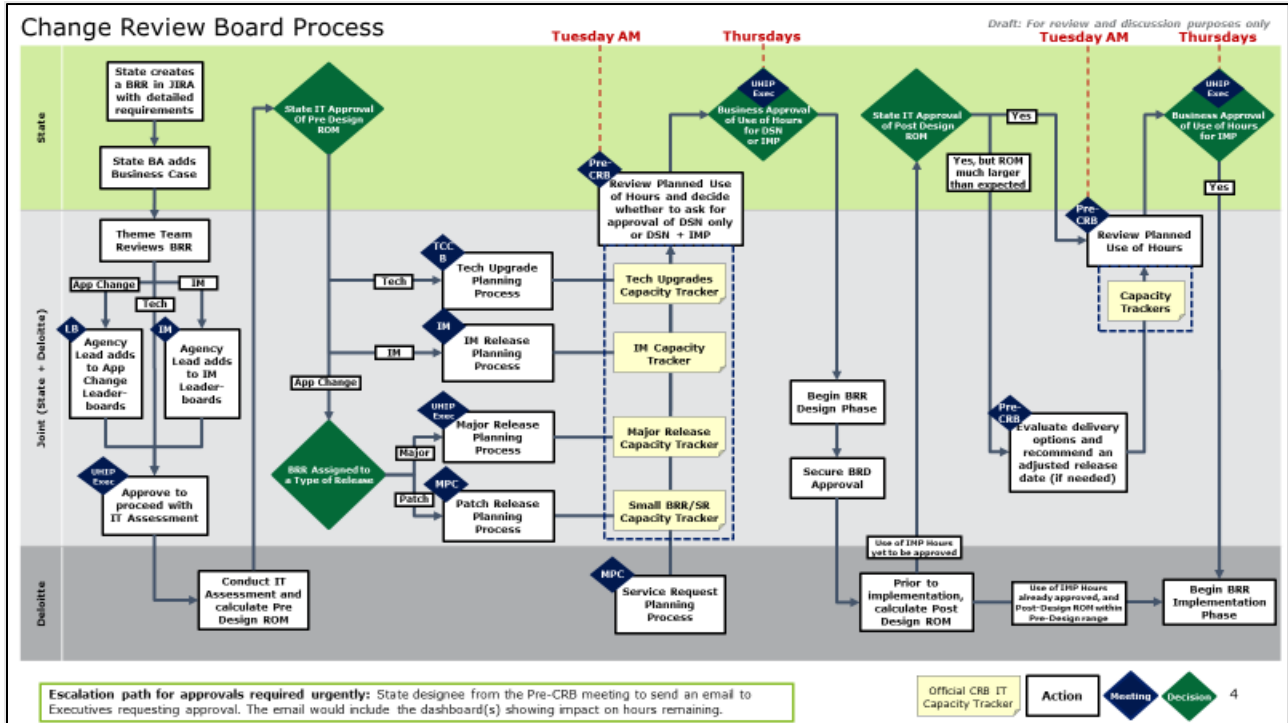
The Annual Plan defines the enhancement scope for the Major Releases. Any changes to the Annual Plan will be brought through the formal governance process which will include an impact assessment of any proposed changes on the cost allocation. Problem ticket scope for Major Releases follows the same process as problem ticket scope for patch releases, which is detailed below.

As a part of the Annual Plan, BRR scope aligned to the Major Releases has already been approved by the Executive Committee. However, during the planning phase of each Major Release, the Executive Committee will re-confirm their business outcomes for the release. If a change or shift in priorities occurs, the Executive Committee may bring forward a potential scope change and direct the Joint IT Team to assess proposed change(s) to the Major Release in order to determine the impact upon the annual budget and the approved cost allocation plan. Based upon this assessment, the UHIP Executive Committee may approve a change to the Annual Plan for that specific Major Release. This process ensures that when release scope is set for each major release it not only complies with the functional themes that have been funded for the current fiscal year but also with the established budget and cost allocation.

## Major Release Approval

The Change Review Board (CRB) continues to play a key role in the overall governance of the project by authorizing the use of budgeted hours in support of the release planning and prioritization processes across Major Releases, Patch Releases, Information Management (IM) Releases and Technical Upgrades as illustrated in the table below:

Figure 7h: Change Review Board / Approval for use of Hours



## Patch Release Planning

On a weekly basis at MPC, the Joint IT Team provides the Agency IT Leads with an IT recommendation of how to allocate the scope available in upcoming Patch Releases, across the following categories:

- Small “Patchable” BRRs prioritized by Agency-Level Leaderboards
- Problem Tickets prioritized by Problem Management 2.0 + Theme Teams

Theme teams continuously prioritize problem tickets by aligning them to business capabilities and listing them in priority sequence. This is done by reviewing the backlog of Problem tickets to first check whether RCA has been completed. Problems pending RCA are not considered. The backlog is then reviewed considering, but not limited to, the following questions:

- Does it meet the criteria identified below?
  - Issue impacts benefits or payment disbursement for high priority citizen types
  - Issue impacts a high volume of citizens
  - Issue relates to project focus areas
  - Issue impacts eligibility accuracy, payment accuracy, payment accuracy, timeliness, federal compliance
- Does it impact a high volume of cases, especially aging blocked cases with no workaround?
- Is it contributing to high volume of Incident inflow?
- Will it contribute to the delivery of a key business outcome?

The preliminary list of Problem tickets is curated using the above criteria as a basis and reviewed with the applicable Theme teams to align on priority and solution approach. If additional Problems are identified as high priority, these are escalated to Release Management for consideration to the proposed scope.

As the scope is being iteratively built, the capacity assessment happens in parallel from a development and testing bandwidth perspective given the release runway. 10 percent capacity contingency is left for additional Problems that may need to be added following scope presentation depending on priority and business impact. If capacity is reached, then lower priority items are proposed for removed from scope.

Small BRRs may be delivered in patch releases if the Deloitte and State IT Teams are comfortable with the degree of complexity and system impact, as well as the level of effort required (the rule of thumb is a total ROM of less than 500 hours). In this case, the hours required to deliver the BRR must receive executive approval of the use of those hours via CRB processes. Specifically, executives will need to allocate hours from a finite monthly budget of hours available for service requests and Patch BRRs.

Therefore, although BRRs will still be included in the proposed patch release scope presented to MPC, the final decision point for scheduling BRRs within patch releases will be the CRB.

### **Patch Release Scope Review & Approval**

Patch release scope is presented, reviewed, and approved in the Maintenance Prioritization Committee (MPC) meeting. This process occurs incrementally over the course of multiple MPC meetings and is summarized below:

- Proposed scope for a given release is presented incrementally at MPC each week
- State completes business review and UAT coverage assessment for each ticket proposed
- State confirms scope additions to or removals from scope at the next MPC meeting

### ***Information Management (IM) Release Planning Processes:***

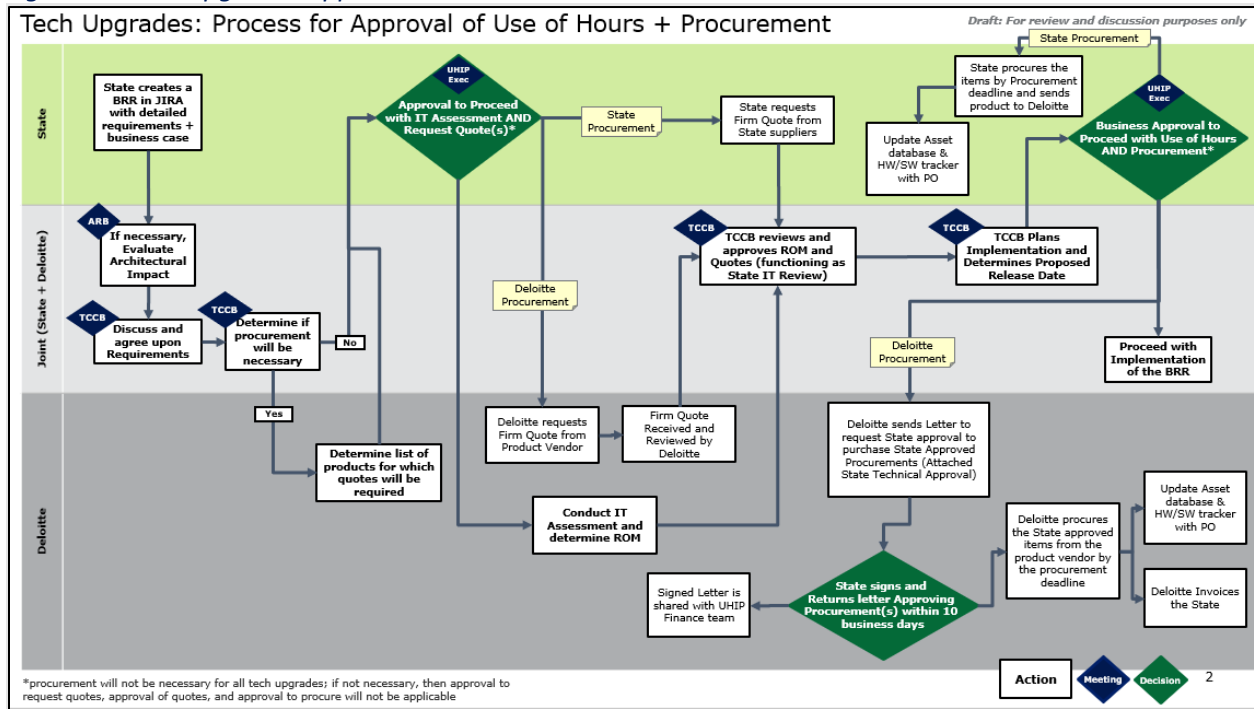
IM Releases will follow a monthly cadence in alignment with the application release timeline, with the exception that there will be no distinction between major and minor releases. Most elements of the regular application release planning processes are followed including:

- Business cases developed in support of IM BRRs
- Top priority IM BRRs added to Agency IM Leaderboards and reviewed weekly
- Joint IT Team reviews priorities and proposes release options
- CRB reviews proposed scope and authorizes hours prior to development
- Problem Tickets are prioritized approved by the business prior to adding to a release

### ***Tech Upgrade Release Planning Process:***

The Joint IT Team continues to use the following Tech Upgrade release planning process. Tech upgrades are unique in that they typically coincide with the procurement of additional RIBridges hardware or software. As a result, this process flow includes contractual steps that are necessary to complete those procurements alongside the tech upgrade planning and implementation process.

Figure 7i: Tech Upgrades Approval Process





## 8 PERSONNEL RESOURCE STATEMENT

The State is providing an estimate of total staffing requirements and personnel costs in Attachment C. Included are all State staff, their organization and job title, the percent allocation to UHIP, whether they are DDI or M&O, their salary, the cost-allocation applied, and total UHIP allocation. Included in this is a complete list of DHS field staff with an allocation to UHIP based on the Random Moment in Time Study (RMTS) as detailed in section 10.

Please see the table below for a listing of key personnel on the project.

*Table 8a. Key Project Personnel Listing*

Key Personnel	Agency	Title	Responsibilities
Ana Novais	EOHHS	Acting Secretary	Leadership
Yvette Mendez	DHS	Acting Director	Project Sponsor
Lindsay Lang	HSRI	Director	Leadership
Kristin Sousa	EOHHS	Medicaid Director	Leadership
Phil Silva	DOIT	Sr. Information Technology Project Manager	Tech Ops Lead
Beth Tyler	DOIT	Information Technology Project Manager	UHIP IT Oversight and Leadership Management
Matt Stark	EOHHS	CAO	Finance and Admin Advisor
Maureen Wu	EOHHS	UHIP CFO	Budget, APD
Lisa Martinelli	EOHHS	In House UHIP Counsel	Legal
Bijay Kumar	DOIT	Chief Digital Officer	Oversight of IT Leadership
Lori Rota	DOIT	UHIP Program Lead/EPMO Lead, Contracted	Lead IT Program Life Cycle, IT Project Execution and Enterprise PMO Lead
Jose Garcia	DHS	Chief of Information and Public Relations	Communications
Jamie Weinstein	DOIT	IT Executive Contracted	Contract Management, PMO Support



## 9 PROPOSED BUDGET

For this IAPD update, Rhode Island is asking for federal approval for the FFY 2023 project budget and related cost allocations. With the RIBridges system being certified as of July 20, 2022, this is a closeout APD and includes scopes of work begun in FFY 2022 that will continue into FFY 2023 such as Easy Enrollment that is funded through State American Rescue Plan Act funds along with work specific to COVID and the Public Health Unwinding. The DDI integrated solution allocation methodology is included for reference only for the FFY 2022 period but not included in the budget FFY 2023 forward. All new DDI scope is included in the New DDI APD request. The State understands that this budget request and subsequent approval does not constitute contract or contract amendment approval. Federal funds will not be expended on individual contracts until federal approval is received.

The State affirms that the requested amounts are solely for salaries, benefits, and direct costs listed below. Indirect costs are not included in this budget request. Postage and other non-admissible items are also excluded from this budget request.

Table 9a below shows the overall project budget for federal and State shares, as well as DDI and M&O, requested as of July 29, 2022, with a comparison to the amount submitted on July 19, 2021. The total budget shown includes the FFY 2023 and FFY 2024 projected budget. This closeout APD is extending into FFY 2024 as a result of the extension of the Public Health Unwinding end date.

*Table 9a. July 29, 2022 Submission IAPD Budget Summary*

IAPD-U Changes from July 2021 Submission to July 2023 Submission			
DDI	Total Cost	Federal Share	State Share
2021 (July submission)	412,917,369	346,671,108	66,246,258
2022 (Changes to FFY submission)	4,523,404	1,485,267	3,038,137
2023 (Changes to FFY submission)	(2,922,182)	(5,303,637)	2,381,454
2024 (Addition of FFY submission)	2,099,520	720,555	1,378,965
<b>Total Updated DDI</b>	<b>416,618,110</b>	<b>343,573,293</b>	<b>73,044,814</b>
M&O	Total Cost	Federal Share	State Share
2021 (July submission)	379,720,762	243,392,789	136,327,975
2022 (Changes to FFY submission)	(13,909,660)	(9,327,051)	(4,582,608)
2023 (Changes to FFY submission)	(59,768,360)	(37,125,934)	(22,642,426)
2024 (Addition of FFY submission)	157,188	48,163	109,026
<b>Total Updated M&amp;O</b>	<b>306,199,931</b>	<b>196,987,966</b>	<b>109,211,966</b>
<b>Total IAPD-U Request</b>	<b>722,818,041</b>	<b>540,561,260</b>	<b>182,256,780</b>

The overall project budget through FFY 2024 is estimated to be \$722,818,041, of which \$540,561,260 is the expected federal share, and \$182,256,780 is the expected State share. Please see Attachment B for a budget summary by federal fiscal year. As with previous IAPD submissions, please see Attachment C for details on personnel, and Attachment D for a breakdown of total budget by quarter for FFY 2023 which has been updated for this submission. Attachment I provides details of the FFY 2023 budget by budget service area and vendor.

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The following table provides details of the FFY 2023 budget by service area and category of service:

*Table 9b. FFY 2023 Budget by Service Area*

Rhode Island UHIP Project Budget for FFY 2023				
Sub Components	RIBridges		Project Management	Total
	Business Functions	Technical Functions	Administration	
Service Areas	Agency Support	UHIP IT Management	Finance & Administration	
<b>Deloitte</b>	-	5,427,686	-	<b>5,427,686</b>
<b>Personnel</b>	1,176,981	-	61,173	<b>1,238,154</b>
<b>Vendor</b>	244,823	1,108,689	-	<b>1,353,512</b>
<b>Grand Total</b>	<b>1,421,804</b>	<b>6,536,375</b>	<b>61,173</b>	<b>8,019,352</b>

The following table provides a view of the budget organized by total contractor dollars:

*Table 9c. FFY 2023 Budget by Contractor Dollars*

Vendor Name	FFY 23
<b>CSG</b>	275,094
<b>Deloitte</b>	5,427,686
<b>Knowledge Service</b>	1,078,418
<b>State Personnel</b>	1,238,154
<b>Grand Total</b>	<b>8,019,352</b>

## 10 COST ALLOCATION PLAN FOR IMPLEMENTATION AND MAINTENANCE ACTIVITIES

### Overview of Cost Allocation

CMS and FNS approval of a cost allocation rate for DDI integrated solution on average over FFY 2022 was very helpful in providing the State with the flexibility to have some releases be more focused toward one or two programs, and balance out the allocation with other releases in the allocation time period. RI was able to put a system and governance process in place to manage successfully to the agreed-upon cost allocation percentages. This has been very effective in helping RI achieve its business priorities in a timely way, managing to a State share, and ultimately contributing to the maturation of the system. During the FFY 2021 APD, CMS and FNS clarified the timing of the DDI allocation period. It was agreed that for the FFY 2022 APD, the DDI allocation period would transition to the federal fiscal year time period and not the calendar year. In addition, it was agreed that if the DDI allocation were to fluctuate more than 2 percent, then the state would submit an IAPD-U, otherwise any changes would be reconciled at year-end. As such, this submission aligns the DDI and all other allocation to the federal fiscal year.

Rhode Island updated its business priority focus for federal fiscal year 2022 and transitioned to a closeout APD beginning federal fiscal year 2023. Rhode Island will continue to use the tools, governance process, and the commitment of the multiple agency directors to manage successfully to these program allocation levels. For the Allocated Medicaid; Exchange/Medicaid/CHIP Allocation; All Excluding Exchange Allocation and Duplicate Recipient Count, the State will base the allocation beginning October 1, 2020, and continuing through FFY 2024, on the duplicated recipient count on April 30 prior to the beginning of each federal fiscal year. In accordance with the cost allocation update approved effective January 30, 2020, the CHIP Medicaid expansion population is included in the Medicaid duplicated recipient count effective April 1, 2020. These individuals were previously included in the CHIP duplicated recipient count.

To support the annual plan, the team will continue monitoring and reporting on the cost allocation rate, as inevitable small modifications are made to the BRR release plan schedule throughout FFY 2022 to ensure RI remains within 2 percent of the approved DDI Integrated Solution program allocation for the allocation time period. The reporting tools are a part of the overarching governance process that has been discussed in previous sections. The tools ensure that leadership is aware of the budgetary and cost allocation constraints that exist if a new BRR or priority item requires a change to the Annual Plan.

Rhode Island's overarching UHIP Cost Allocation Plan has historically included the following cost allocation methodology components:

1. DDI integrated solution methodology (software development hours) – FFY 22 Only
2. Duplicate Recipient Count – FFY 22 Only
3. Medicaid/HSRI/CHIP methodology – FFY 22 Only
4. All excluding HSRI allocation methodology – FFY 22 Only
5. DHS Field Staff – FFY 22 Only
6. Allocated Medicaid methodology – FFY 22 Only

7. Medicaid only methodology – FFY 22 Only
8. COVID DDI
9. COVID M&O
10. PHE Unwinding DDI
11. PHE Unwinding M&O
12. SNAP ARPA FFY 22 – FFY 22 Only
13. Easy Enrollment
14. Mobile App/Childcare Phase 1
15. Home and Community Based Services Planning – FFY 2022 Only
16. HSTP – FFY 22 Only

All of these methodologies will continue to be utilized during FFY 2023 except those designated as FFY 2022 only. All methodologies will be applied on a federal fiscal year basis.

***DDI Integrated Solution (Software Development Hours) – FFY 2022 Only***

With the loss of the A-87 cost allocation exception beginning Jan 1, 2019, Rhode Island was approved by CMS and FNS to move from its previously approved lines of code methodology to software development hours as the DDI integrated solution cost allocation methodology. As noted above, should the DDI integrated solution allocation vary more than 2 percent from the approved DDI allocation, the state will submit an IAPD-U. Basing the cost allocation percentages on an average of all releases for DDI work throughout the calendar year was a key factor to RI’s success in achieving the planned cost allocation percentages for CY 2019 and CY 2020, as this enabled the State to have the flexibility to have releases in some quarters concentrated in certain program areas, and releases in other quarters concentrated on different programs. In this way, the State’s timing for business needs was met, while also achieving the cost allocation planning values over the calendar year on average, providing justification for our DDI claiming rates for January 1, 2021 through September 30, 2021 and for planning for the DDI allocation for October 1, 2021 – September 30, 2022. The planned DDI integrated solution cost allocation for FFY 2022 is listed below:

*Table 10a. Approved and Proposed DDI Integrated Solution Cost Allocation*

<b>DDI Cost Allocation Oct 1, 2021 - Sept 31, 2022</b>	
Exchange	5.2%
Medicaid	81.9%
CHIP	0.3%
TANF	2.3%
SNAP	8.9%
Childcare	0.0%
GPA	0.0%
SSP	1.3%
<b>Total</b>	<b>100.0%</b>

This IAPD-U requests that the software development hours cost allocation basis be continued as this allocation is reflective of RI's ROMs for BRRs to be completed in which all UHIP programs are benefitting programs.

In continuation of a similar overall methodology, it is important that the software development hours methodology is approved over the entire time period requested (October 1, 2021 to September 30, 2022) as this time period allows for the maintenance of appropriate development hours for each program over the course of the full allocation period with flexibility to appropriately schedule releases throughout that time period. The State will maintain the requested apportionment allocated to each benefitting program, in accordance with the Cost Allocation Methodology (CAM). Each department's director has agreed to maintain this program-specific "budget" of hours which will result in the requested average allocation.

The following describes the current governance process of aligning scope to the cost allocation methodology:

- During the process of creating the Annual Plan, the DDI vendor developed ROM estimates for the prioritized scope that was being considered for the plan. For certain BRRs where requirements needed further clarification, Deloitte and State program staff held solution discussions to better understand the business need before creating the initial ROM.
- The Joint IT Team worked with the Joint PMOs to evaluate different versions of the Annual Plan to determine which scope options could be delivered within the budgeted hours while also maintaining the cost allocation targets. A final version of the plan was achieved by striking a balance between delivering top priority business outcomes while remaining on budget. As described in Section 7, any proposed changes to the approved Annual Plan would be governed by this same process to ensure continued alignment to the cost allocation targets. The state meets weekly to review release planning and guards against cost allocation changes exceeding 2 percent. In the event that critical business priorities would cause the allocation to exceed a 2 percent change, the state would work with CMS and FNS to determine if an IAPD-U As Needed is required.
- In the rare event that a requested change makes it through the governance process, the decision of whether to add a suggested new or changed BRR to the approved Annual Release Plan will be made by the UHIP Executive Committee based on two factors: the business need for the BRR and the impact on the cost allocation/budget. The Directors have decided that any new BRR added to the Annual Release Plan must fit into the cost allocation period's approved federal and State budget, maintaining the approved allocation rate. In general, new BRRs are only approved to be added to the release plan if a new BRR or combination of adding and subtracting BRRs results in no change to the agreed-upon cost allocation plan.

The underlying premises for the development of the DDI integrated solution methodology is the federally defined Benefit Received methodology. This methodology is in accordance with the federal CAM Toolkit. The goal for the Benefit Received cost allocation methodology is to distribute shared software development costs equitably among the benefitting programs.

Rhode Island agreed to use the following CAM methodology despite the State's expressed concerns about the equity of this allocation, as it significantly and disproportionately impacts two State-funded programs (HSRI and SSP), each with only slightly greater than 5 percent duplicated enrollment.

1. **Direct:** Programs which directly and only benefit from a completed DDI request are allocated 100 percent of these hours, reflecting no change to current practice.
2. **“Common” or Shared:** Business Requirement Requests (BRRs) which benefit multiple programs using the UHIP system are shared as follows:
  - Small programs (under 5 percent total enrollment) share in costs based on program size. All programs benefitting from each particular BRR are identified. Duplicated program enrollment for each of those programs is calculated in percentages. Small programs are assigned a contribution based on program percentage times estimated BRR hours; and
  - Large programs (over 5 percent enrollment) are charged by splitting the remaining hours among them equally.

Of the core programs using UHIP (counting Medicaid and CHIP as one program), three are classified as small (under 5 percent duplicated caseload) and four are classified as large, as shown in the following table:

*Table 10b. Duplicated Program Enrollment for Core Programs*

Program	Population	Percentage	Program Type
Exchange	31,141	5.5%	Large
Medicaid	343,725	60.8%	
CHIP	2,277	0.4%	
RI Works	5,126	0.9%	Small
SNAP	145,876	25.8%	Large
Childcare	5,113	0.9%	Small
GPA	46	0.0%	Small
SSP	32,472	5.7%	Large
<b>Total</b>	<b>565,776</b>	<b>100.0%</b>	

This table reflects updated recipient count data as of April 30, 2021. All Medicaid populations enrolled in UHIP are now included in the enrollment total. Note that Small Business Health Options Program (SHOP) was “decommissioned” out of UHIP in FFY 2019, so SHOP enrollees are not reflected in the HSRI UHIP enrollment counts.

In justifying the requested DDI integrated solution cost allocation for October 1, 2021 – September 30, 2022, the State has calculated the development hours which each program will be allocated for all “direct” and “shared” costs in accordance with the CAM methodology, using the large program/small program process already described in this section. Direct costs include BRRs where one program will benefit, and all the hours are allocated to that one program.

The Duplicated Program Enrollment table above will be aligned to the DDI integrated solution cost allocation, CAM Toolkit calculation for the period from January 1, 2022 through December 31, 2022.

This proposed DDI allocation for FFY 2022 will be carefully monitored throughout the year in accordance with the DDI integrated solution cost allocation methodology described below:

- Planned development hours (ROMs) will be identified for potential new BRRs for the period October 1, 2021 – September 30, 2022.
- ROMs will be attributed to benefitting program or programs.
- ROMs benefitting all programs will be divided among those benefitting programs, using the small program/large program methodology described earlier in this section.
- The resulting total allocation of ROM for all BRRs will be combined, and the resulting cost allocation will be monitored if the scope within the annual release plan is updated.

In accordance with agreement with CMS and FNS, this will be reconciled at the end of FFY 2022.

***Duplicated Recipient Count – FFY 2022 Only***

Beginning Oct 1, 2021, M&O allocation will be based on the duplicated recipient count seen in the table below, which is based on enrollment counts as of April 30, 2021. Vendors allocated in accordance with this allocation are listed in Attachment D. Note that with only 46 recipients for GPA, this program is no longer statistically relevant and is at zero percent.



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Table 10c. Duplicated Recipient Count Allocation

Duplicated Recipient Count	FFY2022 - % Allocation					Enrollment
	Q1 Jul-Sep	Q1 Oct - Dec	Q2 Jan - Mar	Q3 Apr - Jun	Q4 Jul - Sep	
Exchange	6.3%	5.5%	5.5%	5.5%	5.5%	31,141
Medicaid	58.2%	60.8%	60.8%	60.8%	60.8%	343,725
CHIP	0.3%	0.4%	0.4%	0.4%	0.4%	2,277
TANF	1.7%	0.9%	0.9%	0.9%	0.9%	5,126
SNAP	25.7%	25.8%	25.8%	25.8%	25.8%	145,876
Childcare	1.6%	0.9%	0.9%	0.9%	0.9%	5,113
GPA	0.0%	0.0%	0.0%	0.0%	0.0%	46
SSP	6.2%	5.7%	5.7%	5.7%	5.7%	32,472
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>565,776</b>

**Medicaid/HSRI/CHIP Allocation – FFY 2022 Only**

The budget for Medicaid/HSRI/CHIP Allocation is for costs assigned to Medicaid, including both CHIP and Non-CHIP Medicaid, and to HSRI for the QHP population. Vendors allocated in accordance with this allocation are listed in Attachment D. This allocation is utilized for both DDI and M&O for FFY 2022.

Table 10d. Medicaid/HSRI/CHIP Allocation

M&O Exchange, Medicaid, CHIP Allocation	FFY2022 - % Allocation					Enrollment
	Q1 Jul - Sep	Q1 Oct - Dec	Q2 Jan - Mar	Q3 Apr - Jun	Q4 Jul - Sep	
Exchange	9.7%	8.3%	8.3%	8.3%	8.3%	31,141
Medicaid	89.9%	91.1%	91.1%	91.1%	91.1%	343,725
CHIP	0.4%	0.6%	0.6%	0.6%	0.6%	2,277
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>377,143</b>

**All Excluding HSRI Allocation – FFY 2022 Only**

This allocation is used for DHS specific work that does not impact HSRI. Vendors allocated in accordance with this allocation are listed in Attachment D. This allocation is utilized for both DDI and M&O for FFY 2022.

Table 10e. All Excluding Exchange/HSRI Allocation

All excl. Exchange	FFY2022 - % Allocation					Enrollment
	Q1 Jul - Sep	Q1 Oct - Dec	Q2 Jan - Mar	Q3 Apr - Jun	Q4 Jul - Sep	
Medicaid	62.1%	64.3%	64.3%	64.3%	64.3%	343,725
CHIP	0.3%	0.4%	0.4%	0.4%	0.4%	2,277
TANF	1.8%	1.0%	1.0%	1.0%	1.0%	5,126
SNAP	27.4%	27.3%	27.3%	27.3%	27.3%	145,876
Childcare	1.8%	1.0%	1.0%	1.0%	1.0%	5,113
GPA	0.0%	0.0%	0.0%	0.0%	0.0%	46
SSP	6.6%	6.1%	6.1%	6.1%	6.1%	32,472
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>534,635</b>



**DHS Field Staff – FFY 2022 Only**

Prior to considering DHS field staff time for enhanced funding for inclusion in the IAPD-U budget, an assessment is done to determine how staff are spending their time. For staff that work 100 percent on a program such as Medicaid or SNAP, staff will sign attestations to confirm that 100 percent of their work has been dedicated to that program. For staff that work on multiple programs, the State is tracking time and working to identify staff who need to time track as work priorities shift to multiple programs. DHS staff who work with clients within the field offices (Economic Services Division) will participate in a Random Moment Time Study (RMTS) as described below. These values are used for cost allocation of field staff.

The purpose of this RMTS is to measure the level of effort spent on various activities performed by the Eligibility Technicians (ETs), Social Caseworkers and other staff included in Attachment C. These staff, who are all State employees, perform program eligibility determination activities on behalf of customers served by the Department of Human Services (DHS). Organizationally, ETs and Social Caseworkers work within the Economic Services Division of DHS. The RMTS allocation is applied to all DHS Field Staff employees including supervisors, clerical and interpreters who do not work 100 percent for a specific program. Field staff hours reported as Medicaid or CHIP are then claimed at 75 percent federal Medicaid and the current CHIP federal administrative rate.

The RMTS is administered using EasyRMTS™, which is a tool developed by Public Consulting Group, Inc. (PCG). The automated RMTS application was developed to comply with all federal rules and regulations related to cost allocation practices and claiming for reimbursement of federal dollars. The software supports accurate reporting of reimbursable administrative activities, which are generally required by federal approving agencies to be measured through a time study. EasyRMTS™ puts the least administrative burden on staff as possible while allowing users to measure their time and claim appropriately for Federal Financial Participation (FFP). The system allows participants to indicate directly, via a series of survey questions in the software, the activities and programs they are supporting.

Below is a chart that averages the RMTS percentages by program for the past four quarters. As shown, this is the allocation being used for FFY 2021. Enhanced Medicaid match activities claimed at 75 percent federal share include the following: eligibility determination or redetermination, case updates or changes, case closures or terminations, follow up on conflicts with self-declaration, and performing an *ex-parte* Medicaid determination for those no longer eligible for MAGI Medicaid.

DHS works with PCG on a continuing basis to review and refine the RMTS process to most accurately assign field staff costs to all DHS programs.

*Table 10f. DHS Eligibility Support Allocation - October 1, 2020 – September 30, 2021*

Program	CCAP	GPA	RIW	SNAP	SSP	Medicaid Enhanced	Medicaid Admin
RMTS %	5.11%	4.80%	3.58%	51.60%	1.29%	25.77%	7.85%

Only the DHS work identified by the RMT study as Medicaid Enhanced is considered as part of this IAPD-U as that is only a portion of the DHS workers time that is considered to be part of the UHIP project. Once it is determined how much of the DHS field staff time is UHIP-related, the total is then split between Medicaid and CHIP using the percentages associated with each program’s duplicated recipient count on April 30, 2021.

**Allocated Medicaid – FFY 2022 Only**

For staff that work 100 percent on UHIP Medicaid/CHIP, staff sign attestations to confirm that 100 percent of their work has been dedicated to that program. The allocation to be used for these State staff beginning Oct 1, 2021 is in the tables below. Vendors allocated in accordance with this allocation are listed in Attachment D.

Table 10g. Allocated Medicaid

Allocated Medicaid	FFY2022 - % Allocation					Enrollment
	Q1 Jul - Sep	Q1 Oct - Dec	Q2 Jan - Mar	Q3 Apr - Jun	Q4 Jul - Sep	
Medicaid	99.5%	99.3%	99.3%	99.3%	99.3%	343,725
CHIP	0.5%	0.7%	0.7%	0.7%	0.7%	2,277
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>346,002</b>

**Medicaid Only Cost Allocation Methodology - FFY 2022 Only**

The OHHS Long Term Services and Supports Unit supports the eligibility determination for Medicaid applications only. CHIP is not included in this work. The staff in this unit work to resolve eligibility issues due to system errors. Therefore, this expense is allocated 100 percent to Medicaid only with a 90 percent Federal Financial Participation (FFP).

Table 10h. Medicaid Only Allocation

DDI Medicaid Only	FFY2022 - % Allocation				
	Q1 Jul - Sep	Q1 Oct - Dec	Q2 Jan - Mar	Q3 Apr - Jun	Q4 Jul - Sep
Medicaid	100.0%	100.0%	100.0%	100.0%	100.0%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

**COVID DDI Allocation**

The COVID work included in this budget request for FFY 2020 and FFY 2021 was not included in prior budgets. A state of emergency, due to COVID-19 pandemic was declared in Rhode Island March 9, 2020. In FFY 2022, to the State is planning to extend necessary COVID system mitigations as well as COVID recovery. The total amount of the COVID budget included for both FFY 20 and FFY 2021 is \$1.7M. The state is proposing to utilize the Duplicate recipient count cost allocation with a M&O or 75 percent reimbursement from CMS and also includes CARES Act Funding. Table 10L below shows which program allocations will be fully funded with CARES Act funds. The state will provide the 25 percent required state match for the Medicaid program allocation in order to receive the 75 percent federal match.

*Table 10I. COVID DDI Allocation*

This allocation is for M&O work contained in Deloitte amendment 1 and increased for the interactive voice recognition added in Deloitte amendment 4.

COVID DDI Allocation	FFY2023 - % Allocation			
	Q1 Oct-Dec	Q2 Jan-Mar	Q3 Apr-Jun	Q4 Jul-Sep
HSRI - State Funds Only	10.8%	10.8%	10.8%	10.8%
Medicaid - 90% CMS Federal Funds	52.0%	52.0%	52.0%	52.0%
CHIP - State Funds Only	0.3%	0.3%	0.3%	0.3%
RI Works - State Funds Only	0.6%	0.6%	0.6%	0.6%
SNAP - State Funds Only	17.9%	17.9%	17.9%	17.9%
Childcare - State Funds Only	0.6%	0.6%	0.6%	0.6%
GPA	0.0%	0.0%	0.0%	0.0%
SSP - State Funds Only	17.9%	17.9%	17.9%	17.9%
Refugee Cash	0.0%	0.0%	0.0%	0.0%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

**COVID M&O percent Allocation**

This allocation is for M&O work contained in Deloitte amendment 1.

Program	Population	Percentage	Funding Source
Exchange	31,141	5.5%	CARES Act
Medicaid	343,725	60.8%	CMS 90% Reimbursement
CHIP	2,277	0.4%	CARES Act
RI Works	5,126	0.9%	CARES Act
SNAP	145,876	25.8%	CARES Act
Childcare	5,113	0.9%	CARES Act
GPA	46	0.0%	CARES Act
SSP	32,472	5.7%	CARES Act
<b>Total</b>	<b>565,776</b>	<b>100.0%</b>	

**PHE Unwinding DDI Allocation**

This allocation is for work related to the Public Health Unwinding system enhancements. The allocation is based on the CAM allocation for hours and will be reconciled to insure there is not more than a 2% variance. If so, an IAPD-U will be submitted or hours will be reconciled and adjustments processed at the end of FFY 2023.

	FFY2023 - % Allocation			
	Q1	Q2	Q3	Q4
	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep
<b>PHE Unwinding DDI Allocation</b>				
HSRI	24.6%	24.6%	24.6%	24.6%
Medicaid - 90% CMS Federal Funds	24.3%	24.3%	24.3%	24.3%
CHIP	0.2%	0.2%	0.2%	0.2%
RI Works	0.9%	0.9%	0.9%	0.9%
SNAP	24.5%	24.5%	24.5%	24.5%
Childcare	0.9%	0.9%	0.9%	0.9%
GPA	0.0%	0.0%	0.0%	0.0%
SSP	24.6%	24.6%	24.6%	24.6%
Refugee Cash	0.0%	0.0%	0.0%	0.0%
<b>Total</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>	<b>100.0%</b>

***PHE Unwinding M&O Allocation***

This allocation is for work related to the Public Health Unwinding and will follow the duplicate recipient count allocation.

	FFY2023 - % Allocation				Enrollment
	Q1	Q2	Q3	Q4	
	Oct-Dec	Jan-Mar	Apr-Jun	Jul-Sep	
<b>Duplicate Recipient Count</b>					
Medicaid	63.0%	63.0%	63.0%	63.0%	369,718
CHIP	0.6%	0.6%	0.6%	0.6%	3,394
HSRI	5.3%	5.3%	5.3%	5.3%	31,329
SNAP	23.4%	23.4%	23.4%	23.4%	137,409
Childcare	1.0%	1.0%	1.0%	1.0%	5,591
RI Works	1.2%	1.2%	1.2%	1.2%	6,913
General Public Assistance	0.0%	0.0%	0.0%	0.0%	176
SSP- State Supplemental Payment	5.5%	5.5%	5.5%	5.5%	32,483
Refugee Cash Asst.	0.0%	0.0%	0.0%	0.0%	52
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>587,065</b>

***SNAP APRA Allocation – FFY 2022 Only***

This allocation is for work directly related to the FNS approved SNAP ARPA grant for FFY 2022.

### ***Easy Enrollment Allocation***

This allocation is for work directly related to the Easy Enrollment project which is funded with 100% state ARPA funds. No federal funds match is requested from CMS or FNS and no other UHIP programs are charged to this allocation.

### ***Mobile App/Child Care Phase 1 Allocation***

This allocation is for work directly related to Phase 1 of the Mobile App enhancements. This is funded 100% of state funds and no federal funds from either CMS or FNS are requested.

### ***HCBS Planning Allocation***

This allocation is for work directly related to planning hours for HCBS. This is funded a 10% share of e-FMAP funds and match with 90% Medicaid federal funds.

### ***HSTP Allocation***

This allocation is for work directly related to HSTP as contained in Deloitte Amendment 3. This is funded a 10% share of e-FMAP funds and match with 90% Medicaid federal funds.

Attachment D provides a breakdown of every FFY 2023 budget line item attributed to one of the allocation methodologies described above.

## **11 SECURITY, INTERFACE, DISASTER RECOVERY, AND BUSINESS CONTINUITY PLANNING**

The State is continuing efforts to advance the UHIP security maturity model in FFY 2022. Security operations support has been transitioned to the Deloitte Security Operations team to partner with the State's oversight team with the start of the 2021 M&O contract. The state has a dedicated ISSO to oversee RIBridges Security Operations.

The enhanced team will continue to leverage industry knowledge of system security components to prevent cybersecurity threats and detect incidents. TrendMicro Deep Security has been implemented and the QRadar SIEM will continue to be enhanced with expanded event detection, new network flows and effectively tuned use cases for high fidelity alerting. In addition, Splunk continues to be leveraged to audit logs of user access to the system.

The Continuous Monitoring Program includes ongoing assessments to scan and test the application, network, and source code with automated software tools and manual testing techniques to identify vulnerabilities. These assessments are performed in production as well as the pre-release environments to prevent security defects released into production.

The State's security policies are in alignment with the NIST Risk Management Framework. Compliance with federal security and privacy guidelines is continuously assessed and corrective action plans are actively tracked for resolution through technical change or process improvement. The deliverables for the 2022 ATC package have been submitted to the CMS portal in July 2022.

RIBridges has a Disaster Recovery site in Sacramento, California. The RIBridges team successfully completed its annual disaster recovery test in September 2021. The test results demonstrated a Recovery Point Objective (RPO) of 5 minutes and Recovery Time Objective (RTO) of 8 hours, far below the respective targets of 15 minutes and 48 hours respectively. Additionally, for this year's test, the scope was expanded to include more realistic business operations including access to the system (hosted on the disaster recovery (DR) environment) via laptop over the internet and including Electronic Benefits Transfer (EBT) card printing. The annual disaster recovery test for this year is currently being planned and is scheduled to be complete by September 2022.

We continuously improve processes to enhance the reporting of interface data discrepancies and to provide relevant diagnostics. This prevents the consumption of incorrect data prior to processing to ensure data integrity. Interfaces are continuously monitored for exceptions. Processes are in place to maintain the key interface partner contacts and procedures to communicate exceptions and assure mitigation of discrepancies before they impact customers. Interface data security is maintained through secure transport layer security, signed trusted certificates and secure storage.

## **12 CONDITION AND STANDARDS**

The State worked to incorporate Medicaid Information Technology Architecture (MITA) and Medicaid Eligibility & Enrollment Toolkit/Lifecycle (MEET/LC) into its planning and decision-making. Through the MITA effort, the State's vendor, CSG, completed Rhode Island's portion of a three-State collaborative effort in April 2018, culminating in the MITA State Self-Assessment 3.0.

A separate, related effort was completed by CSG, at the request of Rhode Island's Executive Office of Health & Human Services; it focused on the impact of RIBridges on MITA maturity levels.

As requirements arise per CMS, the State will work with CMS to develop a project partnership understanding and identify the UHIP's correct placement in the Eligibility and Enrollment Lifecycle and establish checklist and gate-based monitoring as appropriate.

CMS certified RIBridges on July 20, 2022.

## 13 IAPD FEDERAL ASSURANCES

The State should indicate by checking “Yes” or “No” whether or not it will comply with the Code of Federal Regulations (CFR) and the State Medicaid Manual (SMM) citations.

The State should provide an explanation for any “No” responses.

### *Procurement Standards (Competition / Sole Source)*

- SMM, Part 11  Yes  No  
45 CFR Part 95.613  Yes  No  
45 CFR 75, Subpart D, Subject Group 26  Yes  No

### *Access to Records, Reporting and Agency Attestations*

- 42 CFR Part 433.112(b)(5) – (22)  Yes  No  
45 CFR Part 95.615  Yes  No  
SMM Section 11267  Yes  No

### *Software & Ownership Rights, Federal Licenses, Information Safeguarding, HIPAA Compliance, and Progress Reports*

- 45 CFR Part 95.617  Yes  No  
42 CFR Part 431.300  Yes  No  
45 CFR Part 164  Yes  No

### *Independent Verification and Validation (IV&V)*

- 45 CFR Part 95.626  Yes  No