# **Project Startup Report**

Submitted to Large Project Oversight on 07/21/2020

### GENERAL INFORMATION

**Project Name:** Electronic Visit Verification System **Agency Name:** Department of Human Services

Project Sponsor: Nancy Nikolas-Maier

Project Manager: Jacob Chaput

## PROJECT DESCRIPTION

As part of improving the lives of people by providing quality, efficient, and effective human services the Department of Human Services seeks to implement an electronic visit verification system. This new system will replace many manual processes that could be prone to waste, fraud, or abuse.

Additionally, personal care services and home services must be electronically verified in compliance with the 21<sup>st</sup> Century Cures Act and FLSA Home Care Rules. Non-compliance may result in loss of federal matched funds and could be found in violation of labor laws.

## BUSINESS NEEDS AND PROBLEMS

DHS Aging Services needs a system that will improve program efficiencies and meet federal requirements

- DHS does not have an EVVS to meet compliance with the FLSA Home Care Rule and the Cures Act.
- DHS has manual, paper processes that need automation.

## **PROJECT BASELINES**

Project Start Date	Baseline Start Date	Baseline End Date	Baseline Budget
4/16/2018	07/21/2020	08/06/2021	\$1,416,748

#### Notes:

Baseline End Date is subject to be changed based on procurement and implementation of a data aggregator for the EVVS.

#### **OBJECTIVES**

Business Objective	Measurement Description
Implement the EVVS and associated business processes	<ul> <li>The requirements of the FLSA Home Care Rule are met at Go-Live.</li> <li>The requirements of the Cures Act are met at Go-Live.</li> </ul>
Improve program efficiencies	<ul> <li>Eliminate the need of paper documents (subject to EVV) to verify services within the first year of operation.</li> <li>Eliminate the inefficiencies in the Service Authorization Entry and Approval process within the first year of operation.</li> </ul>

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# KEY CONSTRAINTS AND/OR RISKS

The project has the following constraints:

- DHS resources are limited in the number of staff available
- Section 12006 of the Cures Act requires states to implement an EVV system for Personal Care Services (PCS) by 1/1/19 (this was later extended to 1/1/20) and for Home Health Care Services (HHCS) by 1/1/23.
- The EVVS must interface with MMIS, whose staff time may be limited.
- Cost, schedule, scope, and quality are often in conflict during projects. The sponsor elected to prioritize as follows:
  - 1. Scope
  - 2. Schedule
  - 3. Quality
  - 4. Cost