Report Title: IT Strategic Plan Summary

Agency: 601 Department of Health   **Date:**   4/3/2017

Current Operational IT Investments

In this section, describe the high-level strategy the agency will use to manage existing operational IT investments over the next year to 5 years. This section should align with identified Business Requirements for Existing Technology (BReTs). At minimum, please address the following questions in your description of your agencys strategy for managing existing operational IT investments:

Are there existing IT investments that will require additional funding over the next year to 5 years, such as license renewals, re-competition of current IT contracts, or system enhancements required by the Agency Strategic Plan?

If there are systems that will no longer support the agencys business needs, either through poor performance or excessive cost, how does IT leadership in the agency plan to address the issues?

If the agency does not have the staff or funding to meet increasing demand for IT services, how will IT leadership fulfill the requests?

The Virginia Department of Health is highly reliant upon technology and data to run its business. VDHs mission is to protect the health and promote the well being of all people in Virginia. Our vision is to become the healthiest state in the nation. In order to support its many programs aligned with this effort, VDH uses many applications and data sources to support and enhance its decision-making. These data and applications are used to help inform how VDH targets its programs for different populations. The Office of Information Management and Health Information Technology is responsible for administering these applications, supporting datasets, data stewardship, data governance, security, testing, quality assurance, technology procurements, etc. VDH currently supports many different types of data sets and technologies. This presen ts a challenge for the Agency since data is sometimes duplicative or stored in several places. VDH has implemented a formal Informatics program to provide governance around the data used and displayed at VDH. The focus is on collecting an inventory of the current data sets and ensuring that standards are placed around these data. The Agency has made an investment over the past few years in data warehouse infrastructure and in building out staffing and skillsets among our data warehouse staff. A Data Governance Program Manager is now in place as well who is responsible for putting together the policies and guidance for a formal data governance framework for VDH. Additionally, VDH has placed an emphasis on the following projects for the biennium:

Division of Disease Prevention STDMIS Replacement Project – Maven
Contract, Budget and Grant enhancements/Cardinal
Enhancements to the Electronic Death Registration System
All-Payer Claims Database
Health Information Exchange
Virginia Immunization Information Systems Bi-Directional Project
Data Analytics/Informatics
EMS Systems upgrades
Recompete project with VITA

OIM-Health IT does support the existing mission critical applications that are currently in production. There are around 15 of these mission critical applications including WEB F&A, WebVision (a very large system requiring regular updates), EMS applications, etc. If these applications require additional updates, a corresponding entry will be made into the ITSP for VDH with the appropriate BRt documents.

The VDH mission has always included elements of emergency preparedness and response, but as the lead state agency for response to bioterrorism and other issues, the required level of reliability and redundancy of key systems, especially communications has increased. To this end, several EMS systems have been upgraded to support the new and more current functionality and capabilities.

The Virginia Department of Health has entered seven new projects (BRnTs) for this biennium. These

include the Blackboard Learning Management System, the Data Governance Program, the Safety Seat Project (LISSDEP), the WebF&A new modules to integrate the EMS Financial Processes project, the EMS Financial Module and the EMS Licensure and Compliance Project. These new projects are staffed through existing IT resources within the Office of Information Management and Health IT. These staff have several projects assigned to them. Contractors are brought in to supplement the staff if needed and if funding is available. Project plans are created so that adequate time and resources are available to complete the projects on time. The Agency does have the skillset to support this work, and at this time, funding is designated for these projects.

Finally, it should be noted that VDH is most always impacted regularly by either federal or state mandates beyond our control. We must be agile enough to make changes or updates to systems regularly when new federal/state mandates arise or when mandates change. Additionally, VDH regularly receives new projects or updates to projects during each General Assembly session. These are typically funded through federal grants, although, not always. These will be added to this strategic plan with associated BrTs as these changes/updates occur.

Factors Impacting the Current IT

In this section, the agency will describe the changes in their business environment that will require or mandate changes to the agencys current IT investments. These are requirements and mandates from external sources, such as other agencies or business partners, the agencys customer base, product and service providers, or new federal or state legislation or regulations. The agency must identify the business value of the change, any important deadlines that must be met, and the consequences if the deadlines are not met. In your discussion, be sure to note whether the proposed enhancements are funded or not. If the agencys existing current IT investments will not need enhancement due to requirements or mandates from external sources in the foreseeable future, the agency should enter the following text rather than leave the Factors Impacting the Current IT section blank

For each mandated change, summarize your agencys response from your Agency Strategic Plan, and is it the opinion of agency IT leadership that the IT portion of the response is adequately funded?

Do the mandated changes effect IT in other Commonwealth agencies, or in other states? If so, how?

Funding and the availability of resources continue to be a challenge for VDH. Currently the projects mentioned above are adequately funded, however as federal and state mandates come down, obtaining additional funding and qualified resources is an issue and continues to be an issue. VDH does rely heavily on contractors to supplement the existing staffing and resources.

Due to the fact that VDH is heavily grant funded, some IT applications and services are also grant funded. From time to time, the Federal grantor will mandate certain items in the systems or applications utilized by VDH, and we will make those changes accordingly. This is often funded through the appropriate federal grant. At this time there are no mandated changes impacting other Commonwealth Agencies.
The availability of qualified resources also continues to be a challenge for VDH. Some of our technologies are fairly specific to a health care environment, therefore the resources may be difficult to find.

Proposed IT Solutions

In this section, describe the high-level strategy the agency will use to initiate new IT investments over the next year to 5 years in support of the agency strategic objectives documented in your Agency Strategic Plan. The agency does not need to consider specific technologies at this time, however, the strategy should identify how the IT implementation will provide business value to the organization. This section should align with identified Business Requirements for New Technology (BRnTs). At minimum, please address the following questions in your description of your agencys strategy for initiating new IT investments:

What are the most important solutions, based on the priority assigned to the requirements by the business sponsors in your agency, and what is the approach to achieving these priority solutions?

If any new IT initiatives will be started in the upcoming budget biennium, is it the opinion of agency

IT leadership that it is adequately funded?

Does the agencys current IT staff have the appropriate skill set needed to support future agency technologies? If not, what skill sets need to be acquired?

If the agency will be engaged in multiple new IT initiatives, how will agency IT staff and agency subject matter experts be used across the initiatives?

The Virginia Department of Health has entered seven new projects (BRnTs) for this biennium. These include the Blackboard Learning Management System, the Data Governance Program, the Safety Seat Project (LISSDEP), the WebF&A new modules to integrate the EMS Financial Processes project, the EMS Financial Module and the EMS Licensure and Compliance Project. These new projects are staffed through existing IT resources within the Office of Information Management and Health IT. These staff have several projects assigned to them. Contractors are brought in to supplement the staff if needed and if funding is available. Project plans are created so that adequate time and resources are available to complete the projects on time. The Agency does have the skillset to support this work, and at this time, funding is designated for these projects.

Report Title: Strategic Plan

Agency: Department of Health   **Date:**   **4/3/2017**

Current IT Services

Category	Costs Year 1		Costs Year 2	
	GF	NGF	GF	NGF
Projected Service Fees	$7,796,590	$15,504,363	$7,884,682	$15,679,820
VITA Infrastructure Changes	$0	$0	$0	$0
Estimated VITA Infrastructure	$7,796,590	$15,504,363	$7,884,682	$15,679,820
Specialized Infrastructure	$0	$0	$0	$0
Agency IT Staff	$4,961,250	$1,945,418	$4,961,250	$1,945,418
Non-agency IT Staff	$1,700,643	$2,859,482	$1,700,643	$2,859,482
Cloud Computing Service	$0	$0	$0	$0
Other Application Costs	$596,838	$0	$626,680	$0
Total	$15,055,321	$20,309,263	$15,173,255	$20,484,720

Proposed IT Investments

Category	Costs Year 1		Costs Year 2	
	GF	NGF	GF	NGF
Major IT Projects	$15,000	$9,610	$525,000	$175,000
Non-Major IT Projects	$0	$0	$0	$0
Agency-Level IT Projects	$0	$1,233,000	$0	$685,000
Major Stand Alone IT Procurements	$1,700,643	$3,354,482	$525,000	$670,000
Non-Major Stand Alone IT Procurements	$470,000	$659,890	$240,000	$226,690
Agency-Level Stand Alone IT Procurements	$498,909	$631,847	$498,909	$631,847
Procurement Adjustment for Staffing	$0	$0	$0	$0
Total	$498,909	$1,864,847	$498,909	$1,316,847

Projected Total IT Budget

Category	Costs Year 1		Costs Year 2		
	GF	NGF	GF	NGF	Total Costs
Current IT Services	$15,055,321	$20,309,263	$15,173,255	$20,484,720	$71,022,562
Proposed IT Investments	$498,909	$1,864,847	$498,909	$1,316,847	$4,179,512
Total	$15,554,230	$22,174,110	$15,672,164	$21,801,567	$75,202,074

Report Title: Business Requirements For Technology

Agency:	Department of Health (VDH)	Date:	4/3/2017

BReT VVESTS – VR - Major enhancements requested by EDRS stakeholders	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/2/2016
Mandate:	No
Mission Critical:	
Description:	

These enhancements entail changes to the enrollment and security application as well as making VVESTS compatible with several browsers.

BRET - eCOMPAS	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	2/5/2015
Mandate:	Yes
Mission Critical:	Yes
Description:	

Virginia Department of Health (VDH) was awarded a three-year demonstration grant from The Health Resources and Services Administration (HRSA), HIV/AIDS Bureau beginning September 1, 2014, under the Special Project of National Significance (SPNS) Health Information Technology (HIT) Capacity Building for Monitoring and Improving Health Outcomes along the HIV Care Continuum - Capacity Building Sites initiative. The purpose of this grant program is to support the Virginia Ryan White (RW) Part B grantee to enhance the HIT systems in the State. The enhanced HIT systems must fully integrate and utilize relevant measures of Human Immunodeficiency Virus (HIV) treatment, surveillance and laboratory data to allow for a more efficient collection, monitoring and tracking of health outcomes of people living with HIV (PLWH) along the HIV Care Continuum.

BRet - Office 2010 to Office 2016	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/19/2016
Mandate:	No
Mission Critical:	No
Description:	

Our infrastructure at the Chester datacenter is being upgraded due to end of life cycle on various systems so we need to upgrade Microsoft office to Office 2016.

BReT - Pre-hospital Patient Care Data System Contract	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/15/2015
Mandate:	Yes

Mission Critical:	Yes

Description:	

The software is utilized to collect, store, and report hospital and emergency medical services (EMS). Another module will automate the business processes and provide a database for the licensure of EMS agencies, permitting of ambulances, and inspection of these items.

BReT - VDH Enterprise Security Risk Management / Risk Assessment

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/4/2016
Mandate:	No
Mission Critical:	No

Description:	

VDH has an ongoing Risk Assessment/System Security Plan update project designed to bring agency IT System risk management and security documentation into compliance with SEC501-09 standards. VDH is working with CSRM to comply with the 'Green in two' expectations for audit and security. VDH has a current project plan to assess (audit and security) the identified systems provided by VITA/CSRM to ensure they are within the required audit and security risk assessment plan guidelines.

BReT - VDH IT System Vulnerability Scanning Consolidation

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/8/2016
Mandate:	No
Mission Critical:	No

Description:	

VDH continues to integrate vulnerability scanning functions, not provided/supplied by VITA/CSRM, into a common environment under the Quality Assurance team. This will provide consistency to all System Owners to develop corrective actions based on the scan results.

BReT VDH Software Support Renewal FY15 & Fy16

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/11/2014
Mandate:	No
Mission Critical:	Yes

Description:	

This Bret is to purchase yearly software support renewals. This support renewal fee provides technical support and software upgrades for various software products such as Logi Analytics, Web Trends, Arcgis, QA software, etc. used in Programs and Health Districts in the agency.

BRet - Windows XP -10

BRT Type:	Business Requirement for Existing Technology

Date Submitted:	8/19/2016
Mandate:	No
Mission Critical:	No

Description:

Our infrastructure at the Chester datacenter is being upgraded due to end of life cycle on various systems so we need to upgrade the operating system to Windows 10.

BReT WebF&A -- Enhancements due to Cardinal

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/2/2016
Mandate:	No
Mission Critical:	

Description:

These are various enhancements to WebF&A which are due to the Cardinal changes.

BReT CAST-SQL Migration

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	
Mandate:	No
Mission Critical:	

Description:

Every Woman's Life (EWL) is a public health program that helps uninsured, low income women gain access to free breast and cervical cancer screening services. Screening and early detection reduces death rates, improves treatment options, and greatly increases survival. The program staff uses a CDC developed tool called CAST which is a MS Access based software. This needs to be upgraded to CAST_SQL which is a web based software with SQL SERVER backend.

BReT CONTRACT WITH CONNECT VIRGINIA Bret

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	11/4/2014
Mandate:	No
Mission Critical:	Yes

Description:

THE 2014 VIRGINIA ACTS OF ASSEMBLY (CH.2)PROVIDES $350,000 IN GENERAL FUND SUPPORT FOR ONBOARDING TO CONNECT VIRGINIA; COSTS OF TRANSITIONING THE VIRGINIA DEPARTMENT OF HEALTH (VDH) "NODE" ON CONNECT VIRGINIA TO THE STATE AGENCY NODE; AND PROVIDING SUPPORT TO OTHER STATE AGENCIES IN THEIR ONBOARDING TO FURTHER IMPLEMENT THE HEALTH INFORMATION EXCHANGE (HIE) FOR ELECTRONIC HEALTH RECORDS (CONNECT VIRGINIA).

Bret Contract with Connect Virginia FY17 & FY18

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/1/2016
Mandate:	No
Mission Critical:	Yes

Description:

THE 2014 VIRGINIA ACTS OF ASSEMBLY (CH.2)PROVIDES $150,000 IN GENERAL FUND support each fiscal year FOR ONBOARDING TO CONNECT VIRGINIA; COSTS OF TRANSITIONING THE VIRGINIA DEPARTMENT OF HEALTH (VDH) "NODE" ON CONNECT VIRGINIA TO THE STATE AGENCY NODE; AND PROVIDING SUPPORT TO OTHER STATE AGENCIES IN THEIR ONBOARDING TO FURTHER IMPLEMENT THE HEALTH INFORMATION EXCHANGE (HIE) FOR ELECTRONIC HEALTH RECORDS (CONNECT VIRGINIA).

BReT CROSSROADS Maintenance Contract

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	7/6/2015
Mandate:	No
Mission Critical:	Yes

Description:

The scope of this contract is to provide software maintenance and enhancement services to the Crossroads Users Group for the Crossroads application software. The State of Virginia is serving as the lead SA for this contract on behalf of the states participating in the Crossroads User Group. The contract awardee shall provide IT software maintenance and enhancement services.

The mission of the United States Department of Agriculture Food and Nutrition Service (USDA/FNS), Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is to safeguard the health of low-income pregnant, postpartum and breastfeeding women, and infants, and children up to age five who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care. WIC is funded by a Federal grant program and is available in all 50 States, 35 Indian Tribal Organizations (ITOs), American Samoa, District of Columbia, Guam, Puerto Rico, the Virgin Islands and the Commonwealth of Northern Mariana Islands.
The WIC Program State Agency Model (SAM) is an FNS initiative to plan, develop, and deploy model management information systems (MIS) in WIC State agencies (SAs). Three WIC SAM consortia were created (no other consortia shall be created):
4 SPIRIT (Successful Partners in Reaching Innovative Technology)
4 MPSC (The Mountain Plains States' User Group)
4 Crossroads
The Crossroads User Group was created in response to the SAM mandate for designing, building and implementing new WIC information systems nationwide. FNS/USDA produced the SAM in order to save money by combining efforts with multiple states versus funding multiple MIS projects individually. The contract for the initial request for proposal (RFP) was awarded to Computers Sciences Corporation (CSC) in 2009 to build a SAM system for the states of Alabama, North Carolina, Virginia and West Virginia.
Alabama, North Carolina, Virginia and West Virginia have fully implemented the Crossroads WIC information System. Additionally, VA and WV currently use Electronic Benefit Transfer (EBT) for their benefit delivery and contract with EBT service providers. NC and AL currently use checks for their benefit delivery, but will be transitioning to EBT in the future. The four states are forming the Crossroads User Group, which will be the vehicle used to support new states once they transfer and implement this system in their state.

Bret Environmental Health Data Management System

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	4/5/2016
Mandate:	Yes
Mission Critical:	Yes
Description:	

OEHS desires to initiate a competitive process (RFP) to replace the current contract with HealthSpace that expires July 1, 2017. HealthSpace has been the current vendor of the data system for approximately 15 years and a competitive process will help assure that the system used best meets the needs of the agency. The current system is a comprehensive and highly customized environmental health data management system used by OEHS and health districts to collect, collate and share data.

BReT Migrate Windows 2003 servers to Windows 2012

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	
Mandate:	No
Mission Critical:	Yes
Description:	

VDH has servers that run on Windows 2003 operating system version. Based on the VITA/NG partnership's roadmap, this has to be migrated to Windows 2012

BRet Replacement and Relocation of Aging Servers in the Madison Building

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/12/2016
Mandate:	No
Mission Critical:	Yes
Description:	

To replace and relocate aging SUN Microsystems servers from the Madison Building to the CESC.

BReT Upgrade and Migrate current Data Warehouse servers from Solaris to Linux

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	
Mandate:	No
Mission Critical:	Yes
Description:	

2 VDH data warehouse servers to be upgraded from Solaris to Linux operating system witn increased space and faster processors.

BReT Upgrade current Oracle Databases to Oracle 12c

BRT Type:	Business Requirement for Existing Technology

Date Submitted:	
Mandate:	No
Mission Critical:	Yes

Description:

VDH has many oracle Databases running on Oracle 11g version. These need to be upgraded to Oracle 12c.

BReT Upgrade SQL SERVER 2000 to SQL SERVER 2012	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	
Mandate:	No
Mission Critical:	Yes

Description:

VDH has several databases that are still using SQL SERVER 2000 release and are located in many different small servers. Goal of this project is to upgrade the databases to SQL SERVER 2012 release and consolidate the servers

BReT Upgrade SQL SERVER 2005 to SQL SERVER 2012	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	
Mandate:	No
Mission Critical:	

Description:

VDH has several databases that are still using SQL SERVER 2005 release and are located within multiple small servers. The goal of this project is to upgrade agency databases to SQL SERVER 2012 release and consolidate servers. Further, the goal is to maintain all SQL environments with latest release.

BReT Upgrade to IE10 from IE 8	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	
Mandate:	No
Mission Critical:	Yes

Description:

According to the VITA/NG infrastructure ROADMAP, VDH has to upgrade the Internet Browser from IE 8 to IE 10.

BReT Upgrade to Windows7 from WindowsXP Operating System	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/29/2014

Mandate:	No
Mission Critical:	

Description:

According to the VITA/NG infrastructure ROADMAP, VDH has to upgrade the PC Operating System from Windows XP to Windows 7.

BReT VDH Consultant / Staff Augmentation Renewal FY16

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/11/2014
Mandate:	No
Mission Critical:	Yes

Description:

This PBA is for a consolidated submission and includes VDH IT contractors that are needed on an ongoing basis from July 1, 2015 through June 30, 2016. This procurement is to extend the services of highly knowledgeable and skilled information technology consultants. VDH utilizes consultants to augment our current information technology staff.

BRet VDH Consultant / Staff Augmentation Renewal FY17

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	3/16/2016
Mandate:	No
Mission Critical:	Yes

Description:

This Bret is for a consolidated submission and includes VDH IT contractors that are needed on an ongoing basis from July 1, 2016 through June 30, 2017. This procurement is to extend the services of highly knowledgeable and skilled information technology consultants. VDH utilizes consultants to augment our current information technology staff.

BReT VDH Oracle Software Support Renewal FY15 & FY16

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/9/2014
Mandate:	No
Mission Critical:	Yes

Description:

This BRET is for the purchase for the yearly Oracle software support renewal.
This support renewal fee provides technical support and software upgrades for all Oracle products used in development and maintenance of applications used in VDH programs and Health Districts.

BRet VDH Oracle Software Support Renewal FY17

BRT Type:	Business Requirement for Existing Technology

Date Submitted:	3/11/2016
Mandate:	No
Mission Critical:	Yes

Description:

This BRET is for the purchase for the yearly Oracle software support renewal.
This support renewal fee provides technical support and software upgrades for all Oracle products used in development and maintenance of applications used in VDH programs and Health Districts.

Bret VDH Oracle Software Support Renewal FY18

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/1/2016
Mandate:	No
Mission Critical:	Yes

Description:

This BRET is for the purchase for the yearly Oracle software support renewal.
This support renewal fee provides technical support and software upgrades for all Oracle products used in development and maintenance of applications used in VDH programs and Health Districts.

Bret VDH Software Support Renewal FY17 & FY18

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/1/2016
Mandate:	No
Mission Critical:	Yes

Description:

This Bret is to purchase support renewals. The support renewal fees provide technical support and software upgrades for various software products such as Tableau, Web Trends, ArcGIS, QA software, etc. used in Programs and Health Districts in the Virginia Department of Health (VDH).

BRet VENIS Renewal

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	6/10/2015
Mandate:	No
Mission Critical:	Yes

Description:

In 2000, the Virginia Department of Health contracted with HealthSpace USA Inc. to develop a comprehensive environmental health system to meet the specific needs of the Office of Environmental Health Services. At the time HealthSpace technology was best suited to meet the requirements of this Office, and over the past 15 years, the system has been developed and expanded to meet the needs of this Office. No other system currently is available that will meet the needs of this Office without extensive modifications and a lengthy implementation process. In 2014, the Office of Environmental Health Services began a lengthy process to develop a Request for Proposal (RFP) to solicit new proposals for meeting the needs of this Office. We are requesting the approval of a 2 year procurement so that we can prepare the comprehensive RFP and have a vendor selected by the Spring of 2016. We know of no other system that can met the

diverse need of this Office at this time.

HealthSpace uses a different technology than any other vendor offering similar services on which the user interface is based. The system uses a hierarchical database structure for its user interface databases. This provides the ability to easily upgrade the system without having to deploy a new version of the software everytime a change is made, and HealthSpace has demonstrated that they can quickly react to Office needs and changes. Each year new changes are made to this system to improve functionality or based on the changing need of this Office.

The per-unit cost is in line with other vendors or similar out-of-the-box solutions. The annual price has now been changed to a per system cost so we are no longer billed for adding new users to the system. The service includes hosting, on-going training, all technology upgrades and on demand module development and system enhancement. Also, there are report writers on the HealthSpace's staff that can provide on-demand reports, with a short turn-around time, when required which is more than other vendors typically offer. In addition, a new vendor would have to do substantial customization to meet this Office's needs which would be costly and require a substantial amount of time to complete. HealthSpace has not increased the price to the Virginia Department of Health for the past seven (7) years.

BReT VIIS Maintenance and Enhancement Contract

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/20/2015
Mandate:	No
Mission Critical:	Yes

Description:

ESTABLISH AN IT CONTRACT TO MAINTAIN AND ENHANCE THE VIRGINIA IMMUNIZATION INFORMATION SYSTEM (VIIS). THIS IS THE CORE CONTRACT THAT SUPPORTS VIIS. VIIS IS A CRITICAL COMPONENT NEEDED TO ACHIEVE THE FUNDAMENTAL MISSION OF THE DIVISION OF IMMUNIZATION TO PREVENT AND CONTROL VACCINE PREVENTABLE DISEASE. VIIS SUPPORTS PRIVATE AND PUBLIC HEALTHCARE PROVIDERS IN THE APPROPRIATE DELIVERY OF IMMUNIZATIONS BY MAINTAINING AN ACCESSIBLE AND DEFINITIVE IMMUNIZATION HISTORY ON THE CLIENTS. VIIS ASSISTS ENROLLED PROVIDERS WITH VACCINEORDERING AND INVENTORY MANAGEMENT AND IMPROVES VACCINE ACCOUNTABILITY. AS VIIS BECOMES MORE ROBUST, IT WILL BECOME THE PRIMARY MECHANISM FOR POPULATION BASED IMMUNIZATION COVERAGE ASSESSMENTS AT THE STATE AND LOCAL LEVEL.

BReT Virginia Immunization and Information System Maintenance Bret

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/25/2014
Mandate:	No
Mission Critical:	Yes

Description:

This BReT is for the maintenance and enhancement contract for the Virginia Immunization and Information System (VIIS). This will provide for the ongoing maintenance of the VIIS application and enhancements to the application as directed by the Virginia Department of Health/Division of Immunization.

BReT Messaging – Message Tracking Phase II

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/3/2016

Mandate:	No
Mission Critical:	

Description:
Improve and create more statistical messaging reports.

BReT VVESTS – OFHS Letter generation rewrite	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/2/2016
Mandate:	No
Mission Critical:	

Description:
This project entails rewriting the current VISIT letters.

BReT VVESTS – VR online user registration module	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/2/2016
Mandate:	No
Mission Critical:	

Description:
This module let users of the system register online.

BRet WebF&A --A new budget module	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/2/2016
Mandate:	No
Mission Critical:	

Description:
This is a new addition to the Web F&A application to help with budgeting.

Bret-Mobile platform and monitoring visits (retail stores) - VA WIC Program	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	1/28/2015
Mandate:	Yes
Mission Critical:	

Description:
MODIFY AN EXISTING CONTRACT WITH XEROX CORPORATION TO INCLUDE MAKING CHANGES TO AN EXISTING (APL CENTRAL) SYSTEM WHICH IS USED TO DOCUMENT MONITORING/STOCKING

VISIT RESULTS COMPLETED AT 850+ WIC AUTHORIZED STORES BY STATE AGENCY STAFF. COMPLY WITH STATE 12VAC-195-580 PERFORMANCE AND ADMINISTRATIVE MONITORING AND FEDERAL REGULATIONS (246.12) IN CONDUCTING UNANNOUNCED VISITS AT WIC AUTHORIZED STORES AND NEW STORE APPLICANTS.

BReT-Upgrade Database Version to SQL SERVER 2014 for CROSSROADS

BRT Type:	Business Requirement for New Technology
Date Submitted:	7/29/2016
Mandate:	No
Mission Critical:	Yes

Description:

The CROSSROADS system currently utilizes SQL SERVER 2008 as the database engine. The plan is to upgrade this to SQL SERVER 2014 which has more advanced security and reporting features.

BReT-Upgrade Oracle Database from Verson 11g to 12c for WeBVISION

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	7/29/2016
Mandate:	
Mission Critical:	

Description:

The WebVISION system currently uses Oracle 11g database and the needs to be upgraded to most recent 12c version. Other major systems with on VDH using Oracle Databases have already been migrated to version 12C. It is important to upgrade WebVISION as well to take advantage of newer security and database features. Maintain a standard database version across the agency.

BRET-Well Family System Licensing, Development and Maintenance

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	2/2/2015
Mandate:	Yes
Mission Critical:	Yes

Description:

Virginia Department of Health (VDH) currently contracts with Go Beyond, LLC for licensing and maintenance of its Well Family System (WFS) for three programs in the Office of Family Health Services/Division of Child and Family Health. The programs are Healthy Start, Resource Mothers, and the Maternal, Infant and Early Childhood (MIECHV) Home Visiting Programs. The WFS meets industry standards and can easily be configured to meet reporting requirements and the Well Family System can interface with other Virginia Department of Health data systems. The approved VITA sole source request submitted in 2011 is APR# 11-125.

Licensing and maintenance for the VDH home visiting programs that use the Well Family System for data entry, data analysis, and required reporting to state and federal funding agencies.

Expansion of services for the MIECHV program with this sole source request include: (1) management of the business analysis to align WFS and the MIECHV home-visiting programs (Healthy Families Virginia, Nurse-

Family Partnership, Parents as Teachers) with the required processes of data collection, reporting and customer care specific to the respective programs; and (2) development of data exchange processes for ongoing synchronization between the contracted community sites and WFS. This system will allow VDH programs in the Office of Family Health Services to track a mother and child's progress through multiple programs that touch that family.

BRnt Blackboard Learning Management System (LMS)

BRT Type:	Business Requirement for New Technology
Date Submitted:	2/1/2016
Mandate:	No
Mission Critical:	Yes
Description:	

The Blackboard learning management system (LMS) would allow for any emergency medical services (EMS) student to attend class without any geographic constraints. Blackboard would offer a hosted LMS with 600GB of constant storage, 50,000 user licenses, collaborate web conferencing with record capabilities, and mobile device capabilities. The business requirements are: learning management system with platform for full course delivery capabilities, targeted communication capabilities, emergency notification, video hosting service, video and content storage solution, mobile device capabilities, web conferencing solution with record functionality. This BRnT would be hosted by Blackboard, not having any additional supporting technology requirements

BRnT Care Connection for Children System User Network (CCCSun)

BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	
Mission Critical:	
Description:	

Our goal is to help families coordinate community and education resources with medical expertise to ensure that children with special healthcare needs can reach their maximum potential. We partner with families of children who have chronic healthcare needs to help open doors to needed resources and coordinate quality family-centered care.

BRnT Community Health Data Catalog

BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	No
Mission Critical:	Yes
Description:	

VDH is intending to build a Community Health Portal with studies, community health reports, health research information, and health related data for all Virginia citizens. This will provides a web interface that allows users to search and filter among hundreds and thousands of datasets. It will also offer some simple data visualizations and data analytics. Users can preview the data using tabular and graphic previews as well as through customized map displays. Each dataset links to its own metadata page that provides a narrative description, source information, browsable tags, data restrictions, and data stewardship information.

BRnt Data Governance

BRT Type:	Business Requirement for New Technology
Date Submitted:	8/12/2016
Mandate:	No
Mission Critical:	Yes

Description:

Virginia's Plan for Well-Being provides the guiding principles for VDH activities. Data collection, analysis, and reporting provide the ability to monitor the various goals which make up the overall Plan. A core component to ensuring these data efforts are adequate, accurate, and timely is the concept of data governance, which provides a flexible, modular framework for managing and maintaining data assets.

BRnT e-GIFT (RSAF replacement)

BRT Type:	Business Requirement for New Technology
Date Submitted:	9/29/2014
Mandate:	
Mission Critical:	

Description:

e-GIFT (RSAF replacement) has the following outstanding components:
1. Continued refinement, enhancements and support of the existing new application modules.
2. New Grader module implementation and support.
3. Requirements gathering, development, testing, implementation and support of the following:
a. New Meeting module
b. New Payment module

BRnT EMS-Symposium

BRT Type:	Business Requirement for New Technology
Date Submitted:	9/29/2014
Mandate:	
Mission Critical:	

Description:

Symposium has the following outstanding components:
1. Continued refinement, enhancements and support of the below already installed modules:
a. Call for Presentations
b. Selection
c. Scheduling
d. Contracts
e. Student Registration
f. Registration Admin functions
g. Hotel functions

2. Development, testing, implementation and support of the following brand new modules:
a. Room Host Email process
b. Instructor Swapping
c. Student Swapping

d. Surveys and survey results reports

e.

3. Requirements gathering - feasibility study - development, testing, implementation and support of the following:

a. Smart Phone application

BRnT Enhance Capacity and Quality of Data Visualizations and Health Analytics	
BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	No
Mission Critical:	
Description:	

VDH has many data sources available that have yet to be incorporated into one centralized data platform using a single accessible format. This severely limits the capacity to provide important community health assessment and health outcome data to the population and critical operational awareness to VDH staff. Integrated information is critical to understanding programmatic performance and interrelated financial, contractual, grant and human resource issues. Public health analytics can be reached faster and more completely by leveraging computer science, information science, and the latest advances in technology. Improvement in the data presentation capacity will create a useful health information resource for community partners and policy makers, thereby increasing our ability to administer programs in a manner that saves time, saves money and improves public health outcomes.

BRnT Expansion and Enhancement of Virginia's Local Health Department Billing Activities	
BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	Yes
Mission Critical:	Yes
Description:	

WEBVISION – VDH's patient management system for the local health department needs to be modified/enhanced once the grant is approved and a feasibility study is done.

LHDs are not consistently billing third party payers to maximize revenue. The new billing reports should regularly be prepared and revenue assessed by health district and by LHD. Both districts and LHDs should be provided feedback about billing activities related to the vaccine doses administered for the reporting period. As districts are made aware of potential revenue, it is expected that LHDs processes will be modified to maximize district and LHD revenue to the extent possible. These reports provide information by vaccine CPT code as well as by LHD and by district so they can also be used to assess compliance with the legislative mandate to bill third party payers for vaccines administered to meet school attendance requirements. Reports can determine which third party payers have been billed and from which revenue has been received for each LHD. Unfortunately, currently available processes are unable to specifically track each dose in regard to billing and revenue activities in order to assess dose level accountability.

Legislation was enacted effective July 1, 2014, that requires all LHDs to bill third party payers for all allowable costs associated with providing vaccines required for school attendance. Many LHDs provide vaccine, often Tdap vaccine required for 6th grade entry, in school-based clinics. Processes and forms currently used in these clinics do not consistently capture all of the information needed to accurately bill insurers.

Legislation also identifies LHDs as participating providers with managed health care plans in Virginia, regardless of whether VDH currently has a contract in place for reimbursement. It is anticipated that there will be problems associated with reimbursement from these plans for vaccines required for school attendance. Required vaccines provided to insured clients are currently purchased with state funds using the federal procurement contract. In order to maximize revenue and allow state funds to be used for other purposes, vaccine acquisition costs should be billed to private insurers in addition to administration fees. A mechanism

to specifically identify revenue associated with acquisition costs must be developed to ensure that acquisition revenue is returned to the central office for further vaccine purchases, assuming vaccine continues to be provided to LHDs through central office procurement processes. Revenue associated with vaccine administration fees must also be accurately identified in order to ensure that revenue remains with LHDs. There is currently no consistent way to clearly identify revenue specifically for vaccine acquisition costs. The system does not tie the vaccine funding source to each vaccine dose administered. General eligibility information is assigned at only the client level and at the time of each immunization encounter. Different vaccines may have different funding sources and reimbursement criteria even though they have been administered to the same client at the same visit. WV currently assigns revenue received only to the LHD. Compliance in the future with recent legislation will require dose-level accountability for revenue received and a mechanism to assign administration fee revenue for each vaccine to the LHD while assigning revenue for vaccine acquisition costs to the central office.

Modifying the system to capture dose-level accountability will also address the increasing need to capture and report doses by funding source and client eligibility.

BRnT Immunization Grant- Capacity Building Assistance for Infrastructure Enhancements

BRT Type:	Business Requirement for New Technology
Date Submitted:	9/17/2014
Mandate:	
Mission Critical:	

Description:

Proposed changes and other support needs for Messaging team in next 2 years:

Current Production Messaging Servers:
Rhapsody Application Server - Virtual server [169.134.196.40]
Configuration: memory - 8 GB, C drive 69.8 GB, D drive 199 GB and 2 CPU

Proxy server – Virtual Server [10.193.20.233]
Configuration: memory - 4 GB, C drive 49.8 GB and D drive 49.9 GB

SQL DB server – using Jeremiah for Immunization VIIS messages and MU data

Proposed Server request:

We are requesting the below servers to modify current infrastructure and add asymmetric cluster which will provide high availability, scalability and also improve application performance.

1. Rhapsody Application server s - 2 Physical servers with minimum 4 CPU, 16 GB memory, 69.8 GB space on C drive and 199 GB on D drive on each server. We can use SAN shared storage too for D: drive.
2. Proxy Server – 2 Virtual servers with minimum 8 GB memory, 49.8 GB space on C drive and 49.9 GB on D drive.
3. SQL DB server - 1 physical server with minimum 32 GB memory, 69.8 GB space on C drive and 199 GB on D drive. – this server will be used to store data from MU Application, Message tracking application and Immunization – VIIS messages

Allocation of Training funding for new FTE resource:
HL7 Training
Rhapsody Training

Resources:
One Consultant that would support all the application development and also messaging infrastructure changes for next two years.

BRnT Integration of Pharmacy Services System into WebVISION	
BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	No
Mission Critical:	Yes
Description:	

Pharmacy Services currently uses multiple platforms to perform their duties. They will need a system to replace the existing functionality of the legacy F&A application by allowing the local health departments to order pharmacy products and CHS needs an efficient way for Local Health Departments to receive, track and report on this pharmacy products. The health departments will need to maintain their inventory and track their drugs at the time of dispensing ultimately to the patient. The National Drug Code (NDC) will be used when replenishing inventory in Pharmacy Services. The inventory must be recognized if it is from a Federal Program 340B. This inventory must be kept separate from other inventory to provide record tracking on its utilization. Ability for Pharmacy Services being able to import inventory into Web Vision provided by an elected vendor of the state, will be explored. The WebVISION is VDH'sPatient Management System for the local health department which already has an inventory tracking system for the vaccines.

BRnT SB1039 – DMV VITAL RECORDS issuance	
BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	Yes
Mission Critical:	
Description:	

VDH's Division of Vital Records and DMV can currently issue birth records. Death, marriage and divorce records are available through the Health Departments located in each locality and through the Courts, respectively. SB 1309 calls for the DMV to begin offering citizens certified copies of all records. The electronic birth records were made available to be issued at the DMV locations by March, 2014. Death, marriage and divorce records would be available electronically by June, 2015.

BRnT SNP MIS Replacement	
BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	
Mission Critical:	No
Description:	

The Division of Community Nutrition (DCN) completed initial analysis and evaluation of alternatives for replacement of the ROAP management application. DCN evaluated three different alternatives: transfer of an operational system from another state, internal development of a system, and joint acquisition of a system with another Commonwealth agency. Based on the results of the feasibility study, DCN has selected the transfer option. The transfer option is based on proven technology, the systems evaluated support more than 37 nutrition programs nationwide. This option is cost effective and allows VDH to leverage a system that has been developed specifically to support SNP. A transfer system meets the program's needs for immediate replacement of ROAP, following a successful competitive bid, work can begin immediately to identify the specific needs of Virginia SNP.

This Investment Business Case by the Virginia Department of Health (VDH)/DCN is to establish the ROAP System Replacement Project to solicit bids from viable vendors for the transfer of an operational

management information system to support the Special Nutrition Programs (Child and Adult Care Food Program/CACFP and Summer Food Service Program/SFSP). The funding source is the Federal State Administrative (SAE) funds.

BRnT VDH - Local Health Departments – Issuance of Birth and Death Certificates

BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	No
Mission Critical:	
Description:	

Currently, Virginia citizens can obtain birth certificates at the Division of Vital Records (DMV) and various Division of Motor Vehicle (DMV) locations. The local health department offices do not have the ability to print birth certificates. In addition, the local health department offices do not print the Death certificates on a certified paper, but instead a copy.
To make it more convenient for the citizens of the Commonwealth, VDH's DVR shall allow the Local Health Departments to issue Vital Records – both Birth and Death Certificates via the Virginia Vital Events and Screening Tracking System (VVESTS).

BRnT VDH - Work Force Incentive Program Applicant and Fund tracking

BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	No
Mission Critical:	
Description:	

The Office of Minority Health and Health Equity (OMHHE) Health Care Workforce Incentive Programs (WIP) has multiple workforce incentive programs that are being maintained in either MS Access or MS Excel. The goal is to provide a web based application that can be utilized by merging THE ENTIRE client based applications into one relational database. Mary Marshall RN/LPN Nursing Scholarship Program (MMNSP) Nurse Practitioner/Nurse Midwife Scholarship Program, A Nurse Educator Scholarship Program, Federal J-1 Visa Waiver (J-1), Federal National Interest Waiver (NIW), Federal VA State Loan Repayment (SLRP), Virginia Physicians Loan Repayment Program(VLRP), and VA Medical Scholarship Program (VMSP) are programs that will be included in the new database. All of the applicants/recipients of the programs will need to be tracked and monitored throughout all stages until completing their obligations.

BRnT VIIS-VISITS Link

BRT Type:	Business Requirement for New Technology
Date Submitted:	9/29/2014
Mandate:	
Mission Critical:	
Description:	

Purpose: The Virginia Early Hearing Detection and Intervention Program (VEHDIP) and the Division of Immunizations propose to develop a collaborative linkage between their two respective data systems to enable primary health care physicians to be informed about newborn hearing screening results. This will provide an electronic avenue for the Commissioner to inform primary health care physicians about infants

who have risk indicators for progressive hearing loss or who are in need of follow up testing following a failed, inconclusive, or missed newborn hearing screening as required in Code of Virginia § 32.1-64.2.

The proposed solution will link the Immunization system VIIS with the Hearing Screenings from the VVEST system. VDH has performed the work to send the results to the VIIS system which was supported and developed by HP. This project is for HP to display the Hearing Screening Results obtained from VVEST in the VIIS system for the pediatricians to see.

BRnT Web F&A - Travel Authroization Request (TAR)

BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	No
Mission Critical:	Yes
Description:	

Currently VDH maintains paper-based event and travel requests submission and approval which are time consuming processes. The paper process also delays other administration processes that depend upon travel approval. There is no systematic way to track and manage travel requests which leads to misleading, unreliable information and requires more resources to pull the information together.

BRnT Web F&A - Payroll/CIPPS Processing and PMIS Data integration - Migration

BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	No
Mission Critical:	Yes
Description:	

VDH's legacy F&A system does Payroll/CIPPS processing and PMIS data integration for use within the agency. This system is obsolete in its functionalities and utilizes out dated technology and unsupported software versions. This system is not scalable and provides limited opportunity to integrate data with other systems. This needs to migrated to Web F&A with improved design and efficiency.

BRnT Web F&A CARDINAL interface

BRT Type:	Business Requirement for New Technology
Date Submitted:	
Mandate:	No
Mission Critical:	
Description:	

Virginia Department of Accounts is changing their financial and accounting system from CARS to CARDINAL. The WEB F&A system currently interfaces with CARS and have to be developed to interface with CARDINAL.

BRnT Web F&A Contract, Budget and Grant enhancements

BRT Type:	Business Requirement for New Technology

Date Submitted:	
Mandate:	No
Mission Critical:	Yes

Description:

Contract: Currently the Contracts Office maintains paper based contract information that is time consuming in creating various reports and statistical analyses. It also delays tracking contract maintenance functions like renewal, termination or extension as there is no systematic way to keep track and manage contracts. This results in misleading and unreliable information and requires more resources to pull the information together.

Budget: Currently the Finance Office maintains budget and grant information using MS-Excel in a spreadsheet form. This approach is very time consuming and requires more resources and frequent communication between cost centers and the central office. It also restricts the data exchange opportunity and integration with other systems.

Grant: The Federal Funding Report and other reporting are done manually, which occupies much time of the business users who collect and format the information. Cost centers manually manage un-liquidated obligations (ULOBS) and also manually manage frequent reporting requirement schedules which may delay timely reporting.

BRnT EMS -- financial module working with WebF&A team	
BRT Type:	Business Requirement for New Technology
Date Submitted:	8/3/2016
Mandate:	No
Mission Critical:	
Description:	

This is the EMS's teams part of the project in the rewrite of the Lotus Notes Financial System

BRnT EMS – Licensure and Compliance Applications	
BRT Type:	Business Requirement for New Technology
Date Submitted:	8/3/2016
Mandate:	No
Mission Critical:	
Description:	

This project entails rewriting the Lotus Notes Licensure and Compliance system with current Oracle technology.

Brnt Messaging –Meaningful Use stage 3 requirements	
BRT Type:	Business Requirement for New Technology
Date Submitted:	8/2/2016
Mandate:	Yes
Mission Critical:	Yes
Description:	

This are changes to implement the Meaningful Use Requirements for stage 3.

BRnt WebF&A --New modules to integrate the EMS financial process

BRT Type:	Business Requirement for New Technology
Date Submitted:	8/2/2016
Mandate:	No
Mission Critical:	

Description:

This is to replace the old EMS Lotus Notes Financial system and integrate this business flow and requirements into WebF&A

BrnT-VDH Website Redesign

BRT Type:	Business Requirement for New Technology
Date Submitted:	6/5/2015
Mandate:	
Mission Critical:	Yes

Description:

The mission of the VDH Emergency Preparedness is to effectively respond to any emergency impacting public health through preparation, collaboration, education and rapid intervention. VDH Emergency Preparedness involves state, regional and local emergency response partners working together to enhance readiness to respond to all hazards, including bioterrorism, infectious disease outbreaks and other public health emergencies. In addition to responding to emergency events VDH Emergency Preparedness seeks to inform the public in a timely manner through the use of the VDH website, social media tools and traditional media on matters of public health importance.
Business Need
VDH is seeking re design of their website using Wordpress to improve communications between the agency and the public. The platform must be accessible 24/7, be easy to manage and update, offer multiple administrative roles, and have a responsive design. In addition, the development of emergency communication pages, dark site, must be developed and stored on the site, ready for activation during a public health emergency.

VDH IT Sourcing BReT

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/21/2016
Mandate:	
Mission Critical:	

Description:

Messaging BReT:
VITA is initiating disentanglement from NG messaging services in 2016. Messaging Services for email, enterprise collaboration services, and mobile device management are required for most users in the agency. We also have applications that have hooks into messaging services which need to be tested. Workplace Collaboration Services: VDH uses WCS SharePoint. We have applications serviced via Airwatch which will need remediation.
Server/storage (including housing of equipment) BReT:

VITA is initiating disentanglement from NG servers and storage. VDH has 211 servers which will need to be migrated and tested during this transition.

Authentication/directory services BReT:

VDH has many applications which will need to be migrated and tested during the authentication/directory services transition.

End user computing BReT:

VDH has 5,645 desktops, laptops, and tablets and 733 network printers and copiers which will need to be migrated.

Data networks BReT:

VDH has a few small sites that are not mpls and will need to be migrated.

Voice Networks BReT:

VDH has UCaaS phone lines and non-UCaaS phone lines which will need to be migrated.

Cloud Computing BReT:

VDH will not investigate moving to a Cloud services vendor until stronger guidance is provided by Commonwealth Security.

Security Services BReT: To meet Commonwealth Security requirements, VDH will procure security and audit services using DPB funds.

Internet Usage BReT:

VDH projects that internet usage will increase. Some examples of why internet usage is likely to increase: increase in video streaming, increase in user access to the internet, etc.

Agency: Department of Health (VDH)

Agency Head Approval:

Date: 4/3/2017

No

Budget Category: Major Projects				
Environmental Health Data Management Information System Project				
Oversight and Governance Category: Category 2: High/Medium or High/Low or Medium/High				
Appropriation Act/Funding Status			**Investment Business Case Approval -**	
The Office of Environmental Health Services (OEHS) desires to replace its current data management system, the Virginia Environmental Information System (VENIS). VENIS is a comprehensive and highly customized environmental health data management system used by OEHS and health districts to collect, collate and share data. The data is used to monitor compliance with laws and regulations, agency performance and strategic planning. The new system will maintain this functionality as well as to fulfill the Virginia Department of Health's (VDH) legal requirement to provide an online reporting and payment system for alternative sewage system operation and maintenance.				

Planned project start date:	7/1/2016	Planned project end date:		7/1/2017
PPEA Involvement:				

Estimated Costs:	Total	General Fund	Nongeneral Fund	Nongeneral Funding Source
Project Cost (estimate at completion):	$3,500,000	$0	$3,500,000	
Estimated project expenditures first year of biennium:	$0	$0	$0	
Estimated project expenditures second year of biennium:	$700,000	$525,000	$175,000	Non-general - State

Funding Required:	Total	General	Nongeneral	
Funding required for first year of biennium:	$0	$0	$0	
Funding required for second year of biennium	$0	$0	$0	
Service Area			**Weight**	
There are no service areas for this project.				
There are no procurements for this project.				

Report Title: Appendix A 16 - 18 Report

Agency: Department of Health (VDH)

Agency Head Approval:

Stand Alone Major Procurements

Procurement Name:	Environmental Health Data Management Information System		
Procurement Description:	: OEHS desires to initiate a competitive process (RFP) to replace the current contract with HealthSpace that expires July 1, 2017. HealthSpace has been the current vendor of the data system for approximately 15 years and a competitive process will help assure that the system used best meets the needs of the agency. The current system is a comprehensive and highly customized environmental health data management system used by OEHS and health districts to collect, collate and share data.		
Procurement Planned Start Date		Procurement Planned Completion Date	7/1/2017
		Appropriation Act Status	
Service Area		**Weight**	
There are no service areas for this project.			
Procurement Name:	VDH Consultant/Staff Augmentation Renewal FY17 Procurement		
Procurement Description:	This PBA is renew all Virginia Department of Health (VDH) information technology contractor services that are need on an ongoing basis July 1, 2016 through June 30, 2017. We are requesting to extend the current contractors through the SMSA contract with CAI established by VITA.		
Procurement Planned Start Date		Procurement Planned Completion Date	7/1/2016
		Appropriation Act Status	
Service Area		**Weight**	
There are no service areas for this project.			
Procurement Name:	Viis Maintenance and Enhancement Contract with HPES		
Procurement Description:	The procurement of a sole source contract to maintain and enhance the Virginia Immunization Information System (VIIS).		
Procurement Planned Start Date		Procurement Planned Completion Date	1/1/2016
		Appropriation Act Status	
Service Area		**Weight**	
There are no service areas for this project.			

Stand Alone Non-Major Procurements

Procurement Name:	OEMS Blackboard Procurement
Procurement Description:	The Blackboard learning management system (LMS) would allow for any

emergency medical services (EMS) student to attend class without any geographic constraints. Blackboard would offer a hosted LMS with 600GB of constant storage, 50,000 user licenses, collaborate web conferencing with record capabilities, and mobile device capabilities. The business requirements are: learning management system with platform for full course delivery capabilities, targeted communication capabilities, emergency notification, video hosting service, video and content storage solution, mobile device capabilities, web conferencing solution with record functionality. This would be hosted by Blackboard, not having any additional supporting technology requirements.

Procurement Planned Start Date		Procurement Planned Completion Date	6/1/2016
		Appropriation Act Status	

Service Area		Weight
There are no service areas for this project.		

Procurement Name:	Pre-hospital Patient Care Data System Contract Renewal Fy16
Procurement Description:	The software is utilized to collect, store, and report hospital and emergency medical services (EMS) data. Another module will automate the business processes and provide a database for the licensure of EMS agencies, permitting of ambulances, and inspection of these items. The VDH has utilized Image Trend's products to collect and report emergency medical services (EMS) and trauma data for five years. Image Trend Inc. meets and exceeds all of the VDH/OEMS' needs. Image Trend products are used by 526 of Virginia's 633 agencies submitting 846,400 records per year. Of these 526 agencies, 91 agencies hold a privately owned Image Trend license which accounts for 476,860 records. This is the only vendor that we are able to continue to grow our data program in a manner that prevents the use of disparate and redundant systems.

Procurement Planned Start Date		Procurement Planned Completion Date	7/1/2015
		Appropriation Act Status	

Service Area		Weight
There are no service areas for this project.		

Procurement Name:	Text4baby Customization
Procurement Description:	Text4baby is a free national text messaging service that sends health/resource information via text messages three times a week to pregnant/postpartum women who enroll. This request is to purchase the ability to: 1) amend a pre-defined number of text messages to include state-specific information about resources and services; 2) customize some of the interactive features of the service to incorportate state protocols; 3) develop and send out targeted broadcast messages about outbreaks or other urgent matters as determined by the state; and 4) access de-identified data about state text4baby users for evaluation purposes. The text4baby core platform does not interface with any VDH database nor VDH phone system.

Procurement Planned Start Date	4/1/2013	Procurement Planned Completion Date	5/1/2018
		Appropriation Act Status	

Service Area		Weight
601 VDH 43005 Women's and Infant's Health Services		Primary

Procurement Name:	**VENIS Renewal**
Procurement Description:	In 2000, the Virginia Department of Health contracted with HealthSpace USA Inc. to develop a comprehensive environmental health system to meet the specific needs of the Office of Environmental Health Services. At the time HealthSpace technology was best suited to meet the requirements of this Office, and over the past 15 years, the system has been developed and expanded to meet the needs of this Office. No other system currently is available that will meet the needs of this Office without extensive modifications and a lengthy implementation process. In 2014, the Office of Environmental Health Services began a lengthy process to develop a Request for Proposal (RFP) to solicit new proposals for meeting the needs of this Office. We are requesting the approval of a 2 year procurement so that we can prepare the comprehensive RFP and have a vendor selected by the Spring of 2016. We know of no other system that can met the diverse need of this Office at this time. HealthSpace uses a different technology than any other vendor offering similar services on which the user interface is based. The system uses a hierarchical database structure for its user interface databases. This provides the ability to easily upgrade the system without having to deploy a new version of the software everytime a change is made, and HealthSpace has demonstrated that they can quickly react to Office needs and changes. Each year new changes are made to this system to improve functionality or based on the changing need of this Office. The per-unit cost is in line with other vendors or similar out-of-the-box solutions. The annual price has now been changed to a per system cost so we are no longer billed for adding new users to the system. The service includes hosting, on-going training, all technology upgrades and on demand module development and system enhancement. Also, there are report writers on the HealthSpace's staff that can provide on-demand reports, with a short turn-around time, when required which is more than other vendors typically offer. In addition, a new vendor would have to do substantial customization to meet this Office's needs which would be costly and require a substantial amount of time to complete. HealthSpace has not increased the price to the Virginia Department of Health for the past seven (7) years.

Procurement Planned Start Date		Procurement Planned Completion Date	7/1/2015
		Appropriation Act Status	

Service Area		Weight
There are no service areas for this project.		

Procurement Name:	**Well Family Data System Licensing and Maintenance**
Procurement Description:	License fees and maintenance is requested from Go Beyond, LLC for use of their systems, (1) BASINET (Baby Abstracting System and Information Network) for the Fetal and Infant Mortality Review program (FIMR) and (2) Well Family system for case management services.

Procurement Planned Start Date	7/1/2011	Procurement Planned Completion Date	6/30/2016
		Appropriation Act Status	

Service Area		Weight
601 VDH 43005 Women's and Infant's Health Services		Primary

Procurement Name:	Well Family Database Licensing and Maintenance – Go Beyond, LLC		
Procurement Description:	The expansion of the current Well Family Data System (WFS) from Go Beyond, LLC for outcome reporting and quality assurance for the Maternal, Infant, and Early Childhood Home Visiting (MIECHV) Grant. The current sole source approval is for license fees, development and maintenance of the Well Family System modules for the Healthy Start and Resource Mothers Programs (VITA Agency Procurement Request (11-125). The services to be procured include: (1) management of the business analysis to align WFS and the MIECHV home-visiting programs (Healthy Families Virginia, Nurse-Family Partnership, Parents as Teachers) with the required processes of data collection, reporting and customer care specific to the respective programs; (2) development of data exchange processes for ongoing synchronization between the contracted community sites and WFS; and (3) WFS training materials, manuals, and data entry guide online.		
Procurement Planned Start Date	1/1/2012	Procurement Planned Completion Date	9/9/2016
		Appropriation Act Status	

Service Area	Weight
601 VDH 43005 Women's and Infant's Health Services	Primary

Procurement Name:	Well Family System Licensing, Development and Maintenance		
Procurement Description:	Virginia Department of Health (VDH) currently contracts with Go Beyond, LLC for licensing and maintenance of its Well Family System (WFS) for three programs in the Office of Family Health Services/Division of Child and Family Health. The programs are Healthy Start, Resource Mothers, and the Maternal, Infant and Early Childhood (MIECHV) Home Visiting Programs. The WFS meets industry standards and can easily be configured to meet reporting requirements and the Well Family System can interface with other Virginia Department of Health data systems. The approved VITA sole source request submitted in 2011 is APR# 11-125. Licensing and maintenance for the VDH home visiting programs that use the Well Family System for data entry, data analysis, and required reporting to state and federal funding agencies. Expansion of services for the MIECHV program with this sole source request include: (1) management of the business analysis to align WFS and the MIECHV home-visiting programs (Healthy Families Virginia, Nurse-Family Partnership, Parents as Teachers) with the required processes of data collection, reporting and customer care specific to the respective programs; and (2) development of data exchange processes for ongoing synchronization between the contracted community sites and WFS. This system will allow VDH programs in the Office of Family Health Services to track a mother and child's progress through multiple programs that touch that family.		
Procurement Planned Start Date		Procurement Planned Completion Date	4/1/2015
		Appropriation Act Status	

Service Area	Weight
There are no service areas for this project.	