

(HT0) DEPARTMENT OF HEALTH CARE FINANCE

MISSION

The Department of Health Care Finance improves health outcomes for residents of the District of Columbia by providing access to a comprehensive and cost-effective array of quality health care services.

CAPITAL PROGRAM OBJECTIVES

Medicaid Management Information System (MMIS)

The Centers for Medicare and Medicaid Services (CMS) requires each Medicaid state and the District to maintain and operate a Medicaid Management Information System (MMIS). The MMIS serves as the District's Medicaid claims processing engine and supports DHCF staff in their day-to-day duties. CMS requires that the system technology be refreshed every 5 years to ensure it is up to date and contracts are completed openly. To remain compliant with CMS, the District must begin procuring a new MMIS.

Medicaid Data Warehouse (MDW)

One of the comments made by CMS during the MMIS certification exit conference was that the District was one of the few states that lacked a Medicaid data warehouse. Utilizing a data warehouse for data analysis and trending would greatly improve the District's ability to manage the Medicaid program. In order to facilitate more efficient Medicaid program administration and support intelligent decision-making, DHCF needs a Medicaid Data Warehouse (MDW) to provide easy access to Medicaid program data from the Medicaid Management Information System (MMIS) through the use of analytical reporting tools.

United Medical Center

Assist the Mayor, Council, and consultant team in evaluation of the operational and facility needs of United Medical Center.

Elements on this page of the Agency Summary include:

- **Funding Tables:** Past budget allotments show the allotment balance, calculated as allotments received to date less all obligations (the sum of expenditures, encumbrances, intra-District advances and pre-encumbrances). Agencies are allowed to encumber and pre-encumber funds up to the limit of a capital project's budget authority, which might be higher than allotments received to date. For this reason, a negative balance on a projectsheet does not necessarily indicate overspending or an anti-deficiency violation. A negative balance is permitted in this calculation of remaining allotment authority.
- **Additional Appropriations Data (\$000):** Provides a summary of the budget authority over the life of the project. The table can be read as follows:
 - › **Original 6-Year Budget Authority:** Represents the authority from the fiscal year in which budget was first appropriated through the next 5 years.
 - › **Budget Authority Thru FY 2019 :** Represents the lifetime budget authority, including the 6 year budget authority for FY 2014 through 2019
 - › **FY 2014 Budget Authority Revisions:** Represents the changes to the budget authority as a result of reprogramming, redirections and rescissions (also reflected in Appendix F) for the current fiscal year.
 - › **6-Year Budget Authority Thru 2019 :** This is the total 6-year authority for FY 2014 through FY 2019 including changes from the current fiscal year.
 - › **Budget Authority Request for 2015 through 2020 :** Represents the 6 year budget authority for 2015 through 2020
 - › **Increase (Decrease) :** This is the change in 6 year budget requested for FY 2015 - FY 2020 (change in budget authority is shown in Appendix A).
- **Estimated Operating Impact:** If a project has operating impacts that the agency has quantified, the effects are summarized in the respective year of impact
- **FTE Data (Total budget in FTE Table might differ from actual budget due to rounding):** Provides the number for Full Time Equivalent (FTE) employees approved as eligible to be charged to capital projects by, or on behalf of, the agency. Additionally it provides the total budget for these employees (Personal Services), the non personnel portion of the budget in the agency's capital plan and, the percentage of the agency CIP budget from either expense category.
- **Facility Location Map:** For those agencies with facilities projects, a map reflecting projects and their geographic location within the District of Columbia.

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding					Proposed Funding						6 Yr Total
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	
(00) Feasibility Studies	20,000	0	0	0	20,000	13,389	30,211	43,029	0	0	0	86,629
(01) Design	2,000	2,189	5	0	-194	3,932	950	0	0	0	0	4,882
(04) Construction	0	0	0	0	0	1,200	8,389	17,671	4,574	16,000	0	47,834
(06) IT Requirements Development/Systems Design	112,231	33,857	14,424	9	63,940	2,400	2,000	0	0	0	0	4,400
TOTALS	134,232	36,046	14,430	9	83,746	20,921	41,550	60,700	4,574	16,000	0	143,745

Source	Funding By Source - Prior Funding					Proposed Funding						6 Yr Total
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	
GO Bonds - New (0300)	24,017	1,905	388	1	21,722	20,921	33,161	43,029	0	0	0	97,111
Pay Go (0301)	0	0	0	0	0	0	8,389	17,671	4,574	16,000	0	46,634
Equipment Lease (0302)	200	0	0	0	200	0	0	0	0	0	0	0
LRMF - Bus Shelter Ad Revenue (0333)	810	810	0	0	0	0	0	0	0	0	0	0
Federal (0350)	109,205	33,331	14,042	9	61,824	0	0	0	0	0	0	0
TOTALS	134,232	36,046	14,430	9	83,746	20,921	41,550	60,700	4,574	16,000	0	143,745

Additional Appropriation Data		Estimated Operating Impact Summary						
First Appropriation FY	2010	Expenditure (+) or Cost Reduction (-)						
Original 6-Year Budget Authority	157,836	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
Budget Authority Thru FY 2014	93,685	No estimated operating impact						
FY 2014 Budget Authority Changes		Full Time Equivalent Data						
Miscellaneous	54,947	Object	FTE	FY 2015 Budget	% of Project			
Current FY 2014 Budget Authority	148,632	Personal Services	0.0	0	0.0			
Budget Authority Request for FY 2015	277,977	Non Personal Services	0.0	20,921	100.0			
Increase (Decrease)	129,345							

HT0-HI101-DISTRICT OPEARTED HEALTH INFORMATION

Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Implementing Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Project No: HI101
Ward:
Location: DISTRICT-WIDE
Facility Name or Identifier: INFORMATION TECHNOLOGY
Status: New

Useful Life of the Project:

Estimated Full Funding Cost:\$3,145,040

Description:

The District is committed to developing a health information network focused on improving quality of care. DHCF would create the technology and business infrastructure that will enable all health care stakeholders in the District to achieve program efficiencies and improved care outcomes through secure exchange of patient health information. This would include the components required to enable exchange of data between participants including a clinical portal, data repository, integration engine and an enterprise master patient index.

Justification:

The overall goal of developing the DC HIE is to create the technology and business infrastructure that will enable all health care stakeholders in the District to achieve program efficiencies and improved care outcomes through secure exchange of patient health information.

Progress Assessment:

New Project

Related Projects:

N/A

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
(01) Design	0	0	0	0	0	3,145	0	0	0	0	0	3,145
TOTALS	0	0	0	0	0	3,145	0	0	0	0	0	3,145

Source	Funding By Source - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
GO Bonds - New (0300)	0	0	0	0	0	3,145	0	0	0	0	0	3,145
TOTALS	0	0	0	0	0	3,145	0	0	0	0	0	3,145

Additional Appropriation Data	
First Appropriation FY	
Original 6-Year Budget Authority	0
Budget Authority Thru FY 2014	0
FY 2014 Budget Authority Changes	0
Current FY 2014 Budget Authority	0
Budget Authority Request for FY 2015	3,145
Increase (Decrease)	3,145

Estimated Operating Impact Summary							
Expenditure (+) or Cost Reduction (-)	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
No estimated operating impact							

Milestone Data	Projected	Actual
Environmental Approvals		
Design Start (FY)		
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)		
Closeout (FY)		

Full Time Equivalent Data			
Object	FTE	FY 2015 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	3,145	100.0

HT0-UMC01-EAST END MEDICAL CENTER

Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Implementing Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Project No: UMC01
Ward: 8
Location: 1310 SOUTHERN AVENUE SE
Facility Name or Identifier: UNITED MEDICAL CENTER
Status: Under preliminary study
Useful Life of the Project: 30
Estimated Full Funding Cost: \$155,000,000

Description:

This project will implement the capital improvements recommended in the Huron strategic plan approved by the UMC Board in August of 2013. The scope of the improvements will include renovation of the existing facilities, equipment, information technology, and capital maintenance.

Justification:

Huron states that "UMC facilities are in relatively good condition" and that "investments to make the facilities competitive without other District providers could differentiate UMC and attract [Primary Service Area] PSA residents."

Progress Assessment:

Ongoing project.

Related Projects:

N/A

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding						Proposed Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
(00) Feasibility Studies	20,000	0	0	0	20,000	13,389	30,211	43,029	0	0	0	86,629
(01) Design	0	0	0	0	0	537	0	0	0	0	0	537
(04) Construction	0	0	0	0	0	1,200	8,389	17,671	4,574	16,000	0	47,834
TOTALS	20,000	0	0	0	20,000	15,126	38,600	60,700	4,574	16,000	0	135,000

Source	Funding By Source - Prior Funding						Proposed Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
GO Bonds - New (0300)	20,000	0	0	0	20,000	15,126	30,211	43,029	0	0	0	88,366
Pay Go (0301)	0	0	0	0	0	0	8,389	17,671	4,574	16,000	0	46,634
TOTALS	20,000	0	0	0	20,000	15,126	38,600	60,700	4,574	16,000	0	135,000

Additional Appropriation Data

First Appropriation FY	2013
Original 6-Year Budget Authority	40,000
Budget Authority Thru FY 2014	30,000
FY 2014 Budget Authority Changes	0
Current FY 2014 Budget Authority	30,000
Budget Authority Request for FY 2015	155,000
Increase (Decrease)	125,000

Estimated Operating Impact Summary

Expenditure (+) or Cost Reduction (-)	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
No estimated operating impact							

Milestone Data

	Projected	Actual
Environmental Approvals		
Design Start (FY)		
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)		
Closeout (FY)		

Full Time Equivalent Data

Object	FTE	FY 2015 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	15,126	100.0

HT0-MPM05-MEDICAID DATA WAREHOUSE- GO BOND

Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Implementing Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Project No: MPM05
Ward:
Location: 899 NORTH CAPITOL STREET NE
Facility Name or Identifier: INFORMATION TECHNOLOGY
Status: New
Useful Life of the Project: 10
Estimated Full Funding Cost:\$9,800,000

Description:

One of the comments made by the Centers for Medicare and Medicaid Services (CMS) during the MMIS certification exit conference was that the District was one of the few states that lacked a Medicaid data warehouse. Utilizing a data warehouse for data analysis and trending would greatly improve the District’s ability to manage the Medicaid program. In order to facilitate more efficient Medicaid program administration and support intelligent decision-making, DHCF needs a Medicaid Data Warehouse (MDW) to provide easy access to Medicaid program data from the Medicaid Management Information System (MMIS) through the use of analytical reporting tools.

Justification:

The District must begin to maintain a warehouse with the ability to pull information electronically.

Progress Assessment:

This is a new project.

Related Projects:

MPM04C-MEDICAID DATA WAREHOUSE, MPM03C-MMIS UPGRADED SYSTEM

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding						Proposed Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
(06) IT Requirements Development/Systems Design	9,400	494	893	9	8,003	400	0	0	0	0	0	400
TOTALS	9,400	494	893	9	8,003	400	0	0	0	0	0	400

Source	Funding By Source - Prior Funding						Proposed Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
GO Bonds - New (0300)	400	171	199	1	30	400	0	0	0	0	0	400
Federal (0350)	9,000	323	694	9	7,974	0	0	0	0	0	0	0
TOTALS	9,400	494	893	9	8,003	400	0	0	0	0	0	400

Additional Appropriation Data

First Appropriation FY	2013
Original 6-Year Budget Authority	9,800
Budget Authority Thru FY 2014	9,800
FY 2014 Budget Authority Changes	0
Current FY 2014 Budget Authority	9,800
Budget Authority Request for FY 2015	9,800
Increase (Decrease)	0

Estimated Operating Impact Summary

Expenditure (+) or Cost Reduction (-)	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
No estimated operating impact							

Milestone Data

	Projected	Actual
Environmental Approvals		
Design Start (FY)	01/01/2013	
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)	09/30/2015	
Closeout (FY)		

Full Time Equivalent Data

Object	FTE	FY 2015 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	400	100.0

HT0-MPM03-MMIS UPGRADED SYSTEM

Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Implementing Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Project No: MPM03
Ward:
Location: 899 NORTH CAPITOL STREET NE
Facility Name or Identifier: INFORMATION TECHNOLOGY
Status: New
Useful Life of the Project: 5
Estimated Full Funding Cost:\$60,000,000

Description:

The Centers for Medicare and Medicaid Services (CMS) requires each Medicaid state and the District to maintain and operate a Medicaid Management Information System (MMIS). The MMIS serves as the District's Medicaid claims processing engine and supports DHCF staff in their day-to-day duties. CMS requires that the system technology be refreshed every 5 years to ensure it is up to date and contracts are competed openly. To remain compliant with CMS the District must begin procuring a new MMIS.

Justification:

CMS requires that the Medicaid state agency upgrades the MMIS system every 5 years.

Progress Assessment:

This is a new project.

Related Projects:

MPM04C-MEDICAID DATA WAREHOUSE; MPM05C-MEDICAID DATA WAREHOUSE - GO BOND; AP101C-PREDICTIVE ANALYTICS; CM102C-REPLACE CASE MANAGEMENT SYSTEM

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding						Proposed Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
(06) IT Requirements Development/Systems Design	56,000	126	189	0	55,685	2,000	2,000	0	0	0	0	4,000
TOTALS	56,000	126	189	0	55,685	2,000	2,000	0	0	0	0	4,000

Source	Funding By Source - Prior Funding						Proposed Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
GO Bonds - New (0300)	2,000	126	189	0	1,685	2,000	2,000	0	0	0	0	4,000
Federal (0350)	54,000	0	0	0	54,000	0	0	0	0	0	0	0
TOTALS	56,000	126	189	0	55,685	2,000	2,000	0	0	0	0	4,000

Additional Appropriation Data

First Appropriation FY	2013
Original 6-Year Budget Authority	60,000
Budget Authority Thru FY 2014	6,000
FY 2014 Budget Authority Changes	
Miscellaneous	54,000
Current FY 2014 Budget Authority	60,000
Budget Authority Request for FY 2015	60,000
Increase (Decrease)	0

Estimated Operating Impact Summary

Expenditure (+) or Cost Reduction (-)	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
No estimated operating impact							

Milestone Data

	Projected	Actual
Environmental Approvals		
Design Start (FY)	10/01/2013	
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)		
Closeout (FY)	09/30/2016	

Full Time Equivalent Data

Object	FTE	FY 2015 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	2,000	100.0

HT0-AP101-PREDICTIVE ANALYTICS

Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Implementing Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Project No: AP101
Ward:
Location: DISTRICT-WIDE
Facility Name or Identifier: INFORMATION TECHNOLOGY
Status: New
Useful Life of the Project: 5
Estimated Full Funding Cost: \$600,000

Description:

Implementation of a new Predictive Analytic System to perform pre and post payment reviews of claims submitted to the Medicaid program. This new system would be integrated with DHCF's claims processing system (MMIS), and it would identify likely fraud, waste, and abuse prior to paying the claim. Moving fraud, waste, and abuse detection earlier in the claims adjudication and payment process will allow DHCF to prevent payment of inappropriate claims and minimize the current practice of "pay-and-chase" for these claims.

Justification:

As the Medicaid program continues to expand coverage and benefits, the department needs additional tools to protect the program from fraud, waste and abuse. This new system would allow DHCF to prevent payment of inappropriate claims and minimize the current practice of "pay-and-chase" for these claims.

Progress Assessment:

New Project

Related Projects:

MPM03C-MMIS Upgraded System

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding						Proposed Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
(01) Design	0	0	0	0	0	125	475	0	0	0	0	600
TOTALS	0	0	0	0	0	125	475	0	0	0	0	600

Source	Funding By Source - Prior Funding						Proposed Funding					
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
GO Bonds - New (0300)	0	0	0	0	0	125	475	0	0	0	0	600
TOTALS	0	0	0	0	0	125	475	0	0	0	0	600

Additional Appropriation Data

First Appropriation FY		
Original 6-Year Budget Authority		0
Budget Authority Thru FY 2014		0
FY 2014 Budget Authority Changes		0
Current FY 2014 Budget Authority		0
Budget Authority Request for FY 2015		600
Increase (Decrease)		600

Estimated Operating Impact Summary

Expenditure (+) or Cost Reduction (-)	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
No estimated operating impact							

Milestone Data

	Projected	Actual
Environmental Approvals		
Design Start (FY)		
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)		
Closeout (FY)		

Full Time Equivalent Data

Object	FTE	FY 2015 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	125	100.0

HT0-CM102-REPLACE CASE MANAGEMENT SYSTEM

Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Implementing Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Project No: CM102
Ward:
Location: DISTRICT-WIDE
Facility Name or Identifier: INFORMATION TECHNOLOGY
Status: New
Useful Life of the Project: 5
Estimated Full Funding Cost:\$600,000

Description:

Implementation of a case management system to tract the activities related to beneficiaries enrolled in the EPD Waiver and other programs managed by DHCF. This proposal is to replace the existing case management system with one that can track EPD Waiver beneficiaries as well as those in other DHCF managed programs, has all of the additional functionality needed, and is integrated with MMIS. DHCF’s current case management system for tracking beneficiaries in the waiver for the elderly and people with disabilities (EPD Waiver) is antiquated, lacks key functionality, and is not integrated with the claims processing system (MMIS).

Justification:

Implementation of this "Case Management System" would enable DHCF to tract the activities related to beneficiaries enrolled in the EPD Waiver and other programs managed by DHCF. This is because DHCF’s current case management system for tracking beneficiaries in the waiver for the elderly and people with disabilities (EPD Waiver) lacks key functionality, and is not integrated with the claims processing system (MMIS).

Progress Assessment:

New Project

Related Projects:

MPM03C-MMIS Upgraded System

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
(01) Design	0	0	0	0	0	125	475	0	0	0	0	600
TOTALS	0	0	0	0	0	125	475	0	0	0	0	600

Source	Funding By Source - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
GO Bonds - New (0300)	0	0	0	0	0	125	475	0	0	0	0	600
TOTALS	0	0	0	0	0	125	475	0	0	0	0	600

Additional Appropriation Data	
First Appropriation FY	
Original 6-Year Budget Authority	0
Budget Authority Thru FY 2014	0
FY 2014 Budget Authority Changes	0
Current FY 2014 Budget Authority	0
Budget Authority Request for FY 2015	600
Increase (Decrease)	600

Estimated Operating Impact Summary							
Expenditure (+) or Cost Reduction (-)	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	6 Yr Total
No estimated operating impact							

Milestone Data	Projected	Actual
Environmental Approvals		
Design Start (FY)		
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)		
Closeout (FY)		

Full Time Equivalent Data			
Object	FTE	FY 2015 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	125	100.0