Information Technology (IT) Overview

• Phase 1 & 2 of Transformation (2015-17): major administrative services, including IT, were consolidated at HHSC

• Steve Buche named deputy executive commissioner for information technology and chief information officer for HHS September 4, 2018

• In FY 2019, the next phase of IT reorganization and modernization is underway focusing on the following key goals:
  1. Business user focus - improve relationships with customers by communicating and meeting their needs faster
  2. Develop long-term alignment with customer business strategy - innovation, modernization, roadmaps
  3. Improve security and risk posture
  4. Data utilization - open data, analytics, data-based decision support
  5. Standardization - level and align workloads and reduce cost
  6. Work smarter not harder - improve efficiencies and business processes
  7. Recruit, retain, and train staff
  8. Recognize staff for successes, train for appropriate skill sets, and improve accountability
  9. Support HHS values - accountability, collaboration, client focus, independence, stewardship, transparency, diversity
  10. Support Department of Information Resources (DIR) State Strategic Plan - reliable and secure services, mature state IT resources management, cost-effective and collaborative solutions, data utility, mobile and digital services

Key statistics consists of:
• Approximately 500 IT contracts and purchase orders (some of the largest IT contracts in the state)
• 58,000 phones
• Over 800 sites throughout Texas
• 6,220 servers
• 44,000 computing devices and users
• 4.5 Pb total data
• 600 websites
• 500 + business programs
• Faces more than 94 million attempted cyber attacks annually
Cross Divisional Collaboration

Governance is the decision framework and process by which entities make investment decisions and drive business value

<table>
<thead>
<tr>
<th>HHSC &amp; DSHS Programs</th>
<th>IT</th>
<th>PCS / CQC</th>
<th>Legal</th>
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<tbody>
<tr>
<td>• Provide subject matter expertise&lt;br&gt;• Manage and monitor the contracts&lt;br&gt;• Initiate contractual remedies (corrective action plans, liquidated damages)</td>
<td>• Manages QAT process&lt;br&gt;• Provide technical assistance for all contracts with IT components&lt;br&gt;• Facilitate Steering Committees (i.e. TMHP committee required by GAA)</td>
<td>• Oversight of contract management&lt;br&gt;• Oversight, support, and quality assurance for required reporting&lt;br&gt;• Fiscal monitoring</td>
<td>• Drafts the contract&lt;br&gt;• Counsel on legal authority, terms and conditions, and corrective action plans (including liquidated damages)</td>
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</table>
As of December 31, 2019, HHSC had 19 active major information resources projects.

Of the 19, 16 are reporting monthly or quarterly via monitoring reports.

16 additional projects are closed; documents are due at 6 and 24 months post project closure.

Note: Projects that are identified in step 2 and in step 3 are also submitting monitoring reports, so they are accounted in both steps simultaneously.
IT Governance Portfolios and Active HHS Major Information Resources Projects

Administrative

• Office for Civil Rights (OCR) Corrective Action Plan (CAP)
• Enterprise Data Governance (EDG)
• System of Contract Operation and Reporting (SCOR) and Centralized Accounting and Payroll/Personnel System (CAPPs) Financials 9.2 Enhancement
• Performance Management and Analytics System (PMAS)

Medical & Social Services

• Health, Developmental & Independence Services (HDIS) Shared Platform
• Substance Abuse Contract Management and Claims Processing - Source Replacement Phase 3
• Clinical Management for Behavioral Health Services (CMBHS) – Complete Roadmap Phase II
• Texas Home Living (TxHmL) Program Migration to Managed Care (Phase I)
• Electronic Visit and Verification Restructuring Project
• Provider Management and Enrollment System Implementation Project

Public Health

• Texas Electronic Vital Events Registrar (TxEVER) Implementation
• Tuberculosis (TB)/Human Immunodeficiency Virus (HIV)/Sexually Transmitted Diseases (STD) Integrated System (THISIS) Implementation
• Emergency Medical Services (EMS) and Trauma Registry (TR)
• HIV2000, Real-time Education and Counseling Network, AIDS Regional Information Evaluation System (HRAR) Implementation Project
• Tuberculosis (TB)/Human Immunodeficiency Virus (HIV)/Sexually Transmitted Diseases (STD) Integrated System (THISIS) Enhancements
IT Governance Portfolios and Active HHS Major Information Resources Projects

Inspector General

• Medicaid Fraud Waste and Abuse System (MFADS) - Re-Platforming

Regulatory

• Protecting People in Regulated Facilities (PPRF)/Regulatory Services Systems Modernization (RSSM) Phase 3
• Child-Care Licensing Automation Support System (CLASS) Child Care Development
• Child Care Licensing (CCL) Online Fees
• Federal Bureau of Investigation (FBI) National Rap Back (NRB)
• Regulatory Services Systems Modernization (RSSM) Phase 4

Other Portfolios

• Health & Specialty Care Systems
• Infrastructure and Shared Services
• Portal Authority
The HHS Security Program is based on well-established federal, state, and international frameworks, standards, and best practices.

- Federal and State – Texas Cybersecurity Framework which follows the National Institute of Standards and Technology (NIST)
- Best Practices – Center for Internet Security (CIS) Controls

The HHS Security Program strategy covers people, processes, and technology.

- Proactive approach that includes security controls to identify, protect, detect, respond, and recover
- Four areas of focus include: governance, risk, compliance and security operations
Data Analytics & Performance Measurement

HHSC Office of Performance

Performance and Analytics Integration
- Promotes system-wide use of analytics and performance measures.
- Assists programs to execute data driven decision making initiatives.
- Monitors data and dashboards to identify cross-system impacts.

Performance Management
- Develops a system that measures and reports on all aspects of HHS system performance.
- Designs performance dashboards and other management tools.
- Assists programs with process analysis, measure and report design, and performance measure training.

Center for Analytics and Decision Support
- Provides data analytics and visualization support for Medicaid/CHIP.
- Provides research, data analytics, reporting and program evaluation support for HHSC.
- Conducts research and analyzes of service utilization, demographic trends and enrollment patterns.
- Manages data governance and data quality efforts.
Digital Fabric and PMAS
An Integrated Vision

**EI #14 - System-Wide Business Enablement Platform**

- HHS has over 23 applications performing case management functions.
- Provides an IT platform foundation to expedite new system requests, including case management.
- Allows old applications to be retired and incorporated saving cost and time.
- Allows standardization of system data collection and storage.

**EI #31 - Performance Management & Analytics System**

- Interoperable Data Connectivity
- Analytic Tools
- Automated Performance Metric Reporting
- Program Management Tools and Dashboards

**Reporting and Data Sharing**

**Advanced Analytics**

**Data Analytics Support**
## IT Exceptional Items

<table>
<thead>
<tr>
<th>#</th>
<th>Title</th>
<th>Description</th>
<th>General Revenue</th>
<th>All Funds</th>
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<th>IT Portion</th>
<th>FTEs</th>
</tr>
</thead>
<tbody>
<tr>
<td>13</td>
<td>HHS Information Technology Security</td>
<td>Request would fund resources to perform application code scanning, remediation, annual risk assessments and security plan updates. Request also provides funding to implement software code scanning tools.</td>
<td>$21.6</td>
<td>$31.8</td>
<td>$21.6</td>
<td>$31.8</td>
<td>25.8 (FY 20)</td>
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<td>26.8 (FY 21)</td>
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<tr>
<td>14</td>
<td>System-Wide Business Enablement Platform</td>
<td>Would create a shared HHS platform that provides multiple benefits for constituents, the State, and our federal partners, including significant improvements in the efficiency and effectiveness in program operations, continuous system enhancements, and reduced cost for system maintenance.</td>
<td>$5.4</td>
<td>$8.0</td>
<td>$5.4</td>
<td>$8.0</td>
<td>16.2</td>
</tr>
<tr>
<td>31</td>
<td>Performance Management and Analytics System</td>
<td>Will support data-driven decision making and better position HHSC to identify and leverage potential efficiencies within a wide variety programs and systems. This will result in better outcomes for service recipients; more efficient service delivery; and more effective program regulation.</td>
<td>$3.9</td>
<td>$7.8</td>
<td>$3.9</td>
<td>$7.8</td>
<td>13.0 (FY 20)</td>
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<td></td>
<td>5.0 (FY 21)</td>
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<tr>
<td>49</td>
<td>HHSC Seat Management</td>
<td>Would provide end-user computing devices for over 44,000 state staff and contractors statewide. The established contracts provide agency staff with the technology and maintenance support required to provide critical and ongoing services to the citizens of the state of Texas.</td>
<td>$6.3</td>
<td>$9.8</td>
<td>$6.3</td>
<td>$9.8</td>
<td>0</td>
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<td>30</td>
<td>Data Center Services</td>
<td>Would allow HHSC to procure upgrade services for approximately 152 servers and system software scheduled to be out-of-support for security upgrades in 2020 and 2021, including up-front costs for new hardware and software, as well as labor resources needed</td>
<td>$22.1</td>
<td>$33.4</td>
<td>$22.1</td>
<td>$33.4</td>
<td>48.7 (FY 20)</td>
</tr>
<tr>
<td>12</td>
<td>HHS Telecom Technology Upgrade</td>
<td>Would provide a complete technology upgrade that is necessary to prepare Enterprise telephony platform(s) to effectively support the telecommunications industry’s latest communications standard for delivering voice services, as legacy digital service offerings will be retired in 2021; service consolidation is a beneficial byproduct of this change and will result in HHSC’s realization of substantial reduction in ongoing operational costs</td>
<td>$5.6</td>
<td>$6.3</td>
<td>$5.6</td>
<td>$6.3</td>
<td>0.0</td>
</tr>
<tr>
<td>47</td>
<td>CAPPS HCM and Financial Upgrades</td>
<td>Would support: PeopleSoft CAPPS Human Capital Management and Financials system upgrades to comply with the Comptroller of Public Accounts CAPPS Statewide Baseline Consolidated Application Control Environment approach for Hub Agencies; and replace unsupported, legacy Materials and Inventory Management System for state hospitals and SSLCs</td>
<td>$7.6</td>
<td>$8.5</td>
<td>$7.6</td>
<td>$8.5</td>
<td>14.3 (FY 20)</td>
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### Program Exceptional Items with IT Components

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<td>9</td>
<td>Enhance Procurement and Contract Management Function</td>
<td>Would enhance HHSC’s procurement, management, and oversight of contracts by providing additional staffing, infrastructure, and support</td>
<td>$45.6</td>
<td>$66.0</td>
<td>$14.3</td>
<td>$20.7</td>
<td>242.6</td>
</tr>
<tr>
<td>38</td>
<td>Foster Care Litigation Response</td>
<td>Would assist HHSC in complying with requirements of an expected ruling from the U.S. Fifth Circuit Court of Appeals in <em>M.D. by Stukenberg v. Abbott</em></td>
<td></td>
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<tr>
<td>50</td>
<td>HDIS Remediation (HDIS)</td>
<td>Would fund an electronic case management system several HDIS programs in order to improve the ability to have all documentation for consumer records in one system which would assist with processing the delivery of services more efficiently</td>
<td>$1.9</td>
<td>$1.9</td>
<td>$1.9</td>
<td>$1.9</td>
<td>0.0</td>
</tr>
<tr>
<td>26</td>
<td>Enhancing State Hospital and SSLC Services Through Technology (HSCS)</td>
<td>Would improve care for individuals served in SSLCs and state hospitals, as well as business operations, through the application of information technology systems and infrastructure</td>
<td>$31.1</td>
<td>$31.1</td>
<td>$23.9</td>
<td>$23.9</td>
<td>1.0</td>
</tr>
<tr>
<td>17</td>
<td>Comply with Statutory Requirements for IDD System Redesign (IDD/BH)</td>
<td>Would support technology changes related to the carve-in of long-term services and supports to managed care</td>
<td>$7.4</td>
<td>$14.8</td>
<td>$7.4</td>
<td>$14.8</td>
<td>8.1</td>
</tr>
<tr>
<td>21</td>
<td>Comply with Statutory Requirements for IDD System Redesign (IDD/BH)</td>
<td>Would fund rate increases for substance use disorder treatment and recovery services for indigent (i.e. non-Medicaid) care and necessary technology changes to incorporate an updated rate structure</td>
<td>$45.8</td>
<td>$45.8</td>
<td>$3.5</td>
<td>$3.7</td>
<td>17.8</td>
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| 24 | Improve System Efficiency to Comply with PASSRR Requirements (IDD/BH) | Fund one-time improvements to the Long-term Care online portal functionality and preadmission screening and resident review (PASRR) forms  
Will provide better access to care for individuals eligible for specialized services as a result of PASRR, and updated fields and options on the PASRR forms will provide data needed for improved state oversight | $4.3            | $17.1     | $4.2              | $16.5      | 3.1   |
| 37 | Improve Access to Specialty Services for Individuals with Intellectual Disabilities (IDD/BH) | One-time funds to open and begin operations of clinics at six SSLCs to serve individuals residing in the community | $9.3            | $9.3      | $0.9              | $0.9       | 35.0 (FY 20) 69.7 (FY 21) |
| 43 | Ensure State Oversight of Community Programs for Individuals with Disabilities (IDD/BH) | Would provide staff and technology resources necessary to comply with federal regulations that require HHSC to analyze, monitor, and conduct appropriate follow-up of critical incident reporting in the CLASS, YES, and DBMD 1915(c) Medicaid waivers, as well as the 1115 STAR+PLUS and STAR Kids waiver programs | $1.7            | $6.0      | $1.3              | $5.2       | 5.1   |
| 44 | SBHCC: Enhance Real-Time Behavioral Health Data Sharing (IDD/BH) | Would support enhanced data sharing between HHSC Mental and Behavioral Health Outpatient Data Warehouse and the Department of Public Safety Texas Law Enforcement Telecommunications System to better track individuals interacting with the public behavioral health and law enforcement systems | $0.4            | $0.4      | 0.04             | $0.4       | 3.0 (FY 20) 0.0 (FY 21) |
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<tr>
<td>15</td>
<td>Maintain Baseline for Claims Administration Support (MCD)</td>
<td>Would maintain current operations for Texas’ Medicaid Claims Administrator</td>
<td>$29.9</td>
<td>$59.9</td>
<td>$4.4</td>
<td>$44.0</td>
<td>12.2</td>
</tr>
<tr>
<td>18</td>
<td>Enhance Appeal and Fair Hearing Process for Medicaid Managed Care (MCD)</td>
<td>Would enhance the existing Medicaid managed care appeals and fair hearings process, including the need for additional clinical hearings staff, specialized training for hearings officers, posting hearing decisions online for public access, and implementation of an external medical review process within the current system</td>
<td>$1.4</td>
<td>$3.4</td>
<td>$0.2</td>
<td>$0.6</td>
<td>8.1 (FY 20) 3 (FY 21)</td>
</tr>
<tr>
<td>23</td>
<td>Make Necessary Electronic Visit Verification System Improvements (MCD)</td>
<td>Funds technology changes and operational costs to support electronic visit verification system restructuring efforts and ensure compliance with the 21st Century Cures Act</td>
<td>$17.4</td>
<td>$64.0</td>
<td></td>
<td></td>
<td>5.1</td>
</tr>
<tr>
<td>46</td>
<td>Comply with State Law to Conduct Mortality Reviews for Individuals with Intellectual and Developmental Disabilities Living in Community Settings (MCD)</td>
<td>Would provide funding to expand the independent mortality review process to Medicaid 1915(c) waiver programs for individuals with IDD living in community programs</td>
<td>$2.1</td>
<td>$4.2</td>
<td>$2.1</td>
<td>$4.2</td>
<td>0.0</td>
</tr>
<tr>
<td>32</td>
<td>Child Care Licensing New License Type (RSD)</td>
<td>Would enhance the Child-Care Licensing Automated Support System (CLASS) to accommodate five new license types created by House Bill 7, 85th Legislature, Regular Session, 2017</td>
<td>$3.7</td>
<td>$3.7</td>
<td>$3.7</td>
<td>$3.7</td>
<td>11.7 (FY 20) 5.6 (FY 21)</td>
</tr>
<tr>
<td>41</td>
<td>Enhance Background Checks (RSD)</td>
<td>Would provide funding for an automation change to allow the Child Care Licensing to comply with the background check requirements of the Child Care Development Block Grant Act of 2014 and ensure continued federal funding</td>
<td>$2.6</td>
<td>$2.6</td>
<td>$1.0</td>
<td>$1.0</td>
<td>20.2 (FY 20) 13.1 (FY 21)</td>
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