



# MHSA Technological Program

## Contract Agency

## Project Proposal Process

Revision 1.1

March 2009

# Table of Contents

<b>1. CONTRACT AGENCY PROJECT PROPOSAL PROCESS</b> .....	<b>1</b>
1.1 PROJECT PROPOSAL PROCESS .....	1
1.2 PROJECT MONITORING PROCESS .....	3
<b>2. PROJECT PROPOSAL REVIEW CRITERIA</b> .....	<b>4</b>
<b>EXHIBIT 3 - TECHNOLOGICAL NEEDS PROJECT PROPOSAL DESCRIPTION</b> .....	<b>6</b>
1. PROJECT OVERVIEW: .....	7
2. PROJECT MANAGEMENT: (COMPLETE FOR HIGH RISK PROJECTS) .....	7
3. COST:.....	8
4. HARDWARE CONSIDERATIONS:.....	8
5. SOFTWARE CONSIDERATIONS: .....	8
6. TRAINING AND IMPLEMENTATION: .....	9
7. SECURITY PLANNING: (IF PROJECT REQUEST IS EDI/EHR OR INCLUDES PHI).....	9
<b>EXHIBIT 4 – BUDGET SUMMARY</b> .....	<b>10</b>
<b>EXHIBIT 6 – STATUS REPORT</b> .....	<b>11</b>
<b>APPENDIX A: PROJECT RISK ASSESSMENT</b> .....	<b>18</b>
<b>APPENDIX B: PROPOSAL CONSIDERATIONS AND CLARIFICATIONS</b> .....	<b>19</b>
1. PROJECT OVERVIEW: .....	19
2. PROJECT MANAGEMENT: .....	21
3. COST:.....	22
4. HARDWARE CONSIDERATIONS:.....	23
5. SOFTWARE CONSIDERATIONS: .....	23
6. TRAINING AND IMPLEMENTATION: .....	24
7. SECURITY PLANNING: .....	24
<b>APPENDIX C: SUMMARY PROJECT SCHEDULE</b> .....	<b>25</b>
<b>APPENDIX C-1: DETAIL PROJECT SCHEDULE</b> .....	<b>26</b>
<b>(SAMPLE) EXHIBIT 3 - TECHNOLOGICAL NEEDS PROJECT PROPOSAL DESCRIPTION</b> .....	<b>28</b>
1. PROJECT OVERVIEW: .....	29
2. PROJECT MANAGEMENT: (COMPLETE FOR HIGH RISK PROJECTS) .....	30
3. COST:.....	30
4. HARDWARE CONSIDERATIONS:.....	31
5. SOFTWARE CONSIDERATIONS: .....	31
6. TRAINING AND IMPLEMENTATION: .....	32
7. SECURITY PLANNING: (IF PROJECT REQUEST IS EDI/EHR OR INCLUDES PHI).....	33
<b>(SAMPLE) EXHIBIT 4 – BUDGET SUMMARY</b> .....	<b>34</b>
<b>(SAMPLE) EXHIBIT 6 – STATUS REPORT</b> .....	<b>35</b>
<b>(SAMPLE) APPENDIX A: PROJECT RISK ASSESSMENT</b> .....	<b>40</b>
<b>(SAMPLE) APPENDIX C: SUMMARY PROJECT SCHEDULE</b> .....	<b>41</b>
<b>(SAMPLE) APPENDIX C-1: DETAIL PROJECT SCHEDULE</b> .....	<b>42</b>

## **MHSA TECHNOLOGICAL PROGRAM**

### **1. Contract Agency Project Proposal Process**

The Contract Agency Project Proposal Process consists of two separate processes:

- The Project Proposal Request Process to prepare and submit an individual project proposal
- The Project Proposal Monitoring Process to monitor and track progress, status reports and invoices for each individual project

#### **1.1 Project Proposal Process**

1. Contract agency prepares the MHSA Technological Needs Project Proposal Description (Exhibit 3), Budget Summary (Exhibit 4), Project Risk Assessment (Appendix A), Summary Project Schedule (Appendix C) and Detail Project Schedule (Appendix C-1). If the agency is requesting a start-up distribution of funds for the project, the project proposal should describe the intended use for the start-up distribution. (See Notes section of Exhibit 4 and Cost Justification Section 3.1 of Exhibit 3). The distribution is limited to 20% of the approved project proposal budget.
2. If contract agencies form a consortium, each contract agency must submit their own project proposal and budget summary showing the budgeted portion for their contract agency. Each contract agency submits the summary and detail project schedule for their portion of the project. The consortium lead agency should submit a single consolidated project schedule for the entire project. Each contract agency submits a DMH Quarterly Status Report for their portion of the project. The consortium lead agency is responsible for submission of the consolidated DMH Quarterly Status Report for the overall project.
3. The consortium structure, roles, responsibilities, tasks and management are the responsibility of the consortium. DMH may require a Memorandum of Understanding (MOU) that is signed by all parties of the consortium to be on file with DMH prior to project initiation.
4. Contract agency submits Exhibit 3, Exhibit 4, Appendix A, Appendix C and Appendix C-1 to the DMH Contract Agency Project Proposal Review Committee (CAPPRC). This is the project proposal package. Please refer to Appendix B for Considerations and Clarifications on Exhibit 3.
5. CAPPRC evaluates the project proposal package using the pre-defined evaluation criteria defined in Section 2.
6. CAPPRC approves, denies or requests additional information regarding the project proposal.
7. If the project proposal is denied, the CAPPRC contacts the contract agency for more information or clarification. The contract agency returns to Step 1.
8. If the project proposal is approved, the CAPPRC notifies the contract agency.

9. The Chief Information Office Bureau (CIOB) sends the approved project proposal package to DMH Finance.
10. CIOB sends the approved project proposal package to the designated District Chief. If the contract agency legal entity location is not in a DMH Service Area, the contract agency needs to designate a District Chief to receive the proposal package. A list of all contract agencies and designated District Chiefs will be prepared and maintained by CIOB.
11. CIOB sends the approved project proposal package to DMH Contracts Division to prepare the new funding agreement for contract agency review and signature. Upon full execution of the contract, DMH Budget Division encumbers the funds.

## 1.2 Project Monitoring Process

1. Contract agency submits a DMH Quarterly Status Report (Exhibit 6) to CIOB. Contract agency submits an invoice to CIOB no later than two weeks after the end of the period (monthly or quarterly). The invoice should include copies of receipts for purchases and other expenditures shown on the invoice.
2. If contract agencies have formed a consortium, the lead agency for the consortium should submit a single DMH Quarterly Status Report (Exhibit 6) for the entire project. Each contract agency must submit a DMH Quarterly Status Report for their portion of the project. Each contract agency must submit a separate invoice for their portion of the project to CIOB with supporting copies of receipts indicating the purchases and other expenditures for their legal entity.
3. CIOB forwards the invoice to Finance and the designated District Chief. CIOB reviews and signs the invoice and forwards to DMH Finance for processing. CIOB tracks the total invoiced amounts, project start-up distribution, total project budget and remaining project budget amounts for each project proposal.
4. CIOB reviews the DMH Quarterly Status Report to determine if there are any risks and/or issues that could compromise the success of the project. CIOB may consult with the agency to provide guidance, assistance and solicit clarification. A copy of the Quarterly Status Report is sent to the designated District Chief. The designated District Chief is notified of any project considered at risk of failure.
5. CIOB compiles and summarizes the Contract Agency DMH Quarterly Status Reports to include in the DMH Quarterly Status Report to State DMH.
6. CIOB prepares reports to track payments and progress against the plan and budget.
7. The CAPPRC contacts contract agencies on an as needed basis to conduct a project review to determine progress against plan. If progress is not satisfactory, several alternatives are possible, including, but not limited to:
  1. revise the project plan
  2. request additional funds (so long as the amount is within agency's allocation)
  3. cancel the project

The CAPPRC will review these and other alternatives with the contract agency.

8. Other potential audits may occur including a financial audit, contract terms and conditions audit, State MHSA audit, or County audit. Audit requirements will be defined in the technology contract.
9. Contract agency submits a final invoice at project completion. Contract agency submits the Post Implementation Evaluation Report (PIER) with the last Quarterly Project Status Report to CIOB.

## 2. PROJECT PROPOSAL REVIEW CRITERIA

The Project Proposal Review Criteria are defined as follows:

1. The project proposal must meet the MHSA goals of modernization/transformation or consumer/family empowerment within a framework of an Integrated Information System Infrastructure.
2. The project type must be one of the project types listed in the MHSA Technological Program Project proposal (Exhibit 3).
3. The first priority for project type must be Electronic Data Interchange (EDI) to enable all agencies to achieve a baseline EDI level of claim submittal (837 EDI) to and receipt of remittance advices (835 EDI) from the Integrated Behavioral Health Information System (IBHIS).
4. The project type may indicate an Electronic Health Record System (EHRS) if the EDI component is part of the proposed EHRS.
5. All projects will be evaluated based upon an assessment of the contract agency's current EDI capability.
6. Contract Agency must have an executed legal entity agreement and be financially viable.
7. The proposed project must be technically sound.
8. Buying Commercial-Off-The-Shelf (COTS) software or contracting with an Application Service Provider (ASP) is strongly preferred over custom software development for new systems.
9. The project proposal must adequately justify, through a sufficient level of detail, the expenditure of MHSA funds using the Budget Summary Form (Exhibit 4) with the corresponding Project Schedules (Appendix C and Appendix C-1).
10. The estimated total funding amount must not exceed the total MHSA allocated funding amount for the contract agency based on the Statewide Capital Facilities and Technological project estimate of \$345 million. Contract agencies may request less than the funding allocation for their contract agency.
11. Subsequent project proposals will be evaluated based on the overall agency project performance on previous MHSA Technological projects. Performance factors include adherence to MHSA Technological goals, adherence to DMH baseline EDI requirements, satisfactory project delivery and realization of expected project benefits.

# Exhibits

### Exhibit 3 - Technological Needs Project Proposal Description

Project Title: \_\_\_\_\_ Consortium (Y/N) \_

Contract Agency Name: \_\_\_\_\_ Legal Entity Number: \_\_\_\_\_

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_  
Prepared by:

Print Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_  
Contract Agency Executive Director

• **Please check at least one box from each group that describes this MHSA Technological Needs Project**

- New system
- Extend the number of users of an existing system
- Extend the functionality of an existing system
- Supports goal of modernization/transformation
- Supports goal of consumer and family empowerment

• **Please indicate the type of MHSA Technological Needs Project**

➤ **Electronic Health Record (EHR) System Projects (check all that apply)**

- Infrastructure, Security, Privacy
- Practice Management
- Clinical Data Management
- Computerized Provider Order Entry
- Full Electronic Health Record (EHR) with Interoperability Components (for example, standard data exchanges with other counties, contract providers, labs, pharmacies)
- Electronic Data Interchange (EDI)

➤ **Client and Family Empowerment Projects**

- Client/Family Access to Computing Resources Projects
- Personal Health Record (PHR) System Projects
- Online Information Resource Projects (Expansion / Leveraging information sharing services)

➤ **Other Technology Needs Projects That Support MHSA Operations**

- Telemedicine and other rural/underserved service access methods
- Pilot projects to monitor new programs and service outcome improvement
- Data Warehousing Projects / Decision Support
- Imaging / Paper Conversion Projects
- Other

• **Please Indicate the Technological Needs Project Implementation Approach**

- Custom Interface/Application *Name of Consultant (if applicable)* \_\_\_\_\_
- Commercial Off-The-Shelf (COTS) System *Name of Vendor* \_\_\_\_\_
- Application Service Provider (ASP) *Name of Vendor* \_\_\_\_\_
- Billing Service/Clearinghouse *Name of Vendor/Service* \_\_\_\_\_
- Other \_\_\_\_\_

FAX forms to: **DMH CIOB** Attn: **CPTT** using the FAX Number: **213-736-9360**.

Email a copy to: [CPTT@dmh.lacounty.gov](mailto:CPTT@dmh.lacounty.gov).

## **EXHIBIT 3 – TECHNOLOGICAL NEEDS PROJECT PROPOSAL DESCRIPTION (Continued)**

### **1. Project Overview:**

#### **1.1. Project Description**

Describe the project purpose, background, goals and objectives, project scope, project justification and approach. Include information to determine whether the organization has the capability and resources necessary to carry out the proposed project.

Include a description of the agency including the number of employees, number of service locations and types of services provided. Include a description of the current Information Technology environment including number of staff, project management and implementation experience.

#### **1.2. Results or Benefits Expected**

Describe the results and benefits to be derived from the project. Include both tangible and intangible benefits. Tangible benefits must be quantifiable and measurable and may be used as performance criteria to measure project success. Identify critical success factors for the project.

#### **1.3. Project Approach**

Describe the project approach (such as COTS, ASP, Custom Interface) and how the proposed work will be accomplished. Include factors that might influence the approach and/or schedule. Identify the key project milestones with the planned start and completion dates.

#### **1.4. Project Risks (Complete for High Risk Projects)**

Describe the project risks including possible risk mitigation strategies. Please refer to the IT Project Status Report for an example of the Risk and Issue Management report. Also, complete Appendix A – Project Risk Assessment for each project proposal.

#### **1.5. MHSA Goals and Objectives:**

Describe how the project meets the MHSA Information Technological goals:

- increase Consumer and Family Empowerment by providing tools for secure access to health information within a wide variety of public and private settings
- modernize and transform clinical and administrative information systems to improve quality of care, operational efficiency and cost effectiveness

### **2. Project Management: (Complete for High Risk Projects)**

#### **2.1. Scope Management:**

Describe the approach to monitor project scope, evaluate requests for changes in scope, and approve or deny requests for changes in scope.

#### **2.2. Time Management:**

Describe the approach to monitor the project schedule in order to complete the project on time.

### **2.3. Cost Management:**

Describe the approach to monitor project costs against project budget including all expenditures for personnel, hardware, software, contract services and other expenses.

## **3. Cost:**

### **3.1. Cost Justification:**

Describe the use of MHSA funds in each of the project budget categories: personnel, hardware, software, contract services and other expenses. Describe the use and amount of start-up funds for the project. Start-up funds may be requested for up to 20% of the total project proposal MHSA amount. Start-up funds may only be requested once per project proposal.

Describe project costs that are not eligible for reimbursement by MHSA IT funds. Non-eligible costs include IT project costs for applications or systems that support services to non-DMH clients or IT project costs for applications or systems that support non-Mental Health Services programs. Describe the proposed allocation methodology to determine project costs to be paid by DMH MHSA IT funds.

Exhibit 4 – Budget Summary is a summary budget form for planning purposes. Each agency will be required to have a detailed budget available for review if requested by the CAPPRC.

For Application Service Provider (ASP) costs, include these costs under contract services rather than software.

### **3.2. Ongoing Sustainability of System:**

Describe the ongoing costs and the approach to maintaining the system after MHSA funds are exhausted.

## **4. Hardware Considerations:**

### **4.1. Hardware Maintenance:**

Describe the approach for establishing maintenance/service agreements for hardware, software, and/or any other equipment purchased using MHSA Technological funds.

### **4.2. Backup Processing Capability:**

Describe the approach for evaluating business needs and determining the appropriate backup processing capabilities of any system(s) purchased using MHSA Technological funds.

## **5. Software Considerations:**

### **5.1. Availability of necessary security features as defined in DMH standards noted in Appendix B (Enclosure 3, pgs 37 – 41):**

Describe the approach to meet, at a minimum, all security standards set forth in Enclosure 3, Appendix B of the MHSA Capital Facilities and Technological Needs Guidelines.

**5.2. Ability of the Software to Meet Current Technology Standards or be Modified to Meet Them in the Future:**

Describe the approach to ensure that the system software is compliant with all applicable federal, state, and local laws, ordinances, rules, regulations, manuals, guidelines, and directives including without limitation the Americans with Disabilities Act (ADA), Certification Commission for Healthcare Information Technology (CCHIT), and MHSA Capital Facilities and Technological Guidelines and Regulations.

**6. Training and Implementation:**

**6.1. Process for Implementing the Technology:**

Describe the approach for determining appropriate implementation strategies to ensure successful project completion. Describe the proposed implementation approach.

**6.2. Process for Training:**

Where appropriate, describe the approach for determining appropriate training processes to ensure successful project implementation.

**7. Security Planning: (If Project Request is EDI/EHR or Includes PHI)**

**7.1. Protecting Data Security and Privacy:**

Describe the approach for developing and maintaining effective security and privacy policies and procedures. Additionally, describe the approach for ensuring compliance with local, State, and Federal security and privacy laws and regulations as they pertain to each project activity supported by MHSA Technological funds.

**7.2. Operational Recovery Planning:**

For EDI and EHR projects only, describe the approach to address operational recovery planning.

**7.3. Business Continuity Planning:**

For EDI and EHR projects only, describe the approach to address business continuity planning.

**7.4. Emergency Response Planning:**

For EDI and EHR projects only, describe the approach to address emergency response planning.

**7.5. State and Federal Laws and Regulations:**

Describe the approach to ensure that any technology solution implemented using MHSA Technological funds is compliant with all applicable federal, state, and local laws, ordinances, rules, regulations, manuals, guidelines, and directives including without limitation the Americans with Disabilities Act (ADA), CCHIT, and MHSA Capital Facilities and Technological Guidelines and Regulations.

FAX forms to: **DMH CIOB** Attn: **CPTT** using the FAX Number: **213-736-9360**.

Email a copy to: [CPTT@dmh.lacounty.gov](mailto:CPTT@dmh.lacounty.gov).

**Exhibit 4 – Budget Summary**  
**For Technological Needs Project Proposal**  
(List in Whole Dollars)

Project Title: \_\_\_\_\_ Consortium Y/N) \_\_\_\_\_

Contract Agency Name: \_\_\_\_\_ Legal Entity Number: \_\_\_\_\_

Category	Fiscal Year 1 (a) - - -	Fiscal Year 1 Start-up* (b)	Fiscal Year 1 Adjusted (a-b)=c	Fiscal Year 2 (d) - - -	Fiscal Year 3 (e) - - -	Fiscal Year 4 (f) - - -	Total Project Costs (a+d+e+f)
Personnel							
Total Staff (Salaries & Benefits)							
Hardware							
Total Hardware							
Software							
Total Software							
Contract Services (list services to be provided)							
Total Contract Services							
Other Expenses (Describe)							
Total Other Expenses							
Total Costs (A)							
Total Costs (B) **							
<b>NOTE: (If requesting project start-up costs, please describe the reason for the request in project proposal Section 3.1 "Cost Justification".)</b>							

\* To calculate maximum allowable start-up  $\{(a+d+e+f) \times 0.20 = \text{maximum start-up}\}$ . Once calculated distribute start-up funds in column Fiscal Year 1 (b) in the budget categories where start-up funds are needed. You may request less than the maximum allowable, but you may not exceed the maximum allowable start-up. Start-up funds will be awarded one-time-only per project.  
 \*\* For projects providing services to multiple program clients (e.g. Mental Health and Alcohol and Drug Program clients) attach a description of estimated benefits and Project costs allocated to programs other than Mental Health.

FAX forms to: **DMH CIOB** Attn: **CPTT** using the FAX Number: **213-736-9360**. Email a copy to: [CPTT@dmh.lacounty.gov](mailto:CPTT@dmh.lacounty.gov)

**Exhibit 6 – Status Report  
For Funded Technological Needs Project**

**County of Los Angeles  
Department of Mental Health  
Project Status Report  
For an MHSA-Funded IT Project**

PROJECT INFORMATION		
<b>Project Name:</b>		<b>DMH Project ID #:</b>
<b>Executive Sponsor: Title:</b>		<b>Contract Agency Name: Legal Entity #:</b>
<b>Project Status</b> <input type="checkbox"/> On Schedule <input type="checkbox"/> Ahead of Schedule <input type="checkbox"/> Behind Schedule	<b>Budget Status</b> <input type="checkbox"/> Within Approved Budget <input type="checkbox"/> Over Budget	<b>Report for Quarter Ending:</b> mm/dd/yy
		<b>Project Start Date:</b> mm/dd/yy <b>Project End Date:</b>
<b>MHSA IT Project Contact Person's Name:</b>		
<b>Telephone Number:</b>		
<b>E-mail Address:</b>		
<b>Project Objectives:</b>		
<b>Consortium Agencies (If applicable):</b>		

MAJOR MILESTONE STATUS								
Project Phase	Task / Milestone	Original Start	Revised Start	Actual Start	Original Completion	Revised Completion	Actual Completion	Status

<b>TOTAL PROJECT BUDGET INFORMATION (MHSA Funding Only)</b>		
<b>Category</b>	<b>Budgeted Costs</b>	<b>Actual Costs to Date</b>
Personnel (Salaries & Benefits)	\$ 0	\$ 0
Hardware	\$ 0	\$ 0
Software	\$ 0	\$ 0
Contract Services	\$ 0	\$ 0
Other Expenses	\$ 0	\$ 0
<b>Total Project Costs</b>	<b>\$ 0</b>	<b>\$ 0</b>

<b>STATUS / MAJOR ACCOMPLISHMENTS / SCHEDULED ACTIVITIES / ISSUES</b>
<p><b>STATUS</b></p> <ul style="list-style-type: none"> <li>•</li> </ul> <p><b>ACCOMPLISHMENTS</b></p> <ul style="list-style-type: none"> <li>•</li> </ul> <p><b>SCHEDULED ACTIVITIES</b></p> <ul style="list-style-type: none"> <li>•</li> </ul> <p><b>ISSUES</b></p> <ul style="list-style-type: none"> <li>•</li> </ul>

**RISK MANAGEMENT**

**Risk Report**

(Please Provide the Risk Log Along with Mitigation, Contingency Plan for each High Priority Short Term Risk)

ID	Risk (Describe The Risk In Simple Terms; Provide Any Details In Additional Comment Sheets. )	Probability	Impact	Timeframe	Response	Escalated To DMH

**Explanation Of Entries**

- **Probability And Impact Are Based On Three (3) Possible Entries:** High (H), Medium (M), Low (L)
- **Timeframe, Estimation Of How Long The Risk Will Be Relevant:** Short Term (S) <3 months, Medium Term (M) 3 to 6 months, Long Term (L) >6 months
- **Response:** Possible actions are Mitigate, Watch, or Accepted whereby you can either fix the risk through mitigation, watch it to see how it develops, or accept the risk because it is not likely to occur or has minimal impact
- **Escalated to County DMH:** Yes or No

**List Of Risks That You Might Want To Consider**

1. Lack of Clearly-Defined Project Objectives and Business Processes
2. Lack of Clearly Defined Roles and Responsibilities for Stakeholders and Team Members
3. No Project Steering Committee Established
4. Required Funds and Resources are not available in a Timely Manner
5. Lack of Subject Matter Experts with Availability To Share Knowledge in a Timely Manner with The Project Team
6. Lack of Well Defined Requirements or Requirements that are not Finalized
7. Lack of Project Management Methodology and Change Management Process
8. Lack of Knowledge on Technologies Being Used and Stability of Technologies Being Used
9. No Proven Vendor Product (If Package Solution)
10. Excessive Changes after the Completion of the Requirements Phase
11. Lack of User Group Involvement and Buy-In Throughout The Project
12. No Provision for Appropriate Training

## Post Implementation Evaluation Report

Please Include The Following Sections In Your Final Status Report

### OBJECTIVES ACHIEVED

Describe the Achieved Objectives in Comparison to the Objectives Listed in the Project Description Section 1.1 of Exhibit 3. Also describe the User and Management Acceptance of the Completed Project.

- 

### LESSONS LEARNED

Describe Lessons Learned, Best Practices used for the project, any Notable Occurrences, or Factors that contributed to the project's success or problems, or other information, which could be helpful during future project efforts. Describe Problems that were Encountered and How they were Overcome.

- 

### CORRECTIVE ACTIONS

**Note:** This section must be included when the project is deemed to be a Limited Success or Failure, or when there are Significant Differences between Project Expectations and Project Results. If this condition applies, summarize alternatives for improving the outcome.

- 

### NEXT STEPS

Describe if the project has any Future Phases or Enhancements; or will it be in Maintenance Phase.

-

## **Contract Agency Approvals**

---

<b>Signature</b>	<b>Date</b>	<b>Phone</b>
<b>Prepared By</b>		

---

<b>Signature</b>	<b>Date</b>	<b>Phone</b>
<b>Contract Agency Executive Director</b>		

Please send the **Signed Original** to the following address:

**County of Los Angeles  
Department of Mental Health  
Chief Information Office Bureau (CIOB)  
Attn: Robert Greenless, Ph.D.  
695 South Vermont Avenue 7<sup>th</sup> Floor  
Los Angeles, CA 90005**

Additionally, please E-mail a **Soft Copy** to:  
[CPTT@dmh.lacounty.gov](mailto:CPTT@dmh.lacounty.gov)

# APPENDICES

## Appendix A: Project Risk Assessment

**Project Title:** \_\_\_\_\_ **Consortium (Y/N)** \_\_\_\_\_

**Contract Agency Name:** \_\_\_\_\_ **LE Number:** \_\_\_\_\_

Category		Factor	Rating	Score*
Estimated Cost of Project (MHSA Funds Only)		Over \$400,000	6	
		Over \$200,000	5	
		Over \$100,000	2	
		Under \$100,000	1	
<b>Project Manager Experience</b>				
Like Projects completed in a "key staff" role		None	3	
		One	2	
		Two or More	1	
<b>Team Experience</b>				
Like Projects Completed by at least 75% of Key Staff		None	3	
		One	2	
		Two or More	1	
<b>Elements of Project Type</b>				
Hardware	New Install	Local Desktop/Server	1	
		Distributed/Enterprise Server	3	
	Update/Upgrade	Local Desktop/Server	1	
		Distributed/Enterprise Server	2	
	Infrastructure	Local Network Cabling	1	
		Distributed Network	2	
Data Center/Network Operations Center		3		
Software	Custom Development-Application Service Provider		5	
	COTS* Installation	"Off-the-Shelf"	1	
		Modified COTS	3	
	Number of Users	Over 300	5	
		Over 100	3	
		Over 20	2	
*Commercial Off-The-Shelf Software	Architecture	Under 20	1	
		Browser/thin client based	1	
		Two-Tier (client / server)	2	
		Multi-Tier (client & web, database, application, etc. servers)	3	
<b>TOTAL SCORE</b>				

Total Score	Project Risk Rating	check applicable rating (√)
25 – 31	High	
16 – 24	Medium	
8 – 15	Low	

## Appendix B: Proposal Considerations and Clarifications

### 1. Project Overview:

#### 1.1. MHSA Goals and Objectives:

LAC-DMH proposes to distribute MHSA Technological funds to Contract Agencies for the following types of technology projects:

- 1) Electronic Health Record (EHR) System Projects including hardware and software to support field-based services, remote access to EHR, and EHR training;
- 2) Electronic Data Interchange (EDI) Projects;
- 3) Client/Family Access to Computer Resources Projects;
- 4) Personal Health Record Projects;
- 5) Online Information Resource Projects;
- 6) Telemedicine and other rural/underserved access methods projects;
- 7) Pilot Projects to monitor new programs and service outcome improvement;
- 8) Data Warehousing/Decision Support Projects; and
- 9) Imaging/Paper Conversion Projects.

Additionally, LAC-DMH will support Contract Agency requests for Treatment Planning Libraries that are consistent with MHSA treatment models, automation of eligibility verification, forms translations, and software and hardware to support e-signatures.

LAC-DMH has developed a review process to evaluate all technology project proposals submitted by Contract Agencies within the LAC-DMH enterprise. Contract Agencies will be required to submit project proposals describing project goals and objectives, indicate high-level project milestones, and provide project budgets. All projects must meet the MHSA goals of modernization/transformation or client/family empowerment within a framework of an Integrated Information System Infrastructure. Contract Agencies must choose from the project types outlined above. The first priority is EDI. LAC-DMH has discouraged requests for funding to support custom software development for EHR/EDI projects. A review team comprised of LAC-DMH, CIOB staff will review all Contract Agency project proposals.

#### Electronic Health Record Projects:

The EHR technology project implementation approaches proposed by Contract Agencies will vary. LAC-DMH will support EHR project implementation approaches such as commercial-off-the-shelf (COTS), Application Service Provider (ASP), and Billing Services or Clearinghouses.

#### Client/Family Empowerment Projects:

**Client/Family Computer Access Projects:** LAC-DMH will support Contract Agency technology projects that make computer resources such as desktop computers, peripheral devices, and videoconferencing tools available to clients/family in mental health service settings and other appropriate and secure residential settings. LAC-DMH will also support Contract Agency projects that make computer skills training programs and technical support available to the clients/family they serve.

**Personal Health Record (PHR) Projects:** LAC-DMH will support PHR projects, particularly those involving the Network of Care PHR, proposed by Contract Agencies that accomplish one or more of the following objectives:

- 1) PHR awareness and education;
- 2) PHR systems and/or system enhancements such as linking Contract Agency EHR data with a PHR; and
- 3) PHR training programs for clients/family and service agencies.

Other Technological Needs Projects that Support MHSA Operations:

**Telemedicine/Telepsychiatry:** Some Contract Agencies within the LAC-DMH enterprise deliver services to clients in rural/underserved areas of Los Angeles County. Telemedicine/Telepsychiatry is promising technology for increasing access to mental health services. LAC-DMH will support Contract Agencies proposing Telemedicine/Telepsychiatry Projects.

**Pilot Projects:** Many Contract Agencies provide MHSA services other than Full Service Partnership (FSP) services. FSP outcome measures are already captured in the Outcomes Measures Application (OMA). No similar applications are available to capture the outcomes of non-FSP MHSA services. LAC-DMH proposes to support Contract Agencies who wish to develop technology systems to monitor the outcomes of non-FSP mental health services. These projects will allow the assessment of program effectiveness and assist in service program planning.

**Imaging/Paper Conversion:** To support the conversion of mental health record files from hard-copy to digital format, LAC-DMH proposes to support Contract Agencies that request MHSA funds to support Imaging/Paper Conversion projects.

**Data Warehousing/Decision Support:** LAC-DMH proposes to support Contract Agencies that request MHSA funds to support Data Warehousing/Decision Support projects. Ready access to digitally captured information is vital to the accomplishment of the transformation goals of MHSA and to monitoring progress towards transformational goals over time. Mental health program planning and development, outcomes assessment, quality improvement, implementation of evidence-based practices, and cost-efficient streamlined business processes cannot be fully realized without structured improvements in the processes for consolidating, storing, and reporting information from disparate data sources.

LAC-DMH will support other MHSA technology project initiatives that cover a variety of contracted services such as legal services to assist in preparing and reviewing vendor contracts, technical writing services to create training, technical and business process documentation essential to the successful implementation of the EHR, contracted training services for new applications and contracted technical support to assist in hardware/network/software installations to support the EHR.

Other funding requests that may be submitted by Contract Agencies for inclusion in the Contract Agency Technology Project include projects that were not specifically identified in the MHSA Capital Facilities and Technological Guidelines but do relate to overall MHSA goals. These projects include a Community-based Treatment Quality

Improvement Project, an Electronic Clinical Assessment Project, automated treatment libraries for mental health, and costs for signature pads and EHRS e-signature integration.

## **2. Project Management:**

### **2.1. Independent Project Oversight:**

The Contract Agency Technology project will have numerous sources of independent project oversight, which includes the following; 1) LAC-DMH Information Technology Advisory Board (ITPAB); 2) LAC-DMH Executive Management Team (EMT); 3) LAC Chief Executive Office (CEO); 4) LAC Chief Information Office; and 5) LAC Board of Supervisors. Each source of independent project oversight and their roles in this project is described below.

The ITPAB provides strategic, operational, and clinical guidance to information technology (I/T) planning and ensures that I/T projects are consistent with LAC-DMH Business Goals and I/T objectives. The ITPAB establishes priorities for projects within the department's project portfolio, assesses risks, monitors progress, and ensures that appropriate resources are deployed to complete the project. The ITPAB meets at least quarterly.

The EMT will provide oversight of this project to ensure that the project supports the broad goals of MHSA across the full spectrum of MHSA plans.

The CEO evaluates whether LAC-DMH has appropriate financial controls on the project.

The CIO has designated a representative, Henry Balta, who will evaluate whether the project has appropriate Project Management controls in place.

Given the number of contracts that will be initiated as part of this project, the County Board of Supervisors will provide independent project oversight. Each supervisor has a Health Deputy. All Health Deputies will be given regular written project status reports and occasional presentations of project status at meetings of the health deputies. Similar to the CEO, the Board of Supervisors will be interested in the overall value of the project to County, project consistency with County's strategic plan, and the appropriate distribution of resources across the County's eight Service Planning Areas and five Supervisorial Districts.

### **2.2. Scope Management:**

The Project Manager will manage the overall project scope. LAC-DMH will be requesting project schedules from each participating Contract Agency. The Project Manager and a team of technical experts will evaluate each project schedule for consistency with the goals and objectives outlined in the MHSA Technological guidelines. Each Contract Agency will be responsible for managing the scope of each technology project they undertake. The LAC-DMH Project Manager will be responsible for monitoring each Contract Agency Project to ensure that each project stays within its defined scope as specified in each project plan. The LAC-DMH Project Manager will work with each Contract Agency to monitor project scope, evaluate requests for changes in scope, and approve or deny requests for changes in scope.

Contract Agencies will be required to submit Project Status Reports quarterly. The status reports will provide information on scope compliance and performance measured against individual project schedules. Each Contract Agency receiving MHSA Technological funding will enter into a contract with LAC-DMH. Each contract will have specific language regarding performance expectations, reporting requirements, and consequences for poor performance and/or failure to perform according to the terms and conditions of the contract.

### **2.3. Time Management:**

Each Contract Agency will be responsible for ensuring appropriate time management. Through quarterly status reports and periodic site visits, LAC-DMH will monitor each Contract Agency's progress over time. In the event that a Contract Agency falls behind schedule on a project, LAC-DMH will work with that agency to identify obstacles and assist the Contract Agency to develop an action plan to move each project forward to completion.

### **2.4. Cost Management:**

Each Contract Agency will be responsible for managing project costs. LAC-DMH will be responsible for monitoring Contract Agency expenditures specific to each technology project. Under the supervision of the Project Manager, two Senior Information Systems Analysts (SISA), and an Administrative Assistant (AA) will be devoted full-time to this project. A SISA will be assigned to each contract to review invoices and monitor contractor performance. The AA will be responsible for processing and tracking Contract Agency invoices associated with approximately 125 contract agency contracts.

LAC-DMH will require the Contract Agencies to provide invoices no more than monthly and no less than quarterly depending upon the type of project and the preferences of the Contract Agency. The AA will maintain an invoice tracking system to track expenses against each contract award amount, and track expenses associated with start-up costs and expenses to be reimbursed in arrears. The AA will forward invoices submitted by Contract Agencies to the SISA(s), District Chief and Finance. The SISA(s) will evaluate expenses against project deliverables to determine the appropriateness of each expense. Upon review and approval by a SISA, the AA will forward invoices to DMH Finance. DMH Finance will maintain a log of all invoices paid.

## **3. Cost:**

### **3.1. Cost Justification:**

MHSA Technological funding is intended to support technology projects to build a technical infrastructure that ultimately results in improved client services and provides tools to empower clients and family.

Describe the use of MHSA funds in each of the project budget categories: personnel, hardware, software, contract services and other expenses. Describe the use and amount of start-up funds for the project. Start-up funds may be requested for up to 20% of the total project proposal MHSA amount. Start-up funds may only be requested once per project proposal.

Describe project costs that are not eligible for reimbursement by MHSA IT funds. Non-eligible costs include IT project costs for applications or systems that support services to non-DMH clients or IT project costs for applications or systems that support non-Mental Health Services programs. Describe the proposed allocation methodology to determine project costs to be paid by DMH MHSA IT funds.

Exhibit 4 – Budget Summary is a summary budget form for planning purposes. Each agency will be required to have a detailed budget available for review if requested by the CAPPRC.

For Application Service Provider (ASP) costs, include these costs under contract services rather than software.

### **3.2. Ongoing Sustainability of System:**

MHSA Technological funds are requested to assist Contract Agencies in acquiring sustainable information systems that will allow them to efficiently and effectively interface with LAC-DMH, and develop sustainable technology programs that empower the clients/family they serve. Additionally, these funds will support their capacity to effectively sustain their participation in the delivery of services they provide. However, the use of MHSA Technological funding to support Contract Agency Technology projects will not by itself ensure sustainable technology programs. Contract Agencies, in developing their project plans, must take into consideration their business model, current resources, and their means for obtaining resources to sustain their technology projects over time.

## **4. Hardware Considerations:**

### **4.1. Hardware Maintenance:**

Contract Agencies will be responsible for establishing maintenance/service agreements for any hardware, software, and/or any other equipment purchased using MHSA Technological funds.

### **4.2. Backup Processing Capability:**

Contract Agencies will be responsible for evaluating their business needs and determining the appropriate backup processing capabilities of any system(s) purchased using MHSA Technological funds.

## **5. Software Considerations:**

### **5.1. Availability of necessary security features as defined in DMH standards noted in Appendix B (Enclosure 3, pgs 37 – 41):**

By contract, Contract Agencies will be required to meet, at a minimum, all security standards set forth in Enclosure 3, Appendix B of the MHSA Capital Facilities and Technological Needs Guidelines.

### **5.2. Ability of the Software to Meet Current Technology Standards or be Modified to Meet Them in the Future:**

All Contract Agencies receiving MHSA Technological funding to support EHR/EDI projects will be required to ensure that the EHR/EDI system software they select is compliant with all applicable federal, state, and local laws, ordinances, rules,

regulations, manuals, guidelines, and directives including without limitation the Americans with Disabilities Act (ADA), Certification Commission for Healthcare Information Technology (CCHIT), and MHSA Capital Facilities and Technological Guidelines and Regulations.

## **6. Training and Implementation:**

### **6.1. Process for Implementing the Technology:**

Where appropriate to the type of project supported by MHSA Technological funds, Contract Agencies will be responsible for determining appropriate implementation strategies to ensure successful project completion. LAC-DMH will perform appropriate monitoring to regularly assess the implementation status of each technology project supported by MHSA Technological funds.

### **6.2. Process for Training:**

Where appropriate to the type of project supported by MHSA Technological funds, Contract Agencies will be responsible for determining appropriate training processes to ensure successful project implementation.

## **7. Security Planning:**

### **7.1. Protecting Data Security and Privacy:**

By contract, Contract Agencies are responsible for developing and maintaining effective security and privacy policies and procedures. Additionally, per contract, Contract Agencies will be responsible for ensuring compliance with local, State, and Federal security and privacy laws and regulations as they pertain to each project activity supported by MHSA Technological funds.

### **7.2. Operational Recovery Planning:**

For EDI and EHR projects only, Contract Agencies will be required to address operational recovery planning in project proposals submitted to LAC-DMH.

### **7.3. Business Continuity Planning:**

For EDI and EHR projects only, Contract Agencies will be required to address business continuity planning in project proposals submitted to LAC-DMH.

### **7.4. Emergency Response Planning:**

For EDI and EHR projects only, Contract Agencies will be required to address emergency response planning in project proposals submitted to LAC-DMH.

### **7.5. State and Federal Laws and Regulations:**

Contract Agencies will be required to ensure that any technology solution implemented using MHSA Technological funds is compliant with all applicable federal, state, and local laws, ordinances, rules, regulations, manuals, guidelines, and directives including without limitation the Americans with Disabilities Act (ADA), CCHIT, and MHSA Capital Facilities and Technological Guidelines and Regulations.





## **SAMPLE EXHIBITS**

### (SAMPLE) Exhibit 3 - Technological Needs Project Proposal Description

Project Title: Electronic Data Interchange

Consortium (Y/N) N

Contract Agency Name: Sample Contract Agency

Legal Entity Number: 00999

Sandra Sample

Sandra Sample

03/03/09

213-555-1212

Print Name

Signature

Date

Phone

Prepared by: Sandra Sample

Dr. John Doe

Dr. John Doe

03/03/09

213-555-1212

Print Name

Signature

Date

Phone

Contract Agency Executive Director

- **Please check at least one box from each group that describes this MHSA Technological Needs Project**
  - New system
  - Extend the number of users of an existing system
  - Extend the functionality of an existing system
  - Supports goal of modernization/transformation
  - Supports goal of consumer and family empowerment
  
- **Please indicate the type of MHSA Technological Needs Project**
  - **Electronic Health Record (EHR) System Projects (check all that apply)**
    - Infrastructure, Security, Privacy
    - Practice Management
    - Clinical Data Management
    - Computerized Provider Order Entry
    - Full Electronic Health Record (EHR) with Interoperability Components (for example, standard data exchanges with other counties, contract providers, labs, pharmacies)
    - Electronic Data Interchange (EDI)
  - **Client and Family Empowerment Projects**
    - Client/Family Access to Computing Resources Projects
    - Personal Health Record (PHR) System Projects
    - Online Information Resource Projects (Expansion / Leveraging information sharing services)
  - **Other Technology Needs Projects That Support MHSA Operations**
    - Telemedicine and other rural/underserved service access methods
    - Pilot projects to monitor new programs and service outcome improvement
    - Data Warehousing Projects / Decision Support
    - Imaging / Paper Conversion Projects
    - Other
  
- **Please Indicate the Technological Needs Project Implementation Approach**
  - Custom Interface/Application Name of Consultant (if applicable) \_\_\_\_\_
  - Commercial Off-The-Shelf (COTS) System Name of Vendor To Be Determined
  - Application Service Provider (ASP) Name of Vendor \_\_\_\_\_
  - Billing Service/Clearinghouse Name of Vendor/Service \_\_\_\_\_
  - Other \_\_\_\_\_

FAX forms to: **DMH CIOB** Attn: **CPTT** using the FAX Number: **213-736-9360**.

Email a copy to: [CPTT@dmh.lacounty.gov](mailto:CPTT@dmh.lacounty.gov).

## EXHIBIT 3 – TECHNOLOGICAL NEEDS PROJECT PROPOSAL DESCRIPTION (Continued)

### 1. Project Overview:

#### 1.1 Project Description

Describe the project purpose, background, goals and objectives, project scope, project justification and approach. Include information to determine whether the organization has the capability and resources necessary to carry out the proposed project.

Include a description of the agency including the number of employees, number of service locations and types of services provided. Include a description of the current Information Technology environment including number of staff, project management and implementation experience.

The objective of the EDI project is to acquire software with the necessary EDI functionality to support the requirements to exchange data electronically with DMH. This project supports the delivery of quality mental health services consistent with the MHA guidelines for technology projects.

The approach will evaluate options, select a vendor and work with the vendor to implement DMH certified EDI transactions to interface with the IBHIS.

We are requesting that DMH support all costs for this project using MHA IT funding.

Our agency consists of approximately 35 employees in three service locations. We provide services to children and transitional age youth.

We do not have any IT staff and have not had any experience managing an IT project.

#### 1.2 Results or Benefits Expected

Describe the results and benefits to be derived from the project. Include both tangible and intangible benefits. Tangible benefits must be quantifiable and measurable and may be used as performance criteria to measure project success. Identify critical success factors for the project.

This project must be completed by July 2011 per the IBHIS implementation timeline. All EDI functions must be tested and certified prior to July 2011.

#### 1.3 Project Approach

Describe the project approach (such as COTS, ASP, Custom Interface) and how the proposed work will be accomplished. Include factors that might influence the approach and/or schedule. Identify the key project milestones with the planned start and completion dates.

The project approach will use a COTS based on the results of the EDI selection process following the EDI Readiness study. Please refer to Appendix C for the Proposed Project Plan.

#### 1.4 Project Risks (Complete for High Risk Projects)

Describe the project risks including possible risk mitigation strategies. Please refer to the IT Project Status Report for an example of the Risk and Issue Management report. Also, complete Appendix A – Project Risk Assessment for each project proposal.

See Appendix A – Project Risk Assessment. This project is Medium Risk and does not require discussion of project risks.

#### 1.5 MHSA Goals and Objectives:

Describe how the project meets the MHSA Information Technological goals:

- increase Consumer and Family Empowerment by providing tools for secure access to health information within a wide variety of public and private settings
- modernize and transform clinical and administrative information systems to improve quality of care, operational efficiency and cost effectiveness

This project will modernize clinical and administrative systems by providing an automated EDI interface with IBHIS.

### 2 Project Management: (Complete for High Risk Projects)

#### 2.1 Scope Management:

Describe the approach to monitor project scope, evaluate requests for changes in scope, and approve or deny requests for changes in scope.

This is not a high-risk project.

#### 2.2 Time Management:

Describe the approach to monitor the project schedule in order to complete the project on time.

This is not a high-risk project.

#### 2.3 Cost Management:

Describe the approach to monitor project costs against project budget including all expenditures for personnel, hardware, software, contract services and other expenses.

This is not a high-risk project.

### 3 Cost:

#### 3.1 Cost Justification:

Describe the use of MHSA funds in each of the project budget categories: personnel, hardware, software, contract services and other expenses. Describe the use and amount of start-up funds for the project. Start-up funds may be requested for up to 20% of the total project proposal MHSA amount. Start-up funds may only be requested once per project proposal.

Describe project costs that are not eligible for reimbursement by MHSA IT funds. Non-eligible costs include IT project costs for applications or systems that support services to non-DMH clients or IT project costs for applications or systems that support non-Mental Health Services programs. Describe the proposed allocation methodology to determine project costs to be paid by DMH MHSA IT funds.

Exhibit 4 – Budget Summary is a summary budget form for planning purposes. Each agency will be required to have a detailed budget available for review if requested by the CAPPRC.

For Application Service Provider (ASP) costs, include these costs under contract services rather than software.

The proposed budget is shown in Exhibit 4. All of the costs of the EDI project are covered by the proposed funding allocation. The staffing plan consists of three staff. There are no new hardware requirements. The initial start-up funding will be required to purchase the EDI software. There is an estimated expense for EDI training in addition to any vendor supplied training.

### **3.2 Ongoing Sustainability of System:**

Describe the ongoing costs and the approach to maintaining the system after MHSA funds are exhausted.

The proposed budget in Exhibit 4 shows an annual ongoing cost of \$15,000. The ongoing costs will be covered for two years at which time our contract agency will assume the expense.

## **4 Hardware Considerations:**

### **4.1 Hardware Maintenance:**

Describe the approach for establishing maintenance/service agreements for hardware, software, and/or any other equipment purchased using MHSA Technological funds.

No new hardware is required.

### **4.2 Backup Processing Capability:**

Describe the approach for evaluating business needs and determining the appropriate backup processing capabilities of any system(s) purchased using MHSA Technological funds.

The new software will be backed up on a weekly basis. The approach and the cycle will be evaluated as part of the project.

## **5 Software Considerations:**

**5.1 Availability of necessary security features as defined in DMH standards noted in Appendix B (Enclosure 3, pgs 37 – 41):**

Describe the approach to meet, at a minimum, all security standards set forth in Enclosure 3, Appendix B of the MHSA Capital Facilities and Technological Needs Guidelines.

The EDI Project will be a component of a larger EHR initiative, however, the EHR project will not be part of this MHSA project. The EDI project will adhere to the connectivity standards listed in Enclosure 3, Appendix B of the MHSA Capital Facilities and Technological Needs Guidelines. There will be no client access requirement for this project.

**5.2 Ability of the Software to Meet Current Technology Standards or be Modified to Meet Them in the Future:**

Describe the approach to ensure that the system software is compliant with all applicable federal, state, and local laws, ordinances, rules, regulations, manuals, guidelines, and directives including without limitation the Americans with Disabilities Act (ADA), Certification Commission for Healthcare Information Technology (CCHIT), and MHSA Capital Facilities and Technological Guidelines and Regulations.

The selected vendor will need to comply with the technology standards as they are defined at the time of contract execution. In addition, our agency will ensure that the vendor contract for this project will include language requiring the selected vendor to meet future standards as they become available.

**6 Training and Implementation:**

**6.1 Process for Implementing the Technology:**

Describe the approach for determining appropriate implementation strategies to ensure successful project completion. Describe the proposed implementation approach.

The implementation approach will be defined with the selected vendor.

**6.2 Process for Training:**

Where appropriate, describe the approach for determining appropriate training processes to ensure successful project implementation.

The training will be technical EDI training as part of the preparation for the selection and implementation process.

## 7 Security Planning: (If Project Request is EDI/EHR or Includes PHI)

### 7.1 Protecting Data Security and Privacy:

Describe the approach for developing and maintaining effective security and privacy policies and procedures. Additionally, describe the approach for ensuring compliance with local, State, and Federal security and privacy laws and regulations as they pertain to each project activity supported by MHSA Technological funds.

The approach will be defined as part of the project. In addition, the selected vendor contract terms will include privacy and security policies as defined by HIPAA.

### 7.2 Operational Recovery Planning:

For EDI and EHR projects only, describe the approach to address operational recovery planning.

The approach will be defined with the selected vendor.

### 7.3 Business Continuity Planning:

For EDI and EHR projects only, describe the approach to address business continuity planning.

The approach will be defined with the selected vendor.

### 7.4 Emergency Response Planning:

For EDI and EHR projects only, describe the approach to address emergency response planning.

The approach will be defined with the selected vendor.

### 7.5 State and Federal Laws and Regulations:

Describe the approach to ensure that any technology solution implemented using MHSA Technological funds is compliant with all applicable federal, state, and local laws, ordinances, rules, regulations, manuals, guidelines, and directives including without limitation the Americans with Disabilities Act (ADA), CCHIT, and MHSA Capital Facilities and Technological Guidelines and Regulations.

The approach will be defined with the selected vendor.

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Email a copy to: [CPTT@dmh.lacounty.gov](mailto:CPTT@dmh.lacounty.gov).

**(SAMPLE) Exhibit 4 – Budget Summary**  
**For Technological Needs Project Proposal**  
(List in Whole Dollars)

Project Title: Electronic Data Interchange (EDI) Consortium (Y/N) N

Contract Agency Name: Sample Contract Agency Legal Entity Number: 00999

Category	Fiscal Year 1 (a) 09-10	Fiscal Year 1 Start-up* (b)	Fiscal Year 1 Adjusted (a-b)=c	Fiscal Year 2 (d) 10-11	Fiscal Year 3 (e) 11-12	Fiscal Year 4 (f) ____-____	Total Project Costs (a+d+e+f)
<b>Personnel</b>							
Project Manager (.5 FTE)	\$10,000		\$10,000	\$20,000	\$0		\$30,000
Technical Analyst (1.5 FTE)	\$15,000		\$15,000	\$50,000	\$10,000		\$75,000
<b>Total Staff (Salaries &amp; Benefits)</b>	<b>\$25,000</b>		<b>\$25,000</b>	<b>\$70,000</b>	<b>\$10,000</b>		<b>\$105,000</b>
<b>Hardware</b>							
No new hardware required							
<b>Total Hardware</b>							
<b>Software</b>							
EDI Software	\$30,000	\$30,000	\$0		\$12,000		\$42,000
<b>Total Software</b>	<b>\$30,000</b>	<b>\$30,000</b>	<b>\$0</b>		<b>\$12,000</b>		<b>\$42,000</b>
<b>Contract Services (list services to be provided)</b>							
Not applicable							
<b>Total Contract Services</b>							
<b>Other Expenses (Describe)</b>							
EDI Training Course	\$3,000		\$3,000				\$3,000
<b>Total Other Expenses</b>	<b>\$3,000</b>		<b>\$3,000</b>				<b>\$3,000</b>
<b>Total Costs (A)</b>	<b>\$58,000</b>	<b>\$30,000</b>	<b>\$28,000</b>	<b>\$70,000</b>	<b>\$22,000</b>		<b>\$150,000</b>
<b>Total Costs (B) **</b>							
<b>NOTE: (If requesting project start-up costs, please describe the reason for the request in project proposal Section 3.1 "Cost Justification".)</b>							

\* To calculate maximum allowable start-up  $\{(a+d+e+f) \times 0.20 = \text{maximum start-up}\}$ . Once calculated distribute start-up funds in column Fiscal Year 1 (b) in the budget categories where start-up funds are needed. You may request less than the maximum allowable, but you may not exceed the maximum allowable start-up. Start-up funds will be awarded one-time-only per project.  
 \*\* For projects providing services to multiple program clients (e.g. Mental Health and Alcohol and Drug Program clients) attach a description of estimated benefits and Project costs allocated to programs other than Mental Health.

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**(SAMPLE) Exhibit 6 – Status Report**  
**County of Los Angeles**  
**Department of Mental Health**  
**Project Status Report**  
For an MHSA-Funded IT Project

PROJECT INFORMATION		
Project Name: <b>Electronic Data Interchange (EDI)</b>		DMH Project ID #: <b>EDI0001</b>
Executive Sponsor: <b>Dr. John Doe</b> Title: <b>Chief Operating Officer</b>		Contract Agency Name: <b>Sample Contract</b> Legal Entity #: <b>00999</b>
<b>Project Status</b> <input checked="" type="checkbox"/> On Schedule <input type="checkbox"/> Ahead of Schedule <input type="checkbox"/> Behind Schedule	<b>Budget Status</b> <input checked="" type="checkbox"/> Within Approved Budget <input type="checkbox"/> Over Budget	Report for Quarter Ending: <b>09/30/09</b>
		Project Start Date: <b>07/14/09</b> Project End Date: <b>02/18/10</b>
<b>MHSA IT Project Contact Person's Name:</b> <b>Sandra Sample</b> <b>Telephone Number:</b> <b>213-555-1212</b> <b>E-mail Address:</b> <b>Sample@contractagency.org</b>		
<b>Project Objectives:</b> To acquire commercial-off-the-shelf (COTS) software with the necessary EDI functionality to support the requirements to exchange data electronically with DMH. This functionality will support the delivery of quality mental health services consistent with the Mental Health Services Act Guidelines for Technological projects.		
<b>Consortium Agencies (If applicable):</b> <b>Not Applicable</b>		

MAJOR MILESTONE STATUS								
Project Phase	Task / Milestone	Original Start	Revised Start	Actual Start	Original Completion	Revised Completion	Actual Completion	Status
<b>Project Management</b>	Work Plan Status Reports	07/14/09 07/14/09			08/20/09 02/18/10			
<b>EDI Readiness</b>	EDI Readiness Report	07/14/09			08/18/09			
<b>EDI Strategy</b>	EDI Strategy Report	08/19/09			09/23/09			
<b>Select EDI Vendor</b>	Select Vendor Negotiate Contract	09/24/09			11/07/09			
<b>Install EDI</b>	Prepare Plan Install Product	11/11/09			01/16/10			
<b>Complete Certification</b>	Production Certificate	12/04/09			02/09/10			
<b>EDI Production</b>	Submit Batch	02/10/10			02/18/10			

TOTAL PROJECT BUDGET INFORMATION (MHSA Funding Only)		
Category	Budgeted Costs	Actual Costs to Date
Personnel (Salaries & Benefits)	\$ 105,000	\$ 0
Hardware	\$ 0	\$ 0
Software	\$ 42,000	\$ 0
Contract Services	\$ 0	\$ 0
Other Expenses	\$ 3,000	\$ 0
<b>Total Project Costs</b>	<b>\$150,000</b>	<b>\$ 0</b>

STATUS / MAJOR ACCOMPLISHMENTS / SCHEDULED ACTIVITIES / ISSUES
<p><b>STATUS</b></p> <ul style="list-style-type: none"> <li>The EDI Project will begin on July 14 on schedule.</li> <li>The Project Team has been identified.</li> </ul> <p><b>ACCOMPLISHMENTS</b></p> <ul style="list-style-type: none"> <li>Setup the project team.</li> </ul> <p><b>SCHEDULED ACTIVITIES</b></p> <ul style="list-style-type: none"> <li>Begin the Project Plan.</li> </ul> <p><b>ISSUES</b></p> <ul style="list-style-type: none"> <li>No issues to report.</li> </ul>

**RISK MANAGEMENT**

**Risk Report**

(Please Provide the Risk Log Along with Mitigation, Contingency Plan for each High Priority Short Term Risk)

ID	Risk (Describe The Risk In Simple Terms; Provide Any Details In Additional Comment Sheets. )	Probability	Impact	Timeframe	Response	Escalated To DMH
	No high priority risks identified					

**Explanation Of Entries**

- **Probability And Impact Are Based On Three (3) Possible Entries:** High (H), Medium (M), Low (L)
- **Timeframe, Estimation Of How Long The Risk Will Be Relevant:** Short Term (S) <3 months, Medium Term (M) 3 to 6 months, Long Term (L) >6 months
- **Response:** Possible actions are Mitigate, Watch, or Accepted whereby you can either fix the risk through mitigation, watch it to see how it develops, or accept the risk because it is not likely to occur or has minimal impact
- **Escalated to County DMH:** Yes or No

**List Of Risks That You Might Want To Consider**

1. Lack of Clearly-Defined Project Objectives and Business Processes
2. Lack of Clearly Defined Roles and Responsibilities for Stakeholders and Team Members
3. No Project Steering Committee Established
4. Required Funds and Resources are not available in a Timely Manner
5. Lack of Subject Matter Experts with Availability To Share Knowledge in a Timely Manner with The Project Team
6. Lack of Well Defined Requirements or Requirements that are not Finalized
7. Lack of Project Management Methodology and Change Management Process
8. Lack of Knowledge on Technologies Being Used and Stability of Technologies Being Used
9. No Proven Vendor Product (If Package Solution)
10. Excessive Changes after the Completion of the Requirements Phase
11. Lack of User Group Involvement and Buy-In Throughout The Project
12. No Provision for Appropriate Training

## Post Implementation Evaluation Report

Please Include The Following Sections In Your Final Status Report

### OBJECTIVES ACHIEVED

Describe the Achieved Objectives in Comparison to the Objectives Listed in the Project Description Section 1.1 of Exhibit 3. Also describe the User and Management Acceptance of the Completed Project.

- 

### LESSONS LEARNED

Describe Lessons Learned, Best Practices used for the project, any Notable Occurrences, or Factors that contributed to the project's success or problems, or other information, which could be helpful during future project efforts. Describe Problems that were Encountered and How they were Overcome.

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### CORRECTIVE ACTIONS

**Note:** This section must be included when the project is deemed to be a Limited Success or Failure, or when there are Significant Differences between Project Expectations and Project Results. If this condition applies, summarize alternatives for improving the outcome.

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### NEXT STEPS

Describe if the project has any Future Phases or Enhancements; or will it be in Maintenance Phase.

-

## Contract Agency Approvals

*Sandra Sample*

*March 3, 2009 213-555-1212*

Signature

Date

Phone

Prepared By **Sandra Sample EDI Project Manager**

*Dr. John Doe*

*March 3, 2009*

*213-555-1212*

Signature

**Dr. John Doe**

Date

Phone

**Contract Agency Executive Director**

Please send the **Signed Original** to the following address:

**County of Los Angeles  
Department of Mental Health  
Chief Information Office Bureau (CIOB)  
Attn: Robert Greenless, Ph.D.  
695 South Vermont Avenue 7<sup>th</sup> Floor  
Los Angeles, CA 90005**

Additionally, please E-mail a **Soft Copy** to:

[CPTT@dmh.lacounty.gov](mailto:CPTT@dmh.lacounty.gov)

## (SAMPLE) Appendix A: Project Risk Assessment

Project Title: Electronic Data Interchange (EDI) Consortium (Y/N) N

Contract Agency Name: Sample Contract Agency LE Number: 00999

Category		Factor	Rating	Score*	
Estimated Cost of Project (MHSA Funds Only)		Over \$400,000	6	<b>5</b>	
		Over \$200,000	5		
		Over \$100,000	2		
		Under \$100,000	1		
Project Manager Experience					
Like Projects completed in a "key staff" role		None	3	<b>3</b>	
		One	2		
		Two or More	1		
Team Experience					
Like Projects Completed by at least 75% of Key Staff		None	3	<b>3</b>	
		One	2		
		Two or More	1		
Elements of Project Type					
Hardware	New Install	Local Desktop/Server	1	<b>1</b>	
		Distributed/Enterprise Server	3		
	Update/Upgrade	Local Desktop/Server	1		
		Distributed/Enterprise Server	2		
	Infrastructure	Local Network Cabling	1		<b>2</b>
		Distributed Network	2		
Data Center/Network Operations Center		3			
Software	Custom Development-Application Service Provider		5	<b>1</b>	
	COTS* Installation	"Off-the-Shelf"	1		
		Modified COTS	3		
	Number of Users	Over 300			5
Over 100			3		
Over 20			2		
Under 20			1		
*Commercial Off-The-Shelf Software	Architecture	Browser/thin client based	1	<b>1</b>	
		Two-Tier (client / server)	2		
		Multi-Tier (client & web, database, application, etc. servers)	3		
<b>TOTAL SCORE</b>				<b>17</b>	

Total Score	Project Risk Rating	check applicable rating (√)
25 – 31	High	
16 – 24	Medium	√
8 – 15	Low	

**(SAMPLE) Summary Project Schedule  
For Technological Needs Project Proposal**

**Appendix C**

Project Title: [Electronic Data Interchange \(EDI\)](#)

Consortium (Y/N): [N](#)

Contract Agency Name: [Sample Contract Agency](#)

Legal Entity Number: [00999](#)

ID Number	Summary Task/Milestone Name	Duration in Days	Original Start	Revised Start	Original Completion	Revised Completion
1	<b>Electronic Data Interchange (EDI)</b>	223 d	7/14/2009		6/2/2010	
1.1	<b>Project Initiation</b>	45 d	7/14/2009		9/15/2009	
1.1.1	<b>Define EDI Strategy</b>	25 d	7/14/2009		8/15/2009	
1.2	<b>Project Planning</b>	89 d	9/2/2009		1/12/2010	
1.2.1	<b>Project Management</b>	16 d	9/2/2009		9/23/2009	
1.2.1.1	<b>Prepare Required Project Work Plan (Schedule)</b>	16 d	9/2/2009		9/23/2009	
1.2.2	<b>Conduct EDI Readiness Assessment</b>	41 d	9/24/2009		11/25/2009	
1.2.3	<b>Select EDI Solution</b>	32 d	11/26/2009		1/12/2010	
1.3	<b>Project Execution and Control</b>	223 d	7/14/2009		6/2/2010	
1.3.1	<b>Track and Report Required Project Status</b>	223 d	7/14/2009		6/2/2010	
1.3.2	<b>Plan and Implement EDI Solution</b>	80 d	1/13/2010		5/5/2010	
1.3.3	<b>Complete EDI Certification</b>	36 d	3/23/2010		5/11/2010	
1.3.4	<b>Begin EDI Production Processing</b>	6 d	5/12/2010		5/19/2010	
1.4	<b>Closure</b>	9 d	5/20/2010		6/2/2010	

**(SAMPLE) Detail Project Schedule  
For Technological Needs Project Proposal**

**Appendix C-1**

**Project Title:** [Electronic Data Interchange \(EDI\)](#)

**Consortium (Y/N):** [N](#)

**Contract Agency Name:** [Sample Contract Agency](#)

**Legal Entity Number:** [00999](#)

ID Number	Task Name	Duration in Days	Original Start	Revised Start	Original Completion	Revised Completion
1	<b>Electronic Data Interchange (EDI)</b>	223 d	7/14/2009		6/2/2010	
1.1	<b>Project Initiation</b>	45 d	7/14/2009		9/15/2009	
1.1.1	<b>Define EDI Strategy</b>	25 d	7/14/2009		8/15/2009	
1.1.1.1	Identify Available EDI Solutions	10 d	7/14/2009		7/25/2009	
1.1.1.2	Define an EDI Strategy	10 d	7/28/2009		8/8/2009	
1.1.1.3	Review and Approve the EDI Strategy	5 d	8/11/2009		8/15/2009	
1.1.2	Develop required MHSa Technological Needs Project Proposal Description	10 d	8/18/2009		8/29/2009	
1.1.3	Develop required Budget Summary	10 d	9/2/2009		9/15/2009	
1.1.4	Develop required Project Risk Assessment	10 d	9/2/2009		9/15/2009	
1.1.5	Develop Project Charter	10 d	9/2/2009		9/15/2009	
1.2	<b>Project Planning</b>	89 d	9/2/2009		1/12/2010	
1.2.1	<b>Project Management</b>	16 d	9/2/2009		9/23/2009	
1.2.1.1	<b>Prepare Required Project Work Plan (Schedule)</b>	16 d	9/2/2009		9/23/2009	
1.2.1.1.1	Define Tasks and Deliverables	10 d	9/2/2009		9/15/2009	
1.2.1.1.2	Prepare required Project Work Plan	5 d	9/16/2009		9/22/2009	
1.2.1.1.3	Review and Approve Project Work Plan	1 d	9/23/2009		9/23/2009	
1.2.2	<b>Conduct EDI Readiness Assessment</b>	41 d	9/24/2009		11/25/2009	
1.2.2.1	Form an Assessment Team	5 d	9/24/2009		9/30/2009	
1.2.2.2	Define Short and Long Term Goals	5 d	10/1/2009		10/7/2009	
1.2.2.3	Define Organization Strengths and Weaknesses (SWOT)	5 d	10/8/2009		10/15/2009	

ID Number	Task Name	Duration in Days	Original Start	Revised Start	Original Completion	Revised Completion
1.2.2.4	Define Business Needs	5 d	10/16/2009		10/22/2009	
1.2.2.5	Assess Budget and Staff Resources	10 d	10/23/2009		11/5/2009	
1.2.2.6	Prepare EDI Readiness Report	5 d	11/6/2009		11/13/2009	
1.2.2.7	Review and Approve EDI Readiness Assessment Report	6 d	11/14/2009		11/25/2009	
1.2.3	<b>Select EDI Solution</b>	32 d	11/26/2009		1/12/2010	
1.2.3.1	Review EDI Solutions	10 d	11/26/2009		12/9/2009	
1.2.3.2	Select an EDI Solution	2 d	12/10/2009		12/11/2009	
1.2.3.3	Negotiate Contract	20 d	12/12/2009		1/12/2010	
1.3	<b>Project Execution and Control</b>	223 d	7/14/2009		6/2/2010	
1.3.1	<b>Track and Report Required Project Status</b>	223 d	7/14/2009		6/2/2010	
1.3.1.1	Prepare required quarterly Status Reports and Monitor Progress	223 d	7/14/2009		6/2/2010	
1.3.2	<b>Plan and Implement EDI Solution</b>	80 d	1/13/2010		5/5/2010	
1.3.2.1	Develop EDI Implementation Plan and Schedule	10 d	1/13/2010		1/26/2010	
1.3.2.2	Identify and Document Hardware and Software Requirements	10 d	1/27/2010		2/9/2010	
1.3.2.3	Complete Hardware and Software Design	10 d	2/10/2010		2/24/2010	
1.3.2.4	Approve Hardware and Software Design	1 d	2/25/2010		2/25/2010	
1.3.2.5	Install and Configure Hardware (if applicable)	15 d	2/26/2010		3/18/2010	
1.3.2.6	Test Hardware	2 d	3/19/2010		3/20/2010	
1.3.2.7	Install and Configure EDI Software	10 d	3/23/2010		4/3/2010	
1.3.2.8	Test EDI Software with Vendor	10 d	4/6/2010		4/17/2010	
1.3.2.9	Train Staff on EDI Software	10 d	4/20/2010		5/1/2010	
1.3.2.10	Approve Final Hardware and Software Delivered	2 d	5/4/2010		5/5/2010	
1.3.3	<b>Complete EDI Certification</b>	36 d	3/23/2010		5/11/2010	
1.3.3.1	Get Third Party Certificate from Vendor	5 d	3/23/2010		3/27/2010	
1.3.3.2	Complete and Submit EDI Forms	10 d	3/30/2010		4/10/2010	
1.3.3.3	Perform EDI Certification Testing	15 d	4/20/2010		5/8/2010	
1.3.3.4	Complete EDI Certification	1 d	5/11/2010		5/11/2010	
1.3.4	<b>Begin EDI Production Processing</b>	6 d	5/12/2010		5/19/2010	
1.3.4.1	Install EDI Production Certificate	1 d	5/12/2010		5/12/2010	
1.3.4.2	Submit Initial EDI Production Transactions	5 d	5/13/2010		5/19/2010	
1.3.4.3	EDI Project Complete	0 d	5/19/2010		5/19/2010	
1.4	<b>Closure</b>	9 d	5/20/2010		6/2/2010	
1.4.1	Submit final invoice	1 d	5/20/2010		5/20/2010	

<b>ID Number</b>	<b>Task Name</b>	<b>Duration in Days</b>	<b>Original Start</b>	<b>Revised Start</b>	<b>Original Completion</b>	<b>Revised Completion</b>
1.4.2	Submit final Project Status	1 d	5/21/2010		5/21/2010	
1.4.3	Complete Post Implementation Evaluation Report (PIER) Document	5 d	5/22/2010		5/29/2010	
1.4.4	Archive Project Documents	2 d	6/1/2010		6/2/2010	