

Project	Agency/Department	Category	Goal	Planned Cost	Objective
ISAWS Migration	HHS/Dept of Social Services	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$263,549,843	This project will migrate the 35 ISAWS counties to the C-IV system. The planning effort for this project is scheduled to begin July 1, 2006, with the planning effort ending in April 2008 and full implementation in March 2011. The planning effort will consist of multiple procurements, conversion, and implementation of the C-IV system in the 35 ISAWS counties.
CWS/CMS New System	HHS/Dept of Social Services	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$233,264,717	This project will replace the current Child Welfare Services/Case Management System with a new system that meets all federal Statewide Automated Child Welfare Information System requirements. The new system will expand upon the current system's functionality to include automated adoptions case management, Title IV-E eligibility determinations, and interfaces with other state systems (Title IV-A, Title IV-D, and Title XIX).
Next Generation Medi-Cal Management Information System/Decision Support System	HHS/Dept of Health Care Services	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$37,601,702	This project will transition the current maintenance and operations functions to a development vendor that will replace the proprietary applications, add new functionality and new data sources, and increase the security controls for the Medi-Cal data warehouse.

Enterprise Wide Veterans Home Information System (EW-VHIS)	Dept of Veterans Affairs	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$33,982,315	This project will procure a system integrator who will integrate and implement the USDVA hospital information system with application to form a full featured long-term-care veterans' home information system including a long-term-care application, and billing and reimbursement commercial-off-the-shelf (COTS) applications to be implemented first in new veterans' homes to be located in Lancaster, Ventura, and W. LA (GLAVC) and subsequently implemented as a replacement system in the three existing homes in Barstow, Chula Vista, and Yountville. The DVA intends to modify its home processes (business process reengineering) to take as great advantage as possible of the COTS application.
Web Confidential Morbidity Report (Web-CMR) Project	HHS/Dept of Public Health	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$11,878,477	This project will automate existing manual processes using a Web-based Modified Off-the-Shelf application and back-end database that will support the Confidential Morbidity Report reporting and management.
Health Care Decision Support System Innovation Progress (HIP)	Public Employees' Retirement System	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$10,749,331	This project will procure a new contract for a health care data warehousing and decision support system that collects data feeds from the various contracted health plans and provides the required analytical tools to access, manipulate, and report on that data. The system will provide CalPERS the data and tools required to better negotiate health premiums, determine appropriate health insurance products, and distribute information to their various clients.

Wellness and Recovery Model Support System (WaRMSS)	HHS/Dept of Mental Health	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$6,311,000	This project will facilitate the DMH's transition to treating institutionalized individuals in state hospitals using a recovery-oriented treatment system that focuses on the skills the institutionalized individual needs to live successfully after discharge.
Inmate Medical Scheduling and Tracking System (IMSATS)	Dept of Corrections and Rehabilitation	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$5,439,009	This project will expand rollout of a small MS Access database application (IMSATS) to all DCR institutions to schedule, track, and monitor institution inmate medical services. It is currently installed at seven institutions. This is a Plata vs. Schwarzenegger court imposed project.
LEADER Replacement	HHS/Dept of Social Services	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$4,198,972	This project will replace the existing system in Los Angeles County with newer technology. It will determine eligibility and benefits for a variety of public assistance programs for Los Angeles County. The existing system was implemented countywide in April 2001 and the replacement system is expected to be fully implemented in April 2010.
Research and Development Division Enterprise Project	HHS/Dept of Social Services	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$2,840,000	This project will design, develop, implement, and maintain a web-based application and database to automate and integrate reporting of CalWORKs/TANF and Food Stamps program information in order to improve the quality of data reporting.

Bio-Terrorism Response Preparedness	HHS/Emergency Med Srvs Authority	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$1,998,000	This project will procure and implement a commercial-off-the-shelf (COTS) software product for an Emergency System for the Advanced Registration of Volunteer Health Professionals (ESAR-VHP). The purpose of the ESAR-VHP is to support the federal Bio-Terrorism Response Preparedness effort. The EMSA will use the system to actively register and deploy currently licenses volunteer healthcare professionals to respond in the event of a bio-terrorism incident in California and other
Medicare Modernization Act (MMA) Part D	HHS/Dept of Mental Health	Health and Human Services	Improve Performance and Cost-Effectiveness of Infrastructure	\$644,000	This project will modify three existing DMH systems to produce itemized drug billing that meets the specifications for Medicare Modernization Act Part D reimbursement and modify the DMH billing information that is transmitted to the Department of Developmental Services for ultimate billing to the Prescription Drug Plans.

