
Vermont Department of Health

VT WIC MIS/EBT Planning Project Implementation Advance Planning Document (IAPD) Version 1.12

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Table of Contents

1	EXECUTIVE SUMMARY	1
1.1	INTRODUCTION	1
1.2	GENERAL INFORMATION.....	1
1.2.1	<i>Overview of the Current Vermont WIC Program, Management Information (MI) and Food Delivery (FD) Systems</i>	<i>1</i>
1.2.2	<i>Business Need for MIS Replacement</i>	<i>3</i>
1.2.3	<i>Business Need for Replacement of Home Delivery with EBT</i>	<i>5</i>
1.2.4	<i>Proposed MIS System and Functionality</i>	<i>6</i>
1.2.5	<i>Proposed EBT System and Functionality.....</i>	<i>7</i>
1.2.6	<i>Stakeholders.....</i>	<i>8</i>
1.2.7	<i>Project Support.....</i>	<i>9</i>
1.2.8	<i>Project Management</i>	<i>10</i>
1.2.9	<i>Organizational Impacts.....</i>	<i>11</i>
1.2.10	<i>Schedule of Tasks, Deliverable and Milestones</i>	<i>12</i>
1.3	PROGRAM COMMITMENTS.....	13
1.3.1	<i>Commitment to Involve Policy Staff in Project Development and to Implement Program Policy Correctly</i>	<i>13</i>
1.3.2	<i>Commitment to Meet All Functional Requirements.....</i>	<i>14</i>
1.3.3	<i>Commitment to Meet Federal Reporting Requirements.....</i>	<i>14</i>
1.4	FINANCIAL ISSUES - MIS.....	14
1.4.1	<i>Estimated Transfer and Implementation Costs.....</i>	<i>14</i>
1.4.2	<i>Schedule of Operations and Maintenance Costs.....</i>	<i>14</i>
1.4.3	<i>Cost Benefit Analysis Results</i>	<i>15</i>
1.4.4	<i>Cost Allocation Plan</i>	<i>15</i>
1.4.5	<i>Waiver of Depreciation.....</i>	<i>15</i>
1.4.6	<i>Equipment Provided.....</i>	<i>15</i>
1.5	TECHNICAL ISSUES – MIS & EBT.....	16
1.5.1	<i>Telecommunications, Hardware and Software</i>	<i>16</i>
1.5.2	<i>Description of MPSC MIS System Architecture</i>	<i>16</i>
1.5.3	<i>Data Conversion.....</i>	<i>18</i>
1.6	TECHNICAL ISSUES – EBT	18
1.6.1	<i>Telecommunications, Hardware and Software</i>	<i>18</i>
1.6.2	<i>Description of Proposed System Architecture.....</i>	<i>19</i>
1.6.3	<i>Data Conversion.....</i>	<i>19</i>
1.7	SECURITY	19
1.8	PROCUREMENT ISSUES.....	20
1.8.1	<i>Summary of Procurement Process for MIS Transfer and Implementation</i>	<i>20</i>
1.8.2	<i>Summary of Procurement Process for EBT Service Provider</i>	<i>20</i>
1.8.3	<i>Summary of Procurement Process for Quality Assurance for MIS and EBT Implementation</i>	<i>21</i>
1.8.4	<i>Summary of Procurement Process for External Review.....</i>	<i>21</i>
2	COST-BENEFIT ANALYSIS (CBA), FEASIBILITY STUDY AND ALTERNATIVES ANALYSIS	21
2.1	OVERVIEW	21
2.2	TECHNICAL FEASIBILITY	22
2.3	OPERATIONAL FEASIBILITY.....	23
2.4	FINANCIAL FEASIBILITY	23

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

3	FUNCTIONAL REQUIREMENTS DOCUMENT (FRED)	23
4	GENERAL SYSTEM DESIGN	23
4.1	MIS DESIGN	23
4.2	EBT DESIGN	24
5	CAPACITY PLANNING / STUDY	25
5.1	MIS CAPACITY	25
5.2	EBT CAPACITY	26
6	PROJECT MANAGEMENT PLAN	27
6.1	INTRODUCTION	27
6.2	PROJECT MANAGEMENT APPROACH	27
6.3	PROJECT ORGANIZATION	28
6.3.1	<i>Project Implementation Team</i>	29
6.3.2	<i>Project Oversight</i>	29
6.3.3	<i>Project Management</i>	29
6.3.4	<i>Contractor Project Management</i>	30
6.3.5	<i>Project Roles and Responsibilities of VDH and Other State Agencies</i>	31
6.3.6	<i>Project Quality Assurance</i>	32
6.3.7	<i>Project Reporting Requirements</i>	35
7	RESOURCE REQUIREMENTS	36
8	SCHEDULE OF MIS DEVELOPMENT ACTIVITIES, MILESTONES, AND DELIVERABLES	37
8.1	OVERVIEW	37
8.2	PROJECT TASKS, SUBTASKS, AND DELIVERABLES	38
8.2.1	<i>Planning</i>	41
8.2.2	<i>Design Activities</i>	43
8.2.3	<i>Development Activities</i>	44
8.2.4	<i>Pilot Operations</i>	48
8.2.5	<i>Statewide Rollout</i>	52
8.2.6	<i>Maintenance Activities</i>	53
8.3	SCHEDULE OF MAJOR MILESTONES AND DELIVERABLES	55
9	SCHEDULE OF EBT DEVELOPMENT ACTIVITIES, MILESTONES, AND DELIVERABLES	57
9.1	OVERVIEW	57
9.2	PROJECT TASKS, SUBTASKS AND DELIVERABLES	58
9.2.1	<i>Planning</i>	62
9.2.2	<i>Design Activities</i>	65
9.2.3	<i>Development Activities</i>	66
9.2.4	<i>Pilot Operations</i>	73
9.2.5	<i>Statewide Rollout</i>	74
9.2.6	<i>Maintenance Activities</i>	75
9.3	SCHEDULE OF MAJOR MILESTONES AND DELIVERABLES	77
10	PROPOSED BUDGET AND BUDGET NARRATIVE	78
10.1	BUDGET ASSUMPTIONS	79
10.2	TRANSFER/IMPLEMENTATION COSTS	80
10.3	HARDWARE AND SOFTWARE	80

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

10.4 TELECOMMUNICATIONS COSTS	80
10.5 SITE PREPARATION COSTS	80
10.6 QUALITY ASSURANCE	80
10.7 PROJECT MANAGEMENT AND ADDITIONAL PERSONNEL COSTS	81
10.8 OPERATING COSTS	81
11 COST ALLOCATION PLAN	81
12 REQUEST FOR WAIVER OF DEPRECIATION	81
13 TRAINING PLAN APPROACH	81
13.1 INTRODUCTION	81
13.2 OBJECTIVES OF TRAINING	82
13.3 THE TRAINING STAFF.....	82
13.4 THE TRAINING AUDIENCES	83
13.5 THE TRAINING METHODOLOGIES	83
13.5.1 <i>Self-Paced e-Learning Modules</i>	83
13.5.2 <i>Classroom Presentations and Discussions</i>	83
13.5.3 <i>Hands-On Experience</i>	83
13.5.4 <i>Written Materials</i>	84
13.5.5 <i>Video/DVD</i>	84
13.6 TRAINING OVERVIEW	84
13.6.1 <i>System Operations/IT Staff Training</i>	84
13.6.2 <i>User Acceptance Test Training</i>	84
13.6.3 <i>Help Desk Staff Training</i>	84
13.6.4 <i>Train the Trainer Training</i>	84
13.6.5 <i>Pilot Training</i>	85
13.6.6 <i>District Office Staff Training</i>	85
13.6.7 <i>Retailer Training</i>	85
13.7 TRAINING EQUIPMENT AND LOCATION.....	85
13.8 TRAINING MATERIALS	86
13.9 TRAINING EVALUATION AND EFFECTIVENESS	86
14 SYSTEM MODIFICATIONS	86
15 APPENDIX A – DOCUMENT INDEX.....	87
16 APPENDIX B – GLOSSARY.....	87
17 APPENDIX C - FEASIBILITY STUDY/ ALTERNATIVES ANALYSIS WIC MIS.....	87
18 APPENDIX D – FEASIBILITY STUDY / ALTERNATIVES ANALYSIS WIC EBT	87
19 APPENDIX E - VERMONT FUNCTIONAL REQUIREMENTS	87
20 APPENDIX F - GAP ANALYSIS SUMMARY	87
21 APPENDIX G – IMPLEMENTATION TASK MATRIX	87
22 APPENDIX H – MIS / EBT BUDGET WORKBOOK.....	87

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Transmittal Letter



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VT WIC MIS/EBT Planning Project Implementation Advance Planning Document (IAPD)

1 Executive Summary

The State of Vermont Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program has performed the analysis required by United States Department of Agriculture/Food and Nutrition Service (USDA/FNS) Handbook 901 to select a Management Information System (MIS) for transfer and implementation, and a WIC Electronic Benefit Transfer (EBT) system for procurement. Vermont WIC has selected the Mountain Plains States Consortium (MPSC) State Agency Method (SAM) system with Vermont State hosting as the MIS transfer system and online, out-sourced EBT for implementation in Vermont.

1.1 Introduction

In April 2010, the Vermont WIC Program submitted to the USDA/FNS a Planning Advanced Planning Document (PAPD) requesting approval to undertake a project to plan the replacement of its current mainframe system (current MIS system) with an EBT-functional WIC system transferred from another state (proposed MIS system). In November 2010, the USDA/FNS conditionally approved the planning project, and granted final approval February 2011.

In July 2011, USDA/FNS awarded Vermont WIC with an EBT Planning Grant, to allow comprehensive planning for implementation of an EBT system in conjunction with the MIS replacement.

On January 3, 2012, Vermont WIC transmitted to a FNS/USDA Feasibility Study/Alternatives Analysis for WIC MIS and for WIC EBT. The result of these studies was a determination to implement the MPSC SAM system for MIS, and online, outsourced EBT in Vermont.

With this Implementation Advance Planning Document (IAPD), Vermont WIC is seeking approval from USDA/FNS to initiate a procurement process and proceed with the replacement of its current MIS system, and installation of WIC EBT. The Procurement process will include a contract with a WIC MIS Transfer and Implementation (T&I) Contractor, an EBT Implementation Contractor, and a Quality Assurance (QA) Contractor (for both the MIS and EBT projects).

1.2 General Information

1.2.1 *Overview of the Current Vermont WIC Program, Management Information (MI) and Food Delivery (FD) Systems*

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides specific nutritious foods, nutrition and breastfeeding education, and referrals to pregnant, breastfeeding and postpartum women, infants and children up to five years of age who are determined to be at nutritional risk and meet income guidelines. Vermont serves approximately 16,000 participants monthly. Annual unduplicated participation totals approximately 24,000 participants. The WIC Program is funded by the United States Department of Agriculture (USDA), governed by Federal Regulations contained in the Federal Register 7 CFR Part 246 and administered under agreement between each geographic state and Indian Tribal Organization (ITO) and the USDA FNS.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

The Vermont WIC program provides direct services to participants using Vermont Department of Health (VDH) WIC program management staff at the central office and a variety of staff disciplines at the local agency level within VDH District Offices. Currently, participant certification occurs at 50 clinic sites operated by Vermont's 12 Health Department District Offices. In addition to the 12 District Office sites, clinics include temporary satellite sites such as churches and other community locations, which may be held one or more days per month, but with no permanent WIC-related infrastructure.

The data acquired during certification is used by, VDH staff at the local agency level to provide services, WIC staff at the state agency level to manage the program, VDH health surveillance staff to monitor the health status of participants, and USDA WIC staff at the regional and national level.

Most of the prescribed foods are home delivered to WIC participants by one of 15 certified home delivery vendors under contract to Vermont WIC. Approximately \$9 million worth of WIC foods are delivered annually. WIC food benefits are delivered on a schedule set by the home delivery vendor to ensure redemption of the full nutrition benefit within each calendar month.

Prescribed fruits and vegetables are available to participants through a network of 130 authorized retail grocers. WIC participants are issued WIC EBT cards in order to access their monthly "fruit and veggie" cash value benefits (CVB), and transactions are processed by the same EBT system used for the Vermont SNAP program. Eligible fruits and vegetables can be purchased at any time during the month of eligibility. Approximately \$500,000 in CVB is redeemed annually, representing about 50% of actual CVB available.

The current Vermont WIC management information system was developed in 1977. It operates on a current model IBM mainframe and utilizes CICS for transaction processing, VSAM for database management, and COBOL and Gener/OL as the programming languages. The mainframe has the ability to host SQL and Web servers and a portion of the CICS interface is web-enabled. Although the WIC system has been successfully modified to meet federally mandated requirements, only 11 of the 24 current core WIC functions are automated.

Vermont WIC currently has about 24,000 active records, with close to a million in the history file. The legacy system has approximately 120 fields (99 on the data entry form, but there are additional system-generated fields in the data set). Any individual record is updated at least monthly, with some having more frequent activity. When a record is updated, the old information is not retained within the legacy system, but a weekly extract of updated records is transmitted to VDH for retention in a WIC transaction history file. Sensitive information in the form of name, birth date, physical measurements, and health risk data is collected and retained

In addition to the mainframe legacy system, WIC data is also contained in Access databases, Excel spreadsheets and paper stores. The combined data systems are used to:

- enroll WIC participants;
- store and manage participant records and data;
- track participant health related data such as immunizations completed and due;
- issue WIC food deliveries;
- issue, process and reconcile bank redemption data;
- reconcile and report monthly participation and financial data;
- manage vendor data and the vendor cost containment system;
- manage the WIC infant formula rebate contract and billings;

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- maintain CDC's Pediatric and Pregnancy Nutrition Surveillance Systems data and reporting;
- maintain USDA Participant Characteristics data and reporting;
- maintain USDA The Integrity Profile data and reporting; and
- produce ad hoc reports.

1.2.2 **Business Need for MIS Replacement**

The current mainframe-based VT WIC management information system, which supports client eligibility, food delivery, and administrative functions, is currently one of the oldest WIC MIS in operation. The MIS was developed in 1977 and its last major upgrade was in 1986. Although it has been successfully modified to meet all subsequent federally mandated requirements, only 11 of 24 current core functions are automated, with the result that time otherwise available for nutrition counseling and health support must be spent on administrative functions.

Due to limitations imposed by Vermont's current MIS technology, WIC data is also contained in Access databases, Excel spreadsheets and paper stores. Duplicate data entry is often required. Multiple databases and files must be queried in order to produce management reports and properly oversee program operations. There are many similar examples of inefficiencies related to the antiquated MIS. For example, Vermont WIC cannot currently tie breast pump issuance to breastfeeding duration without manually matching three different datasets. Appointment scheduling is not integrated with certification records. Eliminating multiple databases will increase the ability to tie WIC benefits to health outcomes.

The Vermont WIC MIS system, combined with Vermont WIC's paper business process, conforms to most WIC Program needs, but does not meet EBT readiness criteria. The current system has gaps in every USDA FNS specified functional area for the MIS and EBT. The current system does not capture data for certain necessary fields, lacks automated processes and lacks the outputs of an automated system. Due to these limitations, WIC staff is prevented from using an updated business process to improve the health outcomes of the participants.

A system that will use newer technologies to improve the efficiency of operations, accommodate expanding business functions, support transition from home delivery to Electronic Benefits Transfer (EBT), and better integrate with other systems currently being used by the Vermont Department of Health (VDH) and Agency of Human Services (AHS), is long overdue. In addition, as more and more state programs move off the mainframe to newer technologies, the WIC share of maintenance costs increases; soon the cost will exceed the benefit of maintaining the system. This project will bring WIC management information systems up to date and allow shifting of staff time from managing paper based systems and data entry to nutrition services - the key to helping families make the behavior changes needed to improve health outcomes.

Any new system will include direct staff access to standard reports - currently central office staff has to run reports and distribute them to districts. Some simple ad hoc report templates will also be available to district staff. At the central office level, having health status, benefits received, and demographic information (both current and historical) in a single system will greatly reduce the amount of time it requires to report and analyze information.

When the current Vermont WIC information system was developed, few states had automated systems at all, mainframes were "state of the art," and it was necessary for Vermont to develop its own system. Currently, however, there are a number of successful WIC applications in use in other states, and it is logical for Vermont to consider transfer of another state agency's WIC management information or one of the SAM systems, and/or adding WIC to an existing VDH system, rather than designing a comprehensive new system.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

As presented in the Feasibility Study and Alternatives Analysis, the problems with the current systems are summarized in the following table.

The problem of	<ul style="list-style-type: none"> • Double data-entry: staff enters participant and household information into the VDH CMIS system in order to obtain individual and household ID numbers. The same information then needs to be entered into the WIC system on the DII mainframe. • The main legacy system is written in COBOL and GENER/OL. It was originally developed in 1976-77, and the last major update was in 1986. Because the system is so old and has had many modifications over the years with varying levels of documentation, each change Vermont WIC makes has unintended consequences that take weeks to track down and repair. • Because the legacy system is relatively inflexible, many work-arounds are built into it. For example, all date fields were changed from a date format to a number format to address Y2K issues. Vermont WIC is unable to use the national WIC risk codes because the legacy system is limited to two digits and the national codes are three digits. Vermont WIC has a complex system of coding race and ethnicity, because Vermont WIC has a one-character field, implementing the required reporting in the most straightforward way would require 5-7 yes/no fields. There are many other examples. • Vermont WIC staff is using a large number of supplemental systems to meet program needs. These include an Access database for food benefit delivery reconciliation, a complex group of linked Excel spreadsheets for preparing data needed for financial reports, another Access database for authorizing breast pump rentals and the mainframe based FOCUS system for ad hoc reporting from the current legacy system. • The legacy system does not maintain a history file. Historical data is maintained by VDH, but is split among several files reducing the usefulness of the data. Reporting can be accomplished using a 1032 system, but the file linkages needed to produce meaningful reports are complex. Therefore, ad hoc reporting is limited to what one or two knowledgeable people can fit into their available time. • Vermont WIC uses a stand-alone scheduling system, which does not meet program needs. • The legacy system has real-time data entry, however Vermont WIC clinicians are collecting all information on paper, and data is entered into the system later by clerks due to lack of clinician time and hardware to data enter into the complex legacy system
Affects	<ul style="list-style-type: none"> • VDH direct service, supervisory and management staff at local level • WIC state level staff • Health surveillance staff

	<ul style="list-style-type: none"> • DII IT development staff • VDH IT development staff • State IT Operations staff • Home delivery vendors (15) (private businesses) • USDA WIC staff (regional program and IT, national IT) • Other VDH and AHS program managers • WIC participants (16,000 individuals)
The impact of which is	<ul style="list-style-type: none"> • Errors due to manual data manipulation • Redundant systems within the Department of Health • Inefficient use of staff time to maintain reporting
A successful solution would	<ul style="list-style-type: none"> • Consolidate current systems • Reduce staff time spent maintaining reporting • Reduce data entry • Be compliant with USDA and other reporting requirements • Improve the health status of WIC participants

1.2.3 **Business Need for Replacement of Home Delivery with EBT**

Vermont WIC uses an outdated paper-based system to manage home delivery of benefits and to manage the vendors. Due to the aged home delivery system model increasing risks are:

- Inadequate availability of vehicles suitable for delivery
- An aged workforce of delivery vendors with no replacement force planned
- A labor intensive paper-based home delivery management and verification process
- Incompatibility with a new WIC MIS and the federal mandate for WIC EBT

The current EBT program for fruits and vegetables uses the SNAP EBT platform, because the WIC fruit and vegetable benefit like SNAP is a cash value benefit, providing a fixed dollar benefit each month. To deliver the full WIC food package, however, a far more complex and robust EBT model is required than the SNAP platform, as described in [Section 5.2](#).

Rather than move to an interim model of paper vouchers, Vermont will phase out the current home delivery system for food distribution and move to an EBT model, in alignment with the FNS strategic plan for EBT. Online, outsourced EBT was selected as the best fit for meeting Vermont WIC's business needs as well as the specifications identified in the federal Functional Requirements Document for a Model WIC System (FRd), in a cost-effective manner. For Vermont WIC the online, outsourced EBT model meets Vermont's requirements because it:

- Is scalable so future enhancements can be easily added to the system
- Provides flexibility in software changes

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Captures and maintains all standard WIC EBT data elements, and allows easy implementation of changes such as food items changes
- Is compliant with current federal policies and regulations and can respond to federal and state reporting requirements
- Enhances fiscal accountability and program integrity
- Supports and improves delivery of WIC benefits to eligible individuals and families
- Improves service delivery to participants
- Improves staff satisfaction through ease of use, a minimal learning curve, and automation of tasks
- Supports integration and data exchanges

Vermont needs to phase out the current home delivery system for food distribution and move to an EBT model as soon as practically possible, because Vermont's home delivery vendors are aging, refrigerated vehicles suitable for home delivery are expensive and difficult to obtain, and the food package constraints for home delivery limit participant choice of foods, making it difficult to meet cultural and personal food preferences.

It is not possible to move from home delivery to full EBT using Vermont's current MIS, as the necessary processes for food instrument (paper or card) issuance and monitoring and for settlement and reconciliation with retail vendors are not automated. Vermont believes it would be costly and cause unnecessary delay to implement a paper voucher/check system as an interim delivery model prior to EBT. Vermont's successful implementation of EBT for the cash value fruit and vegetable benefit laid the foundation for comprehensive EBT planning. Thus, Vermont WIC finds that it must work simultaneously on implementation of the MSPC MIS transfer and implementation, and the implementation of online, outsourced WIC EBT as proposed in this IAPD.

1.2.4 **Proposed MIS System and Functionality**

Based on the MIS Feasibility Study and Alternatives Analysis (see [Appendix C](#)) Vermont WIC has determined that the optimum solution is the replacement of the Vermont's mainframe and manual WIC business process system with an operational SAM system, MPSC, which will be transferred from another State. It is assumed that contracted support will be used for the transfer and implementation, but that the State of Vermont will operate and maintain the system in-house after statewide rollout and any additional warranty periods contracted.

The proposed new WIC MIS system:

- Is scalable so future enhancements can be easily added to the system
- Provides flexibility in software changes
- Captures and maintains all standard WIC food item elements, and allows easy implementation of changes such as food item changes
- Is responsive to changes to federal and state reporting requirements
- Enhances fiscal accountability and program integrity
- Supports and improve delivery of WIC benefits to eligible individuals and families
- Improves service delivery to clients

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Improves staff satisfaction through ease of use, a minimal learning curve, and automation of tasks
- Supports integration and data exchanges

The WIC MIS that is implemented must be WIC EBT ready per USDA MIS Functional Requirements specifications. The following is a listing of those functions that are considered functional requirements to support EBT-readiness in a WIC IS and which Vermont expects to be present in the MPSC MIS.

- Maintain Food Category/ Subcategory Table
- Maintain UPC Database for WIC Authorized Foods
- Establish Food Item Maximum Allowed Amounts
- Establish EBT Account
- Add Participant(s) to an Account
- Issue Electronic Benefits
- Issue EBT Card
- Obtain Account Balance
- Update EBT Account Information
- Remove Participant(s) from an Account
- Process Changes to Electronic Benefits
- Process Changes to Electronic Benefits (Benefit Adjustments, Voids and Reissuance)
- Process Changes to EBT Card (Status Changes/Card Replacements)
- Process Vendor Payment
- Retrieve Benefit Issuance File
- Retrieve Transaction History Data and Reconcile
- Redeemed Benefits with Issuance File
- Determine High Risk Vendors (EBT Environment)

1.2.5 **Proposed EBT System and Functionality**

Based on the EBT Feasibility Study and Alternatives Analysis (see [Appendix D](#)) Vermont WIC has determined that the optimum solution is on-line, outsourced WIC EBT.

The Vermont WIC team will issue an RFP for contracted EBT Implementation, which will detail the software, hardware and messaging required to interface with the MPSC MIS in Vermont. The chosen EBT Implementation Contractor will work with the Vermont Planning team, the T&I Contractor and the QA Contractor to interface online EBT with MPSC.

WIC EBT will transform the current WIC paper benefit and home delivery system to an online EBT system allowing participants to obtain eligible foods at authorized retail grocers. The new WIC EBT system will benefit both the retailer and the participant by delivering a seamless WIC transaction at the cash register, making the transaction appear no different from any other card transaction by any other shopper. Not only will this remove the stigma associated with the WIC

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

transaction, it will give WIC participants the flexibility to shop as frequently as they wish, receiving only the approved foods in the correct quantity. WIC EBT will give the retailer confidence that the shopper purchased the items contained in their prescription, as well as other items on their shopping list. It will enable smoother, faster in-lane transactions and expedite payments to retailers. Additionally, WIC EBT is 7th out of 18 items slated for Tier One of the Vermont Agency of Human Services' IT Modernization/HIE Integration Opportunities as reported in the Vermont Health Information Technology Plan, dated July 23, 2010.

For the Vermont WIC Program, WIC EBT:

- Ensures that participant receives prescribed foods
- Provides data on type and amount of foods purchased
- Allows for accurate rebate billing on infant formula purchased
- Ensures that retailer claims are no more than **Not-to-Exceed** price
- Enables a secure transaction
- Enables timely and accurate claims
- Reduces the amount of time and effort spent on retailer compliance activities
- Reduces the amount of time and effort in monitoring and reconciling retailer overcharges
- Reduces forgery and fraud opportunities
- Increases accountability
- Reduces paperwork
- Enables numerous reports on EBT activity to improve administrative efficiencies
- Streamlines clinic operations; increases time for nutrition education

1.2.6 **Stakeholders**

Stakeholders for the project include those directly affected by changes to the WIC processes, other state agencies, community health and nutrition professionals, WIC's federal partners, home delivery and retail vendor partners, and WIC participants themselves.

Direct services for WIC in Vermont are provided by VDH staff operating from District Offices throughout the state. The resulting acquired data is utilized by VDH Health surveillance staff, VDH WIC state level staff and USDA regional and national WIC staff). Community partners, such as pediatricians and hospitals, provide information and coordinate services with WIC.

A range of users will need access to the MIS and EBT systems, to input data and create reports. Each user group has unique needs and requirements. The approximately 160 Vermont Department of Health state users and the user environments are diverse in nature. The user community ranges from WIC certifiers at remote clinic locations to the super users within VDH who must report to a federal level to participants at the service level in a corporate retail or a small business environment. The typical VDH state office staff user has a reliable state network to utilize and access to a variety of MS tools. WIC certifiers work in variable environments, but have access to the same network and tools as VDH state office staff. Currently data entry activity occurs subsequent to clinics and is accomplished using paper forms.

The Vermont WIC retail environment (currently authorized only for the fruit and vegetable cash value benefit under WIC) is comprised of corporations with multi- state locations, Vermont based-

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

chains with several locations, single location Vermont based full service retail grocers, and small independent Vermont grocers. The retail vendor network currently consists of approximately 130 store locations throughout the state. The Vermont retail environment varies greatly with a small portion of retail operations currently without electronic point of sale systems (POS), and who rely on state-provided POS terminals for SNAP and WIC EBT. Of the current retail Point of Sale systems, a portion are integrated systems with WIC eligible foods identified in their databases, a portion are integrated without WIC identified foods, some are maintained by corporate IT units, some by the owner/retailer. Some stores utilize reliable high-speed networks; some make use of dial up connections. The point of sale retail worker's profile ranges in age and experience, from the skilled retired worker, to the teenage worker in their first job. VT WIC does not believe that a significant number of new stores will have to be added to the current network in order to distribute the full WIC food package through retail vendors.

Vermont WIC stakeholders include:

- WIC Participants
- VDH direct service, supervisory and management staff at local level including WIC certifiers, nutritionists and administrative staff
- WIC state office staff

Vermont Department of Health stakeholders include:

- Health Surveillance
- Information Technology

External State Agency stakeholders include:

- Vermont Department of Information and Innovation (DII)
- DII IT Operations staff
- AHS client programs such as Department of Children and Families
- Vermont Information Technology leaders (VITL)

Federal Agency stakeholders include:

- New England Regional Office (NERO) of USDA/FNS
- USDA/FNS, Washington DC, including State Systems, MIS and EBT

Community stakeholders include:

- Community physicians and nutritionists

Vendor stakeholders include:

- WIC authorized home delivery vendors
- WIC authorized retail vendors, including independent grocers and multi-state chains

1.2.7 **Project Support**

Both the MIS and EBT projects have received the approval of the VDH Information Technology Advisory Team (ITAT) and DII, which is comprised of State Level Technology staff responsible for the oversight of projects, which meet the 2010 Session of the Legislature revision of the

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

requirements for approval and presentation of information technology activities.¹ The WIC MIS/EBT project was assigned top-level priority by the Department of Information and Innovation.

WIC EBT is 7th on the list of 18 items slated for Tier One of the Vermont Agency of Human Services' IT Modernization/HIE Integration Opportunities as reported in the *Vermont Health Information Technology Plan*, dated July 2010.

The WIC project staff for the proposed project is described in [Section 6.3.3, Project Management](#). The organization chart for the project is displayed in [Project Organization](#).

1.2.8 **Project Management**

The project management approach to be taken had been developed by the Vermont Division of Innovation and Information's Enterprise Project Management Office (DII EMPO). The approach is based on the Project Management Institute's (PMI) nine widely accepted PM "Knowledge Areas" (integration, scope, time, cost, quality, human resources, communications, risk, and procurement) being managed through a modified version of its five Process Groups (Explore, Initiate, Plan, Execute, and Close). Blending both agile and traditional approaches, work progresses in cyclical iterations adapting to changes in scope and resource availability, ultimately producing incremental successes at the end of each cycle until the project is complete.

After a thorough analysis of the necessary skills needed for coordination and management of this specific project, the Vermont WIC program has determined that the project coordination and management tasks can be adequately performed through existing state staff and existing contracts, rather than through a major contract for project management. In particular, because Vermont is transferring an existing SAM MIS system and intends to make only minor revisions, and will be procuring outsourced EBT using an online model that is already operational, the effort should be significantly less complicated than developing a system from the "ground up" or one that requires making significant changes. In addition, our current WIC MIS/EBT planning team members are experienced in project management activities and oversight associated with developing, operating and maintaining information systems and EBT implementation.

State WIC staff, supported by state VDH IT, AHS-IT and DII staff, has various technical skills, which will be invaluable throughout the life cycle of the project. Several staff were involved in previous development projects either in system development, testing or in the training of local agency staff, and implementation of the current WIC EBT card using the SNAP platform. Other staff members have held a major role in defining and testing any system changes required because of new state and federal policies. In addition, WIC state staff have written system requirements and monitored the work products of outside contractors for a number of years.

The WIC project staff for the proposed project is described [in Section 6.3.3, Project Management](#).

The contractors selected for MIS and EBT implementation are expected to provide comparable project teams. The relationship between state Project Management and contractor Project Management is described in [Section 6.3.4, Contractor Project Management](#).

¹ The new requirements in 22 V.S.A. Sec. 901 calls for the Department of Information and Innovation (DII) to review and approve information technology activities with a cost in excess of \$100,000. In addition to the new requirement, 3 V.S.A. Sec. 2222(A) requires a Life Cycle Cost Analysis and a Cost Benefit Analysis for projects over \$100,000.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

The project management approach, reporting requirements and plans for quality assurance, as well as the organization chart for the management of the proposed project, are found in Section 6, [Project Management Plan](#).

1.2.9 **Organizational Impacts**

The organizational impacts and other effects of the proposed project are discussed in detail in several sections of this IAPD including:

- [Section 1.2.2 - Business Need for Replacement of WIC MIS](#)
- [Section 1.2.3 - Business Need for Replacement of Home Delivery with EBT](#)
- [Section 4.1 - MIS Design](#)
- [Section 4.2 - EBT Design](#)
- [Section 7 - Resource Requirements](#)
- [Section 17 - Appendix C - Feasibility Study / Alternatives Analysis for WIC MIS](#)
- [Section 18 - Appendix D - Feasibility Study / Alternatives Analysis for WIC EBT](#)

The deficiencies in the legacy MIS that will be rectified by the new MIS are enumerated in the [Gap Analysis Summary](#), which is appended to this document.

Given the age and inflexibility of Vermont current legacy WIC IS, the heavy reliance on paper-based documentation, and the use of multiple, non-integrated databases, the organizational impact of implementing a state-of-the-art WIC MIS will be significant. The new MIS will change clinic flow as many aspects of the certification process from appointment scheduling through benefit issuance become fully automated. Staff training and competency testing will have to be changed to accommodate the new processes. However, any service disruptions resulting from a transition from the legacy to the new system will be more than compensated for by the significant improvements expected in efficiency, and elimination of duplicate data entry and complex data management. Less time will be spent on administrative tasks, allowing professional health and nutrition staff to focus on improving the health and nutritional status of WIC families, which is, after all, the goal of the program.

As detailed in the [Gap Analysis Summary](#), Vermont WIC staff has identified a number of positive functional and operational impacts of these in the following key areas:

- System Design
- Certification
- Nutrition Education, Health Surveillance, and Referrals
- Food Benefit Issuance
- Operations Management
- Vendor Management
- System Administration and
- Transition from Home Delivery to EBT for redemption of food benefits

The result or impact of successful deployment of the MIS and EBT will be:

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- replacement of the aging WIC MIS and migration from home delivery to EBT;
- functionality and service improvements with newer technologies;
- optimized operational and support technologies;
- streamlined business practices and processes;
- improved access to data;
- improved ability and flexibility to make changes to the WIC system;
- improved reporting capabilities for local staff;
- improved customer service;
- reduced staff, system and processing errors;
- reduced user training with increased user friendly processes;
- reduced amount of paper used and produced;
- minimized potential for fraud and abuse;
- increased budget and caseload capabilities and;
- full compliance with Federal rules and regulations;
- full EBT functionality by the 2020 Congressional mandate.

1.2.10 **Schedule of Tasks, Deliverable and Milestones**

The Vermont WIC Program has developed a detailed schedule of tasks, deliverables and milestones required to complete this project successfully in a reasonable time frame. The MIS schedule is included in [Section 8, Schedule of Development Activities, Milestones, and Deliverables](#) and the EBT in [Section 9](#). A Combined Implementation Task Matrix can be found In [Appendix G](#). The schedule may be amended once the vendors have been selected.

The expected timetable for the major phases of the project is:

Phase	Timeframe	Anticipated Start Dates
Planning ²	16 months	9/30/2012
Design	4 months	1/30/2014
Development	12 months	5/30/2014
Pilot Operations	4 months	5/30/2015

² Although the State has been planning for the system transfer since 2005, the project phase “planning” refers to the final planning for procurement of services and the actual procurement process beginning with the release of the RFP for transfer and implementation services.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Statewide Rollout	6 months	9/30/2015
Maintenance	12 months	3/30/2016

The high-level schedule for achievement of project milestones is as follows:

Phase	Milestone	Target Date
Planning	Submission of IAPD to USDA	3/31/2012
	Submission to USDA of RFP for MIS T&I Contractor, QA Contractor RFP and EBT Implementation RFP	9/30/2012
	USDA Approval of IAPD	9/2012
	USDA Approval of RFPs	3/2013
	Release of RFPs	3/2013
	Selection of Contractors	5/2013
	Completion of DII External Review	6/2013
	Completion of Contracting	9/2013
	Project Kick-Off Meeting	9/2013
	Final Work Plan	1/2014
Design	System JAD/requirements Sessions	1/2014
	Completion and Acceptance of Detailed Design Documents	5/2014
	Final Business Process Adjustments	5/2014
Development	Completion of Development & UAT	5/2015
Pilot	Pilot Initiation	5/2015
	Pilot Completion	9/2015
Statewide Rollout	Roll-out Initiation	9/2015
	Roll-Out Completion	3/2016
	Completion of Data Conversion	
	Post Warranty Project Closure and Transfer to State Operations	3/2017

1.3 Program Commitments

1.3.1 *Commitment to Involve Policy Staff in Project Development and to Implement Program Policy Correctly*

The Feasibility Studies and Alternatives Analyses conducted by Vermont WIC were designed to ensure that the functionality of the proposed systems enables the correct implementation of program policy. Representatives of WIC state and local agency staff have been involved in all

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

phases of the alternatives analyses and have had significant input into the requirements for the new systems and selection of the transfer system. The standardization and objective decision-support enabled by the automation of WIC certification and administrative processes will improve VT WIC's capability to effectively and correctly implement program policy. It will also allow VT WIC to respond more quickly to implement needed program changes and quality improvements.

1.3.2 **Commitment to Meet All Functional Requirements**

The Feasibility Study and Alternatives Analyses conducted by Vermont WIC to determine the best-fit solution for the proposed MIS and EBT systems utilized the FNS/USDA Functional Requirements Document (FReD), and Vermont's FReD which added functional and non-functional requirements specific to Vermont for systems comparisons.

Vermont WIC is committed to meeting all FNS/USDA functional requirements. The MPSC MIS SAM system, by our analysis, exceeded all other analyzed systems in meeting both FNS and Vermont requirements.

1.3.3 **Commitment to Meet Federal Reporting Requirements**

By choosing an operational MIS system that includes robust reporting capabilities, and which meets the FNS/USDA FReD requirements for reporting, Vermont is confident it has selected a system that aids in our commitment meets all Federal and State reporting requirements.

1.4 **Financial Issues - MIS**

1.4.1 **Estimated Transfer and Implementation Costs**

Since the system will be WIC dedicated, federal financial participation (FFP) will represent 100% of all costs. The project will be funded using WIC nutrition services & administration funds (NSA), operational adjustment funds (OA), WIC MIS or EBT grant funds if available, and other available federal funds. The following table summarizes all startup (contracted and State, design, development, and implementation) costs, as well as ongoing operations costs.

Type	Cost
One-time/ Startup Costs	\$ 3,950,262
Ongoing (monthly) Costs	\$ 47,366

For additional detail related to the budget, please see [Appendix H](#).

1.4.2 **Schedule of Operations and Maintenance Costs**

Operations and maintenance costs for the MIS system will be negotiated with DII, once the transfer is complete and operations are fully transitioned from the T&I contractor to the state. Costs are anticipated to be similar to costs for maintenance and operation of the legacy system. These costs include hosting, database maintenance and hardware repair and maintenance.

Costs for network maintenance, telecommunication, help desk services, base technology licenses, hardware refresh and user authorizations are not reported separately; these costs are included in statewide cost allocation.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

On-going operations of the EBT system will be included in the cost per case month amount determined by contract with the EBT service provider.

1.4.3 **Cost Benefit Analysis Results**

The MIS alternatives analysis and feasibility study submitted to FNS on January 3, 2012 showed that transfer of either the MPSC or the MI-WIC system could meet Vermont's functional, operational and technical requirements. MPSC was the preferred alternative because its status as a SAM system provides a formal community of users and on-going support as well as the opportunity to request full funding through the FNS SAM transfer MIS funding process.

See [Appendix C](#): Feasibility Study/Alternatives Analysis WIC MIS

The EBT alternatives analysis and feasibility study submitted to FNS on January 3, 2012 clearly demonstrated that the most cost effective, lowest risk option that meets Vermont's functional, operational and technical requirements within the necessary time frame is to implement EBT through an out-sourced on-line services contract.

See [Appendix D](#): Feasibility Study/Alternatives Analysis WIC EBT

1.4.4 **Cost Allocation Plan**

The transferred WIC Information System and EBT services system will be WIC-dedicated. Because WIC will not be sharing either system with other programs, there is no need to develop and include a cost allocation plan for system modification, transfer, implementation, operation, or maintenance costs.

1.4.5 **Waiver of Depreciation**

The Vermont WIC program requests a waiver of depreciation on applicable items to allow them to be expensed at the time of purchase

1.4.6 **Equipment Provided**

The MIS portion of the budget includes purchase of PCs for a limited number of clinic workstations, laptops for satellite clinic operation, signature pads and scanners. The EBT portion of the budget includes card acceptance devices at clinic workstations, although provision of the necessary EBT devices may be negotiated as part of the EBT services contract. In addition, new program or operational needs may arise that necessitate modification of the equipment list contained in this document. In the event of these changes, written notification and justification will be provided.

All hardware/software purchases must be compatible with Statewide and applicable Agency/Department IT architecture policies and standards and be approved in accordance with State bulletins and statutes.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

1.5 Technical Issues – MIS & EBT

1.5.1 *Telecommunications, Hardware and Software*

The State of Vermont AHS District Office locations house WIC offices and clinics. All WIC staff positions are within State government with access to the preexisting statewide government network. No modem-based connections will be used in the new system.

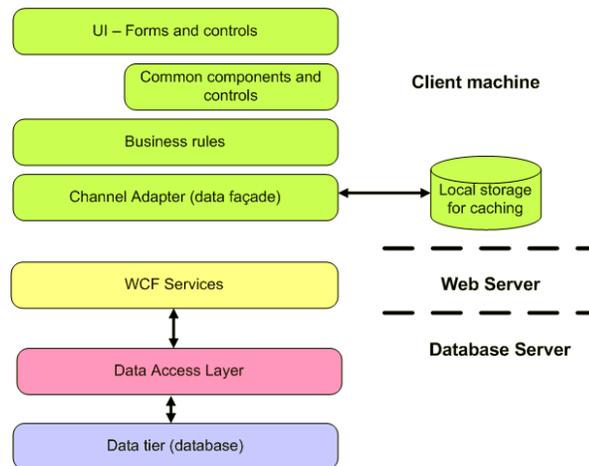
Connectivity support will be provided by the State Helpdesk IT staff or the Transfer and Implementation (T&I) Contractor's help desk during implementation. Support provided by the T&I help desk regarding connectivity will be minimal and must cover things such as standardized settings, function testing, and basic support of physical connectivity of the District Office setup. DII Helpdesk IT staff will support connectivity issues as they pertain to IT policy, firewall settings, and ISP specific settings and network outages.

The State will purchase any needed hardware using the State's procurement process whether it be located at the hosting site, administrative site or the District Offices. Servers as well as operating systems and database licenses will be purchased and owned by the State of Vermont

The State owns all client hardware and operates under the Vermont Department of Health hardware replacement cycle. All hardware/software purchases and additional client-side hardware needed for the new system must be compatible with statewide and applicable Agency/Department IT architecture policies and standards and be approved in accordance with State bulletins and statutes. While contractors may propose to provide hardware and software, as part of their proposal, the State will reserve the right to procure hardware and software from other sources when it is in the best interest of the State to do so. This includes signature pads, additional switches and routing equipment, and any item necessary to keep client side functionality and maintain State security and hardware standards.

1.5.2 *Description of MPSC MIS System Architecture*

The MPSC MIS uses an n-tier approach, utilizing best practices of software application partitioning in order to achieve the design and performance goals of the system. This n-tier approach was specifically designed and tailored for the MPSC project. The n-tier architecture for the MPSC is further specialized using the framework provided by the "Smart Client Architecture". This is based on the premise of handling all major processing and business steps on or as close to the client as possible. The diagram below illustrates the logical architecture of a distributed Smart Client system.



The Client Machine

The client machine contains the major part of the working application in compiled executables, DLLs (Dynamic Link Libraries), and supporting files. In addition to the user interface, the client machine also provides the following functions:

- Performs basic validation of data captured through user interface interaction.
- Applies business rules to the data captured through the user interfaces, which may span data collected across multiple screens.
- Caches information to ensure minimal communication with the server, and hence, optimal use of the network.
- Applies security to the various parts of the user interface.

The client for the system uses the Windows Forms interface, and hence, all controls used during the development are native to the .NET framework. The guiding principles for the development of the application for the client machine are:

- Develop controls based on well-defined component architecture.
- Minimize repeated code patterns in routine forms with frameworks such as:
 - Data validation
 - Data management
 - Security
- Retrieve information from the server when required. In context of the user interface for a connected system, this translates to fetching information for a specific “unit of work” when requested.
- Compress the communication between the client and Web server to ensure optimal use of network bandwidth.

The above discussion also applies to a disconnected client system where the communication with the Web server happens in batch for synchronization.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

The Web Server

The Web server provides all communication interfaces back to the central database. The Web server provides the following high-level functions:

- Communication end-point for all interaction between client and server.
- Compression for all packets to and from the client.

Database Server

The database server provides the persistent data store for all data within the system. The basic guiding principle for the On-Line Transaction Processing (OLTP) database is to ensure that data is persisted and retrieved in the most expedient fashion while maintaining referential integrity throughout a properly normalized logical data model.

1.5.3 Data Conversion

When a new MIS system is implemented, current participant data from the legacy Vermont WIC system will have to be converted to the format required by the new system. This will include only the specific fields and data elements contained in the participant record. With the use of EBT, the benefit delivery data by home delivery vendors will no longer be needed and will not be converted. Vermont's centralized database in Montpelier is maintained by 2 DII WIC developers, who will assist the T&I contractor with data conversion.

The conversion process will include mapping the legacy data onto the new database structures, determining what the default values will be for mandatory data elements that do not exist in the legacy data, and deciding upon error handling procedures. In addition, the data will have to be examined to determine what, if any, manual clean up procedures will be necessary or desirable to invoke prior to automated conversion of an agency's data. Once the conversion routines have been written and tested and any manual data clean up procedures have been completed, as the new system is rolled out to each District Office in turn, its data will be converted and populated on the new system.

1.6 Technical Issues – EBT

1.6.1 Telecommunications, Hardware and Software

The State of Vermont District Office locations house WIC offices and clinics. All WIC staff positions are State of Vermont positions with access to the preexisting statewide network.

Connectivity support will be provided by the EBT Contractor's help desk during implementation and production. Support provided by the State help desk regarding connectivity will be minimal and must cover things such as basic support of physical connectivity of the District Office setup. State Helpdesk IT staff will support connectivity issues as they pertain to IT policy, firewall settings, and ISP specific settings and network outages.

The State owns all client hardware located in District Office clinics and WIC administrative offices and operates under the Vermont Department of Health hardware replacement cycle. All hardware/software purchases and additional client-side hardware needed for the new system must be compatible with statewide and applicable Agency/Department IT architecture policies and standards and be approved in accordance with State bulletins and statutes. While contractors may propose to provide hardware and software as part of their proposal, the State will reserve the right to procure hardware and software from other sources when it is in the best

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

interest of the State to do so. This includes card readers and any item necessary to keep client side functionality and maintain State security and hardware standards.

1.6.2 **Description of Proposed System Architecture**

EBT vendors' proposed system architectures will be evaluated during the RFP Response period against Vermont's specific EBT online System Architecture requirements, and rated on compatibility with MPSC MIS EBT functionality and the State of Vermont's capabilities. [See Section 4.2](#) for a diagram of Vermont's EBT Architecture.

1.6.3 **Data Conversion**

Since the legacy Vermont WIC mainframe system already groups participants in household units, and issues relating to the food package reside in the MIS system and not the EBT system, converted data from the MPSC MIS will be in the proper format for the EBT system to utilize and will not require further data conversion.

1.7 **Security**

Vermont WIC recognizes the critical nature and value of a thorough Security Plan and its implementation. An initial Design Phase task and deliverable for both MIS and EBT contractors will be completion of a Security Plan. The State PM will oversee development of a consolidated Security Plan for the project that will meet FNS and State of Vermont security requirements while adhering to industry standards and best practices. The Security Plan will be developed in conjunction with several state agency partners including VDH IT, AHS IT and DII, in addition to the contractors and will assure the physical, electronic and operational security of the MIS and EBT systems., The Security Plan will address:

- Assignment of Security Responsibility
- System Environment Security
- System Interconnections/Information Sharing
- Related Laws/Regulations/Policies
- Established Policies - SOV Security Policy & Procedures
- Vermont's Safe At Home Program
- HIPAA
- Data Centers Policies
- Hardware/Software Maintenance & Upgrades of Production Equipment
- Internet Network Security Policies
- Disaster Recovery and Continuity of Operations Plan
- Application Level Security
- State Helpdesk Operations
- Separation of Duties
- Passwords

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Data Integrity
- Data Conversion
- Patient Privacy
- Performing Backups
- EBT Retail Level Security
- EBT Host Disaster Recovery Plan
- WIC System Disaster Recovery Plan
- Site Plan

1.8 Procurement Issues

The State of Vermont has a defined process for the approval of RFPs. The drafting of the RFP is the responsibility of the requesting program or the program's IT unit. Once drafted the RFP is sent to the Agency of Human Services (AHS) CIO for approval.

The Agency of Human Services (AHS) is responsible for its own IT services contracting and purchasing program. This responsibility includes ensuring the necessity of the services, securing appropriate funding, complying with laws and policies, writing the contract in a manner that safeguards the state's interests, and obtaining required approvals. Once approved, the AHS CIO will send the RFP to the DII CIO for final approval and posting.

[22 V.S.A § 901](#) requires DII to review all information technology proposal RFPs in accordance with Agency of Administration policies. The Agency of Administration policy is reflected in Bulletin 3.5 and states, "The Chief Information Officer/Commissioner of the Department of Information and Innovation must review *all* RFPs for information technology or telecommunication prior to their posting."

The Vermont WIC Planning Team has chosen to coordinate and expedite the RFP review process by using the preapproved DII RFP template, with additional AHS attachments added. The AHS and DII CIOs and their respective procurement specialists were consulted in regards to the process for issuance of the WIC MIS/EBT project RFPs.

1.8.1 *Summary of Procurement Process for MIS Transfer and Implementation*

The State WIC program will issue an RFP with VDH, AHS and DII approval to procure the services of a contractor to perform transfer and implementation (T & I) of the MIS system through a competitive process compliant with state and federal requirements.

Vermont anticipates that the software, which was developed for MPSC using Federal funds, will continue to be public domain software.

1.8.2 *Summary of Procurement Process for EBT Service Provider*

The State WIC program will issue an RFP with VDH, AHS and DII approval to procure the services of an EBT Contractor to implement an on-line EBT system, develop the necessary interfaces with the Vermont WIC MIS, and to host, maintain and operate the EBT system through a warranty period.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Upon release of the MPSC system, the Vermont EBT contractor will work with Vermont's MIS Implementation contractor to plan for the simultaneous release of MPSC MIS with on-line benefit delivery, since Vermont will not implement Food Instruments (FIs) as a new process for interim use during MIS Implementation.

1.8.3 **Summary of Procurement Process for Quality Assurance for MIS and EBT Implementation**

Through a competitive procurement process, the State WIC program will issue an RFP with VDH, AHS and DII approval to procure the services of a Quality Assurance contractor for the duration of the MIS T&I and EBT implementations.

The Quality Assurance contractor cannot bid on the T&I contract, and the MIS T&I Contractor cannot bid on the QA contract.

See [Section 6.3.6](#) for detailed description of the QA Contractor's responsibilities.

1.8.4 **Summary of Procurement Process for External Review**

DII requires that after an RFP for IT implementation is issued and a bidder is selected, an Independent Review will be conducted before contract finalization to assess the capability of the proposed contractors and completeness of the statements of work and other aspects of the proposed agreements with the contractors.

The procurement and oversight of the External Reviewer (ER) is the responsibility of DII but the cost will be the responsibility of the WIC Program.

2 Cost-Benefit Analysis (CBA), Feasibility Study and Alternatives Analysis

2.1 Overview

The Vermont WIC Program conducted a thorough analysis of various WIC MIS and EBT alternatives. The result of this analysis, a Feasibility Study, Alternative Analysis and Cost Benefit Analysis for both MIS and EBT are attached as [Appendix C](#) and [Appendix D](#) respectively. Please consult these Appendices for details about the comparative review of alternatives in satisfying these requirements, cost benefit analysis and financial feasibility for each alternative, and methodology used for the analyses. For a detailed description of the functional and non-functional requirements identified for Vermont MIS and EBT, please see [Appendix E](#), The Vermont Functional Requirements. The Feasibility Study and Alternatives Analysis, and Cost Benefit Analysis comply with FNS/USDA Handbook 901 requirements for MIS and EBT advance planning processes.

The WIC MIS chosen for analysis and comparison were:

- SPIRIT WIC SAM System (SAM MIS)
- Michigan MI-WIC (Three Sigma) (Vendor MIS)
- MPSC WIC SAM System (SAM MIS)

The WIC EBT systems chosen for analysis and comparison were:

- Wyoming offline EBT
- Michigan online EBT

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- SPIRIT online EBT

As concluded by those analyses, the MPSC WIC SAM is the option Vermont selected for MIS. The MPSC SAM will meet the programmatic and functional requirements of the State of Vermont WIC program. The system's user interface is remarkably familiar to WIC staff, which will shorten and ease the training period. The MPSC certification process is very similar to Vermont's and will aid in supporting our certifier training. It is also believed that the MPSC system will have a long life span due to its structure as a SAM system.

The selected transfer option will be built on a smart client, .NET, SQL server architecture, which is favored by VDH IT and AHS IT to other architectures due current development procedures and in house knowledge. The transfer system will provide increased processing capacity at the clinic level due to its centralized database structure, will support the State's desire for improved data integrity, thus allowing staff resources for focus more attention on addressing the nutritional needs of clients. The final transfer system selection of a SAM system, will allow Vermont to have opportunities to benefit from the SAM consortium model in terms of priority funding and resource sharing.

The selection of an online, out-sourced EBT system will meet the programmatic, functional and non-functional requirements of the State of Vermont WIC program and its participants. Additionally, online outsourced solutions tend to be full service solutions with the processor providing initial card production, card stock for in-clinic card activation,, WIC vendor (retailer) integration support, deployment and maintenance of stand beside POS solutions, and 24 X 7 customer services and help desk support. This division of labor and services will greatly aid the Vermont goal of implementing a new MIS and EBT at the same time.

For the Vermont WIC Program the EBT system will provide increased processing capacity at the clinic level due to its centralized structure, will support the State's desire for improved data integrity, thus allowing staff resources for focus more attention on addressing the nutritional needs of clients. It will ensure that participant receives prescribed foods, and provide data on type and amount of foods purchased.

The system enables a secure transaction. The on-line type of EBT system will streamline clinic operations by eliminating participant visits for card replacements and food package changes, increasing time for nutrition education.

For the Vermont WIC participant the on-line type of EBT system will allow for card replacement without a waiting period and without having to travel to a clinic. It will ensure that a participant is able to purchase the full, prescribed WIC food package at the participant's discretion within the valid period of issuance, without a waiting period if a card is lost or stolen.

Both system choices best meet Vermont's business needs within the necessary timeframes and at a sustainable operational and maintenance cost. The systems are technically, operationally and financially feasible.

2.2 Technical Feasibility

The choices of MPSC WIC SAM and out-sourced online EBT meet Vermont's technical needs. Refer to [Appendices C and D](#) for the Feasibility Study/Alternatives Analysis for a technical description of the MPSC system and the out-sourced EBT system, and the analyses demonstrating how each system addresses Vermont's technical requirements and is feasible for implementation. The detailed alternatives analysis is found in Section 6 of each document.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

2.3 Operational Feasibility

The choices of MPSC WIC SAM and out-sourced online EBT are operationally feasible for Vermont. Refer to [Appendices C and D](#) for the Feasibility Study/Alternatives Analysis for a description of the MPSC system and the out-sourced EBT system, and the analyses demonstrating how each system addresses Vermont's operational requirements and is feasible for implementation.

2.4 Financial Feasibility

Vermont WIC understands it will be required to fund ongoing operations and maintenance of the MIS and EBT systems primarily from NSA funds and state funds. The Cost Benefit Analysis, included in the Feasibility Study/Alternatives Analysis for MIS and for EBT, attached as [Appendices C and D](#), demonstrates that adoption of these proposed solutions is financially feasible, and will provide the greatest benefits to the WIC program and WIC participants, relative to cost.

3 Functional Requirements Document (FReD)

The Vermont FReD specifies the technical non-functional and WIC programmatic functional requirements to support the ongoing operations of a WIC MIS and EBT system that is in conformance with Federal regulations, national standards and specified Vermont standards.

The WIC MIS and EBT system must be in compliance with FNS's most current WIC EBT policy memoranda and with the WIC Functional Requirements Document for a Model WIC Information System with EBT (FRED), Version 2008 2.0, September 2008 or the most current version of this document.

The final system requirements for this project have been determined reciprocally by Vermont's solution chosen and the capabilities of current VDH, AHS and DII systems. The Vermont WIC MIS program desires a paperless system, from data creation to data storage, with the capability to exchange data with other AHS programs, Vermont State systems and FNS. WIC EBT will transform the current WIC benefit issuance process and with home delivery of food benefits to a paperless EBT system with food delivered through a network of retail grocers.

The WIC system must be compliant with the AHS Service Oriented Architecture and therefore eventually utilize the AHS Rules Engine, the data management system, AHS security services, the AHS Enterprise Master Person Index (eMPI), the AHS Workflow and Identity Management system as they are implemented in Vermont. The system will have the ability to receive and store unique ID's from the AHS EMPI.

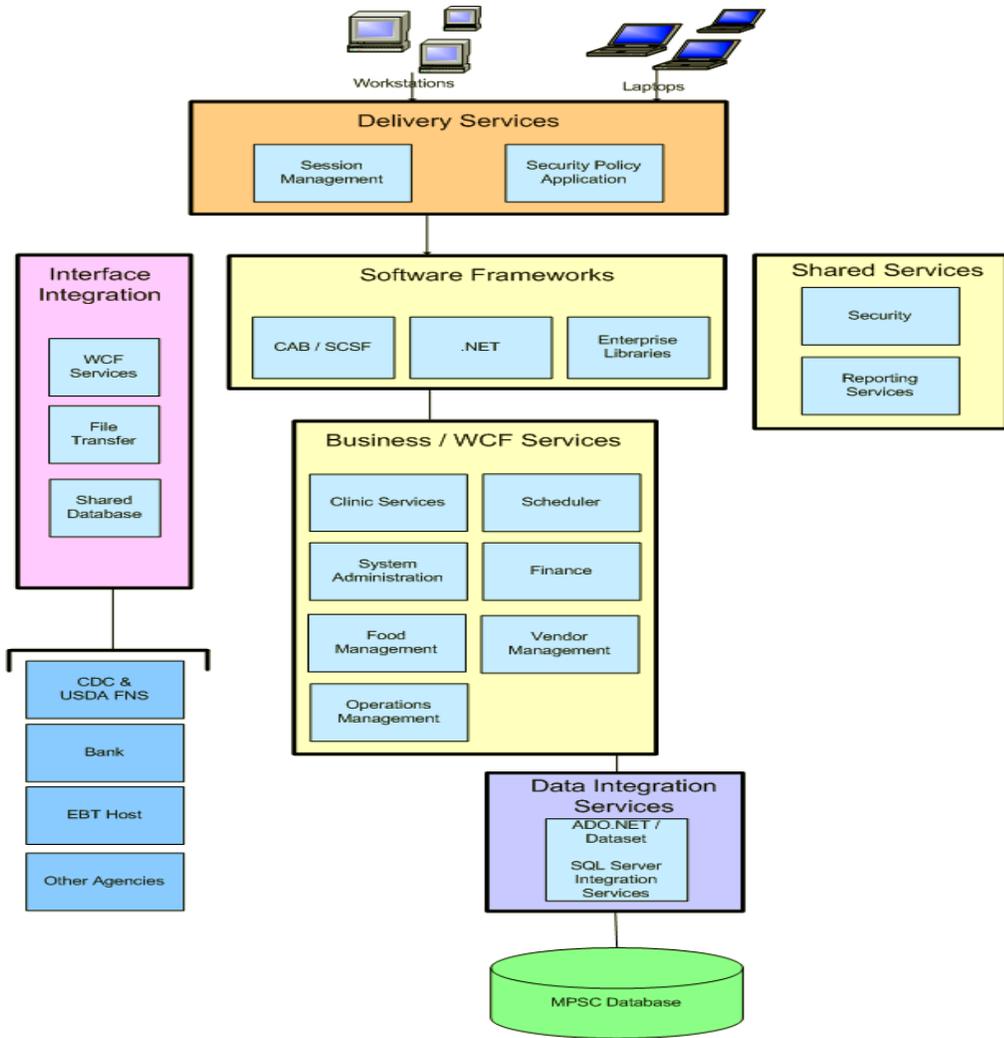
The Vermont Functional Requirements Document (FReD) is attached as [Appendix E](#).

4 General System Design

4.1 MIS Design

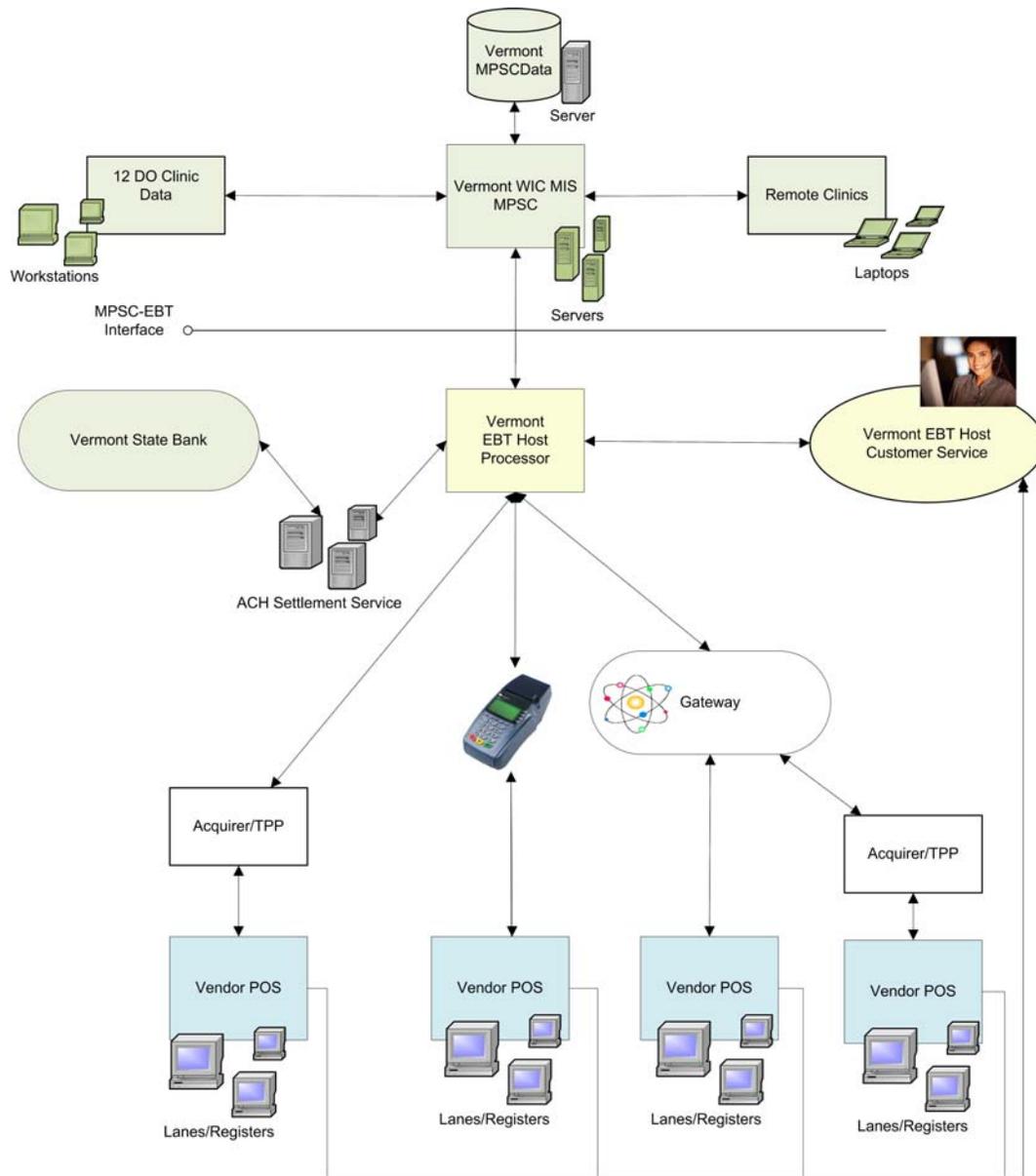
The CIBER Detailed Technical Specifications Document (DTSD) discusses the MPSC Architecture and Design in detail and can be located on the USDA FNS site at http://www.fns.usda.gov/apd/Library/MPSC_docs.htm

It is anticipated that Vermont's SOA Architecture and the MIS implementation in Vermont's environment will create the need for DTSD updates specific to Vermont following Implementation. The following diagram shows the high-level MPSC architecture.



4.2 EBT Design

On-line out-sourced EBT System Architecture will be evaluated during the RFP Response period, and rated on compatibility with MPSC MIS EBT functionality and State of Vermont hosting facilities requirements. Vermont's high-level overview diagram follows:



5 Capacity Planning / Study

5.1 MIS Capacity

The MPSC examined the characteristics of current generation systems used in various states. Based on MPSC analysis, the estimated size and capacity requirements for a new WIC system are as follows:

- 850 data elements
- 280 data tables (files)

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- 70 high-level system processes
- 300 local agency/clinic screens
- 60 local agency/clinic level reports
- 160 state agency level screens
- 100 state agency level reports

The caseloads of the MPSC agencies are as follows: Colorado WIC Information System (ASPENS) supports 125 clinics and 85,000 participants per month; Utah WIC Information System (UWIN) supports 53 clinics with 73,101 participants per month, and Wyoming's WIC System, which supports 36 sites with 12,000 participants per month. Vermont WIC is expected to support a capacity similar to Wyoming's and does not expect Vermont's caseload to exceed the capacity of the MPSC system.

Peak volume of transactions for each state, on any given day, is measured by the number of participant records accessed. Peak volume of participant records for Colorado is likely to be about 6,000 records. For an eight-hour clinic day, this works out to 750 records per hour or 13 records per minute. Peak volume of participant records for Utah is likely to be 4000 records per day, 500 records per hour. This is about 9 records per minute. Peak volume for Wyoming is estimated to be about 650 records, 75 records per hour, which is less than 2 records per minute. Vermont recognizes that participant record sizes may vary considerably dependent upon such factors as number of certifications, number of visits, number of benefit issuances, etc. For planning purposes the current participant record size for Vermont WIC, along with other system details (e.g., average record size and whether entire records are sent over the network or just screen updates) and current excess capacity of the Vermont network, will be assessed once the T & I contractor is identified to determine whether any additional capacity must be acquired.

5.2 EBT Capacity

Unlike SNAP, most WIC benefits are not associated with a specific dollar amount but are provided in the form of a food package or food prescription. The participant may purchase only food items specified on the food instrument and the WIC Approved Food List. Approved food items, quantities and package size are specified in the food package. Because of the nature of WIC food benefits, a WIC EBT redemption transaction is more complex than SNAP EBT and is often considered the most complex transaction at the retail point-of-sale (POS). Like SNAP and cash EBT, online WIC EBT is being built on the retail POS and debit and credit infrastructure and will use national standards for the processing of financial transaction messages. Unlike SNAP and cash EBT, which must be interoperable across state lines, states have the option of implementing offline, smart card systems for WIC EBT. Both technologies (magnetic stripe and smart cards) and systems (online and offline) have distinct advantages and were considered as WIC EBT alternatives within Vermont's Feasibility Study.

The on-line outsourced type of EBT is chosen as Vermont's preferable EBT type after thorough evaluation in the Vermont EBT Feasibility Study and Alternatives Analysis. By outsourcing processing, the State will manage one contract and use the services of an EBT service provider with experience in processing, retailer management, and client and retailer help desk and support. Enhancements for system capacity can be handled through the contract process.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

6 Project Management Plan

6.1 Introduction

After a thorough analysis of the necessary skills needed for coordination and management of this specific project, and consultation with Vermont's Statewide Project Management Office at DII, the Vermont WIC program has determined that the project coordination and management tasks can be best performed through existing state staff and contracts, rather than through a major contract for project management. In particular, because Vermont will transfer an existing SAM system and intends to make only minor revisions, the effort should be significantly less complicated than developing a system from the "ground up" or one that requires making significant changes.

The Vermont WIC MIS/EBT project is supported by a comprehensive structure of WIC administration, executive oversight, management authority, and stakeholder input. Executive oversight for the effort is provided by VDH. All three Vermont IT units will support the Information Technology aspect of the project, those being: Department, Agency and State level IT. The State level IT (DII) unit will provide project management oversight of the State Project Manager's deliverables, ensuring accountability. The State Project Manager ("State PM") will serve as the primary point of contact for project contractors and stakeholders, and will coordinate and facilitate meetings and workshops, provide formal communication with contractors and generally coordinate or address all administrative requirements of the project. Stakeholder input is supported by Functional Advisory Groups from the VDH WIC administration and District Offices

In addition, our current WIC MIS/EBT planning team members includes staff persons experienced in project management activities and oversight associated with developing, testing, implementing, operating and maintaining in house information systems and commercial off the shelf software (COTS), such as the EBT implementation.

State WIC staff, supported by state VDH IT, AHS-IT and DII staff employees, have technical skills, which will be invaluable throughout the life cycle of the project. Several staff were involved in previous development projects either in system development, testing or in the training of local agency staff, and implementation of the current WIC EBT card using the SNAP platform. Other staff has held major roles in defining and testing system changes required because of new state and federal policies. In addition, WIC state staff has experience defining system requirements and monitoring the work products of outside contractors for a number of years.

6.2 Project Management Approach

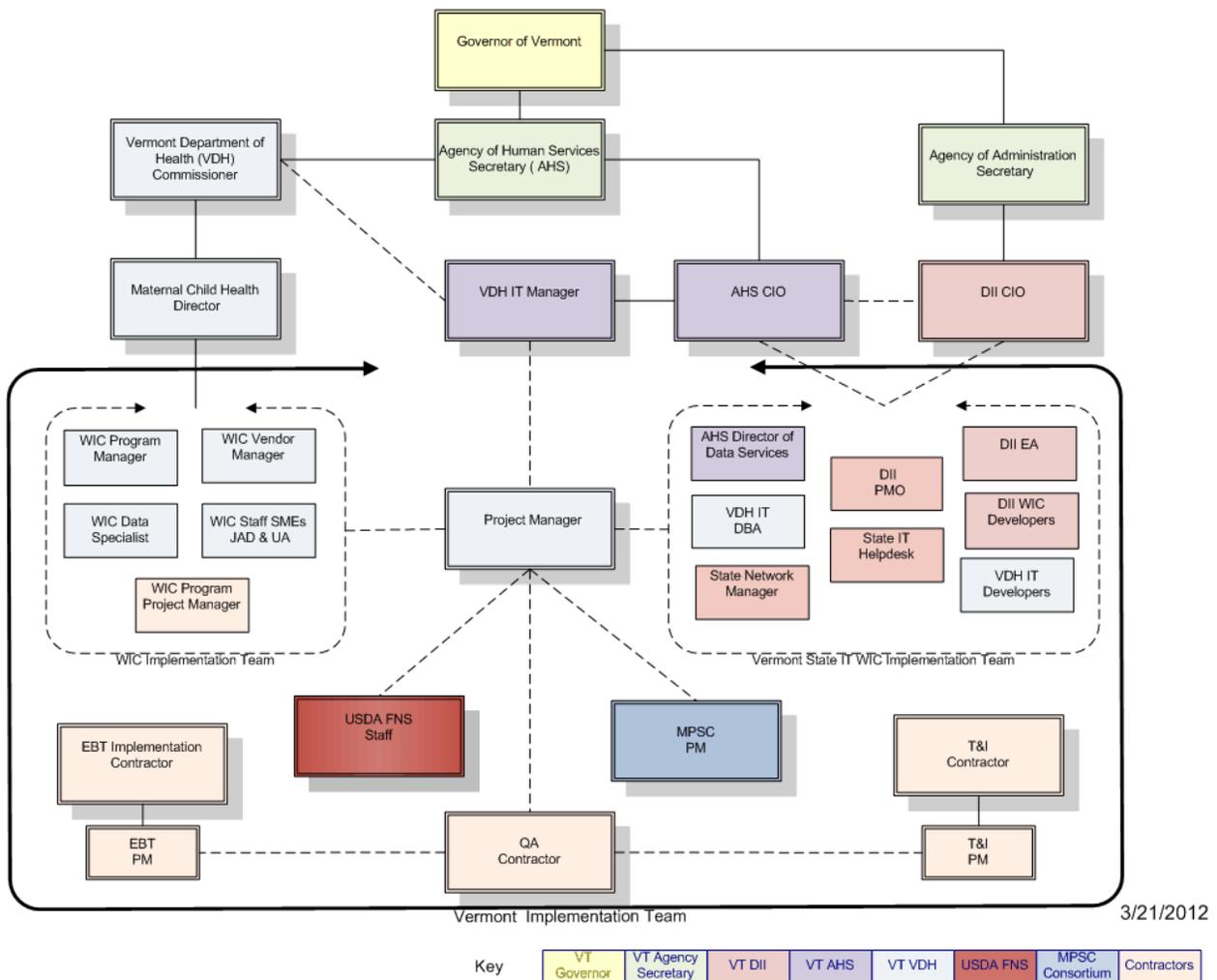
The project management approach used for the proposed project will utilize the Vermont DII Enterprise Project Management Methodology. The DII EPMO methodology is a hybrid combination of Industry Standard framework and tools utilized to manage project requests from concept to completion. Working within guidelines established through Vermont state statutes, DII works directly with other departments and agencies in review, approval, procurement, and management of various IT contracts.

The foundation of the methodology is based on the Project Management Institute's (PMI) nine widely accepted PM "Knowledge Areas" (integration, scope, time, cost, quality, human resources, communications, risk, and procurement) being managed throughout a modified version of its five Process Groups (Explore, Initiate, Plan, Execute, and Close). Blending both agile and traditional approaches, work progresses in cyclical iterations adapting to changes in scope and resource availability, ultimately producing incremental successes at the end of each cycle until the project is complete.

The MIS T&I PM, the EBT PM and the State PM will follow project management methodologies that are consistent with the (PMI) Project Management Body of Knowledge (PMBOK) Guide. Contractor's staff and subcontractors are to follow a consistent methodology for all SOW activities.

6.3 Project Organization

The MIS/EBT Planning team is developing a statewide WIC MIS/EBT IT Implementation Team, which includes staff from VDH, AHS and DII units. Roles and tasks for each member will be assigned prior to the contract finalization stage. There will be PM oversight from the State DII unit, and a State Project Manager ("State PM") who will serve as the central project coordinator for PM deliverables, communications, scheduling and reporting.



VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

6.3.1 **Project Implementation Team**

The team approach developed and used through the pre-planning phase of this project will continue to be used through planning and implementation. The original Planning Project Team consists of the Project Coordinator, the Project Manager, and the Technical Leader. Additional roles are added to the original team to capture subject specific knowledge and skills and expand vendor management for Implementation. The planning team roles and responsibilities in Implementation are described below, along with roles and responsibilities of the additional State IT implementation team staff.

6.3.2 **Project Oversight**

The primary responsibility for creation of the State Project Manager position will be the Vermont WIC program Central Office, with Donna Bister, Vermont WIC Director, being assigned the primary oversight responsibility. Oversight activities include:

1. Serve as the project's primary Subject Matter Expert (SME), stakeholder and project champion.
2. Oversee and approve program project plans
3. Monitor kickoff, design, development, testing, pilot and rollout progress
4. Collaborate and communicate with the other State WIC Implementation Team members
5. Serve as primary liaison between the Vermont WIC program and the State Project Manager and VDH Administration.
6. Approve (or deny) strategic project decisions such as whether the WIC program is ready for user acceptance testing (UAT) and Production Pilot, or whether to impose penalties on contractors for non-compliance with contractual obligations.
7. Serve as final authority regarding all project-related decisions and contractor deliverables in collaboration with Vermont Implementation Team members.

6.3.3 **Project Management**

The person responsible for planning project management in the project-planning phase (PAPD) will continue the role during implementation for Program Project Management. Program Project Management tasks will continue to be provided through a contracted position, either by continuation of the existing contract or a similar procurement. The current WIC Program Project Manager is Jeanne Keller of Keller & Fuller, Inc.

WIC VDH Technical Leadership for the planning project will no longer be required once the State IT Implementation Team initiates their tasks. The new State Project Manager position will serve to be a liaison between the project sponsor, the state IT Implementation Team, MPSC, and all contractors. The position will facilitate the flow of communication among all entities.

The responsibilities of the Program Project Manager and State Project Manager include:

- Assist in communication with, knowledge transfer to, coordination and scheduling of state and local personnel, and external stakeholders, such as FNS, retail grocers and others, involved in project activities and deliverables
- Assist in the oversight of contractor activities
- Research and aid in the procurement of necessary hardware
- Coordinate scheduling, participation in and oversight of UAT, rollout and implementation activities

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Assist the contractors with addressing telecommunication and network issues during testing activities
- Assist DII WIC developers and contractor(s) during data conversion activities
- Assist contractor(s) with providing technical assistance to state and local agency staff throughout testing and implementation of the system
- In collaboration with the MIS T&I Contractor, develop training materials for the MIS system
- Participate in training state agency staff on the MIS application
- Participate in local agency staff training on the MIS application with other designated local and state staff
- Participate in the full Team meet weekly with the WIC Director to review status reports, project plans, project deliverables and other relevant project materials.
- The State Project Manager will coordinate daily with the WIC Director and the State IT Team to review activities and plan the next day's work tasks.
- The State Project Manager will assure creation and delivery of all required State of Vermont PMO documentation.

Specific responsibilities for each role will be defined in the final Project Plan to be developed during the initiation phase

6.3.4 **Contractor Project Management**

The T&I and EBT Contractors will each provide a project manager (PM) responsible for all the tasks necessary to oversee their relevant portions of the project. The Contractors' PMs will be responsible for the successful delivery of all Contractor tasks and subtasks defined in the Project Work Plan and will have overall responsibility for the project deliverables, schedule, and successful implementation of the software as planned and all activities of Contractor's resources. Contractor PM tasks include, but are not limited to, updating Project Plans, assigning staff, scheduling meetings, reviewing status reports, addressing project issues and change orders, and preparing presentations as needed.

The Contractors' PMs will be responsible to and will work closely with the State Project Manager and the QA Contractor on a day-to-day basis. The Contractors' PMs and the State PM will work cooperatively to ensure the State Program and IT Implementation Teams' activities and objectives are planned and performed according to the project plan schedule in place. Progress will be monitored, and approach adjusted as necessary in Project Status Meetings with the WIC Program's approval. The Project Work Plan (for both State and Contractor tasks) will be updated by the Contractor, agreed upon and reports printed for each Status Meeting.

The State PM is responsible for overseeing the Contractor's adherence to contract provisions and the agreed-to project plan, and to ensure appropriate resources are allocated within the State to accomplish the agreed-to objectives. The State PM will be responsible for identifying any risks, problems or issues needing intervention and engaging the project executive sponsors as required.

The project plan will indicate when, over the life of the entire project, the Contractors' Project Managers will be required to be onsite (e.g. JAD sessions, UAT, etc.). The Contractors' Project Managers will schedule and facilitate weekly project team status meetings either onsite in Vermont or via teleconference. Contractor staff other than the Project Manager will attend as

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

required and determined by the Contractors' PM and/or the State PM. A weekly meeting schedule will be identified during the project kickoff meeting.

The Contractors' Project Managers will provide weekly written Status Reports to the State PM. Status Reports will include, at a minimum:

- all tasks accomplished, incomplete, or behind schedule in the previous week (with reasons given and remedy for those behind schedule);
- all tasks planned for the coming two weeks,
- an updated status of tasks (entered into the Project Plan and attached to the Status Report – e.g., % completed, completed, resources assigned to tasks, etc.),
- the status of any corrective actions undertaken.

The report will also contain items such as:

- the current status of the project's technical progress and contractual obligations,
- achievements to date,
- risk management activities,
- unresolved issues,
- requirements to resolve unresolved issues,
- action items,
- problems,
- installation and maintenance results,
- significant changes to Contractor's organization or method of operation, to the project management team, or to the deliverable schedule where applicable.

The State PM and the Contractor PM will come to agreement on the exact format of the report document at or before the project kickoff meeting.

6.3.5 ***Project Roles and Responsibilities of VDH and Other State Agencies***

Several state agencies will participate in or support the project:

Agency	Role / Responsibility
VDH Information Technology Advisory Team (ITAT)	<ul style="list-style-type: none"> • VDH departmental project approval • VDH IT Resource allocation
Department of Information and Innovation (DII)	<ul style="list-style-type: none"> • Operation of current system • Legacy data cleaning • Legacy data conversion • Production migration from legacy to new WIC MIS

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

	<ul style="list-style-type: none"> • Serve as primary stakeholder for state wide interfacing systems, i.e. VISION system • Design System Architecture • Maintain System Software • Maintain System Host hardware • Maintain System Host Facilities • Provide State PM Oversight Services • Provide Helpdesk Services • Maintain State Network • Maintain District Office Hardware
AHS IT	<ul style="list-style-type: none"> • Serve as primary stakeholder for the AHS Core Components interface • Serve as primary stakeholder for Agency Program systems interfacing with WIC
VDH IT	<ul style="list-style-type: none"> • Oversight of ITAT approved projects • Provide State PM for the project • Application Maintenance • Database Maintenance • Systems Messaging

The roles and responsibilities of these key stakeholders in the current system, and their roles in development of functional requirements for the new MIS and EBT systems are documented in *Vermont WIC MIS/EBT Project: [Vermont WIC Functional Requirements](#)* (v.3.0), appended to this document.

6.3.6 **Project Quality Assurance**

The WIC Planning Team will select and contract with an individual or group to provide QA services. The QA contractor's services will be obtained through the state's procurement process. The QA contractor's RFP will be processed first, prior to the T&I and EBT, to bring the QA Services to Vermont as soon as possible to aid the state in planning tasks for Implementation. In accordance with current State of Vermont policy and procedures, the contract will include QA performance measures. The specific performance measures will be determined during the contract negotiation process. These measures may include the possibility of both positive and negative incentives. The QA contractor will have organizational freedom, authority, and independence to objectively evaluate and report on project activities. The QA contractor will maintain a reporting channel to the WIC Planning Team through the State PM, which is independent of the project's implementation contractors.

The QA will develop and document QA plans in a QA Plan; topics will include, but not be limited to those listed below:

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Quality objectives, in measurable terms
- Types of test and verification and validation (V&V) activities
- Entry and exit criteria for project phases
- Resource and training requirements for the QA group or function
- Scheduling, budgeting and funding of QA activities
- QA participation in development of project plans, standards, and procedures
- Process evaluations and audits to be performed by QA
- Product and service audits and reviews to be conducted by QA
- Standards and procedures used for QA
- Documenting, reporting and tracking noncompliance issues, and the escalation procedure
- Documentation that QA establishes, maintains, and controls over the life of the project through delivery

The activities of the QA contractor will include but not be limited to:

Review of Development Activities

- Review of all deliverables to ensure that they meet contractual requirements and State expectations
- Verification and documentation that the new system adequately meets all FNS and State requirements
- Validation of review findings with users and stakeholders
- Comparison of specifications to requirements identified in documents, such as contracts and RFPs, to ensure compliance
- Identification and tracking of dependencies in deliverables to ensure thorough follow-through and completion of activities

Monitoring of Project Status and Management

- Monitor milestone schedule, accomplishments, and timelines to ensure that project is on track
- Monitor and determine impact of new guidelines, requirements, and outside influences on planning and procurement processes
- Monitor status of key deliverables and activities
- Monitor costs to ensure that project stays within budget
- Identify potential areas of risk (e.g., schedule slippage, cost overruns, QA concerns, changes in resources) and develop contingency plans to address risks
- Assist State Implementation team in clearly defining roles, responsibilities, and expectations involved in the QA process, including contractors and FNS

The required project QA written deliverables are reports and documents, which include but are not limited to:

- Quality Management and Monitoring Plan

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Comments on the EBT project management plan.
- Comments on the MIS project management plan
- Quality Assurance Checklist - Reoccurring
- Comments on Project Initiation Meeting
- Written Comments on T&I Contractor's System Transfer, Modification and Testing Plan and the EBT Contractor's Modification, Implementation, and Testing Plan
- Written Comments on System Design Confirmation and Change Requirements Sessions
- Written Comments on Updated Detailed Functional Design Documents
- Written Comments on Updated Detailed Technical Specifications Document and Interface Specifications
- Written Comments on Data Conversion, Training, Security, Telecommunications, and Disaster Recovery Plans
- Written Comments on T&I Contractor's System Transfer Initiation Memorandum & EBT Installation Memorandum
- Confirmation on the T&I & EBT Contractor's Certifications of Systems Readiness for UAT
- Written Comments on State Site Analysis Reports and T&I Contractor's Review and Assessment
- Written Comments on User and Operations Manuals
- Master Test Plan
- Written Confirmation on the T&I Contractor's Certification of System Readiness for Pilot Implementation
- Master UAT Testing Report
- Master Help Desk Services Plan
- Written Comments on System Pilot Initiation Memorandums
- Written Assessment of Pilot Site Readiness
- Written Comments on T&I & EBT Contractors' Regression Acceptance Test Design
- Written Confirmation on the T&I & EBT Contractors' Certification of System Readiness for Rollout
- Ensure Delivery of Source Code
- Written Comments on System Rollout Initiation Memorandums
- Written Comments on the T&I & EBT Contractor's Post-Implementation Assessment and Problem Resolution Memorandum
- Ensure Delivery of Updated System Documentation and Source Code
- Comment on Documentation of Reported System Issues and Resolutions
- Review and comment on Monitor System Modification and Repairs

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

6.3.7 **Project Reporting Requirements**

Throughout the first phase of the planning process, Vermont WIC has used SharePoint as a tool for project management, communication, document development and as a document repository. (<https://vtwic.securespsites.com/MISEBT/>)

Vermont WIC intends to continue to use a secure, password controlled SharePoint site for these purposes to enable collaboration, streamline communications and provide multiple stakeholders with equal access to information about the project and our progress.

Each Contractor will have a portion of the SharePoint site to deliver their documentation, with permissions-based accessed. Delivered documentation will be reviewed by the QA contractor, who will make comments, note performance achieved by each contractor and combine MIS and EBT documents into Master documents as required. Once approved by the State Implementation Team, all documents will be available to stakeholders with site access.

All documents will be versioned and noted as draft or final. Final documents will not be accepted as such until approved by the QA Contractor and Vermont Implementation Team. Each document will note the VDH WIC Program, the date of posting, version number, authors, and contact information, as indicated in VDH IT WIC Templates.

The types of documentation to be posted to SharePoint are listed below will be available to the appropriate stakeholders:

- Acceptance documentation
- Agendas
- Assessments
- Certifications
- Change Control Documentation
- Checklists
- Deliverable Written Comments
- Design Documents
- Guides
- Logs
- Manuals
- Matrices
- Project Schedules
- Projects Plans
- Reports
- Resource Materials
- Technical Plans
- Technical Specifications
- Test Scripts

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Training Materials
- Vermont Laws/Regulations
- Vermont WIC Planning documentation
- Vermont WIC Policies, Procedures

The State PM will be responsible for monitoring all communications to assure proper reporting and receipt of information for both the diverse State entities and Contractors.

7 Resource Requirements

A State Project Manager will be designated to direct and manage all phases of the Vermont MIS/EBT Implementation Project. Including Planning, Design, Development, User Acceptance Testing, Pilot, Rollout and Closing. Vermont has organized and facilitated the input of WIC Subject Matter Experts (SMEs) in each functional area for the Design phase of the project. Many of the SMEs will also participate in UAT. The Vermont Planning Team will continue to participate in each phase of the project to cover additional staffing needs.

Following selection of MIS and EBT Implementation Contractors, and before contracts are executed, Vermont DII will facilitate an external review of selected contractors with bids over \$500,000.00 to assure that contractors are suitably capable of carrying out the contract and statement of work. The DII Project Management Office will provide project management oversight throughout the project to assure PMI and State Standards are met.

The IAPD contains a detailed activity and deliverables schedule for a Quality Assurance Contractor who will work with the State Project Manager to assess, manage and oversee the work of the Transfer & Implementation and EBT Contractors.

The resources committed to the project are displayed in the organizational chart found at Section 6.3.

All Contractors will obtain approval from the State in advance of all staff proposed for each project. Contractors will notify the State in advance and obtain approval of any new staff if staffing changes during a project. If any Contractor staff does not perform up to acceptable or satisfactory standards as documented in the contract or SOW, the State will inform the Contractor. When so informed, the Contractor will either replace the staff member(s) with approved staff or take remedial action agreed by the State to ensure staffs are performing at an acceptable standard.

The selected contractors will be required to work on-site in Burlington, VT as determined by the project schedule. Travel to other facilities throughout Vermont will be needed and the vendor will be responsible for such travel using their own mode of transportation. Occasional exceptions to this rule may be established by mutual agreement between the contractor and the State Project Manager.

Where applicable, the State will provide a project facility with desks, telephone, LAN connections, and printers. The State will provide desktop PCs and/or laptops for use during the project. If specific laptop computers or other mobile peripheral devices are required by the bidder then the bidder must provide their own equipment and but will be given the appropriate support by the State. Bidders will be provided support by the state in setting up any accounts or connections required (i.e. State email system, network connectivity, network printing etc.) and vendors will have access to State phones for use in project related business calls. The State will not pay contractor cell phone bills.

8 Schedule of MIS Development Activities, Milestones, and Deliverables

8.1 Overview

This section defines the anticipated schedule of activities, milestones and deliverables to be followed by MIS T&I Contractor, including system maintenance after rollout is complete. As part of their response to the T&I RFP, potential contractors will be required to confirm their intent to comply with this schedule, accommodate fellow contractors' schedules and propose any necessary modifications.

Vermont will require strict compliance with the approved schedule from the MIS T&I Contractor. Failure to meet the approved schedule may result in withholding payments or other penalties (such as instituting liquidated damages), as determined to be in the best interest of the State.

Phase	High Level Task
Planning	<ul style="list-style-type: none"> • Procurement Documentation and Contracting • Project Initiation • Final Work Plan • Transfer, Modification and Testing Plan Documents • Project Management Plan • Gap Analysis
Design	<ul style="list-style-type: none"> • System Design Requirements • System Specification Documents • Business Process Review/ Policy Adjustment • Project Plans
Development	<ul style="list-style-type: none"> • System Modification, Technical Testing, and Revisions • Site Readiness Checklists • Equipment Procurement (Pilot) • Operational Planning, Documentation, and Training Materials • Central Operations Preparation • User Acceptance Testing
Pilot Operations	<ul style="list-style-type: none"> • Training (Central Office- DII) • Training (Pilot Clinics and State) • Data Conversion • System Pilot Test- 3 Month

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

	<ul style="list-style-type: none"> • Pilot Evaluation and System Modification/ Retesting
Statewide Rollout	<ul style="list-style-type: none"> • Equipment Procurement (Statewide) • Statewide Training • System Rollout • System Documentation
Maintenance	<ul style="list-style-type: none"> • Initial 1 Year Warranty • Extended Warranties

8.2 Project Tasks, Subtasks, and Deliverables

As part of their response to the RFP, potential MIS T&I Contractors will be required to provide detailed descriptions of all planned activities and timeframes related to these project phases. In addition to a detailed narrative about each proposed task and activity, potential contractors will include in their proposals a schedule of proposed work, including Gantt charts illustrating project milestones and dates or timeframes for contract deliverables.

The phases are broken down in the following high-level tasks and subtasks. Each Phase and Task is a constant for all Contractors, with sub-tasks being tailored for a particular Contractor's responsibilities.

VT Timeline	MIS T&I Tasks	T&I Deliverable
Phase: Planning	Task 1 Project Initiation and Management	
	<i>Subtask 1.1 Project Initiation</i>	<i>Written Deliverable 1 Provide Written Comments on Project Initiation Meeting</i>
	<i>Subtask 1.2 System Transfer and Modification and Testing Plan</i>	<i>Written Deliverable 2 System Transfer, Modification and Testing Plan</i>
	<i>Subtask 1.3 Draft Work Plan and Schedule</i>	<i>Written Deliverable 3 Work Plan and Schedule</i>
	<i>Subtask 1.4 Attend Bi-weekly Status Calls</i>	<i>Written Deliverable 4 MIS Status Reports</i>
Phase: Design	TASK 2 System Design Confirmation and Change Requirements	
	<i>Subtask 2.1 Review of System Design Confirmation and Change Requirements Sessions</i>	<i>Written Deliverable 5 System Design Confirmation Sessions' Documentation</i>

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

	<i>Subtask 2.2 Update Detailed Functional Design Document (DFDD)</i>	<i>Written Deliverable 6 Updated Detailed Functional Design Document(DFDD)</i>
	<i>Subtask 2.3 Update Detailed Technical Specifications Document (DTSD)</i>	<i>Written Deliverable 7 Updated Detailed Technical Specifications Document</i>
	<i>Subtask 2.4 Create Hardware, Data Conversion, Training, Security, Help Desk Support, Telecommunications, and Disaster Recovery Plans</i>	<i>Written Deliverable 8 Hardware Plan</i> <i>Written Deliverable 9 Data Conversion Plan</i> <i>Written Deliverable 10 Training Plan</i> <i>Written Deliverable 11 Updated Security Plan</i> <i>Written Deliverable 12 Help Desk Plan</i> <i>Written Deliverable 13 Telecommunications Plan</i> <i>Written Deliverable 14 Disaster Recovery Plan</i> <i>Written Deliverable 15 System Transfer Initiation Memorandum</i>
Phase: Development	TASK 3 System Modification and Testing	
	<i>Subtask 3.1. System Transfer Initiation</i>	
	<i>Subtask 3.2 Monitor System Modification, Technical Testing, and Revision</i>	
	<i>Subtask 3.3 Unit/Module Test</i>	<i>Written Deliverable 16 Certification of readiness for UAT</i>
	<i>Subtask 3.4 Operational Planning, Documentation, and Training and Clinic Enablement</i>	<i>Written Deliverable 17 User Training Materials</i> <i>Written Deliverable 18</i>

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

		<i>User and Operations Manuals</i>
Phase: Development	TASK 4 User Acceptance Test (UAT)	
	<i>Subtask 4.1 Central Operation and Test Bed Site Preparation</i>	<i>Written Deliverable 19 Readiness Certification for System Software</i>
	<i>Subtask 4.2. Support UAT and System Revision</i>	<i>Written Deliverable 20 UAT Testing Report</i> <i>Written Deliverable 21 Assessment and Certification of System Readiness for Pilot Implementation</i>
Phase: Pilot Operations	TASK 5 Pilot	
	<i>Subtask 5.1 Help Desk Services</i>	<i>Written Deliverable 22 Updated Help Desk Services Plan</i>
	<i>Subtask 5.2 System Pilot Initiation Meeting</i>	<i>Written Deliverable 23 System Pilot Initiation Memorandum</i>
	<i>Subtask 5.3 Pilot Agency (State Office and Clinic) Training and Preparation</i>	
	<i>Subtask 5.4 Data Conversion</i>	
	<i>Subtask 5.5 Monitor System Pilot</i>	<i>Written Deliverable 24 On-Going Pilot Issue Log</i>
	<i>Subtask 5.6 Modify, Retest System and Evaluate Pilot</i>	<i>Written Deliverable 25 Regression Acceptance Test</i> <i>Written Deliverable:26 System Pilot Technical Memorandum of Certification for Rollout</i> <i>Written Deliverable 27 Source Code</i>
Phase: Rollout	TASK 6 Rollout	
	<i>Subtask 6.1 System Rollout Initiation Meeting</i>	<i>Written Deliverable 28 System Rollout Initiation Memorandum</i>
	<i>Subtask 6.2 Monitor System Operations, Help</i>	

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

	<i>Desk and Hardware Support and Data Conversion</i>	
	<i>Subtask 6.3 Post Implementation Problem Resolution and Checkpoints</i>	<i>Written Deliverable 29 Post-Implementation Assessment and Problem Resolution Memorandum</i>
	<i>Subtask 6.4 System Documentation Update</i>	<i>Written Deliverable 30 Updated System Documentation</i>
Phase: Maintenance	TASK 7 Operation and Maintenance	
	<i>Subtask 7.1 System Operation and Maintenance</i>	<i>Written Deliverable 31 Monthly Status Reports Written Deliverable 32 Continuation of Business Plan</i>
	<i>Subtask 7.2 System Defects, Errors and Bug Fixes</i>	<i>Written Deliverable 33 Documentation of Reported System Issues and Resolutions</i>
	<i>Subtask 7.3 System Modification and Repairs</i>	<i>Written Deliverable 34 Updated Operations Manual</i>
Phase: Maintenance	TASK 8 Project Closure	
	<i>Subtask 8.1. Final System Documentation, Forms, Source Code, Data, and Other Materials</i>	<i>Written Deliverable 34 Software/Hardware Image Plan Written Deliverable 35 Complete System Program Documentation Recurring Written Deliverables</i>
Initial 1 Year Warranty	<i>Subtask 8.2. Contract Closure</i>	

8.2.1 **Planning**

Planning activities relate to the development and release of procurement documents, evaluation of proposals from potential MIS T&I Contractors, and contracting with a qualified MIS T&I Contractor. This phase includes the award of the contract to a MIS T&I Contractor, and successful completion of the Vermont's DII required Independent Review of the capabilities of the selected contractor. Per Vermont statute, all information technology contracts with a value of \$500,000 or more must undergo an independent review by an uninvolved party who is engaged by the State Chief Information Officer to review the decision of the contracting agency in its selection of a particular information technology proposal. The cost of the independent review is borne by the State Sponsor Agency. This review includes the following elements:

- (1) an acquisition cost assessment;
- (2) a technology architecture review;

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- (3) an implementation plan assessment;
- (4) a cost analysis and a model for benefit analysis; and
- (5) a procurement negotiation advisory services contract.

The Independent Reviewer (IR) is charged with identifying possible risks in the contractor proposal, and working with the sponsor agency and the proposed contractor to incorporate effective risk mitigation strategies into the final proposal and agreement. Once the IR, sponsoring agency, and contractor are in agreement, the IR submits the final report, including the action taken to mitigate risks, to the state Chief Information Officer for sign-off.

If risks related to contractor capability or proposal cannot be sufficiently mitigated by additional strategies, and there is a valid and suitable proposal from a contractor who was the second choice from the review process, then Vermont WIC has the option of selecting that contractor (who would then be subject to the External Review process prior to contracting.)

If, however, the finding of unsuitability is due to a defect in the RFP and/or the RFP process itself, then the RFP must be reissued. The WIC Planning team has minimized the risk of RFP defect by including the WIC Program, VDH Legal, AHS IT and DII IT in development of RFPs. Vermont WIC is including numerous subject area experts, legal and other advisors in the RFP drafting and development process, to structure the RFP so that bidders will be required to fully document and demonstrate their capabilities and proposals in their responses. Furthermore, WIC will include the same types of experts and advisors in the RFP response review process to provide as much rigor as possible to the review of contractor capability and technology proposal.

8.2.1.1 Project Initiation

- The project initiation subtask allows contractors to meet with the State of Vermont stakeholders and fellow project contractors to set the foundation for the project, confirm expectations for project deliverables and define procedures for the operation of the project. Project Initiation marks the commencement of Bi-weekly Status meetings.
- Determine the critical success factors to successfully complete the project, review all project deliverables and confirm initial project scope.
- Finalize Implementation Team role assignments and responsibilities, resource requirements; discuss and confirm project implementation strategy (conversion, configuration, reporting, testing, training, change management).
- Build initial project work plan/schedule with preliminary dates for key project milestones and estimated resource requirements.
- Identify initial project risk factors and develop risk management plan.
- Develop communication plan and schedule for project team meetings.
- Define project status reporting requirements, processes and schedule.

8.2.1.2 Final Work Plan and Schedule

The MIS T&I Contractor will deliver a final MIS work plan, including Gantt charts and a project calendar prepared using a version of Microsoft Project that is compatible with the version used by the State of Vermont. The MIS work plan will reflect any changes from the plan submitted with the contractor's proposal that were discussed and agreed to during the project initiation meeting. The work plan will be maintained throughout the life of the project and updated as necessary by the contractor to reflect the accurate status of the project and as tasks are completed. All changes to

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

the MIS work plan will be reported to the State PM who will be responsible for the project's Master Work Plan.

- Develop and publish the final project management plan that will establish and communicate the overall contractor project organization and governance, project management control processes and serve as the guiding document for managing T&I portion of the project.
- Develop and publish a comprehensive T&I work plan and schedule
- Develop and publish the System Transfer and Modification plan
- Develop and publish the Testing Plan
- The State will provide Contractors with copies of standard templates for all required documentation or Contractor will use templates/forms that are mutually agreed upon between the State and Contractor.
- Create Bi-weekly Status Reports

8.2.1.3 Implementation and Change Management Plans

The MIS T&I Contractor will deliver written plans to describe, in detail, specific activities for the system transfer and implementation. The plans will detail the MIS T&I Contractor's approach to system implementation (including the implementation of a pilot), and change management (including system modifications and configuration management). The plans will include detailed tasks with task descriptions, identification of responsibilities, and timeframes.

Once the contract has been signed, if there are any changes to the scope of work, a change order must be processed and approved by the State before any additional work is authorized. The State and the selected Contractor will work together to outline a change control process which will be used to manage changes to the scope of work being performed. A management reserve or contingency will be built into the original contract to accommodate unexpected changes in project scope or deliverables.

8.2.2 Design Activities

Design activities set the foundation for the system transfer, modification and configuration requirements. The T&I contractor will conduct Change Requirements Sessions to review System Design and produce detailed design documentation. The sessions will include:

- Review and approval of System Design
- Validation of System Requirements
- Development and publishing of an updated Detailed Functional Design Document (DFDD)
- Development and publishing of an updated Detailed Technical Specifications Document (DTSD)

8.2.2.1 Joint Application Development (JAD) Sessions

JAD sessions will be conducted with Vermont WIC subject matter experts, State PM, WIC director, QA Contractor, EBT Contractor and T&I Contractor to review and validate the design and functionality of the new system to ensure that the system functions are acceptable and configured to the State's needs and to determine and document any necessary modifications.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Because the State is anticipating minimal changes to the system, configurations are expected to be limited to business rules choices or tables, such as adjustments to drop down values or food packages. The State Planning team will have undertaken a Fit Gap analysis during the Project Initiation step, to clarify and refine Vermont's requirements.

8.2.2.2 System Requirements Documentation

The MIS T&I Contractor will deliver comprehensive Final System Requirements Documentation. The MIS T&I Contractor will deliver an Updated Detailed Functional Design Document (DFDD) and an Updated Detailed Technical Specifications Document (DTSD). Using the documentation that already exists for the transfer system as a base; this document will be updated with any identified changes that are necessary to meet Vermont's requirements and environment. The Hardware, Data Conversion, Training, Security, Help Desk Support, Telecommunications, and Disaster Recovery Plans will be created and a System Transfer Initiation Memorandum will be presented for approval

8.2.3 Development Activities

Based on the accepted design documents, the MIS T&I Contractor will make any modifications to the existing MPSC system and implement the MIS system to interface with the EBT system. As part of Service Development and Implementation, the MIS T&I Contractor will make modifications as necessary to the MIS system to meet the requirements of Vermont and to interface with the EBT system.

Development Activities include development of system modifications, systems testing, system transfer, operational planning, clinic enablement and user acceptance testing.

8.2.3.1 System Modification Initiation

The MIS T&I Contractor will convene an on-site meeting to review the plans, schedules, and deliverables for the modification, testing, and implementation phases of the MIS system transfer project. Key Vermont WIC, QA Contractor, State PM, EBT Contractor and MIS T&I Contractor staff will participate.

The State PM will deliver a technical memorandum to the Vermont team, which documents all agreements, understandings, and contingencies arising from the System Modification Initiation Meeting. The MIS T&I Contractor will sign off to indicate agreement with the documentation.

8.2.3.2 System Modification, Technical Systems Testing, and Revisions

The MIS T&I Contractor will follow a structured system development life cycle methodology to develop enhancements for the transfer system, which will include regression testing, in addition to the UAT, which is described in [Section 8.2.3.5](#), and includes the following types of test activities:

Test Type	Description
Baseline Test	Prior to any system modifications, the system will require a baseline test to ensure that the transferred system operates correctly in the Vermont environment
Unit/Module Test	This test is used to validate that an individual program module or script functions

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

	correctly. It validates the module's logic and adherence to functional requirements and technical specifications. Each unit/module test will execute every source statement and each conditional branch in the module. Test results are recorded for that module.
Subsystem Integration Test	This test examines subsystems that are made up of integrated groupings of software modules. Subsystem integration testing should be conducted in the development environment. It is the first level of testing where problem reports are generated, classified by severity, and the resolution monitored and reported. Subsystem integration testing may need to be run several times for each subsystem, and is only complete when it can be run with zero errors.
System Test	This test tests the entire system once modification and testing of all system modules and subsystems have been completed. It determines whether the system complies with standards and satisfies functional, technical, and operational requirements. The goal of testing is to confirm that both individual system modules and the entire system perform in accordance with the functional requirements and technical specifications. During this test period, system documents and training manuals may also be tested for accuracy, validity, completeness, and usability. The software performance, response time, and ability of the system to operate under stressed conditions are tested. In addition, the external system interfaces are tested. All findings will be documented in a system qualification test analysis report prepared by the MIS T&I Contractor and submitted to Vermont. Like the subsystem integration test, this test may need to be run several times and is only complete when it runs according to the pre-determined performance criteria established by the Implementation Team and T&I Contractor.
Regression Testing	Full regression testing will retest a system component, such as a unit, module, or subsystem, following any modification to verify that the problem was corrected without adverse side effects and to ensure the component still complies with its requirements. Regression testing also refers to rerunning the entire system qualification test after errors have been corrected to ensure that unanticipated errors have not been introduced elsewhere in the system by the error correction activity.
Readiness Certification	Once the MIS T&I Contractor is satisfied that the system meets the functional requirements and technical specifications, the contractor will provide the Vermont WIC Program with a written certification that the system is ready for UAT. This certification will not be delivered until the system has passed all tests and there are no known errors.
Periodic Status Reports	During this subtask, the MIS T&I Contractor will submit bi-weekly reports to the State PM. The purpose of these reports is to measure overall progress and status of the T&I Contractor activities.

8.2.3.3 Develop and Review Site Readiness Checklists and Provide Recommendations

The MIS T&I Contractor will provide a list of the technical requirements for operation of the software and hardware in the State Office and in District Offices. From this list, the State Team will develop detailed checklists to be completed by each District Office (to include all clinic locations) to determine the readiness of each site for implementation of the new system. The

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

checklists will capture data to evaluate relevant aspects of each existing site, such as clinic layout, electrical service, DII network capability, and the ability to keep equipment and card stock secure. The Vermont State WIC Office and/or DII staff will work with the District Offices to complete the checklists. The State Team staff will review each of the checklists, create a technical memorandum identifying any areas of concern related to the implementation of the system in any site and create a plan for mitigating the concern.

8.2.3.4 Central Operation Site Preparation for User Acceptance Testing

The MIS T&I Contractor and DII will install and test the software on the State's servers and ensure that the remote sites are properly configured for the UAT. For a viable UAT, the computers in the test environment must be connected to the actual host server that will be used for production.

The T&I Contractor will provide "Train the Trainer" training to Vermont WIC staff and the QA Contractor, and the T&I Contractor will provide on-site assistance for the central operation during the UAT. The MIS T&I Contractor will also review and provide comments on the State's security assessment and disaster recovery procedures for the hosting facility.

8.2.3.5 Support User Acceptance Testing and System Revision

The T&I Contractor and DII will create Development, Test, and Production environments for use during the MIS system transfer project.

The system will be ready for UAT only after the MIS T&I Contractor has performed thorough system unit and module testing, tested all revisions to the functionality, provided User Training Materials and User and Operations Manuals and submitted a Certification of Readiness for UAT, and the project has received authorization from FNS to proceed. Pre-determined performance criteria required for UAT Certification of Readiness will be determined by the QA contractor and Vermont Implementation Team and agreed upon by the MIS T&I Contractor prior to initiating the UAT task. UAT performance criteria established for testing will form a foundation for the go/no go decision factors that will be used to determine whether or not the system proceeds from UAT to pilot. The Vermont Implementation Team and the QA contractor will review the system performance against the pre-determined performance criteria, the schedule, the logistical factors, the readiness assessment, and possibly other factors that will lead into the go/no go decision to move forward. Vermont's go/ no go decision points are the same as FNS determined decision points as specified in the 901 handbook and will be established and reviewed at each critical phase.

The system must also meet the State's defined system performance measures, defined by DII, to be considered ready for UAT.

The MIS T&I Contractor is responsible for generating the test data and test scenarios to be used for systems testing. The Implementation Team and QA contractor will develop test scenarios to be used during UAT. If possible, the Vermont team will modify preexisting MPSC test scripts as necessary to reflect the updated MIS functionality that meets Vermont's requirements and may develop additional scripts beyond these existing scripts.

The QA Contractor will have primary responsibility for managing and operating the UAT, and will be responsible for ensuring that UAT participants (State and local WIC staff) have the training, access, and testing tools (such as scripts and data) needed to perform the test. The QA Contractor will provide metrics related to the success of the UAT and will provide results regularly

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

throughout the UAT process. Vermont's Implementation team, to assess performance of the UAT, will use these metrics.

Prior to beginning the UAT, the MIS T&I Contractor will perform a key function system walkthrough for the QA Contractor, State WIC Director, State PM, DII staff, and other WIC Program staff as appropriate. In this demonstration, the system must perform the following functions according to the pre-determined performance criteria:

- Establish clinic calendar, schedule appointments, mark appointments as kept or missed;
- Create security/user roles;
- Perform client certification (including, but not limited to, creating a new client record, income eligibility, nutritional eligibility/ risk code assignment, assigning food packages, documenting nutrition education);
- Deliver appropriate messages to the EBT System;
- Transfer clients and families between families and clinics;
- Upload/download clinic files to and from a laptop computer (i.e., test the disconnected mode of operations);
- Authorize a new vendor;
- Performing vendor management activities (including, but not limited to, tracking routine monitoring, compliance, training); and
- Print Participant Report

If there are any functional errors or major usability errors other than aesthetic interface defects during the demonstration, then the UAT will not proceed.

Assuming the key function walkthrough is complete and achieves the pre-determined performance criteria, the system will become available to Vermont for UAT. The QA Contractor will provide training on the proper procedures to be followed to perform the UAT, including how to run scripts and report bugs or issues. The MIS T&I Contractor will be available on-site and their development staff will be available for consultation and problem resolution during the entire test.

Because the WIC Program is adopting software that has already been tested and approved, the system as delivered by the MIS T&I Contractor for UAT is expected to have relatively few errors. It is assumed that the UAT can be completed in two rounds—one to uncover any defects and a second to verify that any defects identified have been fixed and that no new defects have been introduced. This requires that the MIS T&I Contractor not only fix the defects identified in round one, but also run the resulting system through their systems regression testing prior to delivering it for the second round of UAT. The period of UAT is expected to be twelve weeks in duration, providing the above assumptions are satisfied. The MIS T&I Contractor will make all required corrections and revisions to the system resulting from the acceptance testing process. System regression testing will be conducted as required until the system is accepted. If the UAT exhibits any failures, the system will be returned to the MIS T&I Contractor for revisions.

During UAT, the user manuals and online help will also be evaluated. The UAT procedures will instruct the testers to reference the user manuals or online help for directions regarding how to perform the required actions. Any inadequacies in the manuals must be corrected prior to final acceptance of those documents by the State.

After successful completion of the acceptance test, the QA Contractor will provide a formal assessment of the system's readiness for pilot implementation.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

8.2.3.6 Operational Planning, Documentation, Training Materials

The MIS T&I Contractor will deliver all reports and other written deliverables to the QA Contractor and the State PM. Other planning tasks and non-written deliverables will be performed under the direction of the QA Contractor and the State PM.

Written deliverables will be submitted electronically in draft form for review by Vermont WIC Implementation Team and the QA contractor (as appropriate). Final products will be submitted after receipt of Vermont's comments and in appropriate quantities and format³ for implementation and system operation purposes.

8.2.4 Pilot Operations

The purpose of the pilot is to verify that the system and data conversion works correctly in conditions of actual use. Once the system has passed UAT and has been formally accepted, a system pilot will be conducted in one and possibly two District Offices (DO), one urban and one rural.⁴ Pilot clients will not be removed from the legacy system, and the state will maintain and operate the legacy MIS and legacy home delivery during pilot and until statewide roll-out is successfully completed in all districts. Access will be available through state office in the event of need for DO to access legacy system. Vermont will not proceed to pilot until it is confident that there is very little possibility of an unsuccessful outcome to the pilot.

Food benefits will be delivered by EBT during Pilot. The T&I Contractor, EBT Contractor, State Staff and the QA Contractor will jointly plan and coordinate Pilot rollout. The cooperative framework of the project is extensively noted in the Implementation planning and will be required in the respective RFPs. Incentives will be established by contract to keep all contractors on schedule and coordinated. (Please see [Section 9.2.4](#) for details on Pilot Operations for EBT.)

8.2.4.1 Pilot Area Selection

Specific characteristics have been identified for the pilot area. These specifications were used to develop the following scoring matrix for selection of the pilot areas for MIS and EBT:

Score 1-5 on each criterion

- 5: High: A high degree of conformance to our needs; criterion fully addressed
- 4: Above Average: An above average degree of conformance; criterion addressed somewhat
- 3: Satisfactory: A satisfactory degree of conformance; criterion partially addressed
- 2: Limited: A limited degree of conformance; criterion barely addressed
- 1: Absent: No key elements of conformance; criterion not addressed

Pilot Management Issues

³ Some documents, such as training manuals, may be required in hard copy format. Deliverable submission requirements will be detailed in the RFP.

⁴ If pilot areas are contiguous, it will be necessary to ensure that households for the two DOs are on same home delivery route.

Reasonable distance from State Office
Strong leadership capacity of DO management
DO management has capacity to take on additional responsibilities
Retail vendors in the area demonstrate experience/knowledge of EBT and WIC
DII IT Resources on call availability Reasonable distance from DII IT Resources (to fix hardware/network problems)
Contractor availability – site is reasonable for traveling (to & from airport)
Contained size to limit amount of cross-shopping
Scale
Caseload size “not too big; not too small”
Adequate, but not too many, satellite clinic sites
Caseload/staff ratio allows adequate time staff learning and participant instruction
of retail vendors allows adequate pilot of EBT
Peer grouping of retail vendors (e.g. % chains, % ind) provides adequate sample of retail community; adequate sample of stand-beside and integrated retailers
Other Issues
Home vendor retirement timeframe prioritizes this region
DO staff displays sufficient IT competence to be first adopters
Area is representative of range of settings (clinics, satellites, etc.)
DO staff demonstrates ability to adhere to timelines and work plans
Adequate telecommunications infrastructure
Intangibles
“Early adopter” attitude of DO leadership, staff and retailers
Enthusiasm of DO and retailers

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Willingness of DO staff and retailers to adapt
DO leadership and staff prepared for added complexity (temporary) and possible failure
Potential of DO leadership and staff to train others for roll-out

8.2.4.2 Pilot Operations Initiation Meeting

Following successful completion of the UAT, and with authorization from FNS to proceed, the State PM will convene a status meeting with the MIS T&I Contractor's project manager, the QA contractor other key WIC Program and IT staff, and contractor staff as necessary. The meeting attendees will discuss and review the project plan, schedule, and deliverables for the implementation of system pilot projects.

8.2.4.3 Data Conversion

Data conversion will be accomplished by a joint team of DII Legacy WIC System developers and T&I staff. Data will be converted and loaded for the Pilot DO, while the remaining District Offices will continue to use legacy data during the Pilot.

8.2.4.4 Central Operation Program Support Staff Training

The MIS T&I Contractor will provide any additional training to the Vermont IT staff as necessary and as identified during the UAT to meet defined success criteria. In addition, the MIS T&I Contractor will provide training to the State WIC Program Office staff to be able to provide adequate support throughout pilot and rollout. Following this training and the initial week of pilot, the contractor may be able to provide any additional assistance to the WIC Program during the remainder of pilot remotely from their facility if all pre-determined success criteria have been satisfied. (See [Section 13](#) for Training Approach.)

8.2.4.5 Pilot Agency (State Office and Clinic) Training

After successful completion of the UAT, the MIS T&I Contractor will provide training for the staff who will be involved in each pilot site. The MIS T&I Contractor will provide the Vermont State PM with documented evidence of each trainee's competence within one week of the training event. Classroom training provided by the MIS T&I Contractor is anticipated to last three to five days (based on the transfer and MIS T&I Contractor's proposed training plan). Vermont WIC feels this is sufficient length of duration to ensure adequate comprehension. Additional days for local staff to complete system set-up activities, such as scheduling appointments or creating participant records, will also take place just prior to using the system to process clients in the pilot implementation. (See [Section 13](#) for Training Approach.)

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

8.2.4.6 System Pilot Test

The MIS T&I Contractor will be required to oversee the pilot test of the new system. The pilot is expected to last for three calendar months. MIS T&I Contractor staff will be onsite in Vermont during the first week of pilot. All interfaces, end of day, and end of month activities (such as reports) will be tested during this pilot.

Vermont will be responsible for day-to-day operation of the central processing system during the pilot site operations, although the MIS T&I Contractor will oversee the pilot and provide consultation and assistance as needed to Vermont's Operations Unit.

8.2.4.7 Evaluate Pilot, Modify, and Retest System

Prior to the start of the pilot test, a Full Regression Acceptance Test will be performed by the MIS T&I Contractor in consultation with the State PM and key WIC personnel. This test, based on the MIS T&I Contractor's own internal test procedures, will be used to test modifications and corrections made in response to problems identified during the pilot, before they are released to the pilot users. The Full Regression Acceptance Test is designed to test overall system operability after modifications have been installed but before release of the software to the user community. It does not replace the normal development testing required for changes. Its primary purpose is to ensure that the changes do not affect other aspects of system functionality. The test will use standardized inputs and known outputs to assess the impacts of changes.

Informal evaluation of the system software will be conducted during the pilot through regular communication with the pilot and central sites. Corrections, retesting, and release of updated versions of the software will occur as problems are encountered. Software errors encountered during the conduct of the system pilot will be corrected and tested by the MIS T&I Contractor and the resulting software version will be numbered as a new release. After correction and testing of each new version, the Full Regression Acceptance Test will be run against that version to check that the error correction has not introduced new errors elsewhere in the system. If there are any outstanding errors at the end of system pilot, one last version that corrects the remaining errors will be produced, and that version will be installed and run for five working days at the pilot agencies before the system is rolled out to the remaining agencies. The purpose of these five additional days is to ensure that no errors are introduced into the latest version of the system, which were not caught by the Regression Acceptance Test.

The State PM will maintain an issues log documenting all reported problems and questions from pilot DOs, and the resolution of the issues. The log will be used in the evaluation of the pilot.

Within ten days following the end of the pilot, the MIS T&I Contractor and the QA Contractor, with input from the pilot clinics, will each complete and submit an evaluation of the system pilot. The evaluation will address the following factors:

- System stability;
- Meeting functional requirements;
- User satisfaction;
- Impact on participant flow and convenience;
- Impact on clinic operations;
- Availability and accuracy of state level data;
- Adequacy of help messages and user documentation;

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Security and system integrity; and
- Need for modification of system or user processes.

The results of the evaluations will be documented in a report to be delivered to the State PM. The State PM and the relevant Vermont Implementation staff must approve all system revisions resulting from the evaluation of the pilot.

Following successful completion of the Pilot and prior to initiation of statewide rollout, the T&I contractor will provide all source code, including all of Vermont's defect and enhancement changes made to date.

8.2.5 **Statewide Rollout**

8.2.5.1 **System Rollout Initiation Meeting**

Following successful completion of the system pilot, and with authorization from FNS to proceed, the State PM will convene a status meeting with key Vermont staff and the contractors. The meeting will be attended by the MIS T&I Contractor's project manager, the QA Contractor and other WIC Program clinic staff as deemed necessary. The purpose of the meeting will be to discuss and review the project plan, schedule, and deliverables for the rollout of the new system to the remaining District Offices.

After successful completion of the pilot, the system will be rolled out to the remaining District Offices throughout the state.

8.2.5.2 **Statewide Training**

After successful completion of the pilot test, the MIS T&I Contractor will provide training for the Trainers for all DOs. Classroom training provided by the MIS T&I Contractor is anticipated to last two weeks (based on the transfer and MIS T&I Contractor's proposed "train the trainer" training plan). Vermont WIC feels this is of sufficient length of duration to ensure adequate comprehension. Additional days for local staff to complete system set-up activities, such as scheduling appointments or creating participant records, may also take place just prior to using the system to process clients in the pilot implementation. Trainers from each DO will be trained in the use of the new system, and then will be responsible for providing training in their own DOs. Each DO will be trained in the use of the new system one week before system implementation in that DO. As one DO begins using the new system, the next DO will begin their training the following week. (See [Section 14](#) for Training Approach.)

8.2.5.3 **Statewide System Rollout**

The MIS T&I Contractor will be required to oversee the rollout of the new system. MIS T&I Contractor staff will be onsite in Vermont during the first week of each site's implementation or until all pre-determined success criteria have been satisfied.

Vermont DII will be responsible for day-to-day operation of the central processing system during the statewide rollout, although the MIS T&I Contractor will provide consultation and assistance as needed. The MIS T&I Contractor will be responsible for supporting the DII and the WIC Program in the operation of the central site processor application. During this period, the MIS T&I Contractor will ensure that the central processor application provides all functionality and processing required to fully support the WIC program.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

For this subtask to be successful, the central site processor site will provide the following services:

- ensure online access to the new system functionality in the state office and from the clinic locations for operations, analysis, and the generation of reports.
- provide file maintenance, including backups, archiving of data, and maintenance of database synchronization between system modules on a daily basis.
- ensure all data communications between the central site processor and the clinics and state offices.
- provide disaster recovery procedures to ensure meeting system availability requirements.
- provide the software and support required to exchange data with other State and Federal programs electronically. This electronic data exchange will be for meeting the requirements of the USDA/FNS minimum data set and the data necessary for Vermont health surveillance projects.
- provide all system enrollment, reconciliation, expenditures, vendor, and other required reports in the media required and according to the agreed upon schedule.

Approximately four days following system rollout to the first District Office, a checkpoint meeting will be convened to identify any problems that must be fixed before rollout to the remaining District Offices. The meeting will be attended by the MIS T&I Contractor, the State PM, the QA Contractor and other WIC Program staff as deemed necessary. If no significant deficiencies are identified, the State Implementation Team will make the decision to proceed with rollout to the remaining groups of District Offices. District offices will be rolled out at a rate of one per week, as a rollout to all offices at once would overwhelm Vermont's resources for helpdesk staff.

Any problems encountered during the initial system operation will be either fixed or documented, depending on their effect on the delivery of services. If any deficiencies in the system functional requirements, technical operation, or reliability are identified, the MIS T&I Contractor will be required to repair these at no cost. Any changes that are considered enhancements will be handled through a change management process.

8.2.5.4 System Documentation

The MIS T&I Contractor will provide any system documentation, including a refined help desk plan, which is updated to reflect the final implementation of the system in Vermont within 10 days of the final clinic rollout.

8.2.6 Maintenance Activities

8.2.6.1 Contract Closure for the Modification & Implementation Phase

Subsequent to system rollout, the MIS T&I Contractor will be required to deliver all documentation, forms, or other materials in addition to client or program data retained under the provisions of the contract. The contractor will submit a final invoice for system modification and implementation activities. The State will pay the contractor upon review and approval of the contractor's performance under the terms of this contract.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

8.2.6.2 One Year Warranty Period

For one year from the successful completion of the rollout and receipt of final documentation and materials, the MIS T&I Contractor will be responsible for the support and maintenance of the clinic and state office applications on the central site processor. This responsibility includes one on-site follow-up training event if determined necessary by Vermont and may include as-needed ongoing training. The MIS T&I Contractor will correct any system problems identified and provide any system modifications at no additional cost to ensure the complete functionality as required by , the RFP, the Detailed Functional Design Document (DFDD), the Detailed Technical Specifications Document (DTSD), FSRD, and the contract between Vermont and the MIS T&I Contractor. All system problems reported during the warranty period are included under this provision, even if their repair extends beyond the year.

8.2.6.3 System Problem Reporting

During the one-year warranty period, the MIS T&I Contractor will provide the State PM with a written response to any reported system problem addressing the technical nature of the problem and the proposed plan to resolve the issue. All approved change orders by the State PM will be tracked separately.

8.2.6.4 System Modification

During the initial warranty period, the State PM may initiate Enhancement Requests to the existing system. These changes will be, documented, designed, developed, tested, and implemented on a mutually agreed upon schedule with the MPSC using a change order process. No charges will be made for maintenance required to the system to meet the system and functional requirements approved prior to contract closure.

8.2.6.5 Second to Fourth Year Extended Warranty Option

At the expiration of the one-year warranty period, the optional extended warranty periods may begin. The MIS T&I Contractor should offer three, one-year warranties on the system software for services similar to the initial one-year warranty at Vermont's option. During the extended warranty period, the contractor will be responsible for correcting all errors in the system software. The contractor must have qualified staff available as needed during the extended warranty periods for repair or system enhancement purposes.

During the extended warranty period, the State PM will communicate regularly with the contractor to report the nature and type of any problems identified. The MIS T&I Contractor will advise the State of any solutions that do not require programming fixes.

8.2.6.6 Extended Warranty Period: System Modification

During the extended warranty period, the same process described in [Section 8.2.6.4](#) would be initiated for enhancement needs that may arise.

8.2.6.7 Extended Warranty Period: Maintenance and Operations

Vermont will provide IT staff to maintain the new system. The VDH IT unit will provide application support when it becomes operational in Vermont. Any costs of these positions will be managed

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

through the WIC Program budget. Hardware, Server and network support will come from Vermont DII Services, as is currently done.

8.3 Schedule of Major Milestones and Deliverables

This section provides a listing of milestones and deliverables expected in the system transfer project. This section also includes an indicator of primary responsibility and an approximate timeframe for each activity.

The project cycle, from procurement to statewide rollout, lasts approximately 42 months. The actual dates depend on the document completion and approval cycle. The Implementation planning phase is to begin in September of 2012.

Note: All dates below are end dates unless otherwise specified

Key Milestones & Deliverables	Responsible Parties	Time period	VT Time MPSC MIS
IAPD Approval	FNS	6 months	9/30/2012
MIS Contracting Planning		12 months	Start 9/30/2012
RFP Release	FNS, WIC, AHS, DII, BGS	12months	3/22/2013
Vendor Proposals	BGS, WIC	2 months	3/30/2013
Contract	BGS, VDH, WIC, AHS, DII, AG	4 months	5/30/2013
MIS Kick off Planning		4 months	Start 9/30/2013
Project Initiation	Contractors	one day	1/30/2014
Final Work plan	WIC, DII, Contractors	2 months	
System Requirements Document	Contractors	4 months	
Planning Documents	WIC, DII, Contractors	4 months	
Gap Analysis	WIC	2 months	
MIS Design		4 months	Start 1/30/2014
System Design Requirements	WIC, DII, Contractors	4 months	5/30/2014
System Specification Documents	WIC, DII, Contractors	4 months	
Business Process Review/ Policy Adjustment	WIC	4 months	
Project Plans	WIC, DII, Contractors	4 months	
MIS Development		12 months	Start 5/30/2014

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Key Milestones & Deliverables	Responsible Parties	Time period	VT Time MPSC MIS
Business Process Review/ Policy Adjustment	WIC	4 months	5/30/2015
System Modification, Technical Testing, and Revisions	Contractors	4 months	
Site Readiness Checklists	WIC, Contractors	1 month	
Equipment Procurement (Pilot)	WIC, AHS, Contractors	2 months	
Operational Planning, Documentation, and Training Materials	WIC, Contractors	6 months	
Central Operations Preparation	WIC, DII, Contractors	3 months	
User Acceptance Testing	WIC, QA Contractor	3 months	
MIS Pilot Operations		4 months	Start 5/30/2015
Training (Central Office- IT)	WIC, Contractors	2 weeks	9/30/2015
Training (Pilot Clinic and State)	WIC, Contractors	2 weeks	
System Pilot Test- 3 Month	WIC, Contractors	3 months	
Pilot Evaluation and System Modification/ Retesting	WIC, Contractors	1 month	
MIS Statewide Rollout		6 months	Start 9/30/2015
Equipment Procurement (Statewide)	WIC, AHS, Contractors	2 months	3/30/2016
Statewide Training	WIC, Contractors	2 weeks	
System Rollout	WIC, DII, AHS, Contractors	3 months	
System Documentation	Contractors	6 months	
MIS Maintenance		12 months	Start 3/30/2016
Initial 1 Year Warranty	Contractors	12 months	3/30/17
Total MIS Project			42 months

9 Schedule of EBT Development Activities, Milestones, and Deliverables

9.1 Overview

This section defines the anticipated schedule of activities, milestones and deliverables to be followed by EBT Implementation Contractor, including system maintenance after rollout is complete. Potential contractors will be required to confirm their intent to comply with this schedule, accommodate fellow contractors' schedules and propose any necessary modifications, as part of their response to the EBT RFP.

Vermont will require strict compliance with the approved schedule from the EBT Service Contractor. Failure to meet the approved schedule may result in withholding payments or other penalties (such as instituting liquidated damages), as determined to be in the best interest of the State.

Phase	High Level Task
Planning	<ul style="list-style-type: none"> • Procurement Documentation and Contracting • Project Initiation • Final Work Plan • Modification and Testing Plan Documents • Project Management Plan • Retail and Clinic Enablement Plans
Design	<ul style="list-style-type: none"> • System Design Requirements • System Specification Documents • Business Process Review/ Policy Adjustment • Project Plans
Development	<ul style="list-style-type: none"> • System Modification, Technical Testing, and Revisions • Site Readiness Checklists • Equipment Procurement (Pilot) • Operational Planning, Documentation, and Training Materials • Retail Certifications • User Acceptance Testing
Pilot Operations	<ul style="list-style-type: none"> • Training (Central Office- DII) • Training (Pilot Clinics and State) • System Pilot Test- 3 Month • Pilot Evaluation and System Modification/ Retesting

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Statewide Rollout	<ul style="list-style-type: none"> • Equipment Procurement (Statewide) • Statewide Training • System Rollout • System Documentation
Maintenance	<ul style="list-style-type: none"> • System Services

9.2 Project Tasks, Subtasks and Deliverables

Potential EBT Implementation Contractors will be required to provide detailed descriptions of all planned activities and timeframes related to these project phases, as part of their response to the EBT RFP. In addition to a detailed narrative about each proposed task and activity, potential contractors will include in their proposals a schedule of proposed work, including Gantt charts illustrating project milestones and dates or timeframes for contract deliverables.

The phases are broken down in the following high-level tasks and subtasks. Each Phase and Task is a constant for all Contractors, with sub-tasks being tailored for a particular Contractor's responsibilities.

The EBT project will consist of the following phases that include tasks, subtasks and deliverables.

VT Timeline	EBT Tasks	EBT Deliverable
Phase: Planning	Task 1 Project Initiation and Management	
	<i>Subtask 1.1</i> <i>Project Initiation</i>	<i>Written Deliverable 1</i> <i>Provide Written Comments on Project Initiation Meeting</i>
	<i>Subtask 1.2</i> <i>Draft System Modification installation and Testing Plan</i>	<i>Written Deliverable 2</i> <i>System Modification installation and Testing Plan</i>
	<i>Subtask 1.3</i> <i>Draft Project Work Plan</i>	<i>Written Deliverable 3</i> <i>Project Work Plan</i>
	<i>Subtask 1.4</i> <i>Attend Bi-weekly Status Calls</i>	<i>Written Deliverable 4</i> <i>EBT Status Reports</i>
Phase: Design	Task 2 System Design Confirmation and Change Requirements	
	<i>Subtask 2.1</i> <i>Requirements Validation and Change Requirement Sessions</i>	<i>Written Deliverable 5</i> <i>Requirements Validation Meeting documentation</i>

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

	<i>Subtask 2.2 Create Functional Design Document (DFDD)</i>	<i>Written Deliverable 6 Functional Design Document</i>
	<i>Subtask 2.3 Create Interface Specification Document</i>	<i>Written Deliverable 7 EBT-MIS Interface Specification Document</i>
	<i>Subtask 2.4 Create Hardware, Training, Security, Help Desk Support, Telecommunications, and Disaster Recovery Plans Review of MIS Data Conversion Plan</i>	<i>Written Deliverable 8 Hardware Plan Written Deliverable 9 Review of Data Conversion Plan Written Deliverable 10 Training Plan Written Deliverable 11 Updated Security Plan Written Deliverable 12 Help Desk Plan Written Deliverable 13 Telecommunications Plan Written Deliverable 14 Disaster Recovery Plan Written Deliverable 15 System installation Initiation Memorandum</i>
Phase: Development	TASK 3 System Modification and Testing	
	<i>Subtask 3.1 Retailer and Clinic Enablement Subtask 3.2 Retailer / TPP Certification testing</i>	<i>Written Deliverable 16 Integrated Retailer Interface Specification Document Written Deliverable 17</i>

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

	<p><i>Subtask 3.3</i> <i>Card Design</i></p>	<p><i>Retailer Enablement and Certification Plan</i></p> <p><i>Written Deliverable 18</i> <i>Clinic Enablement Plan</i></p> <p><i>Written Deliverable 19</i> <i>Clinic Enablement Acceptance Report</i></p> <p><i>Written Deliverable 20</i> <i>Integrated Retailer Certification Test Scripts</i></p> <p><i>Written Deliverable 21</i> <i>Retailer Acceptance Report</i></p> <p><i>Written Deliverable 22</i> <i>Card Design</i></p>
	<p><i>Subtask 3.4</i> <i>Monitor System Modification, Technical Testing, and Revision</i></p>	
	<p><i>Subtask 3.5</i> <i>System Implementation/ Unit Testing</i></p> <p><i>Subtask 3.6</i> <i>Unit and Interface Testing</i></p> <p><i>Subtask 3.7</i> <i>Performance and Network Capacity/Scalability Testing</i></p> <p><i>Subtask 3.8</i> <i>Automated Response Unit (ARU) Testing</i></p> <p><i>Subtask 3.9</i> <i>Retailer / TPP Certification testing</i></p>	<p><i>Written Deliverable 23</i> <i>Implementation Plan</i></p> <p><i>Written Deliverable 24</i> <i>Certification of readiness for UAT</i></p>
	<p><i>Subtask 3.10</i> <i>Operational Planning, Documentation, Training and Retailer and Clinic Enablement</i></p>	<p><i>Written Deliverable 25</i> <i>User Training Materials</i></p> <p><i>Written Deliverable 26</i></p>

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

		<i>User and Operations Manuals</i>
Phase: Development	TASK 4 User Acceptance Test (UAT)	
	<i>Subtask 4.1 Monitor Central Operation and Test Bed Site Preparation</i>	<i>Written Deliverable 27 Readiness Certification for System Software</i>
	<i>Subtask 4.2 Support UAT and System Revision</i>	<i>Written Deliverable 28 UAT Testing Report</i> <i>Written Deliverable 29 Assessment and Certification of System Readiness for Pilot Implementation</i>
Phase: Pilot Operations	Task 5 Pilot	
	<i>Subtask 5.1 Help Desk Services</i>	<i>Written Deliverable 30 Updated Help Desk Services Plan</i>
	<i>Subtask 5.2 System Pilot Initiation Meeting</i>	<i>Written Deliverable 31 System Pilot Initiation Memorandum</i>
	<i>Subtask 5.3 Pilot Agency (State Office and Clinic) Training and Preparation</i>	<i>Written Deliverable 32 Trained Pilot Agency Certification</i>
	<i>Subtask 5.4 Monitor System Pilot</i>	<i>Written Deliverable 33 On-Going Pilot Issue Log</i>
	<i>Subtask 5.5 Modify, Retest System and Evaluate Pilot</i>	<i>Written Deliverable 34 Regression Acceptance Test</i> <i>Written Deliverable 35 System Pilot Technical Memorandum of Certification for Rollout</i> <i>Written Deliverable 36 Source Code</i>
Phase: Rollout	TASK 6 Rollout	
	<i>Subtask 6.1 System Rollout Initiation Meeting</i>	<i>Written Deliverable 37 System Rollout Initiation Memorandum</i>
	<i>Subtask 6.2 Monitor System Operations, Help Desk and Hardware Support and Retailer</i>	

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

	<i>training</i>	
	<i>Subtask 6.3 Post Implementation Problem Resolution and Checkpoints</i>	<i>Written Deliverable 38 Post-Implementation Assessment and Problem Resolution Memorandum</i>
	<i>Subtask 6.4 System Documentation Update</i>	<i>Written Deliverable 39 Updated System Documentation Written Deliverable 40 Settlement and Reconciliation Manual</i>
Phase: Maintenance	TASK 7 Operation and Maintenance	
	<i>Subtask 7.1 System Operation and Maintenance</i>	<i>Written Deliverable 41 Monthly Status Reports Written Deliverable 42 Continuation of Business Plan</i>
	<i>Subtask 7.2 System Defects, Errors and Bug Fixes</i>	<i>Written Deliverable 43 Documentation of Reported System Issues and Resolutions</i>
	<i>Subtask 7.3 System Modification and Repairs</i>	<i>Written Deliverable 44 Updated Operations Manual Written Deliverable 45 Settlement and Reconciliation Manual</i>
Phase: Maintenance	TASK 8 Project Closure	
	<i>Subtask 8.1 Contract Closure</i>	<i>Written Deliverable 46 Contract Transition to Services Plan</i>

9.2.1 **Planning**

Planning activities relate to the development and release of procurement documents, evaluation of proposals from potential EBT Implementation Contractors, and contracting with a qualified EBT Implementation Contractor. This phase includes the award of the contract to an EBT Implementation Contractor, and successful completion of the Vermont's DII required Independent Review of the capabilities of the selected contractor. Per Vermont statute, all information technology contracts with a value of \$500,000 or more must undergo an independent review by an uninvolved party who is engaged by the State Chief Information Officer to review the decision of the contracting agency in its selection of a particular information technology proposal. The cost of the independent review is borne by the State Sponsor Agency. This review includes the following elements:

- (1) an acquisition cost assessment;

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- (2) a technology architecture review;
- (3) an implementation plan assessment;
- (4) a cost analysis and a model for benefit analysis; and
- (5) a procurement negotiation advisory services contract.

The Independent Reviewer (IR) is charged with identifying possible risks in the contractor proposal, and working with the sponsor agency and the proposed contractor to incorporate effective risk mitigation strategies into the final proposal and agreement. Once the IR, sponsoring agency, and contractor are in agreement, the IR submits the final report, including the action taken to mitigate risks, to the state Chief Information Officer for sign-off.

If risks related to contractor capability or proposal cannot be sufficiently mitigated by additional strategies, and there is a valid and suitable proposal from a contractor who was the second choice from the review process, then Vermont WIC has the option of selecting that contractor (who would then be subject to the External Review process prior to contracting.)

If, however, the finding of unsuitability is due to a defect in the RFP and/or the RFP process itself, then the RFP must be reissued. The WIC Planning team has minimized the risk of RFP defect by including the WIC Program, VDH Legal, AHS IT and DII IT in development of RFPs. Vermont WIC is including numerous subject area experts, legal and other advisors in the RFP drafting and development process, to structure the RFP so that bidders will be required to fully document and demonstrate their capabilities and proposals in their responses. Furthermore, WIC will include the same types of experts and advisors in the RFP response review process to provide as much rigor as possible to the review of contractor capability and technology proposal.

9.2.1.1 Project Initiation

- The project initiation subtask allows contractors to meet with the State of Vermont stakeholders and fellow project contractors to set the foundation for the project, confirm expectations for project deliverables and define procedures for the operation of the project. Project Initiation marks the commencement of Bi-weekly Status meetings.
- Determine the critical success factors to successfully complete the project, review all project deliverables and confirm initial project scope.
- Finalize Implementation Team role assignments and responsibilities, resource requirements; discuss and confirm project implementation strategy (conversion, configuration, reporting, testing, training, change management).
- Build initial project work plan/schedule with preliminary dates for key project milestones and estimated resource requirements.
- Identify initial project risk factors and develop risk management plan.
- Develop communication plan and schedule for Implementation Team meetings.
- Define project status reporting requirements, processes and schedule.

The status report will contain items such as:

- the current status of the project's technical progress and contractual obligations,
- achievements to date,
- risk management activities,

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- unresolved issues,
- requirements to resolve unresolved issues,
- action items,
- problems,
- installation and maintenance results,
- significant changes to Contractor's organization or method of operation, to the project management team, or to the deliverable schedule where applicable.

The State PM and the Contractor PMs will reach agreement on the exact format of the report document at or before the project kickoff meeting.

9.2.1.2 Final Work Plan and Schedule

The EBT Implementation Contractor will deliver a final EBT work plan, including Gantt charts and a project calendar prepared using a version of Microsoft Project compatible with Vermont's . The MIS work plan will reflect any changes from the plan submitted with the contractor's proposal that were discussed and agreed to during the project initiation meeting. The work plan will be maintained throughout the life of the project and updated as necessary by the contractor to reflect the accurate status of the project and as tasks are completed. All changes to the EBT work plan will be reported to the State PM who will be responsible for the Project's Master work plan.

- Develop and publish the EBT project management plan that will establish and communicate the overall project organization and governance, project management control processes and serve as the guiding document for managing the project.
- Develop and publish a comprehensive EBT work plan and schedule
- Develop and publish the EBT Modification plan
- Develop and publish the EBT Testing Plan
- The State will provide Contractors with copies of standard templates for all required documentation or Contractor will use templates/forms that are mutually agreed upon between the State and Contractor.
- Create Bi-weekly Status Reports

9.2.1.3 Implementation and Change Management Plans

The EBT Implementation Contractor will deliver written plans to describe, in detail, specific activities for the EBT implementation. The plans will detail the EBT Implementation Contractor's approach to system implementation (including the implementation of a pilot), and change management (including system modifications and configuration management). The plans will include detailed tasks with task descriptions, identification of responsibilities, and timeframes.

Once the contract has been signed, if there are any changes to the scope of work, a change order must be processed and signed off by the State Implementation Team before any additional work is authorized. The State and the selected Contractor will work together to outline a change control process which will be used to manage changes to the scope of work being performed. A management reserve or contingency will be built into the original contract to accommodate unexpected changes in project scope or deliverables.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

9.2.2 **Design Activities**

Design activities set the foundation for the system interfaces, modification and configuration requirements. The EBT Implementation contractor will conduct Requirements Validation Sessions to review System Design and produce detailed design documentation. The sessions will include:

- Review and approval of System Design, including MIS/EBT Interface and messaging
- Validation of System Requirements
- Development and publishing of an updated Detailed Functional Design Document (DFDD)
- Development and publishing of an updated Detailed Technical Specifications Document (DTSD)

9.2.2.1 **Requirements Validation Sessions**

Validation sessions will be conducted with Vermont WIC subject matter experts, State PM, WIC director, QA Contractor, EBT Contractor and T&I Contractor to review and validate the design and functionality of the new system to ensure that the system functions are acceptable and configured to the State's needs and to determine and document any necessary modifications. Because the State is anticipating minimal changes to the system, configurations are expected to be limited to business rules choices or tables, and changes caused by the interface with MPSC. The State Planning team will have undertaken a Fit Gap analysis during the Project Initiation step, to clarify and refine Vermont's requirements.

9.2.2.2 **System Requirements Documentation**

The EBT Implementation Contractor will deliver comprehensive Final System Requirements Documentation. The EBT Implementation Contractor will deliver an Updated Detailed Functional Design Document (DFDD). This document provides a descriptive overview of the system design requirements. The Functional Design Document must describe the operating environment, processes, workflow, and services requirements. An Updated Detailed Technical Specifications Document (DTSD) will also be developed. An Interface specification document will be created using the documentation that already exists for the EBT system as a base; this document will be updated with any identified changes that are necessary to meet Vermont's requirements and environment. The EBT Implementation Contractor will develop an EBT – MIS Interface Specification Document This document will define and document the messages and files that are exchanged between the EBT system and the MPSC WIC management information system. It is Vermont's intent to follow the most current version of the FNS Universal EBT-MIS Interface Specification at the time of development.

The Hardware, Training, Security, Help Desk Support, Telecommunications, and Disaster Recovery Plans will be created and a System Transfer Initiation Memorandum will be presented for approval. The Contractor will review the MIS Hardware plan submitted and augment the plan with EBT specific hardware requirements. The EBT Implementation Contractor will prepare and submit a Comprehensive Training Plan that identifies the proposed deadlines and supportive tasks for the planning, design, development, production, and distribution of all training materials as well as the activities for training trainers from the Vermont and retailers receiving state provided stand-beside POS equipment. The Security plan will detail at a minimum:

1. Security of data exchange and interface between the MPSC and EBT systems
2. Encryption of PINs and secure maintenance of PIN data
3. Secure access to EBT data:

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Via the MIS interface
 - Via the EBT Implementation Contractor's web administrative system
 - For retailers and cardholders through a web portal
 - For cardholders through an automated voice response system
4. System access roles
 5. EBT Implementation Contractor security of State Agency data
 6. Security related to transaction processing and settlement to retailers or other third party networks

The EBT Contractor must provide a Help Desk plan, which includes the Help Desk staff training approach and methodology to ensure that the Help Desk is adequately trained and staffed to support implementation activities. The deliverable must include a training plan and materials for Help Desk staff, a schedule for implementation of the Help Desk coordinated with system transfer and modification activities, and instructions for establishing a database of problems and solutions. The plan must describe coordination procedures between the DII Help Desk, if necessary, the EBT Contractor's Help Desk, and Vermont Operations Unit staff and a method for resolving customer service complaints about Help Desk services. This will ensure that problems are routed to the contractor(s) in a timely manner when appropriate

The Telecommunications Plan must describe how telecommunications sufficient for system operations will be provided for all types of sites. The Plan will detail minimum telecommunications capacity for small, medium and large clinic types and the state agency as well as the central processor. The Plan must specify type and number of required lines for each installation type. The telecommunications specified must address both on-line and off-line sites. The telecommunications specified must be sufficient to ensure that system response time requirements are met.

The EBT Contractor must provide a plan for data backup and recovery to ensure that the system can continue to operate in the event of an unexpected destruction of hardware or software, through system failure or natural disasters. The plan must address all areas such as arrangements for backup hardware or processing sites; off-site data storage; schedule for creation of backup media; and detailed recovery procedures for all anticipated types of disasters.

9.2.3 **Development Activities**

Based on the accepted design documents, the EBT Implementation Contractor will make any modifications to their existing EBT system and implement the EBT system to interface with the MPSC system. As part of Service Development and Implementation, the EBT Implementation Contractor will make modifications as necessary to the EBT system to meet the requirements of Vermont and to interface with the MPSC system. The EBT Implementation Contractor will develop the support infrastructure for EBT including but not limited to communications, EBT card design, and ARU/CSR capabilities.

9.2.3.1 **System Modification Initiation**

The EBT Implementation Contractor will attend an onsite meeting to review the plans, schedules, and deliverables for the modification, testing, and implementation phases of the EBT Implementation project. State PM and key Vermont WIC, QA Contractor, EBT Contractor and MIS T&I Contractor staff will participate.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

After the meeting, the State PM will deliver a technical memorandum documenting all agreements, understandings, and contingencies arising from the System Modification Initiation Meeting. The EBT Implementation Contractor will sign off to indicate agreement with the documentation.

9.2.3.2 System Modification, Technical Systems Testing, and Revisions

It is anticipated that throughout the project lifecycle, test environments will be required to support multiple users, often concurrently. This might include the MPSC T&I Contractor validation of EBT functionality and interface, one or more retailers or third party system certifications, and VDH validation and acceptance testing. The EBT Implementation Contractor will follow a structured system development life cycle methodology to develop enhancements for the transfer system, which will include regression testing, in addition to the UAT, which is described in [Section 9.2.3.9](#): includes the following types of test activities:

Test Type	Description
Baseline Test	Prior to any system modifications, the system will require a baseline test to ensure that the EBT system operates correctly in the Vermont environment
Unit/Interface Test	This test is used to validate that an individual module or script functions correctly. It validates the module's logic and adherence to functional requirements and technical specifications. Each unit/interface test will execute every source statement and each conditional branch in the module. Test results are recorded for that module.
Subsystem Integration Test	This test examines subsystems that are made up of integrated groupings of software modules. Subsystem integration testing should be conducted in the development environment. It is the first level of testing where problem reports are generated, classified by severity, and the resolution monitored and reported. Subsystem integration testing may need to be run several times for each subsystem, and is only complete when it can be run with zero errors.
System Test	This test tests the entire system once modification and testing of all system modules and subsystems have been completed. It determines whether the system complies with standards and satisfies functional, technical, and operational requirements. The goal of testing is to confirm that both individual system modules and the entire system perform in accordance with the functional requirements and technical specifications. During this test period, system documents and training manuals may also be tested for accuracy, validity, completeness, and usability. The software performance, response time, and ability of the system to operate under stressed conditions are tested. In addition, the external system interfaces are tested. All findings will be documented in a system qualification test analysis report prepared by the EBT Implementation Contractor and submitted to Vermont. Like the subsystem integration test, this test may need to be run several times and is only complete when it runs according to the pre-determined performance criteria established by the Implementation Team and EBT Implementation Contractor.
Regression Testing	Full regression testing will retest a system component, such as a unit, module, or subsystem, following any modification to verify that the problem was corrected without adverse side effects and to ensure the component still complies with its requirements. Regression testing also refers to rerunning the entire system

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

	qualification test after errors have been corrected to ensure that unanticipated errors have not been introduced elsewhere in the system by the error correction activity.
Readiness Certification	Once the EBT Implementation Contractor is satisfied that the system meets the functional requirements and technical specifications, the contractor will provide the Vermont WIC Program with a written certification that the system is ready for UAT. This certification will not be delivered until the system has passed all tests and there are no known errors.
Periodic Status Reports	During this subtask, the EBT Implementation Contractor will submit bi-weekly reports to the State PM and the WIC Implementation Team. The purpose of these reports is to measure overall progress and status of the EBT Implementation activities.

The EBT Implementation Contractor and retailers in Vermont will follow the most current version of the WIC EBT Operating Rules and Technical Implementation Guidance (TIG) developed and published by FNS. At the end of Development and Implementation activities, it is anticipated that the EBT Implementation Contractor will have an EBT system that is ready for testing activities concurrent with MPSC testing.

9.2.3.3 Develop and Review Site Readiness Checklists and Provide Recommendations

The EBT Implementation Contractor will provide a list of the technical requirements for operation of the software and hardware in the State Office and in District Offices. From this list, the State Team will develop detailed checklists to be completed by each District Office (to include all clinic locations) to determine the readiness of each site for implementation of the new system. The checklists will capture data to evaluate relevant aspects of each existing site, such as clinic layout, electrical service, DII network capability, and the ability to keep equipment and card stock secure. The Vermont State WIC Office and/or DII staff will work with the District Offices to complete the checklists. The State Team staff will review each of the checklists, create a technical memorandum identifying any areas of concern related to the implementation of the system in any site, and create a plan for mitigating the concern.

9.2.3.4 Central Operation Site Preparation for User Acceptance Testing

After the MIS system is installed on the State's servers, the EBT Implementation Contractor will test the software and ensure remote sites are properly configured for the UAT. For a viable UAT, the computers in the test environment must be connected to the actual host server that will be used for production.

The EBT Implementation Contractor will provide "Train the Trainer" training to Vermont WIC staff and the QA Contractor, and the EBT Implementation Contractor will provide on-site assistance for the central operation during the UAT. The EBT Implementation Contractor will also review and provide comments on the State's security assessment and disaster recovery procedures.

9.2.3.5 Clinic Enablement

In order to initiate pilot and each phase of the rollout, clinics must be ready to support EBT. The EBT Implementation Contractor will ensure telecommunications are established. The EBT

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Implementation Contractor will support testing to ensure that transactions originating from the clinic sites are being properly received in the EBT production environment and responses are properly received by the clinic user. The EBT Implementation Contractor will support testing to ensure that PIN encryption in the production environment is working properly. Additionally, the EBT Implementation Contractor will ensure that the process for card delivery to clinic sites meets all service level requirements.

The EBT Implementation Contractor will develop a Clinic Enablement Plan, which describes the methods for ensuring WIC clinics are enabled to issue and manage the Vermont EBT card. The plan will describe the activities, schedule and staff proposed for clinic enablement.

Following the completion of clinic enablement activities, the EBT Implementation Contractor will provide a summary of the enablement outcomes for final acceptance by Vermont.

9.2.3.6 Retailer Enablement

The EBT Implementation Contractor will support Vermont in promoting integration among WIC authorized retailers. In addition, the EBT Implementation Contractor will support the retailers in their POS development efforts by participating in design discussions (this is typically done separately with each retailer and their TPP) and providing technical assistance while the retailers are developing and testing their systems. In supporting integration efforts, the EBT Implementation Contractor will develop an Integrated Retailer Interface Specification Document that addresses the Vermont EBT environment as well as message and file sets. This document will be made available to any retailer or TPP interested in integration of EBT into their systems. The EBT Implementation Contractor will participate in conference calls and meetings with individual retailers or retailer groups as needed. For any retailers requiring stand-beside POS devices, the EBT Implementation Contractor will execute equipment agreements, install stand-beside POS devices, and train stores on POS device use.

The Retailer Enablement and Certification Plan must address the following at a minimum:

1. Retailer integration promotion activities;
2. Retailer and acquirer/TPP agreements;
3. Processes and standards for integrated retailer certification;
4. Processes and standards for Acquirer/TPP certification;
5. Type of POS equipment to be deployed, if required;
6. Plans for onsite deployment and equipment testing; and
7. Description of support services/customer service to be provided to all retailers

9.2.3.7 Integrated Retailer Certification

The EBT Implementation Contractor will develop Integrated Retailer Certification Test Scripts. The scripts will address all functions, technical requirements and business rules defined in the Integrated Retailer Interface Specifications Document as well as those defined by FNS. The scripts will also define set up requirements for accounts, benefits, cards and retailers as well as any special conditions such as time sensitive scenarios. Once approved by Vermont, this document is required to be reviewed and approved by FNS. The FNS review period is a maximum of 60 calendar days.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Following the completion of retailer enablement activities, the EBT Implementation Contractor will provide a summary of the enablement outcomes for final acceptance by Vermont.

The EBT Implementation Contractor will make available on demand a test environment, telecommunications, and support resources to allow testing and certifications for retailers and third parties that will be participating in the Vermont EBT program. Such facilities and capabilities will be required throughout the life of the project.

9.2.3.8 Implementation Plan

The EBT Implementation Contractor will develop an Implementation Plan. This document will detail how the EBT Implementation Contractor will implement the EBT system in Vermont starting with pilot and continuing on through each phase of statewide rollout. The plan will describe retailer, clinic and EBT system readiness activities, such as training and equipment deployment that must be completed as part of the implementation. Because the EBT implementation is a coordinated effort with the implementation of the MPSC system, the plan will address dependent tasks between the two efforts. The plan will provide timeframes, a schedule of activities, assumptions, and resources that will support rollout and implementation activities.

9.2.3.9 Support User Acceptance Testing and System Revision

The EBT Implementation Contractor and DII will create Development, Test, and Production environments for use during the EBT Implementation project.

The system will be ready for UAT only after authorization from FNS to proceed is received and the EBT Implementation Contractor has performed thorough system unit and module testing, tested all revisions to the functionality, provided User Training Materials, User and Operations Manuals and submitted a Certification of Readiness for UAT. Pre-determined performance criteria required for UAT Certification of Readiness will be determined by the QA contractor and Vermont Implementation Team and agreed upon by the EBT Implementation Contractor prior to initiating the UAT task. UAT performance criteria established for testing will form a foundation for the go/no go decision factors that will be used to determine whether or not the system proceeds from UAT to pilot. The Vermont Implementation Team and the QA contractor will review the system performance against the pre-determined performance criteria, the schedule, the logistical factors, the readiness assessment, and possibly other factors that will lead into the go/no go decision to move forward. Vermont's go/ no go decision points are the same as FNS determined decision points as specified in the 901 handbook and will be established and reviewed at each critical phase

The system must also meet the State's defined system performance measures, defined by DII, to be considered ready for UAT.

The EBT Implementation Contractor is responsible for generating the test data and test scenarios to be used for systems testing. The test scripts will cover all facets of the system's operations and test all of the system processing options and environmental conditions (e.g., POS hardware and communications failure and entry of erroneous data) and must test both positive and negative results. Scripts will address each function of the system as defined in the Functional Design Document. The scripts will also define set up requirements for accounts, benefits, cards and retailers as well as any special conditions such as time sensitive scenarios. The tests will include multiple days of transaction processing, settlement, reconciliation and reporting. Each test scenario will cross-reference the functions defined in the Functional Design Document to identify which function is being tested in the scenario. The test script document will also provide as an appendix a listing of each system function and identify in which scenario(s) it is being tested. The

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Implementation Team and QA contractor will develop test scenarios to be used during UAT. If possible, the Vermont team will modify preexisting test scripts as necessary to reflect the updated EBT functionality that meets Vermont's requirements and may develop additional scripts beyond these existing scripts.

The QA Contractor will have primary responsibility for managing and operating the UAT, and will be responsible for ensuring that UAT participants (State and local WIC staff) have the training, access, and testing tools (such as scripts and data) needed to perform the test. The QA Contractor will provide metrics related to the success of the UAT and will provide results regularly throughout the UAT process. Vermont's Implementation team will use these metrics to assess performance of the UAT.

Prior to beginning the UAT, the EBT Implementation Contractor will perform a key function system walkthrough for the QA Contractor, State WIC Director, State PM, DII staff, and other WIC Program staff as appropriate. In this demonstration, the system must perform the following functions according to the pre-determined performance criteria:

- System security and user access
- Deliver appropriate messages to the MIS System;
- System audits and controls
- Transaction processing, including switched, online, and manual
- EBT system functions and operations
- Card issuance and card replacement
- PIN selection process Card activation process
- Retailer settlement
- End –to-end system reconciliation/balancing
- End-of-day processing
- Interface management
- Funds settlement
- Daily, monthly, and ad hoc reporting
- Transaction adjustments
- Dispute tracking and resolution

If there are any functional errors or major usability errors other than aesthetic interface defects during the demonstration, then the UAT will not proceed.

Assuming the key function walkthrough is complete and achieves the pre-determined performance criteria, the system will become available to Vermont for UAT. The QA Contractor will provide training on the proper procedures to be followed to perform the UAT, including how to run scripts and report bugs or issues. The EBT Implementation Contractor will be available on-site and their development staff will be available for consultation and problem resolution during the entire test.

It is assumed that the UAT can be completed in two rounds—one to uncover any errors and a second to verify that any errors identified have been fixed and that no new errors have been introduced. This requires that the EBT Implementation Contractor not only fix the errors identified in round one, but also run the resulting system through their systems regression testing prior to

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

delivering it for the second round of UAT. The period of UAT is expected to be twelve weeks in duration, providing the above assumptions are satisfied. The EBT Implementation Contractor will make all required corrections and revisions to the system resulting from the acceptance testing process. System regression testing will be conducted as required until the system is accepted. If the UAT exhibits any failures, the system will be returned to the MIS T&I Contractor for revisions.

During UAT, the user manuals and online help will also be evaluated. The UAT procedures will instruct the testers to reference the user manuals or online help for directions regarding how to perform the required actions. Any inadequacies in the manuals must be corrected prior to final acceptance of those documents by the State.

The EBT Implementation Contractor will be required to provide reports describing the results of each test that is performed, as well as any additional retesting that is required to satisfy the test objectives. The test reports will describe the scope, expected results from the tests, actual results from the tests, and any system modifications that are identified as necessary to resolve system errors and deficiencies found during the testing.

The EBT Contractor must provide formal, written certification of system readiness for UAT. The certification must include detailed information on all errors identified during system testing and error resolutions. The certification must verify that the EBT Contractor staff is able to conduct full system testing from start to finish with no identified outstanding errors. After successful completion of the acceptance test, the QA Contractor will provide a formal assessment of the system's readiness for pilot implementation.

9.2.3.10 Operational Planning, Documentation, Training Materials

The EBT Implementation Contractor will deliver all reports and other written deliverables to the QA Contractor and the State PM. Other planning tasks and non-written deliverables will be performed under the direction of the QA Contractor and the WIC Program and State PMs.

Written deliverables will be submitted electronically in draft form for review by Vermont staff and the QA contractor (as appropriate). Final products will be submitted after receipt of Vermont's comments and in appropriate quantities and format⁵ for implementation and system operation purposes.

The EBT Implementation Contractor must design, develop, and submit the following materials:

- **Cardholder Training Pamphlet:** Provides information on how to use and properly care for the EBT card. Materials will be provided in English and Spanish.
- **Cardholder Training Automated Response Unit (ARU) script:** Documents complete script, process flows and decision points for calls made to the ARU.
- **Retailer POS User's Manual:** Provides a systematic description of how to perform EBT transactions on the stand-beside POS device. Also documents how to access reports and perform daily reconciliation. Includes information related to troubleshooting and problem resolution. Materials will be provided in English and Spanish.

⁵ Some documents, such as training manuals, may be required in hard copy format. Deliverable submission requirements will be detailed in the RFP.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- **Retailer Tips Card:** A quick reference card providing information on common functions performed on the stand-beside POS terminal.
- **EBT Train-the-Trainer Manual:** A manual that will be used by Vermont trainers for training clinic staff. It will detail information about the EBT system and its functionality that will be conveyed as part of clinic staff training as well as information on how to train clients to use their new EBT card.
- **Vermont WIC State Agency Staff EBT Manual:** A manual detailing the functionality of the EBT system that State Agency users will access external to the MPSC system. The manual will be broken down by functional area and will include hands-on example of system tasks for each training area.

9.2.3.11 System Pilot Initiation Memorandum

Upon completion of UAT, the EBT Contractor must provide formal, written assessment and certification of system readiness for Pilot Implementation. The certification must include detailed information on all errors identified during UAT and error resolution (this may be provided by automated reporting capabilities of the error tracking application employed). The certification must verify that the EBT Contractor certifies error free operation of the system and stability sufficient to be implemented in pilot installations. The pilot will proceed only with authorization from FNS.

9.2.4 Pilot Operations

The pilot will be the final test of the system and EBT operations in production. During this phase, the Vermont will learn from the experience of the pilot clinic and retailers and determine if there is a need to make any modifications to the implementation approach. The evaluation will be completed by the QA contractor with support from the EBT Implementation Contractor, T&I contractor and Vermont. The EBT Implementation Contractor will be required to provide onsite support for the first week of the pilot to allow for immediate troubleshooting and then continued support remotely during the remainder of the pilot and rollout activities. The EBT Implementation Contractor will also support this effort by providing transaction and other system data through standard and ad hoc reports as needed.

The QA Contractor will confirm certification of the system's readiness.

9.2.4.1 Help Desk Services

The entire range of EBT Help Desk services will be tested during pilot, with revisions made to the Helpdesk Plan, by the EBT Implementation Contractor as necessary. The EBT Contractor must provide an on-going up-to-date issue log to State staff detailing all identified errors, problems and their solutions.

9.2.4.2 Pilot Training

The EBT system will be deployed simultaneously with the MPSC system and training for both systems will occur concurrently. For many stakeholders, EBT will appear as a seamless extension of MPSC and simply the method of benefit issuance. The majority of EBT training for clinic staff will take place as part of the MPSC training; however, the EBT Implementation Contractor will be required to contribute to the development of training to ensure that appropriate information about the EBT system and functionality is included in the curriculum and materials.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

As part of pilot and statewide rollout, a variety of training activities will take place to ensure that system stakeholders are prepared for the conversion to EBT. Training activities will involve the Vermont staff, the EBT Implementation Contractor, and the MPSC T&I Contractor depending on the stakeholder being trained. The EBT Implementation Contractor will support train-the-trainer and retailer training throughout pilot and rollout. The EBT Implementation Contractor will perform the following training activities during pilot and rollout.

The EBT Implementation Contractor will provide training to Vermont Trainers for training State Agency staff in the use of EBT functionality that is accessed through the EBT system. Training will cover the use of all EBT system screens, system reports, daily reconciliation, and any activities required to be completed by the Vermont in support of daily operations, including reconciliation, settlement, dispute research, adjudication and reports.

Following the completion of training activities, the EBT Implementation Contractor will provide a summary of the training outcomes for final acceptance by the Vermont. (See [Section 13](#) for Training Approach.)

9.2.4.3 Modify, Retest System and Evaluate Pilot

The EBT Contractor must provide a technical memorandum describing the pilot results, including all identified errors and problems and their solutions, following the completion of the pilot. The memorandum must include the EBT Contractor's assessment and verification of the system readiness for roll out.

The EBT Implementation Contractor will provide a written certification that all pilot activities have been completed, including successful regression testing and that the EBT system is ready for rollout.

The EBT Contractor must provide the State with any developed system source code and executable code.

9.2.5 Statewide Rollout

After successful completion of the pilot, with authorization from FNS to proceed, the system will be rolled out to the remaining District Offices. The EBT Contractor conducts, supports, and facilitates the data conversion and rollout of the system to the non-pilot District Offices. The EBT Contractor will suggest a data conversion and rollout schedule approved by State staff in the Rollout meeting. The State staff's training of DO staff will be coordinated with the MIS data conversion and rollout. The EBT Contractor must provide a technical memorandum documenting all agreements, understandings and contingencies resulting from the system rollout initiation meeting.

9.2.5.1 Monitor System Operations

The EBT Contractor must, at a minimum, provide the following services:

- Provide on-line access to the functionality in the state agency and clinic application for operations, analysis, and the generation of reports.
- Provide all file maintenance, including backups, archiving of data, and maintenance of database synchronization between system modules on a daily basis. The system will provide a means for allowing distributed database District Offices/clinics to upload to the central processor on a flexible schedule. This will ensure that data not uploaded daily will not be lost.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Assure all data communications between the Central Site Processor, the District Offices and their clinics, and the State office.
- Provide extensive disaster recovery procedures to ensure meeting system availability requirements.
- An interface with the banking contractor will be required to provide for the transmission of issuance and redemption information.
- Provide all system enrollment, reconciliation, expenditures, vendor and other required reports in the media required and according to the agreed upon schedule.
- Provide installation of all hardware necessary to run the central processing site.
- Provide image management, distribution, operations and maintenance of all state-owned hardware for District Office clinics and the State Agency.
- Provide Help Desk support throughout rollout.

9.2.5.2 Post Implementation Problem Resolution and Checkpoints

Any problems encountered during the initial system operation are to be remedied, subject to regression testing, and provided to operational sites as a new system release. If any deficiencies in the system functional requirements, technical operation, or reliability are identified, the EBT Contractor will be required to repair these at no cost to Vermont.

A meeting will be convened directly following rollout to the final District Office, which includes the EBT Contractor, QA Contractor and State staff to assess the status of the system. The Vermont WIC Operations Unit Supervisor will then determine whether the project can proceed to Operation and Maintenance.

The EBT Contractor must provide a technical memorandum documenting all agreements, understandings and contingencies resulting from the system rollout assessment meeting.

9.2.6 Maintenance Activities

During the Operations Phase, the EBT Implementation Contractor will maintain ongoing communications with Vermont. The EBT Implementation Contractor will provide immediate notification to Vermont of any issues or system problems. The EBT Implementation Contractor will assign a point of contact for ongoing communications to Vermont for all EBT system and operational issues.

The ongoing communications required from the EBT Implementation Contractor include a monthly status report containing open and closed issues, monthly status meeting with Vermont, and other reporting and meeting requirements at the Vermont's request. Of particular importance is the advance notification of scheduled system downtime to Vermont by the EBT Implementation Contractor.

Once in production, the EBT Implementation Contractor will manage the following ongoing operations during warranty:

- Maintenance of interfaces and connectivity between the MIS system, the EBT System, financial networks, and financial institutions;
- Management of EBT accounts within the system;

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- Management of account balances with the system and the expungement of expired benefits;
- Management of cards and card statuses within the system;
- Transaction processing;
- Performance of daily settlement and reconciliation;
- Provision of required reports and data files;
- Provision of customer service support to retailers and cardholders;
- Maintenance and support of stand-beside POS devices

9.2.6.1 Deliver Final Documentation

During the Operations Phase, the Contractor will maintain and update all manuals delivered during the Interface Design and Service Development

These manuals include:

- Detailed Design Document;
- Continuation of Business Plan;
- System Security Plan;
- System Operations/Interface Procedures Manual;
- Reports Manual;
- Settlement/Reconciliation Manual
- Administrative Terminal Manual
- The Contractor will provide updated manuals to Vermont prior to implementing system and operational changes into production.

9.2.6.2 Contract Transition Plan

The EBT Implementation Contractor will develop a Contract Transition/System Conversion Plan. The purpose of this document is to detail the activities that will be involved in converting EBT processing and services to a different EBT Services Contractor at the end of the current EBT Implementation Contractor's contract period. The Transition Plan will provide that upon expiration or termination of this Contract or the applicable order for any reason, the EBT Implementation Contractor will return all Content in its possession to Vermont in a format accessible without the use of the EBT Implementation Contractor's Application. This plan will include a description of tasks, activities, and specifically the support and types of resources that will be provided by the EBT Services Contractor selected through this procurement. It will also identify activities that need to be performed by the EBT Services Contractor to which Vermont will be converting as well as those that will be performed by Vermont, retailers, and local agencies/clinics. The State will pay the contractor upon review and approval of the contractor's performance under the terms of this contract.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

9.3 Schedule of Major Milestones and Deliverables

This section provides a listing of milestones and deliverables expected in the EBT project. This section also includes an indicator of primary responsibility and an approximate timeframe for each activity.

The project cycle, from Kickoff to statewide rollout, lasts approximately 42 months. The actual dates depend on the document completion and approval cycle, but the budget was developed with the planning tasks to begin June 1, 2010. The Implementation planning phase is to begin in September of 2013

Note: All dates below are end dates unless otherwise specified

Key Milestones & Deliverables	Responsible Parties	Time period	VT Time EBT
IAPD Approval	FNS, AHS, DII, VDH	6 months	9/30/2012
EBT Contracting Planning		12 months	start 9/30/2012
RFP Release (Writing, approvals, contract)	FNS, WIC, AHS, DII, BGS	12months	3/30/2013
Vendor Proposals	BGS, WIC	2 months	3/30/2013
Contract	BGS, VDH, WIC, AHS, DII, AG	4 months	5/30/2013
EBT Implementation Planning Kick off		4 months	Start 9/30/2013
Project Initiation	WIC, DII Contractors	one day	1/30/2014
Final Work plan	WIC, DII, Contractors	2 months	
System Requirements Document	Contractors	4 months	
Planning Documents	WIC, DII, Contractors	4 months	
Retail/Clinic Enablement Plans	WIC, Contractors	2 month	
EBT Design		4 months	Start 1/30/2014
System Design Requirements	WIC, DII, Contractors	4 months	5/30/2014
System Specification Documents	WIC, DII, Contractors	4 months	
Business Process Review/ Policy Adjustment	WIC, Contractors	4 months	
Project Plans	WIC, DII, Contractors	4 months	
EBT Development		12 months	Start 5/30/2014
Business Process Review/ Policy Adjustment	WIC	4 months	5/30/2015
System Modification,	Contractors	4 months	

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

Key Milestones & Deliverables	Responsible Parties	Time period	VT Time EBT
Technical Testing, and Revisions			
Site Readiness Checklists	WIC, Contractors	1 month	
Equipment Procurement (Pilot)	WIC, AHS, Contractors	2 months	
Operational Planning, Documentation, and Training Materials	WIC, Contractors	6 months	
Central Operations Preparation	WIC, DII, Contractors	3 months	
User Acceptance Testing	WIC, QA Contractor	3 months	
Retail Certifications	WIC, QA, Contractor	12 months	
EBT Pilot Operations		4 months	Start 5/30/2015
Training (Central Office- IT)	WIC, Contractors	2 weeks	9/30/2015
Training (Pilot Clinic and State)	WIC, Contractors	2 weeks	
System Pilot Test- 3 Month	WIC, Contractors	3 months	
Pilot Evaluation and System Modification/ Retesting	WIC, Contractors	1 month	
EBT Statewide Rollout		6 months	Start 9/30/2015
Equipment Procurement (Statewide)	WIC, AHS, Contractors	2 months	3/30/2016
Statewide Training	WIC, Contractors	2 weeks	
System Rollout	WIC, DII, AHS, Contractors	3 months	
System Documentation	Contractors	6 months	
MIS Maintenance		12 months	Start 3/30/2016
Initial 1 Year Warranty	Contractors	12 months	Services contract
Total EBT Project			42 months

10 Proposed Budget and Budget Narrative

This section identifies estimated State and contractor costs associated with the implementation phase for the MIS and EBT system.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

A detailed budget has been provided in Appendix H. The overall project budget has been divided into Planning, Design, Development, Pilot, Statewide Rollout and Operations phases to match the project plan. Monthly costs have been estimated across the life of the project

The estimated total cost of this project, including the first year of operation, is \$3,950,262, with an estimated transfer and implementation cost of \$ 3,381,894 and monthly operating costs after statewide rollout of \$47,366.

For planning purposes, expenditures are not broken out by source of funds. Some state staff costs, which are a significant portion of the transfer & implementation budget, will be charged to Vermont's WIC nutrition services & program management grant and operational adjustment funds designated for the project. Vermont also expects to request specific MIS and/or EBT funding for the project from FNS. We do not anticipate the availability of state funds for the project.

The project budget is summarized in the table below.

Project Total (startup plus first year of operation)			\$ 3,950,262
Start Up Costs		Monthly Operation Costs	
State Costs		State Costs	
Staff	\$ 1,010,092	Staff	\$ 10,808
Travel	\$ 23,400	Travel	\$ 300
Miscellaneous	\$ 21,000	Miscellaneous	\$ 200
		Overhead	\$ 6,485
Infrastructure		Infrastructure	
Processors	\$ 110,000	Hardware & software	\$ 973
Telecommunications	\$ -	Telecommunications	\$ -
Clinic	\$ 192,100	Clinic	\$ -
Contracted		Contracted	
Quality assurance	\$ 400,000	Software support & maintenance	\$ 5,200
Software Design & Implementation	\$ 1,319,000	EBT cost per case month	\$ 23,400
Training	\$ 45,800		
Rollout support	\$ 117,000		
Pilot Evaluation	\$ 45,000		
DII PM Assessment	\$ 98,502		
Start up Totals	\$ 3,381,894	Monthly operating total	\$ 47,366

10.1 Budget Assumptions

The budget was built on the following assumptions:

- Overall project management will be assigned to a state employee
- Quality assurance will be contracted, a single QA contractor will cover both MIS & EBT
- MIS transfer and implementation will be contracted, but the system will be hosted by the state and on-going operations will be a state responsibility

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

- The EBT contractor will be compensated separately for upfront development and implementation costs to reduce the costs rolled into the on-going cost per case month.
- The EBT cost per case month estimate is based on recent estimates by other states for online outsourced EBT.
- There will be no increase in telecommunications costs due to this project, the current telecommunications infrastructure is sufficient to support both the MPSC and online, outsourced EBT.

10.2 Transfer/Implementation Costs

Transfer and implementation costs were estimated based on estimated number of hours to complete tasks included in the project plan. Because Vermont plans to transfer MPSC with very minimal changes and to change business processes to match both MPSC and the chosen EBT contractor's practices, the number of hours assigned to gap analysis, system requirements and documentation are relatively low.

10.3 Hardware and Software

Hardware costs for this project are estimated based on estimates for transfer of similar systems. However, it is possible that DII has enough excess capacity to host the transferred MIS system without additional hardware. This cannot be assessed until the MPSC releases the final architecture of the transfer system. If additional hardware is not necessary, the budget will be adjusted to reflect the reduced costs.

10.4 Telecommunications Costs

All Vermont WIC local agencies are connected to a robust statewide telecommunications network. The network is sufficient to meet the requirements of both the transferred MIS system and on-line EBT. Costs of the network are allocated to all State agencies and programs, and no additional costs are anticipated as a result of this project.

10.5 Site Preparation Costs

The implementation of the system will require some attention concerning facility planning but no large impacts are foreseen. Impacts at current facilities are primarily related to data entry at the point of service, which may require minor realignment of work stations. The Vermont Department of Health has standards for permanent WIC clinic facilities, which include wiring for network access and the installation of a terminal at each workstation in the clinic site. All current permanent sites meet these standards. It is possible that the State will move or remodel one or two permanent sites before this project is implemented. New or remodeled sites will be planned to meet the site standards. Modifications to existing buildings will not be required.

10.6 Quality Assurance

Vermont will use competitive procurement to obtain a single quality assurance contractor for both the MIS and EBT parts of this project. Due to the broad scope of the project and the multiplicity of tasks to be performed by the contractors, we have estimated costs at the high end of the range of recent quality assurance contracts for similar projects.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

10.7 Project Management and Additional Personnel Costs

We are proposing an in-house overall state project manager, using an existing position that will be filled by a certified project manager for the duration of the project. This method offers significant cost savings, as well as the benefits of having an individual who has existing relationships with many of the project stakeholders.

DII requires a set aside line item in every project budget equal to three (3) percent of the total project costs to cover DII costs related to project management and oversight. DII bills the project for actual project management services provided. In this project, the state project manager is assigned many of project management tasks that DII would assume, and we expect DII charges to be well below the three percent budgeted.

10.8 Operating Costs

Current WIC NSA funds will be sufficient to cover on-going operating costs of the combined MSPC transfer and EBT system. The MIS cost analysis showed an annual cost savings of \$532,918, primarily in staff time at the local level. In addition, Vermont is currently spending approximately \$138,000 annually in cost per case month charges and charges from the Vermont SNAP agency for our fruit and vegetable cash value benefit EBT program. These additional payments will be eliminated when full EBT is implemented.

The total annual cost saving from the project is \$670,918, well above the estimated annual operating costs of the new system (\$565,092).

11 Cost Allocation Plan

The transferred WIC Information System and EBT services system will be WIC-dedicated. Because WIC will not be sharing either system with other programs, there is no need to develop and include a cost allocation plan for system modification, transfer, implementation, operation, or maintenance costs.

12 Request for Waiver of Depreciation

The Vermont WIC program requests a waiver of depreciation on applicable items to allow them to be expensed at the time of purchase

13 Training Plan Approach

13.1 Introduction

This training plan approach describes the desired methods and materials for training State Office staff, clinic staff, participants and retailers who will be affected by the new MIS and EBT systems. These stakeholders require training to gain the expertise needed to perform their job duties, access benefits, and perform EBT transactions. The activities laid out in the training approach will guide the development of the Training Plan required in the initiation phase of implementation.

During Implementation, the Vermont state agency training team, composed of state and district office staff, will develop a final training plan using materials initially provided by the T&I Contractor. The training plan will guide the process of developing and conducting training for the

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

new system and will serve as the basis for the development of a detailed training plan by the State Agency in conjunction with the T&I contractor and the EBT Implementation Contractors. The MIS and EBT systems will be deployed simultaneously and training for both systems will occur concurrently. For many stakeholders, EBT will appear as a seamless extension of the MIS; simply the method of benefit issuance. The majority of EBT training for local staff will take place as part of the MIS training; however, the EBT service provider will be required to contribute to the development of training to ensure that appropriate information about the EBT system and functionality is included in the curriculum and materials for local staff. Training for retailers will be designed to support the particular training approach used by retailers themselves; some will use corporate training staff, some will receive training from their third-party processor, and some will receive training from the EBT implementation contractor and/or state agency training team.

13.2 Objectives of Training

The overall goal of training is to ensure that all staff, participants and retailers can effectively use the system. To accomplish this goal, the following objectives specific to WIC MIS and EBT have been established:

- The state and local WIC staff will be trained on MIS and EBT simultaneously; store managers and cashiers must be trained on EBT prior to being authorized to accept the Vermont WIC EBT card.
- The training experience must relate directly to the procedures and activities that are necessary for each function.
- Each trainee must demonstrate the capability of using the system at the completion of training to perform her/his WIC responsibilities.
- The training must be presented in a user friendly and positive manner.
- Training materials will support and enhance the training experience.
- The training must be completed prior to implementation of the new system in the trainee's area.

The remainder of the preliminary training plan presented below is intended to support these objectives.

13.3 The Training Staff

T&I contractor will train State of Vermont IT staff, AHS & DII help desk staff, the state training team, the State Implementation Team, and the UAT team with assistance from the EBT service provider where needed. The T&I contractor will conduct joint training sessions with the state training team for pilot agency staff.

The state training team will train district office staff, and may conduct some participant group training sessions, especially in the pilot agency.

District office staff will train WIC participants.

The EBT service provider and the state vendor management team will conduct retailer training.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

13.4 The Training Audiences

The groups who will need some level of training are:

- IT staff at the department, agency and state level, including help desk staff
- The state agency training team
- Staff who will participate in user acceptance testing
- WIC state agency staff
- WIC district office staff, including supervisory and management staff
- WIC participants
- Authorized retailers

13.5 The Training Methodologies

We will use a variety of training methodologies so that trainees with varied experience, learning styles and roles will be able to choose the method that is best for their own needs.

13.5.1 *Self-Paced e-Learning Modules*

Self-paced, on-demand training modules will be developed for each functional component of the MIS system. Modules will be available for state and local staff, and consideration will be given to whether a separate set of modules may be appropriate for participants. Modules will be available through either the AHS e-learning center, an intranet site or a network shared folder. Modules may be completed individually, or used by a trainer for a group. The e-learning modules will remain available for review and training of new staff after the new system is completely rolled out.

13.5.2 *Classroom Presentations and Discussions*

Classroom presentations by the T&I contractor and the EBT Implementation Contractor will be the primary method of training for IT staff, UAT staff and state agency/training team staff.

The Vermont training team may conduct classroom style training for district office staff and retailers to supplement other training methodologies.

Participants and retailers will be offered group-training sessions using a classroom style presentation.

13.5.3 *Hands-On Experience*

An MIS training environment and a training database will be available to state and local staff for hands-on experience, using structured exercises to guide practice in each function. Because some stores will be using integrated ECR/POS systems, and some stores will be using state-provided stand-beside systems, training for participants will need to address, possibly with hands-on experience, the two different models of purchasing.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

13.5.4 **Written Materials**

Basic training on both systems will be provided in writing for staff and participants. Participant materials will be translated into non-English languages most commonly used in Vermont at the time of implementation. (See list of written material types in [Section 13.8](#))

13.5.5 **Video/DVD**

A video demonstrating correct use of the EBT card in both integrated ECR/POS systems and state-provided stand-beside terminals will be provided for participants and for use by retailers.

13.6 **Training Overview**

13.6.1 **System Operations/IT Staff Training**

The T&I contractor will train the State of Vermont IT staff who will operate the new system after rollout is complete. The training must be of sufficient technical detail to allow trainees to assume responsibility for system operations, including but not limited to database administration, data security, data storage, data warehousing, analytics and reporting, data architecture and design, automated data processing and disaster recovery planning and network capacity and operations

13.6.2 **User Acceptance Test Training**

The User Acceptance Test (UAT) of the MIS and EBT systems will occur concurrently. The T&I contractor will prepare and conduct this training, with participation of EBT Implementation Contractor as necessary.

13.6.3 **Help Desk Staff Training**

The State AHS and DII Help Desk staff will participate in UAT and pilot training as well as support testing in the UAT. The UAT training will provide an initial introduction to the system while the pilot training will reinforce their understanding. Participation in the UAT will provide additional opportunity to become familiar with the system. The period during pilot and statewide rollout will serve as additional “on the job” training under the general supervision of the T&I contractor and support from the EBT service provider. The contractors will serve as a resource to Help Desk staff during this period. At the end of rollout, Help Desk staff will be expected to be fully competent to effectively perform Help Desk responsibilities on their own for the MIS system, the EBT Implementation Contractor will continue to provide ongoing support related to EBT system issues and troubleshooting.

13.6.4 **Train the Trainer Training**

The T&I contractor will provide training sessions for the state agency training team. Trainers will be trained prior to the start of pilot so that they may assist in the pilot agency training and any training of state WIC office staff necessary for pilot. This will provide additional preparation to ensure that staff members are prepared for the start of agency-wide rollout.

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

13.6.5 *Pilot Training*

The T&I contractor will provide training on the MIS for the pilot agency staff. State agency trainers will co-conduct the training sessions to gain hands-on training experience. The T&I contractor will provide feedback and insight into areas for improvement. State staff requiring training on the EBT will be trained by the EBT service provider.

13.6.6 *District Office Staff Training*

The state agency training team will conduct district office staff training. This training will consist of an MIS system overview, including EBT functionality, for all district office WIC staff. The training will provide real-world examples of system tasks for each staff responsibility and program functional area.

13.6.7 *Retailer Training*

Retailer training will be a joint effort between the State Agency and the EBT service provider. There are generally two different aspects of retailer training. One aspect is training for all authorized retailers on changes to policies and procedures and the other is training on new equipment for those retailers using stand-beside POS devices.

Training related to policies and procedures will be provided by the State Agency vendor management staff. The State Agency has already initiated communication with the retail community regarding the EBT project, and has an active retailer advisory workgroup that can be used to obtain feedback on ways to communicate. Vermont-authorized retailers will be required to participate in training on Vermont's allowed product list and policies and procedures related to WIC benefit redemption as well as the EBT system, since retailers currently redeem only the WIC fruit and vegetable cash value benefit.

Training on new equipment for retailers using stand-beside equipment will be performed by the EBT service provider as part of the deployment process. All users of the stand-beside device will receive a training manual from the EBT service provider that provides step by step instructions on the use of the equipment. They will also have access to a retailer help line to receive assistance for the device at any time.

Retailers who are able integrate EBT into their cash register systems will be responsible for training their own staff on the use of their equipment.

13.7 **Training Equipment and Location**

Systems operation, help desk, user acceptance, train the trainer and pilot training will be conducted in the centrally located DII training lab. Signature pads and card acceptance devices will need to be added to the standard DII training configuration for the training period. The State Agency plans to use the existing training hardware with a training database to support the hands-on portion of the training.

The complete list of hardware requirements for training will be determined by the State and compared with the inventory on-hand. The State Agency will provide other types of equipment and supplies that may be required by the training approach, such as overhead projectors, data display adapters, projection screens and easels.

Post pilot hands on district office training will be conducted on site at each district installation of equipment needed for system roll out. No additional equipment will be required specifically for

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

training. No special equipment is needed for self-paced e-learning modules, and the modules will be available from any workstation with a network connection.

13.8 Training Materials

Materials developed and used for training may include but not be limited to:

- Instructor and user manuals
- Quick reference system instructions
- A day-by-day outline of the training course to which the materials pertain
- Screen shots from the actual system that illustrate the operation of the function being taught in that particular section of the materials
- Illustrations of system outputs as appropriate
- Written text, tables, and illustrations that explain the concepts underlying the system, how to operate it, relevant WIC policies and procedures, and relevant examples
- Step-by-step instructions and learning aids on how to use the various system features that are being taught
- E-learning modules
- Test cards for retailers
- Written participant intro to changes, food card, use of card
- Participant video on choosing foods & using card
- Retailer PowerPoint and video, written materials

13.9 Training Evaluation and Effectiveness

Staff will evaluate training using a structured rating instrument. Each training event will be evaluated by assessing the competence and satisfaction of the attendees following the training. We will use the evaluation results from the pilot district to improve the training materials and methods, if necessary.

We will monitor questions/calls from staff, participants, and retailers during pilot to determine if their respective training materials and methods are effective and to make changes that will improve training results.

14 System Modifications

The MPSC MIS system, which Vermont is seeking to transfer, has proven capable in Colorado, Utah and Wyoming of handling caseloads greater than the size anticipated by Vermont. Since Vermont plans to operate this proven system with minimal modifications, the system should operate successfully in the Vermont processing environment, but thorough testing of the “as delivered” system will help confirm this.

The State of Vermont WIC Planning team selected the MPSC SAM system because it most closely matches the existing or desired business processes in place in the State. Early in the

VT WIC MIS/EBT Planning Project	Version: 1.12
Implementation Advance Planning Document (IAPD)	Date: 7/9/2012

analysis of existing systems it was determined that business practices would be changed to meet the selected system's operations; the State is committed to making only minor modifications to the SAM transfer system.

A Fit-Gap analysis will be conducted during the Implementation Planning Phase for Vermont's State Level IT organization, DII. This analysis will identify functional and non-functional gaps that require modification during the Design phase, to fit the Vermont WIC and computing environment. Any necessary modifications will be documented at this time. Since the State is anticipating minimal changes to the system, based upon State level IT review of the MPSC DTSD and the Vermont FReD, design modifications are expected to be mainly limited to business rules choices or tables, such as adjustments to drop down values or food packages.

Although the new system meets or exceeds Vermont's functional requirements for a replacement system, one unique process in the Vermont environment that is not included in the SAM transfer system is the functionality to maintain field level security to facilitate the Vermont Secretary of State's "Safe at home" program. A work around will be sought for this missing functionality instead of requiring system enhancements. Vermont plans to work with the SAM coalition user's workgroup to the extent possible to determine possible cost sharing opportunities in the development future enhancements.

Using the FReD document as a guide, the State analyzed the functionality in various systems to create a specific Vermont FReD located in [Appendix E](#).

NOTE: APPENDICES were removed to compress document size for easier transmission and review. Relevant Appendices are posted separately.

- 15 Appendix A – Document Index**
- 16 Appendix B – Glossary**
- 17 Appendix C - Feasibility Study/ Alternatives Analysis WIC MIS**
- 18 Appendix D – Feasibility Study / Alternatives Analysis WIC EBT**
- 19 Appendix E - Vermont Functional Requirements**
- 20 Appendix F - Gap Analysis Summary**
- 21 Appendix G – Implementation Task Matrix**
- 22 Appendix H – MIS / EBT Budget Workbook**