ENROLLED ORDINANCE 176-42

MODIFY THE 2021-2025 CAPITAL PLAN AND 2021 CAPITAL PROJECT BUDGET TO MODIFY SCOPE
FOR CAPITAL PROJECT #202014 HHS ELECTRONIC MEDICAL RECORD MODULE IMPROVEMENTS
AND RETITLE PROJECT TO HHS TECHNOLOGY SYSTEM ENHANCEMENTS

WHEREAS, capital project #202014 HHS Electronic Medical Record Module Improvements was
introduced in the 2020-2024 capital plan to implement a software solution in the Clinical
Services Division and replace an application in the Public Health Division before it is de-
supported in June 2022; and

WHEREAS, these system implementations are expected to streamline manual and time-
consuming processes, provide for greater data analysis, and improve quality control; and

WHEREAS, the Public Health Division has idenfitied additional functionality needs based on its
experience with the COVID-19 pandemic, which is estimated to increase project costs by
$36,000; and

WHEREAS, HHS maintains several contracts with third-party service providers, and
implementing a contract management application system would improve document
management through versioning control, application of metadata, routing among parties
(including external entities), and ongoing post-execution management of contracts; and

WHEREAS, implementing the HHS contract management application is estimated to cost
$174,000; and

WHEREAS, county administration is recommending that the contract management application
implementation be added to the existing electronic medical records project as part of a larger
HHS system enhancements project that is funded with the same source of revenue (discussed
below); and

WHEREAS, this capital project would enhance public health, behavorial health, and other HHS
services and systems, and would be eligible for funding under the American Rescue Plan Act
(ARPA) – Coronavirus State and Local Fiscal Recovery Funds (CSLFRF) program.

THE COUNTY BOARD OF SUPERVISORS OF THE COUNTY OF WAUKESHA ORDAINS that the 2021-
2025 Capital Plan be modified to retitle Capital Project #202014 from HHS Electronic Medical
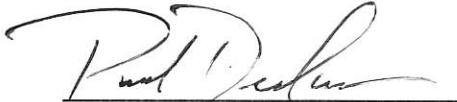Recort Module Improvements to HHS Technology System Enhancements.

BE IT FURTHER ORDAINED the 2021-2025 Capital Plan and 2021 Capital Project budget be
modified to increase project expenditures by $210,000 and general government revenues by
$210,000 to account for updated cost estimates and a change in scope for capital project
#202014.

MODIFY THE 2021-2025 CAPITAL PLAN AND 2021 CAPITAL PROJECT BUDGET TO MODIFY SCOPE FOR CAPITAL PROJECT #202014 HHS ELECTRONIC MEDICAL RECORD MODULE IMPROVEMENTS AND RETITLE PROJECT TO HHS TECHNOLOGY SYSTEM ENHANCEMENTS

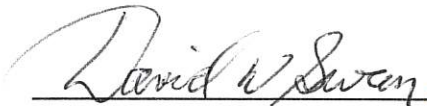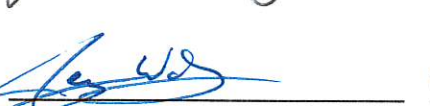| Presented by: Executive Committee	Approved by: Health & Human Services Committee	Approved by: Finance Committee
Paul L. Decker, Chair	Timothy Dondlinger, Chair	James A. Heinrich, Chair
Timothy Dondlinger	Jim Batzko	Tyler J. Foti
James A. Heinrich	Kathleen M. Cummings	Joel R. Gaughan
William A. Mitchell	Joel R. Gaughan	Thomas A. Michalski
David W. Swan	Jeremy Walz	Larry Nelson
Peter M. Wolff	**Absent** Steve Whittow	Duane E. Paulson
David D. Zimmermann	Ted Wysocki	Ted Wysocki
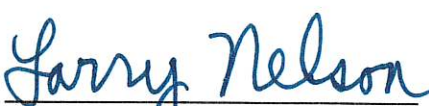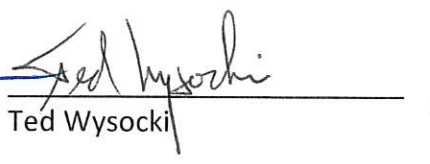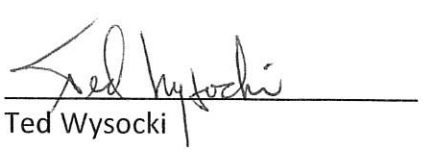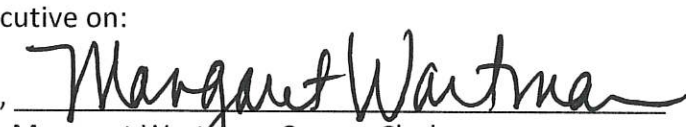
The foregoing legislation adopted by the County Board of Supervisors of Waukesha County, Wisconsin, was presented to the County Executive on:

Date: July 30 2021, _Margaret Wartman_

Margaret Wartman, County Clerk

The foregoing legislation adopted by the County Board of Supervisors of Waukesha County, Wisconsin, is hereby:

Approved: ___X___

Vetoed: _____

Date: __7/30/2021__, _____

Paul Farrow, County Executive

176-O-044

Ordinance 176-O-044

Ordinance 176-O-044: Modify the 2021-2025 Capital...

✓ Passed With 17 Yes Votes Neede

District	Vote	District	Vote
D1 - Foti	AYE	D14 - Mommaerts	AYE
D2 - Zimmermann	AYE	D15 - Mitchell	AYE
D3 - Morris	AYE	D16 - Crowley	AYE
D4 - Batzko	AYE	D17 - Paulson	AYE
D5 - Dondlinger	AYE	D18 - Nelson	AYE
D6 - Walz	AYE	D19 - Cummings	AYE
D7 - LaFontain	AYE	D20 - Schellinger	AYE
D8 - Michalski	AYE	D21 - Gaughan	AYE
D9 - Heinrich	AYE	D22 - Wysocki	AYE
D10 - Swan	ABSENT	D23 - Hammitt	AYE
		D24 - Whittow	AYE
D12 - Wolff	AYE	D25 - Johnson	AYE
D13 - Decker	AYE		

July 27 2021 - July 27 2021 09:21:24 PM

OpenMeeting
TECHNOLOGIES

Project Title:	HHS Electronic Medical Record Module Improvements			Project #:	202014
Department:	DOA - Information Technology			Project Type:	Information Technology
Phase:	Implementation			Sponsor:	Health & Human Services
Budget Action:	C - Scope	C - $ Update	C - Rev Update	Manager:	Donn Hoffmann, IT
Date:	July 2, 2021			Dept Mgr	Randy Setzer, HHS

CAPITAL BUDGET SUMMARY

Year	2020	2021	2021	2022	2023	Total
Project Phase	Design/ Implementation	Implementation	Ordinance			Project
Expenditure Budget	$330,000	$190,000	$210,000	$0	$0	$730,000
Revenue Budget	$330,000	$190,000	$210,000	$0	$0	$730,000
Net Costs After Revenues Applied	$0	$0	$0	$0	$0	$0

COST DOCUMENTATION					REVENUE	
	Clinical Services Application	Public Health Application	Contract Application	Total		
Professional Services & Software	$169,000	$232,000	$135,000	$536,000	America Rescue	
Recurring Fees	$81,000	$0	$16,000	$97,000	Plan Act (ARPA)	$730,000
Contingency	$38,000	$36,000	$23,000	$97,000		
					Total Revenue	$730,000
Total Project Cost	$288,000	$268,000	$174,000	$730,000		
					REVENUE	
EXPENDITURE BUDGET				$730,000	BUDGET	$730,000

Project Scope & Description
The Health and Human Services Department uses an electronic health record system, that includes several applications among HHS divisions. This capital project is intended to: (1) Implement a new software solution in the Clinical Services division to improve the tracking, management, and documentation of health claims across third-party care providers, (2) Replace the current Public Health application (Insight) which is being de-supported (discussed below), and (3) implement and develop a contract management application.

Location: Department of Health and Human Services

Analysis of Need
The Clinical Services Division relies on multiple contracted third-party entities to provide care to clients. Currently, the billing process is very manual and time consuming, requiring HHS staff to document and correct billing submissions from the third-party entities. Department management indicates that it is frequently six months behind in reviews and billing. An electronic solution would allow HHS to enhance and streamline the process. System functionality may include the ability to aggregate clinical data to provide a broad picture of the population levels, facilitate care coordination across providers, track clinical quality control measures and outcomes, and manage authorizations and claims across providers.

The current Public Health application was built upon a Microsoft SQL 2007 server, which is being de-supported. There is a three-year extended support period that ends by June 2022. After that, there will be no additional security updates, which would put the system at risk. Implementation of a new, industry-standard billing module is expected to promote efficiencies by eliminating workaround business processes: Clinical and billing staff time on progress notes; case management billing pre-verification; remittance and reconciliation; maintaining multiple databases, spreadsheets, paper inventory; and duplication of time and effort. Project costs are increased $36,000 for the Public Health Division application based on additional needs identified by department management during the COVID-19 pandemic.

HHS maintains several contracts with third-party service providers. The contract application would allow for improved document management, including versioning control, application of metadata, routing among parties (including external entities), and ongoing post-execution management of the contract. Implementation of an automated contract application would generate operational efficiencies and reduce risk. While immediately beneficial to HHS, it is believed that this application will be scalable for use county-wide. Project costs for this module are estimated at $174,000.

This capital project is also updated to include American Rescue Plan Act (ARPA) – Coronavirus State and Local Fiscal Recovery Funds (CSLFRF) funding. This capital project would constitute enhancements to public health, behavioral health, and other HHS services and systems, which are eligible under ARPA-CSLFRF.

Alternatives
HHS will explore multiple software solutions to find a cost-effective solution that meet the Clinical Services and Public Health divisions' functionality needs. For the contract application, county staff evaluated Microsoft SharePoint as a solution, but it would not be scalable county wide due to complex routing requirements.

Project Title:	HHS Electronic Medical Record Module Improvements			Project #:	202014
Department:	DOA - Information Technology			Project Type:	Information Technology
Phase:	Implementation			Sponsor:	Health & Human Services
Budget Action:	C - Scope	C - $ Update	C - Rev Update	Manager:	Donn Hoffmann, IT
Date:	July 2, 2021			Dept Mgr	Randy Setzer, HHS

Ongoing Operating Costs

Department management currently estimate that the ongoing cost for the Clinical Services Division application at about $81,000. However, streamlining the billing process is expected to save staff time that is currently devoted to documenting and correcting supporting data. The ongoing costs for the new Public Health application are expected to be at or below the ongoing costs for the existing application, resulting in no net increase in operating costs. The ongoing incremental cost of the contract management application is estimated at $16,000 per year.

Previous Action

The current electronic health records systems were implemented as part of the HHS Automated System capital project (#200109). Approved as a new capital project in the 2020 – 2024 capital plan. Approved with a cost update in the 2021-2025 capital plan.
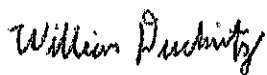
<u>FISCAL NOTE</u>

MODIFY THE 2021-2025 CAPITAL PLAN AND 2021 CAPITAL PROJECT BUDGET TO MODIFY SCOPE FOR CAPITAL PROJECT #202014 HHS ELECTRONIC MEDICAL RECORD MODULE IMPROVEMENTS AND RETITLE PROJECT TO HHS TECHNOLOGY SYSTEM ENHANCEMENTS

This ordinance modifies the 2021-2025 Capital Plan to modify the scope and budget for capital project #202014 HHS Electronic Medical Record Module Improvements, and to retitle the project for the expanded scope to HHS Technology System Enhancements. This ordinance would expand the scope of the project to include a new contract management applicaction, estimated to cost $174,000. The ordinance would also increase project budget authority by $36,000 for the Public Health application replacement, based on additional functionality needs identified by department management during its experience with the COVID-19 pandemic. The ordinance would increase project budget authority by $210,000 in total.

This ordinance would also increase the revenue budget by $210,000 to offset the new costs. Guidance from the U.S. Treasury indicates that projects that enhance public health, behavorial health, and other HHS services and data systems are eligible for funding under the American Rescue Plan Act (ARPA) – Coronavirus State and Local Fiscal Recovery Funds (CSLFRF) program. This includes existing project expenditure authority prior to this ordinance of $520,000, which will offset the need for Capital Project Fund balance that was previously assumed for these project costs.

The estimated ongoing levy impact for the new contract management application is estimated at $16,000 annually and would need to be prioritized within the department's future tax levy targets. The module is expected to generate operating efficiencies and reduce risk in establishing and managing contracts.

William Duckwitz

William Duckwitz
Budget Manager
07/07/2021
JE# 2021-00004730

| Referred on: 07/08/21 | File Number: 176-O-044 | Referred to: EX – HS – FI |