

(HT0) DEPARTMENT OF HEALTH CARE FINANCE

MISSION

The mission of the Department of Health Care Finance (DHCF) is to improve health outcomes by providing access to comprehensive, cost-effective, and quality health care services for residents of the District of Columbia.

CAPITAL PROGRAM OBJECTIVES

DC Access System (DCAS)

As an umbrella eligibility and enrollment system for Health and Human Services, DCAS provides access to cross agency automated databases for case data, such as demographics, beneficiary data, and benefit issuance; which will allow new case information data to be added. The system will also determine Medicaid eligibility.

Medicaid Management Information System (MMIS)

The Centers for Medicare and Medicaid Services (CMS) requires each Medicaid state and the District to maintain and operate a Medicaid Management Information System (MMIS). The MMIS serves as the District's Medicaid claims processing engine and supports DHCF staff in their day-to-day duties. CMS requires that the system technology be refreshed every five years to ensure it is up to date and contracts are completed openly. To remain compliant with CMS, the District must begin procuring a new MMIS.

United Medical Center

Assist the Mayor, Council, and consultant team in evaluation of the operational and facility needs of United Medical Center.

Elements on this page of the Agency Summary include:

- **Funding Tables:** Past budget allotments show the allotment balance, calculated as allotments received to date less all obligations (the sum of expenditures, encumbrances, intra-District advances and pre-encumbrances). Agencies are allowed to encumber and pre-encumber funds up to the limit of a capital project’s budget authority, which might be higher than allotments received to date. For this reason, a negative balance on a project sheet does not necessarily indicate overspending or an anti-deficiency violation. A negative balance is permitted in this calculation of remaining allotment authority.
- **Additional Appropriations Data (\$000):** Provides a summary of the budget authority over the life of the project. The table can be read as follows:
 - › **Original 6-Year Budget Authority:** Represents the authority from the fiscal year in which budget was first appropriated through the next 5 years.
 - › **Budget Authority Through FY 2025 :** Represents the lifetime budget authority, including the 6-year budget authority for FY 2020 through FY 2025.
 - › **FY 2020 Budget Authority Revisions:** Represents the changes to the budget authority as a result of reprogramming, redirections and rescissions (also reflected in Appendix F) for the current fiscal year.
 - › **6-Year Budget Authority Through FY 2025 :** This is the total 6-year authority for FY 2020 through FY 2025 including changes from the current fiscal year.
 - › **Budget Authority Request Through FY 2026 :** Represents the 6-year budget authority for FY 2021 through FY 2026.
 - › **Increase (Decrease) :** This is the change in 6-year budget requested for FY 2021 - FY 2026 (change in budget authority is shown in Appendix A).
- **Estimated Operating Impact:** If a project has operating impacts that the agency has quantified, the effects are summarized in the respective year of impact.
- **FTE Data (Total budget in FTE Table might differ from actual budget due to rounding):** Provides the number for Full-Time Equivalent (FTE) employees approved as eligible to be charged to capital projects by, or on behalf of, the agency. Additionally, it provides the total budget for these employees (Personal Services), the non personnel portion of the budget in the agency’s capital plan, and the percentage of the agency CIP budget from either expense category.
- **Facility Location Map:** For those agencies with facilities projects, a map reflecting projects and their geographic location within the District of Columbia.

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
(00) Feasibility Studies	41,501	41,330	170	0	0	0	0	0	0	0	0	0
(01) Design	7,778	5,973	816	238	750	0	0	0	0	0	0	0
(04) Construction	53,717	25,150	27,524	0	1,043	39,800	114,300	126,000	87,900	0	0	368,000
(06) IT Requirements Development/Systems Design	371,288	164,711	46,111	30,879	129,588	2,500	0	0	0	0	0	2,500
TOTALS	474,284	237,164	74,621	31,117	131,381	42,300	114,300	126,000	87,900	0	0	370,500

Source	Funding By Source - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
GO Bonds - New (0300)	73,382	51,942	16,255	2,554	2,631	5,500	0	0	0	0	0	5,500
Pay Go (0301)	26,571	21,566	3,764	277	964	0	16,957	19,570	44,290	0	0	80,817
Short-Term Bonds – (0304)	45,723	26,005	8,789	1,017	9,913	0	0	0	0	0	0	0
Taxable Bonds – (0309)	8,700	521	8,179	0	0	36,800	97,343	106,430	43,610	0	0	284,183
LRMF - Bus Shelter Ad Revenue (0333)	810	810	0	0	0	0	0	0	0	0	0	0
Federal (0350)	319,097	136,321	37,634	27,269	117,873	0	0	0	0	0	0	0
TOTALS	474,284	237,164	74,621	31,117	131,381	42,300	114,300	126,000	87,900	0	0	370,500

Additional Appropriation Data		Estimated Operating Impact Summary						
		Expenditure (+) or Cost Reduction (-)						
		FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
First Appropriation FY	2010	No estimated operating impact						
Original 6-Year Budget Authority	649,243							
Budget Authority Through FY 2025	827,686							
FY 2020 Budget Authority Changes								
Capital Reprogrammings FY 2020 YTD	-30,000							
6-Year Budget Authority Through FY 2025	797,686							
Budget Authority Request Through FY 2026	844,784							
Increase (Decrease)	47,098							

Full Time Equivalent Data			
Object	FTE	FY 2021 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	42,300	100.0

HT0-MPM03-MMIS UPGRADED SYSTEM

Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Implementing Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Project No: MPM03
Ward:
Location: DISTRICT-WIDE
Facility Name or Identifier: INFORMATION TECHNOLOGY
Status: In multiple phases
Useful Life of the Project: 5
Estimated Full Funding Cost: \$89,251,000

Description:

The Centers for Medicare and Medicaid Services (CMS) requires each Medicaid state and the District to maintain and operate a Medicaid Management Information System (MMIS). The MMIS serves as the District's Medicaid claims processing engine and supports DHCF staff in their day-to-day duties. CMS requires that the system be technology refreshed every 5 years to ensure it is up to date and contracts are competed openly. To remain compliant with CMS the District must procure a new MMIS.

In 2014, CMS issued guidance requiring States to develop a modular MMIS. DHCF has conformed to these requirements and is developing the new system as separate components in three phases: (1) Provider Data Management (2) Case Management; and (3) the Core system.

Provider Data Management System (PDMS) module has been completed and will need a technology refresh in FY22. The case management system, including the Electronic Visit Verification component, is being built under capital project CM102C. DHCF is currently working on procuring the Core system. In FY16, CMS required that there be a separate IV&V contractor.

Justification:

CMS requires that the Medicaid state agency upgrades the MMIS system every 5 years.

Progress Assessment:

This is an on-going project.

Related Projects:

MES23C-DCAS RELEASE 3, MPM05C-MEDICAID DATA WAREHOUSE - GO BOND; AP101C-PREDICTIVE ANALYTICS; CM102C-REPLACE CASE MANAGEMENT SYSTEM

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
(06) IT Requirements Development/Systems Design	86,751	9,274	675	23,389	53,413	2,500	0	0	0	0	0	2,500
TOTALS	86,751	9,274	675	23,389	53,413	2,500	0	0	0	0	0	2,500

Source	Funding By Source - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
GO Bonds - New (0300)	6,000	1,099	179	2,530	2,191	2,500	0	0	0	0	0	2,500
Short-Term Bonds - (0304)	4,251	0	0	0	4,251	0	0	0	0	0	0	0
Federal (0350)	76,500	8,175	496	20,859	46,970	0	0	0	0	0	0	0
TOTALS	86,751	9,274	675	23,389	53,413	2,500	0	0	0	0	0	2,500

Additional Appropriation Data	
First Appropriation FY	2013
Original 6-Year Budget Authority	61,751
Budget Authority Through FY 2025	61,751
FY 2020 Budget Authority Changes	
Capital Reprogrammings FY 2020 YTD	25,000
6-Year Budget Authority Through FY 2025	86,751
Budget Authority Request Through FY 2026	89,251
Increase (Decrease)	2,500

Estimated Operating Impact Summary							
Expenditure (+) or Cost Reduction (-)	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
No estimated operating impact							

Milestone Data	Projected	Actual
Environmental Approvals		
Design Start (FY)	10/1/2013	
Design Complete (FY)	10/1/2014	
Construction Start (FY)	10/1/2015	01/1/2016
Construction Complete (FY)	06/30/2019	
Closeout (FY)	09/30/2022	

Full Time Equivalent Data		
Object	FTE	FY 2021 Budget
Personal Services	0.0	0
Non Personal Services	0.0	2,500
		% of Project
		0.0
		100.0

HT0-UMV01-SAINT ELIZABETHS MEDICAL CENTER

Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Implementing Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Project No: UMV01
Ward: 8
Location: 2700 MARTIN LUTHER KING JR AVENUE SE
Facility Name or Identifier: SAINT ELIZABETHS MEDICAL CENTER
Status: Ongoing Subprojects
Useful Life of the Project: 30
Estimated Full Funding Cost: \$383,700,000

Description:

The Office of the City Administrator, in coordination with the Department of Health Care Finance, Department of Health, and the Office of the Deputy Mayor for Planning and Economic Development, will oversee the construction of a new GW Health Hospital, Ambulatory Center and Garage at St. Elizabeths East to improve health care and address inequalities in health outcomes. The 136 bed (built to expand to 196 beds in the future), state of the art, hospital will be operated by Universal Health Services in conjunction with George Washington University and George Washington Medical Faculty Associates (GWMFA). As currently funded, the Ambulatory Center is scheduled to open in the fall of 2023 and the hospital facility would open in the fall of 2024.

The hospital will be part of a robust integrated health care system that includes two additional urgent care centers, one each in Ward 7 and 8, paid for by Universal Health Services, and partnership with local community providers and clinics to ensure a comprehensive strategy for providing high quality health services to all District residents - with a focus on the residents and communities of Ward 7 and 8.

Justification:

Building a new hospital with a robust system of care will help address health disparities and improve health outcomes for all District residents, with a focus on residents of Wards 7 and 8. In addition, construction of a state-of-the-art, centrally located, hospital will continue the redevelopment of the Saint Elizabeths East campus.

Progress Assessment:

On-going project

Related Projects:

1. Emergency and Temporary Housing for Men (Project THK19C) – Building a new facility for emergency and temporary housing for men will replace the current facility, 801 East Men’s Homeless Shelter. The new facility on the Saint Elizabeths campus is necessary to provide high quality emergency and temporary housing for men with daytime and health services. The current facility is beyond its useful life and cannot accommodate the necessary programming space needed to effectively serve residents experiencing homelessness. Building a new facility will allow the new hospital to be situated appropriately on Parcel 2 of the Saint Elizabeths campus.

2. Saint Elizabeths Infrastructure (Project AWR01C)

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
(04) Construction	18,700	651	17,179	0	870	36,800	114,300	126,000	87,900	0	0	365,000
TOTALS	18,700	651	17,179	0	870	36,800	114,300	126,000	87,900	0	0	365,000

Source	Funding By Source - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
GO Bonds - New (0300)	8,000	0	8,000	0	0	0	0	0	0	0	0	0
Pay Go (0301)	2,000	130	1,000	0	870	0	16,957	19,570	44,290	0	0	80,817
Taxable Bonds – (0309)	8,700	521	8,179	0	0	36,800	97,343	106,430	43,610	0	0	284,183
TOTALS	18,700	651	17,179	0	870	36,800	114,300	126,000	87,900	0	0	365,000

Additional Appropriation Data

First Appropriation FY	2018
Original 6-Year Budget Authority	335,000
Budget Authority Through FY 2025	325,500
FY 2020 Budget Authority Changes	
Capital Reprogrammings FY 2020 YTD	-25,000
6-Year Budget Authority Through FY 2025	300,500
Budget Authority Request Through FY 2026	383,700
Increase (Decrease)	83,200

Estimated Operating Impact Summary

Expenditure (+) or Cost Reduction (-)	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
No estimated operating impact							

Milestone Data

	Projected	Actual
Environmental Approvals		
Design Start (FY)		
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)		
Closeout (FY)		

Full Time Equivalent Data

Object	FTE	FY 2021 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	36,800	100.0

HT0-UMC02-UNITED MEDICAL CENTER IMPROVEMENTS

Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Implementing Agency: DEPARTMENT OF HEALTH CARE FINANCE (HT0)
Project No: UMC02
Ward: 8
Location: 1310 SOUTHERN AVENUE SE
Facility Name or Identifier: UNITED MEDICAL CENTER
Status: Ongoing Subprojects
Useful Life of the Project: 30
Estimated Full Funding Cost: \$79,293,000

Description:

The purpose of the project budget is to support the costs of capital improvements at the existing hospital facility, United Medical Center (UMC). The proposed cost and scope of the improvements should be reviewed and approved by DHCF and will be performed by UMC management.

Justification:

Huron Consulting Group states that "UMC Facilities are in relatively good condition" and that "investments to make the facilities competitive without other District providers could differentiate UMC and attract (Primary Service Area) PSA residents."

Progress Assessment:

On-going project

Related Projects:

UMV01C-East End Medical Center

(Dollars in Thousands)

Phase	Funding By Phase - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
(00) Feasibility Studies	41,501	41,330	170	0	0	0	0	0	0	0	0	0
(04) Construction	34,792	24,484	10,260	0	48	3,000	0	0	0	0	0	3,000
TOTALS	76,293	65,815	10,430	0	48	3,000	0	0	0	0	0	3,000

Source	Funding By Source - Prior Funding					Proposed Funding						
	Allotments	Spent	Enc/ID-Adv	Pre-Enc	Balance	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
GO Bonds - New (0300)	55,055	47,023	8,031	0	0	3,000	0	0	0	0	0	3,000
Pay Go (0301)	21,238	18,791	2,399	0	48	0	0	0	0	0	0	0
TOTALS	76,293	65,815	10,430	0	48	3,000	0	0	0	0	0	3,000

Additional Appropriation Data

First Appropriation FY	2015
Original 6-Year Budget Authority	52,383
Budget Authority Through FY 2025	79,293
FY 2020 Budget Authority Changes	0
6-Year Budget Authority Through FY 2025	79,293
Budget Authority Request Through FY 2026	79,293
Increase (Decrease)	0

Estimated Operating Impact Summary

Expenditure (+) or Cost Reduction (-)	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026	6 Yr Total
No estimated operating impact							

Milestone Data

	Projected	Actual
Environmental Approvals		
Design Start (FY)		
Design Complete (FY)		
Construction Start (FY)		
Construction Complete (FY)		
Closeout (FY)		

Full Time Equivalent Data

Object	FTE	FY 2021 Budget	% of Project
Personal Services	0.0	0	0.0
Non Personal Services	0.0	3,000	100.0