

Expedited Life Cycle (XLC) Process Change Request (CR)

Please complete this form and submit it to the [CMS IT Governance Resource Mailbox](#)

CR NUMBER: 15-008 **DATE SUBMITTED:** 09/15/2015

CR TITLE: New Questions for the IT Intake Request Form

PRIORITY {As determined by submitter}

- HIGH: Emergency/Critical to Mission
 MEDIUM: Urgent/Needed but Not Critical to Mission
 LOW: Routine to Mission

SUBMITTER INFORMATION

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CHANGE ITEM {Identify item/template/deliverable}: IT Intake Request Form

DESCRIPTION OF CHANGE {include supporting documentation as appropriate}:

1. New question: "If this is a complex IT project involving multiple contractors and multiple system interfaces, has the project team assessed the need for assigning a lead systems integration contractor?"
2. New drop-down menu response for Question 1-1, "I have a release for an existing system"

IF CHANGE IS TO A TEMPLATE, PLEASE TURN TRACK CHANGES "ON" AND MAKE YOUR PROPOSED UPDATES. SUBMIT THE UPDATED TEMPLATE ALONG WITH THIS CR FORM.

JUSTIFICATION FOR CHANGE

1. Address OIG finding by identifying a process for identifying if a lead system integrator is required (Question 2-14).
2. Address CCSQ concern that a new drop-down menu option is required for Intake Form Question 1-1.
3. Address Enterprise Architecture concern that a new drop-down menu option is required for Intake Form Question 1-1.

XLC STEERING COMMITTEE FINAL DISPOSITION

DECISION

- APPROVE
 DISAPPROVE
 DEFER
 APPROVE WITH MODIFICATIONS

DECISION DATE: 10/16/2015 **NOTES/COMMENTS:** _____

IT Intake Form Questions and Dropdown/Choice Options

Updated **09/16/2015**

Field Label	Brief Description
1-1. Services Requested:	Dropdown list box options: <ul style="list-style-type: none"> • Select (default) • I have a release for an existing system • I need business process model (BPM) support from Enterprise Architecture • I have a new idea or project that needs to enter the life cycle • I have an existing project that needs OEI/OTS resources/team members • I need guidance in disposing/shutting down a system • I need to complete an Attachment B for the CIO IT Budget Call Letter
1-2. Request Date:	Date Picker
1-3. Go Live Date (if applicable):	Date Picker
1-4. Life Cycle ID (if known):	Text
1-5. Project Name:	Text
1-6. Project Acronym:	Text
1-7. Business Owner's Name:	Text
1-8. Business Owner's Component:	Receives data from SharePoint list. Here are the items in the list: <ul style="list-style-type: none"> • Blank (default) • CCIO: Center for Consumer Information and Insurance Oversight • CCSQ: Centers for Clinical Standards and Quality • CIISG: Consumer Information and Insurance Systems Group • CM: Center for Medicare • CMCS: Center for Medicaid and CHIP Services • CMMI: Center for Medicare and Medicaid Innovation • Component Not Listed • COO: Chief Operating Officer • CPI: Center for Program Integrity • FCHCO: Federal Coordinated Health Care Office • IHDSG: Innovative Healthcare Delivery Systems Group • OA: Office of the Administrator • OACT: Office of the Actuary • OAGM: Office of Acquisition and Grants Management • OC: Office of Communications • OEI: Office of Enterprise Information • OEOCR: Office of Equal Opportunity and Civil Rights • OFM: Office of Financial Management • OHI: Offices of Hearings and Inquiries

Field Label	Brief Description
	<ul style="list-style-type: none"> • OTS: Office of Technology Solutions • OL: Office of Legislation • OMH: Office of Minority Health • OOM: Office of Operations Management • OSORA: Office of Strategic Operations and Regulatory Affairs • TRB: Technical Review Board
1-9. CMS Project Manager's/Lead's Name:	Text
1-10. CMS Project Manager's/Lead's Component:	Same options as 1-8 (above)
1-11. If anyone from your project team (including your contractors, if applicable), is currently collaborating with anyone in OEI/OTS, please provide the OEI/OTS point of contact	Text
1-12. Does the project have funding?	Options: <ul style="list-style-type: none"> • Yes • No (default)
1-12 A. Not labelled (hidden field)	This is a hidden text box that is displayed if user selects YES to 1-12. Placeholder text: "If yes, enter the IT Funding #:"
1-13. If your project has completed a Technical Review Board (TRB) consult or formal gate review for this project, please enter the type of review, date and summary of recommendations from your <u>most recent</u> consult or review.	Repeating Table with a Gate Review selection field and a Date Picker field for each row. Options for Gate Review field are: <ul style="list-style-type: none"> • Select (default) • Not Applicable (N/A) • TRB Consultation • Business Architecture Review (BAR) • Preliminary Design Review (PDR) • Detailed Design Review (DDR) • Operational Readiness Review (ORR) • Post Implementation Review (PIR)
TRB Recommendations:	Rich Text Field
<p>If user selected one of the following two options (from #1-1 (Services Requested)), they will <u>continue</u> to Section 2 with additional questions:</p> <ul style="list-style-type: none"> • I have a new idea or project that needs to enter the life cycle • I have an existing project that needs OIS resources/team members <p>If user selected one of the following two options (from # 1-1 (Services Requested)), <u>they are finished</u> answering questions and can submit the form (they are taken directly to a confirmation page and skip Section 2):</p> <ul style="list-style-type: none"> • I need guidance in disposing/shutting down a system • I need to complete an Attachment B for the CIO IT Budget Call Letter 	
2-1. Describe the business need and beneficial outcomes:	Rich Text Field
2-2. What are the activities or processes related to your project/idea?	Rich Text Field
2-3. What value does this project/idea bring to CMS (i.e., improve CMS processes by reducing steps/time to complete a task,	Rich Text Field

Field Label	Brief Description
errors or rework and/or reduce CMS operational costs)? <i>Note: This will be included in your Business Case.</i>	
2-4. How does this project/idea align with the CMS Strategy and/or Agency priorities? <i>Note: If you need assistance determining alignment, please contact the OEI Division of Strategy Management at StrategyManagement@cms.hhs.gov</i>	Rich Text Field
2-5. What are the costs/risks/impacts of NOT implementing your idea/project?	Rich Text Field
2-6. Does this request directly support the implementation of pending/existing legislation or statute?	Options: <ul style="list-style-type: none"> • Yes • No (default)
2-6 A. Not labelled (hidden field)	This field is displayed to the user if the response to 2-6 is YES. Combo box with these options: <ul style="list-style-type: none"> • If yes, select from this list... (default) • ACA • HCDII • HIGLAS • HITECH • MAPD • MIPPA • Other (describe) • Unknown
2-6 B. Not labelled (hidden field)	This field is displayed to the user if the response to 2-6 A is ACA. Text box with this placeholder: "List applicable ACA provisions here"
2-6 C. Not labelled (hidden field)	This field is displayed to the user if the response to 2-6 A is Other (describe). Text box with this placeholder: "Describe "other" legislation"
2-7. Is this request related to the maintenance or enhancement of existing CMS business systems or operations?	Options: <ul style="list-style-type: none"> • Yes • No (default)
2-8. Do you have a Statement of Work (SOW) related to this request?	Options: <ul style="list-style-type: none"> • Yes • No (default)
2-8 A. Not labelled (hidden field)	This field is displayed to the user if the response to 2-8 is YES RTF with this placeholder: "Include the status of your Statement of Work"
2-9. What contracts do you have in place for this idea/project? Include contract vehicle used and name of prime contractor.	Rich Text Field
2-10. What IT services do you think will be required to support the successful	Rich Text Field

Field Label	Brief Description
implementation of your project? Please include if you are considering CMS Shared services such as Enterprise Identity Management (EIDM) or Portal (regardless of whether services will be procured through OIS or not).	
2-11. Are you considering allowing your system to be hosted by a Cloud Service Provider (CSP)?	Options: <ul style="list-style-type: none"> • Yes • No (default)
2-11 A. If yes, what type of CSP are you planning to use?	Hidden field is displayed to user if YES is selected in 2-11. Multiple Selection List Box with the following options: <ul style="list-style-type: none"> • IaaS: Infrastructure as a Service • PaaS: Platform as a Service • SaaS: Software as a Service
2-12. Are you considering developing a system that will interface with an external Cloud Service Provider?	Options: <ul style="list-style-type: none"> • Yes • No (default)
2-13. If this is a complex IT project involving multiple contractors and multiple system interfaces, has the project team assessed the need for assigning a lead systems integration contractor?	Options: <ul style="list-style-type: none"> • Yes • No (default) • Not applicable

IT GOVERNANCE STAFF IMPACT ASSESSMENT