

Appendix A
California Exchange Level I Establishment Grant Work Plan

California Exchange Establishment Grant Level I Work Plan by Core Area					
Core Area / Key Tasks and Milestones	Completed	Jul-Sep 2011 Q1	Oct-Dec 2011 Q2	Jan-Mar 2012 Q3	Apr-Jun 2012 Q4
Strategic Visioning (No comparable federal core area) <i>Goal: Inform development and implementation of the California Exchange with strategic goals and vision for the work</i>					
Engage Exchange Board, staff and stakeholders in setting the vision and goals for the California Exchange.		x			
Business and Operational Planning (Federal core area 11 -- Business operations) <i>Goal: Assess the role and the markets for Exchange services and programs and address the operational considerations, strategies and timelines for implementation of a viable and successful Exchange in compliance with state and federal requirements</i>					
Engage in a two-part business and operational planning process to identify Exchange markets, products, programs and detailed system and operational requirements for Exchange implementation and application for the Level II establishment grant. <u>Part I</u> will focus on eligibility and enrollment processes, including: <ul style="list-style-type: none"> ▪ Applications and notices; ▪ Eligibility screening; ▪ Enrollment and disenrollment; ▪ Eligibility appeals; ▪ Call center, web site and in-person eligibility functions; ▪ Seamless eligibility with Medi-Cal, Healthy Families and other state health programs; and ▪ SHOP functionality for enrollment. <u>Part II</u> will focus on other functionalities of the Exchange, including: <ul style="list-style-type: none"> ▪ Call center consumer assistance functions; ▪ Website functionality for benefit and cost comparison, cost calculator, complaints, benefit and coverage appeals; ▪ Adjudication of appeals; ▪ Administration of individual responsibility, tax credits and cost-sharing reductions; 		Part I: x	Part I: x		
		Part II: x	Part II: x	Part II: x	

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<ul style="list-style-type: none"> ▪ Employer liability notifications and appeals; ▪ Reporting to the IRS; and ▪ SHOP functionality as appropriate. 					
As part of business and operational planning, ** begin developing requirements for systems and program operations [in specific functional areas], including , among other elements, eligibility and enrollment, Exchange web site and calculator, exemptions from individual responsibility requirement, premium tax credits and cost-sharing reductions, free choice vouchers, notifications and appeals, and reporting to the Internal Revenue Service.		x	x	x	x
Prepare and submit a Level II Exchange grant application for the remainder of the implementation and planning period through January 2014.				x	
I. Background Research					
<i>Goal: Conduct and regularly evaluate research and analyses to inform development and implementation of the California Exchange</i>					
Conduct needed research and analysis to inform exchange policy options (e.g. Demographics and health status of potential Exchange enrollees).		x	x	x	x
II. Stakeholder Consultation					
<i>Goal: Provide regular opportunities for input from diverse stakeholders and the public to inform Exchange programs and operations</i>					
During the Level I grant period, conduct up to five public meetings of the California Health Benefits Exchange Board (Exchange Board) and / or stakeholder meetings outside of Sacramento to engage and seek input from the public and local stakeholders.		x	x	x	x
Conduct stakeholder meetings on key business and operational planning issues and topics during the period of the Level I grant.		x	x		
Incorporate in all consulting and planning project scopes of work stakeholder input process and requirements specific to the issue or project.		x	x	x	x

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**Establish, implement and document a process for consultation with federally recognized Indian tribes.			x		
Develop and implement the short- and long-range process and approach for active stakeholder involvement and input.				x	x
Conduct regular one-on-one and group meetings with key stakeholders on issues related to the development and implementation of the Exchange.		x	x	x	x
III. Legislative and Regulatory Action <i>Goal: Ensure that the California Exchange has sufficient state and federal authority for its programs and operations and complies with applicable state and federal rules and requirements</i>					
Conduct timely review and evaluation of federal regulations and guidance which may affect Exchange programs or operations.		x	x	x	x
Identify specific state authority and requirements necessary for Exchange operations, advise the Legislature and support legislative proposals necessary to enhance the authority of the Exchange and other state agencies as needed to comply with federal law and ensure effective Exchange implementation.		x	x	x	x
IV. Governance <i>Goal: Ensure that the California Exchange has an accountable and transparent governance structure, is staffed with competent leadership and is in compliance with applicable conflict of interest provisions</i>					
**Establish governance structure.	x				
Conduct regular public meetings of the Exchange Board.		x	x	x	x
Adhere to state open public meeting laws.		x	x	x	x
Implement and monitor conflict of interest provisions in state and federal law.		x	x	x	x
Regularly post and update Exchange main web site with meeting agendas, minutes, grant reports and other materials related to Exchange activities and operations.		x	x	x	x
Determine the need for Board operational rules or bylaws, consistent with state and federal law.		x	x	x	x
Recruit and hire Executive Director for the Exchange and authorize the Executive Director to recruit and hire key staff and consultants as proposed and authorized in the federal Level I grant.		x			

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V. Program Integration					
<i>Goal: Identify, evaluate and implement opportunities for coordination and collaboration with state agencies, including health and human services program agencies and state health insurance regulators</i>					
Initiate and maintain communication with state HIT programs, state insurance regulators, and Medi-Cal/Healthy Families and hold regular collaborative meetings.	x	x	x	x	x
<u>A. Coordination with State Health and Human Services Programs:</u>					
Manage and coordinate an internal working group of staff from key state agencies and departments administering state health and human services programs.		x	x	x	x
**Perform detailed business process documentation to reflect current state business processes and a baseline assessment of existing state coverage programs, such as Medi-Cal and Healthy Families, including implications for IT systems design, process, and coordination. Develop options for meeting federal requirements related to program integration.			x	x	x
Assess eligibility, program rules and program benefits and services in other state health and human services programs and identify coordination and integration opportunities.			x		
**Execute an agreement with the state Medicaid agency and any other applicable state health subsidy program consistent with federal Level I grant requirements to clarify roles and responsibilities consistent with federal requirements.			x		
<u>B. Coordination with State Insurance Regulators:</u>					
Assess existing public and private health plan standards, requirements and performance measurements and evaluate the feasibility and advisability of aligning health care purchasing strategies and standards among public and private programs.			x	x	

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**Execute an agreement with California Department of Insurance and Department of Managed Health Care consistent with Level I grant requirements clarifying roles and responsibilities related to qualified health plans.				x	
VI. Exchange IT Systems <i>Goal: Ensure a modular, flexible approach to systems development and complete IT milestones related to Exchange business and operations</i>					
Development of an IT strategy to meet Exchange requirements, acquisition of the necessary services to implement the strategy, and commencement of the systems development phase of the SDLC. Individual tasks will include: <ul style="list-style-type: none"> ▪ Assess innovator state assets; ▪ Assess vendor offerings; ▪ Continue development of business requirements and IT architectural and integration and integration framework; ▪ Develop business operations alternatives and recommendations; ▪ Develop purchasing strategies; ▪ Issue appropriate vendor solicitations; ▪ Evaluate and select vendor(s); ▪ Contract negotiations and approvals; ▪ Begin development of IT systems to support eligibility and enrollment functions and, ▪ Complete requirements and design milestones. 				(See IT Timeline)	
VII. Financial Management <i>Goal: Establish a financial management structure that adheres to generally accepted accounting principles, ensures sound financial management of Exchange funds and ensures long range sustainability of the Exchange as required by federal law</i>					
Develop and maintain routine internal financial and accounting systems, protocols and policies to monitor and track Exchange revenues and expenditures consistent with state and federal requirements and good accounting practices.		x	x	x	x
**Adhere to DHHS financial monitoring activities and establish a financial and management structure with experienced staff and ability to respond to federal audits.		x	x	x	x

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Manage and evaluate Exchange funding sources and projected expenditures, and comply with related reporting requirements, to ensure adequacy of non-state General Fund resources for Exchange programs and operations.		x	x	x	x
Develop scenarios and adopt a sustainability plan for the Exchange after 2015.				x	
VIII. Oversight and Program Integrity <i>Goal: Implement an effective program to prevent waste, fraud and abuse with funds used to start up and operate the Exchange</i>					
Establish and implement internal policies and procedures to comply with State and Federal requirements related to Exchange operations, including annual audits.		x	x	x	x
Engage external consultants to develop a plan that **ensures the prevention of waste, fraud and abuse in Exchange programs.				x	x
IX. Health Insurance Market Reforms <i>Goal: Monitor and demonstrate state compliance with and enforcement of federal health insurance market reforms</i>					
Track and monitor state legislation, regulations and implementation of health insurance market reforms.		x	x	x	x
Work with the Legislature, the Administration, CDI and DMHC to monitor and consider enforcement of consumer protections, including specific requirements that impact the Exchange.		x	x	x	x
Work with CDI and DMHC to monitor and consider enforcement of consumer protections, including specific requirements that impact the Exchange.		x	x	x	x
X. Consumer Assistance -- Providing Assistance to Individuals and Small Businesses, Coverage, Appeals and Complaints <i>Goal: Develop a plan for meaningful statewide assistance for individuals eligible for Exchange and state health coverage programs through multiple access points, including but not limited to a toll-free hotline, web site and in-person capability</i>					
Make early updates and improvements on the Exchange web site and tools to educate the public about health reform and future Exchange services and activities.		x			

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Develop in the business and operational plan for Exchange operations as above specific operational elements related to consumer assistance, including identification of services and programs necessary to provide culturally competent and linguistically appropriate services and consumer assistance.		x	x	x	
Dedicate a full time Exchange staff person to ensuring that Exchange programs and services are culturally and linguistically appropriate for the demographics of individuals likely to be enrolled in coverage through the Exchange.			x	x	x
Reach out to and receive input from diverse stakeholders to identify options for consumer assistance.			x		
Identify and evaluate existing state and local consumer assistance programs and specific strategies for partnership and coordination with existing or new programs.				x	
**Establish protocols and scopes of work for building capacity to handle consumer assistance functions such as coverage appeals.				Consistent with Business and Operational Plan	
**Analyze data collected by consumer assistance programs and report on plans for use of information to strengthen qualified health plan accountability and functioning of the Exchange.				x	
Begin developing requirements for systems and program operations related to consumer assistance functions and operations.				Consistent with Business and Operational Plan	
Navigator Program (Federal core area 11 -- Business operations) <i>Goal: Design a navigator program that will assist consumers in navigating their choices in the health insurance marketplace, including facilitating enrollment in qualified health plans</i>					
Evaluate navigator program design and funding options with input from key stakeholders and experts				x	x
Develop a timeline and process for selection and funding of navigators.					x
Identify organizations and criteria for navigators.					x

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Health Plan Management (Federal core area 11 -- Business operations) <i>Goal: Offer qualified health plans through the Exchange that meet state and federal certification requirements, avoid adverse selection in Exchange coverage programs and implement risk adjustment and reinsurance programs consistent with federal requirements</i>					
Evaluate existing state and federal statutory and regulatory standards for health insurance issuers and for qualified health plans participating in the Exchange.			x	x	
Implement a process and structure to solicit expert and stakeholder written comments and recommendations for plan certification standards and qualified health plan selection and contracting.			x		
Develop standards, process and compliance monitoring for plan certification.				x	x
Develop a model contract, solicitation document and process for selection of qualified health plans.					x
Seek internal and external guidance and assistance on strategies for Exchange design and outside market requirements to mitigate adverse selection inside and outside of the Exchange.			x	x	
Evaluate existing research and other state Exchange activities and research for assistance in designing a risk adjustment program.			x	x	
Develop data collection standards and process to provide baseline data for implementation of risk adjustment methods.				x	
Identify additional expertise, research and resources that will be needed to implement risk adjustment and reinsurance.					x
Conduct research and analysis on the options for a state reinsurance program.					x
Monitor and track federal standards for quality ratings of qualified health plans and consider strategies related to value-based purchasing, including efficiency, quality and consumer experience.		x	x	x	x

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Outreach and Education (Federal core area 11 -- Business operations) <i>Goal: Design effective communications, public education, outreach and marketing activities to secure and maintain Exchange enrollment at levels that support sustainability, and evaluate and implement opportunities for cross program strategies, materials and communications with other state health and human services programs</i>					
Assess communications, public education, marketing and outreach needs of the Exchange and develop a short-term (preoperational) and long-term marketing, outreach and communications plan aimed at securing and maintaining Exchange enrollment.				x	
Conduct focus group tests with diverse consumers regarding consumer needs.				x	x
Include funding and implementation timeline in the Level II Exchange grant application for communications, public education, marketing, outreach and enrollment activities, including focus group testing and language and literacy competency.				x	
Develop a solicitation process for outreach and marketing activities.					x
Employer Relationships (Federal core area 11 -- Business operations) <i>Goal: Implement systems to ensure compliance with federal reporting and employer notification requirements</i>					
Include in the business and operational plan functionalities for employer notices and appeals related to employer liability.				Consistent with Business and Operational Plan	
Begin developing requirements for systems and program operations related to employee and employer assistance functions and operations.				Consistent with Business and Operational Plan	
Small Business Health Options Program (SHOP) (Federal core area 11) <i>Goal: Develop a viable design and approach to provide Exchange coverage for small businesses and their employees consistent with state and federal requirements</i>					
Assess existing and past models, options and approaches for SHOP and develop a design and operational plan for the SHOP to include at a minimum: <ul style="list-style-type: none"> ▪ Services and benefits to be provided to SHOP employers; ▪ Strategies for outreach and marketing and ways to mitigate adverse selection; ▪ Options for coordination / integration 			x	x	x

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with other Exchange programs and functions; and <ul style="list-style-type: none"> ▪ System and IT supports needed. ** Begin developing requirements for system and program operations.					
* Required Federal Milestones during the grant period					

Exchange IT Work Plan

California is committed to the timely and cost effective implementation of Exchange IT systems that support a high quality customer experience, seamless coordination between stakeholders, collaboration and sharing within and among states, and adherence to industry standards.

In terms of the CMS Integrated IT Investment and System Life Cycle Framework¹, the Exchange IT Systems Level 1 work plan continues the Initiation, Concept and Planning Phase activities already begun, encompasses the Requirements Analysis and Design Phases, and begins the Development and Test phase of Exchange implementation. Because California anticipates the use of competitively acquired services for development and implementation of the major Exchange systems, the planned activities are similar in scope to a system planning project as typically described in a Planning Advance Planning Document (P-APD), albeit reflecting a more aggressive timeline than is typical of such projects. A more aggressive schedule, dictated in part by the target implementation dates set out by the Affordable Care Act, is possible given adequate resources, expedited federal approval processes, and the acquisition policy flexibility provided to the Exchange under State law. A fundamental assumption of this grant application is that California does not have a preconceived notion of the high-level technical design of our Exchange systems and that the preliminary gap analysis does not suggest a compelling business case for a single definitive configuration based upon existing systems.

As discussed under "Demonstration of Past Progress," California is in the process of:

- Evaluating the requirements contained in the ACA, HHS Guidance for Exchange and Medicaid Information Technology Systems, Version 2.0 and Exchange Business Architecture Supplements ("Blueprints"), Section 1561 Recommendations and other documents,
- Refining the gap analysis based upon existing systems, and our current best understanding of the federal requirements and their implications,
- Engaging stakeholders, and
- Collaborating with the Medi-Cal program.

All of this is being done with a view toward supporting the development of a robust Business Process Model, which will form a key component of the Business/Operational Plan to be developed under this Level 1 grant. At the highest level, the work plan consists of three phases, with the first two more elaborated as part of the Level 1 plan:

¹ www.cms.gov/SystemLifecycleFramework/downloads/ILC_Framework_ACA.pdf

- Development of an IT strategy to meet Exchange requirements and support California's business operations approach, currently in progress and scheduled to be completed by October, 2011,
- Acquisition of the necessary services to implement the systems necessary to support the business operations approach, with vendors beginning work by March 2012, and
- Commencement of the development and test phase during the last months of the Level 1 grant period.

Key Tasks and Activities

The first phase of the project will focus on analyzing and modeling the currently known and emerging requirements, continuing the search for prospective reusable components, and developing a high-level technical design and Business Process Model to support the Business/Operational plan, to be presented to the Exchange Board in the fall of 2011. This phase consists of four major tasks in the work breakdown structure.

Task 1 - Analysis of requirements and support for Business/Operational planning, including ongoing elaboration of requirements and preliminary technical design and business models during the period up to and including the time of development of acquisition documents for development/implementation vendors. This process will be informed by stakeholder input, evaluation of existing California systems, early innovator state developments, the UX 2014 project and private sector market offerings, as well as California policy decisions and federal guidance and requirements as they continue to be issued and clarified.

Task 2 - Identification and assessment of prospective IT assets, including, as noted above, California eligibility and enrollment and other relevant systems, early innovator state developments and private sector offerings. We intend to actively seek information on private sector offerings, and expect to conduct a Request for Information (RFI) or similar type of process to obtain information from vendors.

Task 3 - Participation in the UX 2014 project, with an expectation of providing material input into this effort to design components of the high-quality customer experience envisioned by the ACA.

Task 4 - Evaluation of alternatives and selection of an IT solution strategy to support the Exchange Business/Operational objectives, with a view toward presenting the Exchange Board with an IT approach that supports timely and cost effective implementation of Exchange systems that deliver a high quality customer experience, seamless coordination between stakeholders, collaboration and shared resources, and adherence to standards.

The second phase of the project, covered in Task 5 of the work breakdown structure, will result in the acquisition of the products and services necessary to support Exchange IT operations. Upon Board approval of the Business/Operational plan, an acquisition strategy will be developed and executed. This task includes development and release of solicitation documents, evaluation of proposals, and approval of selected vendors by the Exchange Board.

The third phase of the project, Systems Development and Testing, covered in Task 6, is targeted to begin during the Level 1 grant period, in early 2012. The work breakdown structure is not elaborated at this time, given the need to complete the Phase 1 analysis and high-level design, and the Business/Operational plan before a tentative task and activity structure can be defined. At this time, Task 6 is framed around the key tasks and milestones contained in the grant announcement Appendix B.

Resources

The resources to support these efforts are set forth in the grant budget. The first phase of the project, as described above, will be staffed by a consultant team made up of experts in enterprise business, technical and data architecture and related fields. The Exchange has coordinated with the Medi-Cal program (Department of Health Care Services) for the engagement of consultants in early July 2011, so our aggressive schedule can be met. The Exchange will bring on its own additional consultant support as well. The second phase will be supported by another consulting team, bringing the necessary acquisition expertise to the effort.

Concurrently, the Exchange will recruit and hire its permanent IT staff, led by the statutorily authorized Chief Information Officer (CIO), and consisting of the various project management office (PMO) and administrative positions necessary to oversee and direct the entire effort.

Work Breakdown Structure

Below is a table of key tasks, activities and milestones for the California Exchange Level 1 IT work plan is included on the following pages.

CALIFORNIA EXCHANGE LEVEL I GRANT IT TIMELINE					
#	WBS-Code	Task Description	Mile-stone	Expected Start	Expected End
0	IT	Exchange Level 1 IT Plan		7/1/11	1/1/14
1	IT1	Analyze requirements and support Business Operational Planning		7/1/11	1/1/14
2	IT1.A	Complete preliminary business requirements analysis and modeling to support gap analysis and preliminary solution framework		7/1/11	8/11/11
3	IT1.B	**HHS Mandatory Milestone: Preliminary business requirements and IT architectural and integration framework	√	8/11/11	8/11/11
4	IT1.C	Obtain stakeholder input		8/1/11	9/20/11
5	IT1.D	Review, model and integrate emerging federal requirements		7/1/11	9/20/11
6	IT1.E	Collaborate with Business Operational Planning process		7/1/11	9/20/11
7	IT1.F	**HHS Mandatory Milestone: Prelim detailed design & system requirements documentation	√	9/30/11	9/30/11
8	IT1.G	Elaboration on system requirements & high-level technical design		8/12/11	9/20/11
9	IT1.H	Further elaboration to support vendor solicitation development		9/21/11	10/18/11
10	IT2	Identify and assess prospective IT assets/usable components		7/1/11	8/25/11

**CALIFORNIA EXCHANGE
LEVEL I GRANT IT TIMELINE**

#	WBS-Code	Task Description	Mile-stone	Expected Start	Expected End
11	IT2.A	Establish Initial Assessment Criteria		7/1/11	8/25/11
12	IT2.B	Complete assessment of State of CA Government Assets		7/1/11	8/25/11
13	IT2.B.1	Complete assessment of integrated eligibility systems (SAWS)		7/1/11	8/25/11
14	IT2.B.1.a	Complete assessment of C-IV		7/1/11	8/25/11
15	IT2.B.2.b	Complete assessment of CalWIN		7/1/11	8/25/11
16	IT2.B.1.c	Complete assessment of LEADER		7/1/11	8/25/11
17	IT2.B.2	Complete assessment of Healthy Families (MRMIB)		7/1/11	8/25/11
18	IT2.B.3	Complete assessment of MEDS		7/1/11	8/25/11
19	IT2.B.4	Complete assessment of other systems		7/1/11	8/25/11
20	IT2.C	Assess Innovator States Assets		7/1/11	8/25/11
21	IT2.C.1	Conduct preliminary screening		7/1/11	7/14/11
22	IT2.C.2	Conduct in-depth evaluation of selected states		7/15/11	8/25/11
23	IT.2.D	Assess COTS and other vendor offerings		7/1/11	8/15/11
24	IT2.D.1	Develop RFI		7/1/11	7/21/11
25	IT2.D.2	Issue RFI	√	7/25/11	7/25/11
26	IT2.D.3	Receive RFI Responses		7/25/11	8/15/11
27	IT2.D.4	Evaluate RFI Responses		7/26/11	8/15/11
28	IT3	Participate in UX 2014 Project		7/1/11	10/6/11
29	IT3.A	Participate in development of UX 2014		7/1/11	10/6/11
30	IT3.B	Make decision on CA use of UX 2014	√	9/22/11	9/22/11
31	IT4	Alternatives analysis for IT solution strategy to support Business/ Operational objectives		8/26/11	10/21/11
32	IT4.A	Develop alternative descriptions/ scenarios		8/26/11	9/15/11
33	IT4.B	Evaluate and rank alternatives		8/26/11	9/19/11
34	IT4.C	Develop recommendation(s) to Board		8/26/11	9/20/11
35	IT4.D	Present alternatives and recommendation(s) to Board	√	9/27/11	9/27/11
36	IT4.E	Board adopts recommendation(s)	√	10/21/11	10/21/11
37	IT5	Conduct Acquisition Process		8/26/11	3/13/12
38	IT5.A	Develop acquisition strategy		8/26/11	9/22/11
39	IT5.B	Develop vendor solicitation(s) to support adopted approach		9/20/11	10/21/11
40	IT5.C	Submit vendor solicitation(s) to CMS for approval	√	10/21/11	10/21/11
41	IT5.D	Receive CMS approval to release vendor solicitation(s)	√	12/9/11	12/9/11
42	IT5.E	Manage Proposal Writing Period		12/12/11	1/23/12
43	IT5.E.1	Issue vendor solicitation(s)	√	12/12/11	12/12/11
44	IT5.E.2	Respond to vendor inquiries		12/12/11	1/13/12
45	IT5.E.3	Conduct vendor conferences if needed		12/12/11	1/13/12

**CALIFORNIA EXCHANGE
LEVEL I GRANT IT TIMELINE**

#	WBS-Code	Task Description	Milestone	Expected Start	Expected End
46	IT5.E.4	Receive vendor proposals	√	1/23/12	1/23/12
47	IT5.F	Evaluation Process		1/23/12	2/29/12
48	IT5.F.1	Evaluate proposals		1/23/12	2/23/12
49	IT5.F.2	Document recommended selection(s)		1/23/12	2/23/12
50	IT5.F.3	Board adopts recommended selection(s)	√	2/29/12	2/29/12
51	IT5.G	Negotiate contract(s)		2/29/12	3/13/12
52	IT5.H	Vendors start work	√	3/13/12	3/13/12
53	IT6	Systems development & testing		3/14/12	12/10/13
54	IT6.A	Finalize business and system requirements		3/14/12	5/22/12
55	IT6.B	**HHS Mandatory Milestone: Final business requirements and interim detailed design & system requirements documentation	√	5/22/12	5/22/12
56	IT6.C	Finalize technical architecture		3/14/12	4/24/12
57	IT6.D	**HHS Mandatory Milestone: Final requirements (and design) documentation	√	4/24/12	4/24/12
58	IT6.E	Perform systems development and testing		3/14/12	12/10/13
59	IT6.F	**HHS Mandatory Milestone: Preliminary/interim development of baseline system	√	6/29/12	6/29/12
60	IT6.G	**HHS Mandatory Milestone: Final development of baseline system	√	9/30/12	9/30/12
61	IT6.H	**HHS Mandatory Milestone: System/integration testing	√	12/31/12	12/31/12
62	IT6.I	**HHS Mandatory Milestone: Final user testing	√	9/30/13	9/30/13
63	IT6.J	**HHS Mandatory Milestone: End-to-end testing & security validation review	√	9/30/13	9/30/13
64	IT7	Systems Implementation/ Deployment		3/31/13	9/30/13
65	IT7.A	Launch information website	√	3/31/13	3/31/13
66	IT7.B	**HHS Mandatory Milestone: Operational readiness review	√	9/30/13	9/30/13
67	IT7.C	Launch comparison tool with pricing information	√	9/30/13	9/30/13
68	IT7.D	Launch enrollment functionality	√	9/30/13	9/30/13
69	IT8	System Operations		9/30/13	1/1/14
70	IT8.A	Open enrollment		9/30/13	12/31/13
71	IT8.B	First effective date of coverage	√	1/1/14	1/1/14