MAXIMUS
HELPING GOVERNMENT SERVE THE PEOPLE

Budget Projections

	Updated: July 30, 2013	2010/2011	2011/2012	2012/2013	2013/14	Total
	BUDGET					
	Total	$10,282,232	$15,889,000	$4,098,534		$30,383,030
	PLAN	Actual	Actual	Actual		
	Total	$10,282,232	$16,554,091	$5,998,365		$32,834,688
	VARIANCE from Original Budget	$0	-$665,091	-$1,899,831		
	Adjustments for Change					
	Scope increases from 11 approved change requests		$1,000,000			
	Scope increases from 12 approved change requests			$1,344,204		
	Current Total		**$334,909**	**-$555,627**		
	Note: 2012/13 Actual includes Fixed Price of $5,596,081					

	Fiscal Year 2013/14	**Project Funding**	**Other Funding**	**FY 2013/14**
	CR2012-017 Conformance Test Case Updates Amended (Vendor Self-Test)	$32,000		$32,000
	CR2013-003 PMP Conformance Testing ARI	$83,000		$83,000
	CR2013-002 PMP Conformance Testing TELUS (May 23/13 - On Hold, Jun 14/13 - Moved to SR)	~~$237,000~~		
	CR2013-007 Conformance Med Access and Updates from Conf Specs (May 23/13 - On Hold, Moved to SR)	~~$317,000~~		
✓	CR2013-008 PMP Health Sector Firewall and Network Move		$188,000	$188,000
	CR2013-009 PMP Relese 3 Planning and Requirements (May 23/13 - On Hold, Jun 14/13 - Moved to SR)	~~$140,000~~		$0
	Total	**$115,000**	**$188,000**	**$303,000**

	Project Cost 2013/14	Estimate	Actuals	Remaining
	CR2012-017 Conformance Test Case Updates Amended (Vendor Self-Test)	$32,000	$0	$32,000
	CR2013-003 PMP Conformance Testing ARI	$83,000	$29,092	$53,908
✓	CR2013-008 PMP Health Sector Firewall and Network Move	$188,000	$170,582	$17,418
	Total	**$303,000**	**$199,674**	**$103,326**

PharmaNet Modernization Progress Report (JPMT)

MAXIMUS CANADA A MAXIMUS Company

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-Mar-16	2013-Mar-29
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status G Y R
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure	G
Quality	Adhering to MAXIMUS methodology	G
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Production Pilot - Nov 13 – 27, 2012 - completed Phase 2 – Pharmacy Production Deployment (Gibsons) - Mar 30-31 Phase 3 – EMR Production Deployment - TBD	G
	Release 2.0 PharmaNet Infrastructure Upgrade Go Live – planned for March 28, 2013. Delayed to May 16, 2013. Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines.. ARI Conformance Testing added to Project Scope. Schedule is at risk due to tight itmelines. Go Live deferred to May 16, 2013. Network and Firewall issue may cause delays to May 16 Go Live.	Y
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2012-017, CR2012-019) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report • ARI Conformance Testing		G
Release 2.0 Delivered since the last report • Service Order 2013-04 for Feb/Mar 2013 – Approved. Sign-Off in progress.		G
2. Outstanding Issues and Actions.		Y

Green = No concerns on schedule and within budget Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover	0%	Not started.
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Key Open Project Issues

Status (G Y R)	Priority	Detailed Description	Business Impact	Proposed Resolution
G	High	Ministry requirement change to send files to Condor via SFTP rather than FTP. Decision required by Friday Mar 22 as to if MAXIMUS must change to accommodate this.	Additional development, testing and infrastructure changes required to accommodate this change. MAXIMUS estimate this will take 4-6 days to complete, and we need a decision this week notifying us if we are to proceed with this change or not.	Ministry decision required by Mar 22 on if this must be changed. If so CR to be raised as per email estimate provided to Ministry on Mar 20 – overdue. ** Mar 28, 2013 – Ministry Decision is to change to SFTP. MAXIMUS to make changes to accommodate this in R2 as per estimate provided.
Y	High	Potential Impacts to Release 2 Go Live due to the move to Health Sector Firewall planned prior to Release 2 Go Live. This was not in the PharmaNet Modernization Project Plan as it was targeted for 6-9 months from now, well after Release 2 Go Live.	Firewall change may result in delayed or unsuccessful deployment of Release 2.	Request Move to Health Sector Fire Wall be implemented after Release 2 Go Live and Stabilization. Ministry are in agreement to defer this until after Release 2 Go Live and recommended this at meetings between Ministry, SSB and HP. Awaiting decision on this.
Y	High	New Firewall will result in changes to PharmaNet Operational processes as to how we request access for a new POS. Additional effort and lead time required to execute requests for onboarding new POS We need to make sure MoH, SSBC and HP have worked out the process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.	1. Request Move To New Firewall be delayed until After Release 2 Go Live and Stabilization. 2. Make sure MoH, SSBC and HP have worked out the process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures. 3. Allow time to establish new process and how we deal with additional lead times and effort required.	Request Move to Health Sector Fire Wall be implemented after Release 2 Go Live and Stabilization We need to make sure MoH, SSBC and HP have worked out the process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Increased Scope will impact project timelines	PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines.
G	High	Potential Impact to Release 2 Go Live due to Annual Retro Run. Each Year Annual Retro is run from Feb to May 1 to reimburse families		Feb 5 – MAXIMUS submitted DR Outlining Options for Decision for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		who have overpaid for Prescriptions. This overlaps Release 2.0 Deployment Activities which cannot both be run at the same time. Three Options presented in a new DR will outline impacts and decision must be made to either delay Retro or delay R2 Go Live.		show Option 1 during Stabilization. MAXIMUS updating DR to re-submit. Feb 27 – Ministry signed DR approving Option 1.
G	High	Early Adopter Deployment dates cannot keep changing and moving closer to Release 2.0 or will impact Release 2.0 Business Acceptance Activities and possibly Release 2.0 Go Live. Early Adopter Deployment Phase 1 was planned for April 2012, delayed to July 2012, then Sept 2012, then Oct 2012, and now planned for Nov. Phase 1: Nov 13-27 – Done Phase 2: March 30-31 – Done Phase 3: TBD	Release 2 Business Acceptance Testing activities moved to accommodate EA Deployment planned for Sept 2012 - Test Case Development moved from Sept 2012 t Nov 2012 - Test Case Execution moved from Nov/Dec 2012 to Jan/Feb 2012 - Test Case Execution moved again to Feb/Mar 2012 - Potential risk to push out Rel 2 Go Live	Release 2.0 Business Acceptance Activites have been delayed to accommodate EA Conformance. Once all EA Deployments are complete, MOH will meet with MedAccess, MOH and do a formal lessons learned and have a formal assesment document. Target completig interviews and qustionaire by mid Dec. EA Phase 2 is yet to be scheduled. This will be aligned so as not to impact Release 2.0 Go Live. Current projeted date for Phase 2 is March 28, 2013 – to be confirmed. Feb 14 – Ministry are requesting an additional round of testing for MedAccess and ARI be completed prior to March 31, 2013. MAXIMUS are evaluating and will include in a CR. MAXIMUS prepared CR and sent to MOH. Ministry approved CRs for MedAccess and ARI. Ministry later decided not to conformance test MedAccess and to use funding to support TELUS and wlakthough test cases with TELUS. Phase 2 completed March 31, 2013 Phase 3 to be scheduled
G		Conformance Specifications are not final for General Deployment. Final version was to be published Jan 4, 2013. DRAFT Specifications delivered in Jan, but require clarification. Updated version delivered in Feb, but not Final. Several rule clarifications / interpretations still exist and some	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance Testing. 4. Incorect or incomplete test cases.	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry have updated documents and had a 2 hour workshop with MAXIMUS to review. Documents also released to TELUS and MedAccess. Ministry feel they are on track to have confromance specs ready for test case devleopment.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		rules were aligned to MedAccess that may be inacurate, causing negative impact to future vendors.		** Conformance Specs must be finalized to a version that can be used for Test Case Development and Vendor Development. Specifications will be finalized before General Deployment.
G	High	Release 2 CATAMARAN Server Code Drop delayed due to runtime issues on Solaris NetX Platform. Due July 12, 2012 Catamaran targe delivery date of Aug 14 +/- 7 days This would push go live past FY to April 17, 2013. MAXIMUS assessed options to mitigate and achieve Go Live by March 28, 2013.	Delays to Release 2.0 schedule and GO LIVE. Project must implement this FY ** This must be mitigated to achieve Mar 2013 Go Live	CATAMARAN added resources and worked over-time to deliver by Aug 20, 2013. Option of phased delivery explored, but not feasible. Daily check-point meetings setup between MAXIMUS and CATAMARAN to track progress MAXIMUS development team packaging server code drop and NetX profiles to deploy to test Sep 14 – MAXIMUS deployed Server Code Drop to Test. MAXIMUS assessed scheudle impacts and re-planned to deliver GO LIVE by March 28, 2012
G	Low	Potential delays to Release 2 Go Live due to SSBC not signing agreement with HP and delaying HP from moving infrastructure from TELUS Data Center to SSBC Data Center. Agreement is now signed but delayed resulting in delays to HP which could impact PharmaNet infrastructure setup	Potential delays to Release 2.0 Go Live	MAXIMUS will continue to monitor progress of HP Data Center Move Project – PharmaNet Project activities have been prioritized within the Data Center Move Project to keep on schedule for PharmaNet Release 2.0 Go Live. This is currently tracking to schedule. Jan 21 – Data Center Move successfully completed over the weekend.

Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
NEW	High	Ministry Decision to allow Med Access to Go Live in Production without fully testing result in the following: 1. Conformance Specifications are unclear in areas, were updated to align with this vendor, and have not been fully tested by this vendor, or	The following impacts may result; 1. Data Integrity Issues 2. Patient Safety issues 3. Increased Production Support effort and costs 4. Potential down-time of PharmaNet. 5. Conformance Specifications	MAXIMUS have notified the Ministry of the Risks recommending that MedAccess be fully tested before Go Live in Production.	High	High	Scope, Quality and Budget

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		any other vendor 2. Conformance Test Cases have not been fully tested 3. MedAccess did not pass the last round of Conformance Testing. 4. Vendor software changes have been made without fully testing changes. 5. Patient Safety Issues may result due Incorrect data entering PharmaNet and being used 6. Increased production support and data integrity issues	do not match the intent and are incorrectly interpreted by other vendors. 6. Conformance Test Cases may not match the intention of the Specification and not adequately test for required conditions as not clearly stated in specifications. 7. Other Vendors may not correctly develop to the intent of the specifications 8. Other vendors may not be adequately tested before going to production 9. Other vendors may change their software incorrectly to match the specifications aligned for MedAccess that are incorrect.				
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, SSBC, HP, MoH have proposed moving MAXIMUS production servers) from the current firewall (ie. "zone b" firewall) to a new "Health Sector" firewall before Release 2.0 Go Live. The "Health Sector" firewall is already established in Calgary and is in MoH's/HP's plan to establish one in STMS Kamloops – however not for 6-9 months. This was not in the PharmaNet Modernization Project Plan as this was planned for 6-9 months from now, well after Go Live.	Potential Impact to Release 2 Go Live and may result in unsuccessful deployment of PharmaNet Release 2.	Request Move To New Firewall be delayed until After Release 2 Go Live and Stabilization.	HIGH	High	Schedule and Scope
NEW	High	As part of the PharmaNet IP	PharmaNet Operational for	1. Request Move To New	High	High	Schedule

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
		transition from 4000 Seymour to STMS Kamloops, responsibility of updating the firewall entries for new Pharmacies onboarding to access the PharmaNet application will be moved from SSBC to HP – as HP will be managing the firewall in STMS Kamloops. Existing process of requesting firewall updates will change from current "ITIMS" ticket to SSBC to future HP iStore request for firewall updates. Pharmacy Network connectivity and access is not MAXIMUS responsibility. MAXIMUS is part of the process (as there is a step in the process to update a security table in the PharmaNet database).	onboarding new Pharmacies will change. Additional effort and lead time required. MoH, SSBC and HP must establish new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.	Firewall be delayed until After Release 2 Go Live and Stabilization. 2. MoH, SSBC and HP have established new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures. 3. Assess how to deal with additional lead times and effort required.			and Scope
528682	High	Project M102 Project Cannot keep pace with schedule for deliverable target dates. Schedule may slip due to 1-required project decisions and approvals not being made in time 2-specific project milestones not on the critical path are not met in time 3-estimated effort is insufficient to complete deliverables 4-financial risks and controls standards are not met 5-Early Adopter Points of Service Vendors (EMR or Pharmacy) are not ready to conformance test when scheduled by the project 6-early Adopter Point of Service Vendors (EMR or Pharmacy) withdraw from project prior to	Could result in 1-Delays final deployment date for Rel 1.1 and/or Rel 2 2-Continue to lose stakeholder support 3-Scope may have to be reduced to meet project timelines Pharmacy Vendor delays resulting in rescheduling, re-planning, moving things around. Large impact on operations.	Mitigate	Medium	High	Schedule and Budget

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		deployment					
528683	Normal	Project M104 Project expenditures or forecasts exceed available funding, or funding is reduced and allocated to other higher priority projects, which may result in project not being able to accomplish the PharmaNet Modernization Vision, and possible cancellation of the project	Project could be reduced or cancelled	Mitigate	Medium High	Medium High	Budget
544671	Normal	Release 2 Execution of Data Conversion for Release 2.0 may not fit in a single change window, and may need to be split into 2 or more windows.	Data Conversion activities to be assessed. If required, split activities between 2 or more scheduled change windows within existing timeline.	Mitigate – As with Release 1.0, MAXIMUS will assess the probability of this and determine how Data Conversion can be executed. If required, MAXIMUS will arrange with the Service Provider to split activities between multiple change windows and extend the hours of the change window if required.	Medium	Medium	Schedule
528680	Normal	Project M111 Scope (Solution Requirements) Change over the Project Life Cycle. PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Anything that adds to scope will impact project timelines.	Mitigate – No new scope to be added unless essential. MAXIMUS to assess impacts of any changes such as SRs and Change Requests will be raised to document and approve any change in scope.	Medium	Medium	Schedule & Budget

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Y	High	Potential Impacts to Release 2 Go Live due to the move to Health Sector Firewall planned prior to Release 2 Go Live. This was not in the PharmaNet Modernization Project Plan as it was targeted for 6-9 months from now, well after Release 2 Go Live.	Firewall change may result in delayed or unsuccessful deployment of Release 2.	Request Move to Health Sector Fire Wall be implemented after Release 2 Go Live and Stabilization. Ministry are in agreement to defer this until after Release 2 Go Live and recommended this at meetings between Ministry, SSB and HP. Awaiting decision on this.

Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Service Order 2013-04 Feb/Mar 2013 for work added after SO 2013-003 Signed	Mar 28, 2013	Ministry Sign-Off	Mar 28, 2013	Overdue	Service Order drafted and approved for Feb/Mar activities above the current SO 2013-04. Mar 28 – SO Approved and signed by MAXIMUS. Ministry to sign today. Apr 2 - Waiting for Ministry Sign-Off – Overdue.
Service Order for Fiscal Year 2013/14	Mar 28, 2013	Ministry to Draft, Finalize, Approve and Sign-off	Apr 2, 2013	Overdue	Service Order needs to be created for FY 2013/14 activities above the Fixed Price from last Fiscal Year. Ministry to draft before April 2, as this is required for work to continue on Apr 2, 2013. Apr 2 – Ministry to draft SO, review and approve with MAXIMUS and Ministry contracts, finalize and Sign-Off.
Decision on timing of Health Sector Firewall Move	Mar, 2013	Ministry Decision	Mar 26, 2013	Overdue	Health Sector Firewall move planned for 6-9 months after Release 2 Go Live. SSBC and HP would like to move this up to before Release 2 Go Live. If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before Network Move and therefore will dely Go Live by 2-3 weeks. CR will be created to document the change that will delay the Network Move and therefore delay Release 2 Go Live. This will also impact existing PRODUCTION

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					applications that are on Zone B. These must be moved before R2 Go Live.
Ministry Decision on Network move from 4000 Seymour to Kamloops will result in additional scope and delays	Mar 2013	Ministry Decision	Mar 26, 2013	Overdue	Network move from 4000 Seymour to Kamloops will result in additional scope and delays 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Llive as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. However these are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project.
Early Adopter Deployment Release 1.1 Communication Activity Matrix	Jan 29, 2013	Ministry to develop	Feb 5, 2013	In Progress	Ministry to develop Communication Activity Matrix for Release 1.1. Phase 2 Communication Working Group formed to develop this. April 2 – EA Deployment completed for Phase 1 and 2. Matrix will be completed prior to Phase 3.
Release 2.0 Communication Activity Matrix	Jan 29, 2013	Ministry to Finalize	Apr 11, 2013	In Progress	Ministry to develop Communication Activity Matrix for Release 2.0 Communication Working Group formed to develop this. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Mar 28 – Drafted and updated. Needs finalization and approval.
Ministry Communication Plan	Apr 2, 2013	Ministry to Finalize	Apr 11, 2013	In Progress	Communication Working Group formed to develop the Communication Plan for

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix. Howard to provide a draft to CWG by Mar 8 Mar 19 – Draft Communication Plan provided to MAXIMUS. This will be a living document and updated to add new deployments. Release 2 Plan Update and Sign-Off – April 11, 2013 Release 1.1 Phase 3 Plan Update and Sign-Off - TBD
CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 22, 2013	Ministry Approval	Mar 26, 2013	Overdue	Feb 21 - MAXIMUS created and submitted CR2012-008 Amended2 to revise scope as per Ministry Decision not to Conformance Test MedAccess, and instead support TELUS and walkthrough Test Cases. Mar 22, 2013 – CR updated to reflect new scope and submitted to Ministry for Review and Approval. Due Mar 26, 2013. Apr 2 – Overdue.
CR2013-002 PMP Conformance Testing TELUS	Apr 2, 2013	Ministry Approval	Apr 5, 2013	Submitted	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 28 – Ministry requested CR be updated and resubmitted to include FY 13/14 only. MAXIMUS updated CR and resubmitted on April 2, 2013 with due date of April 5, 2013.
Ministry Decision on File Transfer Method to Health Ideas via Condor. Does this stay with FTP or change to SFTP as per new Ministry Requirement.	Mar , 2013	Ministry Decision	Mar 22, 2013	Decision =SFTP Mar 28, 2013	Mar 20 – MAXIMUS provided estimate and requested Ministry Decision by Mar 22. Overdue. Mar 25 – MAXIMUS requested response today. Decision is SFTP.

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Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2
Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"
Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.
Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing
Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. Approved.
Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress
Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope?	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.

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Approved	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 6 – Approved and Signed Off
Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 21 – MAXIMUS amended CR2012-008 to revise scope to reflect Ministry Decision not to conformance test MedAccess and to use remaining time in CR for TELUS support and walkthrough of Test Cases. Mar 22 - Submitted to MOH. Due Mar 26, 2013.
Submitted	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27 Mar 28 – Ministry requested CR be updated to include FY 13/14 scope only. MAXIMUS updated CR and resubmitted April 2, 2013 with due date of April 5, 2013
Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.

Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 – Pharmacy Production Deployment (Gibsons)	Done	Mar 30-31, 2013
	Phase 3 – EMR Production Deployment - TBD	Pending	TBD
Milestone	Conformance Test Case Updates	In Progress, Done for Vendor Testing	
	Release 2		
Milestone	Test Case Development Complete	Done	Mar 31,2013
Milestone	Business Acceptance Test Case Development Complete	In Progress	
Milestone	Test Case Execution Complete	In Progress	

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Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25 , 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	Jan 6, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization.
	Conformance Test Case Updates based on Final Conformance Specification - EMR	MAXIMUS	Mar 4, 2013	10%	G	In Progress
	Conformance Test Case Updates based on Final Conformance Specification - Pharmacy	MAXIMUS	Apr 8, 2013	10%	G	In Progress
	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	G	In Progress
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		100%	G	Done
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done
	Phase 1 Go Live	MOH	~~Oct 22, 2012~~ Nov 14, 2012	100%	G	Done
	Phase 2 Go Live	MOH	Mar 31, 2013	100%	G	Done
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012.

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					G	Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012
D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done. Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Apr 5, 2013	75%	G	In Progress. This is being delivered in groups.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done. Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done. Approved Dec 28, 2012. Signed Off.
M	R2 - Test Case Development • Admin Portal – 100% • Non-functional – 100% • Batch Interface Reports – 100% • Functional Regression –100% o Screens – 100% o Server / Transactions – 100% • CPRS –100% • Data Migration – 10% • CAS – 100% • BAT – 100% • HIAL – N/A • EMPI – N/A	MAXIMUS	Jan 31, 2013	100%	G	Done
M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul , 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done. Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	Apr 5, 2012	75%	Y	In Progress. Batches are delivered in stages starting in Sep.
D	Updated Training Plan – R2	MAXIMUS	Sep , 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete	MAXIMUS	Feb 14, 2012	75%	G	In Progress

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	• Admin Portal – 94%
	• Non-functional – 0%
	• Batch Interface Reports – 94%
	• Functional Regression – 98%
	  o Screens – 100%
	  o Server / Transactions – 100% - pending defect fix
	  o Business Config – 0%
	• CPRS – 70%
	• Data Migration – 0%
	• CAS – 50%
	• BAT – 60%
	• HIAL – N/A – Performance only
	• EMPI – N/A – connectivity test only					

M	BAT Test execution Complete PMP Screens – in progress CPRS – in progress HIBC Admin - Pending	MAXIMUS	Apr , 2013	25%	G	In Progress
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
W	Deploy ALL to Production for Dry Run and Performance Testing	MAXIMUS	Feb 8, 2013	75%	G	In Progress
W	PROD Dry Run and Data Migration Test	MAXIMUS	Apr 5, 2013	50%	G	In Progress
D	Deployment Plan	MAXIMUS	Apr 12, 2013	25%	G	In Progress
M	Communication Activity Matrix	MOH	Apr 12, 2013	50%	Y	In Progress
D	Communication Plan	MOH	Apr 12, 2013	50%	Y	In Progress
W	MAXIMUS Go No Go Decision	MAXIMUS	Apr 18, 2013	0%	G	Pending
D	Updated Disaster Recovery Plan Document	MAXIMUS	Apr 19, 2012	50%	G	In Progress
M	Performance Testing Complete	MAXIMUS	Apr 19, 2013	0%	G	Pending
M	Disaster Recovery Testing Complete	MAXIMUS	Apr 19, 2013	0%	G	Pending
D	R2 Defect Action Plan	MAXIMUS	Apr 24, 2013	0%	G	Pending
M	R2 Final Test Results Summary	MAXIMUS	Apr 24, 2013	0%	G	Pending
D	Support of Ministry Risk and Controls Review for Rel 2	BMO	Apr 25, 2013	25%	G	In Progress
M	Ministry Risk and Controls Report Complete	MOH	Apr 25, 2013	10%	G	In Progress
M	Ministry Go/No Go decision R2 to deployment	MAXIMUS	Apr 25, 2013	0%	G	Pending
M	Production Environment Ready	MAXIMUS	May 9, 2013	25%	G	In Progress
M	Production Support Strategy and Plan	MAXIMUS	May 16,2013	25%	G	In Progress
M	DR Environment Ready	MAXIMUS	May 16, 2013	10%	G	In Progress

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M	R2 Deployment Complete	MAXIMUS	May 16, 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Aug 16, 2013	0%	G	Pending
	Proposed Release 3.0 New Functional Release (Record Locking and Clinical Services)					
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Test)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN Code Drop – Rel 3.0 to Test	CATAMARAN	TBD	0%	G	Pending
M	Test Rel 3.0	MAXIMUS	TBD	0%	G	Pending
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Prod)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN ode Drop – Rel 3.0 to Production	MAXIMUS	TBD	0%	G	Pending

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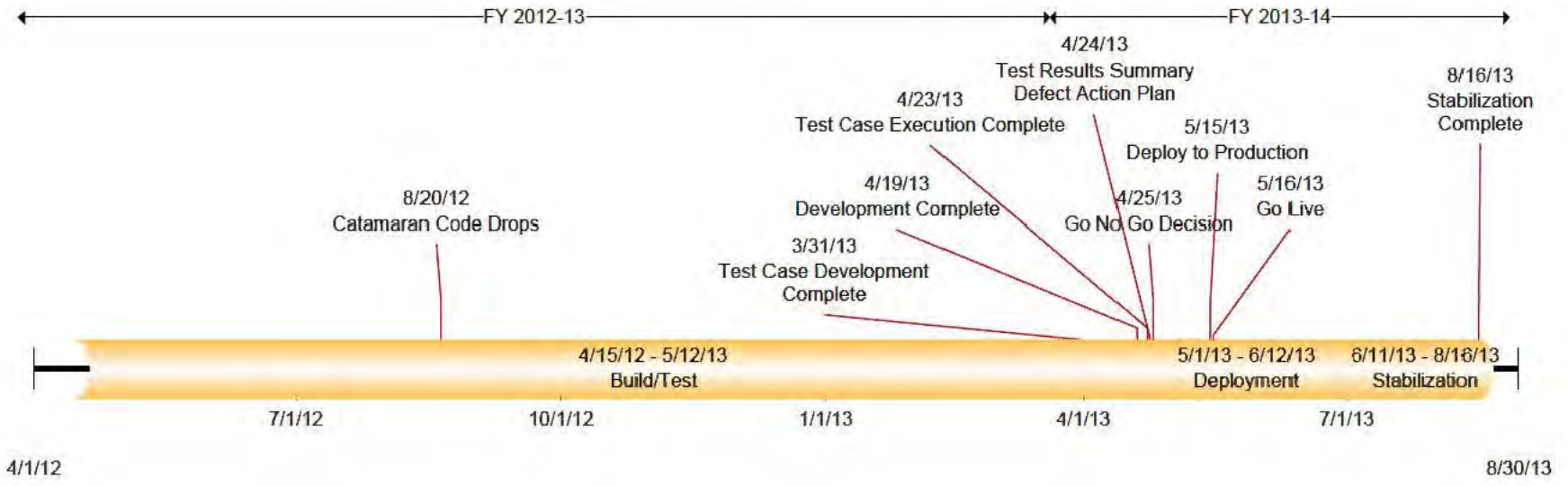
1. PharmaNet Modernization:

Release 2 Footprint & Milestone Targets



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PharmaNet Modernization Progress Report (JPMT)

MAXIMUS CANADA A MAXIMUS Company

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-Jun-08	2013-Jun-21
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status G Y R
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure – Added Scope of Health Sector Firewall and additional Testing of Move from Seymour to Kamloopsl.	Y
	Release 3.0 High Levl Requirements and Planning – On Hold. Now being done under SR	G
Quality	Adhering to MAXIMUS methodology	G
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Production Pilot - Nov 13 – 27, 2012 - completed Phase 2 – Pharmacy Production Deployment (Gibsons) - Mar 30-31 completed Phase 3 – EMR Production Deployment - TBD	G
	Release 2.0 PharmaNet Infrastructure Upgrade Go Live – Delayed to July 6/7 Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines. ARI Conformance Testing added to Project Scope. Schedule is at risk due to tight itmelines. Go Live deferred to May 16, 2013. Health Sector Firewall Decision wil Delay Go Live to June 19, 2013. Ministry Decision to Go Live on Sat/Sun moves Go Live to June 22/23. May 23 – Mnistry Decision to delay Go Live to July 6/7 due to ability to communicate to External Stakeholders on extended Pharmanet change window and the Network Move Project in flight.	Y
	Release 3.0 – High Level Requirments and Planning – June 30, 2013 , moved to SR	G
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2013-003) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency. Service Order for 2013/14 is not yet finalized.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report • SR to replace CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only - Approved		G

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• SR to replace CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs – Approved	
Release 2.0 Delivered since the last report • Draft Release 2 Deployment Plan • Draft Deployment Change Window Activities • Draft Deployment Day Contact List • SR to replace CR2013-009 Release 3 Requirements and Planning – Approved • Non Functional Testing complete • BAT Testing complete • Information in Support of Ministry Risk and Controls Review • Data Migration Testing Sign-Off • BAT Testing Sign-Off	G
2. Outstanding Issues and Actions.	Y

Key Open Project Issues

Status (G Y R)	Priority	Detailed Description	Business Impact	Proposed Resolution
R		Ministry Network Move Project End to End testing is at risk of not completing in time for PharmaNet R2 Go Live. 1. End to End Testing Run does not complete as planned. 2. OCIO Exemption is not completed and signed off in time. 3. Full STRA may be required, and may not be completed and signed off in time. 4. Outstanding decision on encryption for College of Pharmacies. VPN may be used. There must be a contingency plan for a revised Go Live Date if this testing cannot be completed successfully	Potential delays in Ministry Network Move project could result in delays to Release 2 Go Live. 1. Delays to R2 Go Live 2. Delays to R2 Go Live. This has been submitted to OCIO pending aproval 3. Delays in R2 Go Live. This has been submitted to OCIO pending approval. 4. Delays to R2 Go Live. VPN has been approved and will be tested on or before final end to end test planned for Jun 27	MAXIMUS Raised Issue paper on this on May 17, 2013 and delivered to Ministry identifying that if end to end testing was to take place it would need to be planned with the POS to ensure it could be completed in time. Due date for confirming this was Friday May 24, 2013 Jun 6 – End to end testing arrangements pending. June 17 test was incomplete June 20 could not complete and was cancelled. June 27 – test being scheduled and will add in End to End. There must be a contingency plan for a revised Go Live Date if this testing cannot be completed successfully
Y	High	Release 2: Ministry Pharmacy Network Move from 4000 Seymour to Kamloops must complete in time for Release 2.0 Go Live Mnistry Decision to delay Go Live to July 6/7 due to ability to communicate to External Stakeholders on extended Pharmanet change window and the Network Move Project in flight MAXIMUS to prepare impact	If Ministry Network Move is not completed in time it will delay PharmaNet Release 2 Go Live planned for Sun July 7, 2013.	Ministry Network Move Project meetings taking palce to align with PharmaNet Modernization Project. **June 21 – June 17 test was incomplete June 20 could not complete and was cancelled. June 27 – test being scheduled and will add in End to End. There must be a contingency plan for a revised Go Live Date if this testing cannot be completed

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		assessment of delaying Release 2.0 Go Live to July 6/7		successfully
Y		Additional Scope of End to End Testing added to Ministry Network Move Project will add scope to PharmaNet Modernization Project. Ministry Decision to proceed with End to End Testing on June 13, June 20, and June 27	*** Additional scope of End to End Testing and Impact of delays to Go Live as a result of Network Move Delays will need to be added to the CR2013-008 and approved	MAXIMUS to update CR2013-008 to reflect this and support Ministry in their leading end to end testing. Agreement made that additional rounds of end to end testing will be billed to CR2013-008
Y		Deloitte is working to assess whether there is any financial risks associated with the Operational Data Replication for the Release 2.0 of PharmaNet as it relates to the payment process. Outstanding decisions remain on these that could impact Release 2 Go Live.	Delays or impact to Release 2 Go Live depending on results of financial risk assessment.	Results of financial risk assessment to be communicated. Any potential impacts to release 2 Go Live need to be raised now so they can be addressed in time for Go Live.
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Increased Scope will impact project timelines	PharmaNet Modernization Scope needs to be frozen. Anything that adds to scope will impact project timelines.
Y		Conformance Specifications further delayed. Version to be published Jan 4, 2013, delayed to Feb 2013, then April 2013, then May 15, 2013. Wiating for Minstry to release this version. Final version for General deployment to be produced later. Several rule clarifications / interpretations still exist and some rules were aligned to MedAccess that may be inacurate, causing negative impact to future vendors.	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance Testing. 4. Incorect or incomplete test cases.	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Now delayed to May 15, 2013 and overdue. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry to provide upated Conformance Specs to MAXIMUS by May 15, 2013 – overdue. May 23, 2013 Ministry have put CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs on Hold. ** Conformance Specs must be finalized to a version that can be used for Test Case Development and Vendor Development. Specifications will be finalized before General Deployment.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
G		Ministry Communication Plan and Activity Matrix must be updated and communicated to Stakeholders to include delayed Go Live Date of July 7, change window July 6/7 and availability during the change window.	Communication to Stakeholders	Ministry to update Communication Plan and Activity Matrix and communicated to Stakeholders to include delayed Go Live Date of July 7, change window July 6/7 and availability during the change window. This is now complete and can be closed.
G		Impact of delay of Release 2 Go Live to July 6/7. May 23 – Ministry Decision to delay Go Live to July 6/7 due to ability to communicate to External Stakeholders on extended Pharmanet change window and the Network Move Project in flight. MAXIMUS to assess impacts	MAXIMUS Assessing Impact. Communication to stakeholders	Ministry Decision Go Live delayed to July 6/7 MAXIMUS Impact Assessment prepared and send to Ministry on May 31, 2013 MAXIMUS and Ministry following up with external stakeholders. This can now be closed

Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
553417	High	Ministry Network Move – outstanding decision on if encryption is required for the College of Pharmacies could delay R2 Go Live	If encryption is required it will delay R2 Go Live	Issue paper raised may 17, 2013 to Ministry identifying decision required by May 24, 2013 so as not to impact R2 Go Live. VPN testing underway. Ministry decision to complete in time for R2 Go Live	High	High	Schedule, Budget
553418	High	Ministry Network Move – outstanding OCIO Exemption may not be completed in time for R2 Go Live.	Delays or impacts to R2 Go Live	Issue paper raised may 17, 2013 to Ministry identifying exemption must be done by May 24, 2013 and submitted to OCIO so as not to impact R2 Go Live. Ministry to ensure completion in time. OCIO Exemption submitted on Jun 20.	High	High	Schedule, Budget
553419	High	Ministry Network Move – full STRA may be required which may not complete in time for R2 Go Live.	Delays or impacts to R2 Go Live	Issue paper raised may 17, 2013 to Ministry identifying STRA must be done by May 24, 2013 and submitted to OCIO so as not to impact R2 Go Live. Ministry to ensure completion in time. STRA	High	High	Schedule

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
				submitted Jun 20.			
553420	High	Testing with Health Ideas must be completed to satisfy Risk and Controls for CAS Reconciliation process for R2 Go Live. MAXIMUS testing completed in May. AHIP Validation outstanding since May 31.	Delays or impacts to R2 Go Live	AHIP testing requested in advance and several follow ups done by MAXIMUS. Escalated to Ministry on June 13, 2013 requesting completion so as not to delay Go Live. Ministry escalated and will be completed by June 21, 2013 so as not to delay R2 Go Live.	High	High	Schedule, Budget
553421	High	Deloitte is working to assess whether there is any financial risks associated with the Operational Data Replication for the Release 2.0 of PharmaNet as it relates to the payment process. Outstanding decisions remain on these that could impact Release 2 Go Live.	Potential impact or delay to Release 2 Go Live	Results of financial risk assessment to be communicated. Any potential impacts to release 2 Go Live need to be raised now so they can be addressed in time for Go Live.	High	High	Scope, Schedule, Budget
537931	High	Risk and Controls Report not yet completed and approved by MOH	Go Live delayed if not approved	Risk and Controls review in progress. Must be reviewed and signed off by the Ministry by Jun 25, 2013 in advance of the Go No Go Decision meeting on Jun 26, 2013.	High	High	Schedule, Budget
553422	Med	As agreed to when pricing the Batch, Interfaces and reports (BIR) a risk based testing approach was used to reduce scope and cost of Release 2 Testing outlining those not being tested.	Potential issues with Batch, Interfaces and Reports	Detailed analysis completed from requirements, development and testing perspective with MAXIMUS and Ministry to evaluate risk and priority. Risk Based Testing Paper raised on Sept 12, 2013 confirming agreed approach and listing what has been put ot of scope of project. If issues arise they must be dealt with outside of the project.	Med	Med	Scope, Budget
537929	Med	Rollout of screens to external stakeholders may not be successfully completed	Affected users will not be able to use PharmaNet Administrative screens.	Screens deployed and tested internally. External deployment package and instructions provided	Med	Med	Schedule

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
				to MOH and tested by MOH, who will distribute and deploy to MOH workstations and College will deploy to College Workstations. Risk is transferred to MOH and Colleges as they will deploy.			
553424	Low	Final testing is underway. If any unforeseen issues arise there could be an impact to Go Live.	Potential Impact to Go Live.	Testing is close to completion and we do not anticipate any issues. If they arise, they will be assessed for any impact to Go Live.	Low	Low	Schedule

Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Ministry Network Move Project End to End testing is at risk of not completing in time for PharmaNet R2 Go Live. 1. End to End Testing Run does not complete as planned. 2. OCIO Exemption is not completed and signed off in time. 3. Full STRA may be required, and may not be completed and signed off in time. 4. Outstanding decision on encryption for College of Pharmacies. VPN may be used. There must be a contingency plan for a revised Go Live Date if this testing cannot be completed successfully	May 17, 2013	Ministry Decision and Completion of outstanding Items.	May 24, 2013	Overdue	MAXIMUS Raised Issue paper on this on May 17, 2013 and delivered to Ministry identifying that if end to end testing was to take place it would need to be planned with the POS to ensure it could be completed in time. Due date for confirming this was Friday May 24, 2013 Jun 6 – End to end testing arrangements pending. June 17 test was incomplete June 20 could not complete and was cancelled. June 27 – test being scheduled and will add in End to End. As at June 21. 1. Testing must complete on time. 2. OCIO exemption submitted, but be approved in timel 3. STRA submitted to OCIO. Must be completed in time.. 4. VPN testing to complete successfully and be implemented; There must be a contingency plan for a

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					revised Go Live Date if this testing cannot be completed successfully
Deloitte is working to assess whether there is any financial risks associated with the Operational Data Replication for the Release 2.0 of PharmaNet as it relates to the payment process. Outstanding decisions remain on these that could impact Release 2 Go Live.	May 2013	Completion of Financial Risk Assessment and Communication of Results	May 31, 2013	Overdue. Must be done by Jun 25, 2013	Any potential impacts to Release 2 Go Live as a result of this risk assessment must be communicated and addressed so as not to impact Release 2 Go Live
Testing with Health Ideas must be completed to satisfy Risk and Controls for CAS Reconciliation process for R2 Go Live. MAXIMUS testing completed in May. AHIP Validation outstanding since May 31.	May 31, 2013	Testing Completion	Jun 26, 2013	In Progress	AHIP testing requested in advance and several follow ups done by MAXIMUS. Escalated to Ministry on June 13, 2013 requesting completion so as not to delay Go Live. Ministry escalated and will be completed by June 21, 2013 so as not to delay R2 Go Live.
Remove Invalid Patient Dispense Records created by Dr. Bannerman during MedAccess Production Test in Summerland.	Feb 22, 2013	Ministry to arrange removal of records the same way they were created	Feb 22, 2013	Overdue	On Feb 22, 2013 invalid Patient Dispense Records were created by Dr. Bannerman during the MedAccess Production Test. Ministry to arrange removal of the records the same way they were created. ** These should have been removed on Feb 22, 2013, when the data was created. Mar 26 – follow up email sent as this is still outstanding. Apr 15 – Rob to follow up. Enola to resend Sorin a copy of the email sent on Mar 26 - done. April 25 – with Ministry.
Service Order for Fiscal Year 2013/14	~~Mar 28, 2013~~ Apr 25, 2013	~~Ministry to Draft, Finalize, Approve and Sign off~~ MAXIMUS to Finalize and Send to Ministry for Approval	~~Apr 2, 2013~~ April 26, 2013	In Progress Overdue	Service Order needs to be created for FY 2013/14 activities above the Fixed Price from last Fiscal Year. Ministry to draft before April 2, as this is required for work to continue on Apr 2, 2013. Apr 2 – Ministry to draft SO, review and approve with MAXIMUS and Ministry contracts, finalize and Sign-Off. Apr 15 – must assess work that must be

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					done this FY then SO will be created. Meeting today to look at this. Apr 25 – Service Order Template received from MOH and MAXIMUS. MAXIMUS have updated and in internal reviews. MAXIMUS to submit once internally reviewed. May 9 – Waiting for Ministry approval. May 24 – Ministry to update SO for FY 13/14 to remove CR2013-002 TELUS Conformance and CR2013-007 Med Access and Updates from Conformance Specifications as these are being put on Hold. An SR may be issued for billing to date of cancelled conformance CRs or they may be billed to CR2013-003 ARI Conformance – pending Ministry Decision. R3 SO – To be put on hold
CR2013-002 PMP Conformance Testing TELUS ** This has been moved to SR 553398	Apr 2, 2013	Ministry Approval	Apr 5, 2013	Overdue On HOLD Moved to SR	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 28 – Ministry requested CR be updated and resubmitted to include FY 13/14 only. MAXIMUS updated CR and resubmitted for FY 13/14 only on April 2, 2013 with due date of April 5, 2013. Apr 25 – waiting for Ministry approval. May 10 – approved, but Ministry requested Date changes. May 23 – Ministry have put this CR on HOLD and requested if MAXIMUS adjust past billings to move to CR2013-003 Conformance Testing ARI Pending Ministry decision Jun 10 – moved to SR ITG 553398
CR2013-007 Early Adopter Phase 2	Apr 16, 2013	Ministry Approval	Apr 23, 2013	Overdue	Apr 11 – MAXIMUS is drafting CR

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Conformance Testing MedAccess and Test Case Updates ** moved to SR ITG 553396				On HOLD Moved to SR	Apr 16 – CR submitted to Ministry for Approval. Apr 25 – overdue. Waiting for Ministry approval May 23 – Ministry have put this CR on HOLD and requested if MAXIMUS adjust past billings to move to CR2013-003 Conformance Testing ARI . Pending Ministry decision Jun 10 – moved to SR ITG 553396
CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11, 2013 May 29, 2013	Ministry Approval MAXIMUS to amend CR to include impact of Delay to Go Live to July 6/7	April 26, 2013 Jun 2, 2013	Approved	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – CR drafted and in MAXIMUS internal review. Once reviewed, MAXIMUS will submit to Ministry for Approval. May – CR Approved and Signed Off. May 24 – CR will need to be amended to include new scope of End to End Testing and decision to delay go live to July 6/7. MAXIMUS to update and submit to Ministry. Jun 21 - Agreed that additional time on end to end testing will be billed to the CR.
CR2013-009 PMP Release 3.0 High Level Requirements ** moved to SR ITG 553415	April 15, 2013	MAXIMUS to Submit	April 26, 2013	Approved and Signed Off. Request to put on HOLD Moved to SR	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit to Ministry on April 26, 2013 May 9 – CR submitted, reviewed, approved and signed. May 23 – Ministry have requested this be put on HOLD. After MAXIMUS complete Project Charter and close out requirements. Jun 10 – moved to SR ITG 443415
Move from 4000 Seymour to Kamloops will result in additional scope of testing	Mar 2013	Ministry Decision	April 12, 2013	April 11, 2013 Decision Made to Proceed with added scope	Move from 4000 Seymour to Kamloops will result in additional scope and delays 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. However these are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project. Apr 11 – Decision Made to proceed with added scope. MAXIMUS to assess and include in CR for Health Sector Firewall.
Release 2.0 Communication Activity Matrix	Jan 29, 2013	Ministry to Finalize	Apr 11, 2013	Update to reflect revised Go Live Done	Ministry to develop Communication Activity Matrix for Release 2.0 Communication Working Group formed to develop this. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Mar 28 – Drafted and updated. Needs finalization and approval. MOH to finalize by April 11, 2013. Done May 9 – This needs to be updated to reflect the revised Go Live date, change window and communicated to stakeholders. This should be re-reviewed once updated. Jun 6 – Updated Matrix in reviews.
Ministry Communication Plan	Apr 2, 2013	Ministry to Finalize	Apr 11, 2013	Done	Communication Working Group formed to develop the Communication Plan for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Howard to provide a draft to CWG by Mar 8 Mar 19 – Draft Communication Plan provided to MAXIMUS. This will be a living document and updated to add new deployments. Release 2 Plan Update and Sign-Off – April 11, 2013 Release 1.1 Phase 3 Plan Update and Sign-Off – TBD. Ministry to finalize by April 11, 2013. Done May 15 – This should be updated with the updated Activity Matrix for Release 2

Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2
Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"
Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.
Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing
Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. Approved.

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Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress
Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.
Approved	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 6 – Approved and Signed Off
Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 21 – MAXIMUS amended CR2012-008 to revise scope to reflect Ministry Decision not to conformance test MedAccess and to use remaining time in CR for TELUS support and walkthrough of Test Cases. Mar 22 - Submitted to MOH. Due Mar 26, 2013.
Moved to SR	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27 Mar 28 – Ministry requested CR be updated to include FY 13/14 scope only. MAXIMUS updated CR and resubmitted April 2, 2013 with due date of April 5, 2013 May 23 – Ministry Decision to put this CR on hold. Ministry to determine where time billed to this CR will be invoiced to. Waiting for Ministry decision Jun 10 – Moved to SR ITG 533398
Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.
Approved	Health Sector Firewall Decision	Due April 19, 2013 – IF Yes, this will delay R2 Go Live and MAXIMUS to assess impacts and draft CR. Apr 11 – Decision made to proceed with Health Sector Firewall.
Approved	Move from 4000 Seymour to Kamloops will result in additional scope of testing	Due April 12, 2013 – IF Yes, MAXIMUS will assess added scope and add to CR for Health Sector Firewall.

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Moved to SR	CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess	Apr 11 – MAXIMUS is drafting CR Apr 16 – Submitted to Ministry for Review and Approval May 23, 2013 – Ministry Decision to put this CR on hold. Ministry to determine where time billed to this CR will be invoiced to. Waiting for Ministry decision Jun 10 – Moved to SR ITG 553396
Approved	CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – MAXIMUS have drafted CR and in internal reviews. Submitted Apr 26, 2013
Moved to SR	CR2013-009 PMP Release 3.0 High Level Requirements	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit Apr 26, 2013 CR submitted and approved. May – approved. May 23, 2013 – Ministry have requested this be put on hold. MAXIMUS to complete Project charter and close out before placing on hold. Jun 10 – Moved to SR ITG 553415

Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 – Pharmacy Production Deployment (Gibsons)	Done	Mar 30-31, 2013
Milestone	Phase 3 – EMR Production Deployment - TBD	Pending	TBD
Milestone	Conformance Test Case Updates	In Progress, Done for Vendor Testing	
	Release 2		
Milestone	Test Case Development Complete	Done	Mar 31, 2013
Milestone	Business Acceptance Test Case Development Complete	Done	
Milestone	Test Case Execution Complete	In Progress	
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done

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	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25 , 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	~~Jan 6, 2013~~ May 15, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization. Apr – Conformance Specs delayed to May 15. May 29 – Conformance Specifications overdue.
	Conformance Test Case Updates based on Conformance Specification v____ - EMR	MAXIMUS	~~Mar 4, 2013~~	10%	Y	Conformance Test Cases were updated, but cannot be finalized until Conformance Specs are finalized and delivered. May 23 – Ministry decision to put Conformance CRs on Hold except ARI.
	Conformance Test Case Updates based on Conformance Specification v_____ - Pharmacy	MAXIMUS	~~Apr 8, 2013~~	10%	Y	Conformance Test Cases were updated, but cannot be finalized until Conformance Specs are finalized and delivered. May 23 – Ministry decision to put Conformance CRs on Hold except ARI.
	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	Y	May 23 – Ministry have put Conformance CRs for MedAccess and TELUS on hold.
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		100%	G	Done
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done

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	Phase 1 Go Live	MOH	~~Oct 22, 2012~~ Nov 14, 2012	100%	G	Done
	Phase 2 Go Live	MOH	Mar 31, 2013	100%	G	Done
	Phase 3 Go Live	MOH	TBD			
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012. Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012
D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done. Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Apr 12, 2013	100%	G	Done.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done. Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done. Approved Dec 28, 2012. Signed Off.
M	Ministry STRA Report Signed	BMO	Jan 31, 2013	100%	G	May 23 – Ministry Sign-Off is still outstanding. This is required for Go No Go Decision and has been requested by the auditors. Jun 20 – Signed by MOH

M	R2 - Test Case Development
	• Admin Portal – 100%
	• Non-functional – 100%
	• Batch Interface Reports – 100%
	• Functional Regression –100%
	  ○ Screens – 100%
	  ○ Server / Transactions – 100%
	• CPRS –100%
	• Data Migration – 100%
	• CAS – 100%
	• BAT – 100%
	• HIAL – N/A
	• EMPI – N/A
		MAXIMUS	Apr 15, 2013	100%	G	Done

M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul 2012	100%	G	Done

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M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done. Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	May 31, 2012	75%	G	In Progress. Batches are delivered in stages starting in Sep. All have been delivered. Testing in progress.
D	Updated Training Plan – R2	MAXIMUS	Sep 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete • Admin Portal – 100% • Non-functional – 100% • Batch Interface Reports – 98% • Functional Regression – 100% o Screens – 100% o Server / Transactions – 100% - o Business Config – 100% • CPRS – 98% • Data Migration – 100% • CAS – 100% • BAT – 100% • HIAL – N/A – Performance only • EMPI – N/A – connectivity test only • AHIP Joint Testing – May 31 - pending • Network Move Testing: Jun 3-14 • End to End, Jun 13, Jun 20, Jun 27	MAXIMUS	Jun 14, 2013	75%	G	In Progress. Final testing underway.
M	BAT Test execution Complete PMP Screens – Done CPRS – Done HIBC Admin – Done Reports – 95%	MAXIMUS	May 31, 2013	100%	G	Done
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
W	Deploy ALL to Production for Dry Run and Performance	MAXIMUS	Feb 8, 2013	100%	G	Done

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Testing					
W	PROD Dry Run and Data Migration Test	MAXIMUS	Apr 5, 2013	100%	G	Done
M	Performance Testing Complete	MAXIMUS	May 29, 2013	100%	G	Done
M	Communication Activity Matrix	MOH	May 31, 2013	100%	G	Done.
D	Communication Plan	MOH	May 31, 2013	100%	G	Done.
M	Production Environment Ready	MAXIMUS	June 10, 2013	50%	G	In Progress. Drafted. Internal reviews in progress
M	Ministry Network Move POC	MAXIMUS	Jun 14, 2013	100%	G	Done
M	Ministry Network Move End to End Testing	MOH	~~Jun 13, 2013~~ Jun 27, 2013	50%	Y	Jun 13 – partial testing completed. Additional test added for Jun 20. Jun 20 – testing started but cancelled. Additional testing added for Jun 27. This is required for Go No Go.
D	Deployment Plan	MAXIMUS	Jun 21, 2013	75%	G	In Progress – MAXIMUS Internal reviews in progress.
D	R2 Defect Action Plan	MAXIMUS	Jun 18, 2013	75%	G	Drafted. Updates in progress as testing is completed
M	R2 Final Test Results Summary	MAXIMUS	Jun 18, 2013	75%	G	Drafted. Updates in progress as testing is completed
M	Production Support Strategy and Plan	MAXIMUS	June 26 ,2013	25%	G	In Progress
W	MAXIMUS Go No Go Decision	MAXIMUS	Jun 20, 2013	100%	G	Done
M	Disaster Recovery Testing Complete	MAXIMUS	Jun 21, 2013	100%	G	Done
D	Updated Disaster Recovery Plan Document	MAXIMUS	Jun 21, 2012	75%	G	Updated in progress as result of DR testing completed Jun 21.
M	DR Environment Ready	MAXIMUS	June 21, 2013	100%	G	Done
M	Support of Ministry Risk and Controls Review for Rel 2	MAXIMUS	June 25, 2013	75%	G	In Progress
M	Ministry Risk and Controls Report Complete	MOH	June 25, 2013	75%	G	In Progress
M	Ministry Go/No Go decision R2 to deployment	MAXIMUS	June 26, 2013	0%	G	Pending
M	R2 Deployment Complete	MAXIMUS	July 7 , 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Oct 7, 2013	0%	G	Pending
	Release 3.0 High Level Requirements and Planning					
M	Project Plan	MAXIMUS	May 15, 2013	100%	G	Done
D	Project Charter	MAXIMUS	May 31, 2013	25%	G	Done
M	High Level Requirements – Draft for Ministry Review	MAXIMUS	May 24, 2013	50%	G	In Progress. Scheduled workshops

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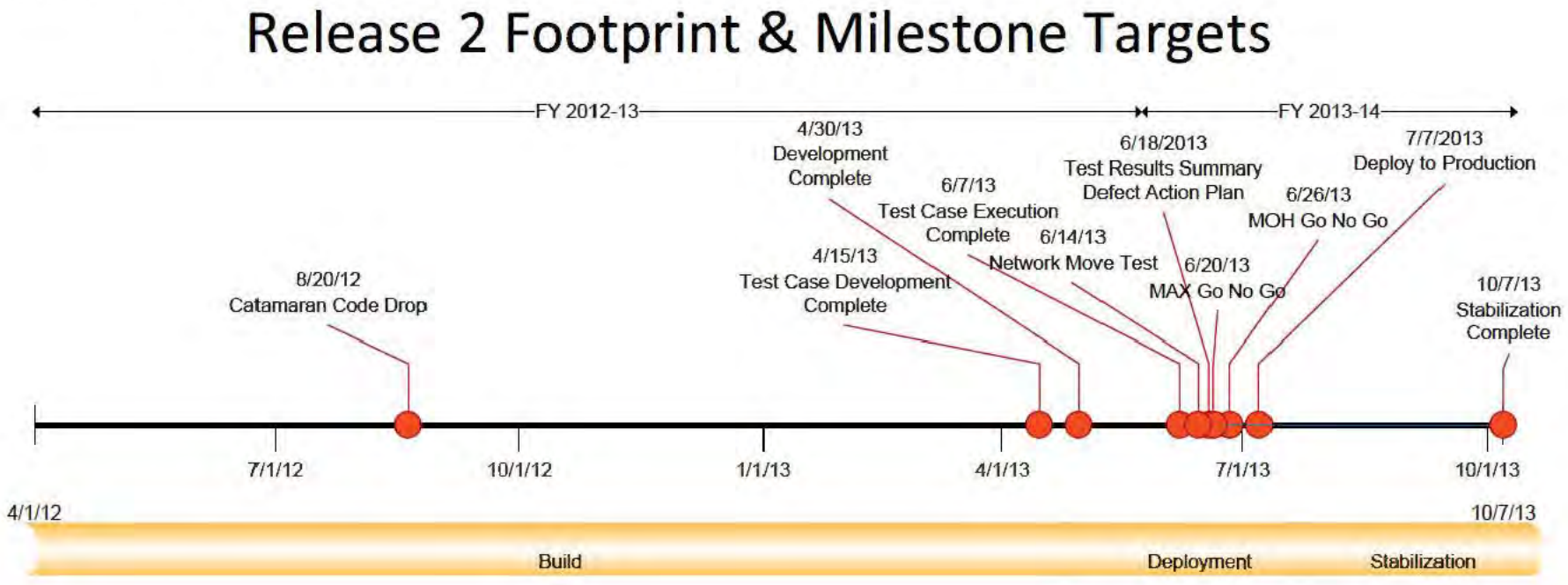
Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
						and delivered discussion materials. Workshops cancelled as Ministry have requested this be put on Hold. Jun 10 – moved to SR to complete
D	High Level Requirements (Approved)	MAXIMUS	Jun 30, 2013	0%	G	Pending
D	Detailed Estimate	MAXIMUS	Jun 17, 2013	0%	G	Pending

1. PharmaNet Modernization:



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PharmaNet Modernization Progress Report (JEC)

MAXIMUS CANADA

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-Apr-27	2013-May-30
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status G Y R
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure – Added Scope of Health Sector Firewall and additional Testing of Move from Seymour to Kamloopsl.	Y
	Release 3.0 High Levl Requirements and Planning – On Hold	G
Quality	Adhering to MAXIMUS methodology	R
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Production Pilot - Nov 13 – 27, 2012 - completed Phase 2 – Pharmacy Production Deployment (Gibsons) - Mar 30-31 completed Phase 3 – EMR Production Deployment - TBD	G
	Release 2.0 PharmaNet Infrastructure Upgrade Go Live – Delayed to July 6/7 Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines. ARI Conformance Testing added to Project Scope. Schedule is at risk due to tight itmelines. Go Live deferred to May 16, 2013. Health Sector Firewall Decision wil Delay Go Live to June 19, 2013. Ministry Decision to Go Live on Sat/Sun moves Go Live to June 22/23. May 23 – Mnistry Decision to delay Go Live to July 6/7 due to ability to communicate to External Stakeholders on extended Pharmanet change window and the Network Move Project in flight.	Y
	Release 3.0 – High Level Requirments and Planning – June 30, 2013 – On Hold	R
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2013-003) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency. Service Order for 2013/14 is not yet finalized.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report • CR2012-017 Conformance Test Execution Amended – Approved and Signed Off		G

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• CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only - Review and Approval • CR2013-003 Conformance Testing ARI – Approved for FY13/14 • CR2013-003 Conformance Testing ARI Amended – Review and Approval • CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs - Review and Approval • CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only – Put on Hold • CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs – Put on Hold	
Release 2.0 Delivered since the last report • Service Order for 2013/14 – Review and Approval • Data Migration Alternate Option Information Paper • Data Migration Briefing Note • CR2013-008 PMP Health Sector Firewall and Network Move – Review and Approval • CR2013-008 PMP Health Sector Firewall and Network Move – Approved and Signed Off • CR2013-009 PMP Release 3.0 High Level Requirements – Review and Approval • CR2013-009 PMP Release 3.0 High Level Requirements – Approved and Signed Off • CR2013-009 PMP Release 3.0 High Level Requirements – Put on Hold • Service Order for 2013/14 – Review and Approval	G
2. Outstanding Issues and Actions.	Y

Key Open Project Issues

Status (G / Y / R)	Priority	Detailed Description	Business Impact	Proposed Resolution
Y		Ministry Communication Plan and Activity Matrix must be updated and communicated to Stakeholders to include delayed Go Live Date of July 7, change window July 6/7 and availability during the change window.	Communication to Stakeholders	Ministry to update Communication Plan and Activity Matrix and communicated to Stakeholders to include delayed Go Live Date of July 7, change window July 6/7 and availability during the change window.
Y		Deloitte is working to assess whether there is any financial risks associated with the Operational Data Replication for the Release 2.0 of PharmaNet as it relates to the payment process. Outstanding decisions remain on these that could impact Release 2 Go Live.	Delays or impact to Release 2 Go Live depending on results of financial risk assessment.	Results of financial risk assessment to be communicated. Any potential impacts to release 2 Go Live need to be raised now so they can be addressed in time for Go Live.
Y		Impact of delay of Release 2 Go Live to July 6/7. May 23 – Mnistry Decision to delay Go Live to July 6/7 due to ability to communicate to External Stakeholders on extended Pharmanet change window and the Network	MAXIMUS Assessing Impact. Communication to stakeholders	Ministry Decision Go Live delayed to July 6/7 MAXIMUS to assess impacts of delay to Go Live MAXIMUS and Ministry following up with external stakeholders.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		Move Project in flight. MAXIMUS to assess impacts		
Y	High	Release 2: Ministry Pharmacy Network Move from 4000 Seymour to Kamloops must complete in time for Release 2.0 Go Live planned for June 22/23. Ministry requested additional testing has been requested that is included in CR2013-008 Health Sector Firewall and Network Move. Outstanding issues 1. Deployment date needs to be moved back from June 26 to complete in time for Release 2.0 Go Live on June 22/23 2. Outstanding decision on if encryption is required. 3. Is End to End Testing required, as not in original scope? If yes must be planned for now.	Additional Testing included in Cr2013-008 Health Sector Firewall and Network Move. Outstanding Items 1. If Network Move cannot be completed in time for Release 2.0 Go Live, it will push out Release 2.0 Go Live to July 6/7. There are impacts associated with delaying Release 2.0 Go Live to July 6/7. 2. If encryption is required additional costs to College for infrastructure. 3. Ministry Decision is to proceed with End to End testing. This is added scope and must be planned for now to complete in time. Requires commitment of POS. *** Additional scope of End to End Testing and Impact of delays to Go Live as a result of Network Move Delays will need to be added to the CR2013-008 and approved. ** Further discussion is required around end to end testing.	Apr 11 – Ministry Decision is to proceed with Additional Scope. This will be assessed and included in the CR for the Health Sector Firewall. Outstanding Items: 1. Mnistry Decision to delay Go Live to July 6/7 due to ability to communicate to External Stakeholders on extended Pharmanet change window and the Network Move Project in flight MAXIMUS to prepare impact assessment of delaying Release 2,.0 Go Live to July 6/7 2. Sorin to follow up with College on if encryption is required 3. Ministry must get commitment from POS to complete testing within timeframe required.
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Increased Scope will impact project timelines	PharmaNet Modernization Scope needs to be frozen. Anything that adds to scope will impact project timelines.
Y		Conformance Specifications further delayed. Version to be published Jan 4, 2013, delayed to Feb 2013, then April 2013, then May 15, 2013. Wiating for Minstry to release this version. Final version for General deployment to be produced later. Several rule clarifications / interpretations still exist and some rules were aligned to MedAccess that may be inacurate, causing negative	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance Testing. 4. Incorect or incomplete test cases.	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Now delayed to May 15, 2013 and overdue. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry to provide upated Conformance Specs to MAXIMUS by May 15, 2013 – overdue. May 23, 2013 Ministry have put CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs on Hold. ** Conformance Specs must be finalized to a version

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		impact to future vendors.		that can be used for Test Case Development and Vendor Development. Specifications will be finalized before General Deployment.

Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
NEW	High	Deloitte is working to assess whether there is any financial risks associated with the Operational Data Replication for the Release 2.0 of PharmaNet as it relates to the payment process. Outstanding decisions remain on these that could impact Release 2 Go Live.	Potential impact or delay to Release 2 Go Live	Results of financial risk assessment to be communicated. Any potential impacts to release 2 Go Live need to be raised now so they can be addressed in time for Go Live.	HIGH	High	Scope, Schedule, Budget
NEW	High	Ministry Network Move may not complete in time for Release 2.0 Go Live If Network Move Project cannot complete in time it will push out Release 2.0 Go Live Date. On May 23, 2013 Ministry advised that that Release 2.0 Go Live will be pushed out to July 6/7 due to Network Move and Stakeholder Communication. MAXIMUS assessing impacts. Ministry Decisions outstanding: 1. Is Encryption required – Ministry to follow up with Colleges. 2. Is End to End Testing to be added to scope? If so additional effort is required that needs to be planned for and CR2013-008 to be updated and reapproved to reflect this.	Added scope and delays to Release 2 Go Live Release 2 Go Live	MAXIMUS to assess impact and provide to Ministry.	HIGH	High	Scope, Schedule, Budget

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Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Deloitte is working to assess whether there is any financial risks associated with the Operational Data Replication for the Release 2.0 of PharmaNet as it relates to the payment process. Outstanding decisions remain on these that could impact Release 2 Go Live.	May 2013	Completion of Financial Risk Assessment and Communication of Results	May 31, 2013	Pending	Any potential impacts to Release 2 Go Live as a result of this risk assessment must be communicated and addressed so as not to impact Release 2 Go Live
Remove Invalid Patient Dispense Records created by Dr. Bannerman during MedAccess Production Test in Summerland.	Feb 22, 2013	Ministry to arrange removal of records the same way they were created	Feb 22, 2013	Overdue	On Feb 22, 2013 invalid Patient Dispense Records were created by Dr. Bannerman during the MedAccess Production Test. Ministry to arrange removal of the records the same way they were created. ** These should have been removed on Feb 22, 2013, when the data was created. Mar 26 – follow up email sent as this is still outstanding. Apr 15 – Rob to follow up. Enola to resend Sorin a copy of the email sent on Mar 26 - done. April 25 – with Ministry.
Service Order for Fiscal Year 2013/14	~~Mar 28, 2013~~ Apr 25, 2013	~~Ministry to Draft, Finalize, Approve and Sign-off~~ MAXIMUS to Finalize and Send to Ministry for Approval	~~Apr 2, 2013~~ April 26, 2013	In Progress Overdue	Service Order needs to be created for FY 2013/14 activities above the Fixed Price from last Fiscal Year. Ministry to draft before April 2, as this is required for work to continue on Apr 2, 2013. Apr 2 – Ministry to draft SO, review and approve with MAXIMUS and Ministry contracts, finalize and Sign-Off. Apr 15 – must assess work that must be done this FY then SO will be created. Meeting today to look at this. Apr 25 – Service Order Template received from MOH and MAXIMUS. MAXIMUS have updated and in internal reviews. MAXIMUS to submit once internally reviewed. May 9 – Waiting for Ministry approval. May 24 – Ministry to update SO for FY 13/14

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					to remove CR2013-002 TELUS Conformance and CR2013-007 Med Access and Updates from Conformance Specifications as these are being put on Hold. An SR may be issued for billing to date of cancelled conformance CRs or they may be billed to CR2013-003 ARI Conformance – pending Ministry Decision. R3 SO – To be put on hold
CR2013-002 PMP Conformance Testing TELUS	Apr 2, 2013	Ministry Approval	Apr 5, 2013	Overdue On HOLD	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 28 – Ministry requested CR be updated and resubmitted to include FY 13/14 only. MAXIMUS updated CR and resubmitted for FY 13/14 only on April 2, 2013 with due date of April 5, 2013. Apr 25 – waiting for Ministry approval. May 10 – approved, but Ministry requested Date changes. May 23 – Ministry have put this CR on HOLD an requested if MAXIMUS adjust past billings to move to CR2013-003 Conformance Testing ARI Pending Ministry decision
CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess and Test Case Updates	Apr 16, 2013	Ministry Approval	Apr 23, 2013	Overdue On HOLD	Apr 11 – MAXIMUS is drafting CR Apr 16 – CR submitted to Ministry for Approval. Apr 25 – overdue. Waiting for Ministry approval May 23 – Ministry have put this CR on HOLD an requested if MAXIMUS adjust past billings to move to CR2013-003 Conformance Testing ARI . Pending Ministry decision
CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11, 2013 May 29, 2013	Ministry Approval MAXIMUS to amend CR	April 26, 2013 Jun 2, 2013	Approved MAXIMUS to	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
		to include impact of Delay to Go Live to July 6/7		update	Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – CR drafted and in MAXIMUS internal review. Once reviewed, MAXIMUS will submit to Ministry for Approval. May – CR Approved and Signed Off. May 24 – CR will need to be amended to include new scope of End to End Testing and decision to delay go live to July 6/7. MAXIMUS to update and submit to Ministry.
CR2013-009 PMP Release 3.0 High Level Requirements	April 15, 2013	MAXIMUS to Submit	April 26, 2013	Approved and Signed Off. Request to put on HOLD	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit to Ministry on April 26, 2013 May 9 – CR submitted, reviewed, approved and signed. May 23 – Ministry have requested this be put on HOLD. After MAXIMUS complete Project Charter and close out reuirements.
Move from 4000 Seymour to Kamloops will result in additional scope of testing	Mar 2013	Ministry Decision	April 12, 2013	April 11, 2013 Decision Made to Proceed with added scope	Move from 4000 Seymour to Kamloops will result in additional scope and delays 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. However these are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project. Apr 11 – Decision Made to proceed with added scope. MAXIMUS to assess and include in CR for Health Sector Firewall.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Release 2.0 Communication Activity Matrix	Jan 29, 2013	Ministry to Finalize	Apr 11, 2013	Update to reflect revised Go Live	Ministry to develop Communication Activity Matrix for Release 2.0 Communication Working Group formed to develop this. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Mar 28 – Drafted and updated. Needs finalization and approval. MOH to finalize by April 11, 2013. Done May 9 – This needs to be updated to reflect the revised Go Live date, change window and communicated to stakeholders. This should be re-reviewed once updated.
Ministry Communication Plan	Apr 2, 2013	Ministry to Finalize	Apr 11, 2013	Done	Communication Working Group formed to develop the Communication Plan for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix. Howard to provide a draft to CWG by Mar 8 Mar 19 – Draft Communication Plan provided to MAXIMUS. This will be a living document and updated to add new deployments. Release 2 Plan Update and Sign-Off – April 11, 2013 Release 1.1 Phase 3 Plan Update and Sign-Off – TBD. Ministry to finalize by April 11, 2013. Done May 15 – This should be updated with the updated Activity Matrix for Release 2

Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2

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Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"
Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.
Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing
Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. Approved.
Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress
Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.
Approved	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 6 – Approved and Signed Off

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	100%	Final approval / sign-off or user acceptance has been received.

Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 21 – MAXIMUS amended CR2012-008 to revise scope to reflect Ministry Decision not to conformance test MedAccess and to use remaining time in CR for TELUS support and walkthrough of Test Cases. Mar 22 - Submitted to MOH. Due Mar 26, 2013.
On HOLD	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27 Mar 28 – Ministry requested CR be updated to include FY 13/14 scope only. MAXIMUS updated CR and resubmitted April 2, 2013 with due date of April 5, 2013 May 23 – Ministry Decision to put this CR on hold. Ministry to determine where time billed to this CR will be invoiced to. Waiting for Ministry decision
Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.
Approved	Health Sector Firewall Decision	Due April 19, 2013 – IF Yes, this will delay R2 Go Live and MAXIMUS to assess impacts and draft CR. Apr 11 – Decision made to proceed with Health Sector Firewall.
Approved	Move from 4000 Seymour to Kamloops will result in additional scope of testing	Due April 12, 2013 – IF Yes, MAXIMUS will assess added scope and add to CR for Health Sector Firewall.
On HOLD	CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess	Apr 11 – MAXIMUS is drafting CR Apr 16 – Submitted to Ministry for Review and Approval May 23, 2013 – Ministry Decision to put this CR on hold. Ministry to determine where time billed to this CR will be invoiced to. Waiting for Ministry decision
Approved	CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – MAXIMUS have drafted CR and in internal reviews. Submitted Apr 26, 2013
On Hold	CR2013-009 PMP Release 3.0 High Level Requirements	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit Apr 26, 2013 CR submitted and approved. May – approved. May 23, 2013 – Ministry have requested this be put on hold. MAXIMUS to complete Project charter and close out before placing on hold.

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Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 – Pharmacy Production Deployment (Gibsons)	Done	Mar 30-31, 2013
Milestone	Phase 3 – EMR Production Deployment - TBD	Pending	TBD
Milestone	Conformance Test Case Updates	In Progress, Done for Vendor Testing	
	Release 2		
Milestone	Test Case Development Complete	Done	Mar 31, 2013
Milestone	Business Acceptance Test Case Development Complete	Done	
Milestone	Test Case Execution Complete	In Progress	
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25 , 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	~~Jan 6, 2013~~ May 15, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization. Apr – Conformance Specs delayed to May 15. May 29 – Conformance Specifications overdue.

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Conformance Test Case Updates based on Conformance Specification v____ - EMR	MAXIMUS	~~Mar 4, 2013~~	10%	Y	Conformance Test Cases were updated, but cannot be finalized until Conformance Specs are finalized and delivered. May 23 – Ministry decision to put Conformance CRs on Hold except ARI.
	Conformance Test Case Updates based on Conformance Specification v_____ - Pharmacy	MAXIMUS	~~Apr 8, 2013~~	10%	Y	Conformance Test Cases were updated, but cannot be finalized until Conformance Specs are finalized and delivered. May 23 – Ministry decision to put Conformance CRs on Hold except ARI.
	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	Y	May 23 – Ministry have put Conformance CRs for MedAccess and TELUS on hold.
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		100%	G	Done
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done
	Phase 1 Go Live	MOH	~~Oct 22, 2012~~ Nov 14, 2012	100%	G	Done
	Phase 2 Go Live	MOH	Mar 31, 2013	100%	G	Done
	Phase 3 Go Live	MOH	TBD			
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012. Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012
D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done. Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Apr 12, 2013	75%	G	In Progress. This is being delivered in groups.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done. Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done. Approved Dec 28, 2012.

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						Signed Off.
M	Ministry STRA Report Signed	BMO	Jan 31, 2013	75%	Y	May 23 – Ministry Sign-Off is still outstanding. This is required for Go No Go Decision and has been requested by the auditors.
M	R2 - Test Case Development • Admin Portal – 100% • Non-functional – 100% • Batch Interface Reports – 100% • Functional Regression –100% o Screens – 100% o Server / Transactions – 100% • CPRS –100% • Data Migration – 100% • CAS – 100% • BAT – 100% • HIAL – N/A • EMPI – N/A	MAXIMUS	Apr 15, 2013	100%	G	Done
M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done. Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	May 31, 2012	75%	G	In Progress. Batches are delivered in stages starting in Sep. All have been delivered. Testing in progress.
D	Updated Training Plan – R2	MAXIMUS	Sep 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete • Admin Portal – 94% • Non-functional – 98% • Batch Interface Reports – 98% • Functional Regression – 100%	MAXIMUS	Jun 14, 2013	75%	G	In Progress

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	○ Screens – 100% ○ Server / Transactions – 100% - pending defect fix ○ Business Config – 0% • CPRS – 98% • Data Migration – 100% • CAS – 100% • BAT – 95% • HIAL – N/A – Performance only • EMPI – N/A – connectivity test only • AHIP Joint Testing – May 31 - pending • Network Move Testing: Jun 3-14					
M	BAT Test execution Complete PMP Screens – Done CPRS – Done HIBC Admin – Done Reports – 95%	MAXIMUS	May 31, 2013	75%	G	In Progress.
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
W	Deploy ALL to Production for Dry Run and Performance Testing	MAXIMUS	Feb 8, 2013	100%	G	Done
W	PROD Dry Run and Data Migration Test	MAXIMUS	Apr 5, 2013	100%	G	Done
M	Performance Testing Complete	MAXIMUS	May 29, 2013	75%	G	In Progress. To complete May 29.
M	Communication Activity Matrix	MOH	May 31. 2013	75%	G	Done. Needs updating for revised Go Live Date
D	Communication Plan	MOH	May 31, 2013	100%	G	Done. Attached Updated Communication Activity Matrix and redistribute.
M	Production Environment Ready	MAXIMUS	June 10, 2013	50%	G	In Progress
M	Disaster Recovery Testing Complete	MAXIMUS	Jun 13, 2013	25%	G	In Progress
D	Updated Disaster Recovery Plan Document	MAXIMUS	Jun 13, 2012	50%	G	In Progress
M	DR Environment Ready	MAXIMUS	June 13, 2013	25%	G	In Progress
D	Deployment Plan	MAXIMUS	Jun 14, 2013	75%	G	In Progress – MAXIMUS Internal reviews in progress.
D	R2 Defect Action Plan	MAXIMUS	Jun 18, 2013	25%	G	In Progress
M	R2 Final Test Results Summary	MAXIMUS	Jun 18, 2013	0%	G	Pending
M	Production Support Strategy and Plan	MAXIMUS	June 18 ,2013	25%	G	In Progress
W	MAXIMUS Go No Go Decision	MAXIMUS	Jun 20, 2013	0%	G	Pending

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D	Support of Ministry Risk and Controls Review for Rel 2	BMO	June 25, 2013	50%	G	In Progress
M	Ministry Risk and Controls Report Complete	MOH	June 25, 2013	50%	G	In Progress
M	Ministry Go/No Go decision R2 to deployment	MAXIMUS	June 27, 2013	0%	G	Pending
M	R2 Deployment Complete	MAXIMUS	July 7, 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Oct 7, 2013	0%	G	Pending
	Release 3.0 High Level Requirements and Planning					
M	Project Plan	MAXIMUS	May 15, 2013	100%	G	Done
D	Project Charter	MAXIMUS	May 31, 2013	25%	Y	In Progress. To be completed prior to R3 being put on HOLD
M	High Level Requirements – Draft for Ministry Review	MAXIMUS	May 24, 2013	50%	R	In Progress. Scheduled workshops and delivered discussion materials. Workshops cancelled as Ministry have requested this be put on Hold.
D	High Level Requirements (Approved)	MAXIMUS	Jun 30, 2013	0%	R	On Hold
D	Detailed Estimate	MAXIMUS	Jun 17, 2013	0%	G	On Hold

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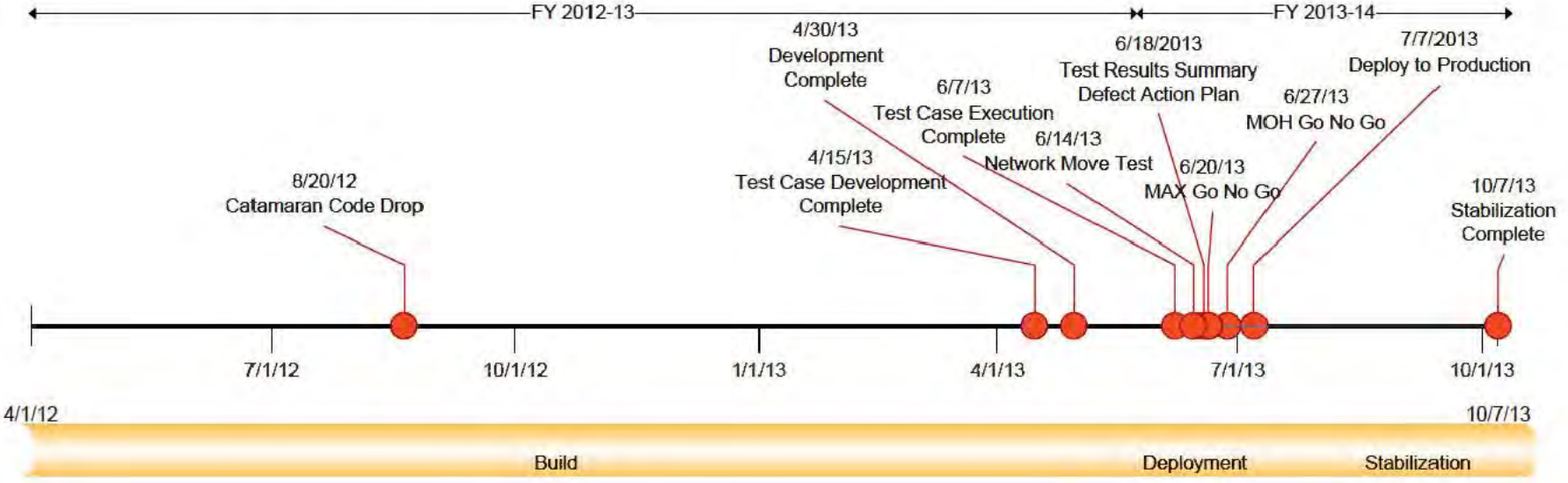
1. PharmaNet Modernization:

Release 2 Footprint & Milestone Targets



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PharmaNet Modernization Progress Report (JPMT)

MAXIMUS CANADA

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-Apr-05	2013-Apr-26
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status G Y R
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure – Added Scope of Health Sector Firewall and additional Testing of Move from Seymour to Kamloopsl.	Y
Quality	Adhering to MAXIMUS methodology	G
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Production Pilot - Nov 13 – 27, 2012 - completed Phase 2 – Pharmacy Production Deployment (Gibsons) - Mar 30-31 Phase 3 – EMR Production Deployment - TBD	G
	Release 2.0 PharmaNet Infrastructure Upgrade Go Live – planned for March 28, 2013. Delayed to May 16, 2013. Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines. ARI Conformance Testing added to Project Scope. Schedule is at risk due to tight itmelines. Go Live deferred to May 16, 2013. Health Sector Firewall Decision wil Delay Go Live. Go Live is no longer planned for May 16, 2013. MAXIMUS to assess and include in CR along with additional Testing of move from Seymour to Kamloops.	Y
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2013-003) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency. Service Order for 2013/14 is not yet finalized.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report • CR2012-017 Conformance Test Execution Amended – Approved and Signed Off • CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only - Review and Approval • CR2013-003 Conformance Testing ARI – Approved for FY13/14 • CR2013-003 Conformance Testing ARI Amended – Review and Approval		G

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• CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs - Review and Approval • CR2013-008 PMP Health Sector Firewall and Network Move – Review and Approval (plan to submit April 26, 2013) • CR2013-009 PMP Release 3.0 High Level Requirements – Review and Approval (plan to submit April 26, 2013) •	
Release 2.0 Delivered since the last report • Service Order 2013-04 for Feb/Mar 2013 – Approved. Signed-Off.	G
2. Outstanding Issues and Actions.	Y

Key Open Project Issues

Status (G Y R)	Priority	Detailed Description	Business Impact	Proposed Resolution
Y	High	Release 2 Ministry Decision on Health Sector Firewall changes were planned for after Release 2. Now being moved up to before R2 Go Live. Ministry meeting held Mar 25 to decide timing - waiting for Ministry Decision	If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before changes and testing of Firewall and therefore will delay Go Live.	If Decision is Yes, a CR will be created to document the change that will delay the Network Move and therefore delay Release 2 Go Live. This will also impact existing PRODUCTION applications that are on Zone B. These must be moved before R2 Go Live. Decision required by APRIL 19. If decided after will cause re-work for Network Move and additional delays. IF YES, will delay R2 Go Live. Apr 11 – Ministry Decision is to proceed with Health Sector Firewall. This will delay Release 2 GO Live. MAXIMUS assessing impacts and preparing a CR.
Y	High	Release 2 Move from 4000 Seymour to Kamloops will result in additional scope of testing. These are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project.	Ministry are requesting more work that was not in scope 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. These are not in scope of PharmaNet Modernization Project	Ministry Decision on if this is to be added to Scope. If YES, MAXIUS will create a CR. Decision required by APRIL 12. If decided after, will delay Go Live even further. Apr 11 – Ministry Decision is to proceed with Additional Scope. This will be assessed and included in the CR for the Health Sector Firewall.
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to	Increased Scope will impact project timelines	PharmaNet Modernization Scope needs to be frozen. Anything that adds to scope will impact project timelines.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project		
G	High	Ministry requirement change to send files to Condor via SFTP rather than FTP. Decision required by Friday Mar 22 as to if MAXIMUS must change to accommodate this.	Additional development, testing and infrastructure changes required to accommodate this change. MAXIMUS estimate this will take 4-6 days to complete, and we need a decision this week notifying us if we are to proceed with this change or not.	Ministry decision required by Mar 22 on if this must be changed. If so CR to be raised as per email estimate provided to Ministry on Mar 20 – overdue. ** Mar 28, 2013 – Ministry Decision is to change to SFTP. MAXIMUS to make changes to accommodate this in R2 as per estimate provided.
G	High	Potential Impact to Release 2 Go Live due to Annual Retro Run. Each Year Annual Retro is run from Feb to May 1 to reimburse families who have overpaid for Prescriptions. This overlaps Release 2.0 Deployment Activities which cannot both be run at the same time. Three Options presented in a new DR will outline impacts and decision must be made to either delay Retro or delay R2 Go Live.		Feb 5 – MAXIMUS submitted DR Outlining Options for Decision for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. MAXIMUS updating DR to re-submit. Feb 27 – Ministry signed DR approving Option 1.
G	High	Early Adopter Deployment dates cannot keep changing and moving closer to Release 2.0 or will impact Release 2.0 Business Acceptance Activities and possibly Release 2.0 Go Live. Early Adopter Deployment Phase 1 was planned for April 2012, delayed to July 2012, then Sept 2012, then Oct 2012, and now planned for Nov. Phase 1: Nov 13-27 – Done Phase 2: March 30-31 – Done Phase 3: TBD	Release 2 Business Acceptance Testing activities moved to accommodate EA Deployment planned for Sept 2012 - Test Case Development moved from Sept 2012 t Nov 2012 - Test Case Execution moved from Nov/Dec 2012 to Jan/Feb 2012 - Test Case Execution moved again to Feb/Mar 2012 - Potential risk to push out Rel 2 Go Live	Release 2.0 Business Acceptance Activites have been delayed to accommodate EA Conformance. Once all EA Deployments are complete, MOH will meet with MedAccess, MOH and do a formal lessons learned and have a formal assesment document. Target completig interviews / qustionaire by mid Dec. EA Phase 2 is yet to be scheduled. This will be aligned so as not to impact Release 2.0 Go Live. Current projeted date for Phase 2 is March 28, 2013 – to be confirmed. Feb 14 – Ministry are requesting an additional round of testing for MedAccess and ARI be completed prior to March 31, 2013. MAXIMUS are evaluating and will include in a CR. MAXIMUS prepared CR and sent to MOH. Ministry approved CRs for MedAccess and ARI.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
				Ministry later decided not to conformance test MedAccess and to use funding to support TELUS and wlakthough test cases with TELUS. Phase 2 completed March 31, 2013 Phase 3 to be scheduled
G		Conformance Specifications are not final for General Deployment. Final version was to be published Jan 4, 2013. DRAFT Specifications delivered in Jan, but require clarification. Updated version delivered in Feb, but not Final. Several rule clarifications / interpretations still exist and some rules were aligned to MedAccess that may be inacurate, causing negative impact to future vendors.	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance Testing. 4. Incorect or incomplete test cases.	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry have updated documents and had a 2 hour workshop with MAXIMUS to review. Documents also released to TELUS and MedAccess. Ministry feel they are on track to have confromance specs ready for test case devleopment. ** Conformance Specs must be finalized to a version that can be used for Test Case Development and Vendor Development. Specifications will be finalized before General Deployment.
G	High	Release 2 CATAMARAN Server Code Drop delayed due to runtime issues on Solaris NetX Platform. Due July 12, 2012 Catamaran targe delivery date of Aug 14 +/- 7 days This would push go live past FY to April 17, 2013. MAXIMUS assessed options to mitigate and achieve Go Live by March 28, 2013.	Delays to Release 2.0 schedule and GO LIVE. Project must implement this FY ** This must be mitigated to achieve Mar 2013 Go Live	CATAMARAN added resources and worked over-time to deliver by Aug 20, 2013. Option of phased delivery explored, but not feasible. Daily check-point meetings setup between MAXIMUS and CATAMARAN to track progress MAXIMUS development team packaging server code drop and NetX profiles to deploy to test Sep 14 – MAXIMUS deployed Server Code Drop to Test. MAXIMUS assessed scheudle impacts and re-planned to deliver GO LIVE by March 28, 2012
G	Low	Potential delays to Release 2 Go Live due to SSBC not signing agreement with HP and delaying HP from moving infrastructure from TELUS Data Center to SSBC Data Center. Agreement is now signed but delayed resulting in delays to HP which could impact PharmaNet infrastructure setup	Potential delays to Release 2.0 Go Live	MAXIMUS will continue to monitor progress of HP Data Center Move Project – PharmaNet Project activities have been prioritized within the Data Center Move Project to keep on schedule for PharmaNet Release 2.0 Go Live. This is currently tracking to schedule. Jan 21 – Data Center Move successfully completed over the weekend.

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Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, SSBC, HP, MoH have proposed moving MAXIMUS production servers) from the current firewall (ie. "zone b" firewall) to a new "Health Sector" firewall before Release 2.0 Go Live. The "Health Sector" firewall is already established in Calgary and is in MoH's/HP's plan to establish one in STMS Kamloops – however not for 6-9 months. This was not in the PharmaNet Modernization Project Plan as this was planned for 6-9 months from now, well after Go Live. Apr 11 – DECISION MADE TO MOVE to HEALTH SECTOR FIREWALL	Added scope and delays to Release 2 Go Live Release 2 Go Live	MAXIMUS to assess impact and draft CR as decision has been made to proceed with this.	HIGH	High	Scope, Schedule, Budget
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, responsibility of updating the firewall entries for new Pharmacies onboarding to access the PharmaNet application will be moved from SSBC to HP – as HP will be managing the firewall in STMS Kamloops. Existing process of requesting firewall updates will change from current "ITIMS" ticket to SSBC to future HP iStore request for firewall updates. Pharmacy Network connectivity and access is not MAXIMUS	Added Scope to Release 2. PharmaNet Operational for onboarding new Pharmacies will change. Additional effort and lead time required. MoH, SSBC and HP must establish new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.	MAIMUS to assess impacts and add to CR for Health Sector Firewall. 1. MoH, SSBC and HP have established new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures. 2. Assess how to deal with additional lead times and effort required.	High	High	Scope, Schedule, Budget

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
		responsibility. MAXIMUS is part of the process (as there is a step in the process to update a security table in the PharmaNet database). APR 11 – DECISION MADE TO PROCEED WITH ADDED SCOPE TO NETWORK MOVE.					
NEW	High	Ministry Decision to allow Med Access to Go Live in Production without fully testing result in the following: 1. Conformance Specifications are unclear in areas, were updated to align with this vendor, and have not been fully tested by this vendor, or any other vendor 2. Conformance Test Cases have not been fully tested 3. MedAccess did not pass the last round of Conformance Testing. 4. Vendor software changes have been made without fully testing changes. 5. Patient Safety Issues may result due Incorrect data entering PharmaNet and being used 6. Increased production support and data integrity issues	The following impacts may result; 1. Data Integrity Issues 2. Patient Safety issues 3. Increased Production Support effort and costs 4. Potential down-time of PharmaNet. 5. Conformance Specifications do not match the intent and are incorrectly interpreted by other vendors. 6. Conformance Test Cases may not match the intention of the Specification and not adequately test for required conditions as not clearly stated in specifications. 7. Other Vendors may not correctly develop to the intent of the specifications 8. Other vendors may not be adequately tested before going to production 9. Other vendors may change their software incorrectly to match the specifications aligned for MedAccess that are incorrect.	MAXIMUS have notified the Ministry of the Risks recommending that MedAccess be fully tested before Go Live in Production.	High	High	Scope, Quality and Budget
528682	High	Project M102 Project Cannot keep pace with schedule for deliverable target	Could result in 1-Delays final deployment date for Rel 1.1 and/or Rel 2	Mitigate	Medium	High	Schedule and Budget

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
		dates. Schedule may slip due to 1-required project decisions and approvals not being made in time 2-specific project milestones not on the critical path are not met in time 3-estimated effort is insufficient to complete deliverables 4-financial risks and controls standards are not met 5-Early Adopter Points of Service Vendors (EMR or Pharmacy) are not ready to conformance test when scheduled by the project 6-early Adopter Point of Service Vendors (EMR or Pharmacy) withdraw from project prior to deployment	2-Continue to lose stakeholder support 3-Scope may have to be reduced to meet project timelines Pharmacy Vendor delays resulting in rescheduling, re-planning, moving things around. Large impact on operations.				
528683	Normal	Project M104 Project expenditures or forecasts exceed available funding, or funding is reduced and allocated to other higher priority projects, which may result in project not being able to accomplish the PharmaNet Modernization Vision, and possible cancellation of the project	Project could be reduced or cancelled	Mitigate	Medium High	Medium High	Budget
544671	Normal	Release 2 Execution of Data Conversion for Release 2.0 may not fit in a single change window, and may need to be split into 2 or more windows.	Data Conversion activities to be assessed. If required, split activities between 2 or more scheduled change windows within existing timeline.	Mitigate – As with Release 1.0, MAXIMUS will assess the probability of this and determine how Data Conversion can be executed. If required, MAXIMUS will arrange with the Service Provider to split activities between multiple change windows and extend the hours of the change window if required.	Medium	Medium	Schedule

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
528680	Normal	Project M111 Scope (Solution Requirements) Change over the Project Life Cycle. PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Anything that adds to scope will impact project timelines.	Mitigate – No new scope to be added unless essential. MAXIMUS to assess impacts of any changes such as SRs and Change Requests will be raised to document and approve any change in scope.	Medium	Medium	Schedule & Budget

Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Remove Invalid Patient Dispense Records created by Dr. Bannerman during MedAccess Production Test in Summerland.	Feb 22, 2013	Ministry to arrange removal of records the same way they were created	Feb 22, 2013	Overdue	On Feb 22, 2013 invalid Patient Dispense Records were created by Dr. Bannerman during the MedAccess Production Test. Ministry to arrange removal of the records the same way they were created. ** These should have been removed on Feb 22, 2013, when the data was created. Mar 26 – follow up email sent as this is still outstanding. Apr 15 – Rob to follow up. Enola to resend Sorin a copy of the email sent on Mar 26 - done. April 25 – with Ministry.
CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 22, 2013	Ministry Approval	Mar 26, 2013	Overdue	Feb 21 - MAXIMUS created and submitted CR2012-008 Amended2 to revise scope as per Ministry Decision not to Conformance Test MedAccess, and instead support TELUS and walkthrough Test Cases. Mar 22, 2013 – CR updated to reflect new scope and submitted to Ministry for Review and Approval. Due Mar 26, 2013. Apr 2 – Overdue. Apr 15 – approved at JEC. Enola confirmed that MAXIMUS have not received a signed

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					copy of this CR.
Service Order for Fiscal Year 2013/14	~~Mar 28, 2013~~ Apr 25, 2013	~~Ministry to Draft, Finalize, Approve and Sign-off~~ MAXIMUS to Finalize and Send to Ministry for Approval	~~Apr 2, 2013~~ April 26, 2013	~~Overdue~~ In Progress	Service Order needs to be created for FY 2013/14 activities above the Fixed Price from last Fiscal Year. Ministry to draft before April 2, as this is required for work to continue on Apr 2, 2013. Apr 2 – Ministry to draft SO, review and approve with MAXIMUS and Ministry contracts, finalize and Sign-Off. Apr 15 – must assess work that must be done this FY then SO will be created. Meeting today to look at this. Apr 25 – Service Order Template received from MOH and MAXIMUS. MAXIMUS have updated and in internal reviews. MAXIMUS to submit once internally reviewed.
CR2013-002 PMP Conformance Testing TELUS	Apr 2, 2013	Ministry Approval	Apr 5, 2013	Overdue	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 28 – Ministry requested CR be updated and resubmitted to include FY 13/14 only. MAXIMUS updated CR and resubmitted for FY 13/14 only on April 2, 2013 with due date of April 5, 2013. Apr 25 – waiting for Ministry approval.
CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess and Test Case Updates	Apr 16, 2013	Ministry Approval	Apr 23, 2013	Overdue	Apr 11 – MAXIMUS is drafting CR Apr 16 – CR submitted to Ministry for Approval. Apr 25 – overdue. Waiting for Ministry approval
CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11, 2013	MAXIMUS to submit	April 26, 2013	In Progress	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – CR drafted and in MAXIMUS internal review. Once reviewed, MAXIMUS

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					will submit to Ministry for Approval.
CR2013-009 PMP Release 3.0 High Level Requirements	April 15, 2013	MAXIMUS to Submit	April 26, 2013	Submitted	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit to Ministry on April 26, 2013l
Decision on timing of Health Sector Firewall Move	Mar, 2013	Ministry Decision	April 19, 2013	April 11, 2013 Decision Made to Proceed with Health Sector Firewall	Health Sector Firewall move planned for 6-9 months after Release 2 Go Live. SSBC and HP would like to move this up to before Release 2 Go Live. If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before Network Move and therefore will delay Go Live by 2-3 weeks. If Decision is Yes, CR will be created to document the change Health Sector Firewall will also impact existing PROD applications that are on Zone B. These must be moved before R2 Go Live. Apr 4 – Ministry Decision required by APRIL 19, 2013 or will cause re-work of Network and further delays to R2 Go Live. Apr 11 – Decision Made to proceed with Health Sector Firewall. MAXIMUS to assess and draft CR.
Move from 4000 Seymour to Kamloops will result in additional scope of testing	Mar 2013	Ministry Decision	April 12, 2013	April 11, 2013 Decision Made to Proceed with added scope	Move from 4000 Seymour to Kamloops will result in additional scope and delays 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. However these are Ministry changes to the Ministry network that

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					should be tested by the Ministry and are not in scope of PharmaNet Modernization Project. Apr 11 – Decision Made to proceed with added scope. MAXIMUS to assess and include in CR for Health Sector Firewall.
Early Adopter Deployment Release 1.1 Communication Activity Matrix	Jan 29, 2013	Ministry to develop	Feb 5, 2013	Completed for Phase 1 and 2	Ministry to develop Communication Activity Matrix for Release 1.1. Phase 2 Communication Working Group formed to develop this. April 2 – EA Deployment completed for Phase 1 and 2. Matrix will be completed prior to Phase 3.
Release 2.0 Communication Activity Matrix	Jan 29, 2013	Ministry to Finalize	Apr 11, 2013	Done	Ministry to develop Communication Activity Matrix for Release 2.0 Communication Working Group formed to develop this. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Mar 28 – Drafted and updated. Needs finalization and approval. MOH to finalize by April 11, 2013. Done
Ministry Communication Plan	Apr 2, 2013	Ministry to Finalize	Apr 11, 2013	Done	Communication Working Group formed to develop the Communication Plan for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix. Howard to provide a draft to CWG by Mar 8 Mar 19 – Draft Communication Plan provided to MAXIMUS. This will be a living document and updated to add new deployments. Release 2 Plan Update and Sign-Off – April 11, 2013 Release 1.1 Phase 3 Plan Update and Sign-Off – TBD.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Ministry to finalize by April 11, 2013. Done

Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2
Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"
Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.
Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing
Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. Approved.
Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress

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Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.
Approved	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 6 – Approved and Signed Off
Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 21 – MAXIMUS amended CR2012-008 to revise scope to reflect Ministry Decision not to conformance test MedAccess and to use remaining time in CR for TELUS support and walkthrough of Test Cases. Mar 22 - Submitted to MOH. Due Mar 26, 2013.
Submitted	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27 Mar 28 – Ministry requested CR be updated to include FY 13/14 scope only. MAXIMUS updated CR and resubmitted April 2, 2013 with due date of April 5, 2013
Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.
Approved	Health Sector Firewall Decision	Due April 19, 2013 – IF Yes, this will delay R2 Go Live and MAXIMUS to assess impacts and draft CR. Apr 11 – Decision made to proceed with Health Sector Firewall.
Approved	Move from 4000 Seymour to Kamloops will result in additional scope of testing	Due April 12, 2013 – IF Yes, MAXIMUS will assess added scope and add to CR for Health Sector Firewall.
Submitted	CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess	Apr 11 – MAXIMUS is drafting CR Apr 16 – Submitted to Ministry for Review and Approval
In Progress	CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit Apr 26, 2013
In Progress	CR2013-009 PMP Release 3.0 High Level Requirements	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit Apr 26, 2013

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Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 – Pharmacy Production Deployment (Gibsons)	Done	Mar 30-31, 2013
Milestone	Phase 3 – EMR Production Deployment - TBD	Pending	TBD
Milestone	Conformance Test Case Updates	In Progress, Done for Vendor Testing	
	Release 2		
Milestone	Test Case Development Complete	Done	Mar 31, 2013
Milestone	Business Acceptance Test Case Development Complete	In Progress	
Milestone	Test Case Execution Complete	In Progress	
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25 , 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	Jan 6, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization.
	Conformance Test Case Updates based on Conformance Specification v - EMR	MAXIMUS	Mar 4, 2013	10%	G	In Progress
	Conformance Test Case Updates based on Conformance Specification v - Pharmacy	MAXIMUS	Apr 8, 2013	10%	G	In Progress

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	G	In Progress
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		100%	G	Done
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done
	Phase 1 Go Live	MOH	~~Oct 22, 2012~~ Nov 14, 2012	100%	G	Done
	Phase 2 Go Live	MOH	Mar 31, 2013	100%	G	Done
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012. Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012
D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done. Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Apr 12, 2013	75%	G	In Progress. This is being delivered in groups.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done. Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done. Approved Dec 28, 2012. Signed Off.

M	R2 - Test Case Development
	• Admin Portal – 100%
	• Non-functional – 100%
	• Batch Interface Reports – 100%
	• Functional Regression –100%
	  ○ Screens – 100%
	  ○ Server / Transactions – 100%
	• CPRS –100%
	• Data Migration – 10%
	• CAS – 100%
	• BAT – 100%
	• HIAL – N/A
	• EMPI – N/A
		MAXIMUS	Jan 31, 2013	100%	G	Done

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done. Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	Apr 12, 2012	75%	Y	In Progress. Batches are delivered in stages starting in Sep.
D	Updated Training Plan – R2	MAXIMUS	Sep , 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete • Admin Portal – 94% • Non-functional – 0% • Batch Interface Reports – 94% • Functional Regression – 98% o Screens – 100% o Server / Transactions – 100% - pending defect fix o Business Config – 0% • CPRS – 70% • Data Migration – 0% • CAS – 50% • BAT – 60% • HIAL – N/A – Performance only • EMPI – N/A – connectivity test only	MAXIMUS	May , 2012	75%	G	In Progress
M	BAT Test execution Complete PMP Screens – Done CPRS – Done HIBC Admin – Done Reports – In Progress	MAXIMUS	May , 2013	75%	G	In Progress
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
W	Deploy ALL to Production for Dry Run and Performance Testing	MAXIMUS	Feb 8, 2013	100%	G	Done
W	PROD Dry Run and Data Migration Test	MAXIMUS	Apr 5, 2013	100%	G	Done
D	Deployment Plan	MAXIMUS	May , 2013	50%	G	In Progress

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
M	Communication Activity Matrix	MOH	Apr 11, 2013	100%	G	Done
D	Communication Plan	MOH	Apr 11, 2013	100%	G	Done
W	MAXIMUS Go No Go Decision	MAXIMUS	Apr 23, 2013	0%	G	Pending
D	Updated Disaster Recovery Plan Document	MAXIMUS	Apr 19, 2012	50%	G	In Progress
M	Performance Testing Complete	MAXIMUS	May 4, 2013	25%	G	In Progress – Round 1 completes April 12, 2013
M	Disaster Recovery Testing Complete	MAXIMUS	Apr 29, 2013	0%	G	Pending
D	R2 Defect Action Plan	MAXIMUS	May , 2013	0%	G	Pending
M	R2 Final Test Results Summary	MAXIMUS	May , 2013	0%	G	Pending
D	Support of Ministry Risk and Controls Review for Rel 2	BMO	June , 2013	25%	G	In Progress
M	Ministry Risk and Controls Report Complete	MOH	June , 2013	10%	G	In Progress
M	Ministry Go/No Go decision R2 to deployment	MAXIMUS	June, 2013	0%	G	Pending
M	Production Environment Ready	MAXIMUS	June, 2013	25%	G	In Progress
M	Production Support Strategy and Plan	MAXIMUS	June ,2013	25%	G	In Progress
M	DR Environment Ready	MAXIMUS	June, 2013	10%	G	In Progress
M	R2 Deployment Complete	MAXIMUS	June, 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Sep, 2013	0%	G	Pending
	Proposed Release 3.0 New Functional Release (Record Locking and Clinical Services)					
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Test)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN Code Drop – Rel 3.0 to Test	CATAMARAN	TBD	0%	G	Pending
M	Test Rel 3.0	MAXIMUS	TBD	0%	G	Pending
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Prod)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN ode Drop – Rel 3.0 to Production	MAXIMUS	TBD	0%	G	Pending

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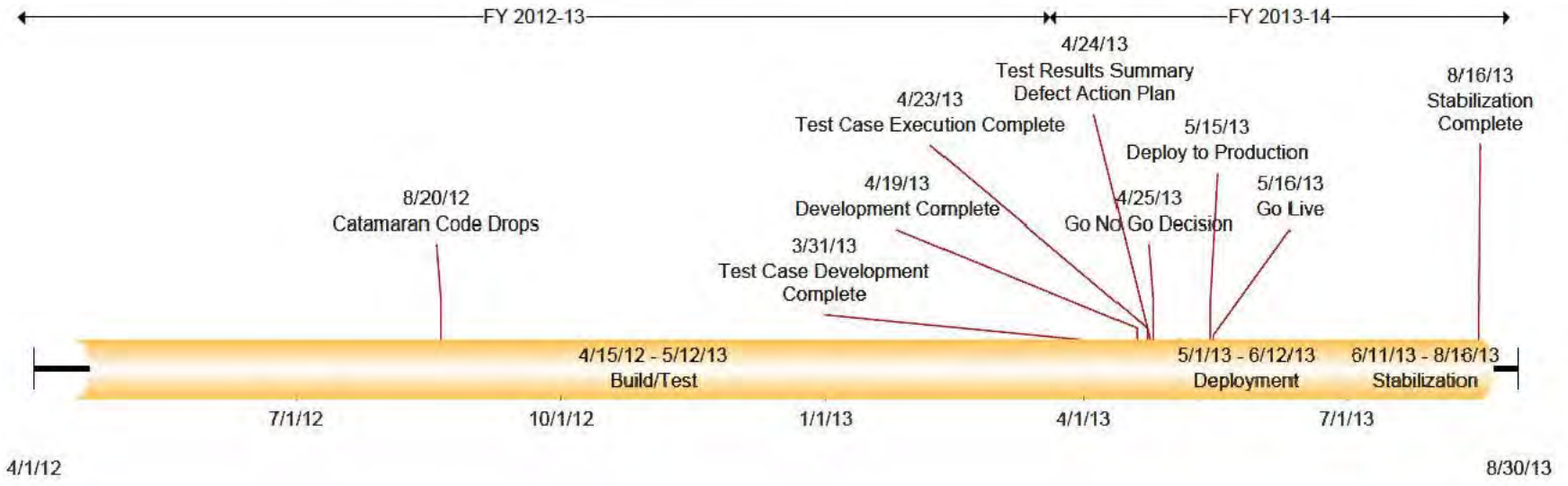
1. PharmaNet Modernization: (Dates will change based on Health Sector Firewall Decision received Apr 11, 2013)

Release 2 Footprint & Milestone Targets



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PharmaNet Modernization Progress Report (JPMT)

MAXIMUS CANADA
A MAXIMUS Company

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-Mar-02	2013-Mar-15
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status G Y R
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure	G
Quality	Adhering to MAXIMUS methodology	G
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Only - Nov 13 – 27, 2012 - completed Phase 2 – EMR and Pharmacy - TBD following Phase 1	Y
	Release 2.0 Infrastructure Upgrade to support increased system capacity resulting from Release 1. – Mar 28, 2013 Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines.. Schedule is at risk due to tight itmelines.	Y
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2012-017, CR2012-019) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency. CR2013-001 Approved and Signed off by Ministry, but Ministry funding is under discussion so Ministry have asked to defer invoicing of work done on this CR until Ministry Funding is determined.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report • CR2013-003 PMP Conformance Testing ARI – Signed Off •		G
Release 2.0 Delivered since the last report •		G
2. Outstanding Issues and Actions.		Y

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Key Open Project Issues

Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
Y	High	Potential Impacts to Release 2 Go Live due to the move to Health Section Firewall planned prior to Release 2 Go Live. This was not in the PharmaNet Modernization Project Plan as it was targeted for 6-9 months from now, well after Release 2 Go Live.	Firewall change may result in delayed or unsuccessful deployment of Release 2.	Request Move to Health Sector Fire Wall be implemented after Release 2 Go Live and Stabilization. Ministry are in agreement to defer this until after Release 2 Go Live and recommended this at meetings between Ministry, SSB and HP. Awaiting decision on this.
Y	High	New Firewall will result in changes to PharmaNet Operational processes as to how we request access for a new POS. Additional effort and lead time required to execute requests for onboarding new POS We need to make sure MoH, SSBC and HP have worked out the process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.	1. Request Move To New Firewall be delayed until After Release 2 Go Live and Stabilization. 2. Make sure MoH, SSBC and HP have worked out the process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures. 3. Allow time to establish new process and how we deal with additional lead times and effort required.	Request Move to Health Sector Fire Wall be implemented after Release 2 Go Live and Stabilization We need to make sure MoH, SSBC and HP have worked out the process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.
G	High	Potential Impact to Release 2 Go Live due to Annual Retro Run. Each Year Annual Retro is run from Feb to May 1 to reimburse families who have overpaid for Prescriptions. This overlaps Release 2.0 Deployment Activities which cannot both be run at the same time. Three Options presented in a new DR will outline impacts and decision must be made to either delay Retro or delay R2 Go Live.		Feb 5 – MAXIMUS submitted DR Outlining Options for Decision for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. MAXIMUS updating DR to re-submit. Feb 27 – Ministry signed DR approving Option 1.
Y	High	Early Adopter Deployment dates cannot keep changing and moving closer to Release 2.0 or will impact Release 2.0 Business Acceptance Activities and possibly Release 2.0	Release 2 Business Acceptance Testing activities moved to accommodate EA Deployment planned for Sept 2012 - Test Case Development moved from Sept 2012 t Nov 2012	Release 2.0 Business Acceptance Activites have been delayed to accommodate Early Adopter Conformance Activities. Once all EA Deployments are complete, MOH will meet with MedAccess, MOH and do a formal lessons

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		Go Live. Early Adopter Deployment Phase 1 was planned for April 2012, delayed to July 2012, then Sept 2012, then Oct 2012, and now planned for Nov. Phase 1: Nov 13-27 – Done Phase 2: March 28 TBD ??.	- Test Case Execution moved from Nov/Dec 2012 to Jan/Feb 2012 - Test Case Execution moved again to Feb/Mar 2012 - Potential risk to push out Rel 2 Go Live	learned and have a formal assesment document. Target completig interviews and qustionaire by mid Dec. EA Phase 2 is yet to be scheduled. This will be aligned so as not to impact Release 2.0 Go Live. Current projeted date for Phase 2 is March 28, 2013 – to be confirmed. Feb 14 – Ministry are requesting an additional round of testing for MedAccess and ARI be completed prior to March 31, 2013. MAXIMUS are evaluating and will include in a CR.
Y		Conformance Specifications are not final for General Deployment. Final version was to be published Jan 4, 2013. DRAFT Specifications delivered in Jan, but require clarification. Updated version delivered in Feb, but not Final. Several rule clarifications / interpretations still exist and some rules were aligned to MedAccess that may be inacurate, causing negative impact to future vendors.	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance Testing. 4. Incorect or incomplete test cases.	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry have updated documents and had a 2 hour workshop with MAXIMUS to review. Documents also released to TELUS and MedAccess. Ministry feel they are on track to have confromance specs ready for test case devleopment. ** Conformance Specs must be finalized before Test Cases can be completed and before General Deployment
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Increased Scope will impact project timelines	PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines.
G	High	Release 2 CATAMARAN Server Code Drop delayed due to runtime issues on Solaris NetX Platform. Due July 12, 2012 Catamaran targe delivery date of Aug 14 +/- 7 days This would push go live past FY to	Delays to Release 2.0 schedule and GO LIVE Project must implement this FY ** This must be mitigated to achieve Mar 2013 Go Live	CATAMARAN added resources and worked over-time to deliver by Aug 20, 2013. Option of phased delivery explored, but not feasible. Daily check-point meetings setup between MAXIMUS and CATAMARAN to track progress MAXIMUS development team packaging server code drop and NetX profiles to deploy to test Sep 14 – MAXIMUS deployed Server Code Drop to

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		April 17, 2013. MAXIMUS assessed options to mitigate and achieve Go Live by March 28, 2013.		Test. MAXIMUS assessed scheudle impacts and re-planned to deliver GO LIVE by March 28, 2012
G	Low	Potential delays to Release 2 Go Live due to SSBC not signing agreement with HP and delaying HP from moving infrastructure from TELUS Data Center to SSBC Data Center. Agreement is now signed but delayed resulting in delays to HP which could impact PharmaNet infrastructure setup	Potential delays to Release 2.0 Go Live	MAXIMUS will continue to monitor progress of HP Data Center Move Project – PharmaNet Project activities have been prioritized within the Data Center Move Project to keep on schedule for PharmaNet Release 2.0 Go Live. This is currently tracking to schedule. Jan 21 – Data Center Move successfully completed over the weekend.

Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
NEW	High	Ministry Decision to allow Med Access to Go Live in Production without fully testing result in the following: 1. Conformance Specifications are unclear in areas, were updated to align with this vendor, and have not been fully tested by this vendor, or any other vendor 2. Conformance Test Cases have not been fully tested 3. MedAccess did not pass the last round of Conformance Testing. 4. Vendor software changes have been made without fully testing changes. 5. Patient Safety Issues may result due Incorrect data entering PharmaNet and being used	The following impacts may result; 1. Data Integrity Issues 2. Patient Safety issues 3. Increased Production Support effort and costs 4. Potential down-time of PharmaNet. 5. Conformance Specifications do not match the intent and are incorrectly interpreted by other vendors. 6. Conformance Test Cases may not match the intention of the Specification and not adequately test for required conditions as not clearly stated in specifications. 7. Other Vendors may not correctly develop to the intent of the specifications 8. Other vendors may not be	MAXIMUS have notified the Ministry of the Risks recommending that MedAccess be fully tested before Go Live in Production.	High	High	Scope, Quality and Budget

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		6. Increased production support and data integrity issues	adequately tested before going to production 9. Other vendors may change their software incorrectly to match the specifications aligned for MedAccess that are incorrect.				
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, SSBC, HP, MoH have proposed moving MAXIMUS production servers) from the current firewall (ie. "zone b" firewall) to a new "Health Sector" firewall before Release 2.0 Go Live. The "Health Sector" firewall is already established in Calgary and is in MoH's/HP's plan to establish one in STMS Kamloops – however not for 6-9 months. This was not in the PharmaNet Modernization Project Plan as this was planned for 6-9 months from now, well after Go Live.	Potential Impact to Release 2 Go Live and may result in unsuccessful deployment of PharmaNet Release 2.	Request Move To New Firewall be delayed until After Release 2 Go Live and Stabilization.	HIGH	High	Schedule and Scope
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, responsibility of updating the firewall entries for new Pharmacies onboarding to access the PharmaNet application will be moved from SSBC to HP – as HP will be managing the firewall in STMS Kamloops. Existing process of requesting firewall updates will change from current "ITIMS" ticket to SSBC to future HP iStore request for firewall updates.	PharmaNet Operational for onboarding new Pharmacies will change. Additional effort and lead time required. MoH, SSBC and HP must establish new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.	1. Request Move To New Firewall be delayed until After Release 2 Go Live and Stabilization. 2. MoH, SSBC and HP have established new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures. 3. Assess how to deal with additional lead times and effort required.	High	High	Schedule and Scope

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
		Pharmacy Network connectivity and access is not MAXIMUS responsibility. MAXIMUS is part of the process (as there is a step in the process to update a security table in the PharmaNet database).					
528682	High	Project M102 Project Cannot keep pace with schedule for deliverable target dates. Schedule may slip due to 1-required project decisions and approvals not being made in time 2-specific project milestones not on the critical path are not met in time 3-estimated effort is insufficient to complete deliverables 4-financial risks and controls standards are not met 5-Early Adopter Points of Service Vendors (EMR or Pharmacy) are not ready to conformance test when scheduled by the project 6-early Adopter Point of Service Vendors (EMR or Pharmacy) withdraw fromproject prior to deployment	Could result in 1-Delays final deployment date for Rel 1.1 and/or Rel 2 2-Continue to lose stakeholder support 3-Scope may have to be reduced to meet project timelines Pharmacy Vendor delays resulting in rescheduling, re-planning, moving things around. Large impact on operations.	Mitigate	Medium	High	Schedule and Budget
528683	Normal	Project M104 Project expenditures or forecasts exceed available funding, or funding is reduced and allocated to other higher priority projects, which may result in project not being able to accomplish the PharmaNet Modernization Vision, and possible cancellation of the project	Project could be reduced or cancelled	Mitigate	Medium High	Medium High	Budget

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
544671	Normal	Release 2 Execution of Data Conversion for Release 2.0 may not fit in a single change window, and may need to be split into 2 or more windows.	Data Conversion activities to be assessed. If required, split activities between 2 or more scheduled change windows within existing timeline.	Mitigate – As with Release 1.0, MAXIMUS will assess the probability of this and determine how Data Conversion can be executed. If required, MAXIMUS will arrange with the Service Provider to split activities between multiple change windows and extend the hours of the change window if required.	Medium	Medium	Schedule
528680	Normal	Project M111 Scope (Solution Requirements) Change over the Project Life Cycle. PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Anything that adds to scope will impact project timelines.	Mitigate – No new scope to be added unless essential. MAXIMUS to assess impacts of any changes such as SRs and Change Requests will be raised to document and approve any change in scope.	Medium	Medium	Schedule & Budget

Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
CR 2013-001 PMP RX Dose Field Fix	Jan 8, 2013	Ministry Sign-Off	Jan 14, 2013	Signed Off Feb 8, 2013	This needed to be approved by Jan 14, 2013 to be included in Release 2.0 MAXIMUS were asked at Dec 13, 2012 JEC to continue with work. Ministry need to approve and fund the CR. At JEC on Jan 22, 2013 this was verbally approved as a fixed price CR. Jan 29 – CR updated to show fixed price and resubmitted to MOH for approval. Ministry Sign-Off received Feb 8, 2013. Ministry has determined funding Source. This can now be closed as Feb invoice can now include deferred billing from Dec and Jan. This can now be closed.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Communication Activity Matrix	Jan 29, 2013	Ministry to develop	Feb 5, 2013	In Progress	A Communication Working Group needs to be formed to develop the Communication Activity Matrix for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Ministry are drafting as part of Communication Working Group. Ministry are creating to Activity Matrixes 1 – release 1.1 2 – release 2
Communication Plan	Jan 29, 2013	Ministry to develop	Feb 2013	In Progress	A Communication Working Group has been formed to develop the Communication Plan for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix. Howard to provide a draft to CWG by Mar 8
CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 25, 2013	Ministry Approval	Feb 27, 2013	Overdue	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval.
CR2013-002 PMP Conformance Testing TELUS	Feb 25, 2013	Ministry Approval	Feb 27, 2013	Overdue	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval
CR2013-003 PMP Conformance Testing ARI	Feb 25, 2013	Ministry Sign-Off	Feb 27, 2013	Signed Off March 11, 2013	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					CR, but Ministry asked to delay by 1 week to Feb 25 Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Approved and Signed Off. This can now be closed.

Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2
Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"
Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.
Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing
Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. MOH approval via email outstanding

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Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress
Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope?	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.
Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27
Submitted	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27
Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.

Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 Deployment	Pending	TBD
Milestone	Conformance Test Case Updates	In Progress	
	Release 2		
Milestone	Test Case Development Complete	In Progress	
Milestone	Business Acceptance Test Case Development Complete	In Progress	
Milestone	Test Case Execution Complete	In Progress	

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Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25, 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	Jan 6, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization.
	Conformance Test Case Updates based on Final Conformance Specification - EMR	MAXIMUS	Mar 4, 2013	10%	G	In Progress
	Conformance Test Case Updates based on Final Conformance Specification - Pharmacy	MAXIMUS	Apr 8, 2013	10%	G	In Progress
	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	G	In Progress
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		75%	G	In Progress. Training delivered to HIBC Help Desk, College of Physicians. Training for Ministry Special Authorities and Pharmacists completed June 19, 2012
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done
	Phase 1 Go Live	MOH	~~Oct 22, 2012~~ Nov 14, 2012	100%	G	Done

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	Phase 2 Go Live	MOH	TBD	0%	Y	
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012. Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012
D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done. Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Feb 14, 2013	75%	G	In Progress. This is being delivered in groups.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done. Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done. Approved Dec 28, 2012. Signed Off.
M	R2 - Test Case Development • Admin Portal – 100% • Non-functional – 80% • Batch Interface Reports – 100% • Functional Regression –100% o Screens – 100% o Server / Transactions – 100% • CPRS –100% • Data Migration – 10% • CAS – 100% • BAT – 99% • HIAL – N/A • EMPI – N/A	MAXIMUS	Jan 31, 2013	75%	G	In Progress
M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul __, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done. Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done

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M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	Feb 15, 2012	75%	Y	In Progress. Batches are delivered in stages starting in Sep.
D	Updated Training Plan – R2	MAXIMUS	Sep , 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete • Admin Portal – 94% • Non-functional – 0% • Batch Interface Reports – 94% • Functional Regression – 98% o Screens – 100% o Server / Transactions – 100% - pending defect fix o Business Config – 0% • CPRS – 70% • Data Migration – 0% • CAS – 0% • BAT – 35% • HIAL – N/A – Performance only • EMPI – N/A – connectivity test only	MAXIMUS	Feb 14, 2012	50%	G	In Progress
M	BAT Test execution Complete PMP Screens – in progress CPRS – in progress HIBC Admin - Pending	MAXIMUS	Mar 8, 2013	25%	G	In Progress
M	Deploy ALL to Production for Dry Run and Performance Testing	MAXIMUS	Feb 8, 2013	75%	G	In Progress
M	Performance Testing Complete	MAXIMUS	Mar 8, 2013	0%	G	Pending
M	Disaster Recovery Testing Complete	MAXIMUS	Mar 8, 2013	0%	G	Pending
D	Updated Disaster Recovery Plan Document	MAXIMUS	Feb 28, 2012	50%	G	In Progress
D	Support of Ministry Risk and Controls Review for Rel 2	BMO	Mar 28, 2013	25%	G	In Progress
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
D	Deployment Plan	MAXIMUS	Mar 15, 213	25%	G	In Progress
M	Production Support Strategy and Plan	MAXIMUS	Mar 28, 2013	25%	G	In Progress
D	R2 Defect Action Plan	MAXIMUS	Mar 11, 2013	0%	G	Pending
M	R2 Final Test Results Summary	MAXIMUS	Mar 11, 2013	0%	G	Pending
M	Ministry Risk and Controls Report Complete	MOH	TBD before	10%	G	In Progress

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			Mar 14, 2013			
M	Communication Activity Matrix	MOH	TBD before Mar 14, 2013	50%	Y	In Progress
D	Communication Plan	MOH	TBD before Mar 14, 2013	10%	Y	In Progress
W	MAXIMUS Go No Go Decision	MAXIMUS	Mar 14, 2013	0%	G	Pending
M	Go/No Go decision R2 to deployment	MAXIMUS	Mar 20, 2013	0%	G	Pending
M	Production Environment Ready	MAXIMUS	Mar 20, 2013	25%	G	In Progress
M	DR Environment Ready	MAXIMUS	Mar 28, 2013	10%	G	In Progress
M	R2 Deployment Complete	MAXIMUS	Mar 28, 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Jun 12, 2013	0%	G	Pending
	Proposed Release 3.0 New Functional Release (Record Locking and Clinical Services)					
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Test)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN Code Drop – Rel 3.0 to Test	CATAMARAN	TBD	0%	G	Pending
M	Test Rel 3.0	MAXIMUS	TBD	0%	G	Pending
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Prod)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN ode Drop – Rel 3.0 to Production	MAXIMUS	TBD	0%	G	Pending

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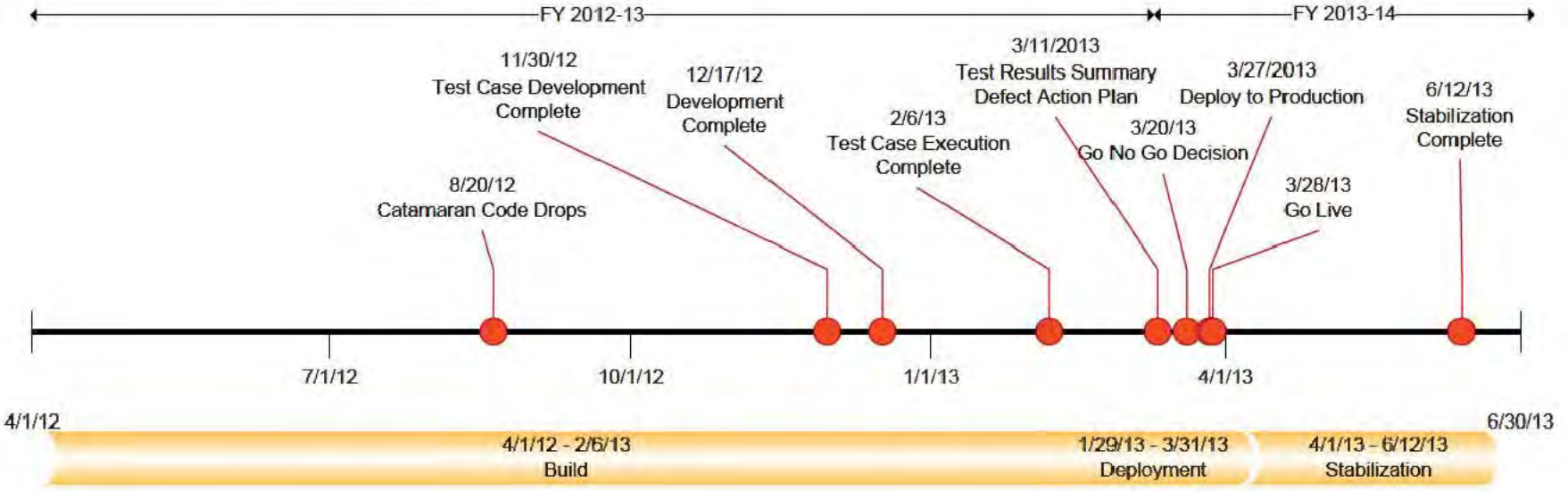
1. PharmaNet Modernization:

Release 2 Footprint & Milestone Targets



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PharmaNet Modernization Progress Report (JPMT)

MAXIMUS CANADA A MAXIMUS Company

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-Mar-30	2013-Apr-12
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status (G / Y / R)
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure – Added Scope of Health Sector Firewall and additional Testing of Move from Seymour to Kamloopsl.	Y
Quality	Adhering to MAXIMUS methodology	G
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Production Pilot - Nov 13 – 27, 2012 - completed Phase 2 – Pharmacy Production Deployment (Gibsons) - Mar 30-31 Phase 3 – EMR Production Deployment - TBD	G
	Release 2.0 PharmaNet Infrastructure Upgrade Go Live – planned for March 28, 2013. Delayed to May 16, 2013. Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines. ARI Conformance Testing added to Project Scope. Schedule is at risk due to tight itmelines. Go Live deferred to May 16, 2013. Health Sector Firewall Decision wil Delay Go Live. Go Live is no longer planned for May 16, 2013. MAXIMUS to assess and include in CR along with additional Testing of move from Seymour to Kamloops.	R
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2012-017, CR2012-019) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report • ARI Conformance Testing • CR2012-017 Conformance Test Execution Amended – Approved and Signed Off • CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only - Review and Approval • CR2013-003 Conformance Testing ARI – Approved for FY13/14		G
Release 2.0 Delivered since the last report		G

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• Service Order 2013-04 for Feb/Mar 2013 – Approved. Signed-Off.	
2. Outstanding Issues and Actions.	Y

Key Open Project Issues

Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
R	High	Release 2 Ministry Decision on Health Sector Firewall changes were planned for after Release 2. Now being moved up to before R2 Go Live. Ministry meeting held Mar 25 to decide timing - waiting for Ministry Decision	If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before changes and testing of Firewall and therefore will delay Go Live.	If Decision is Yes, a CR will be created to document the change that will delay the Network Move and therefore delay Release 2 Go Live. This will also impact existing PRODUCTION applications that are on Zone B. These must be moved before R2 Go Live. Decision required by APRIL 19. If decided after will cause re-work for Network Move and additional delays. IF YES, will delay R2 Go Live. Apr 11 – Ministry Decision is to proceed with Health Sector Firewall. This will delay Release 2 GO Live. MAXIMUS assess impacts and draft a CR.
Y	High	Release 2 Move from 4000 Seymour to Kamloops will result in additional scope of testing. These are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project.	Ministry are requesting more work that was not in scope 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. These are not in scope of PharmaNet Modernization Project.	Ministry Decision on if this is to be added to Scope. If YES, MAXIUS will create a CR. Decision required by APRIL 12. If decided after, will delay Go Live even further. Apr 11 – Ministry Decision is to proceed with Additional Scope. This will be assessed and included in the CR for the Health Sector Firewall.
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Increased Scope will impact project timelines	PharmaNet Modernization Scope needs to be frozen. Anything that adds to scope will impact project timelines.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
G	High	Ministry requirement change to send files to Condor via SFTP rather than FTP. Decision required by Friday Mar 22 as to if MAXIMUS must change to accommodate this.	Additional development, testing and infrastructure changes required to accommodate this change. MAXIMUS estimate this will take 4-6 days to complete, and we need a decision this week notifying us if we are to proceed with this change or not.	Ministry decision required by Mar 22 on if this must be changed. If so CR to be raised as per email estimate provided to Ministry on Mar 20 – overdue. ** Mar 28, 2013 – Ministry Decision is to change to SFTP. MAXIMUS to make changes to accommodate this in R2 as per estimate provided.
G	High	Potential Impact to Release 2 Go Live due to Annual Retro Run. Each Year Annual Retro is run from Feb to May 1 to reimburse families who have overpaid for Prescriptions. This overlaps Release 2.0 Deployment Activities which cannot both be run at the same time. Three Options presented in a new DR will outline impacts and decision must be made to either delay Retro or delay R2 Go Live.		Feb 5 – MAXIMUS submitted DR Outlining Options for Decision for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. MAXIMUS updating DR to re-submit. Feb 27 – Ministry signed DR approving Option 1.
G	High	Early Adopter Deployment dates cannot keep changing and moving closer to Release 2.0 or will impact Release 2.0 Business Acceptance Activities and possibly Release 2.0 Go Live. Early Adopter Deployment Phase 1 was planned for April 2012, delayed to July 2012, then Sept 2012, then Oct 2012, and now planned for Nov. Phase 1: Nov 13-27 – Done Phase 2: March 30-31 – Done Phase 3: TBD	Release 2 Business Acceptance Testing activities moved to accommodate EA Deployment planned for Sept 2012 - Test Case Development moved from Sept 2012 t Nov 2012 - Test Case Execution moved from Nov/Dec 2012 to Jan/Feb 2012 - Test Case Execution moved again to Feb/Mar 2012 - Potential risk to push out Rel 2 Go Live	Release 2.0 Business Acceptance Activites have been delayed to accommodate EA Conformance. Once all EA Deployments are complete, MOH will meet with MedAccess, MOH and do a formal lessons learned and have a formal assesment document. Target completig interviews / qustionaire by mid Dec. EA Phase 2 is yet to be scheduled. This will be aligned so as not to impact Release 2.0 Go Live. Current projeted date for Phase 2 is March 28, 2013 – to be confirmed. Feb 14 – Ministry are requesting an additional round of testing for MedAccess and ARI be completed prior to March 31, 2013. MAXIMUS are evaluating and will include in a CR. MAXIMUS prepared CR and sent to MOH. Ministry approved CRs for MedAccess and ARI. Ministry later decided not to conformance test MedAccess and to use funding to support TELUS and wlakthough test cases with TELUS. Phase 2 completed March 31, 2013

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
				Phase 3 to be scheduled
G		Conformance Specifications are not final for General Deployment. Final version was to be published Jan 4, 2013. DRAFT Specifications delivered in Jan, but require clarification. Updated version delivered in Feb, but not Final. Several rule clarifications / interpretations still exist and some rules were aligned to MedAccess that may be inacurate, causing negative impact to future vendors.	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance Testing. 4. Incorect or incomplete test cases.	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry have updated documents and had a 2 hour workshop with MAXIMUS to review. Documents also released to TELUS and MedAccess. Ministry feel they are on track to have confromance specs ready for test case devleopment. ** Conformance Specs must be finalized to a version that can be used for Test Case Development and Vendor Development. Specifications will be finalized before General Deployment.
G	High	Release 2 CATAMARAN Server Code Drop delayed due to runtime issues on Solaris NetX Platform. Due July 12, 2012 Catamaran targe delivery date of Aug 14 +/- 7 days This would push go live past FY to April 17, 2013. MAXIMUS assessed options to mitigate and achieve Go Live by March 28, 2013.	Delays to Release 2.0 schedule and GO LIVE. Project must implement this FY ** This must be mitigated to achieve Mar 2013 Go Live	CATAMARAN added resources and worked over-time to deliver by Aug 20, 2013. Option of phased delivery explored, but not feasible. Daily check-point meetings setup between MAXIMUS and CATAMARAN to track progress MAXIMUS development team packaging server code drop and NetX profiles to deploy to test Sep 14 – MAXIMUS deployed Server Code Drop to Test. MAXIMUS assessed scheudle impacts and re-planned to deliver GO LIVE by March 28, 2012
G	Low	Potential delays to Release 2 Go Live due to SSBC not signing agreement with HP and delaying HP from moving infrastructure from TELUS Data Center to SSBC Data Center. Agreement is now signed but delayed resulting in delays to HP which could impact PharmaNet infrastructure setup	Potential delays to Release 2.0 Go Live	MAXIMUS will continue to monitor progress of HP Data Center Move Project – PharmaNet Project activities have been prioritized within the Data Center Move Project to keep on schedule for PharmaNet Release 2.0 Go Live. This is currently tracking to schedule. Jan 21 – Data Center Move successfully completed over the weekend.

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Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, SSBC, HP, MoH have proposed moving MAXIMUS production servers) from the current firewall (ie. "zone b" firewall) to a new "Health Sector" firewall before Release 2.0 Go Live. The "Health Sector" firewall is already established in Calgary and is in MoH's/HP's plan to establish one in STMS Kamloops – however not for 6-9 months. This was not in the PharmaNet Modernization Project Plan as this was planned for 6-9 months from now, well after Go Live. Apr 11 – DECISION MADE TO MOVE to HEALTH SECTOR FIREWALL	Added scope and delays to Release 2 Go Live Release 2 Go Live	MAXIMUS to assess impact and draft CR as decision has been made to proceed with this.	HIGH	High	Scope, Schedule, Budget
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, responsibility of updating the firewall entries for new Pharmacies onboarding to access the PharmaNet application will be moved from SSBC to HP – as HP will be managing the firewall in STMS Kamloops. Existing process of requesting firewall updates will change from current "ITIMS" ticket to SSBC to future HP iStore request for firewall updates. Pharmacy Network connectivity and access is not MAXIMUS responsibility. MAXIMUS is part	Added Scope to Release 2. PharmaNet Operational for onboarding new Pharmacies will change. Additional effort and lead time required. MoH, SSBC and HP must establish new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.	MAIMUS to assess impacts and add to CR for Health Sector Firewall. 1. MoH, SSBC and HP have established new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures. 2. Assess how to deal with additional lead times and effort required.	High	High	Scope, Schedule, Budget

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		of the process (as there is a step in the process to update a security table in the PharmaNet database). APR 11 – DECISION MADE TO PROCEED WITH ADDED SCOPE TO NETWORK MOVE.					
NEW	High	Ministry Decision to allow Med Access to Go Live in Production without fully testing result in the following: 1. Conformance Specifications are unclear in areas, were updated to align with this vendor, and have not been fully tested by this vendor, or any other vendor 2. Conformance Test Cases have not been fully tested 3. MedAccess did not pass the last round of Conformance Testing. 4. Vendor software changes have been made without fully testing changes. 5. Patient Safety Issues may result due Incorrect data entering PharmaNet and being used 6. Increased production support and data integrity issues	The following impacts may result; 1. Data Integrity Issues 2. Patient Safety issues 3. Increased Production Support effort and costs 4. Potential down-time of PharmaNet. 5. Conformance Specifications do not match the intent and are incorrectly interpreted by other vendors. 6. Conformance Test Cases may not match the intention of the Specification and not adequately test for required conditions as not clearly stated in specifications. 7. Other Vendors may not correctly develop to the intent of the specifications 8. Other vendors may not be adequately tested before going to production 9. Other vendors may change their software incorrectly to match the specifications aligned for MedAccess that are incorrect.	MAXIMUS have notified the Ministry of the Risks recommending that MedAccess be fully tested before Go Live in Production.	High	High	Scope, Quality and Budget
528682	High	Project M102 Project Cannot keep pace with schedule for deliverable target dates.	Could result in 1-Delays final deployment date for Rel 1.1 and/or Rel 2 2-Continue to lose stakeholder	Mitigate	Medium	High	Schedule and Budget

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		Schedule may slip due to 1-required project decisions and approvals not being made in time 2-specific project milestones not on the critical path are not met in time 3-estimated effort is insufficient to complete deliverables 4-financial risks and controls standards are not met 5-Early Adopter Points of Service Vendors (EMR or Pharmacy) are not ready to conformance test when scheduled by the project 6-early Adopter Point of Service Vendors (EMR or Pharmacy) withdraw from project prior to deployment	support 3-Scope may have to be reduced to meet project timelines Pharmacy Vendor delays resulting in rescheduling, re-planning, moving things around. Large impact on operations.				
528683	Normal	Project M104 Project expenditures or forecasts exceed available funding, or funding is reduced and allocated to other higher priority projects, which may result in project not being able to accomplish the PharmaNet Modernization Vision, and possible cancellation of the project	Project could be reduced or cancelled	Mitigate	Medium High	Medium High	Budget
544671	Normal	Release 2 Execution of Data Conversion for Release 2.0 may not fit in a single change window, and may need to be split into 2 or more windows.	Data Conversion activities to be assessed. If required, split activities between 2 or more scheduled change windows within existing timeline.	Mitigate – As with Release 1.0, MAXIMUS will assess the probability of this and determine how Data Conversion can be executed. If required, MAXIMUS will arrange with the Service Provider to split activities between multiple change windows and extend the hours of the change window if required.	Medium	Medium	Schedule
528680	Normal	Project M111	Anything that adds to scope will	Mitigate – No new scope to be	Medium	Medium	Schedule

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		Scope (Solution Requirements) Change over the Project Life Cycle. PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	impact project timelines.	added unless essential. MAXIMUS to assess impacts of any changes such as SRs and Change Requests will be raised to document and approve any change in scope.			& Budget

Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Service Order 2013-04 Feb/Mar 2013 for work added after SO 2013-003 Signed	Mar 28, 2013	Ministry Sign-Off	Mar 28, 2013	Signed Off April 4, 2013	Service Order drafted and approved for Feb/Mar activities above the current SO 2013-04. Mar 28 – SO Approved and signed by MAXIMUS. Ministry to sign today. Apr 3 - Waiting for Ministry Sign-Off – Overdue. Apr 4 – Signed off and copy sent to MAXIMUS. This can now be closed.
Service Order for Fiscal Year 2013/14	Mar 28, 2013	Ministry to Draft, Finalize, Approve and Sign-off	Apr 2, 2013	Overdue	Service Order needs to be created for FY 2013/14 activities above the Fixed Price from last Fiscal Year. Ministry to draft before April 2, as this is required for work to continue on Apr 2, 2013. Apr 2 – Ministry to draft SO, review and approve with MAXIMUS and Ministry contracts, finalize and Sign-Off. Apr 15 – must assess work that must be done this FY then SO will be created. Meeting today to look at this.
Decision on timing of Health Sector Firewall Move	Mar, 2013	Ministry Decision	April 19, 2013	April 11, 2013 Decision Made to Proceed with Health Sector Firewall	Health Sector Firewall move planned for 6-9 months after Release 2 Go Live. SSBC and HP would like to move this up to before Release 2 Go Live. If Health Sector Firewall is moved after Go

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before Network Move and therefore will delay Go Live by 2-3 weeks. If Decision is Yes, CR will be created to document the change Health Sector Firewall will also impact existing PROD applications that are on Zone B. These must be moved before R2 Go Live. Apr 4 – Ministry Decision required by APRIL 19, 2013 or will cause re-work of Network and further delays to R2 Go Live. Apr 11 – Decision Made to proceed with Health Sector Firewall. MAXIMUS to assess and draft CR.
Move from 4000 Seymour to Kamloops will result in additional scope of testing	Mar 2013	Ministry Decision	April 12, 2013	April 11, 2013 Decision Made to Proceed with added scope	Move from 4000 Seymour to Kamloops will result in additional scope and delays 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. However these are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project. Apr 11 – Decision Made to proceed with added scope. MAXIMUS to assess and include in CR for Health Sector Firewall.
Remove Invalid Patient Dispense Records created by Dr. Bannerman during MedAccess Production Test in	Feb 22, 2013	Ministry to arrange removal of records the same way they were	Feb 22, 2013	Overdue	On Feb 22, 2013 invalid Patient Dispense Records were created by Dr. Bannerman during the MedAccess Production Test.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Summerland.		created			Ministry to arrange removal of the records the same way they were created. ** These should have been removed on Feb 22, 2013, when the data was created. Mar 26 – follow up email sent as this is still outstanding. Apr 15 – Rob to follow up. Enola to send Sorin a copy of the email sent on Mar 26.
Early Adopter Deployment Release 1.1 Communication Activity Matrix	Jan 29, 2013	Ministry to develop	Feb 5, 2013	Completed for Phase 1 and 2	Ministry to develop Communication Activity Matrix for Release 1.1. Phase 2 Communication Working Group formed to develop this. April 2 – EA Deployment completed for Phase 1 and 2. Matrix will be completed prior to Phase 3.
Release 2.0 Communication Activity Matrix	Jan 29, 2013	Ministry to Finalize	Apr 11, 2013	Done	Ministry to develop Communication Activity Matrix for Release 2.0 Communication Working Group formed to develop this. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Mar 28 – Drafted and updated. Needs finalization and approval. MOH to finalize by April 11, 2013. Done
Ministry Communication Plan	Apr 2, 2013	Ministry to Finalize	Apr 11, 2013	Done	Communication Working Group formed to develop the Communication Plan for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix. Howard to provide a draft to CWG by Mar 8 Mar 19 – Draft Communication Plan provided to MAXIMUS. This will be a living document and updated to add new deployments. Release 2 Plan Update and Sign-Off – April 11, 2013

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Release 1.1 Phase 3 Plan Update and Sign-Off – TBD. Ministry to finalize by April 11, 2013. Done
CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 22, 2013	Ministry Approval	Mar 26, 2013	Overdue	Feb 21 - MAXIMUS created and submitted CR2012-008 Amended2 to revise scope as per Ministry Decision not to Conformance Test MedAccess, and instead support TELUS and walkthrough Test Cases. Mar 22, 2013 – CR updated to reflect new scope and submitted to Ministry for Review and Approval. Due Mar 26, 2013. Apr 2 – Overdue. Apr 15 – said this was approved at JEC. Enola confirmed that MAXIMUS have not received a signed copy of this CR..
CR2013-002 PMP Conformance Testing TELUS	Apr 2, 2013	Ministry Approval	Apr 5, 2013	Overdue	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 28 – Ministry requested CR be updated and resubmitted to include FY 13/14 only. MAXIMUS updated CR and resubmitted on April 2, 2013 with due date of April 5, 2013.
Ministry Decision on File Transfer Method to Health Ideas via Condor. Does this stay with FTP or change to SFTP as per new Ministry Requirement.	Mar , 2013	Ministry Decision	Mar 22, 2013	Decision =SFTP Mar 28, 2013	Mar 20 – MAXIMUS provided estimate and requested Ministry Decision by Mar 22. Overdue. Mar 25 – MAXIMUS requested response today. Mar 28, 2013 - Decision is SFTP. MAXIMUS to initiate changes. This can now be closed.
CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess and Test Case Updates	Apr 11, 2013	MAXIMUS to Submit CR	Apr 15, 2013	In Progress	Apr 11 – MAXIMUS is drafting CR
CR2013-008 PMP Health Sector Firewall and Added Scope of Testing	Apr 11, 2013	MAXIMUS to Assess Impacts and draft CR	Apr 19, 2013	Pending	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR.

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Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2
Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"
Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.
Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing
Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. Approved.
Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress
Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope?	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.

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Approved	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 6 – Approved and Signed Off
Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 21 – MAXIMUS amended CR2012-008 to revise scope to reflect Ministry Decision not to conformance test MedAccess and to use remaining time in CR for TELUS support and walkthrough of Test Cases. Mar 22 - Submitted to MOH. Due Mar 26, 2013.
Submitted	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27 Mar 28 – Ministry requested CR be updated to include FY 13/14 scope only. MAXIMUS updated CR and resubmitted April 2, 2013 with due date of April 5, 2013
Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.
Approved	Health Sector Firewall Decision	Due April 19, 2013 – IF Yes, this will delay R2 Go Live and MAXIMUS to assess impacts and draft CR. Apr 11 – Decision made to proceed with Health Sector Firewall.
Approved	Move from 4000 Seymour to Kamloops will result in additional scope of testing	Due April 12, 2013 – IF Yes, MAXIMUS will assess added scope and add to CR for Health Sector Firewall.
Pending	CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess	Apr 11 – MAXIMUS is drafting CR
Pending	CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR.

Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 – Pharmacy Production Deployment (Gibsons)	Done	Mar 30-31, 2013
	Phase 3 – EMR Production Deployment - TBD	Pending	TBD

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Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
Milestone	Conformance Test Case Updates	In Progress, Done for Vendor Testing	
	Release 2		
Milestone	Test Case Development Complete	Done	Mar 31,2013
Milestone	Business Acceptance Test Case Development Complete	In Progress	
Milestone	Test Case Execution Complete	In Progress	
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25 , 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	Jan 6, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization.
	Conformance Test Case Updates based on Conformance Specification v____ - EMR	MAXIMUS	Mar 4, 2013	10%	G	In Progress
	Conformance Test Case Updates based on Conformance Specification v - Pharmacy	MAXIMUS	Apr 8, 2013	10%	G	In Progress
	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	G	In Progress
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		100%	G	Done
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done

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	Phase 1 Go Live	MOH	~~Oct 22, 2012~~ Nov 14, 2012	100%	G	Done
	Phase 2 Go Live	MOH	Mar 31, 2013	100%	G	Done
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012. Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012
D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Apr 12, 2013	75%	G	In Progress. This is being delivered in groups.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done Approved Dec 28, 2012. Signed Off.

M	R2 - Test Case Development
	• Admin Portal – 100%
	• Non-functional – 100%
	• Batch Interface Reports – 100%
	• Functional Regression –100%
	  o Screens – 100%
	  o Server / Transactions – 100%
	• CPRS –100%
	• Data Migration – 10%
	• CAS – 100%
	• BAT – 100%
	• HIAL – N/A
	• EMPI – N/A
		MAXIMUS	Jan 31, 2013	100%	G	Done

M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	Apr 12, 2012	75%	Y	In Progress. Batches are delivered in stages starting in Sep.
D	Updated Training Plan – R2	MAXIMUS	Sep , 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete • Admin Portal – 94% • Non-functional – 0% • Batch Interface Reports – 94% • Functional Regression – 98% o Screens – 100% o Server / Transactions – 100% - pending defect fix o Business Config – 0% • CPRS – 70% • Data Migration – 0% • CAS – 50% • BAT – 60% • HIAL – N/A – Performance only • EMPI – N/A – connectivity test only	MAXIMUS	April 26, 2012	75%	G	In Progress
M	BAT Test execution Complete PMP Screens – Done CPRS – in progress HIBC Admin - Done	MAXIMUS	Apr 19, 2013	75%	G	In Progress
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
W	Deploy ALL to Production for Dry Run and Performance Testing	MAXIMUS	Feb 8, 2013	100%	G	Done
W	PROD Dry Run and Data Migration Test	MAXIMUS	Apr 5, 2013	50%	G	Done
D	Deployment Plan	MAXIMUS	Apr 30, 2013	25%	G	In Progress
M	Communication Activity Matrix	MOH	Apr 11, 2013	50%	G	In Progress
D	Communication Plan	MOH	Apr 11, 2013	50%	G	In Progress
W	MAXIMUS Go No Go Decision	MAXIMUS	Apr 23, 2013	0%	G	Pending
D	Updated Disaster Recovery Plan Document	MAXIMUS	Apr 19, 2012	50%	G	In Progress
M	Performance Testing Complete	MAXIMUS	May 4, 2013	25%	G	In Progress – Round 1 completes April 12, 2013
M	Disaster Recovery Testing Complete	MAXIMUS	Apr 29, 2013	0%	G	Pending

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Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

0%	Not started.
10%	Table of contents or acceptance criteria agreed to with client and/or work has started.
25%	Work is currently in progress on this deliverable or task.
50%	Internal reviews or Internal testing activities are currently in progress on this deliverable or task.
75%	External reviews or user acceptance testing activities are currently in progress on this deliverable or task.
100%	Final approval / sign-off or user acceptance has been received.

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
D	R2 Defect Action Plan	MAXIMUS	Apr 24, 2013	0%	G	Pending
M	R2 Final Test Results Summary	MAXIMUS	Apr 24, 2013	0%	G	Pending
D	Support of Ministry Risk and Controls Review for Rel 2	BMO	Apr 25, 2013	25%	G	In Progress
M	Ministry Risk and Controls Report Complete	MOH	Apr 25, 2013	10%	G	In Progress
M	Ministry Go/No Go decision R2 to deployment	MAXIMUS	Apr 25, 2013	0%	G	Pending
M	Production Environment Ready	MAXIMUS	May 9, 2013	25%	G	In Progress
M	Production Support Strategy and Plan	MAXIMUS	May 16,2013	25%	G	In Progress
M	DR Environment Ready	MAXIMUS	May 16, 2013	10%	G	In Progress
M	R2 Deployment Complete	MAXIMUS	May 16, 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Aug 16, 2013	0%	G	Pending
	Proposed Release 3.0 New Functional Release (Record Locking and Clinical Services)					
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Test)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN Code Drop – Rel 3.0 to Test	CATAMARAN	TBD	0%	G	Pending
M	Test Rel 3.0	MAXIMUS	TBD	0%	G	Pending
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Prod)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN ode Drop – Rel 3.0 to Production	MAXIMUS	TBD	0%	G	Pending

Green = No concerns on schedule and within budget Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover	0% 10% 25% 50% 75% 100%	Not started. Table of contents or acceptance criteria agreed to with client and/or work has started. Work is currently in progress on this deliverable or task. Internal reviews or Internal testing activities are currently in progress on this deliverable or task. External reviews or user acceptance testing activities are currently in progress on this deliverable or task. Final approval / sign-off or user acceptance has been received.

MAXIMUS CANADA
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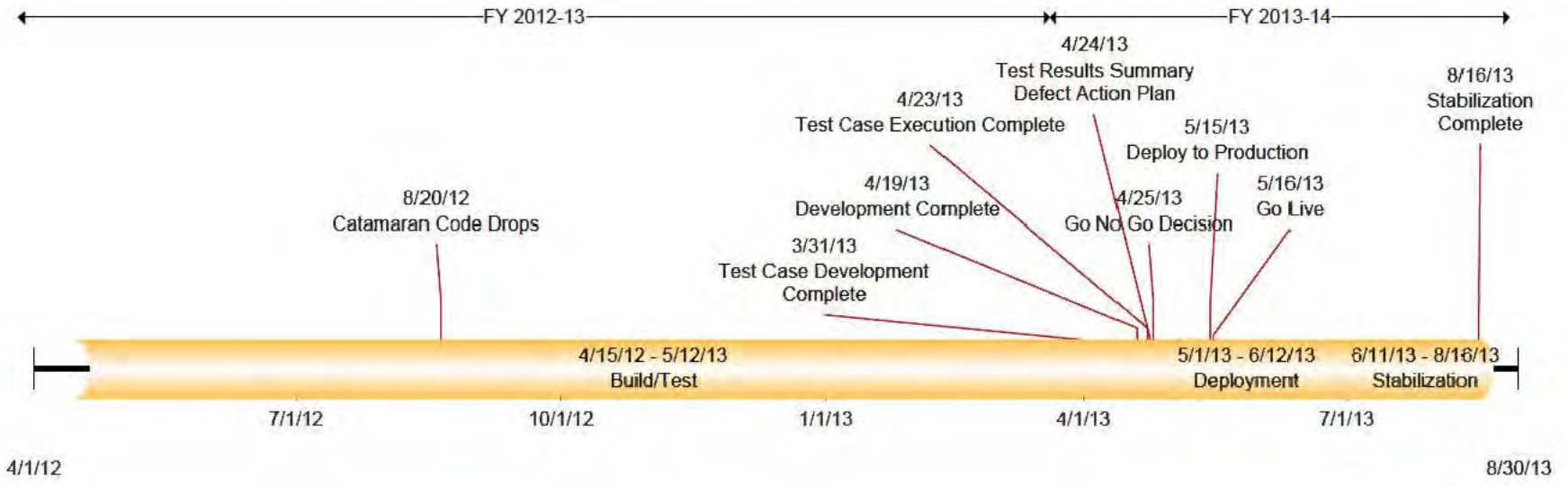
1. PharmaNet Modernization: (Dates will change based on Health Sector Firewall Decision received Apr 11, 2013)

Release 2 Footprint & Milestone Targets



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	25%	Work is currently in progress on this deliverable or task.
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	75%	External reviews or user acceptance testing activities are currently in progress on this deliverable or task.
	100%	Final approval / sign-off or user acceptance has been received.

Bi-weekly Project Progress Report

MAXIMUS CANADA

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2013-Nov-1	2013-Dec-13
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Planning Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Planning – March 31, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – January 31, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • • s.17 • • Service Provider enrolment ▪ support for new regulations • Publicly funded vaccine administration ▪ new adjudication rules for Service Claims			

	Comments	Status G / Y / R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis • Design • Build • Test case development and execution • Training • Deployment • For a complete list of the deliverables that will be produced refer to Appendix A of the Project Charter. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients	Y

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	• Deloitte Audit Recommendations (with the exception of s.17 and those pertaining to blood glucose testing strips) • Service Provider Enrolment Program roll-out	
Quality	Adhering to MAXIMUS methodology	**G**
Schedule	Planning (Design) Activities: o Functional Specifications in progress o Technical Specifications in progress o Test Strategy/Plan in progress o Training Strategy in progress Schedule Concerns: o Ramp-up of resources has been slower than anticipated o Some deliverables will be completed later than originally planned but it is not expected that this will impact the deployment date	**Y**
Budget	Cost Concerns: o Reductions in scope being determined (reporting component outstanding) – will reduce the budget but is also drawing key team member attention away from delivering the project	**Y**

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Summary

2.1a Total Project Schedule (Discoverer Reporting out of ITG)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**03/31/2014**				**37%**		**24%**	**In Progress**
PLC Phase – Development	01/01/2014	06/25/2014		s.21					MAXIMUS BC
PLC Phase – Deployment	05/01/2014	05/30/2014							MAXIMUS BC
PLC Phase – Stabilization	06/02/2014	08/13/2014							MAXIMUS BC
Release 4.0 – Exploration	01/01/2014	03/25/2014							MAXIMUS BC

2.2 Total Project Budget (after re-scoping)

	Estimated	Spent YTD	Spent Nov 2013	Remaining	Estimate to Complete	Estimate at Completion	Burn Rate	Work plan
Release 3.0 Budget	$3,472,160	$338,000	$225,000	$3,134,160	$3,134,160	$3,472,160	9.7%	0%
Change Requests	$0	$0	$0	$0	$0	$0		0%
Total	**$3,472,160**	**$338,000**	**$225,000**	**$3,134,160**	**$3,134,160**	**$3,472,160**	9.7%	0%

2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	Complete document	2014-01-31	Submitted	In progress. Working meetings scheduled for Dec. and Jan. Ministry to provide business configuration values for PharmaNet Release 3 to be used in functional testing and as input to communications and training deliverables.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Payments Adjustment Processes	MOH	2013-12-13	Provide answers to questions/Confirm requirements	2013-12-20	Submitted	Need confirmation to be able to finalize detailed functional requirements
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	Walkthru	2013-12-19	Walkthru held	MoH to complete feedback form and provide to MAXIMUS by January 10 2014.

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G	Status Y	Status R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD

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Status G Y R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will rigorously test the application prior to deployment	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule

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3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Pending	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. MoH to provide decision by January 10 2014
	Pending	Scope of STRA – only changes or full PharmaNet STRA	If full STRA is required, this will impact and scope and budget for the project. Schedule may be impacted as well. MoH to arrange meeting (done – Jan 7 2014) and provide decision by January 17 2014
	Pending	Finalize requirement for new reports	If no new reports are required, this reduces scope and budget for the project. If new reports are needed, need requirements for the reports in order to finalize functional specifications by end of January 2014. MoH to arrange meeting (week of Jan 6-10) and provide decision by January 17 2014
	Pending	PharmaNet Release 4.0 – date to start developing requirements and estimate	If Release 4.0 requirements are not started early in January 2014 the project burn rate will be further impacted since the original plan was to start the work in December 2013. MoH to provide decision by January 10 2014.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

4 Detail

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Bi-weekly Project Progress Report

No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
1.	Project Charter	Oct 18, 2013		Approved
2.	High-level Business Requirements	Oct 18, 2013		Approved
3.	Test Strategy and Plan	Dec 31, 2013	Jan ??, 2013	In Progress
4.	Training Strategy	Dec 13, 2013	Dec 19, 2013	In Progress
5.	Training Plan	Jan ?, 2013		In Progress
6.	Impact Assessment	Jan ?, 2013		In Progress
7.	Security and Threat Risk Assessment	Mar 14, 2014		Not Started
8.	Functional Requirements	Dec 17, 2013		In Progress
9.	Non-functional Requirements	Dec 17, 2013		In Progress
10.	Functional Specifications	Jan 31, 2014		In Progress
11.	Privacy Impact Assessment	Feb 14, 2014		Not Started
12.	Development - Build	May 22, 2014	N/A	Not Started
13.	Development – Function/Integration Testing	May 15, 2014		Not Started
14.	Work Instructions – Internal	Mar 20, 2014		Not Started
15.	Deployment/Cutover Strategy/Plan	May ??, 2014		Not Started
16.	Business Continuity Assessment and Plan	Feb 14, 2014		Not Started
17.	Disaster Recovery Assessment and Plan	Mar 24, 2014		Not Started
18.	Production Support Plan	Mar 17, 2014		Not Started
19.	Testing – BAT	May 20, 2014	N/A	Not Started
20.	Test Results Summary	Jun 25, 2014		Not Started
21.	Defect Action Plan	Jun 25, 2014		Not Started
22.	Deployment Go/No Go presentation	May 15, 2014		Not Started
23.	Training	Apr 16, 2014	N/A	Not Started
24.	Deployment	May 2014	N/A	Not Started

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No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
25.	Escrow Deposit	Aug 13, 2015		Not Started
26.	Project Close	Aug 30, 2015	N/A	Not Started

5 **Project SDLC Phase Metrics** – *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*

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PharmaNet Release 3.0 Project
Go Live
MoH Go/No Go Decision

June 17, 2014

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Agenda

- Meeting Objectives
- Introduction
- Business Problem/Opportunity
- Scope
- Business Transformation
- Business Value
- Success Criteria
- Timeline
- Risks / Issues
- Development Phase Closure Checklist
- Deployment Phase Milestones
- Test Results
- Defect Action Plan
- Deployment Plan
- Communications
- Key Stakeholders
- Project Actuals
- Go/No Go Decision

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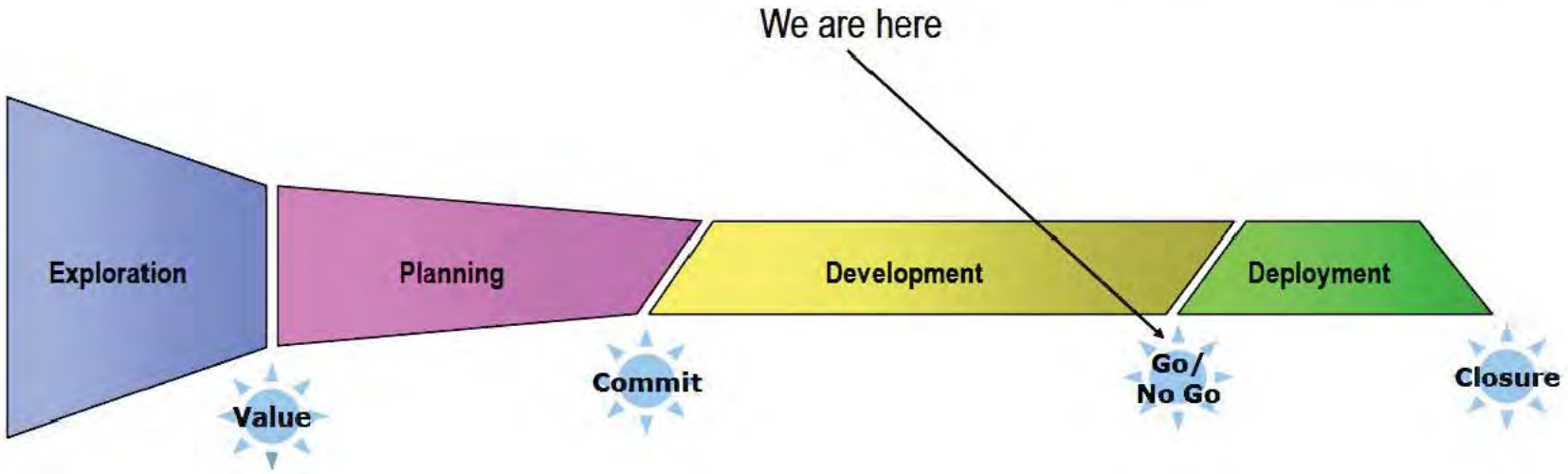
Meeting Objectives



- Internal MAXIMUS approval granted
- Go/No Go Decision to proceed with Deployment Phase for Release 3.0 PharmaNet Go Live

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Introduction

Release 3.0: PharmaNet Go Live on June 25, 2014 will implement upgraded software to :

- address the new Regulations under the Pharmaceutical Services Act providing for the classification of PharmaCare providers, and
- s.17

The following PharmaNet components will be upgraded to support the new functionality:

- On line Transaction Processing (OLTP)
- Administration Screens (PNP)
- Batch Processes and Interfaces
- Reports

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Business Problem / Opportunity

The Main Objectives of the PharmaNet Release 3.0 Project:

- The objectives of the project are to design, develop and implement PharmaNet and Impacted Peripheral System functionality related to:
  - s.17
  - Blood Glucose Test Strips Limit
  -
  -
  - s.17
  -
  - Service Provider enrolment
    - support for new regulations
  - Publicly funded vaccine administration
    - new adjudication rules for Service Claims
  - Methadone Payment Process change
  - s.17
  - New BGTS Category screen
  - Creation of a “production-like” test environment for load/performance testing
  - Apply DIS only pharmacy check to Tamiflu and Service Claims monthly payments jobs
  - Changes to Claims History archiving process
  - Healthideas extracts

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Release 3.0 Scope

The PharmaNet Release 3.0 Project includes the following:

- Detailed Planning and Project Management
- Analysis and Design for the s.17 and changes for s.17
- Execution of test cases, automated and manual, to ensure the application operates as expected
- Training, new/updated work instructions and job aids, and internal communication of changes introduced by Release 3.0*
- Deployment of updated PharmaNet application to Production
- PharmaCare operational organization and support for updated application
- MAXIMUS accountabilities defined in Section 6 Roles and Responsibilities of the Project Charter
- Screen deployment and support to Colleges and HLBC

* Some of the training and stabilization budget will not be utilized before the currently defined end of the project

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Business Transformation

Pre-Implementation	Post-Implementation
s.17 • Blood Glucose Test Strips Limit s.17	
Service claims monthly payments process: • fees paid for the administration of publicly funded vaccines **not limited** to BC residents • s.17 • Manual adjustments to exclude pharmacies from payment if they are already enrolled in a similar payment program	• fees paid for the administration of publicly funded vaccines **can be limited** to BC residents (dependent on the Business Configuration settings) • s.17 • Exclusion of pharmacies from payment if they are already enrolled in a similar payment program
No functionality for Provider Re-enrolment and classification	• New Provider status check in claim adjudication • ability to classify Providers in PharmaNet

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2. Benefits of Updated Application

•

s.17

- **Provider Re-enrolment support and classification**
  - •support for new legislative, regulatory and policy requirements
  - •allow for the reporting of claims activity by classification
  - •ability to limit PharmaNet claims transaction access for certain providers

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Success Criteria

Project success will be deemed to be achieved when:

- PharmaNet Release 3.0 is implemented in the Production environment within the agreed upon timeline
- Meets the approved Business Requirements and Non-Functional Requirements as demonstrated by the accepted Test Results Summary and Defect Action Plan

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Success Criteria ...

- As defined in the Test Plan, the system is functioning as required through fulfillment of Stabilization Criteria including:
  - All Severity 1 defects reported as resolved/fixed
  - All Severity 2 defects reported as addressed with suitable workarounds and a clear plan of action, including clear responsibilities, and timetable to resolve after completion of the stabilization period
  - All Severity 3 defects reported as addressed with suitable workarounds
- Once Stabilization Criteria is met, the Stabilization Period ends

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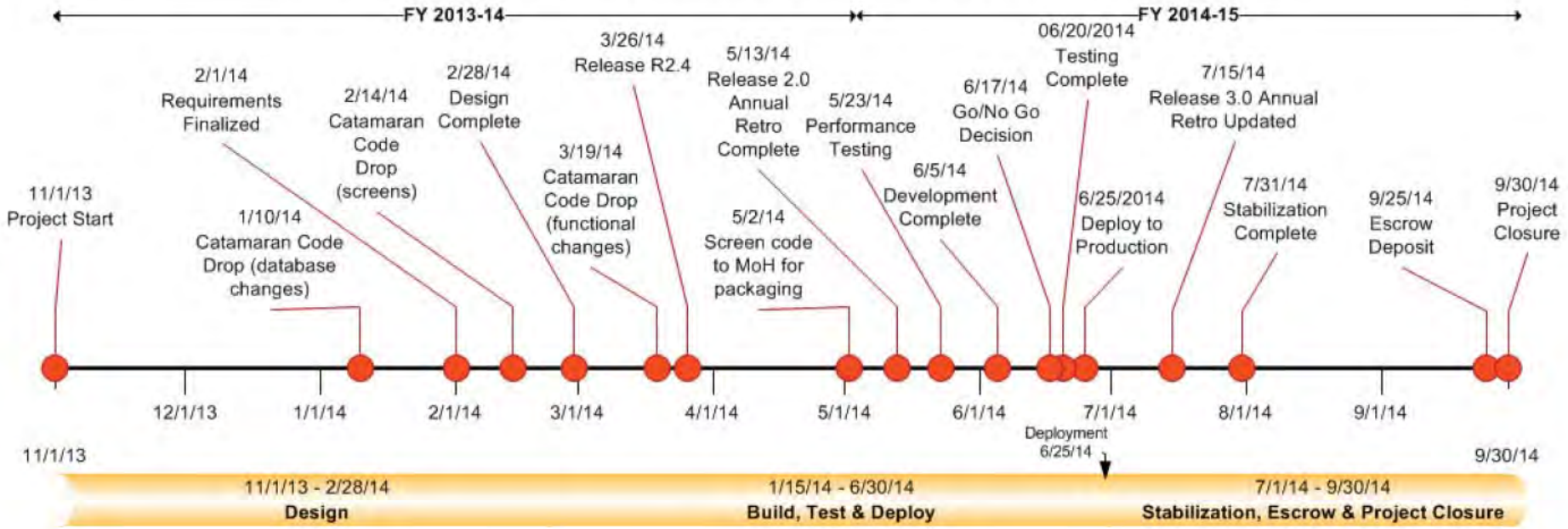
Timeline

Release 3 Footprint & Milestone Targets

Revised Date: June 16, 2014



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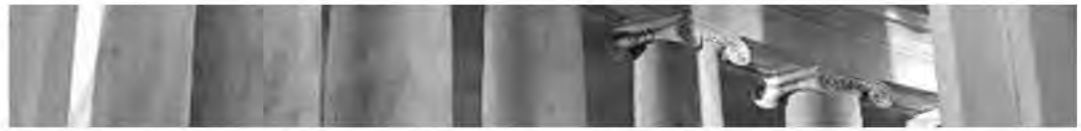

Risks / Issues

ITG #	Priority	Description	Impact	Mitigation / Contingency Strategy
553658	High	Ministry Risk and Controls Report not yet completed and approved by MOH	Go Live delayed if not approved	Ministry Risk and Controls review in progress. Must be reviewed and signed off by the Ministry and accepted by the OCG.
553611	Low	New application functionality not utilized during the stabilization period.	Issues uncovered after stabilization period has expired.	MAXIMUS will test using business scenarios and business configuration settings that are as close as possible to the production settings.
553616	High	Application performance may be impacted by business requirements.	Potential impact to Go Live	Performance issue discovered during testing and was corrected.
553680	Med	Infrastructure freeze established by SSBC.	Potential impact to Go Live	Follow the SSBC "Request for Special Processing" procedure and escalate quickly if this issue is raised.

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Development Phase Closure Checklist

Status	Deliverable / Work Product / Milestone
Complete	Project Charter
Complete	High-Level Business Requirements
Complete	Training Strategy
Complete	Functional Requirements
Complete	Non-Functional Requirements
Complete	Business Continuity Assessment and Plan
Complete	Impact Assessment
Complete	Functional Specifications
Complete	Test Strategy / Plan
Complete	Training Plan
Complete	Disaster Recovery Assessment and Plan

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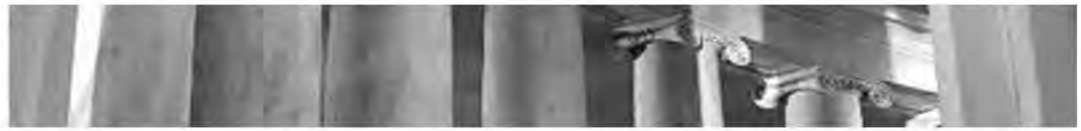

Development Phase Closure Checklist

Status	Milestone / Deliverable Name
Complete	Catamaran Code Drop – Screens
Complete	Catamaran Code Drop – Transactions
Complete	Update Batches and Interfaces
Complete	Functional Test Case Development
Complete	Non-Functional Test Case Development
Complete	Business Acceptance Test Case Development
Incomplete	Functional Test Execution (will be complete before Go-live)
Incomplete	Non-Functional Test Execution (will be complete before Go-live)
Complete	Business Acceptance Test Execution
Complete	Work Instructions, User Guides and Job Aids
Complete	Stabilization Criteria and Plan

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Development Phase Closure Checklist ...

Status	Milestone / Deliverable Name
Complete	Production Support Plan
Incomplete	Test Results Summary (will be complete before Go-live)
Incomplete	Defect Action Plan (will be complete before Go-live)
Complete	Deployment Go / No Go Presentation
Complete	Training Plan Execution
Complete	Deployment Strategy / Plan
Complete	Communication Plan (MoH)
Complete	Communication Activity Matrix (M0H)

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Deployment Phase Checklist ...

Milestone / Deliverable Name	Due Date	Status
Production Code Deployment – Transactions	Jun 25, 2014	Pending
Production Code Deployment – Batches	Jun 25, 2014	Pending
Production Code Deployments – Interfaces	Jun 25, 2014	Pending
PharmaNet Screen Deployment Package (Internal)	Jun 26, 2013	Pending
PharmaNet Screen Deployment Package (External)	Jun 26, 2013	Pending
Data Warehouse Refresh	Jun 27, 2014	Pending

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Test Results

As of June 17, 2014, there are 5 outstanding defects: all 5 are Low Severity

Functional Test (in progress)			Integration Test (complete)			Business Acceptance Test (complete)		
# Outstanding Defects			# Outstanding Defects			# Outstanding Defects		
High	Med	Low	High	Med	Low	High	Med	Low
0	0	5	0	0	0	0	0	0

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Defect Action Plan

There are 5 Low Severity Defects that will be fixed prior to go-live or during Stabilization:

- New 'PAYMENT Rural' code not behaving as currently documented
- Batch job that was run in TS1 generated the report in wrong environment
- Cannot set email notification in bip2
- Technical Run manual documents 3 output reports but only two are set up in test env (TS4)
- Methadone Batch payment documentation requires update

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Deployment Plan

- ✓ **Deployment planned to start Wed Jun 25, 2014 at 10 pm and ends on Thurs Jun 26, 2014 at 8 am**
- ✓ Engaged MAXIMUS IT, HIBC, Ministry (HSMIT, BMO, PSD), HP (Network, Storage, Application Services) to support deployment
- ✓ Change Window Activities detailed out in the Deployment Plan with planned start and finish times, owner of each task and who is required to support each task.
- ✓ Working with MAXIMUS IT, HIBC, Ministry (HSMIT, BMO, PSD), HP (Network, Storage, Application Services) to validate tasks and assign resourcing
- ✓ Deployment Day Contact List will be used to create distribution lists during deployment and after, knowing who is available when and how to contact
- Change Window Key Activities. **Current plan shows completion at 8:00 am**
  - list key steps
  - Jun 26, 4:00 – 4:30 AM (TBC) notify parties to roll out screens.

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Communications

- ✓ MoH Communications (external stakeholders, all impacted MoH groups)
- ✓ Pre-release email to Colleges Technical Support in preparation for deployment
- ✓ Pre-deployment emails and meetings with MAXIMUS IT, HIBC, Ministry
- ✓ Fan Out to All PharmaNet Users announcing the Change Window
- ✓ PharmaNet Bulletin describing the Service Interruption During the Change Window
  - Defining Service Interruption
  - Preparing for the Change Window
  - During the Change Window
- ✓ Ops Bulletin to Inform HIBC Staff (June 20, 2014)
- ✓ Emails to inform implementation teams and end users (June 20, 2014)
- ✓ Communications during the Change Window

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Key Stakeholders

- Ministry of Health
  - Medical Beneficiary and Pharmaceutical Services Division (MBPSD)
  - Strategic Projects Branch
  - Business Management Office (BMO)
  - HSIM/IT
  - HealthLink BC (HLBC)
- MAXIMUS / HIBC
  - PharmaCare Client Service Representatives (CSRs), PharmaCare Help Desk
  - Information Support, Operational Services
  - PharmaNet Business Systems Coordinators, Operational Services
  - Quality Assurance, Operational Services
- Colleges
  - College of Pharmacists of BC (CPBC)
  - College of Physicians and Surgeons (CPSBC)
- Service Providers
  - Shared Services BC
  - HP Advanced Solutions (HPAS)

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Project Actuals (to end of May 2014)

PharmaNet Release 3.0 Project Actuals and Estimates

Updated: June 13, 2014

	Actual	Actual	Actual	Actual	Actual	Actual	Fiscal Total	Actual	Actual	Estimate	Estimate	Estimate	Estimate	Fiscal Total	Project
$s	Apr-Oct 2013	Nov 2013	Dec 2013	Jan 2014	Feb 2014	March 2014	FY13/14	April 2014	May 2014	June 2014	July 2014	Aug 2014	Sept 2014	FY14/15	Total
PNet R3.0	$158,740	$222,698	$128,478	$291,059	$332,367	$525,347	$1,658,689	$436,376	$395,831	$391,475	$175,482	$18,054	$26,431	$1,443,649	$3,102,338
PNet R4.0	$0	$429	$0	$0	$0	$0	$429	$0	$0	$0	$0	$0	$0	$0	$429
CO 66 Credit	$0	$0	$0	$0	$0	$0	$0	$34,845	$34,845	$34,845	$0	$0	$0	$104,536	$104,536
CR2014-005	$0	$0	$0	$0	$0	$0	$0	$0	$0	$17,000	$0	$0	$0	$17,000	$17,000
CR2014-006	$0	$0	$0	$0	$0	$0	$0	$0	$0	$12,850	$0	$0	$0	$12,850	$12,850
CR2014-007	$0	$0	$0	$0	$0	$0	$0	$0	$0	$37,000	$0	$0	$0	$37,000	$37,000
Total	$158,740	$223,127	$128,478	$291,059	$332,367	$525,347	$1,659,118	$401,531	$360,986	$423,480	$175,482	$18,054	$26,431	$1,405,963	$3,065,081
Hrs															
MAXIMUS								s.21							
CO 64															
CO 65															
CO 66															

Financial Adjustments:

Removed $11,440 from CO 65 due to removal of effort for STRA s.21

Apply credit for additional capacity hrs (CO 66) to April, May and June s.21

Add $45,740 for June to Aug 2013 (ODR to CAS reconciliation)

CO 64 value is $535,591 of which $25,246 was not spent by Dec 31 2013 so that amount was applied against the Jan 2014 invoice

CO 65 value is $2,567,176. It is split by fiscal: FY2013/14 = $1,123,527 and FY2014/15 = $1,443,649

Total amount available for FY13/14 = $1,659,118

Apr-Oct 2013 column includes $45,740 for the ODR to CAS Reconciliation report effort (SR 553416)

CR2014-005 - Provide screen code to Colleges and HLBC - added to project totals

CR2014-006 - No limits to be implemented at Go-live

CR2014-007 - Performance issue resolution

Notes:

PNet R3.0 estimates include MAXIMUS and Catamaran effort

The number of MAXIMUS hours per month includes IT and BAT resources which are charged at different rates

Original estimate for February reduced due to delays in requirements decisions

Original estimate for March increased to make up for reduction in February effort

Requirements changes that have **increased** the estimate and/or scope:

- Methadone Payment Process change
- New Service Claims cap
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- Creation of a "production-like" test environment for performance testing of new limits requirements

Requirements changes that have **decreased** the estimate and/or scope:

- PharmaNet R4.0 requirements and estimate removed from scope
- Stakeholder Engagement Strategy and Plan assigned to MoH
- Provider enrolment operational activities, training and communications removed from scope
- Risk and Controls review removed from scope
- No new reports or report updates
- Stabilization criteria will be loosened to reduce the amount of stabilization support required
- MAXIMUS effort related to the STRA removed from scope

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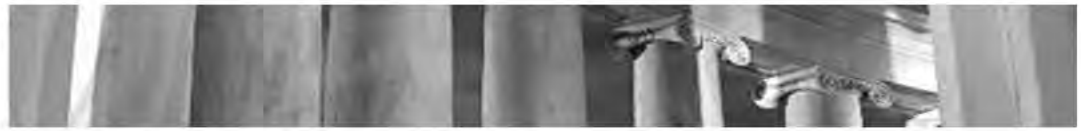

Go/No Go Decision

Requesting Go/No Go Approval Decision as follows:

- Approval to progress to Deployment Phase

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Bi-weekly Project Progress Report

MAXIMUS CANADA
A MAXIMUS Company

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2013-Nov-1	2013-Dec-13
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Planning Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Planning – March 31, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – January 31, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • • s.17 • • Service Provider enrolment ▪ support for new regulations • Publicly funded vaccine administration ▪ new adjudication rules for Service Claims			

	Comments	Status G / Y / R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis • Design • Build • Test case development and execution • Training • Deployment • For a complete list of the deliverables that will be produced refer to Appendix A of the Project Charter. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients	Y

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	• Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips) • Service Provider Enrolment Program roll-out	
Quality	Adhering to MAXIMUS methodology	**G**
Schedule	Planning (Design) Activities: o Functional Specifications in progress o Technical Specifications in progress o Test Strategy/Plan in progress o Training Strategy in progress Schedule Concerns: o Ramp-up of resources has been slower than anticipated o Some deliverables will be completed later than originally planned but it is not expected that this will impact the deployment date	**Y**
Budget	Cost Concerns: o Reductions in scope being determined (reporting component outstanding) – will reduce the budget but is also drawing key team member attention away from delivering the project	**Y**

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Summary

2.1a Total Project Schedule (Discoverer Reporting out of ITG)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**03/31/2014**				**37%**		**24%**	**In Progress**
PLC Phase – Development	01/01/2014	06/25/2014		s.21					MAXIMUS BC
PLC Phase – Deployment	05/01/2014	05/30/2014							MAXIMUS BC
PLC Phase – Stabilization	06/02/2014	08/13/2014							MAXIMUS BC
Release 4.0 – Exploration	01/01/2014	03/25/2014							MAXIMUS BC

2.2 Total Project Budget (after re-scoping)

	Estimated	Spent YTD	Spent Nov 2013	Remaining	Estimate to Complete	Estimate at Completion	Burn Rate	Work plan
Release 3.0 Budget	$3,472,160	$338,000	$225,000	$3,134,160	$3,134,160	$3,472,160	9.7%	0%
Change Requests	$0	$0	$0	$0	$0	$0		0%
Total	**$3,472,160**	**$338,000**	**$225,000**	**$3,134,160**	**$3,134,160**	**$3,472,160**	9.7%	0%

2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	Complete document	2014-01-31	Submitted	In progress. Working meetings scheduled for Dec. and Jan. Ministry to provide business configuration values for PharmaNet Release 3 to be used in functional testing and as input to communications and training deliverables.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Payments Adjustment Processes	MOH	2013-12-13	Provide answers to questions/Confirm requirements	2013-12-20	Submitted	Need confirmation to be able to finalize detailed functional requirements
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	Walkthru	2013-12-19	Walkthru held	MoH to complete feedback form and provide to MAXIMUS by January 10 2014.

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G	Status Y	Status R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will rigorously test the application prior to deployment	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule

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3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Pending	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. MoH to provide decision by January 10 2014
	Pending	Scope of STRA – only changes or full PharmaNet STRA	If full STRA is required, this will impact and scope and budget for the project. Schedule may be impacted as well. MoH to arrange meeting (done – Jan 7 2014) and provide decision by January 17 2014
	Pending	Finalize requirement for new reports	If no new reports are required, this reduces scope and budget for the project. If new reports are needed, need requirements for the reports in order to finalize functional specifications by end of January 2014. MoH to arrange meeting (week of Jan 6-10) and provide decision by January 17 2014
	Pending	PharmaNet Release 4.0 – date to start developing requirements and estimate	If Release 4.0 requirements are not started early in January 2014 the project burn rate will be further impacted since the original plan was to start the work in December 2013. MoH to provide decision by January 10 2014.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

4 Detail

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Bi-weekly Project Progress Report

No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
1.	Project Charter	Oct 18, 2013		Approved
2.	High-level Business Requirements	Oct 18, 2013		Approved
3.	Test Strategy and Plan	Dec 31, 2013	Jan ??, 2013	In Progress
4.	Training Strategy	Dec 13, 2013	Dec 19, 2013	In Progress
5.	Training Plan	Jan ?, 2013		In Progress
6.	Impact Assessment	Jan ?, 2013		In Progress
7.	Security and Threat Risk Assessment	Mar 14, 2014		Not Started
8.	Functional Requirements	Dec 17, 2013		In Progress
9.	Non-functional Requirements	Dec 17, 2013		In Progress
10.	Functional Specifications	Jan 31, 2014		In Progress
11.	Privacy Impact Assessment	Feb 14, 2014		Not Started
12.	Development - Build	May 22, 2014	N/A	Not Started
13.	Development – Function/Integration Testing	May 15, 2014		Not Started
14.	Work Instructions – Internal	Mar 20, 2014		Not Started
15.	Deployment/Cutover Strategy/Plan	May ??, 2014		Not Started
16.	Business Continuity Assessment and Plan	Feb 14, 2014		Not Started
17.	Disaster Recovery Assessment and Plan	Mar 24, 2014		Not Started
18.	Production Support Plan	Mar 17, 2014		Not Started
19.	Testing – BAT	May 20, 2014	N/A	Not Started
20.	Test Results Summary	Jun 25, 2014		Not Started
21.	Defect Action Plan	Jun 25, 2014		Not Started
22.	Deployment Go/No Go presentation	May 15, 2014		Not Started
23.	Training	Apr 16, 2014	N/A	Not Started
24.	Deployment	May 2014	N/A	Not Started

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No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
25.	Escrow Deposit	Aug 13, 2015		Not Started
26.	Project Close	Aug 30, 2015	N/A	Not Started

5 **Project SDLC Phase Metrics** – *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*

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PharmaNet Modernization Progress Report (JPMT)

MAXIMUS CANADA

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-Mar-30	2013-Apr-12
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status G Y R
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure – Added Scope of Health Sector Firewall and Network Move.	Y
Quality	Adhering to MAXIMUS methodology	G
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Production Pilot - Nov 13 – 27, 2012 - completed Phase 2 – Pharmacy Production Deployment (Gibsons) - Mar 30-31 Phase 3 – EMR Production Deployment - TBD	G
	Release 2.0 PharmaNet Infrastructure Upgrade Go Live – planned for March 28, 2013. Delayed to May 16, 2013. Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines. ARI Conformance Testing added to Project Scope. Schedule is at risk due to tight itmelines. Go Live deferred to May 16, 2013. Health Sector Firewall Decision wil Delay Go Live. Go Live is no longer planned for May 16, 2013. MAXIMUS to assess and include in CR along with additional scope of Network Move..	R
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2012-017, CR2012-019) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report • ARI Conformance Testing • CR2012-017 Conformance Test Execution Amended – Approved and Signed Off • CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only - Review and Approval • CR2013-003 Conformance Testing ARI – Approved for FY13/14		G
Release 2.0 Delivered since the last report • Service Order 2013-04 for Feb/Mar 2013 – Approved. Signed-Off.		G

Green = No concerns on schedule and within budget Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover	0% Not started. 10% Table of contents or acceptance criteria agreed to with client and/or work has started. 25% Work is currently in progress on this deliverable or task. 50% Internal reviews or Internal testing activities are currently in progress on this deliverable or task. 75% External reviews or user acceptance testing activities are currently in progress on this deliverable or task. 100% Final approval / sign-off or user acceptance has been received.

2. Outstanding Issues and Actions.	Y

Key Open Project Issues

Status (G Y R)	Priority	Detailed Description	Business Impact	Proposed Resolution
R	High	Release 2 Ministry Decision on Health Sector Firewall changes were planned for after Release 2. Now being moved up to before R2 Go Live. Ministry meeting held Mar 25 to decide timing - waiting for Ministry Decision	If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before Network Move and therefore will delay Go Live.	If Decision is Yes, a CR will be created to document the change that will delay the Network Move and therefore delay Release 2 Go Live. This will also impact existing PRODUCTION applications that are on Zone B. These must be moved before R2 Go Live. Decision required by APRIL 19. If decided after will cause re-work for Network Move and additional delays. IF YES, will delay R2 Go Live. Apr 11 – Ministry Decision is to proceed with Health Sector Firewall. This will delay Release 2 GO Live. MAXIMUS assess impacts and draft a CR.
Y	High	Release 2 Network move from 4000 Seymour to Kamloops will result in additional scope and delays. These are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project.	Ministry are requesting more work that was not in scope 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. These are not in scope of PharmaNet Modernization Project.	Ministry Decision on if this is to be added to Scope. If YES, MAXIUS will create a CR. Decision required by APRIL 12. If decided after, will delay Go Live even further. Apr 11 – Ministry Decision is to proceed with Additional Scope. This will be assessed and included in the CR for the Health Sector Firewall.
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Increased Scope will impact project timelines	PharmaNet Modernization Scope needs to be frozen. Anything that adds to scope will impact project timelines.

Green = No concerns on schedule and within budget Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover	0% 10% 25% 50% 75% 100%	Not started. Table of contents or acceptance criteria agreed to with client and/or work has started. Work is currently in progress on this deliverable or task. Internal reviews or Internal testing activities are currently in progress on this deliverable or task. External reviews or user acceptance testing activities are currently in progress on this deliverable or task. Final approval / sign-off or user acceptance has been received.

Status (G Y R)	Priority	Detailed Description	Business Impact	Proposed Resolution
G	High	Ministry requirement change to send files to Condor via SFTP rather than FTP. Decision required by Friday Mar 22 as to if MAXIMUS must change to accommodate this.	Additional development, testing and infrastructure changes required to accommodate this change. MAXIMUS estimate this will take 4-6 days to complete, and we need a decision this week notifying us if we are to proceed with this change or not.	Ministry decision required by Mar 22 on if this must be changed. If so CR to be raised as per email estimate provided to Ministry on Mar 20 – overdue. ** Mar 28, 2013 – Ministry Decision is to change to SFTP. MAXIMUS to make changes to accommodate this in R2 as per estimate provided.
G	High	Potential Impact to Release 2 Go Live due to Annual Retro Run. Each Year Annual Retro is run from Feb to May 1 to reimburse families who have overpaid for Prescriptions. This overlaps Release 2.0 Deployment Activities which cannot both be run at the same time. Three Options presented in a new DR will outline impacts and decision must be made to either delay Retro or delay R2 Go Live.		Feb 5 – MAXIMUS submitted DR Outlining Options for Decision for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. MAXIMUS updating DR to re-submit. Feb 27 – Ministry signed DR approving Option 1.
G	High	Early Adopter Deployment dates cannot keep changing and moving closer to Release 2.0 or will impact Release 2.0 Business Acceptance Activities and possibly Release 2.0 Go Live. Early Adopter Deployment Phase 1 was planned for April 2012, delayed to July 2012, then Sept 2012, then Oct 2012, and now planned for Nov. Phase 1: Nov 13-27 – Done Phase 2: March 30-31 – Done Phase 3: TBD	Release 2 Business Acceptance Testing activities moved to accommodate EA Deployment planned for Sept 2012 - Test Case Development moved from Sept 2012 t Nov 2012 - Test Case Execution moved from Nov/Dec 2012 to Jan/Feb 2012 - Test Case Execution moved again to Feb/Mar 2012 - Potential risk to push out Rel 2 Go Live	Release 2.0 Business Acceptance Activites have been delayed to accommodate EA Conformance. Once all EA Deployments are complete, MOH will meet with MedAccess, MOH and do a formal lessons learned and have a formal assesment document. Target completig interviews / qustionaire by mid Dec. EA Phase 2 is yet to be scheduled. This will be aligned so as not to impact Release 2.0 Go Live. Current projeted date for Phase 2 is March 28, 2013 – to be confirmed. Feb 14 – Ministry are requesting an additional round of testing for MedAccess and ARI be completed prior to March 31, 2013. MAXIMUS are evaluating and will include in a CR. MAXIMUS prepared CR and sent to MOH. Ministry approved CRs for MedAccess and ARI. Ministry later decided not to conformance test MedAccess and to use funding to support TELUS and wlakthough test cases with TELUS. Phase 2 completed March 31, 2013 Phase 3 to be scheduled

Green = No concerns on schedule and within budget Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover	0% 10% 25% 50% 75% 100%	Not started. Table of contents or acceptance criteria agreed to with client and/or work has started. Work is currently in progress on this deliverable or task. Internal reviews or Internal testing activities are currently in progress on this deliverable or task. External reviews or user acceptance testing activities are currently in progress on this deliverable or task. Final approval / sign-off or user acceptance has been received.

Status (G Y R)	Priority	Detailed Description	Business Impact	Proposed Resolution
G		Conformance Specifications are not final for General Deployment. Final version was to be published Jan 4, 2013. DRAFT Specifications delivered in Jan, but require clarification. Updated version delivered in Feb, but not Final. Several rule clarifications / interpretations still exist and some rules were aligned to MedAccess that may be inacurate, causing negative impact to future vendors.	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance Testing. 4. Incorect or incomplete test cases.	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry have updated documents and had a 2 hour workshop with MAXIMUS to review. Documents also released to TELUS and MedAccess. Ministry feel they are on track to have confromance specs ready for test case devleopment. ** Conformance Specs must be finalized to a version that can be used for Test Case Development and Vendor Development. Specifications will be finalized before General Deployment.
G	High	Release 2 CATAMARAN Server Code Drop delayed due to runtime issues on Solaris NetX Platform. Due July 12, 2012 Catamaran targe delivery date of Aug 14 +/- 7 days This would push go live past FY to April 17, 2013. MAXIMUS assessed options to mitigate and achieve Go Live by March 28, 2013.	Delays to Release 2.0 schedule and GO LIVE. Project must implement this FY ** This must be mitigated to achieve Mar 2013 Go Live	CATAMARAN added resources and worked over-time to deliver by Aug 20, 2013. Option of phased delivery explored, but not feasible. Daily check-point meetings setup between MAXIMUS and CATAMARAN to track progress MAXIMUS development team packaging server code drop and NetX profiles to deploy to test Sep 14 – MAXIMUS deployed Server Code Drop to Test. MAXIMUS assessed scheudle impacts and re-planned to deliver GO LIVE by March 28, 2012
G	Low	Potential delays to Release 2 Go Live due to SSBC not signing agreement with HP and delaying HP from moving infrastructure from TELUS Data Center to SSBC Data Center. Agreement is now signed but delayed resulting in delays to HP which could impact PharmaNet infrastructure setup	Potential delays to Release 2.0 Go Live	MAXIMUS will continue to monitor progress of HP Data Center Move Project – PharmaNet Project activities have been prioritized within the Data Center Move Project to keep on schedule for PharmaNet Release 2.0 Go Live. This is currently tracking to schedule. Jan 21 – Data Center Move successfully completed over the weekend.

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Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, SSBC, HP, MoH have proposed moving MAXIMUS production servers) from the current firewall (ie. "zone b" firewall) to a new "Health Sector" firewall before Release 2.0 Go Live. The "Health Sector" firewall is already established in Calgary and is in MoH's/HP's plan to establish one in STMS Kamloops – however not for 6-9 months. This was not in the PharmaNet Modernization Project Plan as this was planned for 6-9 months from now, well after Go Live. Apr 11 – DECISION MADE TO MOVE to HEALTH SECTOR FIREWALL	Added scope and delays to Release 2 Go Live Release 2 Go Live	MAXIMUS to assess impact and draft CR as decision has been made to proceed with this.	HIGH	High	Scope, Schedule, Budget
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, responsibility of updating the firewall entries for new Pharmacies onboarding to access the PharmaNet application will be moved from SSBC to HP – as HP will be managing the firewall in STMS Kamloops. Existing process of requesting firewall updates will change from current "ITIMS" ticket to SSBC to future HP iStore request for firewall updates. Pharmacy Network connectivity and access is not MAXIMUS responsibility. MAXIMUS is part	Added Scope to Release 2. PharmaNet Operational for onboarding new Pharmacies will change. Additional effort and lead time required. MoH, SSBC and HP must establish new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.	MAIMUS to assess impacts and add to CR for Health Sector Firewall. 1. MoH, SSBC and HP have established new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures. 2. Assess how to deal with additional lead times and effort required.	High	High	Scope, Schedule, Budget

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		of the process (as there is a step in the process to update a security table in the PharmaNet database). APR 11 – DECISION MADE TO PROCEED WITH ADDED SCOPE TO NETWORK MOVE.					
NEW	High	Ministry Decision to allow Med Access to Go Live in Production without fully testing result in the following: 1. Conformance Specifications are unclear in areas, were updated to align with this vendor, and have not been fully tested by this vendor, or any other vendor 2. Conformance Test Cases have not been fully tested 3. MedAccess did not pass the last round of Conformance Testing. 4. Vendor software changes have been made without fully testing changes. 5. Patient Safety Issues may result due Incorrect data entering PharmaNet and being used 6. Increased production support and data integrity issues	The following impacts may result; 1. Data Integrity Issues 2. Patient Safety issues 3. Increased Production Support effort and costs 4. Potential down-time of PharmaNet. 5. Conformance Specifications do not match the intent and are incorrectly interpreted by other vendors. 6. Conformance Test Cases may not match the intention of the Specification and not adequately test for required conditions as not clearly stated in specifications. 7. Other Vendors may not correctly develop to the intent of the specifications 8. Other vendors may not be adequately tested before going to production 9. Other vendors may change their software incorrectly to match the specifications aligned for MedAccess that are incorrect.	MAXIMUS have notified the Ministry of the Risks recommending that MedAccess be fully tested before Go Live in Production.	High	High	Scope, Quality and Budget
528682	High	Project M102 Project Cannot keep pace with schedule for deliverable target dates.	Could result in 1-Delays final deployment date for Rel 1.1 and/or Rel 2 2-Continue to lose stakeholder	Mitigate	Medium	High	Schedule and Budget

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
		Schedule may slip due to 1-required project decisions and approvals not being made in time 2-specific project milestones not on the critical path are not met in time 3-estimated effort is insufficient to complete deliverables 4-financial risks and controls standards are not met 5-Early Adopter Points of Service Vendors (EMR or Pharmacy) are not ready to conformance test when scheduled by the project 6-early Adopter Point of Service Vendors (EMR or Pharmacy) withdraw from project prior to deployment	support 3-Scope may have to be reduced to meet project timelines Pharmacy Vendor delays resulting in rescheduling, re-planning, moving things around. Large impact on operations.				
528683	Normal	Project M104 Project expenditures or forecasts exceed available funding, or funding is reduced and allocated to other higher priority projects, which may result in project not being able to accomplish the PharmaNet Modernization Vision, and possible cancellation of the project	Project could be reduced or cancelled	Mitigate	Medium High	Medium High	Budget
544671	Normal	Release 2 Execution of Data Conversion for Release 2.0 may not fit in a single change window, and may need to be split into 2 or more windows.	Data Conversion activities to be assessed. If required, split activities between 2 or more scheduled change windows within existing timeline.	Mitigate – As with Release 1.0, MAXIMUS will assess the probability of this and determine how Data Conversion can be executed. If required, MAXIMUS will arrange with the Service Provider to split activities between multiple change windows and extend the hours of the change window if required.	Medium	Medium	Schedule
528680	Normal	Project M111	Anything that adds to scope will	Mitigate – No new scope to be	Medium	Medium	Schedule

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
		Scope (Solution Requirements) Change over the Project Life Cycle. PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	impact project timelines.	added unless essential. MAXIMUS to assess impacts of any changes such as SRs and Change Requests will be raised to document and approve any change in scope.			& Budget

Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Service Order 2013-04 Feb/Mar 2013 for work added after SO 2013-003 Signed	Mar 28, 2013	Ministry Sign-Off	Mar 28, 2013	Signed Off April 4, 2013	Service Order drafted and approved for Feb/Mar activities above the current SO 2013-04. Mar 28 – SO Approved and signed by MAXIMUS. Ministry to sign today. Apr 3 - Waiting for Ministry Sign-Off – Overdue. Apr 4 – Signed off and copy sent to MAXIMUS. This can now be closed.
Service Order for Fiscal Year 2013/14	Mar 28, 2013	Ministry to Draft, Finalize, Approve and Sign-off	Apr 2, 2013	Overdue	Service Order needs to be created for FY 2013/14 activities above the Fixed Price from last Fiscal Year. Ministry to draft before April 2, as this is required for work to continue on Apr 2, 2013. Apr 2 – Ministry to draft SO, review and approve with MAXIMUS and Ministry contracts, finalize and Sign-Off.
Decision on timing of Health Sector Firewall Move	Mar, 2013	Ministry Decision	April 19, 2013	April 11, 2013 Decision Made to Proceed with Health Sector Firewall	Health Sector Firewall move planned for 6-9 months after Release 2 Go Live. SSBC and HP would like to move this up to before Release 2 Go Live. If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before Network Move

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					and therefore will delay Go Live by 2-3 weeks. If Decision is Yes, CR will be created to document the change Health Sector Firewall will also impact existing PROD applications that are on Zone B. These must be moved before R2 Go Live. Apr 4 – Ministry Decision required by APRIL 19, 2013 or will cause re-work of Network and further delays to R2 Go Live. Apr 11 – Decision Made to proceed with Health Sector Firewall. MAXIMUS to assess and draft CR.
Network move from 4000 Seymour to Kamloops will result in additional scope and delays	Mar 2013	Ministry Decision	April 12, 2013	April 11, 2013 Decision Made to Proceed with added scope	Network move from 4000 Seymour to Kamloops will result in additional scope and delays 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. However these are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project. Apr 11 – Decision Made to proceed with added scope. MAXIMUS to assess and include in CR for Health Sector Firewall.
Remove Invalid Patient Dispense Records created by Dr. Bannerman during MedAccess Production Test in Summerland.	Feb 22, 2013	Ministry to arrange removal of records the same way they were created	Feb 22, 2013	Overdue	On Feb 22, 2013 invalid Patient Dispense Records were created by Dr. Bannerman during the MedAccess Production Test. Ministry to arrange removal of the records the same way they were created.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					** These should have been removed on Feb 22, 2013, when the data was created. Mar 26 – follow up email sent as this is still outstanding.
Early Adopter Deployment Release 1.1 Communication Activity Matrix	Jan 29, 2013	Ministry to develop	Feb 5, 2013	In Progress	Ministry to develop Communication Activity Matrix for Release 1.1. Phase 2 Communication Working Group formed to develop this. April 2 – EA Deployment completed for Phase 1 and 2. Matrix will be completed prior to Phase 3.
Release 2.0 Communication Activity Matrix	Jan 29, 2013	Ministry to Finalize	Apr 11, 2013	In Progress	Ministry to develop Communication Activity Matrix for Release 2.0 Communication Working Group formed to develop this. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Mar 28 – Drafted and updated. Needs finalization and approval. MOH to finalize by April 11, 2013.
Ministry Communication Plan	Apr 2, 2013	Ministry to Finalize	Apr 11, 2013	In Progress	Communication Working Group formed to develop the Communication Plan for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix. Howard to provide a draft to CWG by Mar 8 Mar 19 – Draft Communication Plan provided to MAXIMUS. This will be a living document and updated to add new deployments. Release 2 Plan Update and Sign-Off – April 11, 2013 Release 1.1 Phase 3 Plan Update and Sign-Off – TBD. Ministry to finalize by April 11, 2013.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 22, 2013	Ministry Approval	Mar 26, 2013	Overdue	Feb 21 - MAXIMUS created and submitted CR2012-008 Amended2 to revise scope as per Ministry Decision not to Conformance Test MedAccess, and instead support TELUS and walkthrough Test Cases. Mar 22, 2013 – CR updated to reflect new scope and submitted to Ministry for Review and Approval. Due Mar 26, 2013. Apr 2 – Overdue.
CR2013-002 PMP Conformance Testing TELUS	Apr 2, 2013	Ministry Approval	Apr 5, 2013	Overdue	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 28 – Ministry requested CR be updated and resubmitted to include FY 13/14 only. MAXIMUS updated CR and resubmitted on April 2, 2013 with due date of April 5, 2013.
Ministry Decision on File Transfer Method to Health Ideas via Condor. Does this stay with FTP or change to SFTP as per new Ministry Requirement.	Mar , 2013	Ministry Decision	Mar 22, 2013	Decision =SFTP Mar 28, 2013	Mar 20 – MAXIMUS provided estimate and requested Ministry Decision by Mar 22. Overdue. Mar 25 – MAXIMUS requested response today. Mar 28, 2013 - Decision is SFTP. MAXIMUS to initiate changes. This can now be closed.
CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess	Apr 11, 2013	MAXIMUS to Submit CR	Apr 15, 2013	In Progress	Apr 11 – MAXIMUS is drafting CR
CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11, 2013	MAXIMUS to Assess Impacts and draft CR	Apr 19, 2013	Pending	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR.

Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2
Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"

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Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.
Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing
Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. Approved.
Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress
Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope?	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.
Approved	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 6 – Approved and Signed Off
Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 21 – MAXIMUS amended CR2012-008 to revise scope to reflect Ministry Decision not to conformance test MedAccess and to use remaining time in CR for TELUS support and walkthrough of Test Cases. Mar 22 - Submitted to MOH. Due Mar 26, 2013.

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Submitted	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27 Mar 28 – Ministry requested CR be updated to include FY 13/14 scope only. MAXIMUS updated CR and resubmitted April 2, 2013 with due date of April 5, 2013
Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.
Approved	Health Sector Firewall Decision	Due April 19, 2013 – IF Yes, this will delay R2 Go Live and MAXIMUS to assess impacts and draft CR. Apr 11 – Decision made to proceed with Health Sector Firewall.
Approved	Network Move added scope of testing	Due April 12, 2013 – IF Yes, MAXIMUS will assess added scope and add to CR for Health Sector Firewall.
Pending	CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess	Apr 11 – MAXIMUS is drafting CR
Pending	CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR.

Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 – Pharmacy Production Deployment (Gibsons)	Done	Mar 30-31, 2013
	Phase 3 – EMR Production Deployment - TBD	Pending	TBD
Milestone	Conformance Test Case Updates	In Progress, Done for Vendor Testing	
	Release 2		
Milestone	Test Case Development Complete	Done	Mar 31,2013
Milestone	Business Acceptance Test Case Development Complete	In Progress	
Milestone	Test Case Execution Complete	In Progress	
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

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Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25 , 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	Jan 6, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization.
	Conformance Test Case Updates based on Conformance Specification v____ - EMR	MAXIMUS	Mar 4, 2013	10%	G	In Progress
	Conformance Test Case Updates based on Conformance Specification v - Pharmacy	MAXIMUS	Apr 8, 2013	10%	G	In Progress
	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	G	In Progress
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		100%	G	Done
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done
	Phase 1 Go Live	MOH	~~Oct 22, 2012~~ Nov 14, 2012	100%	G	Done
	Phase 2 Go Live	MOH	Mar 31, 2013	100%	G	Done
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012. Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012

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D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done. Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Apr 12, 2013	75%	G	In Progress. This is being delivered in groups.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done. Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done. Approved Dec 28, 2012. Signed Off.
M	R2 - Test Case Development • Admin Portal – 100% • Non-functional – 100% • Batch Interface Reports – 100% • Functional Regression –100% o Screens – 100% o Server / Transactions – 100% • CPRS –100% • Data Migration – 10% • CAS – 100% • BAT – 100% • HIAL – N/A • EMPI – N/A	MAXIMUS	Jan 31, 2013	100%	G	Done
M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done. Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	Apr 12, 2012	75%	Y	In Progress. Batches are delivered in stages starting in Sep.
D	Updated Training Plan – R2	MAXIMUS	Sep , 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete • Admin Portal – 94% • Non-functional – 0% • Batch Interface Reports – 94% • Functional Regression – 98% o Screens – 100%	MAXIMUS	April 26, 2012	75%	G	In Progress

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	○ Server / Transactions – 100% - pending defect fix ○ Business Config – 0% • CPRS – 70% • Data Migration – 0% • CAS – 50% • BAT – 60% • HIAL – N/A – Performance only • EMPI – N/A – connectivity test only					
M	BAT Test execution Complete PMP Screens – Done CPRS – in progress HIBC Admin - Done	MAXIMUS	Apr 19, 2013	75%	G	In Progress
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
W	Deploy ALL to Production for Dry Run and Performance Testing	MAXIMUS	Feb 8, 2013	100%	G	Done
W	PROD Dry Run and Data Migration Test	MAXIMUS	Apr 5, 2013	50%	G	Done
D	Deployment Plan	MAXIMUS	Apr 30, 2013	25%	G	In Progress
M	Communication Activity Matrix	MOH	Apr 11, 2013	50%	G	In Progress
D	Communication Plan	MOH	Apr 11, 2013	50%	G	In Progress
W	MAXIMUS Go No Go Decision	MAXIMUS	Apr 23, 2013	0%	G	Pending
D	Updated Disaster Recovery Plan Document	MAXIMUS	Apr 19, 2012	50%	G	In Progress
M	Performance Testing Complete	MAXIMUS	May 4, 2013	25%	G	In Progress – Round 1 completes April 12, 2013
M	Disaster Recovery Testing Complete	MAXIMUS	Apr 29, 2013	0%	G	Pending
D	R2 Defect Action Plan	MAXIMUS	Apr 24, 2013	0%	G	Pending
M	R2 Final Test Results Summary	MAXIMUS	Apr 24, 2013	0%	G	Pending
D	Support of Ministry Risk and Controls Review for Rel 2	BMO	Apr 25, 2013	25%	G	In Progress
M	Ministry Risk and Controls Report Complete	MOH	Apr 25, 2013	10%	G	In Progress
M	Ministry Go/No Go decision R2 to deployment	MAXIMUS	Apr 25, 2013	0%	G	Pending
M	Production Environment Ready	MAXIMUS	May 9, 2013	25%	G	In Progress
M	Production Support Strategy and Plan	MAXIMUS	May 16,2013	25%	G	In Progress
M	DR Environment Ready	MAXIMUS	May 16, 2013	10%	G	In Progress
M	R2 Deployment Complete	MAXIMUS	May 16, 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Aug 16, 2013	0%	G	Pending
	Proposed Release 3.0 New Functional Release					

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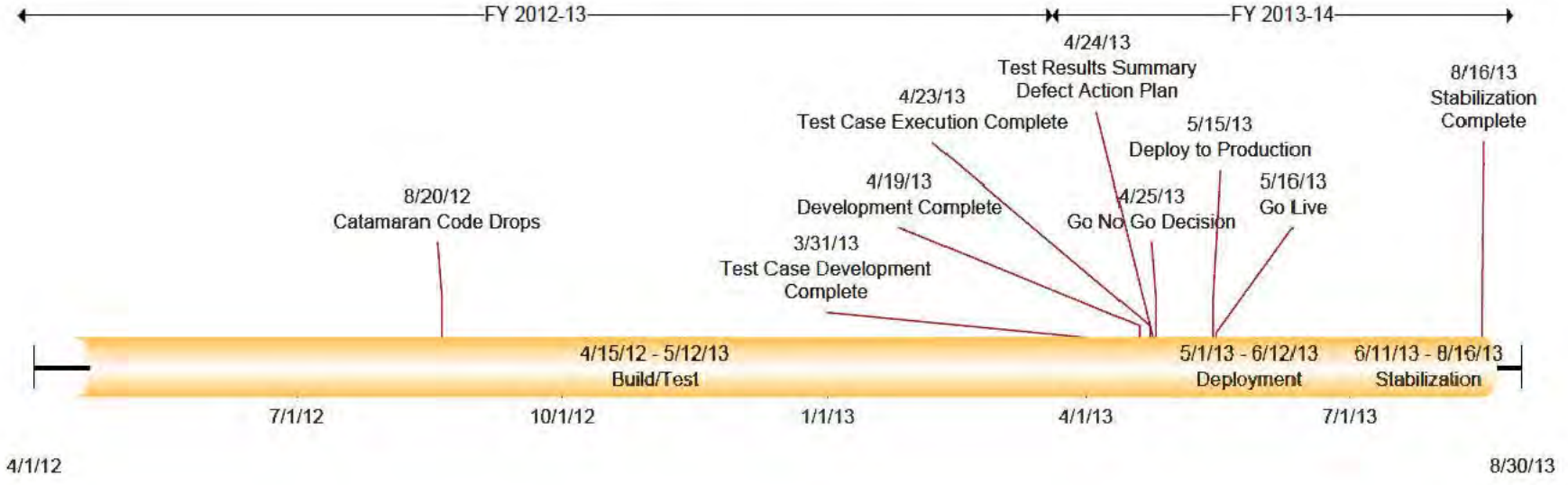
Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	(Record Locking and Clinical Services)					
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Test)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN Code Drop – Rel 3.0 to Test	CATAMARAN	TBD	0%	G	Pending
M	Test Rel 3.0	MAXIMUS	TBD	0%	G	Pending
M	CATAMARAN Code Drop – Rel 3.0 (Ready for Prod)	CATAMARAN	TBD	0%	G	Pending
M	Deploy CATAMARAN ode Drop – Rel 3.0 to Production	MAXIMUS	TBD	0%	G	Pending

1. PharmaNet Modernization: (Dates will change based on Health Sector Firewall Decision received Apr 11, 2013)

Release 2 Footprint & Milestone Targets



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PharmaNet Modernization Progress Report (JPMT)

MAXIMUS CANADA
A MAXIMUS Company

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-Apr-27	2013-May-10
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status (G / Y / R)
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure – Added Scope of Health Sector Firewall and additional Testing of Move from Seymour to Kamloopsl.	Y
	Release 3.0 High Levl Requirements and Planning	G
Quality	Adhering to MAXIMUS methodology	G
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Production Pilot - Nov 13 – 27, 2012 - completed Phase 2 – Pharmacy Production Deployment (Gibsons) - Mar 30-31 Phase 3 – EMR Production Deployment - TBD	G
	Release 2.0 PharmaNet Infrastructure Upgrade Go Live – planned for March 28, 2013. Delayed to May 16, 2013. Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines. ARI Conformance Testing added to Project Scope. Schedule is at risk due to tight itmelines. Go Live deferred to May 16, 2013. Health Sector Firewall Decision wil Delay Go Live. Go Live is no longer planned for May 16, 2013. MAXIMUS to assess and include in CR along with additional Testing of move from Seymour to Kamloops.	Y
	Release 3.0 – High Level Requirments and Planning – June 30, 2013	G
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2013-003) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency. Service Order for 2013/14 is not yet finalized.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report • CR2012-017 Conformance Test Execution Amended – Approved and Signed Off • CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only - Review and Approval		G

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• CR2013-003 Conformance Testing ARI – Approved for FY13/14 • CR2013-003 Conformance Testing ARI Amended – Review and Approval • CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs - Review and Approval • CR2013-008 PMP Health Sector Firewall and Network Move – Review and Approval (plan to submit April 26, 2013) • CR2013-009 PMP Release 3.0 High Level Requirements – Review and Approval (plan to submit April 26, 2013) •	
Release 2.0 Delivered since the last report • Service Order 2013-04 for Feb/Mar 2013 – Approved. Signed-Off. • Service Order for 2013/14 – Review and Approval • Data Migration Alternate Option Information Paper • Data Migration Briefing Note	G
2. Outstanding Issues and Actions.	Y

Key Open Project Issues

Status (G Y R)	Priority	Detailed Description	Business Impact	Proposed Resolution
Y	High	Release 2 Ministry Decision on Health Sector Firewall changes were planned for after Release 2. Now being moved up to before R2 Go Live. Ministry meeting held Mar 25 to decide timing - waiting for Ministry Decision	If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before changes and testing of Firewall and therefore will delay Go Live.	If Decision is Yes, a CR will be created to document the change that will delay the Network Move and therefore delay Release 2 Go Live. This will also impact existing PRODUCTION applications that are on Zone B. These must be moved before R2 Go Live. Decision required by APRIL 19. If decided after will cause re-work for Network Move and additional delays. IF YES, will delay R2 Go Live. Apr 11 – Ministry Decision is to proceed with Health Sector Firewall. This will delay Release 2 GO Live. MAXIMUS assessing impacts and preparing a CR.
Y	High	Release 2 Move from 4000 Seymour to Kamloops will result in additional scope of testing. These are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project.	Ministry are requesting more work that was not in scope 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that	Ministry Decision on if this is to be added to Scope. If YES, MAXIUS will create a CR. Decision required by APRIL 12. If decided after, will delay Go Live even further. Apr 11 – Ministry Decision is to proceed with Additional Scope. This will be assessed and included in the CR for the Health Sector Firewall.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
			MAXIMUS test these changes. These are not in scope of PharmaNet Modernization Project	
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Increased Scope will impact project timelines	PharmaNet Modernization Scope needs to be frozen. Anything that adds to scope will impact project timelines.
G	High	Ministry requirement change to send files to Condor via SFTP rather than FTP. Decision required by Friday Mar 22 as to if MAXIMUS must change to accommodate this.	Additional development, testing and infrastructure changes required to accommodate this change. MAXIMUS estimate this will take 4-6 days to complete, and we need a decision this week notifying us if we are to proceed with this change or not.	Ministry decision required by Mar 22 on if this must be changed. If so CR to be raised as per email estimate provided to Ministry on Mar 20 – overdue. ** Mar 28, 2013 – Ministry Decision is to change to SFTP. MAXIMUS to make changes to accommodate this in R2 as per estimate provided.
G	High	Potential Impact to Release 2 Go Live due to Annual Retro Run. Each Year Annual Retro is run from Feb to May 1 to reimburse families who have overpaid for Prescriptions. This overlaps Release 2.0 Deployment Activities which cannot both be run at the same time. Three Options presented in a new DR will outline impacts and decision must be made to either delay Retro or delay R2 Go Live.		Feb 5 – MAXIMUS submitted DR Outlining Options for Decision for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. MAXIMUS updating DR to re-submit. Feb 27 – Ministry signed DR approving Option 1.
G	High	Early Adopter Deployment dates cannot keep changing and moving closer to Release 2.0 or will impact Release 2.0 Business Acceptance Activities and possibly Release 2.0 Go Live. Early Adopter Deployment Phase 1 was planned for April 2012, delayed to July 2012, then Sept 2012, then Oct 2012, and now	Release 2 Business Acceptance Testing activities moved to accommodate EA Deployment planned for Sept 2012 - Test Case Development moved from Sept 2012 t Nov 2012 - Test Case Execution moved from Nov/Dec 2012 to Jan/Feb 2012 - Test Case Execution moved again to Feb/Mar 2012 - Potential risk to push out Rel 2 Go Live	Release 2.0 Business Acceptance Activites have been delayed to accommodate EA Conformance. Once all EA Deployments are complete, MOH will meet with MedAccess, MOH and do a formal lessons learned and have a formal assesment document. Target completig interviews / qustionaire by mid Dec. EA Phase 2 is yet to be scheduled. This will be aligned so as not to impact Release 2.0 Go Live. Current projeted date for Phase 2 is March 28, 2013 – to be confirmed. Feb 14 – Ministry are requesting an additional round

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		planned for Nov. Phase 1: Nov 13-27 – Done Phase 2: March 30-31 – Done Phase 3: TBD		of testing for MedAccess and ARI be completed prior to March 31, 2013. MAXIMUS are evaluating and will include in a CR. MAXIMUS prepared CR and sent to MOH. Ministry approved CRs for MedAccess and ARI. Ministry later decided not to conformance test MedAccess and to use funding to support TELUS and wlakthough test cases with TELUS. Phase 2 completed March 31, 2013 Phase 3 to be scheduled
G		Conformance Specifications are not final for General Deployment. Final version was to be published Jan 4, 2013. DRAFT Specifications delivered in Jan, but require clarification. Updated version delivered in Feb, but not Final. Several rule clarifications / interpretations still exist and some rules were aligned to MedAccess that may be inacurate, causing negative impact to future vendors.	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance Testing. 4. Incorect or incomplete test cases.	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry have updated documents and had a 2 hour workshop with MAXIMUS to review. Documents also released to TELUS and MedAccess. Ministry feel they are on track to have confromance specs ready for test case devleopment. ** Conformance Specs must be finalized to a version that can be used for Test Case Development and Vendor Development. Specifications will be finalized before General Deployment.
G	High	Release 2 CATAMARAN Server Code Drop delayed due to runtime issues on Solaris NetX Platform. Due July 12, 2012 Catamaran targe delivery date of Aug 14 +/- 7 days This would push go live past FY to April 17, 2013. MAXIMUS assessed options to mitigate and achieve Go Live by March 28, 2013.	Delays to Release 2.0 schedule and GO LIVE. Project must implement this FY ** This must be mitigated to achieve Mar 2013 Go Live	CATAMARAN added resources and worked over-time to deliver by Aug 20, 2013. Option of phased delivery explored, but not feasible. Daily check-point meetings setup between MAXIMUS and CATAMARAN to track progress MAXIMUS development team packaging server code drop and NetX profiles to deploy to test Sep 14 – MAXIMUS deployed Server Code Drop to Test. MAXIMUS assessed scheudle impacts and re-planned to deliver GO LIVE by March 28, 2012
G	Low	Potential delays to Release 2 Go Live due to SSBC not signing agreement with HP and delaying HP from moving infrastructure from	Potential delays to Release 2.0 Go Live	MAXIMUS will continue to monitor progress of HP Data Center Move Project – PharmaNet Project activities have been prioritized within the Data Center Move Project to keep on schedule for PharmaNet

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		TELUS Data Center to SSBC Data Center. Agreement is now signed but delayed resulting in delays to HP which could impact PharmaNet infrastructure setup		Release 2.0 Go Live. This is currently tracking to schedule. Jan 21 – Data Center Move successfully completed over the weekend.

Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, SSBC, HP, MoH have proposed moving MAXIMUS production servers) from the current firewall (ie. "zone b" firewall) to a new "Health Sector" firewall before Release 2.0 Go Live. The "Health Sector" firewall is already established in Calgary and is in MoH's/HP's plan to establish one in STMS Kamloops – however not for 6-9 months. This was not in the PharmaNet Modernization Project Plan as this was planned for 6-9 months from now, well after Go Live. Apr 11 – DECISION MADE TO MOVE to HEALTH SECTOR FIREWALL	Added scope and delays to Release 2 Go Live Release 2 Go Live	MAXIMUS to assess impact and draft CR as decision has been made to proceed with this.	HIGH	High	Scope, Schedule, Budget
NEW	High	As part of the PharmaNet IP transition from 4000 Seymour to STMS Kamloops, responsibility of updating the firewall entries for new Pharmacies onboarding to access the PharmaNet application will be moved from SSBC to HP – as HP will be managing the firewall in STMS Kamloops.	Added Scope to Release 2. PharmaNet Operational for onboarding new Pharmacies will change. Additional effort and lead time required. MoH, SSBC and HP must establish new process to update	MAIMUS to assess impacts and add to CR for Health Sector Firewall. 1. MoH, SSBC and HP have established new process to update the firewall in Kamloops without impacting MAXIMUS' current pharmacy	High	High	Scope, Schedule, Budget

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		Existing process of requesting firewall updates will change from current "ITIMS" ticket to SSBC to future HP iStore request for firewall updates. Pharmacy Network connectivity and access is not MAXIMUS responsibility. MAXIMUS is part of the process (as there is a step in the process to update a security table in the PharmaNet database). APR 11 – DECISION MADE TO PROCEED WITH ADDED SCOPE TO NETWORK MOVE.	the firewall in Kamloops without impacting MAXIMUS' current pharmacy registration procedures.	registration procedures. 2. Assess how to deal with additional lead times and effort required.			
NEW	High	Ministry Decision to allow Med Access to Go Live in Production without fully testing result in the following: 1. Conformance Specifications are unclear in areas, were updated to align with this vendor, and have not been fully tested by this vendor, or any other vendor 2. Conformance Test Cases have not been fully tested 3. MedAccess did not pass the last round of Conformance Testing. 4. Vendor software changes have been made without fully testing changes. 5. Patient Safety Issues may result due Incorrect data entering PharmaNet and being used 6. Increased production support and data integrity issues	The following impacts may result; 1. Data Integrity Issues 2. Patient Safety issues 3. Increased Production Support effort and costs 4. Potential down-time of PharmaNet. 5. Conformance Specifications do not match the intent and are incorrectly interpreted by other vendors. 6. Conformance Test Cases may not match the intention of the Specification and not adequately test for required conditions as not clearly stated in specifications. 7. Other Vendors may not correctly develop to the intent of the specifications 8. Other vendors may not be adequately tested before going to production 9. Other vendors may change their software incorrectly to	MAXIMUS have notified the Ministry of the Risks recommending that MedAccess be fully tested before Go Live in Production.	High	High	Scope, Quality and Budget

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			match the specifications aligned for MedAccess that are incorrect.				
528682	High	Project M102 Project Cannot keep pace with schedule for deliverable target dates. Schedule may slip due to 1-required project decisions and approvals not being made in time 2-specific project milestones not on the critical path are not met in time 3-estimated effort is insufficient to complete deliverables 4-financial risks and controls standards are not met 5-Early Adopter Points of Service Vendors (EMR or Pharmacy) are not ready to conformance test when scheduled by the project 6-early Adopter Point of Service Vendors (EMR or Pharmacy) withdraw from project prior to deployment	Could result in 1-Delays final deployment date for Rel 1.1 and/or Rel 2 2-Continue to lose stakeholder support 3-Scope may have to be reduced to meet project timelines Pharmacy Vendor delays resulting in rescheduling, re-planning, moving things around. Large impact on operations.	Mitigate	Medium	High	Schedule and Budget
528683	Normal	Project M104 Project expenditures or forecasts exceed available funding, or funding is reduced and allocated to other higher priority projects, which may result in project not being able to accomplish the PharmaNet Modernization Vision, and possible cancellation of the project	Project could be reduced or cancelled	Mitigate	Medium High	Medium High	Budget
544671	Normal	Release 2 Execution of Data Conversion for Release 2.0 may not fit in a single change window, and may need to	Data Conversion activities to be assessed. If required, split activities between 2 or more scheduled change windows	Mitigate – As with Release 1.0, MAXIMUS will assess the probability of this and determine how Data Conversion can be	Medium	Medium	Schedule

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
		be split into 2 or more windows.	within existing timeline.	executed. If required, MAXIMUS will arrange with the Service Provider to split activities between multiple change windows and extend the hours of the change window if required.			
528680	Normal	Project M111 Scope (Solution Requirements) Change over the Project Life Cycle. PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Anything that adds to scope will impact project timelines.	Mitigate – No new scope to be added unless essential. MAXIMUS to assess impacts of any changes such as SRs and Change Requests will be raised to document and approve any change in scope.	Medium	Medium	Schedule & Budget

Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Remove Invalid Patient Dispense Records created by Dr. Bannerman during MedAccess Production Test in Summerland.	Feb 22, 2013	Ministry to arrange removal of records the same way they were created	Feb 22, 2013	Overdue	On Feb 22, 2013 invalid Patient Dispense Records were created by Dr. Bannerman during the MedAccess Production Test. Ministry to arrange removal of the records the same way they were created. ** These should have been removed on Feb 22, 2013, when the data was created. Mar 26 – follow up email sent as this is still outstanding. Apr 15 – Rob to follow up. Enola to resend Sorin a copy of the email sent on Mar 26 - done. April 25 – with Ministry.
CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 22, 2013	Ministry Approval	Mar 26, 2013	Overdue	Feb 21 - MAXIMUS created and submitted CR2012-008 Amended2 to revise scope as per Ministry Decision not to Conformance Test MedAccess, and instead support TELUS and walkthrough Test Cases.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Mar 22, 2013 – CR updated to reflect new scope and submitted to Ministry for Review and Approval. Due Mar 26, 2013. Apr 2 – Overdue. Apr 15 – approved at JEC. Enola confirmed that MAXIMUS have not received a signed copy of this CR. May 9 – Ministry to setup meeting to resolve issues and finalize.
Service Order for Fiscal Year 2013/14	~~Mar 28, 2013~~ Apr 25, 2013	~~Ministry to Draft, Finalize, Approve and Sign-off~~ MAXIMUS to Finalize and Send to Ministry for Approval	~~Apr 2, 2013~~ April 26, 2013	In Progress Overdue	Service Order needs to be created for FY 2013/14 activities above the Fixed Price from last Fiscal Year. Ministry to draft before April 2, as this is required for work to continue on Apr 2, 2013. Apr 2 – Ministry to draft SO, review and approve with MAXIMUS and Ministry contracts, finalize and Sign-Off. Apr 15 – must assess work that must be done this FY then SO will be created. Meeting today to look at this. Apr 25 – Service Order Template received from MOH and MAXIMUS. MAXIMUS have updated and in internal reviews. MAXIMUS to submit once internally reviewed. May 9 – Waiting for Ministry approval.
CR2013-002 PMP Conformance Testing TELUS	Apr 2, 2013	Ministry Approval	Apr 5, 2013	Overdue	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 28 – Ministry requested CR be updated and resubmitted to include FY 13/14 only. MAXIMUS updated CR and resubmitted for FY 13/14 only on April 2, 2013 with due date of April 5, 2013. Apr 25 – waiting for Ministry approval. May 10 – approved, but Ministry requested Date changes.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess and Test Case Updates	Apr 16, 2013	Ministry Approval	Apr 23, 2013	Overdue	Apr 11 – MAXIMUS is drafting CR Apr 16 – CR submitted to Ministry for Approval. Apr 25 – overdue. Waiting for Ministry approval
CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11, 2013	MAXIMUS to submit	April 26, 2013	Approved	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – CR drafted and in MAXIMUS internal review. Once reviewed, MAXIMUS will submit to Ministry for Approval. May – CR Approved and Signed Off.
CR2013-009 PMP Release 3.0 High Level Requirements	April 15, 2013	MAXIMUS to Submit	April 26, 2013	Approved and Signed Off.	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit to Ministry on April 26, 2013 May 9 – CR submitted, reviewed, approved and signed.
Decision on timing of Health Sector Firewall Move	Mar, 2013	Ministry Decision	April 19, 2013	April 11, 2013 Decision Made to Proceed with Health Sector Firewall	Health Sector Firewall move planned for 6-9 months after Release 2 Go Live. SSBC and HP would like to move this up to before Release 2 Go Live. If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before Network Move and therefore will delay Go Live by 2-3 weeks. If Decision is Yes, CR will be created to document the change Health Sector Firewall will also impact existing PROD applications that are on Zone B. These must be moved before R2 Go Live. Apr 4 – Ministry Decision required by APRIL 19, 2013 or will cause re-work of Network and further delays to R2 Go Live. Apr 11 – Decision Made to proceed with Health Sector Firewall. MAXIMUS to assess and draft CR.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Move from 4000 Seymour to Kamloops will result in additional scope of testing	Mar 2013	Ministry Decision	April 12, 2013	April 11, 2013 Decision Made to Proceed with added scope	Move from 4000 Seymour to Kamloops will result in additional scope and delays 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. However these are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project. Apr 11 – Decision Made to proceed with added scope. MAXIMUS to assess and include in CR for Health Sector Firewall.
Early Adopter Deployment Release 1.1 Communication Activity Matrix	Jan 29, 2013	Ministry to develop	Feb 5, 2013	Completed for Phase 1 and 2	Ministry to develop Communication Activity Matrix for Release 1.1. Phase 2 Communication Working Group formed to develop this. April 2 – EA Deployment completed for Phase 1 and 2. Matrix will be completed prior to Phase 3.
Release 2.0 Communication Activity Matrix	Jan 29, 2013	Ministry to Finalize	Apr 11, 2013	Update to reflect revised Go Live	Ministry to develop Communication Activity Matrix for Release 2.0 Communication Working Group formed to develop this. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Mar 28 – Drafted and updated. Needs finalization and approval. MOH to finalize by April 11, 2013. Done May 9 – This needs to be updated to reflect

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					the revised Go Live date. This should be re-reviewed once updated.
Ministry Communication Plan	Apr 2, 2013	Ministry to Finalize	Apr 11, 2013	Done	Communication Working Group formed to develop the Communication Plan for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix. Howard to provide a draft to CWG by Mar 8 Mar 19 – Draft Communication Plan provided to MAXIMUS. This will be a living document and updated to add new deployments. Release 2 Plan Update and Sign-Off – April 11, 2013 Release 1.1 Phase 3 Plan Update and Sign-Off – TBD. Ministry to finalize by April 11, 2013. Done May 15 – This should be updated with the updated Activity Matrix for Release 2

Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2
Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"
Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.
Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing

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Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. Approved.
Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress
Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.
Approved	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 6 – Approved and Signed Off
Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 21 – MAXIMUS amended CR2012-008 to revise scope to reflect Ministry Decision not to conformance test MedAccess and to use remaining time in CR for TELUS support and walkthrough of Test Cases. Mar 22 - Submitted to MOH. Due Mar 26, 2013.
Submitted	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27 Mar 28 – Ministry requested CR be updated to include FY 13/14 scope only. MAXIMUS updated CR and resubmitted April 2, 2013 with due date of April 5, 2013

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Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.
Approved	Health Sector Firewall Decision	Due April 19, 2013 – IF Yes, this will delay R2 Go Live and MAXIMUS to assess impacts and draft CR. Apr 11 – Decision made to proceed with Health Sector Firewall.
Approved	Move from 4000 Seymour to Kamloops will result in additional scope of testing	Due April 12, 2013 – IF Yes, MAXIMUS will assess added scope and add to CR for Health Sector Firewall.
Submitted	CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess	Apr 11 – MAXIMUS is drafting CR Apr 16 – Submitted to Ministry for Review and Approval
Approved	CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – MAXIMUS have drafted CR and in internal reviews. Submitted Apr 26, 2013
In Progress	CR2013-009 PMP Release 3.0 High Level Requirements	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit Apr 26, 2013

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Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 – Pharmacy Production Deployment (Gibsons)	Done	Mar 30-31, 2013
Milestone	Phase 3 – EMR Production Deployment - TBD	Pending	TBD
Milestone	Conformance Test Case Updates	In Progress, Done for Vendor Testing	
	Release 2		
Milestone	Test Case Development Complete	Done	Mar 31, 2013
Milestone	Business Acceptance Test Case Development Complete	Done	
Milestone	Test Case Execution Complete	In Progress	
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25 , 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	Jan 6, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization.
	Conformance Test Case Updates based on Conformance Specification v - EMR	MAXIMUS	Mar 4, 2013	10%	G	In Progress
	Conformance Test Case Updates based on Conformance Specification v - Pharmacy	MAXIMUS	Apr 8, 2013	10%	G	In Progress

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	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	G	In Progress
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		100%	G	Done
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done
	Phase 1 Go Live	MOH	~~Oct 22, 2012~~ Nov 14, 2012	100%	G	Done
	Phase 2 Go Live	MOH	Mar 31, 2013	100%	G	Done
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012. Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012
D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done. Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Apr 12, 2013	75%	G	In Progress. This is being delivered in groups.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done. Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done. Approved Dec 28, 2012. Signed Off.

M	R2 - Test Case Development
	• Admin Portal – 100%
	• Non-functional – 100%
	• Batch Interface Reports – 100%
	• Functional Regression –100%
	  o Screens – 100%
	  o Server / Transactions – 100%
	• CPRS –100%
	• Data Migration – 10%
	• CAS – 100%
	• BAT – 100%
	• HIAL – N/A
	• EMPI – N/A
		MAXIMUS	Apr 15, 2013	100%	G	Done

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done. Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	Apr 12, 2012	75%	Y	In Progress. Batches are delivered in stages starting in Sep.
D	Updated Training Plan – R2	MAXIMUS	Sep , 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete • Admin Portal – 94% • Non-functional – 0% • Batch Interface Reports – 94% • Functional Regression – 98% o Screens – 100% o Server / Transactions – 100% - pending defect fix o Business Config – 0% • CPRS – 70% • Data Migration – 0% • CAS – 50% • BAT – 60% • HIAL – N/A – Performance only • EMPI – N/A – connectivity test only	MAXIMUS	May , 2012	75%	G	In Progress
M	BAT Test execution Complete PMP Screens – Done CPRS – Done HIBC Admin – Done Reports – In Progress	MAXIMUS	May , 2013	75%	G	In Progress
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
W	Deploy ALL to Production for Dry Run and Performance Testing	MAXIMUS	Feb 8, 2013	100%	G	Done
W	PROD Dry Run and Data Migration Test	MAXIMUS	Apr 5, 2013	100%	G	Done
D	Deployment Plan	MAXIMUS	May 31, 2013	50%	G	In Progress

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
M	Communication Activity Matrix	MOH	Apr 11, 2013	100%	G	Done. Needs updating
D	Communication Plan	MOH	Apr 11, 2013	100%	G	Done
W	MAXIMUS Go No Go Decision	MAXIMUS	Jun 6, 2013	0%	G	Pending
D	Updated Disaster Recovery Plan Document	MAXIMUS	May 31, 2012	50%	G	In Progress
M	Performance Testing Complete	MAXIMUS	May 22, 2013	25%	G	In Progress – Round 1 completes April 12, 2013
M	Disaster Recovery Testing Complete	MAXIMUS	May 31, 2013	0%	G	Pending
D	R2 Defect Action Plan	MAXIMUS	Jun 3 , 2013	0%	G	Pending
M	R2 Final Test Results Summary	MAXIMUS	Jun 3 , 2013	0%	G	Pending
D	Support of Ministry Risk and Controls Review for Rel 2	BMO	June 11, 2013	25%	G	In Progress
M	Ministry Risk and Controls Report Complete	MOH	June 10, 2013	10%	G	In Progress
M	Ministry Go/No Go decision R2 to deployment	MAXIMUS	June 11, 2013	0%	G	Pending
M	Production Environment Ready	MAXIMUS	June, 2013	25%	G	In Progress
M	Production Support Strategy and Plan	MAXIMUS	June 10 ,2013	25%	G	In Progress
M	DR Environment Ready	MAXIMUS	June 10, 2013	10%	G	In Progress
M	R2 Deployment Complete	MAXIMUS	June 22, 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Sep 22, 2013	0%	G	Pending
	Release 3.0 High Level Requirements and Planning					
M	Project Plan	MAXIMUS	May 15, 2013	100%	G	Done
D	Project Charter	MAXIMUS	May 31, 2013	25%	G	In Progress
M	High Level Requirements – Draft for Ministry Review	MAXIMUS	May 24, 2013	50%	G	In Progress. Plan to deliver draft to MOH before May 24, 2013, review and then update.
D	High Level Requirements (Approved)	MAXIMUS	Jun 30, 2013	0%	G	Pending
D	Detailed Estimate	MAXIMUS	Jun 17, 2013	0%	G	Pending

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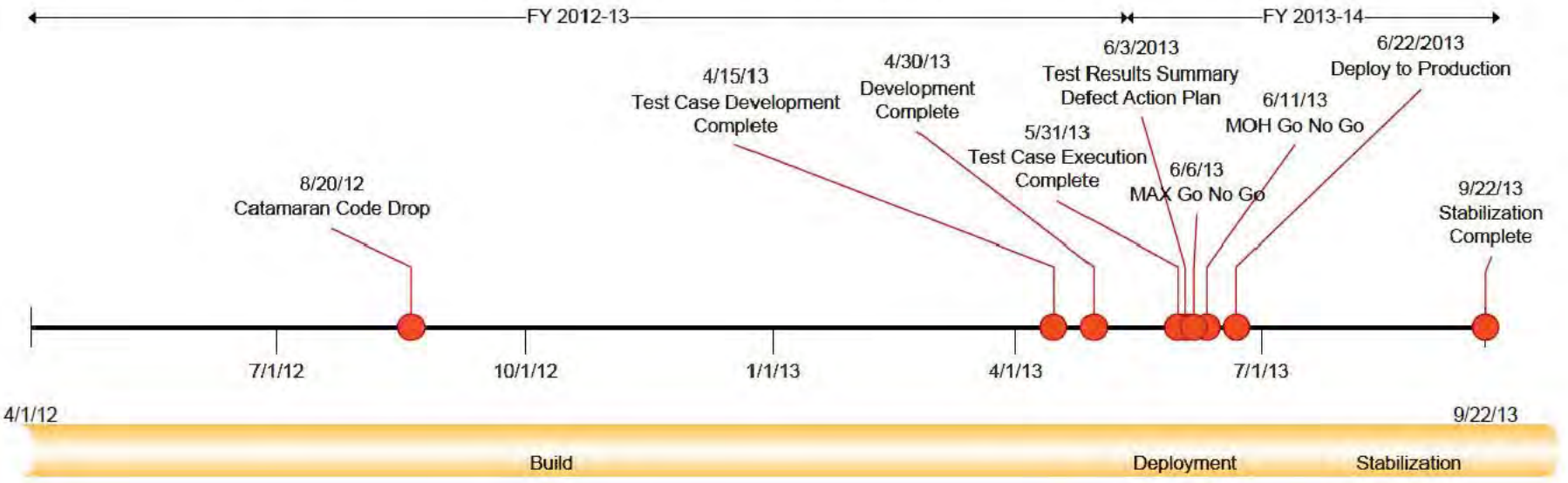
1. PharmaNet Modernization:

Release 2 Footprint & Milestone Targets



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PharmaNet Modernization Progress Report (JPMT)

MAXIMUS CANADA A MAXIMUS Company

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-May 11	2013-May-24
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status (G / Y / R)
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure – Added Scope of Health Sector Firewall and additional Testing of Move from Seymour to Kamloopsl.	Y
	Release 3.0 High Levl Requirements and Planning	G
Quality	Adhering to MAXIMUS methodology	G
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Production Pilot - Nov 13 – 27, 2012 - completed Phase 2 – Pharmacy Production Deployment (Gibsons) - Mar 30-31 Phase 3 – EMR Production Deployment - TBD	G
	Release 2.0 PharmaNet Infrastructure Upgrade Go Live – planned March 28, 2013. Delayed to May 16, 2013. Delayed to June 23, 2013 due to Health Sector Firewall and Ministry Network Move. Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines. ARI Conformance Testing added to Project Scope. Schedule is at risk due to tight itmelines. Go Live deferred to May 16, 2013. Health Sector Firewall Decision wil Delay Go Live to June 19, 2013. Ministry Decision to Go Live on Sat/Sun moves Go Live to June 22/23. May 23 – Mnistry Decision to Delay Go Live to July 6/7 due to delays in Ministry Network Move and ability to communicate to External Stakeholders.	Y
	Release 3.0 – High Level Requirments and Planning – June 30, 2013	G
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2013-003) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency. Service Order for 2013/14 is not yet finalized.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report		G

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• CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only – Put on Hold • CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs – Put on Hold! • •	
Release 2.0 Delivered since the last report • CR2013-008 PMP Health Sector Firewall and Network Move – Review and Approval • CR2013-008 PMP Health Sector Firewall and Network Move – Approved and Signed Off • CR2013-009 PMP Release 3.0 High Level Requirements – Review and Approval • CR2013-009 PMP Release 3.0 High Level Requirements – Approved and Signed Off • CR2013-009 PMP Release 3.0 High Level Requirements – Put on Hold • Service Order for 2013/14 – Review and Approval • Data Migration Alternate Option Information Paper • Data Migration Briefing Note • Impacts to Release 2 Go Live Issue Paper	G
2. Outstanding Issues and Actions.	Y

Key Open Project Issues

Status (G Y R)	Priority	Detailed Description	Business Impact	Proposed Resolution
Y		Confirmation of Release 2 Go Live date. Release 2 Go Live is currently planned for Sat/Sun June 22/23. Due to the potential delays in the Network Move project and the required time to communicate to the external stakeholders regarding the extended change window, the Ministry have requested Go Live be deferred to July 6/7. External communications underway MAXIMUS to assess impacts of the delayed Go Live.	MAXIMUS assessing impacts of delayed Go Live. Ministry needs to ensure there is adequate time to communicate to stakeholders and plan for the outage during the extended change window.	MAXIMUS engaging in stakeholder communications in preparation for Go Live and outage during the change window. MAXIMUS assessing impacts of delay to Go Live.
R	High	Release 2 Ministry Pharmacy Network Move from 4000 Seymour to Kamloops must complete in time for Release 2.0 Go Live planned for June 22/23. Ministry requested additional testing has been requested that is included in CR2013-008 Health	Additional Testing included in Cr2013-008 Health Sector Firewall and Network Move. Outstanding Items 1. If Network Move cannot be completed in time for Release 2.0 Go Live, it will push out Release 2.0 Go Live to July 6/7. There are impacts associated with delaying Release 2.0 Go Live to July 6/7. 2. If encryption is required additional costs to	Apr 11 – Ministry Decision is to proceed with Additional Scope. This will be assessed and included in the CR for the Health Sector Firewall. Outstanding Items: 1. MAXIMUS to prepare impact assessment of delaying Release 2,.0 Go Live to July 6/7 2. Sorin to follow up with College on if encryption is required 3. Ministry must get commitment from POS to

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		Sector Firewall and Network Move. Outstanding issues 1. Deployment date needs to be moved back from June 26 to complete in time for Release 2.0 Go Live on June 22/23 2. Outstanding decision on if encryption is required. 3. Is End to End Testing required, as not in original scope? If yes must be planned for now.	College for infrastructure. 3. Ministry Decision is to proceed with End to End testing. This is added scope and must be planned for now to complete in time. Requires commitment of POS. *** Additional scope of End to End Testing and Impact of delays to Go Live as a result of Network Move Delays will need to be added to the CR2013-008 and approved.	complete testing within timeframe required.
G	High	Release 2 Ministry Decision on Health Sector Firewall changes were planned for after Release 2. Now being moved up to before R2 Go Live. Ministry meeting held Mar 25 to decide timing - waiting for Ministry Decision	If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before changes and testing of Firewall and therefore will delay Go Live.	If Decision is Yes, a CR will be created to document the change that will delay the Network Move and therefore delay Release 2 Go Live. This will also impact existing PRODUCTION applications that are on Zone B. These must be moved before R2 Go Live. Decision required by APRIL 19. If decided after will cause re-work for Network Move and additional delays. IF YES, will delay R2 Go Live. Apr 11 – Ministry Decision is to proceed with Health Sector Firewall. This will delay Release 2 GO Live. MAXIMUS assessing impacts reflected in CR. Release 2.0 Go Live reset to June 22/23 to reflect Saturday / Sunday Deployment
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Increased Scope will impact project timelines	PharmaNet Modernization Scope needs to be frozen. Anything that adds to scope will impact project timelines.
G	High	Ministry requirement change to send files to Condor via SFTP rather than FTP. Decision required by Friday Mar 22 as to if MAXIMUS must change to accommodate this.	Additional development, testing and infrastructure changes required to accommodate this change. MAXIMUS estimate this will take 4-6 days to complete, and we need a decision this week notifying us if we are to proceed with this	Ministry decision required by Mar 22 on if this must be changed. If so CR to be raised as per email estimate provided to Ministry on Mar 20 – overdue. ** Mar 28, 2013 – Ministry Decision is to change to SFTP. MAXIMUS to make changes to accommodate this in R2 as per estimate provided.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
			change or not.	
G	High	Potential Impact to Release 2 Go Live due to Annual Retro Run. Each Year Annual Retro is run from Feb to May 1 to reimburse families who have overpaid for Prescriptions. This overlaps Release 2.0 Deployment Activities which cannot both be run at the same time. Three Options presented in a new DR will outline impacts and decision must be made to either delay Retro or delay R2 Go Live.		Feb 5 – MAXIMUS submitted DR Outlining Options for Decision for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. MAXIMUS updating DR to re-submit. Feb 27 – Ministry signed DR approving Option 1.
G	High	Early Adopter Deployment dates cannot keep changing and moving closer to Release 2.0 or will impact Release 2.0 Business Acceptance Activities and possibly Release 2.0 Go Live. Early Adopter Deployment Phase 1 was planned for April 2012, delayed to July 2012, then Sept 2012, then Oct 2012, and now planned for Nov. Phase 1: Nov 13-27 – Done Phase 2: March 30-31 – Done Phase 3: TBD	Release 2 Business Acceptance Testing activities moved to accommodate EA Deployment planned for Sept 2012 - Test Case Development moved from Sept 2012 t Nov 2012 - Test Case Execution moved from Nov/Dec 2012 to Jan/Feb 2012 - Test Case Execution moved again to Feb/Mar 2012 - Potential risk to push out Rel 2 Go Live	Release 2.0 Business Acceptance Activites have been delayed to accommodate EA Conformance. Once all EA Deployments are complete, MOH will meet with MedAccess, MOH and do a formal lessons learned and have a formal assesment document. Target completig interviews / qustionaire by mid Dec. EA Phase 2 is yet to be scheduled. This will be aligned so as not to impact Release 2.0 Go Live. Current projeted date for Phase 2 is March 28, 2013 – to be confirmed. Feb 14 – Ministry are requesting an additional round of testing for MedAccess and ARI be completed prior to March 31, 2013. MAXIMUS are evaluating and will include in a CR. MAXIMUS prepared CR and sent to MOH. Ministry approved CRs for MedAccess and ARI. Ministry later decided not to conformance test MedAccess and to use funding to support TELUS and wlakthough test cases with TELUS. Phase 2 completed March 31, 2013 Phase 3 to be scheduled
G		Conformance Specifications are not final for General Deployment. Final version was to be published Jan 4, 2013. DRAFT Specifications delivered in Jan, but require clarification.	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry have updated documents and had a 2 hour

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		Updated version delivered in Feb, but not Final. Several rule clarifications / interpretations still exist and some rules were aligned to MedAccess that may be inacurate, causing negative impact to future vendors.	Testing. 4. Incorect or incomplete test cases.	workshop with MAXIMUS to review. Documents also released to TELUS and MedAccess. Ministry feel they are on track to have confromance specs ready for test case devleopment. ** Conformance Specs must be finalized to a version that can be used for Test Case Development and Vendor Development. Specifications will be finalized before General Deployment.
G	High	Release 2 CATAMARAN Server Code Drop delayed due to runtime issues on Solaris NetX Platform. Due July 12, 2012 Catamaran targe delivery date of Aug 14 +/- 7 days This would push go live past FY to April 17, 2013. MAXIMUS assessed options to mitigate and achieve Go Live by March 28, 2013.	Delays to Release 2.0 schedule and GO LIVE. Project must implement this FY ** This must be mitigated to achieve Mar 2013 Go Live	CATAMARAN added resources and worked over-time to deliver by Aug 20, 2013. Option of phased delivery explored, but not feasible. Daily check-point meetings setup between MAXIMUS and CATAMARAN to track progress MAXIMUS development team packaging server code drop and NetX profiles to deploy to test Sep 14 – MAXIMUS deployed Server Code Drop to Test. MAXIMUS assessed scheudle impacts and re-planned to deliver GO LIVE by March 28, 2012
G	Low	Potential delays to Release 2 Go Live due to SSBC not signing agreement with HP and delaying HP from moving infrastructure from TELUS Data Center to SSBC Data Center. Agreement is now signed but delayed resulting in delays to HP which could impact PharmaNet infrastructure setup	Potential delays to Release 2.0 Go Live	MAXIMUS will continue to monitor progress of HP Data Center Move Project – PharmaNet Project activities have been prioritized within the Data Center Move Project to keep on schedule for PharmaNet Release 2.0 Go Live. This is currently tracking to schedule. Jan 21 – Data Center Move successfully completed over the weekend.

Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
NEW	High	Ministry Network Move may not complete in time for Release 2.0 Go Live on June 22/23. If Network Move Project cannot complete in time it will push out	Added scope and delays to Release 2 Go Live Release 2 Go Live	MAXIMUS to assess impact and provide to Ministry.	HIGH	High	Scope, Schedule, Budget

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
		Release 2.0 Go Live Date. On May 23, 2013 Ministry advised that that Release 2.0 Go Live will be pushed out to July 6/7 due to Network Move and Stakeholder Communication. MAXIMUS assessing impacts. Ministry Decisions outstanding: 1. Is Encryption required – Ministry to follow up with Colleges. 2. Is End to End Testing to be added to scope? If so additional effort is required that needs to be planned for and CR2013-008 to be updated and reapproved to reflect this.					

Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Remove Invalid Patient Dispense Records created by Dr. Bannerman during MedAccess Production Test in Summerland.	Feb 22, 2013	Ministry to arrange removal of records the same way they were created	Feb 22, 2013	Overdue	On Feb 22, 2013 invalid Patient Dispense Records were created by Dr. Bannerman during the MedAccess Production Test. Ministry to arrange removal of the records the same way they were created. ** These should have been removed on Feb 22, 2013, when the data was created. Mar 26 – follow up email sent as this is still outstanding. Apr 15 – Rob to follow up. Enola to resend Sorin a copy of the email sent on Mar 26 - done. April 25 – with Ministry.
Service Order for Fiscal Year 2013/14	~~Mar 28, 2013~~ Apr 25, 2013	~~Ministry to Draft, Finalize, Approve and Sign off~~	~~Apr 2, 2013~~ April 26, 2013	In Progress	Service Order needs to be created for FY 2013/14 activities above the Fixed Price from

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
		MAXIMUS to Finalize and Send to Ministry for Approval		Overdue	last Fiscal Year. Ministry to draft before April 2, as this is required for work to continue on Apr 2, 2013. Apr 2 – Ministry to draft SO, review and approve with MAXIMUS and Ministry contracts, finalize and Sign-Off. Apr 15 – must assess work that must be done this FY then SO will be created. Meeting today to look at this. Apr 25 – Service Order Template received from MOH and MAXIMUS. MAXIMUS have updated and in internal reviews. MAXIMUS to submit once internally reviewed. May 9 – Waiting for Ministry approval.
CR2013-002 PMP Conformance Testing TELUS	Apr 2, 2013	Ministry Approval	Apr 5, 2013	Overdue On HOLD	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 28 – Ministry requested CR be updated and resubmitted to include FY 13/14 only. MAXIMUS updated CR and resubmitted for FY 13/14 only on April 2, 2013 with due date of April 5, 2013. Apr 25 – waiting for Ministry approval. May 10 – approved, but Ministry requested Date changes. May 23 – Ministry have put this CR on HOLD an requested MAXIMUS adjust past billings to move to CR2013-003 Conformance Testing ARI
CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess and Test Case Updates	Apr 16, 2013	Ministry Approval	Apr 23, 2013	Overdue On HOLD	Apr 11 – MAXIMUS is drafting CR Apr 16 – CR submitted to Ministry for Approval. Apr 25 – overdue. Waiting for Ministry approval May 23 – Ministry have put this CR on HOLD an requested MAXIMUS adjust past billings

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					to move to CR2013-003 Conformance Testing ARI
CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11, 2013	MAXIMUS to submit	April 26, 2013	Approved	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – CR drafted and in MAXIMUS internal review. Once reviewed, MAXIMUS will submit to Ministry for Approval. May – CR Approved and Signed Off. May 24 – CR will need to be amended to include new scope of End to End Testing and further Delays of Network Move. MAXIMUS to update and submit to Ministry.
CR2013-009 PMP Release 3.0 High Level Requirements	April 15, 2013	MAXIMUS to Submit	April 26, 2013	Approved and Signed Off. Request to put on HOLD	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit to Ministry on April 26, 2013 May 9 – CR submitted, reviewed, approved and signed. May 23 – Ministry have requested this be put on HOLD. Assessing what must be completed prior to putting on HOLD.
Decision on timing of Health Sector Firewall Move	Mar, 2013	Ministry Decision	April 19, 2013	April 11, 2013 Decision Made to Proceed with Health Sector Firewall	Health Sector Firewall move planned for 6-9 months after Release 2 Go Live. SSBC and HP would like to move this up to before Release 2 Go Live. If Health Sector Firewall is moved after Go Live - No impact to Project. If Health Sector Firewall is moved before Go Live - It must be done before Network Move and therefore will delay Go Live by 2-3 weeks. If Decision is Yes, CR will be created to document the change Health Sector Firewall will also impact existing PROD applications that are on Zone B. These must be moved before R2 Go Live. Apr 4 – Ministry Decision required by APRIL 19, 2013 or will cause re-work of Network and further delays to R2 Go Live.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Apr 11 – Decision Made to proceed with Health Sector Firewall. MAXIMUS to assess and draft CR.
Move from 4000 Seymour to Kamloops will result in additional scope of testing	Mar 2013	Ministry Decision	April 12, 2013	April 11, 2013 Decision Made to Proceed with added scope	Move from 4000 Seymour to Kamloops will result in additional scope and delays 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. However these are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project. Apr 11 – Decision Made to proceed with added scope. MAXIMUS to assess and include in CR for Health Sector Firewall.
Early Adopter Deployment Release 1.1 Communication Activity Matrix	Jan 29, 2013	Ministry to develop	Feb 5, 2013	Completed for Phase 1 and 2	Ministry to develop Communication Activity Matrix for Release 1.1. Phase 2 Communication Working Group formed to develop this. April 2 – EA Deployment completed for Phase 1 and 2. Matrix will be completed prior to Phase 3.
Release 2.0 Communication Activity Matrix	Jan 29, 2013	Ministry to Finalize	Apr 11, 2013	Update to reflect revised Go Live	Ministry to develop Communication Activity Matrix for Release 2.0 Communication Working Group formed to develop this. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Mar 28 – Drafted and updated. Needs

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					finalization and approval. MOH to finalize by April 11, 2013. Done May 9 – This needs to be updated to reflect the revised Go Live date. This should be re-reviewed once updated.
Ministry Communication Plan	Apr 2, 2013	Ministry to Finalize	Apr 11, 2013	Done	Communication Working Group formed to develop the Communication Plan for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix. Howard to provide a draft to CWG by Mar 8 Mar 19 – Draft Communication Plan provided to MAXIMUS. This will be a living document and updated to add new deployments. Release 2 Plan Update and Sign-Off – April 11, 2013 Release 1.1 Phase 3 Plan Update and Sign-Off – TBD. Ministry to finalize by April 11, 2013. Done May 15 – This should be updated with the updated Activity Matrix for Release 2

Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2
Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"
Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.

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Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing
Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. Approved.
Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress
Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.
Approved	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 6 – Approved and Signed Off
Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 21 – MAXIMUS amended CR2012-008 to revise scope to reflect Ministry Decision not to conformance test MedAccess and to use remaining time in CR for TELUS support and walkthrough of Test Cases. Mar 22 - Submitted to MOH. Due Mar 26, 2013.
On HOLD	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27 Mar 28 – Ministry requested CR be updated to include FY 13/14 scope only. MAXIMUS updated CR and resubmitted April 2, 2013 with due date of April 5, 2013 May 23 – Ministry Decision to put this CR on hold and bill all time to CR2013-003 Conformance Testing ARI

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Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.
Approved	Health Sector Firewall Decision	Due April 19, 2013 – IF Yes, this will delay R2 Go Live and MAXIMUS to assess impacts and draft CR. Apr 11 – Decision made to proceed with Health Sector Firewall.
Approved	Move from 4000 Seymour to Kamloops will result in additional scope of testing	Due April 12, 2013 – IF Yes, MAXIMUS will assess added scope and add to CR for Health Sector Firewall.
On HOLD	CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess	Apr 11 – MAXIMUS is drafting CR Apr 16 – Submitted to Ministry for Review and Approval May 23, 2013 – Ministry Decision to put this CR on hold and bill all time to CR2013-003 Conformance Testing ARI.
Approved	CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – MAXIMUS have drafted CR and in internal reviews. Submitted Apr 26, 2013
On Hold	CR2013-009 PMP Release 3.0 High Level Requirements	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit Apr 26, 2013 CR submitted and approved. May – approved. May 23, 2013 – Ministry have requested this be put on hold. MAXIMUS to complete Project charter and close out before placing on hold.

Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 – Pharmacy Production Deployment (Gibsons)	Done	Mar 30-31, 2013
Milestone	Phase 3 – EMR Production Deployment - TBD	Pending	TBD
Milestone	Conformance Test Case Updates	In Progress, Done for Vendor Testing	
	Release 2		
Milestone	Test Case Development Complete	Done	Mar 31, 2013
Milestone	Business Acceptance Test Case Development Complete	Done	
Milestone	Test Case Execution Complete	In Progress	
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

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Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25 , 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	Jan 6, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization.
	Conformance Test Case Updates based on Conformance Specification v____ - EMR	MAXIMUS	Mar 4, 2013	10%	G	In Progress
	Conformance Test Case Updates based on Conformance Specification v - Pharmacy	MAXIMUS	Apr 8, 2013	10%	G	In Progress
	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	G	In Progress
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		100%	G	Done
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done
	Phase 1 Go Live	MOH	~~Oct 22, 2012~~ Nov 14, 2012	100%	G	Done
	Phase 2 Go Live	MOH	Mar 31, 2013	100%	G	Done
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012. Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done. Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Apr 12, 2013	75%	G	In Progress. This is being delivered in groups.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done. Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done. Approved Dec 28, 2012. Signed Off.
M	Ministry STRA Report Signed	BMO	Jan 31, 2013	75%	Y	May 23 – Ministry Sign-Off is still outstanding. This is required for Go No Go Decision and has been requested by the auditors.
M	R2 - Test Case Development • Admin Portal – 100% • Non-functional – 100% • Batch Interface Reports – 100% • Functional Regression –100% o Screens – 100% o Server / Transactions – 100% • CPRS –100% • Data Migration – 10% • CAS – 100% • BAT – 100% • HIAL – N/A • EMPI – N/A	MAXIMUS	Apr 15, 2013	100%	G	Done
M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done. Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	Apr 12, 2012	75%	Y	In Progress. Batches are delivered in stages starting in Sep.
D	Updated Training Plan – R2	MAXIMUS	Sep , 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete • Admin Portal – 94%	MAXIMUS	May , 2012	75%	G	In Progress

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	• Non-functional – 50%
	• Batch Interface Reports – 94%
	• Functional Regression – 98%
	  o Screens – 100%
	  o Server / Transactions – 100% - pending defect fix
	  o Business Config – 0%
	• CPRS – 70%
	• Data Migration – 50%
	• CAS – 50%
	• BAT – 60%
	• HIAL – N/A – Performance only
	• EMPI – N/A – connectivity test only					

M	BAT Test execution Complete PMP Screens – Done CPRS – Done HIBC Admin – Done Reports – In Progress	MAXIMUS	May , 2013	75%	G	In Progress
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
W	Deploy ALL to Production for Dry Run and Performance Testing	MAXIMUS	Feb 8, 2013	100%	G	Done
W	PROD Dry Run and Data Migration Test	MAXIMUS	Apr 5, 2013	100%	G	Done
D	Deployment Plan	MAXIMUS	May 31, 2013	50%	G	In Progress
M	Communication Activity Matrix	MOH	Apr 11, 2013	75%	G	Done. Needs updating
D	Communication Plan	MOH	Apr 11, 2013	100%	G	Done
W	MAXIMUS Go No Go Decision	MAXIMUS	Jun 6, 2013	0%	G	Pending
D	Updated Disaster Recovery Plan Document	MAXIMUS	May 31, 2012	50%	G	In Progress
M	Performance Testing Complete	MAXIMUS	May 29, 2013	25%	G	In Progress – Round 1 completes April 12, 2013
M	Disaster Recovery Testing Complete	MAXIMUS	Jun 13, 2013	0%	G	Pending
D	R2 Defect Action Plan	MAXIMUS	Jun 3 , 2013	0%	G	Pending
M	R2 Final Test Results Summary	MAXIMUS	Jun 3 , 2013	0%	G	Pending
D	Support of Ministry Risk and Controls Review for Rel 2	BMO	June 11, 2013	25%	G	In Progress
M	Ministry Risk and Controls Report Complete	MOH	June 15, 2013	10%	G	In Progress
M	Ministry Go/No Go decision R2 to deployment	MAXIMUS	June 17, 2013	0%	G	Pending
M	Production Environment Ready	MAXIMUS	June, 2013	25%	G	In Progress
M	Production Support Strategy and Plan	MAXIMUS	June 10 ,2013	25%	G	In Progress

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M	DR Environment Ready	MAXIMUS	June 13, 2013	10%	G	In Progress
M	R2 Deployment Complete	MAXIMUS	June 23, 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Sep 23, 2013	0%	G	Pending
	Release 3.0 High Level Requirements and Planning					
M	Project Plan	MAXIMUS	May 15, 2013	100%	G	Done
D	Project Charter	MAXIMUS	May 31, 2013	25%	G	In Progress. To be completed prior to R3 being put on HOLD
M	High Level Requirements – Draft for Ministry Review	MAXIMUS	May 24, 2013	50%	G	In Progress. Scheduled workshops and delivered discussion materials. Workshops cancelled as Ministry have requested this be put on Hold.
D	High Level Requirements (Approved)	MAXIMUS	Jun 30, 2013	0%	G	Pending
D	Detailed Estimate	MAXIMUS	Jun 17, 2013	0%	G	Pending

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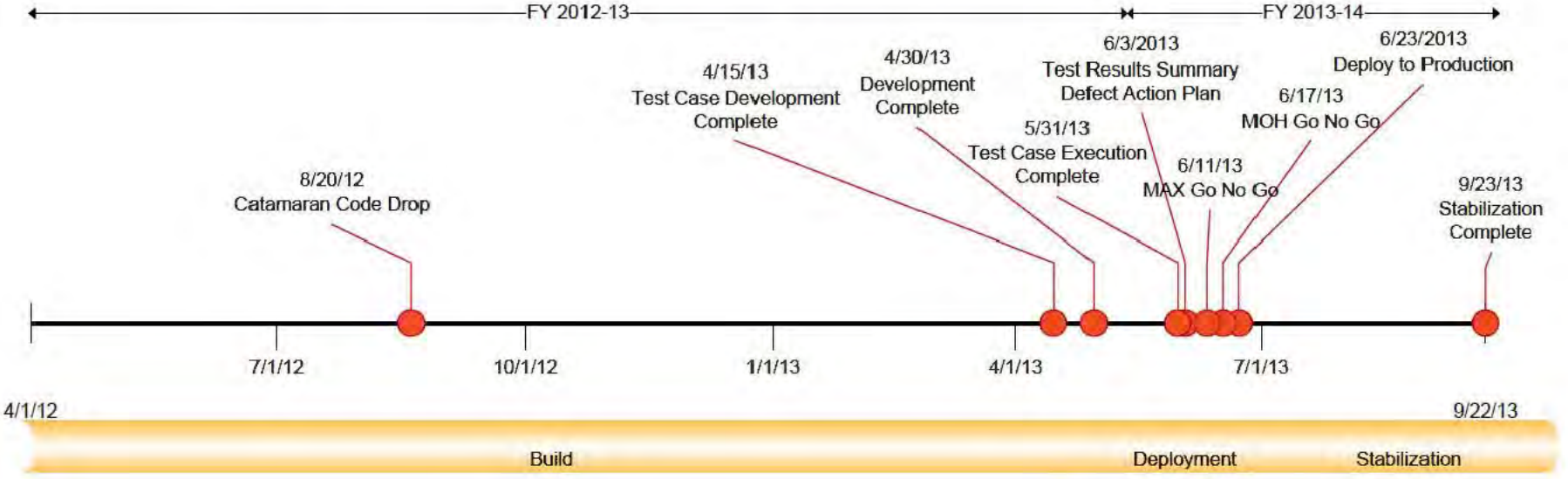
1. PharmaNet Modernization: Footprint will require updating to reflect proposed delayed Go Live to July 6/7

Release 2 Footprint & Milestone Targets



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PharmaNet Modernization Progress Report (JPMT)

MAXIMUS CANADA
A MAXIMUS Company

Project Manager(s):	PharmaCare Program: Gloria Wills PharmaNet Modernization: Enola McClean	Reporting Period	From YYYY-Mon-DD	To YYYY-Mon-DD
			2013-May-25	2013-Jun-07
Project Purpose:	The proposed purpose of the PharmaNet project is to enhance the current PharmaNet system with a Medication Management Framework, ePrescribing capability, HIAL Integration and an infrastructure upgrade to be deployed in two releases: **Release 1:** will upgrade the current software to include the ePrescribing, Medication Management Framework and HIAL Integration upgrade. **Release 2:** will purchase and implement upgraded hardware and software to meet the increase in system capacity requirements resulting from the rollout of Release 1			

		Status G Y R
Scope	PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project. PharmaNet Modenization Scope needs to be frozen. Anything that adds to scope will impact project timelines	G
	Release 1.0 PharmaNet Go Live	Complete
	Release 1.1 Early Adopter Deployment (increased scope in Conformance)	Y
	Release 2.0 Infrastructure – Added Scope of Health Sector Firewall and additional Testing of Move from Seymour to Kamloopsl.	Y
	Release 3.0 High Levl Requirements and Planning – On Hold	R
Quality	Adhering to MAXIMUS methodology	G
Schedule	Release 1.0 PharmaNet Go Live - January 26, 2012	Complete
	Release 1.1 Early Adopter Deployment Phase 1 – EMR Vendor Production Pilot - Nov 13 – 27, 2012 - completed Phase 2 – Pharmacy Production Deployment (Gibsons) - Mar 30-31 completed Phase 3 – EMR Production Deployment - TBD	G
	Release 2.0 PharmaNet Infrastructure Upgrade Go Live – Delayed to July 6/7 Catamaran Server Code Drop planned for July 12, 2012 - overdue - replanned for Aug 14 +/- 7 days – delivered Aug 20, 2012 MAXIMUS re-plan assesed options to compress schedule / mitigate delay to achieve GO LIVE by March 28, 2013. Any changes will impact project timelines. ARI Conformance Testing added to Project Scope. Schedule is at risk due to tight itmelines. Go Live deferred to May 16, 2013. Health Sector Firewall Decision wil Delay Go Live to June 19, 2013. Ministry Decision to Go Live on Sat/Sun moves Go Live to June 22/23. May 23 – Mnistry Decision to delay Go Live to July 6/7 due to ability to communicate to External Stakeholders on extended Pharmanet change window and the Network Move Project in flight.	Y
	Release 3.0 – High Level Requirments and Planning – June 30, 2013 – On Hold	R
Budget	MAXIMUS have provided project plan estimates for 2012/13. Project delivery is under fixed price with any scope increases held outside the fixed price on a time and materials basis (eg: CR2013-003) and Fixed Price CR2013-001 Current budget does not include any contingency. ** Any Scope increases will result in budget impacts as budget has no contingency. Service Order for 2013/14 is not yet finalized.	Y
Summary Of Progress on PharmaNet Modernization Project		
Release 1: Completed		Complete
Release 1.1 Delivered since the last report • CR2012-017 Conformance Test Execution Amended – Approved and Signed Off		G

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• CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only - Review and Approval • CR2013-003 Conformance Testing ARI – Approved for FY13/14 • CR2013-003 Conformance Testing ARI Amended – Review and Approval • CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs - Review and Approval • CR2013-002 Conformance Testing TELUS – Updated to FY 13/14 Only – Put on Hold • CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs – Put on Hold	
Release 2.0 Delivered since the last report • Service Order for 2013/14 – Review and Approval • Data Migration Alternate Option Information Paper • Data Migration Briefing Note • Draft Release 2 Deployment Plan • Draft Deployment Change Window Activities • Draft Deployment Day Contact List • PMP R2 Go Live Impact Issue Paper • PMP Go Live Delay Impact Assessment • CR2013-008 PMP Health Sector Firewall and Network Move – Review and Approval • CR2013-008 PMP Health Sector Firewall and Network Move – Approved and Signed Off • CR2013-009 PMP Release 3.0 High Level Requirements – Review and Approval • CR2013-009 PMP Release 3.0 High Level Requirements – Approved and Signed Off • CR2013-009 PMP Release 3.0 High Level Requirements – Put on Hold	G
2. Outstanding Issues and Actions.	Y

Key Open Project Issues

Status (G / Y / R)	Priority	Detailed Description	Business Impact	Proposed Resolution
R		Ministry Network Move Project outstanding decision on if encryption is required by the College of Pharmacies, could delay PharmaNet Release 2 Go Live. Decision was due May 24, 2013. Is there a requirement for encryption for the College of Pharmacies, who currently use encrypted routers	If Decision is yes, there is a cost to the college. If Decision is now yes, this cannot be implemented in time for Release 2.0 Go Live. This will push out PharmaNet Release 2.0 Go Live.	MAXIMUS Raised Issue paper on this on May 17, 2013 and delivered to Ministry identifying this decision must be made by Friday May 24, 2013 May 24 - Sorin to follow up with College on if encryption is required June 6 – Ministry decision still outstanding.
R		Ministry Network Move Project End to End testing is at risk of not completing in time due to the following. This could push out PharmaNet Release 2 Go Live. 1. Ministry to identify list of Pharmacies for End to End	Potential delays in Ministry Network Move End to End Testing could result in delays to Release 2 Go Live. June 6 – End to End testing arrangements not yet made. 1. Pharmacies not yet identified. 2. Pharmacies not yet setup	MAXIMUS Raised Issue paper on this on May 17, 2013 and delivered to Ministry identifying that if end to end testing was to take place it would need to be planned with the POS to ensure it could be completed in time. Due date for confirming this was Friday May 24, 2013 Jun 6 – End to end testing arrangements pending.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
		testing by June 6 – overdue 2. Setup for Pharmacies for end to end testing may not be completed in time as pharmacies have not yet been identified. 3. Someone from Ministry must take ownership and lead and coordinate End to End Testing.	3. No one from Ministry is leading this.	
Y	High	Release 2: Ministry Pharmacy Network Move from 4000 Seymour to Kamloops must complete in time for Release 2.0 Go Live Mnistry Decision to delay Go Live to July 6/7 due to ability to communicate to External Stakeholders on extended Pharmanet change window and the Network Move Project in flight MAXIMUS to prepare impact assessment of delaying Release 2.0 Go Live to July 6/7	If Ministry Network Move is not completed in time it will delay PharmaNet Release 2 Go Live planned for Sun July 7, 2013.	Ministry Network Move Project meetings taking palce to align with PharmaNet Modernization Project. **June 6 – 1. Ministry to identify list of Pharmacies for End to End testing by June 6 – overdue 2. Setup for Pharmacies for end to end testing may not be completed in time as pharmacies have not yet been identified. 3. Someone from Ministry must take ownership and lead and coordinate End to End Testing.
Y		Additional Scope of End to End Testing added to Ministry Network Move Project will add scope to PharmaNet Modernization Project. Ministry Decision to proceed with End to End Testing on June 13.	*** Additional scope of End to End Testing and Impact of delays to Go Live as a result of Network Move Delays will need to be added to the CR2013-008 and approved	MAXIMUS to update CR2013-008 to reflect this and support Ministry in their leading end to end testing.
Y		Ministry Communication Plan and Activity Matrix must be updated and communicated to Stakeholders to include delayed Go Live Date of July 7, change window July 6/7 and availability during the change window.	Communication to Stakeholders	Ministry to update Communication Plan and Activity Matrix and communicated to Stakeholders to include delayed Go Live Date of July 7, change window July 6/7 and availability during the change window.
Y		Deloitte is working to assess whether there is any financial risks associated with the Operational Data Replication for the Release 2.0 of PharmaNet as it relates to the payment process. Outstanding decisions remain on these that could impact Release 2 Go Live.	Delays or impact to Release 2 Go Live depending on results of financial risk assessment.	Results of financial risk assessment to be communicated. Any potential impacts to release 2 Go Live need to be raised now so they can be addressed in time for Go Live.

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Status G Y R	Priority	Detailed Description	Business Impact	Proposed Resolution
Y		Impact of delay of Release 2 Go Live to July 6/7. May 23 – Ministry Decision to delay Go Live to July 6/7 due to ability to communicate to External Stakeholders on extended Pharmanet change window and the Network Move Project in flight. MAXIMUS to assess impacts	MAXIMUS Assessing Impact. Communication to stakeholders	Ministry Decision Go Live delayed to July 6/7 MAXIMUS Impact Assessment prepared and send to Ministry on May 31, 2013 MAXIMUS and Ministry following up with external stakeholders.
Y	Medium	Project PharmaNet Modernization Scope cannot keep increasing if we are to meet project timelines. Ministry is changing and increasing scope, both from within and outside PharmaNet Modernization Project	Increased Scope will impact project timelines	PharmaNet Modernization Scope needs to be frozen. Anything that adds to scope will impact project timelines.
Y		Conformance Specifications further delayed. Version to be published Jan 4, 2013, delayed to Feb 2013, then April 2013, then May 15, 2013. Wiating for Minstry to release this version. Final version for General deployment to be produced later. Several rule clarifications / interpretations still exist and some rules were aligned to MedAccess that may be inacurate, causing negative impact to future vendors.	Inadequate Specifications could result in 1. Delays in Conformance Test Case Development and Execution. 2. Incorrect or incomplete Vendor Development, 3. Additional Rounds of Conformance Testing. 4. Incorect or incomplete test cases.	Ministry to finalize Conformance Specifications. These were due Jan 4, 2013. Now delayed to May 15, 2013 and overdue. Draft Conformance Specifications provided are insufficient to support Test Case Development and Vendor Development. Ministry to provide upated Conformance Specs to MAXIMUS by May 15, 2013 – overdue. May 23, 2013 Ministry have put CR2013-007 Conformance Testing MedAccess and Updates from Conformance Specs on Hold. ** Conformance Specs must be finalized to a version that can be used for Test Case Development and Vendor Development. Specifications will be finalized before General Deployment.

Key Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
NEW	High	Deloitte is working to assess whether there is any financial risks associated with the Operational	Potential impact or delay to Release 2 Go Live	Results of financial risk assessment to be communicated. Any potential impacts to release 2	HIGH	High	Scope, Schedule, Budget

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ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
		Data Replication for the Release 2.0 of PharmaNet as it relates to the payment process. Outstanding decisions remain on these that could impact Release 2 Go Live.		Go Live need to be raised now so they can be addressed in time for Go Live.			
NEW	High	Ministry Network Move may not complete in time for Release 2.0 Go Live If Network Move Project cannot complete in time it will push out Release 2.0 Go Live Date. On May 23, 2013 Ministry advised that that Release 2.0 Go Live will be pushed out to July 6/7 due to Network Move and Stakeholder Communication. MAXIMUS assessing impacts. Ministry Decisions outstanding: 1. Is Encryption required – Ministry to follow up with Colleges. 2. Is End to End Testing to be added to scope? If so additional effort is required that needs to be planned for and CR2013-008 to be updated and reapproved to reflect this.	Added scope and delays to Release 2 Go Live Release 2 Go Live	MAXIMUS to assess impact and provide to Ministry.	HIGH	High	Scope, Schedule, Budget

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Waiting for Action

Description	Date Delivered	Action Required	Action Due Date	Status	Comment
Ministry Network Move Project outstanding decision on if encryption is required by the College of Pharmacies, could delay PharmaNet Release 2 Go Live. Decision was due May 24, 2013.	May 17, 2013	Ministry Decision	May 24, 2013	Overdue	Waiting for Ministry Decision. If encryption is required, this will delay Network Move Project and therefore delay PharmaNet Release 2 Go Live.
Ministry Network Move Project End to End testing is at risk of not completing in time on June 13 due to the following. This could push out PharmaNet Release 2 Go Live. 1. Pharmacies not yet identified. 2. Pharmacies not yet setup 3. No one from Ministry is leading this.	May 17, 2013	Ministry Decision and Setup	Jun 6, 2013	Overdue	1. Ministry to determine list of Pharmacies. 2. Ministry to request setup for Pharmacy testing. 3. Ministry to assign someone to lead this.
Deloitte is working to assess whether there is any financial risks associated with the Operational Data Replication for the Release 2.0 of PharmaNet as it relates to the payment process. Outstanding decisions remain on these that could impact Release 2 Go Live.	May 2013	Completion of Financial Risk Assessment and Communication of Results	May 31, 2013	Pending	Any potential impacts to Release 2 Go Live as a result of this risk assessment must be communicated and addressed so as not to impact Release 2 Go Live
Remove Invalid Patient Dispense Records created by Dr. Bannerman during MedAccess Production Test in Summerland.	Feb 22, 2013	Ministry to arrange removal of records the same way they were created	Feb 22, 2013	Overdue	On Feb 22, 2013 invalid Patient Dispense Records were created by Dr. Bannerman during the MedAccess Production Test. Ministry to arrange removal of the records the same way they were created. ** These should have been removed on Feb 22, 2013, when the data was created. Mar 26 – follow up email sent as this is still outstanding. Apr 15 – Rob to follow up. Enola to resend Sorin a copy of the email sent on Mar 26 - done. April 25 – with Ministry.
Service Order for Fiscal Year 2013/14	~~Mar 28, 2013~~ Apr 25, 2013	~~Ministry to Draft, Finalize, Approve and Sign-off~~ MAXIMUS to Finalize and Send to Ministry for Approval	~~Apr 2, 2013~~ April 26, 2013	In Progress Overdue	Service Order needs to be created for FY 2013/14 activities above the Fixed Price from last Fiscal Year. Ministry to draft before April 2, as this is required for work to continue on Apr 2, 2013.

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Apr 2 – Ministry to draft SO, review and approve with MAXIMUS and Ministry contracts, finalize and Sign-Off. Apr 15 – must assess work that must be done this FY then SO will be created. Meeting today to look at this. Apr 25 – Service Order Template received from MOH and MAXIMUS. MAXIMUS have updated and in internal reviews. MAXIMUS to submit once internally reviewed. May 9 – Waiting for Ministry approval. May 24 – Ministry to update SO for FY 13/14 to remove CR2013-002 TELUS Conformance and CR2013-007 Med Access and Updates from Conformance Specifications as these are being put on Hold. An SR may be issued for billing to date of cancelled conformance CRs or they may be billed to CR2013-003 ARI Conformance – pending Ministry Decision. R3 SO – To be put on hold
CR2013-002 PMP Conformance Testing TELUS	Apr 2, 2013	Ministry Approval	Apr 5, 2013	Overdue On HOLD	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 17. Feb 18 - meeting held to finalize CR, but Ministry asked to delay by 1 week to Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 28 – Ministry requested CR be updated and resubmitted to include FY 13/14 only. MAXIMUS updated CR and resubmitted for FY 13/14 only on April 2, 2013 with due date of April 5, 2013. Apr 25 – waiting for Ministry approval. May 10 – approved, but Ministry requested Date changes. May 23 – Ministry have put this CR on HOLD and requested if MAXIMUS adjust past billings to move to CR2013-003

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Conformance Testing ARI Pending Ministry decision
CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess and Test Case Updates	Apr 16, 2013	Ministry Approval	Apr 23, 2013	Overdue On HOLD	Apr 11 – MAXIMUS is drafting CR Apr 16 – CR submitted to Ministry for Approval. Apr 25 – overdue. Waiting for Ministry approval May 23 – Ministry have put this CR on HOLD and requested if MAXIMUS adjust past billings to move to CR2013-003 Conformance Testing ARI . Pending Ministry decision
CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11, 2013 May 29, 2013	Ministry Approval MAXIMUS to amend CR to include impact of Delay to Go Live to July 6/7	April 26, 2013 Jun 2, 2013	Approved MAXIMUS to update	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – CR drafted and in MAXIMUS internal review. Once reviewed, MAXIMUS will submit to Ministry for Approval. May – CR Approved and Signed Off. May 24 – CR will need to be amended to include new scope of End to End Testing and decision to delay go live to July 6/7. MAXIMUS to update and submit to Ministry.
CR2013-009 PMP Release 3.0 High Level Requirements	April 15, 2013	MAXIMUS to Submit	April 26, 2013	Approved and Signed Off. Request to put on HOLD	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit to Ministry on April 26, 2013 May 9 – CR submitted, reviewed, approved and signed. May 23 – Ministry have requested this be put on HOLD. After MAXIMUS complete Project Charter and close out requirements.
Move from 4000 Seymour to Kamloops will result in additional scope of testing	Mar 2013	Ministry Decision	April 12, 2013	April 11, 2013 Decision Made to Proceed with added scope	Move from 4000 Seymour to Kamloops will result in additional scope and delays 1. Operational Process Changes for how we onboard Pharmacy Vendor. Ministry, SSBC and HP must work out process first then MAXIMUS will need to adjust to these. 2. Network Solution for moving the

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					PharmaNet IP addresses from 4000 Seymour to Kamloops. This is currently underway and must be tested before Go Live as it will be implemented during the Change Window Prior to Go Live. Ministry/SSBC are requesting that MAXIMUS test these changes. However these are Ministry changes to the Ministry network that should be tested by the Ministry and are not in scope of PharmaNet Modernization Project. Apr 11 – Decision Made to proceed with added scope. MAXIMUS to assess and include in CR for Health Sector Firewall.
Release 2.0 Communication Activity Matrix	Jan 29, 2013	Ministry to Finalize	Apr 11, 2013	Update to reflect revised Go Live	Ministry to develop Communication Activity Matrix for Release 2.0 Communication Working Group formed to develop this. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013 Mar 28 – Drafted and updated. Needs finalization and approval. MOH to finalize by April 11, 2013. Done May 9 – This needs to be updated to reflect the revised Go Live date, change window and communicated to stakeholders. This should be re-reviewed once updated. Jun 6 – Updated Matrix in reviews.
Ministry Communication Plan	Apr 2, 2013	Ministry to Finalize	Apr 11, 2013	Done	Communication Working Group formed to develop the Communication Plan for Release 2.0. This will be very similar to what was done for Release 1.1 MAXIMUS reminder requesting status sent to MOH on Jan 29, 2013. This will be done following the Communication Activity Matrix. Howard to provide a draft to CWG by Mar 8

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Description	Date Delivered	Action Required	Action Due Date	Status	Comment
					Mar 19 – Draft Communication Plan provided to MAXIMUS. This will be a living document and updated to add new deployments. Release 2 Plan Update and Sign-Off – April 11, 2013 Release 1.1 Phase 3 Plan Update and Sign-Off – TBD. Ministry to finalize by April 11, 2013. Done May 15 – This should be updated with the updated Activity Matrix for Release 2

Key Decisions

Status (Approved / Pending)	Decision Description	Implications (Project, Business, Contract, etc.)
Approved	CR 2011-028 Rel 2 Requirements for Record Locking	Potential impacts to Release 2
Cancelled	DR 2012-004 PharmaNet Modernization Payment Synchronization	Ministry Decision to proceed with "As Is"
Cancelled	CR2012-004 PNet Modernization - MMF Service Claims Gap	Will be done after Release 2.0
Approved	DR 2012-007 PharmaNet - EMPI Invalid Province Handling Options – for Review and Acceptance	EMPI Invalid Province Data passed to PharmaNet
Cancelled	Early Adopter Deployment – Stabilization Criteria and Plan	MOH Decision: No formal "Stabilization Criteria and Plan" document is required. We will keep the stabilization period open from EA Go/Live until General Deployment. Any PharmaNet issues identified during this period will be managed through the change management process on the project.
Approved	CR2011-019 Release 2.0 CATAMARAN Hardware Upgrade Amended 2	This adds the 1 cent assignment clause
Approved	CR2012-008 Conformance Test Case Remediation and Execution	Additional scope required to complete Conformance Testing
Approved	DR 2012-011 PMP Printed Patient Profile Report	Add archival process to include archived data in report.
Approved	CR 2012-013 PMP Printed Patient Profile Report	Required for Release 2.0 Go Live. MOH put on hold and will assess with Re-Plan
Approved	CR 2012-014 Purchase TDCommpress for MOH	Required for Release 2.0 Go Live.
Approved	CR 2012-017 Conformance Test Case Updates	Must be approved by Nov 21 as Ministry have asked MAXIMUS to start work on this without the CR being approved or signed.
Approved	CR 2012-019 Practitioner Profile Adhoc and Pharmacy ID Fix	Must be approved by Nov 23 to be included in the scope of Release 2
Approved	CR 2013-001 PMP RX Dose Filed Fix	Required for Release 2.0. Must be approved by due date. Approval was due Jan 14, 2013. Ministry requested MAXIMUS to start work on this at JEC on Dec 13, 2012. This was verbally approved at January 17, 2013 JEC. Approved.

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Approved	DR 2013-001 PharmaNet Annual Retroactive Reimbursement Process for 2012 Benefit Year	Feb 5 – MAXIMUS submitted for Ministry approval with due date of Feb 12, 2013 – overdue. Feb 14 – Ministry requested that DR be updated to show Option 1 during Stabilization. Feb 15 - MAXIMUS updated DR and submitted with due date of Feb 20, 2013. Feb 18 – Ministry approved. Sign-Off in Progress
Approved	CR2012-017 Conformance Test Case Updates – Increases to Scope	Feb 6 – Email sent to Ministry requesting decision on scope increase. Feb 13 – reminder email sent requesting decision. Feb 18 – Ministry responded with questions. MAXIIMUS to answers. Feb 18 – MAXIMUS responses being sent today. Feb 25 – Submitted for Approval and Sign-Off Feb 27 – Signed Off. This can now be closed.
Approved	CR2012-008 Conformance Test Case Remediation and Execution Amended	Feb 15 – MAXIMUS to amend CR2012-008 to revised scope and submit to Ministry for Review and Approval. Done. Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Mar 6 – Approved and Signed Off
Submitted	CR2012-008 Conformance Test Case Remediation and Execution Amended2	Mar 21 – MAXIMUS amended CR2012-008 to revise scope to reflect Ministry Decision not to conformance test MedAccess and to use remaining time in CR for TELUS support and walkthrough of Test Cases. Mar 22 - Submitted to MOH. Due Mar 26, 2013.
On HOLD	CR2013-002 PMP Conformance Testing TELUS	Feb 15 – MAXIMUS to create CR for TELUS Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Reviewed and updated. Submitted for Ministry Approval. Due Feb 27 Mar 28 – Ministry requested CR be updated to include FY 13/14 scope only. MAXIMUS updated CR and resubmitted April 2, 2013 with due date of April 5, 2013 May 23 – Ministry Decision to put this CR on hold. Ministry to determine where time billed to this CR will be invoiced to. Waiting for Ministry decision
Approved	CR2013-003 PMP Conformance Testing ARI	Feb 15 – MAXIMUS to create CR for ARI Conformance Testing and submit to Ministry for Review and Approval. Done Feb 18 – MAXIMUS / Ministry to finalize at Meeting today. Ministry asked to defer finalization by 1 week to Mon Feb 25. Feb 25 – Approved and Signed Off by MAXIMUS. Feb 27 – Ministry signed by holding to confirm clause. MAXIMUS waiting for Signed copy. Mar 11 – Signed.
Approved	Health Sector Firewall Decision	Due April 19, 2013 – IF Yes, this will delay R2 Go Live and MAXIMUS to assess impacts and draft CR. Apr 11 – Decision made to proceed with Health Sector Firewall.
Approved	Move from 4000 Seymour to Kamloops will result in additional scope of testing	Due April 12, 2013 – IF Yes, MAXIMUS will assess added scope and add to CR for Health Sector Firewall.

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On HOLD	CR2013-007 Early Adopter Phase 2 Conformance Testing MedAccess	Apr 11 – MAXIMUS is drafting CR Apr 16 – Submitted to Ministry for Review and Approval May 23, 2013 – Ministry Decision to put this CR on hold. Ministry to determine where time billed to this CR will be invoiced to. Waiting for Ministry decision
Approved	CR2013-008 PMP Health Sector Firewall and Network Move	Apr 11 – Ministry Decision to proceed with Health Sector Firewall and added Scope of Network Move. MAXIMUS to assess impacts and draft CR. Apr 25 – MAXIMUS have drafted CR and in internal reviews. Submitted Apr 26, 2013
On Hold	CR2013-009 PMP Release 3.0 High Level Requirements	Apr 25 – MAXIMUS have drafted CR and in internal reviews. Plan to submit Apr 26, 2013 CR submitted and approved. May – approved. May 23, 2013 – Ministry have requested this be put on hold. MAXIMUS to complete Project charter and close out before placing on hold.

Upcoming Deliverables/Milestones:

Note: Milestone Dates are shown in grey as they mark completion, and are not for acceptance

Milestone or Deliverable	MAXIMUS Milestone or Deliverable Name	Status	Due Date for Acceptance
	Release 1.1 Early Adopter Deployment		
Milestone	Phase 2 – Pharmacy Production Deployment (Gibsons)	Done	Mar 30-31, 2013
Milestone	Phase 3 – EMR Production Deployment - TBD	Pending	TBD
Milestone	Conformance Test Case Updates	In Progress, Done for Vendor Testing	
	Release 2		
Milestone	Test Case Development Complete	Done	Mar 31, 2013
Milestone	Business Acceptance Test Case Development Complete	Done	
Milestone	Test Case Execution Complete	In Progress	
Milestone	Business Acceptance Test Case Execution Complete	In Progress	

Key Deliverables/Milestones:

Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Release 1.1 Early Adopter Deployment					
	Training Environment with PNET Code Ready	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for SOA Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
	Registration of MAX as POS and Certs	MAXIMUS	Apr 2012	100%	G	Done
	SOA Adapter Code in Training Env	MAXIMUS	Apr 2012	100%	G	Done
	Training Environment for EMPI Adapter Ready	MAXIMUS	Apr 2012	100%	G	Done
	EMPI Adapter Code in Training	MAXIMUS	Apr 2012	100%	G	Done
	Communications Plan	MAXIMUS	May 25 , 2012	100%	G	Done. Signed off June 14, 2012.
	PoS Conformance Test Case Development	MAXIMUS	May 14, 2012	100%	G	Done
	Conformance Specifications Final Version	MOH	~~Jan 6, 2013~~ May 15, 2013	75%	Y	In Progress. Draft Conformance Specifications released Jan 6. Feb 15 – Conformance Specifications updates in progress nearing finalization. Apr – Conformance Specs delayed to May 15. May 29 – Conformance Specifications overdue.
	Conformance Test Case Updates based on Conformance Specification v____ - EMR	MAXIMUS	~~Mar 4, 2013~~	10%	Y	Conformance Test Cases were updated, but cannot be finalized until Conformance Specs are finalized and delivered. May 23 – Ministry decision to put Conformance CRs on Hold except ARI.
	Conformance Test Case Updates based on Conformance Specification v_____ - Pharmacy	MAXIMUS	~~Apr 8, 2013~~	10%	Y	Conformance Test Cases were updated, but cannot be finalized until Conformance Specs are finalized and delivered. May 23 – Ministry decision to put Conformance CRs on Hold except ARI.
	PoS Conformance Test Execution	MAXIMUS	~~Sep 24, 2012~~ Oct 2012	50%	Y	May 23 – Ministry have put Conformance CRs for MedAccess and TELUS on hold.
	Training Materials	MAXIMUS		100%	G	Done
	Training	MAXIMUS		100%	G	Done
	Production Support Strategy and Plan (update for R 1.1)	MAXIMUS	Jul 25, 2012	100%	G	Done
	Phase 1 Go Live	MOH	~~Oct 22, 2012~~	100%	G	Done

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
			Nov 14, 2012			
	Phase 2 Go Live	MOH	Mar 31, 2013	100%	G	Done
	Phase 3 Go Live	MOH	TBD			
	Release 2					
D	Solution Architecture R2	MAXIMUS	Mar 31, 2012	100%	G	Done. Approved Mar 21, 2012. Signed off Aug 24, 2012
D	Data Migration Strategy and Plan	MAXIMUS	May 2, 2012	100%	G	Done. Approved. Signed off Jun 12, 2012
D	R2 Test Plan	MAXIMUS	May 9, 2012	100%	G	Done. Approved May 3. Signed off May 15, 2012
D	R2 PIA	MAXIMUS	Aug 28, 2012	100%	G	Done. Approved and Signed Off
M	Develop Batch Interfaces	MAXIMUS	Apr 12, 2013	75%	G	In Progress. This is being delivered in groups.
D	Business Continuity Assessment and Plan	MAXIMUS	Mar 4, 2013	100%	G	Done. Dec 5, 2012
D	R2 iSMART	MAXIMUS	Dec 31, 2012	100%	G	Done. Approved Dec 28, 2012. Signed Off.
M	Ministry STRA Report Signed	BMO	Jan 31, 2013	75%	Y	May 23 – Ministry Sign-Off is still outstanding. This is required for Go No Go Decision and has been requested by the auditors.

M	R2 - Test Case Development
	• Admin Portal – 100%
	• Non-functional – 100%
	• Batch Interface Reports – 100%
	• Functional Regression –100%
	  o Screens – 100%
	  o Server / Transactions – 100%
	• CPRS –100%
	• Data Migration – 100%
	• CAS – 100%
	• BAT – 100%
	• HIAL – N/A
	• EMPI – N/A
		MAXIMUS	Apr 15, 2013	100%	G	Done

M	Test Environment Ready (T1)	MAXIMUS	Jun 15, 2012	100%	G	Done
M	Test Data Loaded in Test Environment (T1)	MAXIMUS	Jul 2012	100%	G	Done
M	CATAMARAN Code Drop – Release 2 Screens	CATAMARAN	May 30, 2012	100%	G	Done

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M	CATAMARAN Code Drop – Release 2 Batch and Loads	CATAMARAN	Jun 14, 2012	100%	G	Done
M	CATAMARAN Code Drop – Servers	MAXIMUS	Jul 12, 2012	100%	G	Done. Delivered Aug 20, 2012
M	Deploy CATAMARAN Code Release 2 Screens to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Batch to Test	MAXIMUS	Sep 2012	100%	G	Done
M	Deploy CATAMARAN Code Release 2 Server to Test	MAXIMUS	Sep 2012	100%	G	Done. Sept 14, 2012
M	Deploy Batch Jobs and Reports to Test	MAXIMUS	May 31, 2012	75%	G	In Progress. Batches are delivered in stages starting in Sep. All have been delivered. Testing in progress.
D	Updated Training Plan – R2	MAXIMUS	Sep 2012	100%	G	Done Approved Sept 25, Signed Off
M	R2 - Test Case Execution Complete • Admin Portal – 94% • Non-functional – 98% • Batch Interface Reports – 98% • Functional Regression – 100% o Screens – 100% o Server / Transactions – 100% - pending defect fix o Business Config – 0% • CPRS – 98% • Data Migration – 100% • CAS – 100% • BAT – 95% • HIAL – N/A – Performance only • EMPI – N/A – connectivity test only • AHIP Joint Testing – May 31 - pending • Network Move Testing: Jun 3-14	MAXIMUS	Jun 14, 2013	75%	G	In Progress
M	BAT Test execution Complete PMP Screens – Done CPRS – Done HIBC Admin – Done Reports – 95%	MAXIMUS	May 31, 2013	75%	G	In Progress.
D	R2 Stabilization Criteria and Plan	MAXIMUS	Dec 3, 2012	100%	G	Done
W	Deploy ALL to Production for Dry Run and Performance Testing	MAXIMUS	Feb 8, 2013	100%	G	Done

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Deliverable or Milestone ID	Milestone or Deliverable Name	Owner (MAXIMUS / BMO / PSD / HSIMT / ORACLE	Scheduled Finish Date MON DD YYYY	Assessed Percent Complete	Status G Y R	Comments
W	PROD Dry Run and Data Migration Test	MAXIMUS	Apr 5, 2013	100%	G	Done
M	Performance Testing Complete	MAXIMUS	May 29, 2013	75%	G	In Progress. To complete May 29.
M	Communication Activity Matrix	MOH	May 31. 2013	75%	G	Done. Needs updating for revised Go Live Date
D	Communication Plan	MOH	May 31, 2013	100%	G	Done. Attached Updated Communication Activity Matrix and redistribute.
M	Production Environment Ready	MAXIMUS	June 10, 2013	50%	G	In Progress
D	Deployment Plan	MAXIMUS	Jun 14, 2013	75%	G	In Progress – MAXIMUS Internal reviews in progress.
D	R2 Defect Action Plan	MAXIMUS	Jun 18, 2013	25%	G	In Progress
M	R2 Final Test Results Summary	MAXIMUS	Jun 18, 2013	0%	G	Pending
M	Production Support Strategy and Plan	MAXIMUS	June 18 ,2013	25%	G	In Progress
W	MAXIMUS Go No Go Decision	MAXIMUS	Jun 20, 2013	0%	G	Pending
M	Disaster Recovery Testing Complete	MAXIMUS	Jun 21, 2013	25%	G	In Progress
D	Updated Disaster Recovery Plan Document	MAXIMUS	Jun 21, 2012	50%	G	In Progress
M	DR Environment Ready	MAXIMUS	June 21, 2013	25%	G	In Progress
M	Support of Ministry Risk and Controls Review for Rel 2	MAXIMUS	June 25, 2013	50%	G	In Progress
M	Ministry Risk and Controls Report Complete	MOH	June 25, 2013	50%	G	In Progress
M	Ministry Go/No Go decision R2 to deployment	MAXIMUS	June 26, 2013	0%	G	Pending
M	R2 Deployment Complete	MAXIMUS	July , 2013	0%	G	Pending
M	Stabilization R2 Complete	MAXIMUS	Oct 7, 2013	0%	G	Pending
	Release 3.0 High Level Requirements and Planning					
M	Project Plan	MAXIMUS	May 15, 2013	100%	G	Done
D	Project Charter	MAXIMUS	May 31, 2013	25%	Y	In Progress. To be completed prior to R3 being put on HOLD
M	High Level Requirements – Draft for Ministry Review	MAXIMUS	May 24, 2013	50%	R	In Progress. Scheduled workshops and delivered discussion materials. Workshops cancelled as Ministry have requested this be put on Hold.
D	High Level Requirements (Approved)	MAXIMUS	Jun 30, 2013	0%	R	On Hold
D	Detailed Estimate	MAXIMUS	Jun 17, 2013	0%	G	On Hold

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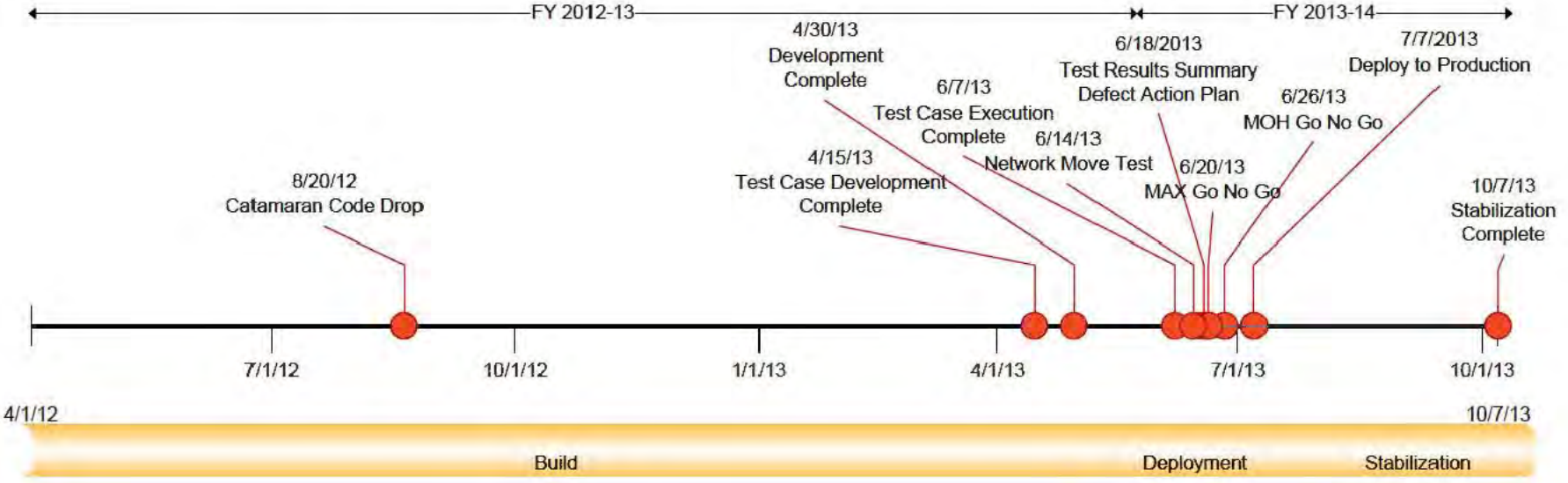
1. PharmaNet Modernization:

Release 2 Footprint & Milestone Targets



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Project Progress Report

MAXIMUS CANADA
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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Jan-13	2014-Feb-14
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Planning Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Planning – March 31, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – February 28, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu monthly payments			

	Comments	Status G	Y	R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • PharmaNet R4.0 requirements and estimate • Deloitte Audit Recommendations s.17 and those pertaining to		Y	

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	blood glucose testing strips) • Service Provider Enrolment Program roll-out • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities • Risk and Controls review • No new reports or report updates (one new screen instead – BGTS patient category lookup) Scope Concerns • Potential new requirement for Service Claims being investigated (exclusion of "over the counter" drugs and vitamins as qualifying for pharmacists totals for drugs towards a Medical Review) – if required, may impact Service Claims implementation date. No impact on schedule at this time since the requirement is being investigated separately from the project.	
Quality	Adhering to MAXIMUS methodology	**G**
Schedule	Planning (Design) Activities: o Functional Specifications in progress o Technical Specifications in progress o Test Strategy/Plan in progress o Training Strategy in progress o Re-estimate in progress Schedule Concerns: o None	**G**
Estimates	New Estimates: o CO 65, covering January 2014 to project end (September 2014), has been provided to MoH for review and approval	**G**

2 Action Items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	2014-01-31	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS							

s.17

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	2014-01-31	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	2014-02-14	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	Decision from MOH	TBD	Pending	MOH to discuss options with MAXIMUS

3 Project Issues/Risks/Decisions/Changes

3.1 Key/Active Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Estimate
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Estimate
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Estimate Schedule

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

			and/or delay implementation of the application enhancements				
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Estimate Schedule

3.2 Key Decisions

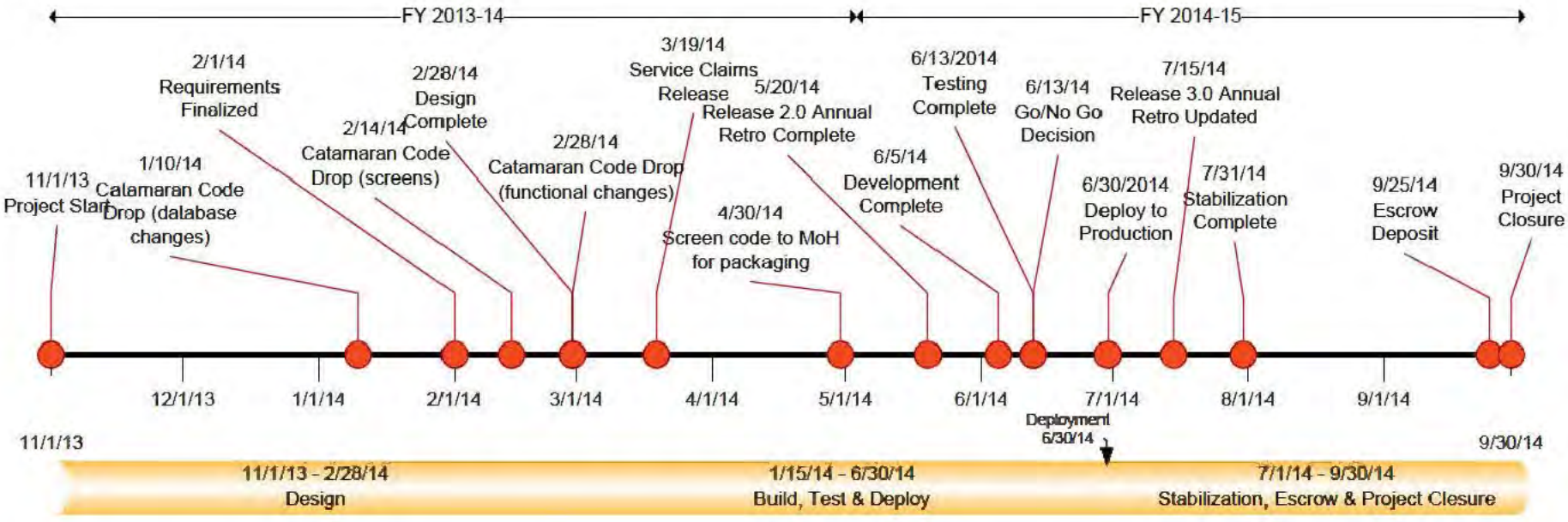
DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Submitted	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Submitted	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

4 Project Footprint

Release 3 Footprint & Milestone Targets

Revised Date: Feb 12, 2014



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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Mar-24	2014-Apr-18
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Development Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Development – June 25, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Screen code to MoH – May 1, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed March 26) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients	G

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	• Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips) • Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • none
Quality	Adhering to MAXIMUS methodology **G**
Schedule	Planning (Design) Activities: o Non-Functional Requirements – approved and signed by MoH o BCP – approved and signed by MoH o PIA – walkthru held April 4, MAXIMUS has responded to MoH feedback, waiting for MoH approval to proceed with gathering signatures o Impact Assessment – complete, gathering signatures o Functional Specifications – in progress o Technical Specifications – in progress o Test Strategy/Plan – in progress o Training Plan – submitted for review/feedback, walkthru held April 11, being updated with MoH feedback o Business Configuration settings – MoH to review and approve o Functional testing – in progress o DRP – with MoH for review and feedback, walkthru scheduled for April 23 Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19). This has impacted the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o Screen code BAT will not be completed by the end of April and this is required to give SSBC 8 week's lead-time ahead of **Y**

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	go-live for packaging. MAXIMUS will package the code and deliver to MoH on May 1. MoH will coordinate participation in BAT for May 5/6 - successful BAT will allow package to be shipped to Shared Services May 7. MoH will conduct connectivity testing while BAT in progress.	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. o The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. The remainder will be carried over to April 2014.	**G**

1.1 Ministry of Health Communications Status

	Comments	**Status** G Y R
Scope	The following activities will be undertaken within the scope of Communications: • Develop a communications plan containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	**G**
Schedule	Communications Plan – final, signed off deliverable due May 16th • First Draft of stakeholder engagement matrix completed • Team review planned for April 17 • Activities Matrix in progress Execute Communications Plan – TBD as per Communications Activities Matrix • not started Schedule Concerns: • none	**G**

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Action Items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MAXIMUS	2014-02-28	Signoff	2014-04-01	Closed	Document has been signed off by MoH
MAXIMUS	Change Order #65	MOH	2014-03-13	None	N/A	Closed	MAXIMUS delivered final version to MoH March 13, 2014. MoH has provided final approval and the CO has been signed off by MAXIMUS and MoH.
MAXIMUS	PharmaNet R3 Business Continuity Assessment and Plan (BCP)	MoH	2014-03-24	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Privacy Impact Assessment (PIA)	MoH	2014-03-27	Approval to proceed with signatures	2014-04-25	Pending	MAXIMUS has responded to feedback provided by MoH. Deliverable acceptance required to proceed with gathering signatures.
MAXIMUS	PharmaNet R3 Training Plan	MoH	2014-04-03	Update with feedback	2014-04-30	Pending	Walkthru held April 11, MoH has provided feedback, MAXIMUS to update plan
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MoH	2014-04-15	Review and Approval	2014-04-30	Pending	MoH to review and approve the document which will be used to setup business configuration for Release 3 Go Live
MAXIMUS	PharmaNet – Release 3 Disaster Recovery Assessment and Plan	MoH	2014-04-14	Review and Feedback	2014-04-23	Pending	Walkthrough scheduled for Apr. 23

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

	Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
Y	553643	H	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19 2014.	MAXIMUS has not been able to proceed with testing of the transaction code as per the project plan.	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has also worked additional weekday hours and weekends. The code was delivered March 19 and MAXIMUS has loaded it to the test environment and is actively testing it.	2014-MAR-19

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium term.	H	H	Budget, Schedule
553654	M	Testing of the screens has been delayed from the original plan and delivery of packaged code to MoH 8 weeks prior to go-live is going to be difficult to achieve	Shared Services has requested an 8 week lead time for packaging. If the screen code package cannot be delivered by the end of April the 8 week lead time will not be met and Shared Services may not be able to package the code in time for Go-live.	MAXIMUS is focusing effort on testing of the screen code in April but there is a dependency on MoH participants in the BAT. Coordination of participants has begun and MoH needs to ensure that participants are available. MoH will accept function tested screen code on May 1 and proceed with connectivity testing. Screen code will be shipped to SSBC May 7 if BAT on May5/6 is successful.	M	M	Schedule
553658	M	MoH is having a Risk and Controls review of PharmaNet Release 3.0 and in order for the project to be approved for Go-live, the MoH executive must approve the Risk and	MoH does not want the Go-live date to move because of cost savings that will be lost due to delay. MAXIMUS does not want to move the Go-live date to move because of proximity to the	The Go-live decision presentation date could be moved to a few days later if the Risk and Controls report has not been approved by the MoH executive by June 13. MAXIMUS will know if there are any issues	H	M	Schedule

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		Controls report, and the report must be accepted by the Comptroller General's office. The report is due around June 12 2014 and the Go-live decision is currently planned for June 13. Approval for deployment in the June 25 change window should occur at the June 18 Change Management meeting. These dates are very tight so any slippage could jeopardize the Go-live date.	testing/deployments for the Medigent (RAPID) project and competition for the same infrastructure resources.	with going live June 25 earlier than June 13 so the presentation is a formality. MoH will work with Deloitte to get the Risk and Controls review done as quickly as possible. MAXIMUS will respond to any requests from Deloitte in a timely fashion.			

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Submitted	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is 80.0 and this equates to $11,440. CO 65 has been updated to reflect this change.

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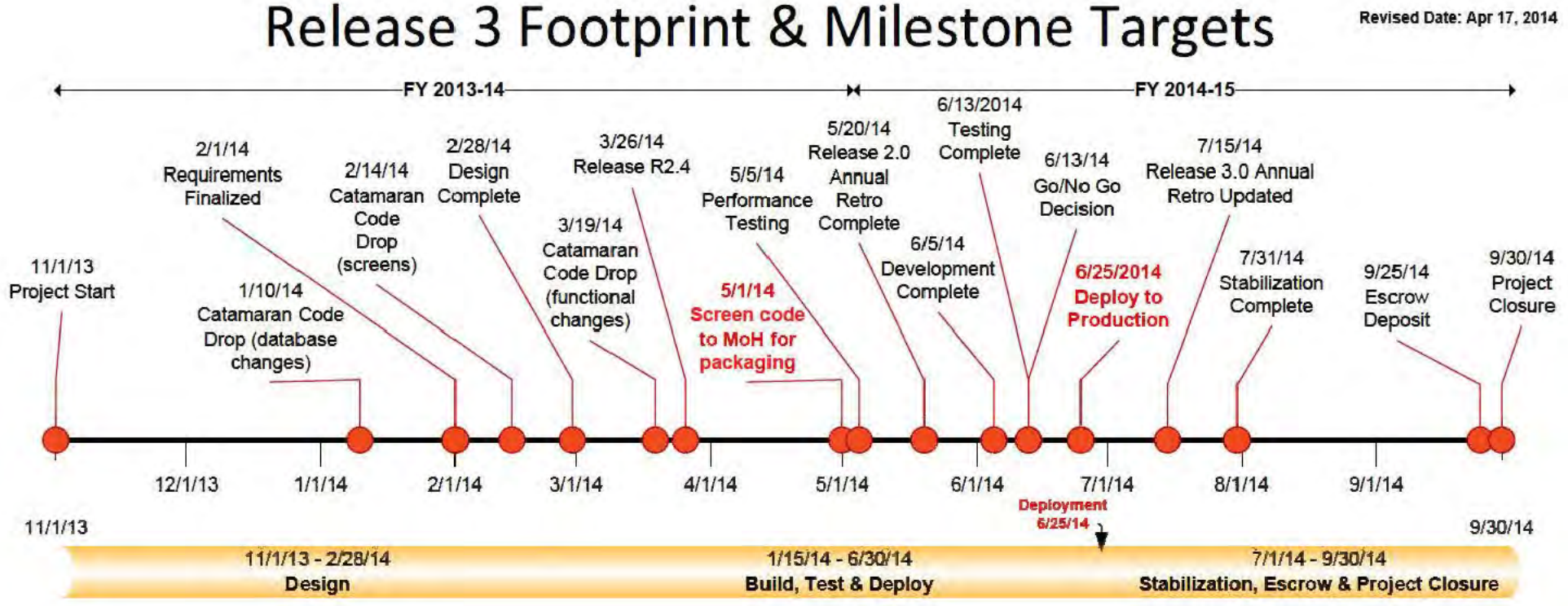
4 Project Footprint



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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-May-01	2014-May-30
Project Plan Version:	PharmaNet R3	**PLC/Project Phase**	Development Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Development – June 25, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Build Complete – June 6, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • • • s.17 • • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed April 23) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G / Y / R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to	Y

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	blood glucose testing strips) • Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • s.17	
Quality	Adhering to MAXIMUS methodology During the last month, the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.	G
Schedule	Development Activities: ○ PIA – signed off (complete) ○ Technical Specifications – nearing completion (target June 5) ○ Business Configuration settings – complete ○ Screen code – iStore ticket for packaging and deployment by SSBC created and sent ○ Transaction code – testing complete ○ DRP – signed off (complete) ○ Batch development – nearing completion (target June 5) ○ Batch testing – in progress ○ Deployment Plan – in progress ○ Go / No Go Presentation – internal (June 10); MoH (June 17)	Y

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	Schedule Concerns: ○ Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. ○ Screen code BAT was not completed by the end of April and this is required to give MoH System Services and SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code was delivered on May 2. ○ MoH MBPSD coordinated participation in screen code BAT for May 5/6 - successful BAT. MoH System Services will use the revised May 2 screen code to conduct the connectivity testing, pre-packaging activities and submit iStore Project request to SSBC (done). ○ Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). ○ Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (June 26) will be required for the data warehouse refresh. This means that the data warehouse will have stale data until the Friday morning (June 27). ○ CR 2014-006 – s.17 s.17 ○ Testing has uncovered a potential performance issue that we are currently re-testing and analyzing. If the issue cannot be resolved it may be necessary to discuss options (as presented in the draft DR) on how to proceed.	
Budget	New Estimates: ○ CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. ○ The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. MoH has paid the submitted invoice amount. ○ CR 2014-005 - Provision of screen code and deployment support for the Colleges and HLBC – has been submitted to MoH for review and approval. ○ CR 2014-006 – s.17	G

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

1.1 Ministry of Health Communications Status

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of Communications: • Develop a communications plan containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan • Draft of communications plan with Stakeholder Engagement Matrix and Activities Matrix sent to team for review - complete • Updated Communications Plan sent to directors for review - complete • Final, signed off communications plan scheduled for COB May 28th Execute Communications Plan – as per the Communications Activities Matrix • Begins June 5th Schedule Concerns: • none	G

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2 Action Items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet R3 Privacy Impact Assessment (PIA)	MoH	2014-03-27	None	2014-05-16	Closed	Signed off by MAXIMUS and MoH
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MoH	2014-04-23	None	2014-05-16	Closed	Signed off by MAXIMUS and MoH
MAXIMUS	PharmaNet – Release 3 Disaster Recovery Assessment and Plan	MoH	2014-04-14	None	2014-05-16	Closed	Signed off by MAXIMUS and MoH
MAXIMUS	PharmaNet R3 Go / No Go	MoH	2014-06-17	Approval to Deploy	2014-06-17	Pending	Presentation to be made to JEC on June 17 and approval to deploy decision to be made at that meeting

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues

Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
Y	553643	L	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19 2014.	MAXIMUS has not been able to proceed with testing of the transaction code as per the project plan.	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has also worked additional weekday hours and weekends. Code delivered by Catamaran on March 19 2014 has been fully tested.	2014-MAR-19

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
Y	553680	M	Shared Services BC (SSBC) has recently implemented a change freeze for all infrastructure services, which also includes services delivered by all vendor partners, including HP Advanced Solutions, IBM, and TELUS. In the meantime, all change requests are being reviewed by Office of the Chief Information Officer (OCIO) executive to determine if there are any significant risks. For clients who have pending iStore orders or Requests for Change (RFC) scheduled, please be advised that these requests will be reviewed and assessed as per the process outlined above and may be rescheduled. Should clients require an emergency change during the freeze, they are reminded of the Request for Special Processing procedure.	May have an impact on the scheduled Go-Live date for R3: • if MAXIMUS is unable to engage SSBC/HPAS when required; • If the MoH iStore request for screen code packaging is delayed; • If HPAS is not available to roll-out the packaged screen code on the Go-Live date.	The following steps could be taken to address this issue: • Follow the SSBC "Request for Special Processing" procedure; • Escalate quickly if this issue is raised Note: Recent experience with SSBC/HPAS has been at regular service levels (i.e., no impact due to the freeze)	

3.2 Key/Active Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule

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553658	M	MoH is having a Risk and Controls review of PharmaNet Release 3.0 and in order for the project to be approved for Go-live, the MoH executive must approve the Risk and Controls report, and the report must be accepted by the Comptroller General's office. The report is due around June 12 2014 and the Go-live decision is currently planned for June 13. Approval for deployment in the June 25 change window should occur at the June 18 Change Management meeting. These dates are very tight so any slippage could jeopardize the Go-live date.	MoH does not want the Go-live date to move because of cost savings that will be lost due to delay. MAXIMUS does not want to move the Go-live date to move because of proximity to the testing/deployments for the Medigent (RAPID) project and competition for the same infrastructure resources.	The Go-live decision presentation date could be moved to a few days later if the Risk and Controls report has not been approved by the MoH executive by June 13. MAXIMUS will know if there are any issues with going live June 25 earlier than June 13 so the presentation is a formality. MoH will work with Deloitte to get the Risk and Controls review done as quickly as possible. MAXIMUS will respond to any requests from Deloitte in a timely fashion.	H	M	Schedule

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Pending	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality

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	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 . CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)
CR2014-005	Pending	Provide PharmaNet application screen code to the Colleges and HLBC	Additional effort required by MAXIMUS and therefore additional budget required.

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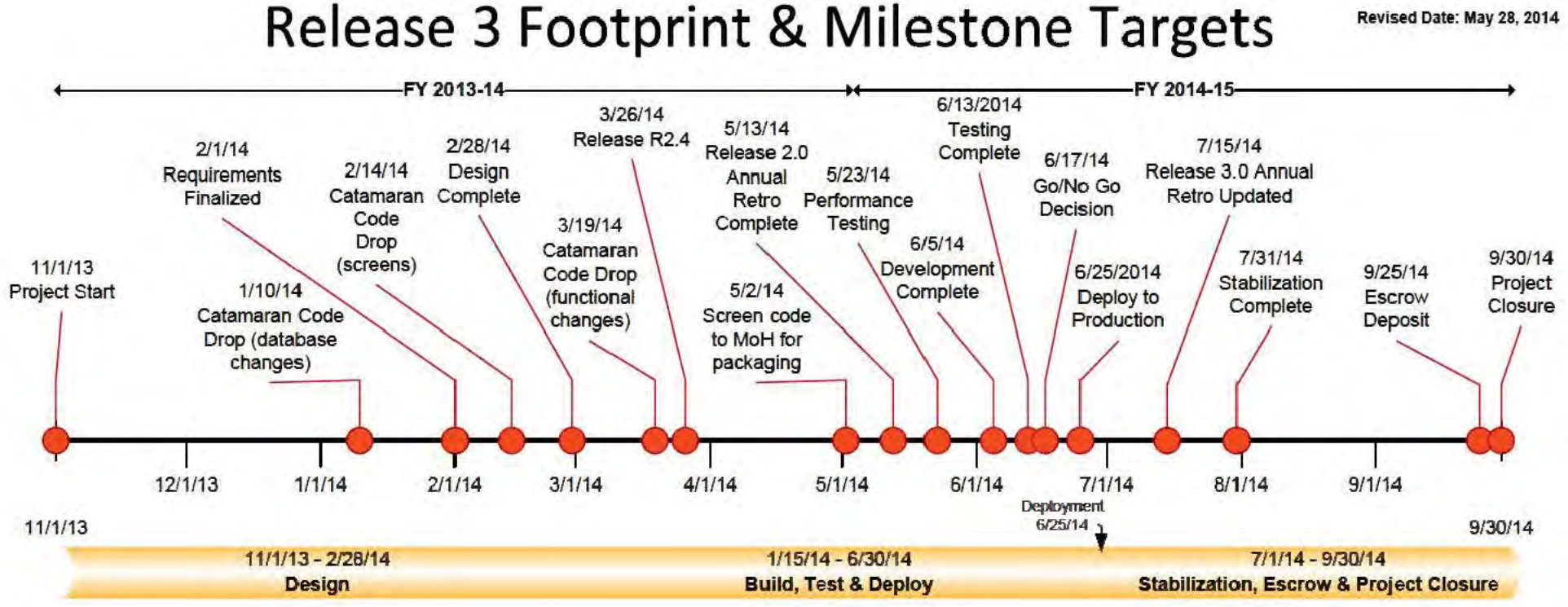
4 Project Footprint



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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-June-28	2014-July-22
Project Plan Version:	PharmaNet R3	**PLC/Project Phase**	Deployment Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Deployment – TBD	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Go / No Go Decision – July 23 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed April 23) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to	G

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	blood glucose testing strips) • Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • s.17
Quality	Adhering to MAXIMUS methodology During the last month, the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.
Schedule	Development Activities: ○ Empty Tables issue – code fixed, functional testing complete ○ Performance issue (e.g., Methadone PIN) – testing complete ○ Go / No Go Presentation – July 23 2014 for July 30/31 deployment Schedule Concerns: ○ Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were

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	scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. ○ Screen code BAT was not completed by the end of April and this is required to give MoH System Services and SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code was delivered on May 2. ○ MoH MBPSD coordinated participation in screen code BAT for May 5/6 - successful BAT. MoH System Services will use the revised May 2 screen code to conduct the connectivity testing, pre-packaging activities and submit iStore Project request to SSBC (done). ○ Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). ○ Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (June 26) will be required for the data warehouse refresh. This means that the data warehouse will have stale data until the Friday morning (June 27). ○ CR 2014-006 – s.17 ○ Testing has uncovered a potential performance issue that we are currently re-testing and analyzing. The performance issue has been resolved. The draft DR that was raised has been cancelled. ○ MoH requested all PNet test databases shut down due to issue of real PHNs being used in test environments. This required unplanned effort by the PNet R3 team and also delayed functional testing of the code that was revised to address the empty table issue. Effort was also required to re-start the test environments.	
Budget	New Estimates: ○ CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. ○ The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. MoH has paid the submitted invoice amount. ○ CR 2014-005 - Provision of screen code and deployment support for the Colleges and HLBC – approved and signed by MAXIMUS and MoH. ○ CR 2014-006 – s.17 ○ CR2014-007 – Resolve Performance issue – approval received from JEC to proceed with the work prior to submission of the CR. The CR was submitted to MoH for review on June 12 2014 but has not been approved for signature. MAXIMUS is unable to bill for this work although the work has been completed.	R

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1.1 Ministry of Health Communications Status

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of Communications: • Develop and execute a communications plan for PNet R3.0 containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan • Final, signed off communications plan – complete for June 26th Implementation attempt • Updated communication plan for July 31st Implementation – draft in final review Execute Communications Plan –as per the Communications Activities Matrix • Complete for June 26th implementation attempt • Pending for July 31st implementation Schedule Concerns: • dependent on determining the next go-live date	G

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2 Action Items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet R3 Stabilization Criteria and Plan	MoH	2014-07-08	Signature	2014-07-14	Pending	Signed off by MAXIMUS and delivered to MoH for signatures
MAXIMUS	PharmaNet R3 Go / No Go (July 30/31 2014)	MoH	2014-07-23	Approval	2014-07-25	Pending	Presentation to be made to JEC on July 23.

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues

Status G	Status Y	Status R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
		R	553689	H	Deployment was unsuccessful due to code issues in dealing with empty tables and also an unrelated performance issue	Unable to proceed with deployment.	MAXIMUS has done the following to deal with these issues: • Instructed Catamaran to review code and fix code related to handling of empty tables (done) • Conducted additional performance testing with various scenarios to determine cause of performance issue **NOTE: There is an ongoing risk that performance could be impacted by the release code (e.g., methadone PINs have a longer response time s.17 s.17 However, MAXIMUS does not feel that this is an issue that should prevent deployment from proceeding.**	2014-Jul-25

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3.2 Key/Active Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553658	High	Ministry Risk and Controls are in question right now	Go-live could be delayed	Ministry Risk and Controls under review at this time	H	M	Schedule
553616	High	Application performance may be impacted	Potential impact to ongoing performance	Performance will need to be monitored closely during stabilization and beyond	H	L	Performance

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Cancelled	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality Performance of the Catamaran code became an issue that was addressed via CR 2014-007.
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.

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	Approved	MAXIMUS request for Go / No Go decision for deployment of PharmaNet Release 3.0 on June 25/26	Approval received from JEC on June 17, 2014.
	Pending	MAXIMUS request for Go / No Go decision for deployment of PharmaNet Release 3.0 on July 30/31	Approval to be requested from JEC on July 23, 2014.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)
CR2014-005	Approved	Provide PharmaNet application screen code to the Colleges and HLBC	Additional effort required by MAXIMUS and therefore additional budget required.
CR2014-006	Approved	Do not implement any limits on s.17 BGTS when the application is deployed	Additional effort required by MAXIMUS and therefore additional budget required.
CR2014-007	Pending	Resolve performance issue with PharmaNet Release 3.0 application that is impacting the claims transaction SLA	Additional effort required by MAXIMUS and therefore additional budget required.

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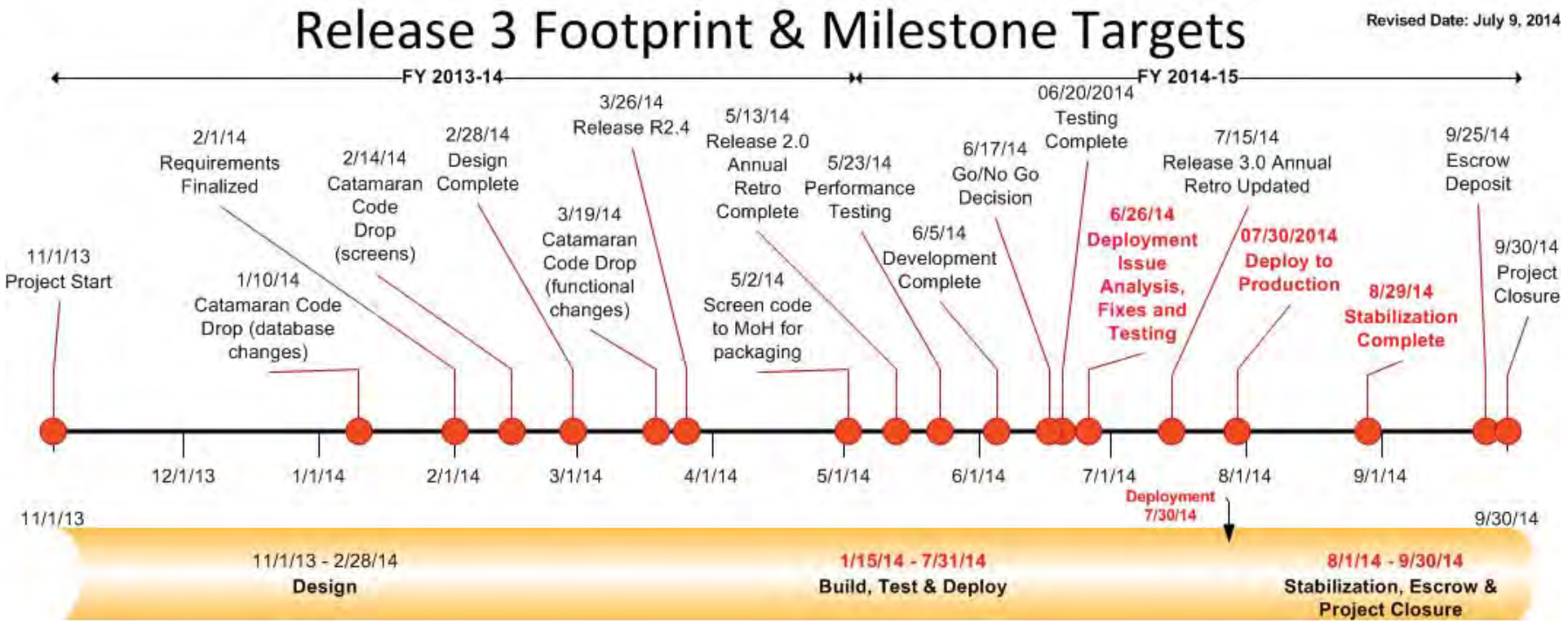
4 Project Footprint



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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-July-23	2014-Sept-05
Project Plan Version:	PharmaNet R3	**PLC/Project Phase**	Deployment Phase (Stabilization)	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Project Closure – Sept 30 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Stabilization Complete – August 31 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed April 23) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G	Y	R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to	G		

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	blood glucose testing strips) • Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • s.17 • Inability to complete the work under CR2014-005 until HLBC is able to test the screen code that has been provided by MAXIMUS	
Quality	Adhering to MAXIMUS methodology During the last month, the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.	**G**
Schedule	Development Activities: o Go / No Go Presentation – July 23 2014 – complete o Deployment – July 30/31 – complete o Stabilization – August 31 – complete o Project Closure – September 30 – in progress Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS	**G**

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	team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o Screen code BAT was not completed by the end of April and this is required to give MoH System Services and SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code was delivered on May 2. o MoH MBPSD coordinated participation in screen code BAT for May 5/6 - successful BAT. MoH System Services will use the revised May 2 screen code to conduct the connectivity testing, pre-packaging activities and submit iStore Project request to SSBC (done). o Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). Extended window used to successfully deploy the application on July 30. o Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (July 31) was required for the data warehouse refresh. This meant that the data warehouse had stale data until the Friday morning (Aug 1). o CR 2014-006 – s.17 o Testing has uncovered a potential performance issue that we are currently re-testing and analyzing. The performance issue has been resolved. The draft DR that was raised has been cancelled. o MoH requested all PNet test databases shut down due to issue of real PHNs being used in test environments. This required unplanned effort by the PNet R3 team and also delayed functional testing of the code that was revised to address the empty table issue. Effort was also required to re-start the test environments. This effort has been charged to a non-project SR.	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. o The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. MoH has paid the submitted invoice amount. o CR 2014-005 - Provision of screen code and deployment support for the Colleges and HLBC – approved and signed by MAXIMUS and MoH. o CR 2014-006 – s.17 o CR2014-007 – Resolve Performance issue – approval received from JEC to proceed with the work prior to submission of the CR. The CR was submitted to MoH for review on June 12 2014 and has been signed and all the work completed.	**G**

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1.1 Ministry of Health Communications Status

	Comments	Status (G / Y / R)
Scope	The following activities will be undertaken within the scope of Communications: • Develop and execute a communications plan for PNet R3.0 containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan • Final, signed off communications plan – complete for June 26th Implementation attempt • Updated communication plan for July 31st Implementation – complete Execute Communications Plan –as per the Communications Activities Matrix • Complete for June 26th implementation attempt • Complete for July 31st implementation Schedule Concerns: • none	G

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2 Action Items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet R3 Stabilization Criteria and Plan	MoH	2014-07-08	None	2014-07-14	Closed	Signed off by MAXIMUS and MoH
MAXIMUS	PharmaNet R3 Go / No Go (July 30/31 2014)	MoH	2014-07-23	None	2014-07-25	Closed	Presentation made to JEC on July 23 – approval to proceed given

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues

Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
G	553689	H	Deployment was unsuccessful due to code issues in dealing with empty tables and also an unrelated performance issue	Unable to proceed with deployment.	MAXIMUS has done the following to deal with these issues: • Instructed Catamaran to review code and fix code related to handling of empty tables (done) • Conducted additional performance testing with various scenarios to determine cause of performance issue **NOTE: There is an ongoing risk that performance could be impacted by the release code (e.g., methadone PINs have a longer response time.** s.17 s.17 **However, MAXIMUS does not feel that this is an issue that should prevent deployment from proceeding.**	Closed

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

3.2 Key/Active Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type	Status
553658	High	Ministry Risk and Controls are in question right now	Go-live could be delayed	Ministry Risk and Controls under review at this time	H	M	Schedule	Closed
553616	High	Application performance may be impacted	Potential impact to ongoing performance	Performance will need to be monitored closely during stabilization and beyond	H	L	Performance	Closed

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Cancelled	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality Performance of the Catamaran code became an issue that was addressed via CR 2014-007.
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

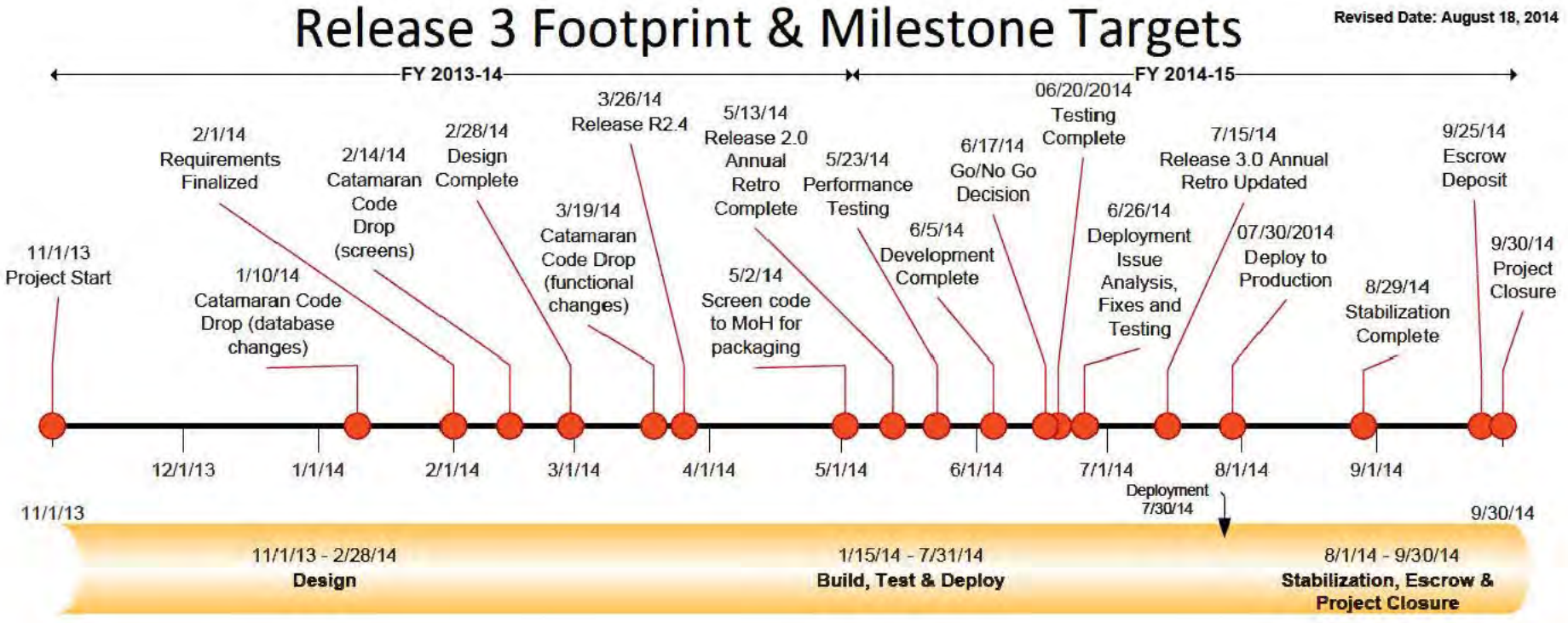
	Approved	MAXIMUS request for Go / No Go decision for deployment of PharmaNet Release 3.0 on June 25/26	Approval received from JEC on June 17, 2014.
	Approved	MAXIMUS request for Go / No Go decision for deployment of PharmaNet Release 3.0 on July 30/31	Approval received from JEC on July 23, 2014.
DR2014-011	Approved	MAXIMUS request for Stabilization Period closure	Submitted to MoH and approved – requires signatures.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)
CR2014-005	Approved	Provide PharmaNet application screen code to the Colleges and HLBC	Additional effort required by MAXIMUS and therefore additional budget required.
CR2014-006	Approved	Do not implement any limits on s.17 'BGTS when the application is deployed	Additional effort required by MAXIMUS and therefore additional budget required.
CR2014-007	Approved	Resolve performance issue with PharmaNet Release 3.0 application that is impacting the claims transaction SLA	Additional effort required by MAXIMUS and therefore additional budget required.

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

4 Project Footprint



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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Sept-08	2014-Sept-30
Project Plan Version:	PharmaNet R3	**PLC/Project Phase**	Deployment Phase (Stabilization)	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Project Closure – Sept 30 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Project Closure – Sept 30 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed April 23) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G / Y / R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to	G

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	blood glucose testing strips) • Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • None	
Quality	Adhering to MAXIMUS methodology During the last month (May), the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.	G
Schedule	Development Activities: ○ Go / No Go Presentation – July 23 2014 – complete ○ Deployment – July 30/31 – complete ○ Stabilization – August 31 – complete ○ Project Closure – September 30 – complete Schedule Concerns: ○ Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed.	G

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	○ Screen code BAT was not completed by the end of April and this is required to give MoH System Services and SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code was delivered on May 2. ○ MoH MBPSD coordinated participation in screen code BAT for May 5/6 - successful BAT. MoH System Services will use the revised May 2 screen code to conduct the connectivity testing, pre-packaging activities and submit iStore Project request to SSBC (done). ○ Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). Extended window used to successfully deploy the application on July 30. ○ Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (July 31) was required for the data warehouse refresh. This meant that the data warehouse had stale data until the Friday morning (Aug 1). ○ CR 2014-006 – s.17 ○ Testing has uncovered a potential performance issue that we are currently re-testing and analyzing. The performance issue has been resolved. The draft DR that was raised has been cancelled. ○ MoH requested all PNet test databases shut down due to issue of real PHNs being used in test environments. This required unplanned effort by the PNet R3 team and also delayed functional testing of the code that was revised to address the empty table issue. Effort was also required to re-start the test environments. This effort has been charged to a non-project SR.	
Budget	New Estimates: ○ CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. ○ The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. MoH has paid the submitted invoice amount. ○ CR 2014-005 - Provision of screen code and deployment support for the Colleges and HLBC – approved and signed by MAXIMUS and MoH. ○ CR 2014-006 – s.17 ○ CR2014-007 – Resolve Performance issue – approval received from JEC to proceed with the work prior to submission of the CR. The CR was submitted to MoH for review on June 12 2014 and has been signed and all the work completed.	G

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1.1 Ministry of Health Communications Status

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of Communications: • Develop and execute a communications plan for PNet R3.0 containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan • Final, signed off communications plan – complete for June 26th Implementation attempt • Updated communication plan for July 31st Implementation – complete Execute Communications Plan –as per the Communications Activities Matrix • Complete for June 26th implementation attempt • Complete for July 31st implementation Schedule Concerns: • none	G

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2 Action Items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues

Status G Y R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD

3.2 Key/Active Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type	Status

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Cancelled	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality Performance of the Catamaran code became an issue that was addressed via CR 2014-007.
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.
	Approved	MAXIMUS request for Go / No Go decision for deployment of PharmaNet Release 3.0 on June 25/26	Approval received from JEC on June 17, 2014.
	Approved	MAXIMUS request for Go / No Go decision for deployment of PharmaNet Release 3.0 on July 30/31	Approval received from JEC on July 23, 2014.
DR2014-011	Approved	MAXIMUS request for Stabilization Period closure	Submitted to MoH and approved – requires signatures.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)
CR2014-005	Approved	Provide PharmaNet application screen code to the Colleges and HLBC	Additional effort required by MAXIMUS and therefore additional budget required. NOTE: HLBC was not ready to implement the PNet screen code by September 30, 2014 and this work is therefore outstanding.

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CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)
CR2014-006	Approved	Do not implement any limits on s.17 /BGTS when the application is deployed	Additional effort required by MAXIMUS and therefore additional budget required. Subsequently (i.e., during September 2014) limits were implemented with no impact on performance.
CR2014-007	Approved	Resolve performance issue with PharmaNet Release 3.0 application that is impacting the claims transaction SLA	Additional effort required by MAXIMUS and therefore additional budget required.

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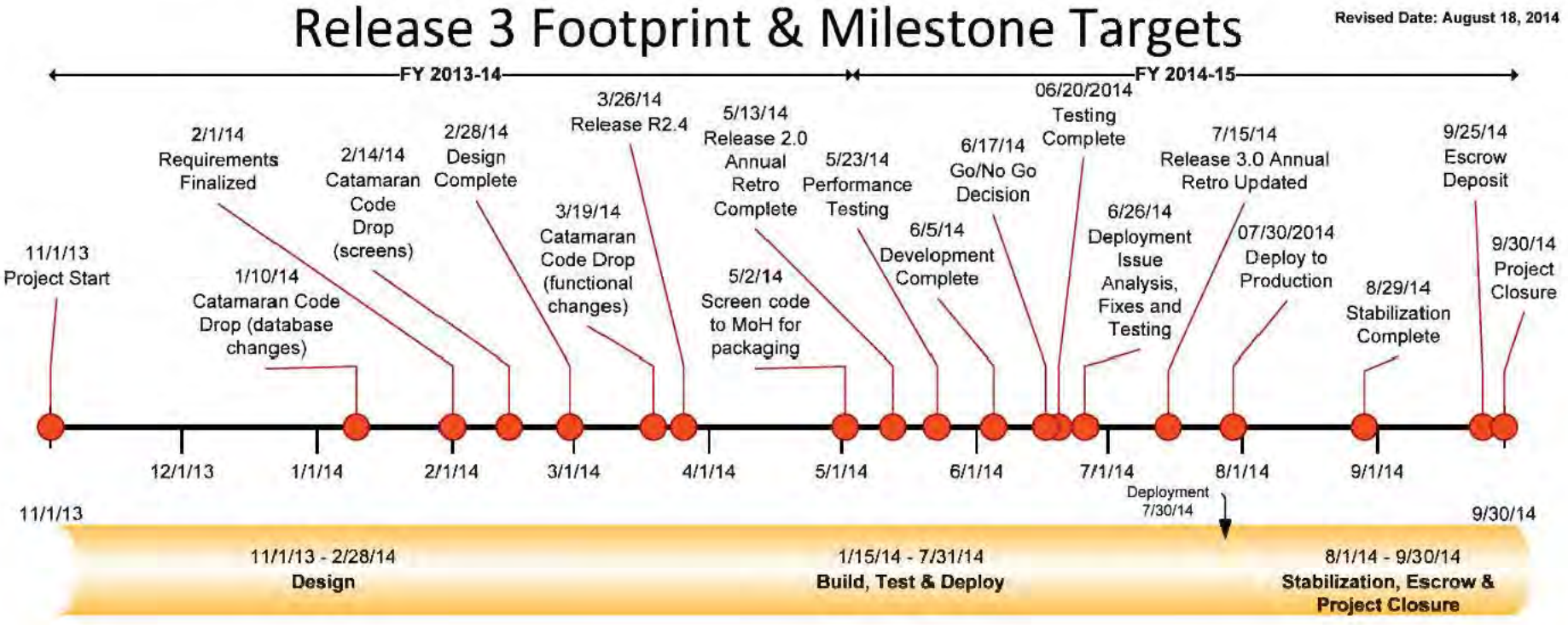
4 Project Footprint



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Bi-weekly Project Progress Report

MAXIMUS CANADA
A MAXIMUS Company

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Jan-13	2014-Feb-14
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Planning Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Planning – March 31, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – February 28, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • • s.17 • • • Service Provider enrolment ▪ support for new regulations • Publicly funded vaccine administration ▪ new adjudication rules for Service Claims			

	Comments	Status G / Y / R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis • Design • Build • Test case development and execution • Training • Deployment • For a complete list of the deliverables that will be produced refer to Appendix A of the Project Charter. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients	Y

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	• Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips) • Service Provider Enrolment Program roll-out Scope Concerns • Some scope decisions still outstanding (e.g., eRx for Health Ideas)
Quality	Adhering to MAXIMUS methodology
Schedule	Planning (Design) Activities: o Functional Specifications in progress o Technical Specifications in progress o Test Strategy/Plan in progress o Training Strategy in progress o Re-estimate in progress Schedule Concerns: o Some deliverables will be completed later than originally planned. It is likely that this will impact the deployment date – to be determined during the re-planning/re-estimating exercise following completion of the Design Phase (end of January / early February). o eRx data for Health Ideas decision outstanding – will impact schedule if decision is to deliver along with R3
Budget	Cost Concerns: o eRx data for Health Ideas decision outstanding – will affect the budget but is also drawing key team member attention away from delivering the project

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Summary

PharmaNet Release 3.0 Project Budget

Original	Actual Apr to Oct 2011	Estimate November	Estimate December	Estimate January	Estimate February	Estimate March	Total FY13/14
PNet R3.0	$113,000.00	$225,100.50	$132,152.22	$305,918.20	$396,416.60	$353,925.00	$1,526,512.52
PNet R4.0	0	$429.00	$0.00	$63,933.40	$63,933.40	$63,504.40	$191,800.20
Total	$113,000.00	$225,529.50	$132,152.22	$369,851.60	$460,350.00	$417,429.40	$1,718,312.72

Revised	Actual Apr to Oct 2013	Actual November	Actual December	Actual January	Estimate February	Estimate March	Total FY13/14
PNet R3.0	$113,000.00	$222,697.70	$128,478.22	$291,058.94	$342,728.10	$441,834.25	$1,539,797.20
PNet R4.0	$0.00	$429.00	$0.00	$0.00	$0.00	$0.00	$429.00
Total	$113,000.00	$223,126.70	$128,478.22	$291,058.94	$342,728.10	$441,834.25	$1,540,226.20

CO 64
CO 65

Notes:

PNet R3.0 and PNet R4.0 estimates include MAXIMUS and Catamaran effort
ODR to CAS reconciliation report is included in CO 65 but is not part of the PNet R3 budget
MAXIMUS labour rates increase on April 1, 2014
CO 65 also covers April to Aug 2014
Original chart was shared with MoH on January 6 2014
Estimate for February reduced due to delays in requirements decisions
Estimate for March increased to make up for reduction in February effort
Requirements changes that have impacted the estimate and schedule:

- Methadone Payment Process change (not confirmed)
- s.17
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- Not including OTC (Over the Counter) drugs and vitamins as qualifying for pharmacists totals for drugs towards a Med Review (not confirmed)

s.17

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2.1a Total Project Schedule (Discoverer Reporting out of ITG)

*** will be provided in next report once the budget has received corporate approval ***

2.2 Total Capital Budget

*** will be provided in next report once the budget has received corporate approval ***

2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	Complete document	2014-01-31	Submitted	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	Confirm requirements	TBD	Re-opened	Need confirmation that requirements are in scope for R3 to be able to finalize detailed functional requirements. Waiting for MoH response.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	Gather signatures and create PDF	2014-02-14	Approved	MoH in the process of gathering signatures

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

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3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G Y R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule

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553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Submitted	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	If full STRA is required, this will impact and scope and budget for the project. Schedule may be impacted as well. MoH to arrange meeting (done – Jan 7 2014) and provide decision by January 17 2014 – no impact on budget
	Approved	Finalize requirement for new reports	If no new reports are required, this reduces scope and budget for the project. If new reports are needed, need requirements for the reports in order to finalize functional specifications by end of January 2014. No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	If Release 4.0 requirements are not started early in January 2014 the project burn rate will be further impacted since the original plan was to start the work in December 2013. Release 4.0 requirements and estimate will not be included in the Release 3.0 project.

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3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

4 Detail

No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
1.	Project Charter	Oct 18, 2013		Approved
2.	High-level Business Requirements	Oct 18, 2013		Approved
3.	Test Strategy and Plan	Dec 31, 2013	Feb ??, 2013	In Progress
4.	Training Strategy	Dec 13, 2013	Dec 19, 2013	Signatures being gathered
5.	Training Plan	Feb ?, 2013		In Progress
6.	Impact Assessment	Jan ?, 2013	NA	In Progress
7.	Security and Threat Risk Assessment	Mar 14, 2014		Not Started
8.	Functional Requirements	Jan 31, 2013	Jan 20, 2014	In Progress
9.	Non-functional Requirements	Jan 31, 2013		In Progress
10.	Functional Specifications	Jan 31, 2014	Jan 20, 2014	In Progress
11.	Privacy Impact Assessment	Feb 14, 2014		In Progress
12.	Development - Build	May 22, 2014	N/A	In Progress
13.	Development – Function/Integration Testing	May 15, 2014		Not Started
14.	Provide extract to Health Ideas for testing	TBD		Not Started
15.	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	TBD		Not Started
16.	Work Instructions – Internal	Mar 20, 2014		Not Started

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No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
17.	Deployment/Cutover Strategy/Plan	May ??, 2014		Not Started
18.	Business Continuity Assessment and Plan	Feb 14, 2014		Not Started
19.	Disaster Recovery Assessment and Plan	Mar 24, 2014		Not Started
20.	Production Support Plan	Mar 17, 2014		Not Started
21.	Testing – BAT	May 20, 2014	N/A	Not Started
22.	Test Results Summary	Jun 25, 2014		Not Started
23.	Defect Action Plan	Jun 25, 2014		Not Started
24.	Deployment Go/No Go presentation	May 15, 2014		Not Started
25.	Training	Apr 16, 2014	N/A	Not Started
26.	Deployment	May 2014	N/A	Not Started
27.	Escrow Deposit	Aug 13, 2015		Not Started
28.	Project Close	Aug 30, 2015	N/A	Not Started

5 **Project SDLC Phase Metrics** – *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*

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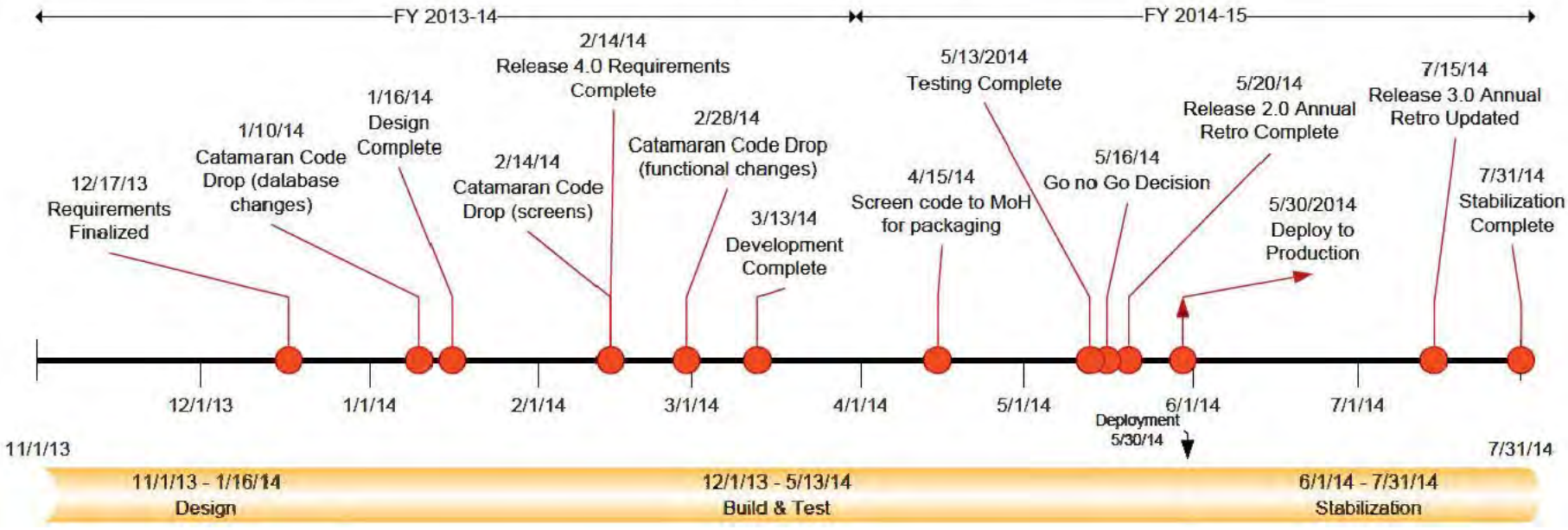
Release 3 Footprint & Milestone Targets

Revised Date: Nov 12, 2013



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6 Ministry of Health Communications Status

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of Communications: • develop Stakeholder Engagement Strategy • develop Communications Plan • execute Communications Plan Scope Concerns • none	G
Schedule	Stakeholder Engagement Strategy – due February 28 2014: o in progress Communications Plan – due April 30 2014: o not started Execute Communications Plan – due May 23 2014: o not started Schedule Concerns: o none	G

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Bi-weekly Project Progress Report

MAXIMUS CANADA
A MAXIMUS Company

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Jun-12	2014-Jul-11
Project Plan Version:	PharmaNet R3	**PLC/Project Phase**	Deployment Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Deployment – TBD	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Go / No Go Decision – TBD	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed April 23) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G	Y	R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips)	G		

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	• Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • s.17	
Quality	Adhering to MAXIMUS methodology During the last month, the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.	**G**
Schedule	Development Activities: o PIA – signed off (complete) o Technical Specifications – complete o Business Configuration settings – complete o Screen code – iStore ticket for packaging and deployment by SSBC created and sent o Transaction code – testing complete o DRP – signed off (complete) o Batch development – complete o Batch testing – complete o Go / No Go Presentation – scheduled for June 17 Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS	**Y**

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	team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o Screen code BAT was not completed by the end of April and this is required to give MoH System Services and SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code was delivered on May 2. o MoH MBPSD coordinated participation in screen code BAT for May 5/6 - successful BAT. MoH System Services will use the revised May 2 screen code to conduct the connectivity testing, pre-packaging activities and submit iStore Project request to SSBC. o Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). o Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (June 26) will be required for the data warehouse refresh. This means that the data warehouse will have stale data until the Friday morning (June 27). o CR 2014-006 – s.17 s.17 o Testing has uncovered a potential performance issue that we are currently re-testing and analyzing. If the issue cannot be resolved it may be necessary to discuss options (as presented in the draft DR) on how to proceed (resolved) o June 25/26 deployment was not successful due to a code issue related to empty tables (resolved) and a potential performance issue (under investigation). Deployment date and stabilization period need to be re-scheduled. Proposed deployment date is July 30/31.	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. o The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. MoH has paid the submitted invoice amount. o CR for provision of screen code and deployment support for the Colleges and HLBC (CR2014-005) has been submitted to MoH for review and approval. o CR 2014-005 – Provision of screen code and deployment support for the Colleges and HLBC – approved by MoH, and signed at MAXIMUS. delivered to MoH for signature o CR 2014-006 – s.17 o The project is now over-burning on the budget due to the effort being spent to resolve the performance issue that was recently discovered. CR 2014-007 has been raised and presented to MoH for review/approval. o Effort to re-attempt deployment should fit within the existing budget, assuming that MoH funds CR 2014-007.	**Y**

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Ministry of Health Communications Status

	Comments	Status (G / Y / R)
Scope	The following activities will be undertaken within the scope of Communications: • Develop and execute a communications plan for PNet R3.0 containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan • Final, signed off communications plan – complete Execute Communications Plan –as per the Communications Activities Matrix • Completed for initial go-live attempt including no-go activities Communications Plan – updated for second go-live plan • tbd – pending go-live schedule Schedule Concerns: • none	Y

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2 Summary

2.1a Total Project Schedule (updated monthly)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	11/01/2013	04/30/2014				100%	100%	100%	Complete
PLC Phase – Development	**01/01/2014**	**06/25/2014**		s.21		**99%**	**100%**	**99%**	**Complete**
PLC Phase – Deployment	**06/01/2014**	**06/30/2014**				**47%**	**40%**	**33%**	**In Progress**
PLC Phase – Stabilization	07/01/2014	09/30/2014				0%	0%	0%	Not Started

2.2a Total Capital Budget (updated monthly)

PharmaNet Release 3.0 (including Release 4.0 Business Requirements and Estimate)	A Original Estimate (Nov 8 2013)	B Actual for Apr to Oct 2013 (not included in "A") **	C Revised Estimate * includes "B"	D Spent To-date	E Spent Last Month - June 2014	F=C-D Remaining	G Estimate to Complete	H Estimate at Completion	I=D/C Burn Rate
Release 3.0 Budget	$3,359,160	$158,740	$3,102,767	$2,758,230	$265,691	$344,537	$344,537	$3,102,767	89%
Change Requests	$0	$0	-$38,894	-$57,439	$12,251	$18,545	$18,545	-$38,894	
Total	**$3,359,160**	**$158,740**	**$3,063,873**	**$2,700,791**	**$277,942**	**$363,082**	**$363,082**	**$3,063,873**	**88%**

**** Column B includes ODR to CAS Reconciliation Report SR 553416 ($45,740)**
***** Change Requests includes CO 66 credit for long-term rates, CR2014-005,006,007, Training credit**

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2.2b JEC Monthly Actual and Estimate Tracking (updated monthly)

PharmaNet Release 3.0 Project Actuals and Estimates

Updated: July 9, 2014

$s	Actual Apr-Oct 2013	Actual Nov 2013	Actual Dec 2013	Actual Jan 2014	Actual Feb 2014	Actual March 2014	Fiscal Total FY13/14	Actual April 2014	Actual May 2014	Accrual June 2014	Estimate July 2014	Estimate Aug 2014	Estimate Sept 2014	Fiscal Total FY14/15	Project Total
PNet R3.0	$158,740	$222,698	$128,478	$291,059	$332,367	$525,347	$1,658,689	$436,376	$397,045	$265,691	$200,685	$110,200	$33,652	$1,443,649	$3,102,338
PNet R4.0	$0	$429	$0	$0	$0	$0	$429	$0	$0	$0	$0	$0	$0	$0	$429
CO 66 Credit	$0	$0	$0	$0	$0	$0	$0	-$34,845	-$34,845	-$34,845	$0	$0	$0	-$104,536	-$104,536
CR2014-005	$0	$0	$0	$0	$0	$0	$0	$0	$0	$650	$16,350	$0	$0	$17,000	$17,000
CR2014-006	$0	$0	$0	$0	$0	$0	$0	$0	$0	$10,655	$2,195	$0	$0	$12,850	$12,850
CR2014-007	$0	$0	$0	$0	$0	$0	$0	$0	$0	$41,831	$0	$0	$0	$41,831	$41,831
Training credi	$0	$0	$0	$0	$0	$0	$0	$0	$0	-$6,039	$0	$0	$0	-$6,039	-$6,039
Total	$158,740	$223,127	$128,478	$291,059	$332,367	$525,347	$1,659,118	$401,531	$362,200	$277,942	$219,230	$110,200	$33,652	$1,404,755	$3,063,873
Hrs															
MAXIMUS								s.21							

CO 64
CO 65
CO 66

Financial Adjustments:

Removed $11,440 from CO 65 due to removal of effort for STRA s.21
Apply credit for additional capacity hrs (CO 66) to April, May and June s.21
Add $45,740 for June to Aug 2013 (ODR to CAS reconciliation)
CO 64 value is $535,591 of which $25,246 was not spent by Dec 31 2013 so that amount was applied against the Jan 2014 invoice
CO 65 value is $2,567,176. It is split by fiscal: FY2013/14 = $1,123,527 and FY2014/15 = $1,443,649
Total amount available for FY13/14 = $1,659,118
Apr-Oct 2013 column includes $45,740 for the ODR to CAS Reconciliation report effort (SR 553416)
CR2014-005 - Provide screen code to Colleges and HLBC - added to project totals
CR2014-006 - No limits to be implemented at Go-live
CR2014-007 - Performance issue resolution
A training credit has been added since training for limits has been delayed until limits are implemented in production

Notes:

PNet R3.0 estimates include MAXIMUS and Catamaran effort
The number of MAXIMUS hours per month includes IT and BAT resources which are charged at different rates
Original estimate for February reduced due to delays in requirements decisions
Original estimate for March increased to make up for reduction in February effort
Requirements changes that have **increased** the estimate and/or scope:
- Methadone Payment Process change
- New Service Claims cap
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- Creation of a "production-like" test environment for performance testing of new limits requirements

Requirements changes that have **decreased** the estimate and/or scope:
- PharmaNet R4.0 requirements and estimate removed from scope
- Stakeholder Engagement Strategy and Plan assigned to MoH
- Provider enrolment operational activities, training and communications removed from scope
- Risk and Controls review removed from scope
- No new reports or report updates
- Stabilization criteria will be loosened to reduce the amount of stabilization support required
- MAXIMUS effort related to the STRA removed from scope

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Bi-weekly Project Progress Report

2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	N/A	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	N/A	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	N/A	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	None	N/A	Closed	Alternate course of action selected, outside of scope of R3
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MoH	2014-02-28	Non	N/A	Closed	Document has been signed off by MoH
MAXIMUS	Change Order #65	MOH	2014-03-13	None	N/A	Closed	MAXIMUS delivered final version to MoH March 13, 2014. MoH has provided final approval and the CO has been signed off by MAXIMUS and MoH.
MAXIMUS	PharmaNet R3 Business Continuity Assessment and Plan (BCP)	MoH	2014-03-24	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Training Plan	MoH	2014-04-03	None	N/A	Closed	Signed off by MAXIMUS and MoH

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Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet – Release 3 Test Plan	MAXIMUS	2014-05-02	None	N/A	Closed	Signed off by MAXIMUS team (internal work product)
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MoH	2014-04-23	None	2014-05-16	Closed	Configuration settings for Go-Live have been documented and approved.
MAXIMUS	PharmaNet – Release 3 Disaster Recovery Assessment and Plan	MoH	2014-04-14	None	2014-05-16	Closed	Signed off by MAXIMUS and MoH
MAXIMUS	PharmaNet R3 Privacy Impact Assessment (PIA)	MoH	2014-03-27	None	2014-05-16	Closed	Signed off by MAXIMUS and MoH
MAXIMUS	PharmaNet R3 Go / No Go	MoH	2014-06-17	None	2014-06-17	Closed	Presentation made to JEC on June 17 and approval to deploy provided
MAXIMUS	PharmaNet R3 Stabilization Criteria and Plan	MoH	2014-07-08	Signature	2014-07-14	Pending	Signed off by MAXIMUS and delivered to MoH for signatures

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G	Status Y	Status R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD

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Bi-weekly Project Progress Report

Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
Y	553643	L	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19 2014.	MAXIMUS has not been able to proceed with testing of the transaction code as per the project plan.	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has also worked additional weekday hours and weekends. Code delivered by Catamaran on March 19 2014 has been fully tested.	2014-MAR-19
Y	553680	M	Shared Services BC (SSBC) has recently implemented a change freeze for all infrastructure services, which also includes services delivered by all vendor partners, including HP Advanced Solutions, IBM, and TELUS. In the meantime, all change requests are being reviewed by Office of the Chief Information Officer (OCIO) executive to determine if there are any significant risks. For clients who have pending iStore orders or Requests for Change (RFC) scheduled, please be advised that these requests will be reviewed and assessed as per the process outlined above and may be rescheduled. Should clients require an emergency change during the freeze, they are reminded of the Request for Special Processing procedure.	May have an impact on the scheduled Go-Live date for R3: • if MAXIMUS is unable to engage SSBC/HPAS when required; • If the MoH iStore request for screen code packaging is delayed; • If HPAS is not available to roll-out the packaged screen code on the Go-Live date.	The following steps could be taken to address this issue: • Follow the SSBC "Request for Special Processing" procedure; • Escalate quickly if this issue is raised Note: Recent experience with SSBC/HPAS has been at regular service levels (i.e., no impact due to the freeze) The freeze has been removed but there is a backlog of activities that may still impact requests unless they are of higher priority.	
Y	553616	H	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables appears to have impacted application performance and this would jeopardize SLAs. This may in turn jeopardize the scheduled	The following steps are being undertaken by MAXIMUS and Catamaran to determine if the code changes have impacted the performance of the application: • Extensive testing of the application • Logs are being captured and analyzed • Code is being reviewed • Twice daily joint review sessions	June 13, 2014

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Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
				Go-live date.	• Planning for next steps	
R	553689	H	Deployment was unsuccessful due to code issues in dealing with empty tables and also a performance issue	Unable to proceed with deployment.	MAXIMUS has done the following to deal with these issues: • Instructed Catamaran to review code and fix code related to handling of empty tables (done) • Conducted additional performance testing with various scenarios to determine cause of performance issue **NOTE: There is an ongoing risk that performance could be impacted by the release code (e.g., methadone PINs have a longer response time,** s.17 s.17 **However, MAXIMUS does not feel that this is an issue that should prevent deployment from proceeding.**	ASAP

3.2 Key/Active Project Risks (Reported out of ITG Search Results) – risks being actively monitored are highlighted in yellow

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during	Elicitation of detailed business requirements may	MAXIMUS will conduct internal reviews of the detailed business	M	L	Scope Budget

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		design	not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	requirements in order to determine the scope of the project			Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium term.	H	H	Budget, Schedule
553654	M	Testing of the screens has been delayed from the original plan and delivery of packaged code to MoH 8 weeks prior to go-live is going to be difficult to achieve	Shared Services has requested an 8 week lead time for packaging. If the screen code package cannot be delivered by the end of April the 8 week lead time will not be met and Shared Services may not be able to package the code in time for Go-live.	MAXIMUS is focusing effort on testing of the screen code in April but there is a dependency on MoH participants in the BAT. Coordination of participants has begun and MoH needs to ensure that participants are available. MoH could request that Shared Services package the screen code with less than 8 weeks notice.	M	M	Schedule
553658	M	MoH is having a Risk and Controls review of PharmaNet Release 3.0 and in order for the project to be approved for Go-live, the MoH executive must approve the Risk and Controls report, and the	MoH does not want the Go-live date to move because of cost savings that will be lost due to delay. MAXIMUS does not want to move the Go-live date to move because of proximity to the testing/deployments for the	The Go-live decision presentation date could be moved to a few days later if the Risk and Controls report has not been approved by the MoH executive by June 13. MAXIMUS will know if there are any issues with going live June 25 earlier	H	M	Schedule

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		report must be accepted by the Comptroller General's office. The report is due around June 12 2014 and the Go-live decision is currently planned for June 13. Approval for deployment in the June 25 change window should occur at the June 18 Change Management meeting. These dates are very tight so any slippage could jeopardize the Go-live date.	Medigent (RAPID) project and competition for the same infrastructure resources.	than June 13 so the presentation is a formality. MoH will work with Deloitte to get the Risk and Controls review done as quickly as possible. MAXIMUS will respond to any requests from Deloitte in a timely fashion.			
553668	H	PNet R3 is currently designed/developed to adjudicate all claims from DIS only pharmacies to zero (i.e., the client will not be reimbursed for any legitimate purchases from DIS only pharmacies). The new requirement is for the off-line process to adjudicate the claim as per the usual rules and pay the appropriate amount to the client.	If the decision is not made in a timely fashion (1 week) then it will not be possible to implement the change without impacting the project schedule. A different decision will then be required - delay the project to incorporate the new requirement or proceed as is and implement the new requirement after PNet R3 Go-live. Therefore the impact is either a project delay or an implementation where clients are not reimbursed for purchases from DIS only pharmacies	MoH to provide a decision as to whether or not the recommendation (i.e., modify transaction code to allow adjudication of DIS only claims submitted by clients) should be implemented within 1 week (by April 30 2014). MoH decision is to not make any changes to R3 but to pursue options for addressing adjudication of client claims for DIS only pharmacy dispenses through operational avenues.	H	H	Scope Schedule

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)

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	Cancelled	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Pending	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)
CR2014-005	Approved	Provide PharmaNet application screen code to the Colleges and HLBC.	Additional effort required by MAXIMUS and therefore additional budget required.
CR2014-006	Pending (waiting for MoH signatures)	s.17 BGTS s.17 limits are also set to default values.	Additional effort required by MAXIMUS to update Business Configuration document and values, adjust training approach/materials and communication materials, and test for no limits scenarios.

	Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)
CR2014-007	Pending (waiting for MoH approval to proceed with signature gathering)	Investigate performance issues with PNet R3 code developed by Catamaran.	Performance of the PNet R3 code developed by Catamaran will not allow MAXIMUS to meet the SLA for Claims transactions. It needs to be improved prior to Go-live.

4 Detail

No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
1.	Project Charter	Oct 18, 2013			Approved
2.	High-level Business Requirements	Oct 18, 2013			Approved
3.	Training Strategy	Dec 13, 2013		Dec 19, 2013	Approved
4.	Updated Project Charter	Mar 14, 2014	Apr 9, 2014	N/A	Approved
5.	Functional Requirements	Dec 17, 2013	Feb 14, 2014	Jan 20, 2014	Approved
6.	Non-functional Requirements	Dec 17, 2013	Feb 14, 2014	Mar 25, 2014	Approved
7.	Security and Threat Risk Assessment (STRA)	Mar 14, 2014	Mar 25, 2014	N/A	No further MAXIMUS involvement required
8.	Business Continuity Assessment and Plan (BCP)	Feb 14, 2014	Mar 28, 2014	Mar 24, 2014	Approved
9.	Impact Assessment (internal work product)	Jan 2014	Apr 2, 2014	NA	Approved
10.	Functional Specifications	Jan 31, 2014	Apr 30, 2014	N/A	Complete
11.	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	Apr 30, 2014	May 2, 2014	N/A	Complete
12.	Test Plan (no change to approved R1/R2 Strategy)	Dec 31, 2013	Apr 30, 2014	N/A	Complete
13.	BAT - screens	May 20, 2014	May 6, 2014	N/A	Complete
14.	Training Plan	Jan 2014	Mar 28, 2014	Apr 11, 2014	Complete
15.	Disaster Recovery Assessment and Plan (DRP)	Mar 24, 2014	Apr 23, 2014	Apr 23, 2014	Complete

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No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
16.	Testing - transactions	N/A	May 23, 2014	N/A	Complete
17.	Provide extract to Health Ideas for testing	TBD	May 23, 2014	N/A	Complete
18.	Work Instructions – Internal	May 20, 2014	May 23, 2014	N/A	Complete
19.	Privacy Impact Assessment (PIA)	Feb 14, 2014	May 28, 2014	Apr 4, 2014	Complete
20.	Development - Build	May 22, 2014	Jun 6, 2014	N/A	Complete
21.	Production Support Plan	Mar 17, 2014	Jun 13, 2014	N/A	Complete
22.	Development – Function/Integration Testing	May 15, 2014	Jun 13, 2014	N/A	Complete
23.	Test Results Summary	Jun 25, 2014	Jul 25, 2014	N/A	In Progress
24.	Defect Action Plan	Jun 25, 2014	Jul 25, 2014	N/A	In Progress
25.	Deployment Go/No Go presentation	May 15, 2014	Jun 17, 2014	Jun 17, 2014	Complete
26.	Training Development and Execution	Apr 16, 2014	Jun 20, 2014	N/A	Complete
27.	Deployment Strategy	May 2014	Jun 6, 2014	N/A	Complete
28.	Deployment Plan	May 2014	Jul 30, 2014	N/A	Complete (needs to be revised for second deployment attempt)
29.	Deployment	May 2014	Jul 30, 2014	N/A	Unsuccessful (needs to be re-scheduled for second deployment attempt)
30.	Escrow Deposit	Aug 13, 2015	Sep 22, 2014	N/A	Not Started
31.	Project Closure	Aug 30, 2015	Sep 30, 2014	N/A	Not Started

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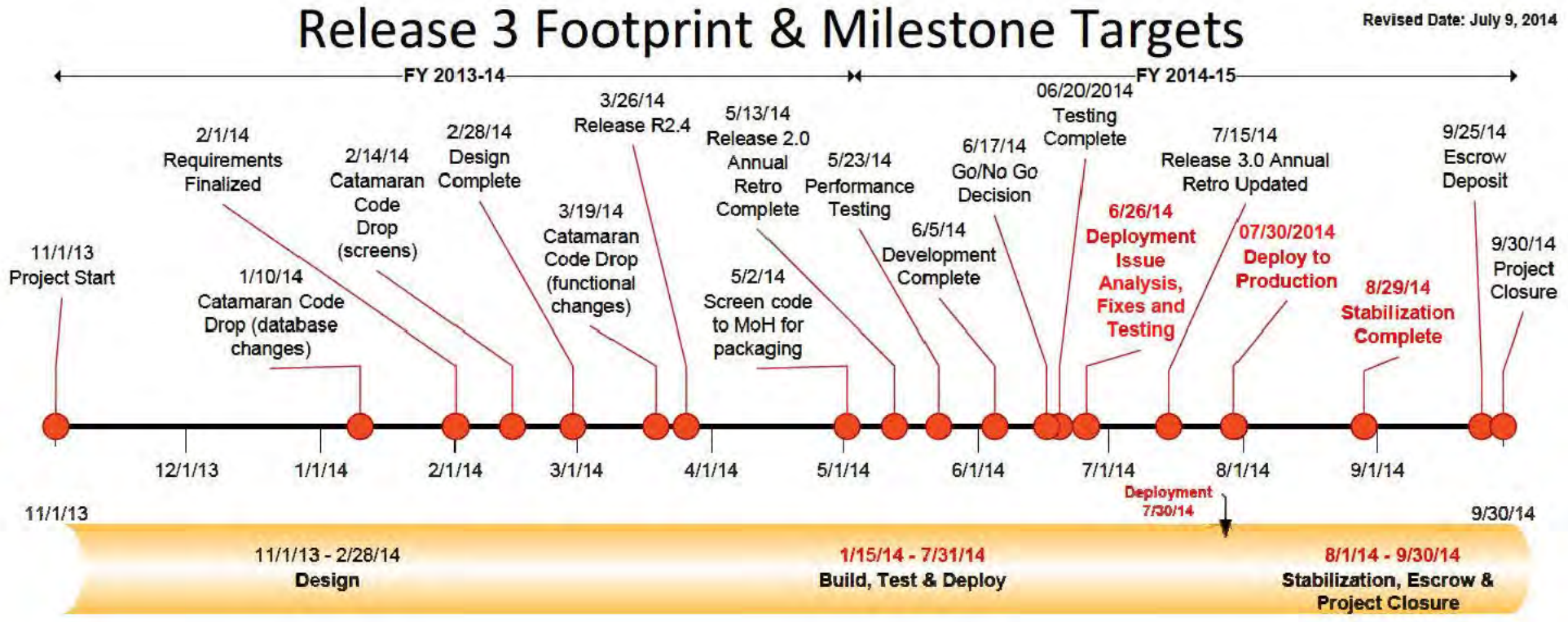
5 **Project SDLC Phase Metrics –** *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*



	Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Feb-17	2014-Mar-21
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Planning Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Planning – March 31, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – March 31, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (To be deployed March 26) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients	G

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	• Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips) • Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • none	
Quality	Adhering to MAXIMUS methodology	**G**
Schedule	Planning (Design) Activities: o Functional Requirements complete – approved by MoH and signed off o Non-Functional Requirements – approved by MoH, signature gathering in progress o Functional Specifications in progress o Technical Specifications in progress o Test Strategy/Plan in progress o Training Plan in progress Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19). This has impacted the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources. The unavailability of these resources has impacted the team's ability to accomplish the tasks as planned for February and March.	**Y**
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. This is overdue and awaiting Ministry approval.	**Y**

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

1.1 Ministry of Health Communications Status

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of Communications: • Develop a communications plan containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan – final, signed off deliverable due May 16th • in progress Execute Communications Plan – TBD as per Communications Activities Matrix • not started Schedule Concerns: • none	G

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Action Items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	None	2014-03-07	Closed	Signed and PDF-ed document received from MoH.
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MAXIMUS	2014-02-28	Signoff	2014-04-01	Pending	MoH has accepted the document and the sign-off process is now in progress.
MAXIMUS	Change Order #65	MOH	2014-03-13	Signoff	2014-03-17	Overdue	MAXIMUS delivered final version to MoH March 13, 2014. Waiting for BMO to signoff so that January and February invoices can be paid.

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G	Status Y	Status R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
		R	553643	H	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19 2014.	MAXIMUS has not been able to proceed with testing of the transaction code as per the project plan.	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has also worked additional weekday hours and weekends. The code was delivered March 19 and MAXIMUS has loaded it to the test environment and is actively testing it.	2014-MAR-19

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Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
Y	TBD	M	Healthideas will not be ready to process the new R3 data.	Program information will not be readily available.	Complete development and testing of the new Healthideas extract as part of R3. Conduct testing with Healthideas when they are ready.	TBD

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule
553644	H	The EMPI server migration	Due to the impact of the	MAXIMUS is doing what we can	H	H	Budget,

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		has resulted in substantial impact to HIBC both in terms of technical and operational resources.	enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium term.			Schedule

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Submitted	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality

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	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 CO 65 has been updated to reflect this change.

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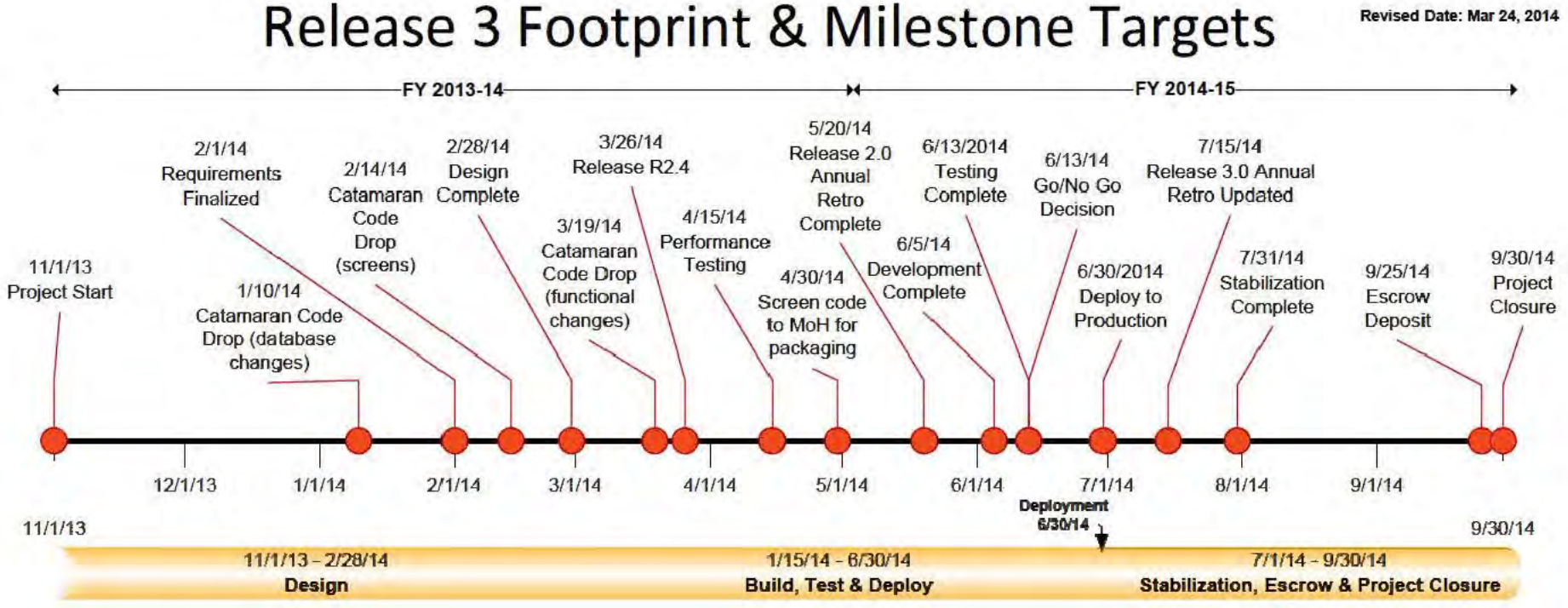
4 Project Footprint



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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-June-28	2014-July-22
Project Plan Version:	PharmaNet R3	**PLC/Project Phase**	Deployment Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Deployment – TBD	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Go / No Go Decision – July 23 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed April 23) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G	Y	R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • Special Authority Limits • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to	G		

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	blood glucose testing strips) • Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • s.17	
Quality	Adhering to MAXIMUS methodology During the last month, the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.	**G**
Schedule	Development Activities: o Empty Tables issue – code fixed, functional testing complete o Performance issue (e.g., Methadone PIN) – testing complete o Go / No Go Presentation – July 23 2014 for July 30/31 deployment Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were	**Y**

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	scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o Screen code BAT was not completed by the end of April and this is required to give MoH System Services and SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code was delivered on May 2. o MoH MBPSD coordinated participation in screen code BAT for May 5/6 - successful BAT. MoH System Services will use the revised May 2 screen code to conduct the connectivity testing, pre-packaging activities and submit iStore Project request to SSBC (done). o Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). o Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (June 26) will be required for the data warehouse refresh. This means that the data warehouse will have stale data until the Friday morning (June 27). o CR 2014-006 – s.17 o Testing has uncovered a potential performance issue that we are currently re-testing and analyzing. The performance issue has been resolved. The draft DR that was raised has been cancelled. o MoH requested all PNet test databases shut down due to issue of real PHNs being used in test environments. This required unplanned effort by the PNet R3 team and also delayed functional testing of the code that was revised to address the empty table issue. Effort was also required to re-start the test environments.	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. o The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. MoH has paid the submitted invoice amount. o CR 2014-005 - Provision of screen code and deployment support for the Colleges and HLBC – approved and signed by MAXIMUS and MoH. o CR 2014-006 – s.17 o CR2014-007 – Resolve Performance Issue – approval received from JEC to proceed with the work prior to submission of the CR. The CR was submitted to MoH for review on June 12 2014 but has not been approved for signature. MAXIMUS is unable to bill for this work although the work has been completed.	**R**

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1.1 Ministry of Health Communications Status

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of Communications: • Develop and execute a communications plan for PNet R3.0 containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan • Final, signed off communications plan – complete for June 26th Implementation attempt • Updated communication plan for July 31st Implementation – draft in final review Execute Communications Plan –as per the Communications Activities Matrix • Complete for June 26th implementation attempt • Pending for July 31st implementation Schedule Concerns: • dependent on determining the next go-live date	G

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Action Items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet R3 Stabilization Criteria and Plan	MoH	2014-07-08	Signature	2014-07-14	Pending	Signed off by MAXIMUS and delivered to MoH for signatures
MAXIMUS	PharmaNet R3 Go / No Go (July 30/31 2014)	MoH	2014-07-23	Approval	2014-07-25	Pending	Presentation to be made to JEC on July 23.

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues

Status G	Status Y	Status R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
		R	553689	H	Deployment was unsuccessful due to code issues in dealing with empty tables and also an unrelated performance issue	Unable to proceed with deployment.	MAXIMUS has done the following to deal with these issues: • Instructed Catamaran to review code and fix code related to handling of empty tables (done) • Conducted additional performance testing with various scenarios to determine cause of performance issue **NOTE: There is an ongoing risk that performance could be impacted by the release code (e.g., methadone PINs have a longer response time,** s.17 s.17 **However, MAXIMUS does not feel that this is an issue that should prevent deployment from proceeding.**	2014-Jul-25

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3.2 Key/Active Project Risks

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553658	High	Ministry Risk and Controls are in question right now	Go-live could be delayed	Ministry Risk and Controls under review at this time	H	M	Schedule
553616	High	Application performance may be impacted	Potential impact to ongoing performance	Performance will need to be monitored closely during stabilization and beyond	H	L	Performance

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Cancelled	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality Performance of the Catamaran code became an issue that was addressed via CR 2014-007.
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 . CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

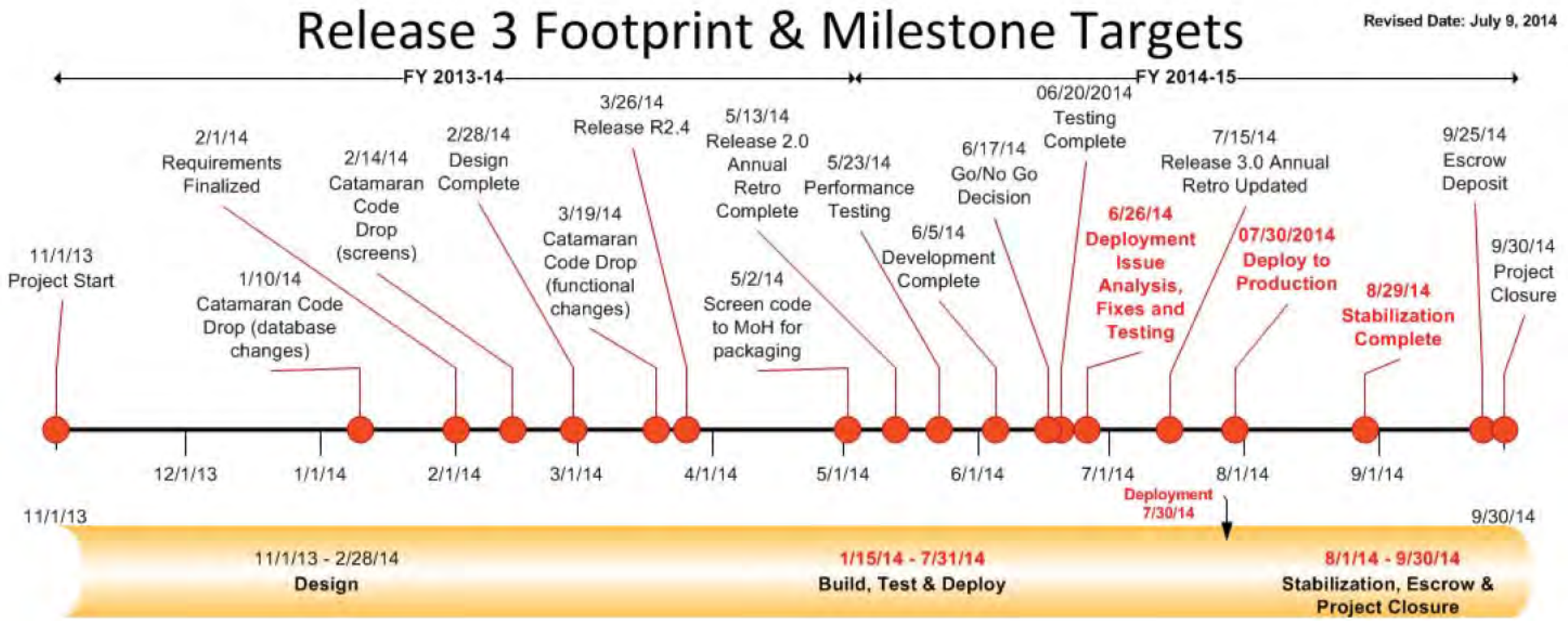
	Approved	MAXIMUS request for Go / No Go decision for deployment of PharmaNet Release 3.0 on June 25/26	Approval received from JEC on June 17, 2014.
	Pending	MAXIMUS request for Go / No Go decision for deployment of PharmaNet Release 3.0 on July 30/31	Approval to be requested from JEC on July 23, 2014.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)
CR2014-005	Approved	Provide PharmaNet application screen code to the Colleges and HLBC	Additional effort required by MAXIMUS and therefore additional budget required.
CR2014-006	Approved	Do not implement any limits on s.17 BGTS when the application is deployed	Additional effort required by MAXIMUS and therefore additional budget required.
CR2014-007	Pending	Resolve performance issue with PharmaNet Release 3.0 application that is impacting the claims transaction SLA	Additional effort required by MAXIMUS and therefore additional budget required.

	Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

4 Project Footprint



	Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Bi-weekly Project Progress Report

MAXIMUS CANADA
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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2013-Dec-16	2014-Jan-10
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Planning Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Planning – March 31, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – January 31, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • • • Service Provider enrolment ▪ support for new regulations • Publicly funded vaccine administration ▪ new adjudication rules for Service Claims			

	Comments	Status G / Y / R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis • Design • Build • Test case development and execution • Training • Deployment • For a complete list of the deliverables that will be produced refer to Appendix A of the Project Charter. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients	Y

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	• Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips) • Service Provider Enrolment Program roll-out Scope Concerns • Some scope decisions still outstanding	
Quality	Adhering to MAXIMUS methodology	**G**
Schedule	Planning (Design) Activities: o Functional Specifications in progress o Technical Specifications in progress o Test Strategy/Plan in progress o Training Strategy in progress Schedule Concerns: o Ramp-up of resources has been slower than anticipated o Some deliverables will be completed later than originally planned. It is likely that this will impact the deployment date – to be determined during the re-planning/re-estimating exercise following completion of the Design Phase (end of January / early February).	**Y**
Budget	Cost Concerns: o Reductions in scope being determined (reporting component outstanding) – may affect the budget but is also drawing key team member attention away from delivering the project	**Y**

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Summary

2.1a Total Project Schedule (Discoverer Reporting out of ITG)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**03/31/2014**				**66%**		**33%**	**In Progress**
PLC Phase – Development	**01/01/2014**	**06/25/2014**				**63%**		**9%**	**In Progress**
PLC Phase – Deployment	05/01/2014	05/30/2014		s.21					MAXIMUS BC
PLC Phase – Stabilization	06/02/2014	08/13/2014							MAXIMUS BC
Release 4.0 – Exploration	**01/01/2014**	**03/25/2014**				**1%**		**<1%**	**On Hold**

2.2 Total Project Budget

Note: the numbers below do not match with the report delivered Jan 6 2014 (alignment will occur once the re-estimating and re-planning process has been undertaken at the end of January / start of February).

	Estimated	Spent YTD	Spent Dec 2013	Remaining	Estimate to Complete	Estimate at Completion	Burn Rate	Work plan
Release 3.0 Budget	$2,997,932	$351,605	$128,478	$2,646,327	$2,646,327	$2,997,932	11.7%	0%
Change Requests	$0	$0	$0	$0	$0	$0		0%
Total	**$2,997,932**	**$351,605**	**$128,478**	**$2,646,327**	**$2,646,327**	**$2,997,932**	11.7%	0%

2.3 Waiting for Action - External

Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

	Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	Complete document	2014-01-31	Submitted	In progress. Working meetings scheduled for Dec. and Jan. Ministry to provide business configuration values for PharmaNet Release 3 to be used in functional testing and as input to communications and training deliverables. Ministry to provide action item due dates by Wed Jan 15th
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Payments Adjustment Processes	MOH	2013-12-13	Provide answers to questions/Confirm requirements	2013-12-20	Closed	Need confirmation to be able to finalize detailed functional requirements. Completed.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	Revise document based on MoH feedback, gather signatures	2014-01-17	Signatures being gathered	MAXIMUS to update document based on MoH feedback and gather internal signatures, then deliver to MoH for signatures

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G Y R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability Percent	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will rigorously test the application prior to deployment	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

			application enhancements				
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Pending	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. MoH to provide decision by January 10 2014
	Pending	Scope of STRA – only changes or full PharmaNet STRA	If full STRA is required, this will impact and scope and budget for the project. Schedule may be impacted as well. MoH to arrange meeting (done – Jan 7 2014) and provide decision by January 17 2014
	Pending	Finalize requirement for new reports	If no new reports are required, this reduces scope and budget for the project. If new reports are needed, need requirements for the reports in order to finalize functional specifications by end of January 2014. MoH to arrange meeting (week of Jan 6-10) and provide decision by January 17 2014
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	If Release 4.0 requirements are not started early in January 2014 the project burn rate will be further impacted since the original plan was to start the work in December 2013. Release 4.0 requirements and estimate will not be included in the Release 3.0 project.

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

4 Detail

No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
1.	Project Charter	Oct 18, 2013		Approved
2.	High-level Business Requirements	Oct 18, 2013		Approved
3.	Test Strategy and Plan	Dec 31, 2013	Feb ??, 2013	In Progress
4.	Training Strategy	Dec 13, 2013	Dec 19, 2013	Signatures being gathered
5.	Training Plan	Feb ?, 2013		In Progress
6.	Impact Assessment	Jan ?, 2013	NA	In Progress
7.	Security and Threat Risk Assessment	Mar 14, 2014		Not Started
8.	Functional Requirements	Jan 31, 2013		In Progress
9.	Non-functional Requirements	Jan 31, 2013		In Progress
10.	Functional Specifications	Jan 31, 2014		In Progress
11.	Privacy Impact Assessment	Feb 14, 2014		Not Started
12.	Development - Build	May 22, 2014	N/A	Not Started
13.	Development – Function/Integration Testing	May 15, 2014		Not Started
14.	Work Instructions – Internal	Mar 20, 2014		Not Started
15.	Deployment/Cutover Strategy/Plan	May ??, 2014		Not Started
16.	Business Continuity Assessment and Plan	Feb 14, 2014		Not Started

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
17.	Disaster Recovery Assessment and Plan	Mar 24, 2014		Not Started
18.	Production Support Plan	Mar 17, 2014		Not Started
19.	Testing – BAT	May 20, 2014	N/A	Not Started
20.	Test Results Summary	Jun 25, 2014		Not Started
21.	Defect Action Plan	Jun 25, 2014		Not Started
22.	Deployment Go/No Go presentation	May 15, 2014		Not Started
23.	Training	Apr 16, 2014	N/A	Not Started
24.	Deployment	May 2014	N/A	Not Started
25.	Escrow Deposit	Aug 13, 2015		Not Started
26.	Project Close	Aug 30, 2015	N/A	Not Started

5 **Project SDLC Phase Metrics –** *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*

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Bi-weekly Project Progress Report

MAXIMUS CANADA
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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Feb-17	2014-Feb-28
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Planning Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Planning – March 31, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – March 31, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status (G / Y / R)
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 s.17	G

Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red =	Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	• Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, training and communications • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs s.17 Scope Concerns • none	
Quality	Adhering to MAXIMUS methodology	G
Schedule	Planning (Design) Activities: o Functional Requirements complete – sent to MoH for acceptance sign-off o Non-Functional Requirements – sent to MoH for feedback o Functional Specifications in progress o Technical Specifications in progress o Test Strategy/Plan in progress o Training Strategy in progress o Re-estimate complete Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) has been delayed by at least one week (delivery to MAXIMUS was targeted for Feb 28). This is impacting the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS is monitoring the situation very closely and has requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible. o The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources. The unavailability of these resources has impacted the team's ability to accomplish that tasks as planned for February and may also have a similar impact for March.	Y
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), has been provided to MoH for review and approval	G

Comment [PLH1]: Was training removed?

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Ministry of Health Communications Status

	Comments	Status G Y R

Scope	The following activities will be undertaken within the scope of Communications:
	• Develop a communications plan containing:
	  ▪ Stakeholder Engagement matrix
	  ▪ Communications Activities matrix
	
	Scope Concerns
	• none
		G

Schedule	Communications Plan – final, signed off deliverable due May 16: • in progress Execute Communications Plan – TBD as per Communications Activities Matrix: • not started Schedule Concerns: • none	G

Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red =	Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Summary

2.1a Total Project Schedule (Discoverer Reporting out of ITG)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013	s.21			100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**03/31/2014**				**102%**		**67%**	**In Progress**
PLC Phase – Development	**01/01/2014**	**06/25/2014**				**86%**		**26%**	**In Progress**
PLC Phase – Deployment	06/01/2014	06/30/2014							Not Started
PLC Phase – Stabilization	07/01/2014	09/30/2014							Not Started

2.2 Total Capital Budget

PharmaNet Release 3.0 (including Release 4.0 Business Requirements and Estimate)	A Original Estimate (Nov 8 2013)	B Actual for Apr to Oct 2013 (not included in "A")	C Revised Estimate (Feb 17 2014) * includes "B"	D Spent To-date	E Spent Last Month - Feb 2014	F=C-D Remaining	G Estimate to Complete	H Estimate at Completion	I=D/C Burn Rate
Release 3.0 Budget	$3,359,160	$113,000	$3,043,221	$1,087,916	$332,252	$1,955,305	$1,955,305	$3,043,221	36%
Change Requests	$0	$0	$0	$0	$0	$0	$0	$0	
Total	**$3,359,160**	**$113,000**	**$3,043,221**	**$1,087,916**	**$332,252**	**$1,955,305**	**$1,955,305**	**$3,043,221**	**36%**

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	2014-01-31	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	2014-01-31	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	2014-02-14	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	None	N/A	Closed	Alternate course of action selected, outside of scope of R3

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	Acceptance and Signoff	2014-03-07	Open	
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MoH	2014-02-28	Review and Feedback	2014-03-07	Open	Walkthrough scheduled for Mar 4, 2014

Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red =	Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G Y R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule

Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red =	Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule
553643	H	Transaction code delivery is delayed by at least 1 week and this may delay the Go-live date.	Creation of environments and testing cannot proceed (other than minor setup activities) until the transaction code is received. Changes to the transaction code represent the majority of the changes for R3.	MAXIMUS is undertaking all setup activities poss ble without the transaction code. Catamaran is deploying additional resources and is working extra time to resolve the issues with the transaction code. Other tasks are being moved forward in the schedule.	H	M	Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium term.	H	H	Budget, Schedule

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

	Cancelled	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Submitted	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescr bing transactions which could also be impacted by the Release 3.0 functionality

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

4 Detail (dates will be updated for next report)

No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
1	Project Charter	Oct 18, 2013		Approved
2	High-level Business Requirements	Oct 18, 2013		Approved
3	Training Strategy	Dec 13, 2013	Dec 19, 2013	Approved

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
4	Updated Project Charter	Mar 14, 2014	N/A	In Progress (will require MoH sign-off)
5	Test Strategy and Plan	Feb 28, 2014	Mar ??, 2013	In Progress
6	Impact Assessment	Mar 7, 2014	NA	In Progress
7	Functional Requirements	Feb 14, 2014	Jan 20, 2014	Waiting for MoH approval and signoff
8	Non-functional Requirements	Feb 14, 2014	Mar 5, 2014	Waiting for MoH review and feedback
9	Functional Specifications	Mar 31, 2014	Jan 20, 2014	In Progress
10	Privacy Impact Assessment	Mar 28, 2014		In Progress
11	Training Plan	Mar 28, 2014		In Progress
12	Business Continuity Assessment and Plan	Mar 28, 2014		Not Started
13	Security and Threat Risk Assessment	Mar 25, 2014		Not Started
14	Production Support Plan	Jun 13, 2014		Not Started
15	Work Instructions – Internal	May 27, 2014	NA	Not Started
16	Disaster Recovery Assessment and Plan	Apr 25, 2014		Not Started
17	Development - Build	Jun 6, 2014	N/A	In Progress
18	Development – Function/Integration Testing	Jun 13, 2014		Not Started
19	Provide extract to Health Ideas for testing	TBD	N/A	Not Started
20	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	Apr 30, 2014	N/A	Not Started
21	Testing – BAT	Apr 14, 2014	N/A	Not Started
22	Test Results Summary	Jul 31, 2014		Not Started
23	Defect Action Plan	Jul 31, 2014		Not Started
24	Deployment Go/No Go presentation	Jun 18, 2014		Not Started
25	Training	Jun 20, 2014	N/A	Not Started

Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red =	Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

No.	Deliverable	Estimated Completion	Ministry Walkthrough	Status
26	Deployment/Cutover Strategy/Plan	Jun 20, 2014		Not Started
27	Deployment	Jun 30, 2014	N/A	Not Started
28	Escrow Deposit	Sep 22, 2014	N/A	Not Started
29	Project Close	Sep 30, 2014	N/A	Not Started

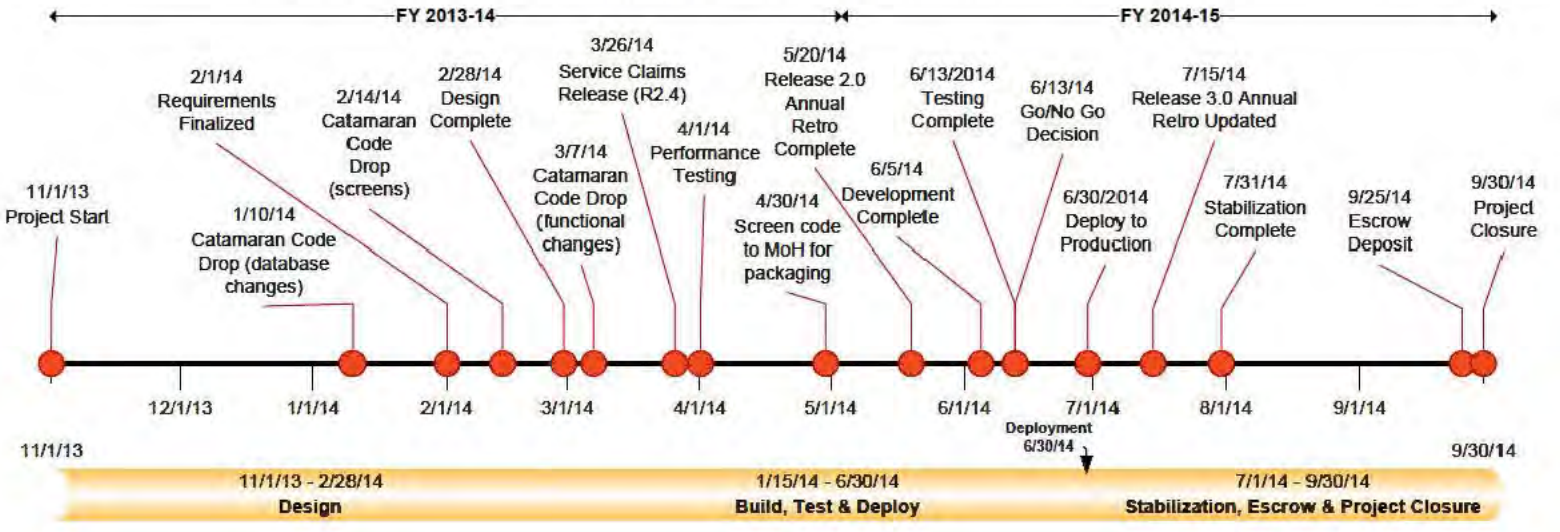
5 **Project SDLC Phase Metrics –** *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

MAXIMUS CANADA

Release 3 Footprint & Milestone Targets

Revised Date Feb 26, 2014



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Bi-weekly Project Progress Report

MAXIMUS CANADA
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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Mar-03	2014-Mar-14
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Planning Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Planning – March 31, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – March 31, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (To be deployed March 26) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips)	G

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	• Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • none	
Quality	Adhering to MAXIMUS methodology	G
Schedule	Planning (Design) Activities: o Functional Requirements complete – approved by MoH o Non-Functional Requirements – MAXIMUS has updated the document with feedback from MoH o Functional Specifications in progress o Technical Specifications in progress o Test Strategy/Plan in progress o Training Plan in progress o Re-estimate complete Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) has been delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and is now expected March 19). This is impacting the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS is monitoring the situation very closely and has requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible. The MAXIMUS team is working on tasks that are scheduled for later in the project as well as preparing for testing as soon as the code is received and installed. o The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources. The unavailability of these resources has impacted the team's ability to accomplish the tasks as planned for February and may also have a similar impact for March.	Y
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. This is overdue and awaiting Ministry approval.	R

Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red =	Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

Ministry of Health Communications Status

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of Communications: • Develop a communications plan containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan – final, signed off deliverable due May 16th • in progress Execute Communications Plan – TBD as per Communications Activities Matrix • not started Schedule Concerns: • none	G

Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red =	Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Summary

2.1a Total Project Schedule (updated monthly)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**03/31/2014**				**102%**		**67%**	**In Progress**
PLC Phase – Development	**01/01/2014**	**06/25/2014**		s.21		**86%**		**26%**	**In Progress**
PLC Phase – Deployment	06/01/2014	06/30/2014							Not Started
PLC Phase – Stabilization	07/01/2014	09/30/2014							Not Started

2.2a Total Capital Budget (updated monthly)

PharmaNet Release 3.0 (including Release 4.0 Business Requirements and Estimate)	A Original Estimate (Nov 8 2013)	B Actual for Apr to Oct 2013 (not included in "A")	C Revised Estimate (Feb 17 2014) * includes "B"	D Spent To-date	E Spent Last Month - Feb 2014	F=C-D Remaining	G Estimate to Complete	H Estimate at Completion	I=D/C Burn Rate
Release 3.0 Budget	$3,359,160	$113,000	$3,031,781	$1,087,916	$332,252	$1,943,865	$1,943,865	$3,031,781	36%
Change Requests	$0	$0	$0	$0	$0	$0	$0	$0	
Total	**$3,359,160**	**$113,000**	**$3,031,781**	**$1,087,916**	**$332,252**	**$1,943,865**	**$1,943,865**	**$3,031,781**	**36%**

	Green =	No concerns on schedule and within budget	Yellow =	Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2.2b JEC Monthly Actual and Estimate Tracking (updated monthly)

$s	Actual Apr-Oct 2013	Actual November	Actual December	Actual January	Actual February	Estimate March	Fiscal Total FY13/14	Estimate April	Estimate May	Estimate June	Estimate July	Estimate August	Estimate September	Fiscal Total FY14/15	Project Total
PNet R3.0	$113,000.00	$222,697.70	$128,478.21	$291,058.93	$332,367	$500,101	$1,587,703	$517,915	$385,030	$321,748	$175,482	$18,054	$25,420	$1,443,649	$3,031,352
PNet R4.0	$0.00	$429.00	$0.00	$0.00	$0	$0	$429	$0	$0	$0	$0	$0	$0	$0	$429
Total	$113,000.00	$223,126.70	$128,478.21	$291,058.93	$332,367	$500,101	$1,588,132	$517,915	$385,030	$321,748	$175,482	$18,054	$25,420	$1,443,649	$3,031,781
Hrs MAXIMUS							s.21								

CO 64
CO 65

Financial Adjustments

Removed $11,440 from CO 65 due to removal of effort for STRA s.21

Notes

PNet R3.0 estimates include MAXIMUS and Catamaran effort
The number of MAXIMUS hours per month includes IT and BAT resources which are charged at different rates
Original estimate for February reduced due to delays in requirements decisions
Original estimate for March increased to make up for reduction in February effort
Requirements changes that have **increased** the estimate and/or scope:
- Methadone Payment Process change
- s.17
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- s.17

Requirements changes that have **decreased** the estimate and/or scope:
- PharmaNet R4.0 requirements and estimate removed from scope
- Stakeholder Engagement Strategy and Plan assigned to MoH
- Provider enrolment operational activities, training and communications removed from scope
- Risk and Controls review removed from scope
- No new reports or report updates
- Stabilization criteria will be loosened to reduce the amount of stabilization support required
- MAXIMUS effort related to the STRA removed from scope

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2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	2014-01-31	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	2014-01-31	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	2014-02-14	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	None	N/A	Closed	Alternate course of action selected, outside of scope of R3
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	Signoff	2014-03-07	Open	. Acceptance has been received, waiting for signed document to be provided by MoH
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MAXIMUS	2014-02-28	Feedback Response	2014-03-17	Open	Wa kthrough completed on Mar 4, 2014. MAXIMUS responding to feedback and updating the NFR document.
MAXIMUS	Change Order #65	MOH		Signoff	2014-03-17	Open	MAXIMUS delivered final version to MoH March 13, 2014. Waiting for BMO to signoff so that January and February invoices can be paid.

Comment [PLH1]: Signed document was sent to Maximus on March 18

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2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G Y R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
R	553643	H	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19 2014.	MAXIMUS has not been able to proceed with testing of the transaction code as per the project plan.	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has also worked additional weekday hours and weekends.	2014-MAR-19

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being	Minimal time has been allowed in the schedule to undertake deliverable	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget

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		delayed	review/approval cycles. Failure to adhere to the schedule will cause delays				
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as poss ble to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium term.	H	H	Budget, Schedule

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3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Cancelled	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Submitted	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescr bing transactions which could also be impacted by the Release 3.0 functionality
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 . CO 65 has been updated to reflect this change.

Comment [PLH2]: David stated on his Feb 14th email that more information will be added ETA: TBD

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

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4 Detail

No.	Deliverable	Original Completion Date	Revised Completion	Ministry Walkthrough Date	Status
1	Project Charter	Oct 18, 2013			Approved
2	High-level Business Requirements	Oct 18, 2013			Approved
3	Training Strategy	Dec 13, 2013		Dec 19, 2013	Approved
4	Updated Project Charter	Mar 14, 2014		N/A	In Progress
5	Impact Assessment	Mar 7, 2014		NA	In Progress
6	Functional Requirements	Feb 14, 2014		Jan 20, 2014	Approved
7	Non-functional Requirements	Feb 14, 2014		Mar 5, 2014	MAXIMUS updating with MoH feedback
8	Functional Specifications	Mar 31, 2014		Jan 20, 2014	In Progress
9	Privacy Impact Assessment	Mar 28, 2014			In Progress
10	Training Plan	Mar 28, 2014			In Progress
11	Business Continuity Assessment and Plan	Mar 28, 2014			In Progress
12	Security and Threat Risk Assessment	Mar 25, 2014		N/A	No further MAXIMUS involvement required
13	Testing – BAT	Apr 14, 2014		N/A	Not Started
14	Disaster Recovery Assessment and Plan	Apr 25, 2014			Not Started
15	Test Strategy and Plan (no change to approved R1/R2 Strategy)	Apr 30, 2014		N/A	In Progress
16	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	Apr 30, 2014		N/A	Not Started
17	Work Instructions – Internal	May 27, 2014		N/A	In Progress
18	Development - Build	Jun 6, 2014		N/A	In Progress
19	Production Support Plan	Jun 13, 2014			In Progress
20	Development – Function/Integration Testing	Jun 13, 2014			Not Started

Comment [PLH3]: When can MAXIMUS provide dates here?

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No.	Deliverable	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
21	Deployment Go/No Go presentation	Jun 18, 2014			Not Started
22	Training	Jun 20, 2014		N/A	Not Started
23	Deployment/Cutover Strategy/Plan	Jun 20, 2014			In Progress
24	Deployment	Jun 30, 2014		N/A	Not Started
25	Provide extract to Health Ideas for testing	TBD		N/A	Not Started
26	Test Results Summary	Jul 31, 2014			Not Started
27	Defect Action Plan	Jul 31, 2014			Not Started
28	Escrow Deposit	Sep 22, 2014		N/A	Not Started
29	Project Close	Sep 30, 2014		N/A	Not Started

Comment [PLH3]: When can MAXIMUS provide dates here?

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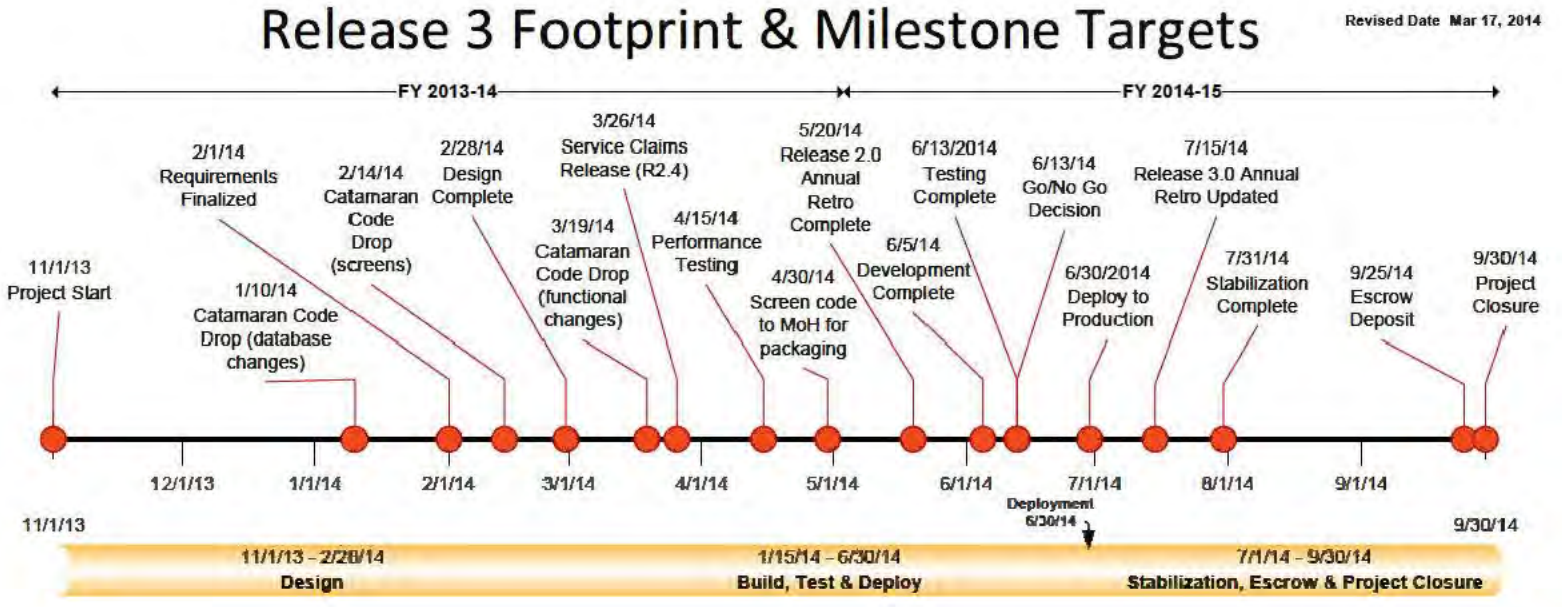
5 **Project SDLC Phase Metrics –** *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*



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Bi-weekly Project Progress Report

MAXIMUS CANADA
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1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Mar-17	2014-Mar-31
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Planning Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Planning – March 31, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – March 31, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (To be deployed March 26) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips)	G

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	• Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • none
Quality	Adhering to MAXIMUS methodology
Schedule	Planning (Design) Activities: o Functional Requirements complete – signed off by MoH o Non-Functional Requirements – approved by MoH, signatures gathered at MAXIMUS, with MoH for signature o BCP accepted by MoH, signatures being gathered o PIA with MoH for review and feedback, walkthru being organized o Functional Specifications in progress o Technical Specifications in progress o Test Strategy/Plan in progress o Training Plan in progress Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources. The unavailability of these resources has impacted the team's ability to accomplish the tasks as planned for February and may also have a similar impact for March. o Screen code testing and packaging may not be completed by the end of April and this is required to give SSBC 8 weeks leadtime ahead of go-live for packaging. MAXIMUS will provide best efforts to meet the April 30 deadline but the

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	schedule is tight due to delays in receiving the code. MoH needs to explore options to reduce the requested 8 week leadtime. BGTS screen code delivered on March 28 2014.	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH.	**G**

Ministry of Health Communications Status

	Comments	Status (G / Y / R)
Scope	The following activities will be undertaken within the scope of Communications: • Develop a communications plan containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	**G**
Schedule	Communications Plan – final, signed off deliverable due May 16th • in progress Execute Communications Plan – TBD as per Communications Activities Matrix • not started Schedule Concerns: • none	**G**

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2 Summary

2.1a Total Project Schedule (updated monthly)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**03/31/2014**				**93%**		**77%**	**In Progress**
PLC Phase – Development	**01/01/2014**	**06/25/2014**		s.21		**91%**		**47%**	**In Progress**
PLC Phase – Deployment	06/01/2014	06/30/2014							Not Started
PLC Phase – Stabilization	07/01/2014	09/30/2014							Not Started

2.2a Total Capital Budget (updated monthly)

PharmaNet Release 3.0 (including Release 4.0 Business Requirements and Estimate)	A Original Estimate (Nov 8 2013)	B Actual for Apr to Oct 2013 (not included in "A")	C Revised Estimate (Feb 17 2014) * includes "B"	D Spent To-date	E Spent Last Month - Mar 2014	F=C-D Remaining	G Estimate to Complete	H Estimate at Completion	I=D/C Burn Rate
Release 3.0 Budget	$3,359,160	$113,000	$2,927,245	$1,588,132	$500,101	$1,339,113	$1,339,113	$2,927,245	54%
Change Requests	$0	$0	$0	$0	$0	$0	$0	$0	
Total	**$3,359,160**	**$113,000**	**$2,927,245**	**$1,588,132**	**$500,101**	**$1,339,113**	**$1,339,113**	**$2,927,245**	**54%**

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Bi-weekly Project Progress Report

2.2b JEC Monthly Actual and Estimate Tracking (updated monthly)

PharmaNet Release 3.0 Project Actuals and Estimates

Updated: March 31, 2014

$s	Actual Apr-Oct 2013	Actual November	Actual December	Actual January	Actual February	Estimate March	Fiscal Total FY13/14	Estimate April	Estimate May	Estimate June	Estimate July	Estimate August	Estimate September	Fiscal Total FY14/15	Project Total
PNet R3.0	$113,000.00	$222,697.70	$128,478.21	$291,058.93	$332,367	$500,101	$1,587,703	$517,915	$385,030	$321,748	$175,482	$18,054	$25,420	$1,443,649	$3,031,352
PNet R4.0	$0	$429	$0	$0	$0	$0	$429	$0	$0	$0	$0	$0	$0	$0	$429
CO 66 Credit	$0	$0	$0	$0	$0	$0	$0	$34,845	$34,845	$34,845	$0	$0	$0	$104,536	$104,536
Total	$113,000.00	$223,126.70	$128,478.21	$291,058.93	$332,367	$500,101	$1,588,132	$483,070	$350,185	$286,903	$175,482	$18,054	$25,420	$1,339,113	$2,927,245
Hrs															

s.21

CO 64
CO 65
CO 66

Financial Adjustments:

Removed $11,440 from CO 65 due to removal of effort for STRA s.21

Apply credit for additional capacity hours (CO 66) to April, May and June s.21

Notes:

PNet R3.0 estimates include MAXIMUS and Catamaran effort
The number of MAXIMUS hours per month includes IT and BAT resources which are charged at different rates
Original estimate for February reduced due to delays in requirements decisions
Original estimate for March increased to make up for reduction in February effort
Requirements changes that have **increased** the estimate and/or scope:
- Methadone Payment Process change
- s.17
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- s.17

Requirements changes that have **decreased** the estimate and/or scope:
- PharmaNet R4.0 requirements and estimate removed from scope
- Stakeholder Engagement Strategy and Plan assigned to MoH
- Provider enrolment operational activities, training and communications removed from scope
- Risk and Controls review removed from scope
- No new reports or report updates
- Stabilization criteria will be loosened to reduce the amount of stabilization support required
- MAXIMUS effort related to the STRA removed from scope

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	2014-01-31	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS				s.17			
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	2014-01-31	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	2014-02-14	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	None	N/A	Closed	Alternate course of action selected, outside of scope of R3
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	None	2014-03-07	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MoH	2014-02-28	Signatures required	2014-04-01	Approved	Document approved by MoH, MAXIMUS signatures have been gathered. Delivered to MoH for signature.
MAXIMUS	Change Order #65	MOH	2014-03-13	None	2014-03-17	Closed	MAXIMUS delivered final version to MoH March 13, 2014. MoH has provided final approval and the CO has been signed off by MAXIMUS and MoH.
MAXIMUS	PharmaNet R3 Business Continuity Assessment	MoH	2014-03-24	Signature	2014-04-11	Approved	MAXIMUS has conducted a walkthru, received and

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Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
	and Plan (BCP)						incorporated MoH feedback, and MoH has accepted the changes. Signatures are being gathered.
MAXIMUS	PharmaNet R3 Privacy Impact Assessment (PIA)	MoH	214-03-27	Review and Feedback	2014-04-10	Pending	MoH to arrange walkthru

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
R	553643	H	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19 2014.	MAXIMUS has not been able to proceed with testing of the transaction code as per the project plan.	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has also worked additional weekday hours and weekends. Code delivered by Catamaran on March 19 2014 and is now being tested.	2014-MAR-19

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

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Bi-weekly Project Progress Report

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is temporary and vital stats will likely be asking us to make additional changes for a long	H	H	Budget, Schedule

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				term solution, but we are not able to spend any more time on this issue in the near to medium term.			
553654	M	Testing of the screens has been delayed from the original plan and delivery of packaged code to MoH 8 weeks prior to go-live is going to be difficult to achieve	Shared Services has requested an 8 week lead time for packaging. If the screen code package cannot be delivered by the end of April the 8 week lead time will not be met and Shared Services may not be able to package the code in time for Go-live.	MAXIMUS is focusing effort on testing of the screen code in April but there is a dependency on MoH participants in the BAT. Coordination of participants has begun and MoH needs to ensure that participants are available. MoH could request that Shared Services package the screen code with less than 8 weeks notice.	M	M	Schedule

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Cancelled	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Submitted	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality

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	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 CO 65 has been updated to reflect this change.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

4 Detail

No.	Deliverable	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
1.	Project Charter	Oct 18, 2013			Approved
2.	High-level Business Requirements	Oct 18, 2013			Approved
3.	Training Strategy	Dec 13, 2013		Dec 19, 2013	Approved
4.	Updated Project Charter	Mar 14, 2014		N/A	In Progress
5.	Impact Assessment	Jan ?, 2013	Mar 7, 2014	NA	In Progress
6.	Functional Requirements	Dec 17, 2013	Feb 14, 2014	Jan 20, 2014	Approved
7.	Non-functional Requirements	Dec 17, 2013	Feb 14, 2014	Mar 25, 2014	With MoH for signature
8.	Security and Threat Risk Assessment	Mar 14, 2014	Mar 25, 2014	N/A	No further MAXIMUS involvement required
9.	Privacy Impact Assessment	Feb 14, 2014	Mar 28, 2014	TBD	With MoH for review and Feedback
10.	Training Plan	Jan ?, 2013	Mar 28, 2014		In Progress
11.	Business Continuity Assessment and Plan	Feb 14, 2014	Mar 28, 2014	Mar 24, 2014	Signatures being gathered
12.	Functional Specifications	Jan 31, 2014	Mar 31, 2014	Jan 20, 2014	In Progress
13.	Testing – BAT	May 20, 2014	Apr 14, 2014	N/A	In Progress

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No.	Deliverable	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
14.	Disaster Recovery Assessment and Plan	Mar 24, 2014	Apr 25, 2014		In Progress
15.	Test Strategy and Plan (no change to approved R1/R2 Strategy)	Dec 31, 2013	Apr 30, 2014	N/A	In Progress
16.	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	Apr 30, 2014		N/A	Not Started
17.	Work Instructions – Internal	May 20, 2014	May 27, 2014	N/A	In Progress
18.	Development - Build	May 22, 2014	Jun 6, 2014	N/A	In Progress
19.	Production Support Plan	Mar 17, 2014	Jun 13, 2014		In Progress
20.	Development – Function/Integration Testing	May 15, 2014	Jun 13, 2014		In Progress
21.	Deployment Go/No Go presentation	May 15, 2014	Jun 18, 2014		Not Started
22.	Training	Apr 16, 2014	Jun 20, 2014	N/A	Not Started
23.	Deployment/Cutover Strategy/Plan	May ??, 2014	Jun 20, 2014		In Progress
24.	Deployment	May 2014	Jun 25, 2014	N/A	Not Started
25.	Provide extract to Health Ideas for testing	TBD		N/A	Not Started
26.	Test Results Summary	Jun 25, 2014	Jul 31, 2014		Not Started
27.	Defect Action Plan	Jun 25, 2014	Jul 31, 2014		Not Started
28.	Escrow Deposit	Aug 13, 2015	Sep 22, 2014	N/A	Not Started
29.	Project Close	Aug 30, 2015	Sep 30, 2014	N/A	Not Started

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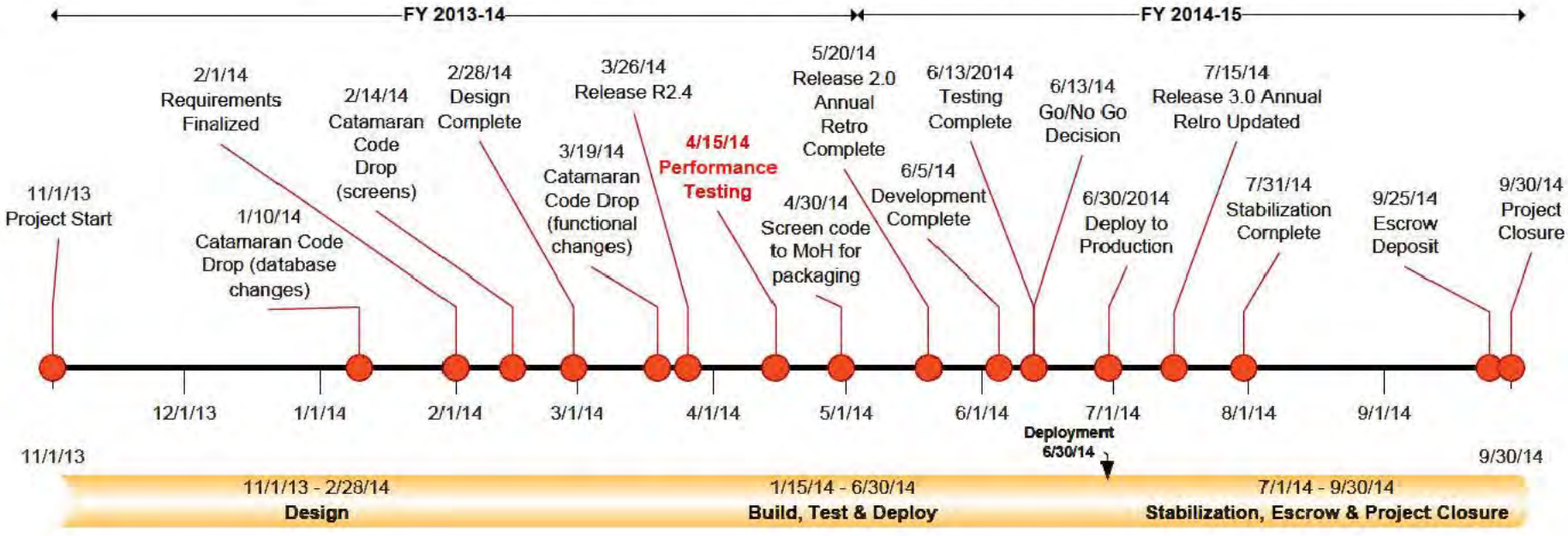
5 **Project SDLC Phase Metrics –** *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*

Release 3 Footprint & Milestone Targets

Revised Date: Mar 25, 2014



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Bi-weekly Project Progress Report

MAXIMUS CANADA
A MAXIMUS Company

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Apr-1	2014-Apr-15
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Development Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Development – June 25, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Functional Specifications – April 17, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (To be deployed March 26) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips)	G

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	• Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • none
Quality	Adhering to MAXIMUS methodology
Schedule	Planning (Design) Activities: o Non-Functional Requirements – approved and signed by MoH o BCP – approved and signed by MoH o PIA – walkthru held April 4, MAXIMUS to respond to MoH feedback o Impact Assessment – complete, gathering signatures o Functional Specifications – in progress o Technical Specifications – in progress o Test Strategy/Plan – in progress o Training Plan – submitted for review/feedback, walkthru held April 11, being updated with MoH feedback o Business Configuration settings – MoH to review and approve o Functional testing – in progress o DRP – with MoH for review and feedback, walkthru scheduled for April 23 Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o Screen code testing and packaging may not be completed by the end of April and this is required to give SSBC 8 weeks leadtime ahead of go-live for packaging. MAXIMUS will provide best efforts to meet the April 30 deadline but the

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		schedule is tight due to delays in receiving the code. MoH needs to explore options to reduce the requested 8 week leadtime. BGTS screen code delivered on March 28 2014. MoH will coordinate participation in BAT for May 5/6, MAXIMUS will create package by April 30 – successful BAT will allow package to be shipped to Shared Services May 7 (1 week later than planned)	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. o The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. The remainder will be carried over to April 2014.	**G**

Ministry of Health Communications Status

	Comments	**Status** G / Y / R
Scope	The following activities will be undertaken within the scope of Communications: • Develop a communications plan containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	**G**
Schedule	Communications Plan – final, signed off deliverable due May 16th • First Draft of stakeholder engagement matrix completed • Team review planned for April 17 • Activities Matrix in progress Execute Communications Plan – TBD as per Communications Activities Matrix • not started Schedule Concerns: • none	**G**

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2 Summary

2.1a Total Project Schedule (updated monthly)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**04/30/2014**				**93%**		**77%**	**In Progress**
PLC Phase – Development	**01/01/2014**	**06/25/2014**		s.21		**91%**		**47%**	**In Progress**
PLC Phase – Deployment	06/01/2014	06/30/2014							Not Started
PLC Phase – Stabilization	07/01/2014	09/30/2014							Not Started

2.2a Total Capital Budget (updated monthly)

PharmaNet Release 3.0 (including Release 4.0 Business Requirements and Estimate)	A Original Estimate (Nov 8 2013)	B Actual for Apr to Oct 2013 (not included in "A") **	C Revised Estimate (Apr 9 2014) * includes "B"	D Spent To-date	E Spent Last Month - Mar 2014	F=C-D Remaining	G Estimate to Complete	H Estimate at Completion	I=D/C Burn Rate
Release 3.0 Budget	$3,359,160	$158,740	$2,998,231	$1,659,118	$525,347	$1,339,113	$1,339,113	$2,998,231	55%
Change Requests	$0	$0	$0	$0	$0	$0	$0	$0	
Total	**$3,359,160**	**$158,740**	**$2,998,231**	**$1,659,118**	**$525,347**	**$1,339,113**	**$1,339,113**	**$2,998,231**	**55%**

**** Column B includes ODR to CAS SR ($45,740)**

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Bi-weekly Project Progress Report

2.2b JEC Monthly Actual and Estimate Tracking (updated monthly)

PharmaNet Release 3.0 Project Actuals and Estimates

Updated: April 9, 2014

	Actual	Actual	Actual	Actual	Actual	Actual	Actual	Fiscal Total	Estimate	Estimate	Estimate	Estimate	Estimate	Estimate	Fiscal Total	Project
$s	Apr-Oct 2013 (PNet R3)	Jun-Aug 2013 (ODR to CAS)	Nov	Dec	Jan	Feb	March	FY13/14	April	May	June	July	Aug	Sept	FY14/15	Total
PNet R3.0	$113,000	$45,740	$222,698	$128,478	$291,059	$332,367	$525,347	$1,658,689	$517,915	$385,030	$321,748	$175,482	$18,054	$25,420	$1,443,649	$3,102,338
PNet R4.0	$0	$0	$429	$0	$0	$0	$0	$429	$0	$0	$0	$0	$0	$0	$0	$429
CO 66 Credit	$0	$0	$0	$0	$0	$0	$0	$0	$34,845	$34,845	$34,845	$0	$0	$0	$104,536	$104,536
Total	$113,000	$45,740	$223,127	$128,478	$291,059	$332,367	$525,347	$1,659,118	$483,070	$350,185	$286,903	$175,482	$18,054	$25,420	$1,339,113	$2,998,231
Hrs MAXIMUS									s.21							

CO 64
CO 65
CO 66

Financial Adjustments:

Removed $11,440 from CO 65 due to removal of effort for STRA s.21
Apply credit for additional capacity hours (CO 66) to April, May and June s.21
Add $45,740 for June to Aug 2013 (ODR to CAS reconciliation)
CO 64 value is $535,591 of which $25,246 was not spent by Dec 31 2013 so that amount was applied against the Jan 2014 invoice
CO 65 value is $2,567,176. It is split by fiscal: FY2013/14 = $1,123,527 and FY2014/15 = $1,443,649
Total amount available for FY13/14 = $1,659,118

Notes:

PNet R3.0 estimates include MAXIMUS and Catamaran effort
The number of MAXIMUS hours per month includes IT and BAT resources which are charged at different rates
Original estimate for February reduced due to delays in requirements decisions
Original estimate for March increased to make up for reduction in February effort
Requirements changes that have **increased** the estimate and/or scope:

- Methadone Payment Process change
- s.17
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- s.17

Requirements changes that have **decreased** the estimate and/or scope:

- PharmaNet R4.0 requirements and estimate removed from scope
- Stakeholder Engagement Strategy and Plan assigned to MoH
- Provider enrolment operational activities, training and communications removed from scope
- Risk and Controls review removed from scope
- No new reports or report updates
- Stabilization criteria will be loosened to reduce the amount of stabilization support required
- MAXIMUS effort related to the STRA removed from scope

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Bi-weekly Project Progress Report

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Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	N/A	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	N/A	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	N/A	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	None	N/A	Closed	Alternate course of action selected, outside of scope of R3
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MoH	2014-02-28	Non	N/A	Closed	Document has been signed off by MoH
MAXIMUS	Change Order #65	MOH	2014-03-13	None	N/A	Closed	MAXIMUS delivered final version to MoH March 13, 2014. MoH has provided final approval and the CO has been signed off by MAXIMUS and MoH.
MAXIMUS	PharmaNet R3 Business Continuity Assessment and Plan (BCP)	MoH	2014-03-24	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Privacy Impact Assessment (PIA)	MoH	2014-03-27	Respond to MoH Feedback	2014-04-10	Pending	MAXIMUS to respond to feedback provided by MoH

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Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet R3 Training Plan	MoH	2014-04-03	Update with feedback	2014-04-10	Pending	Walkthru held April 11, MoH has provided feedback, MAXIMUS to update plan
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MoH	2014-04-15	Review and Approval	2014-04-30	Pending	MoH to review and approve the document which will be used to setup business configuration for Release 3 Go Live
MAXIMUS	PharmaNet – Release 3 Disaster Recovery Assessment and Plan	MoH	2014-04-14	Review and Feedback	2014-04-23	Pending	Walkthrough scheduled for Apr. 23

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G Y R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
R	553643	H	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19 2014.	MAXIMUS has not been able to proceed with testing of the transaction code as per the project plan.	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has also worked additional weekday hours and weekends. Code delivered by Catamaran on March 19 2014 and is now being tested.	2014-MAR-19

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is	H	H	Budget, Schedule

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				temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium term.			
553654	M	Testing of the screens has been delayed from the original plan and delivery of packaged code to MoH 8 weeks prior to go-live is going to be difficult to achieve	Shared Services has requested an 8 week lead time for packaging. If the screen code package cannot be delivered by the end of April the 8 week lead time will not be met and Shared Services may not be able to package the code in time for Go-live.	MAXIMUS is focusing effort on testing of the screen code in April but there is a dependency on MoH participants in the BAT. Coordination of participants has begun and MoH needs to ensure that participants are available. MoH could request that Shared Services package the screen code with less than 8 weeks notice.	M	M	Schedule

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Cancelled	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.

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DR2014-001	Pending	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 . CO 65 has been updated to reflect this change.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

4 Detail

No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
1.	Project Charter	Oct 18, 2013			Approved
2.	High-level Business Requirements	Oct 18, 2013			Approved
3.	Training Strategy	Dec 13, 2013		Dec 19, 2013	Approved
4.	Updated Project Charter	Mar 14, 2014	Apr 9, 2014	N/A	Approved
5.	Functional Requirements	Dec 17, 2013	Feb 14, 2014	Jan 20, 2014	Approved
6.	Non-functional Requirements	Dec 17, 2013	Feb 14, 2014	Mar 25, 2014	Approved
7.	Security and Threat Risk Assessment	Mar 14, 2014	Mar 25, 2014	N/A	No further MAXIMUS involvement required
8.	Business Continuity Assessment and Plan	Feb 14, 2014	Mar 28, 2014	Mar 24, 2014	Approved
9.	Privacy Impact Assessment	Feb 14, 2014	Mar 28, 2014	Apr 4, 2014	With MAXIMUS for response to MoH feedback

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Bi-weekly Project Progress Report

No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
10.	Impact Assessment	Jan ?, 2013	Apr 2, 2014	NA	Completed, signatures in progress
11.	Training Plan	Jan ?, 2013	Mar 28, 2014	Apr 11, 2014	With MAXIMUS for update based on MOH feedback
12.	Functional Specifications	Jan 31, 2014	Apr 17, 2014	N/A	In Progress
13.	Testing – BAT	May 20, 2014	May 6, 2014	N/A	In Progress
14.	Disaster Recovery Assessment and Plan	Mar 24, 2014	Apr 25, 2014	Apr 23, 2014	With MOH for review and feedback
15.	Test Strategy and Plan (no change to approved R1/R2 Strategy)	Dec 31, 2013	Apr 30, 2014	N/A	In Progress
16.	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	Apr 30, 2014	May 7, 2014	N/A	Not Started
17.	Provide extract to Health Ideas for testing	TBD	May 19, 2014	N/A	Not Started
18.	Work Instructions – Internal	May 20, 2014	May 27, 2014	N/A	In Progress
19.	Development - Build	May 22, 2014	Jun 6, 2014	N/A	In Progress
20.	Production Support Plan	Mar 17, 2014	Jun 13, 2014	N/A	In Progress
21.	Development – Function/Integration Testing	May 15, 2014	Jun 13, 2014	N/A	In Progress
22.	Deployment Go/No Go presentation	May 15, 2014	Jun 18, 2014	TBD	Not Started
23.	Training	Apr 16, 2014	Jun 20, 2014	N/A	Not Started
24.	Deployment/Cutover Strategy/Plan	May ??, 2014	Jun 20, 2014	N/A	In Progress
25.	Deployment	May 2014	Jun 25, 2014	N/A	Not Started
26.	Test Results Summary	Jun 25, 2014	Jul 31, 2014	N/A	Not Started
27.	Defect Action Plan	Jun 25, 2014	Jul 31, 2014	N/A	Not Started
28.	Escrow Deposit	Aug 13, 2015	Sep 22, 2014	N/A	Not Started
29.	Project Close	Aug 30, 2015	Sep 30, 2014	N/A	Not Started

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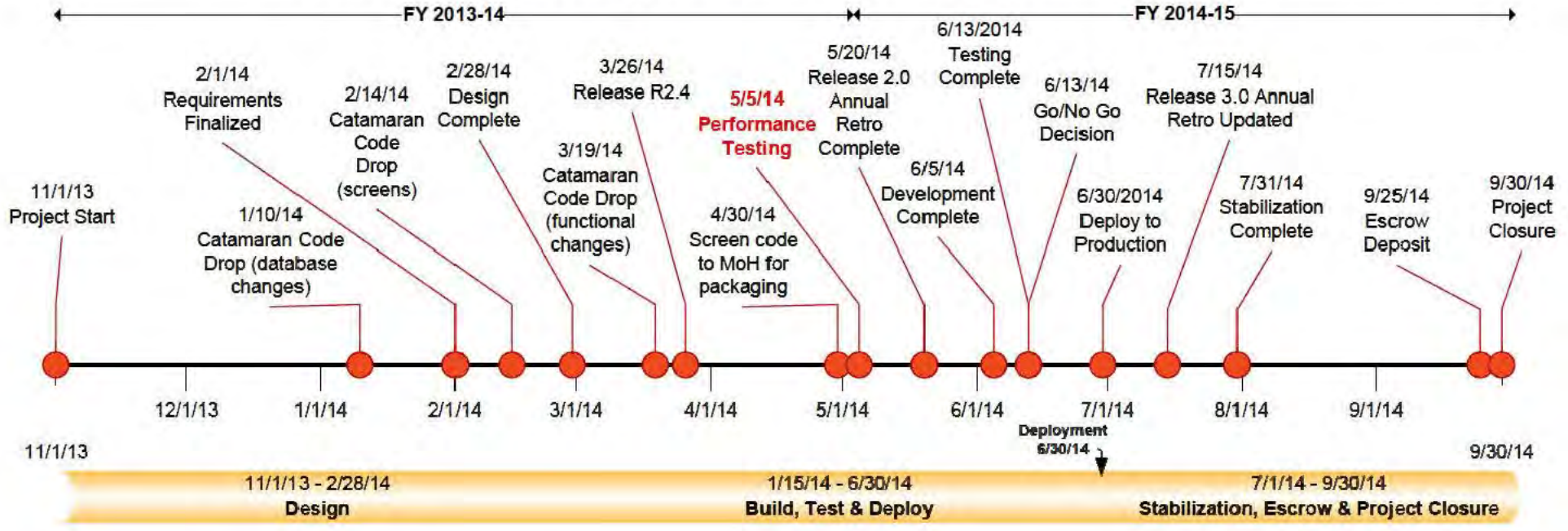
5 **Project SDLC Phase Metrics –** *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*

Release 3 Footprint & Milestone Targets

Revised Date: Apr 14, 2014



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Bi-weekly Project Progress Report

MAXIMUS CANADA
A MAXIMUS Company

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-Apr-16	2014-Apr-30
Project Plan Version:	PharmaNet Release 3.0	**PLC/Project Phase**	Development Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Development – June 25, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Screen code to MoH – May 1, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (To be deployed March 26) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips)	G

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	• Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • none	
Quality	Adhering to MAXIMUS methodology During the last month, the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.	G
Schedule	Planning (Design) Activities: o PIA – MAXIMUS has responded to MoH feedback, waiting for MoH approval to proceed with gathering signatures o Impact Assessment – complete, MAXIMUS signatures gathered (internal work product) o Functional Specifications – completed o Technical Specifications – in progress o Test Strategy/Plan – in progress o Training Plan – approved by MoH, signatures being gathered o Business Configuration settings – MoH to review and approve o Screen code – functional testing complete, creation of CD in progress (target April 30), BAT scheduled for May 5/6 o Transaction code - Functional testing in progress o DRP – feedback from MoH on document received, MAXIMUS updating the doc so it can be sent to MoH for approval Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS	Y

Comment [PLH1]: Kimberly, is the doc provided by Apr 23 ok? Or does MBPSD need another walkthrough? This needs to be final by before May 5 (same comment was provided below)

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	team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o Screen code BAT will not be completed by the end of April and this is required to give SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code will be delivered by May 6. MoH will coordinate participation in BAT for May 5/6 - successful BAT will allow package to be shipped to Shared Services May 7. MoH will conduct connectivity testing while BAT in progress. o Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). o Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (June 26) will be required for the data warehouse refresh. This means that the data warehouse will have stale data until the Friday morning (June 27).	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. o The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. The remainder will be carried over to April 2014.	G

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Ministry of Health Communications Status

	Comments	Status G / Y / R
Scope	The following activities will be undertaken within the scope of Communications: • Develop a communications plan containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan – final, signed off deliverable due May 16th • First Draft of stakeholder engagement matrix completed • Activities Matrix – draft for team review Apr 29 Execute Communications Plan – TBD as per Communications Activities Matrix • not started Schedule Concerns: • none	G

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2 Summary

2.1a Total Project Schedule (updated monthly)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**04/30/2014**				**93%**		**77%**	**In Progress**
PLC Phase – Development	**01/01/2014**	**06/25/2014**		s.21		**91%**		**47%**	**In Progress**
PLC Phase – Deployment	06/01/2014	06/30/2014							Not Started
PLC Phase – Stabilization	07/01/2014	09/30/2014							Not Started

2.2a Total Capital Budget (updated monthly)

PharmaNet Release 3.0 (including Release 4.0 Business Requirements and Estimate)	A Original Estimate (Nov 8 2013)	B Actual for Apr to Oct 2013 (not included in "A") **	C Revised Estimate (Apr 9 2014) * includes "B"	D Spent To-date	E Spent Last Month - Mar 2014	F=C-D Remaining	G Estimate to Complete	H Estimate at Completion	I=D/C Burn Rate
Release 3.0 Budget	$3,359,160	$158,740	$2,998,231	$1,659,118	$525,347	$1,339,113	$1,339,113	$2,998,231	55%
Change Requests	$0	$0	$0	$0	$0	$0	$0	$0	
Total	**$3,359,160**	**$158,740**	**$2,998,231**	**$1,659,118**	**$525,347**	**$1,339,113**	**$1,339,113**	**$2,998,231**	**55%**

**** Column B includes ODR to CAS Reconciliation Report SR 553416 ($45,740)**

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2.2b JEC Monthly Actual and Estimate Tracking (updated monthly)

PharmaNet Release 3.0 Project Actuals and Estimates

Updated: April 28, 2014

$s	Actual Apr-Oct 2013	Actual Nov 2013	Actual Dec 2013	Actual Jan 2014	Actual Feb 2014	Actual March 2014	Fiscal Total FY13/14	Estimate April 2014	Estimate May 2014	Estimate June 2014	Estimate July 2014	Estimate Aug 2014	Estimate Sept 2014	Fiscal Total FY14/15	Project Total
PNet R3.0	$158,740	$222,698	$128,478	$291,059	$332,367	$525,347	$1,658,689	$517,915	$385,030	$321,748	$175,482	$18,054	$25,420	$1,443,649	$3,102,338
PNet R4.0	$0	$429	$0	$0	$0	$0	$429	$0	$0	$0	$0	$0	$0	$0	$429
CO 66 Credit	$0	$0	$0	$0	$0	$0	$0	$34,845	$34,845	$34,845	$0	$0	$0	$104,536	$104,536
Total	$158,740	$223,127	$128,478	$291,059	$332,367	$525,347	$1,659,118	$483,070	$350,185	$286,903	$175,482	$18,054	$25,420	$1,339,113	$2,998,231
Hrs															
MAXIMUS															

s.21

CO 64
CO 65
CO 66

Financial Adjustments:

Removed $11,440 from CO 65 due to removal of effort for STRA s.21

Apply credit for additional capacity hrs (CO 66) to April, May and June s.21

Add $45,740 for June to Aug 2013 (ODR to CAS reconciliation)

CO 64 value is $535,591 of which $25,246 was not spent by Dec 31 2013 so that amount was applied against the Jan 2014 invoice

CO 65 value is $2,567,176. It is split by fiscal: FY2013/14 = $1,123,527 and FY2014/15 = $1,443,649

Total amount available for FY13/14 = $1,659,118

Apr-Oct 2013 column includes $45,740 for the ODR to CAS Reconciliation report effort (SR 553416)

Notes:

PNet R3.0 estimates include MAXIMUS and Catamaran effort

The number of MAXIMUS hours per month includes IT and BAT resources which are charged at different rates

Original estimate for February reduced due to delays in requirements decisions

Original estimate for March increased to make up for reduction in February effort

Requirements changes that have **increased** the estimate and/or scope:

- Methadone Payment Process change
- New Service Claims cap
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- Creation of a "production-like" test environment for performance testing of new limits requirements

Requirements changes that have **decreased** the estimate and/or scope:

- PharmaNet R4.0 requirements and estimate removed from scope
- Stakeholder Engagement Strategy and Plan assigned to MoH
- Provider enrolment operational activities, training and communications removed from scope
- Risk and Controls review removed from scope
- No new reports or report updates
- Stabilization criteria will be loosened to reduce the amount of stabilization support required
- MAXIMUS effort related to the STRA removed from scope

Comment [PLH2]: ODR to CAS work is unrelated to R3 0 Not sure why it has to be in here?

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2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	N/A	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	N/A	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	N/A	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	None	N/A	Closed	Alternate course of action selected, outside of scope of R3
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MoH	2014-02-28	Non	N/A	Closed	Document has been signed off by MoH
MAXIMUS	Change Order #65	MOH	2014-03-13	None	N/A	Closed	MAXIMUS delivered final version to MoH March 13, 2014. MoH has provided final approval and the CO has been signed off by MAXIMUS and MoH.
MAXIMUS	PharmaNet R3 Business Continuity Assessment and Plan (BCP)	MoH	2014-03-24	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Privacy Impact Assessment (PIA)	MoH	2014-03-27	Approval to proceed with signatures	2014-04-30	Pending	MAXIMUS has responded to feedback provided by MoH. Additional feedback received, MAXIMUS is responding.

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Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
							Deliverable acceptance required to proceed with gathering signatures.
MAXIMUS	PharmaNet R3 Training Plan	MoH	2014-04-03	Update with feedback	2014-04-30	Pending	MoH has approved, MAXIMUS gathering signatures
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MoH	2014-04-23	Review and Approval	2014-05-05	Pending	MoH to review and approve the document which will be used to setup business configuration for Release 3 Go Live
MAXIMUS	PharmaNet – Release 3 Disaster Recovery Assessment and Plan	MoH	2014-04-14	Review and Feedback	2014-04-30	Pending	MoH feedback received, MAXIMUS updating plan

Comment [PLH3]: Kimberly, is the doc provided by Apr 23 ok? Or does MBPSD need another walkthrough? This needs to be final by before May 5

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

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3.2 Key/Active Project Risks (Reported out of ITG Search Results)

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553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is	H	H	Budget, Schedule

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				temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium term.			
553654	M	Testing of the screens has been delayed from the original plan and delivery of packaged code to MoH 8 weeks prior to go-live is going to be difficult to achieve	Shared Services has requested an 8 week lead time for packaging. If the screen code package cannot be delivered by the end of April the 8 week lead time will not be met and Shared Services may not be able to package the code in time for Go-live.	MAXIMUS is focusing effort on testing of the screen code in April but there is a dependency on MoH participants in the BAT. Coordination of participants has begun and MoH needs to ensure that participants are available. MoH could request that Shared Services package the screen code with less than 8 weeks notice.	M	M	Schedule
553658	M	MoH is having a Risk and Controls review of PharmaNet Release 3.0 and in order for the project to be approved for Go-live, the MoH executive must approve the Risk and Controls report, and the report must be accepted by the Comptroller General's office. The report is due around June 12 2014 and the Go-live decision is currently planned for June 13. Approval for deployment in the June 25 change window should occur at the June 18 Change Management meeting. These dates are very tight so any slippage could jeopardize the Go-live date.	MoH does not want the Go-live date to move because of cost savings that will be lost due to delay. MAXIMUS does not want to move the Go-live date to move because of proximity to the testing/deployments for the Medigent (RAPID) project and competition for the same infrastructure resources.	The Go-live decision presentation date could be moved to a few days later if the Risk and Controls report has not been approved by the MoH executive by June 13. MAXIMUS will know if there are any issues with going live June 25 earlier than June 13 so the presentation is a formality. MoH will work with Deloitte to get the Risk and Controls review done as quickly as possible. MAXIMUS will respond to any requests from Deloitte in a timely fashion.	H	M	Schedule
553668	H	PNet R3 is currently designed/developed to adjudicate all claims from DIS only pharmacies to zero (i.e., the client will not be	If the decision is not made in a timely fashion (1 week) then it will not be possible to implement the change without impacting the project	MoH to provide a decision as to whether or not the recommendation (i.e., modify transaction code to allow adjudication of DIS only claims	H	H	Scope Schedule

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		reimbursed for any legitimate purchases from DIS only pharmacies). The new requirement is for the off-line process to adjudicate the claim as per the usual rules and pay the appropriate amount to the client.	schedule. A different decision will then be required - delay the project to incorporate the new requirement or proceed as is and implement the new requirement after PNet R3 Go-live. Therefore the impact is either a project delay or an implementation where clients are not reimbursed for purchases from DIS only pharmacies	submitted by clients) should be implemented within 1 week (by April 30 2014). MoH decision is to not make any changes to R3 but to pursue options for addressing adjudication of client claims for DIS only pharmacy dispenses through operational avenues.			

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Cancelled	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Pending	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescr bing transactions which could also be impacted by the Release 3.0 functionality

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	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 . CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

4 Detail

No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
1	Project Charter	Oct 18, 2013			Approved
2	High-level Business Requirements	Oct 18, 2013			Approved
3	Training Strategy	Dec 13, 2013		Dec 19, 2013	Approved
4	Updated Project Charter	Mar 14, 2014	Apr 9, 2014	N/A	Approved
5	Functional Requirements	Dec 17, 2013	Feb 14, 2014	Jan 20, 2014	Approved
6	Non-functional Requirements	Dec 17, 2013	Feb 14, 2014	Mar 25, 2014	Approved
7	Security and Threat Risk Assessment	Mar 14, 2014	Mar 25, 2014	N/A	No further MAXIMUS involvement required
8	Business Continuity Assessment and Plan	Feb 14, 2014	Mar 28, 2014	Mar 24, 2014	Approved
9	Impact Assessment (internal work product)	Jan ?, 2014	Apr 2, 2014	NA	Approved
10	Functional Specifications	Jan 31, 2014	Apr 30, 2014	N/A	Completed

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No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
11	Privacy Impact Assessment	Feb 14, 2014	Mar 28, 2014	Apr 4, 2014	With MAXIMUS for update based on additional MOH feedback
12	Training Plan	Jan ?, 2014	Mar 28, 2014	Apr 11, 2014	MAXIMUS gathering signatures
13	Disaster Recovery Assessment and Plan	Mar 24, 2014	Apr 23, 2014	Apr 23, 2014	With MAXIMUS for update based on MOH feedback
14	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	Apr 30, 2014	May 6, 2014	N/A	In Progress
15	Testing – BAT	May 20, 2014	May 6, 2014	N/A	In Progress
16	Test Strategy and Plan (no change to approved R1/R2 Strategy)	Dec 31, 2013	Apr 30, 2014	N/A	In Progress
17	Provide extract to Health Ideas for testing	TBD	May 19, 2014	N/A	Not Started
18	Work Instructions – Internal	May 20, 2014	May 27, 2014	N/A	In Progress
19	Development - Build	May 22, 2014	Jun 6, 2014	N/A	In Progress
20	Production Support Plan	Mar 17, 2014	Jun 13, 2014	N/A	In Progress
21	Development – Function/Integration Testing	May 15, 2014	Jun 13, 2014	N/A	In Progress
22	Deployment Go/No Go presentation	May 15, 2014	Jun 17, 2014	TBD	Not Started
23	Training	Apr 16, 2014	Jun 20, 2014	N/A	Not Started
24	Deployment/Cutover Strategy/Plan	May ??, 2014	Jun 20, 2014	N/A	In Progress
25	Deployment	May 2014	Jun 25, 2014	N/A	Not Started
26	Test Results Summary	Jun 25, 2014	Jul 31, 2014	N/A	Not Started
27	Defect Action Plan	Jun 25, 2014	Jul 31, 2014	N/A	Not Started
28	Escrow Deposit	Aug 13, 2015	Sep 22, 2014	N/A	Not Started
29	Project Close	Aug 30, 2015	Sep 30, 2014	N/A	Not Started

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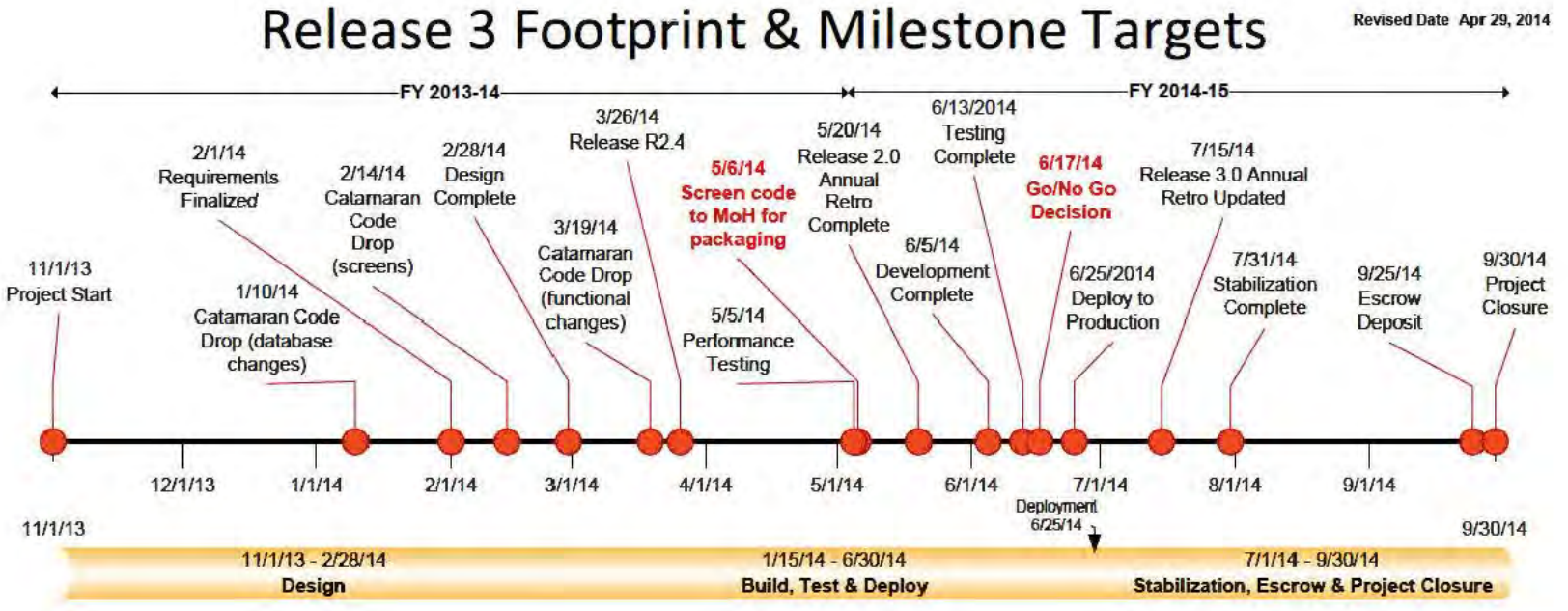
5 **Project SDLC Phase Metrics –** *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*



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Bi-weekly Project Progress Report

MAXIMUS CANADA
A MAXIMUS Company

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-May-01	2014-May-14
Project Plan Version:	PharmaNet R3	**PLC/Project Phase**	Development Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Development – June 25, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Build Complete – June 6, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed April 23) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G	Y	R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips)	G		

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	• Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • none	
Quality	Adhering to MAXIMUS methodology During the last month, the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.	**G**
Schedule	Development Activities: o PIA – with MoH for signature o Technical Specifications – in progress o Test Strategy/Plan – signed-off (internal MAXIMUS work product) o Training Plan – signed-off (complete) o Business Configuration settings – MoH to review and approve o Screen code – revised version delivered to MoH May 2; BAT conducted at MAXIMUS on May 5/6 – complete; connectivity testing in progress o Transaction code - BAT in progress o DRP – with MoH for signature o Batch development – in progress Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS	**Y**

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	team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o Screen code BAT was not completed by the end of April and this is required to give MoH System Services and SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code was delivered on May 2. o MoH MBPSD coordinated participation in screen code BAT for May 5/6 - successful BAT. MoH System Services will use the revised May 2 screen code to conduct the connectivity testing, pre-packaging activities and submit iStore Project request to SSBC. o Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). o Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (June 26) will be required for the data warehouse refresh. This means that the data warehouse will have stale data until the Friday morning (June 27).	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. o The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. The remainder will be carried over to April 2014. o CR and estimate for provision of screen code and deployment support for the Colleges and HLBC is on hold.	**G**

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Ministry of Health Communications Status

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of Communications: • Develop a communications plan containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan – final, signed off deliverable due May 16th • First Draft of stakeholder engagement matrix completed • Activities Matrix – draft for team review Apr 29 Execute Communications Plan – TBD as per Communications Activities Matrix • not started Schedule Concerns: • none	G

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2 Summary

2.1a Total Project Schedule (updated monthly)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**04/30/2014**				**99%**		**87%**	**In Progress**
PLC Phase – Development	**01/01/2014**	**06/25/2014**		s.21		**95%**		**65%**	**In Progress**
PLC Phase – Deployment	06/01/2014	06/30/2014							Not Started
PLC Phase – Stabilization	07/01/2014	09/30/2014							Not Started

2.2a Total Capital Budget (updated monthly)

PharmaNet Release 3.0 (including Release 4.0 Business Requirements and Estimate)	A Original Estimate (Nov 8 2013)	B Actual for Apr to Oct 2013 (not included in "A") **	C Revised Estimate (Apr 9 2014) * includes "B"	D Spent To-date	E Spent Last Month - Apr 2014	F=C-D Remaining	G Estimate to Complete	H Estimate at Completion	I=D/C Burn Rate
Release 3.0 Budget	$3,359,160	$158,740	$2,998,231	$2,060,649	$401,530	$937,582	$937,582	$2,998,231	69%
Change Requests	$0	$0	$0	$0	$0	$0	$0	$0	
Total	**$3,359,160**	**$158,740**	**$2,998,231**	**$2,060,649**	**$401,530**	**$937,582**	**$937,582**	**$2,998,231**	**69%**

**** Column B includes ODR to CAS Reconciliation Report SR 553416 ($45,740)**

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2.2b JEC Monthly Actual and Estimate Tracking (updated monthly)

PharmaNet Release 3.0 Project Actuals and Estimates

Updated: May 5, 2014

$s	Actual Apr-Oct 2013	Actual Nov 2013	Actual Dec 2013	Actual Jan 2014	Actual Feb 2014	Actual March 2014	Fiscal Total FY13/14	Estimate April 2014	Estimate May 2014	Estimate June 2014	Estimate July 2014	Estimate Aug 2014	Estimate Sept 2014	Fiscal Total FY14/15	Project Total
PNet R3.0	$158,740	$222,698	$128,478	$291,059	$332,367	$525,347	$1,658,689	$436,317	$460,349	$326,957	$175,482	$18,054	$26,431	$1,443,590	$3,102,279
PNet R4.0	$0	$429	$0	$0	$0	$0	$429	$0	$0	$0	$0	$0	$0	$0	$429
CO 66 Credit	$0	$0	$0	$0	$0	$0	$0	$34,845	$34,845	$34,845	$0	$0	$0	$104,536	$104,536
Total	$158,740	$223,127	$128,478	$291,059	$332,367	$525,347	$1,659,118	$401,530	$425,504	$292,112	$175,482	$18,054	$26,431	$1,339,113	$2,998,230
Hrs															
MAXIMUS															

s.21

CO 64
CO 65
CO 66

Financial Adjustments:

Removed $11,440 from CO 65 due to removal of effort for STRA

s.21

Apply credit for additional capacity hrs (CO 66) to April, May and June

s.21

Add $45,740 for June to Aug 2013 (ODR to CAS reconciliation)

CO 64 value is $535,591 of which $25,246 was not spent by Dec 31 2013 so that amount was applied against the Jan 2014 invoice

CO 65 value is $2,567,176. It is split by fiscal: FY2013/14 = $1,123,527 and FY2014/15 = $1,443,649

Total amount available for FY13/14 = $1,659,118

Apr-Oct 2013 column includes $45,740 for the ODR to CAS Reconciliation report effort (SR 553416)

Notes:

PNet R3.0 estimates include MAXIMUS and Catamaran effort

The number of MAXIMUS hours per month includes IT and BAT resources which are charged at different rates

Original estimate for February reduced due to delays in requirements decisions

Original estimate for March increased to make up for reduction in February effort

Requirements changes that have **increased** the estimate and/or scope:

- Methadone Payment Process change
- New Service Claims cap
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- Creation of a "production-like" test environment for performance testing of new limits requirements

Requirements changes that have **decreased** the estimate and/or scope:

- PharmaNet R4.0 requirements and estimate removed from scope
- Stakeholder Engagement Strategy and Plan assigned to MoH
- Provider enrolment operational activities, training and communications removed from scope
- Risk and Controls review removed from scope
- No new reports or report updates
- Stabilization criteria will be loosened to reduce the amount of stabilization support required
- MAXIMUS effort related to the STRA removed from scope

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Bi-weekly Project Progress Report

2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	N/A	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	N/A	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	N/A	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	None	N/A	Closed	Alternate course of action selected, outside of scope of R3
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MoH	2014-02-28	Non	N/A	Closed	Document has been signed off by MoH
MAXIMUS	Change Order #65	MOH	2014-03-13	None	N/A	Closed	MAXIMUS delivered final version to MoH March 13, 2014. MoH has provided final approval and the CO has been signed off by MAXIMUS and MoH.
MAXIMUS	PharmaNet R3 Business Continuity Assessment and Plan (BCP)	MoH	2014-03-24	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Training Plan	MoH	2014-04-03	None	N/A	Closed	Signed off by MAXIMUS and MoH

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Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet – Release 3 Test Plan	MAXIMUS	2014-05-02	None	N/A	Closed	Signed off by MAXIMUS team (internal work product)
MAXIMUS	PharmaNet R3 Privacy Impact Assessment (PIA)	MoH	2014-03-27	Signature gathering	2014-05-16	Pending	With MoH for signatures
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MoH	2014-04-23	Review and Approval	2014-05-16	Pending	MoH to review and approve the document which will be used to setup business configuration for Release 3 Go Live
MAXIMUS	PharmaNet – Release 3 Disaster Recovery Assessment and Plan	MoH	2014-04-14	Signature Gathering	2014-05-16	Pending	With MoH for signatures

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G	Status Y	Status R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
	Y		553643	H	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19 2014.	MAXIMUS has not been able to proceed with testing of the transaction code as per the project plan.	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has also worked additional weekday hours and weekends. Code delivered by Catamaran on March 19 2014	2014-MAR-19

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Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
					and is now being tested.	
R	553680	H	Shared Services BC (SSBC) has recently implemented a change freeze for all infrastructure services, which also includes services delivered by all vendor partners, including HP Advanced Solutions, IBM, and TELUS. In the meantime, all change requests are being reviewed by Office of the Chief Information Officer (OCIO) executive to determine if there are any significant risks. For clients who have pending iStore orders or Requests for Change (RFC) scheduled, please be advised that these requests will be reviewed and assessed as per the process outlined above and may be rescheduled. Should clients require an emergency change during the freeze, they are reminded of the Request for Special Processing procedure.	May have an impact on the scheduled Go-Live date for R3: • if MAXIMUS is unable to engage SSBC/HPAS when required; • If the MoH iStore request for screen code packaging is delayed; • If HPAS is not available to roll-out the packaged screen code on the Go-Live date.	The following steps could be taken to address this issue: • Follow the SSBC "Request for Special Processing" procedure; • Escalate quickly if this issue is raised	

3.2 Key/Active Project Risks (Reported out of ITG Search Results)

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget

Green = No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium term.	H	H	Budget, Schedule
553654	M	Testing of the screens has been delayed from the original plan and delivery of packaged code to MoH 8 weeks prior to go-live is	Shared Services has requested an 8 week lead time for packaging. If the screen code package cannot be delivered by the end of	MAXIMUS is focusing effort on testing of the screen code in April but there is a dependency on MoH participants in the BAT. Coordination of participants has	M	M	Schedule

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		going to be difficult to achieve	April the 8 week lead time will not be met and Shared Services may not be able to package the code in time for Go-live.	begun and MoH needs to ensure that participants are available. MoH could request that Shared Services package the screen code with less than 8 weeks notice.			
553658	M	MoH is having a Risk and Controls review of PharmaNet Release 3.0 and in order for the project to be approved for Go-live, the MoH executive must approve the Risk and Controls report, and the report must be accepted by the Comptroller General's office. The report is due around June 12 2014 and the Go-live decision is currently planned for June 13. Approval for deployment in the June 25 change window should occur at the June 18 Change Management meeting. These dates are very tight so any slippage could jeopardize the Go-live date.	MoH does not want the Go-live date to move because of cost savings that will be lost due to delay. MAXIMUS does not want to move the Go-live date to move because of proximity to the testing/deployments for the Medigent (RAPID) project and competition for the same infrastructure resources.	The Go-live decision presentation date could be moved to a few days later if the Risk and Controls report has not been approved by the MoH executive by June 13. MAXIMUS will know if there are any issues with going live June 25 earlier than June 13 so the presentation is a formality. MoH will work with Deloitte to get the Risk and Controls review done as quickly as possible. MAXIMUS will respond to any requests from Deloitte in a timely fashion.	H	M	Schedule
553668	H	PNet R3 is currently designed/developed to adjudicate all claims from DIS only pharmacies to zero (i.e., the client will not be reimbursed for any legitimate purchases from DIS only pharmacies). The new requirement is for the off-line process to adjudicate the claim as per the usual rules and pay the appropriate amount to the client.	If the decision is not made in a timely fashion (1 week) then it will not be possible to implement the change without impacting the project schedule. A different decision will then be required - delay the project to incorporate the new requirement or proceed as is and implement the new requirement after PNet R3 Go-live. Therefore the impact is either a project delay or an implementation where clients are not reimbursed for purchases	MoH to provide a decision as to whether or not the recommendation (i.e., modify transaction code to allow adjudication of DIS only claims submitted by clients) should be implemented within 1 week (by April 30 2014). MoH decision is to not make any changes to R3 but to pursue options for addressing adjudication of client claims for DIS only pharmacy dispenses through operational avenues.	H	H	Scope Schedule

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			from DIS only pharmacies				

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Cancelled	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Pending	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 . CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

Green =	No concerns on schedule and within budget	Yellow = Some concerns, schedule or budget is at risk but mitigation plans are in place to recover	Red = Serious concerns, schedule or budget is at risk. No mitigation plan in place to recover

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

4 Detail

No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
1.	Project Charter	Oct 18, 2013			Approved
2.	High-level Business Requirements	Oct 18, 2013			Approved
3.	Training Strategy	Dec 13, 2013		Dec 19, 2013	Approved
4.	Updated Project Charter	Mar 14, 2014	Apr 9, 2014	N/A	Approved
5.	Functional Requirements	Dec 17, 2013	Feb 14, 2014	Jan 20, 2014	Approved
6.	Non-functional Requirements	Dec 17, 2013	Feb 14, 2014	Mar 25, 2014	Approved
7.	Security and Threat Risk Assessment	Mar 14, 2014	Mar 25, 2014	N/A	No further MAXIMUS involvement required
8.	Business Continuity Assessment and Plan	Feb 14, 2014	Mar 28, 2014	Mar 24, 2014	Approved
9.	Impact Assessment (internal work product)	Jan ?, 2014	Apr 2, 2014	NA	Approved
10.	Functional Specifications	Jan 31, 2014	Apr 30, 2014	N/A	Completed
11.	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	Apr 30, 2014	May 2, 2014	N/A	Complete
12.	Test Plan (no change to approved R1/R2 Strategy)	Dec 31, 2013	Apr 30, 2014	N/A	Complete
13.	BAT - screens	May 20, 2014	May 6, 2014	N/A	Complete
14.	Training Plan	Jan ?, 2014	Mar 28, 2014	Apr 11, 2014	Complete
15.	Privacy Impact Assessment	Feb 14, 2014	Mar 28, 2014	Apr 4, 2014	Signatures being gathered at MoH
16.	Disaster Recovery Assessment and Plan	Mar 24, 2014	Apr 23, 2014	Apr 23, 2014	Signatures being gathered at MoH

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No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
17.	BAT - transactions	N/A	May 23, 2014	N/A	In Progress
18.	Provide extract to Health Ideas for testing	TBD	May 20, 2014	N/A	In Progress
19.	Work Instructions – Internal	May 20, 2014	May 27, 2014	N/A	In Progress
20.	Development - Build	May 22, 2014	Jun 6, 2014	N/A	In Progress
21.	Production Support Plan	Mar 17, 2014	Jun 13, 2014	N/A	In Progress
22.	Development – Function/Integration Testing	May 15, 2014	Jun 13, 2014	N/A	In Progress
23.	Test Results Summary	Jun 25, 2014	Jun 13, 2014	N/A	Not Started
24.	Defect Action Plan	Jun 25, 2014	Jun 13, 2014	N/A	Not Started
25.	Deployment Go/No Go presentation	May 15, 2014	Jun 17, 2014	TBD	Not Started
26.	Training Development and Execution	Apr 16, 2014	Jun 20, 2014	N/A	In Progress
27.	Deployment/Cutover Strategy/Plan	May ??, 2014	Jun 20, 2014	N/A	In Progress
28.	Deployment	May 2014	Jun 25, 2014	N/A	Not Started
29.	Escrow Deposit	Aug 13, 2015	Sep 22, 2014	N/A	Not Started
30.	Project Close	Aug 30, 2015	Sep 30, 2014	N/A	Not Started

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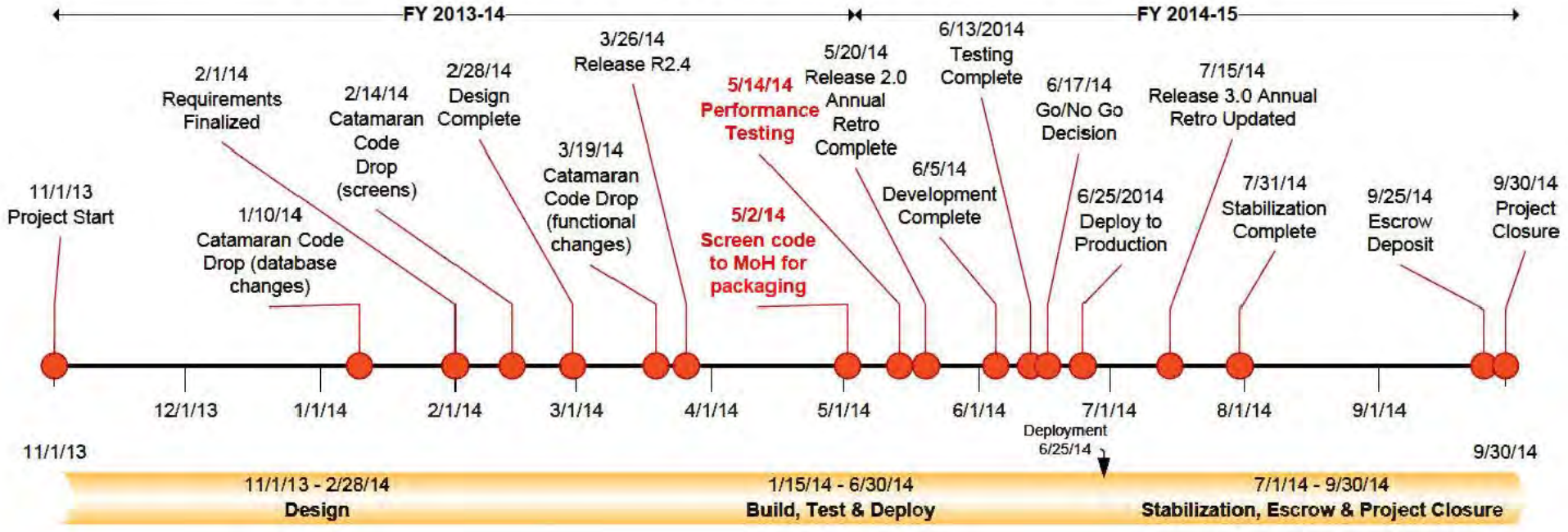
5 **Project SDLC Phase Metrics** – *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*

Release 3 Footprint & Milestone Targets

Revised Date: May 13, 2014



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Bi-weekly Project Progress Report

MAXIMUS CANADA
A MAXIMUS Company

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-May-15	2014-May-28
Project Plan Version:	PharmaNet R3	**PLC/Project Phase**	Development Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Development – June 25, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Build Complete – June 6, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed April 23) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G	Y	R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips)	G		

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	• Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • s.17 Scope Concerns • none
Quality	Adhering to MAXIMUS methodology During the last month, the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.
Schedule	Development Activities: o PIA – waiting for MoH sign-off o Technical Specifications – in progress, nearing completion o Business Configuration settings – complete o Screen code – iStore ticket for packaging and deployment by SSBC created and sent o Transaction code - BAT complete o DRP – signed off (complete) o Batch development – in progress, nearing completion (target is early June) Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were

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	scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o Screen code BAT was not completed by the end of April and this is required to give MoH System Services and SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code was delivered on May 2. o MoH MBPSD coordinated participation in screen code BAT for May 5/6 - successful BAT. MoH System Services will use the revised May 2 screen code to conduct the connectivity testing, pre-packaging activities and submit iStore Project request to SSBC. o Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). o Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (June 26) will be required for the data warehouse refresh. This means that the data warehouse will have stale data until the Friday morning (June 27).	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. o The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. The remainder will be carried over to April 2014. o CR and estimate for provision of screen code and deployment support for the Colleges and HLBC are being reviewed by MAXIMUS and will be submitted to MoH (end of May/early June).	**G**

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Ministry of Health Communications Status

	Comments	Status G Y R
Scope	The following activities will be undertaken within the scope of Communications: • Develop a communications plan containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan • Draft of communications plan with Stakeholder Engagement Matrix and Activities Matrix sent to team for review - complete • Updated Communications Plan sent to directors for review - complete • Final, signed off communications plan scheduled for COB May 28th Execute Communications Plan – as per the Communications Activities Matrix • Begins June 5th Schedule Concerns: • none	G

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2 Summary

2.1a Total Project Schedule (updated monthly)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	**11/01/2013**	**04/30/2014**				**99%**		**87%**	**In Progress**
PLC Phase – Development	**01/01/2014**	**06/25/2014**		s.21		**95%**		**65%**	**In Progress**
PLC Phase – Deployment	06/01/2014	06/30/2014							Not Started
PLC Phase – Stabilization	07/01/2014	09/30/2014							Not Started

2.2a Total Capital Budget (updated monthly)

PharmaNet Release 3.0 (including Release 4.0 Business Requirements and Estimate)	A Original Estimate (Nov 8 2013)	B Actual for Apr to Oct 2013 (not included in "A") **	C Revised Estimate (Apr 9 2014) * includes "B"	D Spent To-date	E Spent Last Month - Apr 2014	F=C-D Remaining	G Estimate to Complete	H Estimate at Completion	I=D/C Burn Rate
Release 3.0 Budget	$3,359,160	$158,740	$2,998,231	$2,060,649	$401,530	$937,582	$937,582	$2,998,231	69%
Change Requests	$0	$0	$0	$0	$0	$0	$0	$0	
Total	**$3,359,160**	**$158,740**	**$2,998,231**	**$2,060,649**	**$401,530**	**$937,582**	**$937,582**	**$2,998,231**	**69%**

**** Column B includes ODR to CAS Reconciliation Report SR 553416 ($45,740)**

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2.2b JEC Monthly Actual and Estimate Tracking (updated monthly)

PharmaNet Release 3.0 Project Actuals and Estimates

Updated: May 26, 2014

$s	Actual Apr-Oct 2013	Actual Nov 2013	Actual Dec 2013	Actual Jan 2014	Actual Feb 2014	Actual March 2014	Fiscal Total FY13/14	Actual April 2014	Estimate May 2014	Estimate June 2014	Estimate July 2014	Estimate Aug 2014	Estimate Sept 2014	Fiscal Total FY14/15	Project Total
PNet R3.0	$158,740	$222,698	$128,478	$291,059	$332,367	$525,347	$1,658,689	$436,317	$460,349	$326,957	$175,482	$18,054	$26,431	$1,443,590	$3,102,279
PNet R4.0	$0	$429	$0	$0	$0	$0	$429	$0	$0	$0	$0	$0	$0	$0	$429
CO 66 Credit	$0	$0	$0	$0	$0	$0	$0	$34,845	$34,845	$34,845	$0	$0	$0	$104,536	$104,536
Total	$158,740	$223,127	$128,478	$291,059	$332,367	$525,347	$1,659,118	$401,530	$425,504	$292,112	$175,482	$18,054	$26,431	$1,339,113	$2,998,230
Hrs															
MAXIMUS															

s.21

CO 64
CO 65
CO 66

Financial Adjustments:

Removed $11,440 from CO 65 due to removal of effort for STRA s.21
Apply credit for additional capacity hrs (CO 66) to April, May and June s.21
Add $45,740 for June to Aug 2013 (ODR to CAS reconciliation)
CO 64 value is $535,591 of which $25,246 was not spent by Dec 31 2013 so that amount was applied against the Jan 2014 invoice
CO 65 value is $2,567,176. It is split by fiscal: FY2013/14 = $1,123,527 and FY2014/15 = $1,443,649
Total amount available for FY13/14 = $1,659,118
Apr-Oct 2013 column includes $45,740 for the ODR to CAS Reconciliation report effort (SR 553416)

Notes:

PNet R3.0 estimates include MAXIMUS and Catamaran effort
The number of MAXIMUS hours per month includes IT and BAT resources which are charged at different rates
Original estimate for February reduced due to delays in requirements decisions
Original estimate for March increased to make up for reduction in February effort
Requirements changes that have **increased** the estimate and/or scope:
- Methadone Payment Process change
- New Service Claims cap
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- Creation of a "production-like" test environment for performance testing of new limits requirements

Requirements changes that have **decreased** the estimate and/or scope:
- PharmaNet R4.0 requirements and estimate removed from scope
- Stakeholder Engagement Strategy and Plan assigned to MoH
- Provider enrolment operational activities, training and communications removed from scope
- Risk and Controls review removed from scope
- No new reports or report updates
- Stabilization criteria will be loosened to reduce the amount of stabilization support required
- MAXIMUS effort related to the STRA removed from scope

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2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	N/A	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	N/A	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	N/A	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	None	N/A	Closed	Alternate course of action selected, outside of scope of R3
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MoH	2014-02-28	Non	N/A	Closed	Document has been signed off by MoH
MAXIMUS	Change Order #65	MOH	2014-03-13	None	N/A	Closed	MAXIMUS delivered final version to MoH March 13, 2014. MoH has provided final approval and the CO has been signed off by MAXIMUS and MoH.
MAXIMUS	PharmaNet R3 Business Continuity Assessment and Plan (BCP)	MoH	2014-03-24	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Training Plan	MoH	2014-04-03	None	N/A	Closed	Signed off by MAXIMUS and MoH

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Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet – Release 3 Test Plan	MAXIMUS	2014-05-02	None	N/A	Closed	Signed off by MAXIMUS team (internal work product)
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MoH	2014-04-23	Review and Approval	2014-05-16	Closed	Configuration settings for Go-Live have been documented and approved.
MAXIMUS	PharmaNet – Release 3 Disaster Recovery Assessment and Plan	MoH	2014-04-14	Signature Gathering	2014-05-16	Closed	Signed off by MAXIMUS and MoH
MAXIMUS	PharmaNet R3 Privacy Impact Assessment (PIA)	MoH	2014-03-27	Signature gathering	2014-05-16	Pending	Signed off by MAXIMUS, waiting for MoH sign-off

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
Y	553643	H	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19 2014.	MAXIMUS has not been able to proceed with testing of the transaction code as per the project plan.	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has also worked additional weekday hours and weekends. Code delivered by Catamaran on March 19 2014 and is now being tested.	2014-MAR-19

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Status G / Y / R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
Y	553680	H	Shared Services BC (SSBC) has recently implemented a change freeze for all infrastructure services, which also includes services delivered by all vendor partners, including HP Advanced Solutions, IBM, and TELUS. In the meantime, all change requests are being reviewed by Office of the Chief Information Officer (OCIO) executive to determine if there are any significant risks. For clients who have pending iStore orders or Requests for Change (RFC) scheduled, please be advised that these requests will be reviewed and assessed as per the process outlined above and may be rescheduled. Should clients require an emergency change during the freeze, they are reminded of the Request for Special Processing procedure.	May have an impact on the scheduled Go-Live date for R3: • if MAXIMUS is unable to engage SSBC/HPAS when required; • If the MoH iStore request for screen code packaging is delayed; • If HPAS is not available to roll-out the packaged screen code on the Go-Live date.	The following steps could be taken to address this issue: • Follow the SSBC "Request for Special Processing" procedure; • Escalate quickly if this issue is raised Note: Recent experience with SSBC/HPAS has been at regular service levels (i.e., no impact due to the freeze)	

3.2 Key/Active Project Risks (Reported out of ITG Search Results) – risks being actively monitored are highlighted in yellow

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as	L	M	Budget

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		problems may be uncovered after the stabilization period has expired		possible to Production			
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule
553616	M	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables may impact application performance and jeopardize SLAs	MAXIMUS will undertake performance testing as early as possible in the project to determine if the planned changes will impact the performance of the application.	H	M	Scope Budget Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium term.	H	H	Budget, Schedule
553654	M	Testing of the screens has been delayed from the original plan and delivery of packaged code to MoH 8 weeks prior to go-live is going to be difficult to achieve	Shared Services has requested an 8 week lead time for packaging. If the screen code package cannot be delivered by the end of April the 8 week lead time will not be met and Shared Services may not be able to	MAXIMUS is focusing effort on testing of the screen code in April but there is a dependency on MoH participants in the BAT. Coordination of participants has begun and MoH needs to ensure that participants are available. MoH could request that Shared	M	M	Schedule

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			package the code in time for Go-live.	Services package the screen code with less than 8 weeks notice.			
553658	M	MoH is having a Risk and Controls review of PharmaNet Release 3.0 and in order for the project to be approved for Go-live, the MoH executive must approve the Risk and Controls report, and the report must be accepted by the Comptroller General's office. The report is due around June 12 2014 and the Go-live decision is currently planned for June 13. Approval for deployment in the June 25 change window should occur at the June 18 Change Management meeting. These dates are very tight so any slippage could jeopardize the Go-live date.	MoH does not want the Go-live date to move because of cost savings that will be lost due to delay. MAXIMUS does not want to move the Go-live date to move because of proximity to the testing/deployments for the Medigent (RAPID) project and competition for the same infrastructure resources.	The Go-live decision presentation date could be moved to a few days later if the Risk and Controls report has not been approved by the MoH executive by June 13. MAXIMUS will know if there are any issues with going live June 25 earlier than June 13 so the presentation is a formality. MoH will work with Deloitte to get the Risk and Controls review done as quickly as possible. MAXIMUS will respond to any requests from Deloitte in a timely fashion.	H	M	Schedule
553668	H	PNet R3 is currently designed/developed to adjudicate all claims from DIS only pharmacies to zero (i.e., the client will not be reimbursed for any legitimate purchases from DIS only pharmacies). The new requirement is for the off-line process to adjudicate the claim as per the usual rules and pay the appropriate amount to the client.	If the decision is not made in a timely fashion (1 week) then it will not be possible to implement the change without impacting the project schedule. A different decision will then be required - delay the project to incorporate the new requirement or proceed as is and implement the new requirement after PNet R3 Go-live. Therefore the impact is either a project delay or an implementation where clients are not reimbursed for purchases from DIS only pharmacies	MoH to provide a decision as to whether or not the recommendation (i.e., modify transaction code to allow adjudication of DIS only claims submitted by clients) should be implemented within 1 week (by April 30 2014). MoH decision is to not make any changes to R3 but to pursue options for addressing adjudication of client claims for DIS only pharmacy dispenses through operational avenues.	H	H	Scope Schedule

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3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Cancelled	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Pending	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescribing transactions which could also be impacted by the Release 3.0 functionality
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 . CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.

3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)

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4 Detail

No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
1.	Project Charter	Oct 18, 2013			Approved
2.	High-level Business Requirements	Oct 18, 2013			Approved
3.	Training Strategy	Dec 13, 2013		Dec 19, 2013	Approved
4.	Updated Project Charter	Mar 14, 2014	Apr 9, 2014	N/A	Approved
5.	Functional Requirements	Dec 17, 2013	Feb 14, 2014	Jan 20, 2014	Approved
6.	Non-functional Requirements	Dec 17, 2013	Feb 14, 2014	Mar 25, 2014	Approved
7.	Security and Threat Risk Assessment (STRA)	Mar 14, 2014	Mar 25, 2014	N/A	No further MAXIMUS involvement required
8.	Business Continuity Assessment and Plan (BCP)	Feb 14, 2014	Mar 28, 2014	Mar 24, 2014	Approved
9.	Impact Assessment (internal work product)	Jan 2014	Apr 2, 2014	NA	Approved
10.	Functional Specifications	Jan 31, 2014	Apr 30, 2014	N/A	Completed
11.	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	Apr 30, 2014	May 2, 2014	N/A	Complete
12.	Test Plan (no change to approved R1/R2 Strategy)	Dec 31, 2013	Apr 30, 2014	N/A	Complete
13.	BAT - screens	May 20, 2014	May 6, 2014	N/A	Complete
14.	Training Plan	Jan 2014	Mar 28, 2014	Apr 11, 2014	Complete
15.	Disaster Recovery Assessment and Plan (DRP)	Mar 24, 2014	Apr 23, 2014	Apr 23, 2014	Complete
16.	BAT - transactions	N/A	May 23, 2014	N/A	Complete
17.	Provide extract to Health Ideas for testing	TBD	May 23, 2014	N/A	Complete
18.	Work Instructions – Internal	May 20, 2014	May 23, 2014	N/A	Complete
19.	Privacy Impact Assessment (PIA)	Feb 14, 2014	May 28, 2014	Apr 4, 2014	Waiting for MoH sign-off
20.	Development - Build	May 22, 2014	Jun 6, 2014	N/A	In Progress
21.	Production Support Plan	Mar 17, 2014	Jun 13, 2014	N/A	In Progress

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No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
22.	Development – Function/Integration Testing	May 15, 2014	Jun 13, 2014	N/A	In Progress
23.	Test Results Summary	Jun 25, 2014	Jun 13, 2014	N/A	In Progress
24.	Defect Action Plan	Jun 25, 2014	Jun 13, 2014	N/A	In Progress
25.	Deployment Go/No Go presentation	May 15, 2014	Jun 17, 2014	TBD	In Progress
26.	Training Development and Execution	Apr 16, 2014	Jun 20, 2014	N/A	In Progress
27.	Deployment/Cutover Strategy/Plan	May 2014	Jun 20, 2014	N/A	In Progress
28.	Deployment	May 2014	Jun 25, 2014	N/A	Not Started
29.	Escrow Deposit	Aug 13, 2015	Sep 22, 2014	N/A	Not Started
30.	Project Close	Aug 30, 2015	Sep 30, 2014	N/A	Not Started

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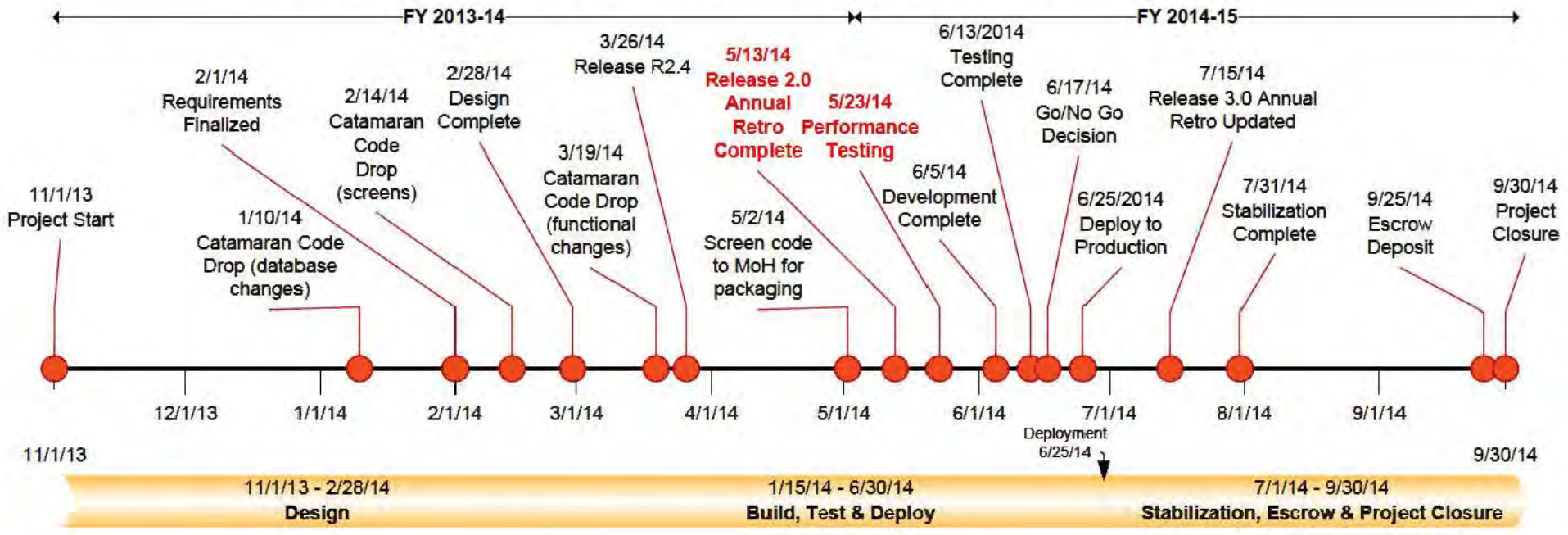
5 **Project SDLC Phase Metrics** – *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*

Release 3 Footprint & Milestone Targets

Revised Date: May 23, 2014



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Bi-weekly Project Progress Report

MAXIMUS CANADA
A MAXIMUS Company

1 Project Information

Program - Project (ITG) # and Name:	PharmaNet Release 3.0	**Reporting Period**	**From YYYY-Mon-DD**	**To YYYY-Mon-DD**
			2014-May-29	2014-Jun-11
Project Plan Version:	PharmaNet R3	**PLC/Project Phase**	Development Phase	
Project Sponsor(s):	Joel Levinson	**Phase Completion**	Development – June 25, 2014	
Project Manager:	David Carleton	**Next PLC Decision Date/Checkpoint:**	Go / No Go Decision – June 17, 2014	
Project Purpose:	The PharmaNet Release 3.0 Project will plan, define requirements, design, develop and implement the following business requirements in the PharmaNet application: • s.17 • Blood Glucose Test Strips Limit • s.17 • Service Provider enrolment - support for new regulations • Publicly funded vaccine administration - new adjudication rules for Service Claims (deployed April 23) • Methadone payment process change • s.17 • DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments			

	Comments	Status G / Y / R
Scope	The following activities will be undertaken within the scope of this project: • Planning and Project Management • Detailed Analysis and Design • Build • Test case development and execution • Training • Deployment • Stabilization, Escrow and Project Closure. The following activities and functionality are out of scope: • PharmaNet Conformance Specifications updates • Communications with SSOs regarding system changes • s.17 • Federally Insured Patients • Deloitte Audit Recommendations s.17 and those pertaining to blood glucose testing strips)	Y

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	• Service Provider Enrolment Program roll-out **The following activities and functionality have been removed/modified from the original scope:** • PharmaNet R4.0 requirements and estimate • Stakeholder Engagement Strategy and Plan • Provider enrolment operational activities, execution of training and communications are not included in the budget for R3 but will occur in parallel and involve many of the same resources as R3 • Risk and Controls review • No new reports or report updates • Stabilization criteria will be loosened to reduce the amount of stabilization support required **The following activities and functionality have been added to the original scope:** • Methadone Payment Process change • s.17 • BGTS Patient Category lookup screen • Apply DIS only pharmacy check to Tamiflu, Service Claims and Methadone monthly payments jobs • Creation of a "production-l ke" test environment for performance testing of new limits requirements Scope Concerns • Turning off s.17 BGTS limits for Go-Live and the impact on stabilization, training and project closure effort and planning
Quality	Adhering to MAXIMUS methodology During the last month, the automated regression test suite has been run against the Release 3 code three times. The suite is comprised of 4281 tests of which 3607 tests have been run to date. The suite spans all transactions for both V3 and V70. It includes end to end tests covering happy path, alternate path, exception path and error paths as well as selected functional tests that exercise various rules. This suite is primarily run on each major code drop, hands free and in off hours. The suite takes approximately 4 to 7 hours to run, saving a significant number of hours that would be required to run the tests manually. As a comparison measure, the Industry standard is an average of 15 test cases per tester per day. Therefore, to manually run the suite, would take one tester 285 days to complete based on the industry standard. This continues to be a significant savings to PharmaNet projects.
Schedule	Development Activities: o PIA – signed off (complete) o Technical Specifications – complete o Business Configuration settings – complete o Screen code – iStore ticket for packaging and deployment by SSBC created and sent o Transaction code – testing complete o DRP – signed off (complete) o Batch development – complete o Batch testing – complete o Go / No Go Presentation – scheduled for June 17 Schedule Concerns: o Catamaran development of the transaction code (adjudication servers) was delayed by more than two weeks (delivery to MAXIMUS was targeted for Feb 28 and was received March 19, testing is underway). This has impacted the MAXIMUS

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	team's ability to move ahead with deployments to environments and testing. This may have an impact on the Go-live date. MAXIMUS monitored the situation very closely and requested that Catamaran work extra hours (nights and weekends) to resolve the issues as quickly as possible (which they did). The MAXIMUS team worked on tasks that were scheduled for later in the project as well as prepared to start testing as soon as the code was received and installed. o Screen code BAT was not completed by the end of April and this is required to give MoH System Services and SSBC 8 week's lead-time ahead of go-live for packaging. MAXIMUS packaged the code and delivered to MoH on April 29. However, an issue was discovered with transaction and screen code. A revised version of the screen code was delivered on May 2. o MoH MBPSD coordinated participation in screen code BAT for May 5/6 - successful BAT. MoH System Services will use the revised May 2 screen code to conduct the connectivity testing, pre-packaging activities and submit iStore Project request to SSBC. o Screen code rollout at MoH – needs to occur prior to employees arriving for work or they need to be forewarned so that they can schedule their activities appropriately. Deployment window is normally midnight to 8 AM (PNet not available) – may need to be extended (e.g., start earlier, 10 PM instead of midnight). o Note that as was the case for the Increase Sequence Number SR (R2.1), a second change window (June 26) will be required for the data warehouse refresh. This means that the data warehouse will have stale data until the Friday morning (June 27) o CR 2014-006 – s.17 s.17 o Testing has uncovered a potential performance issue that we are currently re-testing and analyzing. If the issue cannot be resolved it may be necessary to discuss options (as presented in the draft DR) on how to proceed	
Budget	New Estimates: o CO 65, covering January 2014 to project end (September 2014), and the updated Project Charter have been provided to MoH for review and approval. The CO has been signed by MAXIMUS and MOH. o The charge for the work performed by MAXIMUS in March 2014, when added to the previous invoices for the project, has exceeded the budget for fiscal 2013/14 as specified in CO 64 and CO 65. MAXIMUS will submit the invoice for March 2014 and MoH will pay up to the budgeted amount for Fiscal 2013/14. MoH has paid the submitted invoice amount. o CR for provision of screen code and deployment support for the Colleges and HLBC (CR2014-005) has been submitted to MoH for review and approval. o CR 2014-005 – Provision of screen code and deployment support for the Colleges and HLBC – approved by MoH, and signed at MAXIMUS, delivered to MoH for signature o CR 2014-006 - s.17 o The project is now over-burning on the budget due to the effort being spent to resolve the performance issue that was recently discovered.	Y

Comment [PLH1]: It appears that MoH has not received the signed CR from MAXms

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Ministry of Health Communications Status

	Comments	Status (G / Y / R)
Scope	The following activities will be undertaken within the scope of Communications: • Develop and execute a communications plan for PNet R3.0 containing: ▪ Stakeholder Engagement matrix ▪ Communications Activities matrix Scope Concerns • none	G
Schedule	Communications Plan • Final, signed off communications plan – complete Execute Communications Plan –as per the Communications Activities Matrix • Scheduled to begin June 5th - delayed Schedule Concerns: • Communications delayed due to performance testing outstanding issues – increased project risk of implementation delay	Y

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2 Summary

2.1a Total Project Schedule (updated monthly)

Project	Scheduled Start Date DD-MON-YYYY	Scheduled Finish Date DD-MON-YYYY	A Baseline Effort (hrs.)	B Planned To Date (hrs.) MPP	C Actual Effort (hrs.)	D Percent of Planned To Date (C/B)	E Assessed Percent Complete	F Percent Utilized (C/A)	Comments
PLC Phase – Exploration	04/01/2013	31/10/2013				100%	100%	100%	Complete
PLC Phase – Planning	11/01/2013	04/30/2014				100%	100%	100%	Complete
PLC Phase – Development	**01/01/2014**	**06/25/2014**		s.21		**87%**		**84%**	**In Progress**
PLC Phase – Deployment	06/01/2014	06/30/2014							Not Started
PLC Phase – Stabilization	07/01/2014	09/30/2014							Not Started

2.2a Total Capital Budget (updated monthly)

PharmaNet Release 3.0 (including Release 4.0 Business Requirements and Estimate)	A Original Estimate (Nov 8 2013)	B Actual for Apr to Oct 2013 (not included in "A") **	C Revised Estimate (Apr 9 2014) * includes "B"	D Spent To-date	E Spent Last Month - May 2014	F=C-D Remaining	G Estimate to Complete	H Estimate at Completion	I=D/C Burn Rate
Release 3.0 Budget	$3,359,160	$158,740	$2,998,231	$2,421,634	$360,986	$576,597	$576,597	$2,998,231	81%
Change Requests	$0	$0	$0	$0	$0	$29,850	$29,850	$29,850	
Total	**$3,359,160**	**$158,740**	**$2,998,231**	**$2,421,634**	**$360,986**	**$606,447**	**$606,447**	**$3,028,081**	**80%**

**** Column B includes ODR to CAS Reconciliation Report SR 553416 ($45,740)**

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2.2b JEC Monthly Actual and Estimate Tracking (updated monthly)

PharmaNet Release 3.0 Project Actuals and Estimates

Updated: June 11, 2014

$s	Actual Apr-Oct 2013	Actual Nov 2013	Actual Dec 2013	Actual Jan 2014	Actual Feb 2014	Actual March 2014	Fiscal Total FY13/14	Actual April 2014	Actual May 2014	Estimate June 2014	Estimate July 2014	Estimate Aug 2014	Estimate Sept 2014	Fiscal Total FY14/15	Project Total
PNet R3.0	$158,740	$222,698	$128,478	$291,059	$332,367	$525,347	$1,658,689	$436,376	$395,831	$391,475	$175,482	$18,054	$26,431	$1,443,649	$3,102,338
PNet R4.0	$0	$429	$0	$0	$0	$0	$429	$0	$0	$0	$0	$0	$0	$0	$429
CO 66 Credit	$0	$0	$0	$0	$0	$0	$0	$34,845	$34,845	$34,845	$0	$0	$0	$104,536	$104,536
CR2014-005	$0	$0	$0	$0	$0	$0	$0	$0	$0	$17,000	$0	$0	$0	$17,000	$17,000
CR2014-006	$0	$0	$0	$0	$0	$0	$0	$0	$0	$12,850	$0	$0	$0	$12,850	$12,850
Total	$158,740	$223,127	$128,478	$291,059	$332,367	$525,347	$1,659,118	$401,531	$360,986	$386,480	$175,482	$18,054	$26,431	$1,368,963	$3,028,081
Hrs															

MAXIMUS s.21

CO 64
CO 65
CO 66

Financial Adjustments:

Removed $11,440 from CO 65 due to removal of effort for STRA s.21
Apply credit for additional capacity hrs (CO 66) to April, May and June s.21
Add $45,740 for June to Aug 2013 (ODR to CAS reconciliation)
CO 64 value is $535,591 of which $25,246 was not spent by Dec 31 2013 so that amount was applied against the Jan 2014 invoice
CO 65 value is $2,567,176. It is split by fiscal: FY2013/14 = $1,123,527 and FY2014/15 = $1,443,649
Total amount available for FY13/14 = $1,659,118
Apr-Oct 2013 column includes $45,740 for the ODR to CAS Reconciliation report effort (SR 553416)
CR2014-005 - Provide screen code to Colleges and HLBC - added to project totals
CR2014-006 - No limits to be implemented at Go-live

Notes:

PNet R3.0 estimates include MAXIMUS and Catamaran effort
The number of MAXIMUS hours per month includes IT and BAT resources which are charged at different rates
Original estimate for February reduced due to delays in requirements decisions
Original estimate for March increased to make up for reduction in February effort
Requirements changes that have **increased** the estimate and/or scope:
- Methadone Payment Process change
- New Service Claims cap
- BGTS Patient Category lookup screen
- Apply DIS only pharmacy check to Tamiflu monthly payments job
- Creation of a "production-like" test environment for performance testing of new limits requirements

Requirements changes that have **decreased** the estimate and/or scope:
- PharmaNet R4.0 requirements and estimate removed from scope
- Stakeholder Engagement Strategy and Plan assigned to MoH
- Provider enrolment operational activities, training and communications removed from scope
- Risk and Controls review removed from scope
- No new reports or report updates
- Stabilization criteria will be loosened to reduce the amount of stabilization support required
- MAXIMUS effort related to the STRA removed from scope

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Bi-weekly Project Progress Report

2.3 Waiting for Action - External Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MOH	2013-12-10	None	N/A	Closed	Settings provided by MoH are as close to Production as possible at this time. Settings may need to be adjusted for Production at go-live.
MAXIMUS	s.17						
MAXIMUS	Requirements questions – Service Claims and Methadone Payments Adjustment Processes	MOH	2013-12-13	None	N/A	Closed	All scope questions have been answered by MoH.
MAXIMUS	PharmaNet Release 3.0 – Training Strategy	MOH	2013-12-19	None	N/A	Closed	Final version of document signed and delivered
MAXIMUS	Exclusion of OTC drugs and vitamins for Med Review	MOH	2014-02-17	None	N/A	Closed	Alternate course of action selected, outside of scope of R3
MAXIMUS	PharmaNet R3 Detailed Functional Requirements	MoH	2014-03-01	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Detailed Non-Functional Requirements	MoH	2014-02-28	Non	N/A	Closed	Document has been signed off by MoH
MAXIMUS	Change Order #65	MOH	2014-03-13	None	N/A	Closed	MAXIMUS delivered final version to MoH March 13, 2014. MoH has provided final approval and the CO has been signed off by MAXIMUS and MoH.
MAXIMUS	PharmaNet R3 Business Continuity Assessment and Plan (BCP)	MoH	2014-03-24	None	N/A	Closed	Document has been signed off by MoH
MAXIMUS	PharmaNet R3 Training Plan	MoH	2014-04-03	None	N/A	Closed	Signed off by MAXIMUS and MoH

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Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status (Pending/Submitted/Approved /Closed)	Comment
MAXIMUS	PharmaNet – Release 3 Test Plan	MAXIMUS	2014-05-02	None	N/A	Closed	Signed off by MAXIMUS team (internal work product)
MAXIMUS	PharmaNet - Release 3 Configuration Settings	MoH	2014-04-23	None	2014-05-16	Closed	Configuration settings for Go-Live have been documented and approved.
MAXIMUS	PharmaNet – Release 3 Disaster Recovery Assessment and Plan	MoH	2014-04-14	None	2014-05-16	Closed	Signed off by MAXIMUS and MoH
MAXIMUS	PharmaNet R3 Privacy Impact Assessment (PIA)	MoH	2014-03-27	None	2014-05-16	Closed	Signed off by MAXIMUS and MoH
MAXIMUS	PharmaNet R3 Go / No Go	MoH	2014-06-17	Approval to Deploy	2014-06-17	Pending	Presentation to be made to JEC on June 17 and approval to deploy decision to be made at that meeting

2.4 Waiting for Action - Internal (Reported out of Log) Note: Highlight row with dashboard colours (Red or Yellow) to indicate close to or overdue items

Originator	Filename	Delivered to (Primary Organization)	Date Delivered YYYY-MM-DD	Action Required	Action Due Date YYYY-MM-DD	Status	Comment

3 Project Issues/Risks/Decisions/Changes

3.1 Key Open Project Issues (Reported out of ITG Search Results)

Status (G / Y / R)	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
Y	553643	L	Transaction code being developed by Catamaran was supposed to be delivered Feb 28 2014 but is now scheduled for delivery on Mar 19	MAXIMUS has not been able to proceed with testing of the transaction code as per the project	MAXIMUS has moved ahead on tasks that were scheduled for later in the project. Catamaran has increased the number of resources dedicated to resolving the outstanding software bugs and has	2014-MAR-19

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Status G Y R	ITG Issue No.	Priority	Detailed Description	Business Impact	Proposed Resolution	Due Date YYYY-Mon-DD
			2014.	plan.	also worked additional weekday hours and weekends. Code delivered by Catamaran on March 19 2014 has been fully tested.	
Y	553680	M	Shared Services BC (SSBC) has recently implemented a change freeze for all infrastructure services, which also includes services delivered by all vendor partners, including HP Advanced Solutions, IBM, and TELUS. In the meantime, all change requests are being reviewed by Office of the Chief Information Officer (OCIO) executive to determine if there are any significant risks. For clients who have pending iStore orders or Requests for Change (RFC) scheduled, please be advised that these requests will be reviewed and assessed as per the process outlined above and may be rescheduled. Should clients require an emergency change during the freeze, they are reminded of the Request for Special Processing procedure.	May have an impact on the scheduled Go-Live date for R3: • if MAXIMUS is unable to engage SSBC/HPAS when required; • If the MoH iStore request for screen code packaging is delayed; • If HPAS is not available to roll-out the packaged screen code on the Go-Live date.	The following steps could be taken to address this issue: • Follow the SSBC "Request for Special Processing" procedure; • Escalate quickly if this issue is raised Note: Recent experience with SSBC/HPAS has been at regular service levels (i.e., no impact due to the freeze) The freeze has been removed but there is a backlog of activities that may still impact requests unless they are of higher priority.	
R	553616	H	Application performance may be impacted by the business requirements.	Increased accessing of the ClaimsHist and MedHist tables appears to have impacted application performance and this would jeopardize SLAs. This may in turn jeopardize the scheduled Go-live date.	The following steps are being undertaken by MAXIMUS and Catamaran to determine if the code changes have impacted the performance of the application: • Extensive testing of the application • Logs are being captured and analyzed • Code is being reviewed • Twice daily joint review sessions • Planning for next steps	June 13, 2014

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3.2 Key/Active Project Risks (Reported out of ITG Search Results) – risks being actively monitored are highlighted in yellow

ITG Risk No.	Priority	Detailed Description	Risk Impact Assessment	Mitigation / Contingency Strategy (Manually entered)	Initial Risk Impact Level	Risk Probability	Risk Type
553610	M	The aggressive nature of the project schedule exposes it to higher risk of being delayed	Minimal time has been allowed in the schedule to undertake deliverable review/approval cycles. Failure to adhere to the schedule will cause delays	MAXIMUS will closely monitor the schedule and follow up on time sensitive processes	M	M	Schedule Budget
553611	L	If the functionality is not utilized during the stabilization period then problems may be uncovered after the stabilization period has expired	Software defects may result in application functionality issues at a future date	MAXIMUS will mitigate by testing business scenarios and business configuration settings as close as possible to Production	L	M	Budget
553612	M	The scope of the project may be impacted during design	Elicitation of detailed business requirements may not be sufficient to determine the full scope of the project. This could lead to an increase in the budget and/or delay implementation of the application enhancements	MAXIMUS will conduct internal reviews of the detailed business requirements in order to determine the scope of the project	M	L	Scope Budget Schedule
553644	H	The EMPI server migration has resulted in substantial impact to HIBC both in terms of technical and operational resources.	Due to the impact of the enrolment automation (automated new born registrations) code not be migrated to the new server HIBC has had to apply both operations and IT resources to deal with the impact. In the case of IT, we have had to pull key technical resources off of both PharmaNet and Medigent.	MAXIMUS is doing what we can to mitigate these impacts, but this issue hit our number one most critical resource constraint – SOA developers. At this point we have not be able to assess the project impacts, but schedule is a serious concern which would also have knock on effects to budgetary projections. The fix that we have put in place for the enrolment automation issue is temporary and vital stats will likely be asking us to make additional changes for a long term solution, but we are not able to spend any more time on this issue in the near to medium	H	H	Budget, Schedule

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				term.			
553654	M	Testing of the screens has been delayed from the original plan and delivery of packaged code to MoH 8 weeks prior to go-live is going to be difficult to achieve	Shared Services has requested an 8 week lead time for packaging. If the screen code package cannot be delivered by the end of April the 8 week lead time will not be met and Shared Services may not be able to package the code in time for Go-live.	MAXIMUS is focusing effort on testing of the screen code in April but there is a dependency on MoH participants in the BAT. Coordination of participants has begun and MoH needs to ensure that participants are available. MoH could request that Shared Services package the screen code with less than 8 weeks notice.	M	M	Schedule
553658	M	MoH is having a Risk and Controls review of PharmaNet Release 3.0 and in order for the project to be approved for Go-live, the MoH executive must approve the Risk and Controls report, and the report must be accepted by the Comptroller General's office. The report is due around June 12 2014 and the Go-live decision is currently planned for June 13. Approval for deployment in the June 25 change window should occur at the June 18 Change Management meeting. These dates are very tight so any slippage could jeopardize the Go-live date.	MoH does not want the Go-live date to move because of cost savings that will be lost due to delay. MAXIMUS does not want to move the Go-live date to move because of proximity to the testing/deployments for the Medigent (RAPID) project and competition for the same infrastructure resources.	The Go-live decision presentation date could be moved to a few days later if the Risk and Controls report has not been approved by the MoH executive by June 13. MAXIMUS will know if there are any issues with going live June 25 earlier than June 13 so the presentation is a formality. MoH will work with Deloitte to get the Risk and Controls review done as quickly as possible. MAXIMUS will respond to any requests from Deloitte in a timely fashion.	H	M	Schedule
553668	H	PNet R3 is currently designed/developed to adjudicate all claims from DIS only pharmacies to zero (i.e., the client will not be reimbursed for any legitimate purchases from DIS only pharmacies). The new requirement is for the off-line process to adjudicate the claim as per the usual	If the decision is not made in a timely fashion (1 week) then it will not be possible to implement the change without impacting the project schedule. A different decision will then be required - delay the project to incorporate the new requirement or proceed as is and implement the new	MoH to provide a decision as to whether or not the recommendation (i.e., modify transaction code to allow adjudication of DIS only claims submitted by clients) should be implemented within 1 week (by April 30 2014). MoH decision is to not make any changes to R3 but to pursue	H	H	Scope Schedule

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		rules and pay the appropriate amount to the client.	requirement after PNet R3 Go-live. Therefore the impact is either a project delay or an implementation where clients are not reimbursed for purchases from DIS only pharmacies	options for addressing adjudication of client claims for DIS only pharmacy dispenses through operational avenues.			

3.3 Key Decisions

DR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled)	Decision Description	Implications (Project, Business, Contract, etc.)
	Cancelled	Need to finalize the scope of Health Ideas Changes (i.e. all new data required? eRx/MMF data required?) and confirm implementation date	If eRx/MMF data is required to be added to the scope of Health Ideas Interface update, this will impact the scope and budget for the project. Schedule may be impacted as well. eRx/MMF data cannot be included within the scope of R3 without impacting the Go-live date. It has been assumed to be out of scope for budgeting and planning purposes.
	Approved	Scope of STRA – only changes or full PharmaNet STRA – impact on R3 budget	Only the Project STRA is included within the budget for R3 – MOH has indicated that MAXIMUS input for the R3 STRA is complete
	Approved	Finalize requirement for new reports	No new or updated reports are required as part of R3. However, a new screen for BGTS (patient category lookup, part of PNet PNP) will be included in the scope for R3.
	Approved	PharmaNet Release 4.0 – date to start developing requirements and estimate	Release 4.0 requirements and estimate will not be included in the Release 3.0 project.
DR2014-001	Pending	Due to changes to the PharmaNet application introduced by the PharmaNet Release 3.0 project MAXIMUS has identified a risk that the PharmaNet Claims transaction may not be able to meet the current SLR for transaction response time.	In addition to the SLR, Release 2.0 added capacity for e-Prescr bing transactions which could also be impacted by the Release 3.0 functionality
	Approved	No additional effort is required from the MAXIMUS team with respect to the STRA.	The remaining effort for the STRA task is to be removed from the budget for fiscal 2013/2014. The number of hours remaining is s.21 s.21 CO 65 has been updated to reflect this change.
	Approved	No changes to PharmaNet functionality to reject all claims from DIS-Only pharmacies (including offline cardholder claims) are required as part of Release 3.	No changes to project scope, budget or schedule are needed. The current PharmaNet functionality will not provide an ability to reimburse cardholders for drugs/products purchased at DIS-Only pharmacies.

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3.4 Key Changes

CR No. (if applicable)	Status (Pending / Submitted / Approved / Cancelled))	Change Description	Implications (Project, Business, Contract, etc.)
CR2014-005	Approved (waiting for MAXIMUS signatures)	Provide PharmaNet application screen code to the Colleges and HLBC.	Additional effort required by MAXIMUS and therefore additional budget required.
CR2014-006	Pending (waiting for MAXIMUS approval to send to MoH)	s.17 BGTS and invention limits are also set to default values.	s.17

4 Detail

No.	Deliverable / Work Product / Milestone	Original Completion Date	Revised Completion Date	Ministry Walkthrough Date	Status
1	Project Charter	Oct 18, 2013			Approved
2	High-level Business Requirements	Oct 18, 2013			Approved
3	Training Strategy	Dec 13, 2013		Dec 19, 2013	Approved
4	Updated Project Charter	Mar 14, 2014	Apr 9, 2014	N/A	Approved
5	Functional Requirements	Dec 17, 2013	Feb 14, 2014	Jan 20, 2014	Approved
6	Non-functional Requirements	Dec 17, 2013	Feb 14, 2014	Mar 25, 2014	Approved
7	Security and Threat Risk Assessment (STRA)	Mar 14, 2014	Mar 25, 2014	N/A	No further MAXIMUS involvement required
8	Business Continuity Assessment and Plan (BCP)	Feb 14, 2014	Mar 28, 2014	Mar 24, 2014	Approved
9	Impact Assessment (internal work product)	Jan 2014	Apr 2, 2014	NA	Approved
10	Functional Specifications	Jan 31, 2014	Apr 30, 2014	N/A	Complete
11	Deliver PNP package (screens) to MoH (8 weeks prior to Deployment)	Apr 30, 2014	May 2, 2014	N/A	Complete
12	Test Plan (no change to approved R1/R2 Strategy)	Dec 31, 2013	Apr 30, 2014	N/A	Complete
13	BAT - screens	May 20, 2014	May 6, 2014	N/A	Complete

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14	Training Plan	Jan 2014	Mar 28, 2014	Apr 11, 2014	Complete
15	Disaster Recovery Assessment and Plan (DRP)	Mar 24, 2014	Apr 23, 2014	Apr 23, 2014	Complete
16	Testing - transactions	N/A	May 23, 2014	N/A	Complete
17	Provide extract to Health Ideas for testing	TBD	May 23, 2014	N/A	Complete
18	Work Instructions – Internal	May 20, 2014	May 23, 2014	N/A	Complete
19	Privacy Impact Assessment (PIA)	Feb 14, 2014	May 28, 2014	Apr 4, 2014	Complete
20	Development - Build	May 22, 2014	Jun 6, 2014	N/A	Complete
21	Production Support Plan	Mar 17, 2014	Jun 13, 2014	N/A	In Progress
22	Development – Function/Integration Testing	May 15, 2014	Jun 13, 2014	N/A	In Progress
23	Test Results Summary	Jun 25, 2014	Jun 13, 2014	N/A	In Progress
24	Defect Action Plan	Jun 25, 2014	Jun 13, 2014	N/A	In Progress
25	Deployment Go/No Go presentation	May 15, 2014	Jun 17, 2014	Jun 17, 2014	In Progress
26	Training Development and Execution	Apr 16, 2014	Jun 20, 2014	N/A	In Progress
27	Deployment Strategy	May 2014	Jun 6, 2014	N/A	In Progress
28	Deployment Plan	May 2014	Jun 20, 2014	N/A	In Progress
29	Deployment	May 2014	Jun 25, 2014	N/A	Not Started
30	Escrow Deposit	Aug 13, 2015	Sep 22, 2014	N/A	Not Started
31	Project Closure	Aug 30, 2015	Sep 30, 2014	N/A	Not Started

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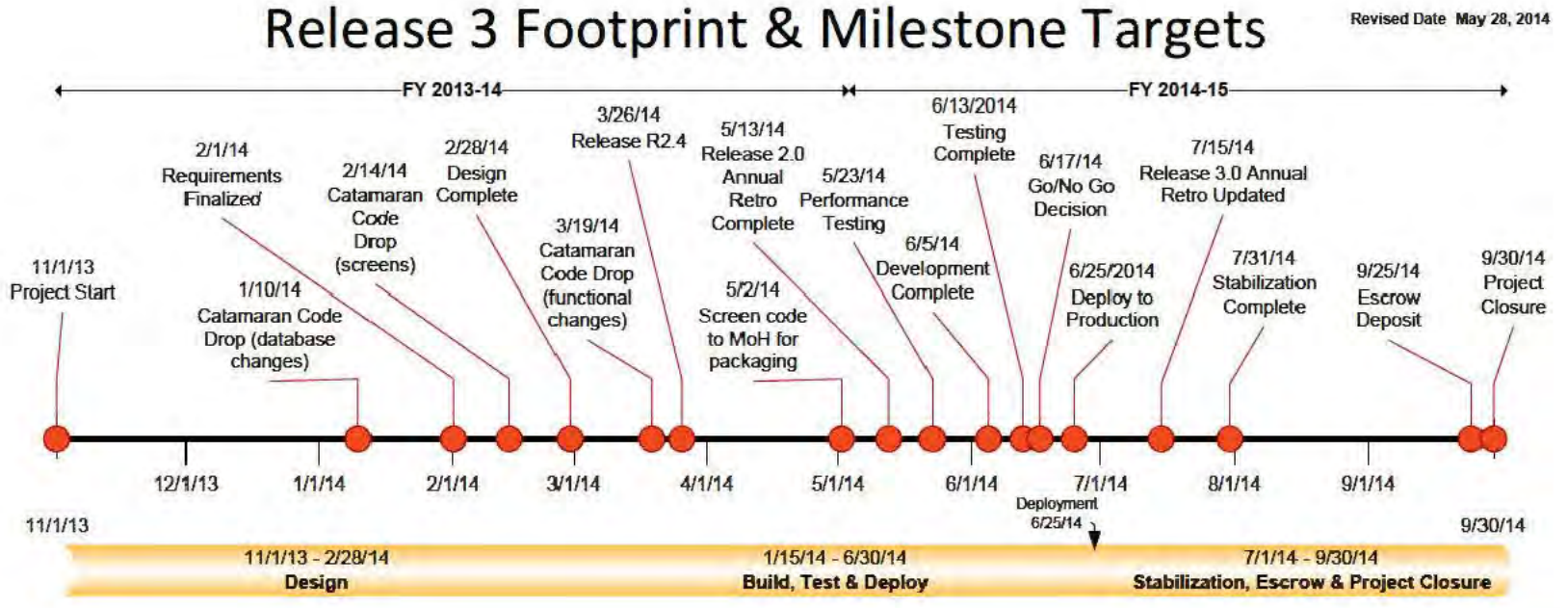
5 **Project SDLC Phase Metrics –** *This section needs to be completed and submitted as applicable (based on project scope, current phase, etc.). Units reported on can be modified based on applicability to project*



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