VA ELECTRONIC HEALTH RECORD MODERNIZATION (EHRM) SYSTEM
PERFORMANCE WORK STATEMENT (PWS)
DEPARTMENT OF VETERANS AFFAIRS

Office of Electronic Health Record Modernization (OEHRM)

Additional Interface Development for IOC

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Modification P00004: PWS 5.3.4, 5.3.5, 5.3.6, 5.3.7
Modification P00006: PWS Section 5.3.8 – March 31, 2020

Contents

1.0   BACKGROUND

The mission of the Department of Veterans Affairs (VA) is to provide benefits and services to Veterans of the United States. In meeting these goals, VA strives to provide high quality, effective, and efficient Information Technology (IT) services to those responsible for providing care to the Veterans at the point-of-care as well as throughout all the points of the Veterans' health care in an effective, timely and compassionate manner. VA depends on Information Management/Information Technology (IM/IT) systems to meet mission goals.

On June 1, 2017, the former Secretary of the VA signed a Determination and Findings that, through a public interest exception, permitted the sole source procurement of the Cerner Corporation's (Cerner) Electronic Health Record (EHR) system being deployed by the Department of Defense (DoD) as well as related services for deployment and transition across the VA enterprise in a manner that meets VA needs. Procurement of a single common system across VA and DoD shall achieve VA's goal of seamless care for Veterans by facilitating the transition of active duty military members to VA and improving their timely access to the highest quality of care.

Cerner shall provide a comprehensive EHR solution and services as specifically defined in the EHRM Basic contract. A base set of interfaces has been analyzed and developed under EHRM Task Order (TO) 4. This TO requires interface development, testing and execution for additional EHRM interfaces needed for the Initial Operating Capability (IOC) deployment.

2.0   APPLICABLE DOCUMENTS

The Contractor shall comply with the following documents, in addition to the documents in Paragraph 3.0 in the EHRM Basic Performance Work Statement (PWS), in the performance of this effort**:**

- Attachment A: EHR Master System Integration List

3.0   SCOPE OF WORK

The Contractor shall provide additional interface development, testing and execution in support of interfaces required for EHRM IOC. These tasks include:
   a. Project Management
   b. Interface Development, Integration, Testing, Deployment and Sustainment

3.1   APPLICABILITY

This Task Order (TO) effort PWS is within the scope of paragraph 5.5, "VA Enterprise EHRM Baseline Preparation," of the EHRM Basic PWS.

3.2   ORDER TYPE

The effort shall be proposed on a Firm Fixed Price (FFP) basis.

4.0   PERFORMANCE DETAILS

4.1   PERFORMANCE PERIOD

The period of performance (PoP) shall be from time of award of each interface through 90 days post-interface release with one optional task. The optional task may be exercised multiple times throughout the base period. The total PoP shall not exceed 36 months.

4.2   PLACE OF PERFORMANCE

Efforts under this TO shall be performed both in Contractor facilities, as well as VA facilities. Program meetings may also be held at VA Central Office, some of which may require in person attendance. Project management activities that occur at the enterprise level shall be performed at Contractor facilities.

4.3   TRAVEL OR SPECIAL REQUIREMENTS

The Government anticipates travel to perform the tasks associated with the effort, as well as to attend program-related meetings or conferences throughout the PoP. The Contractor shall include all estimated travel costs in the firm-fixed price line items. These costs will not be directly reimbursed by the Government.

The total estimated number of trips for this effort shall be proposed by the Contractor. Anticipated locations include, but are not limited to, Washington, DC and Veterans Integrated Service Network (VISN) 20 IOC site locations.

4.4   CONTRACT MANAGEMENT

All requirements of Section 9.0 of the EHRM Basic PWS apply to this effort. This TO shall be addressed in the Contractor's Monthly Progress Report as set forth in the EHRM Basic contract.

4.5   GOVERNMENT FURNISHED PROPERTY

The Government has multiple remote access solutions available to include Citrix Access Gateway (CAG), Site-to-Site Virtual Private Network (VPN), and RESCUE VPN.

The Government will not provide IT accessories including but not limited to Mobile Wi-Fi hotspots/wireless access points, additional or specialized keyboards or mice, laptop bags, extra charging cables, extra Personal Identity Verification card readers, peripheral devices, or additional Random Access Memory (RAM). The Contractor is responsible

for providing these types of IT accessories in support of this effort as necessary and any VA installation required for these IT accessories shall be coordinated with the COR.

4.6   SECURITY AND PRIVACY

All requirements in Section 7.0 of the EHRM Basic PWS apply to this effort.

It has been determined that protected health information may be disclosed or accessed and a signed Business Associate Agreement (BAA) shall be required. The Contractor shall adhere to the requirements of the BAA executed between OEHRM and Cerner Corporation; and shall comply with VA Directive 6066 and VHA Handbook 1605.05.

4.6.1 POSITION/TASK RISK DESIGNATION LEVEL(S)

The position sensitivity and the level of background investigation commensurate with the required level of access for all PWS tasks is Tier3/Non-Critical Sensitive in accordance with Section 8.7 of the EHRM Basic PWS.

The Tier3/ Non-Critical Sensitive Position Sensitivity and Background Investigation requirements identify, in effect, the Background Investigation requirements for Contractor individuals, based upon the tasks the particular Contractor individual will be working. The submitted Contractor Staff Roster must indicate the required Background Investigation Level for each Contractor individual based upon the tasks the Contractor individual will be working, in accordance with their submitted proposal.

5.0   SPECIFIC TASKS AND DELIVERABLES

The Contractor shall perform the following:

5.1   PROJECT MANAGEMENT

The Contractor shall provide a single Point of Contact for management of all project tasks, with individual subject matter experts assigned to each individual interface. The Contractor shall include a Communications Plan in the Contractor Project Management Plan (CPMP) to cover overall and individual POC communications as well as issue escalation procedures.

5.1.1 CONTRACTOR PROJECT MANAGEMENT PLAN

The Contractor shall deliver a CPMP that lays out the Contractor's approach, timeline and tools to be used in execution of this TO effort. The CPMP should take the form of both a narrative and graphic format that displays the schedule, milestones, risks and

resource support. The CPMP shall include status, timelines and schedule variance on all EHRM interfaces completed, in development and in the pipeline for IOC.

The CPMP shall also include how the Contractor shall coordinate and execute planned, routine, and ad hoc data collection reporting requests as identified within the PWS. The initial baseline CPMP shall be concurred upon and updated in accordance with Section B of the TO. The Contractor shall update and maintain the VA PM approved CPMP monthly throughout the PoP.

Deliverable:

A. Contractor Project Management Plan

5.1.2 TECHNICAL KICKOFF MEETING

The Contractor shall hold a technical kickoff meeting within 10 days after TO award. The Contractor shall present, for review and approval by the Government, the details of the intended approach, work plan, and project schedule for each effort. The Contractor shall specify dates, locations (can be virtual), agenda (shall be provided to all attendees at least five calendar days prior to the meeting), and meeting minutes (shall be provided to all attendees within three calendar days after the meeting). The Contractor shall invite the Contracting Officer (CO), Contract Specialist (CS), COR, and the VA PM.

5.2   INTERFACE DEVELOPMENT, INTEGRATION, TESTING, DEPLOYMENT AND SUSTAINMENT

The Contractor shall develop, test and execute EHRM interfaces required for successful IOC deployment. Interface analysis is underway with interfaces expected to be added, deleted and reprioritized during the PoP of this TO.

The Contractor shall maintain the EHR Master System Integration list to reflect the current status of all EHRM interfaces.

The following initial list of interfaces have been sized for development. All interface development shall follow the development, test and execution requirements outlined below.

No.	Named Interface System	System Type	System Complexity	Simple	Medium	Complex
1	Cerner-CVIX Integration Adaptor (CCIA)	GOTS	Complex	0	3	1
2	IMed Consent	COTS	Medium	2	1	0
*3	~~Avatar~~	~~COTS~~	~~Medium~~	~~2~~	~~0~~	~~0~~
4	Alpha	COTS	Medium	2	0	0
5	Blind Rehab	GOTS	Medium	0	3	0
6	Breezelink	COTS	Complex	2	2	0

*7	~~Vmaxx Encore~~	~~COTS~~	~~Complex~~	~~2~~	~~2~~	~~0~~
8	Quest	COTS	Simple	3	0	0
*9	~~MOSAIQ~~	~~COTS~~	~~Medium~~	~~3~~	~~3~~	~~0~~
10	JLV Smart App Launch	COTS	Simple	1	0	0
11	VBMS Smart App Launch	COTS	Simple	1	0	0
12	ES Smart App Launch	COTS	Simple	1	0	0

*Removed Under P00002

Additional Interfaces:

No.	Named Interface System	System Type	System Complexity	Simple	Medium	Complex
1	Delegate of Authority Medical Services (DOAMS)	GOTS	Simple	0	1	0
2	Dentral Record Manager Plus	GOTS	Complex	2	2	3
3	VistA Prosthetics	GOTS	Complex	0	0	2
4	CMS National Provider Identifier(NPI) Lookup	GOTS	Simple	0	2	0
*5	~~Pharmacy Benefits Management (PBM) Reporting~~	~~GOTS~~	~~Complex~~	~~0~~	~~4~~	~~0~~
6	VA Profile	GOTS	Complex	0	2	3
7	Medicare Remittance Advice (MRA)	GOTS	Simple	0	1	0
8	MiPACS	COTS	Simple	0	4	0
9	Zeiss Forum	COTS	Simple	0	4	0
*10	~~Connex~~	~~COTS~~	~~Simple~~	~~1~~	~~2~~	~~0~~
11	HR Smart	COTS	Simple	0	1	0
12	HealthShare Referral Manager	COTS	Simple	0	1	1
*13	~~VistA Blood Establishment Computer Software (VBECS)~~	~~GOTS~~	~~Complex~~	~~1~~	~~1~~	~~1~~
*14	~~Vets.gov Website~~	~~GOTS~~	~~Medium~~	~~0~~	~~1~~	~~0~~
15	First Party Lockbox	GOTS	Medium	0	1	0
16	LockBox, Third Party EDI	GOTS	Medium	0	1	0
*17	~~Treasury Cross Servicing Program (TCSP)~~	~~GOTS~~	~~Medium~~	~~0~~	~~5~~	~~0~~
18	Debt Management Center	GOTS	Medium	0	5	0
19	Financial Management System (FMS)	GOTS	Simple	2	8	0
20	Consolidated Copayment Processing Center System	GOTS	Simple	0	1	0
*21	~~Patient Generated Data (PGD) repository~~	~~GOTS~~	~~Simple~~	~~0~~	~~10~~	~~0~~
*22	~~VA Online Scheduling~~	~~GOTS~~	~~Simple~~	~~0~~	~~4~~	~~0~~
*23	~~Vyopta~~	~~GOTS~~	~~Simple~~	~~0~~	~~0~~	~~1~~
*24	~~Scheduling Manager~~	~~GOTS~~	~~Simple~~	~~0~~	~~1~~	~~0~~
*25	~~VA TeleDerm~~	~~GOTS~~	~~Simple~~	~~0~~	~~0~~	~~1~~
*26	~~Virtual Care Manager (VCM)~~	~~COTS~~	~~Simple~~	~~0~~	~~2~~	~~0~~

27	Video Visit Service (VVS)	COTS	Simple	0	2	0
*28	~~Standard Episode of Care (SEOC)~~	~~GOTS~~	~~Simple~~	~~0~~	~~0~~	~~1~~
29	Behavioral Health Lab	COTS	Simple	6	0	0
30	Home Telehealth Medtronic	COTS	Simple	0	1	2
*31	~~Home Telehealth 1-Vision~~	~~COTS~~	~~Simple~~	~~0~~	~~1~~	~~2~~

*Removed Under P00002

SWAP Interfaces:

No.	Named Interface System	System Type	System Complexity	Simple	Medium	Complex
1	Bed Management Solution (BMS)	GOTS	Medium	0	2	0
2	Community Care Decision Support Tool (CC-DST)	GOTS	Simple	0	1	0
3	Document Storage Systems (DSS) Caribou Community Living Care Suite (Caribou CLC)	GOTS	Simple	2	2	0
4	Document Storage Systems (DSS) Telecare Record Manager (TRM Plus)	GOTS	Medium	2	2	0
5	Managerial Cost Accounting - Reporting	GOTS	Medium	0	0	2
6	Primary Care Management Module (PCMM)	GOTS	Medium	0	1	0
7	Telehealth Management Platform (TMP)	COTS	Simple	0	2	0
8	Televox	COTS	Simple	2	0	0
9	VA Time and Attendance System (VATAS)	COTS	Simple	2	1	0
10	VistA - Decision Support System (DSS)	COTS	Medium	0	0	2
11	Censitrac	COTS	Simple	1	0	0
12	PDMP Data	GOTS	Simple	0	1	0

No.	Named Interface System	System Type	System Complexity	Simple	Medium	Complex
161	GE MUSE	COTS	Simple	1	1	0
451	Claims Processing & Eligibility System	GOTS	Simple	2	0	0
550	MedLine	COTS	Simple	3	0	0
549	Incyte Diagnostics	COTS	Medium	3	0	0
15	ROES/DALC	Custom	Custom			

22	VistA- Interfacility Consults	Custom	Custom			
551	Independence Medical	COTS	Medium	0	1	0

Attachment 0001 to this PWS includes the current listing of interfaces required for IOC. Items may be added or dropped from this list as analysis continues.   The Contractor shall provide interface development for IOC in any combination of interface and system complexity not to exceed the NTE CLIN ceiling. As interface complexity is determined, but prior to initiating development activities, the Contractor shall provide VA with the interface description and t-shirt pricing assessment of each interface for VA review and approval. Upon VA approval and TO modification, the Contractor shall develop, test and execute additional EHRM interfaces required for successful IOC deployment. Additional interfaces may be developed as required using Optional Task 5.3.

Interface Development, Test and Execution Process

The Contractor shall update and maintain detailed Interface Control Documents (ICD) for each new system interface executed under this TO, as required under TO4, and include detailed legacy system requirements. Updated ICDs shall be included in the VIP Technical Documentation delivered in this task.

Each Detailed ICD shall include:
a.   Interface Data Requirements
b.   Required changes in user interfaces, including wireframes, if applicable
c.   Required modifications to VA systems, if any
d.   Success Criteria
e.   Identified Dependencies

The Contractor shall design, develop, test, and deploy enterprise and local IOC site interfaces using repeatable, agile software and system engineering processes. The Contractor shall adhere to the VA VIP for Major Programs - Interface Development Guide for all interface development activities and deliverables.

For each major work element described in this TO, Cerner will provide/update applicable architectures/documentation as part of the VIP Technical Documentation required by PWS paragraph 5.2. These updates may include requirements, architecture (updates to existing OV-1, SvcV-1, SV-1), development views, data models, data flow diagram, and decision package for EHRM governance approval.

Enterprise and local interfaces are expected to be added and deleted over time to reflect evolving VA and federal reporting requirements. The Contractor shall adjust interface development activities accordingly.

The Contractor shall:

a. Ensure any locally developed or externally created engineering artifacts are provided to the VA in a timely manner.

b. Ensure all source code for changes to the VA system(s) is posted to the VA-approved repository.

c. Coordinate with all integration stakeholders (i.e., source system owners, EHRM program architects, etc.) to identify and/or establish appropriate governance inclusive of a formal configuration/change control board (CCB). Through this governance venue the Contractor shall perform planning for each integration to include coordinating with source system owners to determine optimal integration timelines and to establish any required service level agreements, connection agreements, etc.

d. Produce all required engineering and engineering management artifacts in support of each integration effort (e.g., ICDs, system design documents (SDDs), etc.). These artifacts shall adhere to published VA document format and content standards and comply to Section 508 requirements.

e. Provide test execution as outlined in the Contractor Master Test Plan and support additional testing methods required to meet VA criteria.

f. Provide support for execution of VA Test & Evaluation (TE) testing including defect/issue process, assistance in troubleshooting/triaging, jointly troubleshooting issues that appear to be non-production environment related and responding to findings from test activities and provide artifacts to VA EHRM TE outlined in the TE Project Plan including but not limited to ICDs, test scripts, and test cases. The Contractor Test Report of Findings/Test Analysis Report shall serve as the key test artifact for the formal deliverable process. Other test artifacts: test cases, test results, etc. shall be entered and maintained in tools as outlined in Contractor Master Test Plan and OEHRM Test Evaluation Master Plan as the work is being executed.

g. Provide Software Code Quality Checking (SCQC) scans of new code for non-Cerner, VA systems to meet VA requirements. The Contractor shall provide the scanning results reports for each SCQC tools used such as HPE Fortify, WebInspect, Sonar Cube, Findbugs, Dependency Check (OWASP), CAST, or tools of equivalent functionality used by the Contractor within their SCQC program. Remediation Plans documenting the remediation plan of action for critical and high-severity findings shall be provided. The Contractor shall support the security, accessibility, performance, technical standards, architectural compliance, user acceptance and initial operational capability tests, audits, and reviews. Security scanning is done by multiple methods and is done multiple times throughout the course of a project with methods such as infiltration testing (WASA), code analysis tools (Fortify), etc.

Across all integration efforts, the Contractor shall perform a set of common activities to include but not limited to: 1) conducting a detailed assessment of the technical requirements, 2) identifying standard and/or specialized security and privacy

requirements, 3) analyzing and characterizing data interchange requirements and, 4) monitoring performance and scalability goals.

The Contractor shall modify VA legacy systems as required to integrate with EHRM; VA will collaborate with the Contractor to share knowledge of the VA legacy systems to integrate with EHRM. In addition, the Contractor shall provide technical expertise to VA and its Contractors to support integration with EHRM Commercial software as required. Note that site-specific system interface and legacy system modification may be required as site review requirements are identified. VA will provide access to VA's enterprise InterSystems HealthShare licenses, and any other VA-required middleware, as needed, for development of EHRM/VistA interfaces.

The Contractor shall provide interface testing. Tests include steps for nominal and off-nominal interface conditions, minimum and maximum data content, and error handling as outlined in the respective ICD. Data will be verified on each end of the interface to confirm that the correct data is transmitted from EHRM and the data received by EHRM is stored and displayed correctly as part of contractor testing. Data verification will be automated wherever possible. Finally, the Contractor shall provide VA the ability to audit interface traffic that occurs during the execution of a test case provided the request provides sufficient notice for audit setup.

For any new code or code modifications to VA systems by the Contractor, the Contractor shall provide the software build/package including source code and required documentation for release within VA and use the VA approved tool/software code repository.

For such modifications to VA legacy systems, the Contractor shall create/update, maintain, and provide supporting VIP Technical Documentation including:
    a. Interface Design Documentation:
        1) System block diagrams
        2) Allocation analysis
        3) External interface block diagrams
        4) Interface block diagrams
    b. Interface definition documentation
    c. Interface requirements specifications:
        1) Interface Requirements Document (IRD)
        2) Requirements Traceability Matrix (RTM)
    d. Interface architecture artifacts:
        1) Information Exchange Matrix (IEM)
        2) ICD
        3) Software Design Document
        4) Operational/System/Data and Information Viewpoint (OV/SV/DIV) models;
    e. Interface Testing:
        1. Test scenarios
        2. RTM updated with test results

3. Final test report
   f. System Testing for modifications to VA Legacy systems
        1. Test scenarios
        2. RTM updated with test results
        3. Contractor Test Report of Findings/Test Analysis Report
   g. Release Checklist and related release documentation
   h. Interface scripts or code shall be versioned, associated with a Release, and documented in Version Description Documents

To the extent applicable, the Contractor shall provide non-commercial and Open Source Software (OSS) source code to support the configuration, integration, custom development, test, software management, training, deployment, and end-user usage of custom developed components of EHRM.

For the IOC sites, the Contractor shall conduct a Pre-Go-Live Review with interface stakeholders outlining the enterprise-wide and site-specific interface pre-deployment activities, and the tasks, responsibilities and support required from VA during go-live and in accordance with the VA-approved Deployment Plan. The site-specific interface pre-deployment activities will align with the VA-approved Deployment Plan. Following the Review, the Contractor shall obtain official VA Go-Live Authorization by obtaining approvals from the key stakeholders including:
   a. VA Test Lead
   b. Site Clinical Lead – for site-specific interfaces
   c. Enterprise Clinical Lead – for enterprise interfaces

The Contractor shall utilize VA-approved toolsets and repositories for managing project execution details and for the management, storage and delivery of all project artifacts for interface work executed by Cerner on VA side legacy systems and for overall EHRM requirements management, using approved VIP templates as defined in VA VIP for Major Programs – Interface Development Guide. If the toolsets/repositories required by VA change during the PoP of this project, VA will provide Contractor access to the updated toolsets/repositories and the Contractor shall utilize the updated toolsets/repositories for management, storage and delivery of project artifacts.

Upon completion of each system interface the Contractor shall document VA acceptance via a System Interface Acceptance Form.

Upon completion of each interface, the Contractor shall provide sustainment, defect management support and coordination throughout the PoP of this TO. Continued support of all interface code developed will be incorporated in following Sustainment/Operations TOs.

Deliverables:
   A. VIP Technical Documentation and Repository Updates (per system interface)
   B. System Interface Acceptance Form

5.3   ADDITIONAL INTERFACE DEVELOPMENT (OPTIONAL TASK)

Interface requirements continue to evolve to meet VA priorities and may require completion of additional interfaces throughout the PoP of this Task Order. VA may exercise this optional task for additional interfaces following the applicable process described in Section 5.2 of this PWS. This optional task can be exercised multiple times throughout the period of performance for a total amount not to exceed the Contract Line Item (CLIN) ceiling.

5.3.1 AudioCare Vendor Interface Support

The Contractor shall provide:

A. Program management and oversight support for the design, development, testing, execution and deployment of the AudioCare EHRM interface(s) required for successful IOC deployment.
B. Interface design, development, testing, execution, and deployment of the AudioCare interface to support all pharmacy features required following migration to the Millennium EHR. This includes prescription requests, appointment information, contact management, as well as other provider to patient messaging. Specifically, the following interfaces shall be delivered:
    a. Patient Query Request/Response
    b. Prescription Query Request/Response
    c. Refill Posting Request/Response
    d. Renewal Posting Request/Response
    e. Clinic Query Request/Response
    f. RxINFO Query Request/Response
    g. RxREADY Query Request/Response
    h. Prefill Query Request/Response
C. The Contractor shall ensure that the solution design supports continuity of required VistA interfacing functionality without degradation and supports scalability to all Wave deployments.
D. All interface development shall follow the development, test and execution requirements outlined in Section 5.2 of this TO.
E. Provide ongoing sustainment testing and defect resolution support one-year post-go live.
F. The Contractor shall provide AudioCare technical documentation as required by VIP for Major Programs

G. The Contractor shall provide AudioCare repository updates as required

5.3.2 Revenue Cycle Interfaces

The Contractor shall develop, test and execute EHRM interfaces required for successful IOC deployment.

The Contractor shall maintain the EHR Master System Integration list to reflect the current status of all EHRM interfaces.

The following interfaces have been sized for development. All interface development shall follow the development, test and execution requirements outlined in PWS Section 5.2.

Additional Interfaces:

No.	Named Interface System	System Type	System Complexity	Simple	Medium	Complex
1	Centers for Medicare and Medicaid Services (CMS)	GOTS	Medium	0	1	0
2	Bill for Collection Portal	GOTS	Simple	0	1	0
3	Business Information Office Business Intelligence Solution (CDW)	COTS	Medium	0	1	0
4	Provider Profile Management Systems (PPMS)	GOTS	Medium	0	2	0
5	Standardization Episodes of Care (SEOC)	GOTS	Medium	0	2	0
6	Treasury Cross Servicing Program (TCSP)	GOTS	Medium	0	2	0
7	VA Patient Account Resource System	GOTS	Medium	0	1	0
8	Medicare Direct Connect Insurance Verification	COTS	Medium	0	1	0
9	Community Viewer	GOTS	Complex	0	0	2
10	VPS/Vecna	GOTS	Complex	0	2	0
11	Audit Recovery Portal	GOTS	Simple	0	1	0
12	Performance and Operational Web-Enabled Reports Plus	GOTS	Medium	0	1	0
13	Purchase Care Program Integrity Tool	GOTS	Simple	0	1	0
14	Community Care Clinical and Business Intelligence Solutions (EPRS)	GOTS	Simple	0	1	0

5.3.3 VA-Side Cerner Custom Interfaces

The Contractor shall develop, test and execute VA-Side interfaces required for successful IOC deployment.

The Contractor shall maintain the EHR Master System Integration list to reflect the current status of all EHRM interfaces.

The following interfaces have been sized for development. All interface development shall follow the development, test and execution requirements outlined in PWS Section 5.2.

No.	*Named Interface System*	*System Type*	*System Complexity*
1	Program Mgmt Team	Custom	Custom
2	Bed Management Solution (BMS)	Custom	Custom
3	Community Care Decision Support Tool (CC-DST)	Custom	Custom
4	Community Care Referral/HSRM	Custom	Custom
5	Primary Care Management Module (PCMM) Web	Custom	Custom
6	ROES/DALC	Custom	Custom
7	Telehealth Management Platform (TMP)	Custom	Custom
8	VA MPI (VA Master Person Index)	Custom	Custom
9	VistA Prosthetics	Custom	Custom
10	Delegate of Authority Medical Services (DOAMS)	Custom	Custom
11	CMOP	Custom	Custom
12	HDR/CHDR	Custom	Custom
13	Enrollment System	Custom	Custom
14	VA Profile	Custom	Custom
15	Provider Profile Management System (PPMS)	Custom	Custom
16	VistA - Patient Flags	Custom	Custom
17	VistA- Interfacility Consults	Custom	Custom
18	Claims Processing & Eligibility System	Custom	Custom
19	Veteran Benefit Management System (VBMS)	Custom	Custom
20	VistA (via LEDI)	Custom	Custom
21	PDMP Data (Data Extract)	Custom	Custom
22	VistA Blood Establishment Computer Software (VBECS)	Custom	Custom

23	Financial Management System (FMS) (Data Extract)	Custom	Custom
24	LockBox, 3rd Party EDI	Custom	Custom
25	Managerial Cost Accounting (Data Extract)	Custom	Custom
26	Medicare Remittance Advice (MRA)	Custom	Custom
27	Veterans Equitable Resource Allocation (VERA) (Data Extract)	Custom	Custom

5.3.4 VA-Side CCIA Custom Interfaces

The Contractor shall:

A. Provide program management, design, development, testing, execution and deployment of CCIA EHRM interface(s) required for successful IOC deployment.

B. Adhere to repeatable, agile software and system engineering processes outlined in Section 5.2 for the development, test, execution and deployment of CCIA interfaces.

C. The Contractor shall ensure that the interface solution design supports continuity of legacy VA applications functionality without degradation and supports scalability to all Wave deployments.

D. The Contractor shall provide all technical documentation as required by VIP for Major Programs.

E. The Contractor shall provide storage services, as required.

Contractor interface development shall result in the following workflows:

1) Enable images stored in EHRM (Millennium/CAMM) to be viewed within VistA applications such as CPRS through extensions to the existing VIX/CCIA APIs used by the system to retrieve images from other VistA instances.
   a. Extensions to the service shall be designed in such a manner that no changes will be required to the VistA applications.
   b. Contractor development shall enable CCIA's existing APIs to call Cerner APIs to retrieve imaging details such as image lists for a given patient, attribute details about each image, thumbnails for images, and raw image content including for both DICOM and non-DICOM studies.
   c. Contractor shall map VistA concepts to Cerner concepts and vice versa and perform testing to validate that EHRM image data displays correctly in existing VA endpoints (e.g., VistA Imaging, JLV).

2) Enable EHRM images and notes to be displayed and viewed from within the Joint Legacy Viewer (JLV).
    a. The Contractor shall modify CCIA code to structure, format and assemble the requisite directory structure, and populate it with content to enable JLV to read and display it properly.
    b. The Contractor shall deliver this functionality by Capability Set 1.

3) Enable EHRM notes, with images, to be viewed in CPRS and Blue Button by leveraging Fast Healthcare Interoperability Resources (FHIR) Doc Reference service access through CCIA Note API.
    a. The Contractor shall deliver this functionality no later than Capability Set 2.

4) Ability to store content to the EHRM for users and encounters associated with EHRM. Extensions to the service shall be designed such that no changes will be required to the capturing applications.

In addition, the Contractor shall modify the VistA Viewer to support telehealth imaging workflows. The Contractor's modifications shall result in the ability to:
    a. Perform tele reading (viewing) of images within EHRM using VistA Viewer to view remote VistA system images.
    b. From within the EHRM, view all historical images available in VistA when reviewing a patient for tele-reading workflow.
    c. Enable EHRM images to be viewed from a VistA reading site.

All service and system changes and interface modifications shall be coordinated with and approved by the VA.

5.3.5 Cerner-Side Capability Set 2, Priority 1 Interfaces

The Contractor shall develop, test and execute EHRM interfaces required for successful IOC deployment.

The Contractor shall maintain the EHR Master System Integration list to reflect the current status of all EHRM interfaces.

The following interfaces have been sized for development. All interface development shall follow the development, test and execution requirements outlined in PWS Section 5.2. Upon completion of each system interface the Contractor shall document VA acceptance via a System Interface Acceptance Form.

Additional Interfaces:

No.	Named Interface System	System Type	System Complexity	Simple	Medium	Complex
1	ReVAMP – Capability Set 2 (FHIR)	COTS	Medium	0	2	0

2	MyVA Images – Capability Set 2 (FHIR)	GOTS	Medium	0	2	0
3	Teleretinal camera integration- TopCon & EzLite – Capability Set 2 (DICOM)	GOTS	Medium	0	2	0
4	Mental Health Assistant – Capability Set 2	GOTS	Medium	0	3	0
5	Home Telehealth 1 Vision - Capability Set 2	COTS	Simple	0	1	2
6	Vyopta – Capability Set 2	COTS	Simple	0	0	1
7	Virtual Care Manager (VCM) – Capability Set 2	COTS	Simple	0	2	0

5.3.6 Authority to Connect (ATC) Support

The Contractor shall also provide a cyber scrum team of 4 – 5 personnel to streamline receipt of the Authority to Connect (ATC) for Capability Set 1 interfaces (approximately 73). Contractor support shall include:

A. Identification and review of VA system documentation for the specified systems as captured through TO 4 and TO 8 (priorities as directed by VA)
B. Audit of existing documentation for determination of compliance with DoD standards and production of an audit/compliance report indicating documentation gaps and/or compliance gaps which require remediation.
C. Update required documents based upon the output of the audit/compliance report for the ATC of the developed interfaces to the DoD Millennium (DHMSM) system. Required documents that may be updated for both medical and non-medical systems may include, but not be limited to: Network Diagram, Topology, Plan of Action, Milestones, Vulnerability Scans, hardware/software lists, Ports, Protocols, Service Management Load Sheets, Risk Assessment Report, and test plans. The alignment of these documents to the type of interface is shown in the table below.

Non-Medical Systems/Interfaces	Medical Systems/Interfaces
Authorization to Operate (ATO) Memo	Authorization to Operate (ATO) Memo
Network Diagram/Topology	Enterprise Risk Assessment (ERA) includes: ▪ Topology ▪ Ports, Protocols and Services (PPS) ▪ Hardware/Software Inventory ▪ Risk Assessment Report
Plan of Action and Milestone (POA&M)	Plan of Action & Milestone (POA&M)
Vulnerability Scans	Authorization to Connect (ATC) Request Memo

Non-Medical Systems/Interfaces	Medical Systems/Interfaces
Hardware/Software List	Test Plan (for test systems)
PPS	
Risk Assessment Report (RAR)	
Authorization to Connect (ATC) Request Memo	
Test Plan (for test systems)	

The Contractor shall deliver the updated, DoD Compliant, ATC materials to the VA OEHRM PM.

5.3.6.1 ATC Support for Capability Set 1

The Contractor shall provide the support defined in Section 5.3.6 for Capability Set 1.

Deliverable:

    A. Audit/Compliance Report

5.3.7   Additional VA-Side Cerner Custom Interfaces

The Contractor shall develop, test and execute EHRM interfaces required for successful IOC deployment.

The Contractor shall maintain the EHR Master System Integration list to reflect the current status of all EHRM interfaces.

The following interfaces have been sized for development. All interface development shall follow the development, test and execution requirements outlined in PWS Section 5.2 and shall be available by the referenced planned Capability Set (CS) of Cerner Scheduling System (CSS) release timeframes. Upon completion of each system interface the Contractor shall document VA acceptance via a System Interface Acceptance Form.

No.	Named Interface System	System Type	System Complexity
1	Video Visit Services (VVS) – Capability Set 1	Custom	Custom
2	(CSS) ORM outbound from VistA->VDIF->OPenLink->Cerner – CSS IOC Deployment	Custom	Custom
3	(CSS) SIU inbound from Cerner->OpenLink->VDIF->VistA – CSS IOC Deployment	Custom	Custom
4	(CSS) ORM inbound from Cerner->OpenLink->VDIF->VistA – CSS IOC Deployment	Custom	Custom

5	(CSS) **SIU outbound from VistA->VDIF->OpenLINK->Cerner – CSS IOC Deployment	Custom	Custom
6	ReVAMP – Capability Set 2 (FHIR)	Custom	Custom
7	MyVA Images – Capability Set 2 (FHIR)	Custom	Custom
8	Teleretinal camera integration - TopCon & EzLite – Capability Set 2 (DICOM)	Custom	Custom
9	Mental Health Assistant – Capability Set 2	Custom	Custom
10	Home Telehealth 1 Vision - Capability Set 2	Custom	Custom
11	Vyopta – Capability Set 2	Custom	Custom
12	Virtual Care Manager (VCM) – Capability Set 2	Custom	Custom

The Contractor shall provide a System Interface Acceptance Form 60 days prior to completion of Independent Validation and Verification Testing for respective deployment release timeframes (e.g., CS1, CSS, or CS2) in accordance with the approved EHRM Integrated Master Schedule (IMS).

5.3.8 Additional VA-side Interfaces for CS1: Caribou and TRM

The Contractor shall develop, test and execute EHRM interfaces required for successful IOC (CS1) deployment.

The Contractor shall maintain the EHR Master System Integration list to reflect the current status of all EHRM interfaces.

The following additional interfaces have been sized for development. All interface development shall follow the development, test and execution requirements outlined in PWS Section 5.2 and shall be available by within Capability Set 1 (CS1) timeframe.

No.	*Named Interface System*	*System Type*	*System Complexity*
1	Caribou – VA-Side – Capability Set 1	Custom	Custom
2	TRM -VA-side – Capability Set 1	Custom	Custom

The Contractor shall provide a signed VA Acceptance Memo of each interface functionality 60 days prior to completion of Independent Validation and Verification Testing for CS1 in accordance with the approved EHRM Integrated Master Schedule (IMS).

Deliverable:
     A. Signed VA Acceptance Memo

6.0   SIGNED VA ACCEPTANCE MEMO

7.0   GENERAL REQUIREMENTS

7.1   PERFORMANCE METRICS

The table below defines the Performance Standards and Acceptable Levels of Performance associated with this effort. The Government may also utilize the commercially available and VA-specific Key Performance Indicators (KPIs) and Service Level Agreements (SLAs) defined at the ID/IQ level to measure performance under this TO, as applicable.

Performance Objective	Performance Standard	Acceptable Levels of Performance
A. Technical / Quality of Product or Service	1. Shows understanding of requirements 2. Efficient and effective in meeting requirements 3. Meets technical needs and mission requirements 4. Provides quality services/products 5. Meets performance thresholds/metrics defined in applicable Service Level Agreements	Satisfactory or higher
B. Project Milestones and Schedule	1. Quick response capability 2. Products completed, reviewed, delivered in accordance with the established schedule 3. Notifies customer in advance of potential problems 4. Consistently monitors and reports on schedule/plan variances.	Satisfactory or higher
C. Staffing	1. Currency of expertise and staffing levels appropriate 2. Personnel possess necessary knowledge, skills and abilities to perform tasks	Satisfactory or higher

Performance Objective	Performance Standard	Acceptable Levels of Performance
D. Invoicing	1. Invoices are current, accurate, and complete.	Satisfactory or higher
E. Management	1. Integration and coordination of all activities to execute effort	Satisfactory or higher

The COR will utilize a QASP throughout the life of the TO to ensure that the Contractor is performing the services required by this PWS in an acceptable level of performance. The Government reserves the right to alter or change the QASP at its own discretion. A Performance Based Service Assessment will be used by the COR in accordance with the QASP to assess Contractor performance.

7.2 SECTION 508 –INFORMATION AND COMMUNICATION TECHNOLOGY (ICT) STANDARDS

All requirements in Sections 8.10, including subparagraphs, of the EHRM Basic PWS apply to this effort. Deliverable requirements are further defined in the following subparagraphs. The Contractor shall comply with the technical standards at: https://www.access-board.gov/guidelines-and-standards/communications-and-it/about-the-ict-refresh/final-rule/single-file-version

7.2.1 REPRESENTATION OF CONFORMANCE

The Contractor shall provide a Section 508 Subject Matter Expert lead for VA EHRM 508 resources to work with. The Contractor shall adhere to the VA-approved Section 508 Test and Delivery Plan and Section 508 Accessibility Roadmap delivered under TO 0001. The Contractor shall update the Government Product Accessibility Template (GPAT) and/or Voluntary Product Accessibility Template (VPAT) delivered under TO 0001 to indicate the level of Section 508 conformance as updates are made to its products and/or services to ensure and sustain 508 compliance.

The Contractor shall work closely with VA Section 508 representatives to verify Section 508 conformance of its products and/or services.

7.2.2 ACCEPTANCE AND ACCEPTANCE TESTING

The Contractor shall provide Final Section 508 Compliance Test Results. The Section 508 Test Results shall include a GPAT/VPAT Conformance Statement validating conformance to Section 508 Refresh Success Criteria and Conformance Requirements for already-developed ICT deliverables.

The Final Section 508 Test Results shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

For software development for VA interfaces/systems, the Contractor shall prepare and submit a Section 508 Conformance Validation Package with content as outlined in VA Process Asset Library, Software Development Product Build process map.

The Section 508 Conformance Validation Package shall be reviewed and approved by VA Section 508 representatives to validate conformance to Section 508 Refresh Success Criteria and Conformance Requirements for ICT deliverables.

Automated test tools, manual techniques, and checklists are used in the VA Section 508 compliance assessment.

Deliverable:
      A. Final Section 508 Compliance Test Results for ICT Deliverables
      B. Section 508 Compliance Validation Package for ICT Deliverables

7.3   DELIVERABLES

The Contractor shall provide deliverables for Government review and acceptance IAW with Section B.2 of the Task Order. The Contractor shall incorporate Government feedback provided via the OEHRM Deliverables review process into Task Order deliverables as applicable. Feedback shall be incorporated in either the resubmission or next required submission of the deliverable based upon the timeframe in which it is provided by the Government. For Government feedback requiring additional discussion and/or clarification, the Contractor shall coordinate language updates with VA to resolve and finalize revisions to the affected deliverable. The Contractor shall appropriately mark and date deliverables to maintain version control using the following format: TO Number – CLIN Number Formal Deliverable Title – Deliverable Due Date IAW Section B.2– Version X.X. The Contractor shall annotate major (initial submission) and minor (resubmission) deliverable releases using a numerical system (e.g. Initial submission: TO 0001 – 0001AA Contractor Project Management Plan - August 2018 – Version 1.0; Resubmission: TO 0001 – 0001AA Contractor Project Management Plan – August 2018 – Version 1.1). Resubmitted deliverables shall maintain the original due date defined in Section B.2 of the TO. The Contractor shall provide discrete deliverables in separate email submissions. Email submissions shall include the Contract/Task Order numbers and corresponding deliverable CLIN number. The Contractor shall track updates in both major and minor deliverable releases in an agreed upon format, such that the Government can identify and review language revisions for acceptance.

CONTRACTOR EMPLOYEE
PERSONAL FINANCIAL INTEREST/PROTECTION OF SENSITIVE INFORMATION
AGREEMENT

This Agreement refers to Contract/Order _____ entered into
between the Department of Veterans Affairs and _____ (Contractor).

As an employee of the aforementioned Contractor, I understand that in connection with
my involvement in the support of the above-referenced Contract/Order, I may receive or
have access to certain "sensitive information" relating to said Contract/Order, and/or
may be called upon to perform services which could have a potential impact on the
financial interests of other companies, businesses or corporate entities. I hereby agree
that I will not discuss or otherwise disclose (except as may be legally or contractually
required) any such "sensitive information" maintained by the Department of Veterans
Affairs or by others on behalf of the Department of Veterans Affairs, to any person,
including personnel in my own organization, not authorized to receive such information.

"Sensitive information" includes:

(a) Information provided to the Contractor or the Government that would be
competitively useful on current or future related procurements; or

(b) Is considered source selection information or bid and proposal information as
defined in FAR 2.101, and FAR 3.104-4; or

(c) Contains (1) information about a Contractor's pricing, rates, costs, schedule,
or contract performance; or (2) the Government's analysis of that information;
or

(d) Program information relating to current or estimated budgets, schedules or
other financial information relating to the program office; or

(e) Is properly marked as source selection information or any similar markings.

Should "sensitive information" be provided to me under this Contract/Order, I agree not
to discuss or disclose such information with/to any individual not authorized to receive
such information.   If there is any uncertainty as to whether the disclosed information
comprises "sensitive information", I will request my employer to request a determination
in writing from the Department of Veterans Affairs Contracting Officer as to the need to
protect this information from disclosure.

I will promptly notify my employer if, during my participation in the subject
Contract/Order, I am assigned any duties that could affect the interests of a company,
business or corporate entity in which either I, my spouse or minor children, or any

member of my immediate family/household has a personal financial interest. "Financial interest" is defined as compensation for employment in the form of wages, salaries, commissions, professional fees, or fees for business referrals, or any financial investments in the business in the form of direct stocks or bond ownership, or partnership interest (excluding non-directed retirement or other mutual fund investments). In the event that, at a later date, I acquire actual knowledge of such an interest or my employer becomes involved in proposing for a solicitation resulting from the work under this Contract/Order, as either an offeror, an advisor to an offeror, or as a Subcontractor to an offeror, I will promptly notify my employer. I understand this may disqualify me from any further involvement with this Contract/Order, as agreed upon between the Department of Veterans Affairs and my company.

Among the possible consequences, I understand that violation of any of the above conditions/requirements may result in my immediate disqualification or termination from working on this Contract/Order pending legal and contractual review.

I further understand and agree that all Confidential, Proprietary and/or Sensitive Information shall be retained, disseminated, released, and destroyed in accordance with the requirements of law and applicable Federal or Department of Veterans Affairs directives, regulations, instructions, policies and guidance.

This Agreement shall be interpreted under and in conformance with the laws of the United States.

I agree to the Terms of this Agreement and certify that I have read and understand the above Agreement. I further certify that the statements made herein are true and correct.

_____
_____
Signature and Date   Company

_____
_____
Printed Name   Phone Number