**Claims Processing Eligibility (CP&E)**

**Teams 1 and 2**

**Build 7 Plan**

**

CLIN 0008AC (includes

CLIN 0008AF Build Release Planning Package and

CLIN 0008AG Sprint Plan)

Department of Veterans Affairs (VA)

Office of Information and Technology (OIT)

**May 2018**

**Version 0.9**

**Revision History**

NOTE: The revision history cycle begins once changes or enhancements are requested after the document has been baselined.

| **Date** | **Version** | **Description** | **Author** |
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| 5/8/2018 | 0.8 | Updated Sprint 19 and returned document to COR approved version | Richard Marble |
| 5/3/2018 | 0.7 | Added Sprint 19 | Michael Synakiewicz |
| 4/6/2018 | 0.6 | Added Sprint 18 to address JRule issues and ASC | Michael Synakiewicz |
| 3/23/2018 | 0.5 | Removed User Story 001-116 for data needed and added ATO Documentation for Evidence | Michael Synakiewicz |
| 3/14/2018 | 0.4 | Updated Sprint 15 User Stories due to dependencies | Chris Vanzo Michael Synakiewicz |
| 3/06/2018 | 0.3 | Added Sprint 16, updated Sprint 15, updated Team Organization table | Chris Vanzo Michael Synakiewicz |
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| 2/09/2018 | 0.1 | Initial Draft | Michael Synakiewicz |

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1. **Build Execution**

This document describes the Build 7 Plan for the Claims Processing and Eligibility (CP&E) project. The Build includes 6-Sprints for approximately two (2) weeks each that run from February 28, 2018, through May 31, 2018. Throughout the build, the scrum teams will elaborate, analyze, program, validate, test, and build user stories supporting the business owner’s priorities. Subsequently, released prioritized items in the backlog are captured in the Rational product backlog.

Sprint teams collaborate to produce and deliver code to the VA for Quality Assurance (QA) and User Acceptance Testing (UAT). Defects found during sprints will be evaluated immediately by the scrum team. Defects that can be resolved within the sprint will be tasked and resolved. FTC will call defects “bugs”.

Defects that cannot be resolved within the sprint will be placed on the Build Backlog to be resolved based upon the business priorities. These defects will be evaluated by the scrum team and estimates will be listed in Rational, then prioritized, and approved by the business. At the end of the sprint, a build is created and demonstrated. Stories with High and Very High defects will not be considered complete and will not be demonstrated at the end of a sprint. Stories without defects and stories with Low or Medium defects will be demonstrated for acceptance.

During the two-week sprint period, FTC is preparing for building and demonstrating the product. FTC has continuous deployment jobs that help sustain our builds, packaging fixes, and promoting the code from one environment to the next. FTC keeps control of its versioning and configurations, including preparing test data for testing and fixes.

A retrospective ceremony is used to review and approve the work product completed during the two-week sprint.

# Scrum Teams

FTC will accomplish sprint planning based on the following velocity and capacity. Velocity is based upon the team average over previous sprints and will adjust based upon that average throughout the build. Capacity is determined by the team members assigned and their availability during the sprint to accomplish tasks; this is a fixed amount based on the COR expectation that manning will not affect build results and capacity will be fixed. The final sprint in the build will be for defect repair and hardening.

## Velocity

The Velocity from Build 6 is used to plan for Build 7. Table 1, illustrates Sprint 13 total number of points completed by each team and the average points per sprint:

Table : Velocity Data

| **CP&E** | **Build 6 Points Completed** | **Average Per Sprint Points** |
| --- | --- | --- |
| Team 1 | 155 | 31 |
| Team 2 | 143 | 29 |

## Capacity vs. Plan

The following table represents the full team capacity (in hours) vs. the planned work per sprint/per team (in hours). Level of Effort (LOE) roles, such as Project Manager and Business Analyst, are spread evenly per user story. Capacity is based upon four developers and one and one third tester per team per direction from the COR.

Table 2: Capacity Data

|  |  |  |
| --- | --- | --- |
| **Sprint 14 (10 days)** | **Team 1** | **Team 2** |
| Capacity | 235 | 235 |
| Planned | 235 | 235 |
| **Sprint 15 (10 days)** | **Team 1** | **Team 2** |
| Capacity | 235 | 235 |
| Planned | 234 | 234 |
| **Sprint 16 (10 days)** | **Team 1** | **Team 2** |
| Capacity | 235 | 235 |
| Planned | 220 | 220 |
| **Sprint 17 (10 days)** | **Team 1** | **Team 2** |
| Capacity | 240 | 240 |
| Planned | 240 | 240 |
| **Sprint 18 (10 days)** | **Team 1** | **Team 2** |
| Capacity | 240 | 240 |
| Planned | 240 | 240 |
| **Sprint 19 (14 days)** | **Team 1** | **Team 2** |
| Capacity | 336 | 336 |
| Planned | 336 | 337 |

## Organizatial Chart

The organization depicted includes co-located cross-functional featured teams with a Scrum Master. This is where the iterative sprints and development cycle starts.

Table 3 illustration features CP&E teams that define and deliver the product:

Table : CCSE CP&E Teams

| Name | Team | Roles |
| --- | --- | --- |
| Michael Synakiewicz | (All Teams) | Product Manager |
| Joseph Kobrosky | (All Teams) | Scrum Master, Technical Lead |
| Angel K. | (All Teams) | Technical Analyst, Business Analyst |
| Bharati M. | (All Teams) | Senior Configuration Manager |
| Diane S. | (All Teams) | Senior Tester |
| Faith D. | (All Teams) | Senior Tester |
|  | **Team 1** |  |
| Cindy S. | Team 1 | Senior MUMPS Developer |
| Subba B. | Team 1 | Senior MUMPS Developer |
| Barry J. | Team 1 | Senior MUMPS Developer |
| Yeou D. | Team 1 | Senior MUMPS Developer |
|  | **Team 2** |  |
| Dennis B. | Team 2 | Senior MUMPS Developer |
| Tom H. | Team 2 | Senior MUMPS Developer |
| Chau D. | Team 2 | MUMPS Developer |
| Oliver W. | Team 2 | MUMPS Developer |

# Functional Specifications

## Epics/Sub-Epics/User Stories

The overall specifications describe Epics, Sub-Epics, and User Stories that will be addressed in Build 7. Sprints 14, 15, 16, 17 and 18 User Stories have been assigned. Supplementary, detail for the remaining Build 7 Sprints will be planned within the sprint planning for each sprint.

Table 4 User Stories are defined and elaborated according to the table below:

Table 4: Overall Epics, Sub-Epics, and User Stories

| **Epic** | **Story #** | **Rational** | **Description** |
| --- | --- | --- | --- |
| 001 | Epic 001 | 951406 | As a VE, I want to use the Physical Location Zip Field in the Bene Calc routine for appropriate benefit calculation. |
| 001 | CPE001-013 | 958201 | As the HCR Group, I would like a report I can either print or export to Excel from CP&E that displays the information based on the report specifications on duplicate vendor records that have been inactivated. |
| 001 | CPE001-018 | 951231 | As an HCR PA, I want the label in the IP vendor screen to be changed from "Remit-to Information" to "Billing/Remit-to Information". |
| 001 | CPE001-019 | 951234 | As an HCR PA, I want the system to display the provider's billing address (Street Address, City, State, and Zip Code) on the IP Vendor search result screen in the field that is labelled "BILLING/REMIT-TO ADDRESS", when the billing address is present in the Vendor File. |
| 001 | CPE001-100 | 972772 | As a VE, I want the system to use the PL Zip in the Prospective Payment System (PPS) payment methodology in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Inpatient claims. |
| 001 | CPE001-101 | 972773 | As a VE, I want the system to use the PL Zip in the Low Volume Mental Health (LVMH) payment methodology in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Inpatient claims. |
| 001 | CPE001-102 | 972774 | As a VE, I want the system to use the PL Zip in the High Volume Mental Health (HVMH) payment methodology claims in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Inpatient. |
| 001 | CPE001-103 | 972775 | As a VE, I want the system to use the PL Zip in the Medicare Hospice Per Diem Rates payment methodology for Hospice General Inpatient Care in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Inpatient claims. |
| 001 | CPE001-105 | 702571 | PL Zip in the Medicare SNF Pricer payment methodology for Skilled Nursing Facility (SNF) |
| 001 | CPE001-106 | 702572 | PL Zip in the DRG payment methodology for Substance Use Disorder Rehabilitation Facility (SUDRF) |
| 001 | CPE001-107 | 702573 | PL Zip in the Half Day Per Diem payment methodology for Partial Hospitalization program claims |
| 001 | CPE001-109 | 972781 | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Facility and Professional Fee services in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-110 | 972782 | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Mental Health in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-111 | 972783 | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for ASC Professional Fee services claims in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient. |
| 001 | CPE001-112 | 972784 | As a VE, I want the system to use the PL Zip in the PPS payment methodology for ASC Hospital Based Facility in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-113 | 972785 | As a VE, I want the system to use the PL Zip in the PPS payment methodology for ASC Freestanding Facility in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-114 | 972786 | As a VE, I want the system to use the PL Zip in the CMAC Anesthesia Rate payment methodology in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for Anesthesia for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-115 | 972787 | As a VE, I want the system to use the PL Zip in the Medicare Hospice Per Diem Rates payment methodology for Hospice Routine Home Care in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-117 | 972789 | As a VE, I want the system to use the PL Zip in the CMAC Injectable Rate payment methodology for Injectable Drugs in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-119 | 972791 | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Multiple Surgery in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-120 | 972792 | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Multiple Surgery Fingers or Toes in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-121 | 972793 | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Assistant-At-Surgery in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-122 | 972794 | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Other than Assistant-At-Surgery in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. |
| 001 | CPE001-123 | 972795 | As a VE, I want the system to use the PL Zip in the CMAC payment methodology in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB EDI Manual and EDI claims with a Type of Service of Dental. |
| 001 | CPE001-124 | 983056 | As a VE, I want the system to use the PL Zip in the CMAC Payment Methodology for PA or NP as an Assistant-at-Surgery in all Corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB Manual and EDI Outpatient Claims. |
| 001 | CPE001-125 | 988070 | As a Community Care Specialist, I require a capability for the CPE system to automatically queue SNF claims with missing data, so I correct SNF claims with data errors. |
| 001 | CPE001-126 | 988109 | As a Nurse Reviewer, I require the system to queue SNF claims for beneficiaries who have Medicare A and/or Medicare B Type of OHI Coverage, so I can manually review if they have exhausted Medicare SNF benefits and submitted a Medicare denial EOB. Rules associated with this section run after the benefit calculation has been completed. |
| 001 | CPE001-127 | 988061 | As a Community Care Specialist, I require a capability for the CPE system to automatically run a data conflict check when the system selects to sort a submission into claims, so I am prompted that the claim is missing a Units for HIPPS code. |
| 001 | CPE001-128 | 988063 | As a Community Care Specialist, I require a capability for the CPE system to automatically run a data conflict check when the user selects to sort a submission into claims, so I am prompted that the claim is missing an Discharge Status. |
| 001 | CPE001-129 | 988110 | As a Nurse Reviewer, I require the system to queue SNF claims for beneficiaries who are under age 65, so I can manually review medical necessity for the SNF services provided. |
|  | PR-1 | 705844 | If the PR is entered at the line level, it should pay the less of the billed amount or the PR for that line item. |
|  | NDC | 705845 | When and NDC is entered on an outpatient claim, it should pay the lesser of the billed amount or the allowed amount (average wholesale price (AWP) found in ^MDI in VistA. |
|  | HB ASC | 705849 | The Hospital based ASC issue has always occurred in VISTA and it was only recognized after the 11/01/17 load because there was a significant number of codes added to TRICARE’s ASC list in this update. When a VE receives a hospital based ASC claim, they check to see if the surgical codes on the claim are on TRICARE’s ASC list. If even one code is on the list, they process the claim as ASC (pick the ASC vendor and use POS 24). A 196 denial is occurring only when there is a code that is on the list on the date of service, and a code that was added to the list after the date of service. The code on the claim that was not added to TRICARE’s ASC list until after the date of service is denying for 196 in error when it should pay CTC. This error is not effecting very many claims because if the only surgical code on the claim is not on the list on that date of service, the claim is processed as outpatient and the provider is paid CMAC. |
|  | AC Implementation Evidence uploaded | 714053 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | CA Implementation Evidence uploaded | 714060 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | AT Implementation Evidence uploaded | 714063 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | PL Implementation Evidence uploaded | 714066 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | CM Implementation Evidence uploaded | 714067 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | AU Implementation Evidence uploaded | 714068 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | SC Implementation Evidence uploaded | 714355 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | RA Implementation Evidence uploaded | 714356 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | MP Implementation Evidence uploaded | 714357 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | MA Implementation Evidence uploaded | 714358 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | IA Implementation Evidence uploaded | 714359 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | PE Implementation Evidence uploaded | 714360 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | CP Implementation Evidence uploaded | 714361 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | PS Implementation Evidence uploaded | 720572 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | Security Control Assessment | 694167 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | MP Implementation Evidence uploaded | 714357 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | AP Implementation Evidence Upload | 725141 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | UL Implementation Evidence Upload | 725142 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | AR Implementation Evidence Upload | 725143 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | DM Implementation Evidence Upload | 725144 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | DI Implementation Evidence Upload | 725145 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | SC Implementation Evidence Upload | 726551 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | SE Implementation Evidence Upload | 726552 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | IP Implementation Evidence Upload | 726614 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | Prepare CD2 Paperwork | 727825 | Documentation will be place in Risk Vision under the applicable section for ATO audit. |
|  | Retired Reservist Documentation for CD2 | 734724 | Documentation for RR CD2 |
| 001 | SNF034 | 736135 | Process Skilled Nursing Data Entry Conflicts Unit - HIPPS Code |
| 001 | SNF035 | 736136 | Process Skilled Nursing Data Entry Conflict - Revenue Code |
| 001 | SNF036 | 736138 | Process Skilled Nursing Data Entry Conflict - HIPPS Code |
| 001 | SNF038 | 736139 | Process Skilled Nursing Data Entry Conflict - From Date |
| 001 | SNF039 | 736140 | Process Skilled Nursing Data Entry Conflict - Through Date |
| 001 | SNF053 | 736141 | Send SNF Claim to Missing Data Queue - Units for HIPPS Code (RUG Group 1-4) |
| 001 | SNF054 | 736142 | Send SNF Claim to Missing Data Queue - Revenue Code 0022 for HIPPS Code |
| 001 | SNF055 | 736143 | Send SNF Claim to Missing Data Queue - No HIPPS Code Status |
| 001 | SNF057 | 736144 | Send SNF Claim to Missing Data Queue - "From Date" |
| 001 | SNF058 | 736145 | CRU\_\_SNF058 - Send SNF Claim to Missing Data Queue - "Through Date" |

# User Stories/Backlog

The Rational Product backlogs contain all prioritized and accepted user stories ready for development. Backlog items can be reprioritized by the VA at any time. The current backlog is maintained and available within Rational.

Table 5 depicts the location where the artifacts are identified as baselined, grouped, and managed:

Table 5: Rational Product Backlog Documents

| **Document Name** | **Document Link** |
| --- | --- |
| CP&E Backlog | <https://URL/ccm/web/projects/HAC_CPE%20(CM)#action=com.ibm.team.apt.viewPlan&page=com.ibm.team.apt.web.ui.plannedItems&id=_RxBG8GfaEee9Yp9RONnEjA&planMode=com.ibm.team.apt.viewmodes.internal.productBacklog.workBreakdown> |

# Testing Responsibilities

Table 6: FTC Test Tasks

|  |  |
| --- | --- |
| FTC (Developer) | Party Responsible |
| Unit/Product/Component Testing | FTC System Quality Assurance (SQA) |
| Build Verification Testing | FTC SQA |
| Functional Testing | FTC SQA |
| Performance/Load Testing | FTC SQA |
| Integration/System Testing | FTC SQA |
| Regression Testing | FTC SQA |
| Section 508 Compliance Testing | FTC SQA |
| Security Testing | FTC SQA |
| Installation Testing/Build Verification | FTC SQA |
| Security Testing | FTC SQA |
| Performance/Load Testing | FTC SQA |

# Acceptance Criteria

* Final Development Code Files, Compiled Code, and supporting documentation are checked into the projects Rational Repository.
* 100% traceability in Rational.
* Updated as per plan in Rational, Requirements Traceability Matrix (RTM) and executed Test Scripts is in Rational.
* 508 Compliant Checklists.

# Schedule

The Build schedule is described in the sections below. Story Points are estimated prior to elaboration using standard Agile principals and may not reflect actual hours estimated during sprint planning.

## Build 7 Sprint 14

Table 7: Build 7 Sprint 14 Schedule

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **CP&E Build 7** | | **46 Days** | | **Wednesday 2/28/18** | | | **Tuesday 5/31/18** |
| **Task Name** | | **Duration** | | **Start** | | | **Finish** |
| **Build 7 - Sprint 14** | | **9 Days** | | **Wednesday 2/28/18** | | | **Tuesday 3/13/18** |
| **Team** | **Description** | **Epic** | **Sub Epic** | **User Story** | | **Story Points** | **Hours** |
| **Team 1** | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Facility and Professional Fee services in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-109 | | 13 | 90 |
|  | As a VE, I want the system to use the PL Zip in the CMAC Anesthesia Rate payment methodology in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for Anesthesia for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-114 | | 13 | 95 |
|  | As an HCR PA I want the label in the IP vendor screen to be changed from "Remit-to Information" to "Billing/Remit-to Information". | 001 | N/A | 001-018 | | 8 | 50 |
| **Team 2** | As a VE, I want the system to use the PL Zip in the CMAC Injectable Rate payment methodology for Injectable Drugs in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-117 | | 13 | 95 |
|  | As the HCR Group I would like a report I can either print or export to Excel from CP&E that displays the information based on the report specifications on duplicate vendor records that have been inactivated. | 001 | N/A | 001-013 | | 13 | 90 |
|  | As an HCR PA I want the system to display the provider's billing address (Street Address, City, State, and Zip Code) on the IP Vendor search result screen in the field that is labelled "BILLING/REMIT-TO ADDRESS", when the billing address is present in the Vendor File. | 001 | N/A | 001-019 | | 8 | 50 |
| **D**: Sprint Plan | | **Monday**: 2/12/18 | | | | | |
| **Sprint Kickoff/Planning**  (All Teams) | | 4-6 Hours | |  | Wednesday: 2/28/18 | | |
| **Sprint 14 Backlog Grooming**  (All Teams) | | 1 Hour | |  | Thursday: 3/8/18 | | |
| **Sprint 14 Sprint Review**  (All Teams) | | 1 Hour | |  | Tuesday: 3/13/18 | | |

## Build 7 Sprint 15

Table 8: Build 7 Sprint 15 Schedule

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Build 7 - Sprint 15** | | **10 Days** | | **Wednesday 3/14/18** | | **Tuesday 3/27/18** |
| **Team** | **Description** | **Epic** | **Sub Epic** | **User Story** | **Story Points** | **Hours** |
| **Team 1** | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Mental Health in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-110 | 8 | 48 |
|  | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for ASC Professional Fee services claims in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient. | 001 | N/A | 001-111 | 8 | 48 |
|  | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Multiple Surgery Fingers or Toes in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-120 | 8 | 72 |
|  | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Multiple Surgery in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-119 | 8 | 66 |
| **Team 2** | As a VE, I want the system to use the PL Zip in the CMAC Payment Methodology for PA or NP as an Assistant-at-Surgery in all Corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB Manual and EDI Outpatient Claims. | 001 | N/A | 001-124 | 5 | 48 |
|  | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Assistant-At-Surgery in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-121 | 8 | 48 |
|  | As a VE, I want the system to use the PL Zip in the CMAC payment methodology for Other than Assistant-At-Surgery in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-122 | 8 | 60 |
|  | As a VE, I want the system to use the PL Zip in the CMAC payment methodology in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB EDI Manual and EDI claims with a Type of Service of Dental. | 001 | N/A | 001-123 | 8 | 78 |
| **D**: Sprint Plan | | **Monday**: 2/12/18 | | | | |
| **Sprint Kickoff/Planning**  (All Teams) | | 4-6 Hours | |  | Wednesday: 3/14/18 | |
| **Sprint 15 Backlog Grooming**  (All Teams) | | 1 Hour | |  | Thursday: 3/22/18 | |
| **Sprint 15 Sprint Review**  (All Teams) | | 1 Hour | |  | Tuesday: 3/27/18 | |

## Build 7 Sprint 16

Table 9: Build 7 Sprint 16 Schedule

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Build 7 - Sprint 16** | | **10 Days** | | **Wednesday 3/28/18** | | **Tuesday 4/10/18** |
| **Team** | **Description** | **Epic** | **Sub Epic** | **User Story** | **Story Points** | **Hours** |
| **Team 1** | As a VE, I want the system to use the PL Zip in the PPS payment methodology for ASC Hospital Based Facility in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-112 | 8 | 50 |
|  | As a VE, I want the system to use the PL Zip in the PPS payment methodology for ASC Freestanding Facility in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-113 | 8 | 50 |
|  | As a VE, I want the system to use the PL Zip in the Medicare Hospice Per Diem Rates payment methodology for Hospice Routine Home Care in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Outpatient claims. | 001 | N/A | 001-115 | 8 | 60 |
|  | Documentation for ATO Evidence | 001 | N/A | ATO | 8 | 60 |
| **Team 2** | As a VE, I want the system to use the PL Zip in the Prospective Payment System (PPS) payment methodology in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Inpatient claims. | 001 | N/A | 001-100 | 8 | 60 |
|  | As a VE, I want the system to use the PL Zip in the Low Volume Mental Health (LVMH) payment methodology in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Inpatient claims. | 001 | N/A | 001-101 | 8 | 50 |
|  | As a VE, I want the system to use the PL Zip in the High Volume Mental Health (HVMH) payment methodology claims in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Inpatient. | 001 | N/A | 001-102 | 8 | 50 |
|  | As a VE, I want the system to use the PL Zip in the Medicare Hospice Per Diem Rates payment methodology for Hospice General Inpatient Care in all corresponding Types of Coverage for the Coordination of Benefit of Primary, Secondary and Tertiary for CHAMPVA\SB manual and EDI Inpatient claims. | 001 | N/A | 001-103 | 8 | 60 |
| **D**: Sprint Plan | | **Monday**: 2/12/18 | | | | |
| **Sprint Kickoff/Planning**  (All Teams) | | 4-6 Hours | |  | Wednesday: 3/28/18 | |
| **Sprint 16 Backlog Grooming**  (All Teams) | | 1 Hour | |  | Thursday: 3/28/18 | |
| **Sprint 16 Sprint Review**  (All Teams) | | 1 Hour | |  | Tuesday: 4/10/18 | |

## Build 7 Sprint 17

Table 10: Build 7 Sprint 17 Schedule

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Build 7 - Sprint 17** | | **10 Days** | | **Wednesday 4/11/18** | | **Tuesday 4/24/18** |
| **Team** | **Description** | **Epic** | **Sub Epic** | **User Story** | **Story Points** | **Hours** |
| **Team 1** | AC Implementation Evidence uploaded | ATO | N/A | 714053 | 5 | 30 |
|  | CA Implementation Evidence uploaded | ATO | N/A | 714060 | 3 | 15 |
|  | AT Implementation Evidence uploaded | ATO | N/A | 714063 | 3 | 15 |
|  | PL Implementation Evidence uploaded | ATO | N/A | 714066 | 3 | 15 |
|  | CM Implementation Evidence uploaded | ATO | N/A | 714067 | 3 | 15 |
|  | AU Implementation Evidence uploaded | ATO | N/A | 714068 | 3 | 15 |
|  | SC Implementation Evidence uploaded | ATO | N/A | 714355 | 3 | 15 |
|  | RA Implementation Evidence uploaded | ATO | N/A | 714356 | 3 | 15 |
|  | MP Implementation Evidence uploaded | ATO | N/A | 714357 | 3 | 15 |
|  | MA Implementation Evidence uploaded | ATO | N/A | 714358 | 3 | 15 |
|  | IA Implementation Evidence uploaded | ATO | N/A | 714359 | 3 | 15 |
|  | PE Implementation Evidence uploaded | ATO | N/A | 714360 | 3 | 15 |
|  | CP Implementation Evidence uploaded | ATO | N/A | 714361 | 3 | 15 |
|  | PS Implementation Evidence uploaded | ATO | N/A | 720572 | 3 | 15 |
|  | Security Control Assessment | ATO | N/A | 694167 | 3 | 15 |
| **Team 2** | If the PR is entered at the line level, it should pay the less of the billed amount or the PR for that line item. | ATO | N/A | 705844 | 8 | 80 |
|  | When and NDC is entered on an outpatient claim, it should pay the lesser of the billed amount or the allowed amount (average wholesale price (AWP) found in ^MDI in VistA. | ATO | N/A | 705845 | 8 | 80 |
|  | The Hospital based ASC issue has always occurred in VISTA and it was only recognized after the 11/01/17 load because there was a significant number of codes added to TRICARE’s ASC list in this update. When a VE receives a hospital based ASC claim, they check to see if the surgical codes on the claim are on TRICARE’s ASC list. If even one code is on the list, they process the claim as ASC (pick the ASC vendor and use POS 24). A 196 denial is occurring only when there is a code that is on the list on the date of service, and a code that was added to the list after the date of service. The code on the claim that was not added to TRICARE’s ASC list until after the date of service is denying for 196 in error when it should pay CTC. This error is not effecting very many claims because if the only surgical code on the claim is not on the list on that date of service, the claim is processed as outpatient and the provider is paid CMAC. | ATO | N/A | 705849 | 8 | 80 |
| **D**: Sprint Plan | | **Monday**: 2/12/18 | | | | |
| **Sprint Kickoff/Planning**  (All Teams) | | 4-6 Hours | |  | Wednesday: 3/28/18 | |
| **Sprint 17 Backlog Grooming**  (All Teams) | | 1 Hour | |  | Thursday: 3/28/18 | |
| **Sprint 17 Sprint Review**  (All Teams) | | 1 Hour | |  | Tuesday: 4/10/18 | |

## Build 7 Sprint 18

****Table 11: Build 7 Sprint 18 Schedule****

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Build 7 - Sprint 18** | | **9 Days** | | **Wednesday 4/25/18** | | **Tuesday 4/08/18** |
| **Team** | **Description** | **Epic** | **Sub Epic** | **User Story** | **Story Points** | **Hours** |
| **Team 1** | MP Implementation Evidence uploaded | ATO | N/A | 714357 | 3 | 30 |
|  | AP Implementation Evidence Upload | ATO | N/A | 725141 | 3 | 15 |
|  | UL Implementation Evidence Upload | ATO | N/A | 725142 | 3 | 15 |
|  | AR Implementation Evidence Upload | ATO | N/A | 725143 | 3 | 30 |
|  | DM Implementation Evidence Upload | ATO | N/A | 725144 | 3 | 15 |
|  | DI Implementation Evidence Upload | ATO | N/A | 725145 | 3 | 15 |
|  | SC Implementation Evidence Upload | ATO | N/A | 726551 | 3 | 15 |
|  | SE Implementation Evidence Upload | ATO | N/A | 726552 | 3 | 15 |
|  | IP Implementation Evidence Upload | ATO | N/A | 726614 | 3 | 30 |
|  | Prepare CD2 Paperwork | ATO | N/A | 727825 | 5 | 50 |
| **Team 2** | PL Zip in the Medicare SNF Pricer payment methodology for Skilled Nursing Facility (SNF) | 001 | N/A | 001-105 | 5 | 50 |
|  | PL Zip in the DRG payment methodology for Substance Use Disorder Rehabilitation Facility (SUDRF) | 001 | N/A | 001-106 | 5 | 50 |
|  | PL Zip in the Half Day Per Diem payment methodology for Partial Hospitalization program claims | 001 | N/A | 001-107 | 5 | 50 |
|  | Payment Methodology for Full Day Per Diem for  Partial Hospitalization Program Claims. | 001 | N/A | 001-108 | 8 | 60 |
| **D**: Sprint Plan | | **Monday**: 3/26/18 | | | | |
| **Sprint Kickoff/Planning**  (All Teams) | | 4-6 Hours | |  | Wednesday: 4/25/18 | |
| **Sprint 18 Backlog Grooming**  (All Teams) | | 1 Hour | |  | Thursday: 4/19/18 | |
| **Sprint 18 Sprint Review**  (All Teams) | | 1 Hour | |  | Tuesday: 5/08/18 | |

## 

## Build 7 Sprint 19

****Table 12: Build 7 Sprint 19 Schedule****

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Build 7 - Sprint 19** | | **14 Days** | | **Wednesday 5/9/18** | | **Tuesday 5/29/18** |
| **Team** | **Description** | **Epic** | **Sub Epic** | **User Story** | **Story Points** | **Hours** |
| **Team 1** | Retired Reservist Documentation for CD2 | CD2 |  | 734724 | 21 | 336 |
| **Team 2** | Process Skilled Nursing Data Entry Conflicts Unit - HIPPS Code | 001 | N/A | SNF034 | 5 | 50 |
|  | Process Skilled Nursing Data Entry Conflict - Revenue Code | 001 | N/A | SNF035 | 3 | 35 |
|  | Process Skilled Nursing Data Entry Conflict - HIPPS Code | 001 | N/A | SNF036 | 3 | 35 |
|  | Process Skilled Nursing Data Entry Conflict - From Date | 001 | N/A | SNF038 | 3 | 35 |
|  | Process Skilled Nursing Data Entry Conflict - Through Date | 001 | N/A | SNF039 | 3 | 35 |
|  | Send SNF Claim to Missing Data Queue - Units for HIPPS Code (RUG Group 1-4) | 001 | N/A | SNF053 | 3 | 35 |
|  | Send SNF Claim to Missing Data Queue - Revenue Code 0022 for HIPPS Code | 001 | N/A | SNF054 | 3 | 35 |
|  | Send SNF Claim to Missing Data Queue - No HIPPS Code Status | 001 | N/A | SNF055 | 3 | 35 |
|  | Send SNF Claim to Missing Data Queue - "From Date" | 001 | N/A | SNF057 | 3 | 21 |
|  | CRU\_\_SNF058 - Send SNF Claim to Missing Data Queue - "Through Date" | 001 | N/A | SNF058 | 3 | 21 |
| **D**: Sprint Plan | | **Monday**: 4/30/18 | | | | |
| **Sprint Kickoff/Planning**  (All Teams) | | 4-6 Hours | |  | Wednesday: 5/9/18 | |
| **Sprint 19 Backlog Grooming**  (All Teams) | | 1 Hour | |  | Thursday: 5/3/18 | |
| **Sprint 19 Sprint Review**  (All Teams) | | 1 Hour | |  | Tuesday: 5/29/18 | |

## Sprint Ceremonies

Table 10: Sprint Ceremonies and Meeting Orientation

| **Meeting Name** | **Date** | **Time** | **Duration** | **Attendees** |
| --- | --- | --- | --- | --- |
| **Standing Sprint Ceremonies and Meetings** | | | | |
| Sprint Kickoff Veteran-focused Integration Process **(VIP) Sprint Planning** | First Day of Sprint | Various Wednesday | 1 Hour per Team | FTC Team Reps VA PM VA PO |
| Daily Scrum | Daily | Mornings | 10 Minutes | FTC Team Members VA Representatives Welcome |
| Scrum of Scrums | Daily | 11:30 AM | 30 Minutes | FTC Team Reps VA PM VA PO |
| Sprint Backlog **Grooming**/**Planning** | Bi-Weekly | 3:00 PM Thursday | 1 Hour | FTC Team Reps VA PM VA PO VA BA |
| Sprint  **Review** | At Sprint End | 2:00 PM Tuesday | 1 Hour | FTC Team Reps VA PM VA PO |

## Build 7 Planning

Table 11: Build 7 Planning and Meeting Orientation

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Standing Build Planning Sessions, Meetings, and Deliverables** | | | | |
| **Build 7 Planning** | **Timeframe** | **Date** | **Duration** | **Attendees** |
| Build Plan 7 Backlog Review | Within 3-Weeks  Prior to Build Start | 1/31/18 | 1 Hour | FTC Team Reps VA PM VA PO VA BA |
| Build Plan 7 Planning Session | Within 3-Weeks Prior to Build Start | 1/31/18 | 1 Hour | FTC Team Reps VA PM VA PO VA BA |
| Build Plan 7  Review | Within 2-Weeks Prior to Build Start | 2/09/18 | 1 Hour | FTC Team Reps VA PM VA PO VA BA |

# Dependencies

* None

# Risk & Issues

## Identified Risks

* **IF**: Multiple developers work on the same code module and push their changes into production. **THEN**: The last developer to push a change into production will overwrite the work of the other developers.

## Identified Issues

There is no relevant data for this section.

# Constraints

* None at this time.

# Assumptions

* Defects, functionality, and user satisfaction normally identified and resolved during a sprint or resolved in the following sprint will accumulate throughout the build if VA is unable to accomplish sprint by sprint SQA/UAT testing.
* Defects found during SQA and UAT will impact the volume of work to be accomplished during Build 7 or when the VA is able to perform SQA/UAT testing. This dynamic must be anticipated and planned.
* In following the Agile process defects found during a sprint that cannot be resolved within the sprint are placed in the build backlog and will be worked in the next sprint. Subsequently, the technical reasons why the User Story with defects could not be finished within the sprint will be explained during the Sprint Retrospective.

# Definition of Done

The Sprint work product deliverables are shown in Section 3.1 and Sections 7.1 through 7.2.

* Final Development Code Files, Compiled Code, and supporting documentation are checked into the project’s Rational repository (0008AM).
* 100% traceability in Rational.
* Creation of all the iterative Release Package (008AP) documentation associated with Build 7 required for a future release to production (e.g. Installation Guide and User Manual.)
* Updated RTM and executed test scripts as per plan in Rational.

# Build 7 Deliverables

The Sprint Work Product deliverables completed are checked into the projects, Rational Repository for updates and subsequently released maintenance as the project continues forward.

* Build 7 Release Planning Package (0008AF)
* Build 7 Sprint Plans (0008AG)
* Build 7 Sprint Burndown and Velocity charts (0008AH)
* Build 7 508 Certification (0008AK)
* Build 7 Acceptance Form (0008AN)
* Build 7 Release Package (0008AP)