**Bayou Dental Reporting**

**Report Information**

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Template

**Information to be completed by the Dental Plan**

Dental Plan ID: [Dental Plan ID]

Dental Plan Name: [Dental Plan Name]

Dental Plan Contact:

Dental Plan Contact Email:

Report Period Start Date:

Report Period End Date:

Date Completed:

*(This plan can be submitted in any format. However, this document must be completed and submitted with the required plan.)*

**Definitions and Instructions:**

Systems Refresh Plan

The Dental Plan shall provide to DHH an annual Systems Refresh Plan. The plan shall outline how Systems within the Dental Plan’s span of control will be systematically assessed to determine the need to modify, upgrade and/or replace application software, operating hardware and software, telecommunications capabilities, information management policies and procedures, and/or systems management policies and procedures in response to changes in business requirements, technology obsolescence, staff turnover and other relevant factors.

The systems refresh plan shall also indicate how the Dental Plan will ensure that the version and/or release level of all of its Systems components (application software, operating hardware, operating software) are always formally supported by the original equipment manufacturer (OEM), software development firm (SDF), or a third party authorized by the OEM and/or SDF to support the Systems component.

**RFP Reference: Systems Refresh Plan**