

LEGISLATIVE BUDGET REQUEST

Rick Scott  
Governor

■ ■  
Barbara Palmer  
Director

■ ■  
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Agency for Persons with Disabilities

Tallahassee

October 15, 2014

Cynthia Kelly, Director  
Office of Policy and Budget  
Executive Office of the Governor  
1701 Capitol  
Tallahassee, Florida 32399-0001

JoAnne Leznoff, Staff Director  
House Appropriations Committee  
221 Capitol  
Tallahassee, Florida 32399-1300

Cindy Kynoch, Staff Director  
Senate Committee on Appropriations  
201 Capitol  
Tallahassee, Florida 32399-1300

Dear Directors:

Pursuant to Chapter 216, Florida Statutes, our Legislative Budget Request for the Agency for Persons with Disabilities is submitted in the format prescribed in the budget instructions. The information provided electronically and contained herein is a true and accurate presentation of our proposed needs for the 2015-16 Fiscal Year.

This submission has been approved by Barbara Palmer, Director, Agency for Persons with Disabilities.



Barbara Palmer  
Director

## **Temporary Special Duty – General Pay Additives Implementation Plan for Fiscal Year 2015-2016**

Section 110.2035(7)(b), Florida Statutes, provides that each state agency shall include in its annual legislative budget request a proposed written plan for implementing temporary special duties – general pay additives during the next fiscal year. The agency is not requesting any additional rate or appropriations for these additives.

In accordance with rule authority in 60L-32.0012, Florida Administrative Code, the agency had granted pay additives when warranted based on the duties and responsibilities of key positions. The requested additives are justified for reasons such as additional assigned duties and responsibilities when a key position become vacant.

Temporary pay increases are used in a variety of circumstances such as:

- An employee performing additional duties of a higher level position where the incumbent has been temporarily assigned other duties;
- An employee who meets the criteria for out of title work under a collective bargaining agreement. An employee performing additional duties of a coworker who is absent in accordance with s. 60L-32, F.A.C.;
- An employee performing additional duties of a significant nature and time regarding a special project or special assignment not normally assigned to the employee.

### Effective Dates:

The additive will be in effect beginning the first day of the added duties or, when the temporary special duty is for an employee covered by an applicable collective bargaining unit contract and in accordance with s. 60L-32, F.A.C.. The additive will be in effect for the length of time the position is vacant or until such time as management decides that the additional duties can be removed from the employee receiving the additive, but in either case an additive can extend no longer than 90 days without an approved extension by the Department of Management Services.

### Additive Amount:

Up to 10% of the employee's base salary (or the option to go to the minimum of the higher level pay grade, if determined appropriate).

### Estimated Annual Cost:

The last fiscal year's annual cost for temporary special duty additives was \$7,683. This is consistent with the average cost for previous years therefore the agency estimates pay additives of approximately \$8,000 for next fiscal year.



agency for persons with disabilities  
*State of Florida*

**Legislative Budget Request  
Fiscal Year 2015-16**

**Department Level  
67000000**

**Exhibits and Schedules**

**Barbara Palmer  
Director**

## Schedule VII: Agency Litigation Inventory

*For directions on completing this schedule, please see the "Legislative Budget Request (LBR) Instructions" located on the Governor's website.*

Agency:	Agency for Health Care Administration Agency for Persons with Disabilities		
Contact Person:	APD: Richard Tritschler, General Counsel AHCA: Stuart Williams, General Counsel.	Phone Number:	APD: (850) 414-8052 AHCA: (850) 412-3669
Names of the Case: (If no case name, list the names of the plaintiff and defendant.)	Petitioners: AHCA and APD Respondent: Centers for Medicaid & Medicare Services (CMS)		
Court with Jurisdiction:	None, but this will be an administrative appeal through the Department of Health and Human Services ("DHHS").		
Case Number:	None at this time. For identifying purposes, this will be an appeal of OIG Audit A-04-10-00076.		
Summary of the Complaint:	<p>On March, 2013, CMS issued a demand letter memorializing the findings of CMS Audit A-04-10-00076, that requests a refund of \$4,386,952 (\$2, 193,476 federal share). This amount represents payments in excess of the allowable amount identified in the Department of Health &amp; Human Services, Office of Inspector General's report on Florida Claimed Some Medicaid Administrative Costs That Did Not Comply With Program Requirements for federal fiscal year 2007 through 2009, (Report number A-04-10-00076), issued March 1, 2013.</p> <p>The review found that the Medicaid Agency claimed Medicaid administrative costs that did not comply with federal requirements. The report identified costs that did not comply because certain employees in sampled positions did not complete the RMS observation forms as specified in the cost allocation plan, and the RMS coordinator's review did not detect noncompliance. As a result, the Agency for Persons with Disabilities' Medicaid reimbursable observation percentages used to calculate its Medicaid administrative costs were overstated.</p>		
Amount of the Claim:	\$4,386,952 (\$2, 193,476 federal share).		
Specific Statutes or Laws (including GAA) Challenged:	This is an overpayment determination, and so the validity of state law is not at issue. N/A – no statutes or laws challenged.		
Status of the Case:	AHCA responded to the Demand letter on 6/3/14. APD sent a second response on 6/13/14. The APD response is still under review at CMS.		

Who is representing (of record) the state in this lawsuit? Check all that apply.	x	Agency Counsel
		Office of the Attorney General or Division of Risk Management
	x	Outside Contract Counsel – Carolyn F. Corwin
If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).	This is not a class action lawsuit.  N/A	

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Agency:	<b>Agency for Persons with Disabilities</b>		
Contact Person:	Brian McGrail	Phone Number:	(850) 487-0562
Names of the Case: (If no case name, list the names of the plaintiff and defendant.)	MORELAND, et al. v. APD		
Court with Jurisdiction:	Northern District of Florida		
Case Number:	4:12-cv-00585-MW-CAS		
Summary of the Complaint:	Plaintiffs seek to certify a class to challenge the adequacy of the notices APD used to inform class members of their transition to the iBudget Waiver. Case settled.		
Amount of the Claim:	Injunctive Relief and Attorneys' Fees		
Specific Statutes or Laws (including GAA) Challenged:	No statutes or laws were challenged.		
Status of the Case:	On November 27, 2013, Judge Walker issued order of final approval of settlement. Risk Management payment of attorneys' fees and expenses to class counsel in the amount of \$270,000. On January 15, 2014, APD mailed reinstatement Notices to Class Members and reinstated them to their pre-iBudget cost plan. Amended Notices were prepared but not mailed due to iBudget rule challenge. APD prevailed at DOAH in the rule challenge. Petitioners' appealed to the 1 <sup>st</sup> DCA and the DCA overturned the DOAH Final Order on July 21, 2014. The Amended Notices will go out in due course.		
Who is representing (of record) the state in this lawsuit? Check all that apply.	X	Agency Counsel	
	X	Office of the Attorney General or Division of Risk Management	
	X	Outside Contract Counsel – Radey Law Firm	

<p>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</p>	<p>This is a class action. Class has been certified for settlement purposes.</p> <p>Plaintiffs are represented by Southern Legal, a non-profit from Gainesville, Florida. The attorneys are Gabriella Ruiz, Nancy Wright Kirsten Clanton and Jodi Siegel.</p>
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<b>Agency:</b>	<b>Agency For Persons With Disabilities</b>		
<b>Contact Person:</b>	Kurt Ahrendt	<b>Phone Number:</b>	850-414-0139
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	Linda Jackson v. APD		
<b>Court with Jurisdiction:</b>	United States District Court Northern District of Florida Tallahassee Division/U.S. Court of Appeals for the 11 <sup>th</sup> Circuit		
<b>Case Number:</b>	4:13-cv-00265-WS-CAS/11 <sup>th</sup> Circuit, Case No. 14-12650		
<b>Summary of the Complaint:</b>	Linda Jackson was an employee at the Development Disabilities Defendant Program (DDDP) and was involved in an incident with a client in which she bit the client. Ms. Jackson was terminated from employment and filed a lawsuit claiming worker's compensation retaliation and handicap discrimination.		
<b>Amount of the Claim:</b>	Action in excess of \$15,000.00		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	N/A – No statutes or laws are challenged.		
<b>Status of the Case:</b>	Summary judgment in favor of APD case in the U.S. District Court. Employee has appealed to the 11 <sup>th</sup> Circuit Court of Appeals. Appellant-Linda Jackson filed initial brief on 8/27/14. Appellee's brief due 9/29/14.		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input checked="" type="checkbox"/>	Outside Contract Counsel – David Terry of Newell, Terry & Douglas	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	N/A – This is not a class action lawsuit.		



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<b>Agency:</b>	<b>Agency For Persons With Disabilities</b>		
<b>Contact Person:</b>	Kurt Ahrendt	<b>Phone Number:</b>	850-414-0139
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	Kevin Rouse v. APD		
<b>Court with Jurisdiction:</b>	Hillsborough County Circuit Court		
<b>Case Number:</b>	11-CA-010825/G		
<b>Summary of the Complaint:</b>	Kevin Rouse, client was a resident in Human Development Center where he was sexually assaulted during an approved policy of "quiet time" in which the clients were encouraged to participate in sexual activities.		
<b>Amount of the Claim:</b>	Action in excess of \$15,000.00		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	N/A-No statutes or laws were challenged.		
<b>Status of the Case:</b>	On-going discovery. No change.		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input checked="" type="checkbox"/>	Outside Contract Counsel: John D. Kiernan	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	N/A-This is not a class action lawsuit.		

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<b>Agency:</b>	<b>Agency for Persons with Disabilities (APD)</b>		
<b>Contact Person:</b>	Bill Crowe	<b>Phone Number:</b>	(850) 414-8097
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	G. H. and N. N. v. Barbara Palmer in her official capacity as Director, Florida Agency for Persons with Disabilities		
<b>Court with Jurisdiction:</b>	U.S. District Court for the Northern District of Florida Tallahassee Division		
<b>Case Number:</b>	4:13-cv-00131		
<b>Summary of the Complaint:</b>	<p>This is a civil rights case brought after APD issued a no trespass warning letter to a client ("GH") who injured an APD employee and caused property damage at the APD office. A no trespass warning was also issued to the client's mother ("NN"). The no trespass warnings were issued pursuant to § 810.08, F.S. GH and NN retained counsel and challenged issuance of the no trespass warnings alleging the warnings were too broad and that APD failed to provide a due process hearing under the 14th Amendment of the U.S. Constitution. Based upon negotiations with GH and NN's counsel, APD limited the scope of the warnings by reissuing the no trespass letters. Thereafter, GH and NN requested that APD refer the matter to the Division of Administrative Hearings ("DOAH"), which it did. On its own accord, DOAH dismissed the case for lack of jurisdiction. The federal case ensued.</p>		
<b>Amount of the Claim:</b>	\$ Indeterminable at this time. The plaintiffs are seeking: a declaratory judgment that APD violated their constitutional due process rights; injunctive relief requiring APD to rescind all no trespass warnings it has issued; attorney's fees; other relief.		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	N/A-No statutes or laws were challenged.		
<b>Status of the Case:</b>	<b>Discovery has concluded and motions for summary judgment were filed by both sides. No decision has been made regarding the motions for summary judgment.</b>		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input type="checkbox"/>	Outside Contract Counsel	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	N/A-This is not a class action lawsuit.		

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<b>Agency:</b>	<b>Agency for Health Care Administration</b>		
<b>Contact Person:</b>	Richard Tritshler	<b>Phone Number:</b>	850-414-8052
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	United States v. State of Florida; now consolidated with AR.		
<b>Court with Jurisdiction:</b>	Southern District of Florida		
<b>Case Number:</b>	13-61576-CIV-Dimitrouleas consolidated with 12-60460-CIV		
<b>Summary of the Complaint:</b>	Alleged violations of the Americans With Disabilities Act, as amended; persons under the age of 21 are unnecessarily in nursing facilities (NF) and at risk of being placed in NF; state has not funded necessary services.		
<b>Amount of the Claim:</b>	The United States seeks compensatory damages for pain and suffering of Medicaid recipients under the age of 21, plus injunctive relief. The amount of compensatory damages is unknown but could be large. In addition, the monetary impact of injunctive relief could exceed \$25,000,000 annually in additional Medicaid payments if the United States were to be successful.		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	Americans With Disabilities Act, as amended		
<b>Status of the Case:</b>	The State filed a Motion to Dismiss, asserting that the DOJ does not have lawful authority to bring the suit. The Court denied the motion. Disability Rights Florida filed a motion to intervene in this litigation on September 5, 2013. The Court denied that motion. Discovery is under way.		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	x	Agency Counsel	
	x	Office of the Attorney General or Division of Risk Management	
	x	Outside Contract Counsel – GrayRobinson, PA	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	Quasi class action brought by the U.S. Department of Justice.		

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<b>Contact Person:</b>	Richard Tritschler	<b>Phone Number:</b>	414-8052
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	Florida Association for Retarded Citizens, Inc., v. Bush		
<b>Court with Jurisdiction:</b>	U.S. District Court, Middle District of Florida		
<b>Case Number:</b>	Case Number 79-418-ORL-CIV-EK		
<b>Summary of the Complaint:</b>	Original allegations concerned conditions at Sunland Orlando		
<b>Amount of the Claim:</b>	injunctive relief		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	N/A-No statutes or laws were challenged.		
<b>Status of the Case:</b>	Consent decrees entered, the last in 2003.		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input type="checkbox"/>	Outside Contract Counsel	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	Southern Legal Counsel, Inc. 1229 N.W. 12th Avenue Gainesville, FL 32601  Class action lawsuit and the class was certified.		

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<b>Contact Person:</b>	Kurt Ahrendt	<b>Phone Number:</b>	850-414-0139
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	Precious Buchanan v. Barbara Palmer in her capacity as Director of APD, Charles Ball as Former Director of the Development Disabilities Defendant Program (DDDP) and M. D., Former Employee		
<b>Court with Jurisdiction:</b>	United States District Court for the Northern District of Florida Tallahassee Division		
<b>Case Number:</b>	4:13cv143-RH/CAS		
<b>Summary of the Complaint:</b>	Precious Buchanan, client was a resident in DDDP where she was sexually assaulted (raped) by an Agency employee M.D.		
<b>Amount of the Claim:</b>	Action in excess of \$15,000.00		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	N/A-No statutes or laws were challenged.		
<b>Status of the Case:</b>	Case settled for \$80,000.00. Mediation agreement and General Release executed on 1-10-14. Judgment entered on 1/23/14.		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input type="checkbox"/>	Outside Contract Counsel	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	N/A-This is not a class action lawsuit.		

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<b>Contact Person:</b>	Richard Tritschler	<b>Phone Number:</b>	(850) 850-414-8052
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	J.R. v. Hansen; J.R. v. Palmer (as captioned in the Florida Supreme Court)		
<b>Court with Jurisdiction:</b>	Florida Supreme Court; Questions certified to court from the Court of Appeals for the Eleventh Federal Circuit		
<b>Case Number:</b>	13-1549		
<b>Summary of the Complaint:</b>	Appellant J.R. appeals an order of summary judgment in favor of Michael Hansen, former Director of the Agency for Persons with Disabilities. The Appellant brings both a “facial” and “as applied” Constitutional challenge to section 393.11, Florida Statutes. The Appellant contends that section 393.11, Florida Statutes, fails to provide adequate due process to individuals who have been involuntarily admitted to Agency services. Following an order from the Eleventh Circuit, questions have been certified for review by the Florida Supreme Court.		
<b>Amount of the Claim:</b>	\$0.00		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	Section 393.11, Florida Statutes		
<b>Status of the Case:</b>	Case was orally argued in the Florida Supreme Court on April 9, 2014. Awaiting Supreme Court’s Opinion.		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General – Diane DeWolf, Solicitor General or Division of Risk Management	
	<input type="checkbox"/>	Outside Contract Counsel	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	N/A-This is not a class action lawsuit.		

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Agency:	<b>Agency for Persons with Disabilities</b>		
Contact Person:	Brian McGrail	Phone Number:	(850) 487-0562
Names of the Case: (If no case name, list the names of the plaintiff and defendant.)	Wheaton, et. al., v. Palmer		
Court with Jurisdiction:	United States District Court, Northern District of Florida		
Case Number:	4:13-cv-00179-MW-CAS		
Summary of the Complaint:	Six individually named plaintiffs and the organization Disability Rights Florida, Inc., seek a class action, injunctive relief, and attorneys' fees following allegations that the Agency has improperly failed to act on their requests for additional services with reasonable promptness, has failed to provide adequate due process, and has improperly rejected services pursuant to the Agency's "Cost Plan Freeze."		
Amount of the Claim:	\$0.00 and unspecified attorneys' fees		
Specific Statutes or Laws (including GAA) Challenged:	APD's implementation of the Cost Plan Freeze; see Laws of Florida Chp. 2011-69, p. 59, Specific Appropriation 231.		
Status of the Case:	Case settled. Settlement agreement signed on Oct. 16, 2013. APD complied with reporting requirement from Oct. 2013-Oct. 2014. APD will continue to internally monitor/track Significant Additional Needs funding requests for compliance with federal regulations. Last reporting to DRF will be Nov. 10, 2014.		
Who is representing (of record) the state in this lawsuit? Check all that apply.	X	Agency Counsel	
		Office of the Attorney General or Division of Risk Management	
	X	Outside Contract Counsel – Radey Law Firm	
If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).	Disability Rights Florida, Inc. and The Law Office of Nancy E. Wright  This is a class action lawsuit. No class has been certified.		

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<b>Agency:</b>	<b>Agency For Persons With Disabilities</b>		
<b>Contact Person:</b>	Kurt Ahrendt	<b>Phone Number:</b>	850-414-0139
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	Carlicia Baker v. APD		
<b>Court with Jurisdiction:</b>	United States District Court Northern District of Florida Tallahassee Division		
<b>Case Number:</b>	4:13-CV-0000507-WS-CAS		
<b>Summary of the Complaint:</b>	Carlicia Baker, Plaintiff worked Sunland and went out on a worker related injury. After Plaintiff reached maximum medical improvement she returned to work with restrictions that could not be accommodated. She was terminated and claimed disability discrimination and worker's compensation retaliation.		
<b>Amount of the Claim:</b>	Action in excess of \$15,000.00		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	N/A-No laws or statutes were challenged.		
<b>Status of the Case:</b>	Federal Complaint received 9-18-13. Settlement and General Release signed on August 27, 2014. Order of Dismissal entered by Judge on June 9, 2014. Case closed. The Settlement Agreement provided a payment of \$2,072.12 to Ms. Baker.		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input type="checkbox"/>	Outside Contract Counsel	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	N/A-This is not a class action lawsuit.		



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<b>Contact Person:</b>	Kurt Ahrendt	<b>Phone Number:</b>	(850) 414-0139
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	JDS v. APD		
<b>Court with Jurisdiction:</b>	Orange County Circuit Court		
<b>Case Number:</b>	06-CA-955		
<b>Summary of the Complaint:</b>	JDS was a developmentally disabled client in a licensed group home who was allegedly raped and impregnated.		
<b>Amount of the Claim:</b>	\$1,150,000.00		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	An adverse ruling would have expanded the "special relationship" exception to the general rule that a health services agency is not vicariously liable when the agency enters into an independent services contract with a licensed group home.		
<b>Status of the Case:</b>	This case has been settled and dismissed, with prejudice, for the payment of \$200,000 cash. In addition, the Agency agreed to include \$950,000 in its FY 2013-2014 Legislative Budget Request. A claims bill in the amount of \$950,000.00 (SB 24) was filed but the bill died in the Judiciary Committee on 05/02/2014. A Special Masters Hearing is being scheduled for a date in October/November, 2014 (David DeLapaz).		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input checked="" type="checkbox"/>	Outside Contract Counsel – Larry Townsend	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	N/A-This is not a class action lawsuit.		

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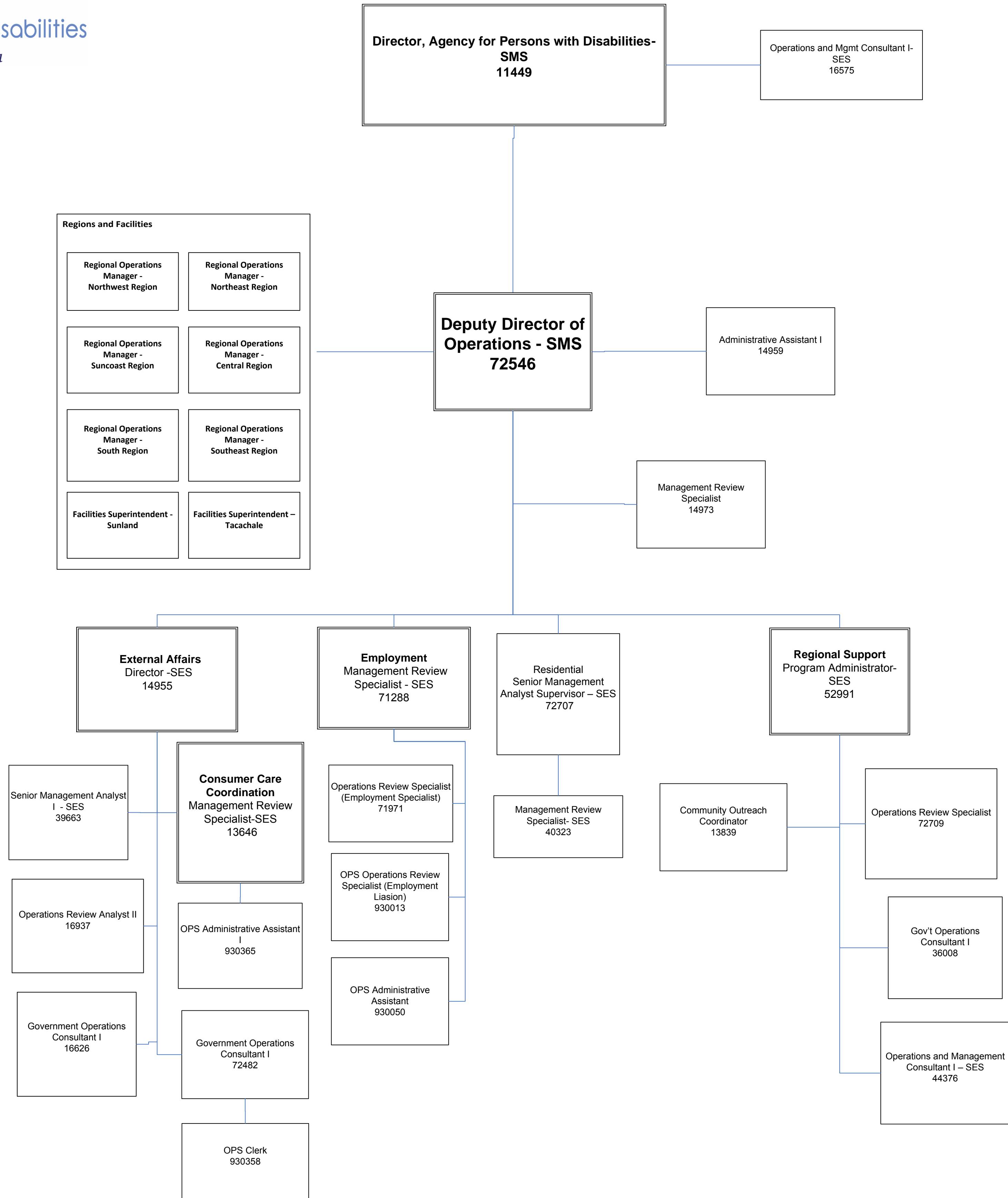
<b>Agency:</b>	<b>Agency For Persons With Disabilities</b>		
<b>Contact Person:</b>	Kurt Ahrendt	<b>Phone Number:</b>	850-414-0139
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	Latarsha Fomby v. APD		
<b>Court with Jurisdiction:</b>	Alachua County Circuit Court		
<b>Case Number:</b>	2013-CA-3184		
<b>Summary of the Complaint:</b>	(L. F.) Employee was terminated from the Agency for failing to report abuse of a Client timely and for falsifying logbooks. Employee filed a complaint alleging Public Whistle-Blower Retaliation.		
<b>Amount of the Claim:</b>	Action in excess of \$15,000.00		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	N/A-No statutes or laws were challenged.		
<b>Status of the Case:</b>	Case closed. Settlement amount: \$22,500. Settlement agreement and Release signed on April 29, 2014. Order of Dismissal entered on July 10, 2014.		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input type="checkbox"/>	Outside Contract Counsel	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	N/A-This is not a class action lawsuit.		

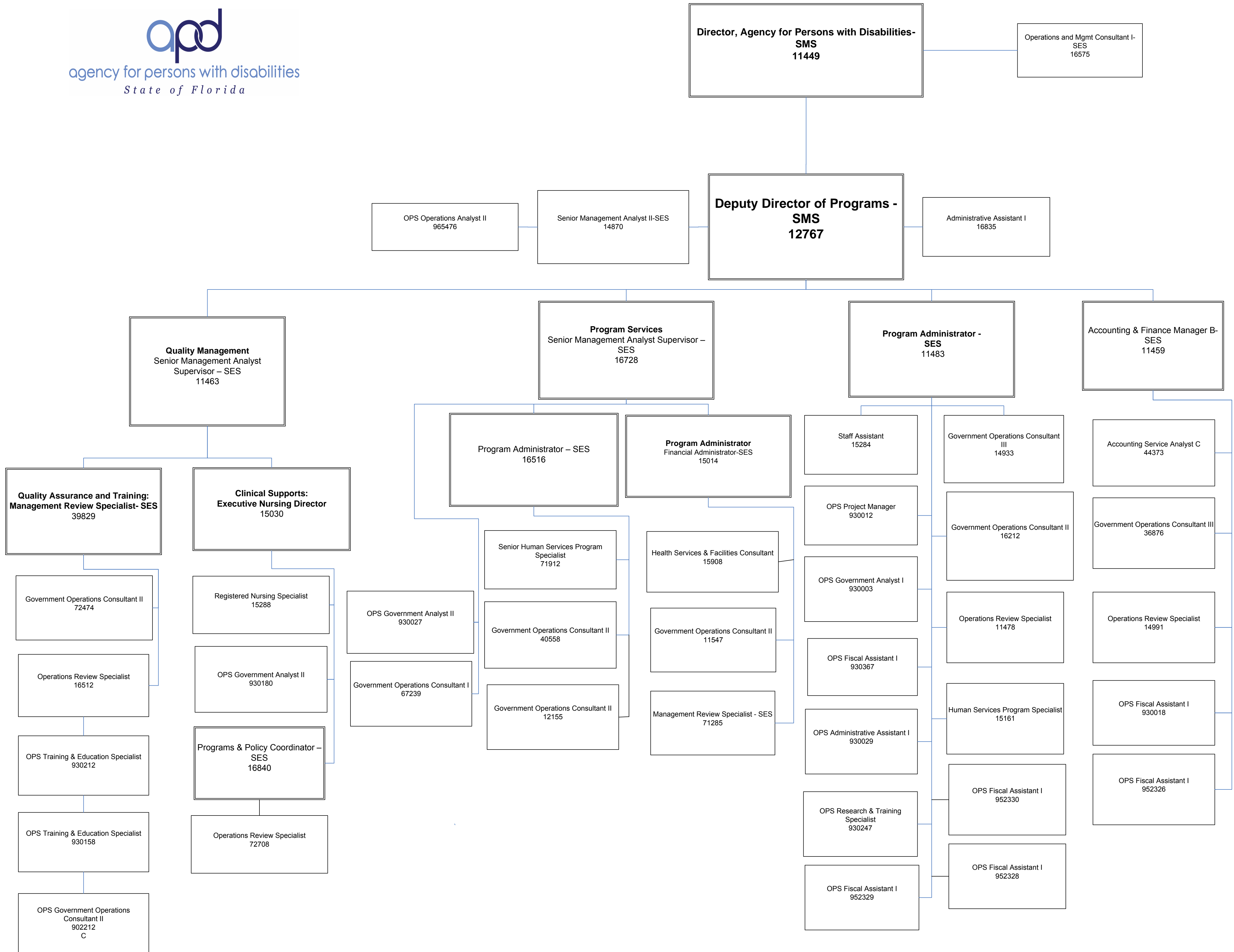
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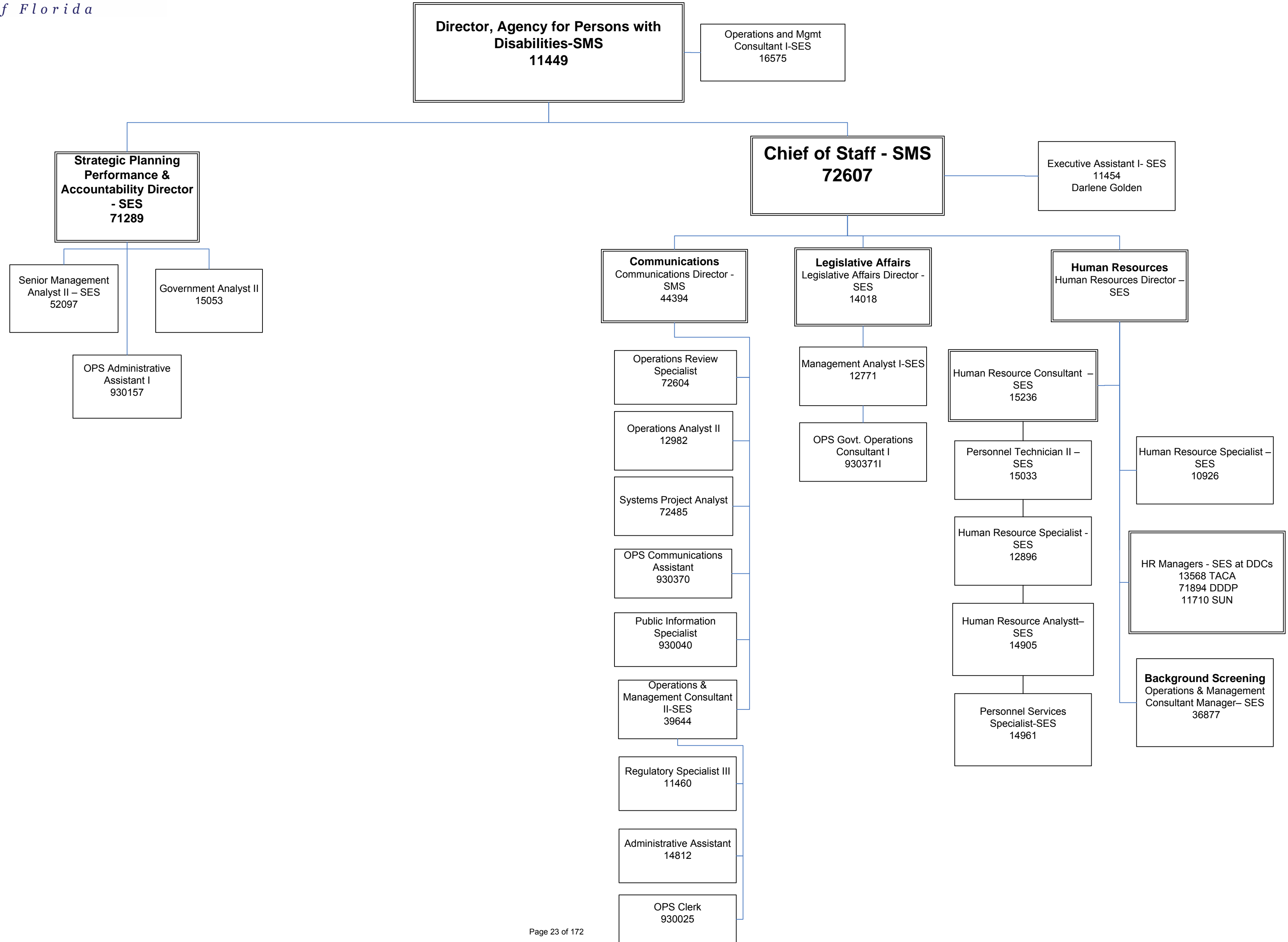
*For directions on completing this schedule, please see the "Legislative Budget Request (LBR) Instructions" located on the Governor's website.*

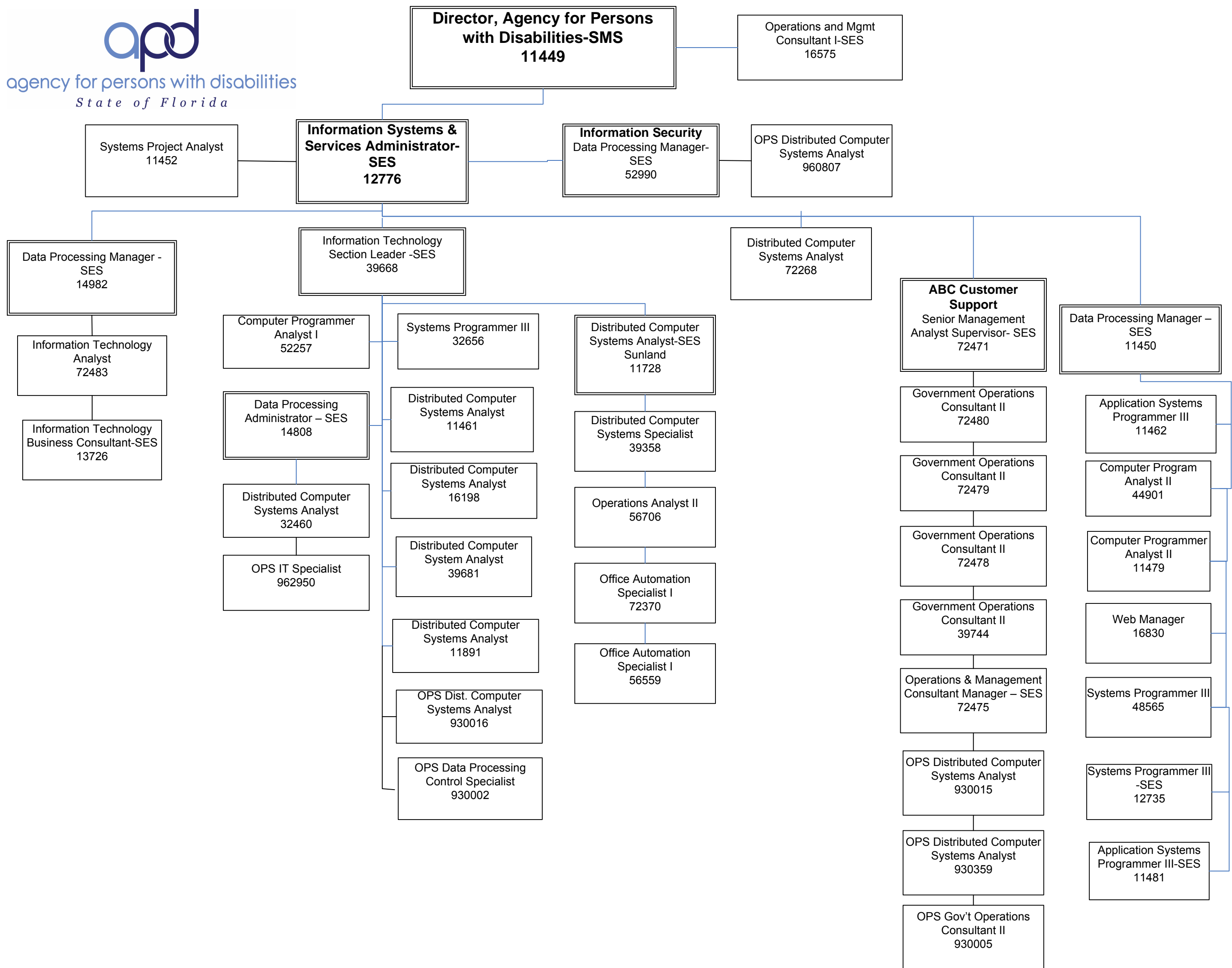
<b>Agency:</b>	<b>Agency For Persons With Disabilities</b>		
<b>Contact Person:</b>	Kurt Ahrendt	<b>Phone Number:</b>	850-414-0139
<b>Names of the Case: (If no case name, list the names of the plaintiff and defendant.)</b>	Theodore Cook v. APD		
<b>Court with Jurisdiction:</b>	Leon County Circuit Court		
<b>Case Number:</b>	13-CA-2423		
<b>Summary of the Complaint:</b>	(Theodore Cook) Plaintiff worked for his son in the CDC+ Program and was terminated because he failed to complete his level 2 background screening. Plaintiff has made complaints to the Governor's Office, IG, FCHR and all were unfounded. Plaintiff is claiming Whistle-Blower Retaliation.		
<b>Amount of the Claim:</b>	Action in excess of \$15,000.00		
<b>Specific Statutes or Laws (including GAA) Challenged:</b>	N/A-No statutes or laws were challenged.		
<b>Status of the Case:</b>	Complaint received 9-18-13. Stipulation of Dismissal with Prejudice filed on February 4, 2014, and Order Dismissing case with prejudice entered on May 13, 2014. Case closed.		
<b>Who is representing (of record) the state in this lawsuit? Check all that apply.</b>	<input type="checkbox"/>	Agency Counsel	
	<input checked="" type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input type="checkbox"/>	Outside Contract Counsel	
<b>If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).</b>	N/A-This is not a class action lawsuit.		



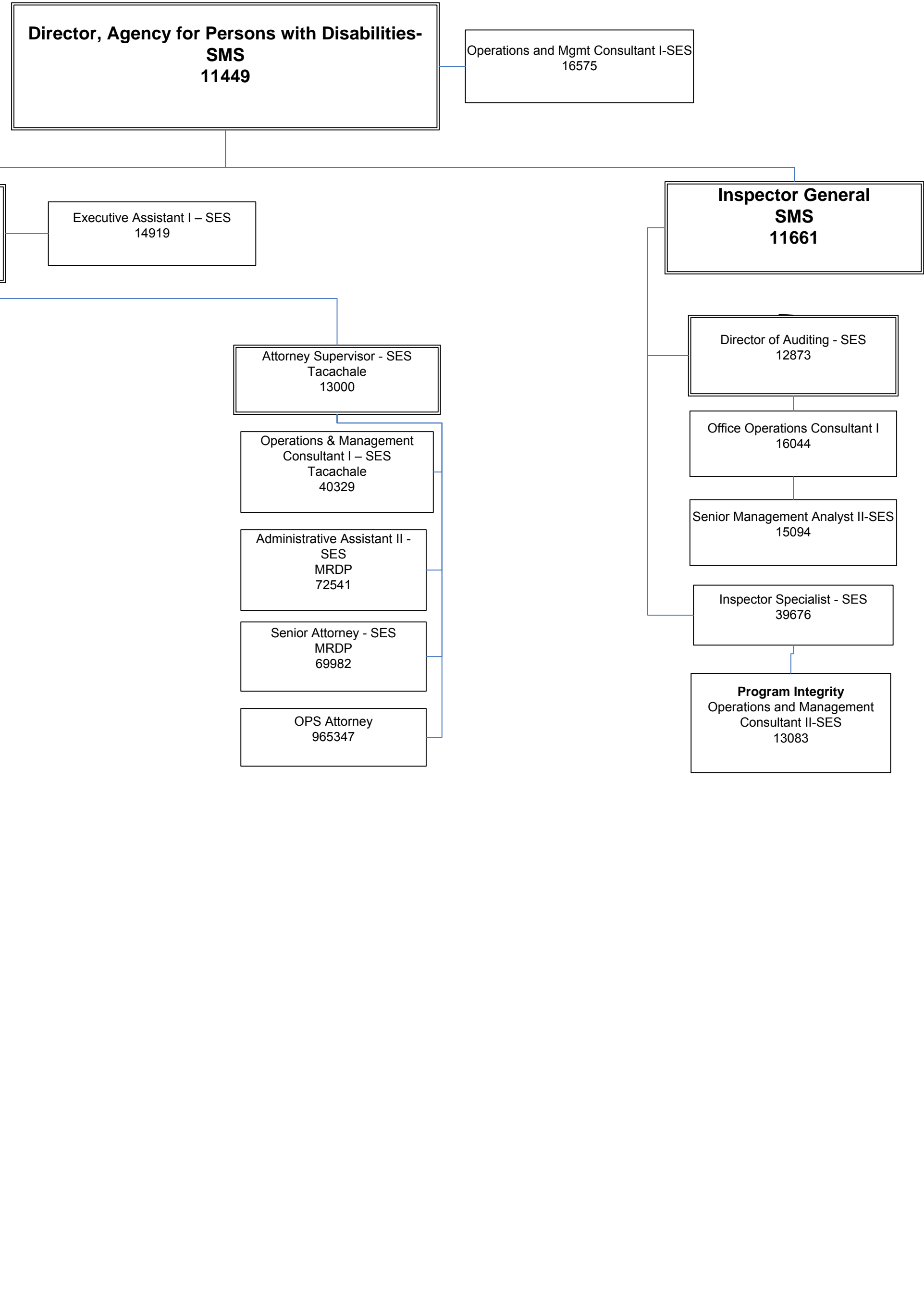


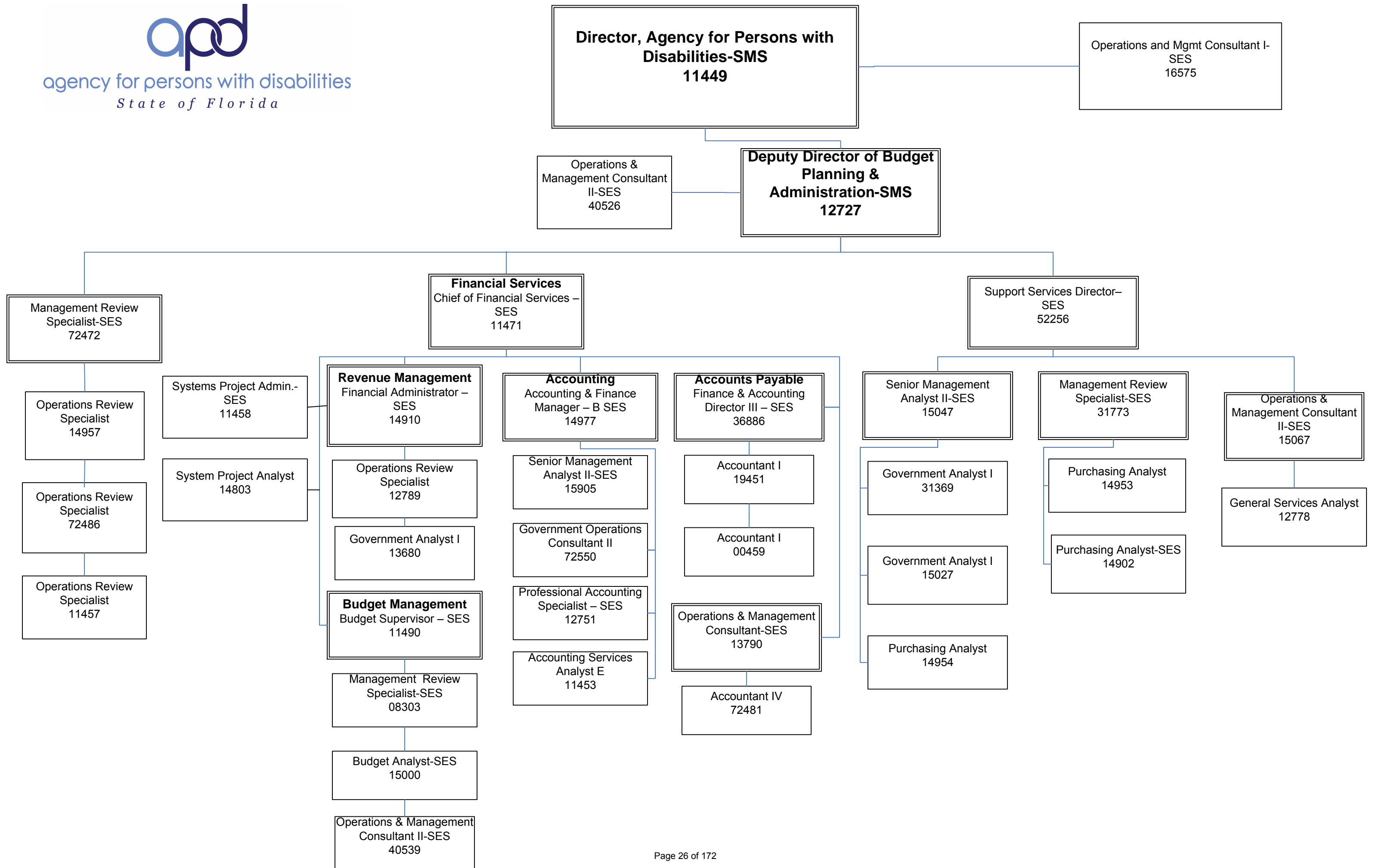










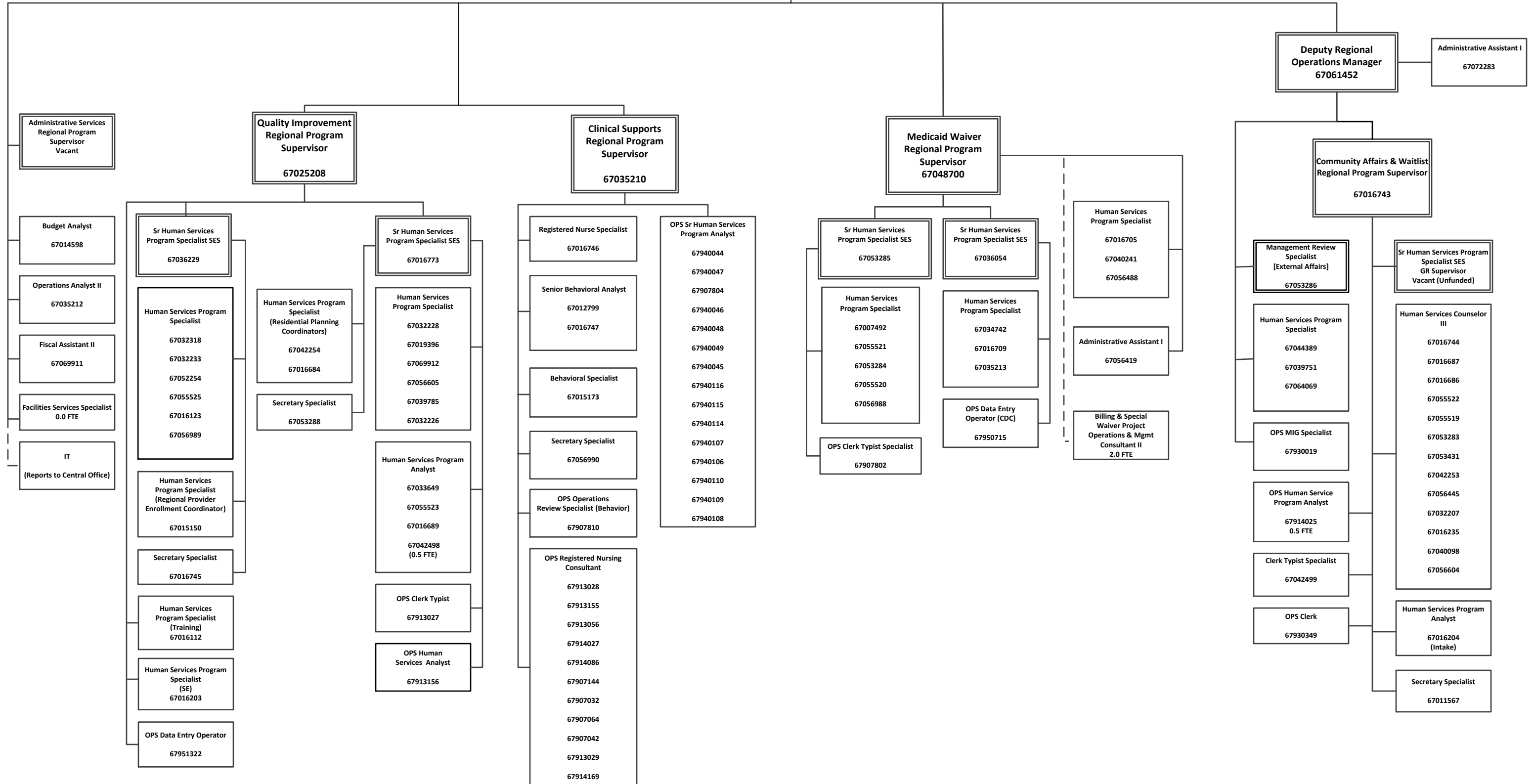


**AGENCY FOR PERSONS WITH DISABILITIES  
CENTRAL REGION  
7/01/2014**

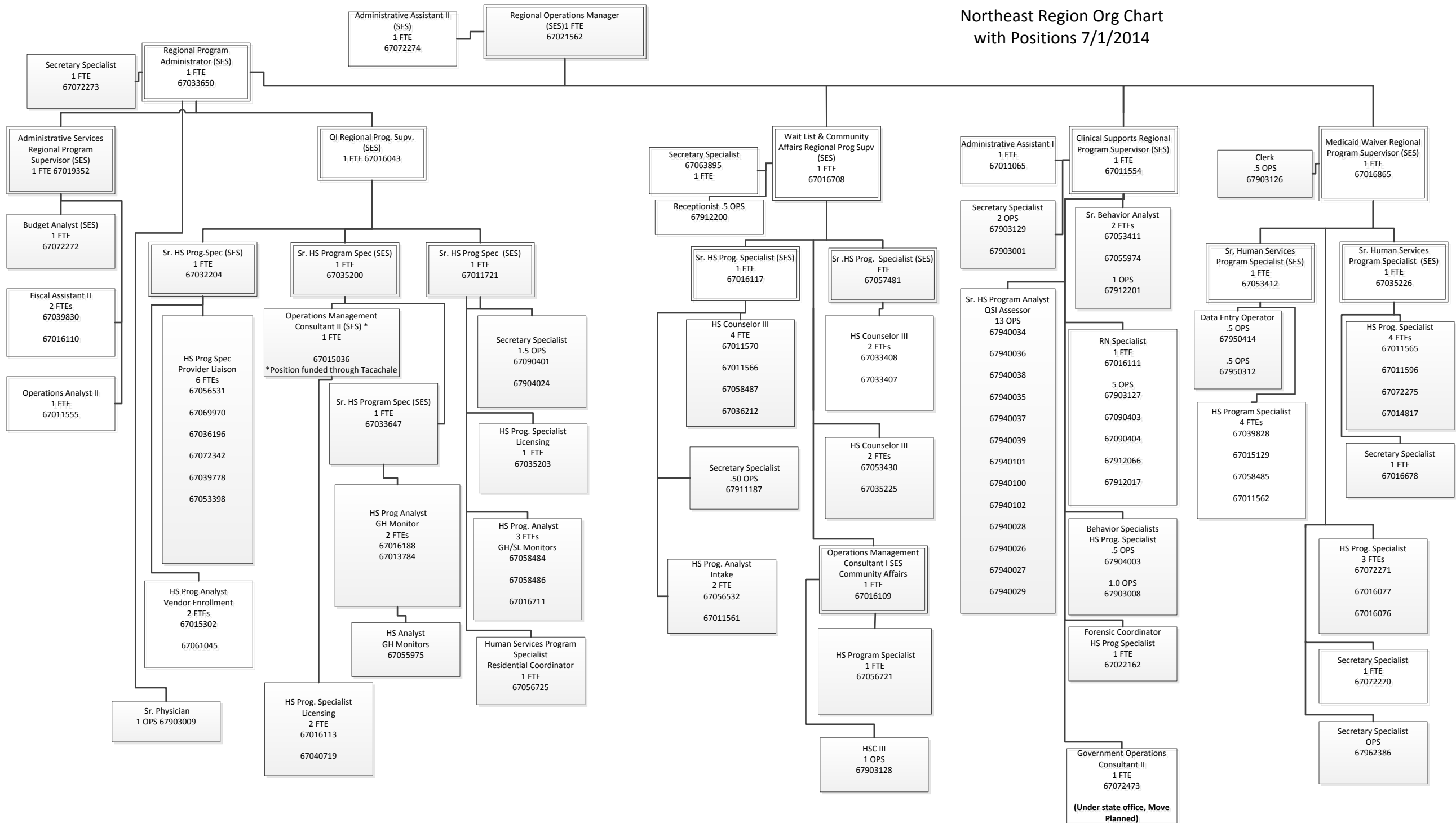
Administrative Assistant II  
67072277

**Regional Operations  
Manager  
67021243**

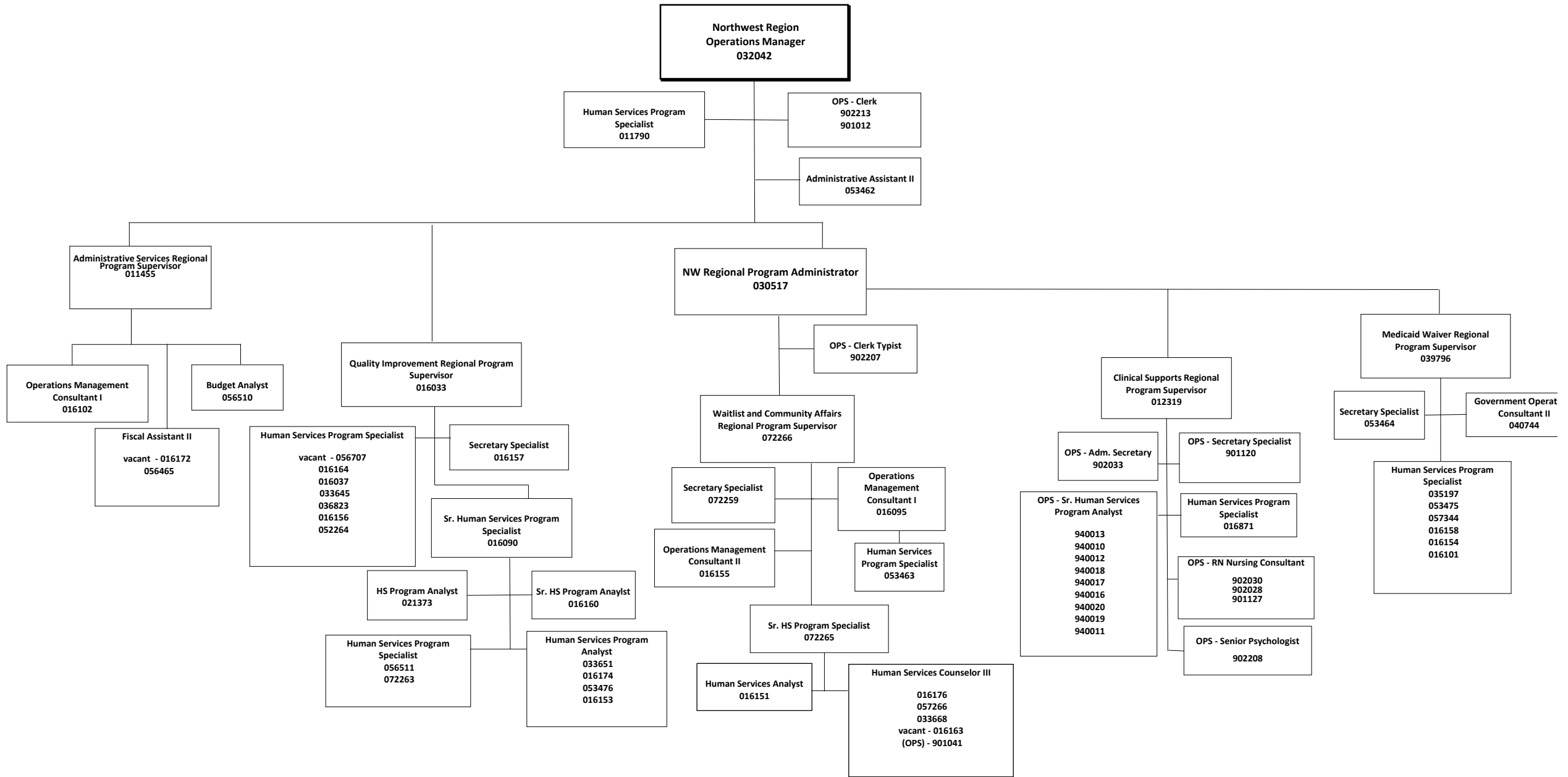
Senior Attorney  
670xxxxx  
Reports to Central Office



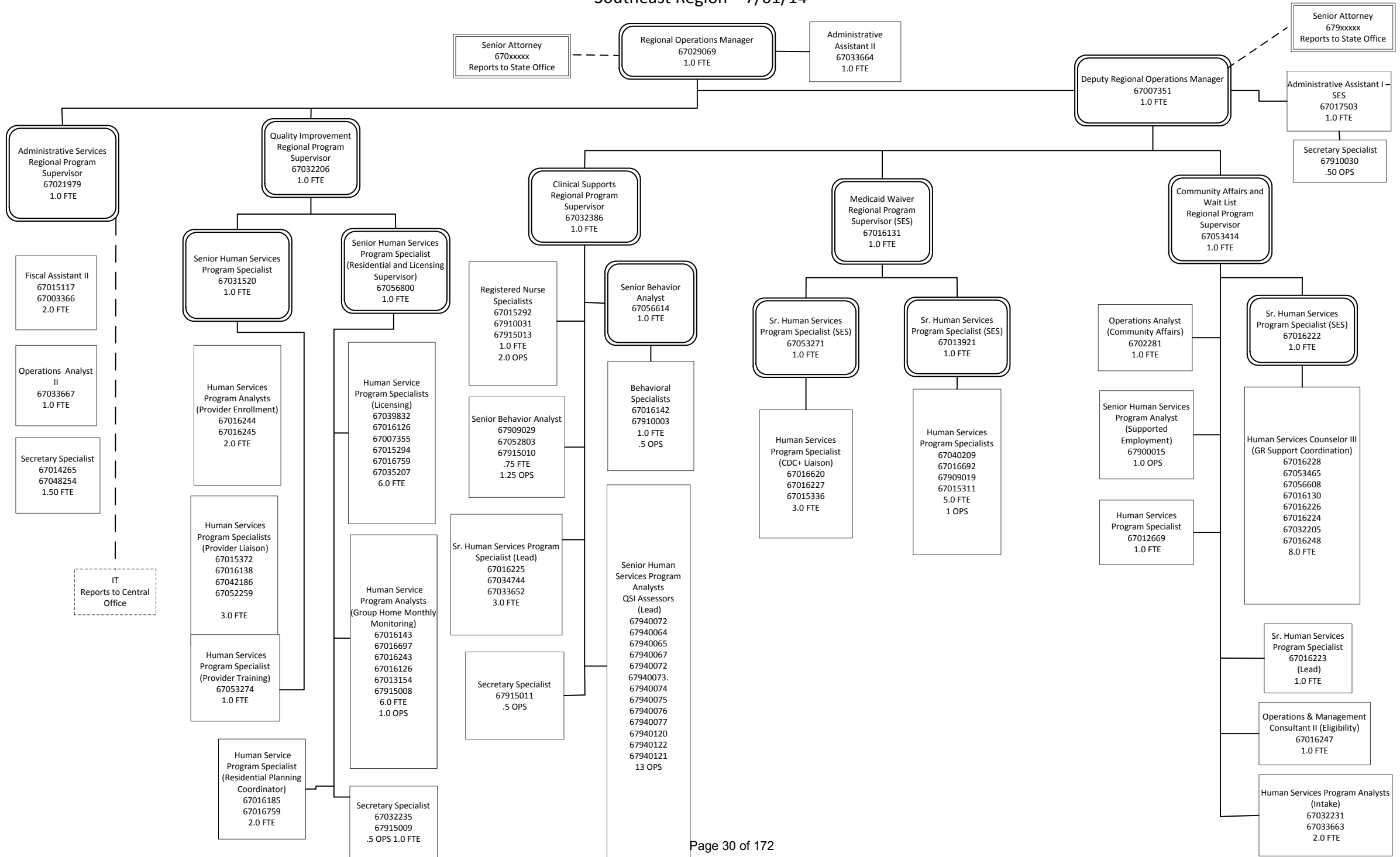
# Northeast Region Org Chart with Positions 7/1/2014



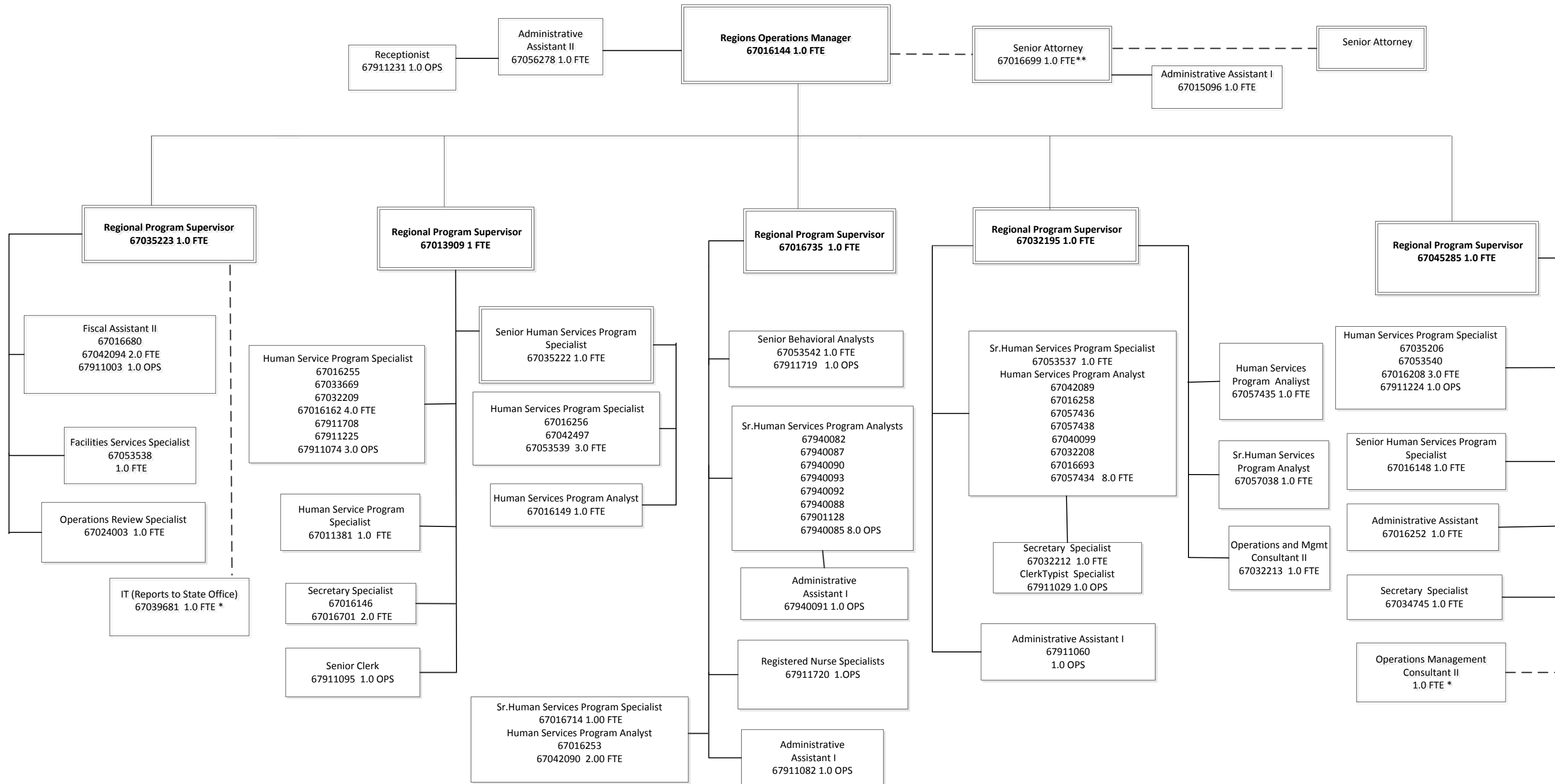
# Northwest Region JULY 1, 2014



Agency for Persons with Disabilities  
Southeast Region – 7/01/14

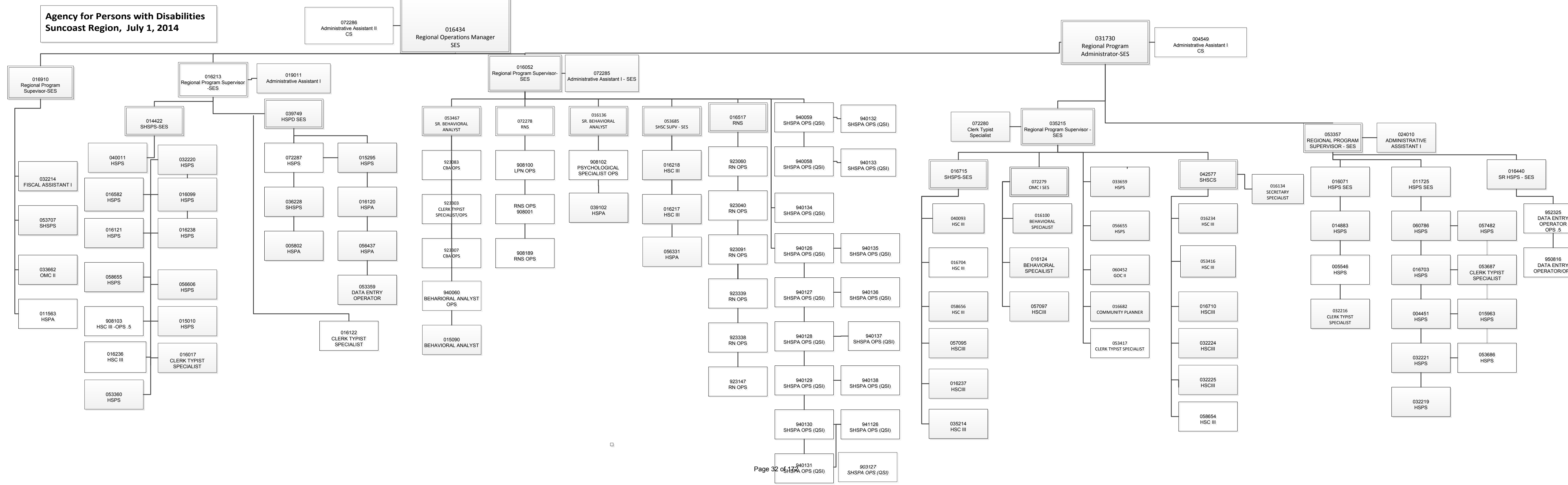


# Southern Region 07/01/2014



\*\* Funded by SR and report to SO

**Agency for Persons with Disabilities  
Suncoast Region, July 1, 2014**







**Schedule XIV  
Variance from Long Range Financial Outlook**

Agency: Agency for Persons with Disabilities Contact: David Dobbs

Article III, Section 19(a)3, Florida Constitution, requires each agency Legislative Budget Request to be based upon and reflect the long range financial outlook adopted by the Joint Legislative Budget Commission or to explain any variance from the outlook.

- 1) Does the long range financial outlook adopted by the Joint Legislative Budget Commission in September 2014 contain revenue or expenditure estimates related to your agency?

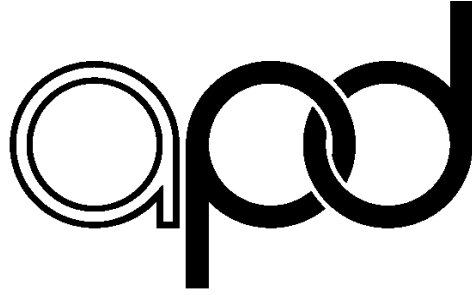
Yes  No

- 2) If yes, please list the estimates for revenues and budget drivers that reflect an estimate for your agency for Fiscal Year 2015-2016 and list the amount projected in the long range financial outlook and the amounts projected in your Schedule I or budget request.

	Issue (Revenue or Budget Driver)	R/B*	FY 2015-2016 Estimate/Request Amount	
			Long Range Financial Outlook	Legislative Budget Request
a				
b				
c				
d				
e				
f				

- 3) If your agency's Legislative Budget Request does not conform to the long range financial outlook with respect to the revenue estimates (from your Schedule I) or budget drivers, please explain the variance(s) below.

\* R/B = Revenue or Budget Driver



agency for persons with disabilities  
*State of Florida*

**Legislative Budget Request  
Fiscal Year 2015-16**

**Home and Community Services  
67100100**

**Budget Entity 67100100**

**Home and Community Services**

**Schedule I Series**



agency for persons with disabilities  
*State of Florida*

**Legislative Budget Request  
Fiscal Year 2015-16**

**Schedule I SERIES**

**Barbara Palmer  
Director**

# SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

**Budget Period: 2015 - 16**

<b>Department Title:</b>	Agency for Persons with Disabilities
<b>Trust Fund Title:</b>	Operations and Maintenance Trust Fund
<b>Budget Entity:</b>	67100100
<b>LAS/PBS Fund Number:</b>	2516

	Balance as of 6/30/2014		SWFS* Adjustments	Adjusted Balance
<b>Chief Financial Officer's (CFO) Cash Balance</b>	1,987,973.93	(A)		1,987,973.93
ADD: Other Cash (See Instructions)		(B)		0.00
ADD: Investments		(C)		0.00
ADD: Outstanding Accounts Receivable	2,525,000.00	(D)		2,525,000.00
ADD: _____		(E)		0.00
<b>Total Cash plus Accounts Receivable</b>	<b>4,512,973.93</b>	(F)	<b>0.00</b>	<b>4,512,973.93</b>
LESS Allowances for Uncollectibles		(G)		0.00
LESS Approved "A" Certified Forwards	318,195.81	(H)		318,195.81
Approved "B" Certified Forwards		(H)		0.00
Approved "FCO" Certified Forwards		(H)		0.00
LESS: Other Accounts Payable (Nonoperating)		(I)		0.00
LESS: _____		(J)		0.00
<b>Unreserved Fund Balance, 07/01/2014</b>	<b>4,194,778.12</b>	(K)	<b>0.00</b>	<b>4,194,778.12</b> **

**Notes:**

\*SWFS = Statewide Financial Statement

\*\* This amount should agree with Line I, Section IV of the Schedule I for the most recent completed fiscal year and Line A for the following year.

**RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC**

**Budget Period: 2015 - 2016**

**Department Title:** Agency for Persons with Disabilities  
**Trust Fund Title:** Operations & Maintenance Trust Fund  
**Budget Entity:** 67100100  
**LAS/PBS Fund Number:** 2516

**BEGINNING TRIAL BALANCE:**

**Total Fund Balance Per FLAIR Trial Balance, 07/01/14**

Total all GLC's 5XXXX for governmental funds; 1,576,086.10 (A)  
 GLC 539XX for proprietary and fiduciary funds

**Subtract Nonspendable Fund Balance (GLC 56XXX)** 0.00 (B)

**Add/Subtract Statewide Financial Statement (SWFS) Adjustments :**

SWFS Adjustment # B6700002 Pooled Investments - Client Funds 0.00 (C)

F/S Adjustments to Correct A/P - GLC31100 and GLC32100 0.00 (C)

Post SWFS Adjustment# GL16400 - Correction to BE 2,525,000.00 (C)

SWFS Adjustment # and Description 0.00 (C)

**Add/Subtract Other Adjustment(s):**

Approved "B" Carry Forward (Encumbrances) per LAS/PBS 0.00 (D)

Approved FCO Certified Forward per LAS/PBS 0.00 (D)

A/P not C/F-Non-Operating Categories 0.00 (D)

Compensated Absences 93,692.02 (D)

(D)

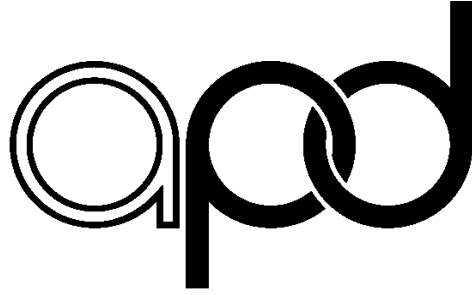
(D)

**ADJUSTED BEGINNING TRIAL BALANCE:** 4,194,778.12 (E)

**UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)** 4,194,778.12 (F)

**DIFFERENCE:** 0.00 (G)\*

**\*SHOULD EQUAL ZERO.**



agency for persons with disabilities  
*State of Florida*

**Legislative Budget Request  
Fiscal Year 2015-16**

**Program Management and Compliance**

**67100200**



**Budget Entity 67100200**

**Program Management and Compliance**

**Schedule I Series**

## SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

<b>Department Title:</b>	<b>Budget Period: 2015 - 16</b>
<b>Trust Fund Title:</b>	Agency for Persons with Disabilities
<b>Budget Entity:</b>	Administrative Trust Fund
<b>LAS/PBS Fund Number:</b>	67100200
	2021

	Balance as of 6/30/2014		SWFS* Adjustments	Adjusted Balance
<b>Chief Financial Officer's (CFO) Cash Balance</b>	288,294.74	(A)		288,294.74
ADD: Other Cash (See Instructions)		(B)		0.00
ADD: Investments		(C)		0.00
ADD: Outstanding Accounts Receivable		(D)		0.00
ADD: _____		(E)		0.00
<b>Total Cash plus Accounts Receivable</b>	<b>288,294.74</b>	(F)	<b>0.00</b>	<b>288,294.74</b>
LESS Allowances for Uncollectibles		(G)		0.00
LESS Approved "A" Certified Forwards	21.29	(H)		21.29
Approved "B" Certified Forwards		(H)		0.00
Approved "FCO" Certified Forwards		(H)		0.00
LESS: Other Accounts Payable (Nonoperating)		(I)		0.00
LESS: _____		(J)		0.00
<b>Unreserved Fund Balance, 07/01/2014</b>	<b>288,273.45</b>	(K)	<b>0.00</b>	<b>288,273.45</b> **

**Notes:**

\*SWFS = Statewide Financial Statement

\*\* This amount should agree with Line I, Section IV of the Schedule I for the most recent completed fiscal year and Line A for the following year.

## SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

<b>Department Title:</b>	<b>Budget Period: 2015 - 16</b>
<b>Trust Fund Title:</b>	Agency for Persons with Disabilities
<b>Budget Entity:</b>	Federal Grants Trust Fund
<b>LAS/PBS Fund Number:</b>	67100200
	2261

	Balance as of 6/30/2014		SWFS* Adjustments	Adjusted Balance
<b>Chief Financial Officer's (CFO) Cash Balance</b>	105,853.43	(A)		105,853.43
ADD: Other Cash (See Instructions)		(B)		0.00
ADD: Investments		(C)		0.00
ADD: Outstanding Accounts Receivable		(D)		0.00
ADD: _____		(E)		0.00
<b>Total Cash plus Accounts Receivable</b>	<b>105,853.43</b>	(F)	<b>0.00</b>	<b>105,853.43</b>
LESS Allowances for Uncollectibles		(G)		0.00
LESS Approved "A" Certified Forwards		(H)		0.00
Approved "B" Certified Forwards		(H)		0.00
Approved "FCO" Certified Forwards		(H)		0.00
LESS: Other Accounts Payable (Nonoperating)		(I)		0.00
LESS: _____		(J)		0.00
<b>Unreserved Fund Balance, 07/01/2014</b>	<b>105,853.43</b>	(K)	<b>0.00</b>	<b>105,853.43</b> **

**Notes:**

\*SWFS = Statewide Financial Statement

\*\* This amount should agree with Line I, Section IV of the Schedule I for the most recent completed fiscal year and Line A for the following year.

## SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

**Budget Period: 2015 - 16**

<b>Department Title:</b>	Agency for Persons with Disabilities
<b>Trust Fund Title:</b>	Operations and Maintenance Trust Fund
<b>Budget Entity:</b>	67100200
<b>LAS/PBS Fund Number:</b>	2516

	Balance as of 6/30/2014		SWFS* Adjustments	Adjusted Balance
<b>Chief Financial Officer's (CFO) Cash Balance</b>	2,376,695.91	(A)	0.00	2,376,695.91
ADD: Other Cash (See Instructions)		(B)	0.00	0.00
ADD: Investments		(C)	0.00	0.00
ADD: Outstanding Accounts Receivable	2,117,859.25	(D)	0.00	2,117,859.25
ADD: _____		(E)	0.00	0.00
<b>Total Cash plus Accounts Receivable</b>	<b>4,494,555.16</b>	(F)	<b>0.00</b>	<b>4,494,555.16</b>
LESS Allowances for Uncollectibles		(G)	0.00	0.00
LESS Approved "A" Certified Forwards	725,710.11	(H)	0.00	725,710.11
Approved "B" Certified Forwards		(H)	0.00	0.00
Approved "FCO" Certified Forwards		(H)	0.00	0.00
LESS: SWCAP & GR Accounts Payable (Nonoperat	87,768.00	(I)	0.00	87,768.00
LESS: _____		(J)	0.00	0.00
<b>Unreserved Fund Balance, 07/01/2014</b>	<b>3,681,077.05</b>	(K)	<b>0.00</b>	<b>3,681,077.05</b> **

**Notes:**

\*SWFS = Statewide Financial Statement

\*\* This amount should agree with Line I, Section IV of the Schedule I for the most recent completed fiscal year and Line A for the following year.

*Office of Policy and Budget - July 2014*

**RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC**

**Budget Period: 2015 - 2016**

**Department Title:** Agency for Persons with Disabilities  
**Trust Fund Title:** Administrative Trust Fund  
**Budget Entity:** 67100200  
**LAS/PBS Fund Number:** 2021

**BEGINNING TRIAL BALANCE:**

**Total Fund Balance Per FLAIR Trial Balance, 07/01/14**  
 Total all GLC's 5XXXX for governmental funds; 288,273.45 (A)  
 GLC 539XX for proprietary and fiduciary funds

**Subtract Nonspendable Fund Balance (GLC 56XXX)** (B)

**Add/Subtract Statewide Financial Statement (SWFS) Adjustments :**

SWFS Adjustment # and Description (C)

SWFS Adjustment # and Description (C)

**Add/Subtract Other Adjustment(s):**

Approved "B" Carry Forward (Encumbrances) per LAS/PBS (D)

Approved FCO Certified Forward per LAS/PBS (D)

A/P not C/F-Operating Categories (D)

(D)

(D)

(D)

**ADJUSTED BEGINNING TRIAL BALANCE:** 288,273.45 (E)

**UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)** 288,273.45 (F)

**DIFFERENCE:** 0.00 (G)\*

**\*SHOULD EQUAL ZERO.**

**RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC**

**Budget Period: 2015 - 2016**

**Department Title:** Agency for Persons with Disabilities  
**Trust Fund Title:** Federal Grants Trust Fund  
**Budget Entity:** 67100200  
**LAS/PBS Fund Number:** 2261

**BEGINNING TRIAL BALANCE:**

**Total Fund Balance Per FLAIR Trial Balance, 07/01/14**  
 Total all GLC's 5XXXX for governmental funds; **105,853.43** (A)  
 GLC 539XX for proprietary and fiduciary funds

**Subtract Nonspendable Fund Balance (GLC 56XXX)** **0.00** (B)

**Add/Subtract Statewide Financial Statement (SWFS) Adjustments :**

SWFS Adjustment # and Description **0.00** (C)

SWFS Adjustment # and Description **0.00** (C)

**Add/Subtract Other Adjustment(s):**

Approved "B" Carry Forward (Encumbrances) per LAS/PBS **0.00** (D)

Approved FCO Certified Forward per LAS/PBS **0.00** (D)

A/P not C/F-Operating Categories **0.00** (D)

**0.00** (D)

**0.00** (D)

**0.00** (D)

**ADJUSTED BEGINNING TRIAL BALANCE:** **105,853.43** (E)

**UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)** **105,853.43** (F)

**DIFFERENCE:** **0.00** (G)\*

**\*SHOULD EQUAL ZERO.**

**RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC**

	<b>Budget Period: 2015 - 2016</b>
<b>Department Title:</b>	Agency for Persons with Disabilities
<b>Trust Fund Title:</b>	Operations & Maintenance Trust Fund
<b>Budget Entity:</b>	67100200
<b>LAS/PBS Fund Number:</b>	2516

**BEGINNING TRIAL BALANCE:**

<b>Total Fund Balance Per FLAIR Trial Balance, 07/01/14</b>	
Total all GLC's 5XXXX for governmental funds;	1,563,217.80 (A)
GLC 539XX for proprietary and fiduciary funds	

<b>Subtract Nonspendable Fund Balance (GLC 56XXX)</b>	0.00 (B)
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**Add/Subtract Statewide Financial Statement (SWFS) Adjustments :**

SWFS Adjustment # B6700002 Pooled Investments - Client Funds	0.00 (C)
--	----------

Post SWFS Adjustment# GL16400 - Correction to BE	2,117,859.25 (C)
--	------------------

F/S Adjustments to Correct A/P - GLC31100 and GLC32100	0.00 (C)
--	----------

SWFS Adjustment # and Description	0.00 (C)
-----------------------------------	----------

SWFS Adjustment # and Description	0.00 (C)
-----------------------------------	----------

**Add/Subtract Other Adjustment(s):**

Approved "B" Carry Forward (Encumbrances) per LAS/PBS	0.00 (D)
---	----------

Approved FCO Certified Forward per LAS/PBS	0.00 (D)
--	----------

A/P not C/F-Non-Operating Categories	0.00 (D)
--------------------------------------	----------

Compensated Absences	0.00 (D)
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	(D)
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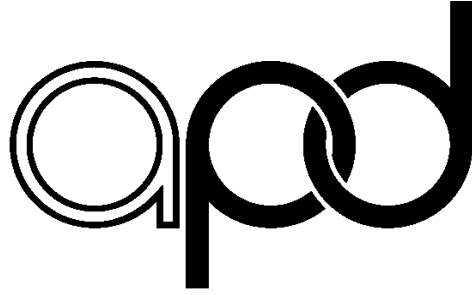
	(D)
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<b>ADJUSTED BEGINNING TRIAL BALANCE:</b>	<b>3,681,077.05 (E)</b>
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<b>UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)</b>	<b>3,681,077.05 (F)</b>
--	-------------------------

<b>DIFFERENCE:</b>	<b>0.00 (G)*</b>
--------------------	------------------

**\*SHOULD EQUAL ZERO.**



agency for persons with disabilities  
*State of Florida*

**Legislative Budget Request  
Fiscal Year 2015-16**

**Developmental Disabilities Public Facilities  
67100300**



**Budget Entity 67100300**

**Developmental Disabilities Public Facilities**

**Schedule I Series**

**SCHEDULE 1A: DETAIL OF FEES AND RELATED PROGRAM COSTS**

**Department:** 67-Agency for Persons with Disabilities  
**Program:** 67100300 - DDPF - PC 1303000000  
**Fund:** 2516

**Budget Period: 2015-16**

**Specific Authority:** Chapter 393, Florida Statutes  
**Purpose of Fees Collected:** Client Services and Care at Developmental Disabilities Institutions

Type of Fee or Program: (Check **ONE** Box and answer questions as indicated.)

<input type="checkbox"/>	Regulatory services or oversight to businesses or professions. (Complete Sections I, II, and III and attach <b>Examination of Regulatory Fees Form - Part I and II.</b> )
<input checked="" type="checkbox"/>	Non-regulatory fees authorized to cover full cost of conducting a specific program or service. (Complete Sections I, II, and III only.)

**SECTION I - FEE COLLECTION**

	<b>ACTUAL</b>	<b>ESTIMATED</b>	<b>REQUEST</b>
	<b>FY 2013 - 14</b>	<b>FY 2014 - 15</b>	<b>FY 2015 - 16</b>
<u>Receipts:</u>			
Reimbursement of Client Custodial Care	5,128,296	4,998,125	4,873,175
AHCA Transfers for Client Care	47,153,199	46,981,224	45,829,500
<b>Total Fee Collection to Line (A) - Section III</b>	<b>52,281,495</b>	<b>51,979,349</b>	<b>50,702,675</b>

**SECTION II - FULL COSTS**

<u>Direct Costs:</u>			
Salaries and Benefits	42,837,100	48,521,381	42,581,381
Other Personal Services	836,774	1,025,063	850,063
Expenses	3,676,791	3,522,273	3,522,273
Operating Capital Outlay	96,323	97,783	97,783
Food Products	1,262,170	1,280,750	1,280,750
Contracted Services	871,213	884,116	906,916
G/A - Contracted Professional Services	1,990,011	3,092,526	2,107,526
Risk Management Insurance	2,528,063	2,391,432	2,391,432
TR/DMS/HR SVCS/STW Contract	416,085	420,497	420,497
Indirect Costs Charged to Trust Fund			
<b>Total Full Costs to Line (B) - Section III</b>	<b>54,514,530</b>	<b>61,235,821</b>	<b>54,158,621</b>

Basis Used: Full accrual was used for revenues and costs. This is consistent with the Agency's financial reporting.

**SECTION III - SUMMARY**

TOTAL SECTION I	(A)	52,281,495	51,979,349	50,702,675
TOTAL SECTION II	(B)	54,514,530	61,235,821	54,158,621
<b>TOTAL - Surplus/Deficit</b>	(C)	<b>(2,233,035)</b>	<b>(9,256,472)</b>	<b>(3,455,946)</b>

**EXPLANATION of LINE C:**

The 2013-14 deficit was covered with existing cash balances. The deficit for FY 2014-15 has been addressed by placing unfunded budget in reserve so expenditures will not exceed revenues. An issue has been submitted in the LBR for a fund shift from OMTF to GR to assist with providing client services required by law. Any Page 50 of 102 deficit will be addressed by placing unfunded budget in reserve.

## SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

<b>Department Title:</b>	Agency for Persons with Disabilities
<b>Trust Fund Title:</b>	Operations and Maintenance Trust Fund
<b>Budget Entity:</b>	67100300
<b>LAS/PBS Fund Number:</b>	2516

**Budget Period: 2015 - 16**

	Balance as of 6/30/2014	(A)	SWFS* Adjustments	(B)	Adjusted Balance
<b>Chief Financial Officer's (CFO) Cash Balance</b>	3,529,244.85	(A)			3,529,244.85
ADD: Other Cash (See Instructions)		(B)			0.00
ADD: Investments - B6700002	2,882,854.14	(C)	(2,882,854.14)		0.00
ADD: Outstanding Accounts Receivable	4,215,761.49	(D)	0.00		4,215,761.49
ADD: Post Closing SWFS - Outstanding A/R	0.00	(D)	27,440.48		27,440.48
ADD: F/S Adjustment to Correct A/R GLC 16300	0.00	(D)	229.06		229.06
ADD: GLC 12400-Receipts Not Verified at Treas	2,301.72	(E)	0.00		2,301.72
<b>Total Cash plus Accounts Receivable</b>	<b>10,630,162.20</b>	(F)	<b>(2,855,184.60)</b>		<b>7,774,977.60</b>
LESS Allowances for Uncollectibles		(G)			0.00
LESS Approved "A" Certified Forwards	2,113,686.55	(H)			2,113,686.55
Approved "B" Certified Forwards		(H)			0.00
Approved "FCO" Certified Forwards	84,046.04	(H)			84,046.04
LESS: Other Accounts Payable (Nonoperating)		(I)			0.00
LESS: _____		(J)			0.00
<b>Unreserved Fund Balance, 07/01/2014</b>	<b>8,432,429.61</b>	(K)	<b>(2,855,184.60)</b>		<b>5,577,245.01</b> **

**Notes:**

\*SWFS = Statewide Financial Statement

\*\* This amount should agree with Line I, Section IV of the Schedule I for the most recent completed fiscal year and Line A for the following year.

**RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC**

	<b>Budget Period: 2015 - 2016</b>
<b>Department Title:</b>	Agency for Persons with Disabilities
<b>Trust Fund Title:</b>	Operations & Maintenance Trust Fund
<b>Budget Entity:</b>	67100300
<b>LAS/PBS Fund Number:</b>	2516

**BEGINNING TRIAL BALANCE:**

<b>Total Fund Balance Per FLAIR Trial Balance, 07/01/14</b>	
Total all GLC's 5XXXX for governmental funds;	13,168,870.62 (A)
GLC 539XX for proprietary and fiduciary funds	

<b>Subtract Nonspendable Fund Balance (GLC 56XXX)</b>	0.00 (B)
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**Add/Subtract Statewide Financial Statement (SWFS) Adjustments :**

SWFS Adjustment # B6700002 Pooled Investments - Client Funds	(2,882,854.14) (C)
--	--------------------

Post SWFS Adjustment# GL16400 - Correction to BE	(4,642,859.25) (C)
--	--------------------

F/S Adj for CF Items in - GLC31100 and GLC32100	(9,535.75) (C)
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Post SWFS Adj - Accounts Receivable GLC 15100 Category 00010	27,440.48 (C)
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Post SWFS Adj - Accounts Receivable GLC 16300 Category 04000	229.06 (C)
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**Add/Subtract Other Adjustment(s):**

Approved "B" Carry Forward (Encumbrances) per LAS/PBS	0.00 (D)
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Approved FCO Certified Forward per LAS/PBS	(84,046.04) (D)
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A/P not C/F-Non-Operating Categories	0.00 (D)
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Compensated Absences	0.00 (D)
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Rounding	0.03 (D)
----------	----------

	(D)
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<b>ADJUSTED BEGINNING TRIAL BALANCE:</b>	5,577,245.01 (E)
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<b>UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)</b>	5,577,245.01 (F)
--	------------------

<b>DIFFERENCE:</b>	0.00 (G)*
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**\*SHOULD EQUAL ZERO.**

COL A93			
SCH VIIIIB-2			
REDUCTIONS			
POS	AMOUNT		CODES
AGENCY/PERSONS WITH DISABL			67000000
PGM: SVCS TO DISABLED			67100000
<u>HOME &amp; COMMUNITY SERVICES</u>			67100100
HEALTH AND HUMAN SERVICES			13
<u>LONG-TERM CARE</u>			<u>1303.00.00.00</u>
PROGRAM REDUCTIONS			33V0000
HOME AND COMMUNITY BASED SERVICES			
WAIVER REDUCTIONS			33V0800
SPECIAL CATEGORIES			100000
HOME/COMM SERVICES WAIVER			101555
GENERAL REVENUE FUND	-MATCH	23,945,055-	1000 2
		=====	

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AGENCY ISSUE NARRATIVE:

SCH VIIIIB-2 NARR 15-16 NARRATIVE:

IT COMPONENT? NO

PRIORITY #3

How the reduction is specifically projected to impact clients, agency operations, other program areas etc.:

This issue reduces \$23,945,055 of General Revenue in the Home and Community-Based Services Waiver category (101555). A reduction of \$23,945,055 in General Revenue will cause the state to forfeit federal matching funds of 59.72% or \$35,501,457 that creates a total reduction of \$59,446,512. This category provides the vast majority of service funding for the Agency for Persons with Disabilities' clients. It is likely that some individuals will have quite dramatic service reductions as the essential health and safety services are given funding priority. All services could be negatively impacted including provider rate reductions, employment and training, residential supports, support coordination, therapies, respite, companion, in-home supports, supportive living, durable and consumable medical equipment, behavioral supports and waiver funded medical services, and reducing accounts for consumer directed care (CDC+) enrollees. The agency expects that reductions in services could force some individuals to seek institutional care. Not only will this affect current clients in the Waivers, it will also jeopardize the ability of some of the approximately 20,800 clients on the waiting list from being enrolled.

Why the agency assigned the priority number for each reduction issue:

The agency assigned this issue as Priority #3 because a reduction of \$23,945,055 and the associated loss of federal match within the Home and Community-Based Services Waiver category would have a severe impact on the lives of thousands of current clients and those on the waiting list.

The methodology used to develop the reduction issue (for example, if an agency includes a \$1 million reduction in Contracted Services in the Schedule VIIIIB-2 submission, explain how the \$1 million amount was calculated):

Since the Home and Community-Based Waivers represent over 79 percent of the agency's recurring General Revenue budget, it was impossible to meet the reduction target without reductions to this category. The agency is already short of General Revenue authority in other categories needed to administer the program.

COL A93		
SCH VIIIIB-2		
REDUCTIONS		
POS	AMOUNT	CODES
AGENCY/PERSONS WITH DISABL		67000000
PGM: SVCS TO DISABLED		67100000
<u>HOME &amp; COMMUNITY SERVICES</u>		67100100
HEALTH AND HUMAN SERVICES		13
<u>LONG-TERM CARE</u>		<u>1303.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
HOME AND COMMUNITY BASED SERVICES		
WAIVER REDUCTIONS		33V0800

Any specific statutory change needed to implement the reduction, including the specific statute(s) cites: Not applicable.

Any methodology used to distribute the reduction to other entities such as school districts, county health departments, community based care organizations, etc. and the projected impacts to those entities: Not applicable.

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INDIVIDUAL AND FAMILY SUPPORTS		33V2210
SPECIAL CATEGORIES		100000
G/A-INDIVIDUAL & FAMILY		100179
SOCIAL SVCS BLK GRT TF	-FEDERL 645,063-	2639 3
	=====	

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AGENCY ISSUE NARRATIVE:

SCH VIIIIB-2 NARR 15-16 NARRATIVE:

IT COMPONENT? NO

PRIORITY #2

How the reduction is specifically projected to impact clients, agency operations, other program areas etc.:

This issue reduces \$645,063 in the Home and Community Services budget entity in the Social Services Block Grant Trust Fund within the Grants and Aids - Individual and Family Supports category (100179). This category is used to support individuals not enrolled in the Medicaid Waiver program. Individuals have access to multiple services such as, but not limited to, supported living coaching, day training, therapy, supported employment, community inclusion, residential habilitation, transportation, respite care, behavior analysis services, parent education and training, evaluations, diagnostic testing, adaptive equipment, environmental modifications to residences, and temporary employment services. Typically only temporary, short-term, or one-time services are provided to clients who are not enrolled in a Home and Community-Based Services Waiver. However, some ongoing services are provided to individuals enrolled in the Medicaid Waiver programs to avoid crisis situations. This funding is only for services. A reduction in this funding would reduce or eliminate these services for some clients.

Why the agency assigned the priority number for each reduction issue:

The agency assigned this issue as Priority #2 since a reduction of \$645,063 in the Social Services Block Grant Trust Fund, within the Grants and Aids - Individual and Family Supports category, would have an adverse impact on the services provided to clients.

COL A93		
SCH VIIIIB-2		
REDUCTIONS		
POS	AMOUNT	CODES
AGENCY/PERSONS WITH DISABL		67000000
PGM: SVCS TO DISABLED		67100000
<u>HOME &amp; COMMUNITY SERVICES</u>		67100100
HEALTH AND HUMAN SERVICES		13
<u>LONG-TERM CARE</u>		<u>1303.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
INDIVIDUAL AND FAMILY SUPPORTS		33V2210

The methodology used to develop the reduction issue (for example, if an agency includes a \$1 million reduction in Contracted Services in the Schedule VIIIIB-2 submission, explain how the \$1 million amount was calculated):

The agency received Social Services Block Grant appropriations in 5 categories. The Individual and Family Supports category represents almost 94% percent of the agency's recurring budget in this fund. It would be difficult to meet the reduction target without presenting options that would result in reductions to this category.

Any specific statutory change needed to implement the reduction, including the specific statute(s) cites: Not applicable.

Any methodology used to distribute the reduction to other entities such as school districts, county health departments, community based care organizations, etc. and the projected impacts to those entities: Not applicable.

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TOTAL: LONG-TERM CARE		<u>1303.00.00.00</u>
BY FUND TYPE		
GENERAL REVENUE FUND	23,945,055-	1000
TRUST FUNDS	645,063-	2000
	-----	
TOTAL PROG COMP.....	24,590,118-	
	=====	

COL A93		
SCH VIIIIB-2		
REDUCTIONS		
POS	AMOUNT	CODES
-----		
AGENCY/PERSONS WITH DISABL		67000000
PGM: SVCS TO DISABLED		67100000
<u>PROGRAM MGT &amp; COMPLIANCE</u>		67100200
GOV OPERATIONS/SUPPORT		16
<u>EXEC LEADERSHIP/SUPPRT SVC</u>		<u>1602.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
REDUCTION IN ADMINISTRATION		33V8010
SPECIAL CATEGORIES		100000
HOME & COMM SERV ADMIN		106090
OPERATIONS AND MAINT TF	-FEDERL 131,145-	2516 3
	=====	

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AGENCY ISSUE NARRATIVE:

SCH VIIIIB-2 NARR 15-16 NARRATIVE:

IT COMPONENT? NO

PRIORITY #1

How the reduction is specifically projected to impact clients, agency operations, other program areas etc.:

This option reduces \$131,145 in the Program Management and Compliance budget entity (67100200) in the Operations and Maintenance Trust Fund in the Home and Community Services Administration (106090) category. Funding in this category is provided for Home and Community Services Administration costs that are associated with services to individuals with developmental disabilities as defined in Chapter 393, Florida Statutes.

Why the agency assigned the priority number for each reduction issue:

The agency assigned this issue as Priority #1 since a reduction of \$131,145 in the Operations and Maintenance Trust Fund, within the Home and Community Services Administration (106090) category, would have the least impact on direct services provided to clients.

The methodology used to develop the reduction issue (for example, if an agency includes a \$1 million reduction in Contracted Services in the Schedule VIIIIB-2 submission, explain how the \$1 million amount was calculated):

The Home and Community Services Administration category contains one of the largest appropriations of Operations and Maintenance Trust Fund. A reduction in this category should have a lesser impact on client services.

Any specific statutory change needed to implement the reduction, including the specific statute(s) cites: Not Applicable.

Any methodology used to distribute the reduction to other entities such as school districts, county health departments, community based care organizations, etc. and the projected impacts to those entities: Not applicable.

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COL A93		
SCH VIII B-2		
REDUCTIONS		
POS	AMOUNT	CODES
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AGENCY/PERSONS WITH DISABL		67000000
TOTAL: AGENCY/PERSONS WITH DISABL		67000000
BY FUND TYPE		
GENERAL REVENUE FUND	23,945,055-	1000
TRUST FUNDS	776,208-	2000
	-----	
TOTAL DEPARTMENT.....	24,721,263-	
	=====	

**SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS**

**Budget Period: 2014 - 2015**

**Department:** APD

**Chief Internal Auditor:** Beth Breier

**Budget Entity:** 67100100

**Phone Number:** 850-414-8334

(1)	(2)	(3)	(4)	(5)	(6)
REPORT NUMBER	PERIOD ENDING	UNIT/AREA	SUMMARY OF FINDINGS AND RECOMMENDATIONS	SUMMARY OF CORRECTIVE ACTION TAKEN	ISSUE CODE
AG 2014-056	2012-2013 FY	iBudget Florida	<p><b>Finding 1:</b> The Agency should take appropriate actions and establish procedures to ensure compliance with State law and promote the achievement of iBudget Florida objectives.</p> <p><b>Recommendation 1:</b> AG recommended the Agency continue its efforts to ensure that the iBudget Florida allocation methodology is consistent with the requirements of State law. In addition, to ensure that the objectives of iBudget Florida are achieved, the Agency should establish procedures to periodically evaluate the appropriateness of iBudget algorithm, Target Allocation calculation methodology, and reserve calculation process.</p>	<p>The Agency will follow the courts' direction as it relates to the settlement agreement. The Agency will also review and update our procedures as necessary as it relates to the iBudget algorithm, Target Allocation calculation methodology and the reserve calculation process. Action was pending the outcome of litigation (the outcome was decided on July 21, 2014).</p>	
			<p><b>Finding 2:</b> The Agency did not always ensure that clients' iBudget amounts were supported by adequate documentation evidencing that the amounts were calculated in accordance with Agency instructions.</p> <p><b>Recommendation 2:</b> AG recommended the Agency establish written policies and procedures that require the maintenance of documentation to support iBudget calculations and address the review of iBudget amounts by Agency staff prior to approval.</p>	<p>The Agency will continue to follow Rule 65G and review and update our procedures as necessary as it relates to the documentation required to determine a client's budget. Action was pending the outcome of litigation (the outcome was decided on July 21, 2014).</p>	
			<p><b>Finding 3:</b> Agency management had not established written procedures specifying the tools and processes to be used to monitor iBudget Florida expenditures and the available budget.</p> <p><b>Recommendation 3:</b> AG recommended the Agency establish written procedures specifying the tools and processes to be used to monitor the Agency's iBudget Florida expenditures and budget.</p>	<p>APD Budget and Planning implemented processes to monitor the Agency's actual cumulative expenditures on a weekly and monthly basis. During 2013-2014 fiscal year, management's strategies have been effective in monitoring the iBudget expenditures. During the next six months, Budget and Planning will document their newly implemented monitoring processes.</p>	

(1) REPORT NUMBER	(2) PERIOD ENDING	(3) UNIT/AREA	(4) SUMMARY OF FINDINGS AND RECOMMENDATIONS	(5) SUMMARY OF CORRECTIVE ACTION TAKEN	(6) ISSUE CODE
			<p><b>Finding 4:</b> The Agency did not always timely complete or properly document client eligibility determinations.</p> <p><b>Recommendation 4:</b> AG recommended the Agency ensure that client eligibility determinations are properly documented and supported by appropriate client eligibility documentation. Such documentation should be maintained in a central location to facilitate the Agency's verification of, and enhance management's assurances related to, client eligibility. We also recommend that the Agency ensure that annual evaluations of client eligibility are timely performed and documented on Eligibility Worksheets in accordance with Agency procedures.</p>	<p>APD received a memo from AHCA dated December 10, 2013 and provided the memo and a template to the Regions on January 10, 2014 for Regions to use to validate individuals with missing original eligibility determination and level of care. APD provided follow up instructions and a revised template to the Regions on March 24, 2014. APD issued a memo on May 12, 2014 to Regions to provide additional clarification regarding how WSCs are to address missing waiver eligibility/Level of Care documents.</p>	
			<p><b>Finding 5:</b> The Agency did not periodically reconcile the claims payment data recorded in the Agency's systems used to plan and manage client services to the claims payment data included in the Florida Medicaid Management Information System.</p> <p><b>Recommendation 5:</b> AG recommended the Agency continue its efforts to establish and implement procedures requiring the periodic reconciliation of the claims payment data recorded in the ABC, iBudget Florida, and FMMIS systems.</p>	<p>The Agency's financial office continues to work with the Agency's information technology office to develop the methodologies needed to match the records from the disparate systems to reconcile the claims payment data.</p>	
			<p><b>Finding 6:</b> The Agency did not always timely follow-up with providers who were determined to be noncompliant during quality assurance reviews.</p> <p><b>Recommendation 6:</b> AG recommended the Agency continue to work with AHCA to enhance procedures for the timely remediation of provider compliance deficiencies. For noncompliant providers that are nonresponsive to remediation efforts, such procedures should address the timely termination of the provider from the HCBS Medicaid waiver program.</p>	<p>APD completed the revisions of the Quality Management System Operating Procedure # 4-0007 on April 21, 2014 and includes guidelines for follow-up on noncompliant providers. APD regional staff received instructions on the operating procedure in May 2014. Based upon Quality Improvement Organization (i.e., Delmarva Foundation) findings, there are no identified non-compliant providers requiring follow up. APD State Office reviews with regional staff data on provider performance on a quarterly basis.</p>	

(1) REPORT NUMBER	(2) PERIOD ENDING	(3) UNIT/AREA	(4) SUMMARY OF FINDINGS AND RECOMMENDATIONS	(5) SUMMARY OF CORRECTIVE ACTION TAKEN	(6) ISSUE CODE
			<p><b>Finding 7:</b> The Agency did not properly document or periodically reevaluate client eligibility determinations for clients receiving services through the IFS Program.</p> <p><b>Recommendation 7:</b> AG recommended the Agency periodically reevaluate client eligibility determinations and that each client's Florida domicile be verified annually. Additionally, they recommended that the Agency enhance its procedures to better ensure that client eligibility determinations are properly documented and appropriately updated.</p>	<p>APD obtained the Systematic Alien Verification for Entitlements (SAVE) program, which will help research citizenship and immigration status information of non-citizen and naturalized or derived U.S. citizen individuals applying for APD services. APD also met with Department of Children and Family's Refugee Program to obtain information about other programs that can help non-citizens with developmental disabilities. The Application for Services is under revision to include verification of applicant citizenship and is being finalized for implementation. The IFS Service Code Definitions was revised to include service availability and limitations. Information was shared with field office staff to improve tracking of IFS service utilization by using correct codes. The Application and Eligibility operating procedures are currently under revision to provide instructions to ensure compliance in eligibility, citizenship, residency, and active military service requirements.</p>	
			<p><b>Finding 8:</b> CDC+ Program funds were allowed to accumulate in consumer accounts instead of being reinvested.</p> <p><b>Recommendation 8:</b> AG recommended the Agency finalize and implement its methodology to ensure that excessive CDC+ Program consumers' account balances are identified and timely reinvested.</p>	<p>CDC+ finalized the data for the first wave of consumers with account balances in excess of \$50,000. Staff is working with General Counsel to send out notifications of the reinvestment of funds and anticipate letters to be distributed soon.</p>	
			<p><b>Finding 9:</b> Agency travel reimbursement requests were not always adequately supported or paid in accordance with the requirements of State law.</p> <p><b>Recommendation 9:</b> AG recommended the Agency enhance its travel policies and procedures to require mileage reimbursement requests be supported by adequate documentation and that, prior to reimbursement, the reasonableness and allowability of the claimed mileage be verified. In addition, for travelers who claim mileage to and from their residences, they recommended the Agency obtain and maintain documentation evidencing that the destination was closer to the traveler's residence than their headquarters.</p>	<p>APD updated its travel policies and procedures regarding travel reimbursement and the required supporting documentation. These policies went into effect on July 1, 2014.</p>	

(1) REPORT NUMBER	(2) PERIOD ENDING	(3) UNIT/AREA	(4) SUMMARY OF FINDINGS AND RECOMMENDATIONS	(5) SUMMARY OF CORRECTIVE ACTION TAKEN	(6) ISSUE CODE
APD Rpt # 130705-01	2011-2012 FY	Area 9 Family Care Council	<p><b>Finding 1:</b> Minutes were requested but were not available from the Area 9 FCC, therefore none of the 26 (\$3,054.73) tested expenditures were supported with approved minutes.</p> <p><b>Recommendation 1:</b> We recommend Area 9 FCC prepare, approve and submit minutes for all council meetings to APD as required.</p> <p><b>Recommendation 2:</b> We recommend that the Southeast Region staff develop a process to ensure that the Area 9 FCC submits minutes for each meeting; that all Area 9 FCC expenditures are authorized in those minutes; expenditures are in accordance with Section 112.061, Florida Statutes, and the Reference Guide for State Expenditures.</p>	APD Region Manager prepared a corrective action so that the FCC Liaison and Budget staff will provide training to FCC Liaison and FCC members on travel policies and procedures.	
			<p><b>Finding 2:</b> Our review of 24 of the 26 FCC travel expenditures for Area 9 indicated the following:</p> <ul style="list-style-type: none"> <li>• For one travel reimbursement voucher the required Florida Department of Transportation Map Mileage was not used for the mileage reimbursement calculation.</li> <li>• For five travel reimbursements the traveler was entitled to claim meals and/or per diem. Four of the travelers claimed neither and the fifth traveler claimed less than he was entitled. If a traveler chooses to claim less than the full meal allowance or per diem they are required to include a statement on the travel voucher stating that they understand they are entitled to the full meal allowance provided by law but has voluntarily chosen to claim a lesser amount. The five travel vouchers did not contain such a statement</li> </ul> <p><b>Recommendation 3:</b> We recommend Southeast Region staff conduct a more thorough preaudit process of the Area 9 FCC expenditures prior to payment.</p> <p><b>Recommendation 4:</b> We recommend that APD provide additional training to the Area 9 FCC and Southeast Region staff on the policies and procedures of completing and requesting travel authorizations and reimbursements.</p>	APD Region Manager prepared a corrective action so that the FCC Liaison will review FCC meeting minutes to insure that all expenditures are supported by the FCC meeting minutes.	

(1) REPORT NUMBER	(2) PERIOD ENDING	(3) UNIT/AREA	(4) SUMMARY OF FINDINGS AND RECOMMENDATIONS	(5) SUMMARY OF CORRECTIVE ACTION TAKEN	(6) ISSUE CODE
APD Rpt # 140303-01	2012-2013 FY	Area 14 Family Care Council	<p><b>Finding 1:</b> Our review of 14 FCC travel expenditures for 7 trips indicated the following:</p> <ul style="list-style-type: none"> <li>• For one travel reimbursement the required Authorization to Incur Travel Expenses form was not completed.</li> <li>• If a traveler chooses to claim less than the full meal allowance or per diem, they are required to include a statement on the travel reimbursement voucher stating that they understand they are entitled to a full meal allowance provided by law but have voluntarily chosen to claim a lesser amount. FCC's may decide to limit travel reimbursement to its members, but the statement is still required. Three travel reimbursement vouchers did not contain such a statement. In addition, for two reimbursements where meals were claimed on the last day of travel, they were reimbursed for dinner (\$19) when their travel did not extend beyond 8:00 p.m.</li> </ul> <p><b>Recommendation 1:</b> We recommend that Central Region staff conduct a more thorough preaudit of the Area 14 FCC travel expenditures to ensure they are in accordance with Section 112.061, Florida Statutes, APD Operating Procedure No. OP 15-010, and the Reference Guide for State Expenditures prior to payment.</p> <p><b>Recommendation 2:</b> We recommend that APD that APD provide additional training to the Area 14 FCC and Central Region Staff on the policies and procedures of completing and requesting travel authorizations and reimbursements.</p>	<p>APD Region Manager prepared a corrective action to (1) remind the FCC members that all travel must be pre-approved by the local FCC and all associated pre-travel paperwork must be submitted to APD in advance of travel. Failure to submit pre-travel Authorization to Incur Travel Expenses paperwork will result in a denial of reimbursement if travel is incurred.</p> <p>(2) have Region staff conduct a more thorough pre-audit of the FCC travel expenditures to ensure they are in accordance with Section 112.061, Florida Statutes, APD Operating Procedure No. OP 15-010, and the Reference Guide for State Expenditures prior to payment. Additionally, Region staff will provide additional training to Area 14 FCC and applicable Region staff on the policies and procedures of completing and requesting travel authorizations and reimbursements.</p>	
			<p><b>Finding 2:</b> Our review of Area 14 FCC expenditures found three instances where travel expenditures, occurring after October 1, 2012, were incorrectly coded to OCA FCC02 instead of OCA FCC14.</p> <p><b>Recommendation 3:</b> We recommend that Central Region and Central Office staff conduct more thorough preaudits of expenditures to ensure they are coded correctly.</p>	APD Region Manager reported that Area 14 FCC was assigned and is now utilizing a new OCA.	

(1) REPORT NUMBER	(2) PERIOD ENDING	(3) UNIT/AREA	(4) SUMMARY OF FINDINGS AND RECOMMENDATIONS	(5) SUMMARY OF CORRECTIVE ACTION TAKEN	(6) ISSUE CODE
APD Rpt # 140212-01	2011-2013 FYs	Client Bank Accounts	<p><b>Finding 1:</b> There were not adequate controls in place to ensure APD clients are not financially exploited. Examples included: bank reconciliations were not being regularly performed; staff were not bonded; and there were not written policies and procedures.</p> <p><b>Recommendation 1:</b> We recommend that APD</p> <ul style="list-style-type: none"> <li>• Work with stakeholders to develop a series of best practices as they relate to Client Funds, defining the expectations of, and providing better guidance for APD and its providers who are accountable for client funds.</li> <li>• Revisit current draft language in Operating Procedure 10-008 <i>Licensing and Oversight of Residential Facilities</i> regarding client funds to include specific detailed guidance to APD group home monitors allowing for a more thorough review of client fund records.</li> <li>• Make recommendations to the Agency for Health Care Administration that WSC duties defined in the <i>Florida Medicaid Developmental Disabilities Waiver Handbook</i> include the review and testing of client fund management.</li> </ul>	<p>APD management responded that there are no requirements in the current Medicaid Waiver Handbook for providers to develop, maintain, and follow written policies and procedures for management of client funds. Therefore, to address the recommendation, APD proposed the following: (1) Send the SSA Guide for Organizational Representative Payees to all providers and present training to providers and waiver support coordinators. (2) Make recommendations to AHCA to revise the Core Assurances Agreement in the Florida Medicaid Developmental Disabilities Waiver Handbook to include requirements for providers who handle client funds to develop and maintain written policies and procedures governing the management of those funds and to add the review and testing of client funds to the WSC duties. and (3) Recommend development of written policies and procedures for protection and management of client funds at initial and annual renewal licensure inspections. (4) Add specific language in the revised Rule 65G to require providers to follow specific uniform guidelines to maintain individual, clearly understandable, current records for client funds.</p>	

## Fiscal Year 2015-16 LBR Technical Review Checklist

Department/Budget Entity (Service): Agency for Persons with Disabilities

Agency Budget Officer/OPB Analyst Name: David Dobbs/Casey Perkins

A "Y" indicates "YES" and is acceptable, an "N/J" indicates "NO/Justification Provided" - these require further explanation/justification (additional sheets can be used as necessary), and "TIPS" are other areas to consider.

Action	Program or Service (Budget Entity Codes)		
	67100100	67100200	67100300

### 1. GENERAL

1.1	Are Columns A01, A02, A04, A05, A23, A24, A25, A36, A93, IA1, IA5, IA6, IP1, IV1, IV3 and NV1 set to TRANSFER CONTROL for DISPLAY status and MANAGEMENT CONTROL for UPDATE status for both the Budget and Trust Fund columns? Are Columns A06, A07, A08 and A09 for Fixed Capital Outlay (FCO) set to TRANSFER CONTROL for DISPLAY status only? (CSDI)	Y	Y	Y
1.2	Is Column A03 set to TRANSFER CONTROL for DISPLAY and UPDATE status for both the Budget and Trust Fund columns? (CSDI)	Y	Y	Y

### AUDITS:

1.3	Has Column A03 been copied to Column A12? Run the Exhibit B Audit Comparison Report to verify. (EXBR, EXBA)	Y	Y	Y
1.4	Has security been set correctly? (CSDR, CSA)	Y	Y	Y
TIP	The agency should prepare the budget request for submission in this order: 1) Lock columns as described above; 2) copy Column A03 to Column A12; and 3) set Column A12 column security to ALL for DISPLAY status and MANAGEMENT CONTROL for UPDATE status.			

### 2. EXHIBIT A (EADR, EXA)

2.1	Is the budget entity authority and description consistent with the agency's LRPP and does it conform to the directives provided on page 59 of the LBR Instructions?	Y	Y	Y
2.2	Are the statewide issues generated systematically (estimated expenditures, nonrecurring expenditures, etc.) included?	Y	Y	Y
2.3	Are the issue codes and titles consistent with Section 3 of the LBR Instructions (pages 15 through 29)? Do they clearly describe the issue?	Y	Y	Y
2.4	Have the coding guidelines in Section 3 of the LBR Instructions (pages 15 through 29) been followed?	Y	Y	Y

### 3. EXHIBIT B (EXBR, EXB)

3.1	Is it apparent that there is a fund shift where an appropriation category's funding source is different between A02 and A03? Were the issues entered into LAS/PBS correctly? Check D-3A funding shift issue 340XXX0 - a unique deduct and unique add back issue should be used to ensure fund shifts display correctly on the LBR exhibits.	Y	Y	Y
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### AUDITS:

3.2	Negative Appropriation Category Audit for Agency Request (Columns A03 and A04): Are all appropriation categories positive by budget entity at the FSI level? Are all nonrecurring amounts less than requested amounts? (NACR, NAC - Report should print "No Negative Appropriation Categories Found")			
3.3	Current Year Estimated Verification Comparison Report: Is Column A02 equal to Column B07? (EXBR, EXBC - Report should print "Records Selected Net To Zero")	Y	Y	Y
TIP	Generally look for and be able to fully explain significant differences between A02 and A03.			
TIP	Exhibit B - A02 equal to B07: Compares Current Year Estimated column to a backup of A02. This audit is necessary to ensure that the historical detail records have not been adjusted. Records selected should net to zero.			



Action		Program or Service (Budget Entity Codes)		
		67100100	67100200	67100300
TIP	Requests for appropriations which require advance payment authority must use the sub-title "Grants and Aids". For advance payment authority to local units of government, the Aid to Local Government appropriation category (05XXXX) should be used. For advance payment authority to non-profit organizations or other units of state government, the Special Categories appropriation category (10XXXX) should be used.			
<b>4. EXHIBIT D (EADR, EXD)</b>				
4.1	Is the program component objective statement consistent with the agency LRPP, and does it conform to the directives provided on page 61 of the LBR Instructions?	Y	Y	Y
4.2	Is the program component code and title used correct?	Y	Y	Y
TIP	Fund shifts or transfers of services or activities between program components will be displayed on an Exhibit D whereas it may not be visible on an Exhibit A.			
<b>5. EXHIBIT D-1 (ED1R, EXD1)</b>				
5.1	Are all object of expenditures positive amounts? (This is a manual check.)	Y	Y	Y
<b>AUDITS:</b>				
5.2	Do the fund totals agree with the object category totals within each appropriation category? ( <b>ED1R, XD1A - Report should print "No Differences Found For This Report"</b> )	Y	Y	Y
5.3	FLAIR Expenditure/Appropriation Ledger Comparison Report: Is Column A01 less than Column B04? ( <b>EXBR, EXBB - Negative differences need to be corrected in Column A01.</b> )	Y	Y	Y
5.4	A01/State Accounts Disbursements and Carry Forward Comparison Report: Does Column A01 equal Column B08? ( <b>EXBR, EXBD - Differences need to be corrected in Column A01.</b> )	Y	Y	Y
TIP	If objects are negative amounts, the agency must make adjustments to Column A01 to correct the object amounts. In addition, the fund totals must be adjusted to reflect the adjustment made to the object data.			
TIP	If fund totals and object totals do not agree or negative object amounts exist, the agency must adjust Column A01.			
TIP	Exhibit B - A01 less than B04: This audit is to ensure that the disbursements and carry/certifications forward in A01 are less than FY 2013-14 approved budget. Amounts should be positive.			
TIP	If B08 is not equal to A01, check the following: 1) the initial FLAIR disbursements or carry forward data load was corrected appropriately in A01; 2) the disbursement data from departmental FLAIR was reconciled to State Accounts; and 3) the FLAIR disbursements did not change after Column B08 was created.			
<b>6. EXHIBIT D-3 (ED3R, ED3) (Not required to be submitted in the LBR - for analytical purposes only.)</b>				
6.1	Are issues appropriately aligned with appropriation categories?			
TIP	Exhibit D-3 is no longer required in the budget submission but may be needed for this particular appropriation category/issue sort. Exhibit D-3 is also a useful report when identifying negative appropriation category problems.			
<b>7. EXHIBIT D-3A (EADR, ED3A)</b>				
7.1	Are the issue titles correct and do they clearly identify the issue? (See pages 15 through 33 of the LBR Instructions.)	Y	Y	Y
7.2	Does the issue narrative adequately explain the agency's request and is the explanation consistent with the LRPP? (See page 67-68 of the LBR Instructions.)	Y	Y	Y
7.3	Does the narrative for Information Technology (IT) issue follow the additional narrative requirements described on pages 69 through 71 of the LBR Instructions?	Y	Y	Y

Action	Program or Service (Budget Entity Codes)		
	67100100	67100200	67100300
7.4 Are all issues with an IT component identified with a "Y" in the "IT COMPONENT?" field? If the issue contains an IT component, has that component been identified and documented?	Y	Y	Y
7.5 Does the issue narrative explain any variances from the Standard Expense and Human Resource Services Assessments package? Is the nonrecurring portion in the nonrecurring column? (See pages E-4 through E-6 of the LBR Instructions.)	Y	Y	Y
7.6 Does the salary rate request amount accurately reflect any new requests and are the amounts proportionate to the Salaries and Benefits request? Note: Salary rate should always be annualized.	N/J No Issues	N/J No Issues	N/J No Issues
7.7 Does the issue narrative thoroughly explain/justify all Salaries and Benefits amounts entered into the Other Salary Amounts transactions (OADA/C)? Amounts entered into OAD are reflected in the Position Detail of Salaries and Benefits section of the Exhibit D-3A.	Y	Y	Y
7.8 Does the issue narrative include the Consensus Estimating Conference forecast, where appropriate?	N/J Consensus Estimating Conference forecast does not apply	N/J Consensus Estimating Conference forecast does not apply	N/J Consensus Estimating Conference forecast does not apply
7.9 Does the issue narrative reference the specific county(ies) where applicable?	N/J No individual counties identified	N/J No individual counties identified	N/J No individual counties identified
7.10 Do the 160XXX0 issues reflect budget amendments that have been approved (or in the process of being approved) and that have a recurring impact (including Lump Sums)? Have the approved budget amendments been entered in Column A18 as instructed in Memo #14-001?	Y	Y	Y
7.11 When appropriate are there any 160XXX0 issues included to delete positions placed in reserve in the OPB Position and Rate Ledger (e.g. unfunded grants)? Note: Lump sum appropriations not yet allocated should <u>not</u> be deleted. (PLRR, PLMO)	N/J No Issues	N/J No Issues	N/J No Issues
7.12 Does the issue narrative include plans to satisfy additional space requirements when requesting additional positions?	Y	Y	Y
7.13 Has the agency included a 160XXX0 issue and 210XXXX and 260XXX0 issues as required for lump sum distributions?	N/J No Lump Sum	N/J No Lump Sum	N/J No Lump Sum
7.14 Do the amounts reflect appropriate FSI assignments?			
7.15 Are the 33XXXX0 issues negative amounts only and do not restore nonrecurring cuts from a prior year or fund any issues that net to a positive or zero amount? Check D-3A issues 33XXXX0 - a unique issue should be used for issues that net to zero or a positive amount.	Y	Y	Y
7.16 Do the issues relating to <i>salary and benefits</i> have an "A" in the fifth position of the issue code (XXXXAXX) and are they self-contained (not combined with other issues)? (See page 28 and 88 of the LBR Instructions.)	N/J No Issues	N/J No Issues	N/J No Issues
7.17 Do the issues relating to <i>Information Technology (IT)</i> have a "C" in the sixth position of the issue code (36XXXCX) and are the correct issue codes used (361XXC0, 362XXC0, 363XXC0, 17C01C0, 17C02C0, 17C03C0, 24010C0, 33001C0, 330010C0, 33011C0, 160E470, 160E480 or 55C01C0)?	Y	Y	Y
7.18 Are the issues relating to <i>major audit findings and recommendations</i> properly coded (4A0XXX0, 4B0XXX0)?	N/J No Issues	N/J No Issues	N/J No Issues
7.19 Does the issue narrative identify the strategy or strategies in the Five Year Statewide Strategic Plan for Economic Development?			

Action		Program or Service (Budget Entity Codes)		
		67100100	67100200	67100300
7.20	Are all FSI's equal to '1', '2', '3', or '9'? There should be no FSI's equal to '0'. <b>(EADR, FSIA - Report should print "No Records Selected For Reporting")</b>	Y	Y	Y
7.21	Does the General Revenue for 160XXXX (Adjustments to Current Year Expenditures) issues net to zero? <b>(GENR, LBR1)</b>			
7.22	Does the General Revenue for 180XXXX (Intra-Agency Reorganizations) issues net to zero? <b>(GENR, LBR2)</b>	Y	Y	Y
7.23	Does the General Revenue for 200XXXX (Estimated Expenditures Realignment) issues net to zero? <b>(GENR, LBR3)</b>	Y	Y	Y
7.24	Have FCO appropriations been entered into the nonrecurring column A04? <b>(GENR, LBR4 - Report should print "No Records Selected For Reporting" or a listing of D-3A issue(s) assigned to Debt Service (IOE N) or in some cases State Capital Outlay - Public Education Capital Outlay (IOE L) )</b>			
TIP	Salaries and Benefits amounts entered using the OADA/C transactions must be thoroughly justified in the D-3A issue narrative. Agencies can run <b>OADA/OADR</b> from STAM to identify the amounts entered into OAD and ensure these entries have been thoroughly explained in the D-3A issue narrative.			
TIP	The issue narrative must completely and thoroughly explain and justify each D-3A issue. Agencies must ensure it provides the information necessary for the OPB and legislative analysts to have a complete understanding of the issue submitted. Thoroughly review pages 65 through 70 of the LBR Instructions.			
TIP	Check BAPS to verify status of budget amendments. Check for reapprovals not picked up in the General Appropriations Act. Verify that Lump Sum appropriations in Column A02 do not appear in Column A03. Review budget amendments to verify that 160XXX0 issue amounts correspond accurately and net to zero for General Revenue funds.			
TIP	If an agency is receiving federal funds from another agency the FSI should = 9 (Transfer - Recipient of Federal Funds). The agency that originally receives the funds directly from the federal agency should use FSI = 3 (Federal Funds).			
TIP	If a state agency needs to include in its LBR a realignment or workload request issue to align its data processing services category with its projected FY 2015-16 data center costs, this can be completed by using the new State Data Center data processing services category (210001). (NSRC data processing services category (210022) and the SSRC data processing services category (210021) will no longer be used).			
TIP	If an appropriation made in the FY 2014-15 General Appropriations Act duplicates an appropriation made in substantive legislation, the agency must create a unique deduct nonrecurring issue to eliminate the duplicated appropriation. Normally this is taken care of through line item veto.			
<b>8. SCHEDULE I &amp; RELATED DOCUMENTS (SC1R, SC1 - Budget Entity Level or SC1R, SC1D - Department Level)</b>				
8.1	Has a separate department level Schedule I and supporting documents package been submitted by the agency?	Y	Y	Y
8.2	Has a Schedule I and Schedule IB been completed in LAS/PBS for each operating trust fund?	Y	Y	Y
8.3	Have the appropriate Schedule I supporting documents been included for the trust funds (Schedule IA, Schedule IC, and Reconciliation to Trial Balance)?	Y	Y	Y
8.4	Have the Examination of Regulatory Fees Part I and Part II forms been included for the applicable regulatory programs?	N/A	N/A	N/A
8.5	Have the required detailed narratives been provided (5% trust fund reserve narrative; method for computing the distribution of cost for general management and administrative services narrative; adjustments narrative; revenue estimating methodology narrative; fixed capital outlay adjustment narrative)?	Y	Y	Y

Action	Program or Service (Budget Entity Codes)		
	67100100	67100200	67100300
8.6 Has the Inter-Agency Transfers Reported on Schedule I form been included as applicable for transfers totaling \$100,000 or more for the fiscal year?	Y	Y	Y
8.7 If the agency is scheduled for the annual trust fund review this year, have the Schedule ID and applicable draft legislation been included for recreation, modification or termination of existing trust funds?	N/A	N/A	N/A
8.8 If the agency is scheduled for the annual trust fund review this year, have the necessary trust funds been requested for creation pursuant to <i>section 215.32(2)(b), Florida Statutes</i> - including the Schedule ID and applicable legislation?	N/A	N/A	N/A
8.9 Are the revenue codes correct? In the case of federal revenues, has the agency appropriately identified direct versus indirect receipts (object codes 000700, 000750, 000799, 001510 and 001599)? For non-grant federal revenues, is the correct revenue code identified (codes 000504, 000119, 001270, 001870, 001970)?	Y	Y	Y
8.10 Are the statutory authority references correct?	Y	Y	Y
8.11 Are the General Revenue Service Charge percentage rates used for each revenue source correct? (Refer to Chapter 2009-78, Laws of Florida, for appropriate general revenue service charge percentage rates.)	Y	Y	Y
8.12 Is this an accurate representation of revenues based on the most recent Consensus Estimating Conference forecasts?	N/A	N/A	N/A
8.13 If there is no Consensus Estimating Conference forecast available, do the revenue estimates appear to be reasonable?	Y	Y	Y
8.14 Are the federal funds revenues reported in Section I broken out by individual grant? Are the correct CFDA codes used?	Y	Y	Y
8.15 Are anticipated grants included and based on the state fiscal year (rather than federal fiscal year)?	N/A	N/A	N/A
8.16 Are the Schedule I revenues consistent with the FSI's reported in the Exhibit D-3A?	Y	Y	Y
8.17 If applicable, are nonrecurring revenues entered into Column A04?	N/A	Y	Y
8.18 Has the agency certified the revenue estimates in columns A02 and A03 to be the latest and most accurate available? Does the certification include a statement that the agency will notify OPB of any significant changes in revenue estimates that occur prior to the Governor's Budget Recommendations being issued?	Y	Y	Y
8.19 Is a 5% trust fund reserve reflected in Section II? If not, is sufficient justification provided for exemption? Are the additional narrative requirements provided?	Y	Y	Y
8.20 Are appropriate general revenue service charge nonoperating amounts included in Section II?	N/A	Y	N/A
8.21 Are nonoperating expenditures to other budget entities/departments cross-referenced accurately?	N/A	Y	N/A
8.22 Do transfers balance between funds (within the agency as well as between agencies)? (See also 8.6 for required transfer confirmation of amounts totaling	Y	Y	Y
8.23 Are nonoperating expenditures recorded in Section II and adjustments recorded in Section III?	Y	Y	Y
8.24 Are prior year September operating reversions appropriately shown in column A01?	Y	Y	Y
8.25 Are current year September operating reversions appropriately shown in column A02?	Y	Y	Y
8.26 Does the Schedule IC properly reflect the unreserved fund balance for each trust fund as defined by the LBR Instructions, and is it reconciled to the agency accounting records?	Y	Y	Y
8.27 Has the agency properly accounted for continuing appropriations (category 13XXXX) in column A01, Section III?	N/A	N/A	Y

Action		Program or Service (Budget Entity Codes)		
		67100100	67100200	67100300
8.28	Does Column A01 of the Schedule I accurately represent the actual prior year accounting data as reflected in the agency accounting records, and is it provided in sufficient detail for analysis?	Y	Y	Y
8.29	Does Line I of Column A01 (Schedule I) equal Line K of the Schedule IC?	Y	Y	Y
<b>AUDITS:</b>				
8.30	Is Line I a positive number? (If not, the agency must adjust the budget request to eliminate the deficit).	Y	Y	Y
8.31	Is the June 30 Adjusted Unreserved Fund Balance (Line I) equal to the July 1 Unreserved Fund Balance (Line A) of the following year? If a Schedule IB was prepared, do the totals agree with the Schedule I, Line I? ( <b>SC1R, SC1A - Report should print "No Discrepancies Exist For This Report"</b> )	Y	Y	Y
8.32	Has a Department Level Reconciliation been provided for each trust fund and does Line A of the Schedule I equal the CFO amount? If not, the agency must correct Line A. ( <b>SC1R, DEPT</b> )	Y	Y	Y
8.33	Has a Schedule IB been provided for each trust fund and does total agree with line I ?	Y	Y	Y
8.34	Have A/R been properly analyzed and any allowances for doubtful accounts been properly recorded on the Schedule IC?	Y	Y	Y
TIP	The Schedule I is the most reliable source of data concerning the trust funds. It is very important that this schedule is as accurate as possible!			
TIP	Determine if the agency is scheduled for trust fund review. (See page 130 of the LBR Instructions.) Transaction DFTR in LAS/PBS is also available and provides an LBR review date for each trust fund.			
TIP	Review the unreserved fund balances and compare revenue totals to expenditure totals to determine and understand the trust fund status.			
TIP	Typically nonoperating expenditures and revenues should not be a negative number. Any negative numbers must be fully justified.			
<b>9. SCHEDULE II (PSCR, SC2)</b>				
<b>AUDIT:</b>				
9.1	Is the pay grade minimum for salary rate utilized for positions in segments 2 and 3? ( <b>BRAR, BRAA - Report should print "No Records Selected For This Request"</b> ) Note: Amounts other than the pay grade minimum should be fully justified in the D-3A issue narrative. (See <i>Base Rate Audit</i> on page 161 of the LBR Instructions.)	Y	Y	Y

Action	Program or Service (Budget Entity Codes)		
	67100100	67100200	67100300
<b>10. SCHEDULE III (PSCR, SC3)</b>			
10.1 Is the appropriate lapse amount applied in Segment 3? (See page 92 of the LBR Instructions.)	Y	Y	Y
10.2 Are amounts in <i>Other Salary Amount</i> appropriate and fully justified? (See page 99 of the LBR Instructions for appropriate use of the OAD transaction.) Use <b>OADI</b> or <b>OADR</b> to identify agency other salary amounts requested.	Y	Y	Y
<b>11. SCHEDULE IV (EADR, SC4)</b>			
11.1 Are the correct Information Technology (IT) issue codes used?	Y	Y	Y
<b>TIP</b> If IT issues are not coded correctly (with "C" in 6th position), they will not appear in the Schedule IV.			
<b>12. SCHEDULE VIIIA (EADR, SC8A)</b>			
12.1 Is there only one #1 priority, one #2 priority, one #3 priority, etc. reported on the Schedule VIII-A? Are the priority narrative explanations adequate? Note: FCO issues can now be included in the priority listing.	Y	Y	Y
<b>13. SCHEDULE VIIIB-1 (EADR, S8B1)</b>			
13.1 <b>NOT REQUIRED FOR THIS YEAR</b>			
<b>14. SCHEDULE VIIIB-2 (EADR, S8B2)</b>			
14.1 Do the reductions comply with the instructions provided on pages 104 through 106 of the LBR Instructions regarding a 5% reduction in recurring General Revenue and Trust Funds, including the verification that the 33BXXX0 issue has NOT been used?	Y	Y	Y
<b>15. SCHEDULE VIIIC (EADR, S8C)</b> <b>(LAS/PBS Web - see page 107-109 of the LBR Instructions for detailed instructions)</b>			
15.1 Agencies are required to generate this schedule via the LAS/PBS Web.	Y	Y	Y
15.2 Does the schedule include at least three and no more than 10 unique reprioritization issues, in priority order? Manual Check.	Y	Y	Y
15.3 Does the schedule display reprioritization issues that are each comprised of two unique issues - a deduct component and an add-back component which net to zero at the department level?	Y	Y	Y
15.4 Are the priority narrative explanations adequate and do they follow the guidelines on pages 107-109 of the LBR instructions?	Y	Y	Y
15.5 Does the issue narrative in A6 address the following: Does the state have the authority to implement the reprioritization issues independent of other entities (federal and local governments, private donors, etc.)? Are the reprioritization issues an allowable use of the recommended funding source?	Y	Y	Y
<b>AUDIT:</b>			
15.6 Do the issues net to zero at the department level? ( <b>GENR, LBR5</b> )	Y	Y	Y

Action	Program or Service (Budget Entity Codes)		
	67100100	67100200	67100300

**16. SCHEDULE XI (USCR,SCXI) (LAS/PBS Web - see page 110-114 of the LBR Instructions for detailed instructions)**

16.1	Agencies are required to generate this spreadsheet via the LAS/PBS Web. <b>The Final Excel version no longer has to be submitted to OPB for inclusion on the Governor's Florida Performs Website.</b> (Note: Pursuant to <i>section 216.023(4)(b), Florida Statutes</i> , the Legislature can reduce the funding level for any agency that does not provide this information.)	Y	Y	Y
16.2	Do the PDF files uploaded to the Florida Fiscal Portal for the LRPP and LBR	Y	Y	Y

**AUDITS INCLUDED IN THE SCHEDULE XI REPORT:**

16.3	Does the FY 2013-14 Actual (prior year) Expenditures in Column A36 reconcile to Column A01? ( <b>GENR, ACT1</b> )	Y	Y	Y
16.4	None of the executive direction, administrative support and information technology statewide activities (ACT0010 thru ACT0490) have output standards (Record Type 5)? ( <b>Audit #1 should print "No Activities Found"</b> )	Y	Y	Y
16.5	Does the Fixed Capital Outlay (FCO) statewide activity (ACT0210) only contain 08XXXX or 14XXXX appropriation categories? ( <b>Audit #2 should print "No Operating Categories Found"</b> )	Y	Y	Y
16.6	Has the agency provided the necessary standard (Record Type 5) for all activities which <u>should</u> appear in Section II? (Note: <b>Audit #3</b> will identify those activities that do NOT have a Record Type '5' and have not been identified as a 'Pass Through' activity. These activities will be displayed in Section III with the 'Payment of Pensions, Benefits and Claims' activity and 'Other' activities. Verify if these activities should be displayed in Section III. If not, an output standard would need to be added for that activity and the Schedule XI submitted again.)	Y	Y	Y
16.7	Does Section I (Final Budget for Agency) and Section III (Total Budget for Agency) equal? ( <b>Audit #4 should print "No Discrepancies Found"</b> )	Y	Y	Y
TIP	If Section I and Section III have a small difference, it may be due to rounding and therefore will be acceptable.			

**17. MANUALLY PREPARED EXHIBITS & SCHEDULES**

17.1	Do exhibits and schedules comply with LBR Instructions (pages 115 through 158 of the LBR Instructions), and are they accurate and complete?	Y	Y	Y
17.2	Are appropriation category totals comparable to Exhibit B, where applicable?	Y	Y	Y
17.3	Are agency organization charts (Schedule X) provided and at the appropriate level of detail?	Y	Y	Y
17.4	Does the LBR include a separate IV-B for each IT project over \$1 million (see page 134 of the LBR instructions for exemptions to this rule)? Have all IV-B been emailed to: IT@LASPBS.state.fl.us	Y	Y	Y
17.5	Are all forms relating to Fixed Capital Outlay (FCO) funding requests submitted in the proper form, including a Truth in Bonding statement (if applicable) ?	Y	Y	Y

	Program or Service (Budget Entity Codes)		
Action	67100100	67100200	67100300

**AUDITS - GENERAL INFORMATION**

TIP	Review <i>Section 6: Audits</i> of the LBR Instructions (pages 160-162) for a list of audits and their descriptions.	
TIP	Reorganizations may cause audit errors. Agencies must indicate that these errors are due to an agency reorganization to justify the audit error.	

**18. CAPITAL IMPROVEMENTS PROGRAM (CIP)**

18.1	Are the CIP-2, CIP-3, CIP-A and CIP-B forms included?	Y	Y	Y
18.2	Are the CIP-4 and CIP-5 forms submitted when applicable (see CIP Instructions)?	Y	Y	Y
18.3	Do all CIP forms comply with CIP Instructions where applicable (see CIP	Y	Y	Y
18.4	Does the agency request include 5 year projections (Columns A03, A06, A07, A08 and A09)?	Y	Y	Y
18.5	Are the appropriate counties identified in the narrative?	Y	Y	Y
18.6	Has the CIP-2 form (Exhibit B) been modified to include the agency priority for each project and the modified form saved as a PDF document?	Y	Y	Y
TIP	Requests for Fixed Capital Outlay appropriations which are Grants and Aids to Local Governments and Non-Profit Organizations must use the Grants and Aids to Local Governments and Non-Profit Organizations - Fixed Capital Outlay major appropriation category (140XXX) and include the sub-title "Grants and Aids". These appropriations utilize a CIP-B form as justification.			

**19. FLORIDA FISCAL PORTAL**

19.1	Have all files been assembled correctly and posted to the Florida Fiscal Portal as outlined in the Florida Fiscal Portal Submittal Process?	Y	Y	Y
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# SCHEDULE IV-B FOR CLIENT DATA MANAGEMENT SYSTEM TECHNOLOGY PROJECT

For Fiscal Year 2015-16



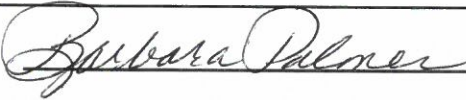
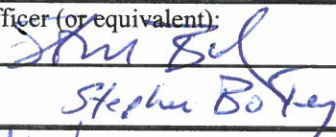
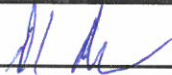
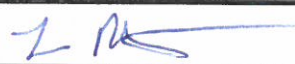
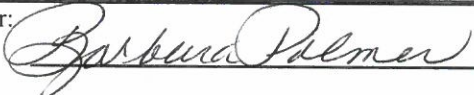
October 15, 2014

**AGENCY FOR PERSONS WITH DISABILITIES**

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I. Schedule IV-B Cover Sheet

Schedule IV-B Cover Sheet and Agency Project Approval	
Agency: Agency for Persons with Disabilities	Schedule IV-B Submission Date: October 15, 2014
Project Name: Client Data Management System Project	Is this project included in the Agency's LRPP? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
FY 2015-16 LBR Issue Code: <b>Need Issue Code</b> 3620100	FY 2015-16 LBR Issue Title: Client Data Management Electronic Visit Verification Project
Agency Contact for Schedule IV-B (Name, Phone #, and E-mail address): David Dobbs, 850-414-6058, David.Dobbs@apdcares.org	
AGENCY APPROVAL SIGNATURES	
I am submitting the attached Schedule IV-B in support of our legislative budget request. I have reviewed the estimated costs and benefits documented in the Schedule IV-B and believe the proposed solution can be delivered within the estimated time for the estimated costs to achieve the described benefits. I agree with the information in the attached Schedule IV-B.	
Agency Head:  Printed Name: Barbara Palmer	Date: 10/15/14
Agency Chief Information Officer (or equivalent):  Printed Name: Mark Ervin	Date: 10/15/14
Budget Officer:  Printed Name: David Dobbs	Date: 10/15/2014
Planning Officer:  Printed Name: Lisa Robertson	Date: 10/15/14
Project Sponsor:  Printed Name: Barbara Palmer	Date: 10/15/14
Schedule IV-B Preparers (Name, Phone #, and E-mail address):	
Business Need:	David Dobbs, 850-414-6058, David.Dobbs@apdcares.org
Cost Benefit Analysis:	David Dobbs, 850-414-6058, David.Dobbs@apdcares.org
Risk Analysis:	David Dobbs, 850-414-6058, David.Dobbs@apdcares.org
Technology Planning:	Mark Ervin, 850-488-0616, Mark.Ervin@apdcares.org
Project Planning:	Lisa Robertson, 850-922-9499, Lisa.Robertson@apdcares.org

### I. Schedule IV-B Cover Sheet

Schedule IV-B Cover Sheet and Agency Project Approval	
Agency: Agency for Persons with Disabilities	Schedule IV-B Submission Date: October 15, 2014
Project Name: Client Data Management System Project	Is this project included in the Agency's LRPP? <input type="checkbox"/> Yes <input type="checkbox"/> No
FY 2015-16 LBR Issue Code: Need Issue Code	FY 2015-16 LBR Issue Title: Client Data Management Electronic Visit Verification Project
Agency Contact for Schedule IV-B (Name, Phone #, and E-mail address): David Dobbs, 850-414-6058, David.Dobbs@apdcares.org	
AGENCY APPROVAL SIGNATURES	
I am submitting the attached Schedule IV-B in support of our legislative budget request. I have reviewed the estimated costs and benefits documented in the Schedule IV-B and believe the proposed solution can be delivered within the estimated time for the estimated costs to achieve the described benefits. I agree with the information in the attached Schedule IV-B.	
Agency Head: _____	Date: _____
Printed Name: Barbara Palmer	
Agency Chief Information Officer (or equivalent): _____	Date: _____
Printed Name: Mark Ervin	
Budget Officer: _____	Date: _____
Printed Name: David Dobbs	
Planning Officer: _____	Date: _____
Printed Name: Lisa Robertson	
Project Sponsor: _____	Date: _____
Printed Name: Barbara Palmer	
Schedule IV-B Preparers (Name, Phone #, and E-mail address):	
Business Need:	David Dobbs, 850-414-6058, David.Dobbs@apdcares.org
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Technology Planning:	Mark Ervin, 850-488-0616, Mark.Ervin@apdcares.org
Project Planning:	Lisa Robertson, 850-922-9499, Lisa.Robertson@apdcares.org



## General Guidelines

The Schedule IV-B contains more detailed information on information technology (IT) projects than is included in the D-3A issue narrative submitted with an agency's Legislative Budget Request (LBR). The Schedule IV-B compiles the analyses and data developed by the agency during the initiation and planning phases of the proposed IT project. A Schedule IV-B must be completed for all IT projects when the total cost (all years) of the project is \$1 million or more.

Schedule IV-B is not required for requests to:

- Continue existing hardware and software maintenance agreements,
- Renew existing software licensing agreements, or
- Replace desktop units ("refresh") with new technology that is similar to the technology currently in use.
- Contract only for the completion of a business case or feasibility study for the replacement or remediation of an existing IT system or the development of a new IT system.

## Documentation Requirements

The type and complexity of an IT project determines the level of detail an agency should submit for the following documentation requirements:

- Background and Strategic Needs Assessment
- Baseline Analysis
- Proposed Business Process Requirements
- Functional and Technical Requirements
- Success Criteria
- Benefits Realization
- Cost Benefit Analysis
- Major Project Risk Assessment
- Risk Assessment Summary
- Current Information Technology Environment
- Current Hardware/Software Inventory
- Proposed Solution Description
- Project Management Planning

Compliance with s. 216.023(4)(a)10, F.S. is also required if the total cost for all years of the project is \$10 million or more.

A description of each IV-B component is provided within this general template for the benefit of the Schedule IV-B authors. These descriptions and this guidelines section should be removed prior to the submission of the document.

Sections of the Schedule IV-B may be authored in software applications other than MS Word, such as MS Project and Visio. Submission of these documents in their native file formats is encouraged for proper analysis.

The revised Schedule IV-B includes two required templates, the Cost Benefit Analysis and Major Project Risk Assessment workbooks. For all other components of the Schedule IV-B, agencies should submit their own planning documents and tools to demonstrate their level of readiness to implement the proposed IT project. It is also necessary to assemble all Schedule IV-B components into one PDF file for submission to the Florida Fiscal Portal and to ensure that all personnel can open component files and that no component of the Schedule has been omitted.

Submit all component files of the agency's Schedule IV-B in their native file formats to the Office of Policy and Budget and the Legislature at [IT@LASPBS.STATE.FL.US](mailto:IT@LASPBS.STATE.FL.US). Reference the D-3A issue code and title in the subject line.

## II. Schedule IV-B Business Case – Strategic Needs Assessment

### A. Background and Strategic Needs Assessment

*Purpose: To clearly articulate the business-related need(s) for the proposed project.*

**Per instructions, there have not been significant changes to the Business Case from FY 14-15 submission. However, please see attached Business Case in Appendix A for reference.**

1. Business Need
2. Business Objectives

*NOTE: For IT projects with total cost in excess of \$10 million, the business objectives described in this section must be consistent with existing or proposed substantive policy required in s. 216.023(4)(a)10, F.S.*

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### B. Baseline Analysis

*Purpose: To establish a basis for understanding the business processes, stakeholder groups, and current technologies that will be affected by the project and the level of business transformation that will be required for the project to be successful.*

**Per instructions, there have not been significant changes to the Business Case from FY 14-15 submission. However, please see attached Business Case in Appendix A for reference.**

1. Current Business Process(es)

*NOTE: If an agency has completed a workflow analysis, include through file insertion or attachment the analyses documentation developed and completed by the agency.*

---

2. Assumptions and Constraints

### C. Proposed Business Process Requirements

*Purpose: To establish a basis for understanding what business process requirements the proposed solution must meet in order to select an appropriate solution for the project.*

**Per instructions, there have not been significant changes to the Business Case from FY 14-15 submission. However, please see attached Business Case in Appendix A for reference.**

1. Proposed Business Process Requirements
2. Business Solution Alternatives
3. Rationale for Selection
4. Recommended Business Solution

*NOTE: For IT projects with total cost in excess of \$10 million, the project scope described in this section must be consistent with existing or proposed substantive policy required in s. 216.023(4)(a)10, F.S.*

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### D. Functional and Technical Requirements

*Purpose: To identify the functional and technical system requirements that must be met by the project.*

**Please see attached Statement of Need in 3.1 of Appendix A for details**

Include through file insertion or attachment the functional and technical requirements analyses documentation developed and completed by the agency.

### III. Success Criteria

*Purpose: To identify the critical results, both outputs and outcomes, that must be realized for the project to be considered a success.*

**Per instructions, there have not been significant changes to the Success/Benefits Realization Table from FY 14-15 submission. However, please see attached Benefits Realization Table in Appendix E for reference.**

SUCCESS CRITERIA TABLE				
#	Description of Criteria	How will the Criteria be measured/assessed?	Who benefits?	Realization Date (MM/YY)
1				
2				

### IV. Schedule IV-B Benefits Realization and Cost Benefit Analysis

#### A. Benefits Realization Table

*Purpose: To calculate and declare the tangible benefits compared to the total investment of resources needed to support the proposed IT project.*

**Per instructions, there have not been significant changes to the Success/Benefits Realization Table from FY 14-15 submission. However, please see attached Benefits Realization Table in Appendix E for reference.**

For each tangible benefit, identify the recipient of the benefit, how and when it is realized, how the realization will be measured, and how the benefit will be measured to include estimates of tangible benefit amounts.

BENEFITS REALIZATION TABLE					
#	Description of Benefit	Who receives the benefit?	How is benefit realized?	How is the realization of the benefit measured?	Realization Date (MM/YY)
1					
2					

#### B. Cost Benefit Analysis (CBA)

*Purpose: To provide a comprehensive financial prospectus specifying the project’s tangible benefits, funding requirements, and proposed source(s) of funding.*

**Per instructions, there have not been significant changes to the Cost Benefit Analysis Tool from FY 14-15 submission. However, please see attached Cost Benefit Analysis Tool in Appendix F for reference.**

**1. The Cost-Benefit Analysis Forms**

The chart below summarizes the required CBA Forms which are included as Appendix A on the Florida Fiscal Portal and must be completed and submitted with the Schedule IV-B.

Cost Benefit Analysis	
Form	Description of Data Captured
CBA Form 1 - Net Tangible Benefits	<p>Agency Program Cost Elements: Existing program operational costs versus the expected program operational costs resulting from this project. The agency needs to identify the expected changes in operational costs for the program(s) that will be impacted by the proposed project.</p> <p>Tangible Benefits: Estimates for tangible benefits resulting from implementation of the proposed IT project, which correspond to the benefits identified in the Benefits Realization Table. These estimates appear in the year the benefits will be realized.</p>
CBA Form 2 - Project Cost Analysis	<p>Baseline Project Budget: Estimated project costs.</p> <p>Project Funding Sources: Identifies the planned sources of project funds, e.g., General Revenue, Trust Fund, Grants.</p> <p>Characterization of Project Cost Estimate.</p>
CBA Form 3 - Project Investment Summary	<p>Investment Summary Calculations: Summarizes total project costs and net tangible benefits and automatically calculates:</p> <ul style="list-style-type: none"> <li>• Return on Investment</li> <li>• Payback Period</li> <li>• Breakeven Fiscal Year</li> <li>• Net Present Value</li> <li>• Internal Rate of Return</li> </ul>

**V. Schedule IV-B Major Project Risk Assessment**

*Purpose: To provide an initial high-level assessment of overall risk incurred by the project to enable appropriate risk mitigation and oversight and to improve the likelihood of project success. The risk assessment summary identifies the overall level of risk associated with the project and provides an assessment of the project’s alignment with business objectives.*

*NOTE: All multi-year projects must update the Risk Assessment Component of the Schedule IV-B along with any other components that have been changed from the original Feasibility Study.*

The Risk Assessment Tool and Risk Assessment Summary are included in Appendix B on the Florida Fiscal Portal and must be completed and submitted with the agency’s Schedule IV-B.

**A. Risk Assessment Summary**

**B. Per instructions, there have not been significant changes to the Risk Assessment Tool from FY 14-15 submission. However, please see attached Risk Assessment Tool in Appendix B for reference.**

Appendix B on the Florida Fiscal Portal includes the Risk Assessment Summary. After answering the questions on the Risk Assessment Tool, the Risk Assessment Summary is automatically populated.





## VI. Schedule IV-B Technology Planning

*Purpose: To ensure there is close alignment with the business and functional requirements and the selected technology*

**Per instructions, there have not been significant changes to the Business Case from FY 14-15 submission. However, please see attached Business Case in Appendix A for reference.**

### A. Current Information Technology Environment

1. Current System
  - a. Description of current system
  - b. Current system resource requirements
  - c. Current system performance
2. Information Technology Standards

### B. Current Hardware and/or Software Inventory

*NOTE: Current customers of the state data center would obtain this information from the data center.*

---

### C. Proposed Solution Description

1. Summary description of proposed system
2. Resource and summary level funding requirements for proposed solution (if known)

### D. Capacity Planning

*(historical and current trends versus projected requirements)*

## VII. Schedule IV-B Project Management Planning

*Purpose: To require the agency to provide evidence of its thorough project planning and provide the tools the agency will use to carry out and manage the proposed project. The level of detail must be appropriate for the project's scope and complexity.*

Include through file insertion or attachment the agency's project management plan and any associated planning tools/documents.

*NOTE: For IT projects with total cost in excess of \$10 million, the project scope, business objectives, and timelines described in this section must be consistent with existing or proposed substantive policy required in s. 216.023(4)(a)10, F.S.*

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**Per instructions, there have not been significant changes to the Business Case, Project Charter, Work Breakdown Structure, Project Management Plan from FY 14-15 submission. However, please see attached Business Case in Appendix A, Project Charter in Appendix C, Project Management Plan in Appendix D and Work Breakdown Structure in Appendix G and for reference.**

## VIII. Appendices

Number and include all required spreadsheets along with any other tools, diagrams, charts, etc. chosen to accompany and support the narrative data provided by the agency within the Schedule IV-B.



**BUSINESS CASE**  
**LINE OF BUSINESS APPLICATION**  
**EVV & CLIENT DATA MANAGEMENT SYSTEM PROJECT**

**DATE:**  
**OCTOBER 15, 2014**

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## 1. EXECUTIVE SUMMARY

This business case outlines how the Client Data Management System (CDMS) line of business project will address current challenges facing the Agency, benefits of the proposed project, and justification for the project. The business case also discusses detailed project goals, assumptions, constraints, and alternative options.

### 1.1. Issue

The Agency for Persons with Disabilities (APD) serves a client base of approximately 54,000 clients of which approximately 32,000 currently receive services and 22,000 are on a wait list receiving little to no services. The Agency has a budget of just over one billion dollars. The vast majority of this budget is utilized for services in the Home and Community Based Waiver program which is a federally matched program under the Centers for Medicare and Medicaid Services (CMS). The state is required to track, measure, report and provide quality improvement processes for 32 specific program performance measures in order to ensure the program funding can continue. The CMS further requires that the state maintain a quality improvement system that is dependent on data collection, data analysis, and reporting.

The Centers for Medicare & Medicaid Services predicted~~s~~ in 2013 the projected losses due to fraud, waste, or abuse will be between 3 – 10% of Florida's Medicaid budget. This fraudulent activity has a direct impact on APD's capacity to serve persons with disabilities and protect the investment of Florida's taxpayers. The Agency for Persons with Disabilities currently relies heavily on manual processes as well as disparate, decentralized and in many cases antiquated systems to collect, analyze and report data consistently. The Agency utilizes hundreds of spreadsheets to collect and analyze data which is extremely time consuming for staff and providers and prone to errors and inaccuracies. Overall, the current environment is inefficient, disposed to fraud and abuse and makes it very difficult to track client outcomes.

### 1.2. Anticipated Outcomes

The proposed system will allow APD to provide a higher quality of service to clients while reducing fraud and protecting taxpayer dollars. It will give APD the ability to collect, track, report and analyze critical data to prevent fraud, waste or abuse and increase Agency oversight of the service system. The new system will provide the Agency with measureable program standards that are tracked, reported and used to improve the service delivery process.

The features of the new integrated system would include:

- Provider verification of authorization to provide specific services and the frequency of units of service to be paid;
- Longitudinal tracking of a client's progress using a specific service or treatment;
- Tracking and verification of potential recoupment issues and collection of funds;

- Tracking of deactivated providers and those that have been reported for abuse or fraud in the past; and
- Tracking and prevention of stacking of services that is duplicative.
- Reduction and prevention of crisis services;
- Projection of a client's future short & long range needs using valid and accurate data;
- Identification of providers incorrectly billing services using "agency" rates if the provider does not qualify for that rate and prevention of future incidents;
- Identification of services billed but not provided such as routinely charging for transportation even when client does not go to daily activity and prevention of future incidents; and
- Identification and prevention of improper billing practices such as:
  1. "Charge – void" scheme: when provider charges for a service on one date five times, then voids three of those,
  2. Providing services when provider's service agreement is out of date or terminated
  3. Refusing to provide required supporting documentation
  4. Using unauthorized rates when billing for services provided.

### **1.3. Recommendation**

The Agency needs an integrated enterprise client data management system that will automate manual processes, collect data at the client specific and provider specific level so analysis, tracking, reporting, fraud prevention and quality improvement processes can be improved. Essential to this data system is the electronic visit verification to ensure that services are delivered as approved by the Agency. In addition, the system will provide an electronic client central record that will contain key data needed to monitor agency performance, provider specific performance and measurable outcomes.

The new system is central to the Agency's process improvement strategy. APD has conducted process mapping sessions of all core service delivery functions. These requirements will provide the agency with performance measures for agency staff and service providers. It is anticipated the new system will provide a significant reduction of manual processes and provide efficiencies and business process improvements essential to the regionalization of the Agency which has been reorganized from 14 area offices to 6 regional offices.

### **1.4. Justification**

This project is essential to gaining efficiency and increasing the effectiveness of the programs and services funded under the Agency. The Agency has over a billion dollar appropriation, serving 54,000 clients, and over 6000 service providers.

The Agency must maintain compliance with the Centers for Medicare and Medicaid (CMS) regarding the home and community based waiver program assurances. There are thirty-two

sub assurances that the state must demonstrate compliance and each assurance requires data to be collected, tracked, analyzed, and action taken to remediate problems that are identified. The Agency over the last several years has struggled to produce the data required to be in compliance with these assurances for two of the last three Evidentiary Reports.

The enterprise data system is an Agency priority in order to increase program accountability, measure outcomes, reduce fraud and to ensure federal funding is maintained for vital services to the clients APD serves.

## 2. BUSINESS CASE ANALYSIS TEAM

The following APD resources comprise the business case analysis team. They are responsible for providing input and direction for the analysis and creation of the project business case.

Role	Description	Name/Title
Executive Sponsor	Provides executive support for the project	Barbara Palmer, Agency Director
Program Office	Provides program support for the project	Denise Arnold, Deputy Director of Programs
Budget /Finance	Provides budget support for the project	<del>Sharon Bradford</del> David Dobbs, Deputy Director of Budget and Planning
Procurement/Contracts	Provides procurement support for the project	Cassandra Jenkins, Contract Manager
Technology Support	Provides all technology support for the project	Mark Ervin, CIO
Project Manager	Manages the business case and project team	<del>Deanna Melean</del> Stephen Boley, Art Barndt, Project Managers
Technical Support	Provides all technical expertise for the project	Ken Peacock, Infrastructure Manager
ISM	Provides security expertise for the project	John Collins, ISM
Software Support	Provides all software support for the project	Sriram Kommu, Applications Manager

## 3. PROBLEM DEFINITION

### 3.1. Problem/Need Statement

APD serves individuals with developmental disabilities in accordance with Chapter 393 F.S. APD is responsible for the rules, policies, and procedures associated with the determination of eligibility, licensing of residential settings, provider development, and the delivery of



services to individuals served by APD programs. APD clients are served in a variety of settings in the community. Clients served in community settings may reside in their own homes, family homes, licensed group homes or foster homes. Many individuals receiving community based services are enrolled in a Home and Community Based Services (HCBS) Medicaid Waivers, which are Federal Medicaid programs allowing the State to use Medicaid funds to serve an individual in a community setting rather than in an institutional placement.

The Agency depends heavily on manual processes for the data collection needed to manage the service delivery system to clients. There are hundreds of spreadsheets utilized by the Agency to collect, analyze, provide oversight and report on services the Agency oversees. The automated systems that do exist are disparate, decentralized and in many cases antiquated. As a result, the Agency has very limited capability to collect, track, report, and analyze critical data for detection and prevention of fraud, waste and abuse and for needed oversight of the service system. Without the ability to adequately provide analysis oversight, and reporting of services to CMS, APD matching funds could be in jeopardy.

The table below depicts the high-level need/problems identified by the Agency which the propose system will address.

Need	Problem/Need Description
Electronic Visit Verification	The Agency currently does not have a reliable and accurate means of verifying when and where a service is being provided and the actual amount of time the provider spends with the individual. In addition, there is no systematic confirmation of service authorizations or alerts to the Agency.
Core Client Central Record to include application and eligibility documentation, demographic information, legal correspondence, medical information.	The Agency does not have an automated Client Central Record. The Client Central Record needs to include: <ul style="list-style-type: none"> <li>○ Legal/Financial (e.g., Consumer Information Sheet, Waiver Eligibility Worksheet, etc.)</li> <li>○ Support Plan and Cost Plan and Individual budget</li> <li>○ Reports from Providers (e.g., Implementation Plans, provider reports)</li> <li>○ Contact Record/Case notes</li> <li>○ Correspondence/Miscellaneous (e.g., Case Transfer Form, Incident Reports)</li> <li>○ Medical (psychological reports, dental, and information used to determined eligibility)</li> </ul>
Provider portal for entry of data, receipt of service authorization and entry of implementation plans to measure service effectiveness.	Each service provider needs the ability to enter data directly into the new system in order to receive service authorizations, document service provision, and provide data on client progress.
Determine Client Waiver Eligibility	The Waiver Eligibility must be completed in its entirety each year. This tool is used to assess the individual’s continuing Level of Care and affirms their ongoing choice to receive community services versus institutionalization.
Provider management directory and provider enrollment	Provider waiver services agreement documents and provider waiver enrollment documentation by service type must be maintained and monitored/renewed every three years.
Rate Management Tracking	Standardized Rates for services must be updated as needed based on rule and law changes. The system must be able to revise rates and allow billing for effective dates of services for up to 12 months past the service delivery date.

<p>Incident Tracking &amp; Management to include medication errors, reactive strategies and death reports</p>	<p>Incident reporting includes a variety of type of incidents for which data must be collected, stored, analyzed and remediated. This includes:</p> <ul style="list-style-type: none"> <li>○ Critical Incident Reports which furnish APD with formal accounts of incidents to drive trend data and responses at the macro and individual level. Monthly aggregate data needs to be compiled and analyzed to report trends in type, location, provider, service and date of incidents. The purpose of this analysis is to identify systemic issues in order to mitigate the recurrence of incidents, and is integral to APD’s quality management activities.</li> <li>○ Medication errors are reported to APD on the Medication Error Form. APD Medical Case Managers (MCM’s) review and follow up on errors reported by providers, WSC, licensing staff and the QIO to determine if corrective actions are necessary.</li> <li>○ The Report of Death Form is used statewide to capture data and information regarding recipient deaths. The form consists of five sections that include basic recipient information, demographics, medical data, narrative or description of events and notifications</li> <li>○ Providers must collect and maintain data on Reactive Strategies used as part of a behavior management plan which includes techniques and procedures that are needed for emergency situations in which the client’s health and safety are being compromised. This includes conducting assessments to determine history of trauma and pre-existing medical conditions that may preclude specific techniques or procedures, and the frequency and surrounding circumstances in which the procedures are used. This data must be directly entered at the service level by the service provider.</li> </ul>
<p>Provider Billing and Reporting</p>	<p>There needs to be an electronic claims billing and tracking system to monitor over 6000 service providers.</p>
<p>Attachment and Document Storage</p>	<p>There are numerous documents such as agency notices to clients, providers, and legal documents that must be maintained for each client and there is a need for document storage of these documents and also the ability to attach documents to the client record.</p>
<p>Integration with other databases CDC+ databases</p>	<p>There are several databases that provide key client information on the Consumer Directed Care Plus Program that must be integrated into the new enterprise system.</p>
<p>Facility licensure and monitoring of licensure compliance and bed availability tracking</p>	<p>There are over 1600 facility licenses that must be monitored monthly and licenses reissued annually depending on the performance of the provider. Currently this data is not collected in an electronic format and therefore the data is not available to trend issues and to remediate the issues systemically.</p>
<p>Remediation tracking of quality assurance citations to include identification of recoupment and corrective action plans.</p>	<p>The Agency needs a mechanism to track identification of possible fraud or possible recoupment of paid claims from a provider. This includes tracking of service authorizations, billing of claims and the resulting void and adjustment of claims data.</p>
<p>Reporting of performance measures to the Centers for Medicare and Medicaid (CMS) for</p>	<p>There are 32 performance measures the must have data collected on for all clients enrolled in the HCBS waiver program. Each assurance</p>

compliance with Home and Community Based Services Waiver requirements.	requires data to be collected, stored, analyzed and remediated on an ongoing basis and must be report to the CMS regularly.
--	---

### 3.2. Organizational Impact

Organizational Impact Category	Organizational Impact
Tools	Will provide agency staff with statewide data access to client information for authorization of services, monitoring of service delivery, tracking and trending of service provision, provider billing and electronic visit verification.
Processes	All business processes will become more efficient with the new system due to electronic access to client records and the ability to measure timeliness of service delivery, agency action, provider performance and program accountability for client outcomes.
Roles and Responsibilities	Will provide greater communication and efficiencies between waiver support coordinators, services providers and the Agency staff since client data will be available in the system and accessed easily by the client’s providers of services. Actions that require agency approval will be efficiently communicated between the providers and the agency.
Hardware/Software	The new system will be accessed through an internet portal which will allow agency staff and providers to enter data and process information more timely. The hardware and software required to access and use the system is standard in most computers.

## 4. TECHNOLOGY

### 4.1. Current Information Technology Environment

#### 4.1.1. Current Systems

The table below lists the current technology environment.

Name of Current System	Description of Current System	Current System Resource Requirements	Current System Performance
ABC (Allocation Budget and Contract Control System)	The Allocation, Budget and Contract Control (ABC) system is an automated and integrated client/budget information system designed to support planning and service provision to individuals with developmental disabilities who are clients of the Agency Persons with Disabilities. Invoices for State funded services and Cost plans for Medicaid Waiver funded services are entered into the system and expenditure information can be tracked and identified for individual consumers. The system also includes the consumer and	Load Balanced Web / Application Server  MS ASP.NET Framework 3.5 AMT Framework  Failover SQL Server Cluster  SQL Server 2005 Databases  Reporting Server  SQL Server Reporting Services	Total Number of Current Users: 1270  Max Number of Concurrent User Sessions Supported: 250

	vendor/provider demographic information.	Windows Server 2008	
iBudget (Individualized Budget) Web System	The iBudget Web System provides a new and better way for the Agency for Persons with Disabilities to manage the Medicaid waiver system for people with developmental disabilities. The iBudget Web System gives APD customers more control and flexibility to choose services that are important to them, while helping the agency to stay within its Medicaid waiver appropriation. Guiding Principles for iBudget are Simplicity, Equity, Self-Direction and Sustainability.	Windows Server 2008 Load Balanced Web / Application Server MS ASP.NET Framework 3.5 MS CRM 4.0 Failover SQL Server Cluster SQL Server 2005 Databases Reporting Server SQL Server Reporting Services Windows Server 2008	Total Number of Current Users:1623 Max Number of Concurrent User Sessions Supported: 400
SETS (Supported Employment Tracking System)	Supported Employment System (SETS) maintains current/prior job and the associated information for Supported Employment Clients and also provide various reports for Central and Area offices	Windows Server 2003 Web / Application Server MS ASP.NET Framework 4.0 SQL Database Server SQL Server 2005 Database Windows Server 2003	Total Number of Current Users: 50 Max Number of Concurrent User Sessions Supported: 50
QSI (Questionnaire for Situational Information)	Questionnaire for Situational Info (QSI) system provides the ability for a QSI assessor to record the information after assessing the APD client living situation and the changes in their needs on a scheduled time frame.	Windows Server 2003 Load Balanced Web / Application Web / Application Server MS ASP.NET Framework 2.0 SQL Database Server SQL Server 2005 Databases Windows Server 2003	Total Number of Current Users: 1418 Max Number of Concurrent User Sessions Supported: 150

#### 4.1.2. Strategic Information Technology Direction

The current line of business applications utilized by APD consists of several disparate and antiquated systems which automate only a small portion of the business and administrative functions of the agency. The systems that are automated often require considerable manual intervention for maintenance, operations, support and integration with other systems. In addition, the vast majority of the business functions required by

the Agency remain manual processes. The current environment is inefficient, costly and does not meet the Agency's needs.

The strategic direction for APD Information Technology is to provide technology solutions that enable the organization to be successful. This task must be undertaken with the constraints of limited budgets and considerable needs. That is, do more with less. To effectively meet these challenges APD IT has considered all options for addressing the line of business technology needs for the Agency and in doing so is strategically moving in the direction of a Commercial Off the Shelf (COTS) solution that is offered as Software as a Service (SaaS).

#### **4.1.3. Information Technology Standards**

See Attachment "Application Development Standards" document for details of current technology standards.

### **4.2. Proposed Solution Description**

#### **4.2.1. Summary Description of Proposed System**

APD has been evaluating options for an enterprise line of business application that will address the needs of the Agency. While the Agency has not finalized vendor selection, the decision has been made to use a commercial-off-the-shelf (COTS) software as a service solution. The list below outlines the salient points for APD's proposed system direction.

- Meets the majority of the Agency requirements without the need for risky and costly custom development
- Lower costs to meet Agency requirements
- Fixed price
- Shortened implementation timeframes resulting in needed functionality being available sooner
- Phased implementation approach allowing for prioritization of implementation of those modules that are most critical to the Agency (e.g. electronic visit verification)
- Easier administration
- Lower cost for operations and maintenance (HW/SW/DR/Hosting)
- Automatic updates and patch management
- Compatibility: All users will have the same version of software.
- Easier collaboration, for the same reason
- Accessibility (can be accessed from any internet connect web browser)
- HIPPA and HITECH compliant
- Statewide training of Providers and Waiver Support Coordinators
- Ongoing helpdesk support to the provider level

#### 4.2.2. Resource and Summary Level Funding Requirements for Proposed System

The strategic direction of the Agency is to select a vendor that utilizes a COTS software solution, which will be purchased and hosted in Software as a Service (SaaS) model. The hardware, software as well as the operations and maintenance of the solution is included in the cost of the service. The exact number of staffing required to augment the solution (e.g. interface, batch, reporting etc.) will be determined when a solution has been finalized. ~~However, the Agency does not anticipate needing any additional resources to augment the solution.~~

#### 4.2.3. Capacity Planning

The goal of capacity planning is to identify the right amount of resources required to meet the Agency’s service demands now and in the future. The strategic direction of the Agency is to select a vendor that utilizes a COTS software solution, which will be purchased and hosted in Software as a Service (SaaS) model. In a SaaS model, capacity planning will be provided by the software vendor based on Agency requirements. The cost to meet the capacity requirements is born by the vendor and included as part of the service. The Agency will utilize a Service Level Agreement with the selected vendor to ensure capacity requirements are met with remedies (financial penalties) for failure to meet agreed upon service levels. The Agency has provided the following capacity requirements for a proposed solution:

- 53,000 Client Records - 5% Potential growth rate annually
- 33,700 Users Accessing System - 2% potential growth annually
- 5,000 Users Accessing System Concurrently - 2% potential growth annually
- 600 GB storage capacity - 10% potential growth annually

#### 4.2.4. Ability of the proposed system to meet projected performance requirements

The Table below outlines the performance objectives for the proposed system and APD’s evaluation system (s) evaluation. The Agency will utilize a Service Level Agreement with the selected vendor to ensure performance requirements are met with remedies (financial penalties) for failure to meet agreed upon service levels.

Performance Objective	Expected Performance requirements	Proposed System Compliance
Number of Users (Waiver Support Coordinators, Service Providers, APD Staff)	33,700 users	Meets or exceeds expected performance requirement
Number of concurrent user sessions	<del>5,000</del> 400 Concurrent user sessions	Meets or exceeds expected performance requirement
Scalability	System is scalable to meet changing performance demands	Meets expected performance requirement
Availability	99.5% system availability	Meets expected performance requirement

Extensibility	System is extensible to meet changing business requirements	Meets expected performance requirement
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### 4.3. Technology Impact of Proposed Technology

The overall impact to technology is expected to be minimal as the proposed technology would employ Software as a Service solution. This solution greatly minimizes the technology impact to technology and the associated resources compared to a more traditional system development lifecycle (SDLC) approach. Please see table below for the technology impact by phase.

Phase	Technology Impact (Low/Med/High)
Phase I – Procurement, Statement of Work, Contract	<b>Low:</b> The primary impact to IT during this phase will be analysis and review to ensure the proposed solution meets APD IT standards and requirements.
Phase II - Project Charter, Project Plan, Project Schedule. Confirm Stakeholders, Communications, Project Kick-Off, Develop Framework for Work Products, Discovery	<b>Low:</b> The primary impact to IT during this phase will be to provide subject matter expertise through discovery and resource alignment for the development of the project schedule.
Phase III – Review Requirements/Design & Perform Gap/Fit Analysis with Vendor Solution	<b>Low:</b> The primary impact to IT during this phase will be to provide subject matter expertise to the project team during the requirements/design review and gap/fit analysis.
Phase IV – Customization/Configuration/Process Realignment to Remediate Gap/Fit	<b>Low:</b> The primary impact to IT during this phase will be to provide subject matter expertise to the project team to assist with remediation efforts.
Phase V – Begin On-Site Training for Regions	<b>Low:</b> The primary impact to IT during this phase will be to receive training on the administration and operations of the proposed system.
Phase VI – Begin Regionally Phased & Prioritized Rollout of Solution Functionality (In order of priority): <ul style="list-style-type: none"> <li>○ EVV module and Client Central Record to include Waiver Eligibility, Support Plan and Service Authorizations and critical incident reporting</li> <li>○ Facility Licensure and monitoring</li> <li>○ Remediation Tracking system</li> <li>○ Provider enrollment</li> <li>○ Client satisfaction</li> </ul>	<b>Med:</b> The primary impact to IT during this phase will be to work with the project team to develop the necessary integration with APD’s existing systems in line with the project functionality roll-out.



Phase	Technology Impact (Low/Med/High)
Phase VII – Replace ABC	<p><b>High:</b> The primary impact to IT during this phase will be to work with the project team to work with the project team to ensure the following:</p> <ul style="list-style-type: none"> <li>○ Required functionality exist in the system to assume the functions of ABC</li> <li>○ Develop and execute a data conversion plan for ABC</li> <li>○ Develop the necessary batch jobs currently existing in ABC</li> </ul>
Phase VIII – Replace iBudget	<p><b>High:</b> The primary impact to IT during this phase will be to work with the project team to work with the project team to ensure the following:</p> <ul style="list-style-type: none"> <li>○ Required functionality exist in the system to assume the functions of iBudget</li> <li>○ Develop and execute a data conversion plan for iBudget</li> <li>○ Develop the necessary batch jobs currently existing in iBudget</li> </ul>
Closeout/Project Completion	<p><b>Low:</b> The primary impact to IT during this phase will be to receive any final training for operations and administration and to ensure there is appropriate documentation for the system.</p>

## 5. PROJECT OVERVIEW

The CDMS project is being undertaken to increase the Agencies ability to collect and report service specific data from providers, to ensure authorized and timely service delivery to APD clients and provide measurable provider outcomes. It addition, it is expected to increase efficiency by collecting, processing, and storing client information in a consistent and effective manner. An essential part of this vision is electronic visit verification, which feeds into an electronic client central record that will contain the key data needed to monitor client progress, as well as agency, and provider performance and fiscal accountability.

In support of and in alignment with this project, the Agency over the last 8 months has embarked on a comprehensive process and system improvement effort, which includes new system development and business process improvement initiatives, as well as operational reorganization and consolidation and is moving from 14 area offices to 6 regional offices. Implementation of the new system will be key to realizing the efficiencies envisioned as part of this effort.

### 5.1. Goals and Objectives

The Agency’s vision is to have a single, secure, integrated, person centered system that can collect, coordinate, store and evaluate all the data within the Support Plan/Cost Plan cycle and related processes. At the center of this proposed system is the electronic visit



verification which will ensure services are delivered as agreed upon thereby increasing accountability and reducing fraud. This component of the system will feed into an electronic client central record that will contain the key data needed to monitor client progress as well as Agency and provider performance and measurable outcomes.

It is anticipated this effort will provide the following goals and objectives:

Business Goal/Objective	Description
Fraud Prevention	<ul style="list-style-type: none"> <li>▪ Electronic Visit Verification (EVV) of home based services to verify authorization to provide specific services and the frequency of units of service to be paid.</li> <li>▪ Identification, tracking, management and disposition of recoupment issues involving collection of funds.</li> <li>▪ Tracking of deactivated providers, those that have been reported for abuse or fraud in the past, and those subject to correction action/remediation plans.</li> </ul>
Measurable Outcomes	<ul style="list-style-type: none"> <li>▪ Longitudinal tracking of a client’s progress using a specific service or treatment.</li> <li>▪ Service utilization reviews that ensure the most cost effective services are provided</li> <li>▪ Measurement of client’s progress toward employment outcome</li> </ul>
Analysis & Reporting	<ul style="list-style-type: none"> <li>▪ Reporting and data analysis of service provision and provider billings to:                             <ul style="list-style-type: none"> <li>○ identify and prevent stacking of services that are duplicative</li> <li>○ project a client’s future short &amp; long range needs using valid data</li> </ul> </li> <li>▪ Reporting of performance measures to the Centers for Medicare and Medicaid for continuation of the Home and Community Based Services Waiver</li> </ul>
More Efficient Oversight	<ul style="list-style-type: none"> <li>▪ Quality Assurance reviews, documentation and disposition.</li> </ul>
Improved Business Process Efficiencies	<ul style="list-style-type: none"> <li>▪ Internet based portal for all Agency staff and service providers to access client data, record client data, and report to the agency</li> <li>▪ Electronic access for service providers of service authorizations</li> <li>▪ Timely and efficient processing of service requests ‘</li> <li>▪ Timely and efficient monthly monitoring of licensed facilities</li> <li>▪ Timely and efficient eligibility determination</li> </ul>

## 5.2. Project Assumptions

Certain assumptions and premises need to be made to identify and estimate the required tasks and timing for the project. Based on the current information available, the project assumptions are listed below:

- The project is the top strategic IT initiative for the Agency.

- The project has executive-level support and backing.
- There is commitment from all stakeholders to the project objectives, goals and timelines.
- Funding is available for the project.
- Ongoing coordination and communication between project team and stakeholders.
- Project schedule will be strictly adhered to and tasks completed as scheduled, to meet interim milestones deliverables.
- Commitment to speed of decision-making at all levels.
- The APD CIO will provide timely approval for each phase of the project.
- Agency business and technical subject matter experts will be made available by APD Executive Sponsors to ensure all project milestones are successfully completed on time.
- Area staff, central offices staff and provider stakeholders will be involved in user acceptance testing of the pilot system.

If an assumption is invalidated at a later date, then the activities and estimates in the project plan will be adjusted accordingly.

### 5.3. Project Constraints

The following constraints apply to the Client Data Management System Project. As project planning begins and more constraints are identified, they will be added accordingly.

- There is limited budget for this project.

### 5.4. Major Project Milestones

The following are the major project milestones identified at this time. As the project planning moves forward and the schedule is developed, the milestones and their target completion dates will be modified, adjusted, and finalized as necessary to establish the baseline schedule.

Milestones/Deliverables	Target End Date
Phase I – Procurement, Statement of Work, Contract	December 31, 201 <del>4</del> <sup>3</sup>
Phase II - Project Charter, Project Plan, Project Kick-Off, Discovery, Project Schedule, Migration schedule	<del>January 31, 2014</del> February 28, 2015
Phase III – Review Requirements/Design & Perform Gap/Fit Analysis with Vendor Solution	March 31, 201 <del>4</del> <sup>5</sup>
Phase IV – Customization/Configuration/Process Realignment to Remediate Gap/Fit	April 30, 201 <del>4</del> <sup>5</sup>
Phase V – On-Site Training for Regions	<del>June-November</del> 15, 201 <del>4</del> <sup>5</sup>

Milestones/Deliverables	Target End Date
Phase VI – Regionally Phased & Prioritized Rollout of Solution Functionality (In order of priority) <ul style="list-style-type: none"> <li>○ EVV module and Client Central Record to include Waiver Eligibility, Support Plan and Service Authorizations and critical incident reporting</li> <li>○ Facility Licensure and monitoring</li> <li>○ Remediation Tracking system</li> <li>○ Provider enrollment</li> <li>○ Client satisfaction</li> </ul>	<del>July 1, 2014</del> <u>January 31, 2016</u>
Phase VII – Replace ABC	<del>January-June 15, 2017</del>
Phase VIII – Replace iBudget	June 30, 201 <del>8</del> <u>5</u>
Closeout/Project Completion	July 31, 201 <del>8</del> <u>5</u>

## 6. STRATEGIC ALIGNMENT

The CDMS project is in direct support of several of the Agency’s Strategic Plan initiatives. By directly supporting the strategic plan, this project will greatly improve APD’s ability to reduce fraud and overpayment, more effectively and efficiently serve our clients, improve oversight of providers, monitor outcomes and increase APD’s ability to provide analysis and reporting to key stakeholders (CMS, Governors Office, Legislature, etc.).

Plan Name	Goals/Objectives
APD Strategic Plan	Improve customer satisfaction through better customer service.
APD Strategic Plan	Foster sustainability via reform of the Medicaid finance structure and through supports and services for clients through public private partnerships and community development.
APD Strategic Plan	Increase accountability via better data systems and close matching between budget and programs.
APD Strategic Plan	Serve individuals on the waitlist as funds become available and through information and education on existing community and other resources.

## 7. COST ANALYSIS

Please see attached cost analysis.

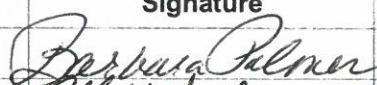
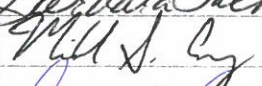
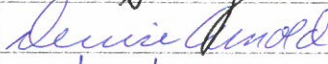
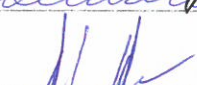
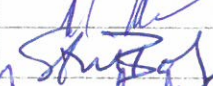
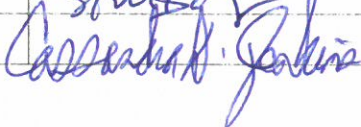
## 8. ALTERNATIVES ANALYSIS

The following alternative options have been considered to address the Agency challenges identified in this business case. These alternatives were not selected for a number of reasons which are also explained below.

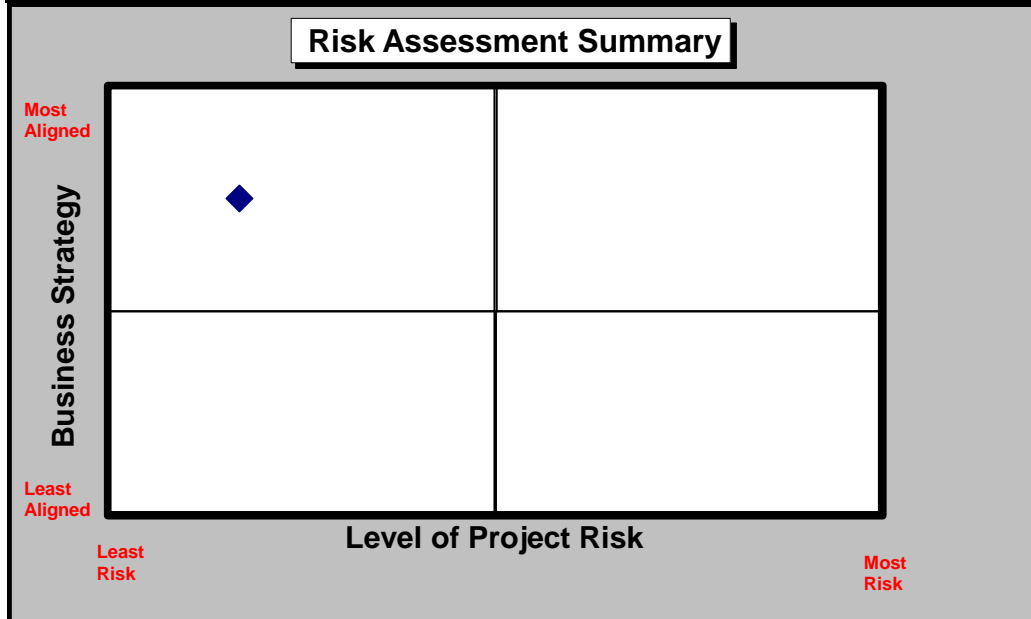
No Project (Status Quo)	Reasons For Not Selecting Alternative
Keep the current systems in place	<ul style="list-style-type: none"> <li>▪ Current systems do not meet federal CMS assurances</li> <li>▪ Agency is heavily dependent on inefficient manual processes</li> <li>▪ Existing functionality of automated system does not meet Agency needs</li> <li>▪ Disparate and antiquated technology</li> <li>▪ Lacking automated controls to effectively reduce fraud and abuse</li> </ul>
Alternative 1	Reasons For Not Selecting Alternative
Provide Services In-House	<ul style="list-style-type: none"> <li>▪ Cost prohibitive</li> <li>• Long implementation lifecycle</li> <li>• Lack of resources</li> <li>• Lack of expertise</li> <li>• Custom development projects are very high risk</li> </ul>

### 9. APPROVALS

The signatures of the people below indicate an understanding in the purpose and content of this document by those signing it. By signing this document you indicate that you approve of the proposed project outlined in this business case and that the next steps may be taken to create a formal project in accordance with the details outlined herein.

Approver Name	Title	Signature	Date
Barbara Palmer	Agency Director		10/15/14
Michael Ayers	Chief of Staff		10/15/14
Denise Arnold	Deputy Director of Programs		10/15/14
<del>Sharon Bradford</del> David Dobbs	Deputy Director of Budget and Planning		10/15/2014
Mark Ervin <sup>Stephen Boley</sup>	CIO		10/15/14
Cassandra Jenkins	Contracts		10/15/2014

<b>Project</b>	<i>Client Data Management System Project</i>	
<b>Agency</b>	<i>APD</i>	
<b>FY 2015-16 LBR Issue Code:</b>	<b>FY 2015-16 LBR Issue Title:</b>	
<i>Issue Code</i>	<i>Issue Title</i>	
<b>Risk Assessment Contact Info (Name, Phone #, and E-mail Address):</b>		
<i>David Dobbs-----414-0658 ----- David.Dobbs@apdcares.org</i>		
<b>Executive Sponsor</b>	<i>Barbara Palmer</i>	
<b>Project Manager</b>	<i>Stephen Boley</i>	
<b>Prepared By</b>	<i>APD</i>	<i>10142014</i>



<b>Project Risk Area Breakdown</b>	
<b>Risk Assessment Areas</b>	<b>Risk Exposure</b>
Strategic Assessment	<b>MEDIUM</b>
Technology Exposure Assessment	LOW
Organizational Change Management Assessment	LOW
Communication Assessment	LOW
Fiscal Assessment	LOW
Project Organization Assessment	LOW
Project Management Assessment	LOW
Project Complexity Assessment	<b>MEDIUM</b>
<b>Overall Project Risk</b>	
	<b>LOW</b>

Agency: APD

Project: Client Data Management System Project

Section 1 -- Strategic Area			
#	Criteria	Values	Answer
1.01	Are project objectives clearly aligned with the agency's legal mission?	0% to 40% -- Few or no objectives aligned	81% to 100% -- All or nearly all objectives aligned
		41% to 80% -- Some objectives aligned	
		81% to 100% -- All or nearly all objectives aligned	
1.02	Are project objectives clearly documented and understood by all stakeholder groups?	Not documented or agreed to by stakeholders	Documented with sign-off by stakeholders
		Informal agreement by stakeholders	
		Documented with sign-off by stakeholders	
1.03	Are the project sponsor, senior management, and other executive stakeholders actively involved in meetings for the review and success of the project?	Not or rarely involved	Project charter signed by executive sponsor and executive team actively engaged in steering committee meetings
		Most regularly attend executive steering committee meetings	
		Project charter signed by executive sponsor and executive team actively engaged in steering committee meetings	
1.04	Has the agency documented its vision for how changes to the proposed technology will improve its business processes?	Vision is not documented	Vision is completely documented
		Vision is partially documented	
		Vision is completely documented	
1.05	Have all project business/program area requirements, assumptions, constraints, and priorities been defined and documented?	0% to 40% -- Few or none defined and documented	81% to 100% -- All or nearly all defined and documented
		41% to 80% -- Some defined and documented	
		81% to 100% -- All or nearly all defined and documented	
1.06	Are all needed changes in law, rule, or policy identified and documented?	No changes needed	Changes are identified in concept only
		Changes unknown	
		Changes are identified in concept only	
		Changes are identified and documented	
		Legislation or proposed rule change is drafted	
1.07	Are any project phase or milestone completion dates fixed by outside factors, e.g., state or federal law or funding restrictions?	Few or none	Few or none
		Some	
		All or nearly all	
1.08	What is the external (e.g. public) visibility of the proposed system or project?	Minimal or no external use or visibility	Moderate external use or visibility
		Moderate external use or visibility	
		Extensive external use or visibility	
1.09	What is the internal (e.g. state agency) visibility of the proposed system or project?	Multiple agency or state enterprise visibility	Single agency-wide use or visibility
		Single agency-wide use or visibility	
		Use or visibility at division and/or bureau level only	
1.10	Is this a multi-year project?	Greater than 5 years	Between 1 and 3 years
		Between 3 and 5 years	
		Between 1 and 3 years	
		1 year or less	

Agency: APD

Project: Client Data Management System Project

Section 2 -- Technology Area			
#	Criteria	Values	Answer
2.01	Does the agency have experience working with, operating, and supporting the proposed technology in a production environment?	Read about only or attended conference and/or vendor presentation	Installed and supported production system more than 3 years
		Supported prototype or production system less than 6 months	
		Supported production system 6 months to 12 months	
		Supported production system 1 year to 3 years	
		Installed and supported production system more than 3 years	
2.02	Does the agency's internal staff have sufficient knowledge of the proposed technology to implement and operate the new system?	External technical resources will be needed for implementation and operations	External technical resources will be needed for implementation and operations
		External technical resources will be needed through implementation only	
		Internal resources have sufficient knowledge for implementation and operations	
2.03	Have all relevant technology alternatives/ solution options been researched, documented and considered?	No technology alternatives researched	All or nearly all alternatives documented and considered
		Some alternatives documented and considered	
		All or nearly all alternatives documented and considered	
2.04	Does the proposed technology comply with all relevant agency, statewide, or industry technology standards?	No relevant standards have been identified or incorporated into proposed technology	Proposed technology solution is fully compliant with all relevant agency, statewide, or industry standards
		Some relevant standards have been incorporated into the proposed technology	
		Proposed technology solution is fully compliant with all relevant agency, statewide, or industry standards	
2.05	Does the proposed technology require significant change to the agency's existing technology infrastructure?	Minor or no infrastructure change required	Minor or no infrastructure change required
		Moderate infrastructure change required	
		Extensive infrastructure change required	
		Complete infrastructure replacement	
2.06	Are detailed hardware and software capacity requirements defined and documented?	Capacity requirements are not understood or defined	Capacity requirements are based on historical data and new system design specifications and performance requirements
		Capacity requirements are defined only at a conceptual level	
		Capacity requirements are based on historical data and new system design specifications and performance requirements	



Agency: APD

Project: Client Data Management System Project

Section 3 -- Organizational Change Management Area			
#	Criteria	Values	Answer
3.01	What is the expected level of organizational change that will be imposed within the agency if the project is successfully implemented?	Extensive changes to organization structure, staff or business processes	Moderate changes to organization structure, staff or business processes
		Moderate changes to organization structure, staff or business processes	
		Minimal changes to organization structure, staff or business processes structure	
3.02	Will this project impact essential business processes?	Yes	Yes
		No	
3.03	Have all business process changes and process interactions been defined and documented?	0% to 40% -- Few or no process changes defined and documented	81% to 100% -- All or nearly all processes defined and documented
		41% to 80% -- Some process changes defined and documented	
		81% to 100% -- All or nearly all processes defined and documented	
3.04	Has an Organizational Change Management Plan been approved for this project?	Yes	Yes
		No	
3.05	Will the agency's anticipated FTE count change as a result of implementing the project?	Over 10% FTE count change	Less than 1% FTE count change
		1% to 10% FTE count change	
		Less than 1% FTE count change	
3.06	Will the number of contractors change as a result of implementing the project?	Over 10% contractor count change	Less than 1% contractor count change
		1 to 10% contractor count change	
		Less than 1% contractor count change	
3.07	What is the expected level of change impact on the citizens of the State of Florida if the project is successfully implemented?	Extensive change or new way of providing/receiving services or information)	Minor or no changes
		Moderate changes	
		Minor or no changes	
3.08	What is the expected change impact on other state or local government agencies as a result of implementing the project?	Extensive change or new way of providing/receiving services or information	Minor or no changes
		Moderate changes	
		Minor or no changes	
3.09	Has the agency successfully completed a project with similar organizational change requirements?	No experience/Not recently (>5 Years)	Recently completed project with greater change requirements
		Recently completed project with fewer change requirements	
		Recently completed project with similar change requirements	
		Recently completed project with greater change requirements	

Agency: Agency Name

Project: Project Name

Section 4 -- Communication Area			
#	Criteria	Value Options	Answer
4.01	Has a documented Communication Plan been approved for this project?	Yes	Yes
		No	
4.02	Does the project Communication Plan promote the collection and use of feedback from management, project team, and business stakeholders (including end users)?	Negligible or no feedback in Plan	Proactive use of feedback in Plan
		Routine feedback in Plan	
		Proactive use of feedback in Plan	
4.03	Have all required communication channels been identified and documented in the Communication Plan?	Yes	Yes
		No	
4.04	Are all affected stakeholders included in the Communication Plan?	Yes	Yes
		No	
4.05	Have all key messages been developed and documented in the Communication Plan?	Plan does not include key messages	Some key messages have been developed
		Some key messages have been developed	
		All or nearly all messages are documented	
4.06	Have desired message outcomes and success measures been identified in the Communication Plan?	Plan does not include desired messages outcomes and success measures	Success measures have been developed for some messages
		Success measures have been developed for some messages	
		All or nearly all messages have success measures	
4.07	Does the project Communication Plan identify and assign needed staff and resources?	Yes	Yes
		No	

Agency: APD

Project: Client Data Management System Project

Section 5 -- Fiscal Area			
#	Criteria	Values	Answer
5.01	Has a documented Spending Plan been approved for the entire project lifecycle?	Yes	Yes
		No	
5.02	Have all project expenditures been identified in the Spending Plan?	0% to 40% -- None or few defined and documented	81% to 100% -- All or nearly all defined and documented
		41% to 80% -- Some defined and documented	
		81% to 100% -- All or nearly all defined and documented	
5.03	What is the estimated total cost of this project over its entire lifecycle?	Unknown	Between \$500K and \$1,999,999
		Greater than \$10 M	
		Between \$2 M and \$10 M	
		Between \$500K and \$1,999,999	
		Less than \$500 K	
5.04	Is the cost estimate for this project based on quantitative analysis using a standards-based estimation model?	Yes	Yes
		No	
5.05	What is the character of the cost estimates for this project?	Detailed and rigorous (accurate within ±10%)	Detailed and rigorous (accurate within ±10%)
		Order of magnitude – estimate could vary between 10-100%	
		Placeholder – actual cost may exceed estimate by more than 100%	
5.06	Are funds available within existing agency resources to complete this project?	Yes	No
		No	
5.07	Will/should multiple state or local agencies help fund this project or system?	Funding from single agency	Funding from single agency
		Funding from local government agencies	
		Funding from other state agencies	
5.08	If federal financial participation is anticipated as a source of funding, has federal approval been requested and received?	Neither requested nor received	Requested and received
		Requested but not received	
		Requested and received	
		Not applicable	
5.09	Have all tangible and intangible benefits been identified and validated as reliable and achievable?	Project benefits have not been identified or validated	All or nearly all project benefits have been identified and validated
		Some project benefits have been identified but not validated	
		Most project benefits have been identified but not validated	
		All or nearly all project benefits have been identified and validated	
5.10	What is the benefit payback period that is defined and documented?	Within 1 year	Within 3 years
		Within 3 years	
		Within 5 years	
		More than 5 years	
		No payback	
5.11	Has the project procurement strategy been clearly determined and agreed to by affected stakeholders?	Procurement strategy has not been identified and documented	Stakeholders have reviewed and approved the proposed procurement strategy
		Stakeholders have not been consulted re: procurement strategy	
		Stakeholders have reviewed and approved the proposed procurement strategy	
5.12	What is the planned approach for acquiring necessary products and solution services to successfully complete the project?	Time and Expense (T&E)	Firm Fixed Price (FFP)
		Firm Fixed Price (FFP)	
		Combination FFP and T&E	

Agency: APD

Project: Client Data Management System Project

Section 5 -- Fiscal Area			
#	Criteria	Values	Answer
5.13	What is the planned approach for procuring hardware and software for the project?	Timing of major hardware and software purchases has not yet been determined	Just-in-time purchasing of hardware and software is documented in the project schedule
		Purchase all hardware and software at start of project to take advantage of one-time discounts	
		Just-in-time purchasing of hardware and software is documented in the project schedule	
5.14	Has a contract manager been assigned to this project?	No contract manager assigned	Contract manager assigned is not the procurement manager or the project manager
		Contract manager is the procurement manager	
		Contract manager is the project manager	
		Contract manager assigned is not the procurement manager or the project manager	
5.15	Has equipment leasing been considered for the project's large-scale computing purchases?	Yes	Yes
		No	
5.16	Have all procurement selection criteria and outcomes been clearly identified?	No selection criteria or outcomes have been identified	All or nearly all selection criteria and expected outcomes have been defined and documented
		Some selection criteria and outcomes have been defined and documented	
		All or nearly all selection criteria and expected outcomes have been defined and documented	
5.17	Does the procurement strategy use a multi-stage evaluation process to progressively narrow the field of prospective vendors to the single, best qualified candidate?	Procurement strategy has not been developed	Multi-stage evaluation and proof of concept or prototype planned/used to select best qualified vendor
		Multi-stage evaluation not planned/used for procurement	
		Multi-stage evaluation and proof of concept or prototype planned/used to select best qualified vendor	
5.18	For projects with total cost exceeding \$10 million, did/will the procurement strategy require a proof of concept or prototype as part of the bid response?	Procurement strategy has not been developed	Not applicable
		No, bid response did/will not require proof of concept or prototype	
		Yes, bid response did/will include proof of concept or prototype	
		Not applicable	

Agency: APD

Project: Client Data Management System Project

Section 6 -- Project Organization Area			
#	Criteria	Values	Answer
6.01	Is the project organization and governance structure clearly defined and documented within an approved project plan?	Yes	Yes
		No	
6.02	Have all roles and responsibilities for the executive steering committee been clearly identified?	None or few have been defined and documented	All or nearly all have been defined and documented
		Some have been defined and documented	
		All or nearly all have been defined and documented	
6.03	Who is responsible for integrating project deliverables into the final solution?	Not yet determined	System Integrator (contractor)
		Agency	
		System Integrator (contractor)	
6.04	How many project managers and project directors will be responsible for managing the project?	3 or more	3 or more
		2	
		1	
6.05	Has a project staffing plan specifying the number of required resources (including project team, program staff, and contractors) and their corresponding roles, responsibilities and needed skill levels been developed?	Needed staff and skills have not been identified	Some or most staff roles and responsibilities and needed skills have been identified
		Some or most staff roles and responsibilities and needed skills have been identified	
		Staffing plan identifying all staff roles, responsibilities, and skill levels have been documented	
6.06	Is an experienced project manager dedicated fulltime to the project?	No experienced project manager assigned	Yes, experienced project manager dedicated full-time, 100% to project
		No, project manager is assigned 50% or less to project	
		No, project manager assigned more than half-time, but less than full-time to project	
		Yes, experienced project manager dedicated full-time, 100% to project	
6.07	Are qualified project management team members dedicated full-time to the project	None	Yes, business, functional or technical experts dedicated full-time, 100% to project
		No, business, functional or technical experts dedicated 50% or less to project	
		No, business, functional or technical experts dedicated more than half-time but less than full-time to project	
		Yes, business, functional or technical experts dedicated full-time, 100% to project	
6.08	Does the agency have the necessary knowledge, skills, and abilities to staff the project team with in-house resources?	Few or no staff from in-house resources	Mostly staffed from in-house resources
		Half of staff from in-house resources	
		Mostly staffed from in-house resources	
		Completely staffed from in-house resources	
6.09	Is agency IT personnel turnover expected to significantly impact this project?	Minimal or no impact	Minimal or no impact
		Moderate impact	
		Extensive impact	
6.10	Does the project governance structure establish a formal change review and control board to address proposed changes in project scope, schedule, or cost?	Yes	Yes
		No	
6.11	Are all affected stakeholders represented by functional manager on the change review and control board?	No board has been established	Yes, all stakeholders are represented by functional manager
		No, only IT staff are on change review and control board	
		No, all stakeholders are not represented on the board	
		Yes, all stakeholders are represented by functional manager	

Section 7 -- Project Management Area			
#	Criteria	Values	Answer
7.01	Does the project management team use a standard commercially available project management methodology to plan, implement, and control the project?	No	Yes
		Project Management team will use the methodology selected by the systems integrator	
		Yes	
7.02	For how many projects has the agency successfully used the selected project management methodology?	None	More than 3
		1-3	
		More than 3	
7.03	How many members of the project team are proficient in the use of the selected project management methodology?	None	All or nearly all
		Some	
		All or nearly all	
7.04	Have all requirements specifications been unambiguously defined and documented?	0% to 40% -- None or few have been defined and documented	81% to 100% -- All or nearly all have been defined and documented
		41 to 80% -- Some have been defined and documented	
		81% to 100% -- All or nearly all have been defined and documented	
7.05	Have all design specifications been unambiguously defined and documented?	0% to 40% -- None or few have been defined and documented	81% to 100% -- All or nearly all have been defined and documented
		41 to 80% -- Some have been defined and documented	
		81% to 100% -- All or nearly all have been defined and documented	
7.06	Are all requirements and design specifications traceable to specific business rules?	0% to 40% -- None or few are traceable	41 to 80% -- Some are traceable
		41 to 80% -- Some are traceable	
		81% to 100% -- All or nearly all requirements and specifications are traceable	
7.07	Have all project deliverables/services and acceptance criteria been clearly defined and documented?	None or few have been defined and documented	All or nearly all deliverables and acceptance criteria have been defined and documented
		Some deliverables and acceptance criteria have been defined and documented	
		All or nearly all deliverables and acceptance criteria have been defined and documented	
7.08	Is written approval required from executive sponsor, business stakeholders, and project manager for review and sign-off of major project deliverables?	No sign-off required	Review and sign-off from the executive sponsor, business stakeholder, and project manager are required on all major project deliverables
		Only project manager signs-off	
		Review and sign-off from the executive sponsor, business stakeholder, and project manager are required on all major project deliverables	
7.09	Has the Work Breakdown Structure (WBS) been defined to the work package level for all project activities?	0% to 40% -- None or few have been defined to the work package level	0% to 40% -- None or few have been defined to the work package level
		41 to 80% -- Some have been defined to the work package level	
		81% to 100% -- All or nearly all have been defined to the work package level	
7.10	Has a documented project schedule been approved for the entire project lifecycle?	Yes	Yes
		No	
7.11	Does the project schedule specify all project tasks, go/no-go decision points (checkpoints), critical milestones, and resources?	Yes	No
		No	

Agency: APD

Project: Client Data Management System Project

Section 7 -- Project Management Area			
#	Criteria	Values	Answer
7.12	Are formal project status reporting processes documented and in place to manage and control this project?	No or informal processes are used for status reporting	Project team and executive steering committee use formal status reporting processes
		Project team uses formal processes	
		Project team and executive steering committee use formal status reporting processes	
7.13	Are all necessary planning and reporting templates, e.g., work plans, status reports, issues and risk management, available?	No templates are available	All planning and reporting templates are available
		Some templates are available	
		All planning and reporting templates are available	
7.14	Has a documented Risk Management Plan been approved for this project?	Yes	Yes
		No	
7.15	Have all known project risks and corresponding mitigation strategies been identified?	None or few have been defined and documented	Some have been defined and documented
		Some have been defined and documented	
		All known risks and mitigation strategies have been defined	
7.16	Are standard change request, review and approval processes documented and in place for this project?	Yes	Yes
		No	
7.17	Are issue reporting and management processes documented and in place for this project?	Yes	Yes
		No	

Agency: APD

Project: Client Data Management System Project

Section 8 -- Project Complexity Area			
#	Criteria	Values	Answer
8.01	How complex is the proposed solution compared to the current agency systems?	Unknown at this time	Similar complexity
		More complex	
		Similar complexity	
		Less complex	
8.02	Are the business users or end users dispersed across multiple cities, counties, districts, or regions?	Single location	More than 3 sites
		3 sites or fewer	
		More than 3 sites	
8.03	Are the project team members dispersed across multiple cities, counties, districts, or regions?	Single location	Single location
		3 sites or fewer	
		More than 3 sites	
8.04	How many external contracting or consulting organizations will this project require?	No external organizations	1 to 3 external organizations
		1 to 3 external organizations	
		More than 3 external organizations	
8.05	What is the expected project team size?	Greater than 15	9 to 15
		9 to 15	
		5 to 8	
		Less than 5	
8.06	How many external entities (e.g., other agencies, community service providers, or local government entities) will be impacted by this project or system?	More than 4	2 to 4
		2 to 4	
		1	
		None	
8.07	What is the impact of the project on state operations?	Business process change in single division or bureau	Agency-wide business process change
		Agency-wide business process change	
		Statewide or multiple agency business process change	
8.08	Has the agency successfully completed a similarly-sized project when acting as Systems Integrator?	Yes	Yes
		No	
8.09	What type of project is this?	Infrastructure upgrade	Combination of the above
		Implementation requiring software development or purchasing commercial off the shelf (COTS) software	
		Business Process Reengineering	
		Combination of the above	
8.10	Has the project manager successfully managed similar projects to completion?	No recent experience	Similar size and complexity
		Lesser size and complexity	
		Similar size and complexity	
		Greater size and complexity	
8.11	Does the agency management have experience governing projects of equal or similar size and complexity to successful completion?	No recent experience	Similar size and complexity
		Lesser size and complexity	
		Similar size and complexity	
		Greater size and complexity	





**CLIENT DATA MANAGEMENT SYSTEM  
PROJECT CHARTER**

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**SECTION 1 CHARTER DETAILS**

Project Name	Client Data Management System Project		
Requesting Business Unit	Programs		
Request or Submit Date			
Estimated Project Size	Medium 12 Months - 2 Years		
Business Unit Requestor/Title/Phone	Denise Arnold	Deputy Director of Programs	
Sponsor/Title/Phone	Barbara Palmer	Director of APD	
Budget& Planning/Title/Phone	<del>Sharon Bradford</del> David Dobbs	Deputy Director of Budget & Planning	
Information Technology/Title/Phone	Mark Ervin	Chief Information Office	

## **SECTION 2 PURPOSE**

The purpose of the Client Data Management System project charter is to communicate the authorization for the project and the management approach to project participants and external entities. The project charter lays the groundwork for informed decisions and planning regarding projection direction, outcomes and delivery.

### **2.1.1 Project Executive Summary**

The Agency for Persons with Disabilities (APD) serves a client base of approximately 54,000 clients of which approximately 32,000 currently receive services and 22,000 are on a wait list receiving little to no services. The Agency has a budget of just over one billion dollars. The vast majority of this budget is utilized for services in the Home and Community Based Waiver program which is a federally matched program under the Centers for Medicare and Medicaid Services (CMS). The state is required to track, measure, report and provide quality improvement processes for 32 specific program performance measures in order to ensure the program funding can continue. The CMS further requires that the state maintain a quality improvement system that is dependent on data collection, data analysis, and reporting.

The Centers for Medicare & Medicaid Services predicts in 2013 the projected losses due to fraud, waste, or abuse will be between 3 – 10% of Florida's Medicaid budget. This fraudulent activity has a direct impact on APD's capacity to serve persons with disabilities and protect the investment of Florida's taxpayers. The Agency for Persons with Disabilities currently relies heavily on manual processes as well as disparate, decentralized and in many cases antiquated systems to collect, analyze and report data consistently. The Agency utilizes hundreds of spreadsheets to collect and analyze data which is extremely time consuming for staff and providers and prone to errors and inaccuracies. Overall, the current environment is inefficient, disposed to fraud and abuse and makes it very difficult to track client outcomes.

The Agency needs an integrated enterprise client data management system that will automate manual processes, collect data at the client specific and provider specific level so analysis, tracking, reporting, fraud prevention and quality improvement processes can be improved.

Essential to this data system is the electronic visit verification to ensure that services are delivered as approved by the Agency. In addition, the system will provide an electronic client central record that will contain key data needed to monitor agency performance, provider specific performance and measurable outcomes.

The new system is central to the Agency's process improvement strategy. APD has conducted process mapping sessions of all core service delivery functions. These requirements will provide the agency with performance measures for agency staff and service providers. It is anticipated the new system will provide a significant reduction of manual processes and provide efficiencies and business process improvements essential to the regionalization of the Agency which has been reorganized from 14 area offices to 6 regional offices.

### SECTION 3 PROJECT GOALS AND OBJECTIVES

The key objectives of the Client Data Management System are listed below:

Goals And Objectives	Description
Fraud Prevention	<ul style="list-style-type: none"> <li>▪ Electronic Visit Verification (EVV) of home based services to verify authorization to provide specific services and the frequency of units of service to be paid.</li> <li>▪ Identification, tracking, management and disposition of recoupment issues involving collection of funds.</li> <li>▪ Tracking of deactivated providers, those that have been reported for abuse or fraud in the past, and those subject to correction action/remediation plans.</li> </ul>
Measurable Outcomes	<ul style="list-style-type: none"> <li>▪ Longitudinal tracking of a client’s progress using a specific service or treatment.</li> <li>▪ Service utilization reviews that ensure the most cost effective services are provided</li> <li>▪ Measurement of client’s progress toward employment outcome</li> </ul>
Analysis & Reporting	<ul style="list-style-type: none"> <li>▪ Reporting and data analysis of service provision and provider billings to:                             <ul style="list-style-type: none"> <li>○ identify and prevent stacking of services that are duplicative</li> <li>○ project a client’s future short &amp; long range needs using valid data</li> </ul> </li> <li>▪ Reporting of performance measures to the Centers for Medicare and Medicaid for continuation of the Home and Community Based Services Waiver</li> </ul>
More Efficient Oversight	<ul style="list-style-type: none"> <li>▪ Quality Assurance reviews, documentation and disposition.</li> </ul>
Improved Business Process Efficiencies	<ul style="list-style-type: none"> <li>▪ Internet based portal for all Agency staff and service providers to access client data, record client data, and report to the agency</li> <li>▪ Electronic access for service providers of service authorizations</li> <li>▪ Timely and efficient processing of service requests ‘</li> <li>▪ Timely and efficient monthly monitoring of licensed facilities</li> <li>▪ Timely and efficient eligibility determination</li> </ul>
Technology	<ul style="list-style-type: none"> <li>▪ Reduce Implementation/Deployment Time</li> <li>▪ Reduce Cost for Operations/Maintenance</li> </ul>

## SECTION 4 PROJECT SCOPE

The scope of this project includes the following:

#	Requirement Description	Requirement Type
1.	Electronic Visit Verification to include care giver scheduling, mobile device verification and interface with billing and claims system/s.	Business Functional
2.	Provider portal for data entry into all client support related modules that can be accessed via Internet connection.	Business Functional
3.	Consumer / family portal to allow families to view appropriate portions of client record via Internet connection	Business Functional
4.	Online application for services that can be completed over the Internet by potential consumers	Business Functional
5.	Eligibility determination module that tracks criteria and requirements for eligibility levels and allows for a checklist of required documents. Automatically determines eligibility based upon predetermined criteria and data entered into application	Business Functional
6.	Online client-centered support plan/plan of care that contains narratives outlining client characteristics, medical history, goals, objectives and pertinent medication list – will automatically tie to provider implementation plan; used for the annual summary as well	Business Functional
7.	Online provider implementation plan that contains activities and tasks that directly tie to support plan goals and objectives. Contains case notes entry section and has notification ability to communicate with Agency and Wavier Support Coordinators.	Business Functional
8.	Incident Reporting module that will separately track various incident types such as reportable and critical (including death tracking, death reporting, reactive strategies and medication errors).	Business Functional
9.	Online facility license application and renewal module hosts all facility related data such as facility type, services provided, accommodations provided, bed availability, and monitoring and remediation results.	Business Functional
10.	Group home monitoring module that contains an online checklist which has the ability to automatically trigger written notice to providers and Agency staff indicating areas to be remediated. Tracks remediation timeframes and documents final resolution of citations. Ties into facility licensing module.	Business Functional
11.	Residential placement and tracking, including tracking of bed availability by provider and by provider characteristics.	Business Functional

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#	Requirement Description	Requirement Type
12.	Medication administration record including medication history and integration with pharmacies.	Business Functional
13.	Provider remediation documentation and tracking.	Business Functional
14.	Provider recoupment documentation and tracking.	Business Functional
15.	Provider turnover management and tracking to include provider and waiver support coordinator changes.	Business Functional
16.	Provider enrollment online application and recertification.	Business Functional
17.	Entry of data related to crisis enrollment and cost plan reviews.	Business Functional
18.	Wait list management and prioritization.	Business Functional
19.	Employment tracking, including employment history, salary, performance and desires.	Business Functional
20.	Waiver Eligibility Worksheet / Level of Care – ability to capture State of Florida mandated forms that are based upon application and eligibility data in system. Worksheet should be automatically generated based upon data entered in Application and Eligibility modules.	Business Functional
21.	Workflow and notification capability based upon state requirements. All modules should tie together.	Business Functional
22.	Reporting capability based upon reports defined by state and Federal reporting requirements.	Business Functional
23.	General assessment tool to include skills and support needs - may integrate with some support plan fields and serve as the QSI assessment tool.	Business Functional
24.	Online functional behavioral assessments.	Business Functional
25.	Online behavior program that allows for entry of progress notes and attachment of graphed data (this will serve as the provider implementation plan for providers that offer behavioral services).	Business Functional
26.	Online scheduling and tracking of reviews of behavior programs with recommendations and decisions from the Local Review Committee.	Business Functional
27.	Quality assurance reports to include all Federal CMS reporting requirements.	Business Functional

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#	Requirement Description	Requirement Type
28.	Training and professional license tracking and management to ensure providers meet APD requirements for staff training and professional license requirements.	Business Functional
29.	Electronic claims/billing submission and tracking.	Business Functional
30.	Electronic service authorizations that tie to electronic service logs.	Business Functional
31.	Ability to input and track provider service logs and tie to provider implementation plans.	Business Functional
32.	Service records that serve as service and attendance logs and tie into billing amounts.	Business Functional
33.	Tracking of abuse, neglect and exploitation; requires working with Department of Children and Families to collect and follow-up on reported data. Ability to tie tracking to remediation plans to correct.	Business Functional
34.	Ability to scan, index and store client files and associate with client identification numbers.	Business Functional
35.	Ability to attach documentation to central client record.	Business Functional
36.	Internet based, “Software as a Service (SaaS)” solution.	Technical
37.	Hosting and Infrastructure support (including network) included	Technical
38.	Anti-Virus included	Technical
39.	Database (Oracle/MS SQL) included	Technical
40.	Application Platform and Licenses included	Technical
41.	Hardware and Operating Systems included	Technical
42.	Disaster recovery included	Technical
43.	System security down to the caregiver level with unique system IDs and passwords	Technical
44.	HIPAA and HITECH compliant	Technical
45.	Audit trails	Technical
46.	Electronic signature	Technical



#	Requirement Description	Requirement Type
47.	Helpdesk available to APD technical staff and all users, including Providers (Provide details in comments)	Misc
48.	Training provided to APD staff and all providers (including waiver support coordinators).	Misc

## SECTION 5 ESTIMATED DURATION AND MILESTONES

### 5.1 Estimated Duration

Project Dates							
Initiation		Planning		Execution		Closing	
Start	Finish	Start	Finish	Start	Finish	Start	Finish
7/1/2013	12/31/2013	1/06/2014	<del>2/02</del> <u>12/31/2014</u>	<del>2/03</del> <u>2/1/2015</u>	<del>6/30/2015</del> <u>6/30/2018</u>	<del>7/1/2018</del> <u>7/1/2018</u>	<del>7/31/2018</del> <u>7/31/2018</u>

### 5.2 Milestones

Milestones/Deliverables	Target End Date
Phase I – Procurement, Statement of Work, Contract	December 31, 201 <del>4</del> <sup>3</sup>
Phase II - Project Charter, Project Plan, Project Kick-Off, Discovery, Project Schedule, Migration schedule	<del>January 31, 2014</del> <u>February 28, 2015</u>
Phase III – Review Requirements/Design & Perform Gap/Fit Analysis with Vendor Solution	March 31, 201 <del>4</del> <sup>5</sup>
Phase IV – Customization/Configuration/Process Realignment to Remediate Gap/Fit	April 30, 201 <del>4</del> <sup>5</sup>
Phase V – On-Site Training for Regions	<del>June 15, 2014</del> <u>November 15, 2015</u>
Phase VI – Regionally Phased & Prioritized Rollout of Solution Functionality (In order of priority) <ul style="list-style-type: none"> <li>○ EVV module and Client Central Record to include Waiver Eligibility, Support Plan and Service Authorizations and critical incident reporting</li> <li>○ Facility Licensure and monitoring</li> <li>○ Remediation Tracking system</li> <li>○ Provider enrollment</li> <li>○ Client satisfaction</li> </ul>	<del>July 1, 2014</del> <u>January 31, 2016</u>
Phase VII – Replace ABC	<del>January 15, 2015</del> <u>June 15, 2017</u>
Phase VIII – Replace iBudget	June 30, 201 <del>8</del> <sup>5</sup>
Closeout/Project Completion	July 31, 201 <del>8</del> <sup>5</sup>

## **SECTION 6 PROJECT DELIVERABLES:**

The deliverables are identified in the Statement of Work as an attachment to the ITN. There may be changes to the required deliverables based on the chosen solution and vendor selection. Any required changes will be addressed during negotiations and included as part of the contract.

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## **SECTION 7 BENEFITS**

Implementation of the Business Requirements will achieve the following benefits.

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#	Description of Benefit	Recipient	How is the Benefit Realized?	How Will the Realization of the Benefit be Assessed/ Measured?	Realization Date (MM/YY)
1	More efficient transactions for client service needs	Client	Faster Decisions regarding service needs	Time to respond to client request	07/14 <del>6</del>
2	Fraud prevention and service delivery verification	Client Agency	Accurate billing aligned with level of service delivery, reduced fraud and cost savings	Longitudinal comparison of provider claims billing to client service delivery	07/14 <del>6</del>
3	Ability to track, measure, analyze, and trend service data and client progress to increase program accountability and to ensure maximum number of clients are served within budget appropriation	Client Agency	Number of clients served	Number of clients served and client progress	07/15 <del>6</del>
4	Provider access to service authorizations promptly	Client Provider Region staff	Reduction of time lapse from date of service approval to service delivery		07/14 <del>6</del>
5	Ability to track client incidents and follow up needed to address the issue	Client	Analysis and trending of incident reports to implement corrective action needed	Reduction in type of incidents and timeliness of corrective action	07/14 <del>6</del>
6	Review of Service outcomes through utilization review to ensure client services are	Client	Review of services delivered, client progress made,	Number of services that are reduced over	07/15 <del>6</del>

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	meeting the need and to ensure cost containment is maximized		adjustment of authorized services	time as client progress is made	
7	Compliance with federal program assures required for waiver federal matching funds	Client Agency	State continues to receive federal matching funds for services under the federal waiver program	Submittal of Evidentiary Reports that are found to be in compliance	07/1 <del>5</del> <u>6</u>
8	Secure maintenance of client central record	Client Agency	Confidential information is stored securely	Number of records stored electronically	07/1 <del>4</del> <u>6</u>
9	Improve accuracy of monitoring of licensed residential facilities and corrective action needed	Client	Licensed facility monitoring data can be analyzed and trended to strengthen quality assurance system	Number of licenses resulting in administrative action	07/1 <del>5</del> <u>6</u>
10	Improved tracking and monitoring of client behavioral and medical interventions to ensure client health and safety is protected	Client	Reporting of medication errors and use of reactive strategies for behavior issues can be tracked, trended and remediated	Number of medication errors and reactive strategies used	07/1 <del>5</del> <u>6</u>
11	Reduce Implementation/ Deployment Time	Agency All Stakeholders	Ability to use the system more quickly	System will be fully implemented within 2 years	07/1 <del>5</del> <u>6</u>
12	Reduce Cost for Operations/ Maintenance	Agency	Cost Savings	Verification in Reduction of Cost Savings	07/1 <del>5</del> <u>6</u>

**SECTION 8 PROJECT ASSUMPTIONS & CONSTRAINTS**

**8.1 Assumptions**

## Agency For Persons with Disabilities

### Charter for CDMS Project

Certain assumptions and premises need to be made to identify and estimate the required tasks and timing for the project. Based on the current, the project assumptions are listed below. If an assumption is invalidated at a later date, then the activities and estimates in the project plan will be adjusted accordingly.

- The project is the top IT initiative for the Agency.
- There is commitment from all stakeholders to the project objectives
- There will be coordination and communication between project team and Area office stakeholders
- Project schedule will be strictly adhered to and tasks completed as scheduled, to meet all interim milestones deliverables.
- The APD CIO will provide timely approval for each phase of the project.
- APD IT will secure hardware, software, and contracted services in a timely manner to support the project schedule.
- Agency business and technical subject matter experts will be made available by APD Executive Sponsors to ensure all project milestones are successfully completed on time.
- Area Office and State Office staff as well as representation from the provider community will be involved in user acceptance testing of the pilot system.
- APD IT will prepare web-based user instructions prior statewide rollout.

### 8.2 Constraints

The following constraints apply to the Client Data Management System Project. As project planning begins and more constraints are identified, they will be added accordingly.

- There is limited budget for this project.

## SECTION 9 PROJECT RISKS

Project risks are characteristics, circumstances, or features of the project environment that may have an adverse effect on the project or the quality of its deliverables. Known risks identified with this project have been included below. A plan will be put into place to minimize or eliminate the impact of each risk to the project. Additional risks will be identified as a vendor is selected and a solution is chosen.

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<b>Risk Area</b>	<b>Level (H/M/L)</b>	<b>Risk Plan</b>
1. Funding	High	<ul style="list-style-type: none"><li>• Work with appropriate Stakeholders to ensure funding is available</li></ul>

**SECTION 10 PROJECT ORGANIZATION**

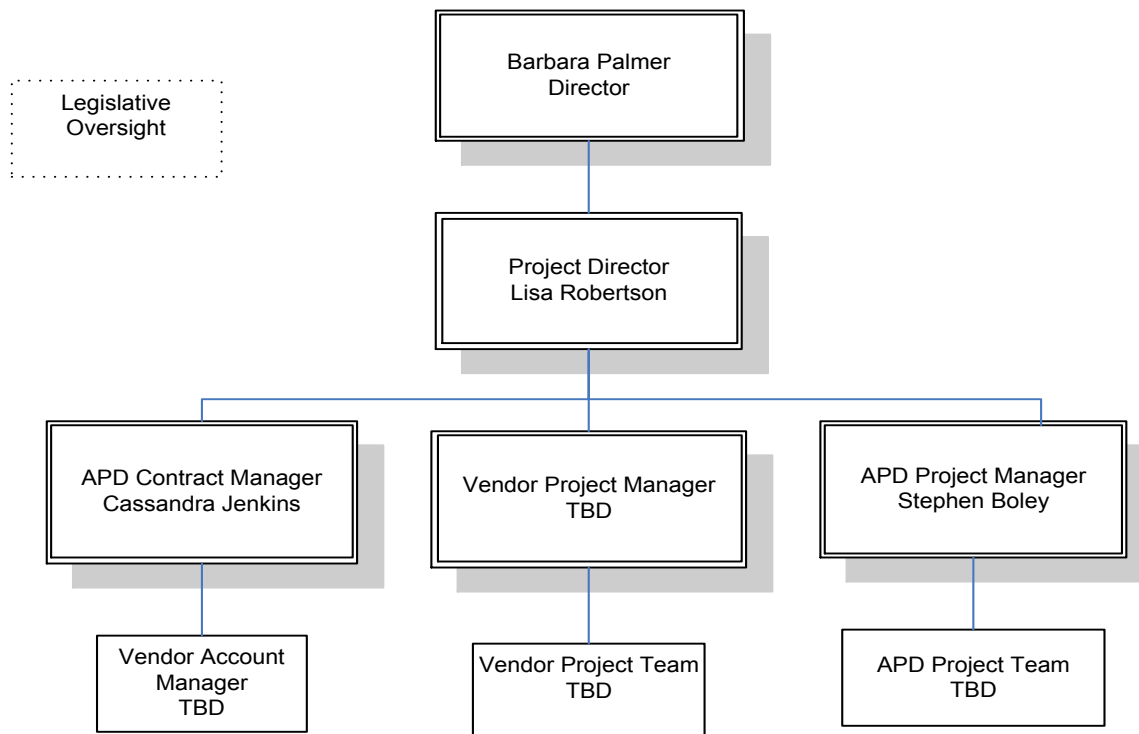
**10.1 Roles**

An appropriate project organization structure is essential to achieve success. The following list depicts the proposed organization:

Role	Title	Name
Project Executive Sponsor	Director of APD	Barbara Palmer
Project Director	APD <del>Chief Information officer,</del> <u>Planning &amp; Project Director</u>	<del>Mark Ervin</del> <u>Lisa Robertson</u>
Contract manager	APD Contract Administrator	Cassandra Jenkins
Vendor Account Manager	TBD	TBD
APD Project Manager	APD CDMS Project Manager	<del>Deanna McLean</del> <u>Stephen Boley</u>
Vendor Project Manager	Vendor CDMS Project Manager	TBD
APD Project Team	IT, Programs, Operations	TBD
Vendor Project Team	TBD	TBD



## SECTION 11 ORGANIZATION CHART



## **SECTION 12 COMMUNICATIONS AND STAKEHOLDERS**

### **12.1 Overview**

Communications management is a broad area comprised of the processes necessary to ensure effective communication among project stakeholders and project team members. It includes the generation, collection, storage, dissemination, and disposition of project information.

### **12.2 Purpose**

The purpose of this section is to document the formal communication process developed for the Project. This plan defines:

- What needs to be communicated on the project
- Who is responsible for communicating with what audience
- When the communication needs to take place
- How information will be communicated.

The communication process was developed to ensure project stakeholders and team members are informed about the status of project initiatives at all times. However, the existence of a defined process does not confirm effective communications. The project team's execution of the communication processes will be the driver for the successful communication.

This plan provides a framework for project informational exchange within and outside the project. This plan focuses on formal communication elements, though other channels exist on informal levels, and enhance those discussed within this plan. This plan does not limit, but rather enhances communication practices. Open, ongoing communication between stakeholders and team members is vital to the success of the Project.

This communication plan is a key tool for promoting and enhancing organizational transformations toward new business processes. The plan will be updated as necessary throughout the project to reflect new or evolving communication needs (e.g. changes to stakeholders, scheduled meetings, or communication tools). Changes to this plan will be coordinated by the APD Project Manager and approved by the Project Sponsor.

### **12.3 Scope**

This Project communication plan is for internal stakeholders. The scope of this plan includes identifying the stakeholder requirements for each communication type, the frequency of communication, the medium of communication, and the team member or members responsible for the communication.

The target audience for this plan includes:

- All project participants
- Project internal stakeholders

## Agency For Persons with Disabilities

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- Project team members

All other contractors and departmental staff are excluded. The communications strategies and procedures for external stakeholder communications are outside of the scope of this document.

### 12.4 Roles and Responsibilities

Communication will be an ongoing function within the project and will be directed toward internal APD Agency stakeholder groups and the project team. The project team will work closely with stakeholder groups to ensure that communication needs are met and will adjust according to feedback received. Roles and responsibilities for Project communications are listed below.

Role	Communication Responsibilities
APD Project Sponsor	<ul style="list-style-type: none"><li>▪ Provide input and guidance about stakeholder communications to the Project Director</li><li>▪ Champion project within the Agency</li></ul>
APD Project Director	<ul style="list-style-type: none"><li>▪ Provide issue resolution and communications input and guidance to the Project Manager</li></ul>
APD & Vendor Project Manager	<ul style="list-style-type: none"><li>▪ Member of the project team, providing input and guidance to the team about Project stakeholder communication needs and strategies</li><li>▪ Provide official communication to Team Leads for dissemination to the stakeholders</li></ul>
APD Project Team	<ul style="list-style-type: none"><li>▪ Provide input to the Project Manager about Project stakeholder communication needs and strategies</li></ul>
Vendor Project Team	<ul style="list-style-type: none"><li>▪ Members of the project team, providing input and guidance to the team about stakeholder communications needs, strategies, and events</li><li>▪ Coordinate the collection and dissemination of project information to stakeholder audiences</li><li>▪ Create weekly status report</li><li>▪ Provide written status report to weekly status meeting attendees</li><li>▪ Deliver verbal report during weekly status meetings</li></ul>

**Exhibit 1: Project Communication Roles and Responsibilities**

### 12.5 Stakeholder Context

The successful outcome of any Project relies on effective communications to the broad stakeholder population. Elements of effective communication for the project are stakeholder-driven; therefore, the planning process must include identifying all stakeholders. The stakeholder identification and

## Agency For Persons with Disabilities

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analysis determines the most effective types and frequency of information stakeholders require to perform their role and to meet their responsibilities within the project.

### 12.6 Stakeholder Analysis

The stakeholder analysis consists of a systematic assessment of each of the stakeholder groups to determine:

- Entities and individual participants
- Contact information
- Role in the project
- Project Communication Needs
- Project Impact Assessment
- Special Considerations

Stakeholder involvement throughout the project will provide greater assurance of project success. Effective and timely involvement enables people to understand and take part in change rather than feel it is being imposed on them. This increases speed to adoption of change.

Stakeholders of change, especially large-scale, systemic change, have a need for information about the change. They generally ask the following questions:

- Why is this change necessary?
- Why is this change happening now?
- What is wrong with what we are doing today?
- What will happen if we don't change?

APD will identify stakeholders and conduct a stakeholder analysis to determine communications needs and preferences for each stakeholder group. We will then engage stakeholders in a variety of ways, providing opportunities for them to express their ideas, opinions, and concerns.

Stakeholder	Internal/ External	Stakeholder Description
APD Staff	Internal	Employed by the Agency for Persons with Disabilities
Waiver Support Coordinators	External	Contracted Employee certified to provide Waiver Support to the clients of APD
Providers	External	Active Medicaid Waiver Providers registered through AHCA

Stakeholder	Internal/ External	Stakeholder Description
Governors Office	External	State of Florida, Office of the Governor
Clients	External	Florida citizens who receive HCBS Waiver funding
Legislature	External	State of Florida governing body who approves funding for IT initiatives

**Exhibit 2: Stakeholder Management Matrix**

## 12.7 Required Communications

### 12.7.1 Bi-Weekly Status Reports

The result of weekly status meetings will be a published status report distributed to the project team members and stakeholders. The Vendor PM will create and APD Project Managers will review and distribute the Status Report. The frequency of status submission agreed to between the APD and Vendor PMs during project initiation meetings is bi-weekly.

### 12.7.2 Status Meetings

The frequency of status meetings will be agreed to between the APD and Vendor project Managers during the first project initiation meeting. The result of these meetings is a published Status Report distributed to the project team members and stakeholders. Meeting attendees will be notified of changes to the time or location of these meetings via email and/or phone as far in advance as possible.

### 12.7.3 Meeting Agendas

No less than 24-hours prior to a scheduled workshop or meeting, the facilitator of that meeting will provide the meeting agenda to the scheduled attendees. Circumstances will arise where a meeting is scheduled and held in less than 24-hours. In this case, the meeting facilitator is expected to distribute an agenda when practicably feasible. It is expected the attendees of the meeting will review the agenda and any other documentation distributed prior to the meeting. Each agenda will include an action item section that will be reviewed during the meeting. Action items assigned during the meeting will be documented and distributed to the team in the meeting minutes.

### 12.7.4 Additional Communication

In addition to the regularly scheduled meetings noted above, occasionally written communication will be sent out by the project management team on an as needed basis. This communication will be specific in nature and may be broadcast to the general project population or to target audiences depending upon the circumstances involved.

### 12.8 Communication Distribution

The subject matter of this plan is primarily internal (APD & Vendor ) communication. The general flow of the documents will be out-going from the Project Management Team to the target audience.

<b>Communication Type</b>	<b>Stakeholders</b>	<b>Medium</b>	<b>Frequency</b>	<b>Reporting Member</b>
Status Report	Project Director	Email	Bi-Weekly	Vendor Project Manager
Status Meeting	Project Director	Face-to-Face	Weekly	APD & Vendor Project Manager
Meeting Agendas	As needed	Email	As needed	Project Team

**Exhibit 3: Project Communication Roles and Responsibilities**

**SECTION 13 PROJECT CHARTER APPROVALS**

The signatures of the people below indicate an understanding in the purpose and content of this document by those signing it. By signing this document you indicate that you approve of the proposed project outlined in this business case and that the next steps may be taken to create a formal project in accordance with the details outlined herein.



Barbara Palmer, APD Director

10/15/14

Date



Michael Ayers, Chief of Staff

10/15/14

Date



Denise Arnold, Deputy Director of Programs

10/15/14

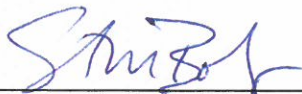
Date



~~Sharon Bradford~~ David Dobbs, Deputy Director of Budget & Finance

Date

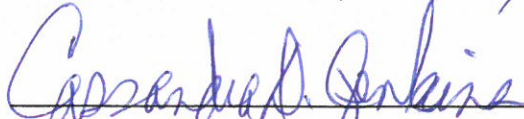
10/15/2014



Mark Ervin, CIO *Stephen Boley*

10/15/14

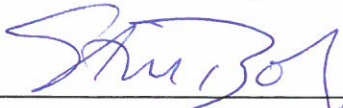
Date



Cassandra Jenkins, CDMS Project Contract Manager

10/15/2014

Date



~~Deanna McLean~~ Stephen Boley, CDMS Project Manager

Date

10/15/2014



# **CLIENT DATA MANAGEMENT SYSTEM**

## **PROJECT MANAGEMENT PLAN**



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## SECTION 1 EXECUTIVE SUMMARY

### 1.1 BACKGROUND

The Agency for Persons with Disabilities (APD) serves a client base of approximately 54,000 clients of which approximately 32,000 currently receive services and 22,000 are on a wait list to receive services. The Agency has a budget of just over one billion dollars. The vast majority of this budget is utilized for services in the Home and Community Based Waiver program which is a federally matched program under the Centers for Medicare and Medicaid Services (CMS). The state is required to track, measure, report and provide quality improvement processes for 32 specific program performance measures in order to ensure the program funding can continue. The CMS further requires that the state maintain a quality improvement system that is dependent on data collection, data analysis, and reporting.

The Centers for Medicare & Medicaid Services predicts in 2013 the projected losses due to fraud, waste, or abuse will be between 3 – 10% of Florida’s Medicaid budget. This fraudulent activity has a direct impact on APD’s capacity to serve persons with disabilities and protect the investment of Florida’s taxpayers. The Agency for Persons with Disabilities currently relies heavily on manual processes as well as disparate, decentralized and in many cases antiquated systems to collect, analyze and report data consistently. In addition, the Agency utilizes hundreds of spreadsheets to collect and analyze data which is extremely time consuming for staff and providers and prone to errors and inaccuracies. Overall, the current environment is inefficient, disposed to fraud and abuse and makes it very difficult to track client outcomes.

The Agency needs an integrated enterprise client data management system that will automate manual processes, collect data at the client specific and provider specific level so analysis, tracking, reporting, fraud prevention and quality improvement processes can be improved.

Essential to this data system is the electronic visit verification to ensure services are delivered as approved by the Agency. In addition, the system will provide an electronic client central record containing key data needed to monitor agency performance, provider specific performance and measurable outcomes.

The new system is central to the Agency’s process improvement strategy. APD has conducted process mapping sessions of all core service delivery functions. These new processes, along with the associated requirements, will provide the Agency with maps needed to implement improved performance measures for Agency staff and service providers. It is anticipated the new system will provide a significant reduction of manual processes and provide efficiencies and business process improvements essential to the regionalization of the Agency which has been reorganized from 21 area offices to 6 regional offices.

## SECTION 2 ABOUT THIS DOCUMENT

The Project Management Plan describes the Background, Objectives, Scope, Project Management Approach, Key Deliverables, Assumptions, Governance Structure and a framework for Risk management associated with the project. This document has been tailored for this project from “A Guide to the Project Management Body of Knowledge (PMBOK® Guide) – Fourth Edition” published by the Project Management Institute (PMI.)

### 2.1 WHO SHOULD USE THIS DOCUMENT?

The Client Data Management System (CDMS) Project Teams involved in the Project should use this document for guidance on project procedures.

### 2.2 RELATED DOCUMENTS

This document should be used in conjunction with the following Project Documents:

- Project Statement of Work (SOW) [Outline in the ITN]
- Project Charter
- Schedule / Timeline

### 2.3 DISTRIBUTION

This document shall be distributed to all Project staff (including Vendor Team members) and any other personnel as required. Notifications of changes to this document will be circulated per the current project management process.

### 2.4 ASSUMPTIONS

The following assumptions are identified:

- The Project team members and all Stakeholders recognize that time is of the essence and will prioritize their participation accordingly.
- The project stakeholders will coordinate the availability of appropriate staff for consultation during the project, as required.
- The APD Project Manager will coordinate the availability of external stakeholders (other Agencies, oversight groups, etc.) for consultation during the project, as required.
- The APD Project Manager will coordinate all meetings with internal and external stakeholders and the Vendor Project Manager as requested and as deemed necessary during the course of the project.
- The APD Project Director will coordinate with the Vendor Project Manager to ensure project goals, deliverables and requirements are met within timelines established for this project.

- The APD Project Manager will inform the Vendor Project Manager in a timely manner of critical linked and adjacent systems and activities that may impact the SOW, project plan and deliverables.
- The APD Project Manager will provide access to all relevant information, documentation, and reports within the scope of analysis.
- The APD Project Manager will help facilitate timely access to data and resources as appropriate.
- The APD Project Manager will review project progress reports and related final deliverables and provide feedback and final approval/disapproval to the vendor according to a mutually agreed document review process.
- The APD project team will review interim deliverables in timely manner.

## SECTION 3 PROJECT GOVERNANCE & ORGANIZATION

The following exhibit (Exhibit 1: Project Governance – Roles & Responsibilities) is a description of the roles and responsibilities:

Role Name	Description	Participants
Project Sponsor	Champions the Project; Provides guidance on overall scope and project direction; Assures adequate business resources for project work activities; Has ultimate responsibility for successful completion of the Project; and Facilitates communications with the other Agency management.	Barbara Palmer, Director, Agency for Persons with Disabilities
Project Director	Has responsibility for the successful completion of the Project; Has project-related decision making authority; Oversees the execution of the Project; Acts as a point of escalation for project-related issues; Provides adequate business resources for project work activities; and Reports status and issues to the Project Sponsor.	<del>Mark Ervin</del> <u>Lisa Robertson</u> , APD <del>CEO</del> <u>Project &amp; Planning Director</u>
Contract Manager	Controls project budget; Acts as a member of the Project Steering Committee; Acts as the primary point of contact for contractual issues with the Vendor; Enforces the performance of the contract; and Mediates contract disputes.	Cassandra Jenkins, APD Contract Administrator
Vendor Account Manager	Responsible for contract oversight ensuring required tasks, services and program objectives are met; Acts as the primary point of contact for contractual issues with APD; Assures the performance of the contract; and Resolves contract disputes.	TBD, Title
APD Project Manager	Reports to the Project Director; Has day-to-day responsibility for the successful completion of the Project; Oversees the work of the Project Teams; Oversees the work of the vendor; Acts as a liaison with the Project Director; and Acts as a point of escalation for project-related issues.	<del>Deanne McClean</del> <u>Stephen Boley</u> , APD Project Manager
APD Project Team	Report to the Project Manager; and Provides Subject matter expertise in support of the execution of the project.	TBD
Vendor Project Manager	Has day-to-day responsibility for the successful completion of the Project; Oversees the work of the Project Teams; Acts as a point of escalation for project-related issues for the vendor.	TBD

Role Name	Description	Participants
Vendor Project Team	Responsible for the development of the deliverable(s) in collaboration with the APD staff and other key stakeholders.	TBD

**Exhibit 1: Project Governance – Roles & Responsibilities**

## SECTION 4 PROJECT RISK MANAGEMENT PLAN

### 4.1 OVERVIEW

Risk management will be an ongoing process that is conducted throughout the life of the project. The process begins with identifying, assessing, and developing response plans for significant risks. It continues with regular risk monitoring, ongoing identification of new risks, and timely implementation of mitigation plans.

This Risk Management Process addresses identified risks that require visibility at the highest levels of the project and will be managed by the combined Project Management teams of the Vendor and APD.

The project team will use a straightforward method that includes identifying and categorizing project risks (Identify), assessing and prioritizing the risks (Analyze) so they are manageable, developing a response strategy and assigning responsibility (Plan), tracking the risks by reviewing them at key project milestones (Track), implementing the defined response strategies as required (Control) and most importantly, communicating the risks and strategies on an ongoing basis throughout the life of the project. Risk management processes address internal risks (those under the control or influence of the project team, such as quality of deliverables, cost, schedule, or technical risks) as well as external risks (those outside the control of the project team such as governmental legislation or weather).

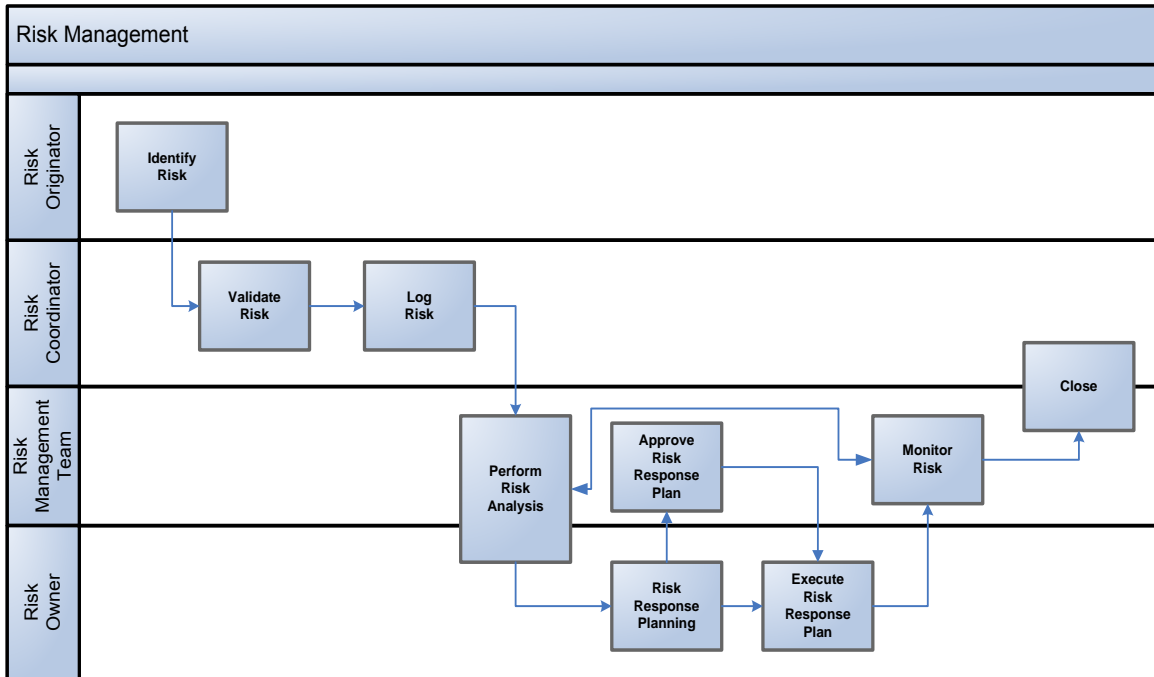
### 4.2 ROLES AND RESPONSIBILITIES

The roles and responsibilities relating to Risk Management are presented as follows in Exhibit 2: Risk Management Roles and Responsibilities:

Role	Responsibilities
Risk Originator (anyone)	Identifies risk
Risk Coordinator (APD PM)	Validates and registers risk in Risk Log, closes risk
Risk Management Team (The APD and Vendor Project Management teams or designees)	Performs risk analysis, approves risk response plans, monitors risk and approves closure of risk
Risk Owner (TBD by Risk Management Team)	Formulates and executes risk response plan

## Exhibit 2: Risk Management Roles and Responsibilities

The exhibit below (Exhibit 3: Risk Management High-Level Workflow) is a graphical representation of the risk management workflow. The exhibit depicts the various processes that a risk will proceed through during risk management as well as the identification of the individual or team responsible for the process step.



**Exhibit 3: Risk Management High-Level Workflow**

As depicted above, an identified risk is first validated by the Risk Coordinator to make sure the information is complete and that the risk is not a duplicate. Once verified the risk information is logged into the Risk Log and given a unique identifier. The Risk Management Team (RMT) conducts the risk qualitative analysis to determine the risk probability and impact.

Next the risk Tolerance ranking is determined based on probability and impact. An appropriate level of response planning will be defined by the RMT and the assigned Risk Owner will develop the risk response plan.

Approved response plans will be put into execution and monitored to completion. Risks will eventually be closed, either because they have passed their triggering event and no longer pose a threat to the project or the risk has occurred causing the risk contingency plan to be triggered, resulting in the mitigation of the risk.



The project risk management will consist of the following key activities:

Activity	Approach	Purpose
Identify risks	Create a list of project risks; gather risks from stakeholders using brainstorming, predefined lists, and/or completion of risk identification questionnaires.	Makes known project risks explicit before they become problems; helps to set expectations and provide a vehicle for reaching consensus – unknown risks cannot be managed
Analyze risks	Determine the consequence of risks listed and calculate the risk tolerance.	Transforms the risk data into decision making information
Plan	Determine desired risk strategies and actions, and assign responsibility.	Translates the risk information into strategies and mitigation actions
Track	Review and re-examine risks when project situation changes or key milestones are achieved.	Monitors risk indicators and mitigation actions
Control	Implement planned actions when risk indicators manifest; determine mitigation effectiveness for continuous improvement.	Corrects and ensures implementation of mitigation actions as required
Communicate	Discuss and review project risks and plans in project status, or other scheduled meetings, when the project situation changes or key milestones are achieved.	Enables sharing of critical information throughout the project

**Exhibit 4: Risk Management Activities**

### 4.3 RISK IDENTIFICATION

The risk identification process involves determining which risks might affect the project and documenting their characteristics. The following sections detail the approach that will be used for risk identification. It includes:

- Techniques for Risk Identification
- Categorizing Risks
- Capturing Identified Risks

#### 4.4 TECHNIQUES FOR RISK IDENTIFICATION

There are a number of techniques that can be used to identify project risks. Risk identification is the process by which the perception of a potential problem is translated into recorded information containing sufficient detail to enable effective assessment of the risk and to support subsequent management decisions.

Risks can be identified at every level of the organization. All team members should be able to recognize risks in the course of their daily work and should bring potential risks to the attention of their team leaders or managers as they identify them. Risks may also gain visibility in project reviews with managers or executives, at meetings held with co-workers, or during interactions with stakeholders.

The techniques used to identify risks using the approaches defined above include:

- **Information Gathering** - Both structured and unstructured approaches will be used to gather project risks and a Risk Identification Form will be completed if it is determined that a risk should be logged.
- **Structured** - The Risk Log will be reviewed during the weekly status meetings to assess project risks. Members will consider risks identified. On a monthly basis, the risk assessment questionnaire will be reviewed to ascertain whether any existing risks should be revised or new risks identified as a result of changes in the project or related events.
- **Unstructured** - Project risks will be solicited during project meetings, interviews, and workgroups. Identified risks will be brought to the attention of the RMT for consideration.
- **Documentation Reviews** - Individual RMT members will gather project specific information from other relevant documents to help identify risks such as project plans and deliverables and other internal and external risk assessments.
- **Assumption Analysis** - Risks will be identified as the RMT members assess the validity of assumptions made in project deliverables and other project documentation, from an accuracy, consistency, or completeness perspective.

##### 4.4.1 CATEGORIZING RISKS

Project risks will be grouped into categories, assigned ownership and analyzed for implementation of common mitigation approaches across the project risks, as appropriate. If a risk spans multiple categories, it will be categorized based on the area of primary impact.

##### 4.4.2 CAPTURING IDENTIFIED RISKS

Project risks will be captured using the Risk Log as a collaborative effort between the APD and Vendor Project Management teams. The electronic version of this document will be maintained by the APD Project Manager as the Risk Coordinator and will be stored in the APD SharePoint site. Once the risk is entered into the Log, a unique identifier (Risk item #) will be assigned. The Risk Coordinator will be responsible for maintaining the Risk Log. Below is a sample of the Risk

Log Tab from the Risk, Action Items, Issues and Decisions Log (RAID Log) showing the various data elements involved in the process.

RISK LOG											Linkage to Other Logs		
Definition: A RISK is a potential issue that MAY negatively impact program or initiatives timeliness, quality, resources or budget at some point in the future.											Issue Log #	Action Log #	Dec'n Log #
Item #	Risk Description	Category	Probability	Potential Impact	Impacted Area	Status	Identified by	Owner	Risk Response / Mitigation Plan				

**Exhibit 5: RAID - Risk Log Tab**

Legend:

- Item # - unique sequence number assigned to each risk identified
- Risk Description – narrative of the nature of the risk and potential negative impacts
- Category - used for any other type of categorization, such as internal vs. external, or confidential vs. non-confidential; provides a way to logically group certain risks
- Probability – assessment of the likelihood of the risk to actually happen
- Potential Impact – assessment of the extent of negative impacts
- Impacted Area – the project aspects that will suffer the negative impacts of the occurrence of the risk, e.g., Schedule, Cost, Quality
- Status – an indicator of the stage at which the risk is being addressed
- Identified by – name of team member that identified the risk
- Owner – name of the team member that is responsible for planning and implementing responses to the risk
- Risk Response / Mitigation Plan – a narrative of the strategies identified to address the risk
- Linkage to Other Logs – traceability references to related items in the Issue, Action, and Decision Logs

#### 4.5 RISK ANALYSIS

Once project risks and opportunities have been identified, analysis will be performed to determine relative priorities and to develop a prioritized risk list for planning the appropriate level of response to the risks.

A qualitative analysis will be performed on each risk. After an initial prioritization, a decision will be made by the APD and Vendor Project Management teams on whether or not the risk warrants more detailed analysis using quantitative techniques to further assess the probability and potential impact of the risk event on the project objectives.

## SECTION 5 SCOPE MANAGEMENT PLAN

### 5.1 OVERVIEW

The Scope Management Plan identifies the process that will be used to manage and control the project's scope such that:

- Processes needed to manage and control project scope are defined
- The Project Team understands its role

Due to the nature of this project this plan recognizes the need for real-time flexibility. In order to accommodate maximum flexibility while controlling scope the APD Project Manager will be responsible for notifying the Project Director when an assigned task falls outside of the scope defined in the SOW. The APD Project Manager will then document the task in the Change Log for historical purposes.

### 5.2 CHANGE LOG

Change Log		Legend <span style="margin-left: 20px;">■ Closed Item</span> <span style="margin-left: 20px;">■ Pending Item</span> <span style="margin-left: 20px;">■ New Item</span>									
<small>Definition: A change item is a request to modify scope in the form of an addition, modification, or deletion of a requirement(s).</small>									Linkage to Other Logs		
		Item #	Change Description	Date Raised	Raised By	Priority	Impacts	Status	Issue Log #	Action Log #	Dec'n Log #
1	text	mm/dd/yyyy									
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											

**Exhibit 6: Change Order Log**

Legend:

- Item # - a unique sequence number assigned to each Change Item
- Change Description – a narrative of the nature of the request and intended results
- Date Raised – date the change request was submitted to the PM team
- Raised by – name of the team member that originated the request
- Priority – an assessment of the importance or urgency of the change request
- Impacts – a description of all potential and realized impacts of the requested change, including but not limited to schedule impact, cost, resources, contract terms and conditions, and so forth
- Status – an indicator of the stage at which the change request is being handled through the process

## **SECTION 6 DOCUMENT MANAGEMENT**

### **6.1 OVERVIEW**

This document describes the document management practices for this Project. Document management includes Document Creation, Document Revision, Delivery Approach, and Version Control. A standard process will be used for all project related documents and applies to the creation and management of documentation including minutes, notes, deliverables and other outputs for this phase of the project.

### **6.2 DOCUMENT CREATION AND DELIVERY APPROACH OBJECTIVES**

This approach is designed to ensure:

- Defined objectives are met;
- Expectations of the major stakeholders of the project are fulfilled;
- Approved principles, measures, standards, and methods are applied uniformly; and
- Consistency and continuity is maintained for all project artifacts.

### **6.3 PURPOSE OF DOCUMENT MANAGEMENT PLAN**

The purpose of the Document Management Plan is to define the process for how documents developed by the vendor will be managed and submitted to the ADP Project Manager for approval.

This document identifies the steps in the document creation and update processes, from the initial creation of a document through approval by the APD Project Manager (if applicable), including any revisions or updates necessary throughout the document's useful life.

### **6.4 SCOPE OF DOCUMENT CREATION AND DELIVERY APPROACH**

This document covers project documentation related activities including:

- Document Management Process
- Roles and Responsibilities
- Version Control

### **6.5 DOCUMENT MANAGEMENT STRATEGY**

The project team (APD & vendor) will work together to ensure quality in the documents submitted to the APD for review and approval. To support this goal, several tactical actions are planned or have already been performed:

- The project will use the Microsoft SharePoint product. SharePoint helps to organize large, complex information sources and manage documents with multiple authors and approvers. SharePoint provides for version tracking, check-in and check-out to ensure

that only one person works on a document at a time, controlled document access based on user roles, and automated routing of documents to reviewers.

- APD will create an internal SharePoint document repository to manage documents.
- The approach and the document naming standards defined in this plan will be adhered to for documents that will be submitted to the APD.
- Backup and retention of documents will be managed by established SharePoint vendor procedures. In addition, the APD project team will make weekly backups to local repositories, as appropriate.
- As relevant project documentation, including hard copy documents (i.e. charts, graphs, and other supporting documents) are gathered, to the extent practicable and as determined appropriate, documents will be scanned and stored in SharePoint following standards and processes defined in this plan.
- Each project document will have an owner who is responsible for the creation of and updates to the document throughout its useful life.

## **6.6 DELIVERY DOCUMENT LIFECYCLE MANAGEMENT**

Management of deliverable documents is accomplished by a set of processes that apply to all stages in the lifecycle of a document. The document lifecycle includes five steps of activity representing distinct stages of creation, review and modification through which a document may pass during its lifecycle. The steps in the document lifecycle are defined below:

- Step 1: New Document Creation – Vendor creates and Vendor Project Manager submits deliverables to APD Project Manager to initiate the review document process, as outlined below, includes a quality assurance review).
- Step 2: APD conducts an initial review and provides comments to Vendors Project Manager.
- Step 3: Document owner updates the deliverable per APD’s comments and Vendor Project Manager re-submits deliverables to APD.
- Step 4: As required, APD conducts a second review and provides additional comments to Vendor’s Project Manager.
- Step 5: Document owner completes final updates and Vendor Project Manager re-submits the document to APD for approval.

All deliverables will go through the first three steps. If a document does not pass the APD’s initial review, APD Project Manager will document and provide specific changes required for approval. Vendor will update the document based on APD feedback and resubmit to APD for a second review iteration as illustrated below. A third iteration review will necessitate implementation of project escalation procedures for determination of next steps and review of contractual obligations.

### **6.6.1 DOCUMENT REVIEW TIME STANDARDS**

The Deliverables Review process and time standards have been defined in the project schedule, as follows:

- Each deliverable will be submitted by the vendor to the designated APD point of contact that will ensure that additional copies are made and distributed as necessary.
- Once the deliverable has been submitted, APD will have five (5) business days to for each initial review of each individual deliverable submitted and will provide one consolidated written summary of recommended changes for revisions. For subsequent deliverable reviews, APD will have five (5) business days. The turnaround time for initial and subsequent deliverable reviews may be extended on an exception basis by agreement between APD and the Vendor Project Managers.
- The Vendor will make the revisions and shall, within five (5) business days per deliverable, re-submit the updated final version to the designated APD point of contact. The turnaround time for changes or revisions may be extended on an exception basis by agreement between APD and the Vendor Project Managers. Changes requested by APD that are not recommended by the Vendor will be left unaccepted in the document with explanation from the Vendor.
- Upon receipt of modifications, APD will review the deliverable to confirm the modifications within three (3) business days. Changes not recommended by the Vendor can be accepted in the deliverable by APD.
- The standard deliverable review period of 5-5-3 can be modified on an exception basis. Exceptions must be approved by the APD and Vendor Project Managers. Once the document has been accepted, the Vendor will update the document version history and number. The version marked final will be emailed to the APD project sponsor.
- Any conflict arising from the deliverable review and acceptance procedures will be addressed via the Project Governance Model.

### **6.6.2 DOCUMENT NAMING STANDARDS**

All artifacts will use a standard naming convention to provide consistency in the way all project related artifacts are named. . The file naming conventions used on this project include:

- yyyyymmdd-DEFG-Artifact-Name-v#.## (Example: 2010721-FAH02-Deliverable1-Document-Management-Plan-v0.01) where
  - DEFG –Artifact-Name is a short description of the deliverable and
  - Artifact Name – Replace this value with the deliverable name and always use hyphens instead of spaces. Additional text or details to the name of the file (No initials, change details, etc.) will not be added. The Revision History table included in each document template will be used to include the details of what was changed in each version.
  - V#.## is the version tracking

### **6.6.3 DOCUMENT REPOSITORY AND VERSION CONTROL**

The Document Repository is established in Microsoft SharePoint and will contain all current and previous versions of deliverable and work product documents. The project team will use Microsoft’s SharePoint software as the collaboration tool. This tool provides version control and many additional features that may be implemented to maximize project communications.

#### **6.6.4 VERSION CONTROL**

The project will standardize version control for all project artifacts. This will provide consistent document version control. The following steps will be followed for each project artifact:

- Each new document will start at version 0.01
- Increment the version number by .01 until the APD has approved the document
- Use 1.00 for deliverable submission
- If revisions are made, increment by .01 until another approval, which would be 2.00. Continue this pattern as necessary.

#### **6.6.5 DELIVERABLE ACCEPTANCE FORM**

The Deliverable Acceptance Form is to be used to accompany each deliverable during submittal. This form captures the signatures that signify acceptance of the deliverable document.



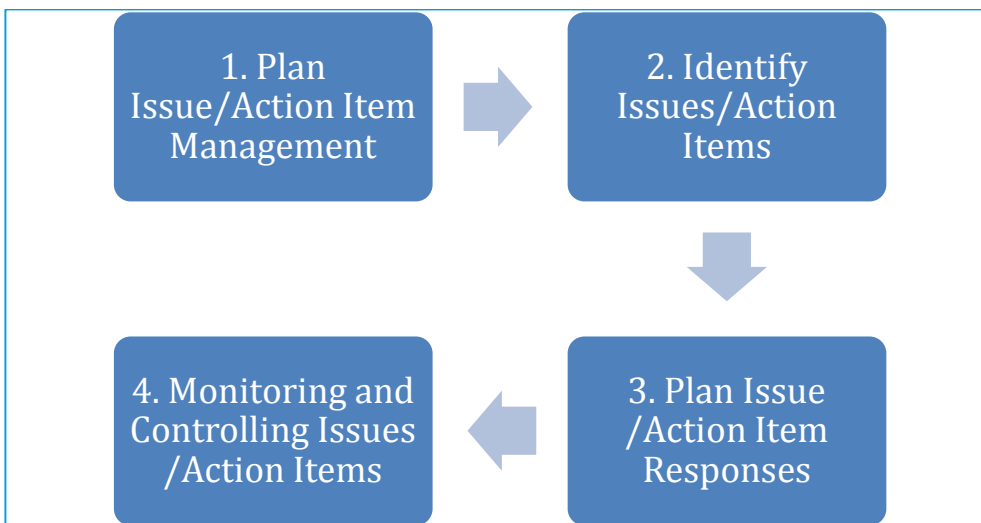
## SECTION 7 PROJECT ISSUE/ACTION MANAGEMENT

Disciplined management of Issues and Action Items enables a project team to effectively resolve the issues and complete action items in a timely manner and keep a project on track. A formal Issue / Action Item Management process provide the mechanism throughout the life cycle of the project to bring issues and action items to resolution.

Issue - An ISSUE is an existing constraint that is negatively impacting project timeliness, quality, resources, or budget at some point in the future. Issues that require attention from another level or area within the project governance structure will be subject to the formal issue escalation process.

Action item - An ACTION is a proactive task identified by the project team to address a known problem or situation. Actions may also come from a risk or issue item. Incomplete or overdue action items may create issues.

The Issue / Action item high-level workflow depicted below shows the various stages of the Issue/action item management process.



**Exhibit 7: Issue/Action Item Management**

## 7.1 PLAN ISSUE/ACTION ITEM MANAGEMENT

The first step in creating an effective Issue/Action Item (IA) management process is defining how the process should work. The following table describes the project team’s roles and responsibilities for reporting issues and action items.

Team Role	Issue and Action Item Responsibilities
Project Director	<p>The Project Director has overall responsibility for all of the project areas including the management of issues and action items.</p> <ul style="list-style-type: none"> <li>▪ Make decisions to resolve issues or escalate to the Project Sponsor</li> </ul>
Project Manager	<p>The Project Manager responsibilities include:</p> <ul style="list-style-type: none"> <li>▪ Ownership of Issue / Action Item Tracking Logs in the RAID</li> <li>▪ Monitoring and management of open issues and action items</li> <li>▪ Chairing Issue / Action Item Coordination Meetings updating status as required</li> <li>▪ Including issues and action item status within the Project Status Report</li> <li>▪ Reviewing issues and action items to prevent duplication</li> </ul>
Issue / Action Item Originator	<p>Anyone can originate an issue or action item. Responsibilities include:</p> <ul style="list-style-type: none"> <li>▪ Identifying an issue requiring resolution</li> <li>▪ Logging action items identified during the course of the project</li> <li>▪ Defining the issue / action item further as required</li> <li>▪ Reviewing and approving action plan/resolution to ensure issue as originally defined will be resolved</li> </ul>
Issue / Action Item Assignee	<p>The Assignee’s responsibilities include:</p> <ul style="list-style-type: none"> <li>▪ Participating in discussions with the Issue or Action Item Originator to fully understand the issue or action item</li> <li>▪ Researching and drafting the Action plan/resolution</li> <li>▪ Driving the issue / action items to resolution and closure</li> </ul>

**Exhibit 8: Issue/Action Roles and Responsibilities**

## 7.2 ISSUE ESCALATION PROCESS

In the event that an issue or issues remain unresolved at a certain level of project governance responsibility, an escalation process is to be used. The three issue escalation levels are shown in the following table:

Level	APD	Vendor
1	Deliverable Team Lead	Deliverable Team Lead
2	Project Manager/Director	Project Manager
3	Project Sponsor	Account Manager

Project issues unable to be resolved within a reasonable timeframe or deemed to cause project delay will need to be escalated to the next level in the governance structure. Exhausting all options for resolution at the current level can also be considered a reason to escalate. APD and Vendor staff responsible for escalation will agree to escalate the given issue or issues at each level prior to escalation. Escalated issues are to be documented in the Issue Log, should indicate “Escalated” under the Status column, and the appropriate name of the assigned new owner is entered under the Assigned To column.

## 7.3 SAMPLE ISSUE LOG

The project team will utilize an Issue Log to document and track issues. In all cases, the focus will be on speedy resolution of issues in order to maintain the project schedule and quality of deliverables. The Issue Log sample below will be part of the RAID Log and will serve as a template for identifying and managing issues for this project:

ISSUES / QUESTION LOG											
Definition: An ISSUE is an existing constraints that that is negatively impacting program or initiatives timeliness, quality, resources, or budget at some point in the future.											
Legend: <span style="display: inline-block; width: 15px; height: 15px; background-color: #ccc; border: 1px solid #000; margin-right: 5px;"></span> Closed Item <span style="display: inline-block; width: 15px; height: 15px; background-color: #ffcc00; border: 1px solid #000; margin-right: 5px; margin-left: 20px;"></span> Pending Item <span style="display: inline-block; width: 15px; height: 15px; background-color: #add8e6; border: 1px solid #000; margin-left: 20px;"></span> New Item											
Item #	Issue Description	Priority	Identified by	Date Received	Assigned to	Date Closed	Status	Resolution	Linkage to Other Logs		
									Risk Log #	Action Log #	Decision Log #

**Exhibit 9: RAID - Sample Issue Log Tab**

Legend:

- Item Number – Issue number
- Issue Description - What is the issue?

- Priority – High, Medium, Low
- Identified By – Who identified the issue?
- Date Received – Date issue was entered into the register
- Assigned To- Who manages this issue?
- Date Closed – Date issue was resolved
- Status – Open or Closed
- Resolution - How do you intend to deal with this issue?
- Risk Log Number – Number assigned in Risk Log
- Action Log Number – Number assigned in Action Log
- Decision Log Number – Number assigned in Decision Log

### 7.4 SAMPLE ACTION LOG

An action log will be utilized to document and track action items. The Action Log sample below will be part of the RAID Log and will serve as a template for identifying and managing action items for this project:

Action Log		Legend: <span style="border: 1px solid black; display: inline-block; width: 15px; height: 10px; background-color: #ccc; margin-right: 5px;"></span> Closed Item <span style="border: 1px solid black; display: inline-block; width: 15px; height: 10px; background-color: #f96; margin-left: 20px; margin-right: 5px;"></span> Pending Item <span style="border: 1px solid black; display: inline-block; width: 15px; height: 10px; background-color: #add8e6; margin-left: 20px; margin-right: 5px;"></span> New Item										
Definition: An ACTION is a proactive task identified by the project team to address a known problem or situation. Actions may also		RAGI Resource Assignments										
Item #	Action Description	Priority	Date Assigned	Due Date	Assigned by	Status	Responsible	Accountable	Consult	Inform	Status Notes	

**Exhibit 10: RAID - Sample Action Log Tab**

Legend:

- Item Number – Action Item number
- Action Description - What is the action item?
- Priority – High, Medium, Low
- Risk Issue Log Number – Number assigned in Risk Log
- Date Assigned– Date Action Item issue was assigned
- Due date – Action Item due date
- Assigned By - Who is assigning action item?
- Status – Open or closed
- Responsible – Who is responsible for this Action Item?
- Accountable – Who is accountable for this Action Item?

- Consult – Who to consult with for this Action item?
- Inform – Who should be informed of the Action Item?
- Status Notes –Comments on Action Item

### **7.5 IDENTIFY ISSUE/ACTION ITEMS**

Issue submission provides the first step in the IA process and starts with the Issue Originator who identifies a project issue. An Issue Coordinator should review the issues in the tracking log to make sure the issue has not already been reported and possibly resolved.

The Originator must describe the issue and include any other information that could be helpful to whoever is assigned the issue to resolve. An issue may be identified in any number of ways for example:

- A problem for which there is no apparent answer.
- A current situation or event that cannot be answered immediately but requires some research and analysis to provide insight into actions that should be taken.
- An inability of two project entities or functional groups to come to an agreement on a particular item or process.
- The need for information external to the project inhibits or stops the development of the project solution until resolved.

The Issue Originator will enter the pertinent information about the issue into the issue tracking log. The information will include but not be limited to:

- Detailed description of the issue.
- Assessment of the potential impact to the project if the issue is not resolved.
- Resolution due date.
- Information identifying the Originator of the issue.

### **7.6 PLAN ISSUE/ACTION ITEM RESPONSES**

Once the issue/action item has been documented the Issue/Action Item Team (IAT) will review the IA and assign responsibility for developing and implementing an Action plan/resolution to an IA owner. The IA owner will analyze the issue/action item and develop an Issue/Action Item Action plan/resolution that describes the activities that need to be completed in order to address the issue/action item.

### **7.7 MONITORING AND CONTROLLING ISSUES/ACTION ITEMS**

This task completes the process and involves implementing the issue/action item Action plan/resolution, tracking their progress, identifying new issue/ action items, and evaluating the issue/action item management process throughout the project life cycle.

From time to time issues need to be resolved by escalating them to a more senior level. Criteria for escalating issues include:

- An issue or action item's resolution is more than 7 calendar days past due.
- An issue has reached an impasse and cannot be resolved within the current level.
- An agreement cannot be reached on the severity of an issue.
- An issue or action item is not making adequate progress toward resolution or completion.

If an issue is considered to be significant, but an impact analysis reveals that the resolution would be costly to the project in terms of resource drain or potential impact to other components of the project, then the issue should be escalated to determine the next steps. The IAT may agree that a given issue must be addressed at a higher level of management. In that case, it would immediately be escalated to the appropriate level.

The levels of escalation should correspond to the following:

- Level 1 - Project Managers: All issues begin at the Project Managers' level. An issue at this level indicates that it is being managed by the Project Management Team members who comprise the Issue / Action Item Coordination Team.
- Level 2 - Project Director: The Project Director will determine the resolution of issues that affect APD policies and procedures, or issues that cannot be resolved at lower levels of the organization. Upon initial review of the issue, the Project Director will determine whether the issue should be escalated to the Contract Management Team or can be appropriately handled at this level. Issues that cannot be resolved by the Project Director will be referred to the Contract Management Team for disposition.

## **7.8 DECISION LOG**

Throughout the project, the need for decisions will arise. The APD Project Manager will identify decisions by the project team or stakeholders utilizing the log listed below. A Decision Item is a formal decision that must be communicated to sponsors and stakeholders.

In accordance with its General Project Management Processes, the project team will make and document decisions as it is able, will communicate to the Project Director significant decisions, and will elevate to the Project Sponsor decisions required by the Project Sponsor or by other groups. The project team will also document in the decision log decisions that affect the project by the Project Sponsor or by other groups.

## SECTION 8 PROJECT COMMUNICATION

### 8.1 OVERVIEW

Communications management is a broad area comprised of the processes necessary to ensure effective communication among project stakeholders and project team members. It includes the generation, collection, storage, dissemination, and disposition of project information.

### 8.2 PURPOSE

The purpose of this section is to document the formal communication process developed for the Project. This plan defines:

- What needs to be communicated on the project
- Who is responsible for communicating with what audience
- When the communication needs to take place
- How information will be communicated.

The communication process was developed to ensure project stakeholders and team members are informed about the status of project initiatives at all times. However, the existence of a defined process does not confirm effective communications. The project team's execution of the communication processes will be the driver for the successful communication.

This plan provides a framework for project informational exchange within and outside the project. This plan focuses on formal communication elements, though other channels exist on informal levels, and enhance those discussed within this plan. This plan does not limit, but rather enhances communication practices. Open, ongoing communication between stakeholders and team members is vital to the success of the Project.

This communication plan is a key tool for promoting and enhancing organizational transformations toward new business processes. The plan will be updated as necessary throughout the project to reflect new or evolving communication needs (e.g. changes to stakeholders, scheduled meetings, or communication tools). Changes to this plan will be coordinated by the APD Project Manager and approved by the Project Sponsor.

### 8.3 SCOPE

This Project communication plan is for internal stakeholders. The scope of this plan includes identifying the stakeholder requirements for each communication type, the frequency of communication, the medium of communication, and the team member or members responsible for the communication.

The target audience for this plan includes:

- All project participants
- Project internal stakeholders

- Project team members

All other contractors and departmental staff are excluded. The communications strategies and procedures for external stakeholder communications are outside of the scope of this document.

#### **8.4 ROLES AND RESPONSIBILITIES**

Communication will be an ongoing function within the project and will be directed toward internal APD Agency stakeholder groups and the project team. The project team will work closely with stakeholder groups to ensure that communication needs are met and will adjust according to feedback received. Roles and responsibilities for Project communications are listed below.

<b>Role</b>	<b>Communication Responsibilities</b>
APD Project Sponsor	<ul style="list-style-type: none"> <li>▪ Provide input and guidance about stakeholder communications to the Project Director</li> <li>▪ Champion project within the Agency</li> </ul>
APD Project Director	<ul style="list-style-type: none"> <li>▪ Provide issue resolution and communications input and guidance to the Project Manager</li> </ul>
APD & Vendor Project Manager	<ul style="list-style-type: none"> <li>▪ Member of the project team, providing input and guidance to the team about Project stakeholder communication needs and strategies</li> <li>▪ Provide official communication to Team Leads for dissemination to the stakeholders</li> </ul>
APD Project Team	<ul style="list-style-type: none"> <li>▪ Provide input to the Project Manager about Project stakeholder communication needs and strategies</li> </ul>
Vendor Project Team	<ul style="list-style-type: none"> <li>▪ Members of the project team, providing input and guidance to the team about stakeholder communications needs, strategies, and events</li> <li>▪ Coordinate the collection and dissemination of project information to stakeholder audiences</li> <li>▪ Create weekly status report</li> <li>▪ Provide written status report to weekly status meeting attendees</li> <li>▪ Deliver verbal report during weekly status meetings</li> </ul>

**Exhibit 11: Project Communication Roles and Responsibilities**



## 8.5 STAKEHOLDER CONTEXT

The successful outcome of any Project relies on effective communications to the broad stakeholder population. Elements of effective communication for the project are stakeholder-driven; therefore, the planning process must include identifying all stakeholders. The stakeholder identification and analysis determines the most effective types and frequency of information stakeholders require to perform their role and to meet their responsibilities within the project.

### 8.5.1 STAKEHOLDER ANALYSIS

The stakeholder analysis consists of a systematic assessment of each of the stakeholder groups to determine:

- Entities and individual participants
- Contact information
- Role in the project
- Project Communication Needs
- Project Impact Assessment
- Special Considerations

Stakeholder involvement throughout the project will provide greater assurance of project success. Effective and timely involvement enables people to understand and take part in change rather than feel it is being imposed on them. This increases speed to adoption of change.

Stakeholders of change, especially large-scale, systemic change, have a need for information about the change. They generally ask the following questions:

- Why is this change necessary?
- Why is this change happening now?
- What is wrong with what we are doing today?
- What will happen if we don't change?

APD will identify stakeholders and conduct a stakeholder analysis to determine communications needs and preferences for each stakeholder group. We will then engage stakeholders in a variety of ways, providing opportunities for them to express their ideas, opinions, and concerns.

Stakeholder	Internal/ External	Stakeholder Description
APD Staff	Internal	
Waiver Support Coordinators	External	

Stakeholder	Internal/ External	Stakeholder Description
Providers	External	
Governors Office	External	
Clients	External	
Legislature & Governor's Office	External	

**Exhibit 12: Stakeholder Management Matrix**

**8.6 REQUIRED COMMUNICATIONS**

**8.6.1 BI-WEEKLY STATUS REPORTS**

The result of weekly status meetings will be a published status report distributed to the project team members and stakeholders. The Vendor PM will create and APD Project Managers will review and distribute the Status Report. The frequency of status submission agreed to between the APD and Vendor PMs during project initiation meetings is bi-weekly.

**8.6.2 STATUS MEETINGS**

The frequency of status meetings will be agreed to between the APD and Vendor project Managers during the first project initiation meeting. The result of these meetings is a published Status Report distributed to the project team members and stakeholders. Meeting attendees will be notified of changes to the time or location of these meetings via email and/or phone as far in advance as possible.

**8.6.3 MEETING AGENDAS**

No less than 24-hours prior to a scheduled workshop or meeting, the facilitator of that meeting will provide the meeting agenda to the scheduled attendees. Circumstances will arise where a meeting is scheduled and held in less than 24-hours. In this case, the meeting facilitator is expected to distribute an agenda when practicably feasible. It is expected the attendees of the meeting will review the agenda and any other documentation distributed prior to the meeting. Each agenda will include an action item section that will be reviewed during the meeting. Action items assigned during the meeting will be documented and distributed to the team in the meeting minutes.

**8.6.4 ADDITIONAL COMMUNICATION**

In addition to the regularly scheduled meetings noted above, occasionally written communication will be sent out by the project management team on an as needed basis. This communication will be specific in nature and may be broadcast to the general project population or to target audiences depending upon the circumstances involved.

## 8.7 COMMUNICATION DISTRIBUTION

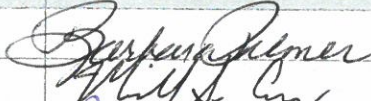




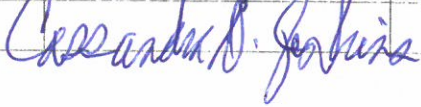
The subject matter of this plan is primarily internal (APD & Vendor) communication. The general flow of the documents will be out-going from the Project Management Team to the target audience.

Communication Type	Stakeholders	Medium	Frequency	Reporting Member
Status Report	Project Director	Email	Bi-Weekly	Vendor Project Manager
Status Meeting	Project Director	Face-to-Face	Weekly	APD & Vendor Project Manager
Meeting Agendas	As needed	Email	As needed	Project Team

**Exhibit 13: Project Communication Roles and Responsibilities**

## SECTION 9 APPROVALS

The signatures of the people below indicate an understanding in the purpose and content of this document by those signing it. By signing this document you indicate that you approve of the proposed project outlined in this business case and that the next steps may be taken to create a formal project in accordance with the details outlined herein.

Approver Name	Title	Signature	Date
Barbara Palmer	Agency Director		10/15/14
Michael Ayers	Chief of Staff		10/15/14
Denise Arnold	Deputy Director of Programs		10/15/14
<del>Sharon Bradford</del> David Dobbs	Deputy Director of Budget and Planning		10/15/2014
Mark Ervin <sup>Stephen</sup> Bailey	CIO		10/15/14
Cassandra Jenkins	Contracts		10/15/2014

### Success/Benefits Realization Table

#	Description of Benefit	Tangible or Intangible	Recipient	How is the Benefit Realized?	How Will the Realization of the Benefit be Assessed/Measured?	Realization Date (MM/YY)
1	More efficient transactions for client service needs	Intangible	Client	Faster Decisions regarding service needs	Time to respond to client request	01/17
2	Fraud prevention and service delivery verification	Tangible	Client Agency	Data collected from statewide actual expenditures for the Fiscal Year 2013-14 showed <del>21,336</del> 15,604 clients with <del>\$278.01</del> 219.79 million in expenditures for in-home services. A conservative 2% reduction from elimination of fraud and billing abuses is <del>\$5.564.40</del> million a year. The first year would not see a full savings based on an implementation schedule of 6 to 12 months.	Longitudinal comparison of provider claims billing to client service delivery	01/17
3	Reduce Cost for Operations/Maintenance	Tangible	Agency	Cost Savings from the elimination of the current billing and data systems.	Verification in Reduction of Cost Savings	07/18

4	Ability to track, measure, analyze, and trend service data and client progress to increase program accountability and to ensure maximum number of clients are served within budget appropriation	Intangible	Client Agency	Number of clients served	Number of clients served and client progress	07/16
5	Provider access to service authorizations promptly	Intangible	Client Provider Region staff	Reduction of time lapse from date of service approval to service delivery		07/16
6	Ability to track client incidents and follow up needed to address the issue	Intangible	Client	Analysis and trending of incident reports to implement corrective action needed	Reduction in type of incidents and timeliness of corrective action	01/16
7	Review of Service outcomes through utilization review to ensure client services are meeting the need and to ensure cost containment is maximized	Intangible	Client	Review of services delivered, client progress made, adjustment of authorized services	Number of services that are reduced over time as client progress is made	01/17
8	Compliance with CMS federal program is required for waiver federal matching funds	Intangible	Client Agency	State continues to receive federal matching funds for services under the federal waiver program	Submittal of Evidentiary Reports that are found to be in compliance	01/16
9	Secure maintenance of client central record	Intangible	Client Agency	Confidential information is stored securely	Number of records stored electronically	01/16

10	Improve accuracy of monitoring of licensed residential facilities and corrective action needed	Intangible	Client	Licensed facility monitoring data can be analyzed and trended to strengthen quality assurance system	Number of licenses resulting in administrative action	01/16
11	Improved tracking and monitoring of client behavioral and medical interventions to ensure client health and safety is protected	Intangible	Client	Reporting of medication errors and use of reactive strategies for behavior issues can be tracked, trended and remediated	Number of medication errors and reactive strategies used	01/16

Net Tangible Benefits - Operational Cost Changes (Costs of Current Operations versus Proposed Operations as a Result of the Project) and Additional Tangible Benefits -- CBA Form 1A															
Agency (Operations Only -- No Project Costs)	FY 2015-16			FY 2016-17			FY 2017-18			FY 2018-19			FY 2019-20		
	(a)	(b)	(c) = (a)+(b)	(a)	(b)	(c) = (a) + (b)	(a)	(b)	(c) = (a) + (b)	(a)	(b)	(c) = (a) + (b)	(a)	(b)	(c) = (a) + (b)
	Existing Program Costs	Operational Cost Change	New Program Costs resulting from Proposed Project	Existing Program Costs	Operational Cost Change	New Program Costs resulting from Proposed Project	Existing Program Costs	Operational Cost Change	New Program Costs resulting from Proposed Project	Existing Program Costs	Operational Cost Change	New Program Costs resulting from Proposed Project	Existing Program Costs	Operational Cost Change	New Program Costs resulting from Proposed Project
<b>A. Personnel -- Total FTE Costs (Salaries &amp; Benefits)</b>	\$0	\$545,667	\$545,667	\$0	\$1,159,600	\$1,159,600	\$0	\$1,159,600	\$1,159,600	\$0	\$1,159,600	\$1,159,600	\$0	\$1,159,600	\$1,159,600
<b>A.b Total FTE</b>	0.00	21.00	21.00	0.00	21.00	21.00	0.00	21.00	21.00	0.00	21.00	21.00	0.00	21.00	21.00
A-1.a. State FTEs (Salaries & Benefits)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A-1.b. State FTEs (# FTEs)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A-2.a. OPS FTEs (Salaries)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A-2.b. OPS FTEs (# FTEs)		0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A-3.a. Staff Augmentation (Contract Cost)		\$545,667	\$545,667	\$0	\$1,159,600	\$1,159,600	\$0	\$1,159,600	\$1,159,600	\$0	\$1,159,600	\$1,159,600	\$0	\$1,159,600	\$1,159,600
A-3.b. Staff Augmentation (# of Contract FTEs)	0.00	21.00	21.00	0.00	21.00	21.00	0.00	21.00	21.00	0.00	21.00	21.00	0.00	21.00	21.00
<b>B. Data Processing -- Costs</b>	\$0	\$729,167	\$729,167	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000
B-1. Hardware	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B-2. Software	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B-3. Other <i>COTS Software</i>	\$0	\$729,167	\$729,167	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000
<b>C. External Service Provider -- Costs</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-1. Consultant Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-2. Maintenance & Support Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-3. Network / Hosting Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-4. Data Communications Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-5. Other <i>Specify</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>D. Plant &amp; Facility -- Costs (including PDC services)</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>E. Others -- Costs</b>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E-1. Training	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E-2. Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E-3. Other <i>Specify</i>	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
<b>Total of Operational Costs ( Rows A through E)</b>	\$0	\$1,274,834	\$1,274,834	\$0	\$2,909,600	\$2,909,600	\$0	\$2,909,600	\$2,909,600	\$0	\$2,909,600	\$2,909,600	\$0	\$2,909,600	\$2,909,600
<b>F. Additional Tangible Benefits:</b>		\$1,831,622			\$4,395,892			\$4,395,892			\$4,395,892			\$4,395,892	
F-1. <i>EVV</i>		\$1,831,622			\$4,395,892			\$4,395,892			\$4,395,892			\$4,395,892	
F-2. <i>Specify</i>		\$0			\$0			\$0			\$0			\$0	
F-3. <i>Specify</i>		\$0			\$0			\$0			\$0			\$0	
<b>Total Net Tangible Benefits:</b>		\$556,788			\$1,486,292			\$1,486,292			\$1,486,292			\$1,486,292	

CHARACTERIZATION OF PROJECT BENEFIT ESTIMATE -- CBA Form 1B		
Choose Type	Estimate Confidence	Enter % (+/-)
Detailed/Rigorous <input type="checkbox"/>	Confidence Level	
Order of Magnitude <input checked="" type="checkbox"/>	Confidence Level	90%
Placeholder <input type="checkbox"/>	Confidence Level	



State of Florida	A	B	C	D	E	F	APPENDIX A	I	J	K	L	M	N	O	P	Q	R	Fiscal Year	2015-16T	
Cost Benefit Analysis	CDMS			CBA Form 2A Baseline Project Budget																
Costs entered into each row are mutually exclusive. Insert rows for detail and modify appropriation categories as necessary, but do not remove any of the provided project cost elements. Reference vendor quotes in the Item Description where applicable. Include only one-time project costs in this table. Include any recurring costs in CBA Form 1A.				FY2015-16			FY2016-17			FY2017-18			FY2018-19			FY2019-20			TOTAL	
				\$ 1,866,683	\$ 2,138,925			\$ -			\$ -			\$ -			\$ 4,005,608			
Item Description (remove guidelines and annotate entries here)	Project Cost Element	Appropriation Category	Current & Previous Years Project-Related Cost	YR 1 #	YR 1 LBR	YR 1 Base Budget	YR 2 #	YR 2 LBR	YR 2 Base Budget	YR 3 #	YR 3 LBR	YR 3 Base Budget	YR 4 #	YR 4 LBR	YR 4 Base Budget	YR 5 #	YR 5 LBR	YR 5 Base Budget	TOTAL	
5	Costs for all state employees working on the project.	FTE	S&B	\$ 507,750	49.00	\$ -	\$ 472,092	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ 979,842
6	Costs for all OPS employees working on the project.	OPS	OPS	\$ -	0.00	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -
7	Staffing costs for personnel using Time & Expense.	Staff Augmentation	Contracted Services	\$ -	0.00	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -
8	Project management personnel and related deliverables.	Project Management	Contracted Services	\$ -	0.00	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -
9	Project oversight (IV&V) personnel and related deliverables.	Project Oversight	Contracted Services	\$ -	0.00	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -
10	Staffing costs for all professional services not included in other categories.	Consultants/Contractors	Contracted Services	\$ 213,933	0.00	\$ 624,833	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 838,766
11	Separate requirements analysis and feasibility study procurements.	Project Planning/Analysis	Contracted Services	\$ 75,000		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ 75,000
12	Hardware purchases not included in Primary Data Center services.	Hardware	OCO	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -
13	Commercial software purchases and licensing costs.	Commercial Software	Contracted Services	\$ 1,070,000		\$ 1,042,000	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ 2,112,000
14	Professional services with fixed-price costs (i.e. software development, installation, project documentation)	Project Deliverables	Contracted Services			\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -
15	All first-time training costs associated with the project.	Training	Contracted Services	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -
16	Include the quote received from the state data center for project equipment and services. Only include one-time project costs in this row. Recurring, project-related data center costs are included in CBA Form 1A.	Data Center Services - One Time Costs	Data Center Category	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -
17	Other contracted services not included in other categories.	Other Services	Contracted Services	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -
18	Include costs for non-state data center equipment required by the project and the proposed solution (insert additional rows as needed for detail)	Equipment	Expense	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -
19	Include costs associated with leasing space for project personnel.	Leased Space	Expense	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -
20	Other project expenses not included in other categories.	Other Expenses	Expense	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -
21	<b>Total</b>			\$ 1,866,683	49.00	\$ 1,666,833	\$ 472,092	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ 4,005,608

Agency <u>                  APD                  </u>	<b>APPENDIX A</b>	Project <u>                  CDMS                  </u>
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PROJECT COST SUMMARY	PROJECT COST SUMMARY (from CBAForm 2A)					TOTAL
	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	
TOTAL PROJECT COSTS (*)	\$2,138,925	\$0	\$0	\$0	\$0	\$4,005,608
CUMULATIVE PROJECT COSTS <small>(includes Current &amp; Previous Years' Project-Related Costs)</small>	\$4,005,608	\$4,005,608	\$4,005,608	\$4,005,608	\$4,005,608	
Total Costs are carried forward to CBAForm3 Project Investment Summary worksheet.						

PROJECT FUNDING SOURCES	PROJECT FUNDING SOURCES - CBAForm 2B					TOTAL
	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	
General Revenue	\$213,893	\$0	\$0	\$0	\$0	\$213,893
Trust Fund	\$0	\$0	\$0	\$0	\$0	\$0
Federal Match <input type="checkbox"/>	\$1,925,032	\$0	\$0	\$0	\$0	\$1,925,032
Grants <input type="checkbox"/>	\$0	\$0	\$0	\$0	\$0	\$0
Other <input type="checkbox"/> Specify	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL INVESTMENT	\$2,138,925	\$0	\$0	\$0	\$0	\$2,138,925
CUMULATIVE INVESTMENT	\$2,138,925	\$2,138,925	\$2,138,925	\$2,138,925	\$2,138,925	

Characterization of Project Cost Estimate - CBAForm 2C			
Choose Type	Estimate Confidence	Enter % (+/-)	
Detailed/Rigorous	Confidence Level		
Order of Magnitude <sup>x</sup>	Confidence Level	90%	
Placeholder	Confidence Level		

COST BENEFIT ANALYSIS -- CBAForm 3A						
	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	TOTAL FOR ALL YEARS
Project Cost	\$2,138,925	\$0	\$0	\$0	\$0	\$4,005,608
Net Tangible Benefits	\$556,788	\$1,486,292	\$1,486,292	\$1,486,292	\$1,486,292	\$6,501,956
Return on Investment	(\$3,448,820)	\$1,486,292	\$1,486,292	\$1,486,292	\$1,486,292	\$2,496,348
Year to Year Change in Program Staffing	21	21	21	21	21	

RETURN ON INVESTMENT ANALYSIS -- CBAForm 3B		
Payback Period (years)	3 1/3	Payback Period is the time required to recover the investment costs of the project.
Breakeven Fiscal Year	2018-19	Fiscal Year during which the project's investment costs are recovered.
Net Present Value (NPV)	\$1,824,368	NPV is the present-day value of the project's benefits less costs over the project's lifecycle.
Internal Rate of Return (IRR)	25.99%	IRR is the project's rate of return.

Investment Interest Earning Yield -- CBAForm 3C					
Fiscal Year	FY 2015-16	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20
Cost of Capital	1.94%	2.07%	3.18%	4.32%	4.85%

Implementation Plan

Plan Steps	Fiscal Year 2014 - 2015												Fiscal Year 2015-2016												Fiscal Year 2016-2017					
	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Quarter 1			Quarter 2			Quarter 3			Quarter 4			Quarter 1			Quarter 2		
	Jul 2014	Aug 2014	Sep 2014	Oct 2014	Nov 2014	Dec 2014	Jan 2015	Feb 2015	Mar 2015	Apr 2015	May 2015	Jun 2015	Jul 2015	Aug 2015	Sep 2015	Oct 2015	Nov 2015	Dec 2015	Jan 2016	Feb 2016	Mar 2016	Apr 2016	May 2016	Jun 2016	Jul 2016	Aug 2016	Sep 2016	Oct 2016	Nov 2016	Dec 2016
Planning, Procurement and Contract	█	█	█	█	█	█																								
Kick Off Meetings, Design Requirements							█																							
Initial Setup and On-site Training - Regions 1, 2, 3								█	█	█																				
Initial Interface											█	█	█																	
Initial Setup and On-Site Training - Regions 4, 5, 6													█	█	█															
Provider Score Card															█	█														
Add Health, Implementation Plans, Tracking																	█	█												
Complete Phase I																				█										
Replace ABC																				█	█	█	█	█	█	█	█	█	█	█
Replace iBudget																														
Ongoing Enhancements																														