apd
agency for persons with disabilities
State of Florida

LEGISLATIVE BUDGET REQUEST

Rick Scott
Governor

■ ■

Barbara Palmer
Director

■ ■

State Office

■ ■

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Agency for Persons with Disabilities

Tallahassee

September 15, 2015

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 2016-17 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 2016-2017

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 agency estimates temporary special duty pay additives of approximately $8,000 for next fiscal year which is consistent with previous years' expenditures.

agency for persons with disabilities
State of Florida

Legislative Budget Request
Fiscal Year 2016-17

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 Persons with Disabilities** **Agency for Health Care Administration**		
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 if any appeal is made it 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 would be an appeal of OIG Audit A-04-10-00076.
Summary of the Complaint:	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 & 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-04-1 0-00076), issued March 1, 2013. 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.
Amount of the Claim:	$4,386,952 ($2, 193,476 federal share). Amended amount after CMS review is $1,774,798.
Specific Statutes or Laws (including GAA) Challenged:	This is an overpayment determination, and so the validity of state law is not at issue.
Status of the Case:	AHCA responded to the Demand letter on 6/3/14. APD sent a second response on 6/13/14. Based on additional review by CMS, CMS will be issuing a disallowance letter with a reduced amount of $1,774,798. The issuance date has not yet been determined.
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, Covington & Burling, Washington, D.C. (Prior outside counsel.)
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

Schedule VII: Agency Litigation Inventory	
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Agency:	**Agency for Persons with Disabilities**		
Contact Person:	Bill Crowe, APD Senior Attorney	Phone Number:	(850) 414-8097

Names of the Case: (If no case name, list the names of the plaintiff and defendant.)	G. H. and N. N. v. Barbara Palmer in her official capacity as Director, Florida Agency for Persons with Disabilities.
Court with Jurisdiction:	U.S. Dist. Ct. Northern District of Florida Tallahassee. U.S. Ct. of Appeals 11th.
Case Number:	4:13-cv-00131, Dist. Ct. 14-15412 11th Cir. Ct. of Appeals.
Summary of the Complaint:	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.
Amount of the Claim:	The amount is indeterminable at this time. The plaintiffs are seeking: 1) a declaratory judgment that APD violated their constitutional due process rights; 2) injunctive relief requiring APD to rescind all previously issued no trespass warnings; 3)attorney's fees; 4)and other relief.
Specific Statutes or Laws (including GAA) Challenged:	N/A-No statutes or laws were challenged.
Status of the Case:	Thereafter, Plaintiff filed an action in the U.S. District Court for the Northern District of Florida, Tallahassee Division (Case Number 4:13cv131-WS). On November 15, 2014, the District Judge issued an order granting APD's Motion for Summary Judgment. The Judge held that the Plaintiff's did not have a liberty interest in access to APD's office facilities. Plaintiffs filed a Notice of Appeal on December 3, 2014. The Solicitor General, agreed to represent the Agency on appeal. The Attorney General's Office has estimated that the mediation and appellate work would bring the total expended on attorney fees to approximately $250,000.00. Plaintiffs at their last report are seeking attorney's fees in the amount of $271,365 which does not cover any amounts for the mediation or appellate case. A mandatory mediation was held on February 25, 2015, which resulted in no agreement. The 11th Circuit set oral argument for October 2, 2015, in Jacksonville, and has also ordered the case to mediation again before oral argument. The mediation must be concluded on or before September 21, 2015, and the mediation is currently set for September 16, 2015. The primary issue is whether Appellant has a liberty interest in having access to APD's office.

Who is representing (of record) the state in this lawsuit? Check all that apply.		Agency Counsel
	X	Office of the Attorney General or Division of Risk Management
		Outside Contract Counsel

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).	N/A-This is not a class action lawsuit.

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 (LEAD AGENCY)**		
Contact Person:	Richard Tritschler, APD, General Counsel	Phone Number:	850-414-8052

Names of the Case: (If no case name, list the names of the plaintiff and defendant.)	United States v. State of Florida; now consolidated with A.R. V. Dudek.
Court with Jurisdiction:	U.S. Dist. Ct. Southern District of Florida
Case Number:	13-61576-CIV-Dimitrouleas consolidated with 12-60460-CIV
Summary of the Complaint:	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.
Amount of the Claim:	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.
Specific Statutes or Laws (including GAA) Challenged:	Action is brought pursuant to the Americans With Disabilities Act, as amended
Status of the Case:	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.

Who is representing (of record) the state in this lawsuit? Check all that apply.		Agency Counsel
	x	Office of the Attorney General or Division of Risk Management
	x	Outside Contract Counsel – GrayRobinson, PA

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).	Quasi class action brought by the U.S. Department of Justice.

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 Persons with Disabilities**		
Contact Person:	Richard Tritschler, APD General Counsel	Phone Number:	(850) 850-414-8052

Names of the Case: (If no case name, list the names of the plaintiff and defendant.)	J.R. v. Hansen now known as J.R. v. Palmer (as captioned in the Florida Supreme Court)
Court with Jurisdiction:	Florida Supreme Court; Questions certified to the Supreme Court from the Federal Court of Appeals for the Eleventh Circuit
Case Number:	13-1549
Summary of the Complaint:	This action is a "facial" and "as applied" Constitutional challenge to section 393.11, Florida Statutes. Plaintiff contends that section 393.11, Florida Statutes, fails to provide adequate due process to individuals who have been involuntarily admitted to Agency services.
Amount of the Claim:	$0.00
Specific Statutes or Laws (including GAA) Challenged:	Section 393.11, Florida Statutes
Status of the Case:	Appellant J.R. appealed to the 11th Circuit Court of Appeals an order of summary judgment from the District Court, Northern District of Florida in favor of Michael Hansen, - former Director of the Agency for Persons with Disabilities. After oral argument, the Eleventh Circuit certified questions of statutory interpretation to the Florida Supreme Court. The case was orally argued in the Florida Supreme Court on April 9, 2014. The Florida Supreme Court issued its opinion on May 14, 2015. The Court held that 393.0651, F.S., does not implicitly require APD to consider the propriety of continuing an involuntary admission pursuant to the elements required of a commitment order under s. 393.11, F.S. The Court further found no requirement under the statutes for APD to petition the circuit court for a person's release from an involuntary admission if the Agency determines that the circumstances that led to the involuntary admission have changed. APD's Motion for Rehearing is now pending before the Florida Supreme Court.

Who is representing (of record) the state in this lawsuit? Check all that apply.		Agency Counsel
	X	Office of the Attorney General – Alan Winsor, Solicitor General And the Division of Risk Management.
		Outside Contract Counsel

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).	N/A-This is not a class action lawsuit.

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 Persons with Disabilities**		
Contact Person:	Kurt Ahrendt, APD Senior Attorney	Phone Number:	(850) 414-0139
Names of the Case: (If no case name, list the names of the plaintiff and defendant.)	JDS v. APD		
Court with Jurisdiction:	Orange County Circuit Court		
Case Number:	06-CA-955		
Summary of the Complaint:	JDS was a developmentally disabled client in a licensed group home who was allegedly raped and impregnated.		
Amount of the Claim:	$1,150,000.00 originally - now $950,000.		
Specific Statutes or Laws (including GAA) Challenged:	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.		
Status of the Case:	This case was settled and dismissed, with prejudice, for the payment of $200,000 by the Division of Risk Management. 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 claims bill (SB 38) in the amount of $950,000 has been file for the 2016 legislative session.		
Who is representing (of record) the state in this lawsuit? Check all that apply.		Agency Counsel	
	X	Office of the Attorney General or Division of Risk Management	
	X	Outside Contract Counsel – Larry Townsend	
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).	N/A-This is not a class action lawsuit.		

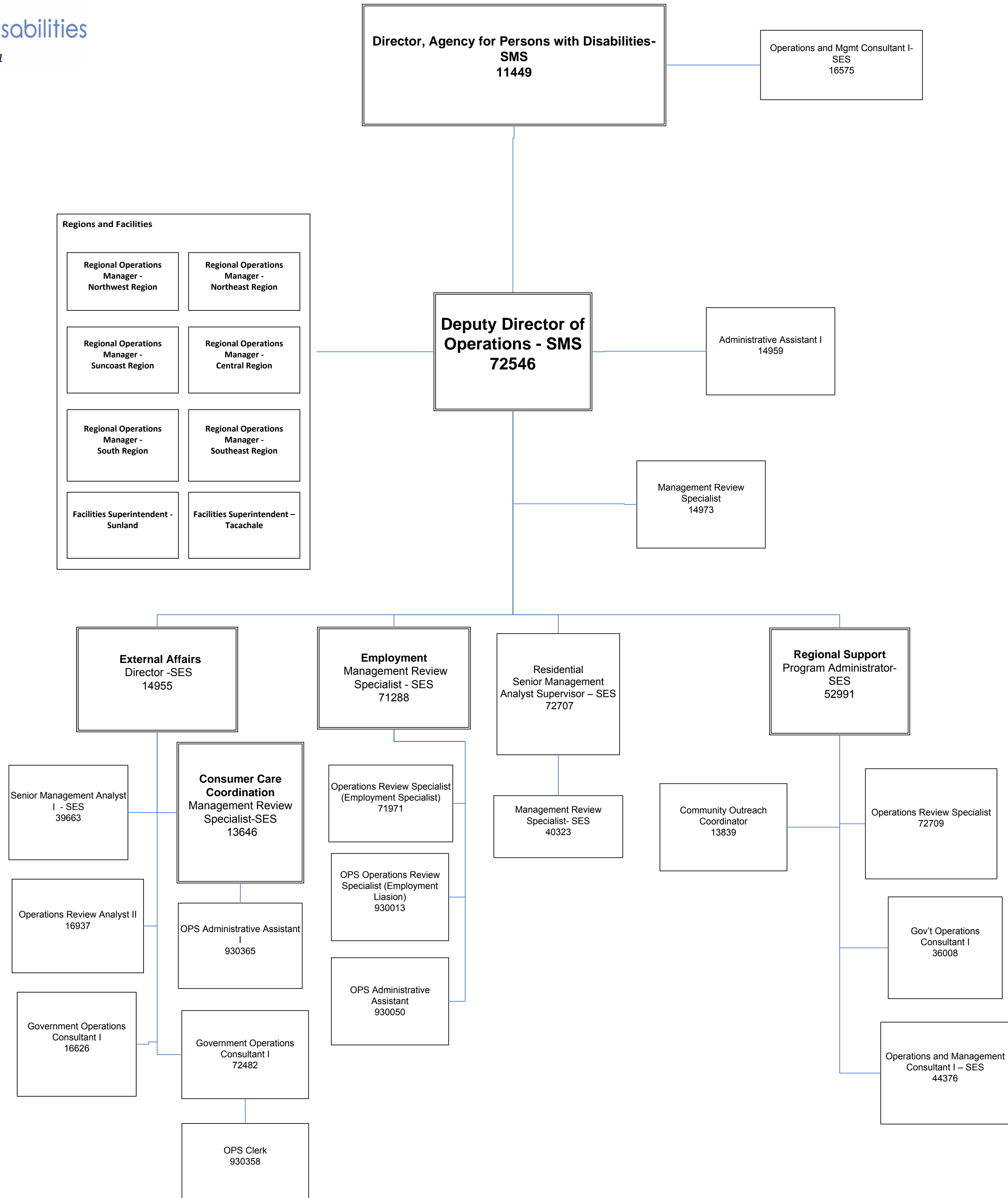| Schedule VII: Agency Litigation Inventory |
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Agency:	**Agency for Persons with Disabilities**		
Contact Person:	Richard Tritschler APD General Counsel	Phone Number:	850-414-8052

Names of the Case: (If no case name, list the names of the plaintiff and defendant.)	G.B., Z.L., through his guardian K.L., et al. (ibudget Rule Challenge Attorney Fees)
Court with Jurisdiction:	1st District Court of Appeal re Attorney's fees on appeal
Case Number:	1D13-4903; Lower Tribunal (DOAH) 13-001849RP
Summary of the Complaint:	The iBudget Rules (65G-4.0210-65/g4.027, F.A.C.) were noticed for publication. There were extensive interaction with the stakeholder community being impacted by the proposed rules including many public hearings and negotiations over language to end or avoid rule challenges.
	Dr. Niu of Florida State University was hired to develop an algorithm to comply with the provisions of section 393.0662, Florida Statutes. The rule adopted Dr. Niu's algorithm, as well as additional steps for determining what an eligible person's final iBudget should be. The algorithm's product for each client set the presumptive budget for that person.
	In an effort to implement the statutory directive that "appropriate assessment strategies" and an "efficient budget and billing process" be used and that a "methodology and process that ensures the equitable allocation of available funds based on the client's level of need…" be used, the rules included provisions for transitioning clients from the Tier system to the iBudget system, and for exploring the availability for other funding from alternative sources such as State Plan Medicaid services, school-based services, private insurance and other resources available to the individual before expending funds from the individual's iBudget. The agency developed and published rules that provided for an analysis of factors that sometimes led to a final iBudget amount that was below the amount produced by the algorithm allocation. APD contended the statute permitted or mandated this process.
	After an exhaustive three day hearing before an administrative law judge the rules were found to be supported by the statute and a valid exercise of legislative authority. The administrative law judge upheld the rules in their entirety.
	The petitioners appealed to the First District Court of Appeal and sought reversal of the DOAH decision and a declaration of the rules invalidity. Finding that, in its opinion, the iBudget Rules "contravene the specific requirements of the Legislature in the iBudget Statute" the court reversed the decision. The opinion stated: "A client's iBudget shall be the total of the amount determined by the algorithm and any additional funding provided pursuant to paragraph (b)." § 393.0662(1) (c), Fla. Stat. The court read the statute to require the minimum all clients were entitled to would be the amounts indicated by the algorithm. Adjustments were permitted only to create increases to provide for extraordinary needs or other items set forth in sections 393.0662(1)(c).

	Appellants asked the 1st DCA for attorney fees and the court granted the request and remanded the case to the administrative law judge to determine an appropriate amount.
Amount of the Claim:	$288,568.30 (plus likely to ask for fees in this appeal)$
Specific Statutes or Laws (including GAA) Challenged:	No law has been challenged.
Status of the Case:	Appellants asked the 1st DCA for attorney fees and the court granted the request and remanded the case to the administrative law judge to determine an appropriate amount. The Administrative Law Judge issued an Order on March 24, 2015, finding in the Agency's favor in the attorney's fees and costs dispute and awarded the Petitioner's the statutory limit under section 120.595(2), F.S., of $50,000 in attorney's fees and $41,000 in costs. This appeal is to review appellate fees and costs **Appellants appealed to the 1st DCA on 4/23/15. Oral Argument has been set for October 28, 2015. The two cases 1D13-4903 and1D15-1863 should be consolidated**

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: The Radey Law Firm (David Yon and Brittany Adams Long).

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).	Case is not a Class Action

Schedule VII: Agency Litigation Inventory

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Agency:	**Agency for Persons with Disabilities**

Contact Person:	Richard Tritschler, APD, General Counsel	Phone Number:	850-414-8052

Names of the Case: (If no case name, list the names of the plaintiff and defendant.)	G.B., Z.L., through his guardian K.L., et al. (ibudget Rule Challenge Attorney Fees
Court with Jurisdiction:	First District Court of Appeal
Case Number:	1D15-1863 (For appeal of fees in the underlying rule challenge)
Summary of the Complaint:	Appeal of attorney fee award from rule challenge (iBudget Rules). DOAH's Administrative Law Judge awarded fees of $50,000. Appellant contends they should have been in excess of $288,000.
Amount of the Claim:	$288,568.30 (plus likely to ask for fees in this appeal)
Specific Statutes or Laws (including GAA) Challenged:	None
Status of the Case:	Initial brief filed. APD to file response in September. **The two cases 1D13-4903 and1D15-1863 should be consolidated.**

Who is representing (of record) the state in this lawsuit? Check all that apply.	X	Agency Counsel: Richard Tritschler and Brian McGrail
		Office of the Attorney General or Division of Risk Management
	X	Outside Contract Counsel: The Radey Law Firm (David Yon and Brittany Adams Long).

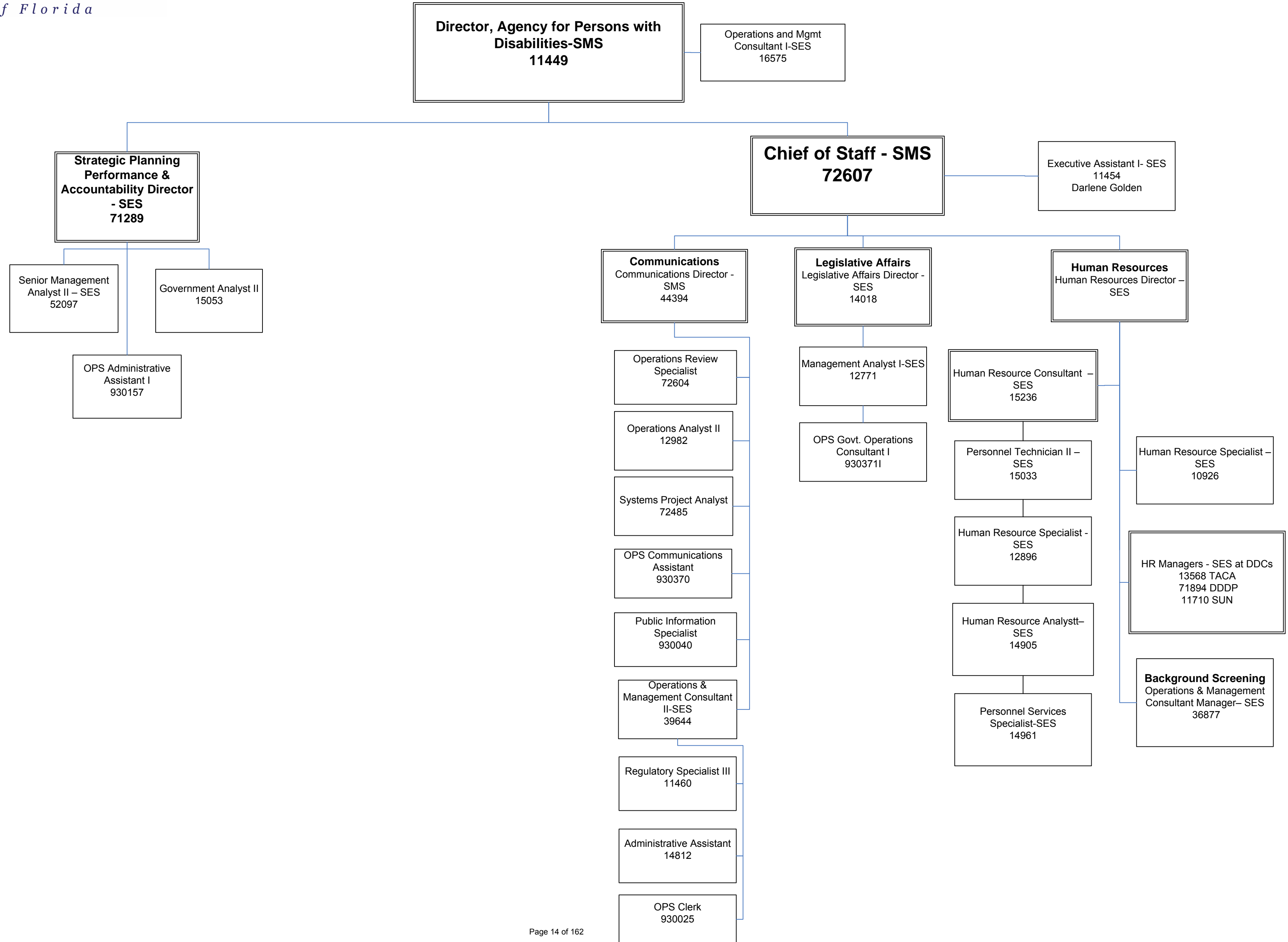|	
If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).	The lawsuit is not a class action.

agency for persons with disabilities
State of Florida

Director, Agency for Persons with Disabilities- SMS
11449

Operations and Mgmt Consultant I- SES
16575

Regions and Facilities

Regional Operations Manager - Northwest Region	**Regional Operations Manager - Northeast Region**
Regional Operations Manager - Suncoast Region	**Regional Operations Manager - Central Region**
Regional Operations Manager - South Region	**Regional Operations Manager - Southeast Region**
Facilities Superintendent - Sunland	**Facilities Superintendent – Tacachale**

Deputy Director of Operations - SMS
72546

Administrative Assistant I
14959

Management Review Specialist
14973

External Affairs
Director -SES
14955

Senior Management Analyst I - SES
39663

Operations Review Analyst II
16937

Government Operations Consultant I
16626

Consumer Care Coordination
Management Review Specialist-SES
13646

OPS Administrative Assistant I
930365

Government Operations Consultant I
72482

OPS Clerk
930358

Employment
Management Review Specialist - SES
71288

Operations Review Specialist (Employment Specialist)
71971

OPS Operations Review Specialist (Employment Liasion)
930013

OPS Administrative Assistant
930050

Residential
Senior Management Analyst Supervisor – SES
72707

Management Review Specialist- SES
40323

Regional Support
Program Administrator- SES
52991

Community Outreach Coordinator
13839

Operations Review Specialist
72709

Gov't Operations Consultant I
36008

Operations and Management Consultant I – SES
44376

agency for persons with disabilities
State of Florida

Director, Agency for Persons with Disabilities- SMS
11449

Operations and Mgmt Consultant I- SES
16575

OPS Operations Analyst II
965476

Senior Management Analyst II-SES
14870

Deputy Director of Programs - SMS
12767

Administrative Assistant I
16835

Quality Management
Senior Management Analyst Supervisor – SES
11463

Program Services
Senior Management Analyst Supervisor – SES
16728

Program Administrator - SES
11483

Accounting & Finance Manager B- SES
11459

Quality Assurance and Training: Management Review Specialist- SES
39829

Clinical Supports: Executive Nursing Director
15030

Program Administrator – SES
16516

Program Administrator
Financial Administrator-SES
15014

Staff Assistant
15284

Government Operations Consultant III
14933

Accounting Service Analyst C
44373

Government Operations Consultant II
72474

Registered Nursing Specialist
15288

OPS Government Analyst II
930027

Senior Human Services Program Specialist
71912

Health Services & Facilities Consultant
15908

OPS Project Manager
930012

Government Operations Consultant II
16212

Government Operations Consultant III
36876

Operations Review Specialist
16512

OPS Government Analyst II
930180

Government Operations Consultant I
67239

Government Operations Consultant II
40558

Government Operations Consultant II
11547

OPS Government Analyst I
930003

Operations Review Specialist
11478

Operations Review Specialist
14991

OPS Training & Education Specialist
930212

Programs & Policy Coordinator – SES
16840

Government Operations Consultant II
12155

Management Review Specialist - SES
71285

OPS Fiscal Assistant I
930367

Human Services Program Specialist
15161

OPS Fiscal Assistant I
930018

OPS Training & Education Specialist
930158

Operations Review Specialist
72708

OPS Administrative Assistant I
930029

OPS Fiscal Assistant I
952326

OPS Government Operations Consultant II
902212
C

OPS Research & Training Specialist
930247

OPS Fiscal Assistant I
952330

OPS Fiscal Assistant I
952328

OPS Fiscal Assistant I
952329

agency for persons with disabilities
State of Florida

Director, Agency for Persons with Disabilities-SMS
11449

Operations and Mgmt Consultant I-SES
16575

Chief of Staff - SMS
72607

Executive Assistant I- SES
11454
Darlene Golden

Strategic Planning Performance & Accountability Director - SES
71289

Senior Management Analyst II – SES
52097

Government Analyst II
15053

OPS Administrative Assistant I
930157

Communications
Communications Director - SMS
44394

Legislative Affairs
Legislative Affairs Director - SES
14018

Human Resources
Human Resources Director – SES

Operations Review Specialist
72604

Operations Analyst II
12982

Systems Project Analyst
72485

OPS Communications Assistant
930370

Public Information Specialist
930040

Operations & Management Consultant II-SES
39644

Regulatory Specialist III
11460

Administrative Assistant
14812

OPS Clerk
930025

Management Analyst I-SES
12771

OPS Govt. Operations Consultant I
930371I

Human Resource Consultant – SES
15236

Personnel Technician II – SES
15033

Human Resource Specialist - SES
12896

Human Resource Analystt– SES
14905

Personnel Services Specialist-SES
14961

Human Resource Specialist – SES
10926

HR Managers - SES at DDCs
13568 TACA
71894 DDDP
11710 SUN

Background Screening
Operations & Management Consultant Manager– SES
36877

Director, Agency for Persons with Disabilities-SMS
11449

Operations and Mgmt Consultant I-SES
16575

Systems Project Analyst
11452

Information Systems & Services Administrator- SES
12776

Information Security
Data Processing Manager- SES
52990

OPS Distributed Computer Systems Analyst
960807

Data Processing Manager - SES
14982

Information Technology Analyst
72483

Information Technology Business Consultant-SES
13726

Information Technology Section Leader -SES
39668

Computer Programmer Analyst I
52257

Data Processing Administrator – SES
14808

Distributed Computer Systems Analyst
32460

OPS IT Specialist
962950

Systems Programmer III
32656

Distributed Computer Systems Analyst
11461

Distributed Computer Systems Analyst
16198

Distributed Computer System Analyst
39681

Distributed Computer Systems Analyst
11891

OPS Dist. Computer Systems Analyst
930016

OPS Data Processing Control Specialist
930002

Distributed Computer Systems Analyst-SES Sunland
11728

Distributed Computer Systems Specialist
39358

Operations Analyst II
56706

Office Automation Specialist I
72370

Office Automation Specialist I
56559

Distributed Computer Systems Analyst
72268

ABC Customer Support
Senior Management Analyst Supervisor- SES
72471

Government Operations Consultant II
72480

Government Operations Consultant II
72479

Government Operations Consultant II
72478

Government Operations Consultant II
39744

Operations & Management Consultant Manager – SES
72475

OPS Distributed Computer Systems Analyst
930015

OPS Distributed Computer Systems Analyst
930359

OPS Gov't Operations Consultant II
930005

Data Processing Manager – SES
11450

Application Systems Programmer III
11462

Computer Program Analyst II
44901

Computer Programmer Analyst II
11479

Web Manager
16830

Systems Programmer III
48565

Systems Programmer III -SES
12735

Application Systems Programmer III-SES
11481

agency for persons with disabilities
State of Florida

Director, Agency for Persons with Disabilities- SMS
11449

Operations and Mgmt Consultant I-SES
16575

General Counsel SMS 72582

Executive Assistant I – SES
14919

Inspector General SMS 11661

Deputy General Counsel - SES
16588

Deputy General Counsel - SES
53362

Attorney Supervisor - SES
Tacachale
13000

Director of Auditing - SES
12873

OPS Attorney
930034

Senior Attorney - SES
14794

OPS Attorney
930038

Operations & Management Consultant I – SES
Tacachale
40329

Office Operations Consultant I
16044

Senior Attorney-SES
14895

Senior Attorney- SES
15966

OPS Administrative Assistant I
930326

Administrative Assistant II - SES
MRDP
72541

Senior Management Analyst II-SES
15094

OPS Senior Attorney
910002

Senior Attorney - SES
16802

Operations & Management Consultant I- SES
22870

Senior Attorney - SES
MRDP
69982

Inspector Specialist - SES
39676

OPS Administrative Secretary
930023

Senior Attorney – SES
Jacksonville
16801

OPS Legal Assistant
930022

OPS Attorney
965347

Program Integrity
Operations and Management Consultant II-SES
13083

Senior Attorney-SES
14760

Senior Attorney- SES
16803

Administrative Assistant I
15063

Senior Attorney - SES
Miami
16699

Senior Attorney - SES
16805

OPS Paralegal Specialist
930039

Senior Legal Assistant
11467

OPS Administrative Assistant I
930041

OPS Clerk Specialist
913139

Senior Attorney - SES
16806

Attorney - SES
02856

Administrative Secretary
930028

Govt. Operations Consultant II
16498

agency for persons with disabilities
State of Florida

Director, Agency for Persons with Disabilities-SMS
11449

Operations and Mgmt Consultant I-SES
16575

Operations & Management Consultant II-SES
40526

Deputy Director of Budget Planning & Administration-SMS
12727

Management Review Specialist-SES
72472

- Operations Review Specialist
  14957
- Operations Review Specialist
  72486
- Operations Review Specialist
  11457

Financial Services
Chief of Financial Services – SES
11471

Systems Project Admin.-SES
11458

System Project Analyst
14803

Revenue Management
Financial Administrator – SES
14910

- Operations Review Specialist
  12789
- Government Analyst I
  13680

Budget Management
Budget Supervisor – SES
11490

- Management Review Specialist-SES
  08303
- Budget Analyst-SES
  15000
- Operations & Management Consultant II-SES
  40539

Accounting
Accounting & Finance Manager – B SES
14977

- Senior Management Analyst II-SES
  15905
- Government Operations Consultant II
  72550
- Professional Accounting Specialist – SES
  12751
- Accounting Services Analyst E
  11453

Accounts Payable
Finance & Accounting Director III – SES
36886

- Accountant I
  19451
- Accountant I
  00459
- Operations & Management Consultant-SES
  13790
- Accountant IV
  72481

Support Services Director– SES
52256

Senior Management Analyst II-SES
15047

- Government Analyst I
  31369
- Government Analyst I
  15027
- Purchasing Analyst
  14954

Management Review Specialist-SES
31773

- Purchasing Analyst
  14953
- Purchasing Analyst-SES
  14902

Operations & Management Consultant II-SES
15067

- General Services Analyst
  12778

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AGENCY FOR PERSONS WITH DISABILITIES
CENTRAL REGION

Administrative Assistant II
67072277

Regional Operations Manager
67021243

Senior Attorney
670xxxxx
Reports to Central Office

Deputy Regional Operations Manager
67061452

Administrative Assistant I
67072283

Administrative Services Regional Program Supervisor
Vacant

Budget Analyst
67014598

Operations Analyst II
67035212

Fiscal Assistant II
67069911

Facilities Services Specialist
0.0 FTE

IT
(Reports to Central Office)

Quality Improvement Regional Program Supervisor
67025208

Sr Human Services Program Specialist SES
67036229

Human Services Program Specialist
67032318
67032233
67052254
67055525
67016123
67056989

Human Services Program Specialist
(Regional Provider Enrollment Coordinator)
67015150

Human Services Program Specialist
(Training)
67016112

Human Services Program Specialist
(SE)
67016203

OPS Data Entry Operator
67951322

Human Services Program Specialist
(Residential Planning Coordinators)
67042254
67016684

Secretary Specialist
67053288

Sr Human Services Program Specialist SES
67016773

Human Services Program Specialist
67032228
67019396
67069912
67056605
67039785
67032226

Human Services Program Analyst
67033649
67055523
67016689
67042498
(0.5 FTE)

OPS Clerk Typist
67913027

OPS Human Services Analyst
67913156

Clinical Supports Regional Program Supervisor
67035210

Registered Nurse Specialist
67016746

Senior Behavioral Analyst
67012799
67016747

Behavioral Specialist
67015173

Secretary Specialist
67056990

OPS Operations Review Specialist (Behavior)
67907810

OPS Registered Nursing Consultant
67913028
67913155
67913056
67914027
67914086
67907144
67907032
67907064
67907042
67913029
67914169

OPS Sr Human Services Program Analyst
67940044
67940047
67907804
67940046
67940048
67940049
67940045
67940116
67940115
67940114
67940107
67940106
67940110
67940109
67940108

Medicaid Waiver Regional Program Supervisor
67048700

Sr Human Services Program Specialist SES
67053285

Human Services Program Specialist
67007492
67055521
67053284
67055520
67056988

OPS Clerk Typist Specialist
67907802

Sr Human Services Program Specialist SES
67036054

Human Services Program Specialist
67034742
67016709
67035213

OPS Data Entry Operator (CDC)
67950715

Human Services Program Specialist
67016705
67040241
67056488

Administrative Assistant I
67056419

Billing & Special Waiver Project Operations & Mgmt Consultant II
2.0 FTE

Community Affairs & Waitlist Regional Program Supervisor
67016743

Management Review Specialist
[External Affairs]
67053286

Human Services Program Specialist
67044389
67039751
67064069

OPS MIG Specialist
67930019

OPS Human Service Program Analyst
67914025
0.5 FTE

Clerk Typist Specialist
67042499

OPS Clerk
67930349

Sr Human Services Program Specialist SES
GR Supervisor
Vacant (Unfunded)

Human Services Counselor III
67016744
67016687
67016686
67055522
67055519
67053283
67053431
67042253
67056445
67032207
67016235
67040098
67056604

Human Services Program Analyst
67016204
(Intake)

Secretary Specialist
67011567

Administrative Assistant II (SES)
1 FTE
67072274

Regional Operations Manager (SES) 1 FTE
67021562

Secretary Specialist
1 FTE
67072273

Regional Program Administrator (SES)
1 FTE
67033650

Administrative Services Regional Program Supervisor (SES)
1 FTE 67019352

QI Regional Prog. Supv. (SES)
1 FTE 67016043

Wait List & Community Affairs Regional Prog Supv (SES)
1 FTE
67016708

Secretary Specialist
67063895
1 FTE

Administrative Assistant I
1 FTE
67011065

Clinical Supports Regional Program Supervisor (SES)
1 FTE
67011554

Clerk
.5 OPS
67903126

Medicaid Waiver Regional Program Supervisor (SES)
1 FTE
67016865

Budget Analyst (SES)
1 FTE
67072272

Fiscal Assistant II
2 FTEs
67039830

67016110

Operations Analyst II
1 FTE
67011555

Sr. HS Prog.Spec (SES)
1 FTE
67032204

Sr. HS Program Spec (SES)
1 FTE
67035200

Sr. HS Prog Spec (SES)
1 FTE
67011721

HS Prog Spec Provider Liaison
6 FTEs
67056531
67069970
67036196
67072342
67039778
67053398

Operations Management Consultant II (SES) *
1 FTE
67015036
*Position funded through Tacachale

Secretary Specialist
1.5 OPS
67090401
67904024

Sr. HS Program Spec (SES)
1 FTE
67033647

HS Prog. Specialist Licensing
1 FTE
67035203

HS Prog Analyst Vendor Enrollment
2 FTEs
67015302
67061045

HS Prog Analyst GH Monitor
2 FTEs
67016188
67013784

HS Prog. Analyst GH/SL Monitors
3 FTEs
67058484
67058486
67016711

Sr. Physician
1 OPS 67903009

HS Prog. Specialist Licensing
2 FTE
67016113
67040719

HS Analyst GH Monitors
67055975

Human Services Program Specialist Residential Coordinator
1 FTE
67056725

Receptionist .5 OPS
67912200

Sr. HS Prog. Specialist (SES)
1 FTE
67016117

Sr .HS Prog. Specialist (SES)
FTE
67057481

HS Counselor III
4 FTE
67011570
67011566
67058487
67036212

HS Counselor III
2 FTEs
67033408
67033407

Secretary Specialist
.50 OPS
67911187

HS Counselor III
2 FTEs
67053430
67035225

HS Prog. Analyst Intake
2 FTE
67056532
67011561

Operations Management Consultant I SES Community Affairs
1 FTE
67016109

HS Program Specialist
1 FTE
67056721

HSC III
1 OPS
67903128

Secretary Specialist
2 OPS
67903129
67903001

Sr. HS Program Analyst QSI Assessor
13 OPS
67940034
67940036
67940038
67940035
67940037
67940039
67940101
67940100
67940102
67940028
67940026
67940027
67940029

Sr. Behavior Analyst
2 FTEs
67053411
67055974
1 OPS
67912201

RN Specialist
1 FTE
67016111
5 OPS
67903127
67090403
67090404
67912066
67912017

Behavior Specialists HS Prog. Specialist
.5 OPS
67904003
1.0 OPS
67903008

Forensic Coordinator HS Prog Specialist
1 FTE
67022162

Government Operations Consultant II
1 FTE
67072473
(Under state office, Move Planned)

Sr, Human Services Program Specialist (SES)
1 FTE
67053412

Data Entry Operator
.5 OPS
67950414
.5 OPS
67950312

HS Program Specialist
4 FTEs
67039828
67015129
67058485
67011562

Sr. Human Services Program Specialist (SES)
1 FTE
67035226

HS Prog. Specialist
4 FTEs
67011565
67011596
67072275
67014817

Secretary Specialist
1 FTE
67016678

HS Prog. Specialist
3 FTEs
67072271
67016077
67016076

Secretary Specialist
1 FTE
67072270

Secretary Specialist
OPS
67962386

Northwest Region Operations Manager
032042

Human Services Program Specialist
011790

OPS - Clerk
902213
901012

Administrative Assistant II
053462

Administrative Services Regional Program Supervisor
011455

NW Regional Program Administrator
030517

Medicaid Waiver Regional Program Supervisor
039796

Operations Management Consultant I
016102

Budget Analyst
056510

Quality Improvement Regional Program Supervisor
016033

OPS - Clerk Typist
902207

Clinical Supports Regional Program Supervisor
012319

Secretary Specialist
053464

Government Operat Consultant II
040744

Fiscal Assistant II
vacant - 016172
056465

Human Services Program Specialist
vacant - 056707
016164
016037
033645
036823
016156
052264

Secretary Specialist
016157

Waitlist and Community Affairs Regional Program Supervisor
072266

OPS - Adm. Secretary
902033

OPS - Secretary Specialist
901120

Human Services Program Specialist
035197
053475
057344
016158
016154
016101

Sr. Human Services Program Specialist
016090

Secretary Specialist
072259

Operations Management Consultant I
016095

OPS - Sr. Human Services Program Analyst
940013
940010
940012
940018
940017
940016
940020
940019
940011

Human Services Program Specialist
016871

HS Program Analyst
021373

Sr. HS Program Anaylst
016160

Operations Management Consultant II
016155

Human Services Program Specialist
053463

OPS - RN Nursing Consultant
902030
902028
901127

Human Services Program Specialist
056511
072263

Human Services Program Analyst
033651
016174
053476
016153

Sr. HS Program Specialist
072265

OPS - Senior Psychologist
902208

Human Services Analyst
016151

Human Services Counselor III
016176
057266
033668
vacant - 016163
(OPS) - 901041

Agency for Persons with Disabilities
Southeast Region

Senior Attorney
670xxxxx
Reports to State Office

Regional Operations Manager
67029069
1.0 FTE

Administrative Assistant II
67033664
1.0 FTE

Senior Attorney
679xxxxx
Reports to State Office

Deputy Regional Operations Manager
67007351
1.0 FTE

Administrative Assistant I – SES
67017503
1.0 FTE

Secretary Specialist
67910030
.50 OPS

Administrative Services Regional Program Supervisor
67021979
1.0 FTE

Quality Improvement Regional Program Supervisor
67032206
1.0 FTE

Clinical Supports Regional Program Supervisor
67032386
1.0 FTE

Medicaid Waiver Regional Program Supervisor (SES)
67016131
1.0 FTE

Community Affairs and Wait List Regional Program Supervisor
67053414
1.0 FTE

Fiscal Assistant II
67015117
67003366
2.0 FTE

Operations Analyst II
67033667
1.0 FTE

Secretary Specialist
67014265
67048254
1.50 FTE

IT
Reports to Central Office

Senior Human Services Program Specialist
67031520
1.0 FTE

Senior Human Services Program Specialist (Residential and Licensing Supervisor)
67056800
1.0 FTE

Registered Nurse Specialists
67015292
67910031
67915013
1.0 FTE
2.0 OPS

Senior Behavior Analyst
67056614
1.0 FTE

Sr. Human Services Program Specialist (SES)
67053271
1.0 FTE

Sr. Human Services Program Specialist (SES)
67013921
1.0 FTE

Operations Analyst (Community Affairs)
6702281
1.0 FTE

Sr. Human Services Program Specialist (SES)
67016222
1.0 FTE

Human Services Program Analysts (Provider Enrollment)
67016244
67016245
2.0 FTE

Human Service Program Specialists (Licensing)
67039832
67016126
67007355
67015294
67016759
67035207
6.0 FTE

Senior Behavior Analyst
67909029
67052803
67915010
.75 FTE
1.25 OPS

Behavioral Specialists
67016142
67910003
1.0 FTE
.5 OPS

Human Services Program Specialist (CDC+ Liaison)
67016620
67016227
67015336
3.0 FTE

Human Services Program Specialists
67040209
67016692
67909019
67015311
5.0 FTE
1 OPS

Senior Human Services Program Analyst (Supported Employment)
67900015
1.0 OPS

Human Services Counselor III (GR Support Coordination)
67016228
67053465
67056608
67016130
67016226
67016224
67032205
67016248
8.0 FTE

Human Services Program Specialists (Provider Liaison)
67015372
67016138
67042186
67052259
3.0 FTE

Human Service Program Analysts (Group Home Monthly Monitoring)
67016143
67016697
67016243
67016126
67013154
67915008
6.0 FTE
1.0 OPS

Sr. Human Services Program Specialist (Lead)
67016225
67034744
67033652
3.0 FTE

Senior Human Services Program Analysts QSI Assessors (Lead)
67940072
67940064
67940065
67940067
67940072
67940073.
67940074
67940075
67940076
67940077
67940120
67940122
67940121
13 OPS

Human Services Program Specialist
67012669
1.0 FTE

Human Services Program Specialist (Provider Training)
67053274
1.0 FTE

Secretary Specialist
67915011
.5 OPS

Sr. Human Services Program Specialist
67016223
(Lead)
1.0 FTE

Human Service Program Specialist (Residential Planning Coordinator)
67016185
67016759
2.0 FTE

Secretary Specialist
67032235
67915009
.5 OPS 1.0 FTE

Operations & Management Consultant II (Eligibility)
67016247
1.0 FTE

Human Services Program Analysts (Intake)
67032231
67033663
2.0 FTE

Southern Region

Regions Operations Manager
67016144 1.0 FTE

Receptionist
67911231 1.0 OPS

Administrative
Assistant II
67056278 1.0 FTE

Senior Attorney
67016699 1.0 FTE**

Administrative Assistant I
67015096 1.0 FTE

Senior Attorney

Regional Program Supervisor
67035223 1.0 FTE

Fiscal Assistant II
67016680
67042094 2.0 FTE
67911003 1.0 OPS

Facilities Services Specialist
67053538
1.0 FTE

Operations Review Specialist
67024003 1.0 FTE

IT (Reports to State Office)
67039681 1.0 FTE *

Regional Program Supervisor
67013909 1 FTE

Human Service Program Specialist
67016255
67033669
67032209
67016162 4.0 FTE
67911708
67911225
67911074 3.0 OPS

Senior Human Services Program
Specialist
67035222 1.0 FTE

Human Services Program Specialist
67016256
67042497
67053539 3.0 FTE

Human Services Program Analyst
67016149 1.0 FTE

Human Service Program
Specialist
67011381 1.0 FTE

Secretary Specialist
67016146
67016701 2.0 FTE

Senior Clerk
67911095 1.0 OPS

Sr.Human Services Program Specialist
67016714 1.00 FTE
Human Services Program Analyst
67016253
67042090 2.00 FTE

Regional Program Supervisor
67016735 1.0 FTE

Senior Behavioral Analysts
67053542 1.0 FTE
67911719 1.0 OPS

Sr.Human Services Program Analysts
67940082
67940087
67940090
67940093
67940092
67940088
67901128
67940085 8.0 OPS

Administrative
Assistant I
67940091 1.0 OPS

Registered Nurse Specialists
67911720 1.OPS

Administrative
Assistant I
67911082 1.0 OPS

Regional Program Supervisor
67032195 1.0 FTE

Sr.Human Services Program Specialist
67053537 1.0 FTE
Human Services Program Analyst
67042089
67016258
67057436
67057438
67040099
67032208
67016693
67057434 8.0 FTE

Secretary Specialist
67032212 1.0 FTE
ClerkTypist Specialist
67911029 1.0 OPS

Administrative Assistant I
67911060
1.0 OPS

Human Services
Program Analiyst
67057435 1.0 FTE

Sr.Human Services
Program Analyst
67057038 1.0 FTE

Operations and Mgmt
Consultant II
67032213 1.0 FTE

Regional Program Supervisor
67045285 1.0 FTE

Human Services Program Specialist
67035206
67053540
67016208 3.0 FTE
67911224 1.0 OPS

Senior Human Services Program
Specialist
67016148 1.0 FTE

Administrative Assistant
67016252 1.0 FTE

Secretary Specialist
67034745 1.0 FTE

Operations Management
Consultant II
1.0 FTE *

** Funded by SR and report to SO

Agency for Persons with Disabilities Suncoast Region,

072286
Administrative Assistant II
CS

016434
Regional Operations Manager
SES

031730
Regional Program
Administrator-SES

004549
Administrative Assistant I
CS

016910
Regional Program
Supevisor-SES

016213
Regional Program Supervisor
-SES

019011
Administrative Assistant I

016052
Regional Program Supervisor-
SES

072285
Administrative Assistant I - SES

072280
Clerk Typist
Specialist

035215
Regional Program Supervisor -
SES

053357
REGIONAL PROGRAM
SUPERVISOR - SES

024010
ADMINISTRATIVE
ASSISTANT I

014422
SHSPS-SES

039749
HSPD SES

053467
SR. BEHAVIORAL
ANALYST

072278
RNS

016136
SR. BEHAVIORAL
ANALYST

053685
SHSC SUPV - SES

016517
RNS

940059
SHSPA OPS (QSI)

940132
SHSPA OPS (QSI)

016715
SHSPS-SES

072279
OMC I SES

033659
HSPS

042577
SHSCS

016134
SECRETARY
SPECIALIST

016071
HSPS SES

011725
HSPS SES

016440
SR HSPS - SES

032214
FISCAL ASSISTANT I

040011
HSPS

032220
HSPS

072287
HSPS

015295
HSPS

923083
CBA OPS

908100
LPN OPS

908102
PSYCHOLOGICAL
SPECIALIST OPS

016218
HSC III

923060
RN OPS

940058
SHSPA OPS (QSI)

940133
SHSPA OPS (QSI)

040093
HSC III

016100
BEHAVIORAL
SPECIALIST

056655
HSPS

016234
HSC III

016704
HSC III

016124
BEHAVIORAL
SPECIALIST

060452
GOC II

053416
HSC III

053707
SHSPS

016582
HSPS

016099
HSPS

036228
SHSPS

016120
HSPA

923303
CLERK TYPIST
SPECIALIST/OPS

RNS OPS
908100
908001

039102
HSPA

923040
RN OPS

940134
SHSPA OPS (QSI)

014883
HSPS

016710
HSCIII

033662
OMC II

016121
HSPS

016238
HSPS

005802
HSPA

056437
HSPA

923907
CBA OPS

908189
RNS OPS

016217
HSC III

923091
RN OPS

940126
SHSPA OPS (QSI)

940135
SHSPA OPS (QSI)

058656
HSC III

016682
COMMUNITY PLANNER

005546
HSPS

032224
HSCIII

015563
HSPA

058655
HSPS

056606
HSPS

053359
DATA ENTRY
OPERATOR

056331
HSPA

923339
RN OPS

940127
SHSPA OPS (QSI)

940136
SHSPA OPS (QSI)

057097
HSCIII

032216
CLERK TYPIST
SPECIALIST

032225
HSCIII

908103
HSC III -OPS .5

015010
HSPS

940060
BEHARIORAL ANALYST
OPS

923338
RN OPS

940128
SHSPA OPS (QSI)

940137
SHSPA OPS (QSI)

057095
HSCIII

053417
CLERK TYPIST SPECIALIST

058654
HSC III

016236
HSC III

016017
CLERK TYPIST
SPECIALIST

016122
CLERK TYPIST
SPECIALIST

015090
BEHAVIORAL ANALYST

923147
RN OPS

940129
SHSPA OPS (QSI)

940138
SHSPA OPS (QSI)

016237
HSCIII

060786
HSPS

057482
HSPS

952325
DATA ENTRY
OPERATOR OPS .5

053360
HSPS

940130
SHSPA OPS (QSI)

941126
SHSPA OPS (QSI)

035214
HSC III

016703
HSPS

053687
CLERK TYPIST
SPECIALIST

950816
DATA ENTRY
OPERATOR/OPS

940131
SHSPA OPS (QSI)

903127
SHSPA OPS (QSI)

004451
HSPS

015963
HSPS

032221
HSPS

053686
HSPS

032219
HSPS

AGENCY FOR PERSONS WITH DISABILITIES

SECTION I: BUDGET	OPERATING	FIXED CAPITAL OUTLAY
TOTAL ALL FUNDS GENERAL APPROPRIATIONS ACT	1,149,830,882	3,664,300
ADJUSTMENTS TO GENERAL APPROPRIATIONS ACT (Supplementals, Vetoes, Budget Amendments, etc.)	-2,105,259	0
FINAL BUDGET FOR AGENCY	1,147,725,623	3,664,300

SECTION II: ACTIVITIES * MEASURES	Number of Units	(1) Unit Cost	(2) Expenditures (Allocated)	(3) FCO
Executive Direction, Administrative Support and Information Technology (2)				3,664,300
Home And Community Services Administration *	30,988	118.73	3,679,341	
Support Coordination * Number of people receiving support coordination	30,783	1,331.37	40,983,634	
Private Intermediate Care Facilities For The Developmentally Disabled * Number of adults receiving services in Developmental Service Public Facilities	711	133,315.12	94,787,048	
Program Management And Compliance * Based on Administrative Components of serving people in the Community and Institutional settings	56,531	250.75	14,174,987	
Adult Daily Living * Number of persons with disabilities served in Adult Daily Living	17,221	3,520.66	60,629,262	
Adult Day Service * Number of persons with disabilities served in Adult Day Training Service	12,122	2,161.97	26,207,413	
Adult Medical/Dental * Number of persons with disabilities served in Adult Medical/Dental	10,696	1,334.47	14,273,448	
Adult Respite Services * Number of persons with disabilities served in Adult Respite Services	723	2,527.54	1,827,411	
Adult Residential Habilitation * Number of persons with disabilities served in Adult Residential Habilitation	16,249	6,439.13	104,629,409	
Adult Specialized Therapies/ Assessments * Number of persons with disabilities served in Adult Specialized Assessments, Therapies, Equipment and Supplies	4,073	1,628.26	6,631,887	
Adult Supported Employment * Number of persons with disabilities served in Adult Supported Employment	1,831	1,531.83	2,804,777	
Adult Supported Living * Number of persons with disabilities served in Adult Supported Living and In Home Subsidies	12,481	5,982.69	74,669,952	
Adult Transportation * Number of persons with disabilities served in Adult Transportation	9,010	1,067.35	9,616,818	
Children Daily Living * Number of persons with disabilities served in Children Daily Living	787	5,153.79	4,056,033	
Children Day Services * Number of persons with disabilities served in Children Day Training Services	155	498.40	77,252	
Children Medical/Dental * Number of persons with disabilities served in Children Medical/Dental	1,524	299.06	455,761	
Children Respite Services * Number of persons with disabilities served in Children Respite Services	1,687	2,214.58	3,735,993	
Children Residential Habilitation * Number of persons with disabilities served in Children Residential Habilitation	445	11,668.98	5,192,698	
Children Specialized Therapies/ Assessments * Number of persons with disabilities served in Children Specialized Assessments, Therapies, Equipment and Supplies	375	942.38	353,394	
Children Support Employment * Number of persons with disabilities served in Children Supported Employment	12	371.92	4,463	
Children Supported Living * Number of persons with disabilities served in Children Supported Living and In Home Subsidies	406	1,882.95	764,477	
Children Transportation * Number of persons with disabilities served in Children Transportation	124	537.44	66,642	
Community Support Services * Number of persons served	11,154	508.38	5,670,488	
Forensic Care * Number of adults found incompetent to proceed who are provided competency training and custodial care in the Developmental Disabilities Defendant Program	310	82,748.72	25,652,104	
TOTAL			500,944,692	3,664,300

SECTION III: RECONCILIATION TO BUDGET		
PASS THROUGHS		
TRANSFER - STATE AGENCIES		
AID TO LOCAL GOVERNMENTS		
PAYMENT OF PENSIONS, BENEFITS AND CLAIMS		
OTHER		
REVERSIONS	646,780,922	
TOTAL BUDGET FOR AGENCY (Total Activities + Pass Throughs + Reversions) - Should equal Section I above. (4)	1,147,725,614	3,664,300

SCHEDULE XI/EXHIBIT VI: AGENCY-LEVEL UNIT COST SUMMARY

(1) Some activity unit costs may be overstated due to the allocation of double budgeted items.

(2) Expenditures associated with Executive Direction, Administrative Support and Information Technology have been allocated based on FTE. Other allocation methodologies could result in significantly different unit costs per activity.

(3) Information for FCO depicts amounts for current year appropriations only. Additional information and systems are needed to develop meaningful FCO unit costs.

(4) Final Budget for Agency and Total Budget for Agency may not equal due to rounding.

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 2015 contain revenue or expenditure estimates related to your agency?

Yes X   No ☐

2) If yes, please list the estimates for revenues and budget drivers that reflect an estimate for your agency for Fiscal Year 2016-2017 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 2016-2017 Estimate/Request Amount	
			Long Range Financial Outlook	**Legislative Budget Request**
a	USDOL Rule	B	Undetermined	-
b	HCBS Waiver Waiting List reduction and Enhanced Employment Program (EEP).	B	$14.2 Million GR	$6.8 Million GR ($16 Million ALL Funds)
c	Client Data Management System (CDMS)	B	$0.7 Million	$0.7 Million
d	Fixed Capital Outlay (FCO)	B	Not Identified	$8.7 Million
e				
f				
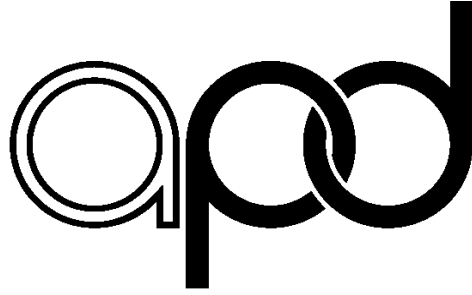
3) If your agency's Legislative Budget Request does not conform to the long range financial outlook with respect to the revenue estimates (from your Schedule I) or budget drivers, please explain the variance(s) below.

a - Long Range Financial Outlook Report did not include an estimate for the impact of the USDOL Rule. The agency is working with Governor's Office and Legislative staff to determine impact.
b - The estimate for offering waiver enrollment to customers on the waiting list in categories 3, 4, and 5 is $15 Million total funds (or $5.8 Million GR). The EEP funding request for FY 2016-17 is $1 Million which is the amount received for FY 2015-16.
d - FCO was not broken out by agency in the Long Range Financial Outlook report. The agency is requesting $8.7 Million in FCO for FY 2016-17 to meet critical reqpair and maintenance needs to state facilities and continue improvements at Rish Park.
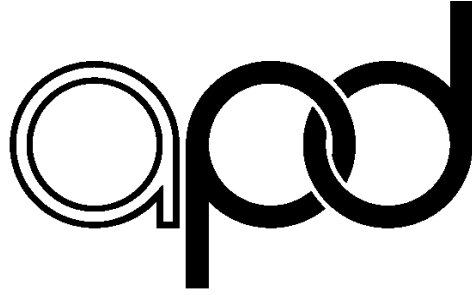
* R/B = Revenue or Budget Driver

Office of Policy and Budget - July 2015

agency for persons with disabilities

State of Florida

Legislative Budget Request
Fiscal Year 2016-17

Home and Community Services
67100100

agency for persons with disabilities

State of Florida

Legislative Budget Request
Fiscal Year 2016-17

Home and Community Services

67100100

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17
Department Title: Agency for Persons with Disabilities
Trust Fund Title: Administrative Trust Fund
Budget Entity: 67100100
LAS/PBS Fund Number: 2021

	Balance as of 6/30/2015		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	66,254	(A)		66,254
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable	0	(D)		0
ADD:		(E)		0
Total Cash plus Accounts Receivable	**66,254**	(F)	**0**	**66,254**
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	0	(H)		0
Approved "B" Certified Forwards		(H)		0
Approved "FCO" Certified Forwards		(H)		0
LESS: Transfer to BE 67100200	66,254	(I)		66,254
LESS: Rounding		(J)		0
Unreserved Fund Balance, 07/01/15	**(0)**	(K)	**0**	**0** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Administrative Trust Fund - 67100100
LAS/PBS Fund Number: 2021

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/15
Total all GLC's 5XXXX for governmental funds;   66,254 (A)
GLC 539XX for proprietary and fiduciary funds

Subtract Nonspendable Fund Balance (GLC 56XXX)   0 (B)

Add/Subtract Statewide Financial Statement (SWFS)Adjustments :

SWFS Adjustment # and Description   0 (C)

SWFS Adjustment # and Description   0 (C)

Add/Subtract Other Adjustment(s):

Approved "B" Carry Forward (Encumbrances) per LAS/PBS   0 (D)

Approved "C" Carry Forward Total (FCO) per LAS/PBS   (D)

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

Transfer to BE 67100200   66,254 (D)

          (D)

          (D)

ADJUSTED BEGINNING TRIAL BALANCE: 0 (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)   0 (F)

DIFFERENCE: 0 (G)*

*SHOULD EQUAL ZERO.

Office of Policy and Budget - July 2015

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17

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

	Balance as of 6/30/2015		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	3,004,068	(A)		3,004,068
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable		(D)		0
ADD: _____	0	(E)		0
Total Cash plus Accounts Receivable	**3,004,068**	(F)	**0**	**3,004,068**
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	389,275	(H)		389,275
Approved "B" Certified Forwards		(H)		0
Approved "FCO" Certified Forwards		(H)		0
LESS:		(I)		0
LESS:		(J)		0
Unreserved Fund Balance, 07/01/2015	**2,614,793**	(K)	**0**	**2,614,793** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/15
Total all GLC's 5XXXX for governmental funds;   **(15,543)** (A)
GLC 539XX for proprietary and fiduciary funds

Subtract Nonspendable Fund Balance (GLC 56XXX)   0 (B)

Add/Subtract Statewide Financial Statement (SWFS)Adjustments :

Adjustment to Budget Entity Beginning Trial Balance - Expenses - CF   20,262 (C)

SWFS Adjustment # and Description   0 (C)

Add/Subtract Other Adjustment(s):

Approved "B" Carry Forward (Encumbrances) per LAS/PBS   0 (D)

Approved "C" Carry Forward Total (FCO) per LAS/PBS   (D)

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

Transfer from BE 67100300   (2,525,000) (D)

Compensated Absences Liability   (125,598) (D)

       (D)

ADJUSTED BEGINNING TRIAL BALANCE: **2,614,793** (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)   **2,614,793** (F)

DIFFERENCE: **0** (G)*

*SHOULD EQUAL ZERO.

Office of Policy and Budget - July 2015

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17
Department Title: Agency for Persons with Disabilities
Trust Fund Title: Social Services Block Grant
Budget Entity: 67100100
LAS/PBS Fund Number: 2639

	Balance as of 6/30/2015		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	8,640,556	(A)		8,640,556
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable		(D)		0
ADD: Transfer from BE 67100100	0	(E)		0
Total Cash plus Accounts Receivable	**8,640,556**	(F)	**0**	**8,640,556**
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	1,951,744	(H)		1,951,744
Approved "B" Certified Forwards	208,442	(H)		208,442
Approved "FCO" Certified Forwards		(H)		0
LESS: Transfer to BE 67100200	150,000	(I)		150,000
LESS: Transfer to BE 67100300	673,438	(J)		673,438
Unreserved Fund Balance, 07/01/2015	**5,656,932**	(K)	**0**	**5,656,932** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

Department Title:	Agency for Persons with Disabilities
Trust Fund Title:	Social Services Block Grant - 67100100
LAS/PBS Fund Number:	2639

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/15

Total all GLC's 5XXXX for governmental funds;
GLC 539XX for proprietary and fiduciary funds | **6,704,656** (A)

Subtract Nonspendable Fund Balance (GLC 56XXX) | 0 (B)

Add/Subtract Statewide Financial Statement (SWFS)Adjustments :

SWFS Adjustment #_____ - CF Correction - Cat 100179-GL 35300 | 15,844 (C)

SWFS Adjustment # and Description | 0 (C)

Add/Subtract Other Adjustment(s):

Approved "B" Carry Forward (Encumbrances) per LAS/PBS | 208,442 (D)

Approved "C" Carry Forward Total (FCO) per LAS/PBS | (D)

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

Transfer to BE 67100200 | 150,000 (D)

Transfer to BE 67100300 | 673,438 (D)

| (D)

ADJUSTED BEGINNING TRIAL BALANCE: | **5,656,932** (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) | **5,656,932** (F)

DIFFERENCE: | (0) (G)*

*SHOULD EQUAL ZERO.

Office of Policy and Budget - July 2015

agency for persons with disabilities

State of Florida

Legislative Budget Request

Fiscal Year 2016-17

Program Management and Compliance

67100200

agency for persons with disabilities

State of Florida

Legislative Budget Request

Fiscal Year 2016-17

Program Management and Compliance

67100200

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17
Department Title: Agency for Persons with Disabilities
Trust Fund Title: Administrative Trust Fund
Budget Entity: 67100200
LAS/PBS Fund Number: 2021

	Balance as of 6/30/2015		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	158,963	(A)		158,963
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable	0	(D)		0
ADD: Transfer from BE 67100100	66,254	(E)		66,254
Total Cash plus Accounts Receivable	**225,217**	(F)	**0**	**225,217**
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	0	(H)		0
Approved "B" Certified Forwards		(H)		0
Approved "FCO" Certified Forwards		(H)		0
LESS: Transfer to BE 67100300	192,505	(I)		192,505
LESS: Rounding		(J)		0
Unreserved Fund Balance, 07/01/15	**32,712**	(K)	**0**	**32,712** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/15
Total all GLC's 5XXXX for governmental funds;   **158,963** (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)

Transfer from BE 67100100   (66,254) (C)

Add/Subtract Other Adjustment(s):

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

Approved "C" Carry Forward Total (FCO) per LAS/PBS   (D)

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

Transfer to BE 67100300   192,505 (D)

                                                                          (D)

                                                                          (D)

ADJUSTED BEGINNING TRIAL BALANCE: **32,712** (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)   **32,712** (F)

DIFFERENCE: **0** (G)*

*SHOULD EQUAL ZERO.

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17
Department Title: Agency for Persons with Disabilities
Trust Fund Title: Federal Grants Trust Fund
Budget Entity: 67100200
LAS/PBS Fund Number: 2261

	Balance as of 6/30/2015		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	42,386	(A)		42,386
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable	0	(D)		0
ADD: Transfer from BE 67100100	0	(E)		0
Total Cash plus Accounts Receivable	**42,386**	(F)	**0**	**42,386**
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	2,879	(H)		2,879
Approved "B" Certified Forwards	0	(H)		0
Approved "FCO" Certified Forwards	0	(H)		0
LESS:	0	(I)		0
LESS: Rounding		(J)		0
Unreserved Fund Balance, 07/01/15	**39,507**	(K)	**0**	**39,507** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/15
Total all GLC's 5XXXX for governmental funds; | 39,507 | (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 Expenses - CF | | (C)

SWFS Adjustment # and Description | | (C)

Add/Subtract Other Adjustment(s):

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

Approved "C" Carry Forward Total (FCO) per LAS/PBS | | (D)

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

| | (D)

| | (D)

| | (D)

ADJUSTED BEGINNING TRIAL BALANCE: | 39,507 | (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) | 39,507 | (F)

DIFFERENCE: | 0 | (G)*

*SHOULD EQUAL ZERO.

Office of Policy and Budget - July 2015

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17

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

	Balance as of 6/30/2015		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	3,846,447	(A)		3,846,447
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable	2,758,269	(D)		2,758,269
ADD: _____		(E)		0
Total Cash plus Accounts Receivable	**6,604,717**	(F)	**0**	**6,604,717**
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	758,890	(H)		758,890
Approved "B" Certified Forwards		(H)		0
Approved "FCO" Certified Forwards		(H)		0
LESS: Nonoperating A/P-SWCAP & GR Serv Charge	112,868	(I)		112,868
LESS: Rounding		(J)		0
Unreserved Fund Balance, 07/01/15	**5,732,958**	(K)	**0**	**5,732,958** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Operations & Maintenance Trust Fund - 67100200
LAS/PBS Fund Number: 2516

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/15
Total all GLC's 5XXXX for governmental funds; | **5,748,261** |(A)
GLC 539XX for proprietary and fiduciary funds

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

Add/Subtract Statewide Financial Statement (SWFS)Adjustments :

Adjustment to Budget Entity Beginning Trial Balance - Expenses - CF | 15,303 |(C)

SWFS Adjustment # and Description | |(C)

Add/Subtract Other Adjustment(s):

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

Approved "C" Carry Forward Total (FCO) per LAS/PBS | |(D)

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

| |(D)

| |(D)

| |(D)

ADJUSTED BEGINNING TRIAL BALANCE: | **5,732,958** |(E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) | **5,732,958** |(F)

DIFFERENCE: | **0** |(G)*

*SHOULD EQUAL ZERO.

Office of Policy and Budget - July 2015

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17
Department Title: Agency for Persons with Disabilities
Trust Fund Title: Social Services Block Grant
Budget Entity: 67100200
LAS/PBS Fund Number: 2639

	Balance as of 6/30/2015		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	0	(A)		0
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable	0	(D)		0
ADD: Transfer from BE 67100100	150,000	(E)		150,000
Total Cash plus Accounts Receivable	**150,000**	(F)	**0**	**150,000**
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	150,000	(H)		150,000
Approved "B" Certified Forwards		(H)		0
Approved "FCO" Certified Forwards		(H)		0
LESS:	0	(I)		0
LESS: Rounding		(J)		0
Unreserved Fund Balance, 07/01/15	**0**	(K)	**0**	**0** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Social Services Block Grant - 67100200
LAS/PBS Fund Number: 2639

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/15
Total all GLC's 5XXXX for governmental funds; | **(150,000)** |(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 Expenses - CF | |(C)

Transfer from BE 67100100 | (150,000) |(C)

Add/Subtract Other Adjustment(s):

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

Approved "C" Carry Forward Total (FCO) per LAS/PBS | |(D)

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

                                                               | |(D)

                                                               | |(D)

                                                               | |(D)

ADJUSTED BEGINNING TRIAL BALANCE: | **0** |(E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) | **0** |(F)

DIFFERENCE: | **0** |(G)*

*SHOULD EQUAL ZERO.

SCHEDULE IV-B FOR CLIENT DATA MANAGEMENT SYSTEM (CDMS)

For Fiscal Year 2016-17
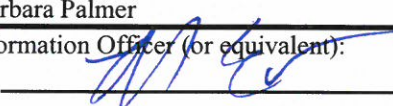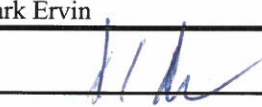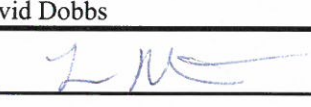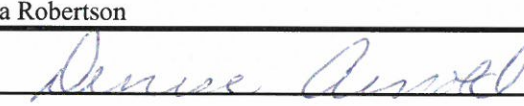
September 15, 2015

AGENCY FOR PERSONS WITH DISABILITIES

Contents

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: September 15, 2015
Project Name: Client Data Management System (CDMS)	Is this project included in the Agency's LRPP? _X___ Yes _____ No
FY 2016-17 LBR Issue Code: 36201C0	FY 2016-17 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: *[signature]* Printed Name: Barbara Palmer	Date: 9/15/15
Agency Chief Information Officer (or equivalent): *[signature]* Printed Name: Mark Ervin	Date: 9/15/2015
Budget Officer: *[signature]* Printed Name: David Dobbs	Date: 9/14/2015
Planning Officer: *[signature]* Printed Name: Lisa Robertson	Date: 9/14/15
Project Sponsor: *[signature]* Printed Name: Denise Arnold	Date: 9/14/15
Schedule IV-B Preparers (Name, Phone #, and E-mail address):	

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Project Planning:	Mark Ervin, 850-488-0616, Mark Ervin@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. 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.

Please see attached Business Case in Appendix A.

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.

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.

Please see attached Business Case in Appendix A.

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.

Please see attached Business Case in Appendix A.

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.

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.

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.

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.

Please see attached Benefits Realization Table in Appendix E for reference.

	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.

1.   The Cost-Benefit Analysis Forms

Please see attached Cost Benefits Analysis Tool for reference.

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	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.
	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.
CBA Form 2 - Project Cost Analysis	Baseline Project Budget: Estimated project costs.
	Project Funding Sources: Identifies the planned sources of project funds, e.g., General Revenue, Trust Fund, Grants.
	Characterization of Project Cost Estimate.
CBA Form 3 - Project Investment Summary	Investment Summary Calculations: Summarizes total project costs and net tangible benefits and automatically calculates: • Return on Investment • Payback Period • Breakeven Fiscal Year • Net Present Value • Internal Rate of Return

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

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.

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.

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 for reference.

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.

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.

agency for persons with disabilities
State of Florida

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

DATE:
SEPTEMBER 15, 2015

TABLE OF CONTENTS

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 52,000 clients of which approximately 31,000 currently receive services and 21,000 are on a wait list receiving little to no services. The Agency has a budget of approximately $1.2 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 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 reduce 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 will 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 an approximately $1.2 dollar appropriation, serving 52,000 clients, and over 6,000 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
Operations	Provides Operations specific support for the project	Tom, Rankin, Deputy Director of Operations
Budget /Finance	Provides budget support for the project	David Dobbs, Deputy Director of Budget and Planning
Procurement/Contracts	Provides procurement support for the project	April Hargrove, Contract Manager
Technology Support	Provides all technology support for the project	Mark Ervin, CIO
Project Manager	Manages the business case and project team	Naru Nayak, Project Managers
Technical Support	Provides all technical expertise for the project	Vacant, 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: o Legal/Financial (e.g., Consumer Information Sheet, Waiver Eligibility Worksheet, etc.) o Support Plan and Cost Plan and Individual budget o Reports from Providers (e.g., Implementation Plans, provider reports) o Contact Record/Case notes o Correspondence/Miscellaneous (e.g., Case Transfer Form, Incident Reports) o Medical (psychological reports, dental, and information used to determined eligibility)
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.
Incident Tracking & Management to include medication errors, reactive strategies and death reports	Incident reporting includes a variety of type of incidents for which data must be collected, stored, analyzed and remediated. This includes: o 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. o 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. o 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 o 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.
Provider Billing and Reporting	There needs to be an electronic claims billing and tracking system to monitor over 6000 service providers.
Attachment and Document Storage	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.
Integration with other databases CDC+ databases	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.
Facility licensure and monitoring of licensure compliance and bed availability tracking	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.
Remediation tracking of quality assurance citations to include identification of recoupment and corrective action plans.	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.

Reporting of performance measures to the Centers for Medicare and Medicaid (CMS) for compliance with Home and Community Based Services Wavier requirements.	There are 32 performance measures the must have data collected on for all clients enrolled in the HCBS waiver program. Each assurance 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	Load Balanced Web / Application Server MS ASP.NET Framework 3.5 AMT Framework Failover SQL Server Cluster SQL Server 2005 Databases Reporting Server	Total Number of Current Users: 1270 Max Number of Concurrent User Sessions Supported: 250

		information can be tracked and identified for individual consumers. The system also includes the consumer and vendor/provider demographic information.	SQL Server Reporting Services 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.	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	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.	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
Consumer Directed Care (CDC)	Consumer Directed Care system provides the ability to enter purchasing plan, budget and claims information for CDC clients and generate the provider payroll data to be sent to	Web / Application Server MS ASP.NET Framework 4.0 SQL Database Server	Total Number of Current Users: 2678 Max Number of Concurrent User

	Mains'l, the check writing company.	SQL Server 2005 Database Windows Server 2003	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 evaluated options for an enterprise line of business application that will address the needs of the Agency. The Agency has finalized the vendor selection, and 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 solution.

- 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
- 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)
- HIPAA and HITECH compliant

4.2.2. Resource and Summary Level Funding Requirements for Proposed System

The strategic direction of the Agency was to select a vendor that utilizes a COTS software solution, which has been purchased and will be 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 initial number of staffing required to augment the solution (e.g. interface, configuration, batch, reporting, training, OCM, help desk, etc.) was submitted, however the Agency may need additional resources as the project progresses. .

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 was to select a vendor that utilizes a COTS software solution, which has been purchased and will be hosted in Software as a Service (SaaS) model. In a SaaS model, capacity planning is 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	5,000 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

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 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	**Low:** 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 Initiation and Planning: Project Charter, Project Plan, Project Schedule. Confirm Stakeholders, Communications, Project Kick-Off, Develop Framework for Work Products, Discovery	**Low:** 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 – Phased Implementation : Group 1 (APD Employees) – Case, Provider and Financial management Review Requirements/Design & Perform Gap/Fit Analysis with Vendor Solution, UAT, Training, Deployment, Data Conversion, Interfaces,	**High:** 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. Develop interfaces, data conversion and configuration.
Phase IV Phased Implementation: Group 2 (WSCs) – UAT, Training and Deployment	**Med:** 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 – Deployment of Consumer Portal. (Consumer self-service users).	**Low:** The primary impact to IT will be to provide subject matter expertise. and Support for Training and OCM team.
Phase VI – Function 3: EVV and eMAR for Group 3 users (Providers) o	**Med:** 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 EVV functionality.

Phase	Technology Impact (Low/Med/High)
Phase VII – Harmony Advanced Reporting	**High: The primary impact to IT will be configuration, development, training and deployment for case, provider and financial reporting.**
Phase VIII – Replace Components of ABC	**High:** The primary impact to IT during this phase will be to work with the project team to ensure the following: o Required functionality exist in the system to assume the functions of the ABC components being replaced. o Develop and execute a data conversion plan for the ABC components being replaced. o Develop the necessary batch jobs currently existing in ABC for the components being replaced.
Phase IX – Replace Components of iBudget	**High:** The primary impact to IT during this phase will be to work with the project team to to ensure the following: o Required functionality exist in the system to assume the functions of iBudget being replaced. o Develop and execute a data conversion plan for the iBudget components being replaced. o Develop the necessary batch jobs currently existing in iBudget for the components being replaced.
Closeout/Project Completion	**Low:** 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.

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. In 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 Reduction	▪ 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. ▪ Identification, tracking, management and disposition of recoupment issues involving collection of funds. ▪ Tracking of deactivated providers, those that have been reported for abuse or fraud in the past, and those subject to correction action/remediation plans.
Measurable Outcomes	▪ Longitudinal tracking of a client's progress using a specific service or treatment. ▪ Service utilization reviews that ensure the most cost effective services are provided ▪ Measurement of client's progress toward employment outcome

Analysis & Reporting	▪ Reporting and data analysis of service provision and provider billings to:
	  o identify and prevent stacking of services that are duplicative
	  o project a client's future short & long range needs using valid data
	▪ Reporting of performance measures to the Centers for Medicare and Medicaid for continuation of the Home and Community Based Services Waiver

More Efficient Oversight	▪ Quality Assurance reviews, documentation and disposition.
Improved Business Process Efficiencies	▪ Internet based portal for all Agency staff and service providers to access client data, record client data, and report to the agency ▪ Electronic access for service providers of service authorizations ▪ Timely and efficient processing of service requests ' ▪ Timely and efficient monthly monitoring of licensed facilities ▪ Timely and efficient eligibility determination

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 and resources for this project.
- Project team is highly matrixed.
- Aggressive schedule for a project of this size and complexity.

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	July 1,, 2015

Milestones/Deliverables	Target End Date
Phase II - Project Initiation and Planning: Project Charter, Project Plan, Project Kick-Off, Discovery, Project Schedule, Migration schedule, etc.	September 15, 2015
Phase III – Phase III – Phased Implementation : Group 1 (APD Employees) – Case, Provider and Financial management Review Requirements/Design & Perform Gap/Fit Analysis with Vendor Solution, UAT, Training, Deployment, Data Conversion, Interfaces,	July 27, 20165
Phase IV – Phased Implementation: Group 2 (WSCs) – UAT, Training and Deployment	, December 2, 2016
Phase V – Deployment of Consumer Portal. (Consumer self-service users)	February 2, 2017
Phase VI VI – Function 3: EVV and eMAR for Group 3 users (Providers) .	April 3, 2017
Phase VII - Harmony Advanced Reporting	October 21, 2016
Phase VII – Replace Components of ABC	April 2017
Phase VIII – Replace Componernts of iBudget	April 2017
Closeout/Project Completion	May 1, 2017

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, Governor's 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.
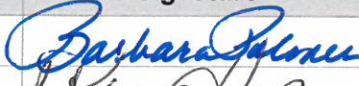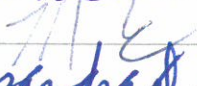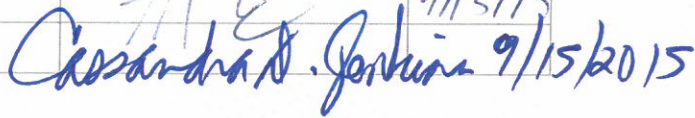
8. ALTERNATIVES ANALYSIS

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	- Current systems do not meet federal CMS assurances - Agency is heavily dependent on inefficient manual processes - Existing functionality of automated system does not meet Agency needs - Disparate and antiquated technology - Lacking automated controls to effectively reduce fraud and abuse
Alternative 1	**Reasons For Not Selecting Alternative**
Provide Services In-House	- Cost prohibitive - Long implementation lifecycle - Lack of resources - Lack of expertise - Custom development projects are very high risk

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	*Barbara Palmer*	9/15/15
Karen Hagan	Chief of Staff	*Karen Hagan*	9/15/15
Denise Arnold	Deputy Director of Programs	*Denise Arnold*	9/15/15
David Dobbs	Deputy Director of Budget and Planning		9/15/15
Mark Ervin	CIO		9/15/15
Cassandra Jenkins	Contracts	*Cassandra D. Jenkins*	9/15/2015

CBAForm 1 - Net Tangible Benefits

Net Tangible Benefits - Operational Cost Changes (Costs of Current Operations versus Proposed Operations as a Result of the Project) and Additional Tangible Benefits -- CBAForm 1A

Agency	FY 2016-17			FY 2017-18			FY 2018-19			FY 2019-20			FY 2020-21		
(Operations Only -- No Project Costs)	(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
A. Personnel -- Total FTE Costs (Salaries & Benefits)	$0	$1,117,000	$1,117,000	$0	$1,042,000	$1,042,000	$0	$662,000	$662,000	$0	$662,000	$662,000	$0	$662,000	$662,000
A.b Total FTE	0.00	21.00	21.00	0.00	20.00	20.00	0.00	13.00	13.00	0.00	13.00	13.00	0.00	13.00	13.00
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	0.00
A-3.a. Staff Augmentation (Contract Cost)	$0	$1,117,000	$1,117,000	$0	$1,042,000	$1,042,000	$0	$662,000	$662,000	$0	$662,000	$662,000	$0	$662,000	$662,000
A-3.b. Staff Augmentation (# of Contract FTEs)	0.00	21.00	21.00	0.00	20.00	20.00	0.00	13.00	13.00	0.00	13.00	13.00	0.00	13.00	13.00
B. Data Processing -- Costs	$0	$1,363,333	$1,363,333	$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 — Harmony SaaS Software	$0	$1,363,333	$1,363,333	$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
C. External Service Provider -- Costs	$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 — Specify	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
D. Plant & Facility -- Costs (including PDC services)	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0	$0
E. Others -- Costs	$0	$82,000	$82,000	$0	$80,000	$80,000	$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 — Equipment for Staff	$0	$82,000	$82,000	$0	$80,000	$80,000	$0	$0	$0	$0	$0	$0	$0	$0	$0
Total of Operational Costs (Rows A through E)	$0	$2,562,333	$2,562,333	$0	$2,872,000	$2,872,000	$0	$2,412,000	$2,412,000	$0	$2,412,000	$2,412,000	$0	$2,412,000	$2,412,000
F. Additional Tangible Benefits:		$0			$1,831,622			$4,395,892			$4,395,892			$4,395,892	
F-1. EVV		$0			$1,831,622			$4,395,892			$4,395,892			$4,395,892	
F-2. Specify		$0			$0			$0			$0			$0	
F-3. Specify		$0			$0			$0			$0			$0	
Total Net Tangible Benefits:		($2,562,333)			($1,040,378)			$1,983,892			$1,983,892			$1,983,892	

CHARACTERIZATION OF PROJECT BENEFIT ESTIMATE -- CBAForm 1B			
Choose Type		Estimate Confidence	Enter % (+/-)
Detailed/Rigorous	☐	Confidence Level	
Order of Magnitude	☑	Confidence Level	90%
Placeholder	☐	Confidence Level	

Agency for Persons with Disabilities — **Client Data Management System (CDMS)**

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.

				FY2016-17			FY2017-18			FY2018-19			FY2019-20			FY2020-21			TOTAL
			$ 1,153,176	$ 958,824			$ -			$ -			$ -			$ -			$ 2,112,000
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**
Costs for all state employees working on the project.	FTE	S&B	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	$ -
Costs for all OPS employees working on the project.	OPS	OPS	$ -	0.00		$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	$ -
Staffing costs for personnel using Time & Expense.	Staff Augmentation	Contracted Services	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	$ -
Project management personnel and related deliverables.	Project Management	Contracted Services	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	$ -
Project oversight (IV&V) personnel and related deliverables.	Project Oversight	Contracted Services	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	$ -
Staffing costs for all professional services not included in other categories.	Consultants/Contractors	Contracted Services	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	$ -
Separate requirements analysis and feasibility study procurements.	Project Planning/Analysis	Contracted Services	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ -
Hardware purchases not included in Primary Data Center services.	Hardware	OCO	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ -
Commercial software purchases and licensing costs.	Commercial Software	Contracted Services	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ -
Professional services with fixed-price costs (i.e. software development, installation, project documentation)	Project Deliverables	Contracted Services	$ 1,153,176		$ 958,824	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ 2,112,000
All first-time training costs associated with the project.	Training	Contracted Services	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ -
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	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ -
Other contracted services not included in other categories.	Other Services	Contracted Services	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ -
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	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ -
Include costs associated with leasing space for project personnel.	Leased Space	Expense	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ -
Other project expenses not included in other categories.	Other Expenses	Expense	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -		$ -	$ -	$ -
	Total		$ 1,153,176	0.00	$ 958,824	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	0.00	$ -	$ -	$ 2,112,000

CBAForm 2 - Project Cost Analysis

Agency	Agency for Persons with Disabilities	Project	Client Data Management System (CDMS

PROJECT COST SUMMARY	PROJECT COST SUMMARY (from CBAForm 2A)					TOTAL
	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	
TOTAL PROJECT COSTS (*)	$958,824	$0	$0	$0	$0	$2,112,000
CUMULATIVE PROJECT COSTS *(includes Current & Previous Years' Project-Related Costs)*	$2,112,000	$2,112,000	$2,112,000	$2,112,000	$2,112,000	
Total Costs are carried forward to CBAForm3 Project Investment Summary worksheet.						

PROJECT FUNDING SOURCES	PROJECT FUNDING SOURCES - CBAForm 2B					TOTAL
	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	
General Revenue	$780,575	$998,500	$768,500	$768,500	$768,500	$4,084,575
Trust Fund	$0	$0	$0	$0	$0	$0
Federal Match ☑	$2,740,582	$1,873,500	$1,643,500	$1,643,500	$1,643,500	$9,544,582
Grants ☐	$0	$0	$0	$0	$0	$0
Other ☐ Specify	$0	$0	$0	$0	$0	$0
TOTAL INVESTMENT	$3,521,157	$2,872,000	$2,412,000	$2,412,000	$2,412,000	$13,629,157
CUMULATIVE INVESTMENT	$3,521,157	$6,393,157	$8,805,157	$11,217,157	$13,629,157	

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

CBAForm 3 - Project Investment Summary	Agency	Agency for Persons with Disabilities	Project	Client Data Management System (CDMS)

COST BENEFIT ANALYSIS -- CBAForm 3A					
	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	TOTAL FOR ALL YEARS
Project Cost	$958,824	$0	$0	$0	$0	$2,112,000
Net Tangible Benefits	($2,562,333)	($1,040,378)	$1,983,892	$1,983,892	$1,983,892	$2,348,965
Return on Investment	($4,674,333)	($1,040,378)	$1,983,892	$1,983,892	$1,983,892	$236,965
Year to Year Change in Program Staffing	21	20	13	13	13	

RETURN ON INVESTMENT ANALYSIS -- CBAForm 3B		
Payback Period (years)	4 7/8	Payback Period is the time required to recover the investment costs of the project.
Breakeven Fiscal Year	2020-21	Fiscal Year during which the project's investment costs are recovered.
Net Present Value (NPV)	($537,218)	NPV is the present-day value of the project's benefits less costs over the project's lifecycle.
Internal Rate of Return (IRR)	1.45%	IRR is the project's rate of return.

Investment Interest Earning Yield -- CBAForm 3C					
Fiscal Year	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21
Cost of Capital	1.94%	2.07%	3.18%	4.32%	4.85%

Project	Client Data Mangement System (CDMS)	
Agency	Agency For Persons with Disabilities	
FY 2016-17 LBR Issue Code:	FY 2016-17 LBR Issue Title:	
Issue Code	Issue Title	
Risk Assessment Contact Info (Name, Phone #, and E-mail Address):		
David Dobbs-----414-0658 ------ David.Dobbs@apdcares.org		
Executive Sponsor	Barbara Palmer	
Project Manager	Naru Nayak	
Prepared By	APD	9/9/2015

Risk Assessment Summary

Most Aligned

Business Strategy

Least Aligned

Level of Project Risk

Least Risk

Most Risk
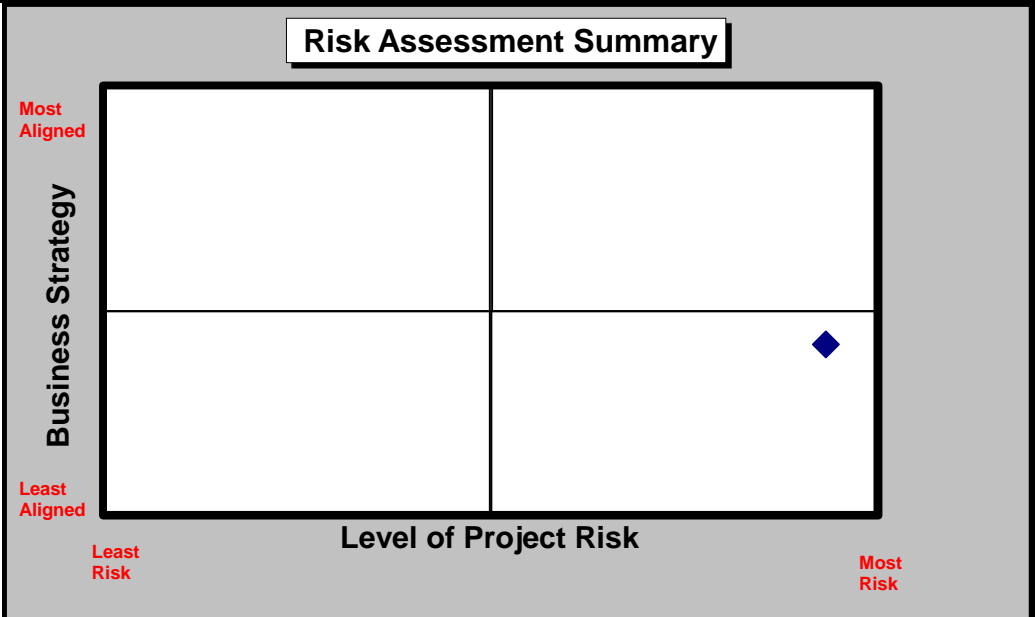
Project Risk Area Breakdown

Risk Assessment Areas	Risk Exposure
Strategic Assessment	HIGH
Technology Exposure Assessment	HIGH
Organizational Change Management Assessment	HIGH
Communication Assessment	HIGH
Fiscal Assessment	MEDIUM
Project Organization Assessment	HIGH
Project Management Assessment	HIGH
Project Complexity Assessment	HIGH
Overall Project Risk	HIGH

Agency: Agency For Persons with Disabilities   **Project:** Client Data Mangement System (CDMS)

#	Criteria	Values	Answer
**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	Informal agreement 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 partially 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	0% to 40% -- Few or none 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	Some
		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	Extensive 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: Agency For Persons with Disabilities   **Project:** Client Data Mangement System (CDMS)

#	Criteria	Values	Answer
		Section 2 -- Technology Area	
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	Read about only or attended conference and/or vendor presentation
		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 through implementation only
		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	Some relevant standards have been incorporated into the proposed technology
		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	Moderate 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 defined only at a conceptual level
		Capacity requirements are defined only at a conceptual level	
		Capacity requirements are based on historical data and new system design specifications and performance requirements	

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	Extensive 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	0% to 40% -- Few or no process changes defined and documented
		41% to 80% -- Some process changes defined and documented	
		81% to 100% -- All or nearly all processes defiined and documented	
3.04	Has an Organizational Change Management Plan been approved for this project?	Yes	No
		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	Over 10% 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)	Extensive change or new way of providing/receiving services or information)
		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 fewer 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	No
		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	Routine 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	No
		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	Plan does not include desired messages outcomes and success measures
		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	No
		No	

	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	Greater than $10 M
		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	No
		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	Most project benefits have been identified but not 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 5 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	

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	No
		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	Yes, bid response did/will include proof of concept or prototype
		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	

#	Criteria	Values	Answer
**Section 6 -- Project Organization Area**		
6.01	Is the project organization and governance structure clearly defined and documented within an approved project plan?	Yes No	No
6.02	Have all roles and responsibilities for the executive steering committee been clearly identified?	None or few have been defined and documented Some have been defined and documented All or nearly all 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 Agency System Integrator (contractor)	System Integrator (contractor)
6.04	How many project managers and project directors will be responsible for managing the project?	3 or more 2 1	3 or more
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 Staffing plan identifying all staff roles, responsibilities, and skill levels have been documented	Some or most staff roles and responsibilities and needed skills have been identified
6.06	Is an experienced project manager dedicated fulltime to the project?	No experienced project manager assigned 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	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 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	No, business, functional or technical experts dedicated 50% or less 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 Half of staff from in-house resources Mostly staffed from in-house resources Completely staffed from in-house resources	Mostly staffed from in-house resources
6.09	Is agency IT personnel turnover expected to significantly impact this project?	Minimal or no impact Moderate impact Extensive impact	Moderate 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 No	Yes
6.11	Are all affected stakeholders represented by functional manager on the change review and control board?	No board has been established 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	No board has been established

	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 Project Management team will use the methodology selected by the systems integrator Yes	Yes
7.02	For how many projects has the agency successfully used the selected project management methodology?	None 1-3 More than 3	1-3
7.03	How many members of the project team are proficient in the use of the selected project management methodology?	None Some All or nearly all	Some
7.04	Have all requirements specifications been unambiguously defined and documented?	0% to 40% -- None or few 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	41 to 80% -- Some 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 41 to 80% -- Some have been defined and documented 81% to 100% -- All or nearly all have been defined and documented	0% to 40% -- None or few 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 81% to 100% -- All or nearly all requirements and specifications are traceable	0% to 40% -- None or few 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 Some deliverables and acceptance criteria have been defined and documented All or nearly all deliverables and acceptance criteria have been defined and documented	None or few 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 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	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 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	0% to 40% -- None or few have been defined to the work package level
7.10	Has a documented project schedule been approved for the entire project lifecycle?	Yes No	No

Agency: Agency For Persons with Disabilities   **Project:** Client Data Mangement System (CDMS)

	Section 7 -- Project Management Area		
#	**Criteria**	**Values**	**Answer**
7.11	Does the project schedule specify all project tasks, go/no-go decision points (checkpoints), critical milestones, and resources?	Yes	No
		No	
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	No
		No	
7.17	Are issue reporting and management processes documented and in place for this project?	Yes	Yes
		No	

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	More complex
		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	More than 3 sites
		3 sites or fewer	
		More than 3 sites	
8.04	How many external contracting or consulting organizations will this project require?	No external organizations	More than 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	Greater than 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	More than 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	No
		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	Lesser 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 2 + Years		
Business Unit Requestor/ Title/Phone:	Denise Arnold	Deputy Director of Programs	850-488-3673
Sponsor/Title/Phone:	Barbara Palmer	Director of APD	850-488-1559
Budget & Planning/Title/Phone:	David Dobbs	Deputy Director of Budget & Planning	850-414-6058
Information Technology/ Title/Phone:	Mark Ervin	Chief Information Office	850-488-0616

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   PROJECT EXECUTIVE SUMMARY

The Agency for Persons with Disabilities (APD) serves a client base of approximately 52,000 clients of which approximately 31,000 currently receive services and 21,000 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 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 reduction, and quality improvement processes can be improved.

Essential to this data system is the electronic visit verification (EVV) to ensure 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. The requirements defined by APD 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
Improved Business Process Efficiencies	▪ Internet based portal for all Agency staff and service providers to access client data, record client data, and report to the agency ▪ Electronic access for service providers of service authorizations ▪ Timely and efficient processing of service requests ' ▪ Timely and efficient monthly monitoring of licensed facilities ▪ Timely and efficient eligibility determination
Fraud Reduction	▪ 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 ▪ Identification, tracking, management, and disposition of recoupment issues involving collection of funds ▪ Tracking of deactivated providers, those that have been reported for abuse or fraud in the past, and those subject to correction action/remediation plans
Measurable Outcomes	▪ Longitudinal tracking of a client's progress using a specific service or treatment ▪ Service utilization reviews that ensure the most cost-effective services are provided ▪ Measurement of client's progress toward outcomes

Analysis & Reporting	▪ Reporting and data analysis of service provision and paid claims to:
	   o identify and prevent stacking of duplicative services
	   o project a client's future short & long range needs using valid data
	▪ Reporting of performance measures to the Centers for Medicare and Medicaid Services for continuation of the Home and Community Based Services Waiver

More Efficient Oversight	▪ Quality Assurance reviews, documentation, and disposition.
Improved Business Process Efficiencies	▪ Internet based portal for all Agency staff and service providers to access client data, record client data, and report to the agency ▪ Electronic access for service providers of service authorizations ▪ Timely and efficient processing of service requests ' ▪ Timely and efficient monthly monitoring of licensed facilities ▪ Timely and efficient eligibility determination
Technology	▪ Reduce Implementation/Deployment Time

SECTION 4 PROJECT SCOPE

The scope of this project is listed in the contract under the vendor's response to the ITN Statement of Work and Statement of Need.

SECTION 5 PROJECT PHASES: ESTIMATED DURATION AND MILESTONES

5.1 PROJECT PHASES

- Initiation— Initiation is complete when a project charter and preliminary scope statement have been prepared and a project manager has been assigned to the project and has been given the authority and direction necessary to begin planning. A project charter is an outline (with varying degrees of detail) of what the sponsors of the project expect the project to accomplish. It should define constraints and identify the major stakeholders involved. A preliminary scope statement is a detailed look at what exactly the project is expected to deliver.

- Planning — Planning begins with the outputs of initiation (charter, preliminary scope statement, and project manager). At the end of planning, the entire project has been thought through: what will be done; how; in what order; and at what cost.

- Execution — Execution cannot begin until there is a plan. Executing is the act of doing what it says to do in the plan. It is completed when all the work is completed.

- Controlling — Controlling is the act of making sure that the work being executed complies with the plan. Controlling is complete when the final outputs of the project (deliverables) meet the prescribed quality standards defined in the plan and are accepted by the customer. It ends at the same time as execution.

- Closing — Organizations learn by documenting what was learned — what went right and what went wrong — and making these documents available for reference on future projects. Closing begins when deliverables are accepted. It involves making sure that all the necessary paperwork is completed in terms of contract administration and sign off. It continues until a project archive has been compiled. This archive includes not only a complete set of project records but also a critical review of lessons learned.

5.2 ESTIMATED DURATION

Project Phases							
Initiation							Planni
Start	Finish	Start	Finish	Start	Finish	Start	
July 2013	July 2015	July 2015	Aug 2015	Sept 2015	Mar 2017	Mar 2017	Jun

5.3 MILESTONES

Milestones	Target End Date
Phase I – Procurement, Statement of Work, Contract	July 2015

Milestones	Target End Date
Phase II - Review Project Charter, Project Plan, Discovery, Project Schedule, Migration Schedule and Project Kick-Off	August 2015
Phase III (Group 1: APD Staff) ▪ Review Requirements/Design & Perform Gap/Fit Analysis with Vendor ▪ Solution. Customization/Configuration/Process Realignment to Remediate Gap/Fit ▪ Develop interfaces ▪ Data Conversion ▪ Testing ▪ Training group 1 (APD Staff)	June 2016
Phase IV (Group 2: WSC's) ▪ Review Requirements/Design & Perform Gap/Fit Analysis with Vendor ▪ Solution. Customization/Configuration/Process Realignment to Remediate Gap/Fit ▪ Develop interfaces (if needed) ▪ Data Conversion (if needed) ▪ Testing ▪ Training group 2 (WSC's)	October 2016
Phase V (Group 3: All Providers) ▪ Review Requirements/Design & Perform Gap/Fit Analysis with Vendor ▪ Solution. Customization/Configuration/Process Realignment to Remediate Gap/Fit ▪ Develop interfaces (if needed) ▪ Data Conversion (if needed) ▪ Testing ▪ Training group 3 (Providers)	February 2017
Phase VI – Replace Components of ABC	April 2017
Phase VII – Replace Components of iBudget	April 2017
Closeout/Project Completion	June 2017

SECTION 6 PROJECT DELIVERABLES

The deliverables and their associated costs are identified in the contract as negotiated as part of the ITN.

SECTION 7 BENEFITS

Implementation of the Business Requirements are anticipated to achieve the following benefits.

#	Benefit Description	Recipient	How is Benefit Realized?	How Benefit be Assessed/Measured ?	Date Realized (MM/YY)
1.	More efficient transactions for client service needs	Client	Faster Decisions regarding service needs	Time to respond to client request	07/17
2.	Fraud reduction 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	07/17
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	07/17
4.	Provider access to service authorizations promptly	Client Provider Region staff	Reduction of time lapse from date of service approval to service delivery		07/17
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	07/17

#	Benefit Description	Recipient	How is Benefit Realized?	How Benefit be Assessed/Measured ?	Date Realized (MM/YY)
6.	Review of Service outcomes through utilization review to ensure client services are meeting the need and to ensure cost containment is maximized	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	07/17
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	07/18 This is ongoing and will transition to paperless once fully implemented over time
8.	Secure maintenance of client central record	Client Agency	Confidential information is stored securely	Number of records stored electronically	07/16
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	07/17
10.	Improved tracking and monitoring of client behavioral and medical interventions to ensure	Client	Reporting of medication errors and use of	Number of medication errors and reactive strategies used	07/17

#	Benefit Description	Recipient	How is Benefit Realized?	How Benefit be Assessed/Measured?	Date Realized (MM/YY)
	client health and safety is protected		reactive strategies for behavior issues can be tracked, trended and remediated		
11.	Reduce Implementation/ Deployment Time	Agency / All Stakeholders	Ability to use the system more quickly	System will be fully implemented within 2 years	07/17
12.					

SECTION 8 ROJECT ASSUMPTIONS & CONSTRAINTS

8.1 ASSUMPTIONS

Certain assumptions and premises need to be made to identify and estimate the required tasks and timing for the project. Based on the most current information available, 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, area office, and external stakeholders.

- Project schedule will be strictly adhered to, and tasks completed as scheduled, to meet all interim milestones deliverables.

- The APD Deliverable Review Team 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 Office and State Office staff as well as representation from the provider community will be involved in user acceptance testing of the pilot system.

- Changes to the scope or assumptions defined in this document could require a change order.

- Assumes data conversion of consumer demographics and enrollment history only. No assessment data, no notes, no financial data.

- Financial Management and Interfaces to go live at the same time.

- Harmony Advanced Reporting is configured and deployed by phase

- One round of BA revisions in each phase prior to 10-day Deliverable Acceptance cycle

- Assumes single interface touchpoint to iBudget.

- Assumes single interface touchpoint to ABC.

- Assumes interface to MMIS using standard EDI transact ions (e.g. 837, 835 , etc.).

- Assumes Harmony standard payment voucher export to GL.

- Automated eligibility determination will be developed on the basis of Preadmission Screening and Resident Review (PASRR) assessments and the creation of enrollment records.

- Included development of algorithm-based waitlist prioritization on the basis of a prioritization checklist assessment.

- Included development of 45 consumer, provider, or incident-related assessments mentioned in the requirements.

- Included development of at least 19 merge documents mentioned in the requirements.

- Included 16 items in which we would need to build custom workflow automation (e.g., stored procedures or triggers, etc.), varying in complexity.

- Harmony will staff this project appropriately to meet deliverables and due dates as defined in the approved CDMS Project Plan deliverable.

- Both organizations must commit to the agreed-upon tasks and timelines, with the understanding that success will come only if the teams can work effectively and collaboratively. Should one party be unable to complete a task as planned, the project managers will need to identify how the situation can best be mitigated, if necessary. With a tight timeline, the schedule will have little to no "slack," therefore both organizations must be sensitive to the risk of cascading delays when a "linked" task slips to the detriment of dependent tasks. Both teams must be willing to "go where needed" to ensure an on-time delivery of a system that users can and will adopt as the environment changes.

- Proposed Key Staff members were selected based on qualifications and experience with similar project scope. Additional project resources will not be assigned to this project until contracts are finalized but will be responsible for all tasks assigned to them for the duration of the project, once it has been approved.

- Proposed implementation costs include time, materials, and travel.

- Interfaces:

  - Delivery Method: Either web services or file posted to Harmony's FTP site.
  - Estimates were completed without full specifications on what triggers each interface or how much data they pull.
  - Hours were included for requirements gathering, development, testing, and deploying for the following interfaces:

    - External Providers (Capped at 320 hrs)
    - CDCFEA (legacy CDC+ System)
    - Secure Web-Based Payroll Systems
    - Interactive Voice Response (IVR) System
    - QIO (quality assurance related)
    - DCF FSFN (provider deficiencies; client data)
    - FMMIS (paid claims, authorizations)
    - ABC
    - CDC+
    - iBudget
    - QSI
    - DOH Vital Statistics (deaths)

- Data conversion
    - Assumption is Statement of Work will be followed with the addition of the following:
        - APD will provide the appropriate technical resources per each legacy system who understands the data elements and can assist with data mapping and data extraction from each legacy system
        - Harmony will develop scripts and run the scripts (data conversion results deliverable, instead of providing the scripts or software to APD).
        - Harmony expects 1 data extraction per legacy system (one per entity).
        - A full data conversion will only be done for live migration. It will not be done for the unit test, integration test, system test, performance test, and acceptance test as long as a sufficient set of data is used.
- The Agency anticipates this platform will allow the absorption of certain legacy systems during future project phases.

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 and resources for this project.
- The project is heavily crossed matrixed.
- Aggressive schedule with little slack.

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. A risk plan has been developed, as part of the CDMS Project Plan to track risks to the project. Known risks identified with this project have been identified in the Risk Log.

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 Planning & Project Director	Mark Ervin
Contract Manager	APD Contract Manager	April Hargrove
Contract Administrator	APD Contract Administrator	Cassandra Jenkins
Vendor Account Manager	TBD	Paul Tierney
APD Project Manager	APD CDMS Project Manager	Naru Nayak
Vendor Project Manager	Vendor CDMS Project Manager	~~Alece Studtmann~~ Steve Poelsterl
APD Project Team	N/A	See CDMS Project Matrix
Vendor Project Team	N/A	See CDMS Project Matrix

ORGANIZATION CHART

```
                        ┌─────────────────────┐
                        │   Barbara Palmer     │
                        │     Director         │
                        └─────────────────────┘
                                  │
┌──────────────┐        ┌─────────────────────┐        ┌──────────────┐
│ Legislative  │        │  Project Director    │        │     AST      │
│  Oversight   │--------│   Mark Ervin         │───────▶│  Oversight   │
└──────────────┘        └─────────────────────┘        └──────────────┘
                                  │
       ┌──────────────────────────┼──────────────────────────┐
┌───────────────────┐    ┌───────────────────┐    ┌───────────────────┐
│ APD Contract      │    │ Vendor Project     │    │ APD Project        │
│ Manager           │    │ Manager            │    │ Manager            │
│ April Hargrove    │    │ Steve Poelsterl    │    │ Naru Nayak         │
└───────────────────┘    └───────────────────┘    └───────────────────┘
         │                        │                        │
┌───────────────────┐    ┌───────────────────┐    ┌───────────────────┐
│ Vendor Account    │    │ Vendor Project     │    │ APD Project Team   │
│ Manager           │    │ Team               │    │                    │
│ Paul Tierney      │    │                    │    │                    │
└───────────────────┘    └───────────────────┘    └───────────────────┘
```
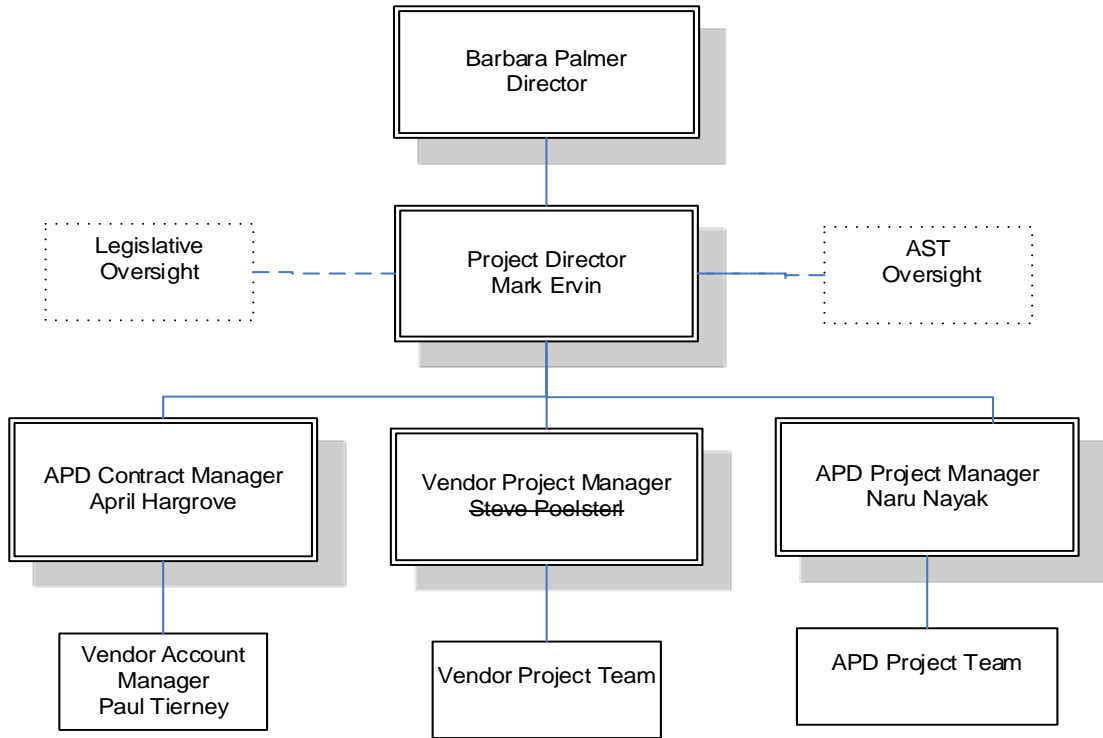
SECTION 11   COMMUNICATIONS AND STAKEHOLDERS

11.1 OVERVIEW

11.2 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. 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.

11.3 SCOPE

The CDMS Communication Plan/Approach is defined in the CDMS Project Plan and the Organizational Change Management Plan.

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   9/14/15
                                                             Date

_____   _____
Karen Hagan, Chief of Staff   9/14/15
                                                             Date

_____   _____
Denise Arnold, Deputy Director of Programs   9-14-15
                                                             Date

_____   _____
David Dobbs, Deputy Director of Budget & Finance   9/14/2015
                                                             Date

_____   _____
Mark Ervin, CIO   9/14/2015
                                                             Date

_____   _____
April Hargrove, CDMS Project Contract Manager   9/14/2015
                                                             Date

_____   _____
Naru Nayak, CDMS Project Manager   SEP. 14, 2015
                                                             Date

CLIENT DATA MANAGEMENT SYSTEM

PROJECT MANAGEMENT PLAN

Table of Contents

SECTION 1 EXECUTIVE SUMMARY

1.1 BACKGROUND

The Agency for Persons with Disabilities (APD) serves a client base of approximately 52,000 clients of which approximately 31,000 currently receive services and 21,000 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. The requirements defined by APD 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 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)" 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 Charter
- Project Contract
- Project Statement of Work (SOW) & Statement of Need
- MS Project Schedule / Timeline
- Organizational Change Management Plan
- Financial Management Plan

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 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 project stakeholders will ensure staff participating in meetings on divisions and business units behalf have the requisite knowledge and will be given the authority to make decisions.
- 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 Manager 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	Participant(s)
Project Sponsor	Champions the Project; Provides guidance on overall scope and project direction; Assures adequate business resources for project work activities; Is the ultimate decision maker for those items brought before the steering committee. 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 member of the Project Steering Committee; 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.	Mark Ervin, APD CIO
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.	April Hargrove
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.	Naru Nayak
APD Project Team	Report to the Project Manager; and Provides Subject matter expertise in support of the execution of the project.	See Project Team Matrix
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.	Paul Tiereny

Role Name	Description	Participant(s)
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.	~~Alece Studtmann~~ Steve Poelsterl
Vendor Project Team	Responsible for the development of the deliverable(s) in collaboration with the APD staff and other key stakeholders.	See Project Team Matrix
Agency for State Technology (AST)	Responsible for setting standards for management of rthe CDMS project and for providing oversite of theCDMS project.	Michael Avello, Shelly McCabe

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.
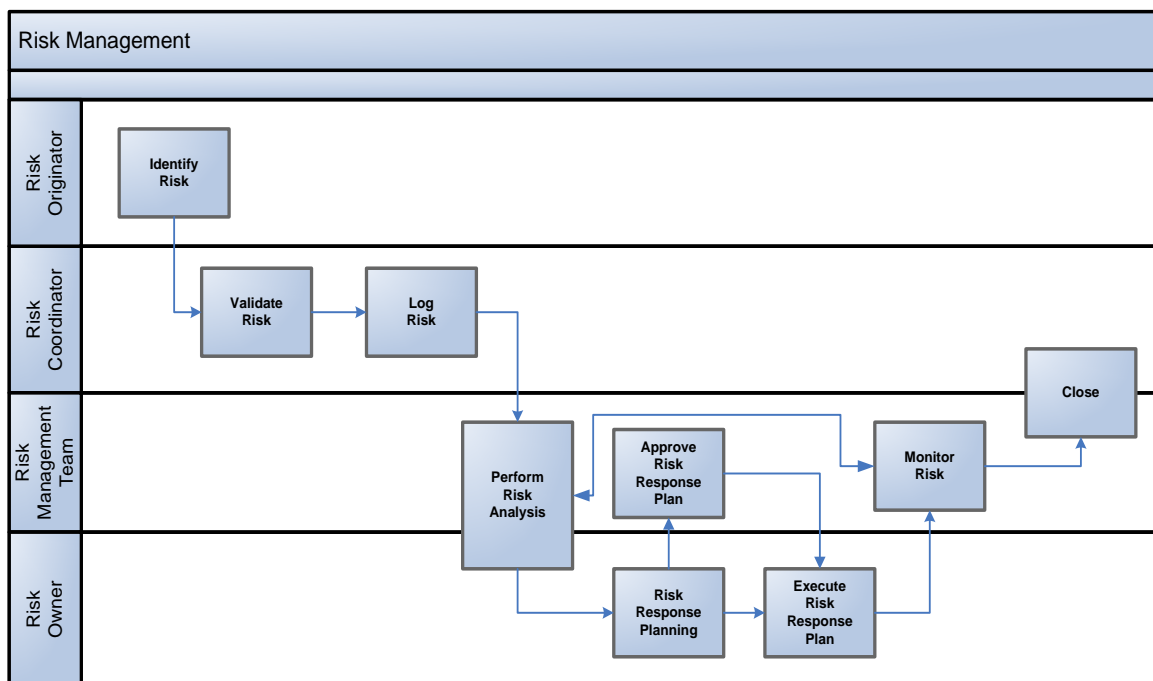
Exhibit 3: Risk Management High-Level Workflow

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

Definition: A RISK is a potential issue that MAY negatively impact the project timeliness, quality, resources or budget at some point in the future.

Legend: New: ▮ | Decreasing: ▯ | Increasing: ▮ | Closed: ▮

| | | | | | | | | | Link To Other Project Logs | | |
Item#	Risk Description	Category	Probability	Impacted Area(s)	Identified By	Status	Owner	Risk Response\Mitigation Plan	Issue Log #	Action Log #	Decision Log #
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											

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

Definition: A Change item is a request to modify scope in the form of an addition, modification, or deletion of an established or previously agreed upon requirement (s).

Legend: New Item: | Pending Item: | Closed Item:

Item#	Change Description	Date Identified	Identified By	Priority	Identified By	Status	Impacts	Issue Log #	Action Log #	Decision Log #
								Link To Other Project Logs		
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										

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 Identified – date the change request was submitted to the PM team
- Identified 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:

- yyyymmdd-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.
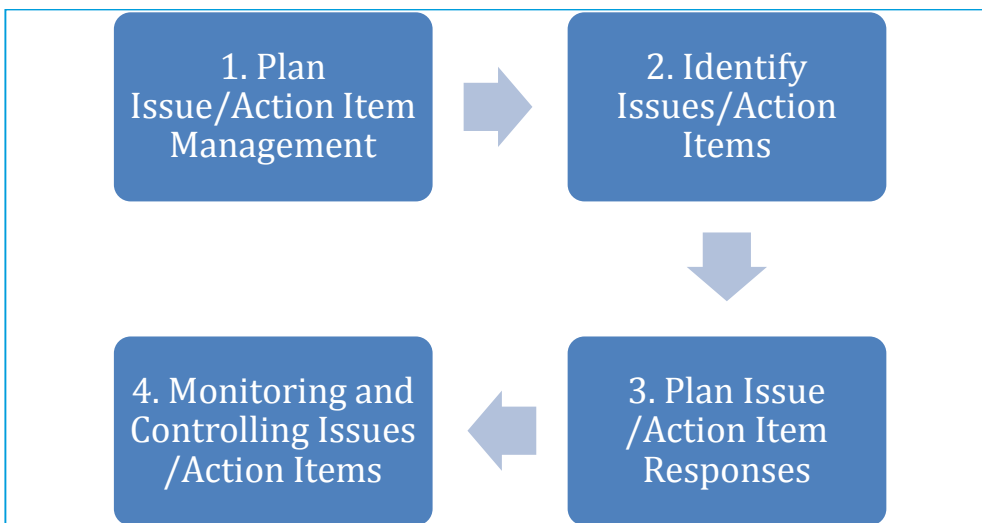
Exhibit 7: Issue/Action Item Management

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	The Project Director has overall responsibility for all of the project areas including the management of issues and action items. ▪ Make decisions to resolve issues or escalate to the Project Sponsor
Project Manager	The Project Manager responsibilities include: ▪ Ownership of Issue / Action Item Tracking Logs in the RAID ▪ Monitoring and management of open issues and action items ▪ Chairing Issue / Action Item Coordination Meetings updating status as required ▪ Including issues and action item status within the Project Status Report ▪ Reviewing issues and action items to prevent duplication
Issue / Action Item Originator	Anyone can originate an issue or action item. Responsibilities include: ▪ Identifying an issue requiring resolution ▪ Logging action items identified during the course of the project ▪ Defining the issue / action item further as required ▪ Reviewing and approving action plan/resolution to ensure issue as originally defined will be resolved
Issue / Action Item Assignee	The Assignee's responsibilities include: ▪ Participating in discussions with the Issue or Action Item Originator to fully understand the issue or action item ▪ Researching and drafting the Action plan/resolution ▪ Driving the issue / action items to resolution and closure

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	Project Manager
3	Project Director	Account Manager
4	Project Sponsor	CEO

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:

	ISSUE LOG				Legend:	New Item	Closed Item	Increasing Item			
	Definition: An ISSUE is an exsisting contraint that is currently or may in the future negatively impact the project timeliness, quality, resources or budget.								Link To Other Project Logs		
									Risk Log #	Action Log #	Decision Log #
Item#	Issue Description	Priority	Identified By	Date Received	Assigned To	Status	Date Closed	Resolution			
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											

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?
- Status – Open or Closed
- Date Closed – Date issue was resolved
- 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 Definition: A n ACTION is a proactive task identified by the project team to address a known problem or situation.					Legend: New Item: ■ |Pending Item: ■ |Closed Item: ■						
							RACI Resource Assigments				
Item#	Action Description	Priority	Date Assigned	Date Due	Assigned By	Status	Responsible	Accountable	Consult	Inform	Status Notes
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											

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 should be consulted 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.

Role	Communication Responsibilities
APD Project Sponsor	- Provide input and guidance about stakeholder communications to the Project Director - Champion project within the Agency
APD Project Director	Provide issue resolution and communications input and guidance to the Project Manager
APD & Vendor Project Manager	- Member of the project team, providing input and guidance to the team about Project stakeholder communication needs and strategies - Provide official communication to Team Leads for dissemination to the stakeholders
APD Project Team	Provide input to the Project Manager about Project stakeholder communication needs and strategies
Vendor Project Team	- Members of the project team, providing input and guidance to the team about stakeholder communications needs, strategies, and events - Coordinate the collection and dissemination of project information to stakeholder audiences - Create weekly status report - Provide written status report to weekly status meeting attendees - Deliver verbal report during weekly status meetings

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	Employees or subconrqactors of the Agency for Persons with Disabilities.
Waiver Support Coordinators	External	Contracted Employee certified to provide Waiver Support to the clients of APD.

Stakeholder	Internal/ External	Stakeholder Description
Providers	External	Active Medicaid Waiver Providers registered through AHCA.
Clients	External	Florida citizens who receive HCBS Waiver funding and their families.
Advocacy Groups	External	Those group who advocates on behalf of APD clients and providers.
Agency for State Technology	External	State of Florida technology agency responsible for setting standards and providing oversite for IT projects.
Legislature & Governor's Office	External	State of Florida governing body who approves funding for IT initiatives
Impacted Agencies	External	External Agencies impacted by the CDMS project.

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 & oversight entities) 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
ESC Status Meeting & Report	Excutive Steering Committee	In-Person	Monthly	APD Director & Manager
Project Status Report	Project Director, APD Project Mnaager Project Team	Email	Bi-Weekly	Vendor Project Manager
Project Status Meeting	Project Director, Identfied Project Team Members	In-Person/Skype	Weekly	APD & Vendor Project Manager, IV&V
AST Status Meeting	AST Oversight Staff	In-Person/Skype	Monthly	IV&V & APD PM
Meeting Agendas & Mins	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		
Karen Hagan	Chief of Staff		
Denise Arnold	Deputy Director of Programs		
David Dobbs	Deputy Director of Budget and Planning		
Mark Ervin	CIO		
Cassandra Jenkins	Contracts		

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	05/17
2	Fraud reduction and service delivery verification	Tangible	Client Agency	Data collected from statewide actual expenditures for the Fiscal Year 2013-14 showed 15,604 clients with $219.79 million in expenditures for in-home services. A conservative 2% reduction from elimination of fraud and billing abuses is $4.40 million a year.	Longitudinal comparison of provider claims billing to client service delivery	05/18
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	05/17

5	Provider access to service authorizations promptly	Intangible	Client Provider Region staff	Reduction of time lapse from date of service approval to service delivery		05/17
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	05/17
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	05/17
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	05/17
9	Secure maintenance of client central record	Intangible	Client Agency	Confidential information is stored securely	Number of records stored electronically	05/17
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	05/17

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	0/17

Implementation Plan

Plan Steps	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	Jan 2017	Feb 2017	Mar 2017	Apr 2017	May 2017	Jun 2017	Jul 2017	Aug 2017	Sep 2017	Oct 2017	Nov 2017	Dec 2017
			Fiscal Year 2015 - 2016										Fiscal Year 2016-2017												Fiscal Yea					
	Quarter 1			Quarter 2			Quarter 3			Quarter 4			Quarter 1			Quarter 2			Quarter 3			Quarter 4			Quarter 1			Quarter 2		
Initiation and Planning	█	█	█																											
Phased Implementation and Training			█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█								
Implementation Preparation			█	█																										
Group 1: Case Provider, Financial Management: (APD Staff) | Interface, Data Conversion, Training, Deployment)			█	█	█	█	█	█	█	█	█	█	█																	
Group 2: (WSC's) | Data Conversion, Training, Deployment)														█	█	█	█	█												
Consumer Portal: APD Consumers| (Training and Deployment)													█	█	█	█	█	█	█	█										
Function 3 /Group 3: (Providers) EVV and eMAR | Training and Deployment														█	█	█	█	█	█	█	█									
Harmony Advanced Reporting														█	█	█	█													
Project Closeout																			█	█	█	█								
Software as a Service (SaaS) License Fees													█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█	█

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS   Budget Period: 2016-2017

Department: Agency for Persons with Disabilities   Chief Internal Auditor: Beth Breier

Budget Entity: Program Management and Compliance   Phone Number: 850-414-8774

| (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 #140724-02.1	8/31/2014	Human Resource (HR) Practices in Central Office	**Finding 1:** There were 12 instances when HR staff did not retain documentation to support: specific HR actions were adequately completed. **Recommendation 1:** Central Office HR management formalize and implement processes to ensure Agency policies are followed by properly documenting and supporting HR actions; and categorize and track disciplinary actions and reasons throughout the Agency.	Planned action step: Policies will be reviewed, edited, and implemented to ensure clear, consistent processes. The tracking for disciplinary actions will be updated to include the needed information, and will better standardization and allow for sorting by reasons to identify trends.	
			Finding 2: Our review showed that personnel files at Central Office were not organized and maintained in secure sectional folders and there was a backlog of forms and documents that had not been filed. **Recommendation 2:** Central Office HR management should (1) utilize secure sectional file folders to store and fasten employee personnel documentation; (2)Timely file employee documentation; and (3) work with other areas of the Agency to review, update, and standardize needed HR forms.	Planned action steps: 1) Purchase sectional file folders in July 2015 and transfer all employee files into the secure folders. 2) Perform a comprehensive review all Agency HR policies and procedure for applicability and discard, revise, or develop policies as necessary. 3) Perform a division review of all employee files to ensure each file has the required documents.	
			Finding 3: All leave types were not being included in leave audits for separated employees resulting in some employees being overpaid for leave payouts. **Recommendation 3:** HR management should revise the leave audit procedures to include all types of leave (annual, sick, and administrative leave) for separated employees.	Planned action steps: 1) Run quarterly reports of all applicable leave codes to identify potential errors in leave code usage. 2) Update leave audit processes to include all leave types and train staff on the leave audit process. 3) Implement and follow a standard collection process when it is determined that employees are overpaid for leave payouts.	

			Finding 4: There was an inconsistent application of exemption indicators ("restricted positions", "protected employee", "restricted employee", restricted relative employee") Recommendation 4: HR management work with Department of Management Services to (1) understand how the exemption indicators work in People First; (2) implement a process to obtain the necessary information to determine the appropriate exemption indicator, and (3) survey all Tacachale employees and update the employee exemption indicators as needed.	Planned action steps: 1) HR staff will coordinate with DMS to ensure a clear understanding of the exemption indicators. 2) Develop a revised form to clarify the criteria for exemptions and use Agency-wide. 3) Send the revised form to all Agency employees to complete and update People First information as needed.	
			Finding 5: Overtime eligibility indicators examined in People First system were not reliable. Recommendation 4: HR management should take steps to review and update the indicators as needed.	Planned action steps: 1) HR reviewed exceptions identified in the audit to determine accuracy. 2) Develop and utilize an internal checklist to determine overtime eligibility. 3) Determine impact to affected employees and determine impact. 4) Review all remaining positions to ensure accuracy of indicators.	
			Finding 6:The Information Technology (IT) Division was not being notified in a timely manner when employees separated to remove their user access. Recommendation 5: HR should work with IT Division to develop a process to timely notify IT when employees separate from the Agency.	Planned action step: Work with IT Division to determine how to automate the notification process.	
			Finding 7: The same HR manager was security administrator for both the People First and FLAIR systems: Recommendation 7a: Different persons should be assigned the security administrator role in each system. Recommendation 7a: Agency FLAIR and People First security administrators should periodically review the assigned access roles for appropriateness.	Planned action steps: 1) Work with Budget and Planning to change the security administrator for the FLAIR system. 2) Conduct an initial and then periodic reviews of People First security roles and revise assigned access as needed.	

APD Rpt # 140724-02.2	8/31/2014	Human Resource (HR) Practices at Tacachale Developmental Disabilities Center	**Finding 1:** HR was not providing employees with a written statement of how social security numbers were being used (FS 119.071(5). **Recommendation 1:** HR management should limit usage of social security numbers, and provide employees a written statement of how social security numbers are used and maintain a signed copy in each personnel file.	Planned action steps: 1) Tacachale indicated they immediately began using the form to notify employees how social security numbers are being used. 2) HR management will review all forms using social security numbers to determine if it is needed and use an alternate identifier where possible.	
			Finding 2: There was an inconsistent application of exemption indicators ("restricted positions", "protected employee", "restricted employee", restricted relative employee") **Recommendation 2:** HR management work with Central Office and Department of Management Services to (1) understand how the exemption indicators work in People First; (2) implement a process to obtain the necessary information to determine the appropriate exemption indicator, and (3) survey all Tacachale employees and update the employee exemption indicators as needed.	Planned action steps: 1) HR staff will coordinate with DMS to ensure a clear understanding of the exemption indicators. 2) Develop a revised form to clarify the criteria for exemptions and use Agency-wide. 3) Send the revised form to all Agency employees to complete and update People First information as needed.	
			Finding 3: Tacachale only temporarily implemented a corrective action to report housing benefits on employees' W-2 forms for employees living in homes on Tacachale properties (reported accurately in 2010 and 2011, but not in 2012 and 2013). **Recommendation 3:** HR management (1) process and distribute corrected W-2s; and (2) implement a process to ensure the appropriate value is reported on future employee W-2s.	Planned action steps: 1) Tacachale management identified who lived in employee housing during the periods and will make a benefit adjustment in FLAIR which will result in a corrected W-2 for each affected employee.	
APD Rpt # 140724-02.3	8/31/2014	Human Resource (HR) Practices at Sunland Developmental Disabilities Center and Sunland Developmental Disabilities Defendant Program	**Finding 1:** There were 3 instances when HR staff did not retain documentation to support: specific HR actions were adequately completed. **Recommendation 1:** Sunland HR management implement processes to better document pay changes made in People First and consistently use certified mail or hand delivery as the method to document communication of final disciplinary actions to employees.	Planned action steps: 1) HR staff will ensure pay changes are appropriately documented and reviewed for accuracy. 2) Certified mail or hand delivery will be utilized for all dismissal letters and supporting documentation will be retained.	

			Finding / Recommendation	Planned Action Steps	
			Finding 2: HR was not providing employees with a written statement of how social security numbers were being used (FS 119.071(5). **Recommendation 2:** HR management should provide employees a written statement of how social security numbers are used and maintain a signed copy in each personnel file.	Planned action steps: 1) Sunland indicated they immediately began using the form to notify employees how social security numbers are being used. 2) HR management will review all forms using social security numbers to determine if it is needed and use an alternate identifier where possible.	
			Finding 3: There were instances when HR staff did not retain documentation to support: specific HR actions were adequately completed. **Recommendation 3:** Sunland HR management formalize and implement processes to ensure Agency policies are followed by properly documenting and supporting HR actions.	Planned Action Steps: HR management implemented processes to ensure proper steps were taken and supporting documentation retained to support HR actions.	
APD Rpt # 150108-01.1	FY 2013-14	Area 1 Family Care Council	**Finding 1:** Three of 19 travel reimbursements had exceptions: (1) two authorizations were not approved prior to travel; and (2) one reimbursement did not have adequate supporting documentation. **Recommendation 1:** Agency Region Office staff should ensure approvals and supporting documentation are obtained.	Planned Action Steps: Agency Region Office management indicated processes will be implemented to better review travel documentation to ensure approvals and supporting documentation are obtained.	
APD Rpt # 150108-01.2	FY 2013-14	Area 2 Family Care Council	No issues or recommendations were reported.		
APD Rpt # 150108-02.1	FY 2013-14	Area 3 Family Care Council	**Finding 1:** None of the eight travel reimbursements obtained the proper level approvals on the travel authorizations; and (2) approval by the Family Care Council (FCC) was not documented. **Recommendation 1:** Agency Region Office staff should ensure approvals and supporting documentation are obtained.	Planned Action Steps: 1) FCC and APD staff will ensure that all Board approved travel and expenditure documents are completed correctly and submitted for approval within the guidelines. 2) FCC and APD staff will communicate on a quarterly basis with the State Office FCC Liaison to ensure all processes are completed properly.	

			Finding 2: Two counties (Madison and Taylor) in the Northeast Region were not included in the Family Care Council Area. **Recommendation 2:** State Office and Northeast Region should re-assess the division of FCC areas to determine the best area for these two counties to be served.	Planned Action Steps: Regional staff and State Office FCC Liaison will work with Madison and Taylor counties to be incorporated into 3 FCC within the Northeast Region.	
APD Rpt # 150108-02.2	FY 2013-14	Area 4 Family Care Council	**Finding 1:** There were 33 reportable exceptions related to 17 noncompliant travel reimbursements (of 20 total payments) including calculation errors, incomplete forms, and lack of approval. **Recommendation 1:** Agency Region Office staff should ensure forms are completed, properly approved and supporting documentation are obtained.	Planned Action Steps: A new staff person has been assigned and additional steps will be taken to ensure forms are completed and properly approved, and supporting documentation is obtained.	
APD Rpt # 150108-02.3	FY 2013-14	Area 12 Family Care Council	**Finding 1:** None of the nine travel reimbursements obtained the proper level approvals on the travel authorizations. **Recommendation 1:** Agency Region Office staff should ensure approvals are obtained.	Planned Action Steps: Agency Region Office management indicated processes will be implemented to better review travel documentation to ensure approvals and supporting documentation are obtained.	

Office of Policy and Budget - July 2015
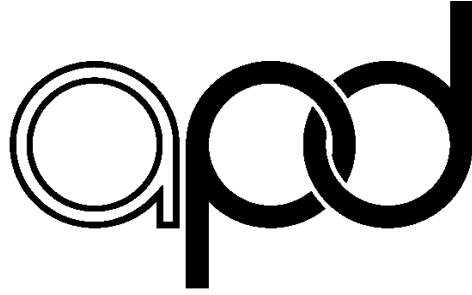
agency for persons with disabilities

State of Florida

Legislative Budget Request
Fiscal Year 2016-17

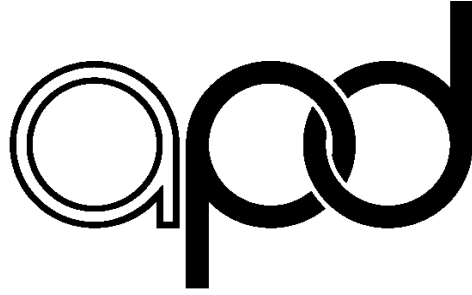# Developmental Disabilities Public Facilities

67100300

agency for persons with disabilities

State of Florida

Legislative Budget Request
Fiscal Year 2016-17

Developmental Disabilities Public
Facilities

67100300

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Administrative Trust Fund
Budget Entity: 67100300
LAS/PBS Fund Number: 2021

	Balance as of 6/30/2015	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(192,505) (A)		(192,505)
ADD: Other Cash (See Instructions)	(B)		0
ADD: Investments	(C)		0
ADD: Outstanding Accounts Receivable	0 (D)		0
ADD: Transfer from 67100200	192,505 (E)		192,505
Total Cash plus Accounts Receivable	**0** (F)	**0**	**0**
LESS Allowances for Uncollectibles	(G)		0
LESS Approved "A" Certified Forwards	0 (H)		0
Approved "B" Certified Forwards	(H)		0
Approved "FCO" Certified Forwards	0 (H)		0
LESS:	0 (I)		0
LESS:	(J)		0
Unreserved Fund Balance, 07/01/15	**0** (K)	**0**	**0** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Administrative Trust Fund - 67100300
LAS/PBS Fund Number: 2021

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/15
Total all GLC's 5XXXX for governmental funds;   **(192,505)** (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)

Transfer from BE 67100200   (192,505) (C)

Add/Subtract Other Adjustment(s):

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

Approved "C" Carry Forward Total (FCO) per LAS/PBS   0 (D)

A/P not C/F-Operating Categories   0 (D)

                                                                                         0 (D)

                                                                                           (D)

                                                                                           (D)

ADJUSTED BEGINNING TRIAL BALANCE: **0** (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)   **0** (F)

DIFFERENCE: **0** (G)*

*SHOULD EQUAL ZERO.

SCHEDULE 1A: DETAIL OF FEES AND RELATED PROGRAM COSTS

Department: 67-Agency for Persons with Disabilit   **Budget Period: 2016-17**
Program: Departmental - DDPF - PC 1303000000
Fund: 2516

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.)

	Regulatory services or oversight to businesses or professions. (Complete Sections I, II, and III and attach **Examination of Regulatory Fees** Form - Part I and II.)
X	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	**ACTUAL**	**ESTIMATED**	**REQUEST**
	FY 2014 - 15	**FY 2015 - 16**	**FY 2016 - 17**
Receipts:			
Reimbursement of Client Custodial Care	4,688,588	4,544,559	4,544,559
AHCA Transfers for Client Care	47,332,751	49,371,846	49,371,846
Total Fee Collection to Line (A) - Section III	52,021,339	53,916,405	53,916,405

SECTION II - FULL COSTS

Direct Costs:			
Salaries and Benefits	41,339,183	49,042,399	49,042,399
Other Personal Services	573,103	1,039,556	1,039,556
Expenses	3,346,012	3,569,448	3,569,448
Operating Capital Outlay	3,376	99,211	99,211
Food Products	1,263,578	1,298,912	1,298,912
Contracted Services	793,071	919,530	917,250
G/A - Contracted Professional Services	2,219,055	3,129,964	3,129,964
Risk Management Insurance	2,391,432	2,126,371	2,126,371
TR/DMS/HR SVCS/STW Contract	420,497	428,288	428,288
Indirect Costs Charged to Trust Fund			
Total Full Costs to Line (B) - Section III	52,349,309	61,653,679	61,651,399

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

SECTION III - SUMMARY

TOTAL SECTION I	(A)	52,021,339	53,916,405	53,916,405
TOTAL SECTION II	(B)	52,349,309	61,653,679	61,651,399
TOTAL - Surplus/Deficit	(C)	(327,970)	(7,737,274)	(7,734,994)

EXPLANATION of LINE C:

The 2014-15 deficit was covered with the existing cash balance. The deficit for FY 2015-16 has been addressed by unfunding budget authority that exceeds projected revenues and placing it in reserve. The same has been done for the deficit in FY 2016-17. Additionally expenditures allocable to forensic care will be moved to BE 67100500. Budgets in both BE 67100400 and 67100500 will be monitored this fiscal year to allow the Agency to develop a plan for realigning revenue sources with expenditures.

Office of Policy and Budget - July 2015

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17
Department Title: Agency for Persons with Disabilities
Trust Fund Title: Operations & Maintenance Trust Fund
Budget Entity: 67100300
LAS/PBS Fund Number: 2516

	Balance as of 6/30/2015		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	2,781,722	(A)		2,781,722
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable	4,257,243	(D)		4,257,243
ADD: _____		(E)		0
Total Cash plus Accounts Receivable	**7,038,965**	(F)	**0**	**7,038,965**
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	1,679,339	(H)		1,679,339
Approved "B" Certified Forwards		(H)		0
Approved "FCO" Certified Forwards	84,046	(H)		84,046
LESS: Other Accounts Payable (Nonoperating)		(I)		0
LESS: _Rounding		(J)		0
Unreserved Fund Balance, 07/01/15	**5,275,579**	(K)	**0**	**5,275,579** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Operations & Maintenance Trust Fund - 67100300
LAS/PBS Fund Number: 2516

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/2015
Total all GLC's 5XXXX for governmental funds; | **7,858,596** (A)
GLC 539XX for proprietary and fiduciary funds

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

Add/Subtract Statewide Financial Statement (SWFS)Adjustments :

Adjustment to Budget Entity Beginning Trial Balance - Expenses - CF | (35,565) *(C)*

SWFS Adjustment #6700005 - CF Correction for Expenses GL 31100 | 3,144 *(C)*

SWFS Adjustment #6700005 - CF Correction for Salaries GL 32100 | 6,392 *(C)*

Transfer to BE 67100100 | 2,525,000 (C)

Add/Subtract Other Adjustment(s):

Approved "B" Carry Forward (Encumbrances) per LAS/PBS | 0 (D)

Approved "C" Carry Forward Total (FCO) per LAS/PBS | 84,046 (D)

A/P not C/F-Operating Categories | 0 (D)

| (D)

| (D)

| (D)

ADJUSTED BEGINNING TRIAL BALANCE: | **5,275,579** (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) | **5,275,579** (F)

DIFFERENCE: | **0** (G)*

*SHOULD EQUAL ZERO.

Office of Policy and Budget - July 2015

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Budget Period: 2016 -17

Department Title:	Agency for Persons with Disabilities
Trust Fund Title:	Social Services Block Grant
Budget Entity:	67100300
LAS/PBS Fund Number:	2639

	Balance as of 6/30/2015		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(33,230)	(A)		(33,230)
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable	0	(D)		0
ADD: Transfer from BE 67100100	673,438	(E)		673,438
Total Cash plus Accounts Receivable	**640,208**	(F)	**0**	**640,208**
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	0	(H)		0
Approved "B" Certified Forwards		(H)		0
Approved "FCO" Certified Forwards	640,208	(H)		640,208
LESS:	0	(I)		0
LESS:		(J)		0
Unreserved Fund Balance, 07/01/15	**0**	(K)	**0**	**0** **

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 2015

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2016 - 17

Department Title: Agency for Persons with Disabilities

Trust Fund Title: Social Services Block Grant - 67100300

LAS/PBS Fund Number: 2639

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/15
Total all GLC's 5XXXX for governmental funds;
GLC 539XX for proprietary and fiduciary funds

(33,230)	(A)

Subtract Nonspendable Fund Balance (GLC 56XXX)

	(B)

Add/Subtract Statewide Financial Statement (SWFS)Adjustments :

SWFS Adjustment # and Description Expenses - CF

	(C)

Transfer from BE 67100100

(673,438)	(C)

Add/Subtract Other Adjustment(s):

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

	(D)

Approved "C" Carry Forward Total (FCO) per LAS/PBS

640,208	(D)

A/P not C/F-Operating Categories

0	(D)

0	(D)

	(D)

	(D)

ADJUSTED BEGINNING TRIAL BALANCE:

0	(E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)

0	(F)

DIFFERENCE:

0	(G)*

*SHOULD EQUAL ZERO.

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS   Budget Period: 2016-2017

Department : Agency for Persons with Disabilities   Chief Internal Auditor: Beth Breier

Budget Entity : Developmental Disabilities Public Facilities   Phone Number: 850-414-8774

(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 # 140107-01	5/15/2015	Developmental Disabilities Defendant Program (DDDP) Client Trust Funds Audit	**Finding 1**:The agreement between Florida State Hospital and DDDP did not address how (1) the approximate $20,000 balance of client trust funds is to be accounted for in the Agency's assets; or (2) Agency central office staff will be able to monitor the DDDP client trust funds activities. **Recommendation 1:** The Agency amend its interagency agreement with Department of Children and Families Florida State Hospital (FSH) to provide processes for Agency staff to (1) monitor client trust fund account activity; and (2) record the client trust fund year-end balance in the appropriate Agency financial account.	Corrective action completed. The Agency (1) will include the year-end balance of the clients' trust fund account in the Agency's year-end financial statements, as appropriate; and (2) a new agreement was executed as of 7/1/15 that included the necessary terms for the Agency central office staff to obtain the information needed to regularly monitor the DDDP client trust funds activities.	
			Finding 2: Non authorized users had access to web system that showed the clients' trust fund balances. **Recommendation 2**: DDDP management work with Florida State Hospital Information Systems Division to limit system access to view client trust fund balances to only those DDDP and FSH Financial Services staff that need such access to perform their job duties.	Corrective action completed. DDDP management worked with Florida State Hospital Information Technology staff to limit who could view the DDDP clients' trust fund balances.	
			Finding 3: The collection of important client information regarding income sources and family members had been discontinued. **Recommendation 3:** DDDP management consider collecting selected information during the admissions process that had been previously collected on Financial Form 280.	Corrective action completed. DDDP management began collecting the important information again regarding client income sources and identified of family members.	

APD Rpt # 140724-02.2	8/31/2014	Human Resource (HR) Practices at Tacachale Developmental Disabilities Center	**Finding 1:** HR was not providing employees with a written statement of how social security numbers were being used (FS 119.071(5). **Recommendation 1:** HR management should limit usage of social security numbers, and provide employees a written statement of how social security numbers are used and maintain a signed copy in each personnel file.	Planned action steps: 1) Tacachale indicated they immediately began using the form to notify employees how social security numbers are being used. 2) HR management will review all forms using social security numbers to determine if it is needed and use an alternate identifier where possible.	
			Finding 2: There was an inconsistent application of exemption indicators ("restricted positions", "protected employee", "restricted employee", restricted relative employee") **Recommendation 2**: HR management work with Central Office and Department of Management Services to (1) understand how the exemption indicators work in People First; (2) implement a process to obtain the necessary information to determine the appropriate exemption indicator, and (3) survey all Tacachale employees and update the employee exemption indicators as needed.	Planned action steps: 1) HR staff will coordinate with DMS to ensure a clear understanding of the exemption indicators. 2) Develop a revised form to clarify the criteria for exemptions and use Agency-wide. 3) Send the revised form to all Agency employees to complete and update People First information as needed.	
			Finding 3: Tacachale only temporarily implemented a corrective action to report housing benefits on employees' W-2 forms for employees living in homes on Tacachale properties (reported accurately in 2010 and 2011, but not in 2012 and 2013). **Recommendation 3**: HR management (1) process and distribute corrected W-2s; and (2) implement a process to ensure the appropriate value is reported on future employee W-2s.	Planned action steps: 1) Tacachale management identified who lived in employee housing during the periods and will make a benefit adjustment in FLAIR which will result in a corrected W-2 for each affected employee.	
APD Rpt # 140724-02.3	8/31/2014	Human Resource (HR) Practices at Sunland Developmental Disabilities Center and Sunland Developmental Disabilities Defendant Program	**Finding 1:** There were 3 instances when HR staff did not retain documentation to support: specific HR actions were adequately completed. **Recommendation 1:** Sunland HR management implement processes to better document pay changes made in People First and consistently use certified mail or hand delivery as the method to document communication of final disciplinary actions to employees.	Planned action steps: 1) HR staff will ensure pay changes are appropriately documented and reviewed for accuracy. 2) Certified mail or hand delivery will be utilized for all dismissal letters and supporting documentation will be retained.	

			Finding 2: HR was not providing employees with a written statement of how social security numbers were being used (FS 119.071(5). **Recommendation 2:** HR management should provide employees a written statement of how social security numbers are used and maintain a signed copy in each personnel file.	Planned action steps: 1) Sunland indicated they immediately began using the form to notify employees how social security numbers are being used. 2) HR management will review all forms using social security numbers to determine if it is needed and use an alternate identifier where possible.	
			Finding 3: There were instances when HR staff did not retain documentation to support: specific HR actions were adequately completed. **Recommendation 3:** Sunland HR management formalize and implement processes to ensure Agency policies are followed by properly documenting and supporting HR actions.	Planned Action Steps: HR management implemented processes to ensure proper steps were taken and supporting documentation retained to support HR actions.	
			Finding 4: There was an inconsistent application of exemption indicators ("restricted positions", "protected employee", "restricted employee", restricted relative employee") **Recommendation 4**: HR management work with Central Office and Department of Management Services to (1) understand how the exemption indicators work in People First; (2) implement a process to obtain the necessary information to determine the appropriate exemption indicator, and (3) survey all Tacachale employees and update the employee exemption indicators as needed.	Planned action steps: 1) HR staff will coordinate with DMS to ensure a clear understanding of the exemption indicators. 2) Develop a revised form to clarify the criteria for exemptions and use Agency-wide. 3) Send the revised form to all Agency employees to complete and update People First information as needed.	
			Finding 5: Sunland only temporarily implemented a corrective action to report housing benefits on employees' W-2 forms for employees living in homes on Tacachale properties (reported accurately in 2010, but not in 2011, 2012, and 2013). **Recommendation 5**: HR management (1) process and distribute corrected W-2s; and (2) implement a process to ensure the appropriate value is reported on future employee W-2s.	Planned action steps: 1) Sunland management identified who lived in employee housing during the periods and will make a benefit adjustment in FLAIR which will result in a corrected W-2 for each affected employee.	

Office of Policy and Budget - July 2015

Fiscal Year 2016-17 LBR Technical Review Checklist

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

Agency Budget Officer/OPB Analyst Name: **Debbie Patten/Nick Ivory**

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	67100400	67100500
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	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	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	Y
1.4 Has security been set correctly? **(CSDR, CSA)**	Y	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. **A security control feature has been added to the LAS/PBS Web upload process that will require columns to be in the proper status before uploading.**				
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	Y
2.2 Are the statewide issues generated systematically (estimated expenditures, nonrecurring expenditures, etc.) included?	Y	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	Y
2.4 Have the coding guidelines in *Section 3* of the LBR Instructions (pages 15 through 29) been followed?	Y	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	Y
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")**	Y	Y	Y	Y

	Action	Program or Service (Budget Entity Codes)			
		67100100	67100200	67100400	67100500
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	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.				
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.				
4. EXHIBIT D (EADR, EXD)					
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	Y
4.2	Is the program component code and title used correct?	Y	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.				
5. EXHIBIT D-1 (ED1R, EXD1)					
5.1	Are all object of expenditures positive amounts? (This is a manual check.)	Y	Y	Y	Y
AUDITS:					
5.2	Do the fund totals agree with the object category totals within each appropriation category? **(ED1R, XD1A - Report should print "No Differences Found For This Report")**	Y	Y	Y	Y
5.3	FLAIR Expenditure/Appropriation Ledger Comparison Report: Is Column A01 less than Column B04? **(EXBR, EXBB - Negative differences need to be corrected in Column A01.)**	Y	Y	Y	Y
5.4	A01/State Accounts Disbursements and Carry Forward Comparison Report: Does Column A01 equal Column B08? **(EXBR, EXBD - Differences need to be corrected in Column A01.)**	Y	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 2014-15 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.				

Action	Program or Service (Budget Entity Codes) 67100100	67100200	67100400	67100500

6. EXHIBIT D-3 (ED3R, ED3) (Not required to be submitted in the LBR - for analytical purposes only.)

6.1	Are issues appropriately aligned with appropriation categories?	Y	Y	Y	Y
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.				

7. EXHIBIT D-3A (EADR, ED3A)

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	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	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	Y
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	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	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.	Y	Y	Y	Y
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	Y
7.8	Does the issue narrative include the Consensus Estimating Conference forecast, where appropriate?	Y	Y	Y	Y
7.9	Does the issue narrative reference the specific county(ies) where applicable?	Y	Y	Y	Y
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 #16-002?	Y	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 _not_ be deleted. (**PLRR, PLMO**)	N/J No Issues	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	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	N/J No Lump Sum

		Program or Service (Budget Entity Codes)			
	Action	67100100	67100200	67100400	67100500
7.14	Do the amounts reflect appropriate FSI assignments?	Y	Y	Y	Y
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	Y
7.16	Do the issues relating to *salary and benefits* 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 90 of the LBR Instructions.)	N/J No Issues	N/J No Issues	N/J No Issues	N/J No Issues
7.17	Do the issues relating to *Information Technology (IT)* 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	Y
7.18	Are the issues relating to *major audit findings and recommendations* properly coded (4A0XXX0, 4B0XXX0)?	N/J No Issues	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?	Y	Y	Y	Y
AUDIT:					
7.20	Are all FSI's equal to '1', '2', '3', or '9'? There should be no FSI's equal to '0'. **(EADR, FSIA - Report should print "No Records Selected For Reporting")**	Y	Y	Y	Y
7.21	Does the General Revenue for 160XXXX (Adjustments to Current Year Expenditures) issues net to zero? **(GENR, LBR1)**	Y	Y	Y	Y
7.22	Does the General Revenue for 180XXXX (Intra-Agency Reorganizations) issues net to zero? **(GENR, LBR2)**	Y	Y	Y	Y
7.23	Does the General Revenue for 200XXXX (Estimated Expenditures Realignment) issues net to zero? **(GENR, LBR3)**	Y	Y	Y	Y
7.24	Have FCO appropriations been entered into the nonrecurring column A04? **(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))**	Y	Y	Y	Y
TIP	Salaries and Benefits amounts entered using the OADA/C transactions must be thoroughly justified in the D-3A issue narrative. Agencies can run **OADA/OADR** 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.				

		Program or Service (Budget Entity Codes)			
	Action	67100100	67100200	67100400	67100500
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 2016-17 data center costs, this can be completed by using the new State Data Center data processing services category (210001).				
TIP	If an appropriation made in the FY 2015-16 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.				

8. SCHEDULE I & RELATED DOCUMENTS (SC1R, SC1 - Budget Entity Level *or* SC1R, SC1D - Department Level)

	Action	67100100	67100200	67100400	67100500
8.1	Has a separate department level Schedule I and supporting documents package been submitted by the agency?	Y	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	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	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	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	Y
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	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?	Y	Y	Y	Y
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 *section 215.32(2)(b), Florida Statutes* - including the Schedule ID and applicable legislation?	Y	Y	Y	Y
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	Y
8.10	Are the statutory authority references correct?	Y	Y	Y	Y
8.11	Are the General Revenue Service Charge percentage rates used for each revenue source correct? (Refer to Section 215.20, Florida Statutes for appropriate general revenue service charge percentage rates.)	Y	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	N/A
8.13	If there is no Consensus Estimating Conference forecast available, do the revenue estimates appear to be reasonable?	Y	Y	Y	Y

Action	Program or Service (Budget Entity Codes)			
	67100100	67100200	67100400	67100500
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	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	N/A
8.16 Are the Schedule I revenues consistent with the FSI's reported in the Exhibit D-3A?	Y	Y	Y	Y
8.17 If applicable, are nonrecurring revenues entered into Column A04?	Y	Y	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	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	Y
8.20 Are appropriate general revenue service charge nonoperating amounts included in Section II?	N/A	Y	N/A	N/A
8.21 Are nonoperating expenditures to other budget entities/departments cross-referenced accurately?	N/A	Y	N/A	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	Y
8.23 Are nonoperating expenditures recorded in Section II and adjustments recorded in Section III?	Y	Y	Y	Y
8.24 Are prior year September operating reversions appropriately shown in column A01?	Y	Y	Y	Y
8.25 Are current year September operating reversions appropriately shown in column A02?	Y	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	Y
8.27 Has the agency properly accounted for continuing appropriations (category 13XXXX) in column A01, Section III?	Y	Y	Y	Y
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	Y
8.29 Does Line I of Column A01 (Schedule I) equal Line K of the Schedule IC?	Y	Y	Y	Y
AUDITS:				
8.30 Is Line I a positive number? (If not, the agency must adjust the budget request to eliminate the deficit).	Y	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? **(SC1R, SC1A - Report should print "No Discrepancies Exist For This Report")**	Y	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. **(SC1R, DEPT)**	Y	Y	Y	Y

		Program or Service (Budget Entity Codes)			
	Action	67100100	67100200	67100400	67100500
8.33	Has a Schedule IB been provided for each trust fund and does total agree with line I ?	Y	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	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.				

9. SCHEDULE II (PSCR, SC2)

AUDIT:

9.1	Is the pay grade minimum for salary rate utilized for positions in segments 2 and 3? **(BRAR, BRAA - Report should print "No Records Selected For This Request")** Note: Amounts other than the pay grade minimum should be fully justified in the D-3A issue narrative. (See *Base Rate Audit* on page 161 of the LBR Instructions.)	Y	Y	Y	Y

10. SCHEDULE III (PSCR, SC3)

10.1	Is the appropriate lapse amount applied in Segment 3? (See page 92 of the LBR Instructions.)	Y	Y	Y	Y
10.2	Are amounts in *Other Salary Amount* appropriate and fully justified? (See page 99 of the LBR Instructions for appropriate use of the OAD transaction.) Use **OADI** or **OADR** to identify agency other salary amounts requested.	Y	Y	Y	Y

11. SCHEDULE IV (EADR, SC4)

11.1	Are the correct Information Technology (IT) issue codes used?	Y	Y	Y	Y
TIP	If IT issues are not coded correctly (with "C" in 6th position), they will not appear in the Schedule IV.				

12. SCHEDULE VIIIA (EADR, SC8A)

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	Y

13. SCHEDULE VIIIB-1 (EADR, S8B1)

13.1	**NOT REQUIRED FOR THIS YEAR**				

14. SCHEDULE VIIIB-2 (EADR, S8B2)

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	Y

15. SCHEDULE VIIIC (EADR, S8C)
(LAS/PBS Web - see page 107-109 of the LBR Instructions for detailed instructions)

15.1	Agencies are required to generate this schedule via the LAS/PBS Web.				

Action	Program or Service (Budget Entity Codes)			
	67100100	67100200	67100400	67100500
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	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	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	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	Y
AUDIT:				
15.6 Do the issues net to zero at the department level? **(GENR, LBR5)**	Y	Y	Y	Y
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. **The Final Excel version no longer has to be submitted to OPB for inclusion on the Governor's Florida Performs Website.** (Note: Pursuant to *section 216.023(4) (b), Florida Statutes,* the Legislature can reduce the funding level for any agency that does not provide this information.)	Y	Y	Y	Y
16.2 Do the PDF files uploaded to the Florida Fiscal Portal for the LRPP and LBR	Y	Y	Y	Y
AUDITS INCLUDED IN THE SCHEDULE XI REPORT:				
16.3 Does the FY 2014-15 Actual (prior year) Expenditures in Column A36 reconcile to Column A01? **(GENR, ACT1)**	Y	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)? **(Audit #1 should print "No Activities Found")**	Y	Y	Y	Y
16.5 Does the Fixed Capital Outlay (FCO) statewide activity (ACT0210) only contain 08XXXX or 14XXXX appropriation categories? **(Audit #2 should print "No Operating Categories Found")**	Y	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: **Audit #3** 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	Y
16.7 Does Section I (Final Budget for Agency) and Section III (Total Budget for Agency) equal? **(Audit #4 should print "No Discrepancies Found")**	Y	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.				

Action	Program or Service (Budget Entity Codes)			
	67100100	67100200	67100400	67100500

17. MANUALLY PREPARED EXHIBITS & SCHEDULES

	Action	67100100	67100200	67100400	67100500
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	Y
17.2	Are appropriation category totals comparable to Exhibit B, where applicable?	Y	Y	Y	Y
17.3	Are agency organization charts (Schedule X) provided and at the appropriate level of detail?	Y	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	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	Y

AUDITS - GENERAL INFORMATION

TIP	Review *Section 6: Audits* 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)

	Action	67100100	67100200	67100400	67100500
18.1	Are the CIP-2, CIP-3, CIP-A and CIP-B forms included?	Y	Y	Y	Y
18.2	Are the CIP-4 and CIP-5 forms submitted when applicable (see CIP Instructions)?	Y	Y	Y	Y
18.3	Do all CIP forms comply with CIP Instructions where applicable (see CIP Instructions)?	Y	Y	Y	Y
18.4	Does the agency request include 5 year projections (Columns A03, A06, A07, A08 and A09)?	Y	Y	Y	Y
18.5	Are the appropriate counties identified in the narrative?	Y	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	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

	Action	67100100	67100200	67100400	67100500
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	Y