agency for persons with disabilities State of Florida

LEGISLATIVE BUDGET REQUEST

Rick Scott	Agency for Persons with Disabilities
Governor	Tallahassee
Barbara Palmer Director	October 15, 2018
State Office 4030 Esplanade Way Suite 380 Tallahassee	Cynthia Kelly, Director Office of Policy and Budget Executive Office of the Governor 1701 Capitol Tallahassee, Florida 32399-0001
Florida 32399-0950 (850) 488-4257 Fax:	JoAnne Leznoff, Staff Director House Appropriations Committee 221 Capitol Tallahassee, Florida 32399-1300
(850) 922-6456 Toll Free: (866) APD-CARES (866-273-2273)	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 2019-20 Fiscal Year.

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

Zarbara Palmer

Barbara Palmer Director

Temporary Special Duty – General Pay Additives Implementation Plan for Fiscal Year 2019-2020

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.



Legislative Budget Request Fiscal Year 2019-20

Department Level

6700000

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	ncy for Persons with Disabilities					
Contact Person:		ichard Tritschler, Counsel	Phone Number:	(850) 414-8052			
Names of the Case no case name, list t names of the plaint and defendant.)	he C			Palmer, in her Official rsons with Disabilities			
Court with Jurisdic	D	ivision		trict of Florida, Tallahassee			
Case Number:	4	18-cv-00342-RH-C	AS				
Summary of the Complaint:	A de se in pl de se ne he ef of	gency. The Complate elivery of intensive prvices 1) places Ca atensive behavioral accement or provision enies such individua ervices because these eeded in their home ome communities; a fectively discrimina fincidents of abuse	aint alleges that the behavioral services arlton Palms residen challenges at risk on of services in more ls the opportunity to be individuals cannot so or within more ty and that the Agency te against CTEP residence and neglect, reliance gies, and a lack of tr	injunctive relief against the Agency's current system for and administration of these ts and other individuals with of unnecessary institutional re restrictive settings; and 2) benefit from these behavioral t receive the level of service pical group homes near their 's methods of administration idents through the occurrence on unsafe and inappropriate reatment progress that are not			
Amount of the Clai	m: \$1	NONE. Complaint i	s for Injunctive & De	eclaratory Relief Only.			
Specific Statutes or Laws (including GA Challenged:	AA) 42 42	2 U.S.C. § 12132 (D		ilitation Act of 1973) lic Entities Under the ADA) by Methods of			
Status of the Case:		Filed and Served on the Director 07/30/2018. No responsive Pleading due yet.					
Who is representing record) the state in t		Agency Counsel					
lawsuit? Check all	that	Office of the Att	orney General or Div	vision of Risk Management			
apply.	X		t Counsel – Dan Russ ker Law Firm, Tallah	sell, Esq. & Will Hall, Esq. assee			

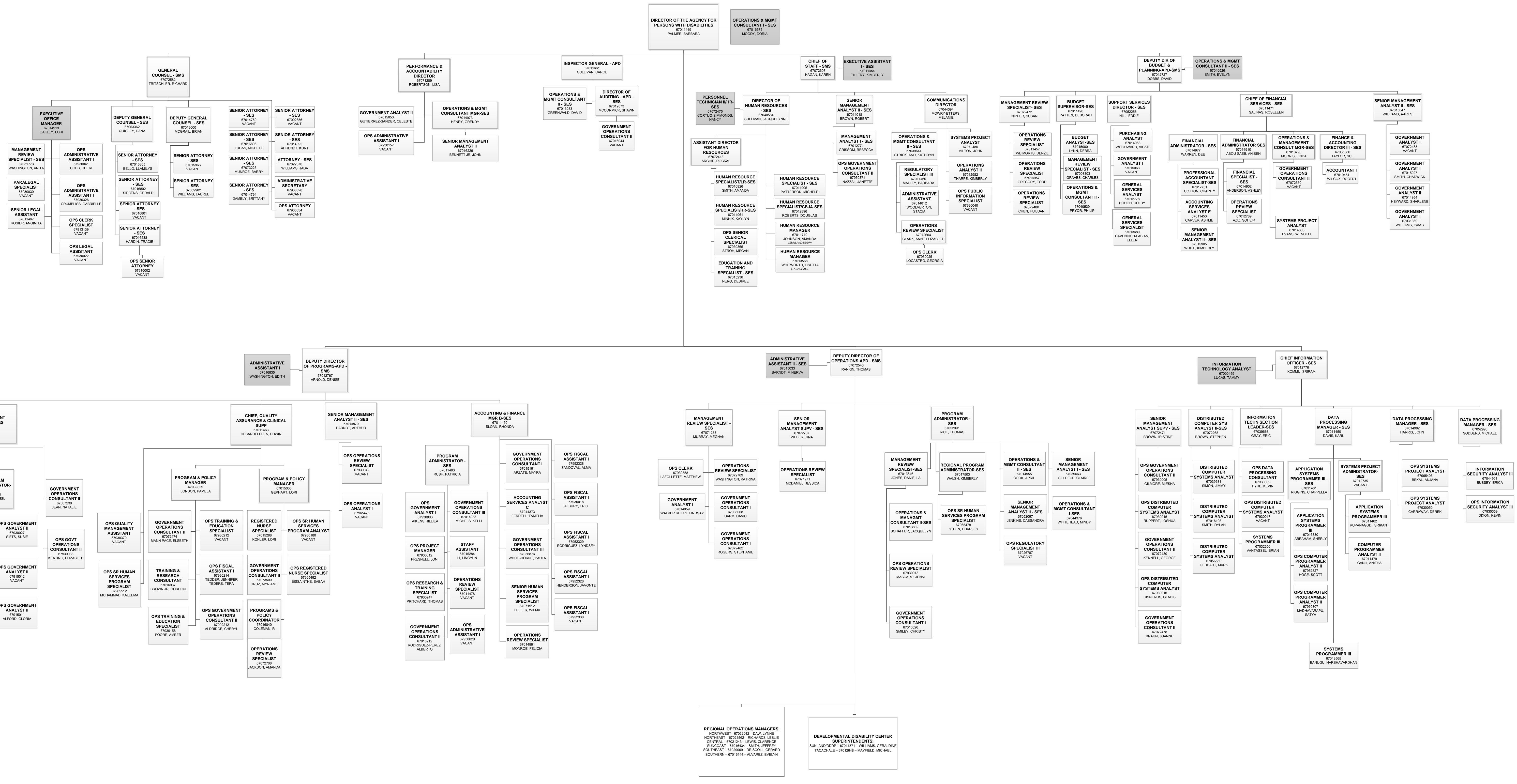
If the lawsuit is a class action (whether the class	Not filed initially as a Class Action.	
is certified or not),	Amanda Heystek	
provide the name of the	Disability Rights Florida	
firm or firms	1000 N. Ashley Drive, Suite #640	
representing the plaintiff(s).	Tampa Florida 33602	
	Matthew Dietz	
	Disability Independence Group, Inc.	
	2990 Southwest 35th Avenue	
	Miami, Florida 33133-3410	
	Nancy E. Wright	
	Law Firm of Nancy E. Wright	
	3231 NW 47th Place	
	Gainesville, Florida 32605-1185	

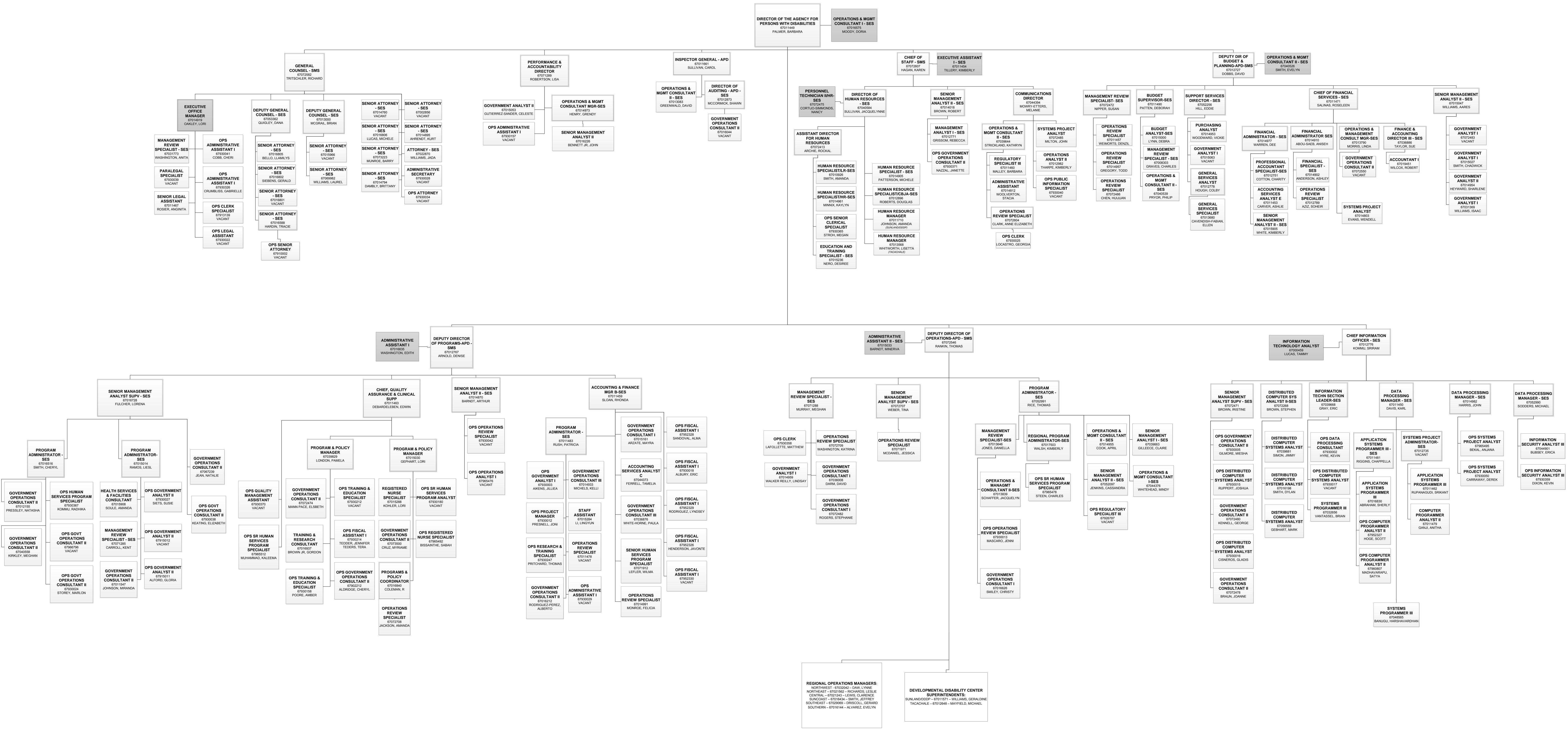
Office of Policy and Budget – June 2018

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.

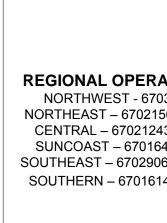
Agency:	Agenc	cy fo	or Persons with D	isabilities			
Contact Person:	APD: Genera		nard Tritschler, ounsel	Phone Number:	(850) 414-8052		
Names of the Case no case name, list names of the plaint and defendant.)	the	Zac Palr	hary L through is (Guardian Ken L; Jeri	Richard T; Chris O; Jay F; ry H; and Mary R v. Barbara r of the Agency for Persons		
Court with Jurisdic			ted States District	Court, Northern Dist	trict of Florida, Tallahassee		
Case Number:	4	4:17	-cv-226-RH-CAS				
Summary of the Complaint:	 Plaintiff seeks a declaration from the Courincluding its underlying state statute and a Title II of the Americans with Disa 12132; Section 504 of the Rehabilitation A 794(b); Procedural due process rights under to the U.S. Constitution and 42 U.S. 				Iministrative rules violates: bilities Act, 42 U.S.C. § .ct of 1973, 29 U.S.C. § r the Fourteenth Amendment		
Amount of the Clai	m: s	to the U.S. Constitution and 42 U.S.C. § 1983. \$Unknown at this point.					
Specific Statutes or Laws (including G. Challenged:	AA) 2	42 U 29 U	J.S.C. § 12132 J.S.C. § 794(b) J.S.C. § 1983				
Status of the Case:	S	state	d he would rule in	favor of the Agency	and argued. The Judge in February 2018 and urt has not issued its ruling.		
Who is representing			Agency Counsel				
record) the state in this lawsuit? Check all that apply.		Office of the Attorney General or Division of Risk Management					
		X Outside Contract Counsel - David Yon and Brittany Adams Long, Radey Law Firm, Tallahassee					
If the lawsuit is a claction (whether the is certified or not), provide the name of firm or firms representing the plaintiff(s).	class F	Plair		vith Stearns, Weaver	Law Firm. on, but it has not been		

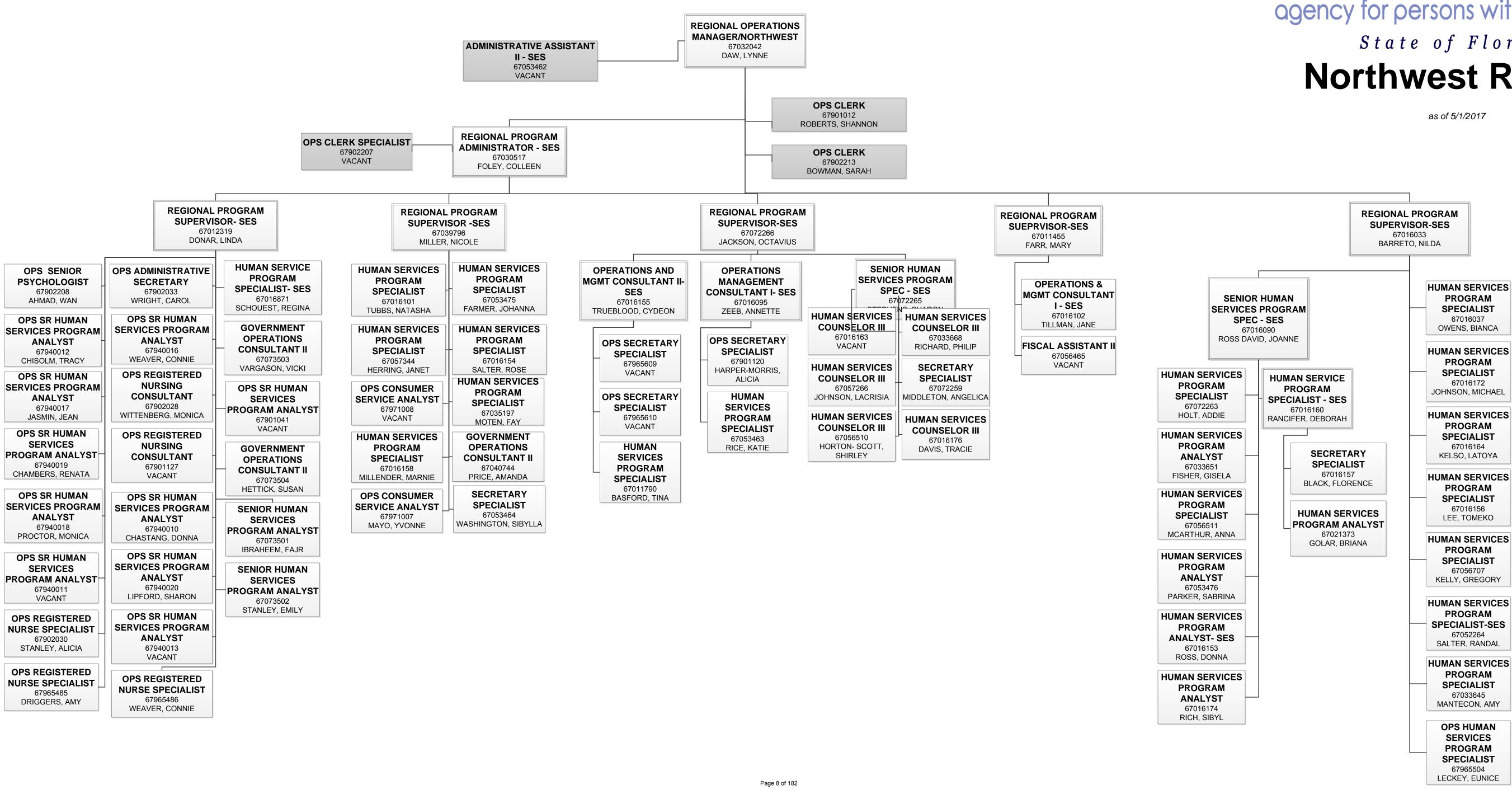




agency for persons with disabilities State of Florida **State Office**

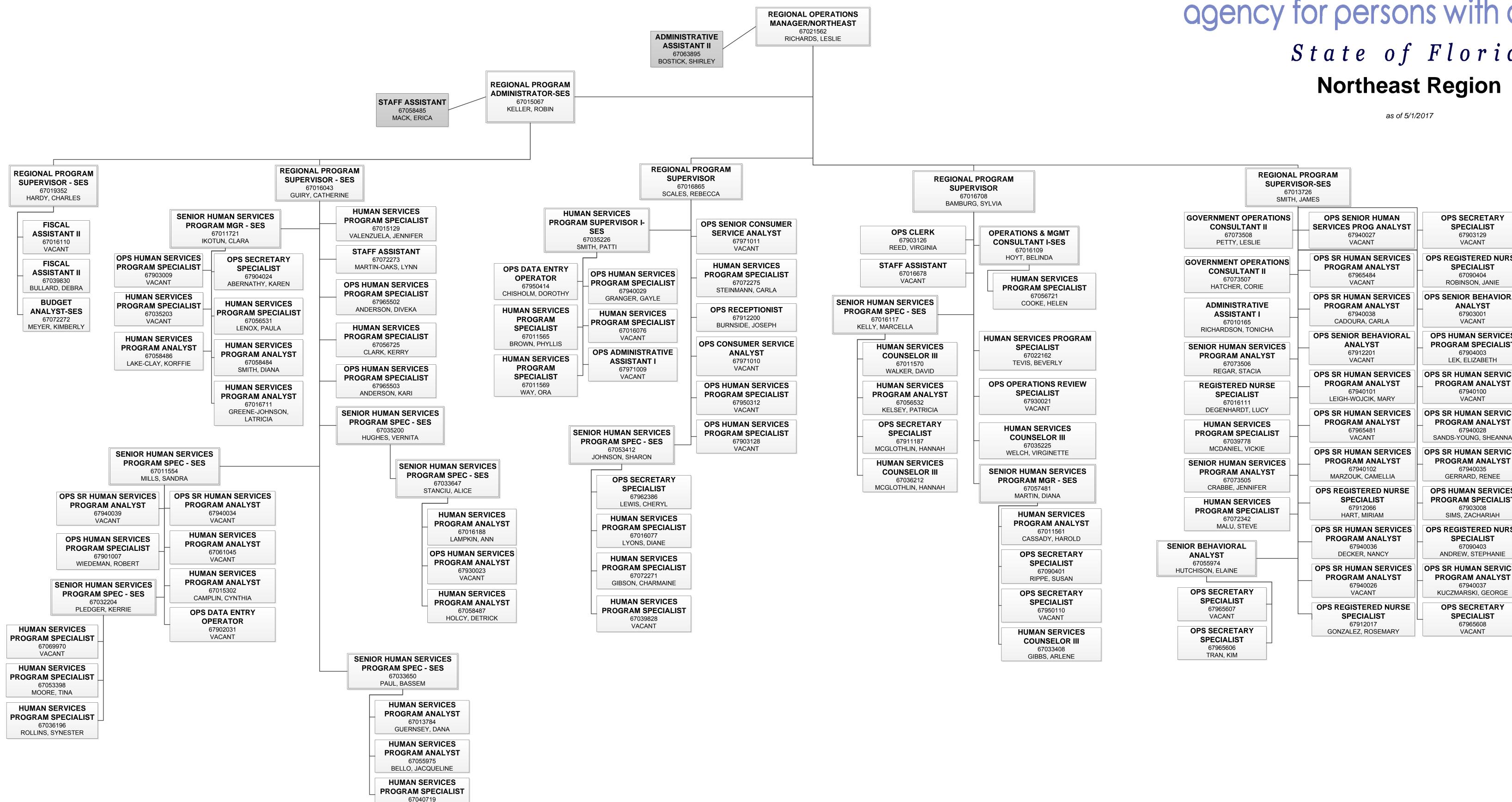
as of 5/1/2017







Northwest Region

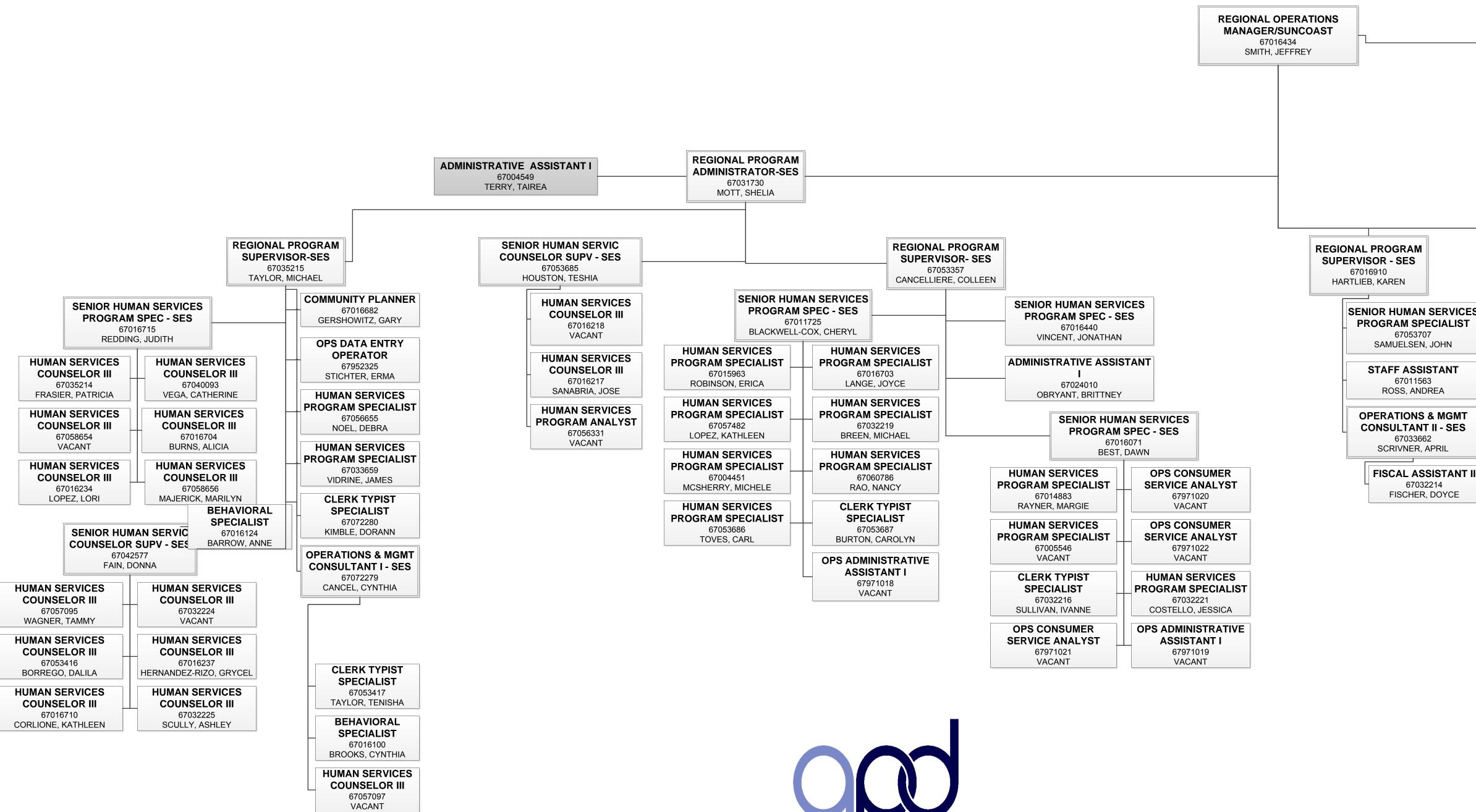


WALDRON, DEBRA

agency for persons with disabilities State of Florida Northeast Produ

PS SECRETARY
67903129 VACANT
EGISTERED NURSE SPECIALIST 67090404 OBINSON, JANIE
ENIOR BEHAVIORAL ANALYST 67903001 VACANT
HUMAN SERVICES BRAM SPECIALIST 67904003 LEK, ELIZABETH
R HUMAN SERVICES GRAM ANALYST 67940100 VACANT
R HUMAN SERVICES GRAM ANALYST 67940028 S-YOUNG, SHEANNA
R HUMAN SERVICES GRAM ANALYST 67940035 ERRARD, RENEE
HUMAN SERVICES BRAM SPECIALIST 67903008 IMS, ZACHARIAH
EGISTERED NURSE SPECIALIST 67090403 DREW, STEPHANIE
R HUMAN SERVICES GRAM ANALYST 67940037 ZMARSKI, GEORGE
PS SECRETARY SPECIALIST 67965608

VACANT

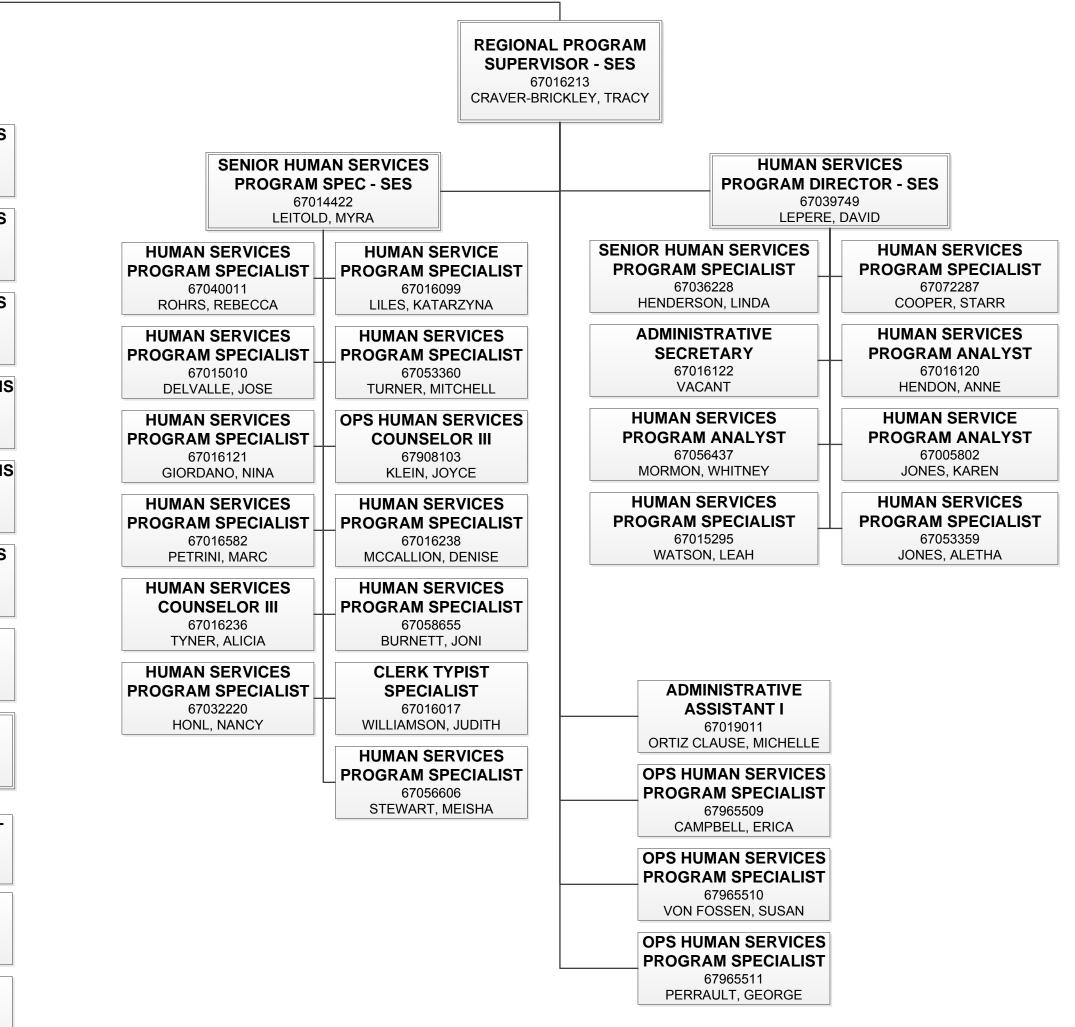


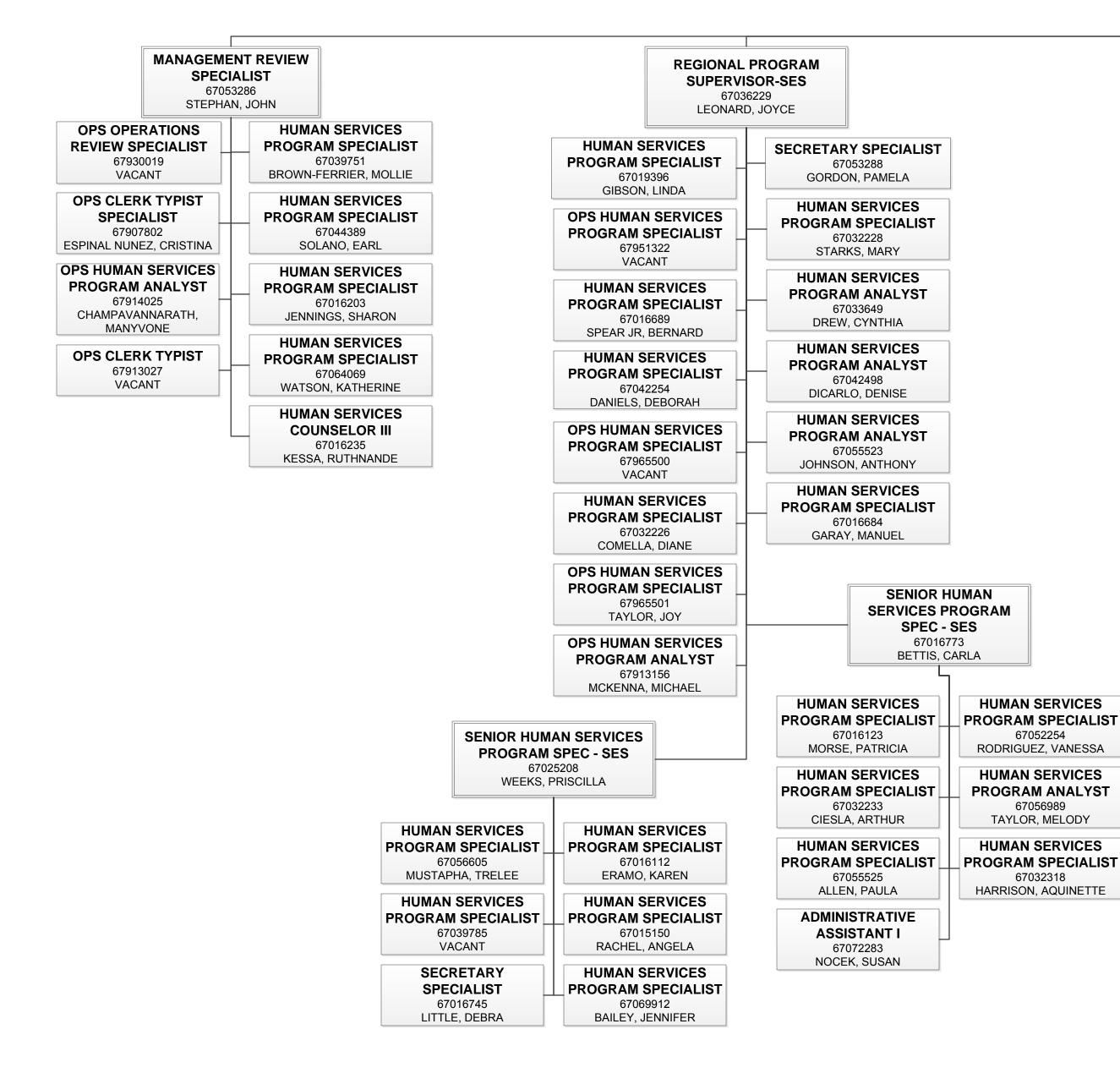
agency for persons with disabilities State of Florida

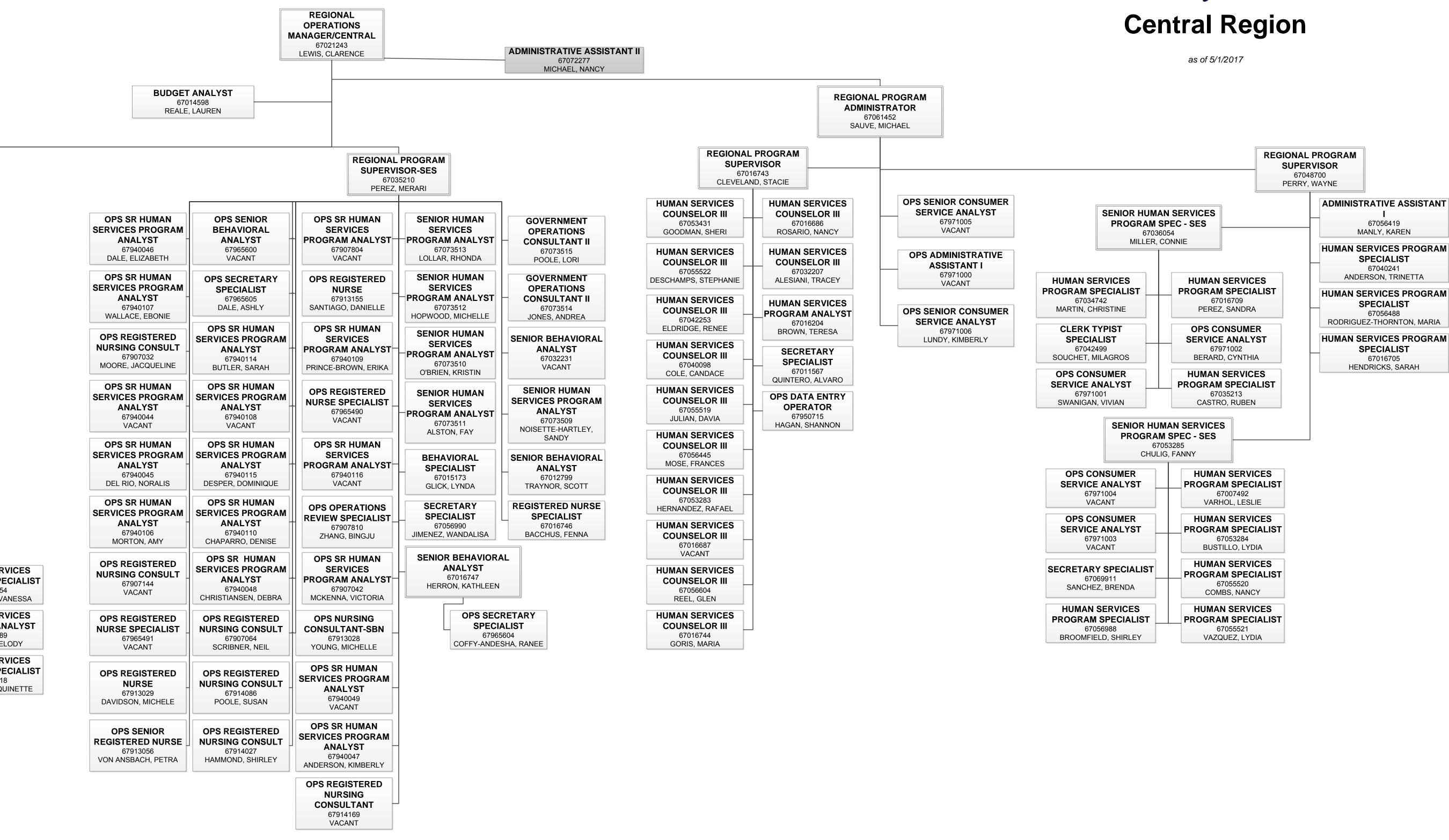
Suncoast Region

as of 5/2/2017

		REGIONAL SUPERVIS 67010 WILCHER,	SOR- SES 6052							
ES	OPS SR HUMAN SERV PROGRAM ANALYS 67940126 BURDGE, CASSANDRA	бт	PROG	UMAN SERVICES RAM ANALYST 67940128 .EY, MICHELLE		OF	PS SR HUMAN SERVICES PROGRAM ANALYST 67940131 O'NEIL, MAUREEN		_	NIOR HUMAN SERVICES PROGRAM ANALYST 67073517 BUTLER, LEAU'RETTE
	OPS REGISTERE SPECIALIS 67965489 VACANT	ST 🔤	PROG	UMAN SERVICES RAM ANALYST 67923091 VACANT		OF	PS SR HUMAN SERVICES PROGRAM ANALYST 67940129 JOHNSON, WENDY			NIOR HUMAN SERVICES PROGRAM ANALYST 67073519 DIAZ, NILSA
	OPS REGISTERE SPECIALIS 67965488 VACANT	ST	PROG	UMAN SERVICES RAM ANALYST 67941126 SAMMY, CARLA		OF	PS SR HUMAN SERVICES PROGRAM ANALYST 67940130 VACANT			NIOR HUMAN SERVICES PROGRAM ANALYST 67073516 KURLYCHEK, MARY
. 11	OPS SR HUMAN S PROGRAM AN 67940135 PLAVNER, EL	ALYST	SF	ISTERED NURSE PECIALIST 67908001 UVIN, SUSAN		OF	PS SR HUMAN SERVICES PROGRAM ANALYST 67940132 BROTHER, LINDA		GOV	VERNMENT OPERATIONS CONSULTANT II 67073520 OLSON, ANITA
	OPS SR HUMAN S PROGRAM AN 67940138 VACANT	ALYST	PROG	UMAN SERVICES RAM ANALYST 67940136 GUEN, DAVID		OF	PS SR HUMAN SERVICES PROGRAM ANALYST 67940127 CLARK, BRYAN		GOV	CONSULTANT II 67073521 ULLOA, CHRISTI
	OPS CLERK T SPECIALIS 67923314 VACANT	ST 🗌	PROG	UMAN SERVICES RAM ANALYST 67903127 IAMS, DENISE		OF	PS SR HUMAN SERVICES PROGRAM ANALYST 67940134 VACANT			NIOR HUMAN SERVICES PROGRAM ANALYST 67073518 WILSON, CHERITA
	OPS SR HUMAN S PROGRAM AN 67940059 WOODALL, RI	ALYST	PROG	UMAN SERVICES RAM ANALYST 67940133 AN, ANABELLE		OF	PS SR HUMAN SERVICES PROGRAM ANALYST 67940058 VACANT	_		ADMINISTRATIVE ASSISTANT I 67011555 LOCKETT, BETTY
	OPS SR HUMAN S PROGRAM AN 67940137 GRANDE, FRE		SF	FERED NURSE PECIALIST 67072278 VACANT		-	SENIOR BEHAVIORAL ANALYST 67053467 SAGER, WAYNE			REGISTERED NURSE SPECIALIST 67016517 FREEMAN, KATHERINE
	SENIOR BEHAV ANALYST 67016136 NOWOTNIAK, PA	r H	PRACTI 67	OR LICENSED CAL NURSE 1908100 ACANT	1		OPS CLERK TYPIST SPECIALIST 67923303 VACANT			REGISTERED NURSE - OPS 67923338 VACANT
	PSYCHOLOG SPECIALI 67908102 COPPOLA, DE	ST				_	BEHAVIORAL ANALYST 67015090 HOWARD, COURTNEY		_	OPS REGISTERED NURSE 67923339 GOSS, JENNIFER
	BEHAVIORAL A 67039102 TAYLOR, TR/	2				-	OPS SENIOR BEHAVIORAL ANALYST 67965601 GELLER, DAVID		_	OPS REGISTERED NURSE 67923060 MUENKS, SUSAN
	OPS SECRE SPECIALI 67965611 LAGUILLO FON	ST				-	BEHAVIORAL ANALYST 67923307 VACANT	•	_	OPS REGISTERED NURSE SPECIALIST 67923147 CLARK, CHERYL
	AMARILLY					-	OPS SECRETARY SPECIALIST 67965612 HOCHHEISER, SHEREE			OPS REGISTERED NURSE SPECIALIST 67923040 SCHEELER, TANYA
							OPS BEHAVIOR ANLAYS 67923083 CRIPE, MICHAEL	T		
							OPS BEHAVIORAL ANALYST 67940060 VACANT			

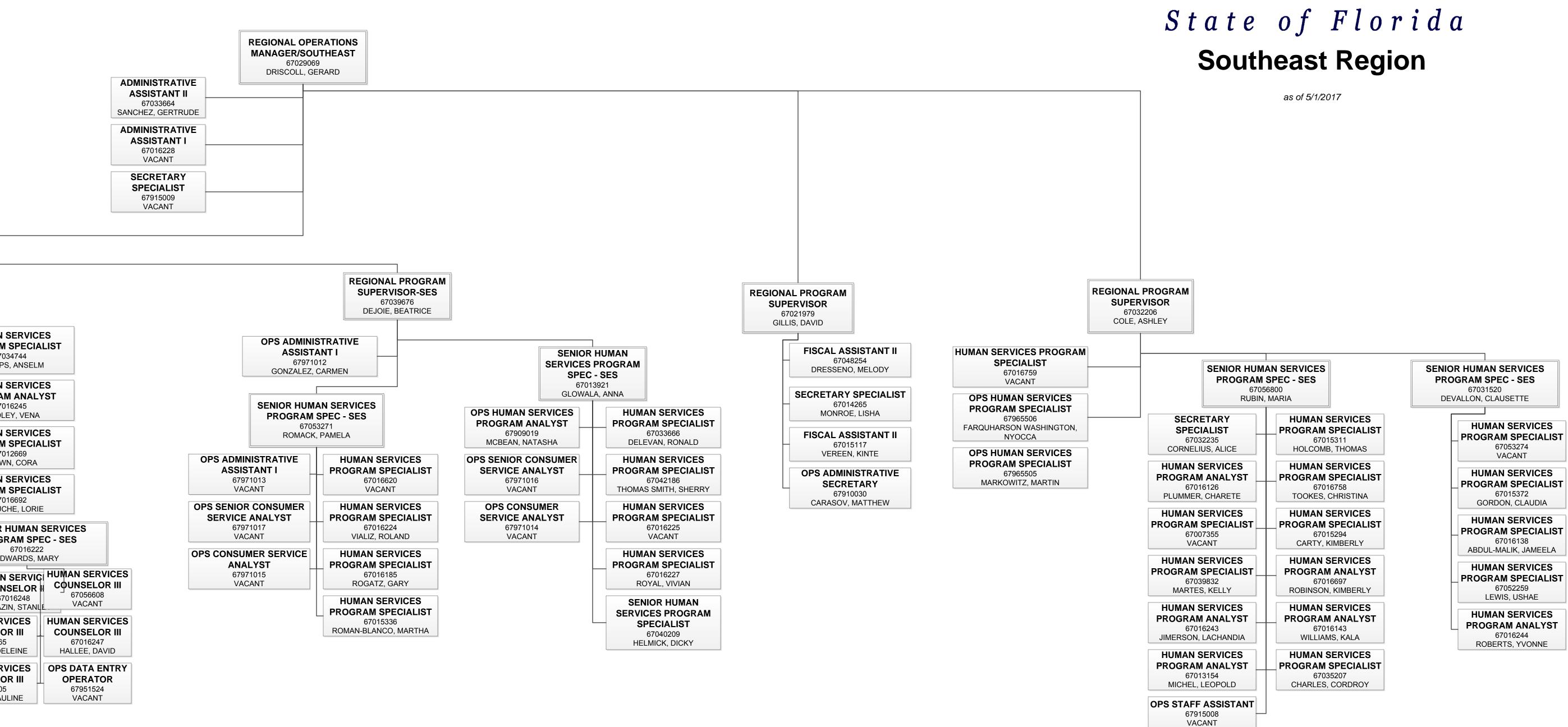






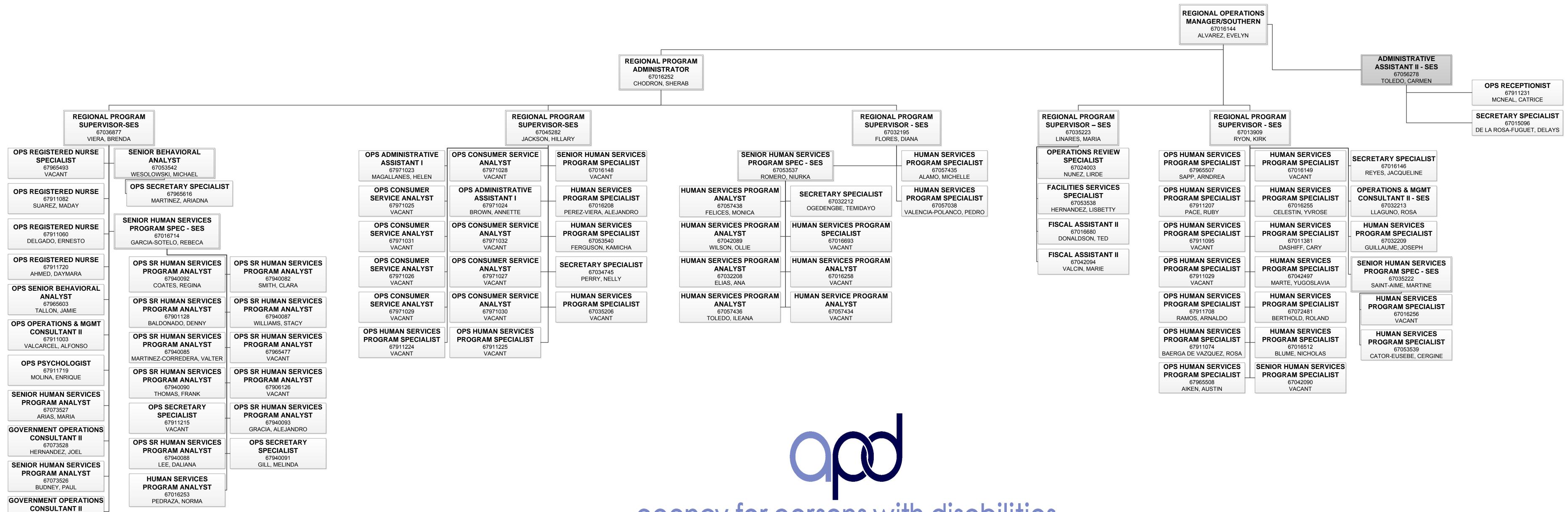
agency for persons with disabilities State of Florida Central Region

		REGIONAL PROGRAM ADMINISTRATOR-SES 67015094 CASTOR, MARGUERITE		
SUPERVIS 6703	PROGRAM SOR - SES 32386 N, LINDA		SUPE 67	L PROGRAM ERVISOR 053414 RY, JOHN
OPS SR HUMAN SERVICES PROGRAM ANALYST 67940077 VACANT	REGISTERED NURSE CONSULTANT 67015292 LABREC, CHRISTA		HUMAN SERVICES PROGRAM ANALYST 67033663	HUMAN SE PROGRAM S 67034 PHILLIPS, J
OPS SR HUMAN SERVICES PROGRAM ANALYST 67940065 VACANT	OPS SR HUMAN SERVICES PROGRAM ANALYST 67940072		TRAVIS PANNELL, PATRICIA HUMAN SERVICES PROGRAM SPECIALIST 67033667	HUMAN SI PROGRAM 67016
OPS SR HUMAN SERVICES PROGRAM ANALYST 67940074 VACANT	OPS SR HUMAN SERVICES PROGRAM ANALYST		GORDON, CASSANDRA HUMAN SERVICES PROGRAM SPECIALIST 67033652 WHITE, PATRICIA	HUMAN SI PROGRAM S 67012
OPS SR HUMAN SERVICES PROGRAM ANALYST 67940075 VACANT	67940064 VACANT OPS REGISTERED NURSE		OPERATIONS ANALYST II 67016229 SENAT, MILORY	BROWN, HUMAN SI PROGRAM S 67016 LATOUCH
OPS REGISTERED NURSING CONSULT 67910031 TORRES, ELIZABETH	67915013 MACAULEY, DENISE OPS SR HUMAN SERVICES PROGRAM		SENIOR HUMAN SERVICES PROGRAM SPECIALIST 67016223 GISSENDANNER, CHARLENE	SENIOR HI PROGRA 6 EDW/
OPS REGISTERED NURSE SPECIALIST 67965487 EARLE, ADELLA	ANALYST 67940067 ANISE, ESTHER OPS SR HUMAN		HUMAN SERVICES COUNSELOR III 67016130	HUMAN S COUNS 6701
OPS SR HUMAN SERVICES PROGRAM ANALYST 67940076 BARNES, EDDIE	SERVICES PROGRAM ANALYST 67940122 WILLIAMS, LORRAINE		VACANT	SARRAZIN HUMAN SERVI COUNSELOR 67053465 AGLOW, MADELE
OPS SR HUMAN SERVICES PROGRAM ANALYST 67940121 VACANT	OPS SENIOR BEHAVIORAL ANALYST 67909029		GOVERNMENT OPERATIONS CONSULTANT II 67073525	HUMAN SERVIO COUNSELOR 67032205 SPENCE, PAULI
OPS SR HUMAN SERVICES PROGRAM ANALYST 67940073 VACANT	SANSBURY, TESA OPS SECRETARY SPECIALIST 67965613		HUDSON, MARVIN GOVERNMENT OPERATIONS CONSULTANT II 67073524	L
OPS HUMAN SERVICES PROGRAM CONSULTANT II 67915010 VACANT	VACANT OPS SENIOR BEHAVIORAL ANALYST		VACANT SENIOR HUMAN SERVICES PROGRAM ANALYST 67073523	
SENIOR BEHAVIORAL ANALYST 67056614 VACANT	67965602 VACANT OPS SECRETARY		LOPEZ, WANDA BEHAVIORAL SPECIALIST 67016142 CASHEN, CHERIE	
	SPECIALIST 67965617 VACANT		BEHAVIORAL ANALYST 67052803 BATTISTA, HEATHER	
			SENIOR HUMAN SERVICES PROGRAM ANALYST 67073522 TRUBY, JACQUELINE	
			OPS BEHAVIORAL ANALYST 67910003 FLORES, MARIA	
			OPS SR HUMAN SERVICES PROGRAM ANALYST 67940120 DANIELE, ANNIE	
			OPS SR HUMAN SERVICES PROGRAM ANALYST 67940066 KILEY-TEIXEIRA, CHRISTINA	





ogency for persons with disabilities State of Florida Southeast Region



agency for persons with disabilities State of Florida **Southern Region**

as of 5/2/2017

67073529 ETIENNE, HENRY

AGENCY FOR PERSONS WITH DISABILITIES			FISCAL YEAR 2017-18	
SECTION I: BUDGET		OPERA	TING	FIXED CAPITAL OUTLAY
DTAL ALL FUNDS GENERAL APPROPRIATIONS ACT			1,280,885,351	6,664,
ADJUSTMENTS TO GENERAL APPROPRIATIONS ACT (Supplementals, Vetoes, Budget Amendments, etc.)			42,839,512	2,075,
NAL BUDGET FOR AGENCY			1,323,724,863	8,740,
SECTION II: ACTIVITIES * MEASURES	Number of Units	(1) Unit Cost	(2) Expenditures (Allocated)	(3) FCO
kecutive Direction, Administrative Support and Information Technology (2)	34,380	134.96	4,639,866	8,740
Home And Community Services Administration * Support Coordination * Number of people receiving support coordination	34,380	1,689.24	4,639,866	
Private Intermediate Care Facilities For The Developmentally Disabled * Number of adults receiving services in Developmental Service Public Facilities	609	145,970.57	88,896,075	
Program Management And Compliance * Based on Administrative Components of serving people in the Community and Institutional settings	59,741	268.27	16,026,853	
Adult Daily Living * Number of persons with disabilities served in Adult Daily Living Adult Day Service * Number of persons with disabilities served in Adult Day Training Service	20,080	4,259.15 2,477.82	85,523,718 33,363,785	
Adult Medical/Dental * Number of persons with disabilities served in Adult Medical/Dental	12,212	1,623.12	19,821,586	
Adult Respite Services * Number of persons with disabilities served in Adult Respite Services	276	2,399.67	662,308	
Adult Residential Habilitation * Number of persons with disabilities served in Adult Residential Habilitation	8,405	15,805.51	132,845,352	
Adult Specialized Therapies/ Assessments * Number of persons with disabilities served in Adult Specialized Assessments, Therapies, Equipment and Supplies Adult Supported Employment * Number of persons with disabilities served in Adult Supported Employment	4,495	1,668.98 1,483.65	7,502,054 2,612,710	
Adult Supported Living * Number of persons with disabilities served in Adult Supported Living and In Home Subsidies	13,924	7,515.39	104,644,312	
Adult Transportation * Number of persons with disabilities served in Adult Transportation	10,092	1,173.98	11,847,815	
Children Daily Living * Number of persons with disabilities served in Children Daily Living	682	6,966.34	4,751,044	
Children Day Services * Number of persons with disabilities served in Children Day Training Services Children Medical/Dental * Number of persons with disabilities served in Children Medical/Dental	7	1,096.57 2,234.17	7,676 180,968	
Children Respite Services * Number of persons with disabilities served in Children Respite Services	1,900	2,234.17	5,522,872	
Children Residential Habilitation * Number of persons with disabilities served in Children Residential Habilitation	565	18,236.88	10,303,836	
Children Specialized Therapies/Assessments * Number of persons with disabilities served in Children Specialized Assessments, Therapies, Equipment and Supplies	34		31,508	
Children Support Employment * Number of persons with disabilities served in Children Supported Employment Children Supported Living * Number of persons with disabilities served in Children Supported Living and In Home Subsidies	45	571.50 19,810.00	1,143 891,450	
Children Supported Living invanible of persons with disabilities served in Children Transportation * Number of persons with disabilities served in Children Transportation	45		239,047	
Community Support Services * Number of persons served	15,604	424.03	6,616,590	
Forensic Care * Number of adults found incompetent to proceed who are provided competency training and custodial care in the Developmental Disabilities Defendant Program	226	124,610.13	28,161,889	
]	
TAL			623,180,516	8,74
SECTION III: RECONCILIATION TO BUDGET				
SS THROUGHS TRANSFER - STATE AGENCIES				
AID TO LOCAL GOVERNMENTS				
PAYMENT OF PENSIONS, BENEFITS AND CLAIMS				
OTHER	-		700 F44 977	
VERSIONS			700,544,366	
TAL BUDGET FOR AGENCY (Total Activities + Pass Throughs + Reversions) - Should equal Section I above. (4)			1,323,724,882	8,74

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 2018 contain revenue or expenditure estimates related to your agency?



 If yes, please list the estimates for revenues and budget drivers that reflect an estimate for your agency for Fiscal Year 2019-2020 and list the amount projected in the long range financial outlook and the amounts projected in your Schedule I or budget request.

			FY 2019-2020 Estim	ate/Request Amount
			Long Range	Legislative Budget
	Issue (Revenue or Budget Driver)	R/B*	Financial Outlook	Request
а	HCBS Waiver Waiting List reduction, administrative resources for Waiver Services growth, Enhanced Employment Program (EEP), and rate increases for Medicaid Waiver providers, HCBS Waiver Growth		\$11.6 Million GR (\$1.4 million nonrecurring)	\$132.3 Million GR (\$55.5 Million Nonrecurring GR)
b				
С				
d				
е				
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.

The Agency's Legislative Budget Request (LBR) is greater than the long range financial outlook because the Developmental Disabilities Waiver (DD Waiver) is not included in the Social Services Estimating Conference and the growth in the outlook only accounted for past appropriations for reducing the waiting list, rate increases, additional administrative resources, and supported employment and internship programs. The Agency's LBR and the Governor's Recommended Budget for FY 2018-19 included issues to address the increased service needs of DD Waiver clients, however, the issues were not included in the 2018 General Appropriations Act. The Agency's LBR for FY 2019-20 addresses the increased service needs of DD Waiver clients.

* R/B = Revenue or Budget Driver



Legislative Budget Request Fiscal Year 2019-20

Home and Community Services 67100100



Legislative Budget Request Fiscal Year 2019-20

Home and Community Services 67100100 Schedule I Series

Budget Period: 2019 -20

	ities	
Administrative Trust Fund		
67100100		
Balance as of 6/30/2018	SWFS* Adjustments	Adjusted Balance
66,254 (A)		66,254
(B)		0
(C)		0
(D)		0
(E)		0
66,254 (F)	0	66,254
(G)		0
0 (H)		0
(H)		0
(H)		0
(I)		0
66,254 (J)		66,254
0 (K)	0	0
	2021 Balance as of 6/30/2018 66,254 (A) 66,254 (A) (B) (C) (C) (C) (D) (C) (D) (C) (E) (C) (E) (C) (D) (C) (D) (C) (D) (C) (D) (C) (D) (C) (G) (G) (H) (H) (H) (H) (I) (I)	2021 Balance as of 6/30/2018 SWFS* Adjustments 66,254 (A) [] (B) [] (C) [] (C) [] (D) [] (D) [] (E) [] (G) [] (G) [] (H) [] (H) [] (H) []

Trust Fund Title: Administrative Trust Fund - BE 67100100 LAS/PBS Fund Number: 2021 BEGINNING TRIAL BALANCE:		Budget Period: 2019-20	
LAS/PBS Fund Number: 2021 BEGINNING TRIAL BALANCE: Total Fund Balance Per FLAIR Trial Balance, 07/01/18 Total all GLC's 5XXXX for governmental funds; GLC 539XX for proprietary and fiduciary funds Subtract Nonspendable Fund Balance (GLC 56XXX) O (F Add/Subtract Statewide Financial Statement (SWFS)Adjustments : SWFS Adjustment # and Description - Expenses - CF O (C SWFS Adjustment # and Description O (C Add/Subtract Other Adjustment(s): Approved "B" Carry Forward (Encumbrances) per LAS/PBS O (T Approved "C" Carry Forward Total (FCO) per LAS/PBS A/P not C/F-Operating Categories	Department Title:		
BEGINNING TRIAL BALANCE: Total Fund Balance Per FLAIR Trial Balance, 07/01/18 Total all GLC's 5XXXX for governmental funds; 66,254 GLC 539XX for proprietary and fiduciary funds 66,254 Subtract Nonspendable Fund Balance (GLC 56XXX) 0 (F Add/Subtract Statewide Financial Statement (SWFS)Adjustments : 0 (C SWFS Adjustment # and Description - Expenses - CF 0 (C SWFS Adjustment # and Description 0 (C Add/Subtract Other Adjustment(s): 0 (C Approved "B" Carry Forward (Encumbrances) per LAS/PBS 0 (C A/P not C/F-Operating Categories 0 (C	Trust Fund Title:	Administrative Trust Fund - BE 67100100	
Total Fund Balance Per FLAIR Trial Balance, 07/01/18 Total all GLC's 5XXXX for governmental funds; 66,254 (4 GLC 539XX for proprietary and fiduciary funds 0 (F Subtract Nonspendable Fund Balance (GLC 56XXX) 0 (F Add/Subtract Statewide Financial Statement (SWFS)Adjustments : 0 (C SWFS Adjustment # and Description - Expenses - CF 0 (C SWFS Adjustment # and Description 0 (C Add/Subtract Other Adjustment(s): 0 (C Approved "B" Carry Forward (Encumbrances) per LAS/PBS 0 (C A/P not C/F-Operating Categories (I	LAS/PBS Fund Number:	2021	
Total all GLC's 5XXXX for governmental funds; 66,254 GLC 539XX for proprietary and fiduciary funds 0 (F Subtract Nonspendable Fund Balance (GLC 56XXX) 0 (F Add/Subtract Statewide Financial Statement (SWFS)Adjustments : 0 (C SWFS Adjustment # and Description - Expenses - CF 0 (C SWFS Adjustment # and Description 0 (C Add/Subtract Other Adjustment(s): 0 (C Approved "B" Carry Forward (Encumbrances) per LAS/PBS 0 (F Approved "C" Carry Forward Total (FCO) per LAS/PBS (F A/P not C/F-Operating Categories (F	BEGINNING TRIAL BA	LANCE:	
GLC 539XX for proprietary and fiduciary funds Subtract Nonspendable Fund Balance (GLC 56XXX) 0 (F Add/Subtract Statewide Financial Statement (SWFS)Adjustments : 0 (C SWFS Adjustment # and Description - Expenses - CF 0 (C SWFS Adjustment # and Description 0 (C Add/Subtract Other Adjustment(s): 0 (C Approved "B" Carry Forward (Encumbrances) per LAS/PBS 0 (I Approved "C" Carry Forward Total (FCO) per LAS/PBS (I A/P not C/F-Operating Categories (I		·	66,254 (A)
Add/Subtract Statewide Financial Statement (SWFS)Adjustments : SWFS Adjustment # and Description - Expenses - CF 0 (C SWFS Adjustment # and Description 0 (C Add/Subtract Other Adjustment(s): 0 (C Approved "B" Carry Forward (Encumbrances) per LAS/PBS 0 (I Approved "C" Carry Forward Total (FCO) per LAS/PBS 0 (I A/P not C/F-Operating Categories (I		0	
SWFS Adjustment # and Description - Expenses - CF 0 (0 SWFS Adjustment # and Description 0 (0 Add/Subtract Other Adjustment(s): 0 (0 Approved "B" Carry Forward (Encumbrances) per LAS/PBS 0 (1 Approved "C" Carry Forward Total (FCO) per LAS/PBS 0 (1 A/P not C/F-Operating Categories 0 (1	Subtract Non	spendable Fund Balance (GLC 56XXX)	0 (B)
SWFS Adjustment # and Description 0 (C Add/Subtract Other Adjustment(s): 0 (C Approved "B" Carry Forward (Encumbrances) per LAS/PBS 0 (C Approved "C" Carry Forward Total (FCO) per LAS/PBS 0 (C A/P not C/F-Operating Categories (C	Add/Subtract	Statewide Financial Statement (SWFS)Adjustments :	:
Add/Subtract Other Adjustment(s): Approved "B" Carry Forward (Encumbrances) per LAS/PBS O (I Approved "C" Carry Forward Total (FCO) per LAS/PBS A/P not C/F-Operating Categories	SWFS Adju	stment # and Description - Expenses - CF	0 (C)
Approved "B" Carry Forward (Encumbrances) per LAS/PBS 0 (I Approved "C" Carry Forward Total (FCO) per LAS/PBS (I A/P not C/F-Operating Categories (I	SWFS Adjus	stment # and Description	0 (C)
Approved "C" Carry Forward Total (FCO) per LAS/PBS (I A/P not C/F-Operating Categories (I	Add/Subtract	Other Adjustment(s):	
A/P not C/F-Operating Categories (I	Approved "I	3" Carry Forward (Encumbrances) per LAS/PBS	0 (D)
	Approved "C	C" Carry Forward Total (FCO) per LAS/PBS	(D)
	A/P not C/F-	Operating Categories	(D)
Transfer to BE 67100300 (66,254) (I	Transfer to I	BE 67100300	(66,254) (D)
		[(D)
		[(D)
ADJUSTED BEGINNING TRIAL BALANCE: (0)	ADJUSTED BEGINNING	G TRIAL BALANCE:	(0) (E)
UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)	UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	0 (F)
DIFFERENCE: (0) (C	DIFFERENCE:	[(0) (G) [*]
*SHOULD EQUAL ZERO.	*SHOULD EOUAL ZER	Э.	

Department Title: Trust Fund Title: Budget Entity: LAS/PBS Fund Number: Budget Period:2019 - 20Agency for Persons with DisabilitiesOperations and Maintenance Trust Fund671001002516

	Balance as of 6/30/2018	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(12,393,661) (A)		(12,393,661)
ADD: Other Cash (See Instructions)	(B)		0
ADD: Investments	(C)		0
ADD: Outstanding Accounts Receivable	0 (D)		0
ADD: Transfer from 67100200	14,039,406 (E)		14,039,406
Total Cash plus Accounts Receivable	1,645,745 (F)	0	1,645,745
LESS Allowances for Uncollectibles	(G)		0
LESS Approved "A" Certified Forwards	1,645,745 (H)		1,645,745
Approved "B" Certified Forwards	(H)		0
Approved "FCO" Certified Forwards	(H)		0
LESS: Other Accounts Payable (Nonoperating)	(I)		0
LESS: Transfer TO 67100200	(J)		0
Unreserved Fund Balance, 07/01/18	0 (K)	0	0 *

*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.

D	Budget Period: 2019 - 20		
Department Title:	Agency for Persons with Disabilities		
Trust Fund Title:	Operations and Maintenance Trust Fund - BE 67100	0100	
LAS/PBS Fund Number:	2516		
BEGINNING TRIAL BAI	LANCE:		
	alance Per FLAIR Trial Balance, 07/01/2018		
	C's 5XXXX for governmental funds;	(14,079,200) (A)	
GLC 539XX	for proprietary and fiduciary funds		
Subtract Non	spendable Fund Balance (GLC 56XXX)	(B)	
Add/Subtract	Statewide Financial Statement (SWFS)Adjustments	:	
SWFS Adjus	stment	(C)	
Transfer from	n BE 67100200	14,039,406 (C)	
Add/Subtract	Other Adjustment(s):		
Approved "E	3" Carry Forward (Encumbrances) per LAS/PBS	(D)	
Approved "C	C" Carry Forward Total (FCO) per LAS/PBS	(D)	
Compensate	d Absences Liability	39,794 (D)	
Adjustment	to AP	(D)	
		(D)	
		(D)	
ADJUSTED BEGINNING	TRIAL BALANCE:	(0) (E)	
UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	0 (F)	
DIFFERENCE:		(0)(G)	
*SHOULD EQUAL ZER().		
-			

Department Title:
Trust Fund Title:
Budget Entity:
LAS/PBS Fund Number:

Budget Period: 2019 - 20 Agency for Persons with Disabilities

Social Services Block Grant 67100100

2639

	Balance as of 6/30/2018	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	7,647,475 (A)		7,647,475
ADD: Other Cash (See Instructions)	(B)		0
ADD: Investments	(C)		0
ADD: Outstanding Accounts Receivable	(D)		0
ADD:	(E)		0
Total Cash plus Accounts Receivable	7,647,475 (F)	0	7,647,475
LESS Allowances for Uncollectibles	(G)		0
LESS Approved "A" Certified Forwards	2,213,011 (H)		2,213,011
Approved "B" Certified Forwards	(H)		0
Approved "FCO" Certified Forwards	400,000 (H)		400,000
LESS: Transfer to BE 67100200	198,959 (E)		198,959
LESS: Transfer to BE 67100300	1,163,156 (E)		1,163,156
LESS: Transfer to BE 67100400	786,230 (E)		786,230
Unreserved Fund Balance, 07/01/18	2,886,118 (K)	0	2,886,118 *

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.

	Budget Period: 2019 - 20		
Department Title:	Agency for Persons with Disabilities		
Trust Fund Title:	Social Services Block Grant - 67100100		
LAS/PBS Fund Number:	2639		
BEGINNING TRIAL BAI	LANCE:		
	alance Per FLAIR Trial Balance, 07/01/18		
	C's 5XXXX for governmental funds;	5,433,384 (A)	
GLC 539XX	for proprietary and fiduciary funds		
Subtract Non	spendable Fund Balance (GLC 56XXX)	(B)	
Add/Subtract	Statewide Financial Statement (SWFS)Adjustments :		
Accrual Not	CF on Trial Balance	(19,506) (C)	
Approved "C	C" Carry Forward Total (FCO) per LAS/PBS	(400,000) (D)	
Transfer to E	BE 67100200	(198,959) (D)	
Transfer to E	BE 67100300	(1,163,156) (D)	
Transfer to H	BE 67100400	(786,231) (D)	
SWFS Adjus	stment # and Description	(C)	
Add/Subtract	Other Adjustment(s):		
Approved "H	B" Carry Forward (Encumbrances) per LAS/PBS	(D)	
Accrual Not	CF on Trial Balance	17,411 (D)	
Current Corr	pensated Absences Liability	3,174 (D)	
ADJUSTED BEGINNING	S TRIAL BALANCE:	2,886,118 (E)	
UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	2,886,118 (F)	
DIFFERENCE:		(0)(G)*	
*SHOULD EQUAL ZER().		



Legislative Budget Request Fiscal Year 2019-20

Program Management and Compliance 67100200



Legislative Budget Request Fiscal Year 2019-20

Program Management and Compliance 67100200 Schedule I Series

Budget Period: 2019 -20

Department Title:	Agency for Persons with Disabili	ties		
Trust Fund Title: Budget Entity:	Administrative Trust Fund			
LAS/PBS Fund Number:	<u>67100200</u> 2021			
	Balance as of 6/30/2018	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	(D)		0	
ADD:	(E)		0	
Total Cash plus Accounts Receivable	158,963 (F)	0	158,963	
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: Other Accounts Payable (Nonoperating)	(I)		0	
LESS: Transfer to BE 67100300	126,251 (J)		126,251	
Unreserved Fund Balance, 07/01/18	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.

	Budget Period: 2019-20	
Department Title:	Agency for Persons with Disabilities	
Trust Fund Title:	Administrative Trust Fund - BE 67100200	
LAS/PBS Fund Number:	2021	
BEGINNING TRIAL BAI	LANCE:	
Total Fund B	alance Per FLAIR Trial Balance, 07/01/18	
Total all GL	C's 5XXXX for governmental funds;	158,963 (A)
GLC 539XX	for proprietary and fiduciary funds	
Subtract Non	spendable Fund Balance (GLC 56XXX)	(B)
Add/Subtract	Statewide Financial Statement (SWFS)Adjustme	nts :
SWFS Adjus	stment # and Description Expenses - CF	(C)
		(C)
Add/Subtract	Other Adjustment(s):	
Approved "E	3" Carry Forward (Encumbrances) per LAS/PBS	(D)
Approved "C	C" Carry Forward Total (FCO) per LAS/PBS	(D)
A/P not C/F-	Operating Categories	(D)
Transfer to E	BE 67100300	(126,251) (D)
		(D)
		(D)
ADJUSTED BEGINNING	G TRIAL BALANCE:	32,712 (E)
UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	32,712 (F)
DIFFERENCE:		0 (G) ³
*SHOULD EQUAL ZER(Э.	

Budget Period: 2019 -20

Department Title:	Agency for Persons with Disabili	ities		
Trust Fund Title:	Administrative Trust Fund			
Budget Entity:	67100200			
LAS/PBS Fund Number:	2261			
	Balance as of 6/30/2018	SWFS* Adjustments	Adjusted Balance	
Chief Financial Officer's (CFO) Cash Balance	39,804 (A)		39,804	
ADD: Other Cash (See Instructions)	(B)		0	
ADD: Investments	(C)		0	
ADD: Outstanding Accounts Receivable	(D)		0	
ADD:	(E)		0	
Total Cash plus Accounts Receivable	39,804 (F)	0	39,804	
LESS Allowances for Uncollectibles	(G)		0	
LESS Approved "A" Certified Forwards	(H)		0	
Approved "B" Certified Forwards	(H)		0	
Approved "FCO" Certified Forwards	(H)		0	
LESS: Other Accounts Payable (Nonoperating)	(I)		0	
LESS:	(J)		0	
Unreserved Fund Balance, 07/01/18	39,804 (K)	0	39,804	

** 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.

	Budget Period: 2019 - 20	
Department Title:	Agency for Persons with Disabilities	
Trust Fund Title:	Federal Grants Trust Fund - BE 67100200	
LAS/PBS Fund Number:	2261	
BEGINNING TRIAL BAI	LANCE:	
Total Fund Ba	alance Per FLAIR Trial Balance, 07/01/18	
	C's 5XXXX for governmental funds;	39,507 (A)
GLC 539XX	for proprietary and fiduciary funds	
Subtract Nons	spendable Fund Balance (GLC 56XXX)	(B)
Add/Subtract	Statewide Financial Statement (SWFS)Adjustments :	
Adjustment t	to Correct GL 31100 PY Payables	297 (C)
SWFS Adjus	tment # and Description	(C)
Add/Subtract	Other Adjustment(s):	
Approved "E	" 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:	39,804 (E)
UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	39,804 (F)
DIFFERENCE:		0 (G) ³
*SHOULD EQUAL ZER().	

Department Title:
Trust Fund Title:
Budget Entity:
LAS/PBS Fund Number:

Budget Period: 2019 - 20Agency for Persons with DisabilitiesOperations and Maintenance Trust Fund671002002516

	Balance as of 6/30/2018	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	20,137,742 (A)		20,137,742
ADD: Other Cash (See Instructions)	(B)		0
ADD: Investments	(C)		0
ADD: Outstanding Accounts Receivable	5,784,608 (D)		5,784,608
ADD:	(E)		0
Total Cash plus Accounts Receivable	25,922,350 (F)	0	25,922,350
LESS Allowances for Uncollectibles	(G)		0
LESS Approved "A" Certified Forwards	842,785 (H)		842,785
Approved "B" Certified Forwards	(H)		0
Approved "FCO" Certified Forwards	(H)		0
LESS: Nonoperating A/P-SWCAP & GR Srv Chg	63,544 (I)		63,544
LESS: Transfer TO 67100100	14,039,406 (J)		14,039,406
Unreserved Fund Balance, 07/01/2018	10,976,616 (K)	0	10,976,616 *

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.

Department Title:	Agency for Persons with Disabilities	
Frust Fund Title:	Operations and Maintenance Trust Fund - BE 6710020	0
LAS/PBS Fund Number:	2516	
BEGINNING TRIAL BA	ALANCE:	
Total Fund	Balance Per FLAIR Trial Balance, 07/01/2018	
	LC's 5XXXX for governmental funds;	25,016,022 (A)
GLC 539X	X for proprietary and fiduciary funds	
Subtract No	nspendable Fund Balance (GLC 56XXX)	(B)
Add/Subtra	ct Statewide Financial Statement (SWFS)Adjustments :	
Transfer to	BE 67100100	14,039,406 (C)
SWFS Adj	ustment # and Description	(C)
Add/Subtra	ct Other Adjustment(s):	
Approved	"B" Carry Forward (Encumbrances) per LAS/PBS	(D)
Approved	"C" Carry Forward Total (FCO) per LAS/PBS	(D)
Compensat	ted Absences Liability	(D)
Adjustmen	t to AP	(D)
		(D)
		(D)
		(D)
ADJUSTED BEGINNIN	G TRIAL BALANCE:	10,976,616 (E)
JNRESERVED FUND I	BALANCE, SCHEDULE IC (Line K)	10,976,616 (F)
DIFFERENCE:		(0) (G)
SHOULD EQUAL ZEF		

Department Title:
Trust Fund Title:
Budget Entity:
LAS/PBS Fund Number:

Budget Period: 2019 -20

Agency for Persons with Disabilities Social Services Block Grant 67100200

2639

	Balance as of 6/30/2018	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(198,959) (A)		(198,959)
ADD: Other Cash (See Instructions)	(B)		0
ADD: Investments	(C)		0
ADD: Outstanding Accounts Receivable	(D)		0
ADD: Transfer from BE 67100100	198,959 (E)		198,959
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	(H)		0
LESS: Other Accounts Payable (Nonoperating)	(I)		0
LESS: [(J)		0
Unreserved Fund Balance, 07/01/18	0 (K)	0	0

*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.

	Budget Period: 2019 - 20		
Department Title:	Agency for Persons with Disabilities		
Trust Fund Title:	Social Services Block Grant - 67100200		
LAS/PBS Fund Number:	2639		
BEGINNING TRIAL BAI	LANCE:		
	alance Per FLAIR Trial Balance, 07/01/18		
Total all GL	C's 5XXXX for governmental funds;	(199,048) (A)	
GLC 539XX	for proprietary and fiduciary funds		
Subtract None	spendable Fund Balance (GLC 56XXX)	(B)	
Add/Subtract	Statewide Financial Statement (SWFS)Adjustments :		
SWFS Adjus	tment # and Description	(C)	
SWFS Adjus	tment # and Description	(C)	
Add/Subtract	Other Adjustment(s):		
Approved "E	" Carry Forward (Encumbrances) per LAS/PBS	(D)	
Approved "C	C" Carry Forward Total (FCO) per LAS/PBS	(D)	
A/P not C/F-	Operating Categories	89 (D)	
Transfer fror	m BE 67100100	198,959 (D)	
		(D)	
		(D)	
ADJUSTED BEGINNING	TRIAL BALANCE:	(0) (E)	
UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	0 (F)	
DIFFERENCE:		(0) (G)*	
*SHOULD EQUAL ZER().		



Legislative Budget Request Fiscal Year 2019-20

Developmental Disabilities Public Facilities 67100300



Legislative Budget Request Fiscal Year 2019-20

Developmental Disabilities Public Facilities 67100300 Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title: Trust Fund Title: Budget Entity: LAS/PBS Fund Number: Budget Period: 2019 -20 Agency for Persons with Disabilities Administrative Trust Fund 67100300

2021

	Balance as of 6/30/2018	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	(D)		0
ADD: Transfer from BE 67100100	66,254 (E)		66,254
ADD: Transfer from BE 67100200	126,251 (E)		126,251
Total Cash plus Accounts Receivable	0 (F)	0	0
LESS Allowances for Uncollectibles	(G)		0
LESS Approved "A" Certified Forwards	(H)		0
Approved "B" Certified Forwards	(H)		0
Approved "FCO" Certified Forwards	0 (H)		0
LESS: Other Accounts Payable (Nonoperating)	(I)		0
LESS: [(J)		0
Unreserved Fund Balance, 07/01/18	0 (K)	0	0 *

** 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 - June 2018

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Department Title: Trust Fund Title: LAS/PBS Fund Number:	Agency for Persons with Disabilities Administrative Trust Fund - BE 67100300					
	Administrative Trust Fund - BE 6/100300					
LAS/PDS Fund Number:						
	S/PBS Fund Number: 2021					
BEGINNING TRIAL BALA	NCE:					
	nce Per FLAIR Trial Balance, 07/01/18					
	5XXXX for governmental funds;	(192,505) (A)				
GLC 539XX to	r proprietary and fiduciary funds					
Subtract Nonspe	endable Fund Balance (GLC 56XXX)	(B)				
Add/Subtract St	atewide Financial Statement (SWFS)Adjustments :					
SWFS Adjustm	ent # and Description	(C)				
SWFS Adjustm	ent # and Description	0 (C)				
Add/Subtract O	ther 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-Op	perating Categories	0 (D)				
Transfer from E	BE 67100100	66,254 (D)				
Transfer from E	BE 67100200	126,251 (D)				
		(D)				
ADJUSTED BEGINNING T	RIAL BALANCE:	(0) (E)				
UNRESERVED FUND BAL	ANCE, SCHEDULE IC (Line K)	0 (F)				
DIFFERENCE:		(0) (G) ²				
*SHOULD EQUAL ZERO.						

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:
Trust Fund Title:
Budget Entity:
LAS/PBS Fund Number:

Budget Period: 2019 - 20 Agency for Persons with Disabilities Operations and Maintenance Trust Fund 67100300

0/100500	
2516	

	Balance as of 6/30/2018	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	5,297,157 (A)		5,297,157
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	5,297,157 (F)	0	5,297,157
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: Other Accounts Payable (Nonoperating)	(I)		0
LESS: Transfer to 67100100	(J)		0
Unreserved Fund Balance, 07/01/18	5,297,157 (K)	0	5,297,157 **

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 - June 2018

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

	Budget Period: 2018 - 19				
Department Title:	Agency for Persons with Disabilities				
Trust Fund Title:	Operations and Maintenance Trust Fund - BE 67100300				
LAS/PBS Fund Number:	Fund Number: 2516				
BEGINNING TRIAL BAI	LANCE:				
	alance Per FLAIR Trial Balance, 07/01/2018				
	C's 5XXXX for governmental funds;	5,297,157 (A)			
GLC 539XX	for proprietary and fiduciary funds				
Subtract Nons	spendable Fund Balance (GLC 56XXX)	(B)			
Add/Subtract	Statewide Financial Statement (SWFS)Adjustments :				
SWFS Adjus	stment	(C)			
SWFS Adjus	stment # and Description	(C)			
Add/Subtract	Other Adjustment(s):				
Approved "E	B" Carry Forward (Encumbrances) per LAS/PBS	(D)			
Approved "C	C" Carry Forward Total (FCO) per LAS/PBS	(D)			
Compensated	d Absences Liability	(D)			
Approved Ca	arry Forward Total (FCO) for FY 07 per LAS/PBS	(D)			
Transfer to E	BE 67100100	(D)			
		(D)			
ADJUSTED BEGINNING	G TRIAL BALANCE:	5,297,157 (E)			
UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	5,297,157 (F)			
DIFFERENCE:		(0) (G)			
*SHOULD EQUAL ZER().				
STOCIE EXCIL ELIC					

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:
Trust Fund Title:
Budget Entity:
LAS/PBS Fund Number:

Budget Period: 2019 -20

Agency for Persons with Disabilities Social Services Block Grant 67100300

2639

	Balance as of 6/30/2018	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(640,208) (A)		(640,208)
ADD: Other Cash (See Instructions)	(B)		0
ADD: Investments	(C)		0
ADD: Outstanding Accounts Receivable	(D)		0
ADD: Transfer from BE 67100100	1,163,156 (E)		1,163,156
Total Cash plus Accounts Receivable	522,948 (F)	0	522,948
LESS Allowances for Uncollectibles	(G)		0
LESS Approved "A" Certified Forwards	(H)		0
Approved "B" Certified Forwards	(H)		0
Approved "FCO" Certified Forwards	522,948 (H)		522,948
LESS: Other Accounts Payable (Nonoperating)	(I)		0
LESS: [(J)		0
Unreserved Fund Balance, 07/01/18	0 (K)	0	0

***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 - June 2018

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

	Budget Period: 2019 - 20			
Department Title:	Agency for Persons with Disabilities			
Trust Fund Title:	Social Services Block Grant - 67100300			
LAS/PBS Fund Number:	2639			
BEGINNING TRIAL BA	LANCE:			
	alance Per FLAIR Trial Balance, 07/01/18			
	C's 5XXXX for governmental funds;	(640,208.00) (A)		
GLC 539XX	C for proprietary and fiduciary funds			
Subtract Non	spendable Fund Balance (GLC 56XXX)	(B)		
Add/Subtract	Statewide Financial Statement (SWFS)Adjustments	:		
SWFS Adjus	stment # and Description	(C)		
SWFS Adjus	stment # and Description	(C)		
Add/Subtract	Other Adjustment(s):			
Approved "E	3" Carry Forward (Encumbrances) per LAS/PBS	(D)		
Approved "C	C" Carry Forward Total (FCO) per LAS/PBS	(522,948.00) (D)		
A/P not C/F-	Operating Categories	(D)		
Transfer from	m BE 67100100	1,163,156.00 (D)		
	I	(D)		
		(D)		
ADJUSTED BEGINNING	G TRIAL BALANCE:	0.00 (E)		
UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	0.00 (F)		
DIFFERENCE:		0.00 (G) [*]		
*SHOULD EQUAL ZER(n en			
SHOULD EQUAL ZER	<i>J</i> .			



Legislative Budget Request Fiscal Year 2019-20

Developmental Disabilities Centers - Civil Program 67100400



Legislative Budget Request Fiscal Year 2019-20

Developmental Disabilities Centers - Civil Program 67100400 Schedule I Series

Department: Program: Fund:		for Persons with Disabil DDPF - PC 130300000		d: 2019-20
Specific Authority: Purpose of Fees Collected:		3, Florida Statutes ices and Care at Develop	omental Disabilities Ins	stitutions
<u>-</u>				
Type of Fee or Program: (Check	ONE Box and ar	nswer questions as indicate	ed.)	
Regulatory services or oversight t	o businesses or p			ach Examination of
Regulatory Fees Form - Part I an Non-regulatory fees authorized to	d II.) cover full cost of	f conducting a specific pro	gram or service. (Comple	ete Sections I. II. and
X III only.)		8 1 1	6	
SECTION I - FEE COLLECT	ION	ACTUAL	ESTIMATED	REQUEST
SECTION I - FEE COLLECTI		FY 2017 - 18	FY 2018 - 19	FY 2019 - 20
Receipts:		11201/ 10	11 2010 17	
Reimbursement of Client Cust	odial Care	46,681,215	50,995,127	51,532,429
AHCA Transfers for Client Car	е	4,456,218	4,255,474	4,839,616
Total Fee Collection to Line (A) - S	Section III	51,137,433	55,250,601	56,372,045
SECTION II - FULL COSTS				
Direct Costs:				
Salaries and Benefits		39,039,052	43,814,870	44,569,493
Other Personal Services		760,572	882,973	886,821
Expenses		3,266,046	3,122,804	3,092,104
Operating Capital Outlay				
Food Products		1,145,074	1,110,220	1,110,220
APD/FCO NEEDS/CEN MGD	FACS	105,172		
Contracted Services		1,048,042	1,176,248	1,176,248
G/A - Contracted Professional	Services	2,571,146	2,711,770	3,209,441
Risk Management Insurance		2,158,113	1,953,228	1,953,228
TR/DMS/HR SVCS/STW Con	tract	377,802	376,135	374,490
Indirect Costs Charged to Trust F	und			
Total Full Costs to Line (B) - Secti	on III	50,471,019	55,148,248	56,372,045
Basis Used:		was used for revenues	and expenditures. This	is consistent with
	Agency's fin	ancial reporting.		
SECTION III - SUMMARY				
TOTAL SECTION I	(A)	51,137,433	55,250,601	56,372,045
TOTAL SECTION II	(B)	50,471,019	55,148,248	56,372,045
TOTAL - Surplus/Deficit	(C)	666,414	102,353	-
EXPLANATION of LINE C:				
EAT LANATION OF LINE C:				

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:
Trust Fund Title:
Budget Entity:
LAS/PBS Fund Number:

Budget Period: 2019 - 20 Agency for Persons with Disabilities Operations & Maintenance Trust Fund 67100400 2516

	Balance as of 6/30/2018	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	11,208,297 (A)		11,208,297
ADD: Other Cash (See Instructions)	(B)		0
ADD: Investments	(C)		0
ADD: Outstanding Accounts Receivable	3,855,281 (D)		3,855,281
ADD: [(E)		0
Total Cash plus Accounts Receivable	15,063,578 (F)	0	15,063,578
LESS Allowances for Uncollectibles	(G)		0
LESS Approved "A" Certified Forwards	2,164,381 (H)		2,164,381
Approved "B" Certified Forwards	39,667 (H)		39,667
Approved "FCO" Certified Forwards	6,740,286 (H)		6,740,286
LESS: Other Accounts Payable (Nonoperating)	(I)		0
LESS: [(J)		0
Unreserved Fund Balance, 07/01/18	6,119,245 (K)	0	6,119,245 **

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 - June 2018

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

	Budget Period: 2018 - 19		
Department Title:	Agency for Persons with Disabilities		
Trust Fund Title:	Operations and Maintenance Trust Fund - BE 67100400		
AS/PBS Fund Number: 2516			
BEGINNING TRIAL BAI	LANCE:		
Total Fund Ba	alance Per FLAIR Trial Balance, 07/01/2018		
Total all GL	C's 5XXXX for governmental funds;	12,898,990 (A)	
GLC 539XX	for proprietary and fiduciary funds		
Subtract Nons	spendable Fund Balance (GLC 56XXX)	(B)	
Add/Subtract	Statewide Financial Statement (SWFS)Adjustment	ts :	
SWFS Adjus	stment # and Description	(C)	
SWFS Adjus	stment # and Description	(C)	
Add/Subtract	Other Adjustment(s):		
Approved "E	3" Carry Forward (Encumbrances) per LAS/PBS	(39,667) (D)	
Approved "C	C" Carry Forward Total (FCO) per LAS/PBS	(6,740,286) (D)	
Compensated	d Absences Liability	(D)	
Adjustment t	to AP	(D)	
		(D)	
		(D)	
ADJUSTED BEGINNING	TRIAL BALANCE:	6,119,245 (E)	
UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	6,119,245 (F)	
DIFFERENCE:		0 (G) [*]	
*SHOULD EQUAL ZER(Э.		
-			

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:
Trust Fund Title:
Budget Entity:
LAS/PBS Fund Number:

Budget Period: 2019 -20

Agency for Persons with Disabilities Social Services Block Grant 67100400

2639

1,791,836 (A)		1,791,836
(B)		
		0
(C)		0
(D)		0
786,230 (E)		786,230
2,578,066 (F)	0	2,578,066
(G)		0
(H)		0
(H)		0
2,578,066 (H)		2,578,066
(I)		0
(J)		0
(J)		0
(J)		0
(0) (K)	0	(0) *:
	(D) 786,230 (E) 2,578,066 (F) (G) (G) (H) 2,578,066 (H) (I) (J) (J) (J) (J)	(D) 786,230 (E) 2,578,066 (F) (G) (G) (H) (H) 2,578,066 (H) (I) (J) (J) (J) (J) (J) (J)

** 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 - June 2018

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

	Budget Period: 2019 - 20			
Department Title:	Agency for Persons with Disabilities			
Trust Fund Title:	Social Services Block Grant - 67100400			
AS/PBS Fund Number: 2639				
BEGINNING TRIAL BAI	LANCE:			
	alance Per FLAIR Trial Balance, 07/01/18			
	C's 5XXXX for governmental funds;	1,791,835 (A)		
GLC 539XX	for proprietary and fiduciary funds			
Subtract Nons	spendable Fund Balance (GLC 56XXX)	(B)		
Add/Subtract	Statewide Financial Statement (SWFS)Adjustments	:		
SWFS Adjus	tment # and Description	(C)		
SWFS Adjustment # and Description				
Add/Subtract	Other Adjustment(s):			
Approved "E	" Carry Forward (Encumbrances) per LAS/PBS	(D)		
Approved "C	" Carry Forward Total (FCO) per LAS/PBS	(2,578,066) (D)		
A/P not C/F-	Operating Categories	(D)		
Transfer fror	n BE 67100100	786,231 (D)		
		(D)		
		(D)		
ADJUSTED BEGINNING	TRIAL BALANCE:	0 (E)		
UNRESERVED FUND BA	ALANCE, SCHEDULE IC (Line K)	0 (F)		
DIFFERENCE:	0 (G)*			
*SHOULD EQUAL ZER().			

SCHEDULE IV-B FOR– APD ICONNECT SYSTEM

For Fiscal Year 2019-20



October 15, 2018

AGENCY FOR PERSONS WITH DISABILITIES

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	 1. 2. 1. 2. 1. 3. 4. 	1. Business Need 2. Business Objectives Baseline Analysis

I. Schedule IV-B Cover Sheet

Schedule IV-B Cover Sheet and Agency Project Approval				
Agency: Agency for Persons with Disabilities	Schedule IV-B Submissio	on Date: October 15, 2018		
Project Name:	Is this project included in	the Agency's LRPP?		
APD iConnect System	XYes	No		
FY 2019-20 LBR Issue Code:	FY 2019-20 LBR Issue T	itle:		
36204C0	iConnect System			
Agency Contact for Schedule IV-B (Name, Ph	one #, and E-mail address):			
Rose Salinas, 850-922-2863, Rose.Salinas@ap	dares.org			
AGENCY	APPROVAL SIGNATUR	ES		
estimated costs and benefits documented in the	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: Barbara	loner	Date: 10/15/18		
Printed Name: Barbara Palmer				
Agency Chief Information Officer (or equivale	nt):	Date: 10 15 18		
Siram Rommy 10/13/18				
Printed Name: Sriram Kommu				
Budget Officer:		Date: 10/15/2018		
Printed Name: David Dobbs				
Planning Officer: 1 M5		Date: 10/15/18		
Printed Name: Lisa Robertson				
Project Sponsor:		Date: 10 / 15 / 18		
Printed Name: Lisa Robertson	Appendix A To			
Schedule IV-B Preparers (Name, Phone #, and				
Business Need:	Lisa Robertson, 850-922-9	9499, Lisa.Robertson@apdares.org		
Cost Benefit Analysis:	Rose Salinas, 850-922-286	53, Rose.Salinas@apdcares.org		
Risk Analysis:	Sriram Kommu, 850-488-0	0623, Sriram.Kommu@apdcares.org		
Technology Planning:	Sriram Kommu, 850-488-0	0623, Sriram.Kommu@apdcares.org		
Project Planning:	Lisa Robertson, 850-922-9	499, Lisa.Robertson@apdares.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 that are similar to the service level agreements currently in use, 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 Technical Solution
- 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 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.

1. Business Need

The Agency for Persons with Disabilities administers the Home and Community Based Services (HCBS) waiver program which is a federally matched program under the Centers for Medicare and Medicaid Services (CMS). The Agency engages thousands of providers to provide services for over 34,000 individuals on the waiver and over 21,000 individuals on the waiting list for the waiver.

There are 6 performance measures and 26 assurances for which the state must demonstrate compliance with the Centers for Medicare and Medicaid Services (CMS) regarding the Home and Community Based Services Waiver program. Each assurance requires data to be collected, tracked, analyzed, and action taken to remediate problems that are found. Failure to comply with these assurances will risk federal matching funding for the Home and Community Based Services (HCBS) Waiver. For FY 2018-19, the total federal match for the HCBS Waiver is \$682 million.

Additionally, In November 2016, the federal government amended H.R. 34, Section 12006, which requires all states that offer personal care and/or home health services through a waiver, to require the use of an electronic visit verification (EVV) system. Beginning January 1, 2020 for personal care services (deadline was extended by the federal government from the original date of January 1, 2020), the Federal medical assistance percentage shall be reduced proportionately for those states who do not fulfill this requirement. In FY 2017-18, the waiver provided \$347 million in such services, which equates to a potential loss of up to \$212 million in federal matching funds (using the FY 2018-19 FMAP rate) if APD does not comply within the required timeframe. EVV will also provide a better and electronic means of verifying when and where a service is being provided and the actual amount of time the provider spends with the consumer, thus, limiting the opportunity for fraudulent charges.

The current line of business applications utilized by APD consists of several disparate and antiquated systems which automate only a small portion of these business and administrative functions and requirements. The systems that are automated often require considerable manual intervention for maintenance, operations, support and integration with other systems. In addition, the majority of the business functions remain manual processes. The current environment is inefficient, labor intensive, and does not meet the program needs.

The strategic direction of APD for 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. To effectively meet these challenges APD considered options for addressing the line of business technology needs and in doing so strategically chose a Commercial Off the Shelf (COTS) solution that is offered as Software as a Service (SaaS).

The APD iConnect system will increase program efficiency, accountability, and oversight. The system will enable the Agency to collect data, analyze trends, evaluate service effectiveness, identify and reduce fraud and abuse, and report on measurable outcomes for the program and the clients that is serves.

2. Business Objectives

The following strategic objectives are sought for the Agency:

- Agency's compliance with the Centers for Medicare and Medicaid Services (CMS) Home and Community Based Services Waiver 6 performance measures and 26 program assurances. APD must demonstrate compliance and each assurance requires data to be collected, tracked, analyzed, and action taken to remediate problems that are found.
- Agency compliance with newly implemented electronic visit verification (EVV) requirements. Beginning January 1, 2020 for personal care services, the Federal medical assistance percentage shall be reduced proportionately for those states who do not fulfill this requirement.
- Agency's ability 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 measurable program standards that are tracked, reported and used to improve the service delivery process.

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.

For Items 1 and 2 below, please see **Appendix C: APD Current Business Processes Assumptions and Constraints** which outlines the Centers for Medicare and Medicaid Services (CMS) Home and Community Based Services Waiver 6 performance measures and 26 program assurances and how the agency is currently capturing and reporting this information. The assumptions and constraints are that the proposed solution include all required information to meet these measures as included in the business requirements agreed to in the vendor contract with Harmony/WellSky.

- 1. Current Business Process(es)
- 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.

1. Proposed Business Process Requirements

As part of the ITN for this project, the agency developed a list of 190 business requirements. Please see **Appendix D: Business Requirements – APD iConnect** for specifics.

2. Business Solution Alternatives

The following alternatives were considered when seeking a solution for the agency's business need:

Alternative	Reasons for Not Selecting Alternative
No Project (Status Quo) - Keep the current systems in place	 Current systems and processes make it difficult to 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 Lack of electronic visit verification (EVV) solution as newly required by federal government
Increase APD staffing Contract for external assistance Place more requirements on providers and WSCs	 Cost prohibitive Requires legislative funding for staff and contracted services High learning curve for new staff Risk of turnover and loss of institutional knowledge Places additional requirements on WSCs and providers

3. Rationale for Selection

- Meets the majority of the Agency requirements without the need for risky and costly custom development
- Lower costs to meet Agency requirements
- Easier collaboration between providers, APD staff, WSCs and clients
- Reduces the amount of manual data entry and resulting errors
- Shortened implementation timeframes resulting in needed functionality being available sooner
- Implementation approach that allows for prioritization of implementation of those modules most critical to the Agency
- Easier administration

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.

The strategic direction of APD for 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. To effectively meet these challenges APD considered options for addressing the line of business technology needs and in doing so strategically chose a Commercial Off the Shelf (COTS) solution that is offered as Software as a Service (SaaS).

APD conducted an ITN process which resulted in a signed contract with Harmony Information Systems, Inc. (now WellSky) on July 1, 2015 for a Commercial Off the Shelf (COTS) solution that is offered as Software as a Service (SaaS). In August 2015, APD on boarded a full-time project manager via a staff augmentation contract.

Program functionality contracted for in the business solution includes:

- Electronic Visit Verification (EVV)
- Client Data and Records Management
- Quality Assurance / Incident Reporting
- Provider Management
- Advanced Reporting
- Consumer / Caregiver Portal
- Web Access / High Availability

D. Functional and Technical Requirements

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

As part of the ITN for this project, the agency developed a list of 119 functional and technical requirements. Please see **Appendix E: Functional and Technical Requirements – APD iConnect** for specifics.

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.

	Success Criteria Table				
#	Description of Criteria	How will the Criteria be measured/assessed?	Who benefits?	Realization Date (MM/YY)	
1	Compliance with CMS federal program to collect and report data on the 6 performance measures and 26 program assurances required for waiver federal matching funds. Compliance ensures state continues to receive federal matching funds for services under the federal waiver program. Federal match for FY 2018-19 is \$682M.	Submittal of Evidentiary Reports that are found to be in compliance.	Both internal agency staff and external customers and providers will benefit from the data collection and reporting capabilities that are currently unavailable.	March 2021	
2	Compliance with CMS federal program to require electronic visit verification (EVV) for home services. In FY 2017-18, the waiver provided \$347 million in such services, which equates to a potential loss of up to \$212 million in federal matching funds (using the FY 2018-19 FMAP rate) if APD does not comply within the required timeframe.	Claims for in-home services will be verified and billed using electronic visit verification (EVV) technology.	Clients and Agency	October 2019	

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.

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

	BENEFITS REALIZATION TABLE				
#	Description of Benefit	Who receives the benefit?	How is benefit realized?	How is the realization of the benefit measured?	Realization Date (MM/YY)
1	Compliance with CMS federal program which is required for waiver federal matching funds.	Client Agency	State continues to receive federal matching funds for services under the federal waiver program. Federal match for FY 2018-19 is \$682M.	Submittal of Evidentiary Reports that are found to be in compliance.	March 2021
2	Compliance with CMS federal program to require electronic visit verification (EVV) for home services which is required for waiver federal matching funds. Fraud reduction and service delivery verification.	Client Agency	State continues to receive federal matching funds for services under the federal waiver program. Statewide expenditures over the past five fiscal years show an average of 17,384 clients and \$281.4 million in expenditures for in-home services. An estimated 2% reduction from elimination of fraud and billing abuses is \$5.6 million a year.	Claims for in-home services will be verified and billed using electronic visit verification (EVV) technology. Comparisons over time between provider claims billing and client service delivery will be analyzed for decline in billing discrepancies.	October 2019
3	More efficient transactions for client service needs.	Client	Faster Decisions regarding service needs.	Reduced time needed to respond to client requests	October 2019
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.	Client Agency	Number of clients served.	Number of clients served; accuracy and timely response to client progress and needs.	October 2019

	BENEFITS REALIZATION TABLE				
5	Provider access to service authorizations promptly.	Client Provider Region staff	Reduction of time lapse from date of service approval to service delivery.	Shorter response times from date of service approval to date of service delivery in APD iConnect as compared to current process.	January 2020
6	Ability to track client incidents and follow up needed to address the issue.	Client	Better analysis and trending of incident reports so that necessary corrective action can be implemented timely.	Reduction in type of incidents through more timely response and better tracking of corrective actions.	January 2020
7	Review of Service outcomes through utilization review to ensure client services are meeting the need and to ensure cost containment is maximized	Client	More accurate and timely review of services delivered, client progress made, adjustment of authorized services.	Number of services that are reduced over time as client progress is made.	January 2020
8	Secure maintenance of client central record	Client Agency	Confidential information is stored securely in electronic format.	Number of records stored electronically versus paper.	January 2020
9	Improve accuracy of monitoring of licensed residential facilities and corrective action needed	Client	More timely and accurate access to Licensed facility monitoring data so that if can be analyzed and trended to strengthen quality assurance system	Number of licenses resulting in administrative action (as a result of quicker response time to corrective actions.)	January 2020
10	Improved tracking and monitoring of client behavioral and medical interventions to ensure client health and safety is protected	Client	More timely and accurate reporting of medication errors and use of reactive strategies for behavior issues can be tracked, trended and remediated	Reduction in the number of medication errors and reactive strategies used through more timely response and better tracking.	January 2020

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.

As a strategic part of the funding process, an enhanced funding plan was submitted to CMS by the agency via the Florida Agency for Health Care Administration. The Planning and Implementation Advance Planning Document (IAPD) for Florida Medicaid and subsequent updates (UIAPDs) have been approved by CMS and have provided enhanced funding rates as follows for the APD iConnect system:

Description	Enhanced Funding Rate
Deliverables and Contracted Staff Required for	90%
Implementation	
Help Desk	75%
Training	50%
SaaS Licensing Fees	75%

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.

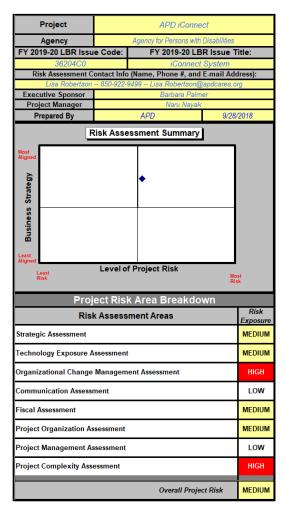
Cost Benefit Analysis			
Form	Description of Data Captured		
CBA Form 1 - Net Tangible Benefits	The required CBA forms are included as part of Appendix A. Statewide expenditures over the past five fiscal years show an average of 17,384 clients and \$281.4 million in expenditures for in-home services. National averages for fraud and billing abuses are as high as 10%. The tangible benefits from the use of electronic visit verification (EVV) for in-home services using a conservative 2% reduction from elimination of fraud and billing abuses of \$5.6 million a year.		
	As a result, beginning in FY 2020-21, the net tangible benefit for the project is \$2,893,027.		
	Please see Appendix A: APD iConnect Cost Benefit Analysis for specifics.		
CBA Form 2 - Project Cost Analysis	The required CBA forms are included as Appendix A. Cumulative project costs to date including projected costs for FY 2018-19 are \$4.1 million. Remaining one-time project costs are \$1.4 million. As stated at the beginning of this section, enhanced funding of 90% for project implementation costs has been approved by CMS. Please see Appendix A: APD iConnect Cost Benefit Analysis for specifics.		
CBA Form 3 - Project Investment Summary	The required CBA forms are included as Appendix A. The resulting information indicates the payback period for the project is 2 6/7 years and the five (5) year internal rate of return (IRR) is 39.84%. Please see Appendix A: APD iConnect Cost Benefit Analysis for specifics.		

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.

Please see attached **Appendix B** – **Project Risk Assessment Tool** for the completed Risk Assessment Tool workbook. The table below provides a summary of the required risk assessment conducted for APD iConnect:



The completion of the Risk Assessment Tool (Appendix B) determined the overall project risk to be "Medium" with the areas of concern being found in the following areas:

- Organizational Change Management
- Project Complexity.

In 2015, a full-time Project Manager was contracted for the APD iConnect project. The project manager is responsible for providing guidance so that risks encountered are addressed and resolved to prevent escalation.

Following the PMBOK model of Project Management, the agency has identified and mitigated risks throughout the project life cycle. As the project moves closer to implementation, the following items have been identified as the top project risks. Also shown is the plan to mitigate these risks to avoid escalation to the project executive steering committee chaired by the Agency Director:

Risk	Mitigation Strategy
The APD Connect project need has drawn APD resources away from their normal duties and this could adversely affect the agency operations.	 The agency has taken the following steps to mitigate this risk: Identified and assigned backups for key lead roles. Provided careful time management of key roles to make sure they are appropriately utilized Assigned a full time Organizational Change Manager to assist in identifying and mitigating staffing conflicts before they arise.
Barriers to collaboration on integrations with external entities (e.g., FMMIS, Providers). Required integrations with external entities may not be completed on time delaying go-live or full use of the system.	 The agency has taken the following steps to mitigate this risk: Proactively engaged integration related state agencies (AHCA, DFS). Consistently tracked related state agencies' progress of their integration activities. Initiated and maintained progressive communication with the related Provider community (solo and agencies).

VI. Schedule IV-B Technology Planning

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

A. Current Information Technology Environment

1. Current System

The agency does not have a single solution system from which necessary information is gathered and reported. The following table lists the current systems and provides information for items a-c below:

- a. Description of Current System
- b. Current System Resource Requirements
- c. Current System Performance

		b.	Current System	
Name of Current			Resource	c. Current System
System	a. Description of Current System		Requirements	Performance
ABC (Allocation	The Allocation, Budget and Contract	•	Load Balanced Web /	
Budget and Contract	Control (ABC) system is an automated		Application Server	Total Number of Current
Control System)	and integrated client/budget	•	MS ASP.NET	Users: 1,270
	information system designed to		Framework 3.5	
	support planning and service provision	•	AMT Framework	Max Number of Concurrent
	to individuals with developmental	•	Failover SQL Server	User Sessions Supported: 250
	disabilities who are clients of the		Cluster	
	Agency Persons with Disabilities.	•	SQL Server 2008	
	Invoices for State funded services and		Databases	

		b.	Current System	
Name of Current System	Description of Comment Sectors		Resource Requirements	c. Current System Performance
System	a. Description of Current System Cost plans for Medicaid Waiver funded services are entered into the system and expenditure information can be tracked and identified for individual consumers. The system also includes the consumer and vendor/provider demographic information.	•	Reporting Server SQL Server Reporting Services Windows Server 2008	r ei tor mance
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 2008 Databases Reporting Server SQL Server Reporting Services Windows Server 2008	Total Number of Current Users: 1,623 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 2008 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 2008 Databases Windows Server 2003	Total Number of Current Users: 1,418 Max Number of Concurrent User Sessions Supported: 150

2. Information Technology Standards

The table below outlines the agency's Information Technology standards:

Component	Standard
Primary Platform	Client/Server web applications
Software Environment	Microsoft ASP.Net (most current release)
Language	Microsoft C#
Database	SQL Server
Data Access Standard	Microsoft Entity Framework
Source Control	Microsoft Team Foundation Server

The table below outlines specifics for related applications:

Application Name	Platform Software	Environment	Language	Data Store
Allocation Budget and Contract Control System (ABC)	Web Application	.NET Framework 3.5, and AMT Framework	C#	SQL Server 2008
iBudget	Web Application	CRM 4.0, .NET Framework 3.5	C#	SQL Server 2008
Supported Employment Tracking System (SETS)	Web Application	.NET Framework 1.1	C#	SQL Server 2008
Questionnaire for Situational Information (QSI)	Web Application	.NET Framework 2.0	C#	SQL Server 2008

B. Current Hardware and/or Software Inventory

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

Since the APD iConnect system is a commercial-off-the-shelf (COTS) software as a service (SaaS) solution, no additional hardware or software will be needed by the agency. While some components of existing systems will be included in APD iConnect, CMS requirements governing retention of records and access to information will require continued support of existing systems for a timeframe to be determined after the APD iConnect system implementation.

C. Proposed Technical Solution

1. Technical Solution Alternatives

The following alternative options were considered to address the Agency challenges identified in the business case for this project. The reasons for not selecting these alternatives are also explained below.

Alternative	Reasons for Not Selecting Alternative
No Project (Status Quo) - 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
Provide Services In-House	 Cost prohibitive Long implementation lifecycle Lack of resources Lack of expertise Custom development projects are very high risk

2. Rationale for Selection

- Meets the majority of the Agency requirements without the need for risky and costly custom development
- Lower costs to meet Agency requirements
- Fixed price deliverable contract
- Shortened implementation timeframes resulting in needed functionality being available sooner
- Implementation approach that allows for prioritization of implementation of those modules most critical to the Agency
- Easier administration
- Automatic updates and patch management
- Compatibility: All users will have the same version of software.
- Easier collaboration between providers, APD staff, WSCs and clients
- Accessibility (can be accessed from an internet connect web browser without VPN access)
- HIPAA and HITECH compliant

3. Recommended Technical Solution

The strategic direction of APD for 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. To effectively meet these challenges APD strategically chose a Commercial Off the Shelf (COTS) solution that is offered as Software as a Service (SaaS).

APD conducted an ITN process which resulted in a signed contract with Harmony Information Systems, Inc. (now WellSky) on July 1, 2015 for a Commercial Off the Shelf (COTS) solution that is offered as Software as a Service (SaaS). In August 2015, APD on boarded a full-time project manager via a staff augmentation contract.

Since the contract execution, the Initiation and Planning phase of the project has been completed and the project is currently in the Project Execution phase. Solution Mapping sessions have been conducted and business analysis (BA) documents and configuration workbooks for each major program function have been completed. Train the Trainer sessions have been conducted, and agency staff and Waiver Support Coordinators (WSCs) involved with the first Go Live have been trained. The agency and the vendor are also working cooperatively on all phases of testing in preparation for the first Go Live scheduled for October 2018. *NOTE: Due to the severe impact of Hurricane Michael on the State of Florida on October 10, 2018, and the immediate need for Waiver Support Coordinators (WSCs) and APD staff involved in the iConnect rollout to divert resources to ensure the health and safety of our clients in affected areas, the Go Live date will most likely be pushed into November 2018. Please see Appendix F: APD iConnect Project Schedule for specifics.*

D. Proposed Solution Description

1. Summary Description of Proposed System

APD conducted an ITN process which resulted in a signed contract with Harmony Information Systems, Inc. (now WellSky) on July 1, 2015 for a Commercial Off the Shelf (COTS) solution that is offered as Software as a Service (SaaS).

Program functionality contracted for in the business solution includes:

- Electronic Visit Verification (EVV)
- Client Data and Records Management
- Quality Assurance / Incident Reporting
- Provider Management
- Advanced Reporting

.

- Consumer / Caregiver Portal
- Web Access / High Availability

2. Resource and Summary Level Funding Requirements for Proposed Solution (if known)

The strategic direction of the Agency was to select a vendor that utilizes a COTS software solution and is hosted in a Software as a Service (SaaS) model. The hardware, software and parts of the operations and maintenance of the solution are 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.) has been funded as part of the APD iConnect LBR issue request. Staff augmentation needs after project closeout have also been identified and included as part of continued operational support.

The following chart outlines the vendor's systems requirements for users of the APD iConnect system:

Harmony Certified System Requirements									
Operating System: Browser:	Windows 7 / Windows 8.1 / Windows 10 Certified: Internet Explorer 9, Internet Explorer 10, and Internet Explorer 11 Note: If using Harmony versions 8.1.1 or later, Internet Explorer Compatibility View settings should be disabled. For versions prior to 8.1.1, Internet Explorer Compatibility View is required.								
Processor:	2.0 GHZ processor or better								
RAM:	4 GB (minimum) 8 GB (recommended)								
Screen Resolution	Minimum: 1024x768 (1280x1024 is ideal)								
Internet Access:*	40-45 Kbps (kilobytes per second recommended for each concurrent user)								
Maximum Latency	100ms or less								
Microsoft									
	Certified Microsoft Office 2007, 2010, and 2013, InfoPath 2010								

The vendor is providing and configuring the software to the Agency's specifications. Agency staff are working closely with the vendor to ensure the software is configured to meet the needs of the Agency and its clients. In addition, the Agency will provide helpdesk, training and system security administration for the users of the new system. The Agency is using contracted staff augmentation to address this additional workload.

Once implemented, the Agency will pay an on-going maintenance of the system on a software-as-a-service basis. The annual ongoing fee will be \$1,750,000. CMS will provide a seventy-five percent match on the annual fee. The estimated annual ongoing cost of maintaining technology support, an outsourced Tier 1 helpdesk, training and administration will be \$985,796. CMS will provide a fifty percent match on these annual costs.

E. Capacity Planning

(historical and current trends versus projected requirements)

- 1. The estimated capacity for the APD iConnect system is based on the number of state staff, providers, and clients who may access the new system and the associated record storage needs for data to be captured, much of which is currently retained in paper form. This information was incorporated into the functional and technical requirements provided in the ITN and subsequent vendor contract.
- 2. Since APD iConnect is a commercial off the shelf SaaS platform, the assumption is that the vendor will can provide sufficient capacity both now and, in the future, to meet agency needs. To ensure this, the following provisions were agreed to in the agency contract with the vendor:
 - The system must provide sufficient capacity to accommodate all existing legacy data that supports the iBudget and related components of the ABC system as of the deployment date as well as the following anticipating future workload and the associated office workers.
 - Specifically:
 - a) The system must provide the capacity to store 75,000 records including all associated records plus a 200% reserve.
 - b) The system must have sufficient capacity to retain all data available from any of the data import sources and data exports, including all the data received or sent at the frequencies (daily, weekly, monthly) of the interface transactions, listed in the external interface table plus a 200% reserve.
 - The system must allow for 20% annual growth for five years.
- 3. The APD iConnect system will enable the Agency to maintain compliance with the Centers for Medicare and Medicaid Services (CMS) regarding the Home and Community Based Services Waiver program assurances. There are 6 performance measures and 26 program assurances for which the state must demonstrate compliance and each assurance requires data to be collected, tracked, analyzed, and action taken to remediate problems that are found. Failure to comply with these assurances will risk federal matching funding for the Home and Community Based Services (HCBS) Waiver.

Additionally, In November 2016, the federal government amended H.R. 34, Section 12006, which requires all states that offer personal care and/or home health services through a waiver, to require the use of an electronic visit verification (EVV) system. Beginning January 1, 2020 for personal care services, the Federal medical assistance percentage shall be reduced proportionately for those states who do not fulfill this requirement. In FY 2017-18, the waiver provided \$347 million in such services, which equates to a potential loss of up to \$212 million in federal matching funds (using the FY 2017-18 FMAP rate) if APD does not comply within the required timeframe. EVV will also provide a better and electronic means of verifying when and where a service is being provided and the actual amount of time the provider spends with the consumer, thus, limiting the opportunity for fraudulent charges.

- 4. Please see Section VI C.1 and Section VI-C.3 for options and alternatives considered.
- 5. The recommendation for this effort is to continue the implementation of the APD iConnect system. Without this system, the Agency will not be able to continue to manually meet CMS reporting assurances and will not be able to meet the electronic visit verification requirement by the January 2020 deadline, both

of which could jeopardize federal match funding.

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.

Since the contract execution, the Initiation and Planning phase of the project has been completed and the project is currently in the Project Execution phase. Solution Mapping sessions have been conducted and the agency is currently working with the vendor on finalizing the business analysis (BA) documents and completing configuration workbooks for each major program function. **Please see Appendix F: APD iConnect WBS and Project Schedule** for project management plan specifics.

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

Appendix A: APD iConnect Cost Benefit Analysis Appendix B: APD iConnect Project Risk Assessment Appendix C: APD Current Business Processes Assumptions and Constraints Appendix D: Business Requirements – APD iConnect Appendix E: Functional and Technical Requirements – APD iConnect Appendix F: APD iConnect WBS and Project Schedule

State of Florida

CBAForm 1 - Net Tangible Benefits

Cost Benefit Analysis

APPENDIX A

APD iConnect

Project

Agency Agency for Persons With Disabilities

Net Tangible Benefits - Operational Cost Changes (Co	et 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 2019-20			FY 2020-21		FY 2021-22				FY 2022-23		FY 2023-24			
(Recurring Costs 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)	
			New Program			New Program			New Program			New Program			New Program	
	Existing		Costs resulting	Existing		Costs resulting	Existing		Costs resulting	Existing	Cost Change	Costs resulting	Existing		Costs resulting	
	Program	Operational	from Proposed	Program	Operational	from Proposed	Program	Operational	from Proposed	Program	Operational	from Proposed	Program	Operational	from Proposed	
	Costs	Cost Change	Project	Costs	Cost Change	Project	Costs	Cost Change	Project	Costs	Cost Change	Project	Costs	Cost Change	Project	
A. Personnel Costs Agency-Managed Staff	\$0	\$0	\$0	\$0	\$550,000	\$550,000	\$0	\$550,000	\$550,000	\$0	\$550,000	\$550,000	\$0	\$550,000	\$550,000	
A.b Total Staff	0.00	0.00	0.00	0.00	8.00	8.00	0.00	8.00	8.00	0.00	8.00	8.00	0.00	8.00	8.00	
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 (#)	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 Staff (Salaries)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
A-2.b. OPS (#)	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	\$0	\$0	\$0	\$550,000	\$550,000	\$0	\$550,000	\$550,000	\$0	\$550,000	\$550,000	\$0	\$550,000	\$550,000	
A-3.b. Staff Augmentation (# of Contractors)	0.00	0.00	0.00	0.00	8.00	8.00	0.00	8.00	8.00	0.00	8.00	8.00	0.00	8.00	8.00	
B. Application Maintenance Costs	\$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	\$0	\$1,750,000	\$1,750,000	
B-1. Managed Services (Staffing)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
B-2. Hardware	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
B-3. Software	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
B-4. Other Harmony/Mediware SaaS Software	\$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	\$0	\$1,750,000	\$1,750,000	
C. Data Center Provider Costs	\$0	\$0	\$0	\$0	\$0	֥	\$0	\$0	\$0	\$0	\$0	\$0	\$0	+-	\$0	
C-1. Managed Services (Staffing)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
C-2. Infrastructure	\$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. Disaster Recovery	\$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	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
E. Other Costs	\$0	\$403,892	\$403,892	\$0	\$435,796	\$435,796	\$0	\$435,796	\$435,796	\$0	\$435,796	\$435,796	\$0	+	\$435,796	
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/Ongoing Staff Expenses	\$0	\$0	\$0	\$0	\$31,904	\$31,904	\$0	\$31,904	\$31,904	\$0	\$31,904	\$31,904	\$0	\$31,904	\$31,904	
E-4. Other Outsourced Tier 1 Help Desk Services	\$0	\$403,892	\$403,892	\$0	\$403,892	\$403,892	\$0	\$403,892	\$403,892	\$0	\$403,892	\$403,892	\$0	\$403,892	\$403,892	
Total of Recurring Operational Costs	\$0	\$2,153,892	\$2,153,892	\$0	\$2,735,796	\$2,735,796	\$0	\$2,735,796	\$2,735,796	\$0	\$2,735,796	\$2,735,796	\$0	\$2,735,796	\$2,735,796	
F. Additional Tangible Benefits:		\$1,857,511			\$5,628,823			\$5,628,823			\$5,628,823			\$5,628,823		
F. Additional Tangible Benefits. F-1. EVV		\$1,857,511			\$5,628,823 \$5,628,823			\$5,628,823 \$5,628,823			\$5,628,823			\$5,628,823 \$5,628,823		
F-2. Specify		\$1,007,011 \$0			\$3,020,023 \$0			\$3,020,023			\$3,020,023			\$3,020,023		
F-3. Specify		\$0 \$0			<u>\$0</u> \$0			<u>\$0</u> \$0			<u>\$0</u> \$0			<u>۵</u> ۵		
Total Net Tangible Benefits:		\$U (\$296.381)			\$2,893,027			\$2,893.027			\$2,893,027			\$2.893.027		
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Placeholder		Confidence Level							

APPENDIX A

| Cost Benefit Analysis | | -

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 | here applicable. | | FY2019-2 | 0
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| clude only one-time project costs in this table. I | Include any recurring costs in CBA I | Form 1A.

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| Item Description | | Appropriation

 | Years Project- | | | YR 1 Base
 | | | YR 2 Base
 | | | YR 3 Base
 |
 | | YR 4 Base | | | YR 5 Base | |
| (remove guidelines and annotate entries here) | Project Cost Element | Category

 | Related Cost | YR 1 # | YR 1 LBR | Budget
 | YR 2 # | YR 2 LBR | Budget
 | YR 3 # Y | 'R 3 LBR | Budget
 | YR
4 # | YR 4 LBR | Budget | YR 5 # | YR 5 LBR | Budget | TOTAL |
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State of Florida

Cost Benefit Analysis

CBAForm 2 - Project Cost Analysis

 Agency
 Agency for Persons
 Project
 APD iConnect

PROJECT COST SUMMARY	FY	FY	FY	FY	FY	TOTAL
PROJECT COST SOMMARY	2019-20	2020-21	2021-22	2022-23	2023-24	
TOTAL PROJECT COSTS (*)	\$1,395,051	\$0	\$0	\$0	\$0	\$5,543,906
CUMULATIVE PROJECT COSTS						
(includes Current & Previous Years' Project-Related Costs)	\$5,543,906	\$5,543,906	\$5,543,906	\$5,543,906	\$5,543,906	
Total Costs are carried forward to CBAForm3 Proje	ct Investment Sur	nmary worksheet				

	PROJECT FUNDING SOURCES - CBAForm 2B					
PROJECT FUNDING SOURCES	FY	FY	FY	FY	FY	TOTAL
	2019-20	2020-21	2021-22	2022-23	2023-24	
General Revenue	\$886,946	\$930,398	\$683,949	\$683,949	\$683,949	\$3,869,191
Trust Fund	\$0	\$0	\$0	\$0	\$0	\$0
Federal Match 🗸	\$2,661,997	\$1,805,398	\$1,805,398	\$1,805,398	\$1,805,398	\$9,883,589
Grants	\$0	\$0	\$0	\$0	\$0	\$0
Other Specify	\$0	\$0	\$0	\$0	\$0	\$0
TOTAL INVESTMENT	\$3,548,943	\$2,735,796	\$2,489,347	\$2,489,347	\$2,489,347	\$13,752,780
CUMULATIVE INVESTMENT	\$3,548,943	\$6,284,739	\$8,774,086	\$11,263,433	\$13,752,780	

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

Cost Benefit Analysis

CBAForm 3 - Project Investment Summary

Agency for Persons

Project APD iConnect

	COST BENEFIT ANALYSIS CBAForm 3A					
	FY 2019-20	FY 2020-21	FY 2021-22	FY 2022-23	FY 2023-24	TOTAL FOR ALL YEARS
Project Cost	\$1,395,051	\$0	\$0	\$0	\$0	\$5,543,906
Net Tangible Benefits	(\$296,381)	\$2,893,027	\$2,893,027	\$2,893,027	\$2,893,027	\$11,275,727
Return on Investment	(\$5,840,287)	\$2,893,027	\$2,893,027	\$2,893,027	\$2,893,027	\$5,731,821
Year to Year Change in Program Staffing	0	8	8	8	8	

Agency

RETURN ON INVESTMENT ANALYSIS CBAForm 3B				
Payback Period (years)	3	Payback Period is the time required to recover the investment costs of the project.		
Breakeven Fiscal Year	2022-23	Fiscal Year during which the project's investment costs are recovered.		
Net Present Value (NPV)	\$4,407,221	NPV is the present-day value of the project's benefits less costs over the project's lifecycle.		
Internal Rate of Return (IRR)	34.32%	IRR is the project's rate of return.		

Investment Interest Earning Yield CBAForm 3C							
Fiscal	FY	FY	FY	FY	FY		
Year	2019-20	2020-21	2021-22	2022-23	2023-24		
Cost of Capital	1.94%	2.07%	3.18%	4.32%	4.85%		

Page 72 of 182 https://apdfl-my.sharepoint.com/personal/rose_salinas_apdcares_org/Documents/CDMS/Schedule IV-B/19-20 Schedule IV-B/For Review/Cost Benefit Analysis 19-20.xlsx CBAFformeal110/#58/2011S01038PM

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6	FY 20)19-20 LBR Issu	e Code:	F۱	′ 2019-20 Ll	BR Issue Ti	tle:
7		36204C0				t System	
8 9	R	isk Assessment					
10	Lisa Robertson 850-922-9499 Lisa.Robertson@apdcares.org Executive Sponsor Barbara Palmer						
11	Project Manager Naru Nayak						
12	Р	repared By		APD		9/28/	2018
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17 18	Most Aligned						
19	>						
20	Business Strategy			•			
21 22	òtra						
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20	Least Aligned						
30 31		east isk	Level o	f Project F	Risk	Mo	st
32	K	ISK				Ris	k
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35		Ris	k Assess	sment Are	as		Risk Exposure
36 37	Strategi	ic Assessment					MEDIUM
38	Techno	logy Exposure A	ssessment				MEDIUM
39 40					ont		
41 42	-	ational Change N	-				HIGH
43	Commu	inication Assessi	nent				LOW
44 45	Fiscal A	ssessment					MEDIUM
46 47	Project Organization Assessment MEDIUM						
48 49	Project Management Assessment LOW						
50 51	Project	Complexity Asse	essment				HIGH
52							

1 Agency: Agency for Persons with Disabilities 3 Section 1 Strategic Area 4 # Criteria Values 5 1.01 Are project objectives clearly aligned with the agency's legal mission? 0% to 40% Few or no objectives aligned 6 agency's legal mission? 41% to 80% Some objectives aligned 7 Are project objectives clearly documented and understood by all stakeholder groups? Not ocumented or agreed to by stakeholders 10 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 11 1.03 Are the project business processes? Vision is not documented 14 1.04 Has the agency documented its vision for how success of the project? Vision is partially documented 15 Inspreye its business processes? Vision is completely documented 17 1.05 Have all project business/program area requirements, assumptions, constraints, and priorities been defined and documented? O% to 40% Few or none defined and documented 19 Information agrees are identified in concept only Changes are identified in concept only 23 Are all needed changes in law, rule, or policy identified and documented?	E
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29 the proposed system or project? Moderate external use or visibility	
	Evtopoluo external uso er
30 Extensive external use or visibility	Extensive external use or visibility
	visionity
311.09What is the internal (e.g. state agency)Multiple agency or state enterprise visibility	Multiple grangy or state
32 visibility of the proposed system or project? Single agency-wide use or visibility	Multiple agency or state enterprise visibility
33 Use or visibility at division and/or bureau level only	Criterprise visibility
341.10Is this a multi-year project?Greater than 5 years	
35 Between 3 and 5 years	Debugen 2 and 5 a
36 Between 1 and 3 years	Between 3 and 5 years
37 1 year or less	

	В	С	D	E
1	Agency	: Agency for Persons with Disabilities		Project: APD iConnect
3			Section 2 Technology Area	
4	#	Criteria	Values	Answer
5	2.01	Does the agency have experience working with, operating, and supporting the proposed	Read about only or attended conference and/or vendor presentation	
6		technical solution in a production environment?	Supported prototype or production system less than 6 months	Read about only or attended conference
7			Supported production system 6 months to 12 months	and/or vendor
8			Supported production system 1 year to 3 years	presentation
9			Installed and supported production system more than 3 years	
10	2.02	Does the agency's internal staff have sufficient knowledge of the proposed technical	· · ·	External technical
11		solution to implement and operate the new system?	External technical resources will be needed through implementation only	resources will be needed for implementation and
12			Internal resources have sufficient knowledge for implementation and operations	operations
13	2.03	Have all relevant technical alternatives/	No technology alternatives researched	All or nearly all
14		solution options been researched, documented and considered?	Some alternatives documented and considered	alternatives documented
15			All or nearly all alternatives documented and considered	and considered
16	2.04	Does the proposed technical solution comply with all relevant agency, statewide, or industry	No relevant standards have been identified or incorporated into proposed technology	Proposed technology
17		technology standards?	Some relevant standards have been incorporated into the proposed technology	solution is fully compliant with all relevant agency, statewide, or industry
18			Proposed technology solution is fully compliant with all relevant agency, statewide, or industry standards	standards
19	2.05	Does the proposed technical solution require	Minor or no infrastructure change required	
20		significant change to the agency's existing	Moderate infrastructure change required	Minor or no infrastructure
21		technology infrastructure?	Extensive infrastructure change required	change required
22			Complete infrastructure replacement	
23	2.06	Are detailed hardware and software capacity	Capacity requirements are not understood or defined	Capacity requirements
24		requirements defined and documented?	Capacity requirements are defined only at a conceptual level	are based on historical data and new system
25			Capacity requirements are based on historical data and new system design specifications and performance requirements	design specifications and performance requirements

	В	С	D	E
1	Agency	: Agency for Persons with Disabilities		Project: APD iConnect
3		Section 3	Organizational Change Management Area	
4	#	Criteria	Values	Answer
		What is the expected level of organizational	Extensive changes to organization structure, staff or	
5			business processes	Extensive changes to
6		if the project is successfully implemented?	Moderate changes to organization structure, staff or business processes	organization structure, staff or business
			Minimal changes to organization structure, staff or business	processes
7			processes structure	, , , , , , , , , , , , , , , , , , ,
8		Will this project impact essential business	Yes	Yes
9		processes?	No	162
		Have all business process changes and	0% to 40% Few or no process changes defined and	
10		process interactions been defined and	documented	81% to 100% All or
11		documented?	41% to 80% Some process changes defined and documented	nearly all processes
			81% to 100% All or nearly all processes defiined and	defiined and documented
12			documented	
13		Has an Organizational Change Management	Yes	Yes
14		Plan been approved for this project?	No	103
15		Will the agency's anticipated FTE count	Over 10% FTE count change	Less than 1% FTE count
16		change as a result of implementing the	1% to 10% FTE count change	change
17		project?	Less than 1% FTE count change	5
18		Will the number of contractors change as a	Over 10% contractor count change	Over 10% contractor
19		result of implementing the project?	1 to 10% contractor count change	count change
20			Less than 1% contractor count change	5
		What is the expected level of change impact	Extensive change or new way of providing/receiving services	Extensive change or new
21		on the citizens of the State of Florida if the project is successfully implemented?	or information)	way of providing/receiving
22		project is successibily implemented?	Moderate changes	services or information)
23	2.00	What is the synapted shange impact on other	Minor or no changes	
24		What is the expected change impact on other state or local government agencies as a result	Extensive change or new way of providing/receiving services or information	
24 25		of implementing the project?	Moderate changes	Minor or no changes
26		- Frank Straft Strate	Minor or no changes	
20	3.09	Has the agency successfully completed a	No experience/Not recently (>5 Years)	
21		project with similar organizational change	Recently completed project with fewer change requirements	
28		requirements?	Recently completed project with tewer change requirements	Recently completed
			Recently completed project with similar change requirements	project with fewer change
29				requirements
			Recently completed project with greater change	
30			requirements	

	В	С	D	E
1	Agenc	y: Agency Name		Project: Project Name
3			Section 4 Communication Area	
4	#	Criteria	Value Options	Answer
5	4.01	Has a documented Communication Plan been	Yes	Yes
6		approved for this project?	No	105
7	4.02	Does the project Communication Plan promote the collection and use of feedback	Negligible or no feedback in Plan	
8		from management, project team, and business stakeholders (including end users)?	Routine feedback in Plan	Proactive use of feedback in Plan
9			Proactive use of feedback in Plan	
10	4.03	Have all required communication channels been identified and documented in the	Yes	Yes
11		Communication Plan?	No	
12	4.04	Are all affected stakeholders included in the	Yes	Yes
13		Communication Plan?	No	105
14	4.05	Have all key messages been developed and	Plan does not include key messages	All or nearly all messages
15		documented in the Communication Plan?	Some key messages have been developed	are documented
16			All or nearly all messages are documented	
17	4.06	Have desired message outcomes and success measures been identified in the	Plan does not include desired messages outcomes and success measures	Success measures have
18		Communication Plan?	Success measures have been developed for some messages	been developed for some messages
19			All or nearly all messages have success measures	
20	4.07	Does the project Communication Plan identify	Yes	Yes
21		and assign needed staff and resources?	No	162

27 Control Requested and received 28 5.09 Have all tangible and intangible benefits been identified and validated as reliable and achievable? Project benefits have been identified un to validated Most project benefits have been identified and validated achievable? All or nearly all project benefits have been identified and validated advaltated All or nearly all project benefits have been identified and validated most project benefits have been identified and validated All or nearly all project benefits have been identified and validated most project benefits have been identified and validated All or nearly all project benefits have been identified and validated 33 5.10 What is the benefit payback period that is within 3 years Within 3 years Within 5 years 34 advaltated Within 5 years Within 5 years Within 5 years 35 5.11 Has the project procurement strategy been clearly determined and agreed to by affected stakeholders? Stakeholders have reviewed and approved the proposed procurement strategy Stakeholders have free/eveed and approved the proposed Stakeholders have procurement strategy 41 5.12 What is the planned approach for courting hardware and software for the project? Time and Expense (T&E) frem Fixed Price (FFP) successfully complete the project? Firm Fixed Price (FFP) successfully complete the project? Firm Fixed Price (FFP) for hardware and software is do		В	C	D	E
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1 5.0 No No 10 application of the project based of the cost estimates based estimates model? No No 12 5.0 No the based estimates model? Delated and figuous (course with n = 10%). Projectories and the project? Delated and figuous (course with n = 10%). Projectories and the project of the cost estimates projector magnetizes - estimate code any polewone 10-10%. Projectories - actual cost may exceed estimate by mere hum (10%). Delated and figuous (course with n = 10%). Projectories - actual cost may exceed estimate by mere hum (10%). Delated and figuous (course with n = 10%). Projectories - actual cost may exceed estimate by mere hum (10%). Delated and figuous (course with n = 10%). Projectories - actual cost may exceed estimate by mere hum (10%). Delated and figuous (course with n = 10%). Projectories - actual cost may exceed estimates and the project or system? No 22 5.0% No the first project or system? Funding time mingle agency Funding time based payers in Received and proceed Received and proceed Received and received? Received and received Received and received Re				Between \$500K and \$1,999,999	M
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58 single, best qualified candidate? Multi-stage evaluation and proof of concept or prototype planned/used to select best qualified vendor to select best qualified vendor 59 5.18 For projects with total cost exceeding \$10 Procurement strategy has not been developed No. bid response did/will not require proof of concept or prototype No applicable 60 Part of the bid response? Yes, bid response did/will include proof of concept or prototype Not applicable 61 Not applicable Not applicable Not applicable	57				prototype planned/used
5.18 For projects with total cost exceeding \$10 million, did/will the procurement strategy require a proof of concept or prototype a part of the bid response? Procurement strategy has not been developed 60 No, bid response did/will not require proof of concept or prototype 61 Ves, bid response did/will include proof of concept or prototype 63 Not applicable	59				
60 million, did/will the procurement strategy require a proof of concept or prototype part of the bid response? No, bid response did/will not require proof of concept or prototype Not applicable 61 Ves, bid response did/will include proof of concept or prototype Not applicable 63 Not applicable		5.18	For projects with total cost exceeding \$10		venuor
60 require a proof of concept or prototype as part of the bid response? prototype Ves, bid response did/will include proof of concept or prototype 61 Ves, bid response did/will include proof of concept or prototype Not applicable 63 Not applicable Image: Concept or prototype 64 Image: Concept or prototype Image: Concept or prototype			million, did/will the procurement strategy		
61 Yes, bit response dat/will include proor or concept or prototype 62 Not applicable 63 64 65 65	60			prototype	Not applicable
62 Not applicable 63	61		part or the blu response?	Yes, bid response did/will include proof of concept or prototype	
63 64 65				Not applicable	
<u>64</u> <u>65</u>					
65	63				
65	64				
	65				

	В	С	D	E
1	Agenc	y: Agency for Persons with Disabilitie	s	Project: APD iConnect
3			ction 6 Project Organization Area	
4	#	Criteria	Values	Answer
5	6.01	Is the project organization and governance	Yes	
		structure clearly defined and documented within an approved project plan?	No	Yes
6	6.02	Have all roles and responsibilities for the	None or few have been defined and documented	
7	0.02	executive steering committee been clearly	Some have been defined and documented	All or nearly all have been
8 9		identified?	All or nearly all have been defined and documented	defined and documented
9 10	6.03	Who is responsible for integrating project	Not yet determined	
11	0.05	deliverables into the final solution?	Agency	System Integrator
12			System Integrator (contractor)	(contractor)
13	6.04	How many project managers and project	3 or more	
14		directors will be responsible for managing the	2	3 or more
15		project?	1	
	6.05	Has a project staffing plan specifying the	Needed staff and skills have not been identified	
16		number of required resources (including		Staffing plan identifying all staff roles,
47		project team, program staff, and contractors)	Some or most staff roles and responsibilities and needed skills have been identified	responsibilities, and skill
17		and their corresponding roles, responsibilities		levels have been
18		and needed skill levels been developed?	Staffing plan identifying all staff roles, responsibilities, and skill levels have been documented	documented
19	6.06	Is an experienced project manager dedicated	No experienced project manager assigned	
20	0.00	fulltime to the project?	No, project manager is assigned 50% or less to project	
20			No, project manager assigned more than half-time, but less	Yes, experienced project
21			than full-time to project	manager dedicated full- time, 100% to project
22			Yes, experienced project manager dedicated full-time, 100% to project	
23	6.07	Are qualified project management team	None	
		members dedicated full-time to the project	No, business, functional or technical experts dedicated 50%	Yes, business, functional
24			or less to project	or technical experts
05			No, business, functional or technical experts dedicated more	dedicated full-time, 100%
25			than half-time but less than full-time to project Yes, business, functional or technical experts dedicated full-	to project
26			time, 100% to project	
27	6.08	Does the agency have the necessary	Few or no staff from in-house resources	
28		knowledge, skills, and abilities to staff the	Half of staff from in-house resources	Mostly staffed from in-
29		project team with in-house resources?	Mostly staffed from in-house resources	house resources
30			Completely staffed from in-house resources	
31	6.09	Is agency IT personnel turnover expected to	Minimal or no impact	
32		significantly impact this project?	Moderate impact	Moderate impact
33			Extensive impact	
i T	6.10	Does the project governance structure	Yes	
34		establish a formal change review and control		Yes
35		board to address proposed changes in project scope, schedule, or cost?	No	
	6 11		No board has been established	
	0.11			Yes, all stakeholders are
		control board?		represented by functional
50			•	manager
39			. es, al stationalis de représented by functional manager	-
35 36 37 38 39	6.11	Are all affected stakeholders represented by functional manager on the change review and	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	represented

	В	С	D	E
1	Agenc	cy: Agency for Persons with Disabilities		Project: APD iConnect
3	"		ction 7 Project Management Area	A
4	# 7.01	Criteria Does the project management team use a	Values No	Answer
5	7.01	standard commercially available project	Project Management team will use the methodology	
6		management methodology to plan,	selected by the systems integrator	Yes
7		implement, and control the project?	Yes	
8	7.02	For how many projects has the agency	None	
9		successfully used the selected project management methodology?	1-3	1-3
10		0 00	More than 3	
11	7.03	How many members of the project team are	None	
12		proficient in the use of the selected project management methodology?	Some	Some
13			All or nearly all	
	7.04	Have all requirements specifications been	0% to 40% None or few have been defined and documented	010/ - 1000/ - 41
14		unambiguously defined and documented?	41 to 80% Some have been defined and documented	81% to 100% All or nearly all have been
15			81% to 100% All or nearly all have been defined and	defined and documented
16			documented	
	7.05	Have all design specifications been	0% to 40% None or few have been defined and	
17		unambiguously defined and documented?	documented	81% to 100% All or
18			41 to 80% Some have been defined and documented 81% to 100% All or nearly all have been defined and	nearly all have been defined and documented
19			documented	
20	7.06	Are all requirements and design	0% to 40% None or few are traceable	81% to 100% All or
21		specifications traceable to specific business	41 to 80% Some are traceable	nearly all requirements
		rules?	81% to 100% All or nearly all requirements and	and specifications are
22			specifications are traceable	traceable
23	7.07	Have all project deliverables/services and acceptance criteria been clearly defined and	None or few have been defined and documented	All or nearly all
~		documented?	Some deliverables and acceptance criteria have been defined and documented	deliverables and acceptance criteria have
24			All or nearly all deliverables and acceptance criteria have	been defined and
25			been defined and documented	documented
26	7.08	Is written approval required from executive	No sign-off required	Review and sign-off from
27		sponsor, business stakeholders, and project manager for review and sign-off of major	Only project manager signs-off	the executive sponsor, business stakeholder,
		project deliverables?	Review and sign-off from the executive sponsor, business	and project manager are
28		. ,	stakeholder, and project manager are required on all major project deliverables	required on all major
20	7.09	Has the Work Breakdown Structure (WBS)	0% to 40% None or few have been defined to the work	proiect deliverables
29			package level	81% to 100% All or
		project activities?	41 to 80% Some have been defined to the work package	nearly all have been
30			level	defined to the work package level
31			81% to 100% All or nearly all have been defined to the work package level	package level
32	7.10	Has a documented project schedule been	Yes	
33		approved for the entire project lifecycle?	No	Yes
00	7.11	Does the project schedule specify all project		
34		tasks, go/no-go decision points	Yes	Yes
35		(checkpoints), critical milestones, and resources?	No	
36	7.12	Are formal project status reporting processes	No or informal processes are used for status reporting	Floject team and
37		documented and in place to manage and	Project team uses formal processes	executive steering committee use formal
		control this project?	Project team and executive steering committee use formal	status reporting
38	7.10	Are all pocoscopy plopping and separity	status reporting processes	processes
39	7.13	Are all necessary planning and reporting templates, e.g., work plans, status reports,	No templates are available Some templates are available	All planning and reporting
40 41		issues and risk management, available?	All planning and reporting templates are available	templates are available
42	7.14	Has a documented Risk Management Plan	Yes	
43		been approved for this project?	No	Yes
44	7.15	Have all known project risks and	None or few have been defined and documented	
45		corresponding mitigation strategies been identified?	Some have been defined and documented	Some have been defined
46		identined :	All known risks and mitigation strategies have been defined	and documented
	7.16	Are standard change request, review and	Yes	
47		approval processes documented and in place		Yes
48	7 47	for this project?	No	
49	7.17	Are issue reporting and management processes documented and in place for this	Yes	Yes
50		project?	No	.05

	В	С	D	E
1	Agenc	y: Agency for Persons with Disabilities	S	Project: APD iConnect
2				
3			ection 8 Project Complexity Area	
4	#	Criteria	Values	Answer
5	8.01	How complex is the proposed solution	Unknown at this time	
6		compared to the current agency systems?	More complex	More complex
7			Similar complexity	
8			Less complex	
9	8.02	Are the business users or end users	Single location	
10		dispersed across multiple cities, counties,	3 sites or fewer	More than 3 sites
11		districts, or regions?	More than 3 sites	
12	8.03	Are the project team members dispersed	Single location	
13		across multiple cities, counties, districts, or	3 sites or fewer	More than 3 sites
14			More than 3 sites	
15	8.04	How many external contracting or consulting	No external organizations	1 to 3 external
16		organizations will this project require?	1 to 3 external organizations	organizations
17			More than 3 external organizations	organizations
18	8.05	What is the expected project team size?	Greater than 15	
19			9 to 15	Greater than 15
20			5 to 8	
21			Less than 5	
22	8.06	How many external entities (e.g., other	More than 4	
23		agencies, community service providers, or	2 to 4	More than 4
24		local government entities) will be impacted by	1	
25		this project or system?	None	
26	8.07	What is the impact of the project on state	Business process change in single division or bureau	Agonov wido businoss
27		operations?	Agency-wide business process change	Agency-wide business process change
28			Statewide or multiple agency business process change	process enange
29	8.08	Has the agency successfully completed a	Yes	
		similarly-sized project when acting as	Na	No
30	0.63	Systems Integrator?	No	
31	8.09	What type of project is this?	Infrastructure upgrade	4
			Implementation requiring software development or	
32			purchasing commercial off the shelf (COTS) software	Combination of the above
33			Business Process Reengineering	
34	0 10	Line the project manager successfully	Combination of the above	
35		Has the project manager successfully managed similar projects to completion?	No recent experience	
36			Lesser size and complexity	Greater size and
37			Similar size and complexity	complexity
38	0.11		Greater size and complexity	
39	8.11	Does the agency management have	No recent experience	<u> </u>
40		experience governing projects of equal or similar size and complexity to successful	Lesser size and complexity	Lesser size and
41		completion?	Similar size and complexity	complexity
42			Greater size and complexity	

Appendix C Current Business Processes Assumptions and Constraints

The following document lists the 6 performance measures and 26 program assurances the agency must meet to be in compliance with CMS. For each of these, the current business process is given and the assumptions and constraints are provided for the proposed solution.

Note: For all subsidiary systems used by the agency, ABC provides client demographics, provider information, and residential licensing information and is the system of record for these items.

	A. Administrative Authority				
#	Measure	Current Business Process/Baseline	Assumptions and Constraints		
A(1)	Number and percent of new operating agency drafted policies and procedures approved by AHCA prior to implementation.	This currently is a manual process accomplished through Excel spreadsheets.	This performance measure and program assurance relates to agency operating procedures. While procedures will not be tracked in APD iConnect, changes in such procedures could impact business logic within the system.		
A(2)	Number and percent of required Person- Centered Reviews (PCRs) conducted by the contracted QIO vendor annually.	The contracted QIO vendor, Delmarva, supplies data from their PDR reports, then it is manually entered and tracked through an Excel manual remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		
A(3)	Number and percent of Provider Discovery Reviews (PDRs) conducted by the contracted QIO vendor annually.	The contracted QIO vendor, Delmarva, supplies data from their PDR reports, then it is manually entered and tracked through an Excel manual remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		
		B. Level of Care			
#	Measure	Current Business Process/Baseline	Assumptions and Constraints		
B(1)	Number and percent of new waiver participants who have a level of care evaluation prior to receiving services.	This originates as a manual paper driven process. Once completed, data is entered in the ABC system and associated paperwork is physically stored in the client central record.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		
B(2)	Number and percent of initial level of care determinations that were accurately completed and documented on the worksheet in accordance with state policies and procedures.	This originates as a manual paper driven process. Once completed, data is entered in the ABC system and associated paperwork is physically stored in the client central record.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		

	C. Qualified Providers				
#	Measure	Current Business Process/Baseline	Assumptions and Constraints		
C(1)	Number and percent of clinical provider applicants initially determined to meet or exceed minimum licensure and/or certification requirements as detailed in the Florida Administrative Code (FAC).	Data is entered into ABC system. The application document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involves email.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		
C(2)	Number and percent of clinical providers who continue to meet or exceed minimum licensure and/or certification requirements as detailed in the FAC.	Data is entered into ABC system. The application document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involves email.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		
C(3)	Number and percent of non-licensed and non-certified providers determined initially to meet state enrollment requirements as detailed in the FAC.	Data is entered into ABC system. The application document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involves email.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		
C(4)	Number and percent of providers who meet validation requirements as required for medication administration per the FAC.	Medication errors are tracked in an Excel spreadsheet. If remediation is needed, a Plan of Remediation (POR) form is created in Word. This document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involve email. Once the POR is agreed upon, APD must enter and track the information in an Excel remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		
C(5)	Number and percent of providers whose staff are trained in APD approved crisis management curriculum consistent with state requirements.	The contracted QIO vendor, Delmarva, supplies data from their PDR reports, then it is manually entered and tracked through an Excel manual remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		
C(6)	Number and percent of providers with service specific staff training requirements met.	The contracted QIO vendor, Delmarva, supplies data from their PDR reports, then it is manually entered and tracked through an Excel manual remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.		

	D. Service Plan					
#	Measure	Current Business Process/Baseline	Assumptions and Constraints			
D(1)	Number and percent of recipients whose service plans include supports and services consistent with assessed needs.	Data is entered into ABC, iBudget, and QSI systems as required. If remediation is needed, a Plan of Remediation (POR) form is created in Word. This document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involve email. Once the POR is agreed upon, APD must enter and track the information in an Excel remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.			
D(2)	Number and percent of recipients whose service plans reflect supports and services necessary to address assessed risks.	Data is entered into ABC, iBudget, and QSI systems as required. If remediation is needed, a Plan of Remediation (POR) form is created in Word. This document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involve email. Once the POR is agreed upon, APD must enter and track the information in an Excel remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.			
D(3)	Number and percent of recipients whose service plans address the recipient's personal goals.	Data is entered into ABC, iBudget, and QSI systems as required. If remediation is needed, a Plan of Remediation (POR) form is created in Word. This document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involve email. Once the POR is agreed upon, APD must enter and track the information in an Excel remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.			
D(4)	Number and percent of recipients whose service plans were updated within 12 months of their last service plan.	The contracted QIO vendor, Delmarva, supplies data from their PDR reports, then it is manually entered and tracked through an Excel manual remediation tracking spreadsheet. .If remediation is needed, a Plan of Remediation (POR) form is created in Word. This document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involve email. Once the POR is agreed upon, APD must enter and track the information in a remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.			

#	Measure	Current Business Process/Baseline	Assumptions and Constraints
D(5)	Number and percent of recipients whose needs have changed and service plans were reviewed and updated as warranted to address those changed needs.	The contracted QIO vendor, Delmarva, supplies data from their PDR reports, then it is manually entered and tracked through an Excel manual remediation tracking spreadsheet. .If remediation is needed, a Plan of Remediation (POR) form is created in Word. This document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involve email. Once the POR is agreed upon, APD must enter and track the information in a remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.
D(6)	Number and percent of recipients who receive the services by type, scope, amount, duration, and frequency identified in their plan.	The contracted QIO vendor, Delmarva, supplies data from their PDR reports, then it is manually entered and tracked through an Excel manual remediation tracking spreadsheet. .If remediation is needed, a Plan of Remediation (POR) form is created in Word. This document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involve email. Once the POR is agreed upon, APD must enter and track the information in a remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.
D(7)	Number and percent of recipients afforded choice of services and supports.	The contracted QIO vendor, Delmarva, supplies data from their PDR reports, then it is manually entered and tracked through an Excel manual remediation tracking spreadsheet. .If remediation is needed, a Plan of Remediation (POR) form is created in Word. This document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involve email. Once the POR is agreed upon, APD must enter and track the information in a remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.

	G. Health and Welfare							
#	Measure	Current Business Process/Baseline	Assumptions and Constraints					
G(1)	Number and percent of critical incidents reported to APD within required time frames.	Provider completes incident report and submits to APD. This information is then entered into the Incident Management System. If notices of non-compliance or plan remediation need to occur as the result of the incident, agency staff must manually create and route these items.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.					
G(2)	Number and percent of medication errors where appropriate follow-up was completed when required.	This data is currently tracked through multiple spreadsheets from APD regions and providers. Data is difficult to collect and requires a time consuming manual process to compile and analyze. If notices of non-compliance or plan remediation need to occur as the result of the incident, agency staff must manually create and route these items.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.					
G(3)	Number and percent of critical incident reports requiring a Plan of Remediation (POR) where APD follow-up was completed within required timelines.	Provider completes incident report and submits to APD. This information is then entered into the Incident Management System. If notices of non-compliance or plan remediation need to occur as the result of the incident, agency staff must manually create and route these items.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.					
G(4)	Number and percent of reactive strategies reported by providers with adverse outcomes or excessive duration where appropriate follow-up was completed as required.	Provider completes Reactive Strategies form and submits to APD regional office. Data is manually entered into an Excel spreadsheet by the Regional office and then sent to the APD state office where it is reviewed for accuracy and analyzed.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.					
G(5)	Number and percent of recipients whose identified health and/or safety needs are addressed.	The contracted QIO vendor, Delmarva, supplies data from their reviews. If remediation is needed, a Plan of Remediation (POR) form is created in Word. This document is shared between APD and the Provider and undergoes several back and forth exchanges, many of which involve email. Once the POR is agreed upon, APD must enter and track the information in an Excel remediation tracking spreadsheet.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.					

		I. Financial Accountability	
#	Measure	Current Business Process/Baseline	Assumptions and Constraints
I(1)	Number and percent of providers billing for services in accordance with the recipient's service authorization.	The contracted QIO vendor, Delmarva, identifies billing discrepancies between iBudget service authorizations and FMMIS claims data. Since Delmarva does not have VPN access into the iBudget and ABC systems, data is downloaded from FMMIS on a monthly basis. Claims data is collected from Delmarva once a month. Delmarva cross reference the claims to the service authorizations at the provider location.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.
I(2)	Number and percent of providers billing for waiver services at the correct rate.	The contracted QIO vendor, Delmarva, identifies billing discrepancies between iBudget service authorizations and FMMIS claims data. Since Delmarva does not have VPN access into the iBudget and ABC systems, data is downloaded from FMMIS on a monthly basis. Claims data is collected from Delmarva once a month. Delmarva cross reference the claims to the service authorizations at the provider location.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.
I(3)	Number and percent of claims paid at the correct rate, as published in the fee schedule submitted in the waiver application.	The contracted QIO vendor, Delmarva, identifies billing discrepancies between iBudget service authorizations and FMMIS claims data. Since Delmarva does not have VPN access into the iBudget and ABC systems, data is downloaded from FMMIS on a monthly basis. Claims data is collected from Delmarva once a month.	Business requirements agreed to in the vendor contract with Harmony/WellSky require the proposed solution include all required information to meet this measure.



Appendix D: Business Requirements – APD iConnect

Note: This excerpt is taken from the ITN for this project and reflects the values submitted by the selected vendor Harmony/WellSky in their BAFO

SECTION 1. Requirements

2.1 Functional Requirements

A functional requirement is a statement that expresses a capability of a system or the necessary task, action, or activity that must be accomplished by the system.

Functional requirements are geared towards addressing the business needs that the system must satisfy, but does not address how the system should accomplish them.

2.2 Non-functional Requirements

Non-Functional Requirements for a business system address those aspects of the system that, while not directly affecting the functionality of the system as seen by the users, can have a profound effect on how that business system is accepted by both the users and the people responsible for supporting that system.

The Non-Functional aspects of a business system cover a broad range of themes. The major non-functional themes are included in the requirements matrix under the column heading of System Area.

The requirements of the system to be delivered must be understood in each of these areas. All of these requirements are presented in a way that facilitates the design and development of the operational model, that is, the computers, networks, and other platforms on which the application will execute and by which it is managed. They also feed into the design of technical and application components. For example, service level requirements may imply component performance requirements. Functional and Non-functional Requirements together define the baseline against which the business system is designed. Just like a functional requirement, a Non-functional Requirement must be testable, quantitatively or qualitatively, in order to complete the acceptance testing process. Qualitative tests cannot be directly measured or inspected. Consider the requirement "the system must be available 24x7 with the exception of scheduled down time." Testing this requirement quantitatively would take too long and be very inspection intensive. Instead, this requirement could be tested by inspecting the system architecture and forming a conclusion as to whether there is any design impediment to satisfying the requirement.

The requirements matrix provided below must be updated for each individual requirement to indicate how each is planned to be met by the vendor's proposed solution. Columns to be completed and submitted with Section 4.3 of the vendor's response include:

Extent Met by Proposed Solution:

- 1. Doesn't Meet/Not Proposed
- 2. Custom Development
- 3. Meets with Modification of COTS
- 4. Currently proposed for future release of COTS
- 5. Fully Meets (includes configuration changes), installed and operational, can be demonstrated

SECTION 4. Business Unit Functional Requirements

This section specifies the requirements/capabilities required of the Client Data Management System by the Agency business units (Programs, Operations, & Program Integrity).

The requirements specified in this section may overlap or extend supporting requirements. In the event a requirement specified in this section or its subsections overlaps or extends a supporting requirement in a way that violates the supporting requirement, the requirement in this section supersedes.

As used in this section and its subsections:

- The words "must" and "shall" denote mandatory requirements
- The word "should" denotes a desired but not mandatory requirement
- The phrase "including but not limited to" denotes a list of items that is required but is not all-inclusive
- The term "etc." denotes a list of items that is required but is not all-inclusive

APD envisions a modular CDMS solution that uses a logical rules-based decision making engine, a logical workflow engine, and logical functional building blocks to support APD's business processes. The term 'logical' in this vision is specifically intended to differentiate the overall system vision from its physical implementation, and recognizes that system components, even those supplied by a COTS vendor may not support rules-based decision making, workflow, and functional building blocks in a consistent manner.

The Agency's vision is that the selected contractor will bridge any gaps or inconsistencies between COTS system components, and bring consistency to the CDMS solution in these areas so that consistent training of both end users and users responsible for configuring business processes is made possible. The system requirements expressed in this section, as well as those expressed in other sections of this Statement of Need, include not only functional requirements, but also workflow and business rule requirements. This affords prospective contractors insight into the richness of the capabilities the CDMS solution must provide. Because of the Agency's modular vision for, the context in which an ITN requirement appears does not limit the applicability of functional capability expressed in that requirement to that context. Similarly, use of phrases similar to "in accordance with configurable business rules" does not limit the use of configurable business rules to the context of the ITN requirements that include such phrases. The Agency expects the contractor, with substantial Agency participation, to translate and expand ITN requirements into complete and specific functional, workflow, and technical requirements, and business rules, during requirements validation and design. The contractor must provide a solution that satisfies these derived functional, workflow, and technical requirements, and technical requirements, and taken together with derived business rules, supports all APD business process needs effectively.

The table below specifies the confirmed CDMS functional requirements. For requirements management and change control purposes, the following attributes of each requirement have been specified:

• Requirement Identifier (Req ID): is the unique identifier assigned to each requirement that will be maintained throughout the life of the system implementation effort. Design specifications and test cases must specify the requirements that they satisfy

using the Requirement ID.

- Requirement Type: represents a general classification of each requirement. (F) Indicates a functional requirement and (NF) indicates a non-functional requirement.
- **Business Process:** represents the process applicable to the requirement.
- **System Area:** is a cross reference providing forward traceability into the design phase.
- **Requirement Description:** provides a definition of each requirement in terms of a statement of system capability or performance (i.e. the system shall perform x).
- Extent Met by Proposed Solution: provides an area for proposer's to indicate to which extent their proposed solution meets APD's requirement.
- **Comments:** provides an area for proposer's to clarify their response.

REQ ID#	REQ Type	Business Process	System Area	Requirements Description	Extent Met by Proposed Solution (1-5)	Comments
1	F	Application/ Eligibility	Client general demographic data/information	The system shall provide the ability online for agency staff to track waiver eligibility requirements criteria for waiver applicants that includes checklists and allows APD staff to record the eligibility determination, designate the client as waitlist, ICF or waiver and generate the Eligibility Determination Notice. See forms for data elements #28, 29, 118, 123	5	
2	F	Application/ Eligibility	Client general demographic data/information	The system shall provide the ability online for providers and agency staff to select a client and enter employment data including, but not limited to employment history, salary, performance and goals. See attached screenshot #117, 27b, 150, input screen for data elements	5	
3	F	Application/ Eligibility	Client general demographic data/information	The system shall provide the ability online for agency staff and Waiver Support Coordinators to select a client and enter information pertaining to client Level of Care. See attached forms for data elements #28, 29	5	
4	F	Application/ Eligibility	Client general demographic data/information	The system shall provide the ability online for Level of Care to be signed electronically by client or legal representative. Page 92 of 182	4	

5	Application/ Eligibility	Client general demographic data/information	The system shall provide the ability online for client/legal representatives, Support Coordinator's, and agency staff to enter and maintain client central demographic information. See forms #156, 157	5	Harmony for Advanced Waiver Management includes functionality to allow users to perform this action. The Consumer/Caregiver Portal, successfully deployed for the Massachusetts Executive Office on Elder Affairs, will allow clients and legal representatives to perform this action with product enhancements already underway.
6	Application/ Eligibility	Client general demographic data/information	The system shall provide the ability online to notify agency staff and Waiver Support Coordinators when a client's Level of Care is coming due for annual review (every 364 days). See attached form for data elements #28	5	
7	Application/ Eligibility	Core Client Central Record	The system shall provide the ability online for a potential client, legal representative, or agency staff to enter and submit the Referral Form for agency staff review. See form #3d for data elements	5	Harmony for Advanced Waiver Management includes functionality to allow users to perform this action. The Consumer/Caregiver Portal, successfully deployed for the Massachusetts Executive Office on Elder Affairs, will allow clients and legal representatives to perform this action with product enhancements already underway.

8		Application/ Eligibility	Core Client Central Record	The system shall provide the ability online for a potential client, legal representative, or agency staff to enter and submit the Application For Services for agency staff review. See Form 3c for data elements	5	Harmony for Advanced Waiver Management includes functionality to allow users to perform this action. The Consumer/Caregiver Portal, successfully deployed for the Massachusetts Executive Office on Elder Affairs, will allow clients and legal representatives to perform this action with product enhancements already underway.
9		Application/ Eligibility	Core Client Central Record	The system shall provide the ability online for client, legal representative, and agency staff to select a client and electronically attach supporting documentation for the Application For Services.	5	Harmony for Advanced Waiver Management includes functionality to allow users to perform this action. The Consumer/Caregiver Portal, successfully deployed for the Massachusetts Executive Office on Elder Affairs, will allow clients and legal representatives to perform this action with product enhancements already underway.
10	F	Application/ Eligibility	Waitlist	The system shall provide the ability online for agency staff to complete a checklist to prioritize waitlist clients based on predefined criteria. See waitlist prioritization checklist see forms # 92 and 128 for data elements	5	
11	F	Application/ Eligibility	Waitlist	The system should provide the ability online for agency staff to track and monitor General Revenue expenditures for people on the waitlist	5	

12	Application/ Eligibility	Waitlist	The system should provide the ability online for agency staff to enter provider Non-Contractual Authorization information and grant the provider access to that providers approved service authorizations for General Revenue funded services. See form #131 for data elements(ABC invoicing Screenshot 3031)	5	
13	Application/ Eligibility	Waitlist	The system should provide the ability online to automatically update the status of a General Revenue service authorization when General Revenue vendor payments for that service authorization are made. See form #131	5	
14	Application/ Eligibility	Waitlist	The system should provide the ability online for agency staff to enter General Revenue Support Plans (short) for a waitlist client. See form #41b	5	
15	Application/ Eligibility	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for agency staff to select a client and verify that all client pre- CDC+ requirements have been met before the CDC+ application can be initiated as indicated in rule. See form #159	5	
16	Application/ Eligibility	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for the Support Coordinator/consultant or agency staff to select a client and enter and submit the CDC+ client application information. See Forms 13, 14, 15, 18, 19, 21, 22, aPate 99 for 8 at a elements.	5	

17	Application/ Eligibility	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for client/representative and consultant to enter and submit the CDC+ client application information. See Forms 13, 15, 16, 18, 19, 20, 21, and 22 for data elements.	5	The Consumer/Caregiver Portal, successfully deployed for the Massachusetts Executive Office on Elder Affairs, will allow clients and legal representatives to perform this action with product enhancements already underway.
18	Behavioral Services	Behavioral Services	The system shall provide the ability online for Support Coordinator to select a client assigned to them and enter a request for new service(s) for the client, track the date the submission was made and notify the appropriate agency staff the request was submitted	5	-
19	Behavioral Services	Behavioral Services	The system shall provide the ability online for providers to select a client with an existing service authorization and enter Behavioral Assessment data for the client. See form for data elements #63	5	
20	Behavioral Services	Behavioral Services	The system shall provide the ability online for providers to select a client with an existing service authorization and enter and update Behavioral Analysis Services Plan (BASP) data for the client. See form for data elements #61	5	
21	Behavioral Services	Behavioral Services	The system shall provide the ability online for providers to select a client with an existing service authorization and enter and update Behavior Analysis Quarterly Summary data for the client. See form for data elements #60 Page 96 of 182	5	

22	Behavioral	Behavioral Services	The system shall provide the ability	5	1
~~	Services	Denavioral Services	online for providers to select a client	J	
	Services		with an existing service authorization		
			-		
			and enter and update Provider		
			Request for Behavior Focused and		
			Intensive Behavioral Residential		
			Habilitation Designation data for the		
			client.		
			See form for data elements #54, 45,		
			45a		
23	Behavioral	Behavioral Services	The system shall provide the ability	5	
	Services		online for agency staff and providers		
			to select a client and enter and		
			update the data that comprises the		
			Behavior Focused Recipient		
			Characteristics.		
			See form for data elements #48		
24	Behavioral	Behavioral Services	The system shall provide the ability	5	
	Services		online for agency staff and providers		
			to select a client (in the area or with		
			an existing service authorization) and		
			enter and update the data that		
			comprises Intensive Behavioral		
			Recipient Characteristics for the		
			client.		
			See form for data elements #50, 52		
25	Behavioral	Behavioral Services	The system shall provide the ability	5	
	Services		online for agency staff to select a		
			client in their Region and enter and		
			update Behavioral Analysis Eligibility		
			Form (BASE) data for the client.		
			See form #158		

26	Behavioral Services	Behavioral Services	The system shall provide the ability online for agency staff to select a client in their Region and enter/update data that comprises client eligibility for Behavioral- Medical Residential Habilitation for the client. See forms for data elements #51, 55	5	
27	General	General	The system shall provide the ability online for agency staff to select a client in their Region and to generate agency correspondence (notices) including but not limited to Notices of Agency Action (NOAA). See forms for data elements #53,53a	5	
28	Behavioral Services	Behavioral Services	The system should provide the ability online for providers to generate graphical representations of the data that comprises reactive strategies for clients for whom they have service authorizations. See form for data elements #57, 59,	5	
29	Behavioral Services	Behavioral Services	The system shall provide the ability online to notify agency staff and providers of approaching deadlines for their clients for behavioral process requirements (workflow) including but not limited to BASP, Assessment, Eligibilities, IB Matrices, LRC Reviews, Quarterly reports, Reactive Strategies etc. prior to being out of compliance and provide a report on the items that have exceeded timeframe parameters. See form for data elements #46, 47, 50, 53, 56, 57, 60, 61, 63, 100, 110	5	

30	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online to automate the rules, coverage and limitations of the current promulgated CDC+ handbook for all CDC+ processes including but not limited to the CDC+ Purchasing Plan Form and Quick Update form. See Forms #13 - #23, #87, #88 for data elements.	5	
31	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for agency staff, Support Coordinators/consultants, clients and CDC+ Representatives to input and update the CDC+ Purchasing Plan Form and Quick Update form See attached forms for data elements #20 and #21	5	Harmony for Advanced Waiver Management includes functionality to allow users to perform this action. The Consumer/Caregiver Portal, successfully deployed for the Massachusetts Executive Office on Elder Affairs, will allow clients and legal representatives to perform this action with product enhancements already underway.
32	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for Support Coordinators/consultants to submit the CDC+ Purchasing Plan and Quick Update form to agency staff for review and approve consistent with the approval requirements. See attached forms for data elements #20 and #21	5	
33	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for agency staff to designate a timeline (workflow) for tasks within CDC+ processes.	5	

34	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for the Support Coordinator/consultant to select a CDC+ client and enter monthly case notes for the client as required in rule. See form #17	5	
35	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for the appropriate staff to create and track checklists for required documentation in each CDC+ process. See attached forms for data elements #13 - #23	5	
36	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online to interface with the current CDC+ systems including but not limited to CDCFEA, Secure Web- Based Payroll Systems, and the Interactive Voice Response system (IVR). See forms for data elements #20, 21	2	This interface is included in Harmony's proposal and will leverage Harmony's integration architecture which allows interfaces to any third party system. As would be the case for any vendor, the specific interface will be developed as part of the implementation.
37	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The systems shall provide the ability online for Support Coordinator/consultant or agency staff to select a CDC + representative and enter and track corrective action plans. See spreadsheet for data elements #167	5	
38	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for clients/representatives and consultants to select a client and update applicable CDC+ information See Forms #16, 18, 22 for data elements	5	

39	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for clients/representatives and consultants to select a client and submit a request for voluntary disenrollment from CDC+. See forms #16 and #23	5	
40	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for agency staff to select a client and generate a due process notice for involuntary disenrollment from CDC+ See form #88	5	
41	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for agency staff to select a client and generate due process notices as required including but not limited to reduction of allocation and change in services. See Forms #87, 88 for data elements	5	
42	Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability for clients and CDC+ Representatives to enter online the CDC+ Purchasing Plan and Quick Update form to Support Coordinators/consultants for review and approval consistent with the approval requirements. See attached forms for data elements #20 and #21	5	Harmony for Advanced Waiver Management includes functionality to allow users to perform this action. The Consumer/Caregiver Portal, successfully deployed for the Massachusetts Executive Office on Elder Affairs, will allow clients and legal representatives to perform this action with product enhancements already underway.

43	F	Crisis	Client general demographic data/information	The system shall provide the ability online for agency staff to select a client and enter data related to client crisis enrollment. See Forms # 26, 26a, 38, 96, 97, 98, 101, 65 for data elements	5
44		Crisis	Crisis Enrollment	The system shall provide the ability online for agency staff to select a client and enter all data required for Crisis reviews including attaching supporting documentation. See Forms # 15, 26, 26a, 38, 65, 95, 96, 97, 98, 101, 157 for data elements	5
45		Crisis	Crisis Enrollment	The system shall provide the ability online for agency staff to select a client and enter crisis review checklist data including attachments and track timelines with appropriate notifications (workflow). See Forms # 26, 26a, 38, 65, 96, 97, 98, 101 for data elements	5
46	-	Discovery	Quality Assurance	The system shall provide the ability online to interface with the QIO provider to receive and upload QIO service provider and client data to track provider deficiencies and client health and safety alerts requiring remediation See forms 7, 7b	2
47	F	Discovery	Quality Assurance	The system shall provide the ability online for APD staff to input service provider remediation tracking data. See attached forms for data elements # 7, 7b	5

48	F	Discovery	Quality Assurance	The system should provide the ability online to interface with DCF FSFN system to receive and upload APD Provider deficiencies requiring remediation.	2	This interface is included in Harmony's proposal and will leverage Harmony's integration architecture which allows interfaces to any third party system. As would be the case for any vendor, the specific interface will be developed as part of the implementation.
49	F	Discovery	Quality Assurance	The system should provide the ability online to interface with DCF FSFN system to receive and upload APD client data and to associate it with the client's record.	2	This interface is included in Harmony's proposal and will leverage Harmony's integration architecture which allows interfaces to any third party system. As would be the case for any vendor, the specific interface will be developed as part of the implementation.
50	F	General	Client general demographic data/information	The system shall provide the ability online for legal representatives/clients to select and view their client central record in accordance with HIPAA requirements.	5	Harmony for Advanced Waiver Management includes functionality to allow users to perform this action. The Consumer/Caregiver Portal, successfully deployed for the Massachusetts Executive Office on Elder Affairs, will allow clients and legal representatives to perform this action with product enhancements already underway.
51		General	Core Client Central Record	The system shall provide the ability online to accept electronic signatures including from handheld and portable devices.	4	
52		General	Core Client Central Record	The system shall provide the ability online for agency staff to generate a report on all client denials of service by field office/region.	5	

53		General	Core Client Central Record, Provider management directory and Provider enrollment	The system shall provide the ability online for support coordinators and agency staff to select a client and attach documents, images, or relevant information that link to items in all the client's checklists; including the ability to retrieve, view, send, and print such material on demand.	5	
54		General	Forensic	The system should provide the ability online for agency staff to track client forensic information including but not limited to court dates and facility placement and provide alerts related to this information.	5	
55		General	General	The system shall provide the ability online to link to the User Manuals and FAQ's for user self help	5	
56		General	General	The system shall provide the ability online to notify specific users when a task is ready for their review/approval.	5	
57		General	General	The system should provide the ability online for agency staff to flag clients as having hearing or legal cases and the type of hearing/case.	5	-
58	F	Incident Reporting	Incident Reporting	The system shall provide the ability online for providers and agency staff including Developmental Disability Centers to enter incident data. See Forms #93, 93a, 90	5	
59	F	Incident Reporting	Incident Reporting	The system shall provide the ability online to send notifications to appropriate agency staff based on the type of incident when an incident is entered. Page 104 of 182	5	

60	F Incident Reporting	Incident Reporting	The system shall provide the ability online to link incident reports to multiple APD clients but only allow providers and their employees to view the clients involved in the incident that they have service authorizations for (compliance with HIPAA).	5	
61	Provider	Cost Plan	The system shall provide the ability online for agency staff to associate negotiated rates with provider services. These rates will be associated with client service plans when the waiver service is selected for the service plan.	5	
62	Waiver	Cost Plan	The system shall provide the ability online for agency staff to associate standard rates with waiver services in accordance with the rate rule. These rates will be associated with client service plans when the waiver service is selected for the service plan. See the rate table for elements #152, 153, 154	5	
63	Waiver	Cost Plan	The system shall provide the ability online to require Support Coordinator and/or agency staff to enter a manual rate on a service plan for a waiver service designated as a manual rate service when the service is selected for a service plan. The manual rate entered may not exceed the maximum allowable rate for the waiver service.	5	

64	Waiver	Cost Plan	The system shall provide the ability online for agency staff to designate a waiver service that does not have a standard rate as being a manual rate service.	5	
65	Provider	General	The system shall provide the ability online to produce a report on providers who have not entered service logs on a client more than 30 days after the end date on the providers' service authorization for that client.	5	
66	Provider	General	The system shall provide the ability online to notify providers who have not entered service logs on a client more than 30 days after the end date on the providers' service authorization for that client.	5	
67	Provider Application	Provider	The system shall provide the ability online for providers to enter and submit to APD the provider enrollment application and attach necessary supporting documentation. The system shall not accept the application submission until specified criteria for submittal (checklist) has been met. See form #1, 2, 3, 135, 147	4	
68	Provider Application	Provider	The system shall provide the ability online for agency staff to delete incomplete provider applications within a specific time period.	5	

69	Provider Application	Provider	The system shall provide the ability online for agency staff to review and edit submitted provider enrollment application, enter comments and update the status to one of the following: Initial Review, Further Documentation Required, Application Eligible, Application Denied, Final Review, and Application Approved.	5	
70	Provider Application	Provider	The system shall provide the ability online for agency staff to generate a provider enrollment denial notification email to provider. See form outline #160 for data elements	5	
71	Provider Application	Provider	The system shall provide the ability online for agency staff to generate an initial provider enrollment eligibility email upon approval of the enrollment application.	5	
72	Provider Application	Provider	The system shall provide the ability online to notify agency staff when new provider Medicaid Waiver information is received from AHCA as part of the nightly provider/vendor FMMIS synchronization.	2	This interface is included in Harmony's proposal and will leverage Harmony's integration architecture which allows interfaces to any third party system. As would be the case for any vendor, the specific interface will be developed as part of the implementation.
73	Provider Application	Provider	The system should provide the ability online to notify providers of status updates regarding their enrollment application. This notification will include agency staff notes.	5	

74		Provider Application	Provider	The system shall provide the ability online for agency staff to generate the final provider enrollment approval correspondence including the Medicaid Waiver Services Agreement See Form #4	5	
75		Provider Application	Provider	The system shall provide the ability online to notify providers and agency staff 60 days prior to impending expiration of the providers Medicaid Waiver Services Agreement with APD.	5	
76	F	Provider Application	Provider	The system shall provide the ability online for providers to renew Medicaid Waiver Agreements. See Form #4	5	
77	F	Provider Application	Provider	The system shall provide the ability online for agency staff to select a provider and enter Medicaid Waiver Services Agreement information including begin and end date for the agreement. See Form #4, 5 for data elements	5	
78	F	Provider Billing	Provider	The system shall provide the ability online to view the paid claims from FMMIS for a specific client, specific provider, by Field Office/region or statewide.	5	
79	F	Provider Billing	Provider	The system shall provide online access to providers for service authorizations.	5	-

80		Provider Services	Provider	The system shall provide the ability online for providers to add/update service log progress/case notes, comments and units for Visit Verification entries for their service authorization clients. Date and time are not editable. See form #133	5	
81		Provider Services	Provider	The system shall provide the ability online for agency staff to deactivate a provider, while maintaining the providers account and the provider's ability to continue billing for up to one year after deactivation but restricting the provider from being associated with any new service plans/service authorizations.	5	
82	F	Provider Services	Provider	The system shall provide the ability online for providers to select a client with an existing service authorization and enter data for Reactive Strategies, Medication Errors, Incident reports and Deaths, as required in rule and for CMS and Quality Assurances for the client. See Forms #6, 6a, 6b, 7, 7b, 64, 64a, 66, 66a, 90, 91, 93, 93a, 94, 105, 106, 142	5	
83		Provider Services	Provider	The system shall provide the ability online for agency staff to associate approved services with the provider by field office/region to indicate what services the provider can provide in which field office/regions.	5	

84	F	Provider Services	Provider	The system shall provide the ability online for providers to create implementation plans for a client that include but are not limited to activities and tasks based on handbook rules.	5	
85	F	Provider Services	Provider	The system shall provide the ability online for agency staff and providers to produce reports based on client progress on implementation plan goals.	5	
86	F	Provider Services	Provider	The system should provide the ability online for providers to enter client progress on Support Plan goals and objectives. See form #41 and #42a	4	
87	F	Provider Services	Provider	The system should provide the ability online to notify providers and APD staff regarding implementation plan due dates.	5	
88		Provider Services	Provider	The system shall provide the ability online to automatically notify agency staff and Waiver Support Coordinators of a provider termination if there are clients that have active service authorizations with that provider and therefore need to find a new provider for that/those service(s).	5	
89	F	Provider Services	Provider	The system should provide the ability online for providers to associate client service logs to implementation plan goals.	4	

90		Remediation	Quality Assurance	The system shall provide the ability online to notify the provider of the individual deficiencies requiring remediation. Also see form 6, 6a, 108	5	
91		Remediation	Quality Assurance	The system shall provide the ability online for providers to enter the plan of remediation for each individual deficiency and allow agency staff to review and approve the plan of remediation for each deficiency. See Form # 6, 6a	5	
92		Remediation	Quality Assurance	The system shall provide the ability online to track the remediation due date for provider deficiencies and notify APD Staff if dates are not met. See Form # 6	5	
93		Remediation	Quality Assurance	The system shall provide the ability online to notify APD Staff of Request for Provider Termination. See form #160	5	
94		Remediation	Quality Assurance	The system shall provide the ability online for agency staff to update provider deficiencies to indicate that the deficiency has been corrected, description of evidence of completion and the date it was corrected. See Form # 6	5	
95	F	Residential	Facility Licensure	The system shall provide the ability online to enable prospective facilities and licensed facilities to apply for licensure and renew licenses. See form #78	4	

96	F	Residential	Facility Licensure	The system shall provide the ability online for APD staff to enter the monthly group home monitoring tool/checklist for each group home provider. See form #85, 47	5	
97	F	Residential	Facility Licensure	The system shall provide the ability online for APD staff to enter the licensure monitoring checklists. See Forms #80, 80a, 81, 81a, 82	5	
98	F	Residential	Facility Licensure	The system shall provide the ability online to report on monitoring deficiencies noted on the monitoring tools. See form #85 for data elements	5	
99		Residential	Facility Licensure	The system shall provide the ability online for agency staff to generate correspondence (Notice of Noncompliance) to providers based on results from the monitoring tools. See form 108	5	
100	F	Residential	Facility Licensure	The system shall provide the ability online for agency staff to enter expected timeframes for deficiency corrections and the date the deficiency was corrected	5	
101	F	Residential	Facility Licensure	The system shall provide the ability online for agency staff to collect data related to licensing disciplinary actions. See Form #102	5	
102	F	Residential	Facility Licensure	The system shall provide the ability online to track license expiration dates.	5	

103		Residential Planning	ICF	The system shall provide the ability online for agency staff to select a client and enter the Central Admissions Cover Sheet and the Document of Choice See form # 137, 141	5	
104		Residential Planning	ICF	The system shall provide the ability online for agency staff to select a client, review the Central Admissions Cover Sheet and create multiple Authorization for Admissions simultaneously to different ICF providers for the client. See form #10	5	
105		Residential Planning	ICF	The system shall provide the ability online for agency staff to document the ICF acceptance or denial of the Authorization for Admission for a client and enter the anticipated admission date or reason for denial. See form #10	5	
106	F	Residential Planning	Residential Planning	The system shall provide the ability online for agency staff or providers to maintain bed availability data by provider and provider characteristics, (for example providers that serve clients with medically complex needs or clients with significant behavioral issues.) See form # 8, 107, 146	5	
107	-	Residential Planning	Residential Planning	The system shall provide the ability online for agency staff, providers and clients/legal rep to enter the residential Planning Referral form. See Residential Planning Referral form #155	5	-

108		Residential Planning	Residential Planning	The system shall provide the ability online for support coordinators and agency staff to complete a checklist of required documents for clients seeking residential planning. See form #109	5	
109	F	Service	QSIVerification	The system shall provide the ability online for providers to use Visit Verification technology (geodata) to enter service logs for client services provided for a service authorization using provider GPS enabled devices. This technology must be used for in- home, community, facility and provider office locations and must track service logs, attendance logs, and Daily Progress Notes.	4	
110		Service	Electronic Visit Verification	The system shall provide the ability online for agency staff to use Visit Verification technology (geodata) to document monitoring visits to providers.	4	
111	F	Service	Electronic Visit Verification	The system shall provide the ability online to reconcile provider client geodata service/attendance logs against client services billed and FMMIS claims paid to reduce mistakes and fraud	4	-
112	F	Service	Electronic Visit Verification	The system shall provide the ability online to associate a unique login identifier to each employee/sub- contractor of each provider in order to track individual direct care providers.	4	

113	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online for support coordinators to enter a client Supplemental Funding Request and submit to agency staff for review and approval or denial. See forms #156, 157	5	
114	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online for support coordinators and agency staff to attach scanned justification documentation for a client Supplemental Funding Request (person needing services (PNS)).	5	
115	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online for support coordinators and agency staff to complete Supplemental Funding Request checklists appropriate to their roles. The checklists should include a brief description of the required documentation. See forms #156, 157	5	
116	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online for submission of Supplemental Funding Request and a notification by agency staff to support coordinator that additional documentation is needed (support coordinator checklist is complete).	5	
117	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online for agency staff to select the reason for Supplemental Funding Request denial from a dropdown list and provide a text box for other reasons not on the list. see forms #25, 26, 156, 157	5	

118	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online for agency staff to generate the standard Notice of Denial and Due Process Letter for a denied Supplemental Funding Request.	5	
119	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online to send reminder notifications to the appropriate agency staff for follow-up to revisit Supplemental Funding Request approved Cost Plan changes.	5	
120	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online for agency staff to enter text for missing information for a Supplemental Funding Request (SFR) and generate the standard Notice of Missing Information notification that includes the text entered by the agency staff.	5	
121	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online for agency staff to generate the standard approval notification for an approved Supplemental Funding Request.	5	
122	Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability to capture the dates associated with each submission and review of the supplemental funding request process.	5	
123	Supplemental Funding Request	Reports	The system shall provide the ability for agency staff to generate a report on the dates associated with each submission and review of the supplemental funding request.	5	

124	Technical	Interface	The system shall provide the ability online for batch interfaces to exchange data with current APD systems including but not limited to ABC, CDC+, iBudget, QSI etc. These interfaces will remain in place until the functionality of the current APD systems is incorporated into the CDMS solution.	2	These interfaces are included in Harmony's proposal and will leverage Harmony's integration architecture which allows interfaces to any third party system. As would be the case for any vendor, these specific interfaces will be developed as part of the implementation.
125	Waiver	Cost Plan	The system shall provide the ability online for agency staff to select a client and enter an annual cost plan budget information for the client.	4	
126	Waiver	Cost Plan	The system shall provide the ability online for agency staff to select a client and generate a Due Process Notification Letter for the client that lists: (A) the pre-approved service families and (B) the iBudget yearly allocation amount. This notification will be sent to clients/legal representative and Support Coordinator.	4	
127	Waiver	Cost Plan	The system shall provide the ability online for the waiver support coordinator and agency staff to only be able to create an annual cost plan for a client that has an annual budget	4	
128	Waiver	Cost Plan	The system shall provide the ability online to create a generic CDC provider and allow this provider to be associated with CDC client service plans until all the CDC+ functionality has been integrated into the CDMS system.	5	

129	Waiver	Cost Plan	The system shall provide the ability online for Support Coordinator and agency staff to enter service specific notes (at least 10,000 characters) on the client service plan which will appear on the provider service authorization for that service.	4
130	Waiver	Cost Plan	The system shall provide the ability online for waiver support coordinator and agency staff to select a client cost plan and create service plans from the list of pre-approved client services.	4
131	Waiver	Cost Plan	The system shall provide the ability online to only allow selection of providers for client service plans who have been approved to provide the selected service in the clients' geographic location.	4
132	Waiver	Cost Plan	The system shall provide the ability online to not allow a cost plan to be approved if the total service plan amounts exceed the clients' annual budget.	4
133	Waiver	Cost Plan	The system shall provide the ability online to not allow a service plan to be saved if adding the service plan will cause the clients total service plan amount to exceed the clients' annual budget.	4

134	Waiver	Cost Plan	The system shall provide the ability online to automatically send a cost plan for field office/regional review if a service plan for a critical service exists and the critical service has not been scheduled according to the critical service/group rules.	4	
135	Waiver	Cost Plan	The system shall provide the ability online for Support Coordinator and agency staff to modify the cost plan at any time for funds that have not been spent.	5	
136	Waiver	Cost Plan	The system shall provide the ability online to display the service name (not service code) for all service plan and service authorization lists, information pages and reports.	5	
137	Waiver	Cost Plan	The system shall provide the ability online to have a flag for Support Coordinator to indicate that client or authorized representative agrees with cost plan changes that Support Coordinator has made.	5	
138	Waiver	Cost Plan	The system shall provide the ability online to track the service authorization prior authorization (PA) number and date the PA number is returned by FMMIS.	5	
139	Waiver	Cost Plan	The system shall provide the ability online to create and send new and modified service authorization requests directly to FMMIS See form #133 for data elements	4	

140	Waiver	Cost Plan	The system shall provide the ability online to notify providers of service authorizations approved by FMMIS (with a PA number).	5	
141	Waiver	Cost Plan	The system shall provide the ability online to notify clients regarding any approved changes to service authorizations.	5	
142	Waiver	Cost Plan	The system shall provide the ability online for Support Coordinators and agency staff to copy the approved cost plan, make changes and maintain a history of changes.	5	
143	Waiver	Cost Plan	The system shall provide the ability online to notify clients and Support Coordinators when services plans are changed.	5	
144	Waiver	Cost Plan	The system shall provide the ability online for Support Coordinator and agency staff to approve a cost plan based on medical necessity and flexibility of services found in APD Rules and in AHCA iBudget Handbook rules.	5	
145	Waiver	Cost Plan	The system shall provide the ability online for agency staff to approve a cost plan that has been sent for area or central office review.	5	

146	Waiver	Cost Plan	The system shall provide the ability online to notify agency staff when a cost plan is manually sent for review by the Support Coordinator or includes a service plan for critical service that has not been scheduled according to critical service rules.	5	
147	Waiver	Cost Plan	The system shall provide the ability to maintain a history of annual budget changes for each client.	5	
148	Waiver	Cost Plan	The system shall provide the ability online to associate paid claims with current approved cost plans for each client.	5	
149	Waiver	Cost Plan	The system shall provide the ability online to allow cost plans and service authorizations to be exported to a PDF or Excel formats for printing. See form #133 for data elements	5	
150	Waiver	Cost Plan	The system shall provide the ability online to issue provider service authorizations at a minimum on a quarterly basis or when modified (not to exceed the current quarter).	5	
151	Waiver	Cost Plan	The system will automatically create and send service authorization requests to FMMIS for all service plans.	2	This interface is included in Harmony's proposal and will leverage Harmony's integration architecture which allows interfaces to any third party system. As would be the case for any vendor, the specific interface will be developed as part of the implementation.
152	Waiver	Reports	The system shall provide the ability online for agency staff to produce a report for Encumbered Funds by client.	5	

153	-	Waiver	Reports	The system shall provide the ability online for agency staff to produce reports for the CMS quality assurance points. See Forms #103,104	5	
154		Waiver	Waiver Enrollment	The system shall provide the ability online for agency staff to select a client and generate client waiver eligibility enrollment or denial decision correspondence based on the review of the Application for Services. See form #115, 123, 125, 126	5	
155	F	Waiver	Waiver Enrollment	The system shall provide the ability online for agency staff to select a client and assign a waiver support coordinator to the client, based on the clients choice from a list of approved available waiver support coordinators	5	
156	F	Waiver	Waiver Enrollment	The system shall provide the ability online for agency staff and waiver support coordinators to select a client and enter client-central record information including, but not limited to documents/forms listed below. See forms #'s: 41,42a, 132 Support Plan in addition but not limited to: 3a, 3b, 3c, 3d, 24, 35, 36, 37, 39, 39a, 40, 99, 74, 75, 76, 77, 132	5	

157	F	Waiver	Waiver Enrollment	The system shall provide the ability online for agency staff to select a client and enter pre-approved services from a list of waiver services. See List of Waiver Services for data elements # 151	5	
158	F	Provider	Billing	The system shall provide the ability online to deny service plans from being built if provider deficiencies are present (e.g. including, but not limited to; proof of insurance, licenses, and required training).	5	
159	F	Provider	Billing	The system shall provide the ability online to reject quarterly service authorizations from being created for providers with deficiencies (e.g. including, but not limited to; proof of insurance, licenses, and required training).	5	
160		Provider	Billing	The system shall generate a report from the quarterly service authorization process indicating which service authorizations were not created for these providers.	5	
161		Quality Assurance	Client general demographic data/information	The system shall provide the ability online to notify Support Coordinators when the annual support plan review/update is due or out of date.	5	
162	F	Quality Assurance	Client general demographic data/information	The system should provide the ability online for agency staff to select a client and enter data related to QSI assessments. See attached form for data elements #127 Page 123 of 182	5	

163	Quality Assurance	Client general demographic data/information	The system shall provide the ability online for providers and Support Coordinators to select a client, enter quarterly supported living plans and received notification when quarterly supported living plan reviews are due or out of date. See Rule for data elements needed # 161	5	
164	Quality Assurance	Client general demographic data/information	The system shall provide the ability online for providers and Support Coordinators to select a client, enter employment plans and received notification when employment Stability plan reviews are due or out of date. See form # 150	5	
165	Clinical	Clinical - MCM	The system shall provide the ability online for agency staff to select a client, enter, review, edit and approve Report of Death information. See attached forms for data elements #64,64a	5	
166	Clinical	Clinical - MCM	The system shall provide the ability online for agency staff to select a client, review, edit, and approve Medication Errors See attached forms for data elements #70,70a	5	

167	Clinical	Clinical - MCM	The system shall provide the ability online for providers and agency staff to select a client and enter client medication administration information for the Medication Administration Record (MAR) and required by Rule 65G-7 Medication Administration. See form 66a Other forms associated with medication 66, 67, 68, 69, 70, 70a, 71, 72, 73	4	
168	Clinical	Clinical - MCM	The system shall provide the ability online for agency staff to select a client and enter client PASRR History & Evaluation & Level II Summary Report information. See attached forms for data elements #74, 75	5	
169	Clinical	Clinical - MCM	The system shall provide the ability online for providers and agency staff to select a client and enter Nursing Assessment and Nursing Care Plan data. See attached forms for data elements #76, 77, 148	5	
170	Clinical	Clinical - MCM	The system shall provide the ability online for agency staff to generate a report on all information regarding ICF Continued Stay for clients in their field office/region. See form # 138	5	

171	Clinical	Clinical - MCM	The system shall provide the ability online to upload DOH Vital Statistic Report Of Death information and match it with client records based on social security number and date of birth. Agency staff must be able to review, edit and approve Report of Death information. See form #64	2	This interface is included in Harmony's proposal and will leverage Harmony's integration architecture which allows interfaces to any third party system. As would be the case for any vendor, the specific interface will be developed as part of the implementation.
172	Clinical	Clinical - MCM	The system shall provide the ability online for agency staff to select a client and enter client Medical Case Management review form information. See attached form for data elements #65	5	
173	Clinical	Clinical - MCM	The system shall provide the ability online for agency staff to select a client and enter law suit settlement requirements information (i.e. Sunland at Orlando).	5	
174	Clinical	Clinical - MCM	The system shall provide the ability online for agency staff to select a client and enter area client ICF continued stay information. See forms # 124, 145, 148	5	
175	Clinical	Clinical - MCM	The system shall provide the ability online to generate notifications to appropriate agency staff when client ICF Continued Stay information is due for review. See forms: #138, 144, Utilization Review (6 months).	5	

176		Report	Core Client Central Record and Waitlist/GR	The system should provide the ability online for agency staff to generate reports on non-paid supports listed in client support plans by field office/region and service.	5	
177	F	General	Document Management	The system shall provide the ability online for Support Coordinator and agency staff to select a client and attach client files/documents to the client record.	5	
178	F	General	Electronic Health Record	The system should provide the ability online to maintain an electronic health record for APD Clients in accordance with the ACA.	1	Although Harmony for Advanced Waiver Management includes most functionality associated with EHR, there is no immediate plan to seek EHR certification.
179	F	Clinical	Medication Record	The system shall provide the ability online for support coordinators, providers and agency staff to select a client record and attach medication information like prescriptions to the client record to maintain a medication history.	5	
180	F	Clinical	Medication Record	The system shall provide the ability online for support coordinators, providers and agency staff to select a client record and attach and display a picture of the client.	5	
181	F	General	Programs	The system shall provide the business logic that incorporates the rules, coverage and limitations of the current handbook. Example handbook See #134	5	

182	-	Quality Assurance	Quality Assurance	The system shall provide the ability online for providers and agency staff to enter and track background screening information for providers and their employees See form 109	5	
183	F	Quality Assurance	Quality Assurance	The system should provide the ability online for agency staff to upload pictures for supporting evidence of non-compliance.	5	
184	F	Quality Assurance	Quality Assurance	The system shall provide the ability online to send a notification to specified agency staff at specified intervals until the QIO alert has been addressed.	5	
185	F	Quality Assurance	Quality Assurance	The system should provide the ability online to have multiple dash boards related to Delmarva and CMS goals and objectives for common measures, and scorecards. See #162, 163 164,165,166 for visual example	5	
186	-	Quality Assurance	Quality Assurance	The system shall provide the ability online to produce provider scorecard reports based off the QIO and other Quality Assurance data.	5	
187	-	Report	Reports	The system shall provide the ability online to generate the reports listed on the "Reports" spreadsheet. See Reports spreadsheet.	5	

188	Waiver	Cost Plan	System shall provide the ability online to restrict client service plans from being built if there is already a client service plan for the service, provider, ratio, and date ranges (non- overlapping).	5	This requirement can be satisfied through existing functionality that allows for the configuration of customer specific automated workflow identified and specified as part of the implementation process.
189	Waiver	Cost Plan	The system shall provide the ability online for Support Coordinators to generate a report on service authorization requests returned from FMMIS with a rejected status.	5	
190	Provider	Provider	The system should provide the ability online for providers to enter client progress on Implementation plan goals.	4	



Appendix E: Functional and Technical Requirements – APD iConnect

Note: This excerpt is taken from the ITN for this project and reflects the values submitted by the selected vendor Harmony/WellSky in their BAFO

SECTION 1. Requirements

2.1 Functional Requirements

A functional requirement is a statement that expresses a capability of a system or the necessary task, action, or activity that must be accomplished by the system.

Functional requirements are geared towards addressing the business needs that the system must satisfy, but does not address how the system should accomplish them.

2.2 Non-functional Requirements

Non-Functional Requirements for a business system address those aspects of the system that, while not directly affecting the functionality of the system as seen by the users, can have a profound effect on how that business system is accepted by both the users and the people responsible for supporting that system.

The Non-Functional aspects of a business system cover a broad range of themes. The major non-functional themes are included in the requirements matrix under the column heading of System Area.

The requirements of the system to be delivered must be understood in each of these areas. All of these requirements are presented in a way that facilitates the design and development of the operational model, that is, the computers, networks, and other platforms on which the application will execute and by which it is managed. They also feed into the design of technical and application components. For example, service level requirements may imply component performance requirements. Functional and Non-functional Requirements together define the baseline against which the business system is designed. Just like a functional requirement, a Non-functional Requirement must be testable, quantitatively or qualitatively, in order to complete the acceptance testing process. Qualitative tests cannot be directly measured or inspected. Consider the requirement "the system must be available 24x7 with the exception of scheduled down time." Testing this requirement quantitatively would take too long and be very inspection intensive. Instead, this requirement could be tested by inspecting the system architecture and forming a conclusion as to whether there is any design impediment to satisfying the requirement.

The requirements matrix provided below must be updated for each individual requirement to indicate how each is planned to be met by the vendor's proposed solution. Columns to be completed and submitted with Section 4.3 of the vendor's response include:

Extent Met by Proposed Solution:

- 1. Doesn't Meet/Not Proposed
- 2. Custom Development
- 3. Meets with Modification of COTS
- 4. Currently proposed for future release of COTS
- 5. Fully Meets (includes configuration changes), installed and operational, can be demonstrated

SECTION 3. Information Technology and Business Supporting Requirements

This section contains the requirements that define the capabilities, functionality, performance, and other characteristics required of CDMS.

The requirements specified in this section may overlap or extend supporting requirements. In the event a requirement specified in this section or its subsections overlaps or extends a supporting requirement in a way that violates the supporting requirement, the requirement in this section supersedes.

As used in this section and its subsections:

- The words "must" and "shall" denote mandatory requirements
- The word "should" denotes a desired but not mandatory requirement
- The phrase "including but not limited to" denotes a list of items that is required but is not allinclusive
- The term "etc." denotes a list of items that is required but is not all-inclusive

The table below specifies the confirmed CDMS System Requirements. For requirements management and change control purposes, the following attributes of each requirement have been specified:

- Requirement Identifier (Req ID): is the unique identifier assigned to each requirement that will be maintained throughout the life of the system implementation effort. Design specifications and test cases must specify the requirements that they satisfy using the Requirement ID.
- **Requirement Type:** represents a general classification of each requirement. (F) Indicates a functional requirement and (NF) indicates a non-functional requirement.
- **System Area:** is a cross reference providing forward traceability into the design phase.
- **Requirement Description:** provides a definition of each requirement in terms of a statement of system capability or performance (i.e. the system shall perform x).
- Extent Met by Proposed Solution: provides an area for proposer's to indicate to which extent their proposed solution meets APD's requirement.
- Comments: provides an area for provider's to clarify their response. Providers may fill-in, if desired, to clarify the approach used to satisfy the requirement in the proposed solution.

REQ ID	REQ Type	System Area	Requirements Description	Extent Met by Proposed Solution	Comments
1.	Activity Logging	General	The system must provide an activity logging capability	5	
2.	Activity Logging	General	The system must retain a history whenever a user enters/updates/deletes any entity information, including the before and after value of the change, date and time of the change and userid of the person making the change.	5	
3.	Activity Logging	General	The system must periodically backup the activity logs to a physical storage outside of this system.	5	
4.	Architecture	General	The system architecture shall be based on and consistent with standard architecture, design, and implementation patterns that are fully supported by Microsoft .NET Framework.	5	
5.	Architecture	General	The system architecture shall provide a consistent model for data access and the data model must be abstracted and hidden from the business logic	5	
6.	Architecture	General	The system architecture shall support distribution of application layers over multiple physical tiers and must provide for fault- tolerance.	5	
7.	Architecture	General	The system architecture shall be easy to understand, transition, and maintain	5	
8.	Architecture	General	The system shall be based on a layered-system architecture where each layer of the architecture interacts with other layers through well-defined interfaces.	5	
9.	Architecture	General	The system shall facilitate a mechanism to deploy alternative implementations of a layer without significant disruption to other layers.	5	System is built on a service oriented architecture designed with strong separation of concerns between layers and components. This helps support the potential of interchanging layers and components.
10.	Architecture	General	The system must allow for incremental testing on a layer before the layers it depends on are fully implemented.	5	

11.	Architecture	General	The system shall provide an ability to switch out varying implementations of layer interfaces.	5	System is built on a service oriented architecture designed with strong separation of concerns between layers and components. This helps support the potential of interchanging layers and components.
12.	Architecture	General	The system architecture shall be easy to re-use, enhance, and extend.	5	
13.	Architecture	General	Under no circumstance is any COTS package to be modified in a way that will prevent future upgrades to newer versions of the COTS package (termed "modifications")	5	
14.	Architecture	General	Customizations to a COTS package are allowed if they fall within publicly-marketed allowable configurations or alterations which will NOT prevent future upgrades to newer version of the COTS package (termed "customizations")	5	
15.	Architecture	General	Any customizations to any COTS package must be fully documented, including the customization performed as well as the anticipated subsequent work effort anticipated with future upgrades.	5	
16.	Architecture	General	Integration of multiple COTS packages, or between COTS packages and custom development must involve ONLY previously proven and maintainable technologies. Vendor must be willing to provide reasonable verification of successful integration of proposed packages	5	
17.	Availability	General	All system unavailability, whether scheduled or emergency, should display an APD - approved message to anyone trying to access the system.	5	
18.	Availability	General	The system must consider normal working hours to be from 8:00 AM Eastern to 6:00 PM Eastern Time, Monday through Friday.	5	

AvailabilitySystem shall again be available to systems users within one hour following any application software failure.unscheduled emergen outage for extreme situations where we b it is in the best interes APD. For example, if t a security attack of so sort on the system or to apply emergency se patches. These are sp cases that we ask the	19.	Availability	General	During normal working hours, the system availability must equal or exceed to 99.9. Equipment availability will be calculated as follows: <u>UT 100%</u> UT + DT where: UT (Up Time) is defined as the time the equipment is available to and staffed by the customer for productive work (i.e., the time the equipment is processing customer programs or awaiting the processing of such programs, but excluding Preventive Maintenance and Down Time); and DT (Down Time) is defined as the time the equipment could have been processing customer programs but is being repaired or is awaiting repairs, or is awaiting changes to its control program(s) (excluding any time the Vendor must wait for the equipment to be released by the customer for repair).	5	Harmony may take an unscheduled emergency outage for extreme situations where we believe it is in the best interest of F APD. For example, if there a security attack of some sort on the system or need to apply emergency securit patches. These are special cases that we ask the FL AP to consider if such situation present themselves.
Availability Availability Availability basis. Except for routine maintenance of the system, web portals must be available at all	20.	Availability	General	system shall again be available to systems users within one hour following any application software	5	situations where we believe it is in the best interest of F APD. For example, if there a security attack of some sort on the system or need to apply emergency securit patches. These are special cases that we ask the FL AP to consider if such situation
	21.	Availability	General	capability to access the system through web portals on a 24x7 basis. Except for routine maintenance of the system, web portals must be available at all	5	

22.	Availability	General	The system preventive maintenance must be performed without impact to normal operations.	5	
23.	Availability	General	The system must include the capability to determine and record why the system was unavailable during normal working hours to users (e.g., hardware failure, software failure, preventive maintenance, or other reason).	5	
24.	Availability	General	The system must include the capability to provide a report on system availability for a specified period of time during normal working hours, upon user request.	5	
25.	Backup & Recovery	General	A Disaster Recovery Plan must be developed and maintained that includes detailed technical information regarding the offset recovery of the entire system in the event of a local disaster.	5	
26.	Backup & Recovery	General	The system shall provide data backup capability that meets the performance requirements of this ITN without interruption by a backup being recorded.	5	
27.	Backup & Recovery	General	The system shall recover database data up to the last committed transaction following a system failure.	5	
28.	Backup & Recovery	General	The system shall have redundancy.	5	
29.	Backup & Recovery	General	The system shall be fully recoverable and replicated to an off-site warm or hot site.	5	
30.	Backup & Recovery	General	Vendor must work with DSM Disaster Recovery coordinator to ensure that the Disaster Recovery Plan for CDMS is incorporated into the agency-wide Disaster Recovery Plan/COOP.	5	
31.	Capacity	General	The system must provide sufficient capacity to accommodate all existing legacy data that supports the iBudget and ABC systems as of the deployment date projected in this ITN as well as the following anticipating future workload and the associated Office workers. Specifically: a) The system must provide the capacity to store 75000 records including all	5	

			 associated records plus a 200% reserve . b) The system must have sufficient capacity to retain all data available from any of the data import sources and data exports, including all the data received or sent at the frequencies (daily, weekly, monthly) of the interface 	5	
			transactions, listed in the external interface table plus a 200% reserve.c) The system must allow for 20% annual growth for five		
			years.		
32.	Flexibility	General	The system shall support a Model- View-Controller pattern where the user interface can display multiple views of the same data.	5	
33.	Flexibility	General	The Model-View-Controller pattern shall be flexible for further specializations of this pattern such as Page Controller and Front Controller to achieve increased performance.	5	
34.	Flexibility	General	The system must utilize a Service Oriented approach for all external interfaces with other systems.	5	
35.	Flexibility	General	The system must allow for additional interfaces to be added or existing interfaces to be removed without negatively impacting the layers.	5	
36.	Flexibility	General	The system must be compatible with future implementations of enterprise application integration (EAI).	4	The system utilizes open and modern integration technology and techniques to ensure compatibility with future EAI.
37.	Interface	General	The system shall provide centralized software support for all system data interfaces including but not limited to interfaces with SETS, QSI, ABC, iBudget, LCMS, CDCPP, DOR, DEO, FMMIS, FLAIR, SAMAS, and DFS.	5	Harmony provides a set of well contained integration modules and technology that will be used to support and manage the required interfaces.
38.	Interface	General	The system must minimize the number of places (i.e., modules) where software modifications are required in order to implement changes in interface format, content, or additional interfaces.	5	Harmony provides a set of well contained integration modules and technology that will be used to support and manage the required interfaces.

39.	Interface	General	The system must provide a capability to perform validation of data from an external system without requiring any changes to the external system including but not limited to DOR, DEO, FMMIS, FLAIR, SAMAS, DFS, Providers.	3	
40.	Interface	General	The system must provide data validation for all data imported from any source based on configurable business rules for what data validations to perform for each data source.	3	
41.	Interface	General	The system must invalidate imported records for failure of required field validation in accordance with configurable business rules.	3	
42.	Interface	General	The system must provide a mechanism to correct the invalid import data.	5	Harmony understands that by definition each system interface will require its own unique development. Harmony has a proven capability with reference implementations where this or a similar requirement was addressed.
43.	Interface	General	When a data import record fails validation, the system must record which record failed and why it failed.	5	Harmony understands that by definition each system interface will require its own unique development. Harmony has a proven capability with reference implementations where this or a similar requirement was addressed.
44.	Interface	General	Upon user request, the system must output a report of records that failed data validation on import including, but not limited to, a record identifier and the reason data failed.	5	Harmony understands that by definition each system interface will require its own unique development. Harmony has a proven capability with reference implementations where this or a similar requirement was addressed.

45.	Interface	General	The system must determine whether or not to discard a record that fails import data validation based upon user-defined parameters that are specific to the data source from which data is being imported.	5	Harmony understands that by definition each system interface will require its own unique development. Harmony has a proven capability with reference implementations where this or a similar requirement was addressed.
46.	Interface	General	The system must monitor data imports and associated schedules from all external sources and shall notify an appropriate user or system operator when an expected data transmission has not occurred.	5	Harmony understands that by definition each system interface will require its own unique development. Harmony has a proven capability with reference implementations where this or a similar requirement was addressed.
47.	Interface	General	The system must fully meet the system performance requirements whether or not data import operations are on-going and avoid detrimental impact to user operations as a result of data import operations.	5	Harmony understands that by definition each system interface will require its own unique development. Harmony has a proven capability with reference implementations where this or a similar requirement was addressed.
48.	Interface	General	The system must at a minimum perform the following data validations:	5	

			 Required fields that are blank, empty, or null Required fields that contain invalid values including invalid special characters Alphabetic fields with numeric characters Numeric fields with alphabetic characters Numeric fields such as SSN, date of birth, and phone numbers Consistency with existing data when such data is available Convert values from external sources where appropriate to comply with data definitions in CDMS Date fields to contain valid dates (in a given / pre- determined date range) Dynamic comparison to compare values in different fields 		Harmony understands that by definition each system interface will require its own unique development. Harmony has a proven capability with reference implementations where this or a similar requirement was addressed.
			 Range checking to ensure that value entered in to a field is within the specified range. 		
49.	Performance	General	Internet website traffic must not affect system response times to the point of negatively impacting productivity of CDMS users.	5	
50.	Performance	General	Query, reporting, and decision- support functionality must not affect system response times to the point of negatively impacting productivity of APD staff	5	
51.	Performance	General	The system must complete any batch operations without impact to normal operations.	5	
52.	Performance	General	The system architecture must be designed to be responsive given current and projected workloads.	5	
53.	Performance	General	Prior to system implementation, Vendor must conduct stress testing sufficient to demonstrate expected system performance during heaviest anticipated loads, including internal and external web traffic simulations.	5	

54.		Contract		-	۱ ۱
	Performance	General	The system architecture must support distribution on separate physical tiers of the Web service interface code from the service implementation code.	5	
55.	Performance	General	 During normal working hours, for any user-requested operation that cannot be completed within 15 seconds of the last user action necessary to begin the operation, the system must provide a mechanism to: a) Predict how long the operation is likely to take b) Allow the user to cancel the operation c) Allow the user to run the operation as a background operation that will notify the requesting user when the operation is completed. d) Provide a visible indication of progress toward completion if the user chooses to continue running the operation. 		Any long running transactions (>15s) would be identified as part of the implementation and the appropriate measure taken to manage end user experience using a. b. c. or d. as described in the requirement description. Harmony may also propose alternatives that may meet APD approval.
56.	Platform	General	The system should utilize a Microsoft SQL Server database 2008 or higher	5	
57.	Platform	General	The system should deploy as a web-application in a Microsoft .Net-based platform	5	
58.	Platform	General	The system should deploy on Microsoft Windows servers	5	
59.	Reporting	General	The system shall include predefined reports as well as support for user creation of new reports.	5	
60.	Reporting	General	The system shall provide an ad hoc report building capability that allows a user with appropriate system privileges to define the content and format of a report on a one time basis or save the report for future use.	5	
61.	Reporting	General	The system should allow users with appropriate system privileges to modify or delete a previously defined report.	5	
62.	Reporting	General	Upon user request, the system shall export report data in a format that can be imported into standard APD word processing,	5	

		General	spreadsheet, PDF, database, and statistical tools (such as Microsoft Word, Microsoft Excel, Microsoft Access, SPSS, SAS), as well as standard data manipulation and simulation tools. For extensive reporting and	5	
63.	Reporting		decision support functionality, a separate data warehouse or data mart must be used. Query and reporting functionality against production transactional databases is strongly controlled. Ad hoc query and decision support functionality must utilize a separate non-CDMS-time database to avoid negatively impacting system response times.		
64.	Rule Based	General	The system must provide automated business rules and case-based decision making. The system must accommodate approved changes to business rules quickly by a user with the proper knowledge and authorization.	5	
65.	Rule Based	General	Rule and case-based decision- making must support APD business processes by allowing users with sufficient authority to specify and modify the adaptable business rules.	5	
66.	Rule Based	General	Rule-based decision-making shall support the APD business processes by recommending or automatically taking the next appropriate action based on adaptable business rules.	5	
67.	Rule Based	General	The initial set of business rules shall be determined during the requirement and design portions of the implementation effort, and shall be included as a part of the deployment of the system.	5	
68.	Security	General	All confidential or sensitive data being transmitted outside the APD network must be protected by encryption (e.g. SSL, SFTP, etc.) and not be sent via e-mail	5	
69.	Security	General	The system must comply with APD Enterprise Security Policies.	5	
70.	Security	General	The System must be fully HIPAA and HITECH compliant.	5	

71.	Security	General	The system must not require more than one login and password entry across the entire CDMS system.	5	Harmony supports the SAML federated single sign-on standard and utilizes Microsoft Active Directory Federation Server. Harmony will coordinate with APD on part of the project to sign with APD's specific SSO standards.
72.	Security	General	The standard APD security warning message must be prominently displayed on the login page.	3	Harmony will tailor the login page to include the APD security warning message.
73.	Security	General	The system must provide a security role mechanism to limit access to objects, including but not limited to displays, fields within displays, forms, and reports, to users with sufficient system privileges to see the information or perform the operation. Security roles shall be based upon Segregation Of Duties defined during design and shall define the user's system privileges, identifying what objects, including but not limited to displays, fields within displays, forms, and reports, the user can access and what updates or deletions the user is allowed to make.	5	
74.	Security	General	The system shall provide the ability to restrict access of the caregiver to only the clients assigned to them based on their authenticated, unique system ID and, if applicable, their assigned role(s).	5	
75.	Security	General	The system must provide a capability to deactivate and archive a former user account.	5	
76.	Security	General	The system must not allow a user that has logged in to be deleted. Only user accounts that were created but never logged in can be deleted.	5	
77.	Security	General	Users must receive an error message that they are not authorized for that screen, as applicable.	5	

78.		General	The system must provide for	4	
	Security		identification and security for records with characteristics of high-profile, confidential records (user or user-related records). The system must proceed with records processing to an optimum level in these records without user involvement.		
79.	Security	General	The system must prohibit the ability of a user without sufficient security privileges to access high-profile records.	5	
80.	Security	General	The system must prohibit the ability of a user to access records identified as confidential record for that user.	5	
81.	Security	General	The system must provide authorized staff the ability to insert and override data and provide an audit trail for the changes.	5	
82.	Security	General	The system must provide security mechanisms when accessing external interfaces.	5	
83.	Security	General	The system must provide the capability to identify, for each record, system users authorized to access the record's information.	5	
84.	Security	General	The system must provide the capability to collect security audit information, including but not limited to Security Administrator actions, user logins and logouts, and tracking the access of each user to each object, including but not limited to displays, fields within displays, forms, reports and screens that are classified as 'Display only' screens.	5	
85.	Security	General	The system must provide capabilities to automatically report security audit information including but not limited to the capabilities to report audit information by user and to report audit information by record.	5	
86.	Security	General	The system must provide the capability to generate security audit information reports for each user on randomly selected records as well as the capability to view all the details for any user.	5	
87.	Security	General	The system must provide the capability to encrypt the records, and restricted access for electronic filing, and electronic signatures.	5	

88.	Security	General	The system must provide a mechanism to track and audit users that have conflicting Segregation of Duties (SOD) Roles.	5	
89.	Security	General	The system must provide a mechanism to add conflicting SOD Roles for a user only after user gets approval authorization.	5	
90.	Security	General	The system must provide a mechanism to do 'What if' scenarios before adding a new Role to a Composite Role or a new Transaction to a Role to ensure that it does not result in SOD conflict.	3	Application security model does not require the concept of composite roles and inherently mitigates the risk.
91.	Security	General	The system must provide a mechanism to do 'What if' scenarios before adding a new Role to a user to ensure that it does not result in SOD conflict.	3	Application security model does not require the concept of composite roles and inherently mitigates the risk.
92.	Usability Requirements	General	 The system must use state of the art GUI conventions: a. Radio buttons to indicate mutually exclusive input choices b. Check boxes to accept a binary input for a set of independent choices c. Scrolling fields for values that are too large to be entirely displayed d. Scrolling forms for a display too large to be completely displayed at one time e. Ability to minimize, maximize, and restore windows f. Ability to cut, copy and paste (in accordance with normal Windows operations) for approved CDMS screens. 	5	System has been designed to and uses appropriate controls to optimize user experience. Consistent design and use patterns are maintained throughout the system for ease of use.
93.	Usability Requirements	General	The system must use menus, buttons, hyperlinks, or some similar mechanism to select a desired program function from a set of available program functions.	5	
94.	Usability Requirements	General	Navigation must be intuitive, easy to use, consistent, and well planned regarding opening new windows, locking records, etc.	5	

95.	Usability Requirements	General	 The system must minimize needed user keystrokes and pointer movement by providing at a minimum: a. Cursor movement via a pointing device b. The ability to select from a limited number of possible input items, when appropriate c. Default values for user entry 	5	
			 items, in every case where appropriate d. Visually indicated default buttons that are activated if user presses Enter or Escape e. Shortcut keys f. Drop down lists 		
96.	Usability Requirements	General	The system must organize all screen displays and data input fields in a consistent manner.	5	
97.	Usability Requirements	General	Screen displays must fit on a 1024 x 768 screen without horizontal scrolling	5	
98.	Usability Requirements	General	The system must consistently name all display, form, and report data fields across all displays, forms, and reports where the vendor has the option.	5	
99.	Usability Requirements	General	The system must avoid using cryptic (e.g., numeric) codes on all user displays and reports. This does not prohibit data from being stored using cryptic codes, but the codes must be interpreted before being output to the user in displays or reports. It also does not prohibit displaying commonly understood codes, such as state abbreviations. If the system uses pneumonic alphabetic codes for storing information and displays them to the user, the system must provide a mechanism to allow the user to easily request and receive the full meaning of the code. This could be achieved with a popup or tip interpretation (Alt Tag) if the pointing device lingers over the code or by allowing the user to right click on the code to request the full meaning.	5	

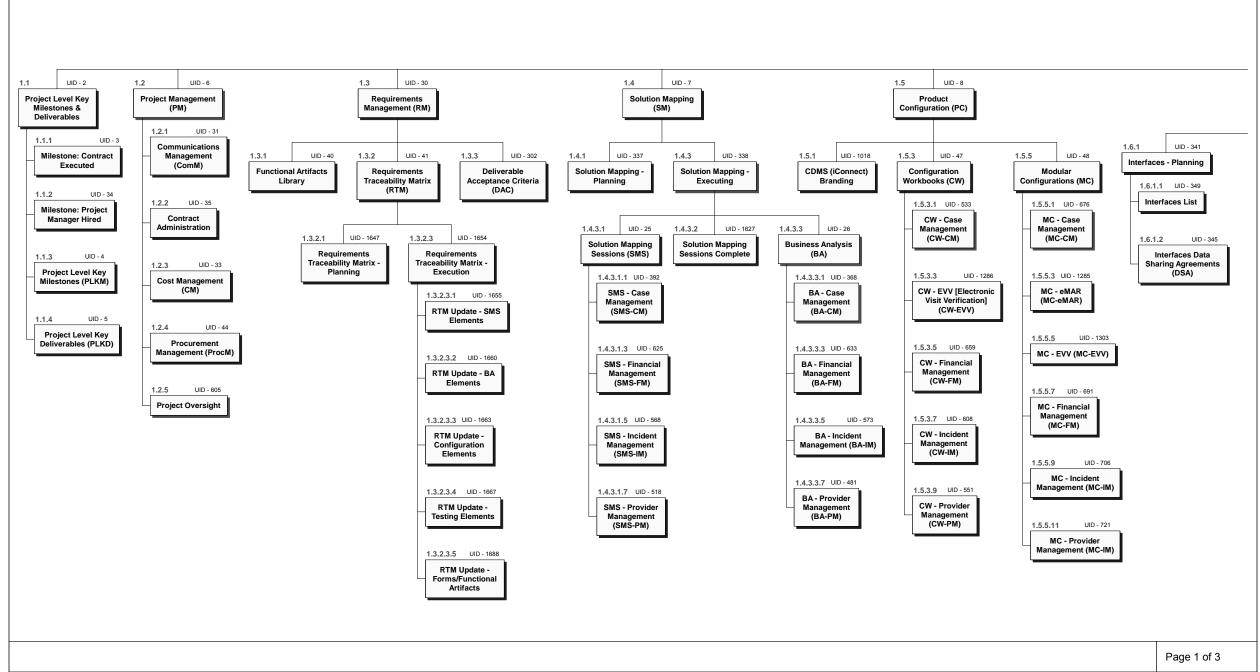
100.		General	The system must provide on-line	5	
	Usability		help that includes but is not limited to:	-	
	Requirements		 Addresses the needs of all different types of users (e.g. APD Employees, Providers, etc.) 		
			 Provides access to explanation and suggested response for all CDMS error messages that can be output to a user 		
			 Provides Step-by-step instructions to include required fields, status updates for various conditions and associated time frame if any. 		
			 Includes access to the Operations Procedures and Policy Clarification Memos 		
			e. Includes access to User Manual		
			 Includes access to the APD Policy and Procedures Manual and APD Rules 		
			 Provides users a search capability which includes easy access to a search 		
			 Provides the ability for the user to print a single help topic or an entire document. 		
101.	Usability Requirements	General	When a user enters a record the system must not require the user to re-enter the defining information for the record for subsequent screens/tabs/activities, but will allow the user to overwrite the defining information if a different record is desired and close all windows on previous record.	5	
102.	Usability Requirements	General	The system must provide Intranet user access via the current version of the APD standard web browser.	5	
103.	Usability Requirements	General	The system must provide Internet access via the current version of the APD standard browser. If Internet user browser data is available that shall be used for the browser standard.	5	

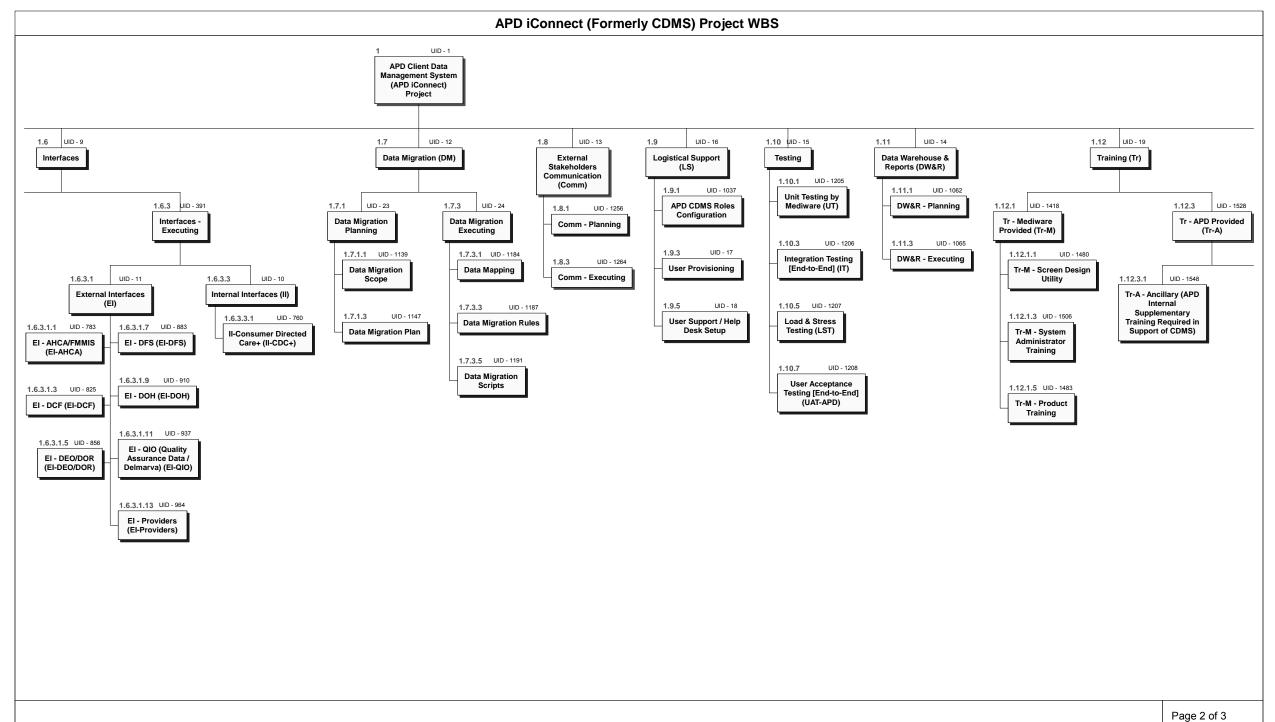
104.	Usability Requirements	General	The system must provide for user creation of standard "comments" in some assisted way (such as use of a pull down list) for repetitive comments made in recording activity on a record on different components of the system.	5	
105.	Usability Requirements	General	The system must provide for user entry of free-text comments that are associated with a specific person, task, or activity on a record.	5	
106.	Usability Requirements	General	The system must provide a search capability to locate, including but not limited to, cases, persons, collections, tasks, or activities based on the content of related database fields, including comments and associated documents.	5	System includes global search functionality today with the exception of comments and associated documents, which are planned for a future release.
107.	Usability Requirements	General	The system must provide the ability to enter an address once and select the various address fields to which that address pertains.	4	
108.	Usability Requirements	General	The system must provide warnings to users and operators of impending problems such as running out of storage space, length of time to accomplish substantive tasks, loss of network access, and other such conditions.	5	
109.	Usability Requirements	General	All error messages must be relevant, intuitive, consistent, and inform the user of the specific error and what corrective action to take.	5	
110.	Usability Requirements	General	Users must receive immediate confirmation of forms successfully or unsuccessfully generated.	5	
111.	Usability Requirements	General	Print menus must identify local vs. central printers and require confirmation if a form is not sent to the normal print queue.	5	

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112.	Usability Requirements	General	The system, including training for the system, must be ADA compliant. All CDMS electronic information and technology must be accessible for persons with disabilities. Specifically, CDMS must provide access to persons with sight impairments, including those with visual impairment or total blindness. Additionally, the contractor will be required to implement any necessary usability requirements that may result from changes in Florida Statutes or law prior to full deployment of the system. The CDMS System must comply with SB 2021.	4	
113.	Usability Requirements	General	The Intranet and Internet Web Portal must comply with the Americans Disabilities Act and Section 508 (Subpart A-D) of the Rehabilitation Act of 1973.	4	
114.	Usability Requirements	General	The system must utilize consistent user controls across the entire system.	5	
115.	Usability Requirements	General	The system must use upper case (capital) letters in all addresses, and edit and/or convert to capitals regardless of the input source, including but not limited to external interface files.	4	
116.	Usability Requirements	General	The system must be consistent in its use of lower and upper case letters, although a single system- wide solution is not required.	5	
117.	Usability Requirements	General	The system must include automation of system activities to the fullest extent possible.	5	
118.	Usability Requirements	General	The system must be able to communicate via email, and local and central print.	5	
119.	Usability Requirements	General	The system should provide programmable work-flows and notifications. Notifications should employ email as a communications medium at a minimum.	5	

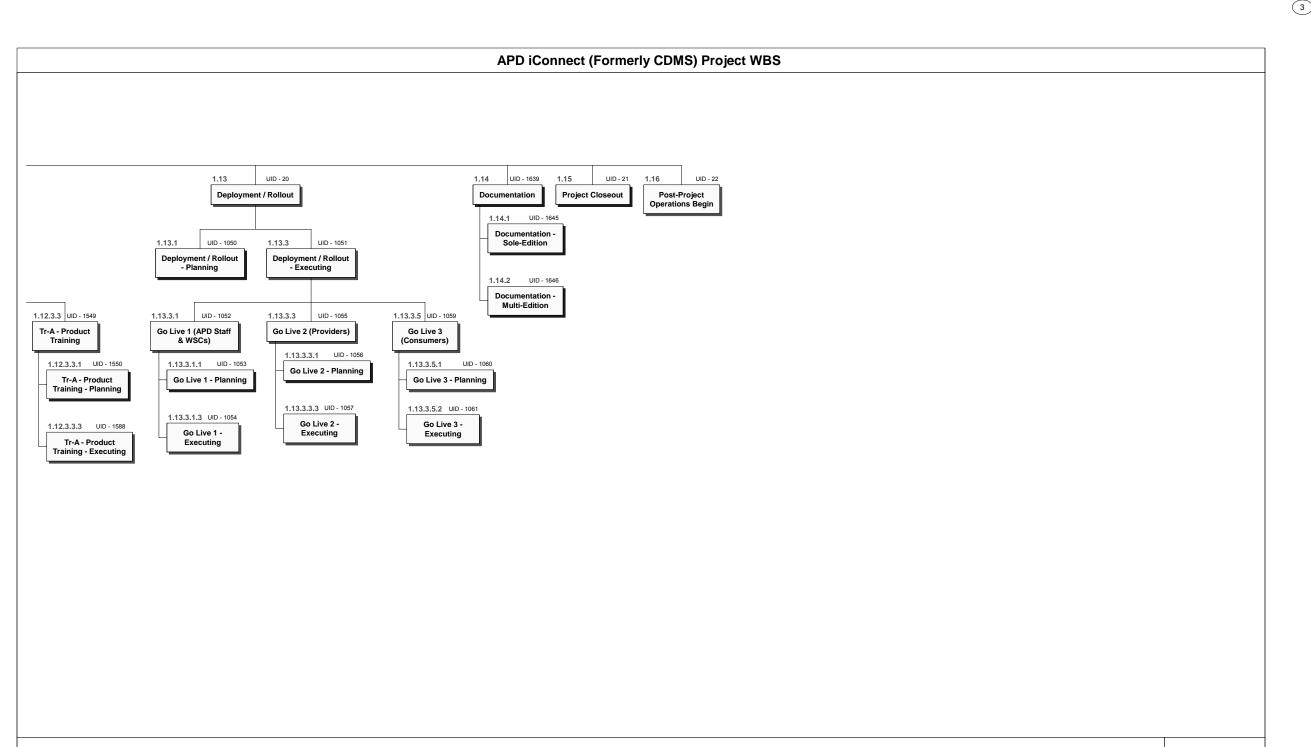
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APD iConnect (Formerly CDMS) Project WBS





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	Jul-2015	Sep-2015	Oct-2015	Nov-2015	Jan-2016	Feb-2016	Mar-2016	Apr-2016	Jun-2016	Jul-2016	Aug-2016	Sep-2016	Oct-2016	Nov-2016 Dec-2016	Jan-2017	Feb-2017	Mar-2017	Apr-2017	Jun-2017	Jul-2017	Aug-2017	Sep-2017	Oct-2017	Nov-2017 Dec-2017	Jan-2018	Feb-2018	Mar-2018	Apr-2018 May-2018	Jun-2018	Jul-2018	Aug-2018	Oct-2018	Nov-2018	Dec-2018	Jan-2019 Feb-2019	Mar-2019	Apr-2019	May-2019	Jul-2019	Aug-2019	Sep-2019	Oct-2019	Nov-2019 Dec-2019	Jan-2020	Feb-2020	Mar-2020	Apr-2020	Jun-2020
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Group 1: Case Provider, Financial Management: (APD Staff) Interface, Data Conversion, Training, Deployment)																																																
Group 2: (WSC's) Data Conversion, Training, Deployment)																																																
Function 3 /Group 3: (Providers) EVV and eMAR Training and Deployment																																																
Consumer Portal: APD Consumers (Training and Deployment)																																																
Harmony Advanced Reporting																																																
Project Closeout																																																
Software as a Service (SaaS) License Fees																																																

Implementation Plan	
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SCHEDULE D	K: MAJOR AU	UDIT FINDINGS AND	RECOMMENDATIONS	Budget Period: 2019 -2020	
Department:	Agency for Pe	rsons with Disabilities	Chief Internal Auditor:	Shawn McCormick	
Budget Entity:	67100100, 6710	0200, 67100400, 67100500	Phone Number:	. (850) 414-8774	
(1) REPORT	(2) PERIOD	(3)	(4) SUMMARY OF	(5) SUMMARY OF	(6) ISSUE
NUMBER	ENDING	UNIT/AREA	FINDINGS AND RECOMMENDATIONS	CORRECTIVE ACTION TAKEN	CODE
OIG # 161109-01	11/13/2017	Revenue Management	 Finding 1: The Random Moment Sampling (RMS) Transmittal Letters and RMS instructions are inconsistent with the Agency's Public Assistance Cost Allocation Plan (PACAP) RMS instructions. In addition, the RMS Transmittal Letters and RMS Instructions do not provide clear and consistent guidance to employees and RMS Coordinators. Recommendation 1: We recommend that the RMS Transmittal Letters agree with the PACAP RMS instructions. We further recommend the Agency revise RMS instructions to provide clear and consistent guidance to employees and RMS Coordinators to ensure the accurate completion and review of all RMS observation forms. 		
			 Finding 2: RMS observation forms are not always completed accurately and reviewed sufficiently and validated in accordance with RMS Instructions. In additional, the administration and handling of RMS observation forms is not always consistent and lacks effective controls. Recommendation 2: RMS Coordinators ensure the accurate completion and sufficient review of all RMS observation forms. Specifically, RMS coordinators verify (1) the sample has completed all steps of the RMS process accurately and timely, (2) all forms have been accounted for, (3) all forms are date/time stamped and received by State office weekly, (4) all corrections are made timely and consistent with the RMS instructions, (5) all forms requiring validation have been validated, and (6) only the information included on the form is entered into the RMS system. 	<u>Corrective action completed.</u> Revenue Management developed training which was delivered via Skype in November 2017 for employees and RMS Coordinators to explain the instruction and RMS process. In addition, Revenue Management continues to provide one on one training to new employees and coordinators on an on-going basis.	

SCHEDULE IX	: MAJOR A	UDIT FINDINGS AND	RECOMMENDATIONS	Budget Period: 2019 -2020	
Department:	Agency for Pe	rsons with Disabilities	Chief Internal Auditor:	Shawn McCormick	
Budget Entity:	67100100, 6710	0200, 67100400, 67100500	Phone Number:	(850) 414-8774	
(1) REPORT	(2) PERIOD	(3)	(4) SUMMARY OF	(5) SUMMARY OF	(6) ISSUE
NUMBER	ENDING	UNIT/AREA	FINDINGS AND RECOMMENDATIONS	CORRECTIVE ACTION TAKEN	COD
OIG # 170811-02.1	1/11/2018	Area 3 Family Care Council (FCC)	 Finding 1: Although meeting minutes were recorded and included the FCC members' decision to approve sponsoring two families to attend the annual youth summit, the minutes failed to identify which two families would attend and which specific expenditures would be reimbursed. Recommendation 1: Northeast Region FCC Liaison work with the FCC members to ensure expenditures are authorized by the FCC members and recorded in the minutes prior to approving expenditures for payment. 	<u>Planned corrective action.</u> The Northeast Region FCC Liaison will provide training to Area 3 FCC members and require members to list expenditures when approving meeting minutes. Furthermore, Area 3 FCC will move forward with an election of a Secretary to properly record meeting minutes, and to publish for public inspection. The Northeast Region FCC Liaison will ensure that expenditures are authorized by FCC members, and reflected correctly in the meeting minutes; prior to approving expenditures.	
			Finding 2: The Northeast Region is utilizing an additional travel form (<i>Travel Reimbursement Information</i>) that is not required, nor Agency approved. Additionally, the form contains erroneous instructions, specifically, the meal allowance travel periods are incorrect. Recommendation 2: Northeast Region FCC Liaison and Northeast Office staff cease using the <i>Travel Reimbursement Information</i> form.	discontinued the use of the <i>Travel Reimbursement Information</i> form, initiated the use of the correct forms and made note of the correct meal	

(1) REPORT (2) (3) PERIOD

(1)	(2)	(3)	(4)	(5)	(6)
REPORT	PERIOD		SUMMARY OF	SUMMARY OF	ISSUE CODE
NUMBER	ENDING	UNIT/AREA	FINDINGS AND RECOMMENDATIONS Finding 3: For two payments (totaling \$688.46), the Authorization to Incur Travel Expense forms were not approved by Agency Management prior to when the travel occurred. For one payment, the form was approved five days after travel occurred. For the remaining payment, the form was approved 18 days after travel occurred. For two payments (totaling \$918.64), there were errors on the Voucher for Reimbursement of Traveling Expenses and Vicinity/Map Mileage Log forms. These errors included recording incorrect travel dates and times and claiming mileage not supported by odometer readings. Three expenditures for per diem, meals and mileage were incorrectly coded as payment for in state travel by a State employee instead of payment for in state travel incurred by a non-employee. Recommendation 3: Northeast Region FCC Liaison provide training to the Area 3 FCC members regarding the Agency's policies and procedures. We also recommend the Northeast Region FCC Liaison and Northeast Region Office staff enhance procedures to ensure that all travel expenditures are appropriately supported and approved; and the review of travel vouchers is documented.	CORRECTIVE ACTION TAKEN <u>Corrective action completed.</u> The Northeast Region FCC Liaison has developed and implemented a tracking system for all FCC member travel requests. The requests are reviewed in conjunction with the meeting minutes submitted to Northeast Region staff for prior approval, and State Office approval. Northeast Region FCC Liaison is utilizing an updated Vicinity/Map Mileage Log, as well as Voucher for Reimbursement of Traveling Expenses. <u>Planned corrective action</u> . The Northeast Region FCC Liaison will provide training to FCC members on the codes and proper completion of the travel forms to alleviate future problems with expenditures.	CODE
OIG # 170811-02.2	1/11/2018	Area 4 Family Care Council (FCC)	Finding 1: For eight payments related to travel reimbursement, although minutes were recorded and included the FCC members' decision to approve sponsoring seven families up to \$750 per family to attend Family Café, the minutes failed to identify which seven families would attend and the specific expenditures for which they would be reimbursed. Recommendation 1: Northeast Region FCC Liaison work with the FCC members to ensure expenditures are authorized by the FCC members and recorded in the minutes prior to approving expenditures for payment.	<u>Corrective action completed.</u> Area 4 FCC members are trained to be more detailed when approving meeting minutes for expenditures. A back-up Secretary has been appointed, to assist with the meeting notes; verifying that the meeting minutes have date, time, attendees, motions, budget decisions, names & ages of travelers, and expenditures being reimbursed with set amounts, if applicable.	

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS

Agency for Persons with Disabilities

Budget Entity: 67100100, 67100200, 67100400, 67100500

Department:

Budget Period: 2019 -2020

Chief Internal Auditor:	Shawn McCormick
Phone Number:	(850) 414-8774

Department: Chief Internal Auditor: Shawn McCormick Agency for Persons with Disabilities **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (3) (1) (2) (4)(5)SUMMARY OF SUMMARY OF REPORT PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN Corrective action completed. The Northeast Region FCC Liaison trained Finding 2: For five payments (totaling \$2,165.14), the Authorization to Incur Travel Expense Area 12 FCC members that all Authorization to Incur Travel Expense forms forms were not approved by State Office management. For one payment (totaling \$533.66), must be submitted for approval to both Northeast Region staff, and State the form was approved 20 days after travel occurred. For one expenditure (totaling \$19.00), the Office management no less than two weeks in advance of planned travel; and traveler did not include a statement on the Voucher for Reimbursement of Traveling Expenses approval to travel must be documented in the prior month's meeting minutes. form that the traveler voluntarily claimed less than the full meal allowance authorized by Additionally, the Northeast Region FCC Liaison developed and implemented Florida Statutes. a tracking system for all FCC member travel requests to oversee the timeframe involving Northeast Region staff and State Office staff approval, **Recommendation 2:** Northeast Region FCC Liaison provide training to the Area 4 FCC and verify meeting minute prior to the approval of the travel. members regarding the Agency's policies and procedures. Additionally, Northeast Region FCC Planned corrective action. The Northeast Region FCC Liaison will provide Liaison and Northeast Office staff enhance procedures to ensure that all travel expenditures are training to FCC members to include detailed meeting minutes; completing all appropriately supported and approved, and the review of travel vouchers is documented. forms; writing statements on vouchers for further clarification, and viewing their own vouchers/forms before submitted for processing ... Corrective action completed. The Northeast Region FCC Liaison reminded Finding 1: For six payments (totaling \$2,061.61), the Authorization to Incur Travel Area 12 FCC members that all Authorization to Incur Travel Expense forms Expense forms were not approved by Agency management prior to when the must be submitted for approval to both Northeast Region staff, and State travel occurred. Additionally, one expenditure for reimbursement mileage was incorrectly Office management no less than two weeks in advance of planned travel; and coded as payment for meal allowance for a non-state employee when it should have been code approval to travel must be documented in the prior month's meeting minutes. as payment for mileage allowance for in-state travel for a non-state employee. Additionally, the Northeast Region FCC Liaison developed and implemented Area 12 Family Care OIG # 170811-02.3 1/11/2018 a tracking system for all FCC member travel requests to oversee the Council (FCC) Recommendation 1: Northeast Region FCC Liaison and Northeast Region Office staff timeframe involving Northeast Region staff and State Office staff approval, enhance procedures to ensure that all travel expenditures are appropriately supported and and verify meeting minute prior to the approval of the travel. . approved, and the review of travel vouchers is documented. In addition, Northeast Region Planned corrective action. The Northeast Region FCC Liaison will provide Office staff and State Office staff verify the appropriate accounting codes are recorded on the reimbursement forms and input into FLAIR prior to completing the transactions. training to FCC members on the specific payment coded to alleviate future problems with expenditures.

Budget Period: 2019 -2020

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CODE

Department: Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (3) (1) (2) (4) (5)SUMMARY OF SUMMARY OF ISSUE REPORT PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Finding 2: For one payment (totaling \$490.00) for postage stamps, there was no documentation to support the items had been received nor the payment was approved by the Agency. Additionally, one expenditure for printer toner was incorrectly coded as payment for non-consumable office supplies when it should have been coded as payment for consumable Planned corrective action. The Financial Agent for Northeast Region will be asked to assist with checking that all codes for FCC purchases are correct office supplies. prior to State Office approving expense and processing. Recommendation 2: Northeast Region FCC Liaison and Northeast Region Office staff enhance procedures to ensure the receipt, inspection, and acceptance of purchases are documented and to ensure expenditures are correctly coded. Finding 1: For one payment (totaling \$808.38) related to travel, the traveler flew from Pensacola to Orlando, attended the FCC meeting in Orlando, then flew from Orlando to Corrective action completed. The Regional Operations Manager discussed Atlanta. However, the point of origin to destination of travel included on the traveler's Voucher for Reimbursement of Traveling Expenses form did not match the airline receipts. the online arranging for travel with FCC member to identify a means to Additionally, for one transaction related to airfare, the traveler was reimbursed for travel ensure that the receipts provided for the flights show that these are round trip Area 1 Family Care Council OIG # 170811-03.1 1/4/2018 protection coverage. This resulted in an unallowable cost of \$27 to the Area 1 FCC. flights that begin and end in Pensacola as approved by the authorization to (FCC) incur travel. Additionally, the Regional Operations Manager will ensure that **Recommendation 1:** Northwest Region Office staff enhance procedures to ensure that all both the FCC member and the Administrative Secretary who processes travel expenditures incurred by the FCC comply with applicable State expenditure requirements. In understands that travel protection coverage is not an allowable expense. addition, we recommend the Agency determine whether the traveler should reimburse the State for the additional costs

Budget Period: 2019 -2020

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS Budget Period: 2019 -2020 **Department:** Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (3) (1) (2) (4) (5)SUMMARY OF SUMMARY OF ISSUE REPORT PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Finding 2: For five payments (totaling \$1,798) related to travel reimbursements, the accounting code recorded on the Voucher for Reimbursement of Traveling Expenses forms, and Corrective action completed. The Northwest Region Administrative subsequently input into FLAIR, were incorrectly coded to Area 1 FCC instead of Area 2 FCC. Secretary verifies the proper accounting codes with the Northwest Region Workstream lead to ensure that as travel forms are being processed, proper Recommendation 2: Northwest Region Office staff and State Office staff verify the accounting codes are being used. appropriate accounting codes are recorded on the reimbursement forms and input into FLAIR prior to completing the transactions. Finding 3: Although the minutes of the meetings were recorded, the minutes did not include Corrective action completed. The Northwest Region Operations Manager the FCC members' decisions to approve expenditures related to interpreting services for FCC has discussed findings with the FCC Chairperson and the requirement to meetings, printing of FCC booklets, and travel reimbursements. ensure that all expenditures are prior approved by the council members and reflected in the meeting minutes. Additionally, the Northwest Region Recommendation 3: Northwest Region Office staff work with the FCC members to ensure Operations Manager has suggested that the line item of approval for expenditures are authorized by the FCC members and recorded in the minutes prior to interpretation services is reflected in the FCC annual budget and the exact approving expenditures for payment. expenditure reflected in meeting minutes.

Department: Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (1) (3) (2) (4) (5)SUMMARY OF SUMMARY OF ISSUE REPORT PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Finding 4: For four payments related to travel advances (totaling \$1,570.33), the Authorization to Incur Travel Expense forms were not approved by Agency management prior to the approval of the Application for Advance of Travel Expense forms. For four payments (totaling Corrective action completed. The Northwest Region Operations Manager \$2,813.20), the Authorization to Incur Travel Expense forms were approved by Agency and the Northwest Region Administrative Secretary ensure that the travel management between four and seven days after travel occurred. advance form is routed prior to the approval of the Application for Advance of Travel form being signed. Recommendation 4: Northwest Region Office staff enhance procedures to ensure that all travel authorization forms are appropriately completed and approved prior to making any travel arrangements. Finding 5: Our review of the Area 1 FCC expenditures for community outreach activities (e.g. event flyers and sign language services), disclosed two expenditures (totaling \$543) where the Corrective action completed. The Northwest Region Operations Manager POs were not completed prior to the purchases and after-the-fact POs were issued. For both provided training at the next scheduled FCC meeting on the requirement that expenditures, the after-the-fact requisitions did not contain the required information. all expenditures must be prior approved. Additionally, the Northwest Region Operations Manager reviewed the required elements of the After the Fact Recommendation 5: Northwest Region Office staff work with the FCC members to ensure memo with the Administrative Workstream Lead who processes After the requisitions and purchase orders are issued and approved prior to the procurement of goods and Fact memos. services.

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS

Budget Period: 2019 -2020

Department: Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (3) (1) (2) (4) (5) SUMMARY OF REPORT SUMMARY OF ISSUE PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Finding 6: Our review of the Area 1 FCC expenditures for administrative supplies and community outreach activities, disclosed an expenditure for sign language interpreting service Corrective action completed. The Northwest Region Operations Manager was incorrectly coded as payment for contracted services not otherwise classified when it reviewed the finding with the Administrative Workstream lead who should have been coded as payment for interpreter services. processes payments for the Family Care Council to clarify proper coding for sign language interpreter services for future purchases and to ensure that Recommendation 6: Northwest Region Office staff work with State Office staff to ensure proper codes are being utilized when state office processes in FLAIR. expenditures are correctly coded. Finding 1: Our review of the minutes of the Area 2 FCC meetings disclosed that, for six Planned corrective action. Northwest Region Operations Manager will work payments, related to travel reimbursement, the minutes did not include the FCC members' with the Area 2 FCC to ensure that meeting minutes consistently reflect the decisions to approve the expenditures prior to when the travel occurred. Area 2 Family Care Council action taken at the FCC meetings to approve travel. Additionally the OIG # 170811-03.2 1/4/2018 (FCC) Northwest Region will ensure that the minutes also reflect specifically the Recommendation 1: Northwest Region Office staff work with the FCC members to ensure dollar amount the FCC is approving per traveler as well as what specifically expenditures are authorized by the FCC members and recorded in the minutes prior to will be reimbursed for each traveler. approving expenditures for payment.

Budget Period: 2019 - 2020

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS Budget Period: 2019 - 2020 **Department:** Chief Internal Auditor: Shawn McCormick Agency for Persons with Disabilities **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (3) (1) (2) (4) (5)SUMMARY OF SUMMARY OF ISSUE REPORT PERIOD NUMBER UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE ENDING Planned corrective action. The Northwest Region Administrative Secretary Finding 2: For one payment (totaling \$733.12), the Authorization to Incur Travel Expense will enhance procedures to ensure the Authorization to Incur travel is fully form was not approved by Agency management prior to when travel occurred. routed and signed before travel occurs. Because FCC travel is routed to multiple staff at the State office for signature, the Northwest Region Recommendation 2: Northwest Region Office staff enhance procedures to ensure that all Administrative Secretary will send the Authorization to Incur Travel forms travel authorization forms are appropriately completed and approved prior to making any travel for routing at a time period that will allow for sufficient routing prior to arrangements. travel occurring. Finding 1: The Agency's Information Security Program document does not address key policy areas. Additionally, the Agency has not developed standards or procedures for authorizing and assigning user access privileges to Active Directory. Our audit also disclosed there is a lack of an IT process framework, a lack of adequate supervisory practices; the System Access Request Form (SARF) instructions do not identify all IT resources and do not identify the owners of the IT resources, the Agency does not maintain an inventory of Active Directory groups, and the paper-based SARF process is inefficient and lacks adequate management controls. Planned corrective action. IT management indicated that many key policy areas have been, and others will be, addressed in separate policies. This is an **Recommendation 1**: IT management: 1) revise the Agency Information Security Program document to address the key policy areas noted above; 2) develop written security ongoing process. Additionally, IT management indicated that IT is in need administration procedures for authorizing and assigning user access privileges to Active of a management system, tools, and staff resources, to facilitate growth and Division of Information OIG # 171107-01 6/13/2018 Technology Directory, this will ensure that access privileges granted are appropriately controlled according maturity of an IT process framework. IT will continue to develop and implement the electronic access request application to eliminate the paperto management's expectations; 3) establish a documented IT process framework; 4) ensure access control staff have sufficient training and skills to execute their roles and responsibilities based SARF process. The estimated date of full implementation of the and that they are adequately supervised; 5) revise the SARF instructions to include all IT electronic access request systems is June 30, 2020. resources and the owners of those resources: 6) establish an inventory of Active Directory groups, including the group's access, business owner, and functionality, in accordance with an approved data classification policy; and 7) continue to develop and implement the electronic access request application to eliminate the paper-based SARF process. In addition, we recommend that IT management and staff work with the Agency's business units to determine whether all 1,488, as of March 9, 2018, Active Directory groups are necessary and if any can be eliminated

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Department: Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (1) (3) (2) (4) (5) SUMMARY OF REPORT SUMMARY OF ISSUE PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Finding 4: The Agency had not established procedures for, and had not performed, a periodic review of SharePoint and Active Directory user access privileges. IT management indicated Planned corrective action. IT will continue to develop and implement the they perform ad hoc reviews of user access privileges but have not conducted a formal review electronic access request application to eliminate the paper-based SARF since 2014. process and facilitate periodic reviews of access privileges. The estimated date of full implementation of the electronic access request systems is June Recommendation 4: IT management establish procedures for, and perform, periodic reviews 30, 2020. of SharePoint and Active Directory user access privileges to ensure that the access privileges defined for users are authorized and remain appropriate. Finding 5: The Agency did not timely deactivate 20 of 63 user accounts for employees who Planned corrective action. IT will work with Agency management to separated from the Agency between July 1, 2017 and November 30, 2017. The 20 accounts improve procedures for removing access for employee terminations and job remained active from 4 to 90 days after the users' separation dates. changes. Recommendation 5: Agency management improve procedures to ensure user access privileges Corrective action completed. The 20 user accounts were disabled. are timely deactivated.

Budget Period: 2019 - 2020

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS

Budget Period: 2019 -2020

Department: Agency for Persons with Disabilities

Chief Internal Auditor: Shawn McCormick

Budget Entity: 67100100, 67100200, 67100400, 67100500

Phone Number: (850) 414-8774

	PERIOD ENDING	UNIT/AREA	SUMMARY OF FINDINGS AND RECOMMENDATIONS	SUMMARY OF CORRECTIVE ACTION TAKEN	ISSUE CODE
	LIDING	UT THE A			
AG Report No. 2018- 189	FY 2016-17	Statewide Federal Awards Audit	Finding 1: The Florida Agency for Persons with Disabilities (FAPD) did not always ensure that continued stay reviews were conducted every 6 months for beneficiaries of Intermediate Care Facility Services for the Developmentally Disabled (ICF-DDs). Recommendation 1: Enhance oversight controls for continued stay reviews to ensure the reviews of ICF-DD beneficiaries are timely conducted in accordance with Federal regulations.	Corrective action completed. Florida Agency for Persons with Disabilities (FAPD) issued a Request for Information to ascertain if there are vendors interested in contracting to provide the Utilization Review (UR)/Continued Stay Review (CSR) function. Regional FAPD offices hired temporary Other Personal Services (OPS) positions to help support the workload issue. These temporary positions will be dedicated to the completion of Continued Stay Reviews. FAPD conducts monthly Medical Case Manager conference calls (Statewide and Regional) for staff (including supervisors). Intermediate Care Facility Services (ICF) UR/CSR is a standard topic on the agenda. Agency for Health Care Administration (AHCA) promulgated their revisions to the ICF Handbook and the State Plan July 2016. The Handbook does not address procedure. FAPD does not have rule making authority specific to the ICFs. FAPD continues to work with AHCA regarding AHCA promulgating rules for the ICF UR/CSR process. FAPD continues to monitor Regional completion of Continued Stay Reviews and Certificates of Need completed by the facilities. Planned corrective action. FAPD will submit a Request for Proposal (RFP) by the end of the summer to procure a vendor to administer the UR/CSR process. FAPD has worked on an updated CSR form and procedure but has not moved further until the RFP process is complete.	
AG Report No. 2017- 204	5/26/2017	Activities		<u>Corrective actions completed</u> . APD 4 0015, Application and Eligibility Determination Operating Procedure was revised effective 10/16/2017. Along with the specific requirements for eligibility determination, this procedure includes a section that addresses the periodic review of eligibility prior to authorizing services. <u>Planned corrective action</u> . The Agency is continuing to work with a contractor to develop APD iConnect system, which will serve as the client central record and collect eligibility information.	

Department: Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (1) (3) (2) (4) (5) SUMMARY OF REPORT SUMMARY OF ISSUE PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Finding 2: The Agency had not established policies and procedures addressing all Agency administrative support functions Planned corrective action. All identified policies and procedures are in Recommendation: We recommend that Agency management establish policies and procedures various states of drafting or review and finalization. addressing all administrative support functions. Such policies and procedures should reflect current Agency operating practices; address the requirements established by State law, rules, and other guidelines; and provide benchmarks against which compliance can be measured. Corrective action completed. Effective November 1, 2017 Contract Finding 3: The Agency did not conduct required contract monitoring activities during the Administration finalized and approved the contract monitoring risk period assessment process and contract monitoring tools, and is performing contract July 2014 through January 2016. monitoring activities such as desk audits as required. Recommendation: We recommend that Agency management finalize and approve the contract Planned corrective action. Effective January 1, 2018 Contract monitoring risk assessment process and contract monitoring tools, and ensure that required Administration will utilize the results of the desk audits and risk assessment contract monitoring activities are completed in accordance with State law, DFS guidelines, and to establish and administer on-site monitoring visits for Agency Contract Agency procedures. Providers.

Budget Period: 2019 -2020

Department: Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (3) (1) (2) (4) (5) SUMMARY OF SUMMARY OF REPORT PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN Corrective action completed. Contract Administration utilizes contract Finding 4: Agency records did not always evidence that cost analyses were prepared for action checklists, which contracts procured or awarded on a noncompetitive basis. includes the Cost Analysis (per APD 08 001), to verify that all required contract and procurement documents have been included in executed Recommendation: We recommend that Agency management ensure that, for contracts contracts Upon contract execution, the Contract Administrator and/or procured or awarded on a noncompetitive basis, the cost analyses required by the DFS are designee notifies Contract Management staff via email that all required completed and retained in Agency records. Department of Financial Services information must be placed in FACTS and retained in a contract management file. Finding 5: Agency records did not always evidence that individuals participating in the contract Corrective action completed. Contract Administration utilizes a Conflict of procurement or award process were independent of, and had no conflicts of interest related to, Interest Questionnaire Required Staff form (CA-08A), to denote all responding vendors or award recipients. individuals who are required to sign the Conflict of Interest Questionnaire Form during the contract award process. Upon contract execution, the Recommendation: We recommend that Agency management enhance controls to ensure that Contract Administrator and/or designee notifies Contract Management staff Conflict of Interest Questionnaires are completed by all individuals involved in the contract via email that all required documentation must be retained in a contract procurement and award processes and that the completed Conflict of Interest Questionnaires management file. are retained in Agency records.

Budget Period: 2019 - 2020

(6)

ISSUE

CODE

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS Budget Period: 2019 -2020 **Department:** Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (2) (3) (1) (4) (5)SUMMARY OF SUMMARY OF ISSUE REPORT PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Finding 6: The Agency did not always document whether contractors who received Federal Corrective action completed. Prior to Contract Administration routing, the and State financial assistance were appropriately classified as recipients, subrecipients, or Contract Manager utilizes the FSAA Vendor Determination Checklist and/or vendors as required by Federal regulations and the Florida Single Audit Act. Federal Vendor Determination Checklist (per APD 08 001), to determine provider's status. Prior to contract execution, the Contract Administrator Recommendation: We recommend that Agency management enhance procedures to ensure and/or designee reviews supporting documentation (Procurement that applicable Federal and State Determination Checklists evidencing the Agency's Documentation) to confirm Contract Manager's determination. Upon determination of a contractor's status as a recipient/subrecipient or vendor are appropriately contract execution, the Contract Administrator and/or designee notifies completed prior to contract execution, supported by adequate records, subjected to appropriate Contract Management staff via email that all required and supporting supervisory review, and retained in Agency records. documentation must be retained in a contract management file. Finding 7: The Agency did not always timely post contract information to the Florida Accountability Contract Tracking System (FACTS) as required by State law. Corrective action completed. Within five (5) days of contract execution, the Contract Administrator and/or designee notifies Contract Management staff Recommendation: We recommend that Agency management enhance staff training to promote via email that all required Department of Financial Services information the timely posting of contract and procurement documentation to FACTS as required by State must be placed in FACTS within a thirty (30) day timeframe. law.

Department: Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (3) (1) (2) (4) (5) SUMMARY OF REPORT SUMMARY OF ISSUE PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Finding 8: The Agency could not always demonstrate that contract payments were supported by adequate documentation, correctly calculated, made in accordance with applicable contract terms, or accurately recorded in the Florida Accounting Information Resource Subsystem Corrective action completed. The original response for this corrective action (FLAIR). has been modified and addressed with the use of the Invoice Review Checklist Form (CA-37). Effective November 1, 2017, Contract Recommendation: We recommend that Agency management enhance controls to require that, Management Staff utilize this form to verify the accuracy and documentation prior to approving invoices for payment, contract managers obtain and review all required of submitted invoices. records and reports and verify that the invoiced amounts are allowable and properly calculated We also recommend that Agency management ensure that contract payments are correctly recorded in FLAIR. Finding 9: The Agency could not provide documentation evidencing that contracts for transportation services had been negotiated at the most cost effective rate. Planned corrective action. The Agency developed and is routing an operating procedure regarding Transportation services. The procedure Recommendation: To ensure that transportation services rates are negotiated at the most cost standardizes information collected to determine transportation rates and effective rate, we recommend that Agency management establish policies and procedures for staff to use when negotiating rates. Such policies and procedures should require that Agency reiterates requirements to retain all information on file. records evidencing that the transportation services contracts were awarded at the most cost effective rate be maintained with the contract documents.

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS

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Department: Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (3) (1) (2) (4) (5) SUMMARY OF SUMMARY OF ISSUE REPORT PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Planned corrective action. Community Supports has started discussions with the State Office Contracts unit on providing training and clarification of Finding 10: The Agency did not always document the procurement of Employment Enhancement Project (EEP) services with a written agreement or accurately record EEP standard procedures for FACTS, FLAIR and the ABC system. Since the contract information in FLAIR, FACTS, or the Agency's Allocation, Budget, and Contract training is not developed at this time, the Agency has provided guidance and Control system. clarification for EEP contracts. **Recommendation:** We recommend that Agency management enhance staff training and Corrective action completed. Community Supports has also implemented a new standard site to save all EEP agreements. This will standardize the oversight to ensure that EEP services are procured using contracts or purchase orders and EEP contract information is appropriately entered into FACTS, FLAIR, and the ABC system. location of all agreements to ensure the Agency has saved records of the EEP agreements. Finding 11: Agency controls did not always ensure that EEP contract payments were supported by adequate documentation, correctly calculated, or made only after the receipt of contract Planned corrective action. Community Supports has started discussions with deliverables. the State Office Contracts and Budget team on set processes and requirements. Community Supports is also working on a formal process to Recommendation: We recommend that Agency management enhance regional office contract ensure standard procedures Statewide. Since the training is not developed at manager training related to EEP contract terms and the Handbook. Additionally, we this time, the Agency has provided guidance and clarification for EEP recommend that the State Office strengthen oversight controls to ensure that invoices for EEP contracts. contractual services are sufficiently reviewed prior to payment.

Budget Period: 2019 -2020

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS Budget Period: 2019 - 2020 **Department:** Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (1) (3) (2) (4) (5) SUMMARY OF REPORT SUMMARY OF ISSUE PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE Finding 12: Agency property records did not include, for all property items, the information required by Department of Financial Services (DFS) rules. Planned corrective action. The Agency continues to establish policies and procedures for the management of Agency records which will include the Recommendation: We recommend that Agency management enhance property controls to information required by DFS rules. ensure that Agency property records include for each property item the information required by DFS rules. Finding 13: The Agency had not established a review board to examine and make recommendations on the approval or disapproval of Agency surplus property. In addition, Agency property records did not include for surplused and disposed property items all the information required by State law and DFS rules. Planned corrective action. The Agency continues to establish policies and procedures for the management of Agency property records which will Recommendation: We recommend that, in accordance with State law, the Agency Director include all information required by DFS rules and the establishment of a establish a review board to examine and make recommendations regarding the Agency's surplus property review board. surplus property. Additionally, Agency management should ensure that Agency property records and the surplus form include for surplus and disposed property items all the information required by State law and DFS rules.

Department: Agency for Persons with Disabilities Chief Internal Auditor: Shawn McCormick **Budget Entity:** 67100100, 67100200, 67100400, 67100500 Phone Number: (850) 414-8774 (6) (2) (3) (1) (4) (5)SUMMARY OF REPORT SUMMARY OF ISSUE PERIOD NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE **Finding 14:** The Agency did not ensure that a complete annual physical inventory of Agency property was conducted or that Agency property records were timely updated for the results. In addition, Agency inventory records did not demonstrate that the condition of property items had been verified during the inventory, or that property custodians had not personally inventoried Planned corrective action. The Agency continues to establish policies and property items for which they were responsible. procedures for the management of Agency property records which will include all information required by DFS rules and annually conducting an Recommendation: We recommend that Agency management take steps to ensure that a inventory of Agency property. complete annual physical inventory of Agency property is conducted and Agency property records are timely updated for the results. We also recommend that Agency management take steps to ensure that Agency property records are accurate and that all required information is included. Finding 15: The Agency did not always timely cancel purchasing cards upon a cardholder's separation from Agency employment. Completed corrective action. The Purchasing Office now receives a biweekly report of Appointments and Separations which is used to verify that all terminated employee Pcards have been deactivated. Recommendation: We recommend that Agency management ensure that purchasing cards are promptly canceled upon a cardholder's separation from Agency employment. In addition, we recommend that Agency management revise purchasing card procedures to reflect current Planned corrective action. Policy 01-004, Purchasing Card Policies and operating practices and require supervisors to immediately notify the PCPA of a cardholder's Procedures, is in the process of being updated. separation from Agency employment.

Budget Period: 2019 -2020

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Budget Period: 2019 - 2020

SCHEDULE I	X: MAJOR AU	UDIT FINDINGS AND	RECOMMENDATIONS	Budget Period: 2019 -2020	
Department:	Agency for Pe	rsons with Disabilities	Chief Internal Auditor:	Shawn McCormick	
Budget Entity:	67100100, 67100	0200, 67100400, 67100500	Phone Number:	(850) 414-8774	
(1)	(2)	(3)	(4) SUMMARY OF	(5)	(6) ISSUE
REPORT NUMBER	PERIOD ENDING	UNIT/AREA	FINDINGS AND RECOMMENDATIONS	SUMMARY OF CORRECTIVE ACTION TAKEN	CODE
			 Finding 18: As similarly noted in our report No. 2014-056, Agency travel reimbursement requests were not always adequately supported or paid in accordance with the requirements of State law. Recommendation: To ensure compliance with State law and DFS rules, we again recommend that Agency management ensure that, prior to reimbursement, the reasonableness and allowability of claimed mileage be verified and documented in Agency records. In addition, we recommend that Agency management enhance travel procedures to specify the nature and extent of trip log reviews and audits and how the reviews and audits should be documented. 	<u>Completed corrective action</u> . The Agency continues to review its travel policy and to work with supervisors and employees on proper recording of mileage and review. <u>Planned corrective action</u> . The travel policy may be updated to provide additional guidance, but is still under review at this time.	

Office of Policy and Budget - June 2018

Fiscal Year 2019-20 LBR Technical Review Checklist

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

Agency Budget Officer/OPB Analyst Name: Debbie Patten/ Julie Vickers				
A "Y" indicates "YES" and is acceptable, an "N/J" indicates "NO/Justification Provided" - the	se require furthe	er explanation/jus	tification (addi	itional sheets
	Program or Service (Budget Entity Codes)			odes)
Action	67100100	67100200	67100400	67100500

1. GENE	RAL				
1.1	Are Columns A01, 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 (no trust fund files for narrative columns)? Is Column A02 set to TRANSFER CONTROL for DISPLAY status and MANAGEMENT CONTROL for UPDATE status for the Trust Fund Files (the Budget Files should already be on TRANSFER CONTROL for DISPLAY and MANAGEMENT CONTROL for UPDATE)? Are Columns A06, A07, A08 and A09 for Fixed Capital Outlay (FCO) set to TRANSFER CONTROL for DISPLAY status only (UPDATE status remains on OWNER)? (CSDC or Web LBR Column Security)	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? (CSDC)	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 Column A12 security been set correctly to ALL for DISPLAY status and MANAGEMENT CONTROL for UPDATE status for Budget and Trust Fund	1	1		1
	files? (CSDR, CSA)	Y	Y	Y	Y
TIP	The agency should prepare the budget request for submission in this order: 1) Copy Column A03 to Column A12, and 2) Lock columns as described above. 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 to the portal.				
	BIT 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	V	V	V	V
2.2	Are the statewide issues generated systematically (estimated expenditures,	Y	Y	Y	Y
2.2	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
3.1	BIT B (EXBR, EXB) 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
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.				

		Prog	ram or Service (l	Budget Entity C	odes)
	Action	67100100	67100200	67100400	67100500
		0/100100	0/100200	0/100400	0/100500
TIP	Exhibit B - A02 equal to B07: Compares Current Year Estimated column to a				
111	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				
111	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, a Special Categories appropriation category				
	(10XXXX) should be used.				
4. EXHI	BIT 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 62 of the LBR	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. EXHI	BIT D-1 (ED1R, EXD1)				
5.1	Are all object of expenditures positive amounts? (This is a manual check.)	Y	Y	Y	Y
AUDITS			1		-
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 [with a \$5,000				
	allowance] need to be corrected in Column A01.)				
		37	17	v	37
5.4	A01/State Accounts Disbursements and Carry Forward Comparison Report: Does	Y	Y	Y	Y
5.4	Column A01 equal Column B08? (EXBR, EXBD - Differences [with a \$5,000				
	allowance at the department level] 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 2017-18 approved budget.				
	Amounts should be positive. The \$5,000 allowance is necessary for rounding.				
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. Note that there is a \$5,000 allowance at the department level.				
	BIT D-3 (ED3R, ED3) (Not required in the LBR - for analytical purposes only.)		3.7	17	*7
6.1	Are issues appropriately aligned with appropriation categories?	Y	Y	Y	Y
TIP	Exhibit D-3 is not 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 БУНІ	BIT D-3A (EADR, ED3A) (Required to be posted to the Florida Fiscal Portal)				
7.1	Are the issue titles correct and do they clearly identify the issue? (See pages 15				
/.1	through 29 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 pages 67 through 69 of the LBR	Y	Y	Y	Y
		1	1	1	<u> </u>

		Program or Service (Budget Entity Co			Codes)
	Action	67100100	67100200	67100400	67100500
7.3	Does the narrative for Information Technology (IT) issue follow the additional narrative requirements described on pages 69 through 72 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. (See pages 95 and 96 of the LBR	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 #19-002?	Y	Y	Y	Y
7.11	When appropriate are there any 160XXX0 issues included to delete positions placed in reserve in the LAS/PBS Position and Rate Ledger (e.g. unfunded grants)? Note: Lump sum appropriations not yet allocated should <u>not</u> be deleted.	Y	Y	Y	Y
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?	Y	Y	Y	Y
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 issue codes relating to special <i>salary and benefits</i> issues (e.g., position reclassification, pay grade adjustment, overtime/on-call pay, etc.) have an "A" in the fifth position of the issue code (XXXXAXX) and are they self-contained (not combined with other issues)? (See pages 28 and 90 of the LBR Instructions.)	Y	Y	Y	Y
7.17	Do the issues relating to <i>Information Technology (IT)</i> have a "C" in the sixth position of the issue code (36XXXCX) and are the correct issue codes used (361XXC0, 362XXC0, 363XXC0, 17C01C0, 17C02C0, 17C03C0, 24010C0, 33001C0, 30010C0, 33011C0, 160E470, 160E480 or 55C01C0)?	Y	Y	Y	Y
7.18	Are the issues relating to <i>major audit findings and recommendations</i> properly coded (4A0XXX0, 4B0XXX0)?	Y	Y	Y	Y
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	Does the General Revenue for 160XXXX (Adjustments to Current Year Expenditures) issues net to zero? (GENR, LBR1)	Y	Y	Y	Y
7.21	Does the General Revenue for 180XXXX (Intra-Agency Reorganizations) issues net to zero? (GENR, LBR2)	Y	Y	Y	Y
7.22	Does the General Revenue for 200XXXX (Estimated Expenditures Realignment) issues net to zero? (GENR, LBR3)	Y	Y	Y	Y

		Program or Service (Budget Entity Codes)				
	Action	67100100	67100200	67100400	67100500	
Action 67100100 67100200 67100400 67100 7.23 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 TIP Salaries and Benefix amounts entered using the OADAC 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 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 67 through 72 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 Lamp Sum appropriations in Column A02 do on appace in Column A03. Review budget amendments to verify that 160XXX0 issue amounts correspond accurately and net to zero Gr General Revenue funds. TIP If an agency is receiving federal funds, from another agency that originally receives the funds directly from the federal agency should use FSI = 3 (Federal Funds). TIP If an agency and in unb FY 2018-19 General Appropriations Act duplicates an appropriation made in substantive legislation, the agency must create a unique deduct norrecurring issue to eliminate the duplicated appropriation. Normally this is taken care of through line item vto. SCIHEDULE 1 & RELATED DOCU					-	
7.23	(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	Y	Y	Y	Y	
TIP	thoroughly justified in the D-3A issue narrative. Agencies can run OADA/OADR from STAM to identify the amounts entered into OAD and ensure					
TIP	3A issue. Agencies must ensure it provides the information necessary for the OPB and legislative analysts to have a complete understanding of the issue					
TIP	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					
TIP	(Transfer - Recipient of Federal Funds). The agency that originally receives the					
TIP	duplicates an appropriation made in substantive legislation, the agency must create a unique deduct nonrecurring issue to eliminate the duplicated					
8. SCHE	EDULE I & RELATED DOCUMENTS (SC1R, SC1 - Budget Entity Level or SC	C1R. SC1D - De	partment Level)	(Required to	be posted to	
	Has a separate department level Schedule I and supporting documents package				Y	
8.2	Has a Schedule I and Schedule IB been completed in LAS/PBS for each operating				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?	N/A	N/A	N/A	N/A	
8.8	If the agency is scheduled for the annual trust fund review this year, have the necessary trust funds been requested for creation pursuant to section 215.32(2)(b), Florida Statutes - including the Schedule ID and applicable legislation?		N/A	N/A	N/A	
8.9	Are the revenue codes correct? In the case of federal revenues, has the agency appropriately identified direct versus indirect receipts (object codes 000700, 000750, 000799, 001510 and 001599)? For non-grant federal revenues, is the correct revenue code identified (codes 000504, 000119, 001270, 001870,	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	

		Progr	am or Service (E	Budget Entity Co	odes)
	Action	67100100	67100200	67100400	67100500
			•	•	
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				
0.15	estimates appear to be reasonable?	Y	Y	Y	Y
8.14	Are the federal funds revenues reported in Section I broken out by individual	1	1	1	1
0.14	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	1	1	1	1
0.15	federal fiscal year)?	N/A	N/A	N/A	NI/A
0.16	-			_	N/A
8.16	Are the Schedule I revenues consistent with the FSI's reported in the Exhibit D-	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?	Y	Y	Y	Y
8.21	Are nonoperating expenditures to other budget entities/departments cross-				
	referenced accurately?	Y	Y	Y	Y
8.22	Do transfers balance between funds (within the agency as well as between	_		_	_
0.22	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	1	1	1	-
0.25	Section III?	Y	Y	Y	Y
8.24		1	1	1	1
8.24	Are prior year September operating reversions appropriately shown in column A01, Section III?	V	37	V	37
0.05		Y	Y	Y	Y
8.25	Are current year September operating reversions (if available) appropriately shown in column A02, Section III?	37	37	37	37
	,	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?	N/A	N/A	N/A	N/A
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				
0.00	eliminate the deficit).	Y	Y	Y	Y
8.31	Is the June 30 Adjusted Unreserved Fund Balance (Line I) equal to the July 1	1	1	-	1
0.51	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")	V	V	V	V
0.00		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
8.33	Has a Schedule IB been provided for ALL trust funds having an unreserved fund				
	balance in columns A01, A02 and/or A03, and if so, does each column's total				
	agree with line I of the Schedule 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

	A .'	-	ram or Service (1
	Action	67100100	67100200	67100400	6710050
THE					
TIP	The Schedule I is the most reliable source of data concerning the trust funds. It is				
TID	very important that this schedule is as accurate as possible!				
TIP	Determine if the agency is scheduled for trust fund review. (See page 128 of the LBR Instructions.) Transaction DFTR in LAS/PBS is also available and provides				
	an LBR review date for each trust fund.				
TID					
TIP	Review the unreserved fund balances and compare revenue totals to expenditure totals to determine and understand the trust fund status.				
TID					
TIP	Typically nonoperating expenditures and revenues should not be a negative				
GOUE	number. Any negative numbers must be fully justified.				
	DULE II (PSCR, SC2)				
AUDIT:			Г		
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 instified in the D 2A issue presenting. (See Prese Prese Audit on present 159 of the				
	justified in the D-3A issue narrative. (See Base Rate Audit on page 158 of the	Y	Y	Y	Y
	EDULE III (PSCR, SC3)		1		1
10.1	Is the appropriate lapse amount applied? (See page 93 of the LBR Instructions.)	Y	Y	Y	Y
10.2	Are amounts in Other Salary Amount appropriate and fully justified? (See page			1	
	96 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
I. SCH	EDULE 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 (with "C" in 6th position or within a program				
	component of 1603000000), they will not appear in the Schedule IV.				
2. SCH	EDULE 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 be included in the priority listing.	Y	Y	Y	Y
3. SCH	EDULE VIIIB-1 (EADR, S8B1)				
13.1	NOT REQUIRED FOR THIS YEAR	N/A	N/A	N/A	N/A
4. SCH	EDULE VIIIB-2 (EADR, S8B2) (Required to be posted to the Florida Fiscal Por	tal)	1		
14.1	Do the reductions comply with the instructions provided on pages 102 through	,			
	104 of the LBR Instructions regarding a 10% reduction in recurring General				
	Revenue and Trust Funds, including the verification that the 33BXXX0 issue has				
	NOT been used? Verify that excluded appropriation categories and funds were not				
	used (e.g. funds with FSI 3 and 9, etc.)	Y	Y	Y	Y
TIP	Compare the debt service amount requested (IOE N or other IOE used for debt				
	service) with the debt service need included in the Schedule VI: Detail of Debt				
	Service, to determine whether any debt has been retired and may be reduced.				
5. SCH	EDULE VIIIC (EADR, S8C) (This Schedule is optional, but if included it is requ	ired to be post	ed to the Florid	a Fiscal Portal)
15.1	Does the schedule display reprioritization issues that are each comprised of two	r obt			,
	unique issues - a deduct component and an add-back component which net to zero			1	
	at the department level?	N/A	N/A	N/A	N/A
15.2	Are the priority narrative explanations adequate and do they follow the guidelines				
	on pages 105-107 of the LBR instructions?	N/A	N/A	N/A	N/A
15.3	Does the issue narrative in A6 address the following: Does the state have the				1,711
10.0	authority to implement the reprioritization issues independent of other entities				
	(federal and local governments, private donors, etc.)? Are the reprioritization			1	
	issues an allowable use of the recommended funding source?	N/A	N/A	N/A	N/A
AUDIT:		11/11	11/A	1VA	
15.6	Do the issues net to zero at the department level? (GENR, LBR5)	Y	Y	Y	Y
10.0	Do the issues net to zero at the department level: (GEIIR, LDR3)	1	iled instruction	1	I

		Progr	ram or Service (B	udget Entity Co	odes)
	Action	67100100	67100200	67100400	67100500
			-		-
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 I	INCLUDED IN THE SCHEDULE XI REPORT:			•	
16.3	Does the FY 2017-18 Actual (prior year) Expenditures in Column A36 reconcile	[1	
10.0	to Column A01? (GENR, ACT1)	Y	Y	Y	Y
16.4	None of the executive direction, administrative support and information		_	_	_
10.1	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	-	1	1	-
10.5	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	1	1	1	1
10.0	which <u>should</u> appear in Section II? (Note: The activities listed in Audit #3 do				
	not have an associated output standard. In addition, the activities were not				
	identified as a Transfer to a State Agency, as Aid to Local Government, or a				
	Payment of Pensions, Benefits and Claims. Activities listed here should represent				
	transfers/pass-throughs that are not represented by those above or administrative				
	costs that are unique to the agency and are not appropriate to be allocated to all	Y	Y	Y	Y
16.7	Does Section I (Final Budget for Agency) and Section III (Total Budget for	1	1	1	1
10.7	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	1	1	1	1
111	therefore will be acceptable.				
17 MAN	UALLY PREPARED EXHIBITS & SCHEDULES (Required to be posted to th	o Florido Figor	l Dontol)		
	Do exhibits and schedules comply with LBR Instructions (pages 113 through 155	e rioriua risca	rortar)		
17.1	of the LBR Instructions), and are they accurate and complete?	Y	Y	Y	Y
17.2	Does manual exhibits tie to LAS/PBS where applicable?	I Y	Y	Y	Y
			ľ	ľ	Y
17.3	Are agency organization charts (Schedule X) provided and at the appropriate level of detail?		V	V	V
17.4		Y	Y	Y	Y
17.4	Does the LBR include a separate Schedule IV-B for each IT project over \$1				
	million (see page 131 of the LBR instructions for exceptions to this rule)? Have all IV-Bs been emailed to: IT@LASPBS.STATE.FL.US?	37	37	37	V
17.5		Y	Y	Y	Y
17.5	Are all forms relating to Fixed Capital Outlay (FCO) funding requests submitted	V	V	V	N/
	in the proper form, including a Truth in Bonding statement (if applicable) ?	Y	Y	Y	Y
	- GENERAL INFORMATION				
TIP	Review Section 6: Audits of the LBR Instructions (pages 157-159) 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.				
	TAL IMPROVEMENTS PROGRAM (CIP) (Required to be posted to the Flori	da Fiscal Porta			
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
			1	1	

		Progr	ram or Service (B	udget Entity Co	Codes)	
	Action	67100100	67100200	67100400	67100500	
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. FLO	RIDA FISCAL PORTAL					
19.1	Have all files been assembled correctly and posted to the Florida Fiscal Portal as					

outlined in the Florida Fiscal Portal Submittal Process?

Y

Y

Y

Y