

LEGISLATIVE BUDGET REQUEST

Ron DeSantis
Governor



Agency for Persons with Disabilities

Barbara Palmer
Director



Tallahassee, Florida

State Office

October 15, 2020



4030 Esplanade Way
Suite 380
Tallahassee
Florida

Chris Spencer, Policy Director
Office of Policy and Budget
Executive Office of the Governor
1701 Capitol

32399-0950

Tallahassee, Florida 32399-0001



(850) 488-4257

Eric Pridgeon, Staff Director
House Appropriations Committee
221 The Capitol
Tallahassee, Florida 32399-1300

Fax:

(850) 922-6456



Toll Free:

(866) APD-CARES

(866-273-2273)

Cindy Kynoch, Staff Director
Senate Committee on Appropriations
201 The 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 2021-2022 Fiscal Year. This submission has been approved by Barbara Palmer, Director, Agency for Persons with Disabilities.



Barbara Palmer
Director

Enclosure

Temporary Special Duty – General Pay Additives Implementation Plan for Fiscal Year 2021-2022

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

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

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

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

Effective Dates:

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

Additive Amount:

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

Estimated Annual Cost:

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



agency for persons with disabilities
State of Florida

Legislative Budget Request Fiscal Year 2021-22

**Department Level
67000000**

Exhibits and Schedules

**Barbara Palmer
Director**

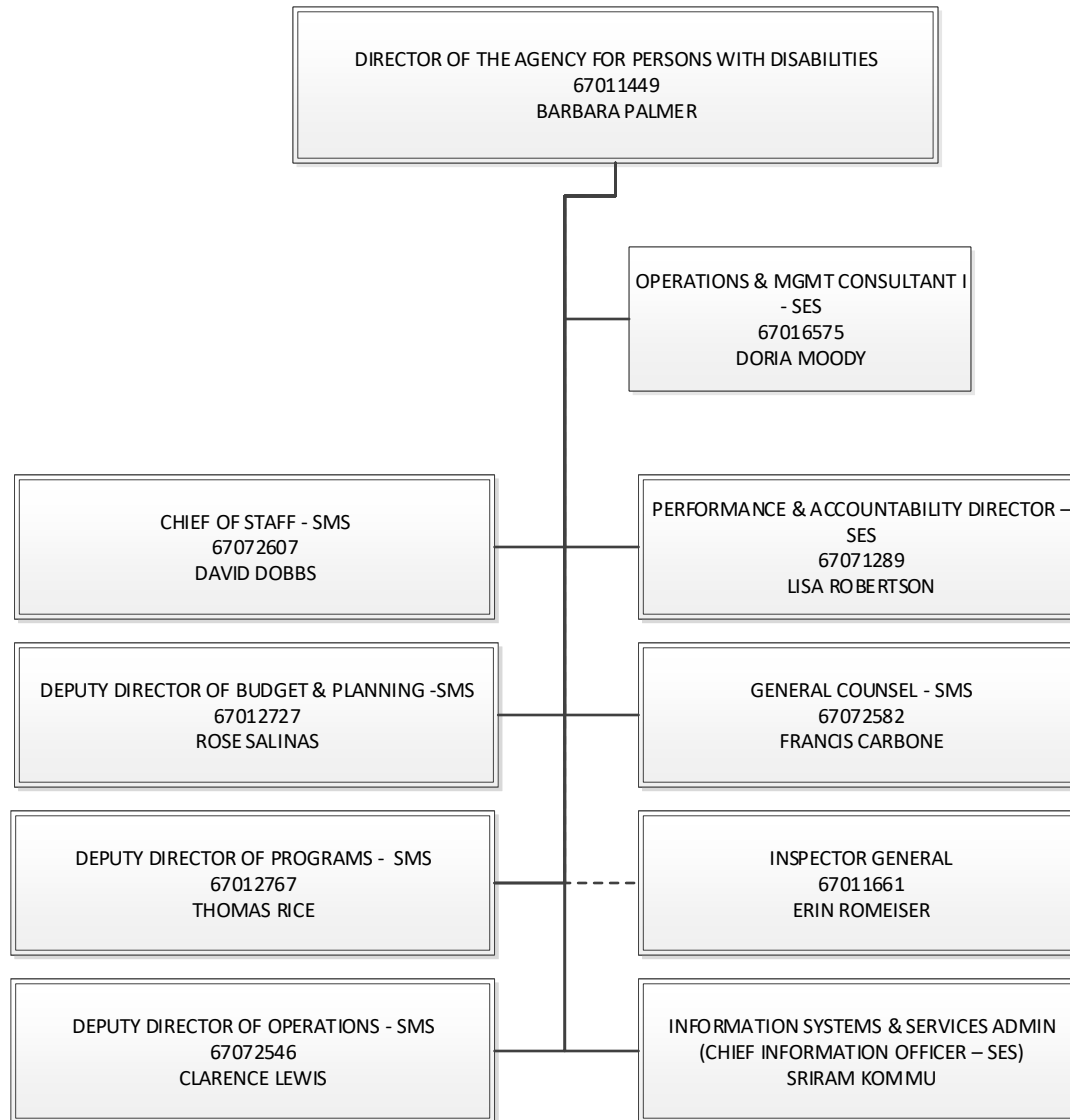
Schedule VII: Agency Litigation Inventory

For directions on completing this schedule, please see the “Legislative Budget Request (LBR) Instructions” located on the Governor’s website.

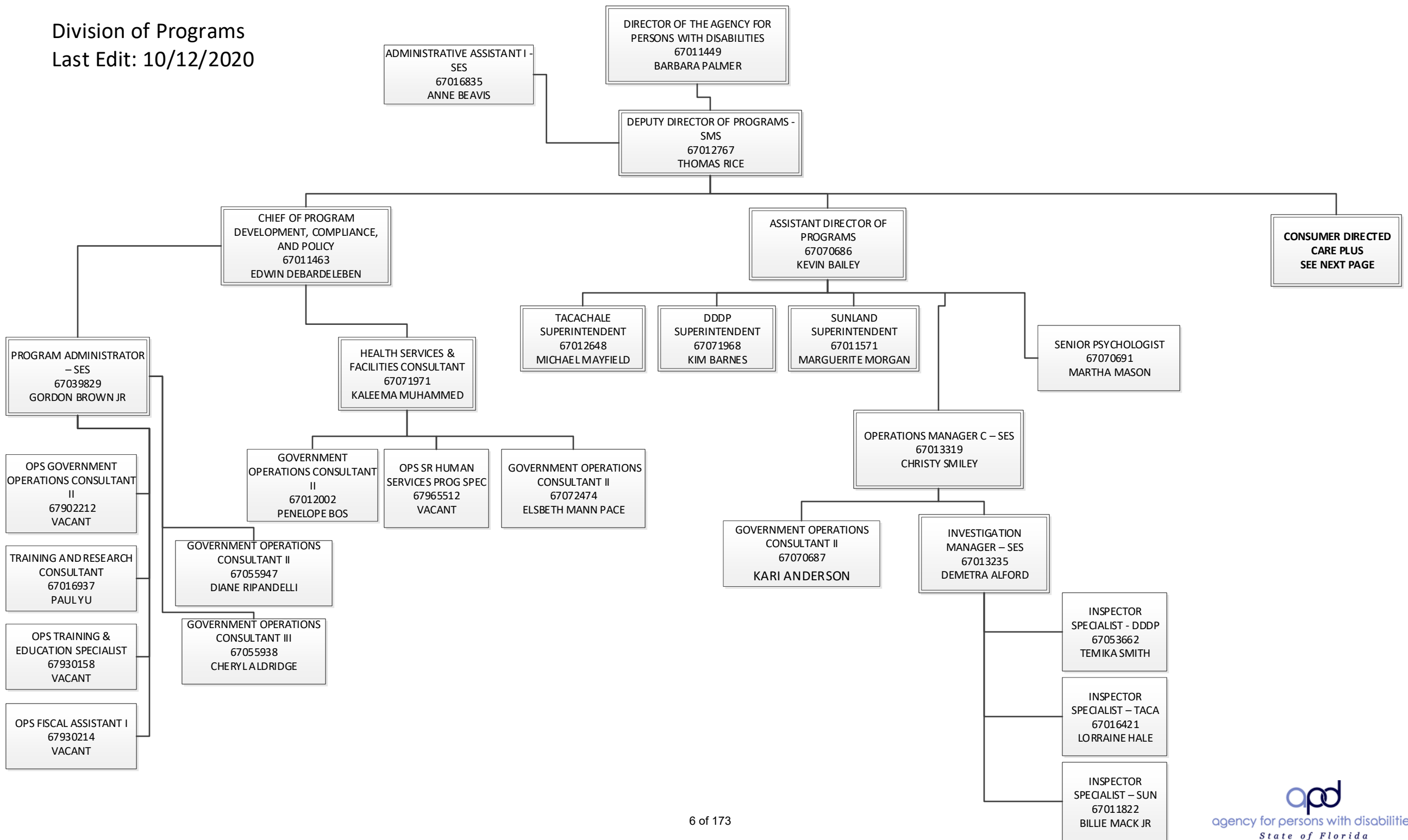
| | | | |
|---|---|---|--------------|
| Agency: | Agency for Persons with Disabilities | | |
| Contact Person: | Francis Carbone, General Counsel | Phone Number: | 850-414-8052 |
| Names of the Case: (If no case name, list the names of the plaintiff and defendant.) | There is no responsive case to report. | | |
| Court with Jurisdiction: | N/A | | |
| Case Number: | N/A | | |
| Summary of the Complaint: | N/A | | |
| Amount of the Claim: | \$0 | | |
| Specific Statutes or Laws (including GAA) Challenged: | N/A | | |
| Status of the Case: | N/A | | |
| Who is representing (of record) the state in this lawsuit? Check all that apply. | | Agency Counsel | |
| | | Office of the Attorney General or Division of Risk Management | |
| | | Outside Contract Counsel | |
| If the lawsuit is a class action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s). | N/A | | |

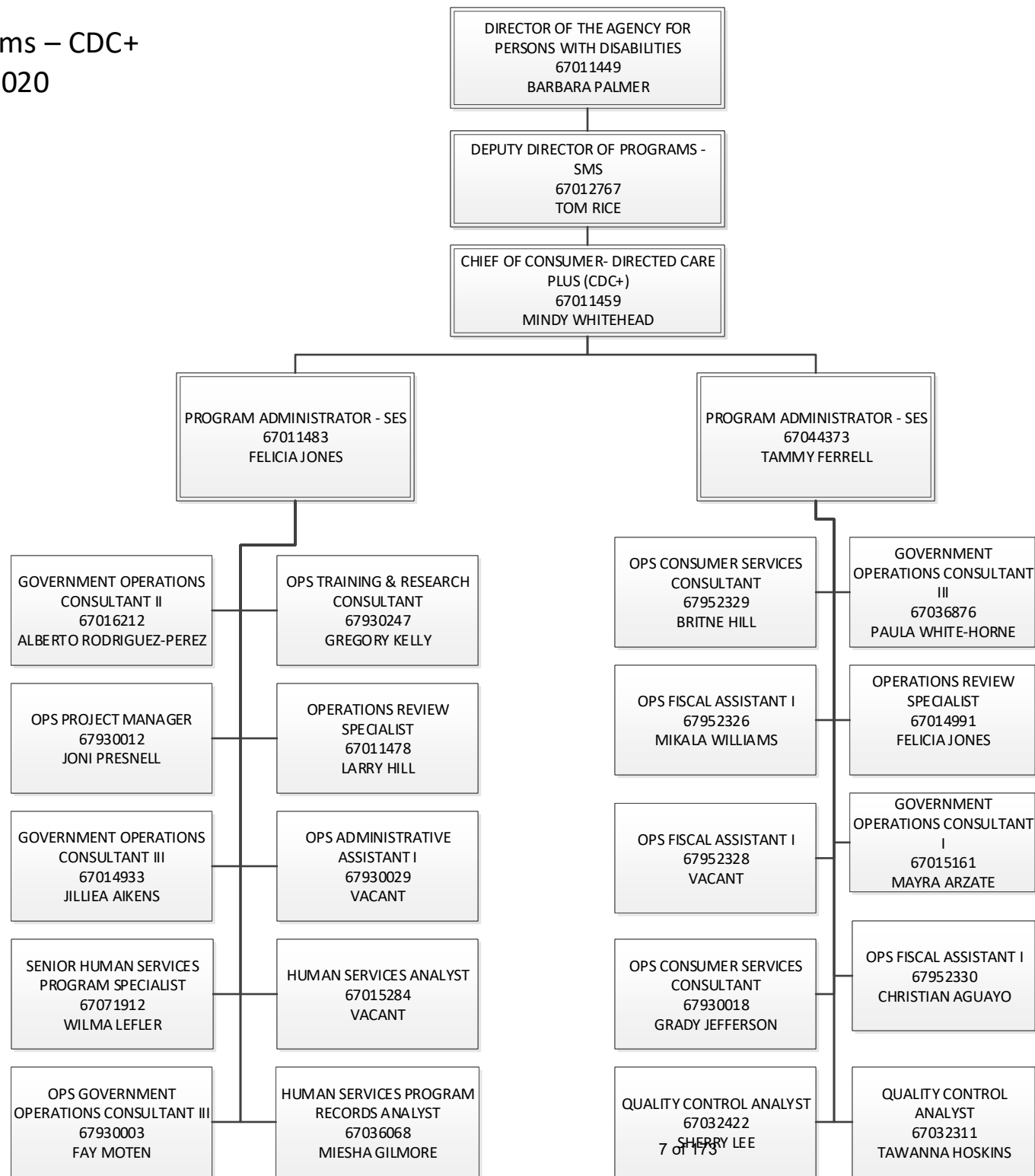
Director's Office

Last Edit: 10/12/2020

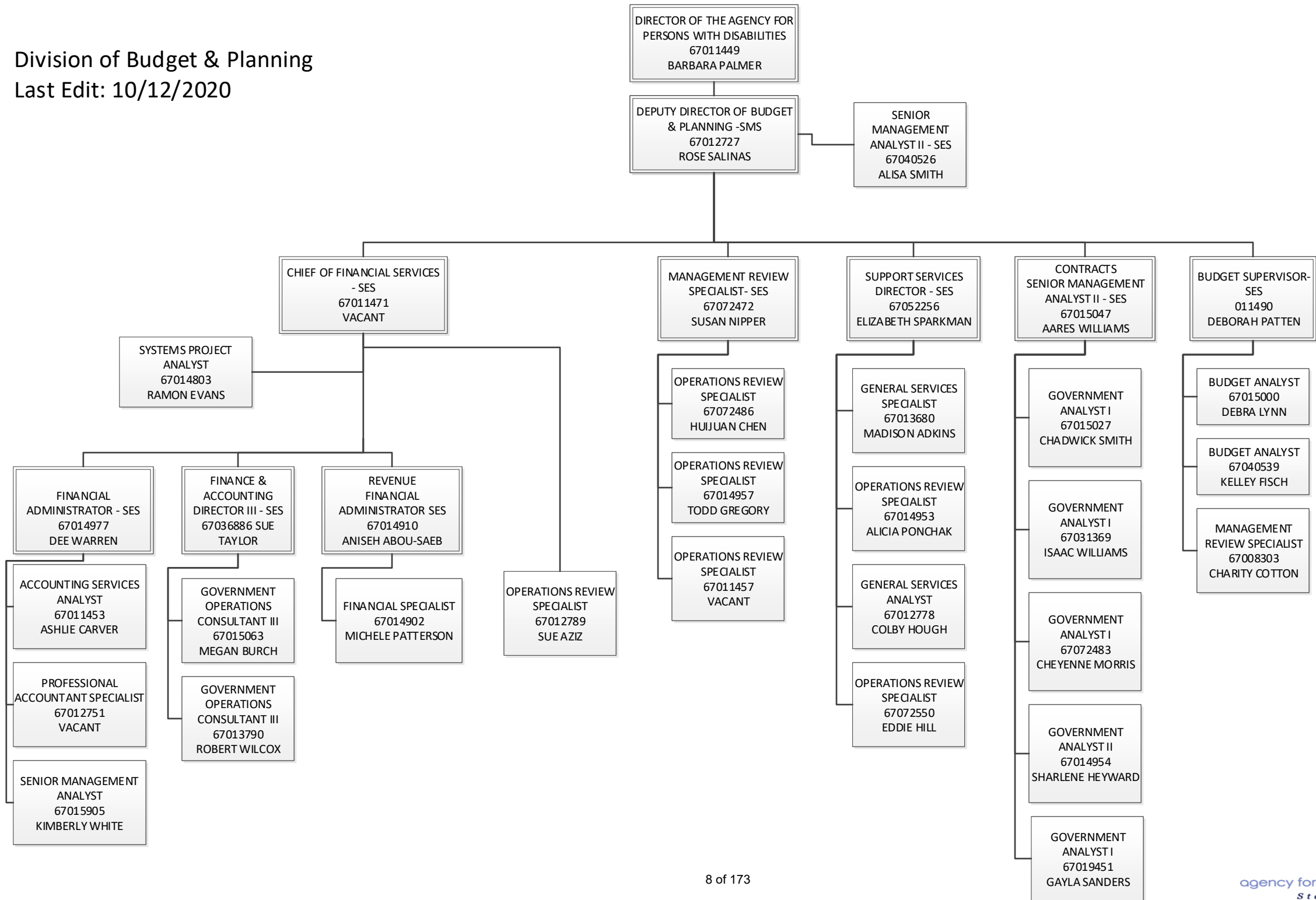


Division of Programs
Last Edit: 10/12/2020

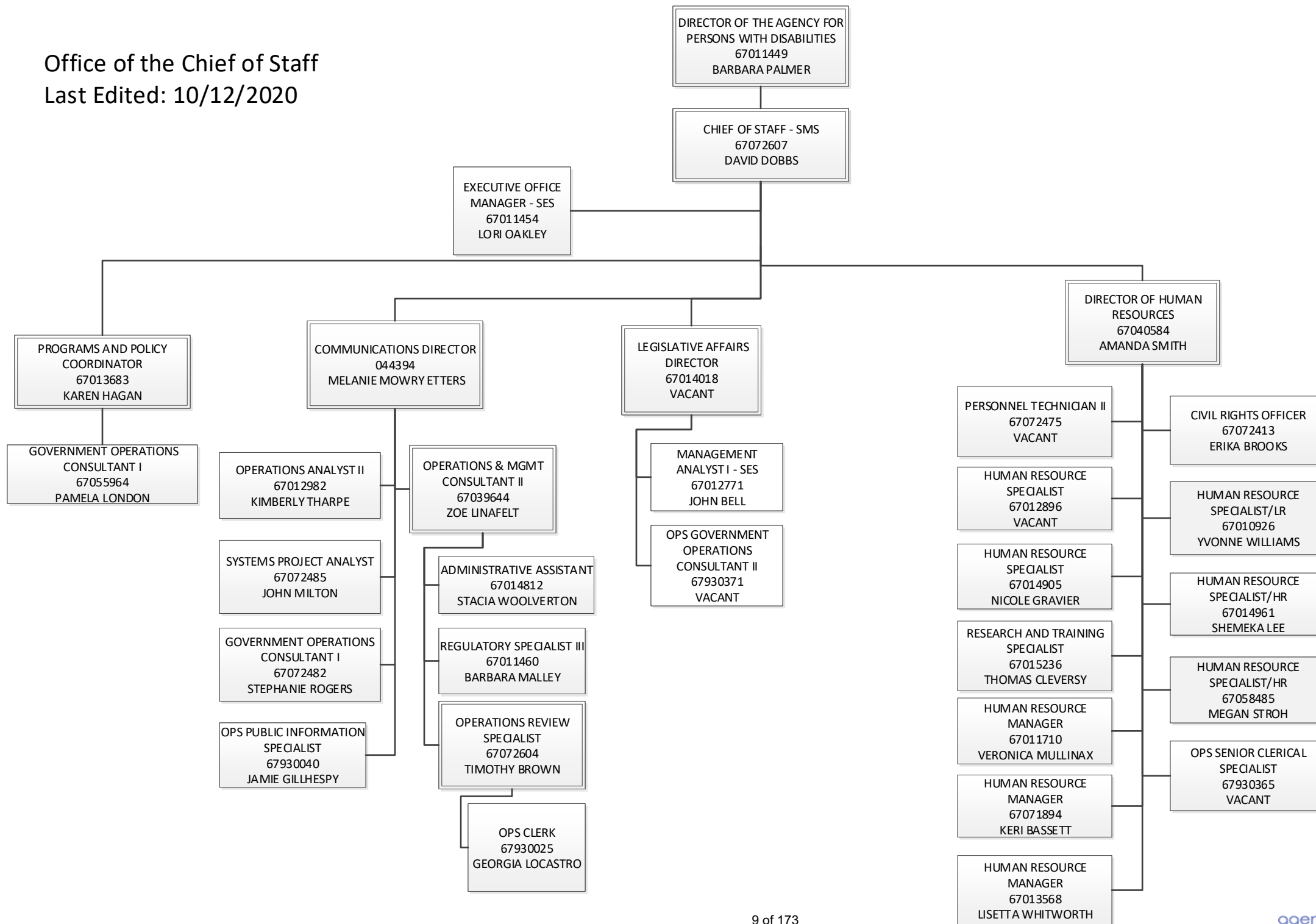




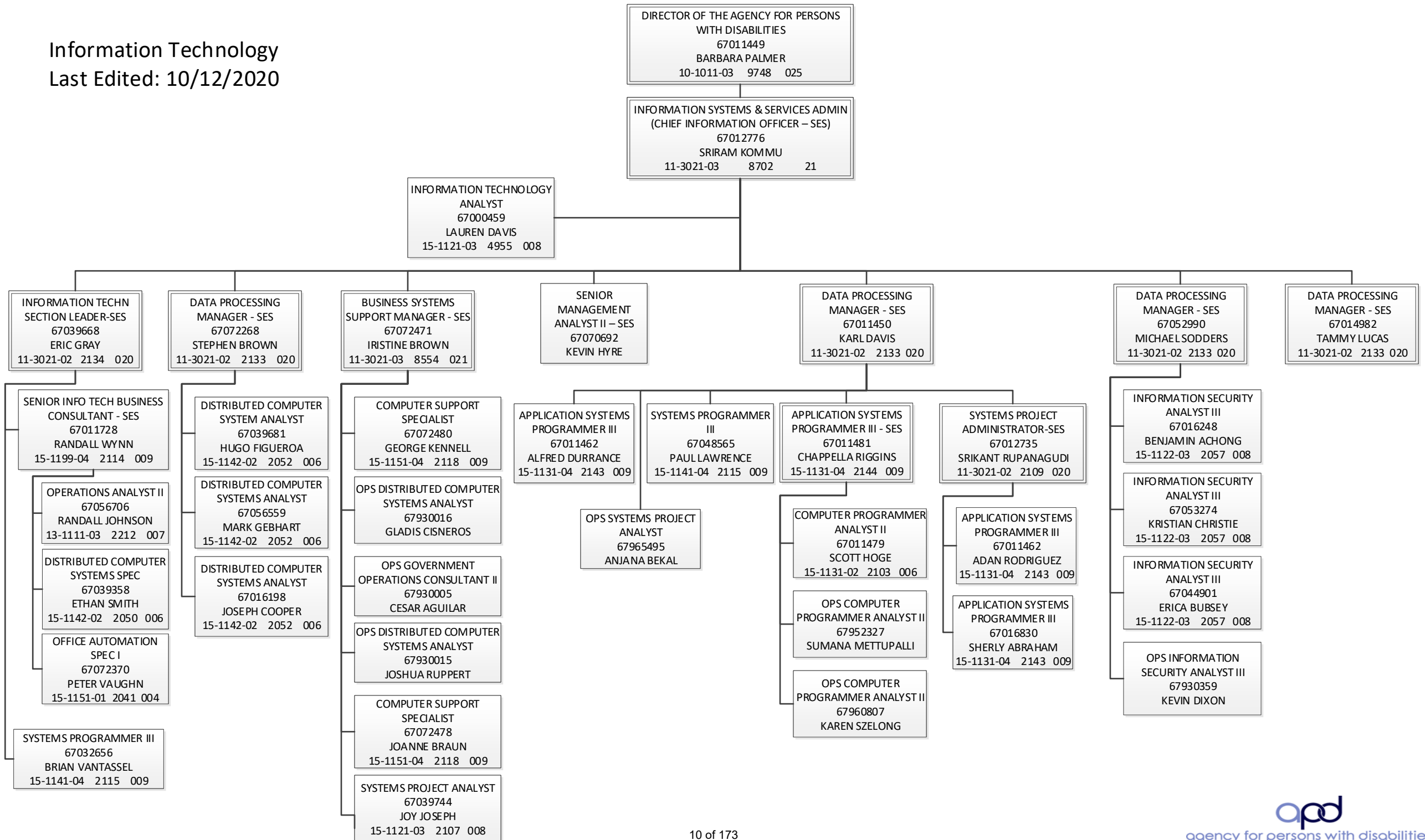
Division of Budget & Planning
 Last Edit: 10/12/2020



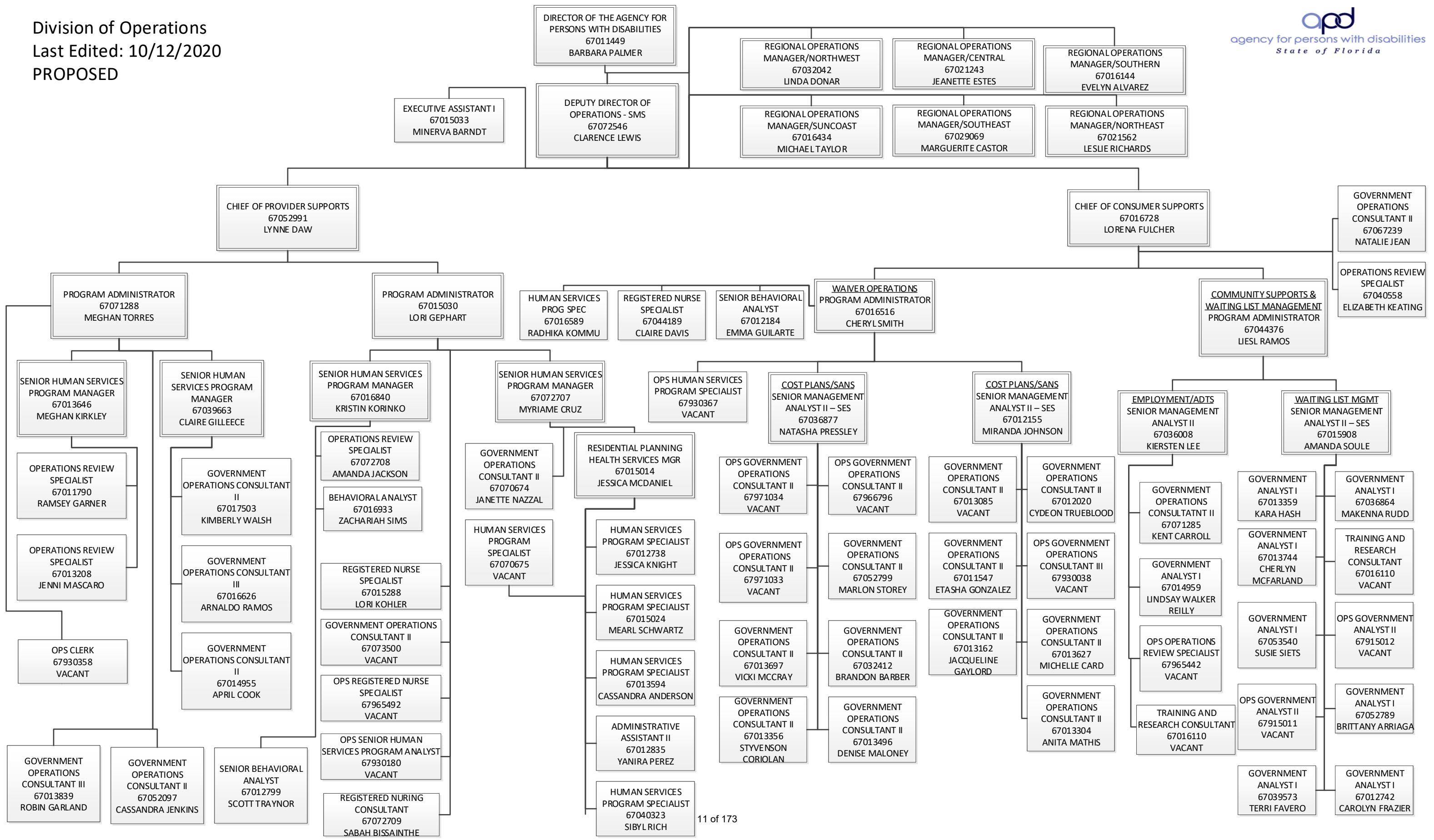
Office of the Chief of Staff
Last Edited: 10/12/2020



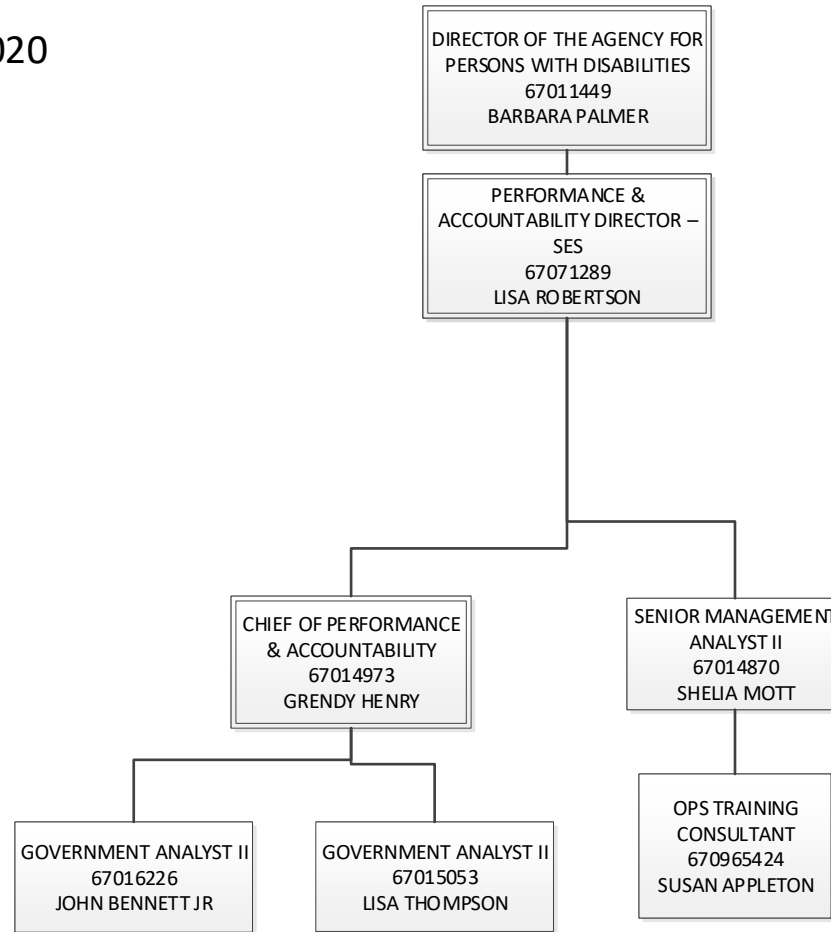
Information Technology
Last Edited: 10/12/2020



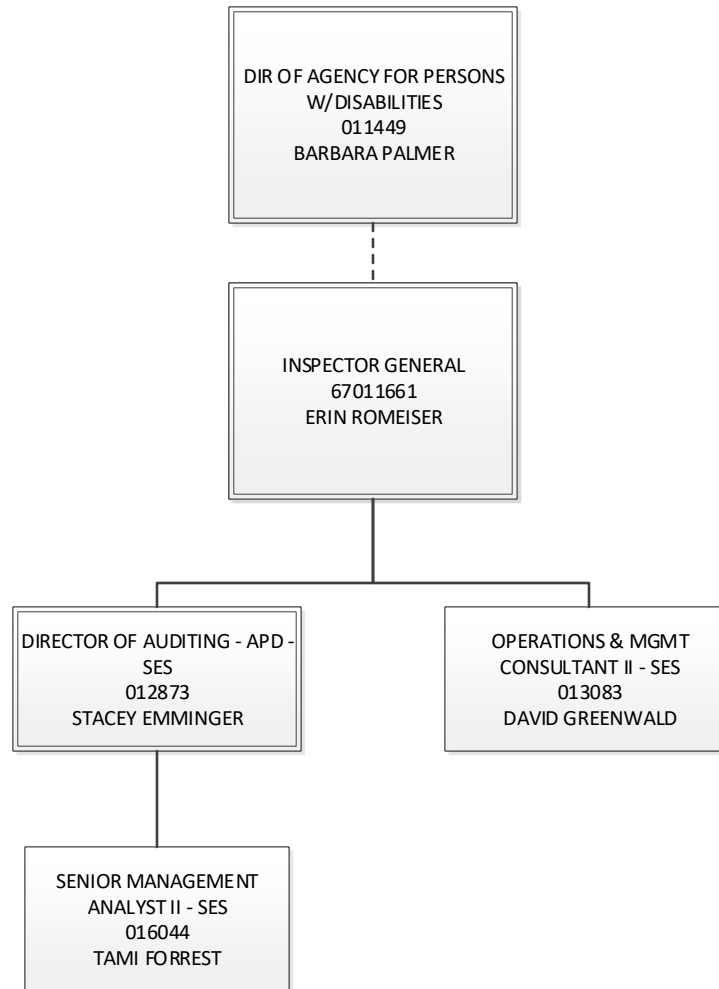
Division of Operations
 Last Edited: 10/12/2020
 PROPOSED

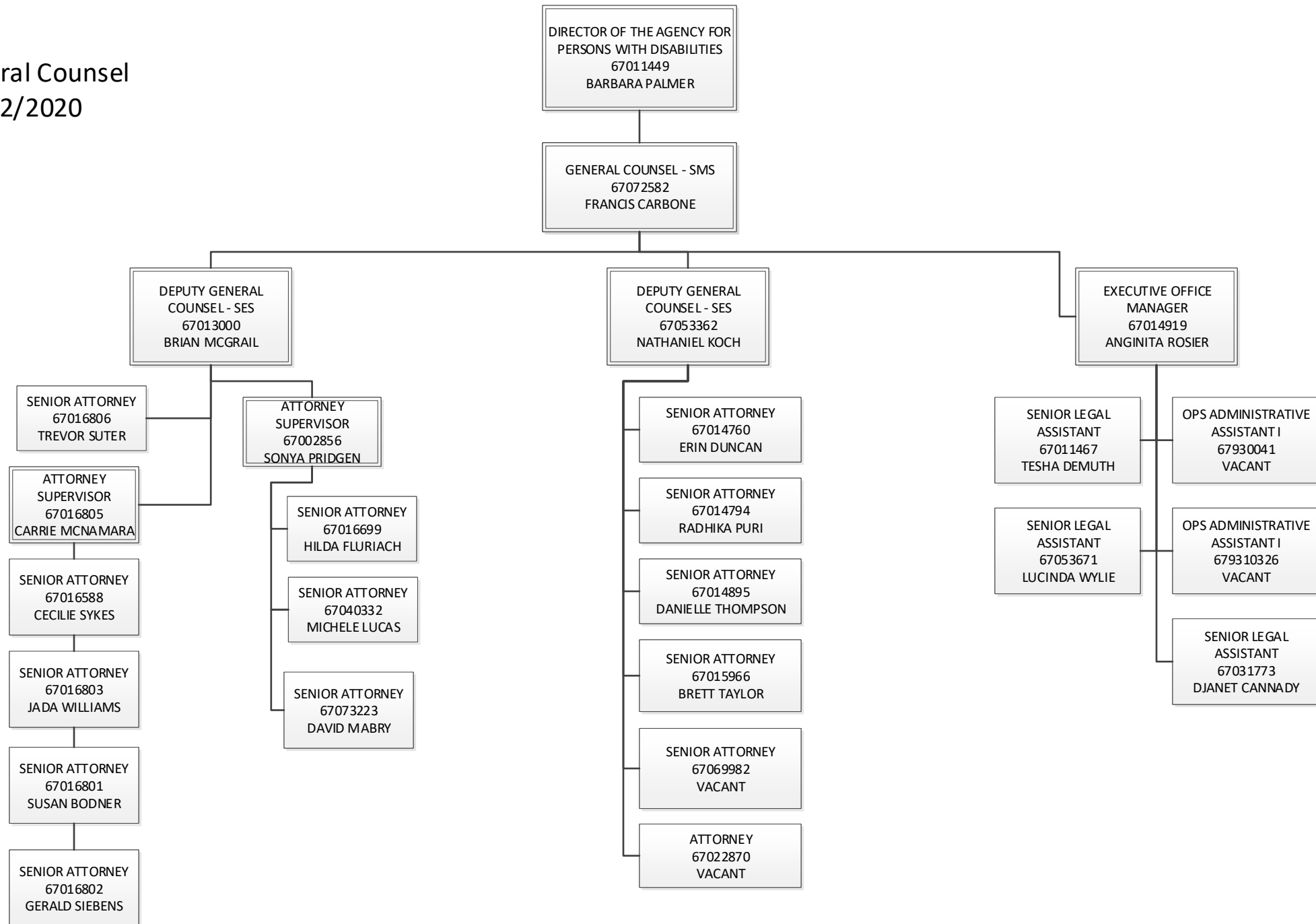


Office of Performance &
Accountability
Last Edited: 10/12/2020



Office of Inspector General
Last Edited: 10/12/2020





Schedule XIV
Variance from Long Range Financial Outlook

Agency: Agency for Persons with Disabilities Contact: Rose Salinas

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 2020 contain revenue or expenditure estimates related to your agency?

Yes No

- 2) If yes, please list the estimates for revenues and budget drivers that reflect an estimate for your agency for Fiscal Year 2021-2022 and list the amount projected in the long range financial outlook and the amounts projected in your Schedule I or budget request.

| | Issue (Revenue or Budget Driver) | R/B* | FY 2021-2022 Estimate/Request Amount | |
|---|--|------|--|-----------------------------|
| | | | Long Range Financial Outlook | Legislative Budget Request |
| a | 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 due to Significant Additional Needs | B | \$72 Million GR (\$41.9 million nonrecurring) | \$623,500 recurring GR |
| b | Information Technology/Infrastructure iConnect (Client Data Management System) | B | \$6 Million(5.6 Million nonrecurring GR) (Includes other agencies) | \$408,516 nonrecurring GR |
| c | Fixed Capital Outlay | B | \$2.9 Million nonrecurring GR (Includes other agencies) | \$3 Million nonrecurring GR |
| d | | | | |
| e | | | | |
| f | | | | |

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

Due to the impact of the COVID-19 pandemic and changes in waiver operations related to SB 82, the agency is accessing future expenditures and will continue to work on the approximate need for the program.

* R/B = Revenue or Budget Driver

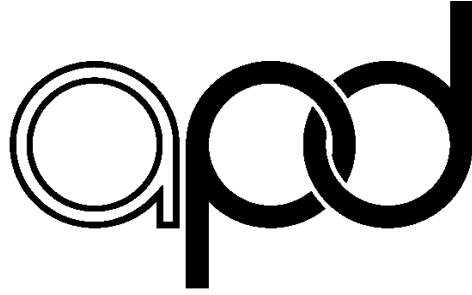


agency for persons with disabilities
State of Florida

**Legislative Budget Request
Fiscal Year 2021-22**

Schedule I Series

**Barbara Palmer
Director**



agency for persons with disabilities
State of Florida

**Legislative Budget
Request Fiscal Year
2021-22**

Home and Community Services

67100100

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2021 -22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Administrative Trust Fund |
| LAS/PBS Fund Number: | 67100100 |
| | 2021 |

| | Balance as of 6/30/2020 | | SWFS* Adjustments | Adjusted Balance |
|---|----------------------------|-----|----------------------|---------------------|
| Chief Financial Officer's (CFO) Cash Balance | 66,254 | (A) | | 66,254 |
| ADD: Other Cash (See Instructions) | | (B) | | 0 |
| ADD: Investments | | (C) | | 0 |
| ADD: Outstanding Accounts Receivable | | (D) | | 0 |
| ADD: _____ | | (E) | | 0 |
| Total Cash plus Accounts Receivable | 66,254 | (F) | 0 | 66,254 |
| LESS Allowances for Uncollectibles | | (G) | | 0 |
| LESS Approved "A" Certified Forwards | 0 | (H) | | 0 |
| Approved "B" Certified Forwards | | (H) | | 0 |
| Approved "FCO" Certified Forwards | | (H) | | 0 |
| LESS: Other Accounts Payable (Nonoperating) | | (I) | | 0 |
| LESS: Transfer to BE 67100300 | 66,254 | (J) | | 66,254 |
| Unreserved Fund Balance, 07/01/20 | (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.

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021-22

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/20

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

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description - Expenses - CF (C)

SWFS Adjustment # and Description (C)

Add/Subtract Other Adjustment(s):

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

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

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

Transfer to BE 67100300 (D)

(D)

(D)

ADJUSTED BEGINNING TRIAL BALANCE: (E)

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

DIFFERENCE: (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|---------------------------------------|
| Department Title: | Budget Period: 2021 - 22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Operations and Maintenance Trust Fund |
| LAS/PBS Fund Number: | 67100100 |
| | 2516 |

| | Balance as of 6/30/2020 | | SWFS* Adjustments | Adjusted Balance |
|---|----------------------------|-----|----------------------|---------------------|
| Chief Financial Officer's (CFO) Cash Balance | (36,040,417) | (A) | | (36,040,417) |
| ADD: Other Cash (See Instructions) | | (B) | | 0 |
| ADD: Investments | | (C) | | 0 |
| ADD: Outstanding Accounts Receivable | | (D) | | 0 |
| ADD: Transfer from 67100200 | 36,448,306 | (E) | | 36,448,306 |
| Total Cash plus Accounts Receivable | 407,889 | (F) | 0 | 407,889 |
| LESS Allowances for Uncollectibles | | (G) | | 0 |
| LESS Approved "A" Certified Forwards | 407,890 | (H) | | 407,890 |
| 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, 07/01/20 | (0) | (K) | 0 | (0)** |

Notes:

*SWFS = Statewide Financial Statement

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

Office of Policy and Budget - June 2020

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/2020

Total all GLC's 5XXXX for governmental funds; (40,949,177) (A)
GLC 539XX for proprietary and fiduciary funds

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment (C)

Transfer from BE 67100200 36,448,306 (C)

Add/Subtract Other Adjustment(s):

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

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

Compensated Absences Liability 4,500,871 (D)

Adjustment to AP (D)

(D)

(D)

ADJUSTED BEGINNING TRIAL BALANCE: (0) (E)

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

DIFFERENCE: (0) (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2021 -22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Social Services Block Grant |
| LAS/PBS Fund Number: | 67100100 |
| | 2639 |

| | Balance as of 6/30/2020 | | SWFS* Adjustments | Adjusted Balance |
|---|----------------------------|-----|----------------------|---------------------|
| Chief Financial Officer's (CFO) Cash Balance | 8,503,479 | (A) | | 8,503,479 |
| 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 | 8,503,479 | (F) | 0 | 8,503,479 |
| LESS Allowances for Uncollectibles | | (G) | | 0 |
| LESS Approved "A" Certified Forwards | 2,024,241 | (H) | | 2,024,241 |
| Approved "B" Certified Forwards | | (H) | | 0 |
| Approved "FCO" Certified Forwards | 300,000 | (H) | | 300,000 |
| LESS: Transfer to BE 67100200 | 554,526 | (E) | | 554,526 |
| LESS: Transfer to BE 67100300 | 1,163,156 | (E) | | 1,163,156 |
| LESS: Transfer to BE 67100400 | 839,666 | (E) | | 839,666 |
| LESS: Transfer to BE 67100400 | 206,298 | (E) | | |
| Unreserved Fund Balance, 07/01/20 | 3,415,592 | (K) | 0 | 3,621,890 ** |

Notes:

*SWFS = Statewide Financial Statement

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

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

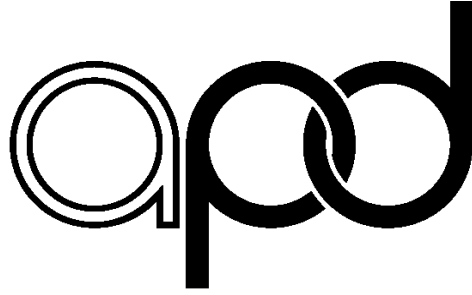
Budget Period: 2021 - 22

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

BEGINNING TRIAL BALANCE:

| | |
|--|----------------------|
| Total Fund Balance Per FLAIR Trial Balance, 07/01/20 | |
| Total all GLC's 5XXXX for governmental funds; | 6,300,942 (A) |
| GLC 539XX for proprietary and fiduciary funds | |
| Subtract Nonspendable Fund Balance (GLC 56XXX) | (B) |
| Add/Subtract Statewide Financial Statement (SWFS) Adjustments : | |
| Accrual Not CF on Trial Balance | (C) |
| Approved "C" Carry Forward Total (FCO) per LAS/PBS | (300,000) (D) |
| Transfer to BE 67100200 | (582,583) (D) |
| Transfer to BE 67100300 | (1,163,156) (D) |
| Transfer to BE 67100400 | (839,666) (D) |
| SWFS Adjustment # and Description | (C) |
| Add/Subtract Other Adjustment(s): | |
| Approved "B" Carry Forward (Encumbrances) per LAS/PBS | (D) |
| Accrual Not CF on Trial Balance | (D) |
| Current Compensated Absences Liability | 55 (D) |
| ADJUSTED BEGINNING TRIAL BALANCE: | 3,415,592 (E) |
| UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) | 3,415,592 (F) |
| DIFFERENCE: | 0 (G)* |

***SHOULD EQUAL ZERO.**

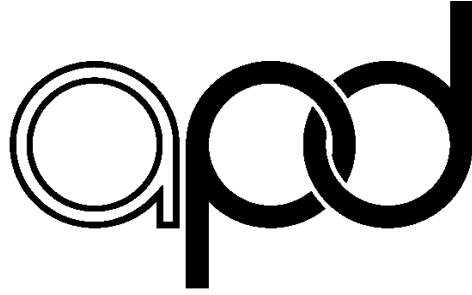


agency for persons with disabilities
State of Florida

**Legislative Budget
Request Fiscal Year
2021-22**

Program Management and Compliance

67100200



agency for persons with disabilities
State of Florida

**Legislative Budget
Request Fiscal Year
2021-22**

Program Management and Compliance

67100200

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2021 -22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Administrative Trust Fund |
| LAS/PBS Fund Number: | 67100200 |
| | 2021 |

| | Balance as of 6/30/2020 | | 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, 07/01/20 | 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.

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021-22

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

BEGINNING TRIAL BALANCE:

| | |
|--|-------------------|
| Total Fund Balance Per FLAIR Trial Balance, 07/01/20 | |
| Total all GLC's 5XXXX for governmental funds; | 158,963 (A) |
| GLC 539XX for proprietary and fiduciary funds | |
| Subtract Nonspendable Fund Balance (GLC 56XXX) | |
| Add/Subtract Statewide Financial Statement (SWFS) Adjustments : | |
| SWFS Adjustment # and Description Expenses - CF | |
| | |
| Add/Subtract Other Adjustment(s): | |
| Approved "B" Carry Forward (Encumbrances) per LAS/PBS | |
| Approved "C" Carry Forward Total (FCO) per LAS/PBS | |
| A/P not C/F-Operating Categories | |
| Transfer to BE 67100300 | (126,251) (D) |
| | |
| | |
| | |
| ADJUSTED BEGINNING TRIAL BALANCE: | 32,712 (E) |
| UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) | 32,712 (F) |
| DIFFERENCE: | 0 (G)* |

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2021 -22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Administrative Trust Fund |
| LAS/PBS Fund Number: | 67100200 |
| | 2261 |

| | Balance as of 6/30/2020 | | 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, 07/01/20 | 39,804 | (K) | 0 | 39,804 ** |

Notes:

*SWFS = Statewide Financial Statement

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

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/20

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

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

Adjustment to Correct GL 31100 PY Payables (C)

SWFS Adjustment # and Description (C)

Add/Subtract Other Adjustment(s):

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

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

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

(D)

(D)

(D)

ADJUSTED BEGINNING TRIAL BALANCE: (E)

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

DIFFERENCE: (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|---------------------------------------|
| Department Title: | Budget Period: 2021 - 22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Operations and Maintenance Trust Fund |
| LAS/PBS Fund Number: | 67100200 |
| | 2516 |

| | Balance as of 6/30/2020 | | SWFS* Adjustments | Adjusted Balance |
|---|----------------------------|-----|----------------------|----------------------|
| Chief Financial Officer's (CFO) Cash Balance | 50,955,510 | (A) | | 50,955,510 |
| ADD: Other Cash (See Instructions) | | (B) | | 0 |
| ADD: Investments | | (C) | | 0 |
| ADD: Outstanding Accounts Receivable | 6,763,272 | (D) | | 6,763,272 |
| ADD: _____ | | (E) | | 0 |
| Total Cash plus Accounts Receivable | 57,718,782 | (F) | 0 | 57,718,782 |
| LESS Allowances for Uncollectibles | | (G) | | 0 |
| LESS Approved "A" Certified Forwards | 1,228,201 | (H) | | 1,228,201 |
| Approved "B" Certified Forwards | | (H) | | 0 |
| Approved "FCO" Certified Forwards | | (H) | | 0 |
| LESS: Nonoperating A/P-SWCAP & GR Srv Chg | 41,738 | (I) | | 41,738 |
| LESS: Transfer TO 67100100 | 36,448,306 | (J) | | 36,448,306 |
| LESS: Transfer TO 67100500 | 38,700 | (J) | | |
| Unreserved Fund Balance, 07/01/2020 | 19,961,837 | (K) | 0 | 20,000,537 ** |

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 2020

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

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

BEGINNING TRIAL BALANCE:

| | |
|--|-----------------------|
| Total Fund Balance Per FLAIR Trial Balance, 07/01/2020 | |
| Total all GLC's 5XXXX for governmental funds; | 56,390,686 (A) |
| GLC 539XX for proprietary and fiduciary funds | |
| Subtract Nonspendable Fund Balance (GLC 56XXX) | (B) |
| Add/Subtract Statewide Financial Statement (SWFS) Adjustments : | |
| Transfer to BE 67100100 | 36,448,306 (C) |
| SWFS Adjustment # and Description | (C) |
| Add/Subtract Other Adjustment(s): | |
| Approved "B" Carry Forward (Encumbrances) per LAS/PBS | (D) |
| Approved "C" Carry Forward Total (FCO) per LAS/PBS | (D) |
| Compensated Absences Liability | (D) |
| Adjustment to AP | (19,457) (D) |
| | (D) |
| | (D) |
| | (D) |
| ADJUSTED BEGINNING TRIAL BALANCE: | 19,961,837 (E) |
| UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) | 19,961,837 (F) |
| DIFFERENCE: | 0 (G)* |

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2020 -21 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Social Services Block Grant |
| LAS/PBS Fund Number: | 67100200 |
| | 2639 |

| | Balance as of 6/30/2020 | | SWFS* Adjustments | | Adjusted Balance |
|---|----------------------------|-----|----------------------|--|---------------------|
| Chief Financial Officer's (CFO) Cash Balance | (551,526) | (A) | | | (551,526) |
| ADD: Other Cash (See Instructions) | | (B) | | | 0 |
| ADD: Investments | | (C) | | | 0 |
| ADD: Outstanding Accounts Receivable | | (D) | | | 0 |
| ADD: Transfer from BE 67100100 | 554,526 | (E) | | | 554,526 |
| Total Cash plus Accounts Receivable | 3,000 | (F) | 0 | | 3,000 |
| LESS Allowances for Uncollectibles | | (G) | | | 0 |
| LESS Approved "A" Certified Forwards | 3,000 | (H) | | | 3,000 |
| 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, 07/01/20 | (0) | (K) | 0 | | (0) ** |

Notes:

*SWFS = Statewide Financial Statement

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

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/20

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

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description (C)

SWFS Adjustment # and Description (C)

Add/Subtract Other Adjustment(s):

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

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

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

Transfer from BE 67100100 (D)

(D)

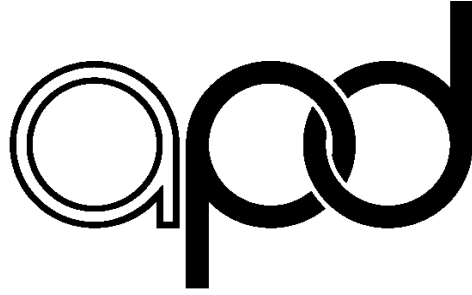
(D)

ADJUSTED BEGINNING TRIAL BALANCE: (E)

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

DIFFERENCE: (G)*

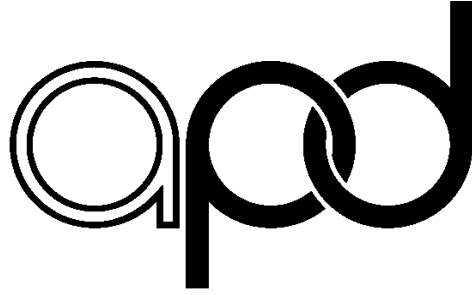
***SHOULD EQUAL ZERO.**



agency for persons with disabilities
State of Florida

**Legislative Budget
Request Fiscal Year
2021-22**

**Developmental Disabilities Public
Facilities
67100300**



agency for persons with disabilities
State of Florida

**Legislative Budget Request
Fiscal Year 2021-22**

**Developmental Disabilities Public
Facilities**

67100300

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2021 -22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Administrative Trust Fund |
| LAS/PBS Fund Number: | 67100300 |
| | 2021 |

| | Balance as of 6/30/2019 | | 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, 07/01/20 | 0 | (K) | 0 | | 0 ** |

Notes:

*SWFS = Statewide Financial Statement

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

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021-22

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/20
 Total all GLC's 5XXXX for governmental funds; (192,505) (A)
 GLC 539XX for proprietary and fiduciary funds

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description (C)

SWFS Adjustment # and Description 0 (C)

Add/Subtract Other Adjustment(s):

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

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

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

Transfer from BE 67100100 66,254 (D)

Transfer from BE 67100200 126,251 (D)

(D)

ADJUSTED BEGINNING TRIAL BALANCE: 0 (E)

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

DIFFERENCE: 0 (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|---------------------------------------|
| Department Title: | Budget Period: 2021 - 22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Operations and Maintenance Trust Fund |
| LAS/PBS Fund Number: | 67100300 |
| | 2516 |

| | Balance as of 6/30/2020 | | 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, 07/01/20 | 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.

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/2020

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

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment (C)

SWFS Adjustment # and Description (C)

Add/Subtract Other Adjustment(s):

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

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

Compensated Absences Liability (D)

Approved Carry Forward Total (FCO) for FY 07 per LAS/PBS (D)

Transfer to BE 67100100 (D)

(D)

ADJUSTED BEGINNING TRIAL BALANCE: (E)

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

DIFFERENCE: (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2020 -21 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Social Services Block Grant |
| LAS/PBS Fund Number: | 67100300 |
| | 2639 |

| | Balance as of 6/30/2020 | | 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, 07/01/20 | 0 | (K) | 0 | 0 ** |

Notes:

*SWFS = Statewide Financial Statement

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

Office of Policy and Budget - June 2020

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

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

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/20

Total all GLC's 5XXXX for governmental funds; [(640,208.00)] (A)
 GLC 539XX for proprietary and fiduciary funds

Subtract Nonspendable Fund Balance (GLC 56XXX) [] (B)

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description [] (C)

SWFS Adjustment # and Description [] (C)

Add/Subtract Other Adjustment(s):

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

Approved "C" Carry Forward Total (FCO) per LAS/PBS [(522,948.00)] (D)

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

Transfer from BE 67100100 [1,163,156.00] (D)

[] (D)

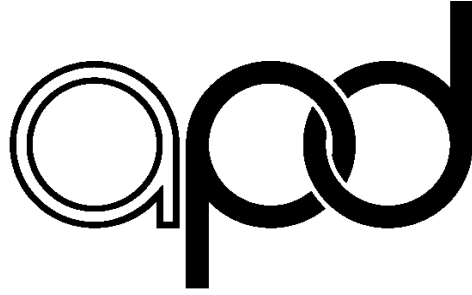
[] (D)

ADJUSTED BEGINNING TRIAL BALANCE: [0.00] (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) [0.00] (F)

DIFFERENCE: [0.00] (G)*

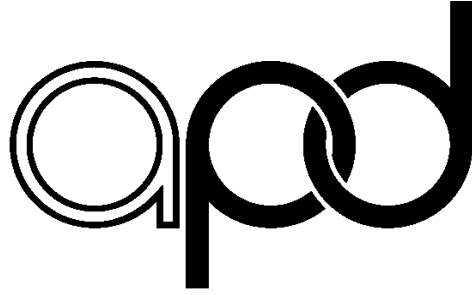
***SHOULD EQUAL ZERO.**



agency for persons with disabilities
State of Florida

**Legislative Budget
Request Fiscal Year
2021-2022**

**Developmental Disabilities Centers -
Civil Program
67100400**



agency for persons with disabilities
State of Florida

**Legislative Budget Request
Fiscal Year 2021-22**

**Developmental Disabilities Centers - Civil
Program**

67100400

Schedule I Series

S AND RELATED PROGRAM COSTS

Department: 67-Agency for Persons with Disabilities **Budget Period: 2021-22**
Program: 67100400
Fund: 2516

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

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

| | |
|-------------------------------------|---|
| <input type="checkbox"/> | Regulatory services or oversight to businesses or professions. |
| <input checked="" type="checkbox"/> | Non-regulatory fees authorized to cover full cost of conducting a |

SECTION I - FEE COLLECTION

| | ACTUAL FY 2019 - 20 | ESTIMATED FY 2020 - 21 | REQUEST FY 2021 - 22 |
|---|------------------------|---------------------------|-------------------------|
| Receipts: | | | |
| Reimbursement of Client Custodial Care | 45,752,749 | 54,279,693.73 | 54,094,087.00 |
| AHCA Transfers for Client Care | 4,020,294 | 4,769,556.62 | 4,753,247.36 |
| | | | |
| | | | |
| Total Fee Collection to Line (A) - Section III | 49,773,043 | 59,049,250 | 58,847,334 |

SECTION II - FULL COSTS

| | | | |
|---|-------------------|-------------------|-------------------|
| Direct Costs: | | | |
| Salaries and Benefits | 37,993,006 | 46,377,920 | 46,387,777 |
| Other Personal Services | 550,070 | 889,634 | 1,198,008 |
| Expenses | 3,275,215 | 3,354,032 | 3,354,032 |
| Operating Capital Outlay | | 32,972 | 32,972 |
| Food Products | 1,064,027 | 1,110,220 | 1,110,220 |
| APD/FCO NEEDS/CEN MGD FACS | | | |
| M/D Emergency Repair | | | |
| Special Category/ Acquisition /Motor Vehicles | | | |
| Contracted Services | 1,200,481 | 1,176,248 | 872,197 |
| G/A - Contracted Professional Services | 3,117,762 | 3,215,903 | 3,215,903 |
| Special Category/ Prescribe MED/DRUG- NON-MED | | 36,978 | 36,978 |
| Risk Management Insurance | 1,914,650 | 2,270,896 | 2,270,896 |
| Public Assistance -ST OPS | | | |
| TR/DMS/HR SVCS/STW Contract | 373,152 | 371,323 | 368,351 |
| COVID 19 PUBLIC ASSISTANCE | 284,679 | | |
| ACQUISITION/MOTOR VEHICLES | | 213,124 | |
| Indirect Costs Charged to Trust Fund | | | |
| Total Full Costs to Line (B) - Section III | 49,773,043 | 59,049,250 | 58,847,334 |

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

SECTION III - SUMMARY

| | | | | |
|--------------------------------|-----|------------|------------|------------|
| TOTAL SECTION I | (A) | 49,773,043 | 59,049,250 | 58,847,334 |
| TOTAL SECTION II | (B) | 49,773,043 | 59,049,250 | 58,847,334 |
| TOTAL - Surplus/Deficit | (C) | 0 | 0 | 0 |

EXPLANATION of LINE C:

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2021 - 22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Operations & Maintenance Trust Fund |
| LAS/PBS Fund Number: | 67100400 |
| | 2516 |

| | Balance as of 6/30/2020 | | SWFS* Adjustments | Adjusted Balance |
|---|----------------------------|-----|----------------------|---------------------|
| Chief Financial Officer's (CFO) Cash Balance | 3,891,179 | (A) | | 3,891,179 |
| ADD: Other Cash (See Instructions) | | (B) | | 0 |
| ADD: Investments | | (C) | | 0 |
| ADD: Outstanding Accounts Receivable | 3,656,798 | (D) | | 3,656,798 |
| ADD: _____ | | (E) | | 0 |
| Total Cash plus Accounts Receivable | 7,547,976 | (F) | 0 | 7,547,976 |
| LESS Allowances for Uncollectibles | | (G) | | 0 |
| LESS Approved "A" Certified Forwards | 1,139,731 | (H) | | 1,139,731 |
| Approved "B" Certified Forwards | | (H) | | 0 |
| Approved "FCO" Certified Forwards | 4,752,632 | (H) | | 4,752,632 |
| LESS: Other Accounts Payable (Nonoperating) | | (I) | | 0 |
| LESS: _____ | | (J) | | 0 |
| Unreserved Fund Balance, 07/01/20 | 1,655,614 | (K) | 0 | 1,655,614 ** |

Notes:

*SWFS = Statewide Financial Statement

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

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Operations and Maintenance Trust Fund - BE 67100400
LAS/PBS Fund Number: 2516

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/2020

Total all GLC's 5XXXX for governmental funds; 6,408,246 (A)
 GLC 539XX for proprietary and fiduciary funds

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description (C)

SWFS Adjustment # and Description (C)

Add/Subtract Other Adjustment(s):

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

Approved "C" Carry Forward Total (FCO) per LAS/PBS (4,752,632) (D)

Compensated Absences Liability (D)

Adjustment to AP (D)

 (D)

 (D)

ADJUSTED BEGINNING TRIAL BALANCE: 1,655,614 (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) 1,655,614 (F)

DIFFERENCE: 0 (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2020 -21 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Social Services Block Grant |
| LAS/PBS Fund Number: | 67100400 |
| | 2639 |

| | Balance as of 6/30/2020 | | SWFS* Adjustments | Adjusted Balance |
|---|----------------------------|-----|----------------------|---------------------|
| Chief Financial Officer's (CFO) Cash Balance | 255,872 | (A) | | 255,872 |
| ADD: Other Cash (See Instructions) | | (B) | | 0 |
| ADD: Investments | | (C) | | 0 |
| ADD: Outstanding Accounts Receivable | | (D) | | 0 |
| ADD: Transfer from BE 67100100 | 839,666 | (E) | | 839,666 |
| Total Cash plus Accounts Receivable | 1,095,538 | (F) | 0 | 1,095,538 |
| LESS Allowances for Uncollectibles | | (G) | | 0 |
| LESS Approved "A" Certified Forwards | | (H) | | 0 |
| Approved "B" Certified Forwards | | (H) | | 0 |
| Approved "FCO" Certified Forwards | 1,095,538 | (H) | | 1,095,538 |
| LESS: Other Accounts Payable (Nonoperating) | | (I) | | 0 |
| LESS: Transfer to BE 67100200 | | (J) | | 0 |
| LESS: _____ | | (J) | | 0 |
| LESS: _____ | | (J) | | 0 |
| Unreserved Fund Balance, 07/01/20 | 0 | (K) | 0 | 0 ** |

Notes:

*SWFS = Statewide Financial Statement

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

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Social Services Block Grant - 67100400
LAS/PBS Fund Number: 2639

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/20

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

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description (C)

SWFS Adjustment # and Description (C)

Add/Subtract Other Adjustment(s):

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

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

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

Transfer from BE 67100100 (D)

(D)

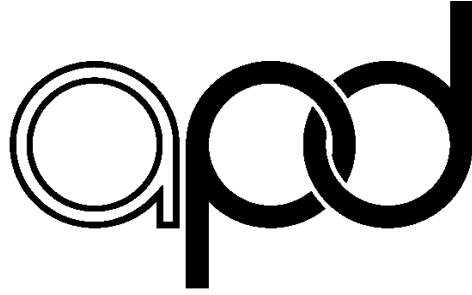
(D)

ADJUSTED BEGINNING TRIAL BALANCE: (E)

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

DIFFERENCE: (G)*

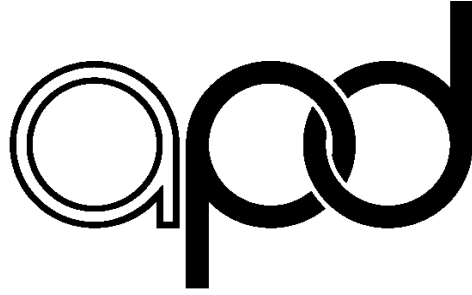
***SHOULD EQUAL ZERO.**



agency for persons with disabilities
State of Florida

**Legislative Budget
Request Fiscal Year
2021-2022**

**Developmental Disabilities Centers -
Forensic Program
67100500**



agency for persons with disabilities
State of Florida

**Legislative Budget Request
Fiscal Year 2021-22**

**Developmental Disabilities Centers - Forensic
Program**

67100500

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2021 - 22 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Operations & Maintenance Trust Fund |
| LAS/PBS Fund Number: | 67100500 |
| | 2516 |

| | Balance as of 6/30/2020 | | SWFS* Adjustments | Adjusted Balance |
|---|----------------------------|-----|----------------------|---------------------|
| Chief Financial Officer's (CFO) Cash Balance | (7,400) | (A) | | (7,400) |
| ADD: Other Cash (See Instructions) | | (B) | | 0 |
| ADD: Investments | | (C) | | 0 |
| ADD: Outstanding Accounts Receivable | | (D) | | 0 |
| ADD: Transfer from 67100200 | 38,700 | (E) | | 38,700 |
| Total Cash plus Accounts Receivable | 31,300 | (F) | 0 | 31,300 |
| LESS Allowances for Uncollectibles | | (G) | | 0 |
| LESS Approved "A" Certified Forwards | 31,300 | (H) | | 31,300 |
| 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, 07/01/20 | 0 | (K) | 0 | 0 ** |

Notes:

*SWFS = Statewide Financial Statement

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

Office of Policy and Budget - June 2020

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Operations and Maintenance Trust Fund - BE 67100500
LAS/PBS Fund Number: 2516

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/2020

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

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description (C)

SWFS Adjustment # and Description (C)

Add/Subtract Other Adjustment(s):

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

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

Compensated Absences Liability (D)

Adjustment to AP (D)

(D)

(D)

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

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

DIFFERENCE: **0** (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

| | |
|-----------------------------|--------------------------------------|
| Department Title: | Budget Period: 2020 -21 |
| Trust Fund Title: | Agency for Persons with Disabilities |
| Budget Entity: | Social Services Block Grant |
| LAS/PBS Fund Number: | 67100500 |
| | 2639 |

| | Balance as of 6/30/2020 | | SWFS* Adjustments | | Adjusted Balance |
|---|----------------------------|-----|----------------------|--|---------------------|
| Chief Financial Officer's (CFO) Cash Balance | (206,298) | (A) | | | (206,298) |
| ADD: Other Cash (See Instructions) | | (B) | | | 0 |
| ADD: Investments | | (C) | | | 0 |
| ADD: Outstanding Accounts Receivable | | (D) | | | 0 |
| ADD: Transfer from BE 67100100 | 206,298 | (E) | | | 206,298 |
| 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 | | (H) | | | 0 |
| LESS: Other Accounts Payable (Nonoperating) | | (I) | | | 0 |
| LESS: Transfer to BE 67100200 | | (J) | | | 0 |
| LESS: _____ | | (J) | | | 0 |
| LESS: _____ | | (J) | | | 0 |
| Unreserved Fund Balance, 07/01/20 | 0 | (K) | 0 | | 0 ** |

Notes:

*SWFS = Statewide Financial Statement

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

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2021 - 22

Department Title: Agency for Persons with Disabilities
Trust Fund Title: Social Services Block Grant - 67100500
LAS/PBS Fund Number: 2639

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/20

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

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description (C)

SWFS Adjustment # and Description (C)

Add/Subtract Other Adjustment(s):

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

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

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

Transfer from BE 67100100 (D)

(D)

(D)

ADJUSTED BEGINNING TRIAL BALANCE: (E)

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

DIFFERENCE: (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IV-B FOR – APD ICONNECT SYSTEM

For Fiscal Year 2021-22



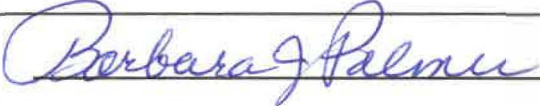
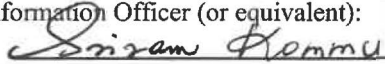



October 15, 2020

AGENCY FOR PERSONS WITH DISABILITIES

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I. Schedule IV-B Cover Sheet

| Schedule IV-B Cover Sheet and Agency Project Approval | |
|---|---|
| Agency: Agency for Persons with Disabilities | Schedule IV-B Submission Date: October 15, 2020 |
| Project Name: APD iConnect System | Is this project included in the Agency's LRPP? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| FY 2021-22 LBR Issue Code: 36204C0 | FY 2021-22 LBR Issue Title: iConnect System |
| Agency Contact for Schedule IV-B (Name, Phone #, and E-mail address): Rose Salinas, 850-414-6058, Rose.Salinas@apdcares.org | |
| AGENCY APPROVAL SIGNATURES | |
| I am submitting the attached Schedule IV-B in support of our legislative budget request. I have reviewed the estimated costs and benefits documented in the Schedule IV-B and believe the proposed solution can be delivered within the estimated time for the estimated costs to achieve the described benefits. I agree with the information in the attached Schedule IV-B. | |
| Agency Head:  | Date: 10/15/2020 |
| Printed Name: Barbara Palmer | |
| Agency Chief Information Officer (or equivalent):  | Date: 10/15/2020 |
| Printed Name: Sriram Kommu | |
| Budget Officer:  | Date: 10/15/2020 |
| Printed Name: Rose Salinas | |
| Planning Officer:  | Date: 10/15/2020 |
| Printed Name: Lisa Robertson | |
| Project Sponsor:  | Date: 10/15/2020 |
| Printed Name: Lisa Robertson | |
| Schedule IV-B Preparers (Name, Phone #, and E-mail address): | |
| Business Need: | Lisa Robertson, 850-922-9499, Lisa.Robertson@apdcares.org |
| Cost Benefit Analysis: | Rose Salinas, 850-414-6058, Rose.Salinas@apdcares.org |
| Risk Analysis: | Sriram Kommu, 850-488-0623, Sriram.Kommu@apdcares.org |
| Technology Planning: | Sriram Kommu, 850-488-0623, Sriram.Kommu@apdcares.org |
| Project Planning: | Lisa Robertson, 850-922-9499, Lisa.Robertson@apdcares.org |

General Guidelines

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

Schedule IV-B is not required for requests to:

- Continue existing hardware and software maintenance agreements,
- Renew existing software licensing agreements 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 35,000 individuals on the waiver and over 22,000 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 2020-21, the total federal match for the HCBS Waiver is \$802 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. The Federal medical assistance percentage shall be reduced proportionately for those states who do not fulfill this requirement by their deadline. In FY 2018-19, the waiver provided \$386 million in such services, which reflects \$238 million in federal matching funds (using the FY 2020-21 FMAP rate). 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 it 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. The Federal medical assistance percentage shall be reduced proportionately for those states who do not fulfill this requirement by their deadline.
- 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 |
|---|---|
| <p>No Project (Status Quo) - Keep the current systems in place</p> | <ul style="list-style-type: none"> ▪ 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 |
| <p>Increase APD staffing Contract for external assistance Place more requirements on providers and WSCs</p> | <ul style="list-style-type: none"> ▪ 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 | <p>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.</p> <p>Compliance ensures state continues to receive federal matching funds for services under the federal waiver program.</p> <p>Federal match for FY 2020-21 is \$802M.</p> | <p>Submittal of Evidentiary Reports that are found to be in compliance.</p> | <p>Both internal agency staff and external customers and providers will benefit from the data collection and reporting capabilities that are currently unavailable.</p> | <p>March 2022</p> |
| 2 | <p>Compliance with CMS federal program to require electronic visit verification (EVV) for home services In FY 2019-20, the waiver provided \$386 million in such services, which reflects \$238 million in federal matching funds (using the FY 2020-21 FMAP rate).</p> | <p>Claims for in-home services will be verified using electronic visit verification (EVV) technology.</p> | <p>Clients and Agency</p> | <p>January 2021</p> |

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 2020-21 is \$802 million. | Submittal of Evidentiary Reports that are found to be in compliance. | March 2022 |
| 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 <i>average</i> of 18,491 clients and \$339 million in expenditures for in-home services. An estimated 2% reduction from elimination of fraud and billing abuses is \$6.8 million a year. | Claims for in-home services will be verified 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. | January 2021 |
| 3 | More efficient transactions for client service needs. | Client | Faster Decisions regarding service needs. | Reduced time needed to respond to client requests | October 2020 |
| 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. | July 2021 |

SCHEDULE IV-B FOR – APD ICONNECT SYSTEM

| 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 2021 |
| 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 2021 |
| 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. | October 2021 |
| 8 | Secure maintenance of client central record | Client Agency | Confidential information is stored securely in electronic format. | Number of records stored electronically versus paper. | October 2021 |
| 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 it 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.) | October 2021 |
| 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 2022 |

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 (IAPD-U) 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 Implementation | 90% |
| Help Desk | 50% |
| 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 | <p>The required CBA forms are included as part of Appendix A. Statewide expenditures over the past five fiscal years show an <i>average</i> of 18,491 clients and \$339 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 equates to a savings of \$6.8 million a year.</p> <p>As a result, beginning in FY 2020-21, the net tangible benefit for the project is \$3,394,689.</p> <p>Please see Appendix A: APD iConnect Cost Benefit Analysis for specifics.</p> |
| CBA Form 2 - Project Cost Analysis | <p>The required CBA forms are included as Appendix A. Cumulative project costs to date including projected costs for FY 2020-21 are \$5.49 million. Remaining one-time project costs are \$1.94 million. Please see Appendix A: APD iConnect Cost Benefit Analysis for specifics.</p> |
| CBA Form 3 - Project Investment Summary | <p>The required CBA forms are included as Appendix A. The resulting information indicates the payback period for the project is 1 5/9 years and breakeven fiscal year is FY 2022-23. Please see Appendix A: APD iConnect Cost Benefit Analysis for specifics.</p> |

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:

| | | |
|---|--------------------------------------|---------------|
| Project | APD iConnect | |
| Agency | Agency for Persons with Disabilities | |
| FY 2020-21 LBR Issue Code: | FY 2020-21 LBR Issue Title: | |
| 36204C0 | iConnect System | |
| Risk Assessment Contact Info (Name, Phone #, and E-mail Address): | | |
| Lisa Robertson -- 850-922-9499 -- Lisa.Robertson@apdcares.org | | |
| Executive Sponsor | Barbara Palmer | |
| Project Manager | Naru Nayak | |
| Prepared By | Rose Salinas | 10/15/2020 |
| Risk Assessment Summary | | |
| Business Strategy | | |
| | Level of Project Risk | |
| Project Risk Area Breakdown | | |
| Risk Assessment Areas | | Risk Exposure |
| Strategic Assessment | | MEDIUM |
| Technology Exposure Assessment | | LOW |
| Organizational Change Management Assessment | | MEDIUM |
| Communication Assessment | | LOW |
| Fiscal Assessment | | MEDIUM |
| Project Organization Assessment | | MEDIUM |
| Project Management Assessment | | LOW |
| Project Complexity Assessment | | HIGH |
| Overall Project Risk | | MEDIUM |

The completion of the Risk Assessment Tool (Appendix B) determined the overall project risk to be “Medium” with the one major area of concern in Project Complexity.

SCHEDULE IV-B FOR – APD ICONNECT SYSTEM

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 |
|---|--|
| <p>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.</p> | <p>The agency has taken the following steps to mitigate this risk:</p> <ul style="list-style-type: none"> • 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). |
| <p>Due to external mandates, project schedule may have to be altered requiring that more end-users will have to be brought online sooner than currently planned, resulting in additional costs, quality degradation, and stakeholder dissatisfaction.</p> | <p>The agency has taken the following steps to mitigate this risk:</p> <ul style="list-style-type: none"> • Fast tracking (perform tasks concurrently where optimally possible) • Leveraging current Governance Structure (to expedite decisions, authorize additional resource-times on project) • Consider additional resources (support/operational/training) which can be diverted to assist |
| <p>Provider implementation logistics</p> <p>There are over 4,500 service providers who will be onboarded into iConnect. Providers can be solo or agency, so the number of actual users accessing the iConnect system will be exponentially higher.</p> <p>The original plan was to onboard providers geographically (or in other defined subsets) in groups which could be managed within existing resources. In working with AHCA and their interface between FMMIS and iConnect, it was determined that providers will have to be onboarded by service type, and all providers of a service must be onboarded at the same time regardless of geographic location.</p> <p>Also, most providers have had no prior electronic data interaction with APD, and analysis has indicated that their technical readiness also greatly varies.</p> <p>These factors could require significant additional resources and/or extended implementation time to overcome these risks.</p> | <p>The agency has taken the following steps to mitigate this risk:</p> <ul style="list-style-type: none"> • The decision has been made to rollout iConnect to providers in a phased approach. This will allow the agency to limit the need for significant additional resources to support a more condensed provider rollout. • Consider additional resources (support/operational/training) which can be diverted to assist |
| <p>As more of the functionality is rolled out, and with additional users going live, the likelihood of latent issues surfacing increases and could impact the project schedule.</p> | <p>The agency has taken the following steps to mitigate this risk:</p> <ul style="list-style-type: none"> • Include stabilization period after each go-live event. • Monitor user submitted Helpdesk tickets for any underlying system issues. • Review post-deployment issues promptly and escalate to |

- appropriate levels of management within the Agency and with the vendor.
- Deploy small (pilot) groups of users initially; followed by progressively larger groups of users.

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:

- Description of Current System**
- Current System Resource Requirements**
- Current System Performance**

| Name of Current System | a. Description of Current System | b. Current System Resource Requirements | c. Current System Performance |
|---|--|---|--|
| ABC (Allocation Budget and Contract Control System) | The Allocation, Budget and Contract Control (ABC) system is an automated and integrated client/budget information system designed to support planning and service provision to individuals with developmental disabilities who are clients of the Agency Persons with Disabilities. Invoices for State funded services and Cost plans for Medicaid Waiver funded services are entered into the system and expenditure information can be tracked and identified for individual consumers. The system also includes the consumer and vendor/provider demographic information. | <ul style="list-style-type: none"> • Load Balanced Web / Application Server • MS ASP.NET Framework 3.5 • AMT Framework • Failover SQL Server Cluster • SQL Server 2008 Databases • Reporting Server • SQL Server Reporting Services • Windows Server 2008 | <p>Total Number of Current Users: 1,270</p> <p>Max Number of Concurrent User Sessions Supported: 250</p> |
| 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. | <ul style="list-style-type: none"> • Load Balanced Web / Application Server • MS ASP.NET Framework 3.5 • MS CRM 2011 • Failover SQL Server Cluster • SQL Server 2008 Databases • Reporting Server • SQL Server Reporting Services • Windows Server 2008 | <p>Total Number of Current Users: 1,623</p> <p>Max Number of Concurrent User Sessions Supported: 400</p> |

SCHEDULE IV-B FOR – APD ICONNECT SYSTEM

| Name of Current System | a. Description of Current System | b. Current System Resource Requirements | c. Current System Performance |
|---|--|---|---|
| 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 | <ul style="list-style-type: none"> • Web / Application Server • MS ASP.NET Framework 4.0 • SQL Database Server • SQL Server 2008 Database • Windows Server 2008 | Total Number of Current Users: 50 Max Number of Concurrent User Sessions Supported: 50 |
| QSI (Questionnaire for Situational Information) | Questionnaire for Situational Information (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. | <ul style="list-style-type: none"> • Load Balanced Web / Application Web / Application Server • MS ASP.NET Framework 2.0 • SQL Database Server • SQL Server 2008 Databases • Windows Server 2008 | 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 | MS 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 2011, .NET Framework 3.5 | C# | SQL Server 2008 |
| Supported Employment Tracking System (SETS) | Web Application | .NET Framework 2.0 | 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 | <ul style="list-style-type: none"> ▪ 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 |

| | |
|---|---|
| <p>Provide Services In-House</p> | <ul style="list-style-type: none"> ▪ 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 went live with Rollout #1 in December 2018. This rollout included initial functionality including demographics for agency staff and Waiver Support Coordinators (WSCs).

In July 2020, the Agency completed Rollout #2 which brought FY 2020-21 Service Authorizations into the iConnect system.

The Agency and State of Florida must meet the Federal mandate for EVV (Electronic Visit Verification) implementation of PCS (Personal Care Services) by the approved extension deadline of January 2021. (CMS approved the state’s EVV Good Faith Effort (GFE) Exemption Request for Implementing EVV In December 2019). As a result, the Project management team revamped the delivery schedule to meet this mandate by the required deadline. In September 2020, the agency successfully completed a rigorous Operational Readiness Review (ORR) of the iConnect EVV solution with CMS/MITRE staff. The first rollout of EVV to Direct Service Providers of Respite and Personal Support service providers occurred in

October 2020. Subsequent rollouts to respite and personal support providers will continue throughout October-December 2020.

The agency and the vendor are working cooperatively on all phases of testing and training in preparation for future rollouts. Subsequently, providers will be onboarded via progressive rollouts and finally, consumers will be onboarded. Please refer to the implementation plan in **Appendix F: APD iConnect WBS and Implementation Plan**.

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:

| Hardware/Software Minimum Requirements | |
|---|---|
| Workstations that access Mediware applications must meet the minimum system requirements: | |
| Certified System Requirements | |
| Processor | 2.0 GHz processing or better (multi-core processors are preferred) |
| RAM | 4 GB minimum, 8 GB recommended. The greater the number of applications running concurrently on your workstation, the more RAM is required to ensure optimal performance. |
| Screen Resolution | 1024 x 768 minimum (1280 x 1024 is ideal) |
| Microsoft | Microsoft Office 2010, 2013, and Office 365, InfoPath 2010 |
| Other Add-Ons | Adobe Reader: Required for viewing/printing PDF files Adobe Flash Player: Required for on-demand trainings |

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 and an outsourced Tier 1 helpdesk will be \$691,868. CMS will provide a fifty percent match on these annual costs.

E. Capacity Planning
(historical and current trends versus projected requirements)

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.

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.

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, 2021 for personal care services, the Federal medical assistance percentage shall be reduced proportionately for those states who do not fulfill this requirement. In FY 2018-19, the waiver provided \$386 million in such services, which reflects \$238 million in federal matching funds (using the FY 2020-21 FMAP rate). 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.

Please see Section VI – C.1 and Section VI-C.3 for options and alternatives considered.

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 CMS electronic visit verification requirement, 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. **Please see Appendix F: APD iConnect WBS and Implementation Plan.**

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

VIII. Appendices

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

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 Implementation Plan

CBAForm 1 - Net Tangible Benefits

| | | | |
|--------|--------------------------------------|---------|----------|
| Agency | Agency for Persons with Disabilities | Project | iConnect |
|--------|--------------------------------------|---------|----------|

| Net Tangible Benefits - Operational Cost Changes (Costs of Current Operations versus Proposed Operations as a Result of the Project) and Additional Tangible Benefits -- CBAForm 1A | | | | | | | | | | | | | | | |
|---|-------------------------------|--------------------------------|--|-------------------------------|--------------------------------|--|-------------------------------|--------------------------------|--|-------------------------------|--|--|-------------------------------|--------------------------------|--|
| Agency <i>(Recurring Costs Only -- No Project Costs)</i> | FY 2021-22 | | | FY 2022-23 | | | FY 2023-24 | | | FY 2024-25 | | | FY 2025-26 | | |
| | (a) Existing Program Costs | (b) Operational Cost Change | (c) = (a)+(b) New Program Costs resulting from Proposed Project | (a) Existing Program Costs | (b) Operational Cost Change | (c) = (a) + (b) New Program Costs resulting from Proposed Project | (a) Existing Program Costs | (b) Operational Cost Change | (c) = (a) + (b) New Program Costs resulting from Proposed Project | (a) Existing Program Costs | (b) Cost Change Operational Cost Change | (c) = (a) + (b) New Program Costs resulting from Proposed Project | (a) Existing Program Costs | (b) Operational Cost Change | (c) = (a) + (b) New Program Costs resulting from Proposed Project |
| A. Personnel Costs -- Agency-Managed Staff | \$280,000 | \$ - | \$280,000 | \$280,000 | \$0 | \$280,000 | \$280,000 | \$0 | \$280,000 | \$280,000 | \$0 | \$280,000 | \$280,000 | \$0 | \$280,000 |
| A.b Total Staff | 2.00 | \$ - | 2.00 | 2.00 | 0.00 | 2.00 | 2.00 | 0.00 | 2.00 | 2.00 | 0.00 | 2.00 | 2.00 | 0.00 | 2.00 |
| A-1.a. State FTEs (Salaries & Benefits) | \$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 |
| A-2.a. OPS Staff (Salaries) | \$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 |
| A-3.a. Staff Augmentation (Contract Cost) | \$ 280,000 | \$ - | \$280,000 | \$ 280,000 | \$0 | \$280,000 | \$ 280,000 | \$0 | \$280,000 | \$ 280,000 | \$0 | \$280,000 | \$ 280,000 | \$0 | \$280,000 |
| A-3.b. Staff Augmentation (# of Contractors) | 2.00 | \$ - | 2.00 | 2.00 | 0.00 | 2.00 | 2.00 | 0.00 | 2.00 | 2.00 | 0.00 | 2.00 | 2.00 | 0.00 | 2.00 |
| B. Application Maintenance Costs | \$1,750,000 | \$ - | \$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 |
| B-1. Managed Services (Staffing) | \$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 |
| B-3. Software | \$0 | \$ - | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| B-4. Other WellSky SaaS Software | \$1,750,000 | \$ - | \$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 |
| C. Data Center Provider Costs | \$0 | \$ - | \$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 |
| C-2. Infrastructure | \$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 |
| C-4. Disaster Recovery | \$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 |
| D. Plant & Facility Costs | \$0 | \$ - | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| E. Other Costs | \$411,868 | \$0 | \$411,868 | \$411,868 | \$0 | \$411,868 | \$411,868 | \$0 | \$411,868 | \$411,868 | \$0 | \$411,868 | \$411,868 | \$0 | \$411,868 |
| E-1. Training | \$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 |
| E-3. Other Equipment/Ongoing Staff Expenses | \$7,976 | \$ - | \$7,976 | \$7,976 | \$0 | \$7,976 | \$7,976 | \$0 | \$7,976 | \$7,976 | \$0 | \$7,976 | \$7,976 | \$0 | \$7,976 |
| E-4. Other Outsourced Tier 1 Help Desk Services | \$403,892 | \$ - | \$403,892 | \$403,892 | \$0 | \$403,892 | \$403,892 | \$0 | \$403,892 | \$403,892 | \$0 | \$403,892 | \$403,892 | \$0 | \$403,892 |
| Total of Recurring Operational Costs | \$2,441,868 | \$ - | \$2,441,868 | \$2,441,868 | \$0 | \$2,441,868 | \$2,441,868 | \$0 | \$2,441,868 | \$2,441,868 | \$0 | \$2,441,868 | \$2,441,868 | \$0 | \$2,441,868 |
| F. Additional Tangible Benefits: | | \$ 3,394,689 | | | \$6,789,377 | | | \$6,789,377 | | | \$6,789,377 | | | \$6,789,377 | |
| F-1. EVV | | \$3,394,689 | | | \$6,789,377 | | | \$6,789,377 | | | \$6,789,377 | | | \$6,789,377 | |
| F-2. Specify | | \$ - | | | \$0 | | | \$0 | | | \$0 | | | \$0 | |
| F-3. Specify | | \$ - | | | \$0 | | | \$0 | | | \$0 | | | \$0 | |
| Total Net Tangible Benefits: | | \$ 3,394,689 | | | \$6,789,377 | | | \$6,789,377 | | | \$6,789,377 | | | \$6,789,377 | |

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

| A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | | |
|----|---|---------------------------------------|-------------------------|--|--------|--------------|---------------------|--------|------------|---------------------|--------|-----------|---------------------|--------|-----------|---------------------|--------|--------------|---------------------|-------|--------------|
| 1 | Agency for Persons with Disabilities | iConnect | | | | | | | | | | | | | | | | | | | |
| | | | | CBAForm 2A Baseline Project Budget | | | | | | | | | | | | | | | | | |
| | | | | FY2021-22 | | FY2022-23 | | | FY2023-24 | | | FY2024-25 | | | FY2025-26 | | | TOTAL | | | |
| | | | | \$ 5,490,127 | | \$ 1,372,118 | | | \$ 622,047 | | | \$ - | | | \$ - | | | \$ 7,484,292 | | | |
| 4 | Item Description <i>(remove guidelines and annotate entries here)</i> | Project Cost Element | Appropriation Category | Current & Previous Years Project- Related Cost | YR 1 # | YR 1 LBR | YR 1 Base Budget | YR 2 # | YR 2 LBR | YR 2 Base Budget | YR 3 # | YR 3 LBR | YR 3 Base Budget | YR 4 # | YR 4 LBR | YR 4 Base Budget | YR 5 # | YR 5 LBR | YR 5 Base Budget | TOTAL | |
| 5 | Costs for all state employees working on the project. | FTE | S&B | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | \$ - | \$ - |
| 6 | Costs for all OPS employees working on the project. | OPS | OPS | \$ - | 6.00 | \$ 408,272 | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | \$ - | \$ 408,272 |
| 7 | Staffing costs for personnel using Time & Expense. | Staff Augmentation | Contracted Services | \$ 2,210,962 | 10.00 | \$ 601,976 | \$ - | 10.00 | \$ 300,988 | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | \$ - | \$ 3,113,926 |
| 8 | Project management personnel and related deliverables. | Project Management | Contracted Services | \$ 1,424,435 | 1.00 | \$ 239,904 | \$ - | 0.00 | \$ 119,952 | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | \$ - | \$ 1,784,291 |
| 9 | Project oversight to include Independent Verification & Validation (IV&V) personnel and related deliverables. | Project Oversight | Contracted Services | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | \$ - | \$ - |
| 10 | Staffing costs for all professional services not included in other categories. | Consultants/Contractors | Contracted Services | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | \$ - | \$ - |
| 11 | Separate requirements analysis and feasibility study procurements. | Project Planning/Analysis | Contracted Services | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ - |
| 12 | Hardware purchases not included in data center services. | Hardware | OCO | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ - |
| 13 | Commercial software purchases and licensing costs. | Commercial Software | Contracted Services | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ - |
| 14 | Professional services with fixed-price costs (i.e. software development, installation, project documentation) | Project Deliverables | Contracted Services | \$ 1,854,731 | | \$ 78,098 | \$ - | | \$ 179,173 | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ 2,112,002 |
| 15 | All first-time training costs associated with the project. | Training | Contracted Services | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ - |
| 16 | Include the quote received from the data center provider for project equipment and services. Only include one-time project costs in this row. Recurring, project-related data center costs are included in CBA Form 1A. | Data Center Services - One Time Costs | Data Center Category | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ - |
| 17 | Other contracted services not included in other categories. | Other Services | Contracted Services | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ - |
| 18 | Include costs for non-state data center equipment required by the project and the proposed solution (insert additional rows as needed for detail) | Equipment | Expense | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ - |
| 19 | Include costs associated with leasing space for project personnel. | Leased Space | Expense | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ - |
| 20 | Other project expenses not included in other categories. | Other Expenses | Expense | \$ - | | \$ 43,868 | \$ - | | \$ 21,934 | \$ - | | \$ - | \$ - | | \$ - | \$ - | | \$ - | \$ - | \$ - | \$ 65,802 |
| 21 | Total | | | \$ 5,490,127 | 17.00 | \$ 1,372,118 | \$ - | 10.00 | \$ 622,047 | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | 0.00 | \$ - | \$ - | \$ - | \$ 7,484,292 |

CBAForm 2 - Project Cost Analysis

| | | | |
|--------|---|---------|-----------------|
| Agency | <u>Agency for Persons with Disabilities</u> | Project | <u>iConnect</u> |
|--------|---|---------|-----------------|

| PROJECT COST SUMMARY | PROJECT COST SUMMARY (from CBAForm 2A) | | | | | TOTAL |
|---|--|---------------|---------------|---------------|---------------|-------------|
| | FY 2021-22 | FY 2022-23 | FY 2023-24 | FY 2024-25 | FY 2025-26 | |
| TOTAL PROJECT COSTS (*) | \$1,372,118 | \$622,047 | \$0 | \$0 | \$0 | \$7,484,292 |
| CUMULATIVE PROJECT COSTS <small>(includes Current & Previous Years' Project-Related Costs)</small> | \$6,862,245 | \$7,484,292 | \$7,484,292 | \$7,484,292 | \$7,484,292 | |
| Total Costs are carried forward to CBAForm3 Project Investment Summary worksheet. | | | | | | |

| PROJECT FUNDING SOURCES | PROJECT FUNDING SOURCES - CBAForm 2B | | | | | TOTAL |
|--|--------------------------------------|---------------|---------------|---------------|---------------|-------------|
| | FY 2021-22 | FY 2022-23 | FY 2023-24 | FY 2024-25 | FY 2025-26 | |
| General Revenue | \$418,092 | \$116,203 | \$0 | \$0 | \$0 | \$534,295 |
| Trust Fund | \$954,026 | \$505,844 | \$0 | \$0 | \$0 | \$1,459,870 |
| Federal Match <input type="checkbox"/> | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| Grants <input type="checkbox"/> | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| Other <input type="checkbox"/> Specify | \$0 | \$0 | \$0 | \$0 | \$0 | \$0 |
| TOTAL INVESTMENT | \$1,372,118 | \$622,047 | \$0 | \$0 | \$0 | \$1,994,165 |
| CUMULATIVE INVESTMENT | \$1,372,118 | \$1,994,165 | \$1,994,165 | \$1,994,165 | \$1,994,165 | |

| 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 | |

CBAForm 3 - Project Investment Summary

| | | | |
|--------|---|---------|----------|
| Agency | Agency for Persons with Disabilities | Project | iConnect |
|--------|---|---------|----------|

| COST BENEFIT ANALYSIS -- CBAForm 3A | | | | | | |
|--|---------------|---------------|---------------|---------------|---------------|------------------------|
| | FY 2021-22 | FY 2022-23 | FY 2023-24 | FY 2024-25 | FY 2025-26 | TOTAL FOR ALL YEARS |
| Project Cost | \$1,372,118 | \$622,047 | \$0 | \$0 | \$0 | \$7,484,292 |
| Net Tangible Benefits | \$3,394,689 | \$6,789,377 | \$6,789,377 | \$6,789,377 | \$6,789,377 | \$30,552,198 |
| Return on Investment | (\$3,467,557) | \$6,167,330 | \$6,789,377 | \$6,789,377 | \$6,789,377 | \$23,067,906 |
| Year to Year Change in Program Staffing | 0 | 0 | 0 | 0 | 0 | |

| RETURN ON INVESTMENT ANALYSIS -- CBAForm 3B | | |
|---|--------------|---|
| Payback Period (years) | 1 5/9 | 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) | \$20,052,511 | NPV is the present-day value of the project's benefits less costs over the project's lifecycle. |
| Internal Rate of Return (IRR) | 181.10% | IRR is the project's rate of return. |

| Investment Interest Earning Yield -- CBAForm 3C | | | | | |
|---|---------------|---------------|---------------|---------------|---------------|
| Fiscal Year | FY 2021-22 | FY 2022-23 | FY 2023-24 | FY 2024-25 | FY 2025-26 |
| Cost of Capital | 3.30% | 3.42% | 3.51% | 3.63% | 3.80% |

| | B | C | D | E | F | G | H | | | | |
|------------------------------|---|-----------|---|------------------------------------|---|-------------------|----------------------|--------------|--|------------------------------|--|
| 3 | Project | | <i>APD iConnect</i> | | | | | | | | |
| 4 | | | | | | | | | | | |
| 5 | Agency | | <i>Agency for Persons with Disabilities</i> | | | | | | | | |
| 6 | FY 2020-21 LBR Issue Code: | | | FY 2020-21 LBR Issue Title: | | | | | | | |
| 7 | <i>36204C0</i> | | | <i>iConnect System</i> | | | | | | | |
| 8 | Risk Assessment Contact Info (Name, Phone #, and E-mail Address): | | | | | | | | | | |
| 9 | <i>Lisa Robertson -- 850-922-9499 -- Lisa.Robertson@apdcares.org</i> | | | | | | | | | | |
| 10 | Executive Sponsor | | <i>Barbara Palmer</i> | | | | | | | | |
| 11 | Project Manager | | <i>Naru Nayak</i> | | | | | | | | |
| 12 | Prepared By | | <i>Rose Salinas</i> | | | <i>10/15/2020</i> | | | | | |
| 14 | Risk Assessment Summary | | | | | | | | | | |
| 15 | <div style="display: flex; align-items: center; justify-content: center;"> <div style="writing-mode: vertical-rl; transform: rotate(180deg); font-weight: bold; margin-right: 10px;">Business Strategy</div> <table border="1" style="border-collapse: collapse; width: 100%; height: 100%;"> <tr> <td style="width: 50%; height: 50%; text-align: center; vertical-align: middle;"> </td> <td style="width: 50%;"></td> </tr> <tr> <td style="text-align: center;">Level of Project Risk</td> <td></td> </tr> </table> </div> | | | | | | | | | Level of Project Risk | |
| | | | | | | | | | | | |
| Level of Project Risk | | | | | | | | | | | |
| 16 | | | | | | | | Most Aligned | | | |
| 17 | | | | | | | | | | | |
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| 27 | | | | | | | | | | | |
| 28 | | | | | | | | | | | |
| 29 | Least Aligned | | | | | | | | | | |
| 30 | Least Risk | Most Risk | | | | | | | | | |
| 31 | | | | | | | | | | | |
| 32 | | | | | | | | | | | |
| 34 | Project Risk Area Breakdown | | | | | | | | | | |
| 35 | Risk Assessment Areas | | | | | | <i>Risk Exposure</i> | | | | |
| 36 | Strategic Assessment | | | | | | MEDIUM | | | | |
| 37 | | | | | | | | | | | |
| 38 | Technology Exposure Assessment | | | | | | LOW | | | | |
| 39 | | | | | | | | | | | |
| 40 | Organizational Change Management Assessment | | | | | | MEDIUM | | | | |
| 41 | | | | | | | | | | | |
| 42 | Communication Assessment | | | | | | LOW | | | | |
| 43 | | | | | | | | | | | |
| 44 | Fiscal Assessment | | | | | | MEDIUM | | | | |
| 45 | | | | | | | | | | | |
| 46 | Project Organization Assessment | | | | | | MEDIUM | | | | |
| 47 | | | | | | | | | | | |
| 48 | Project Management Assessment | | | | | | LOW | | | | |
| 49 | | | | | | | | | | | |
| 50 | Project Complexity Assessment | | | | | | HIGH | | | | |
| 51 | | | | | | | | | | | |
| 52 | | | | | | | | | | | |
| 53 | Overall Project Risk | | | | | | MEDIUM | | | | |

| | B | C | D | E |
|----|--|---|--|--|
| 1 | Agency: Agency for Persons with Disabilities | | | Project: APD iConnect |
| 3 | Section 1 -- Strategic Area | | | |
| 4 | # | Criteria | Values | Answer |
| 5 | 1.01 | Are project objectives clearly aligned with the agency's legal mission? | 0% to 40% -- Few or no objectives aligned | 81% to 100% -- All or nearly all objectives aligned |
| 6 | | | 41% to 80% -- Some objectives aligned | |
| 7 | | | 81% to 100% -- All or nearly all objectives aligned | |
| 8 | 1.02 | Are project objectives clearly documented and understood by all stakeholder groups? | Not documented or agreed to by stakeholders | Documented with sign-off by stakeholders |
| 9 | | | Informal agreement by stakeholders | |
| 10 | | | Documented with sign-off by stakeholders | |
| 11 | 1.03 | Are the project sponsor, senior management, and other executive stakeholders actively involved in meetings for the review and success of the project? | Not or rarely involved | Project charter signed by executive sponsor and executive team actively engaged in steering committee meetings |
| 12 | | | Most regularly attend executive steering committee meetings | |
| 13 | | | Project charter signed by executive sponsor and executive team actively engaged in steering committee meetings | |
| 14 | 1.04 | Has the agency documented its vision for how changes to the proposed technology will improve its business processes? | Vision is not documented | Vision is completely documented |
| 15 | | | Vision is partially documented | |
| 16 | | | Vision is completely documented | |
| 17 | 1.05 | Have all project business/program area requirements, assumptions, constraints, and priorities been defined and documented? | 0% to 40% -- Few or none defined and documented | 81% to 100% -- All or nearly all defined and documented |
| 18 | | | 41% to 80% -- Some defined and documented | |
| 19 | | | 81% to 100% -- All or nearly all defined and documented | |
| 20 | 1.06 | Are all needed changes in law, rule, or policy identified and documented? | No changes needed | Legislation or proposed rule change is drafted |
| 21 | | | Changes unknown | |
| 22 | | | Changes are identified in concept only | |
| 23 | | | Changes are identified and documented | |
| 24 | | | Legislation or proposed rule change is drafted | |
| 25 | 1.07 | Are any project phase or milestone completion dates fixed by outside factors, e.g., state or federal law or funding restrictions? | Few or none | Few or none |
| 26 | | | Some | |
| 27 | | | All or nearly all | |
| 28 | 1.08 | What is the external (e.g. public) visibility of the proposed system or project? | Minimal or no external use or visibility | Extensive external use or visibility |
| 29 | | | Moderate external use or visibility | |
| 30 | | | Extensive external use or visibility | |
| 31 | 1.09 | What is the internal (e.g. state agency) visibility of the proposed system or project? | Multiple agency or state enterprise visibility | Multiple agency or state enterprise visibility |
| 32 | | | Single agency-wide use or visibility | |
| 33 | | | Use or visibility at division and/or bureau level only | |
| 34 | 1.10 | Is this a multi-year project? | Greater than 5 years | Greater than 5 years |
| 35 | | | Between 3 and 5 years | |
| 36 | | | Between 1 and 3 years | |
| 37 | | | 1 year or less | |

| | B | C | D | E |
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| 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 technical solution in a production environment? | Read about only or attended conference and/or vendor presentation | Supported production system 1 year to 3 years |
| 6 | | | Supported prototype or production system less than 6 months | |
| 7 | | | Supported production system 6 months to 12 months | |
| 8 | | | Supported production system 1 year to 3 years | |
| 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 solution to implement and operate the new system? | External technical resources will be needed for implementation and operations | External technical resources will be needed for implementation and operations |
| 11 | | | External technical resources will be needed through implementation only | |
| 12 | | | Internal resources have sufficient knowledge for implementation and operations | |
| 13 | 2.03 | Have all relevant technical alternatives/ solution options been researched, documented and considered? | No technology alternatives researched | All or nearly all alternatives documented and considered |
| 14 | | | Some alternatives documented and considered | |
| 15 | | | All or nearly all alternatives documented and considered | |
| 16 | 2.04 | Does the proposed technical solution comply with all relevant agency, statewide, or industry technology standards? | No relevant standards have been identified or incorporated into proposed technology | Proposed technology solution is fully compliant with all relevant agency, statewide, or industry standards |
| 17 | | | Some relevant standards have been incorporated into the proposed technology | |
| 18 | | | Proposed technology solution is fully compliant with all relevant agency, statewide, or industry standards | |
| 19 | 2.05 | Does the proposed technical solution require significant change to the agency's existing technology infrastructure? | Minor or no infrastructure change required | Minor or no infrastructure change required |
| 20 | | | Moderate infrastructure change required | |
| 21 | | | Extensive infrastructure change required | |
| 22 | | | Complete infrastructure replacement | |
| 23 | 2.06 | Are detailed hardware and software capacity requirements defined and documented? | Capacity requirements are not understood or defined | Capacity requirements are based on historical data and new system design specifications and performance requirements |
| 24 | | | Capacity requirements are defined only at a conceptual level | |
| 25 | | | Capacity requirements are based on historical data and new system design specifications and performance requirements | |

| | B | C | D | E |
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| 1 | Agency: Agency for Persons with Disabilities | | Project: APD iConnect | |
| 3 | Section 3 -- Organizational Change Management Area | | | |
| 4 | # | Criteria | Values | Answer |
| 5 | 3.01 | What is the expected level of organizational change that will be imposed within the agency if the project is successfully implemented? | Extensive changes to organization structure, staff or business processes | Extensive changes to organization structure, staff or business processes |
| 6 | | | Moderate changes to organization structure, staff or business processes | |
| 7 | | | Minimal changes to organization structure, staff or business processes structure | |
| 8 | 3.02 | Will this project impact essential business processes? | Yes | Yes |
| 9 | | | No | |
| 10 | 3.03 | Have all business process changes and process interactions been defined and documented? | 0% to 40% -- Few or no process changes defined and documented | 81% to 100% -- All or nearly all processes defined and documented |
| 11 | | | 41% to 80% -- Some process changes defined and documented | |
| 12 | | | 81% to 100% -- All or nearly all processes defined and documented | |
| 13 | 3.04 | Has an Organizational Change Management Plan been approved for this project? | Yes | Yes |
| 14 | | | No | |
| 15 | 3.05 | Will the agency's anticipated FTE count change as a result of implementing the project? | Over 10% FTE count change | Less than 1% FTE count change |
| 16 | | | 1% to 10% FTE count change | |
| 17 | | | Less than 1% FTE count change | |
| 18 | 3.06 | Will the number of contractors change as a result of implementing the project? | Over 10% contractor count change | Less than 1% contractor count change |
| 19 | | | 1 to 10% contractor count change | |
| 20 | | | Less than 1% contractor count change | |
| 21 | 3.07 | What is the expected level of change impact on the citizens of the State of Florida if the project is successfully implemented? | Extensive change or new way of providing/receiving services or information) | Extensive change or new way of providing/receiving services or information) |
| 22 | | | Moderate changes | |
| 23 | | | Minor or no changes | |
| 24 | 3.08 | What is the expected change impact on other state or local government agencies as a result of implementing the project? | Extensive change or new way of providing/receiving services or information | Minor or no changes |
| 25 | | | Moderate changes | |
| 26 | | | Minor or no changes | |
| 27 | 3.09 | Has the agency successfully completed a project with similar organizational change requirements? | No experience/Not recently (>5 Years) | Recently completed project with similar change requirements |
| 28 | | | Recently completed project with fewer change requirements | |
| 29 | | | Recently completed project with similar change requirements | |
| 30 | | | Recently completed project with greater change requirements | |

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

| | B | C | D | E |
|----|--|--|---|---|
| 1 | Agency: Agency for Persons with Disabilities | | Project: APD iConnect | |
| 3 | Section 5 -- Fiscal Area | | | |
| 4 | # | Criteria | Values | Answer |
| 5 | 5.01 | Has a documented Spending Plan been approved for the entire project lifecycle? | Yes | Yes |
| 6 | | | No | |
| 7 | 5.02 | Have all project expenditures been identified in the Spending Plan? | 0% to 40% -- None or few defined and documented | 81% to 100% -- All or nearly all defined and documented |
| 8 | | | 41% to 80% -- Some defined and documented | |
| 9 | | | 81% to 100% -- All or nearly all defined and documented | |
| 10 | 5.03 | What is the estimated total cost of this project over its entire lifecycle? | Unknown | Between \$2 M and \$10 M |
| 11 | | | Greater than \$10 M | |
| 12 | | | Between \$2 M and \$10 M | |
| 13 | | | Between \$500K and \$1,999,999 | |
| 14 | | | Less than \$500 K | |
| 15 | 5.04 | Is the cost estimate for this project based on quantitative analysis using a standards-based estimation model? | Yes | No |
| 16 | | | No | |
| 17 | 5.05 | What is the character of the cost estimates for this project? | Detailed and rigorous (accurate within ±10%) | Detailed and rigorous (accurate within ±10%) |
| 18 | | | Order of magnitude – estimate could vary between 10-100% | |
| 19 | | | Placeholder – actual cost may exceed estimate by more than 100% | |
| 20 | 5.06 | Are funds available within existing agency resources to complete this project? | Yes | No |
| 21 | | | No | |
| 22 | 5.07 | Will/should multiple state or local agencies help fund this project or system? | Funding from single agency | Funding from single agency |
| 23 | | | Funding from local government agencies | |
| 24 | | | Funding from other state agencies | |
| 25 | 5.08 | If federal financial participation is anticipated as a source of funding, has federal approval been requested and received? | Neither requested nor received | Requested and received |
| 26 | | | Requested but not received | |
| 27 | | | Requested and received | |
| 28 | | | Not applicable | |
| 29 | 5.09 | Have all tangible and intangible benefits been identified and validated as reliable and achievable? | Project benefits have not been identified or validated | All or nearly all project benefits have been identified and validated |
| 30 | | | Some project benefits have been identified but not validated | |
| 31 | | | Most project benefits have been identified but not validated | |
| 32 | | | All or nearly all project benefits have been identified and validated | |
| 33 | 5.10 | What is the benefit payback period that is defined and documented? | Within 1 year | Within 3 years |
| 34 | | | Within 3 years | |
| 35 | | | Within 5 years | |
| 36 | | | More than 5 years | |
| 37 | | | No payback | |
| 38 | 5.11 | Has the project procurement strategy been clearly determined and agreed to by affected stakeholders? | Procurement strategy has not been identified and documented | Stakeholders have reviewed and approved the proposed procurement strategy |
| 39 | | | Stakeholders have not been consulted re: procurement strategy | |
| 40 | | | Stakeholders have reviewed and approved the proposed procurement strategy | |
| 41 | 5.12 | What is the planned approach for acquiring necessary products and solution services to successfully complete the project? | Time and Expense (T&E) | Firm Fixed Price (FFP) |
| 42 | | | Firm Fixed Price (FFP) | |
| 43 | | | Combination FFP and T&E | |
| 44 | 5.13 | What is the planned approach for procuring hardware and software for the project? | Timing of major hardware and software purchases has not yet been determined | Just-in-time purchasing of hardware and software is documented in the project schedule |
| 45 | | | Purchase all hardware and software at start of project to take advantage of one-time discounts | |
| 46 | | | Just-in-time purchasing of hardware and software is documented in the project schedule | |
| 47 | 5.14 | Has a contract manager been assigned to this project? | No contract manager assigned | Contract manager assigned is not the procurement manager or the project manager |
| 48 | | | Contract manager is the procurement manager | |
| 49 | | | Contract manager is the project manager | |
| 50 | | | Contract manager assigned is not the procurement manager or the project manager | |
| 51 | 5.15 | Has equipment leasing been considered for the project's large-scale computing purchases? | Yes | Yes |
| 52 | | | No | |
| 53 | 5.16 | Have all procurement selection criteria and outcomes been clearly identified? | No selection criteria or outcomes have been identified | All or nearly all selection criteria and expected outcomes have been defined and documented |
| 54 | | | Some selection criteria and outcomes have been defined and documented | |
| 55 | | | All or nearly all selection criteria and expected outcomes have been defined and documented | |
| 56 | 5.17 | Does the procurement strategy use a multi-stage evaluation process to progressively narrow the field of prospective vendors to the single, best qualified candidate? | Procurement strategy has not been developed | Multi-stage evaluation and proof of concept or prototype planned/used to select best qualified vendor |
| 57 | | | Multi-stage evaluation not planned/used for procurement | |
| 58 | | | Multi-stage evaluation and proof of concept or prototype planned/used to select best qualified vendor | |
| 59 | 5.18 | For projects with total cost exceeding \$10 million, did/will the procurement strategy require a proof of concept or prototype as part of the bid response? | Procurement strategy has not been developed | Not applicable |
| 60 | | | No, bid response did/will not require proof of concept or prototype | |
| 61 | | | Yes, bid response did/will include proof of concept or prototype | |
| 62 | | | Not applicable | |

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

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

| | B | C | D | E |
|----|--|--|--|-------------------------------------|
| 1 | Agency: Agency for Persons with Disabilities | | Project: APD iConnect | |
| 2 | | | | |
| 3 | Section 8 -- Project Complexity Area | | | |
| 4 | # | Criteria | Values | Answer |
| 5 | 8.01 | How complex is the proposed solution compared to the current agency systems? | Unknown at this time | More complex |
| 6 | | | More complex | |
| 7 | | | Similar complexity | |
| 8 | | | Less complex | |
| 9 | 8.02 | Are the business users or end users dispersed across multiple cities, counties, districts, or regions? | Single location | More than 3 sites |
| 10 | | | 3 sites or fewer | |
| 11 | | | More than 3 sites | |
| 12 | 8.03 | Are the project team members dispersed across multiple cities, counties, districts, or regions? | Single location | More than 3 sites |
| 13 | | | 3 sites or fewer | |
| 14 | | | More than 3 sites | |
| 15 | 8.04 | How many external contracting or consulting organizations will this project require? | No external organizations | 1 to 3 external organizations |
| 16 | | | 1 to 3 external organizations | |
| 17 | | | More than 3 external organizations | |
| 18 | 8.05 | What is the expected project team size? | Greater than 15 | Greater than 15 |
| 19 | | | 9 to 15 | |
| 20 | | | 5 to 8 | |
| 21 | | | Less than 5 | |
| 22 | 8.06 | How many external entities (e.g., other agencies, community service providers, or local government entities) will be impacted by this project or system? | More than 4 | More than 4 |
| 23 | | | 2 to 4 | |
| 24 | | | 1 | |
| 25 | | | None | |
| 26 | 8.07 | What is the impact of the project on state operations? | Business process change in single division or bureau | Agency-wide business process change |
| 27 | | | Agency-wide business process change | |
| 28 | | | Statewide or multiple agency business process change | |
| 29 | 8.08 | Has the agency successfully completed a similarly-sized project when acting as Systems Integrator? | Yes | No |
| 30 | | | No | |
| 31 | 8.09 | What type of project is this? | Infrastructure upgrade | Combination of the above |
| 32 | | | Implementation requiring software development or purchasing commercial off the shelf (COTS) software | |
| 33 | | | Business Process Reengineering | |
| 34 | | | Combination of the above | |
| 35 | 8.10 | Has the project manager successfully managed similar projects to completion? | No recent experience | Greater size and complexity |
| 36 | | | Lesser size and complexity | |
| 37 | | | Similar size and complexity | |
| 38 | | | Greater size and complexity | |
| 39 | 8.11 | Does the agency management have experience governing projects of equal or similar size and complexity to successful completion? | No recent experience | Lesser size and complexity |
| 40 | | | Lesser size and complexity | |
| 41 | | | Similar size and 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, Qlarant, 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, Qlarant, 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. |

The letter and number identification above is taken from CMS and is non-contiguous as it contains the specific measures and assurances relative to the APD HCBS Waiver.

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, Qlarant, 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, Qlarant, 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. |

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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, Qlarant, 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. |

The letter and number identification above is taken from CMS and is non-contiguous as it contains the specific measures and assurances relative to the APD HCBS Waiver.

| # | 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, Qlarant, 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, Qlarant, 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, Qlarant, 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. |

The letter and number identification above is taken from CMS and is non-contiguous as it contains the specific measures and assurances relative to the APD HCBS Waiver.

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, Qlarant, 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. |

The letter and number identification above is taken from CMS and is non-contiguous as it contains the specific measures and assurances relative to the APD HCBS Waiver.

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, Qlarant, identifies billing discrepancies between iBudget service authorizations and FMMIS claims data. Since Qlarant 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 Qlarant once a month. Qlarant 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, Qlarant, identifies billing discrepancies between iBudget service authorizations and FMMIS claims data. Since Qlarant 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 Qlarant once a month. Qlarant 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, Qlarant, identifies billing discrepancies between iBudget service authorizations and FMMIS claims data. Since Qlarant 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 Qlarant 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. |

The letter and number identification above is taken from CMS and is non-contiguous as it contains the specific measures and assurances relative to the APD HCBS Waiver.



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 taken together with derived business rules, supports all APD businessprocess 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. <i>See forms for data elements #28, 29, 118, 123</i> | 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. <i>See attached screenshot #117, 27b, 150, input screen for data elements</i> | 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. <i>See attached forms for data elements #28, 29</i> | 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. | 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, and 25 for data 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 | 5 | |

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| 22 | | 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 Provider Request for Behavior Focused and Intensive Behavioral Residential Habilitation Designation data for the client. See form for data elements #54, 45, 45a | 5 | |
| 23 | | Behavioral Services | Behavioral Services | The system shall provide the ability 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 | 5 | |
| 24 | | Behavioral Services | Behavioral Services | The system shall provide the ability 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 | 5 | |
| 25 | | Behavioral Services | Behavioral Services | The system shall provide the ability 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 | 5 | |

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| 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 | |

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| 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. <i>See Forms #13 - #23, #87, #88 for data elements.</i> | 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 <i>See attached forms for data elements #20 and #21</i> | 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. <i>See attached forms for data elements #20 and #21</i> | 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 | |

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| 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 | |

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| 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+. <i>See forms #16 and #23</i> | 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+. <i>See form #88</i> | 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. <i>See Forms #87, 88 for data elements</i> | 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. <i>See attached forms for data elements #20 and #21</i> | 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. |

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| 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. <i>See Forms # 26, 26a, 38, 96, 97, 98, 101, 65 for data elements</i> | 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. <i>See Forms # 15, 26, 26a, 38, 65, 95, 96, 97, 98, 101, 157 for data elements</i> | 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). <i>See Forms # 26, 26a, 38, 65, 96, 97, 98, 101 for data elements</i> | 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 <i>See forms 7, 7b</i> | 2 | |
| 47 | F | Discovery | Quality Assurance | The system shall provide the ability online for APD staff to input service provider remediation tracking data. <i>See attached forms for data elements # 7, 7b</i> | 5 | |

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| 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 | |

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| 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 | <u>Incident Reporting</u> | 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. | 5 | |

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| 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. <i>See the rate table for elements #152, 153, 154</i> | 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 | |

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| 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 | |

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| 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 | |

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| 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 | - |

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| 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 | |

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| 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. <i>See form #41 and #42a</i> | 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 | |

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| 90 | | Remediation | Quality Assurance | The system shall provide the ability online to notify the provider of the individual deficiencies requiring remediation. <i>Also see form 6, 6a, 108</i> | 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. <i>See Form # 6, 6a</i> | 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. <i>See Form # 6</i> | 5 | |
| 93 | | Remediation | Quality Assurance | The system shall provide the ability online to notify APD Staff of Request for Provider Termination. <i>See form #160</i> | 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. <i>See Form # 6</i> | 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. <i>See form #78</i> | 4 | |

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| 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. <i>See form #85, 47</i> | 5 | |
| 97 | F | Residential | Facility Licensure | The system shall provide the ability online for APD staff to enter the licensure monitoring checklists. <i>See Forms #80, 80a, 81, 81a, 82</i> | 5 | |
| 98 | F | Residential | Facility Licensure | The system shall provide the ability online to report on monitoring deficiencies noted on the monitoring tools. <i>See form #85 for data elements</i> | 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. <i>See form 108</i> | 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. <i>See Form #102</i> | 5 | |
| 102 | F | Residential | Facility Licensure | The system shall provide the ability online to track license expiration dates. | 5 | |

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| 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 | - |

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| 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 | |

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| 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. <i>See forms #156, 157</i> | 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. <i>See forms #156, 157</i> | 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. <i>see forms #25, 26, 156, 157</i> | 5 | |

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| 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 | |

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| 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 | |

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| 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 | |

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| 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 | |

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| 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 | |

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| 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. <i>See form #133 for data elements</i> | 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 | |

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| 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 | |

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| 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 | 5 | |

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| 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 | |

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| 167 | | Clinical | Clinical - MCM | <p>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.</p> <p>See form 66a Other forms associated with medication 66, 67, 68, 69, 70, 70a, 71, 72, 73</p> | 4 | |
| 168 | | Clinical | Clinical - MCM | <p>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.</p> <p>See attached forms for data elements #74, 75</p> | 5 | |
| 169 | | Clinical | Clinical - MCM | <p>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.</p> <p>See attached forms for data elements #76, 77, 148</p> | 5 | |
| 170 | | Clinical | Clinical - MCM | <p>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</p> | 5 | |

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| 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 | |

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| 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 | |

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| 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 | |

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| 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 all-inclusive
- 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 | |

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| 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 | |

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| 19. | Availability | General | <p>During normal working hours, the system availability must equal or exceed to 99.9.</p> <p>Equipment availability will be calculated as follows:</p> $\frac{UT}{UT + DT} \times 100\%$ <p>where:</p> <p>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</p> <p>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).</p> | 5 | <p>Harmony may take an unscheduled emergency outage for extreme situations where we believe it is in the best interest of FL APD. For example, if there is a security attack of some sort on the system or need to apply emergency security patches. These are special cases that we ask the FL APD to consider if such situations present themselves.</p> |
| 20. | Availability | General | <p>During normal working hours, the system shall again be available to systems users within one hour following any application software failure.</p> | 5 | <p>Harmony may take an unscheduled emergency outage for extreme situations where we believe it is in the best interest of FL APD. For example, if there is a security attack of some sort on the system or need to apply emergency security patches. These are special cases that we ask the FL APD to consider if such situations present themselves.</p> |
| 21. | Availability | General | <p>External partners shall have the 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 other times.</p> | 5 | |

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| 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 | |

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| | | | <p>associated records plus a 200% reserve .</p> <p>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.</p> <p>c) The system must allow for 20% annual growth for five years.</p> | 5 | |
| 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. |

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| 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. |

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| 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 | |

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| | | | <ol style="list-style-type: none"> 1. Required fields that are blank, empty, or null 2. Required fields that contain invalid values including invalid special characters <ol style="list-style-type: none"> a. Alphabetic fields with numeric characters b. Numeric fields with alphabetic characters c. Incomplete fields such as SSN, date of birth, and phone numbers d. Consistency with existing data when such data is available e. Convert values from external sources where appropriate to comply with data definitions in CDMS f. Date fields to contain valid dates (in a given / pre-determined date range) g. Dynamic comparison to compare values in different fields h. Range checking to ensure that value entered in to a field is within the specified range. | | 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. |
| 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 | |

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| 54. | 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. | 3 | 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 | |

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| | | | 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. | 5 | |
| 63. | Reporting | General | For extensive reporting and 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. | 5 | |
| 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 | |

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|-----|----------|---------|--|---|---|
| 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 | |

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|-----|----------|---------|---|---|--|
| 78. | Security | General | The system must provide for 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. | 4 | |
| 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 | |

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| 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: <ul style="list-style-type: none"> 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 | |

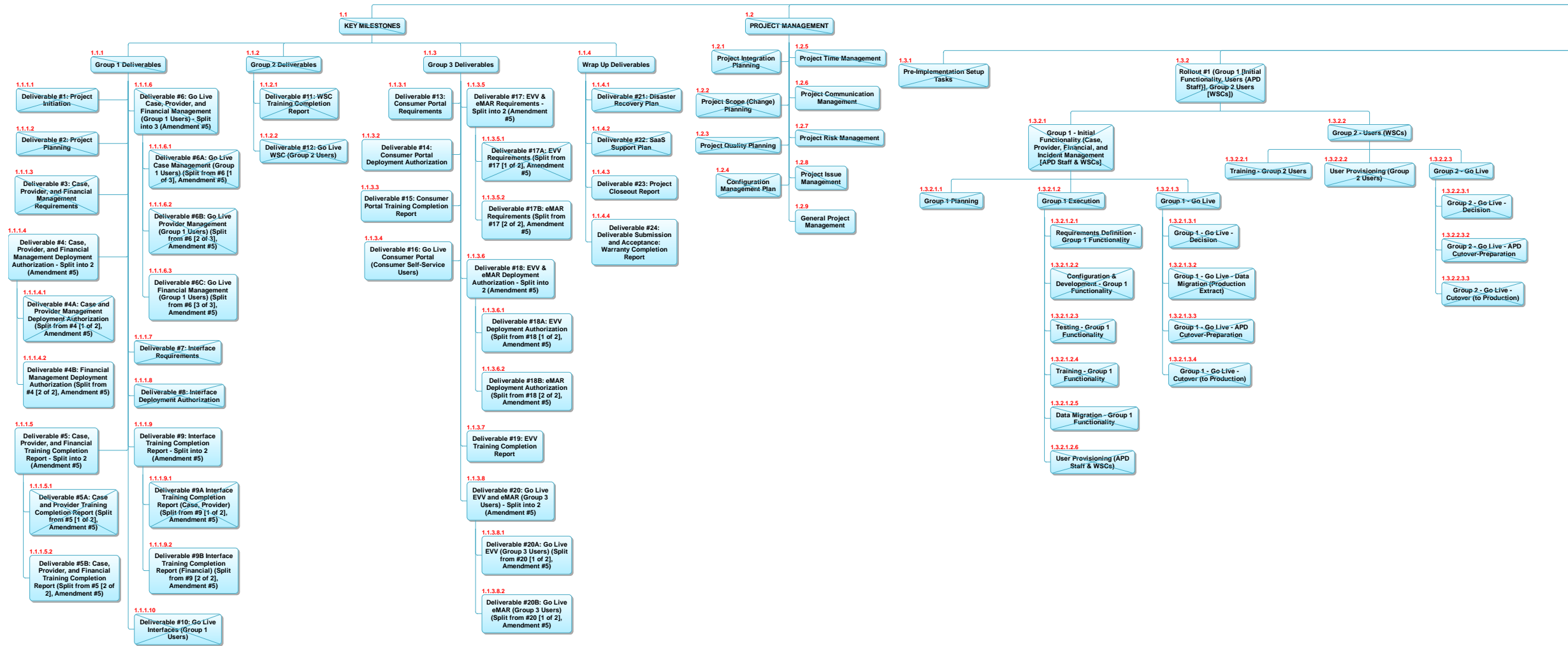
| | | | | | |
|-----|------------------------|---------|--|---|--|
| 95. | Usability Requirements | General | <p>The system must minimize needed user keystrokes and pointer movement by providing at a minimum:</p> <ol style="list-style-type: none"> Cursor movement via a pointing device The ability to select from a limited number of possible input items, when appropriate Default values for user entry items, in every case where appropriate Visually indicated default buttons that are activated if user presses Enter or Escape Shortcut keys Drop down lists | 5 | |
| 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 | <p>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.</p> <p>If the system uses mnemonic 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.</p> | 5 | |

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| 100. | Usability Requirements | General | <p>The system must provide on-line help that includes but is not limited to:</p> <ul style="list-style-type: none"> a. Addresses the needs of all different types of users (e.g. APD Employees, Providers, etc.) b. Provides access to explanation and suggested response for all CDMS error messages that can be output to a user c. Provides Step-by-step instructions to include required fields, status updates for various conditions and associated time frame if any. d. Includes access to the Operations Procedures and Policy Clarification Memos e. Includes access to User Manual f. Includes access to the APD Policy and Procedures Manual and APD Rules g. Provides users a search capability which includes easy access to a search h. Provides the ability for the user to print a single help topic or an entire document. | 5 | |
| 101. | Usability Requirements | General | <p>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.</p> | 5 | |
| 102. | Usability Requirements | General | <p>The system must provide Intranet user access via the current version of the APD standard web browser.</p> | 5 | |
| 103. | Usability Requirements | General | <p>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.</p> | 5 | |

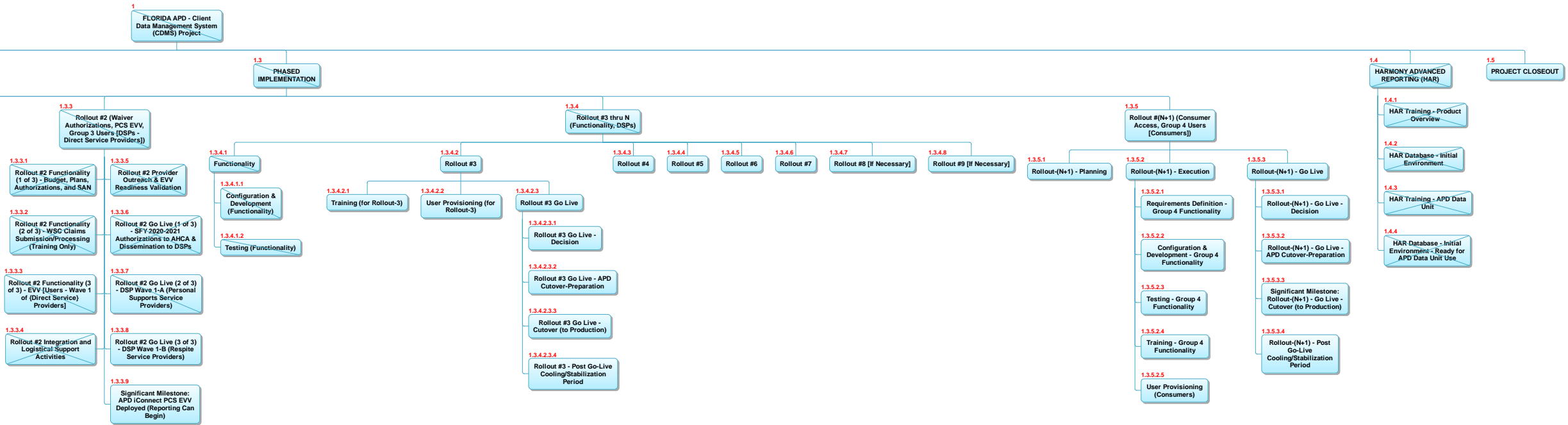
| | | | | | |
|------|------------------------|---------|--|---|--|
| 104. | Usability Requirements | General | The system must provide for user creation of standard "comments" in some assisted way (such as use of a pull down list) for repetitive comments made in recording activity on a record on different 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 | |

APD iConnect Project WBS



APD iConnect Project WBS



Implementation Plan

| Plan Steps | Fiscal Year 2015-2016 | | | | Fiscal Year 2016-2017 | | | | Fiscal Year 2017-2018 | | | | Fiscal Year 2018-2019 | | | | Fiscal Year 2019-2020 | | | | Fiscal Year 2020-2021 | | | | Fiscal Year 2021-2022 | | | | Fiscal Year 2022-2023 | | | |
|--|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|------------------------|
| | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 | Qtr 1 | Qtr 2 | Qtr 3 | Qtr 4 |
| | Jul-2015 - Sep-2015 | Oct-2015 - Dec-2015 | Jan-2016 - Mar-2016 | Apr-2016 - Jun-2016 | Jul-2016 - Sep-2016 | Oct-2016 - Dec-2016 | Jan-2017 - Mar-2017 | Apr-2017 - Jun-2017 | Jul-2017 - Sep-2017 | Oct-2017 - Dec-2017 | Jan-2018 - Mar-2018 | Apr-2018 - Jun-2018 | Jul-2018 - Sep-2018 | Oct-2018 - Dec-2018 | Jan-2019 - Mar-2019 | Apr-2019 - Jun-2019 | Jul-2019 - Sep-2019 | Oct-2019 - Dec-2019 | Jan-2020 - Mar-2020 | Apr-2020 - Jun-2020 | Jul-2020 - Sep-2020 | Oct-2020 - Dec-2020 | Jan-2021 - Mar-2021 | Apr-2021 - Jun-2021 | Jul-2021 - Sep-2021 | Oct-2021 - Dec-2021 | Jan-2022 - Mar-2022 | Apr-2022 - Jun-2022 | Jul-2022 - Sep-2022 | Oct-2022 - Dec-2022 | Jan-2023 - Mar-2023 | Apr-2023 - Jun-2023 |
| Initiation and Planning | █ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Phased Implementation and Training | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ |
| Implementation Preparation | █ | | █ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Group 1: Case Provider, Financial Management: (APD Staff) Interface, Data Conversion, Training, Deployment) {Rollouts 1 and 2} | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | | | | | | | | |
| Group 2: (WSC's) Data Conversion, Training, Deployment) {Rollouts 1, 2, and 3} | | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | | | | | | | |
| Function 3 /Group 3: (Providers) EVV and eMAR Training and Deployment {Rollouts 2, 3 thru N} | | | | | | | | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | | | |
| Consumer Portal: APD Consumers (Training and Deployment) {Rollout N+1} | | | | | | | | | | | | | | | | | | | | | | | | | █ | █ | █ | █ | █ | █ | | |
| Harmony Advanced Reporting | | | | | | | █ | █ | █ | █ | █ | █ | █ | █ | | | | | | | | | | | | | | | | | | |
| Project Closeout | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | █ | | |
| Software as a Service (SaaS) License Fees | | | | | | | | | | | | | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ | █ |

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS

Budget Period: 2021 - 2022

Department: Agency for Persons with Disabilities

Chief Internal Auditor: Stacey Emminger

Budget Entity: 67100100, 67100200, 67100400, 67100500

Phone Number: 850-414-8774

| (1) | (2) | (3) | (4) | (5) | (6) |
|------------------------|--------------------------|---|---|--|------------|
| REPORT NUMBER | PERIOD ENDING | UNIT/AREA | SUMMARY OF FINDINGS AND RECOMMENDATIONS | SUMMARY OF CORRECTIVE ACTION TAKEN | ISSUE CODE |
| AG Report No. 2020-12 | Report issued: 8/13/2019 | i-Budget Florida | <p>Finding No. 1 - iBudget Florida Allocation Methodology and Algorithm</p> <p>Recommendation No. 1 - We recommend that Agency management consult with the Legislature regarding whether potential statutory revisions are necessary to achieve iBudget Florida financial management and waiting list goals.</p> | <p>Pursuant to 2019 implementing bill language, APD in conjunction with AHCA submitted a redesign plan of the iBudget Waiver Program to the President of the Senate and the Speaker of the House of Representatives for consideration on September 30, 2019. The Agency will comply with any legislation that is passed during the 2020 legislative session.</p> | |
| AG Report No. 2020-018 | Report issued: 8/27/2019 | Information Technology General Controls | <p>Finding No. 1 - Information Security Program</p> <p>Recommendation No. 1 - We recommend that Agency management ensure that the Agency information security program includes all relevant security policies and procedures to appropriately protect the information and information systems that support the operations and assets of the Agency.</p> | <p>The agency is in the process of drafting all-new information security policies and procedures, built upon the frameworks of the National Institute of Standards and Technology (NIST) Framework for Improving Critical Infrastructure Cybersecurity and the Florida Cybersecurity Standards (60GG-2 F.A.C.), which will supersede existing policies and procedures. These new policies and procedures include the above-mentioned components of Information Security Awareness Training, Incident and Breach Response, Data Backup, and Software/Firmware Patching.</p> | |

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| <p>Finding No. 2 - Security Awareness Training</p> <p>Recommendation No. 1 - We recommend that Agency management ensure security awareness training is timely completed in accordance with AST rules.</p> | <p>The agency is working toward this goal. Efforts made to date include direct communications from Chief of Staff to agency employees on the importance of completing information security training, and Human Resources improvements in employee training completion tracking. Further scrutiny of the issue, along with development of new strategies, will continue in an on-going fashion.</p> |
| <p>Finding No. 3 - Computer Security Incident Response</p> <p>Recommendation No. 1 - We recommend that Agency management ensure that cybersecurity incidents are sufficiently assessed and documented, CSIRT meetings are conducted at least quarterly, and CSIRT members receive annual training as required by AST rules.</p> | <p>The agency has been ensuring the completeness of incident documentation, that all regularly scheduled quarterly CSIRT meetings occur, and more formal delivery of training to CSIRT.</p> |
| <p>Finding No. 4 - Timely Disabled Network Access Privileges</p> <p>Recommendation No. 1 - To minimize the risk of compromise to Agency data and IT resources, we recommend that Agency management ensure that network access privileges are timely disabled upon an employee's separation from Agency employment. In addition, the Agency should retain records evidencing the dates accounts are disabled.</p> | <p>The agency is continuing to improve coordination between Human Resources and Information Security to address this issue. To date, efforts include regular reports from Human Resources on terminated employees, and a dedicated communications channel between Information Security and Human Resources to facilitate communication on employee access control matters.</p> |

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| | | | <p>Finding No. 5 - Periodic Access Review</p> <p>Recommendation No. 1 - We recommend that Agency management develop documented procedures to facilitate effective periodic reviews of all user accounts, including all privileged administrative accounts.</p> | <p>The agency is in the process of drafting all-new information security policies and procedures, built upon the frameworks of the National Institute of Standards and Technology (NIST) Framework for Improving Critical Infrastructure Cybersecurity and the Florida Cybersecurity Standards (60GG-2 F.A.C.), which will supersede existing policies and procedures. These new policies and procedures include the above-mentioned component of Periodic Access Review.</p> | |
| | | | <p>Finding No. 6 - Security Controls – Logical Access, User Authentication, Configuration Management, Logging and Monitoring, and Vulnerability Management</p> <p>Recommendation No. 1 - We recommend that Agency management improve certain security controls related to logical access, user authentication, configuration management, logging and monitoring, and vulnerability management to ensure the confidentiality, integrity, and availability of Agency data and other IT resources.</p> | <p>The agency has made progress on improving certain security controls and continues in the effort to complete the improvements.</p> | |
| AG Report No. 2020-170 | Report issued: 3/25/2020 | State of Florida - Compliance and Internal Controls Over Financial Reporting and Federal Awards | <p>Finding No. 1. FAPD records did not always evidence that continued stay reviews were completed for beneficiaries of Intermediate Care Facility Services for Individuals with Intellectual Disabilities (ICF-IIDs) in accordance with the time frame specified by Federal regulations.</p> | <p>KEPRO has assumed responsibility for the 6-month CSRs and checking on the physician certifications. The APD MCMs no longer complete the 6-month CSRs but are responsible for the eligibility/admission paperwork and timely submission of the admission paperwork to KEPRO. FAPD meets with KEPRO at least once a month to review issues regarding CSRs, Certificates of Need and any adverse determinations.</p> | |

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| | | | Recommendation No. 1 - We again recommend that FAPD management take steps, including implementing adequate record retention controls, to ensure that continued stay reviews of ICF-IID beneficiaries are timely completed and appropriately documented in accordance with Federal regulations. | | |
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Office of Policy and Budget - July 2020

Fiscal Year 2021-22 LBR Technical Review Checklist

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| 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" - these require further explanation/justification (additional sheets can be used as necessary), and "TIPS" are other areas to consider.

| | Program or Service (Budget Entity Code) | | | |
|--------|---|----------|----------|----------|
| Action | 67100100 | 67100200 | 67100400 | 67100500 |

1. GENERAL

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|---|---|---|---|---|
| 1.1 Are Columns A01, A04, A05, A91, A92, A93, A94, A95, A96, A36, A10, IA1, IA4, 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)? (CSDI 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? (CSDI) | Y | Y | Y | Y |

AUDITS:

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|---|---|---|---|---|
| 1.3 Have Column A03 budget files been copied to Column A12? Run the Exhibit B Audit Comparison Report to verify. (EXBR, EXBA) | Y | Y | Y | Y |
| 1.4 Have Column A03 trust fund files been copied to Column A12? Run Schedule I (SC1R, SC1 or SC1R, SC1D adding column A12) to verify. | Y | Y | Y | Y |
| 1.5 Has Column A12 security been set correctly to ALL for DISPLAY status and MANAGEMENT CONTROL for UPDATE status for Budget and Trust Fund 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 included in the LAS/PBS Web upload process requires columns to be in the proper status before uploading to the portal.

2. EXHIBIT A (EADR, EXA)

| | | | | |
|---|---|---|---|---|
| 2.1 Is the budget entity authority and description consistent with the agency's LRPP and does it conform to the directives provided on page 58 of the LBR Instructions? | Y | Y | Y | Y |
| 2.2 Are the statewide issues generated systematically (estimated expenditures, nonrecurring expenditures, etc.) included? | Y | Y | Y | Y |
| 2.3 Are the issue codes and titles consistent with <i>Section 3</i> of the LBR Instructions (pages 15 through 28)? Do they clearly describe the issue? | Y | Y | Y | Y |

3. EXHIBIT B (EXBR, EXB)

| | | gram or Service (Budget Entity Co | | | |
|------------------------------------|--|-----------------------------------|----------|----------|----------|
| Action | | 67100100 | 67100200 | 67100400 | 67100500 |
| 3.1 | Is it apparent that there is a fund shift where an appropriation category's funding source is different between A02 and A03? Were the issues entered into LAS/PBS correctly? Check D-3A funding shift issue 340XXX0 - a unique deduct and unique add back issue should be used to ensure fund shifts display correctly on the LBR exhibits. | Y | Y | Y | Y |
| AUDITS: | | | | | |
| 3.2 | Negative Appropriation Category Audit for Agency Request (Columns A03 and A04): Are all appropriation categories positive by budget entity and program component 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. | | | | |
| TIP | Exhibit B - A02 equal to B07: Compares Current Year Estimated column to a backup of A02. This audit is necessary to ensure that the historical detail records have not been adjusted. Records selected should net to zero. | | | | |
| TIP | Requests for appropriations which require advance payment authority must use the sub-title "Grants and Aids". For advance payment authority to local units of government, the Aid to Local Government appropriation category (05XXXX) should be used. For advance payment authority to non-profit organizations or other units of state government, a Special Categories appropriation category (10XXXX) should be used. | | | | |
| 4. EXHIBIT D (EADR, EXD) | | | | | |
| 4.1 | Is the program component objective statement consistent with the agency LRPP, and does it conform to the directives provided on page 61 of the LBR Instructions? | Y | Y | Y | Y |
| 4.2 | Is the program component code and title used correct? | Y | Y | Y | Y |
| TIP | Fund shifts or transfers of services or activities between program components will be displayed on an Exhibit D whereas it may not be visible on an Exhibit A. | | | | |
| 5. EXHIBIT D-1 (ED1R, EXD1) | | | | | |
| 5.1 | Are all object of expenditures positive amounts? (This is a manual check.) | Y | Y | Y | Y |
| AUDITS: | | | | | |
| 5.2 | Do the fund totals agree with the object category totals within each appropriation category? (ED1R, XD1A - Report should print "No Differences Found For This Report") | Y | Y | Y | Y |
| 5.3 | FLAIR Expenditure/Appropriation Ledger Comparison Report: Is Column A01 less than Column B04? (EXBR, EXBB - Negative differences [with a \$5,000 allowance] need to be corrected in Column A01.) | Y | Y | Y | Y |
| 5.4 | A01/State Accounts Disbursements and Carry Forward Comparison Report: Does Column A01 equal Column B08? (EXBR, EXBD - Differences [with a \$5,000 allowance at the department level] need to be corrected in Column A01.) | Y | Y | Y | Y |

| | | gram or Service (Budget Entity Co | | | |
|---|---|-----------------------------------|----------|----------|----------|
| Action | | 67100100 | 67100200 | 67100400 | 67100500 |
| 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 2019-20 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. | | | | |
| 6. EXHIBIT D-3 (ED3R, ED3) (Not required in the LBR - for analytical purposes only.) | | | | | |
| 6.1 | Are issues appropriately aligned with appropriation categories? | Y | Y | Y | Y |
| TIP | Exhibit D-3 is 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. EXHIBIT 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 through 28 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 66 through 68 of the LBR Instructions.) | Y | Y | Y | Y |
| 7.3 | Does the narrative for Information Technology (IT) issue follow the additional narrative requirements described on pages 68 through 70 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 (OAD/C)? Amounts entered into OAD are reflected in the Position Detail of Salaries and Benefits section of the Exhibit D-3A. (See page 95 of the LBR Instructions.) | 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 |

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| Action | | 67100100 | 67100200 | 67100400 | 67100500 |
| 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 #21-001? | 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. (PLRR, PLMO) | 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 27 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 (36XXXXCX) and are the correct issue codes used (361XXC0, 362XXC0, 363XXC0, 24010C0, 30010C0, 33011C0, 160E470, or 160E480)? | 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 |
| 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 | Y |
| 7.24 | Has narrative been entered for all issues requested by the agency? Agencies do not need to include narrative for startup issues (1001000, 2103XXX, etc.) that were not input by the agency. (NAAR, BSNR) | Y | Y | Y | Y |

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| 7.25 | Has the agency entered annualization issues (260XXX0) for any issue that was partially funded in Fiscal Year 2020-21? Review Column G66 to determine whether any incremental amounts are needed to fully fund an issue that was initially appropriated in Fiscal Year 2020-21. Do not add annualization issues for pay and benefit distribution issues, as those annualization issues (26AXXX) have already been added to A03. | Y | Y | Y | Y |
| TIP | Salaries and Benefits amounts entered using the OADA/C transactions must be thoroughly justified in the D-3A issue narrative. Agencies can run OADA/OADR from STAM to identify the amounts entered into OAD and ensure these entries have been thoroughly explained in the D-3A issue narrative. | | | | |
| TIP | The issue narrative must completely and thoroughly explain and justify each D-3A issue. Agencies must ensure it provides the information necessary for the OPB and legislative analysts to have a complete understanding of the issue submitted. Thoroughly review pages 66 through 70 of the LBR Instructions. | | | | |
| TIP | Check BAPS to verify status of budget amendments. Check for reapprovals not picked up in the General Appropriations Act. Verify that Lump Sum appropriations in Column A02 do not appear in Column A03. Review budget amendments to verify that 160XXX0 issue amounts correspond accurately and net to zero for General Revenue funds. | | | | |
| TIP | If an agency is receiving federal funds from another agency the FSI should = 9 (Transfer - Recipient of Federal Funds). The agency that originally receives the funds directly from the federal agency should use FSI = 3 (Federal Funds). | | | | |
| TIP | If an appropriation made in the FY 2020-21 General Appropriations Act duplicates an appropriation made in substantive legislation, the agency must create a unique deduct nonrecurring issue to eliminate the duplicated appropriation. Normally this is taken care of through line item veto. | | | | |
| 8. SCHEDULE I & RELATED DOCUMENTS (SC1R, SC1 - Budget Entity Level or SC1R, SC1D - Department Level) (Required to be posted to the Florida Fiscal Portal) | | | | | |
| 8.1 | Has a separate department level Schedule I and supporting documents package been submitted by the agency? | Y | Y | Y | Y |
| 8.2 | Has a Schedule I and Schedule IB been completed in LAS/PBS for each operating trust fund? | Y | Y | Y | Y |
| 8.3 | Have the appropriate Schedule I supporting documents been included for the trust funds (Schedule IA, Schedule IC, and Reconciliation to Trial Balance)? | Y | Y | Y | Y |
| 8.4 | Have the Examination of Regulatory Fees Part I and Part II forms been included for the applicable regulatory programs? | Y | Y | Y | Y |
| 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 |

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| Action | | 67100100 | 67100200 | 67100400 | 67100500 |
| 8.7 | If the agency is scheduled for the annual trust fund review this year, have the Schedule ID and applicable draft legislation been included for recreation, modification or termination of existing trust funds? | Y | Y | Y | Y |
| 8.8 | If the agency is scheduled for the annual trust fund review this year, have the necessary trust funds been requested for creation pursuant to section 215.32(2)(b), Florida Statutes - including the Schedule ID and applicable legislation? | Y | Y | Y | Y |
| 8.9 | Are the revenue codes correct? In the case of federal revenues, has the agency appropriately identified direct versus indirect receipts (object codes 000700, 000750, 000799, 001510 and 001599)? For non-grant federal revenues, is the correct revenue code identified (codes 000504, 000119, 001270, 001870, 001970)? | Y | Y | Y | Y |
| 8.10 | Are the statutory authority references correct? | Y | Y | Y | Y |
| 8.11 | Are the General Revenue Service Charge percentage rates used for each revenue source correct? (Refer to section 215.20, Florida Statutes, for appropriate General Revenue Service Charge percentage rates.) | Y | Y | Y | Y |
| 8.12 | Is this an accurate representation of revenues based on the most recent Consensus Estimating Conference forecasts? | Y | Y | Y | Y |
| 8.13 | If there is no Consensus Estimating Conference forecast available, do the revenue estimates appear to be reasonable? | Y | Y | Y | Y |
| 8.14 | Are the federal funds revenues reported in Section I broken out by individual grant? Are the correct CFDA codes used? | Y | Y | Y | Y |
| 8.15 | Are anticipated grants included and based on the state fiscal year (rather than federal fiscal year)? | Y | Y | Y | Y |
| 8.16 | Are the Schedule I revenues consistent with the FSI's reported in the Exhibit D-3A? | Y | Y | Y | Y |
| 8.17 | If applicable, are nonrecurring revenues entered into Column A04? | Y | Y | Y | Y |
| 8.18 | Has the agency certified the revenue estimates in columns A02 and A03 to be the latest and most accurate available? Does the certification include a statement that the agency will notify OPB of any significant changes in revenue estimates that occur prior to the Governor's Budget Recommendations being issued? | Y | Y | Y | Y |
| 8.19 | Is a 5% trust fund reserve reflected in Section II? If not, is sufficient justification provided for exemption? Are the additional narrative requirements provided? | Y | Y | Y | Y |
| 8.20 | Are appropriate General Revenue Service Charge nonoperating amounts included in Section II? | 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 agencies)? (See also 8.6 for required transfer confirmation of amounts totaling \$100,000 or more.) | Y | Y | Y | Y |
| 8.23 | Are nonoperating expenditures recorded in Section II and adjustments recorded in Section III? | Y | Y | Y | Y |
| 8.24 | Are prior year September operating reversions appropriately shown in column A01, Section III? | Y | Y | Y | Y |

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| Action | | 67100100 | 67100200 | 67100400 | 67100500 |
| 8.25 | Are current year September operating reversions (if available) appropriately shown in column A02, Section III? | Y | Y | Y | Y |
| 8.26 | Does the Schedule IC properly reflect the unreserved fund balance for each trust fund as defined by the LBR Instructions, and is it reconciled to the agency accounting records? | Y | Y | Y | Y |
| 8.27 | Has the agency properly accounted for continuing appropriations (category 13XXXX) in column A01, Section III? | Y | Y | Y | Y |
| 8.28 | Does Column A01 of the Schedule I accurately represent the actual prior year accounting data as reflected in the agency accounting records, and is it provided in sufficient detail for analysis? | Y | Y | Y | Y |
| 8.29 | Does Line I of Column A01 (Schedule I) equal Line K of the Schedule IC? | Y | Y | Y | Y |
| AUDITS: | | | | | |
| 8.30 | Is Line I a positive number? (If not, the agency must adjust the budget request to eliminate the deficit). | Y | Y | Y | Y |
| 8.31 | Is the June 30 Adjusted Unreserved Fund Balance (Line I) equal to the July 1 Unreserved Fund Balance (Line A) of the following year? If a Schedule IB was prepared, do the totals agree with the Schedule I, Line I? (SC1R, SC1A - Report should print "No Discrepancies Exist For This Report") | Y | Y | Y | Y |
| 8.32 | Has a Department Level Reconciliation been provided for each trust fund and does Line A of the Schedule I equal the CFO amount? If not, the agency must correct Line A. (SC1R, DEPT) | Y | Y | Y | Y |
| 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 |
| TIP | The Schedule I is the most reliable source of data concerning the trust funds. It is very important that this schedule is as accurate as possible! | | | | |
| TIP | Determine if the agency is scheduled for trust fund review. (See page 132 of the LBR Instructions.) Transaction DFTR in LAS/PBS is also available and provides an LBR review date for each trust fund. | | | | |
| TIP | Review the unreserved fund balances and compare revenue totals to expenditure totals to determine and understand the trust fund status. | | | | |
| TIP | Typically nonoperating expenditures and revenues should not be a negative number. Any negative numbers must be fully justified. | | | | |
| 9. SCHEDULE II (PSCR, SC2) | | | | | |
| AUDIT: | | | | | |
| 9.1 | Is the pay grade minimum for salary rate utilized for positions in segments 2 and 3? (BRAR, BRAA - Report should print "No Records Selected For This Request") Note: Amounts other than the pay grade minimum should be fully justified in the D-3A issue narrative. (See <i>Base Rate Audit</i> on page 163 of the LBR Instructions.) | Y | Y | Y | Y |

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| 10. SCHEDULE III (PSCR, SC3) | | | | | |
| 10.1 | Is the appropriate lapse amount applied? (See page 92 of the LBR Instructions.) | Y | Y | Y | Y |
| 10.2 | Are amounts in <i>Other Salary Amount</i> appropriate and fully justified? (See page 95 of the LBR Instructions for appropriate use of the OAD transaction.) Use OADI or OADR to identify agency other salary amounts requested. | Y | Y | Y | Y |
| 11. SCHEDULE IV (EADR, SC4) | | | | | |
| 11.1 | Are the correct Information Technology (IT) issue codes used? | Y | Y | Y | Y |
| TIP | If IT issues are not coded (with "C" in 6th position or within a program component of 1603000000), they will not appear in the Schedule IV. | | | | |
| 12. SCHEDULE VIIIA (EADR, SC8A) | | | | | |
| 12.1 | Is there only one #1 priority, one #2 priority, one #3 priority, etc. reported on the Schedule VIII-A? Are the priority narrative explanations adequate? Note: FCO issues can be included in the priority listing. | Y | Y | Y | Y |
| 13. SCHEDULE VIIIB-1 (EADR, S8B1) | | | | | |
| 13.1 | Do the reductions comply with the instructions provided on pages 100 through 103 of the LBR Instructions regarding an 8.5% reduction in 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 | If all or a portion of an issue is intended to be reduced on a nonrecurring basis, include the total reduction amount in Column A91 and the | | | | |
| 14. SCHEDULE VIIIB-2 (EADR, S8B2) (Required to be posted to the Florida Fiscal Portal) | | | | | |
| 14.1 | Do the reductions comply with the instructions provided on pages 104 through 107 of the LBR Instructions regarding a 10% reduction in 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. | | | | |
| TIP | If all or a portion of an issue is intended to be reduced on a nonrecurring basis, in the absence of a nonrecurring column, include that intent in narrative. | | | | |
| 15. SCHEDULE VIIIC (EADR, S8C) (This Schedule is optional, but if included it is required to be posted to the Florida Fiscal Portal) | | | | | |
| 15.1 | Does the schedule display reprioritization issues that are each comprised of two unique issues - a deduct component and an add-back component which net to zero at the department level? | N/A | N/A | N/A | N/A |
| 15.2 | Are the priority narrative explanations adequate and do they follow the guidelines on pages 108 through 110 of the LBR instructions? | N/A | N/A | N/A | N/A |

| | | Program or Service (Budget Entity Code) | | | |
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| Action | | 67100100 | 67100200 | 67100400 | 67100500 |
| 15.3 | Does the issue narrative in A6 address the following: Does the state have the authority to implement the reprioritization issues independent of other entities (federal and local governments, private donors, etc.)? Are the reprioritization issues an allowable use of the recommended funding source? | N/A | N/A | N/A | N/A |
| AUDIT: | | | | | |
| 15.4 | Do the issues net to zero at the department level? (GENR, LBR5) | Y | Y | Y | Y |
| 16. SCHEDULE XI (UCSR,SCXI) (LAS/PBS Web - see pages 111-115 of the LBR Instructions for detailed instructions) (Required to be posted to the Florida Fiscal Portal in Manual Documents) | | | | | |
| 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 match? | Y | Y | Y | Y |
| AUDITS INCLUDED IN THE SCHEDULE XI REPORT: | | | | | |
| 16.3 | Does the FY 2019-20 Actual (prior year) Expenditures in Column A36 reconcile to Column A01? (GENR, ACT1) | Y | Y | Y | Y |
| 16.4 | None of the executive direction, administrative support and information technology statewide activities (ACT0010 thru ACT0490) have output standards (Record Type 5)? (Audit #1 should print "No Activities Found") | Y | Y | Y | Y |
| 16.5 | Does the Fixed Capital Outlay (FCO) statewide activity (ACT0210) only contain 08XXXX or 14XXXX appropriation categories? (Audit #2 should print "No Operating Categories Found") | Y | Y | Y | Y |
| 16.6 | Has the agency provided the necessary standard (Record Type 5) for all activities which <u>should</u> appear in Section II? (Note: 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 other activities.) | Y | Y | Y | Y |
| 16.7 | Does Section I (Final Budget for Agency) and Section III (Total Budget for Agency) equal? (Audit #4 should print "No Discrepancies Found") | Y | Y | Y | Y |
| TIP If Section I and Section III have a small difference, it may be due to rounding and therefore will be acceptable. | | | | | |
| 17. MANUALLY PREPARED EXHIBITS & SCHEDULES (Required to be posted to the Florida Fiscal Portal) | | | | | |
| 17.1 | Do exhibits and schedules comply with LBR Instructions (pages 116 through 160 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? | Y | Y | Y | Y |
| 17.3 | Are agency organization charts (Schedule X) provided and at the appropriate level of detail? | Y | Y | Y | Y |

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| Action | | 67100100 | 67100200 | 67100400 | 67100500 |
| 17.4 | Does the LBR include a separate Schedule IV-B for each IT project over \$1 million (see page 136 of the LBR instructions for exceptions to this rule)? Have all IV-Bs been emailed to: IT@LASPBS.STATE.FL.US? | Y | Y | Y | Y |
| 17.5 | Are all forms relating to Fixed Capital Outlay (FCO) funding requests submitted in the proper form, including a Truth in Bonding statement (if applicable) ? | Y | Y | Y | Y |
| AUDITS - GENERAL INFORMATION | | | | | |
| TIP | Review <i>Section 6: Audits</i> of the LBR Instructions (pages 162-164) for a list of audits and their descriptions. | | | | |
| TIP | Reorganizations may cause audit errors. Agencies must indicate that these errors are due to an agency reorganization to justify the audit error. | | | | |
| 18. CAPITAL IMPROVEMENTS PROGRAM (CIP) (Required to be posted to the Florida Fiscal Portal) | | | | | |
| 18.1 | Are the CIP-2, CIP-3, CIP-A and CIP-B forms included? | Y | Y | Y | Y |
| 18.2 | Are the CIP-4 and CIP-5 forms submitted when applicable (see CIP Instructions)? | Y | Y | Y | Y |
| 18.3 | Do all CIP forms comply with CIP Instructions where applicable (see CIP Instructions)? | Y | Y | Y | Y |
| 18.4 | Does the agency request include 5 year projections (Columns A03, A06, A07, A08 and A09)? | Y | Y | Y | Y |
| 18.5 | Are the appropriate counties identified in the narrative? | Y | Y | Y | Y |
| 18.6 | Has the CIP-2 form (Exhibit B) been modified to include the agency priority for each project and the modified form saved as a PDF document? | Y | Y | Y | Y |
| TIP | Requests for Fixed Capital Outlay appropriations which are Grants and Aids to Local Governments and Non-Profit Organizations must use the Grants and Aids to Local Governments and Non-Profit Organizations - Fixed Capital Outlay major appropriation category (140XXX) and include the sub-title "Grants and Aids". These appropriations utilize a CIP-B form as justification. | | | | |
| 19. FLORIDA FISCAL PORTAL | | | | | |
| 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 |