

LEGISLATIVE BUDGET REQUEST

Ron DeSantis
Governor



Agency for Persons with Disabilities

Barbara Palmer
Director

Tallahassee, Florida



State Office

September 15, 2021



4030 Esplanade Way

Chris Spencer, Director

Suite 380

Office of Policy and Budget

Tallahassee

Executive Office of the Governor

Florida

1701 Capitol

32399-0950

Tallahassee, Florida 32399-0001



(850) 488-4257

Eric Pridgeon, Staff Director

Fax:

House Appropriations Committee

(850) 922-6456

221 Capitol



Tallahassee, Florida 32399-1300

Toll Free:

(866) APD-CARES

Tim Sadberry, Staff Director

(866-273-2273)

Senate Committee on Appropriations

201 Capitol

Tallahassee, Florida 32399-1300

Dear Directors:

Pursuant to Chapter 216, Florida Statutes, our Legislative Budget Request for The Agency for Persons with Disabilities is submitted in the format prescribed in the budget instructions. The information provided electronically and contained herein is a true and accurate presentation of our proposed needs for the 2022-2023 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 2022-2023

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 2022-23

**Department Level
67000000**

Exhibits and Schedules

**Barbara Palmer
Director**

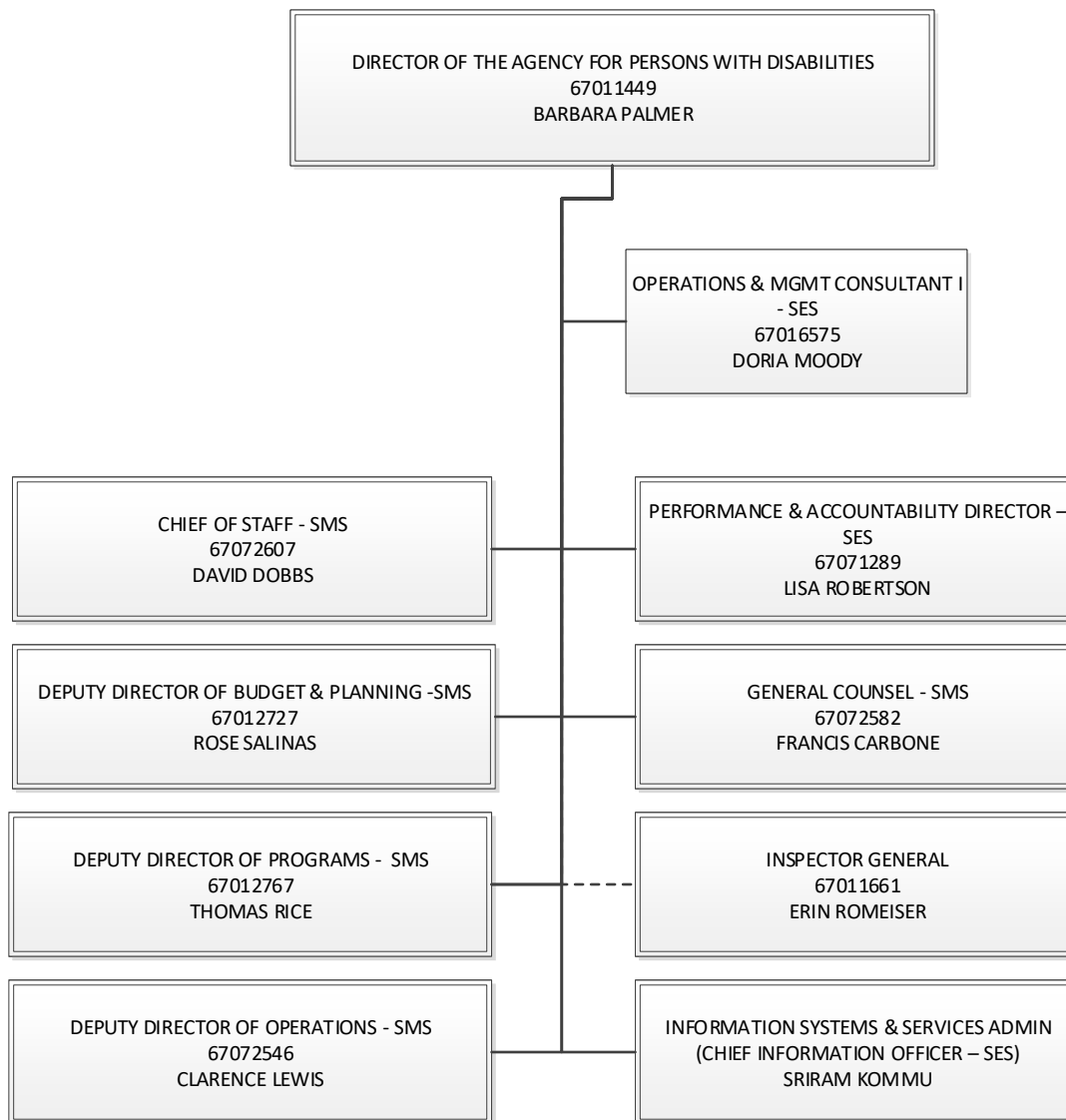
Schedule VII: Agency Litigation Inventory

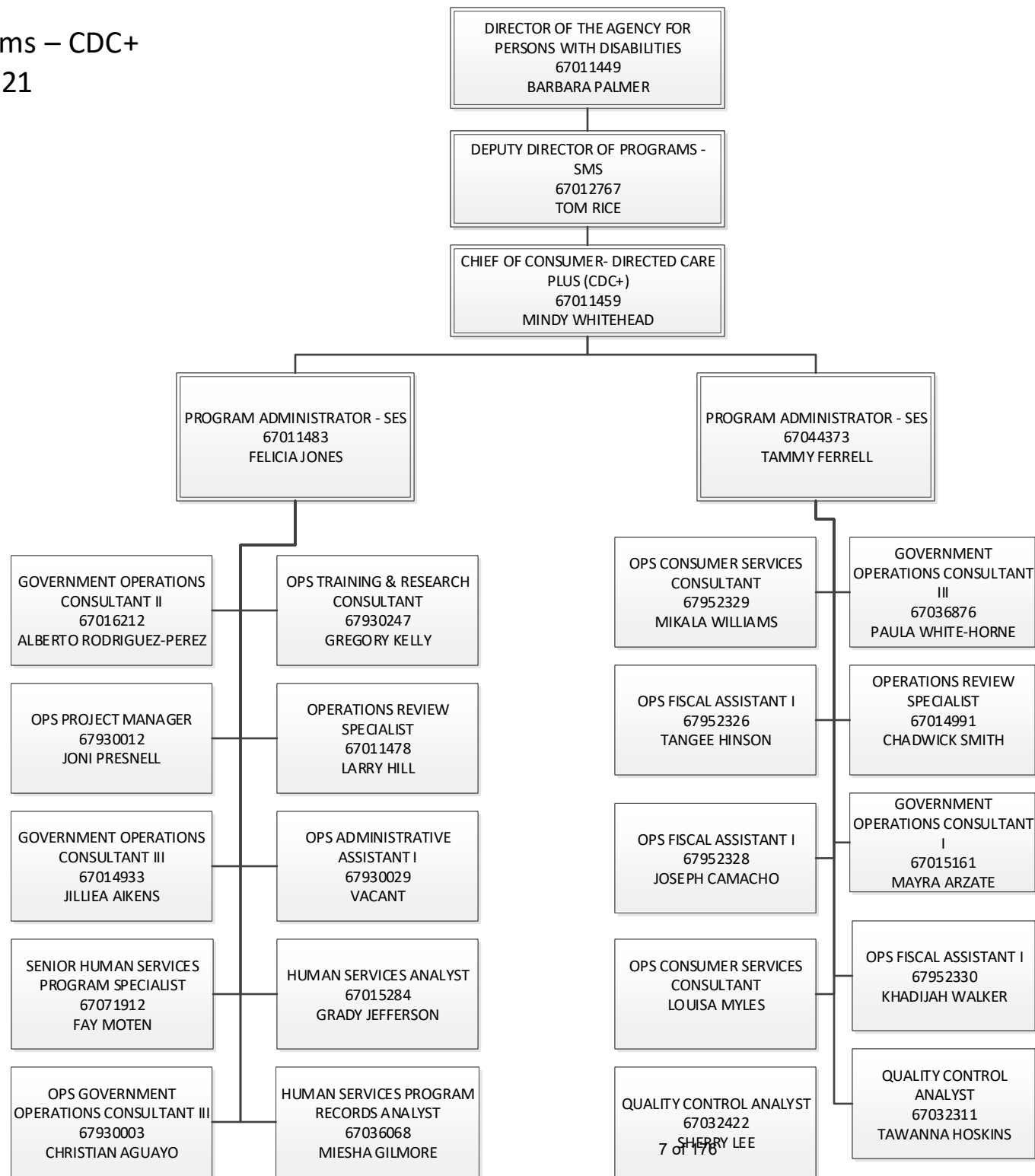
For directions on completing this schedule, please see the “Legislative Budget Request (LBR) Instructions” located on the Governor’s website.

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.	<input type="checkbox"/>	Agency Counsel	
	<input type="checkbox"/>	Office of the Attorney General or Division of Risk Management	
	<input type="checkbox"/>	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		

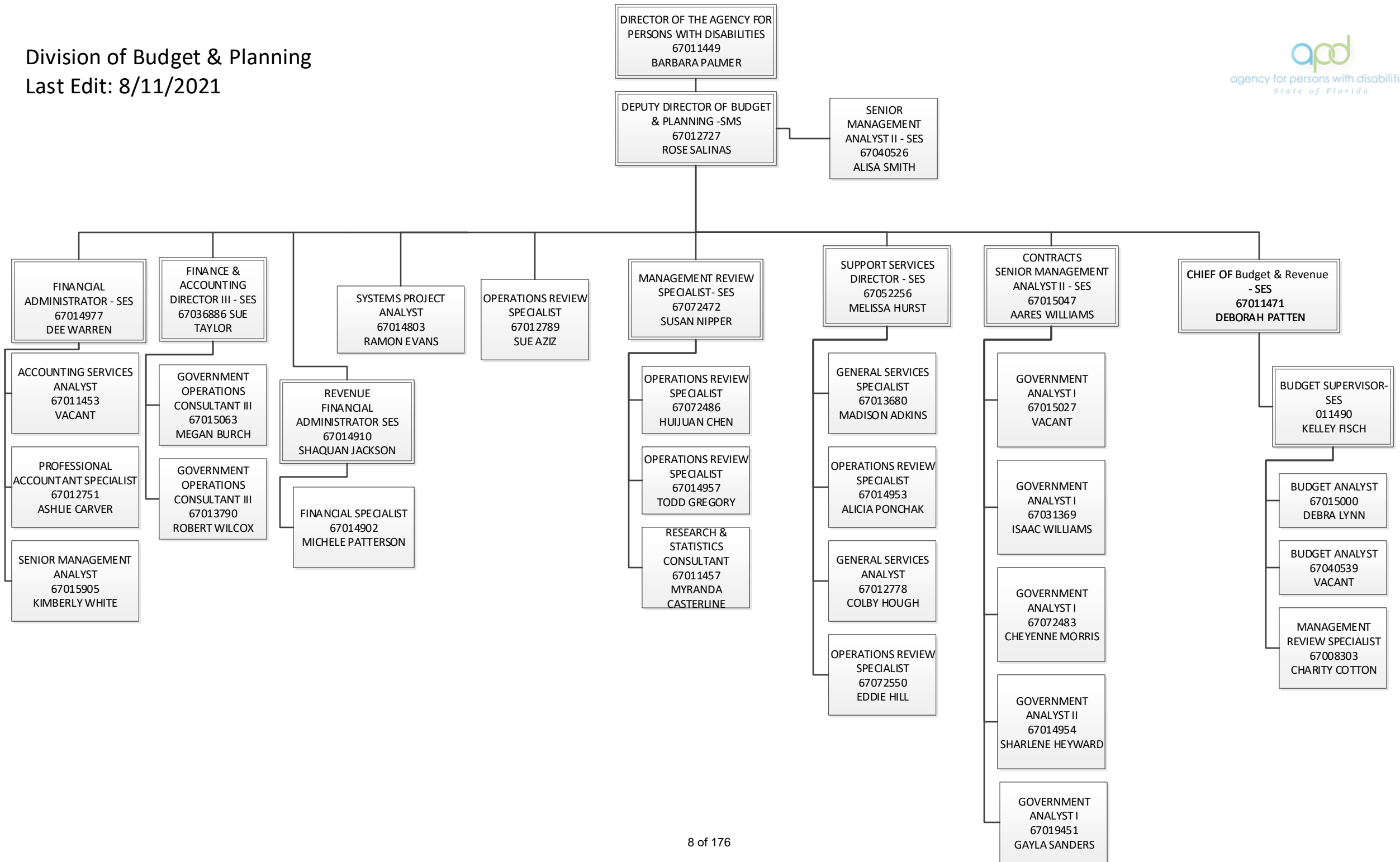
Director's Office

Last Edit: 8/11/2021

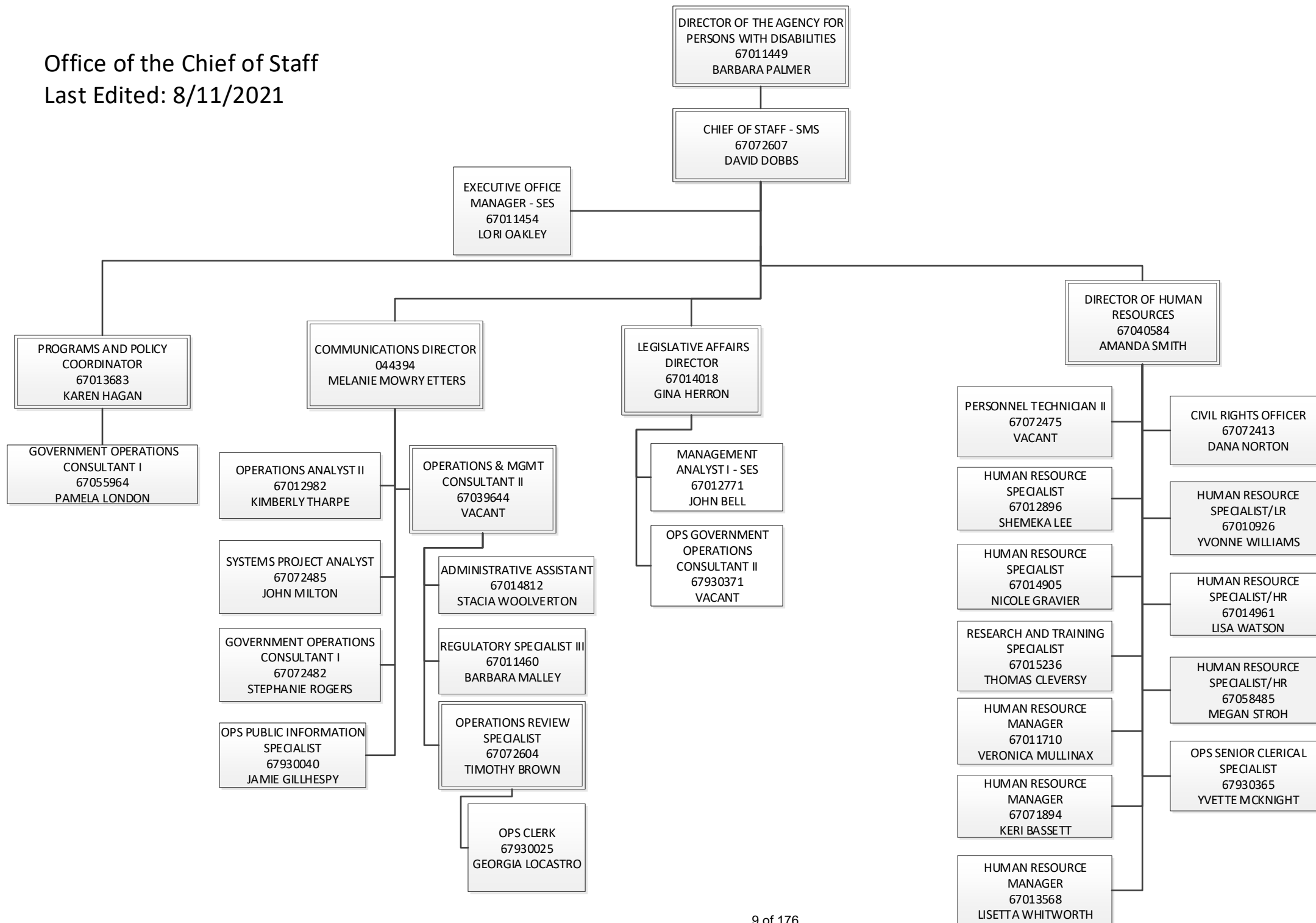




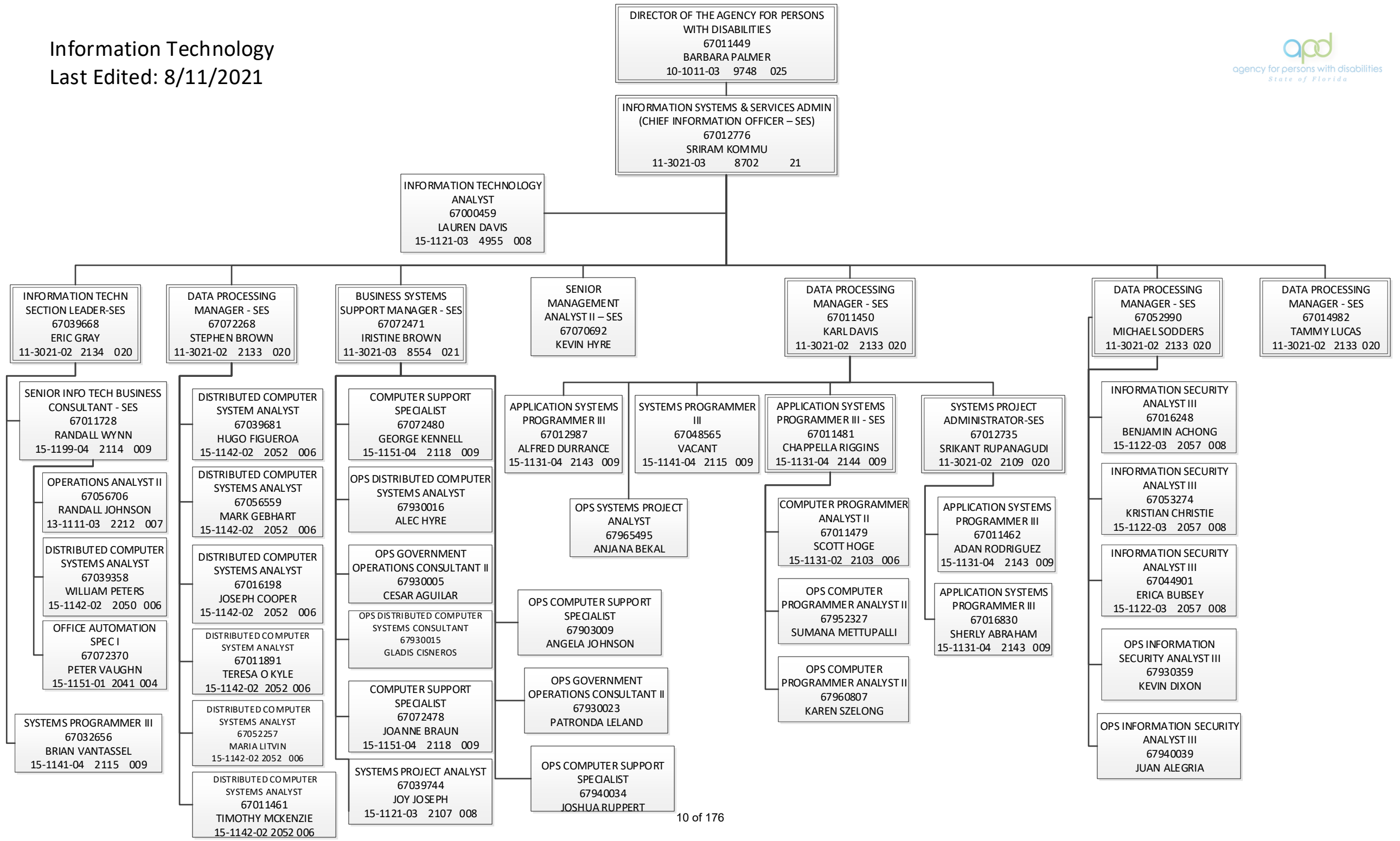
Division of Budget & Planning
 Last Edit: 8/11/2021



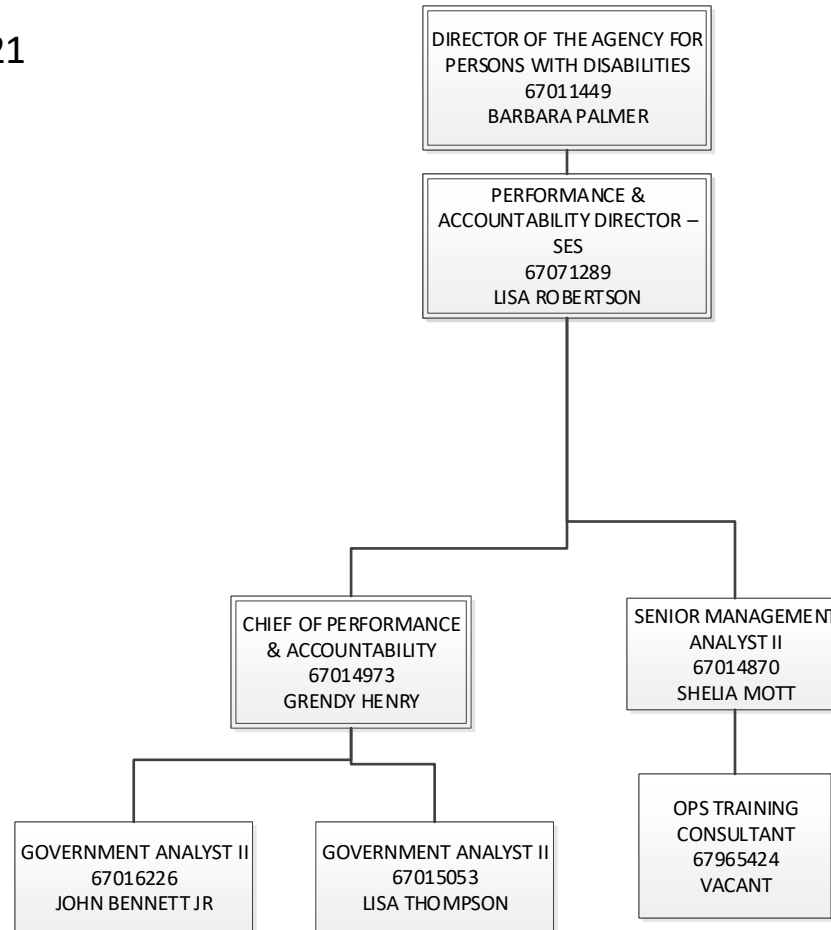
Office of the Chief of Staff
 Last Edited: 8/11/2021



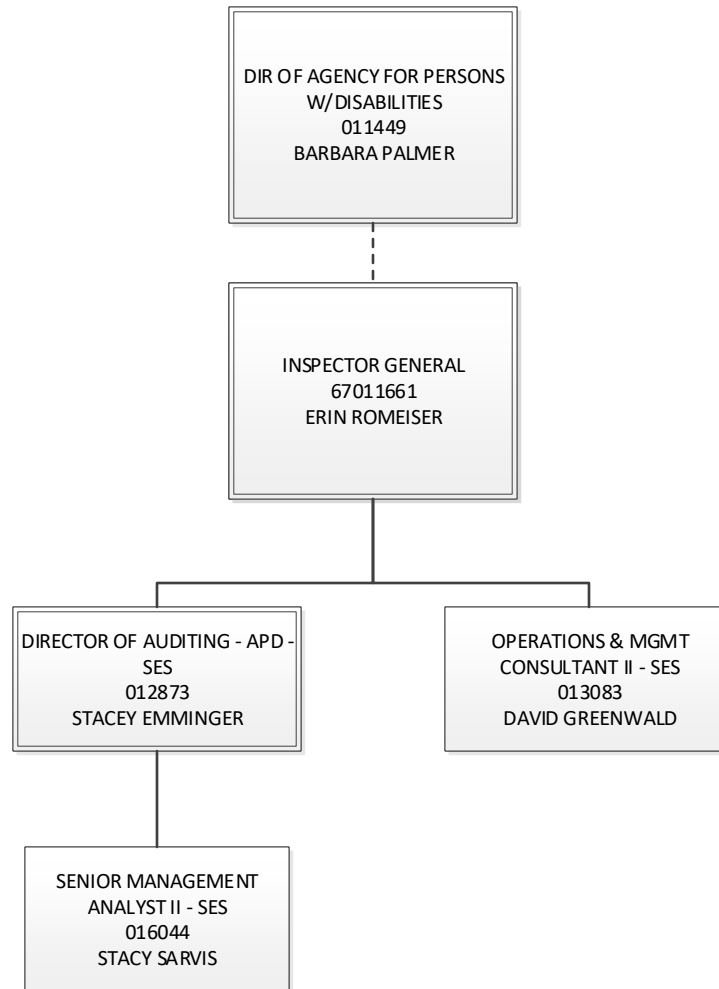
Information Technology
Last Edited: 8/11/2021

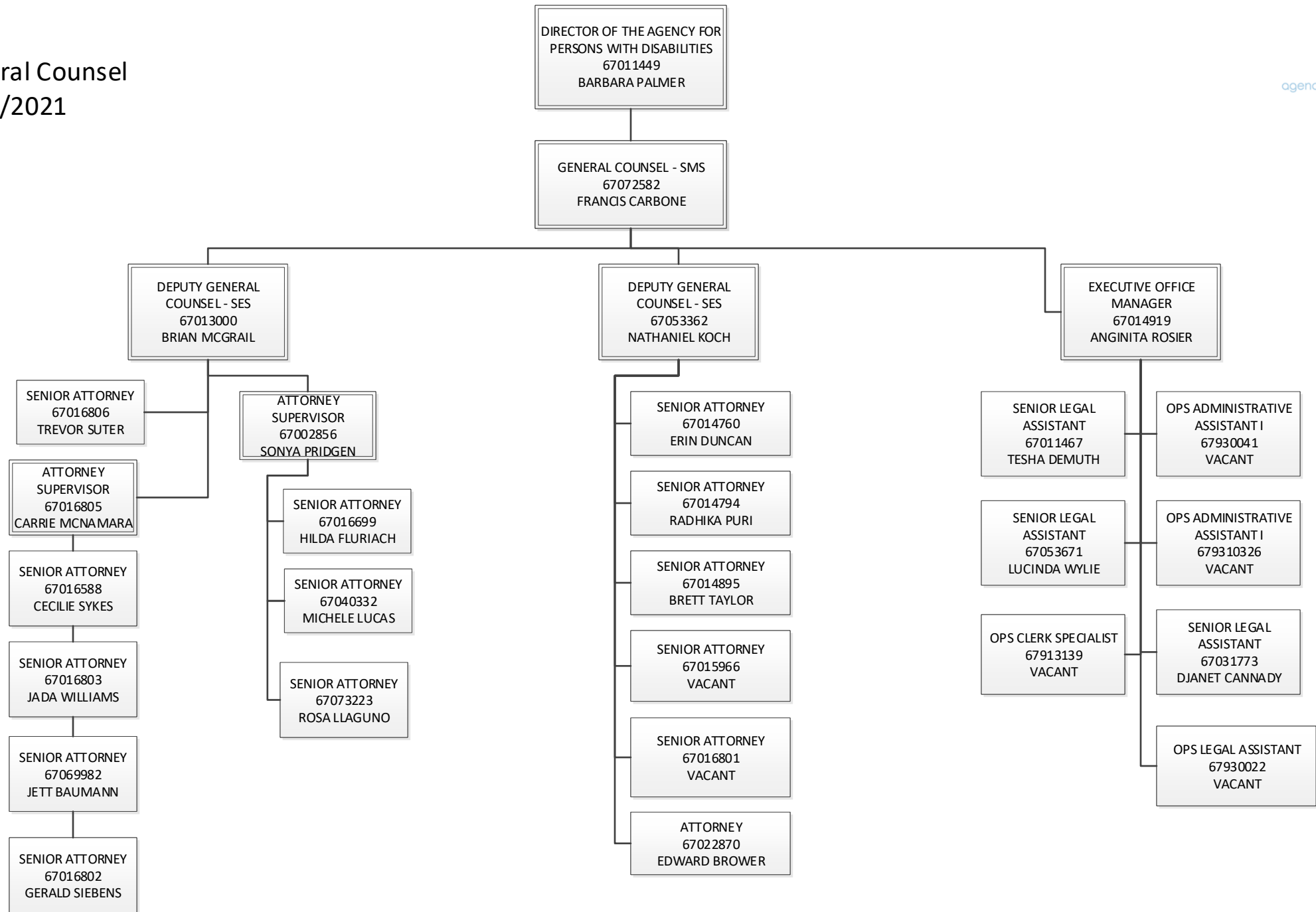


Office of Performance &
Accountability
Last Edited: 8/11/2021



Office of Inspector General
Last Edited: 8/11/2021

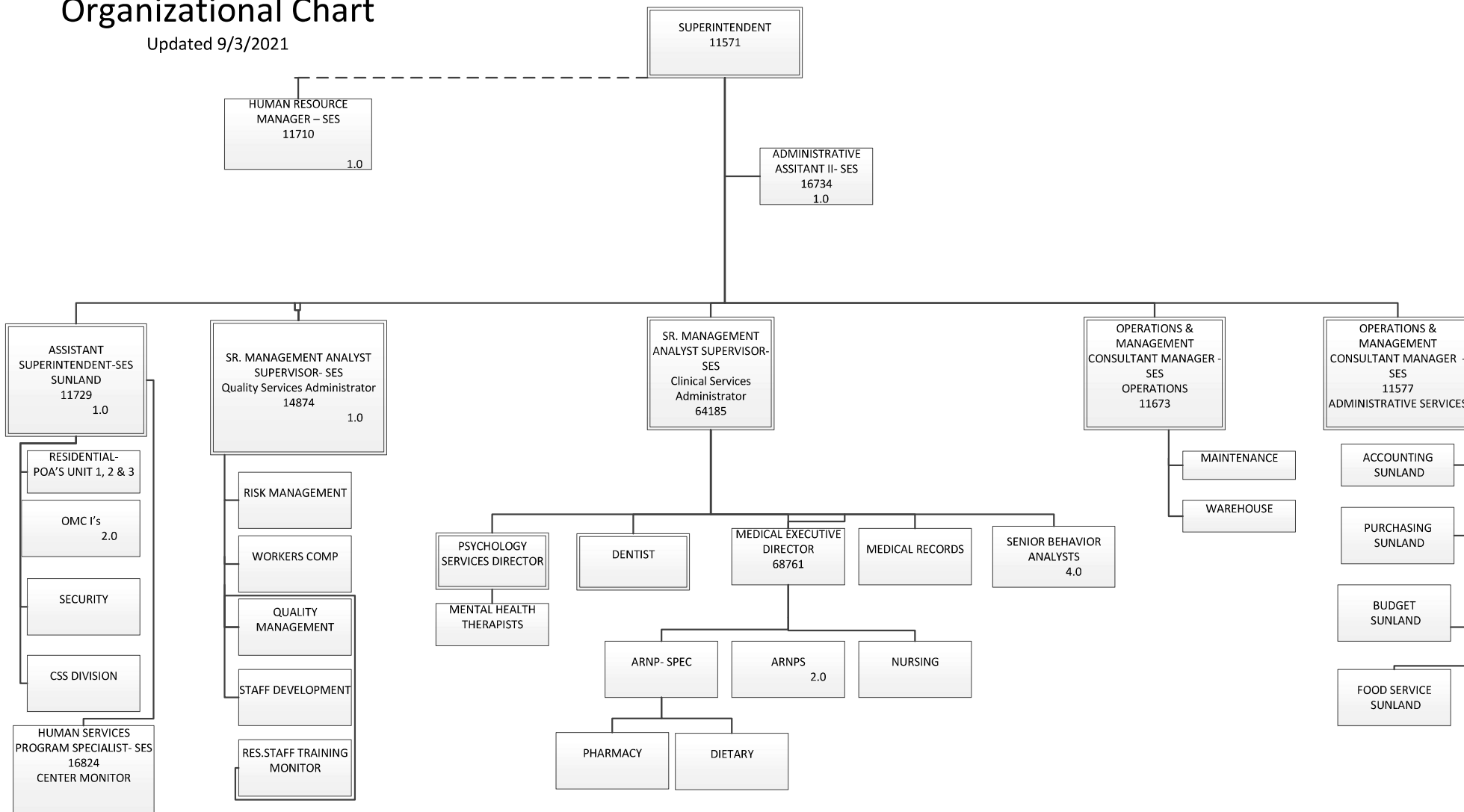




SUNLAND ADMINISTRATION

Organizational Chart

Updated 9/3/2021

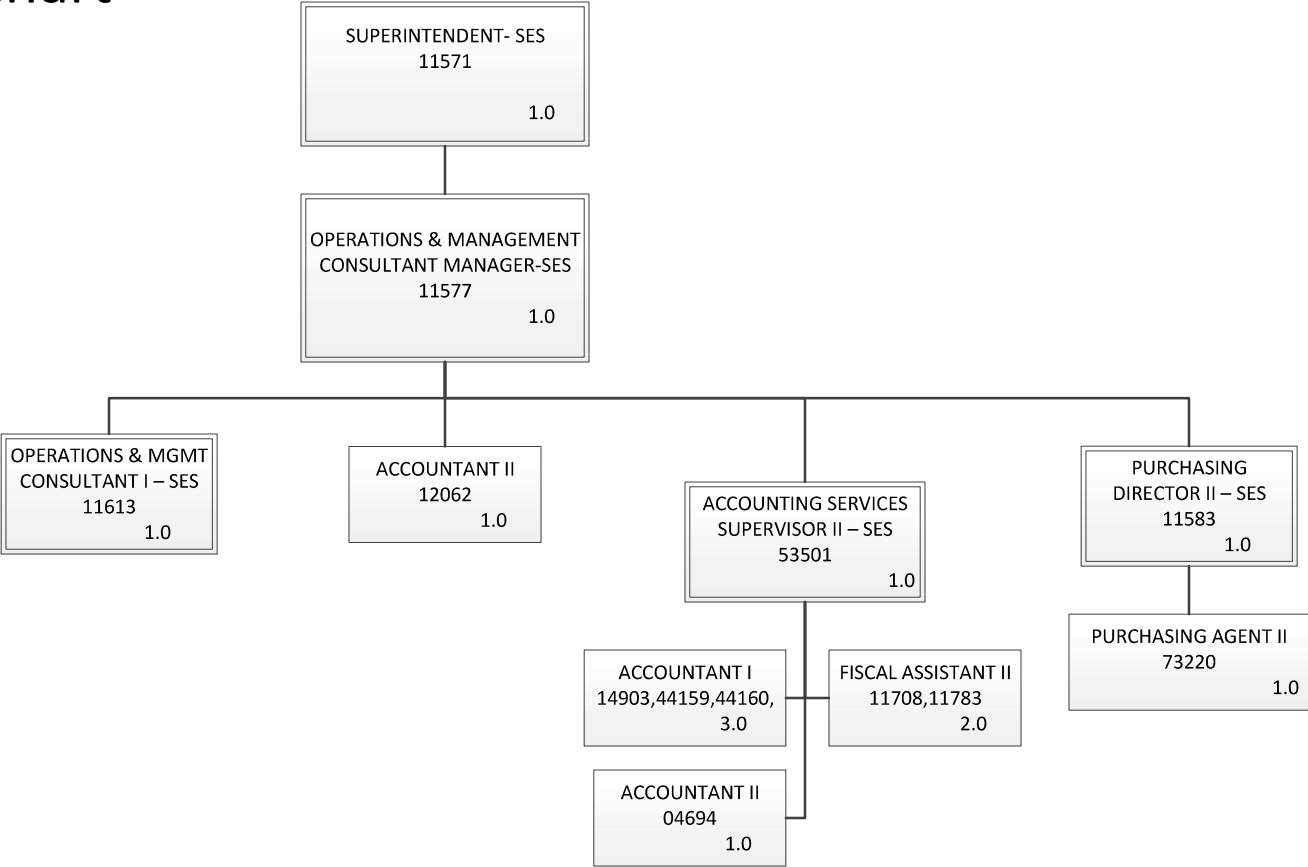


ADMINISTRATIVE SERVICES

SUNLAND

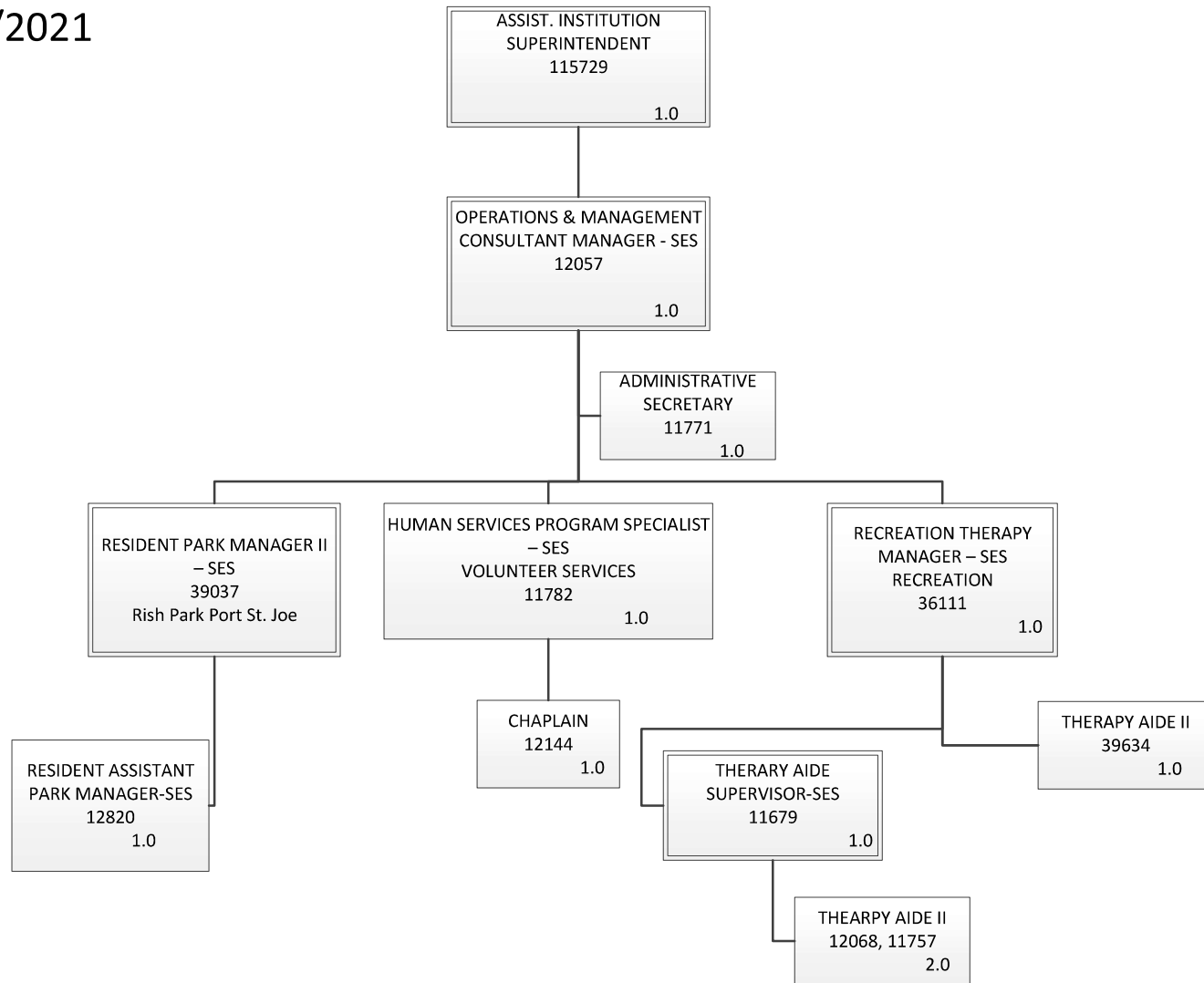
Organizational Chart

09/03/2021



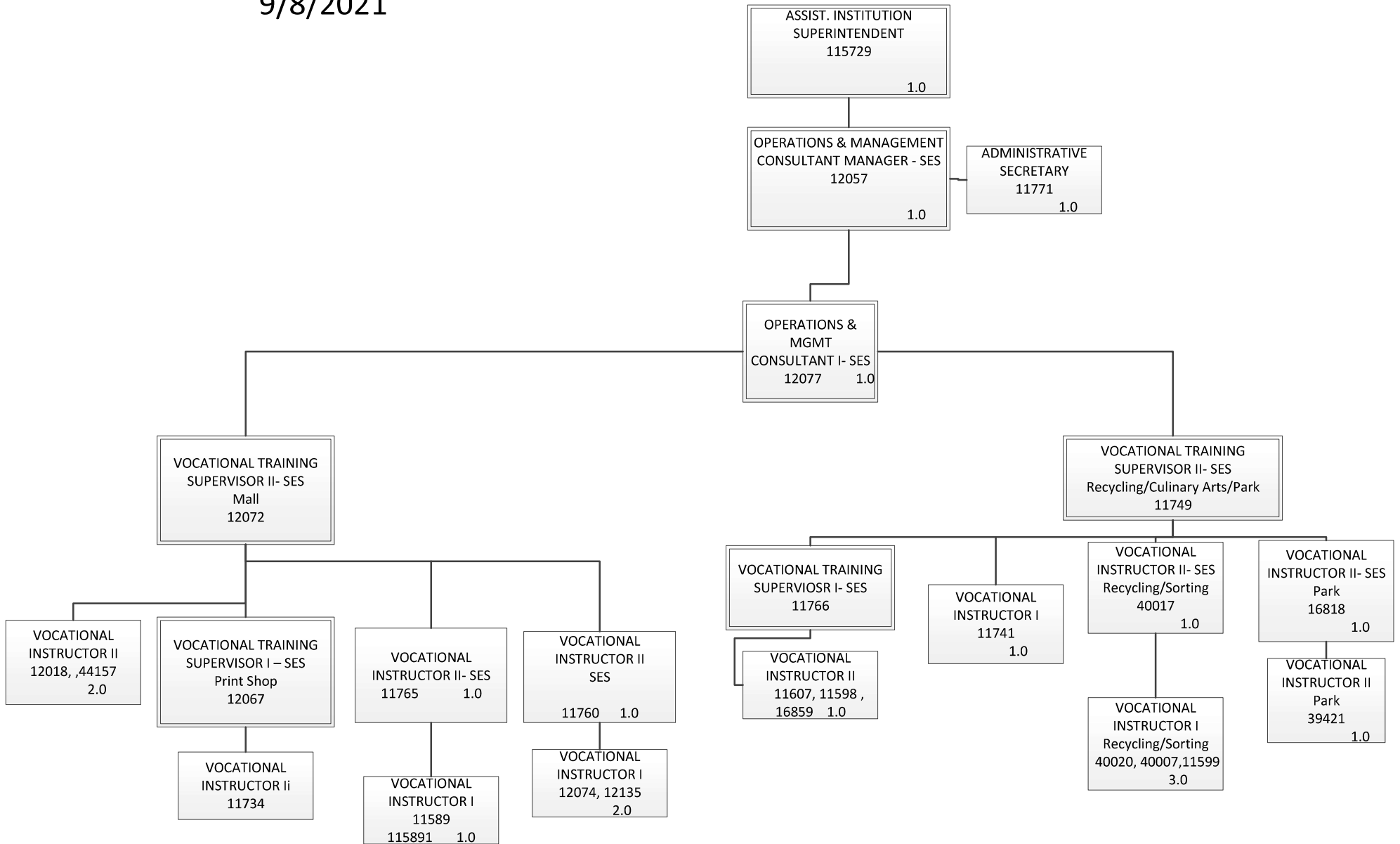
Organizational Chart
9/8/2021

Centralized Support Services (CSS)
Sunland Center



Organizational Chart
9/8/2021

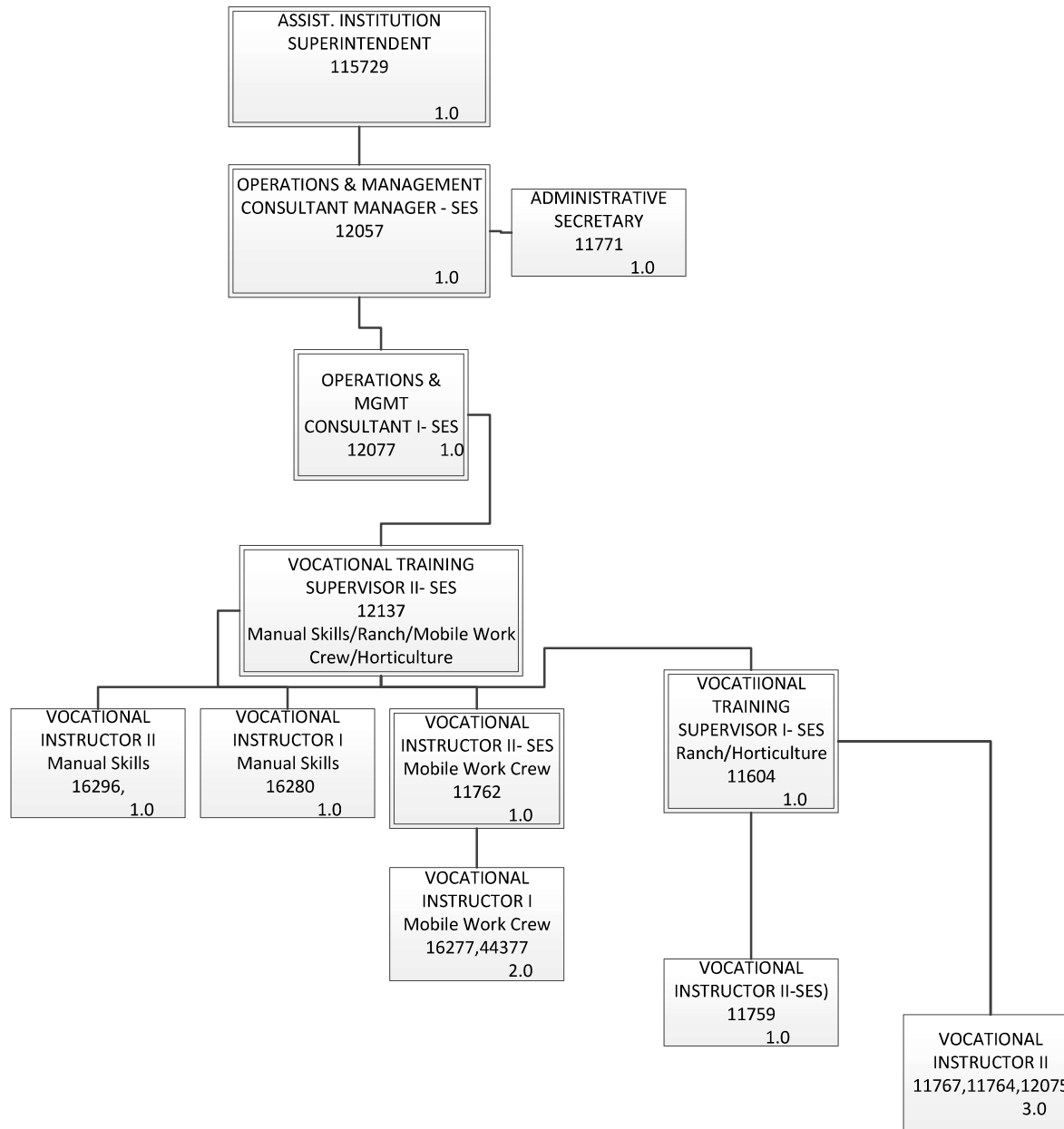
Centralized Support Services (CSS)
Sunland Center



Organizational Chart
9/8/2021

Centralized Support Services (CSS)

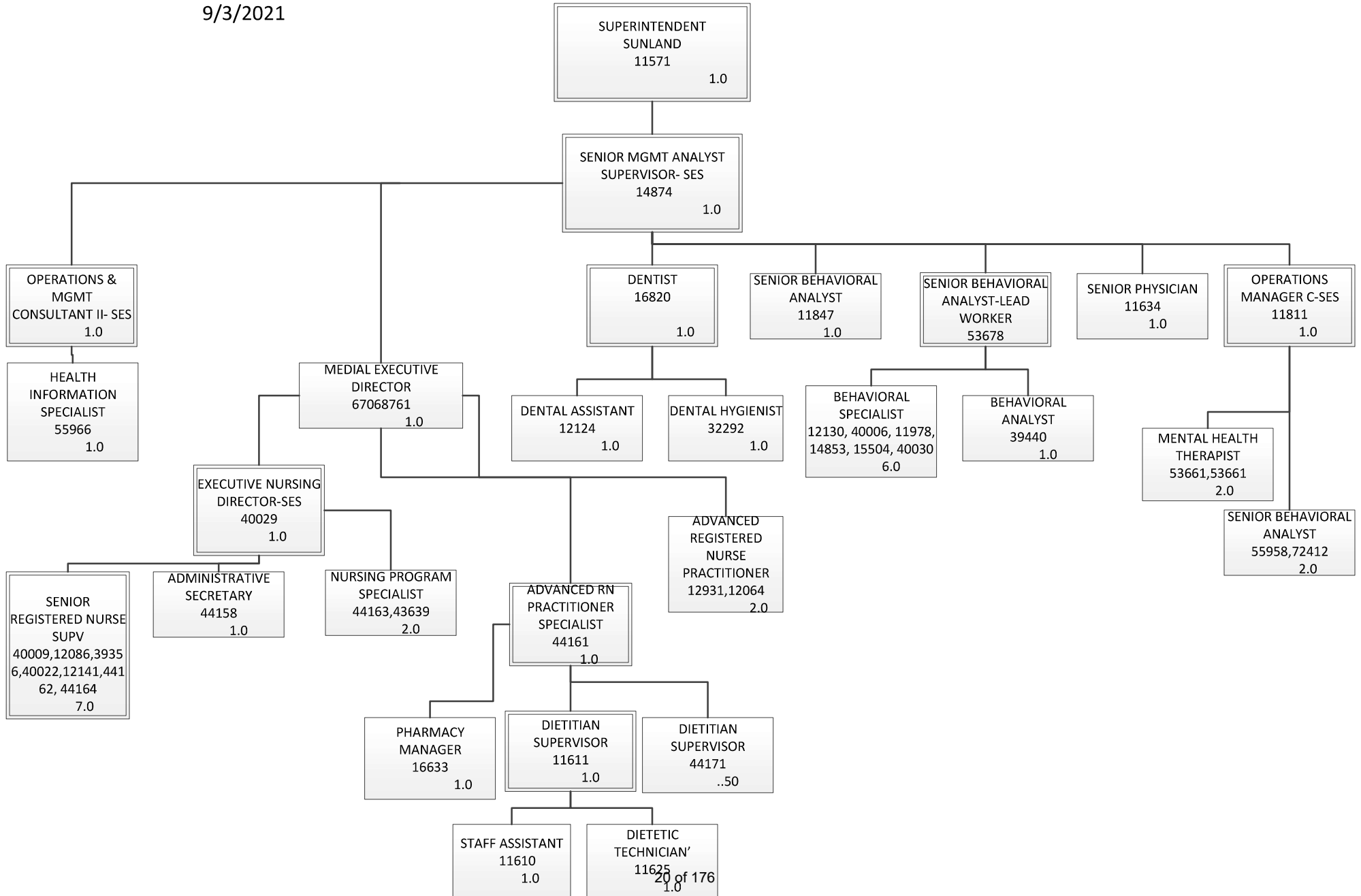
Sunland Center



Clinical Services Sunland

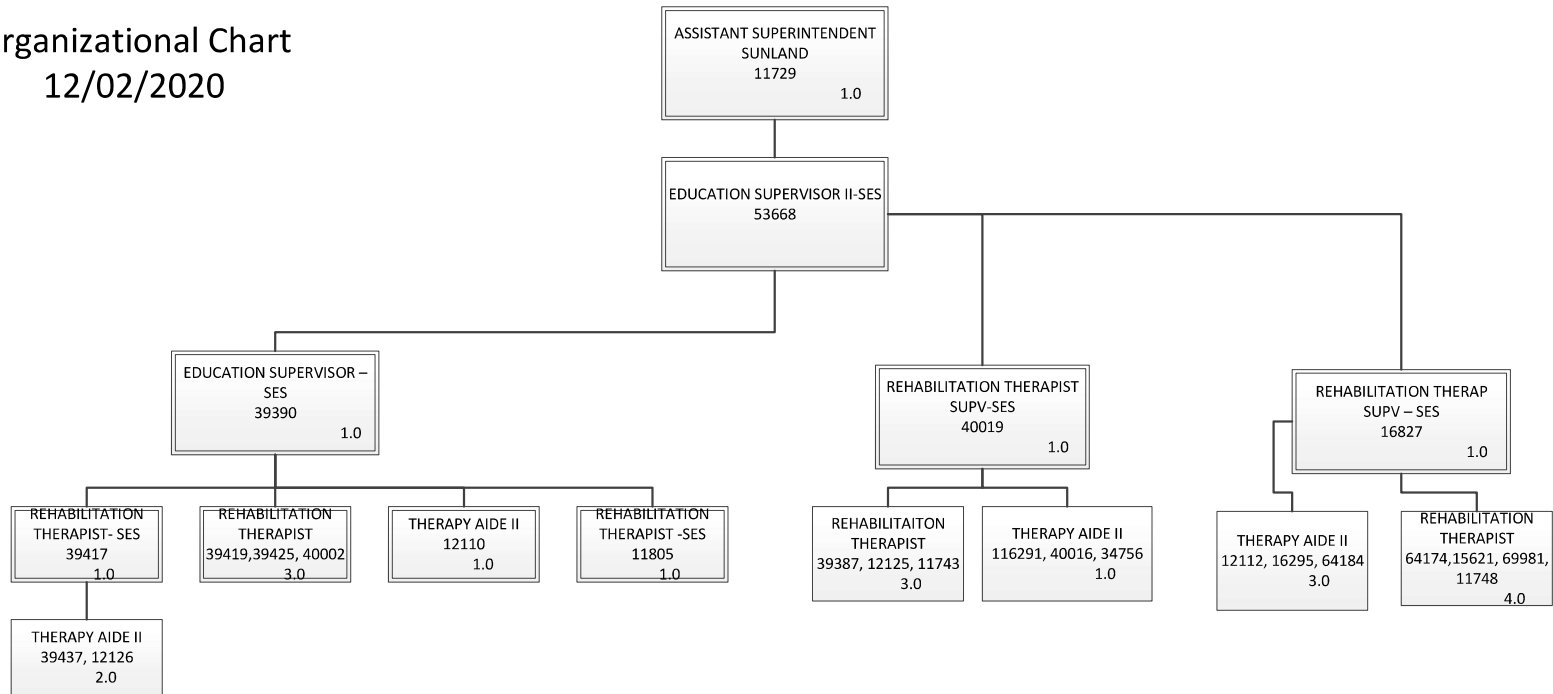
Organizational Chart

9/3/2021

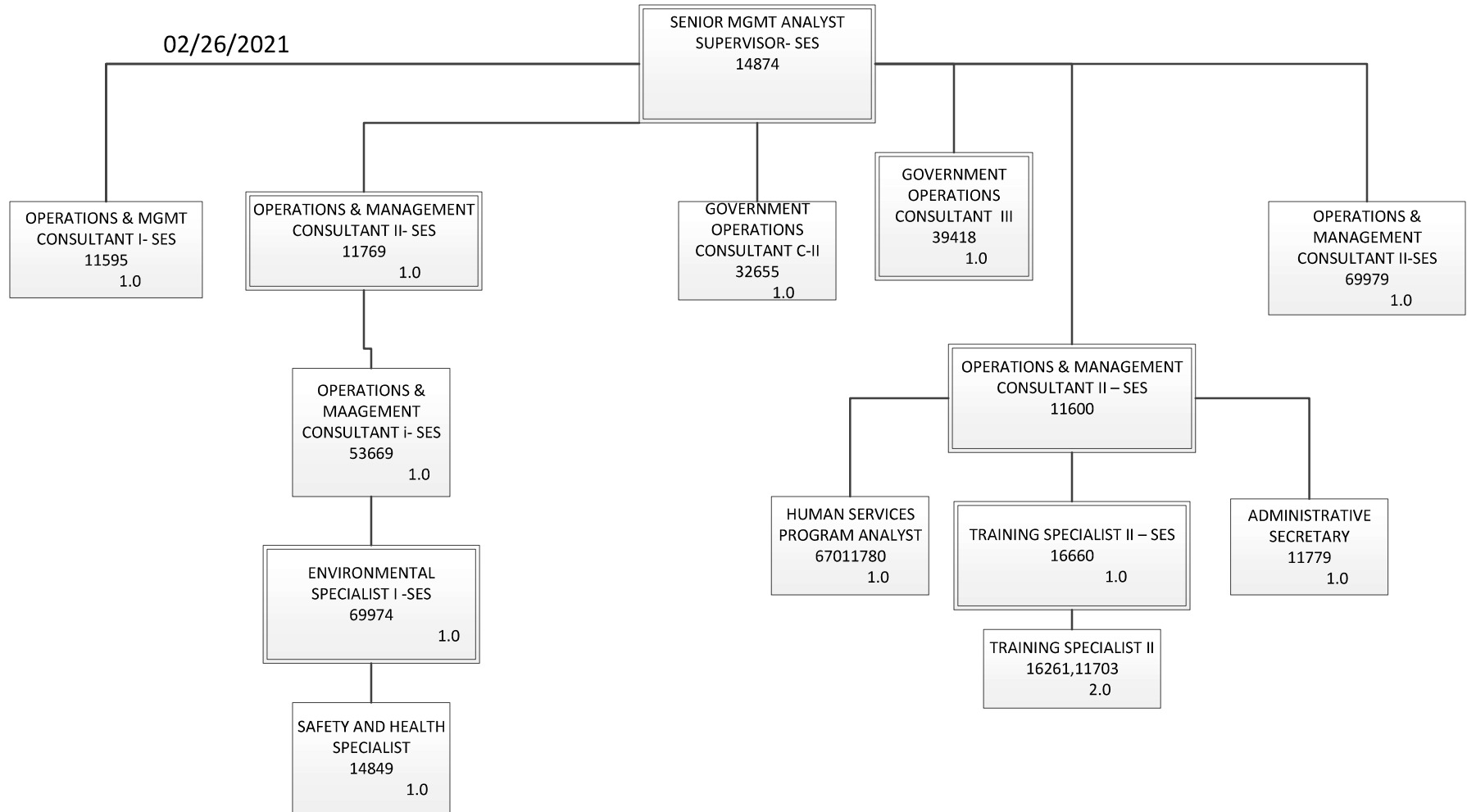


EDUCATION SERVICES

Organizational Chart
12/02/2020



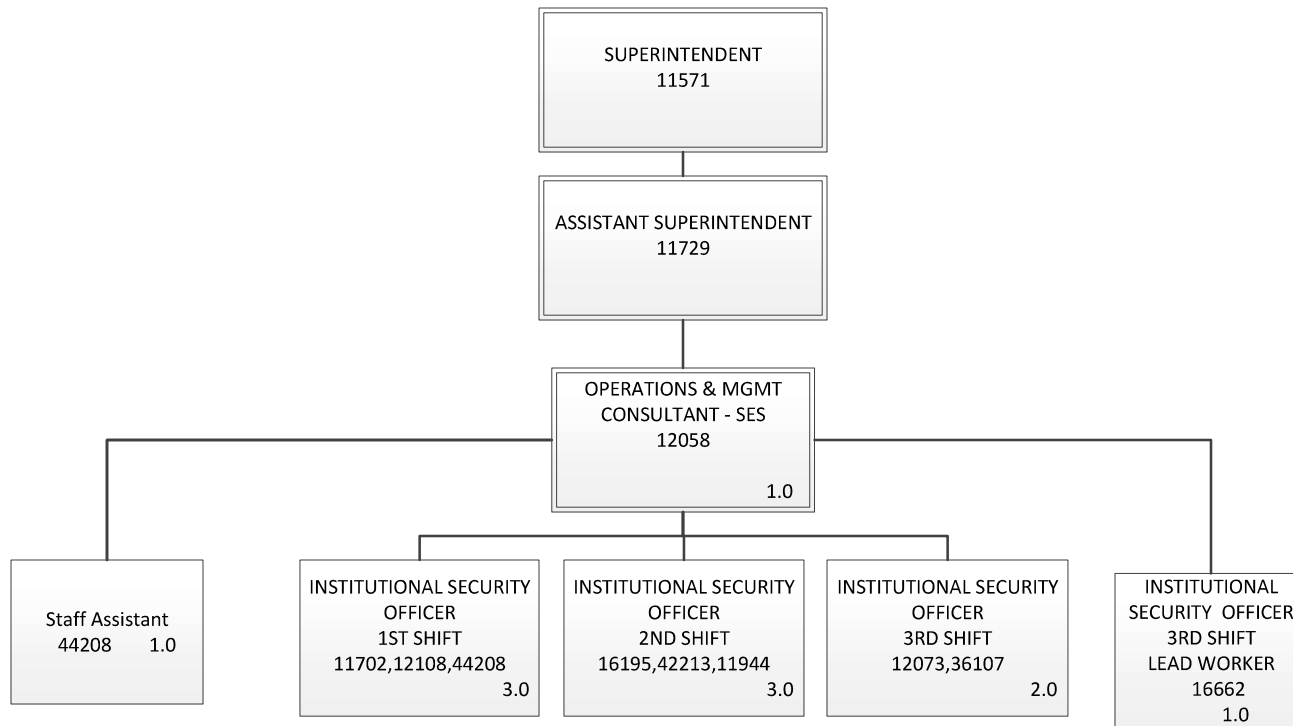
Quality Services



SUNLAND SECURITY

Organizational Chart

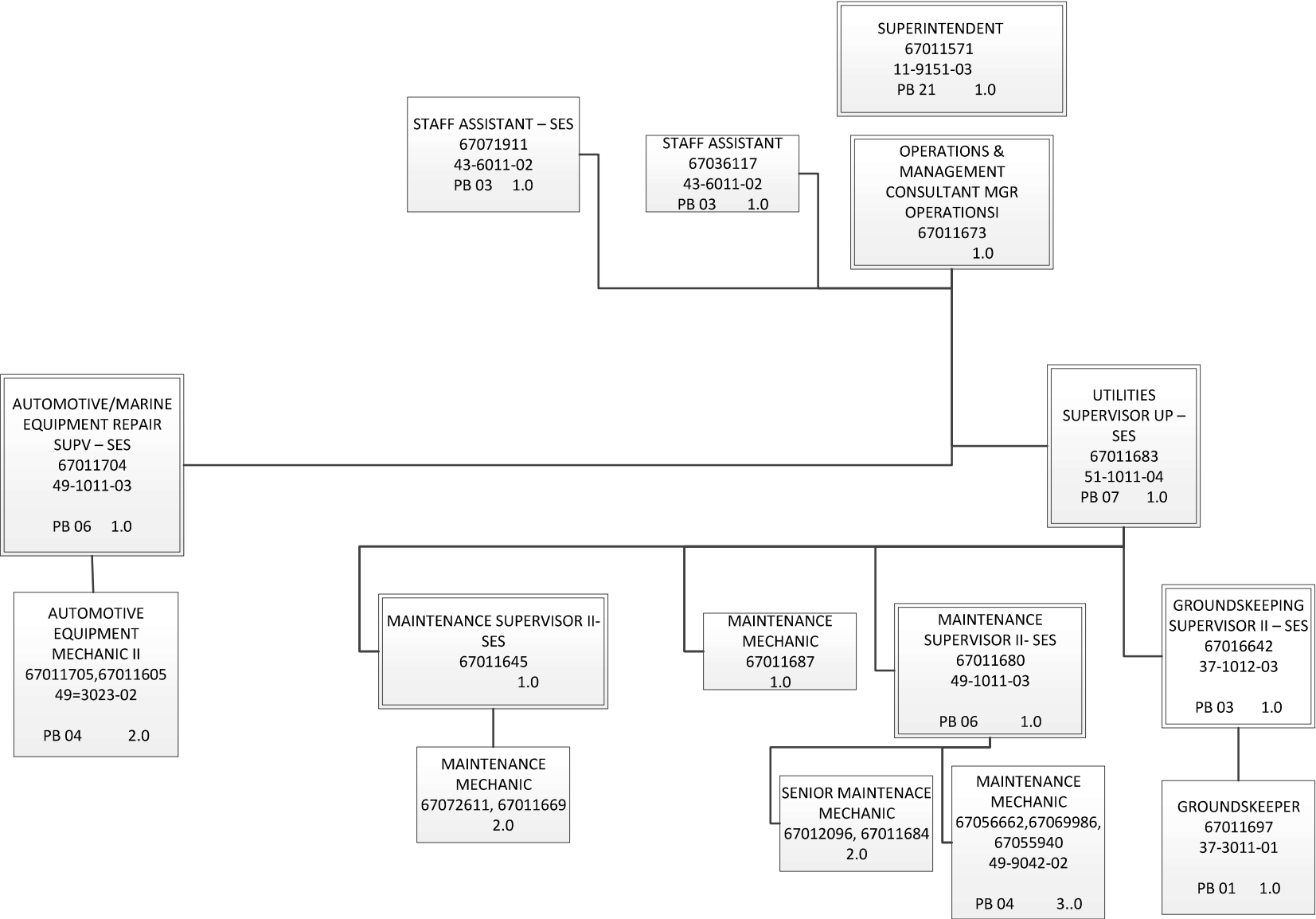
Updated 12/28/2018



MAINTENANCE SUNLAND

Organizational Chart

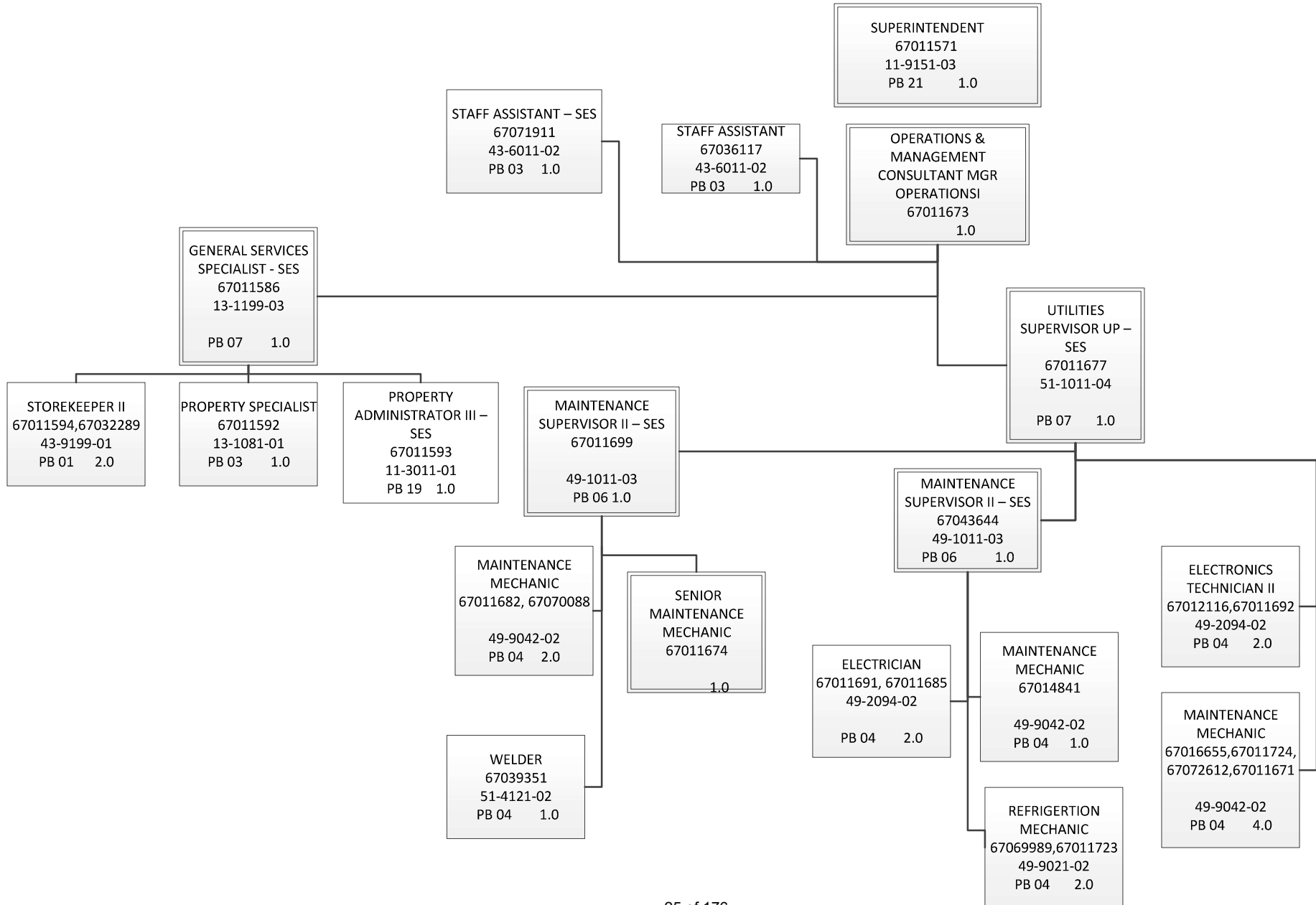
Updated 04/07/2021



MAINTENANCE/WAREHOUSE SUNLAND

Organizational Chart

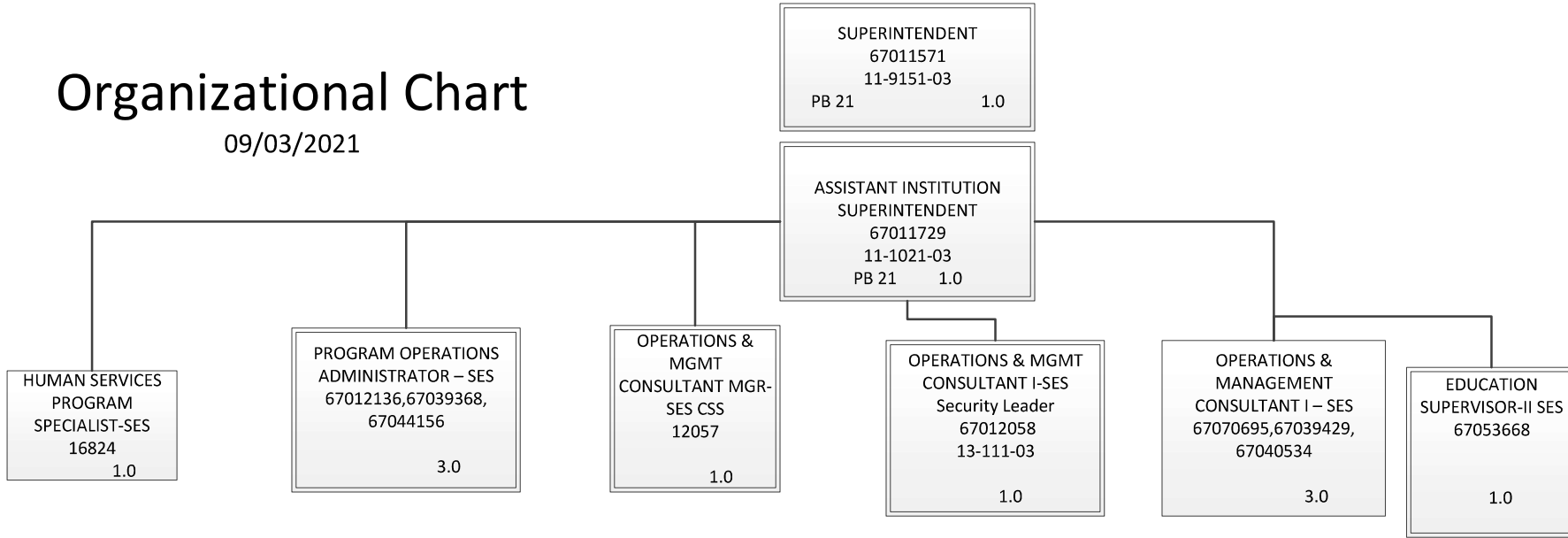
Updated 04/07/2021



SUNLAND ASSISTANT SUPERINTENDENT

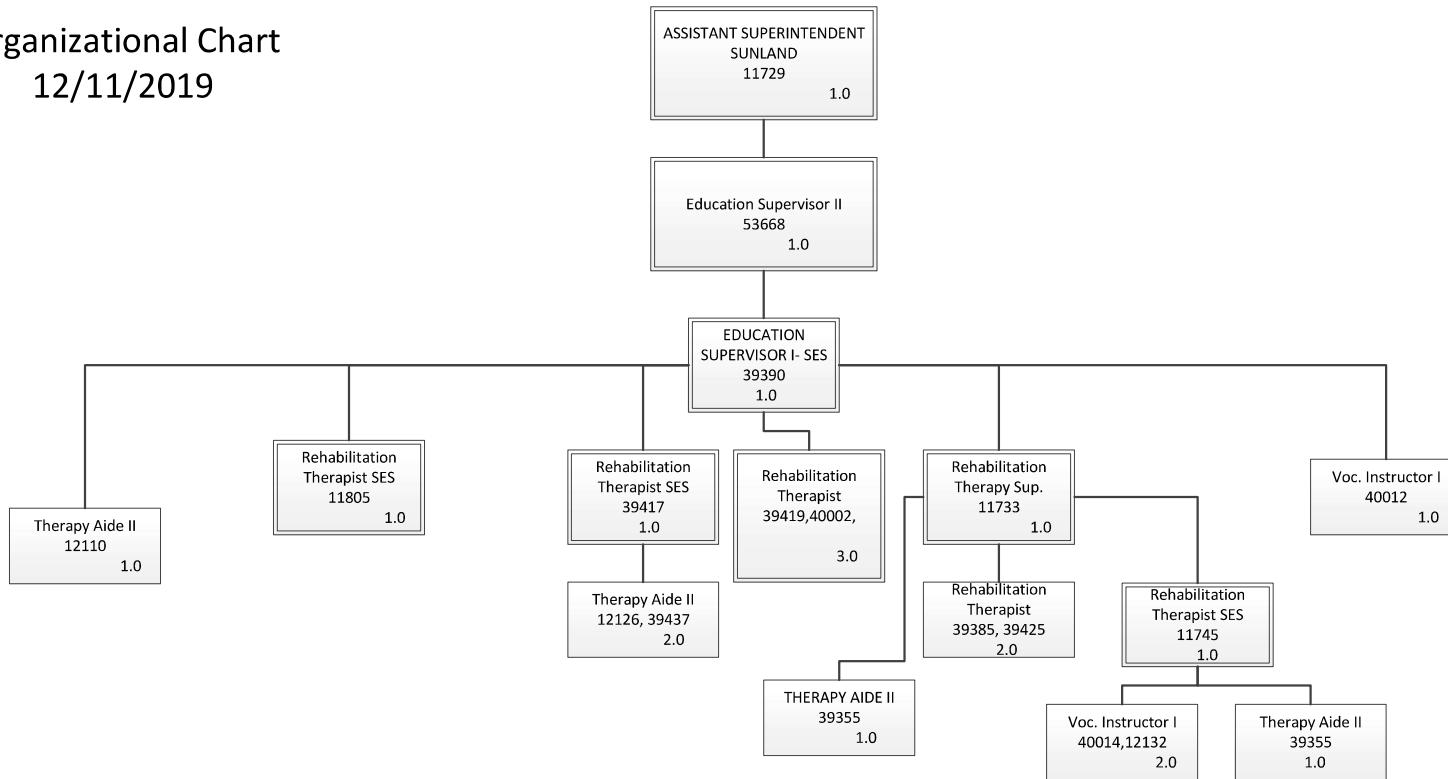
Organizational Chart

09/03/2021



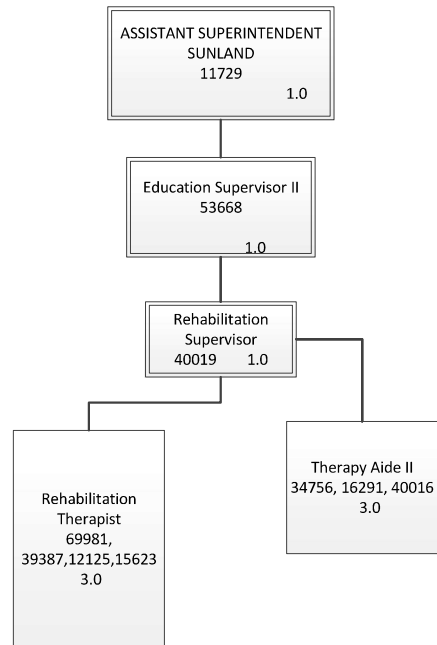
Organizational Chart
12/11/2019

Educational Dept. Unit 1



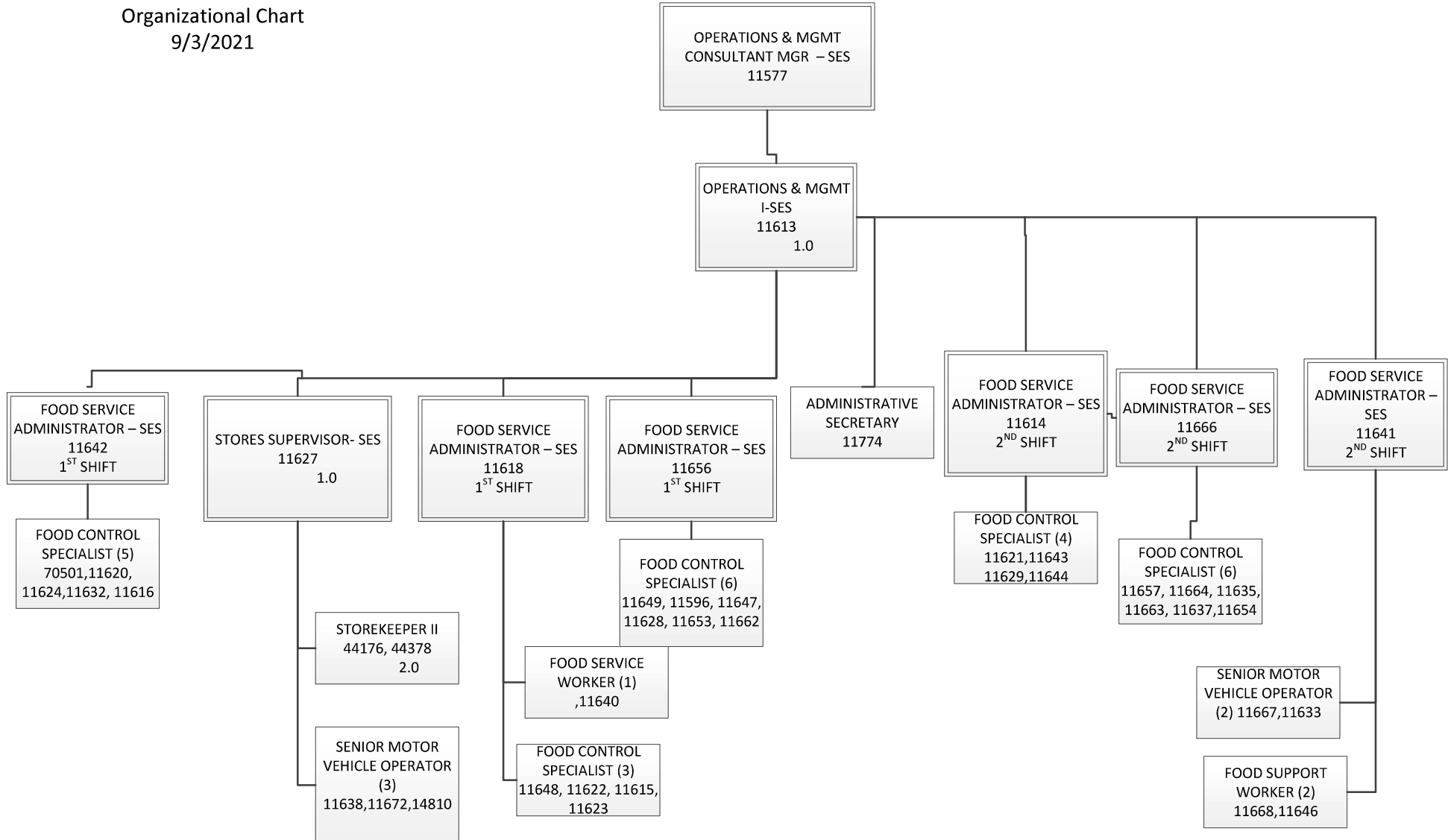
Organizational Chart
08/09/2019

Educational Dept. Unit 2



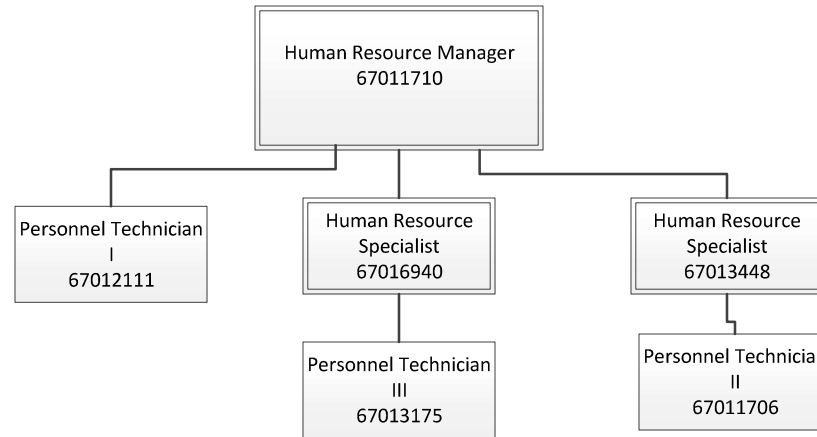
SUNLAND FOOD SERVICE

Organizational Chart
9/3/2021



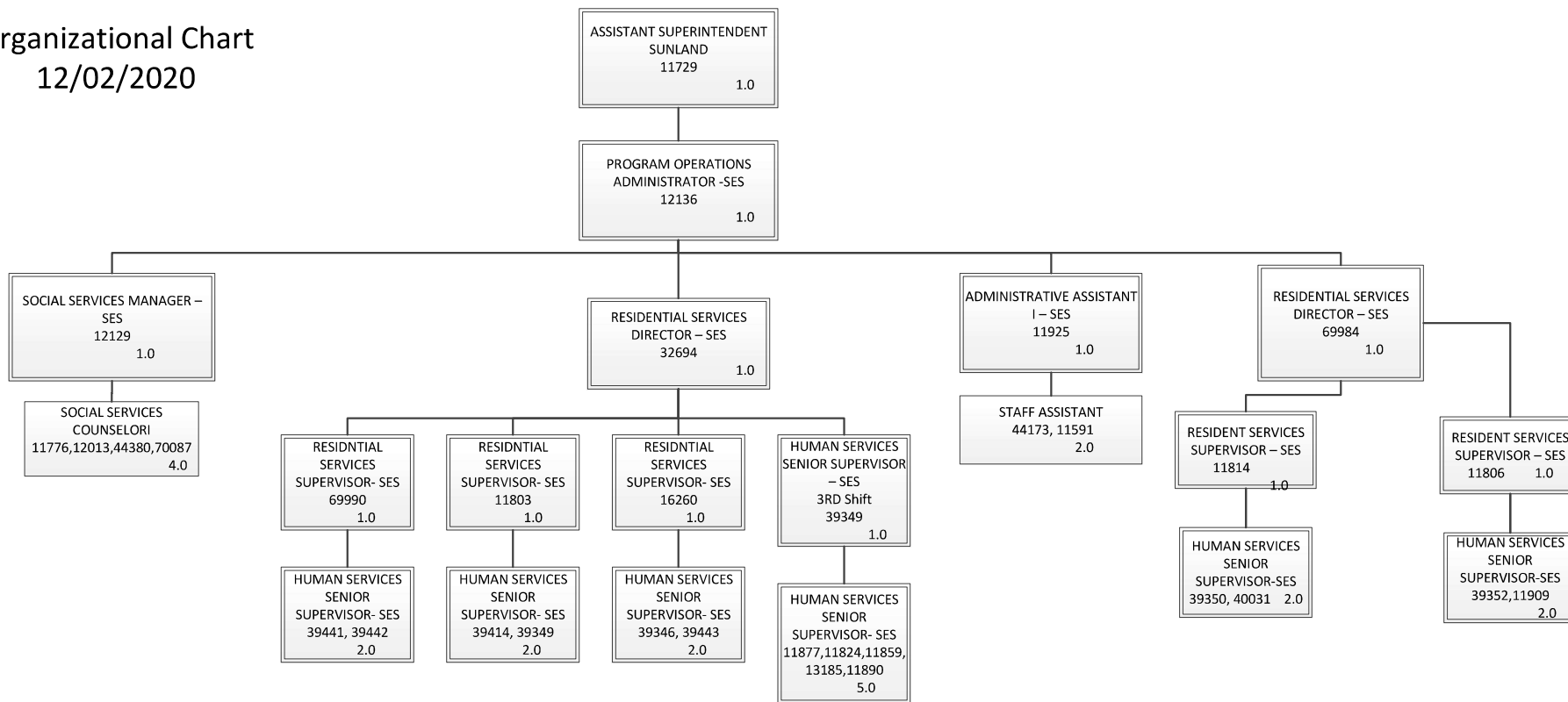
Sunland Human Resources

11/01/2018



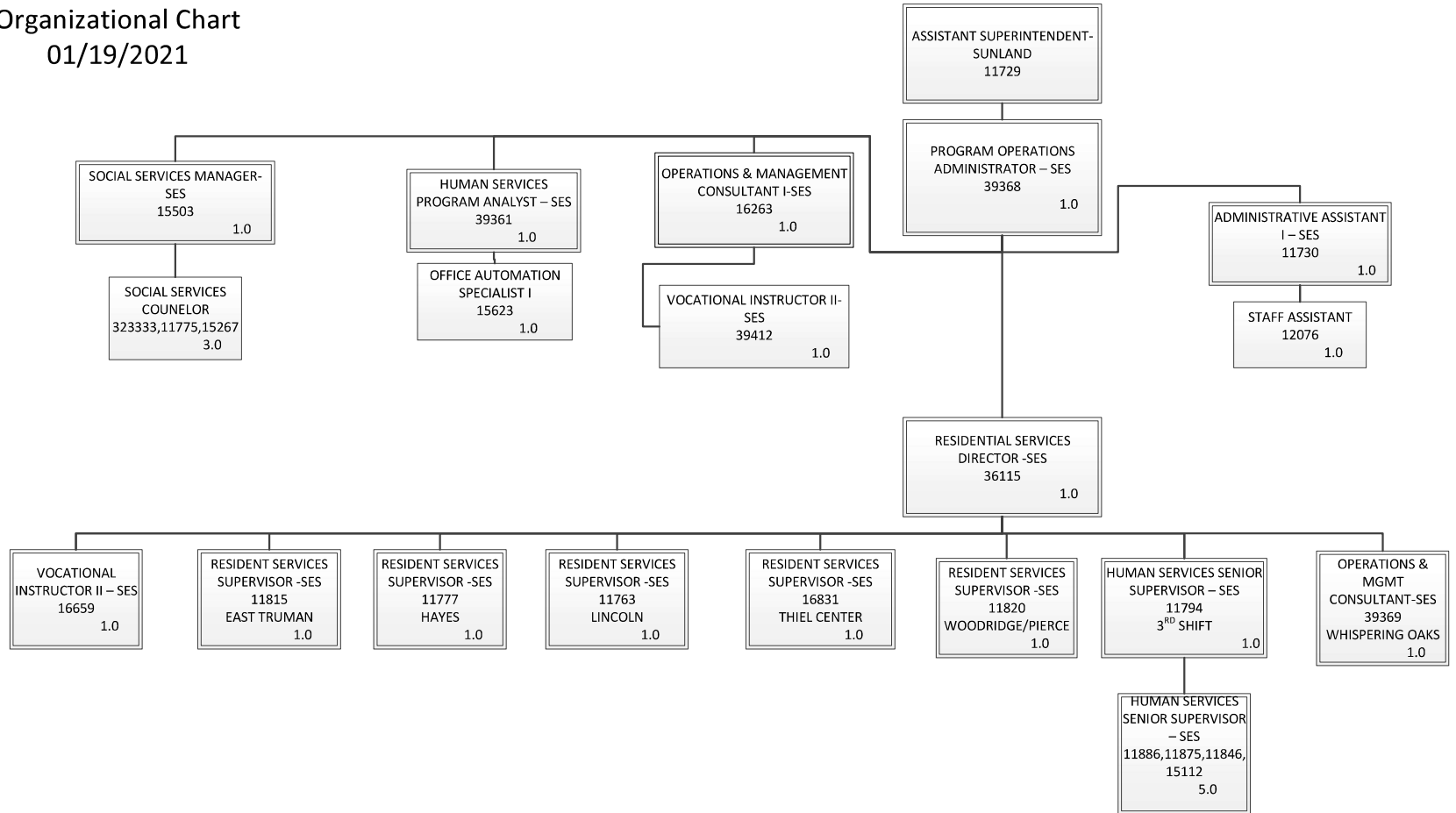
UNIT 1 ADMINISTRATION

Organizational Chart
12/02/2020



UNIT 2 ADMINISTRATION

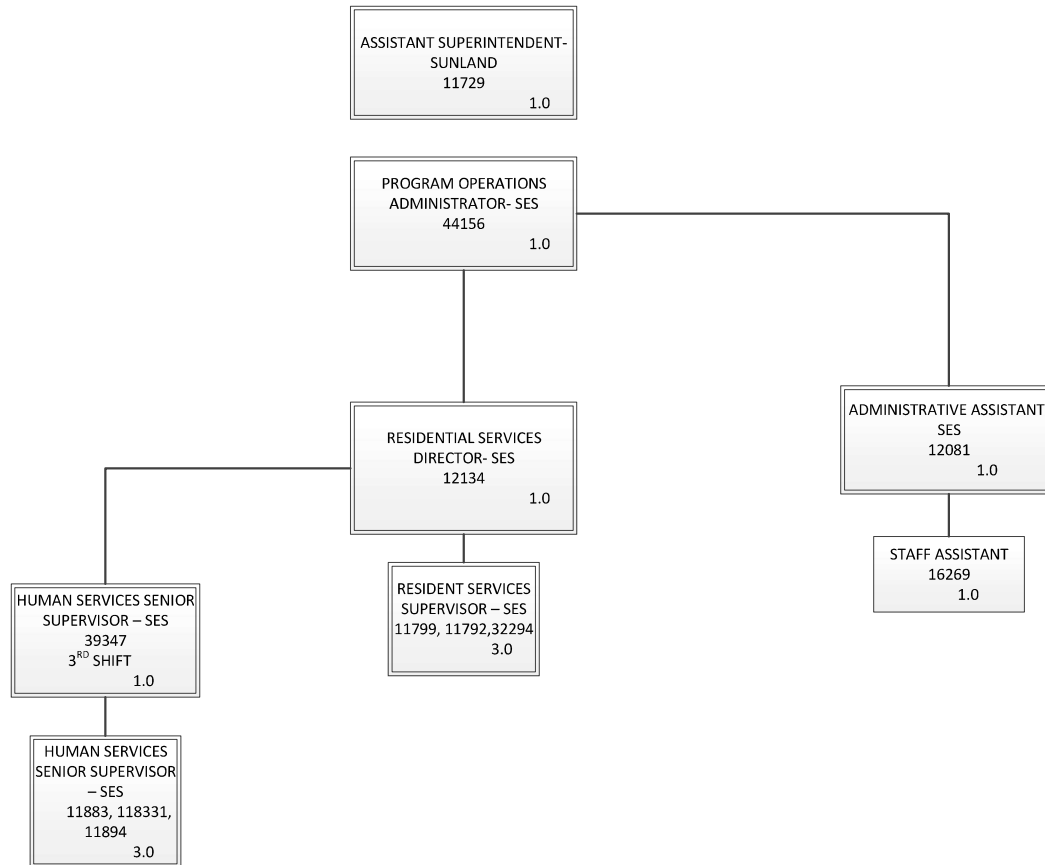
Organizational Chart
01/19/2021



UNIT 3 ADMINISTRATION

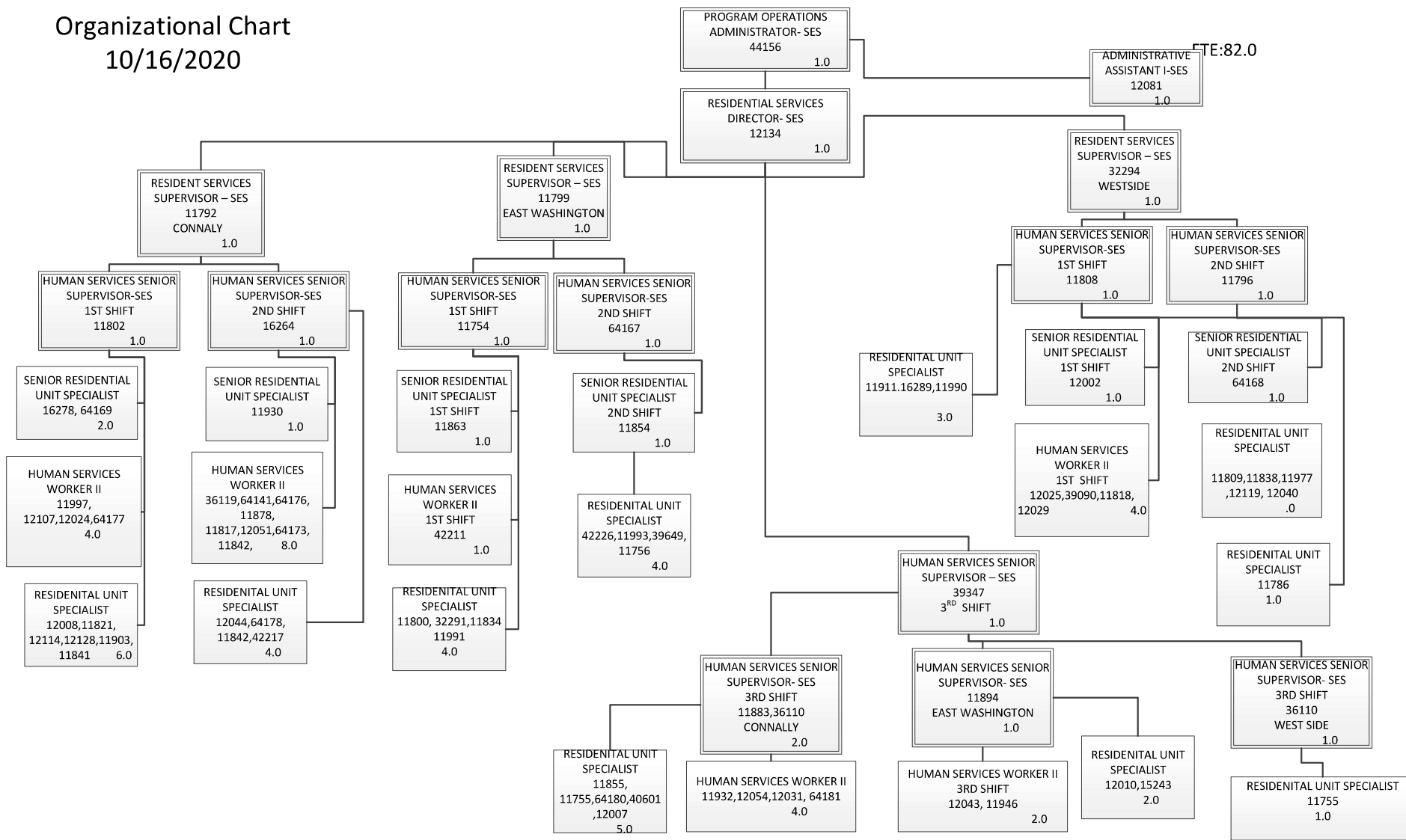
Organizational Chart

12/02/2020



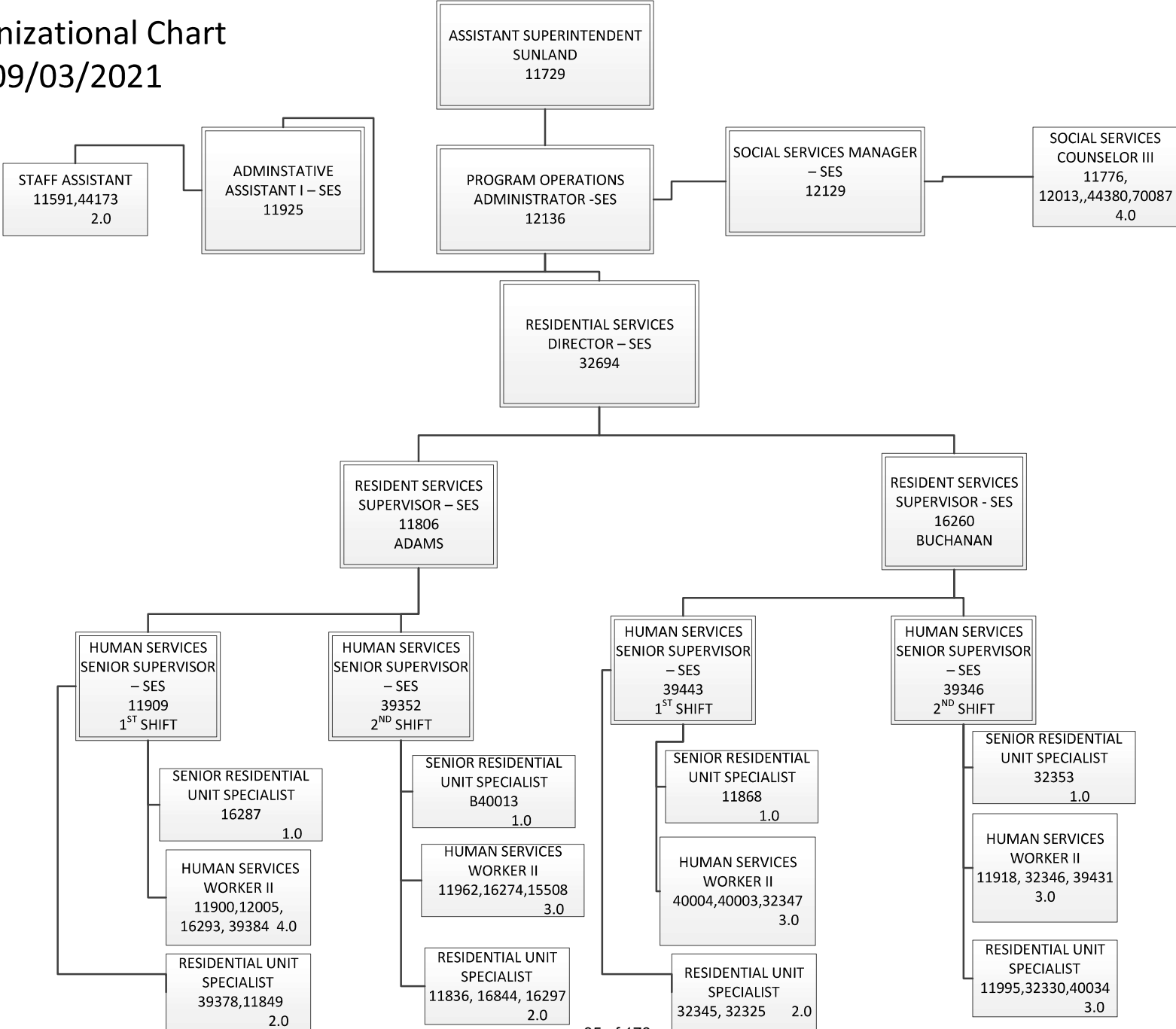
UNIT 3 ICF Homes (3) CONNALLY, EAST WASHINGTON, WESTSIDE

Organizational Chart
10/16/2020



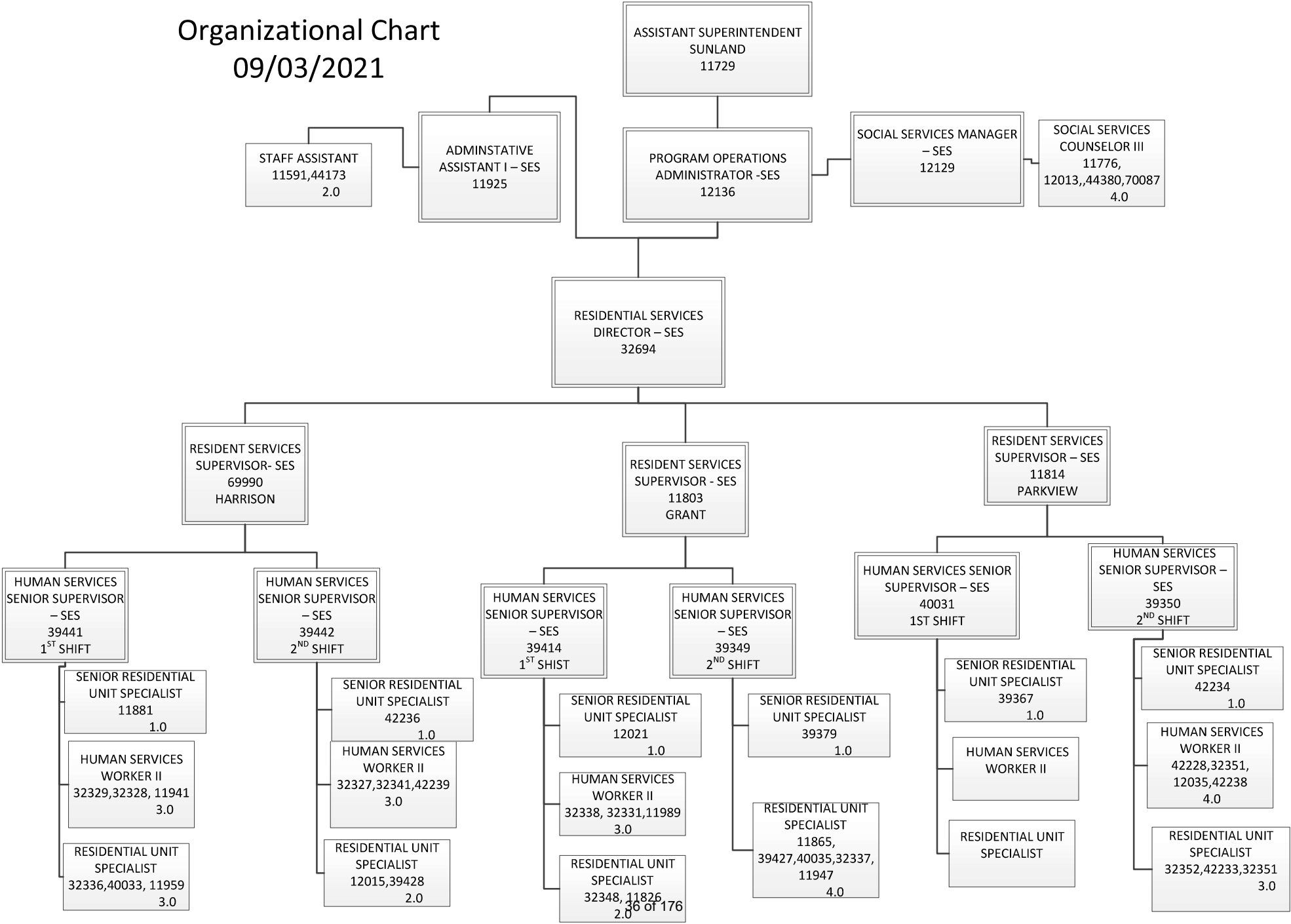
UNIT 1 – ADAMS AND BUCHANAN

Organizational Chart
09/03/2021



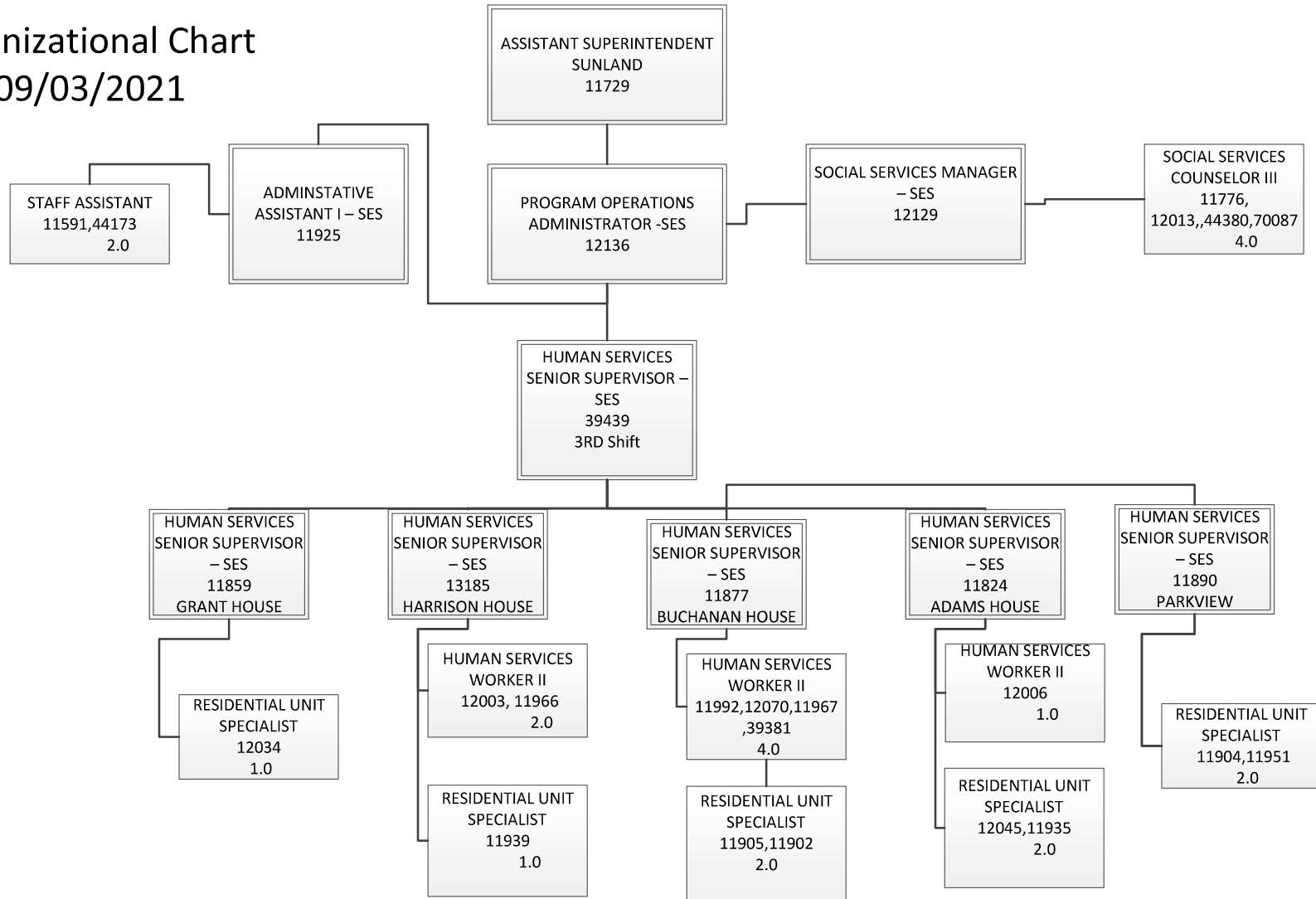
UNIT 1 – HARRISON, GRANT AND PARKVIEW

Organizational Chart
09/03/2021



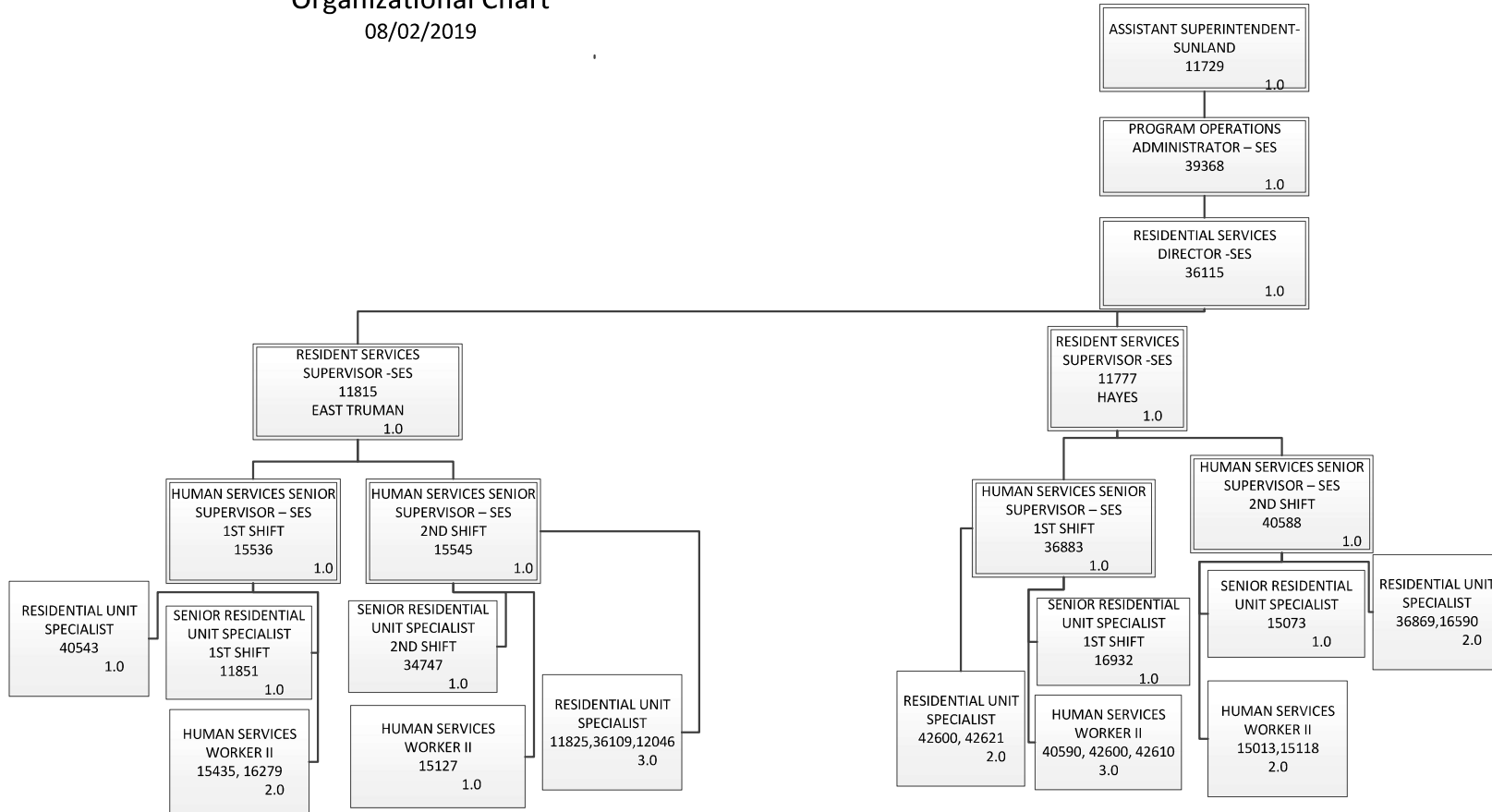
UNIT 1 3rd SHIFT

Organizational Chart 09/03/2021



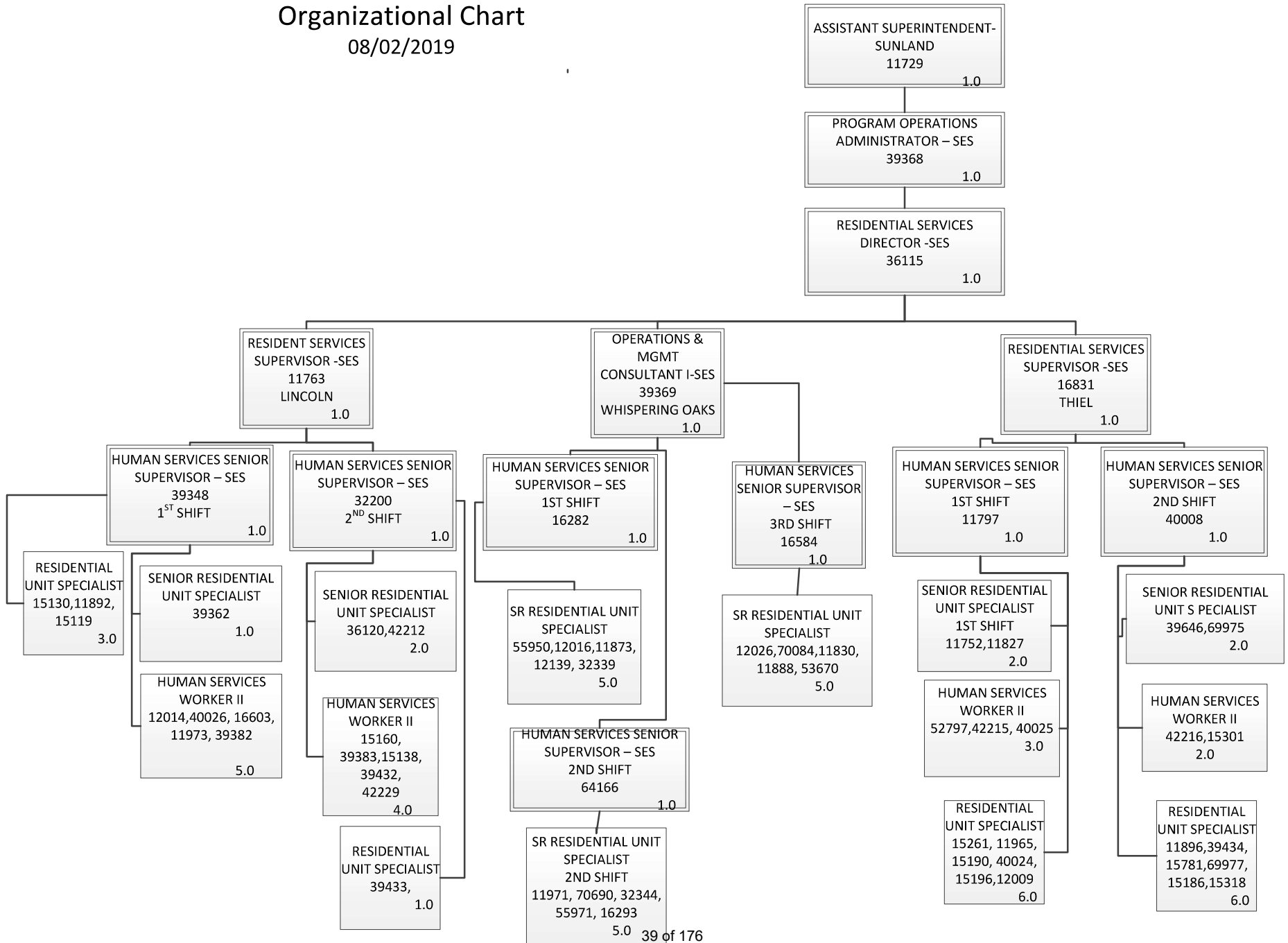
Organizational Chart
08/02/2019

UNIT 2 ICF HOMES
EAST TRUMAN AND HAYES



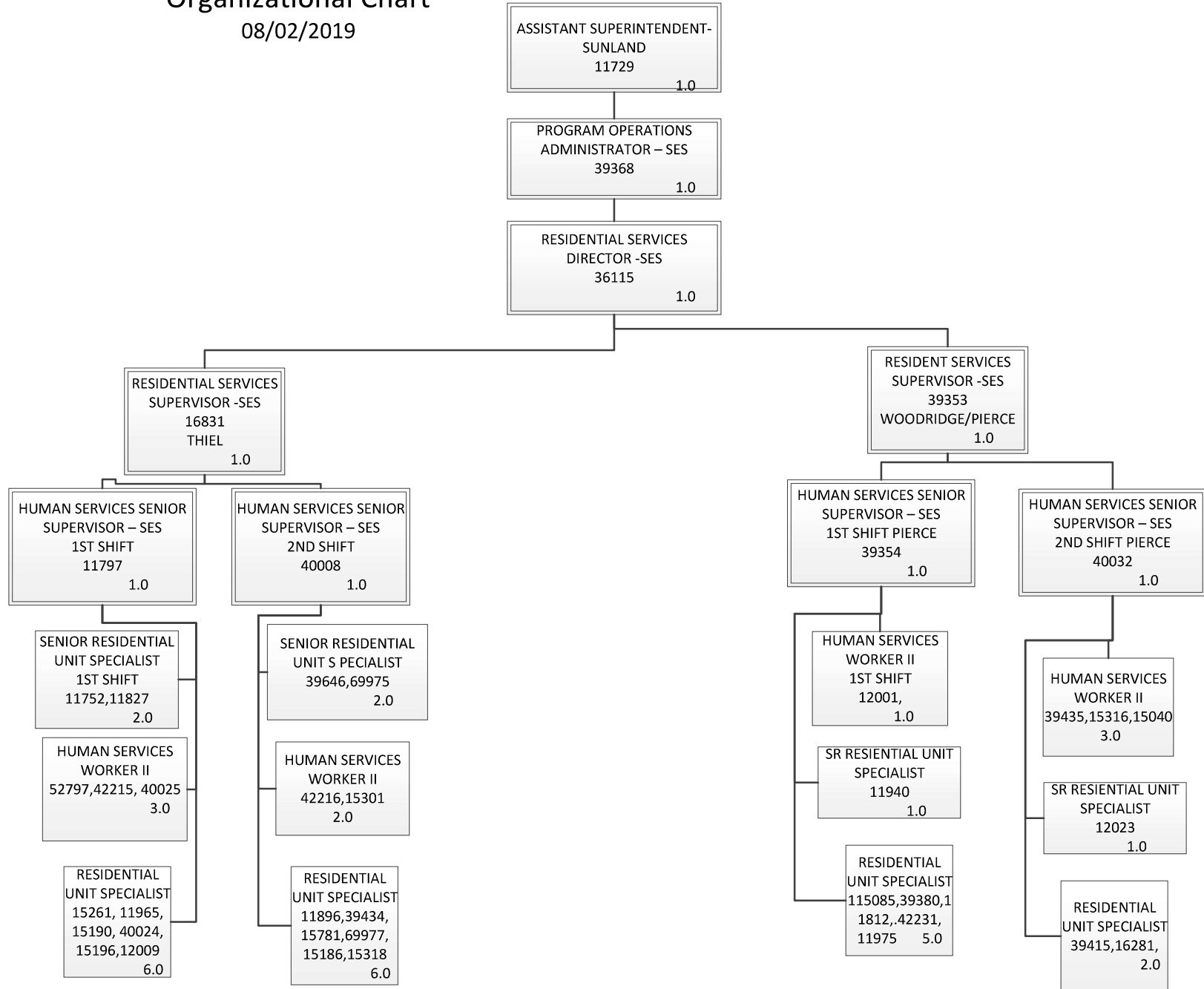
UNIT 2 ICF HOMES LINCOLN AND WHISPERING OAKS

Organizational Chart
08/02/2019



UNIT 2 ICF HOMES

Organizational Chart THIEL, WOODRIDGE AND PIERCE 08/02/2019

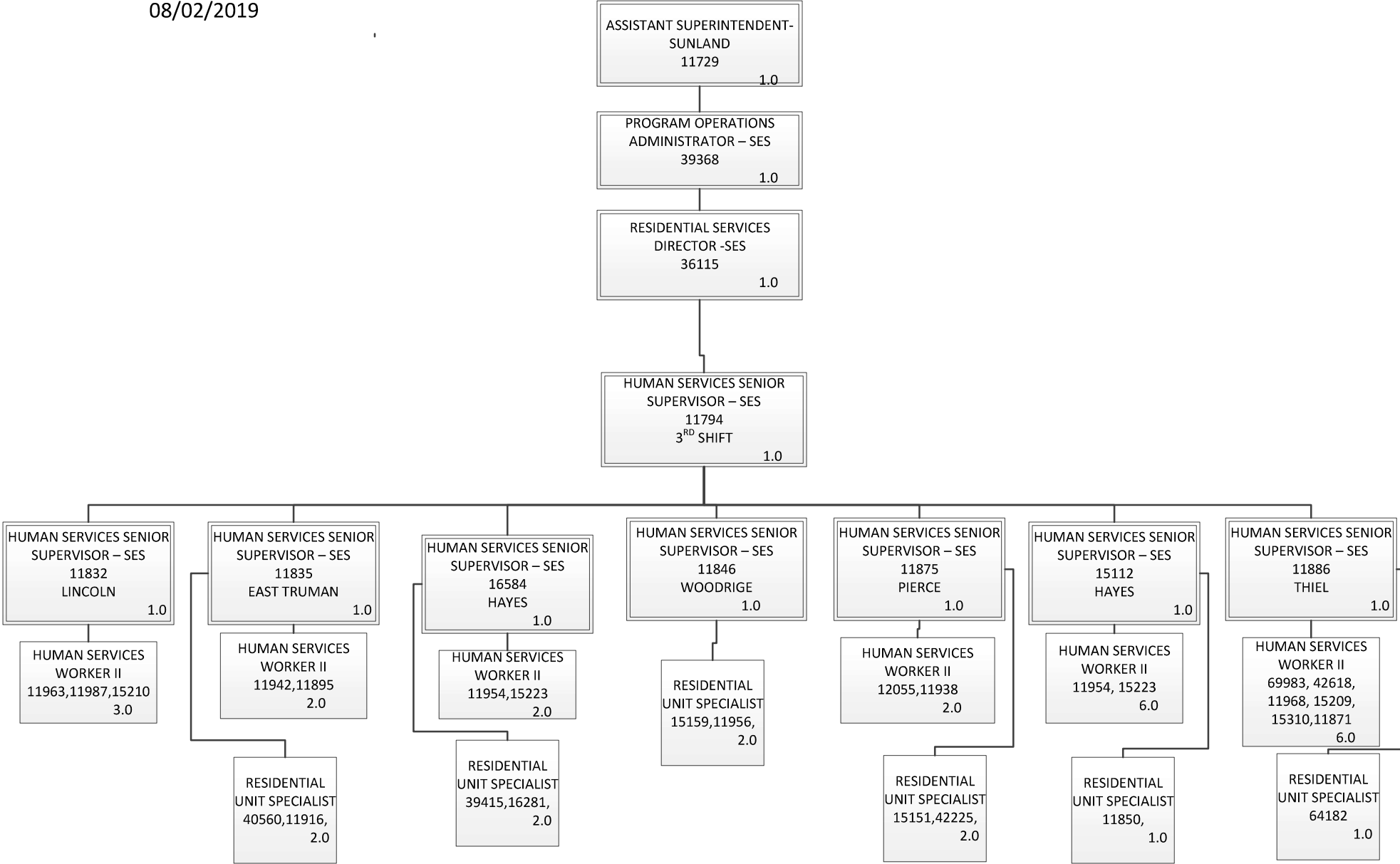


UNIT 2 ICF HOMES

3RD SHIFT

Organizational Chart

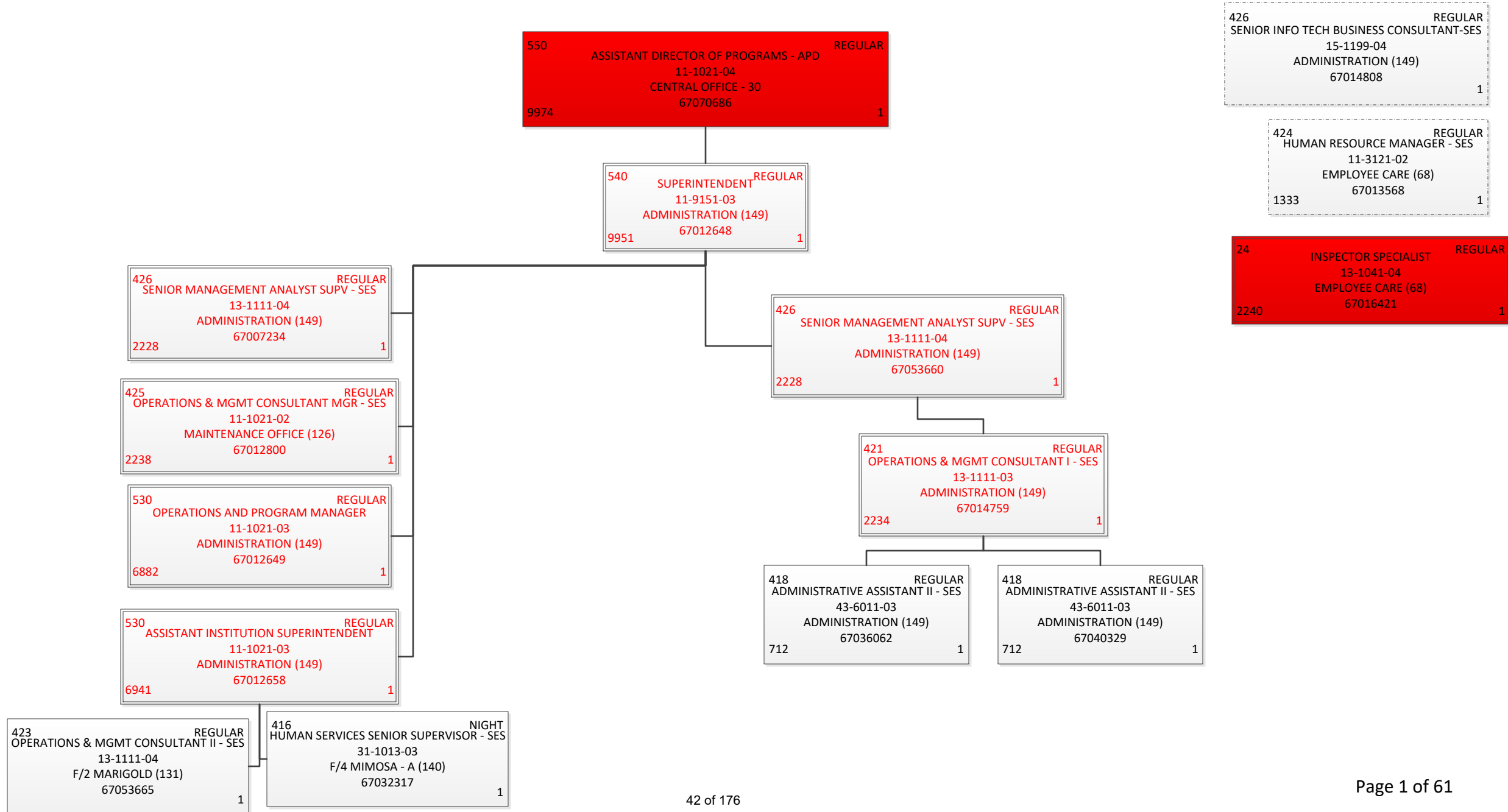
08/02/2019



Administration

June 2021

Center Administration
Interdepartment #6200000000
of Positions/FTE: 14/14.0



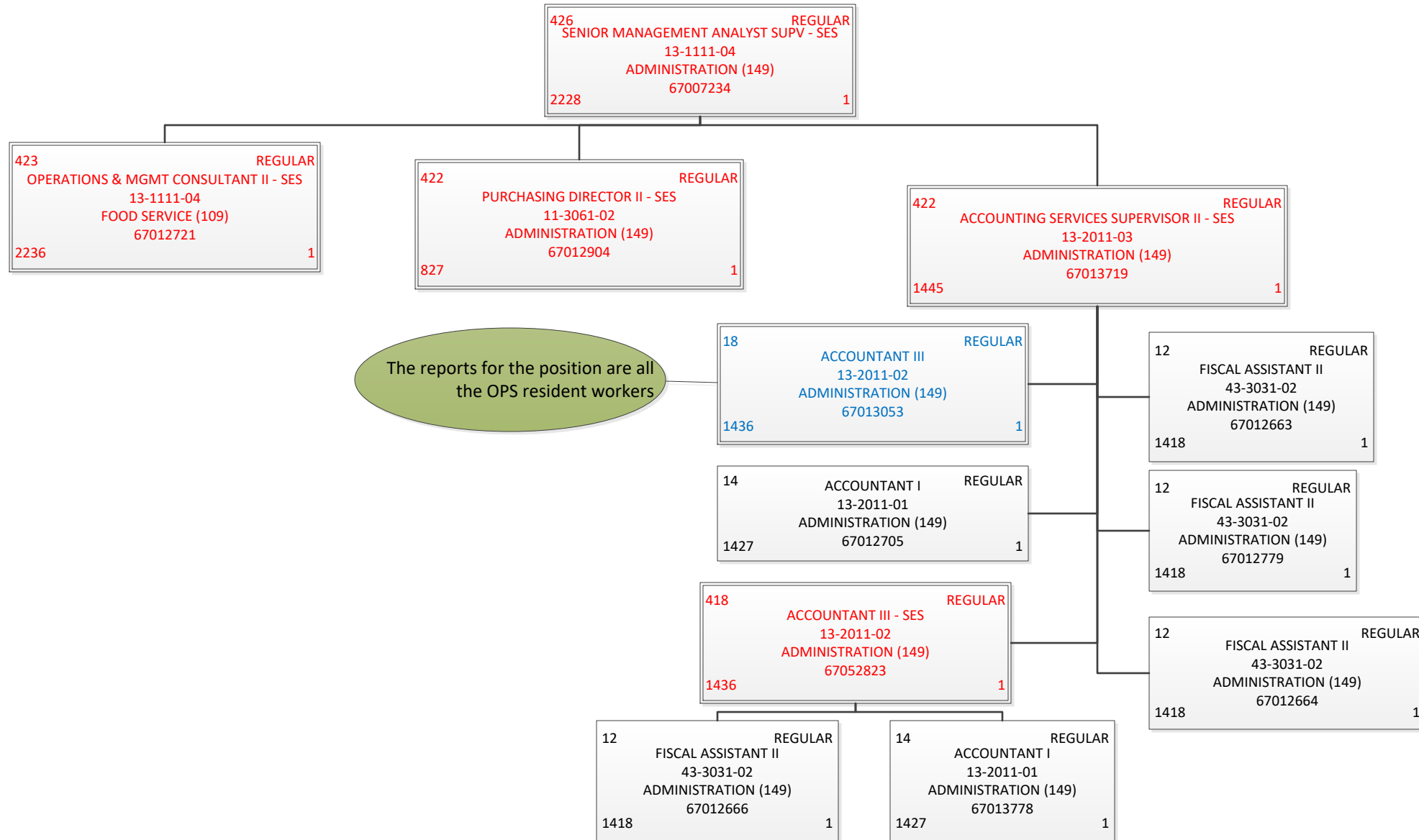
426 SENIOR INFO TECH BUSINESS CONSULTANT-SES
15-1199-04
ADMINISTRATION (149)
67014808
REGULAR
1

424 HUMAN RESOURCE MANAGER - SES
11-3121-02
EMPLOYEE CARE (68)
67013568
REGULAR
1333 1

24 INSPECTOR SPECIALIST
13-1041-04
EMPLOYEE CARE (68)
67016421
REGULAR
2240 1

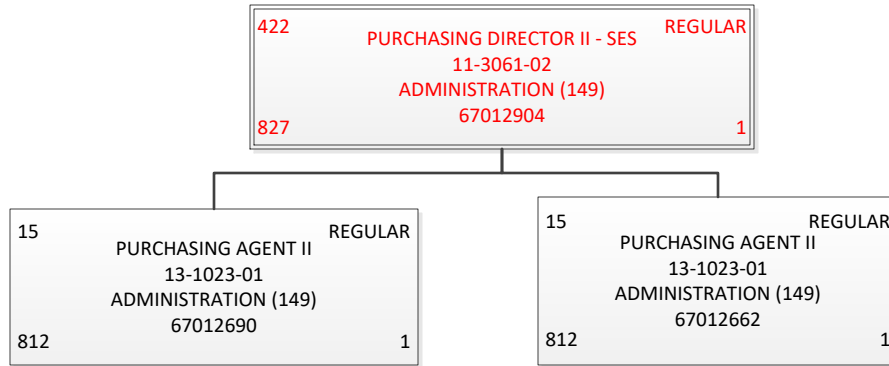
Accounting

February 2021



Purchasing

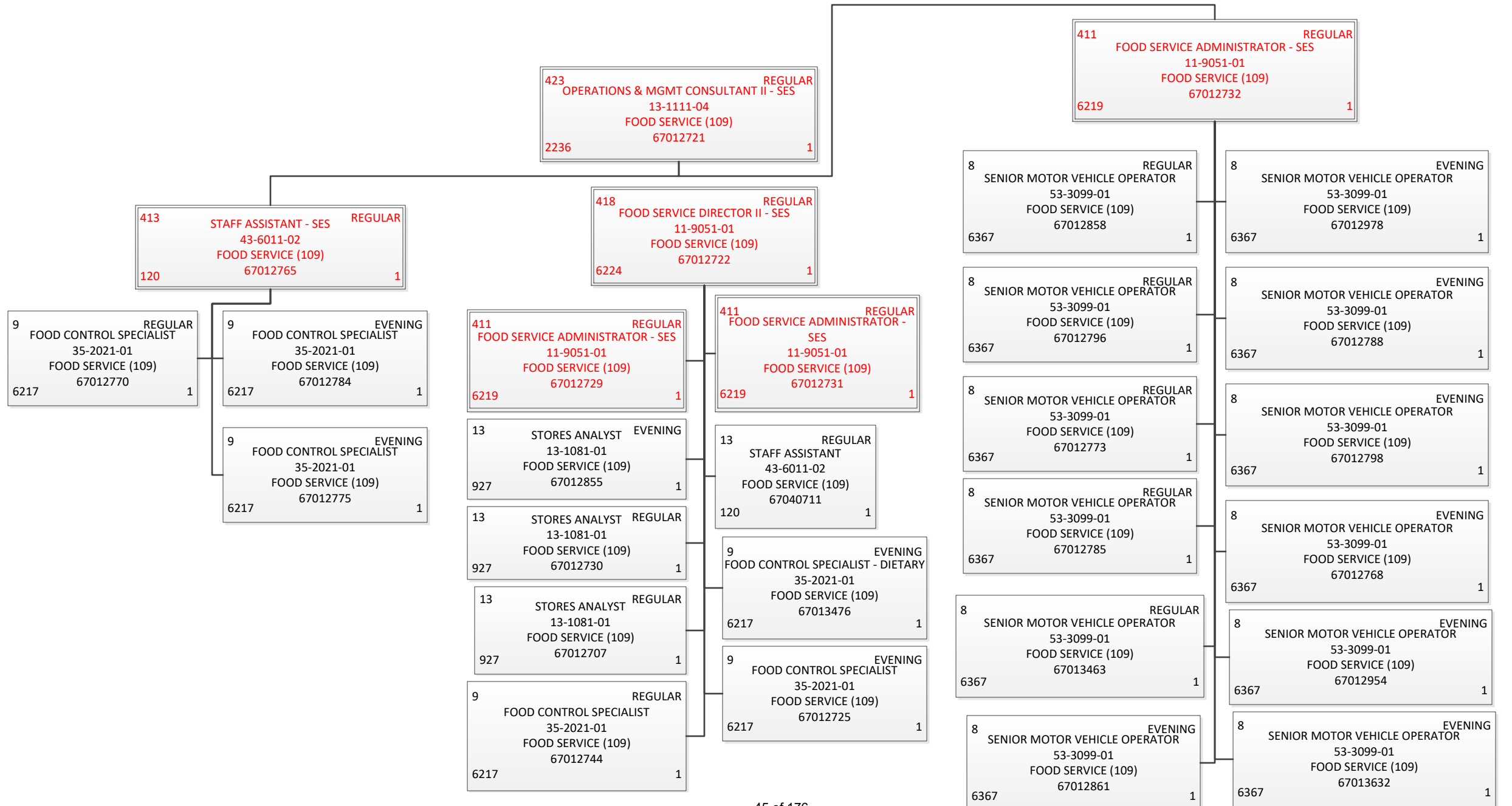
February 2021



Food Service

April 2021

Food Services
Interdepartment #6201010500
of Positions/FTE: 27/27.0



Food Service

April 2021

Food Services
Interdepartment #6201010510
of Positions/FTE: 28/28.0

418 REGULAR
FOOD SERVICE DIRECTOR II - SES
11-9051-01
FOOD SERVICE (109)
67012722
6224 1

411 REGULAR
FOOD SERVICE ADMINISTRATOR - SES
11-9051-01
FOOD SERVICE (109)
67012729
6219 1

411 REGULAR
FOOD SERVICE ADMINISTRATOR - SES
11-9051-01
FOOD SERVICE (109)
67012731
6219 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67013769
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012761
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012748
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67013057
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67036083
6217 1

9 EVENING
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012863
6217 1

9 EVENING
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012749
6217 1

9 EVENING
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67013684
6217 1

9 EVENING
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67039636
6217 1

9 EVENING
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012781
6217 1

9 EVENING
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67016478
6217 1

9 EVENING
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012797
6217 1

9 EVENING
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67016666
6217 1

9 EVENING
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012736
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67013267
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012774
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012756
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012737
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012750
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012783
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012763
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012745
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012741
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012757
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012772
6217 1

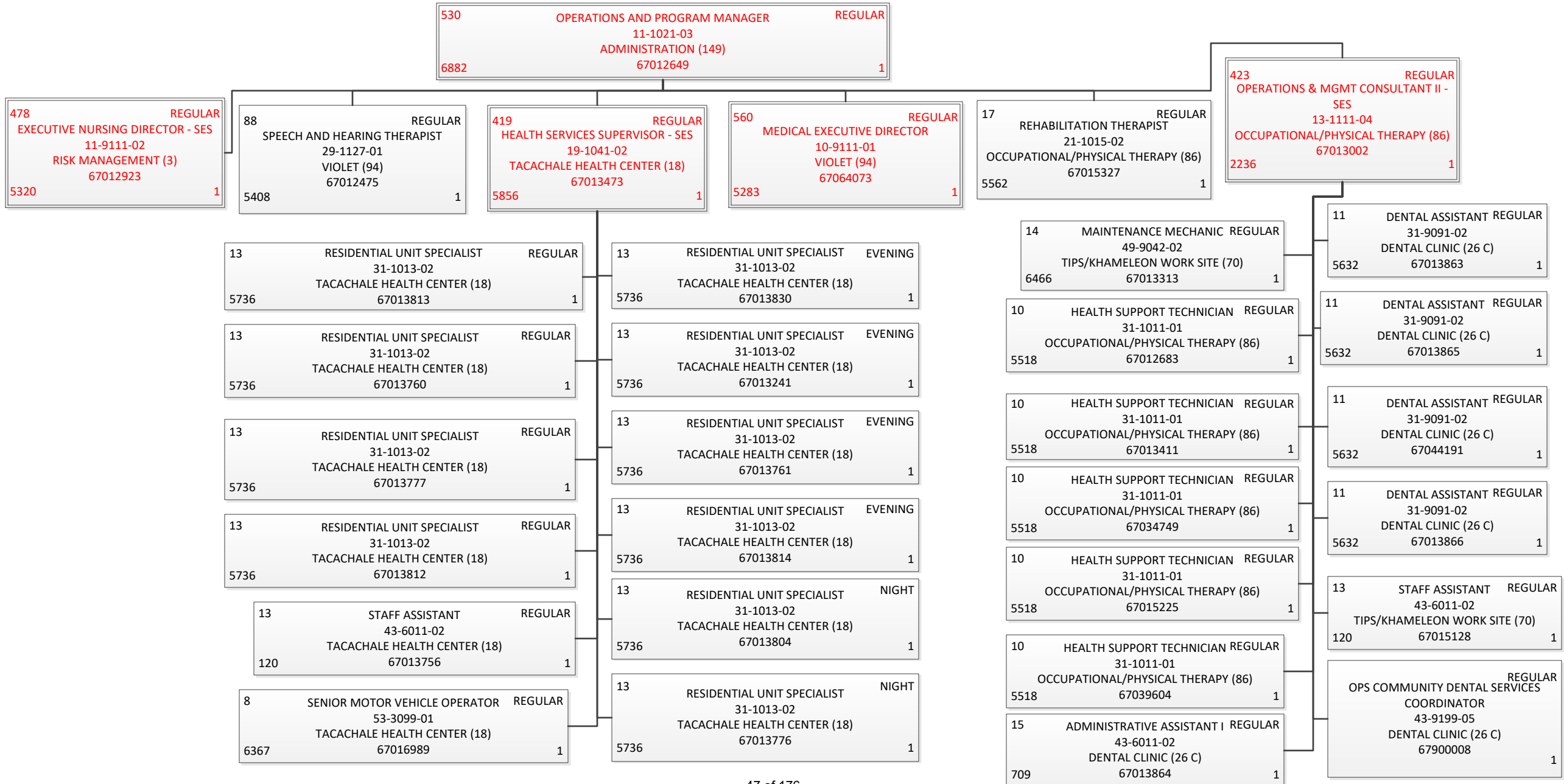
9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012782
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67016670
6217 1

9 REGULAR
FOOD CONTROL SPECIALIST
35-2021-01
FOOD SERVICE (109)
67012795
6217 1

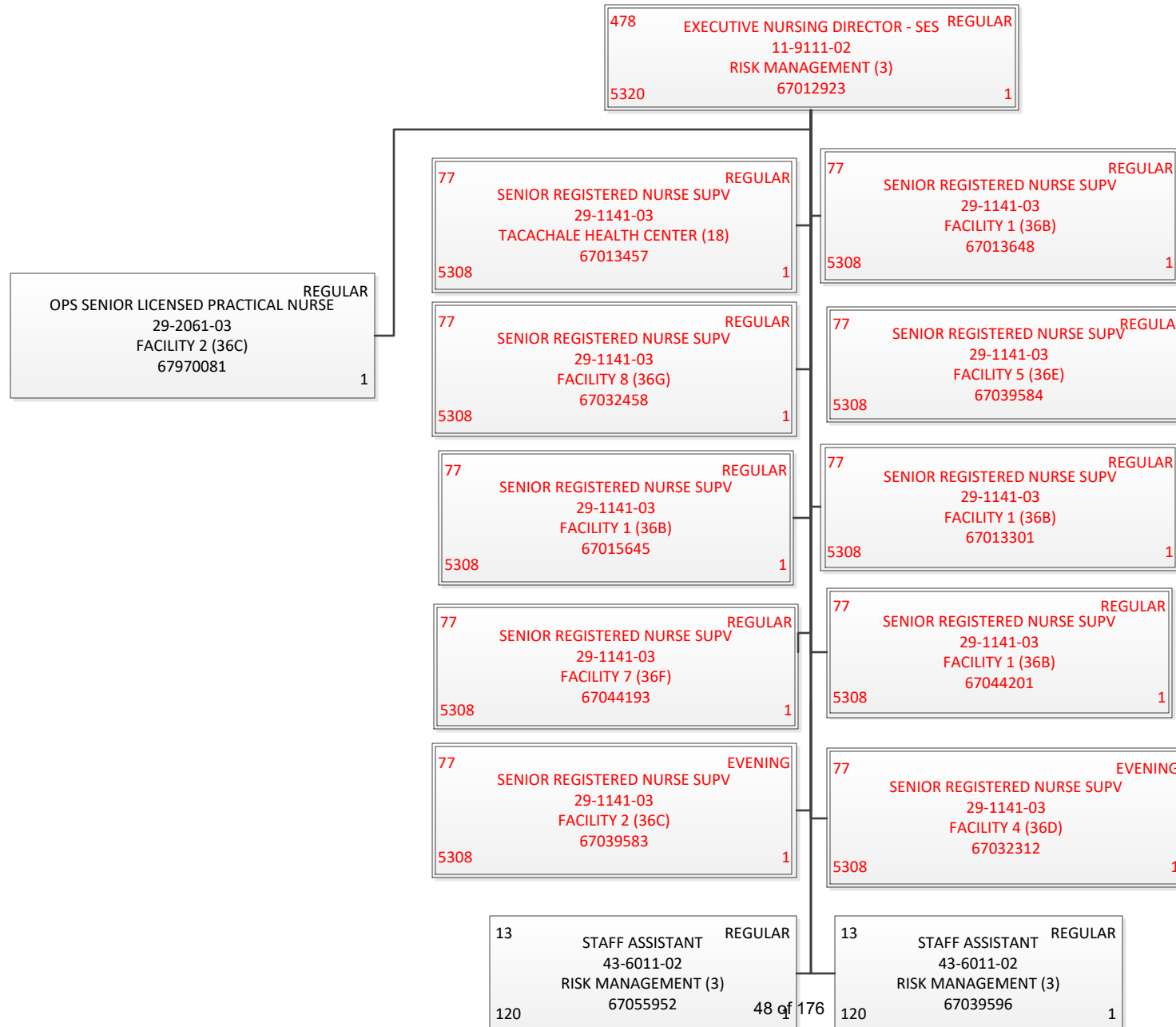
Administration Clinical Services Division

February 2021



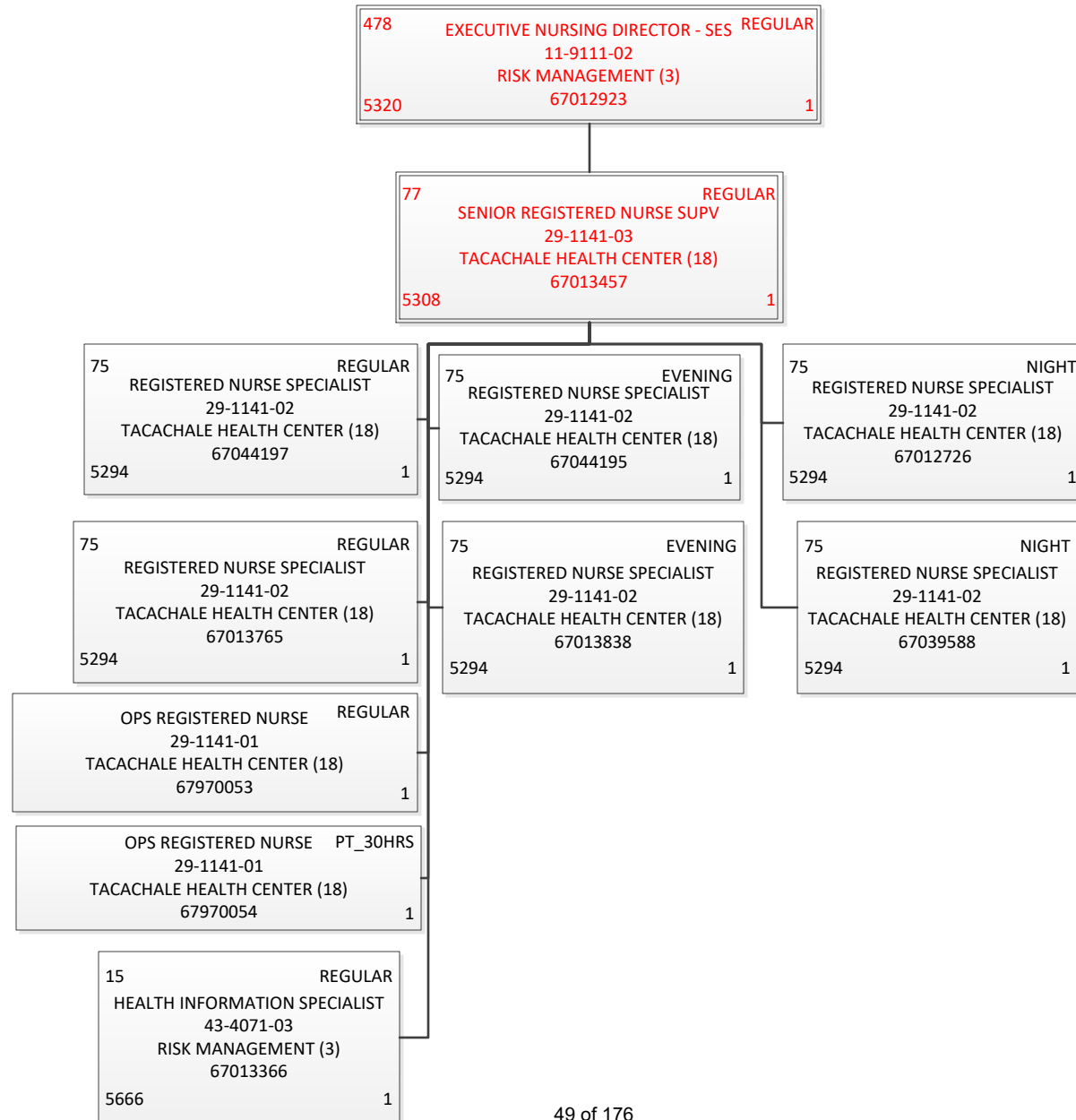
Administration Nursing Services

February 2021



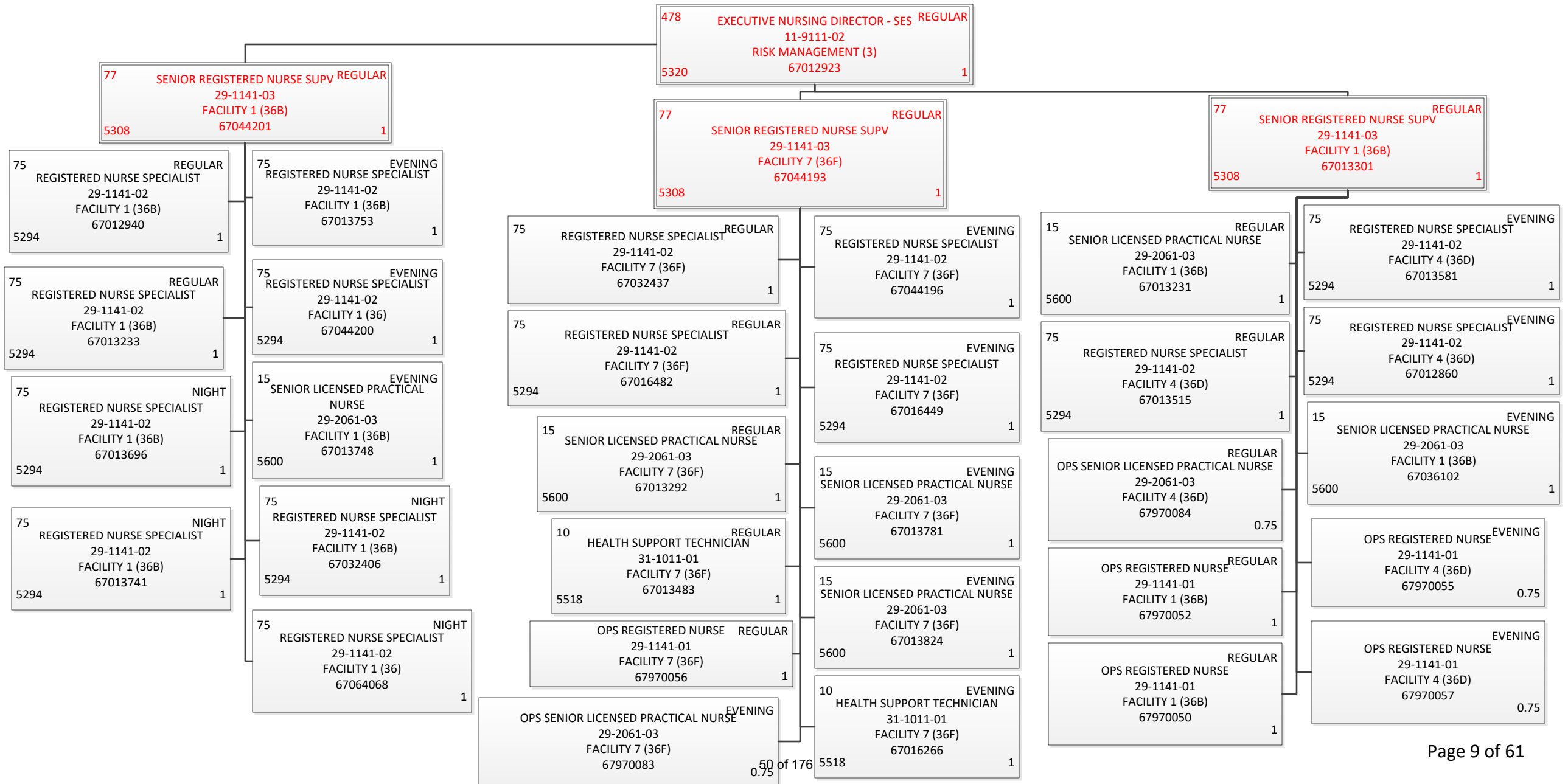
Nursing Services Tacachale Health Center (THC)

February 2021



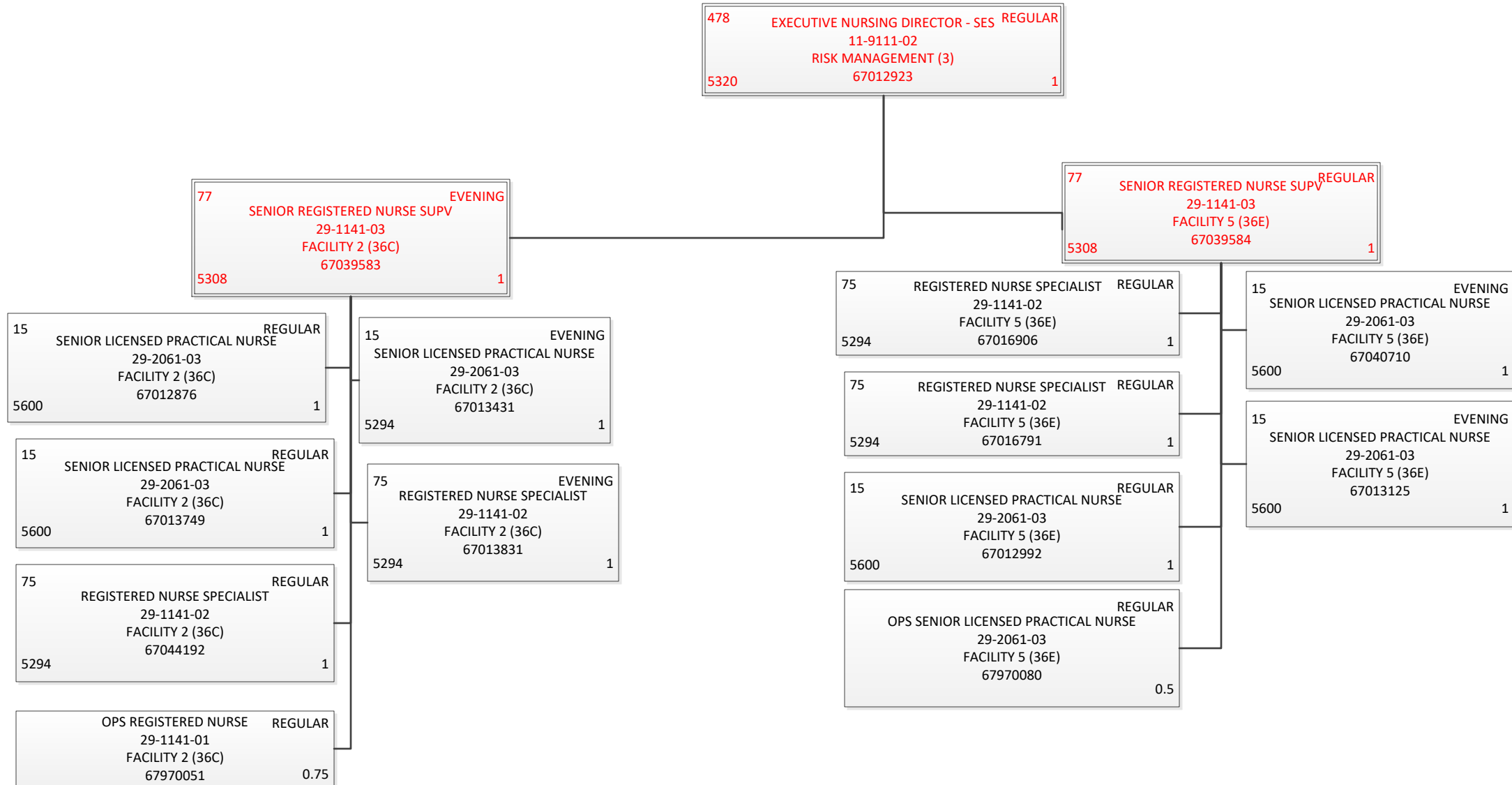
Nursing Services Facility 1&7

February 2021



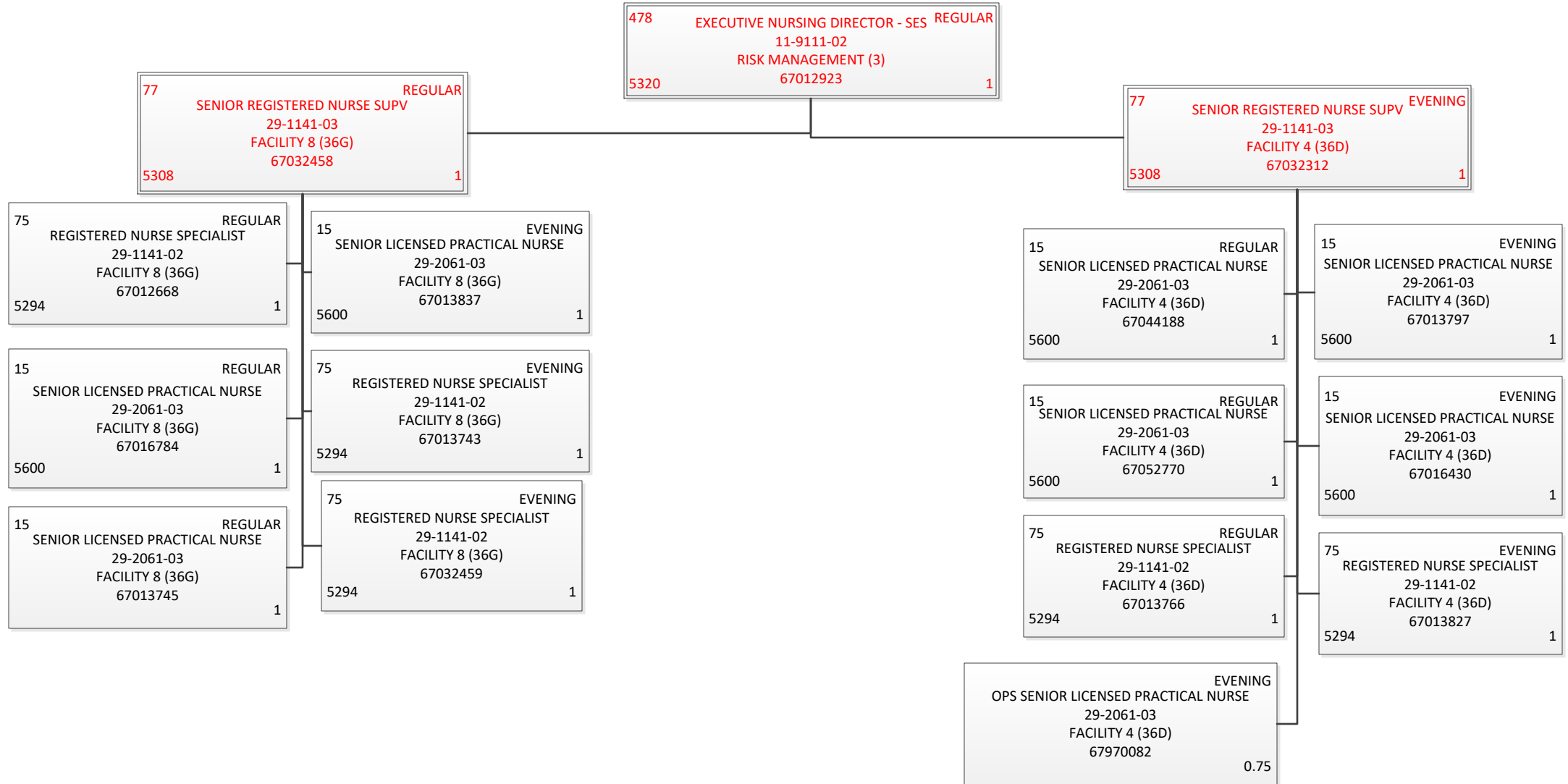
Nursing Services Facility 2 & 5

February 2021



Nursing Services Facility 4 & 8

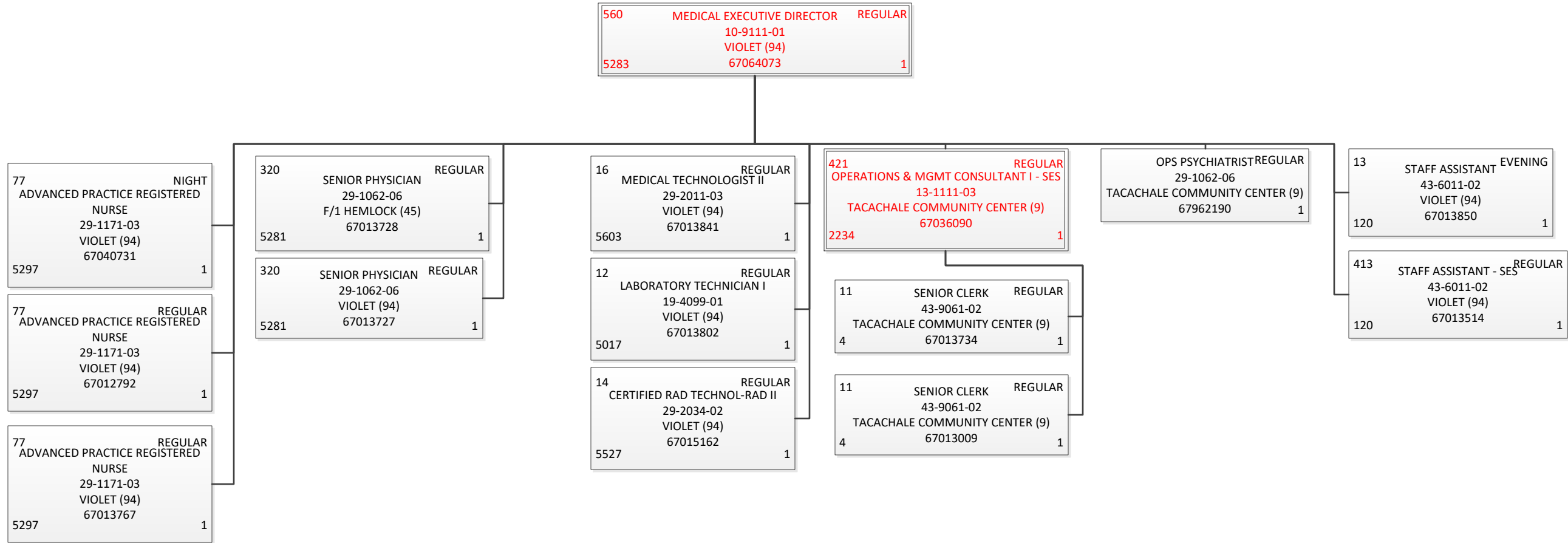
February 2021



Medical Services

February 2021

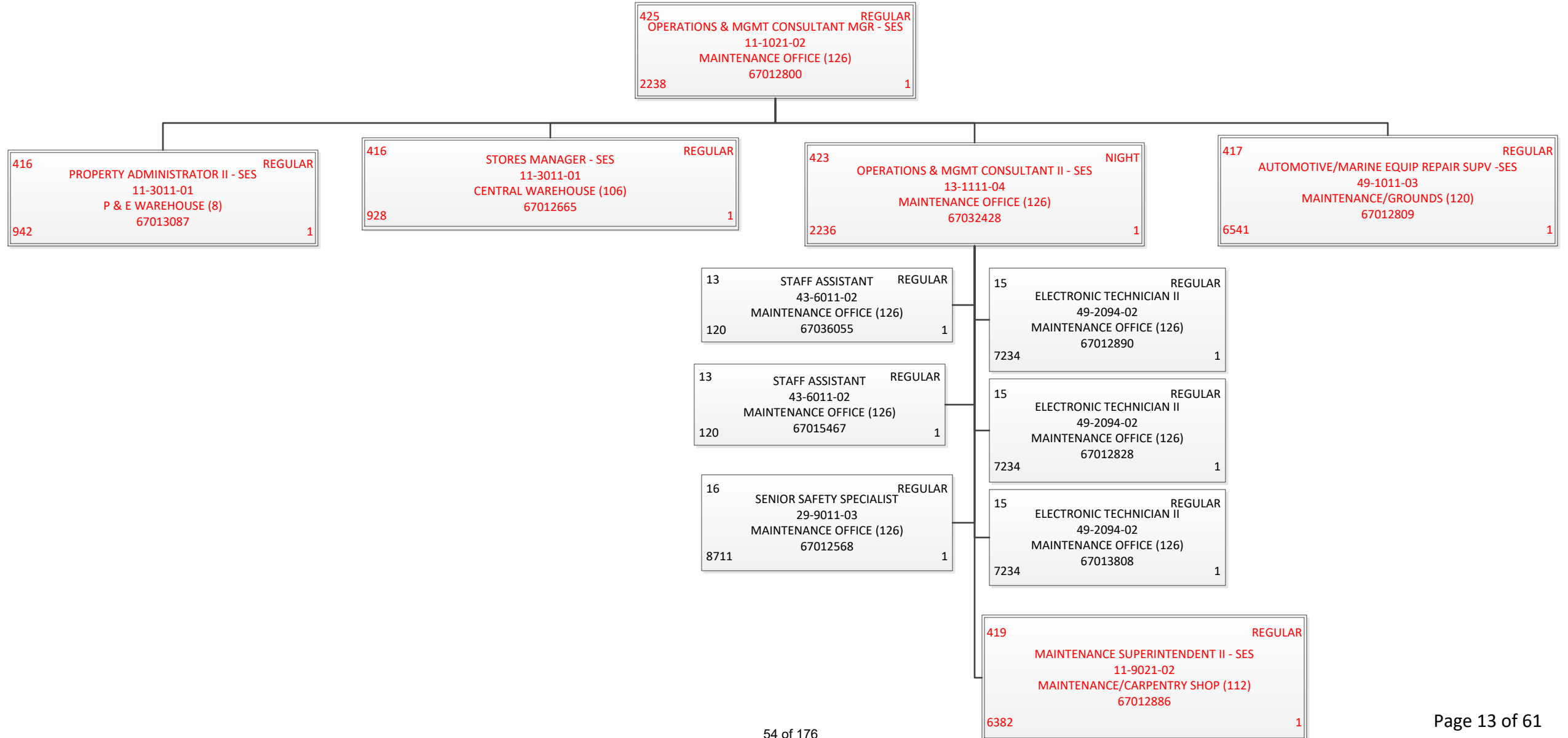
Medical Services
Interdepartment #6203000000
of Positions/FTE: 13/13.0
OPS 1



Maintenance – Physical Plant Division

February 2021

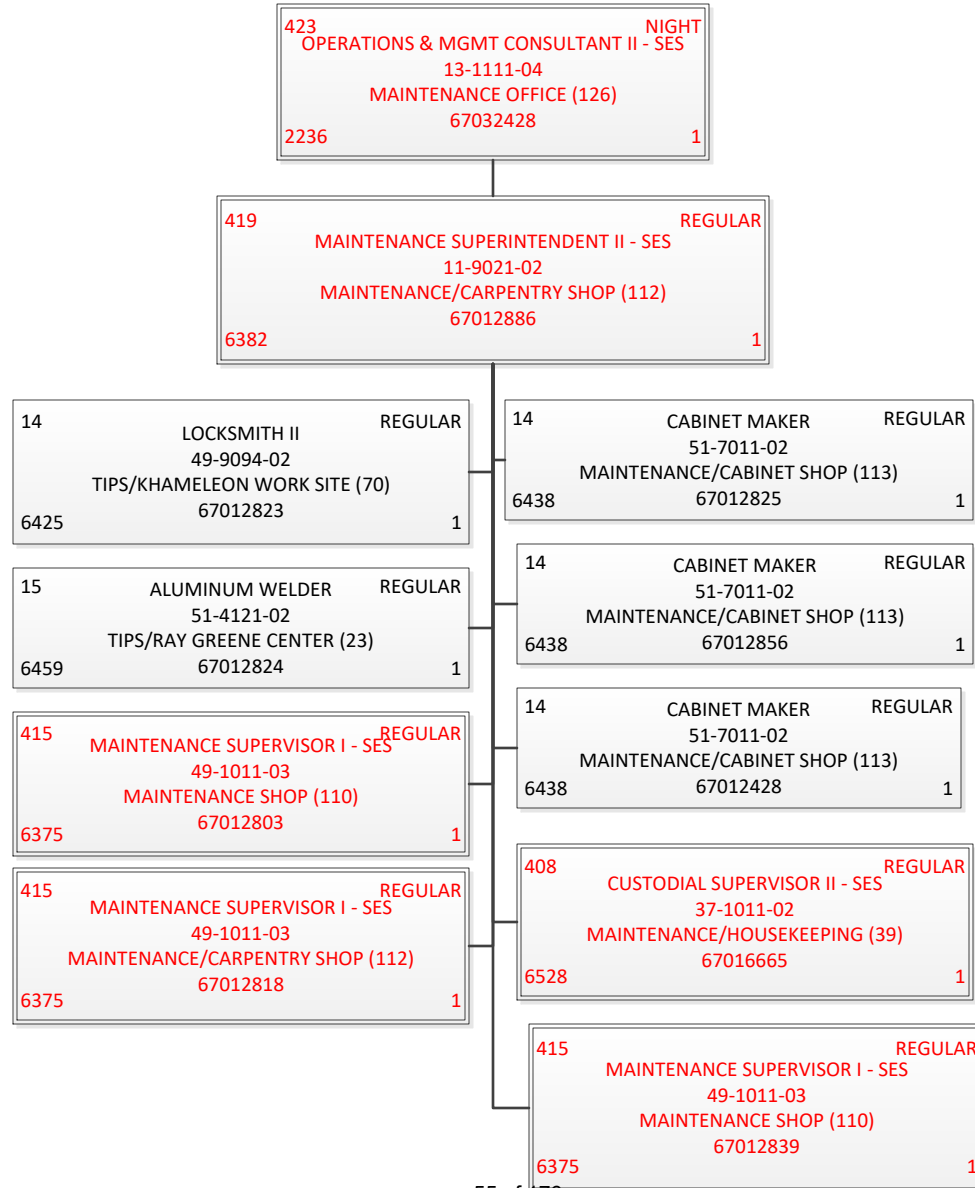
Maintenance
Interdepartment #6201070000
of Positions/FTE: 11/11.0



Maintenance – Physical Plant Division

February 2021

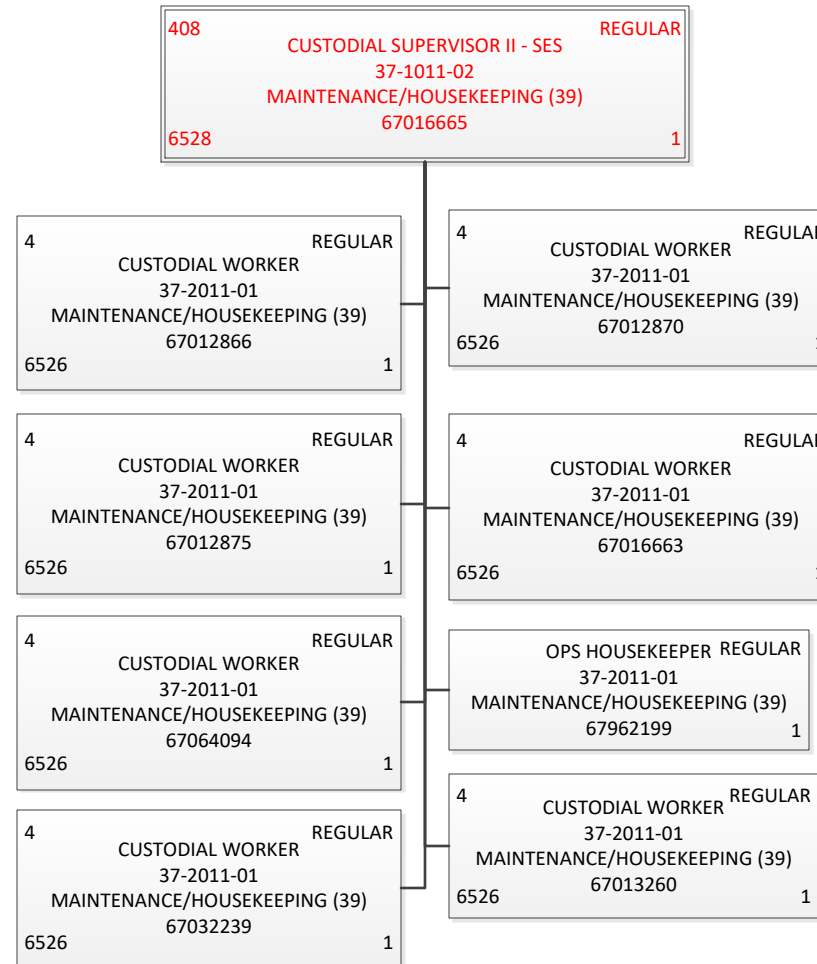
Maintenance
Interdepartment #6201070000
of Positions/FTE: 9/9.0



Maintenance – Housekeeping

July 2021

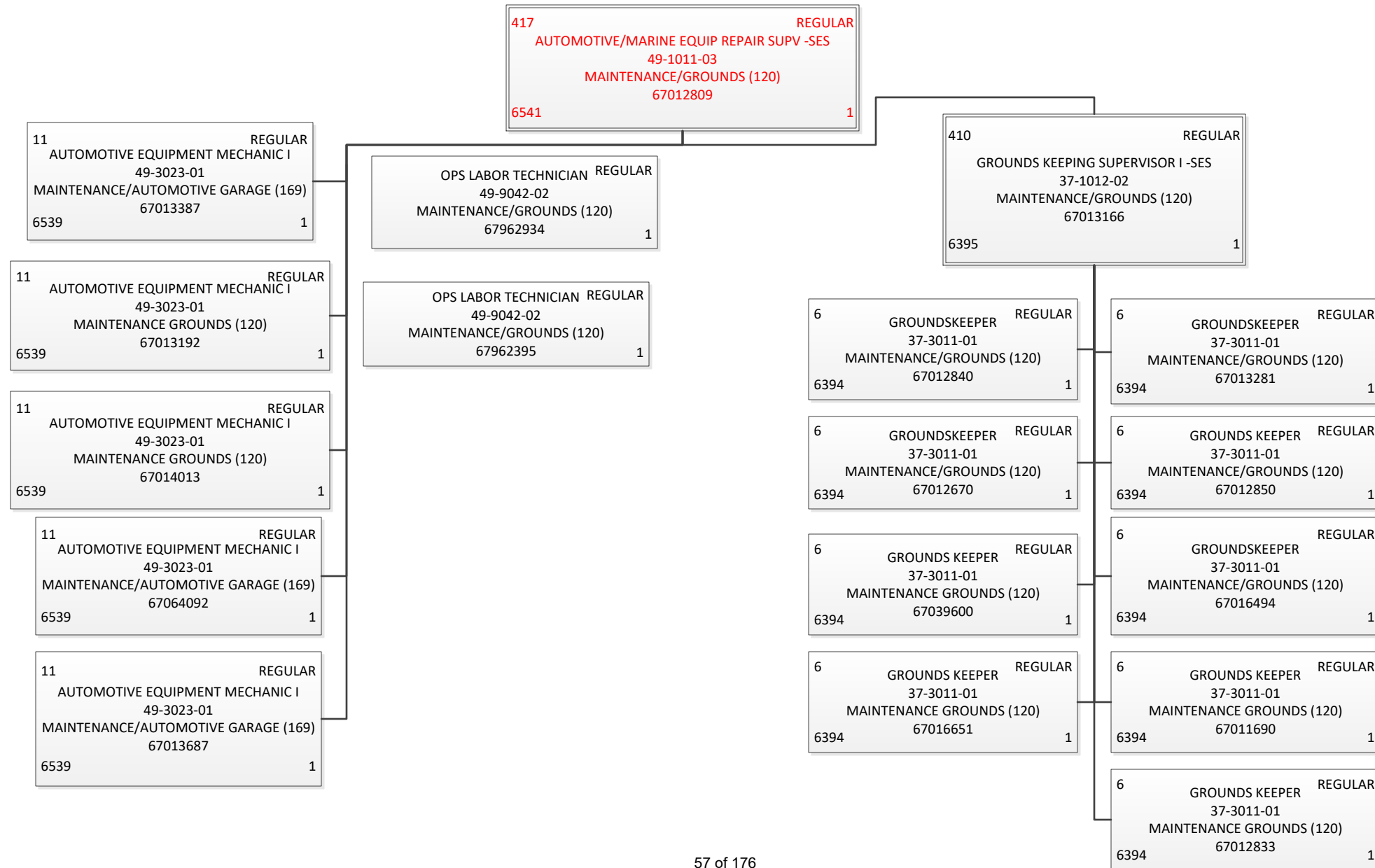
Maintenance
Interdepartment #6201070100
of Positions/FTE: 7/7.0
OPS 1.0



Maintenance – Groundskeeping

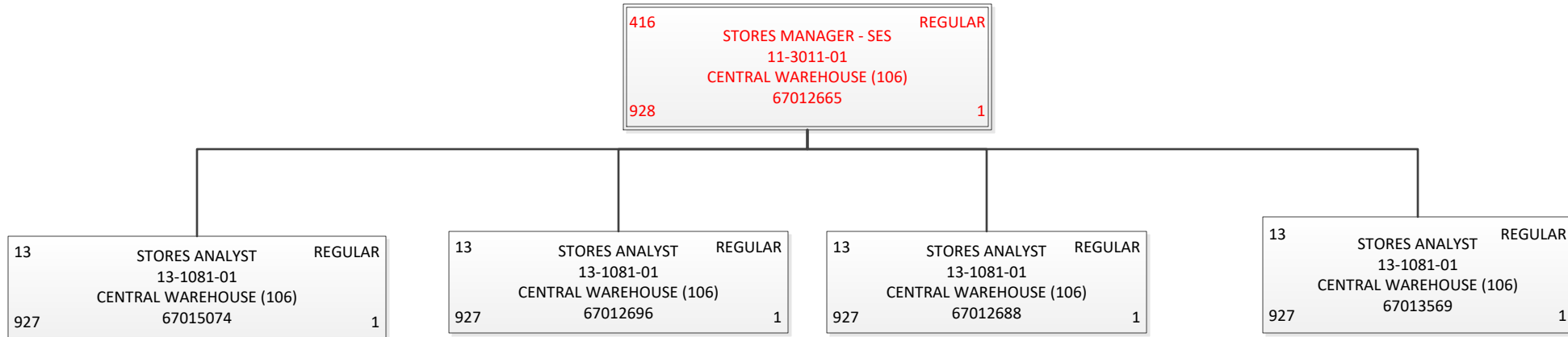
August 2021

Groundskeeping
Interdepartment #6201070200
of Positions/FTE: 15/15.0
OPS 2



Maintenance – Warehouse

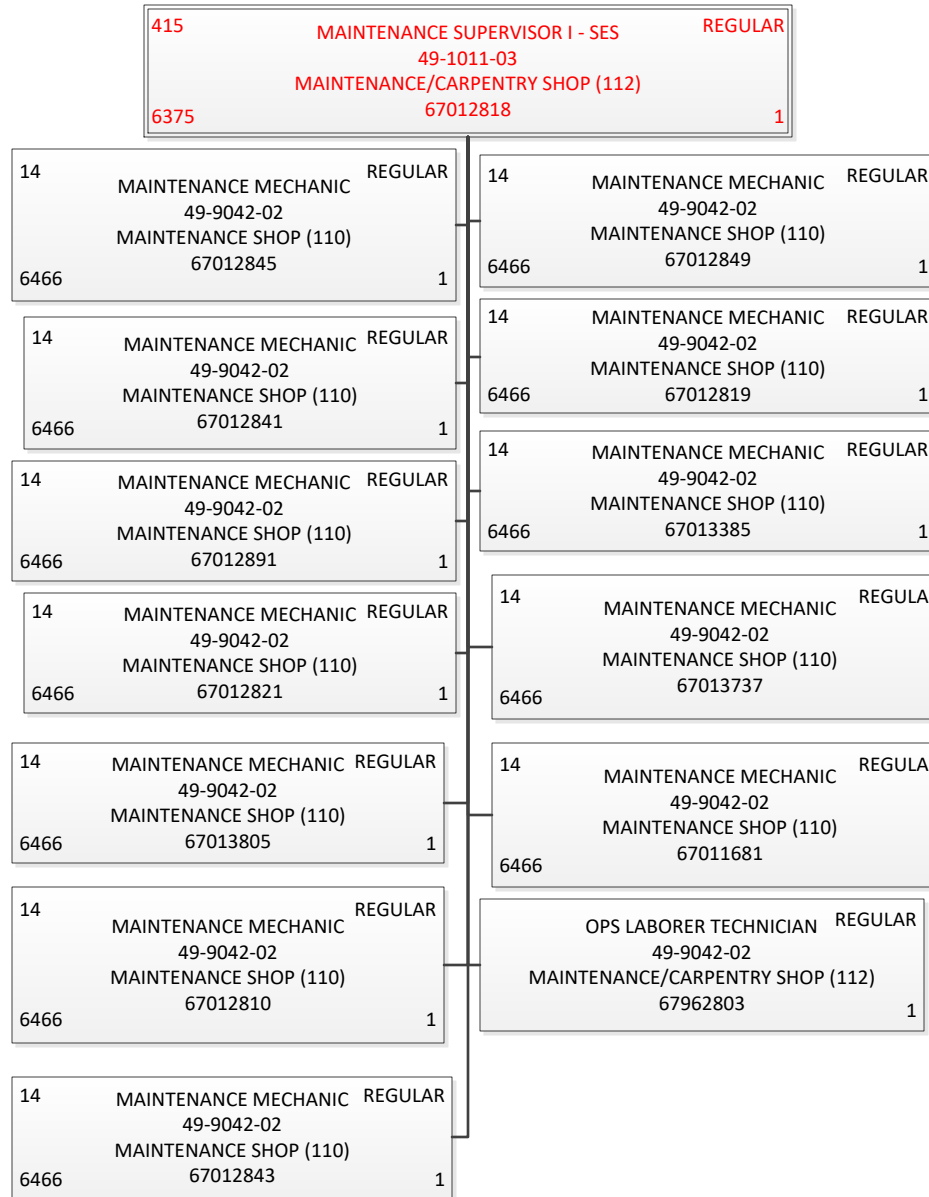
February 2021



Maintenance – Carpentry & Painting

April 2021

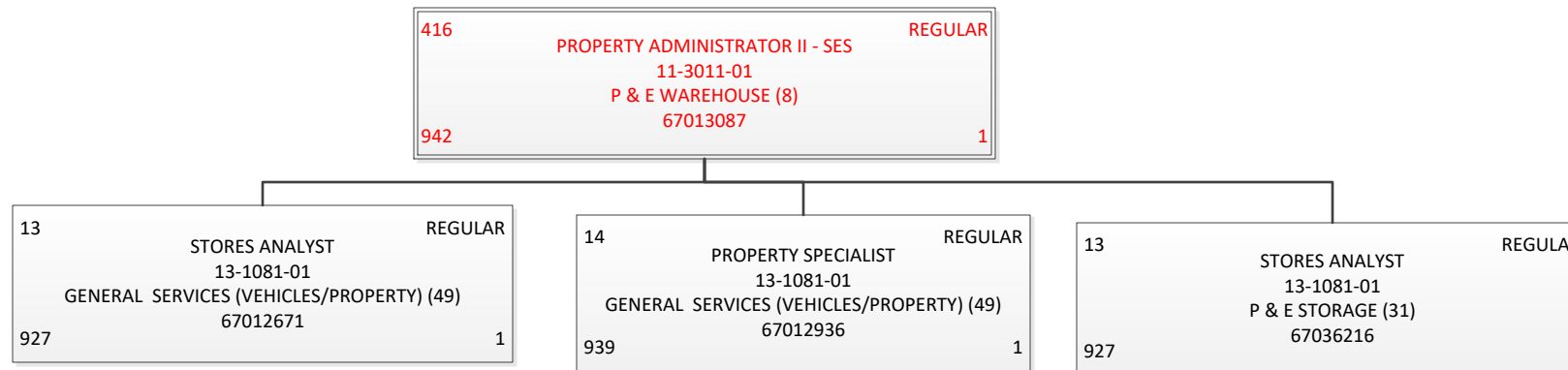
Carpentry & Painting
Interdepartment #6201070310
of Positions/FTE: 12/12.0
OPS 1



Maintenance – General Services

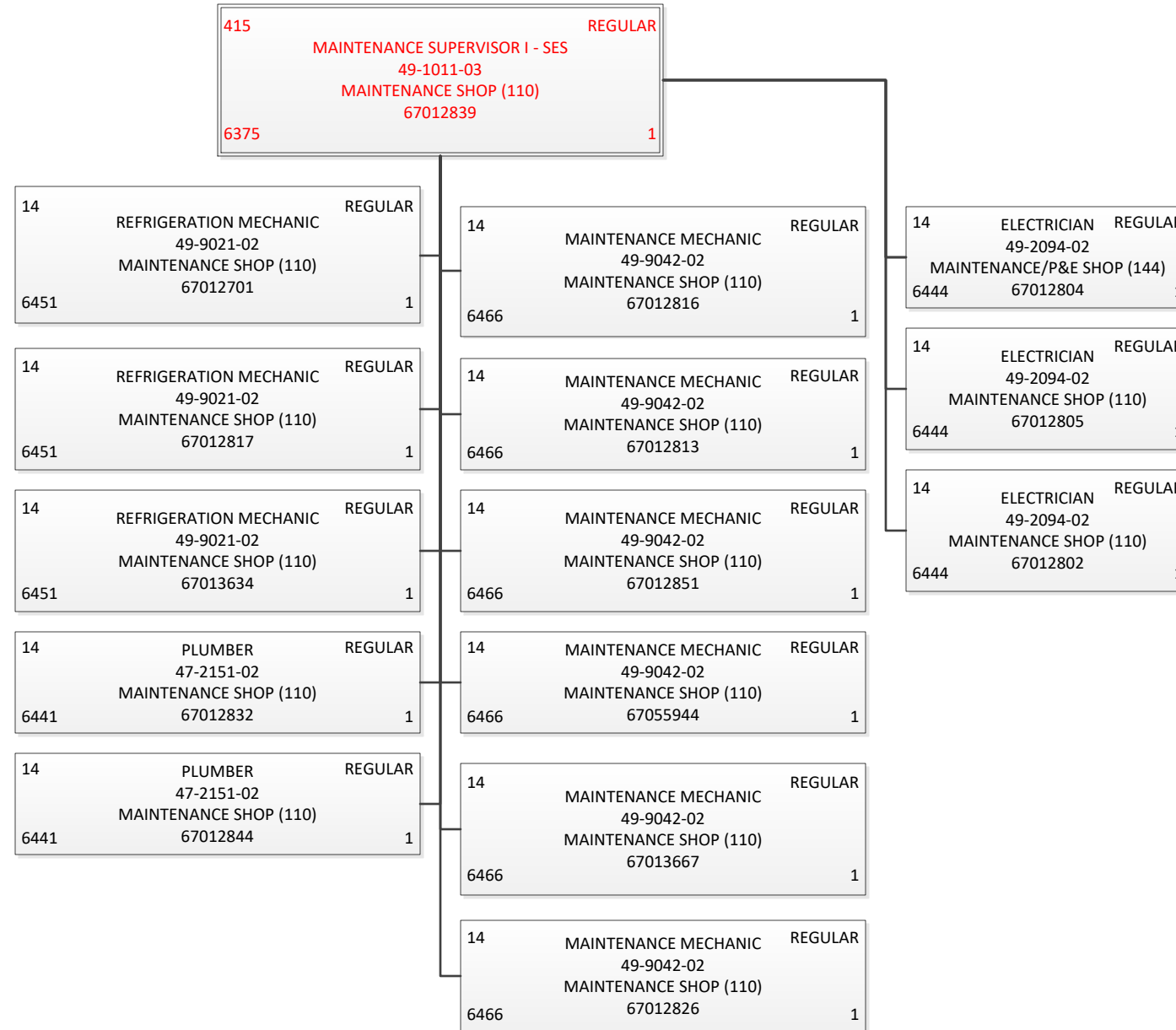
February 2021

General Services
Interdepartment #6201010200
of Positions/FTE: 3/3.0



Maintenance – AHCA Support Team Carpentry & Painting

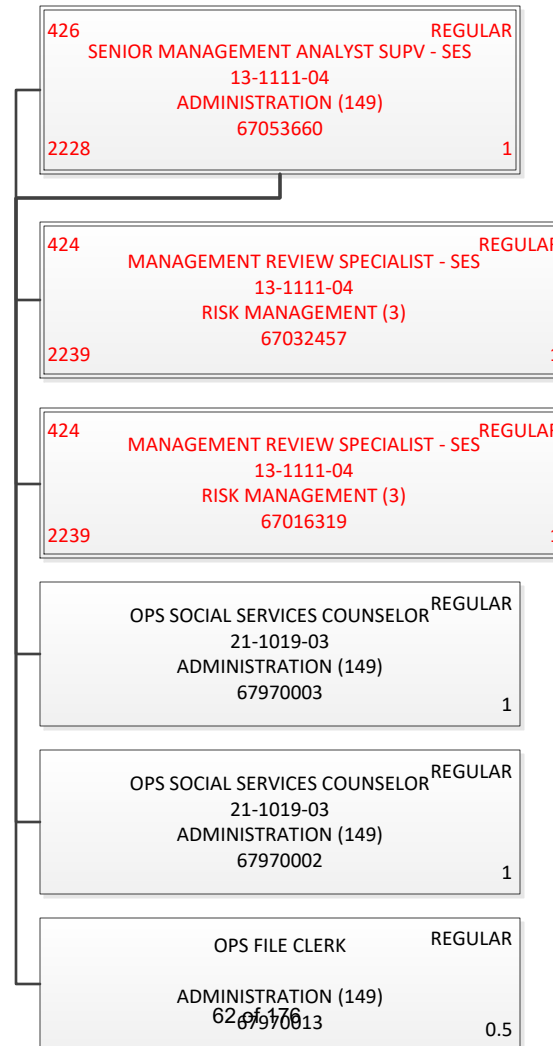
April 2021



Administration Quality Services Division

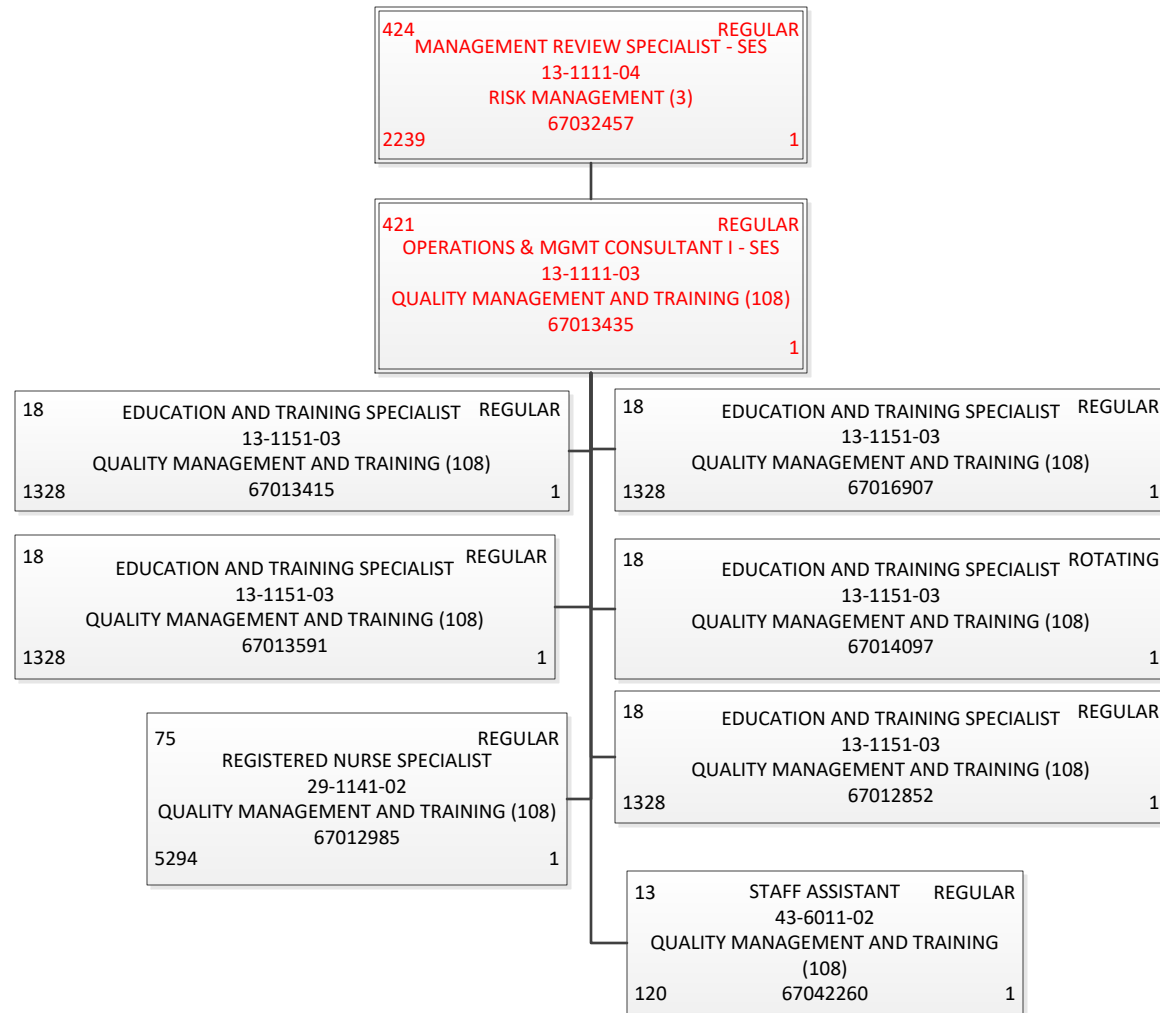
March 2021

Quality
Interdepartment #6202100000
of Positions/FTE: 2/2
OPS 3



Quality Management & Training

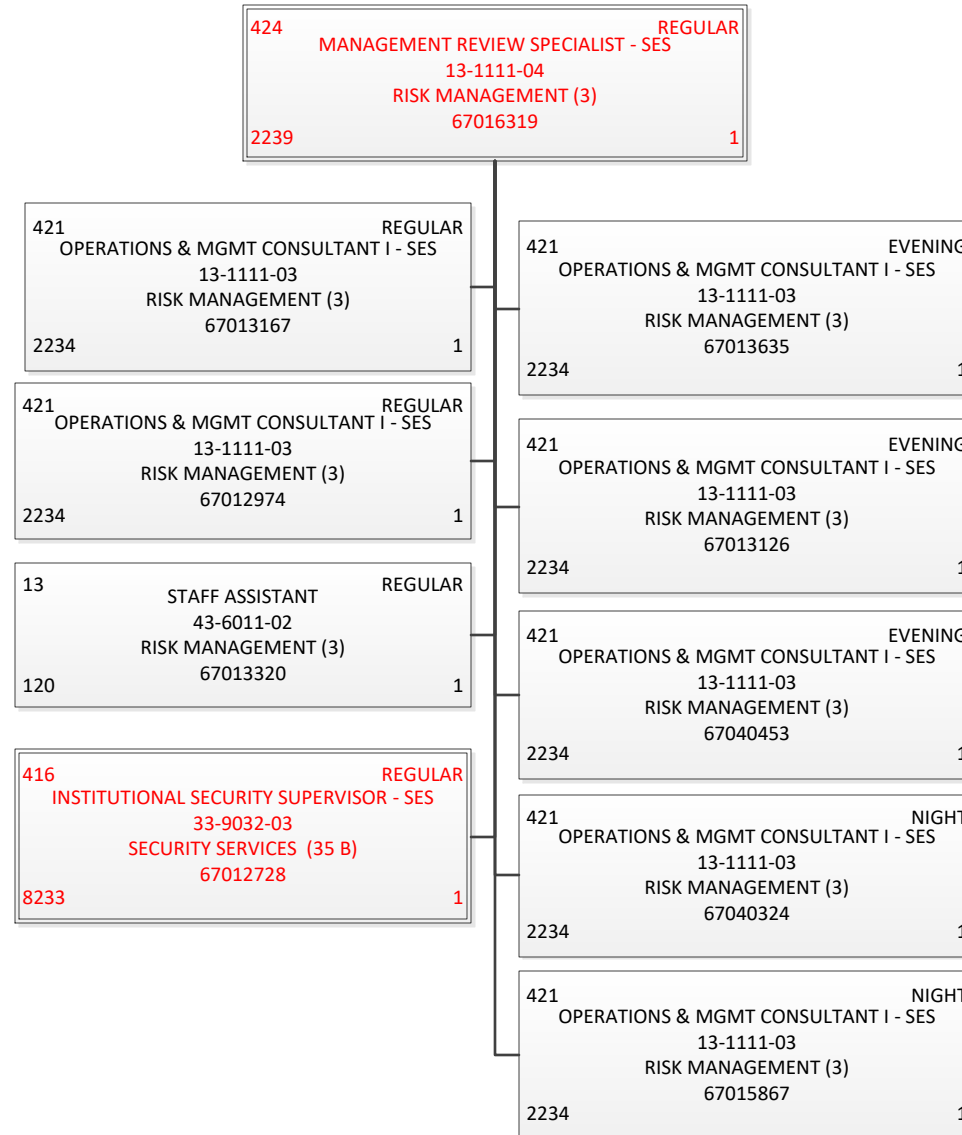
February 2021



Center Monitoring

February 2021

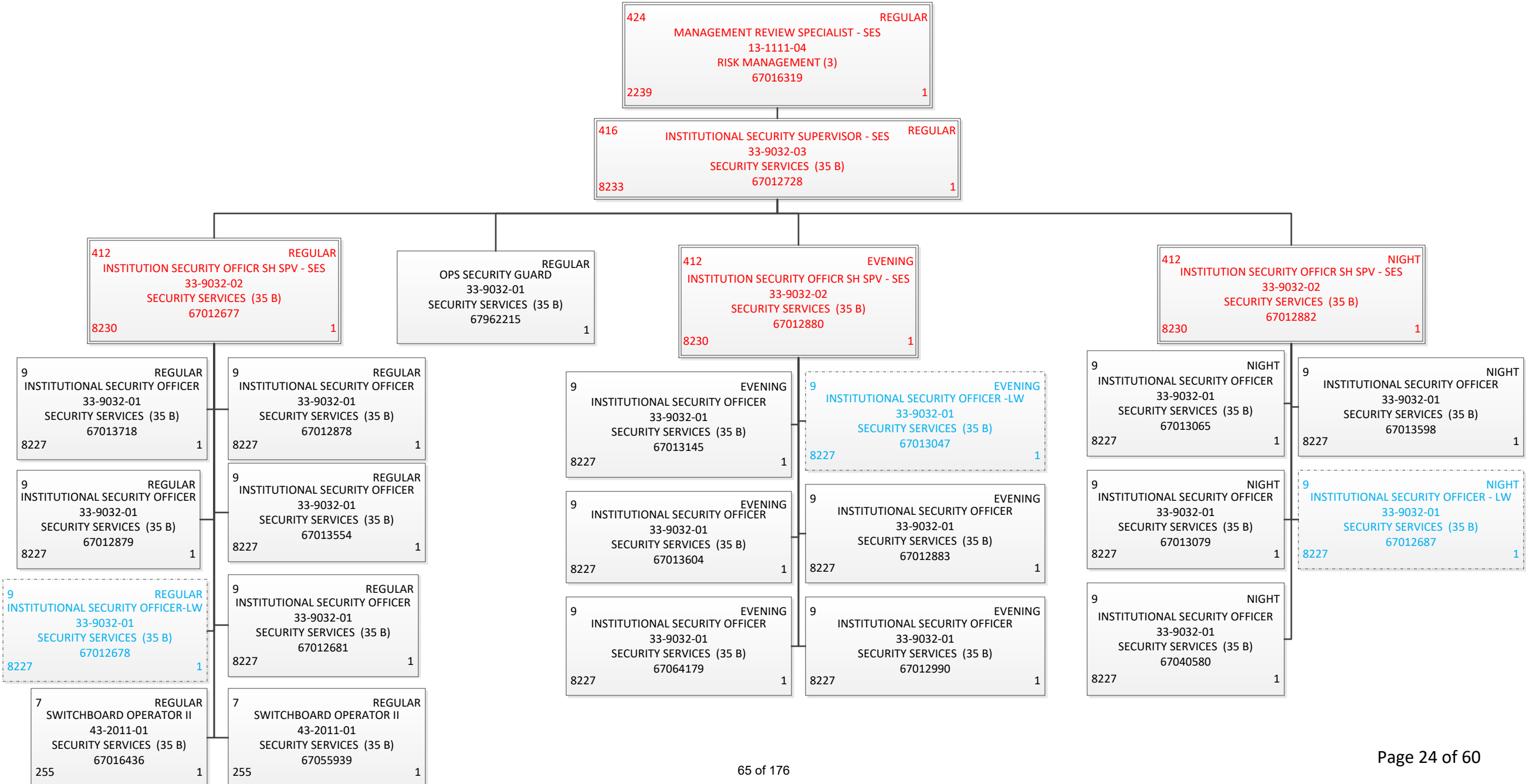
Administration
Interdepartment #6202000000
of Positions/FTE: 9/9.0



Security Services

February 2021

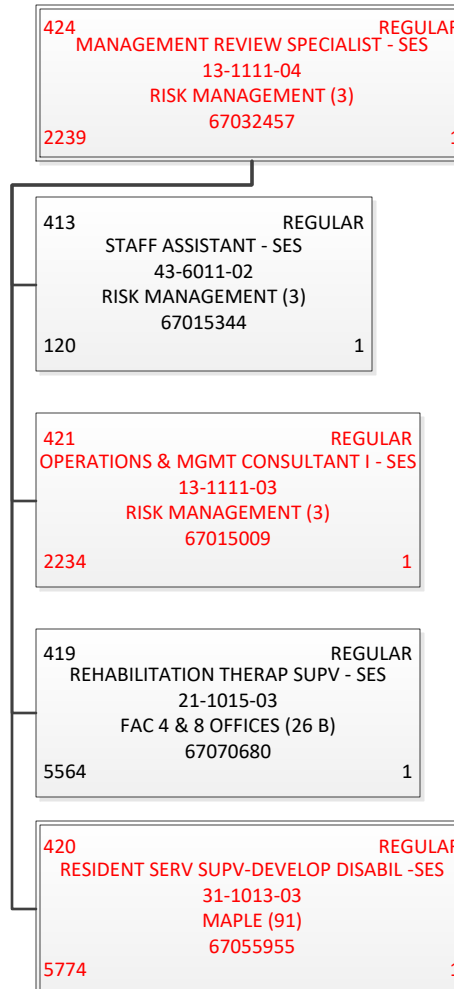
Security
Interdepartment #6201050000
of Positions/FTE: 22/22.0
OPS 1



Risk Management

February 2021

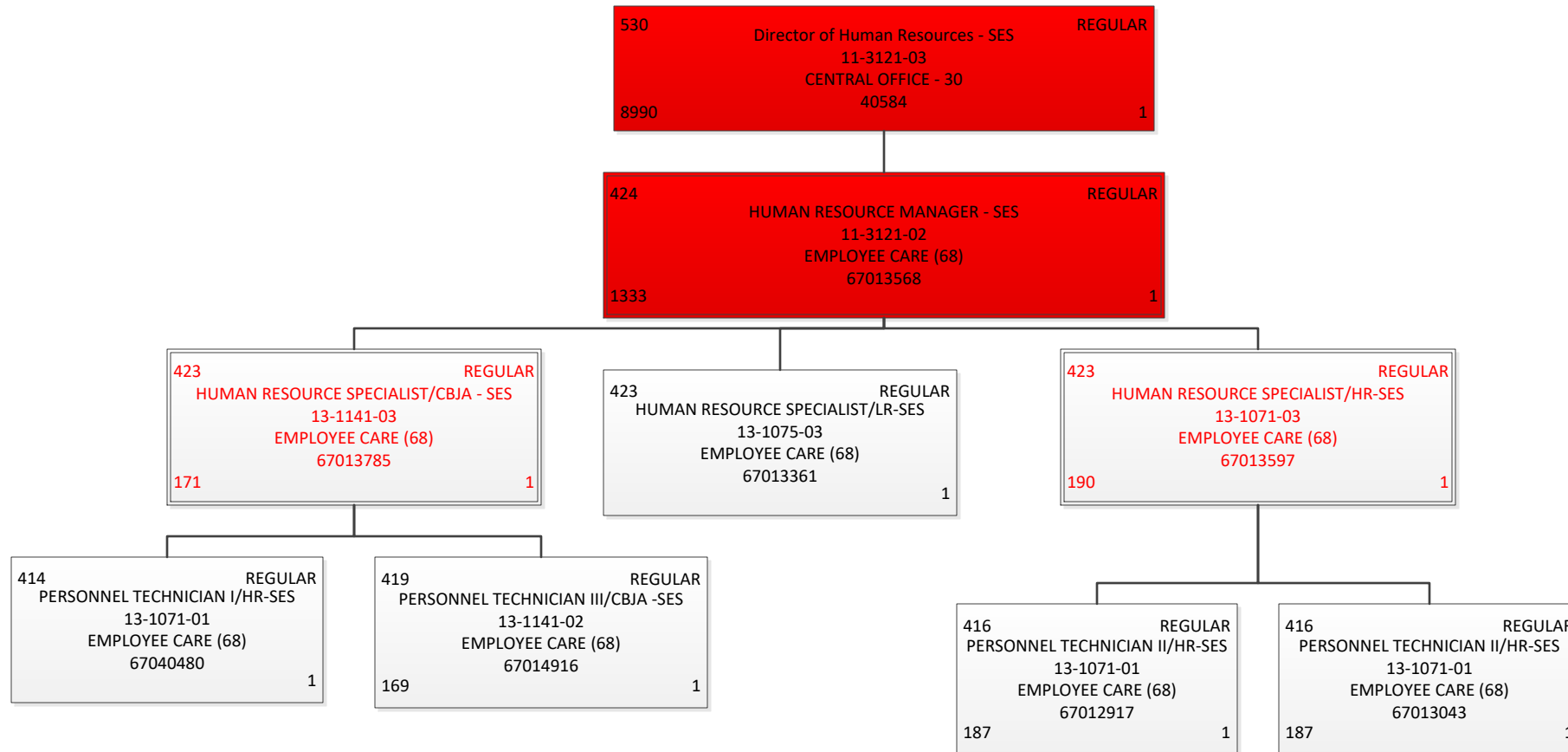
Center Administration
Interdepartment #6200000000
of Positions/FTE: 4/4.0



Human Resources Division

February 2021

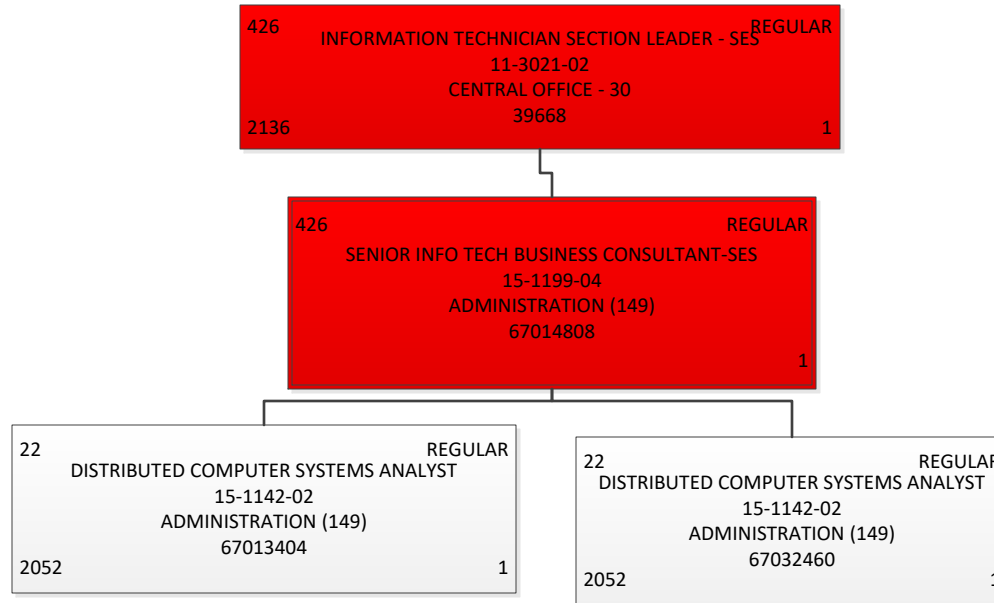
Human Resources
Interdepartment #6201020000
of Positions/FTE: 7/7.0



Information Technology

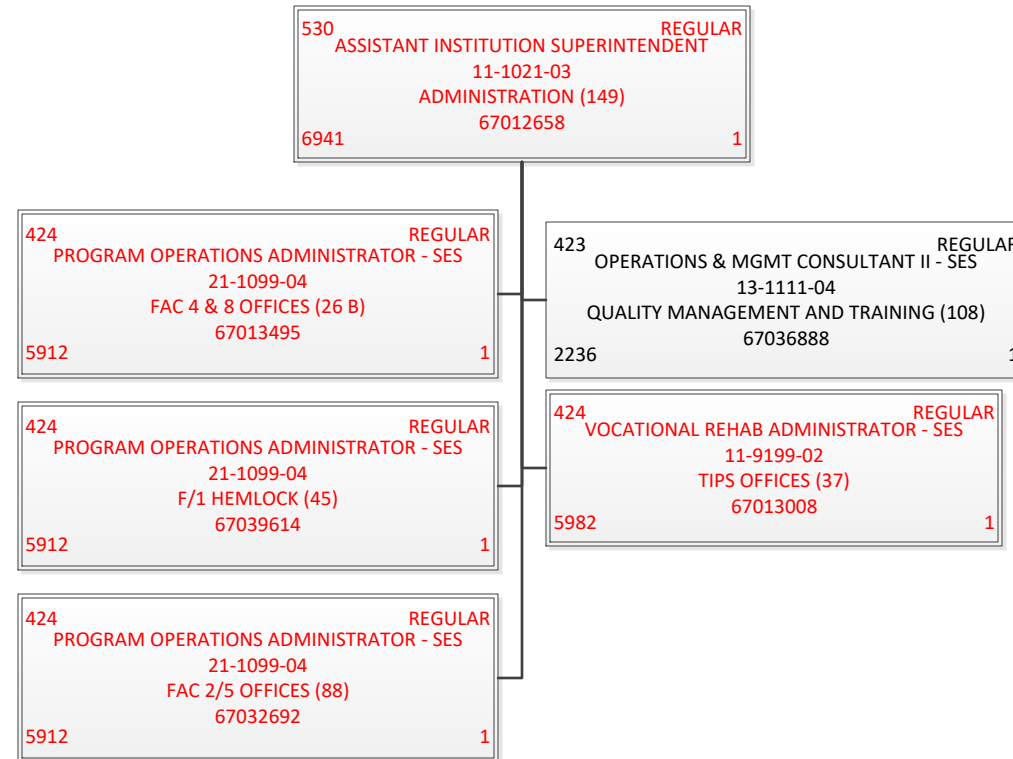
February 2021

Information Technology
Interdepartment #6201110000
of Positions/FTE: 3/3.0



Administration Residential Services Division

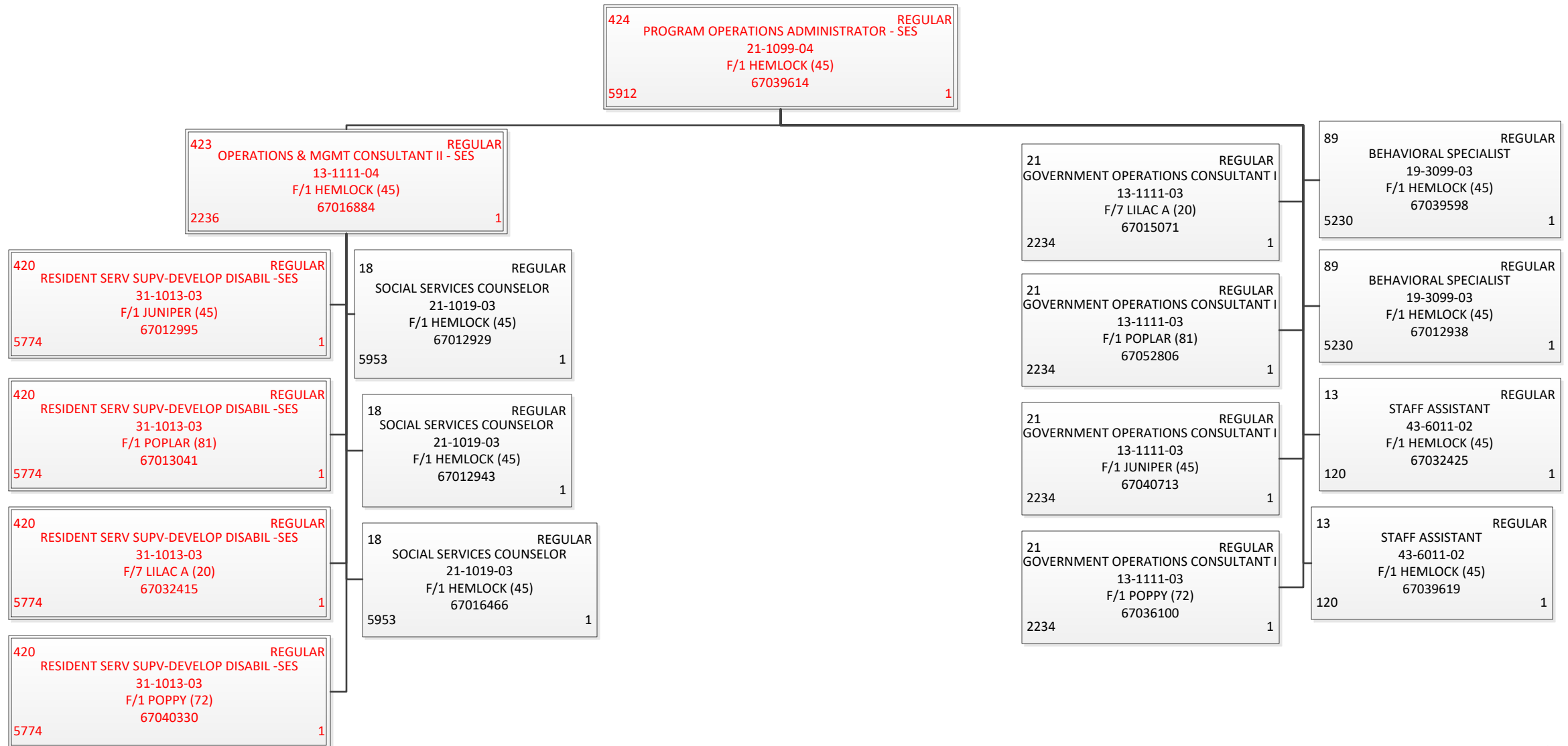
March 2021



Administration Facility 1 & 7

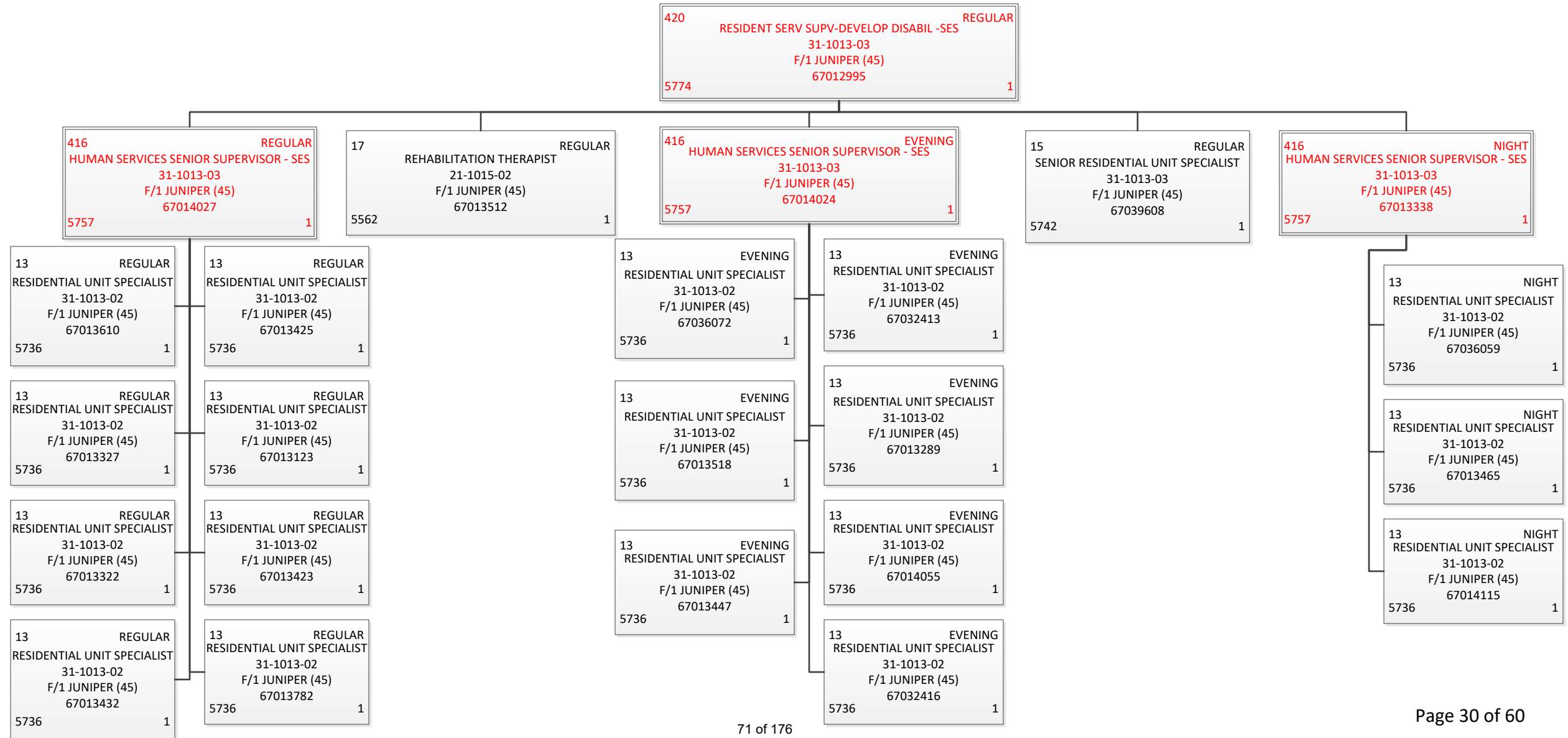
February 2021

Fac 1& 7 Administration
Interdepartment #6202010000
of Positions/FTE: 16/16.0



Facility 1 - Juniper

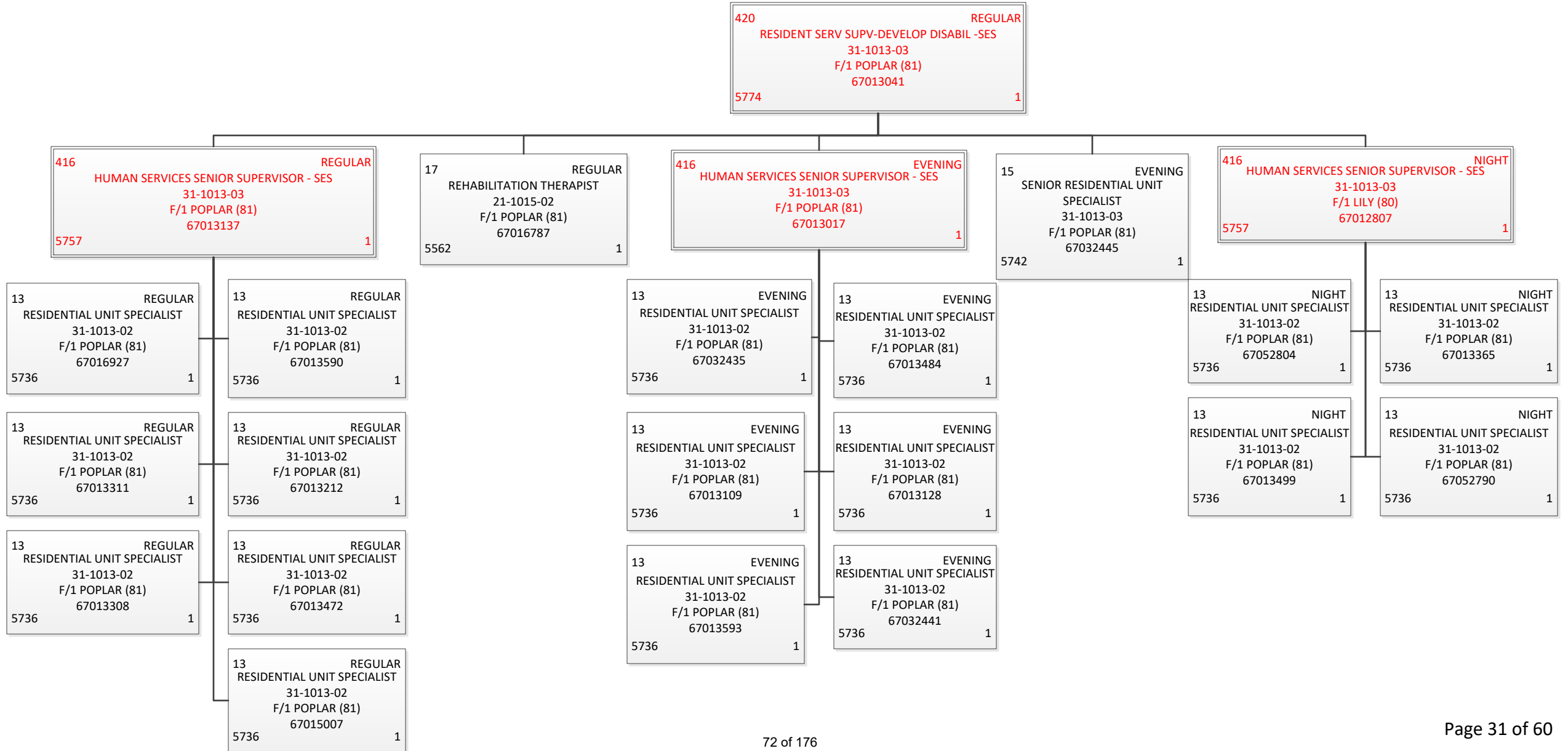
February 2021



Facility 1 - Poplar

February 2021

Poplar
Interdepartment #6202010600
of Positions/FTE: 22/22.0



Facility 1 - Lily

February 2021

Lily
Interdepartment #6202010900
of Positions/FTE: 21/21.0

420 REGULAR
RESIDENT SERV SUPV-DEVELOP DISABIL -SES
31-1013-03
F/1 POPLAR (81)
67013041
5774 1

416 REGULAR
HUMAN SERVICES SENIOR SUPERVISOR - SES
31-1013-03
F/1 LILY (80)
67013408
5757 1

15 REGULAR
SENIOR RESIDENTIAL UNIT SPECIALIST
31-1013-03
F/1 LILY (80)
67013689
5742 1

416 EVENING
HUMAN SERVICES SENIOR SUPERVISOR - SES
31-1013-03
F/1 LILY (80)
67032444
5757 1

17 REGULAR
REHABILITATION THERAPIST
21-1015-02
F/1 LILY (80)
67016414
5562 1

416 NIGHT
HUMAN SERVICES SENIOR SUPERVISOR - SES
31-1013-03
F/1 LILY (80)
67012807
5757 1

13 REGULAR
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67032427
5736 1

13 REGULAR
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67016444
5736 1

13 EVENING
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67016437
5736 1

13 EVENING
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013650
5736 1

13 NIGHT
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67016418
5736 1

13 REGULAR
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013643
5736 1

13 REGULAR
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013069
5736 1

13 EVENING
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013559
5736 1

13 EVENING
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013342
5736 1

13 NIGHT
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013522
5736 1

13 REGULAR
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013070
5736 1

13 REGULAR
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013691
5736 1

13 EVENING
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013393
5736 1

13 EVENING
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013637
5736 1

13 NIGHT
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67013658
5736 1

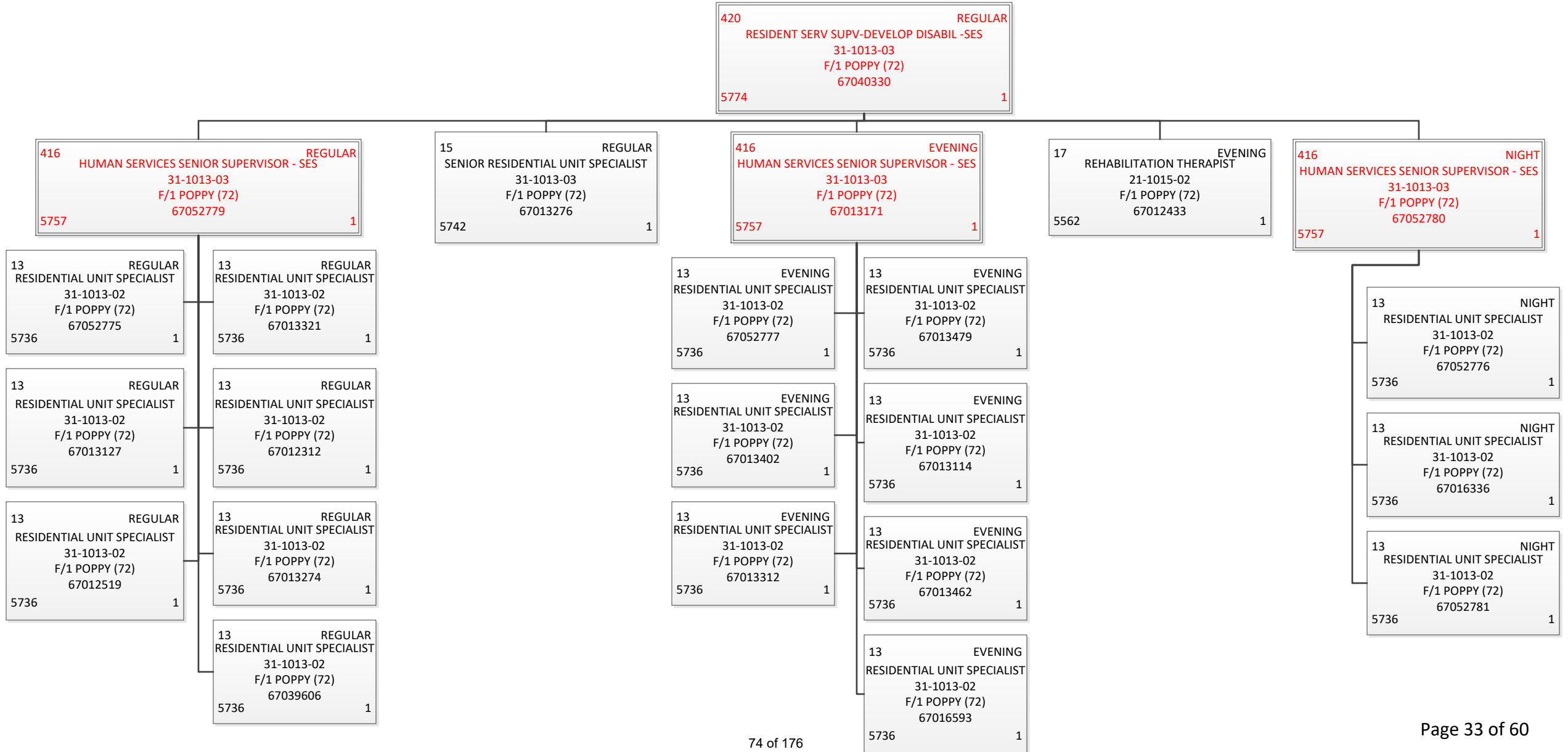
13 REGULAR
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67016469
5736 1

13 EVENING
RESIDENTIAL UNIT SPECIALIST
31-1013-02
F/1 LILY (80)
67016413
5736 1

Facility 1 - Poppy

January 2021

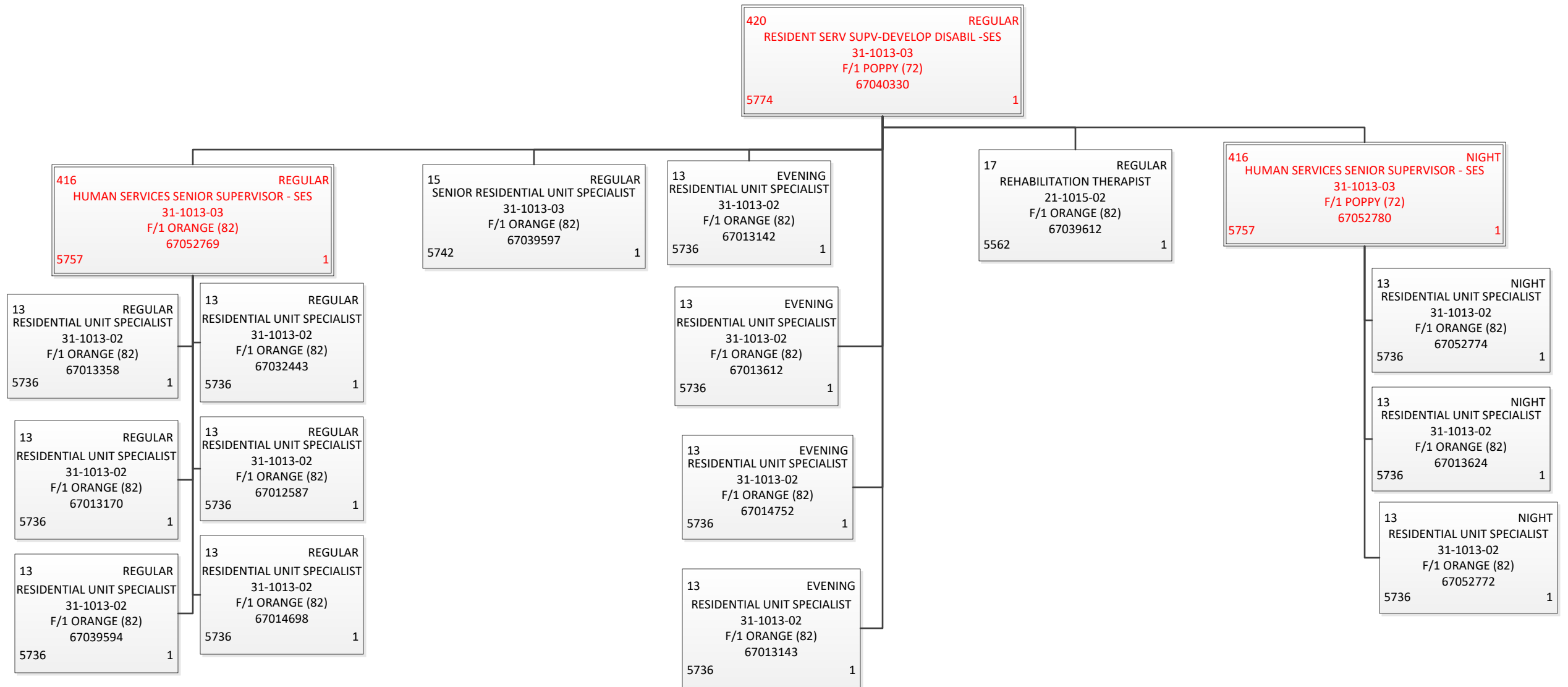
Poppy
Interdepartment #6202012000
of Positions/FTE: 22/22.0



Facility 1 - Orange

August 2021

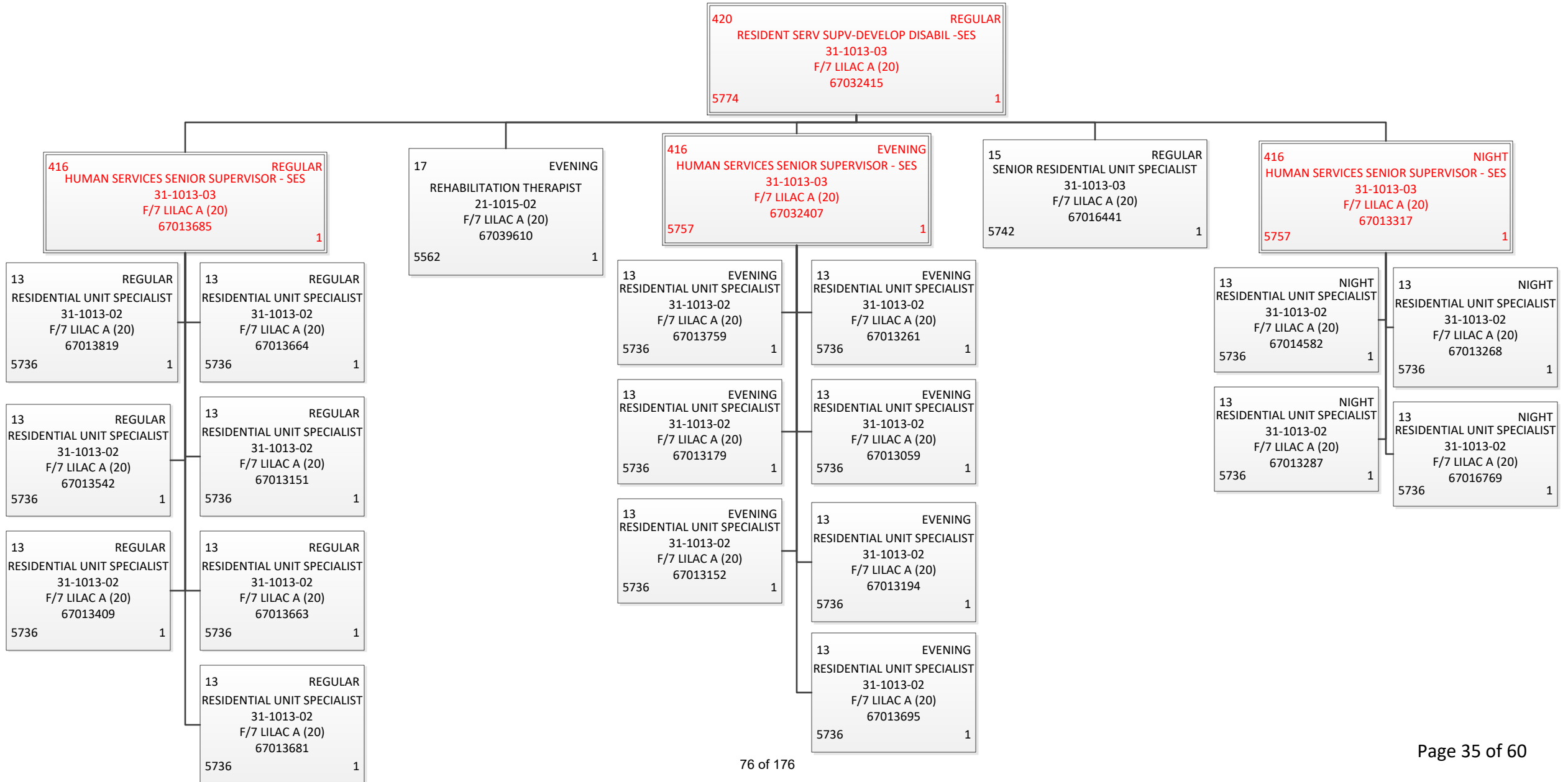
Orange
Interdepartment #6202012000
of Positions/FTE: 16/16.0



Facility 7 – Lilac A

February 2021

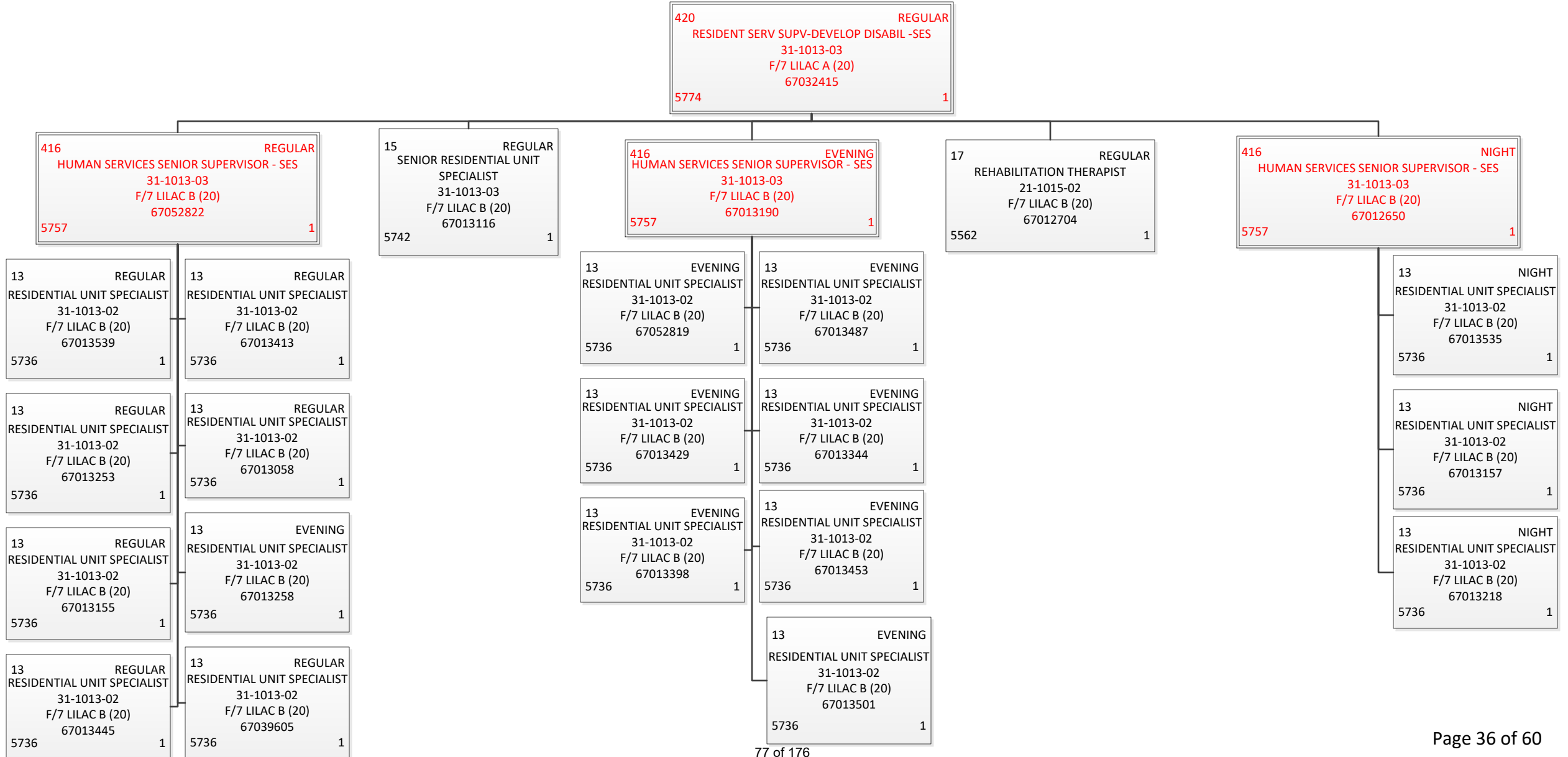
Lilac A
Interdepartment #6202012000
of Positions/FTE: 23/23.0



Facility 7 – Lilac B

February 2021

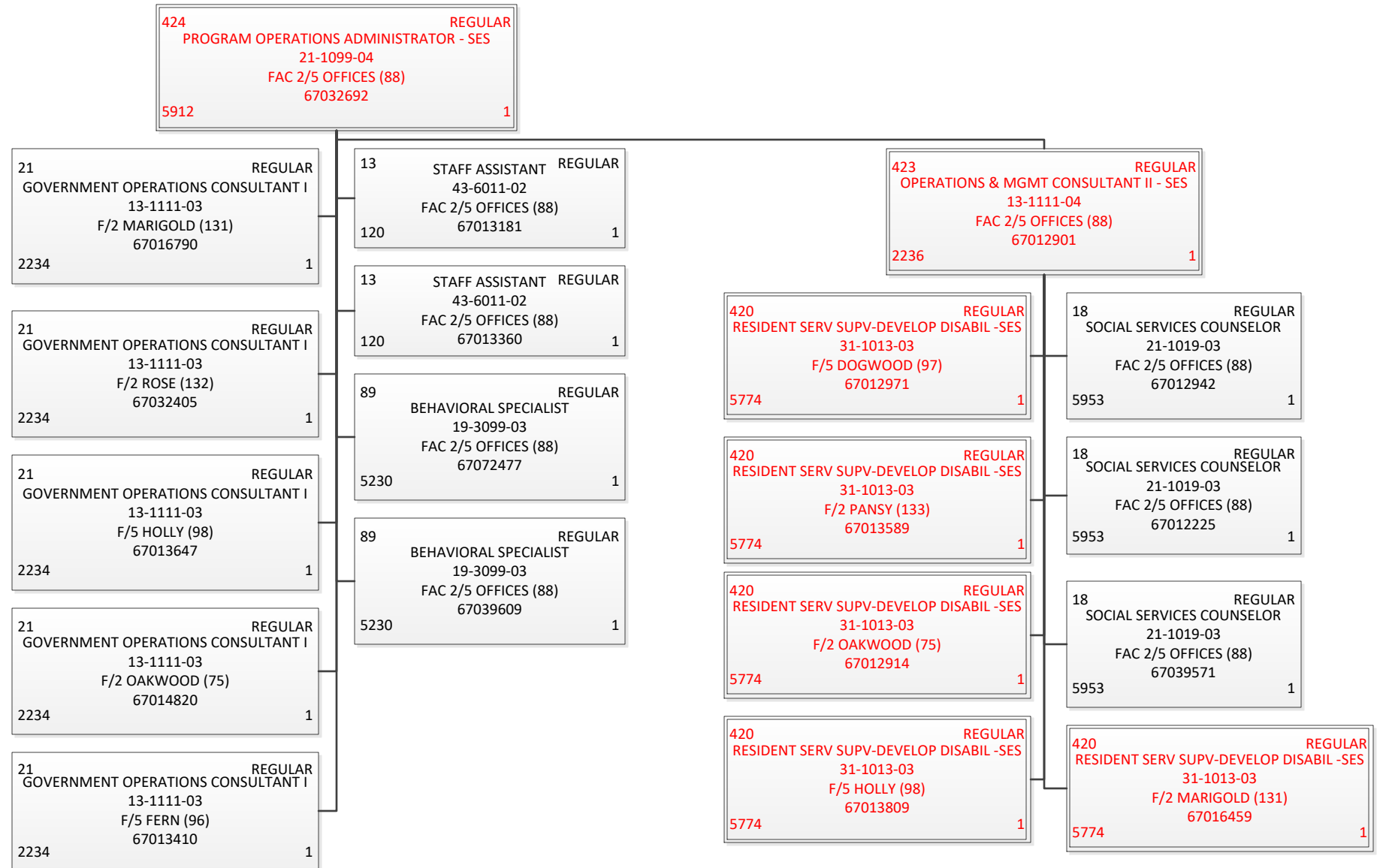
Lilac B
Interdepartment #6202070310
of Positions/FTE: 23/23.0



Administration Facility 2 & 5

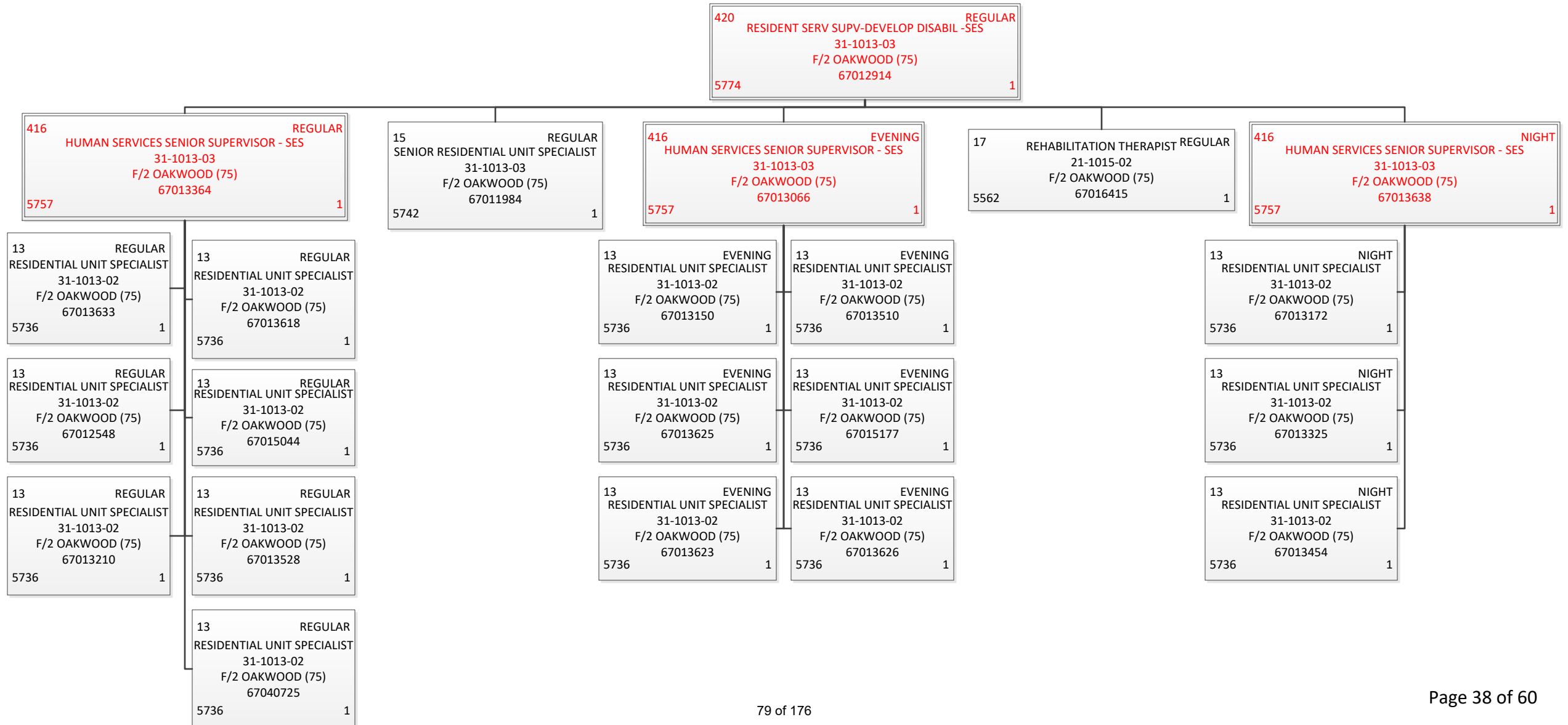
February 2021

FAC. 2 & 5
Interdepartment #6202020000
of Positions/FTE: 18/18.0



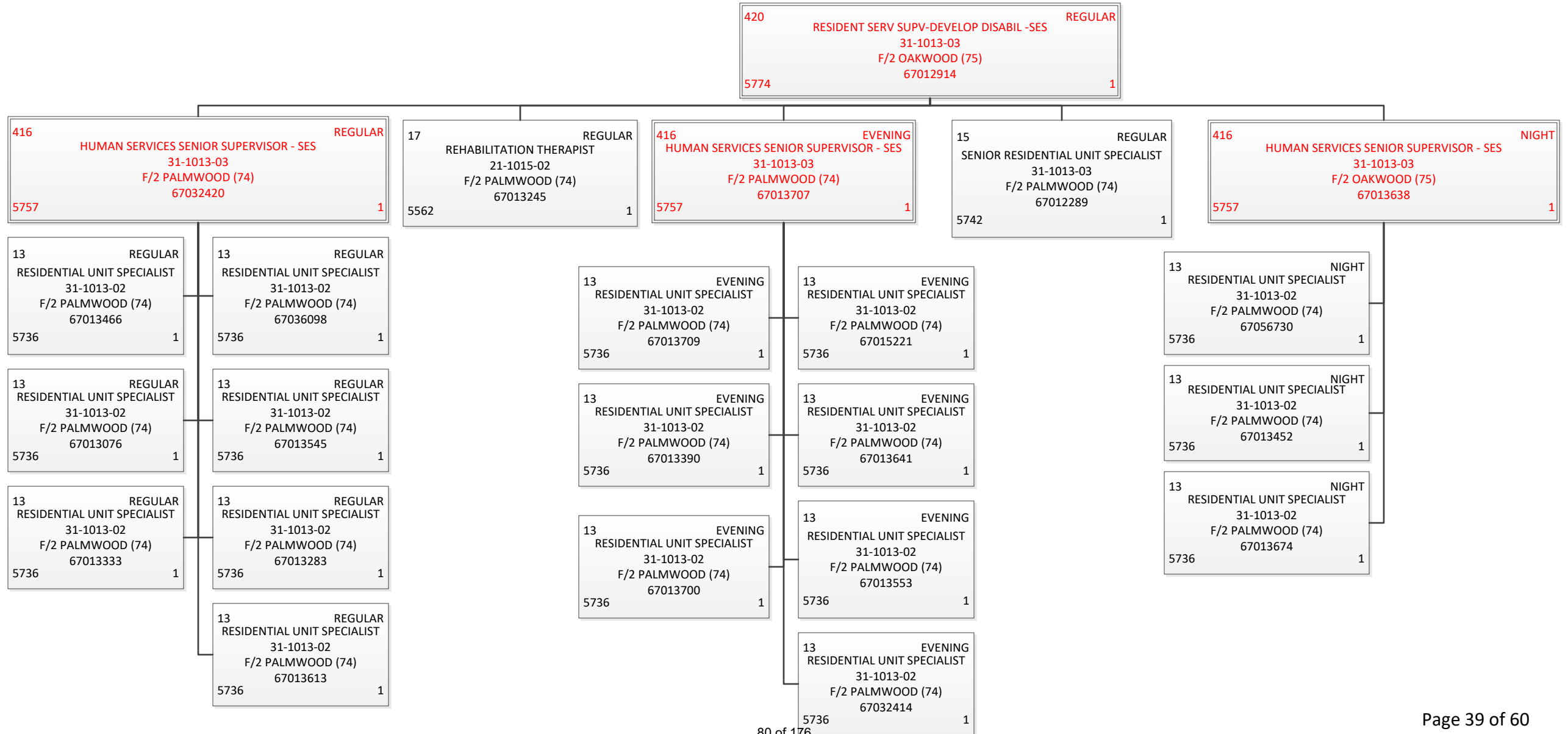
Facility 2 - Oakwood

February 2021



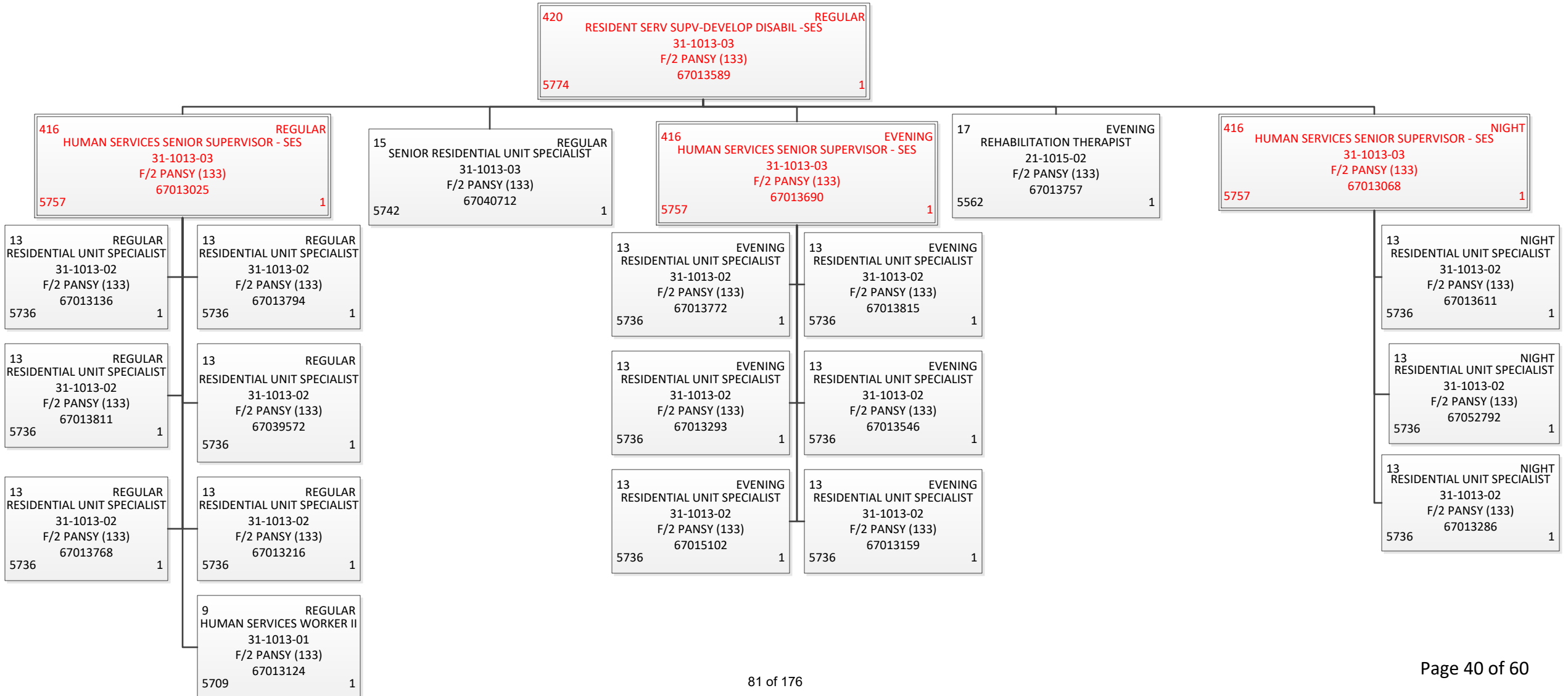
Facility 2 - Palmwood

February 2021



Facility 2 - Pansy

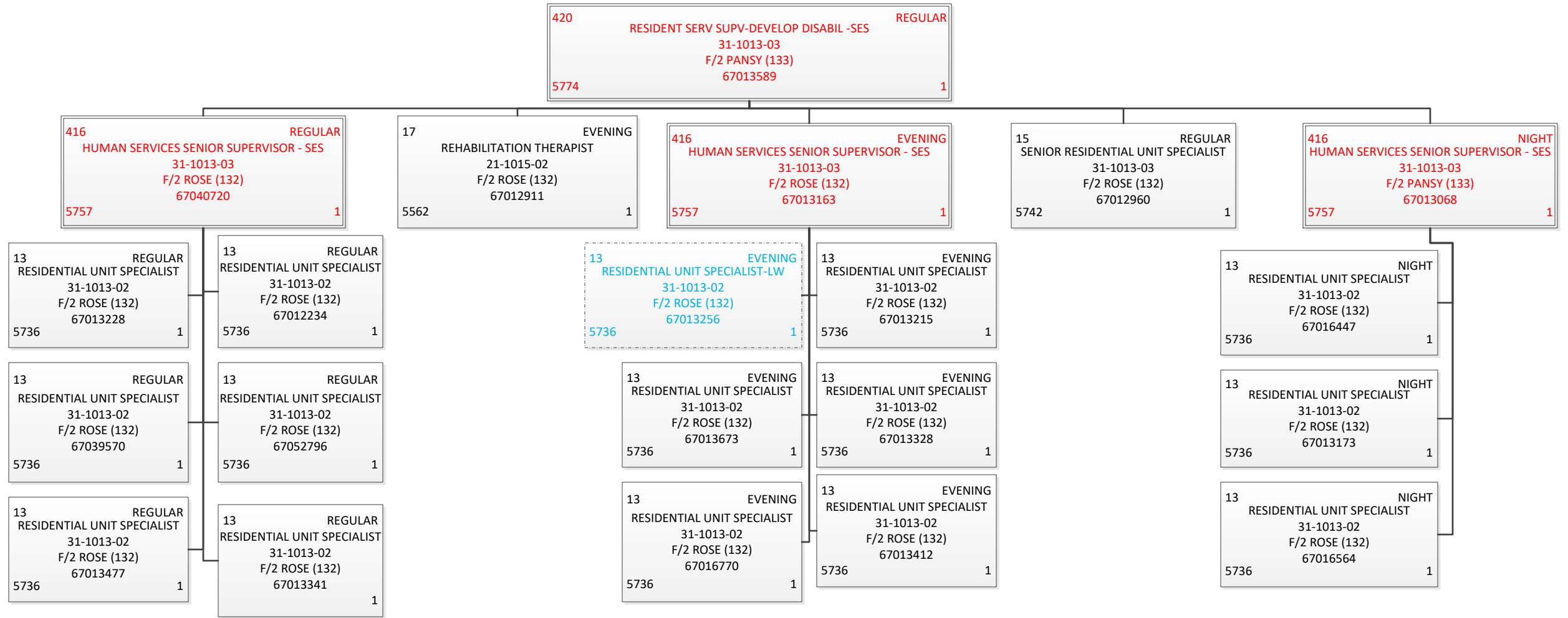
JUNE 2021



Facility 2 - Rose

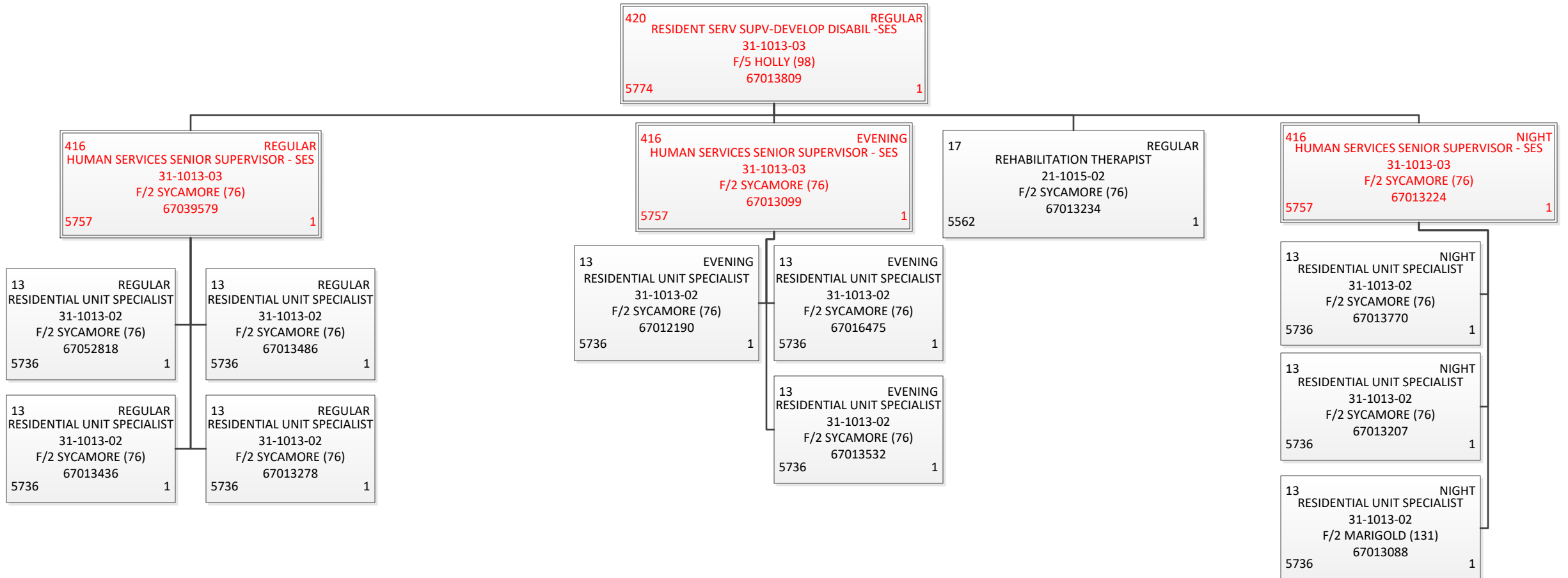
February 2021

Rose
Interdepartment #6202020300
of Positions/FTE: 19/19.0



Facility 2 - Sycamore

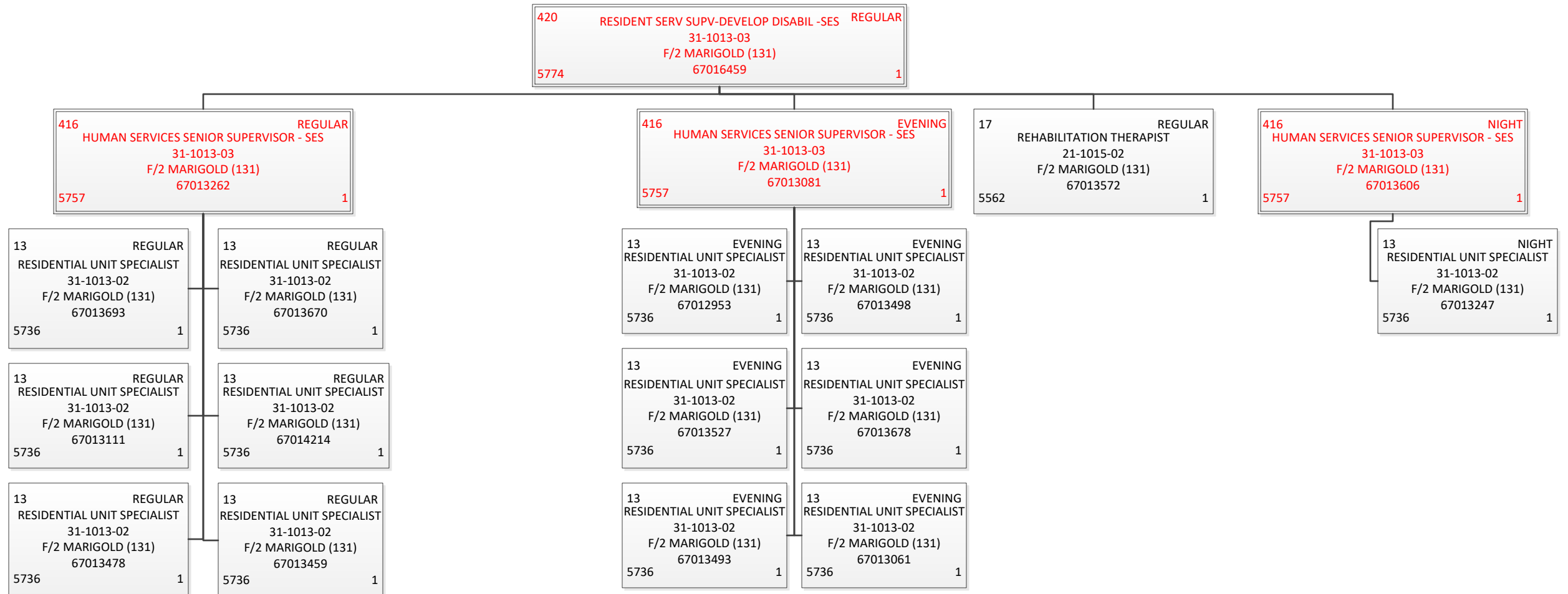
August 2021



Facility 2 – Marigold

August 2021

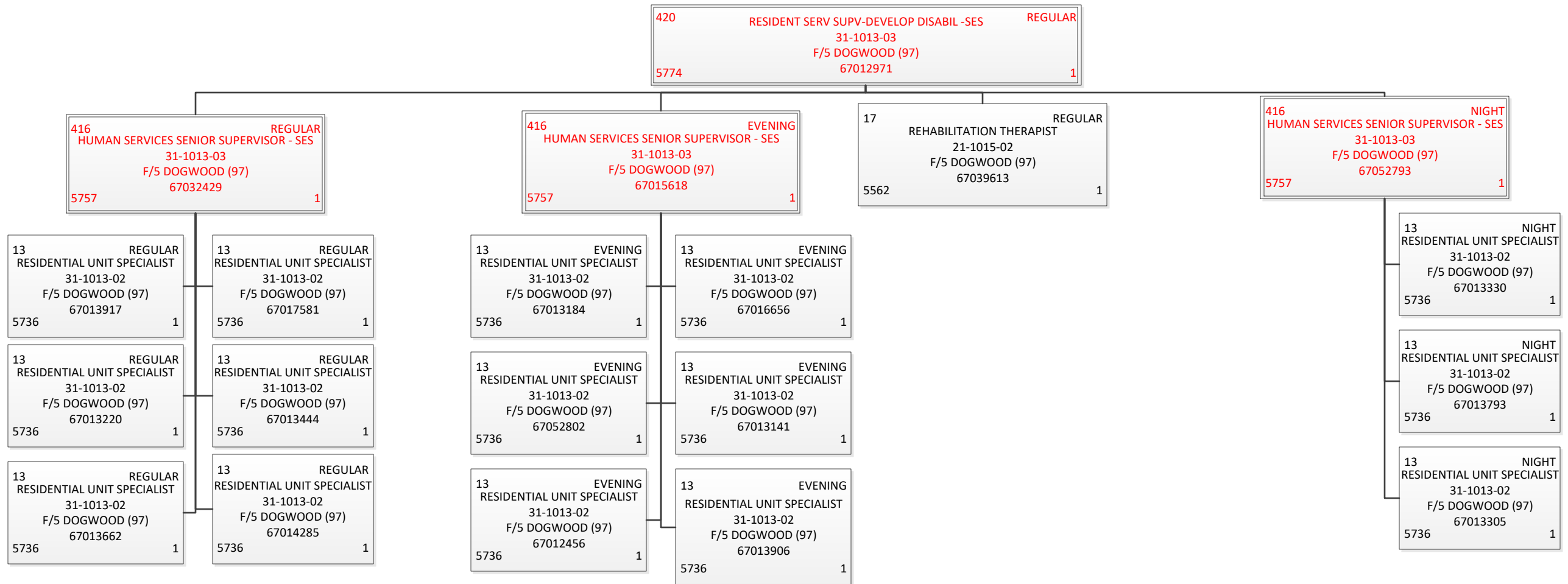
Marigold
Interdepartment #6202021000
of Positions/FTE: 17/17.0



Facility 5 - Dogwood

February 2021

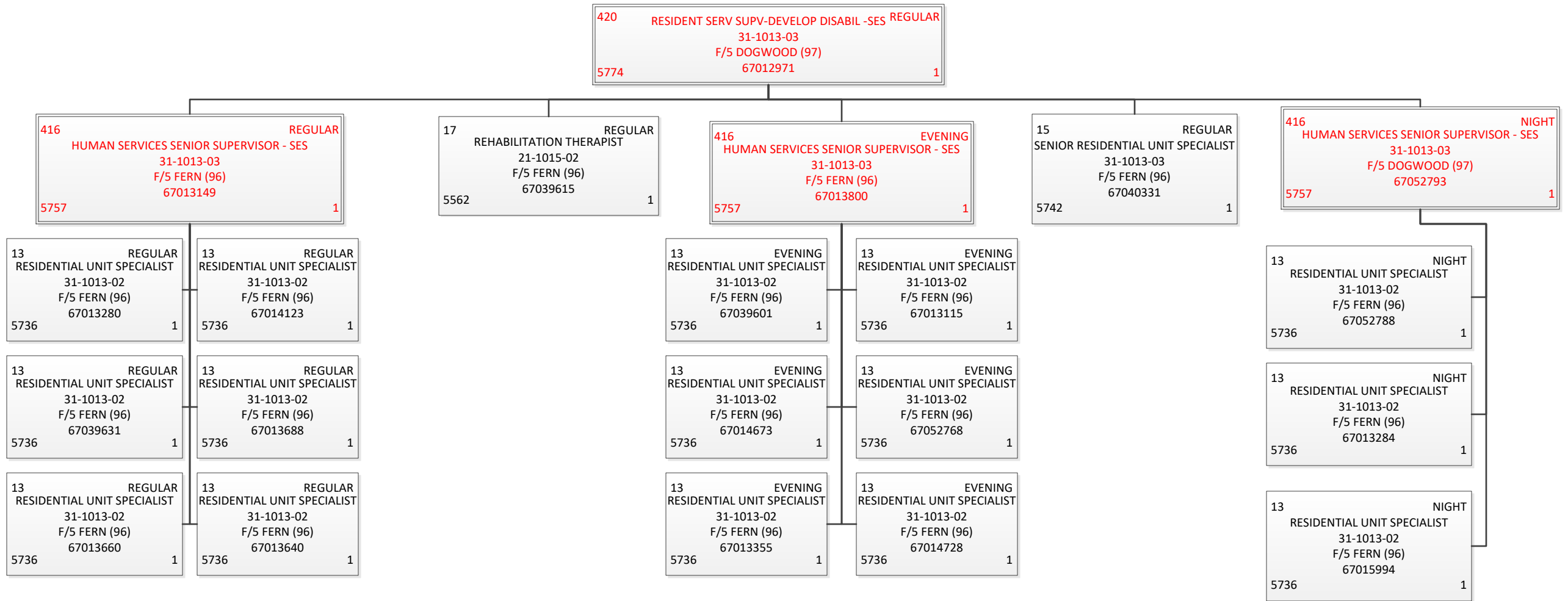
Dogwood
Interdepartment #6202050310
of Positions/FTE: 19/19.0



Facility 5 - Fern

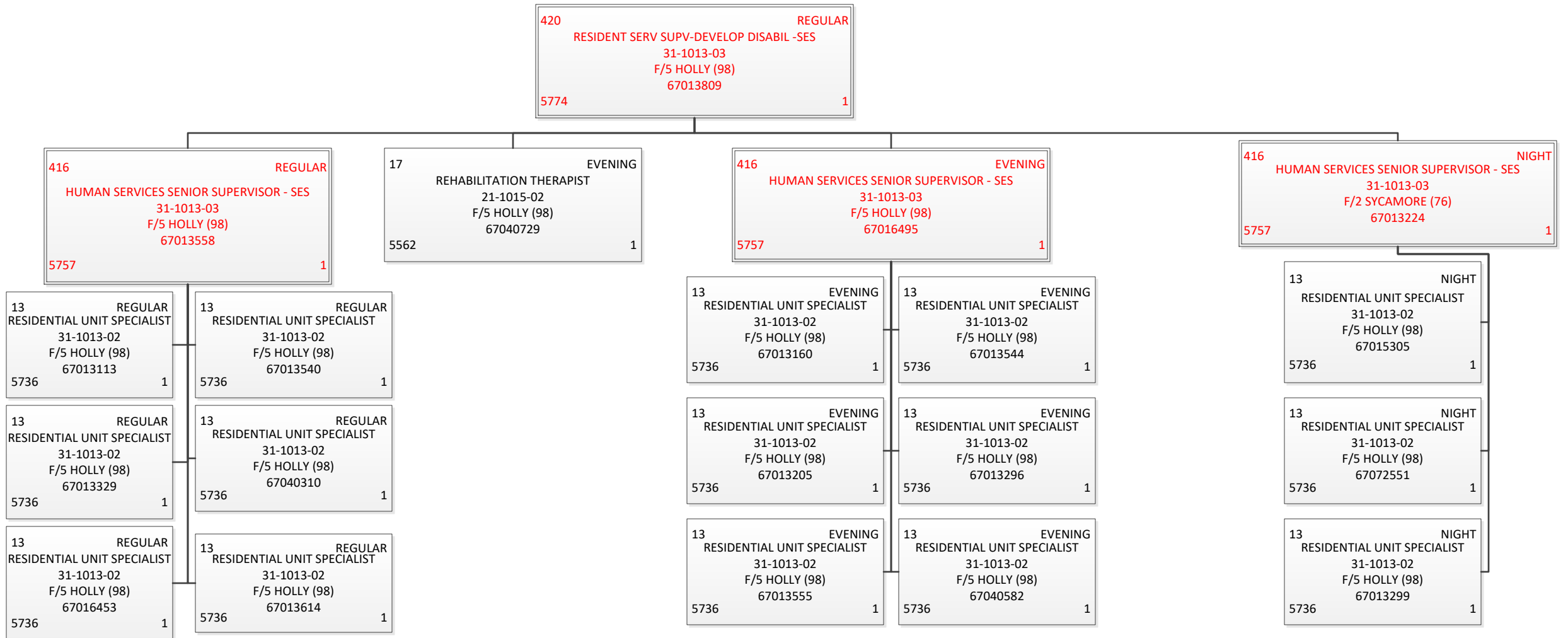
February 2021

Fern
Interdepartment #6202050400
of Positions/FTE: 19/19.0



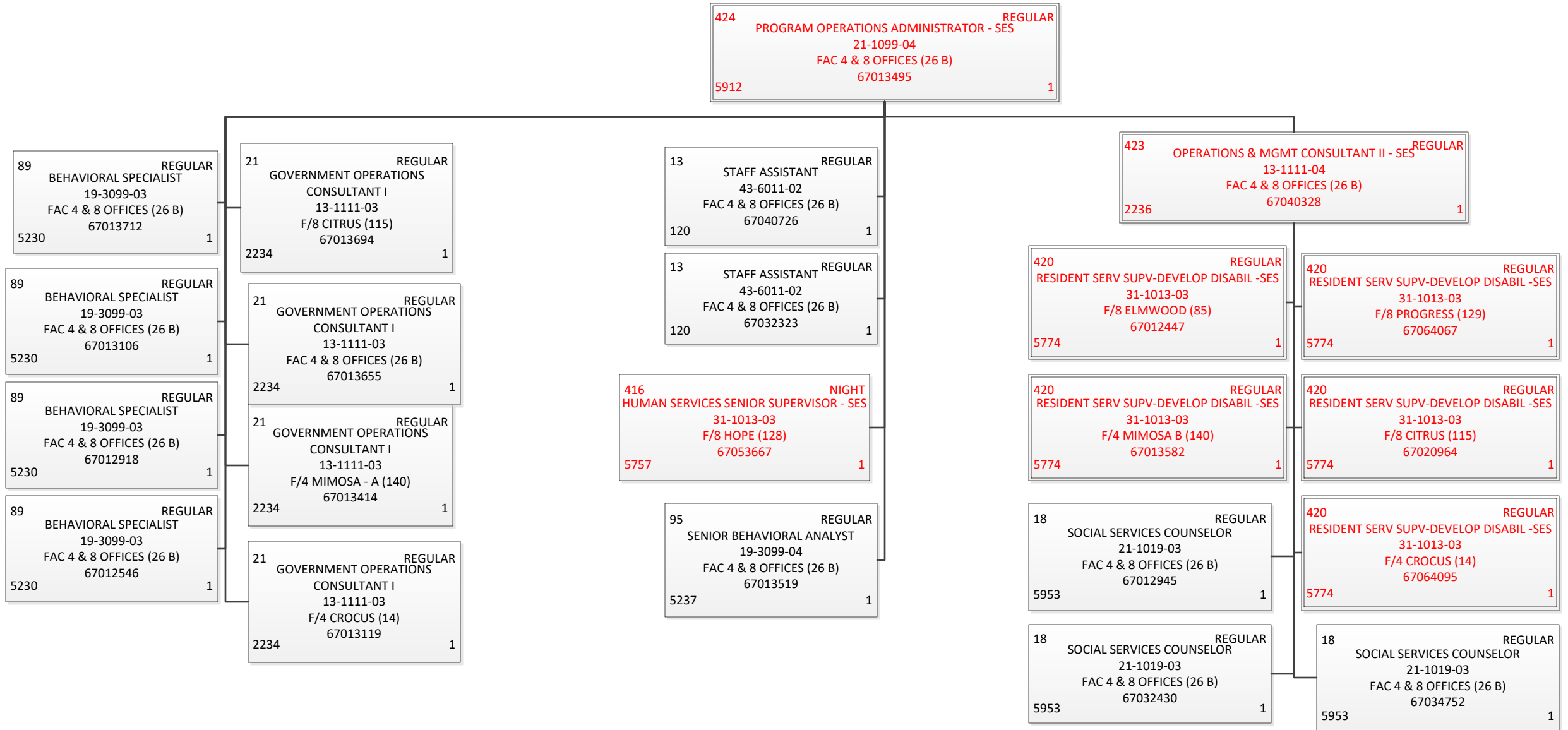
Facility 5 - Holly

February 2021



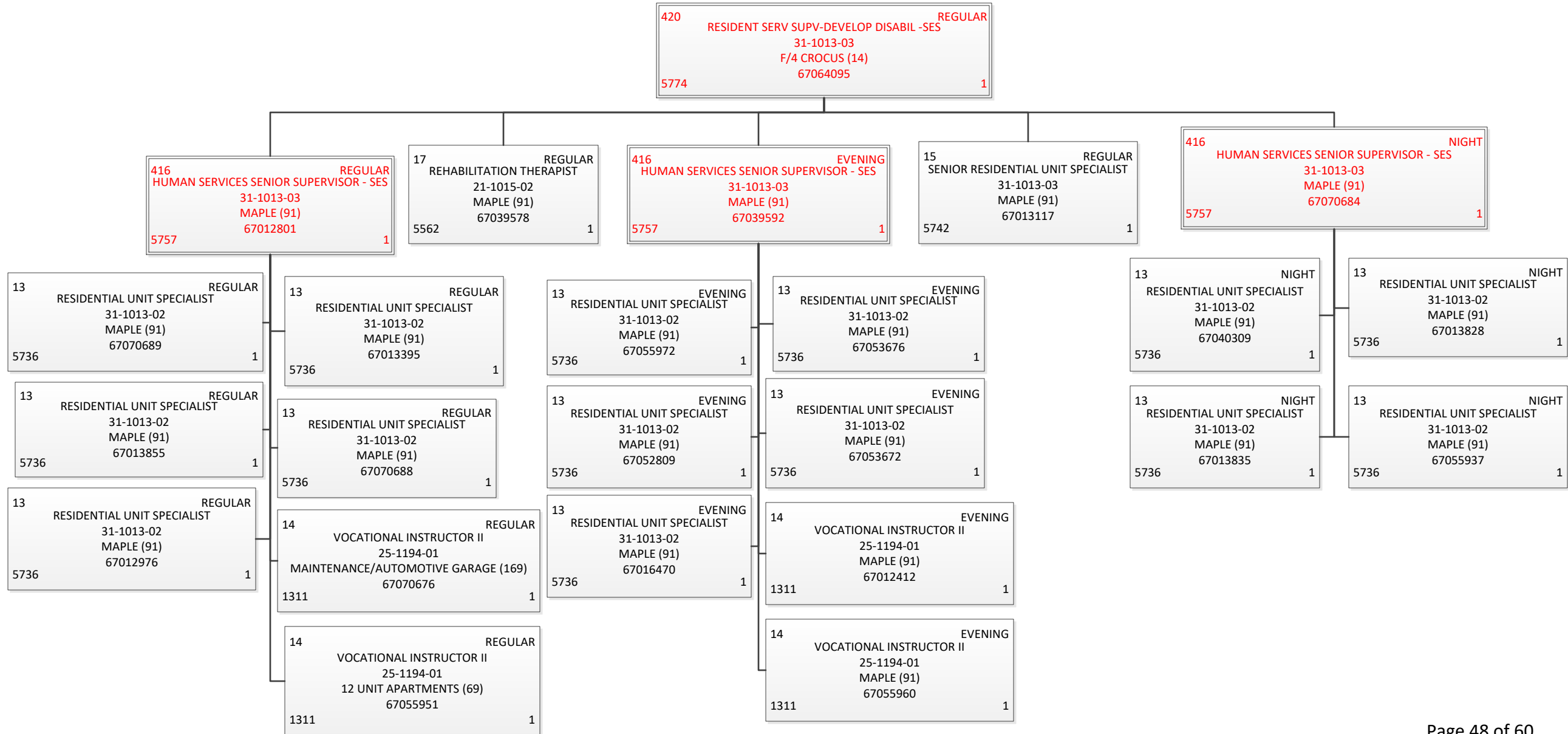
Administration Facility 4 & 8

February 2021



Seguin - Maple

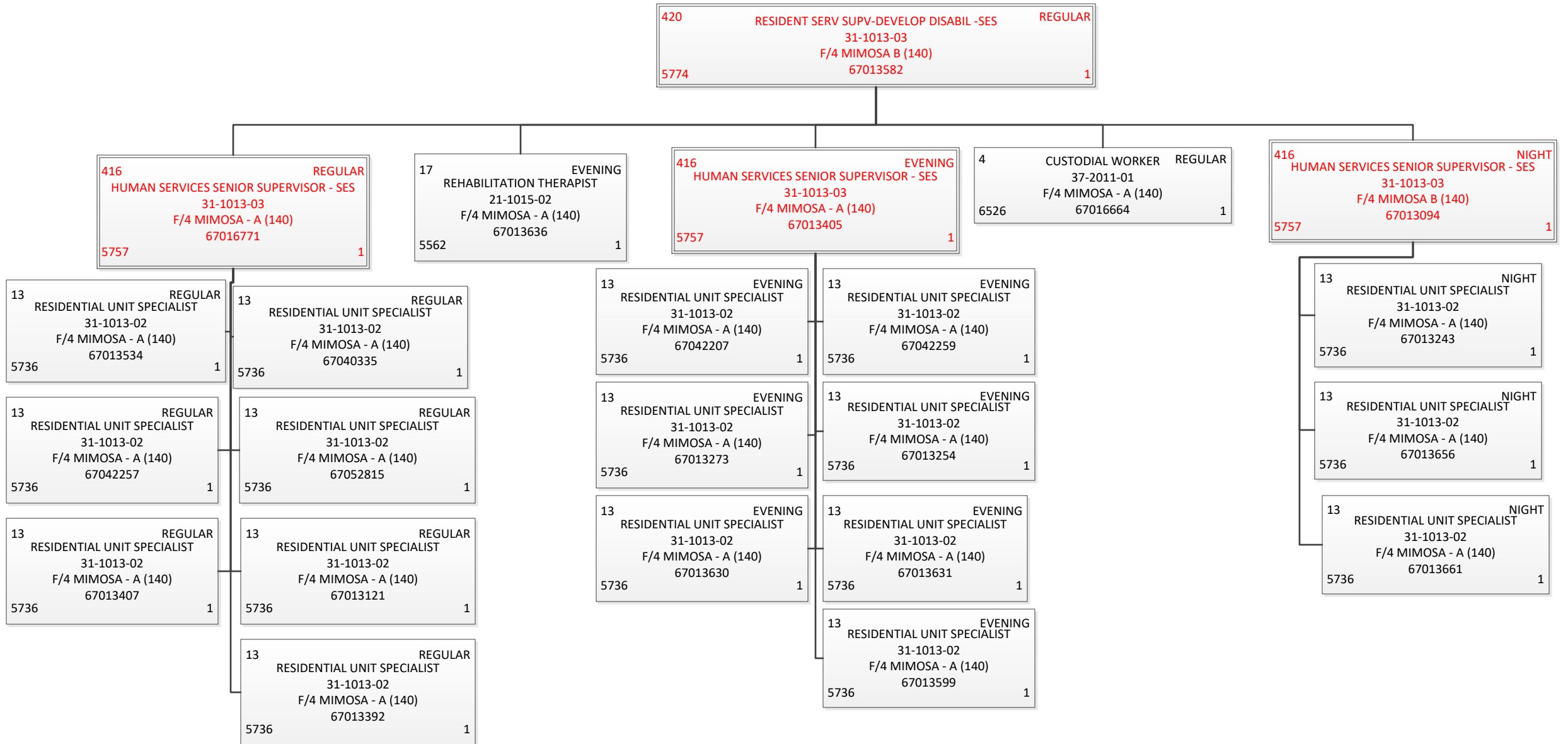
JUNE 2021



Facility 4 – Mimosa A

February 2021

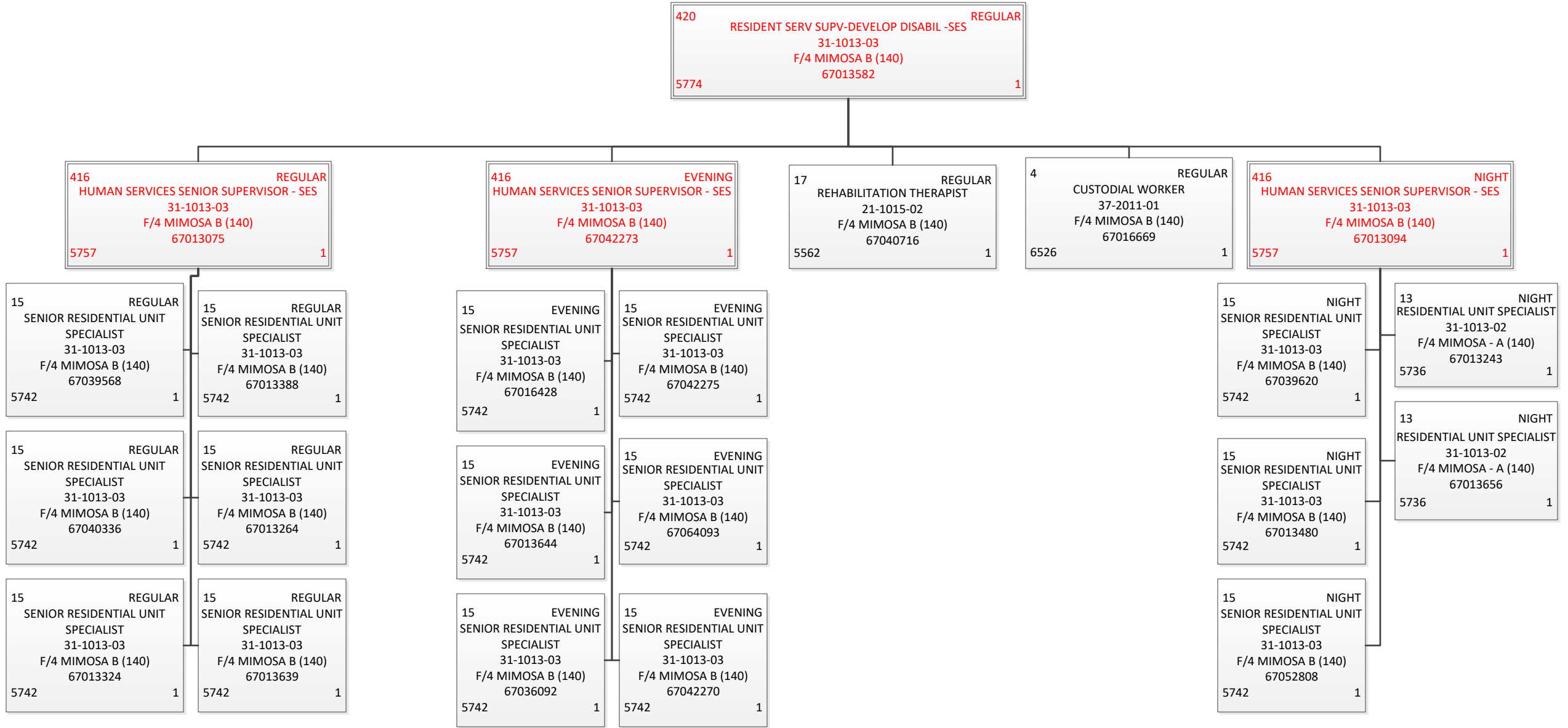
Mimosa A
Interdepartment #6202040200
of Positions/FTE: 22/22.0



Facility 4 – Mimosa B

February 2021

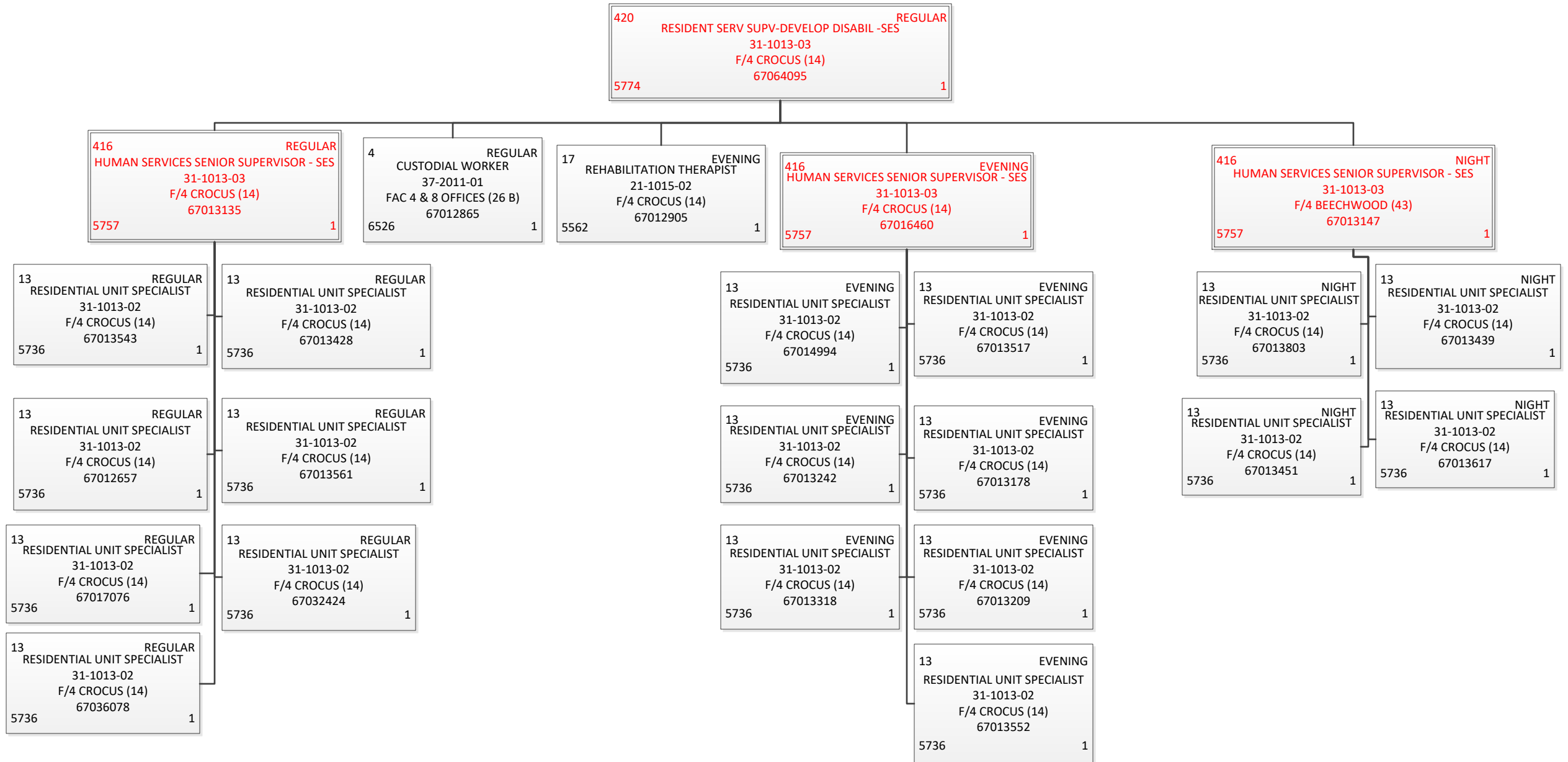
Mimosa B
Interdepartment #6202040300
of Positions/FTE: 22/22.0



Facility 4 - Crocus

February 2021

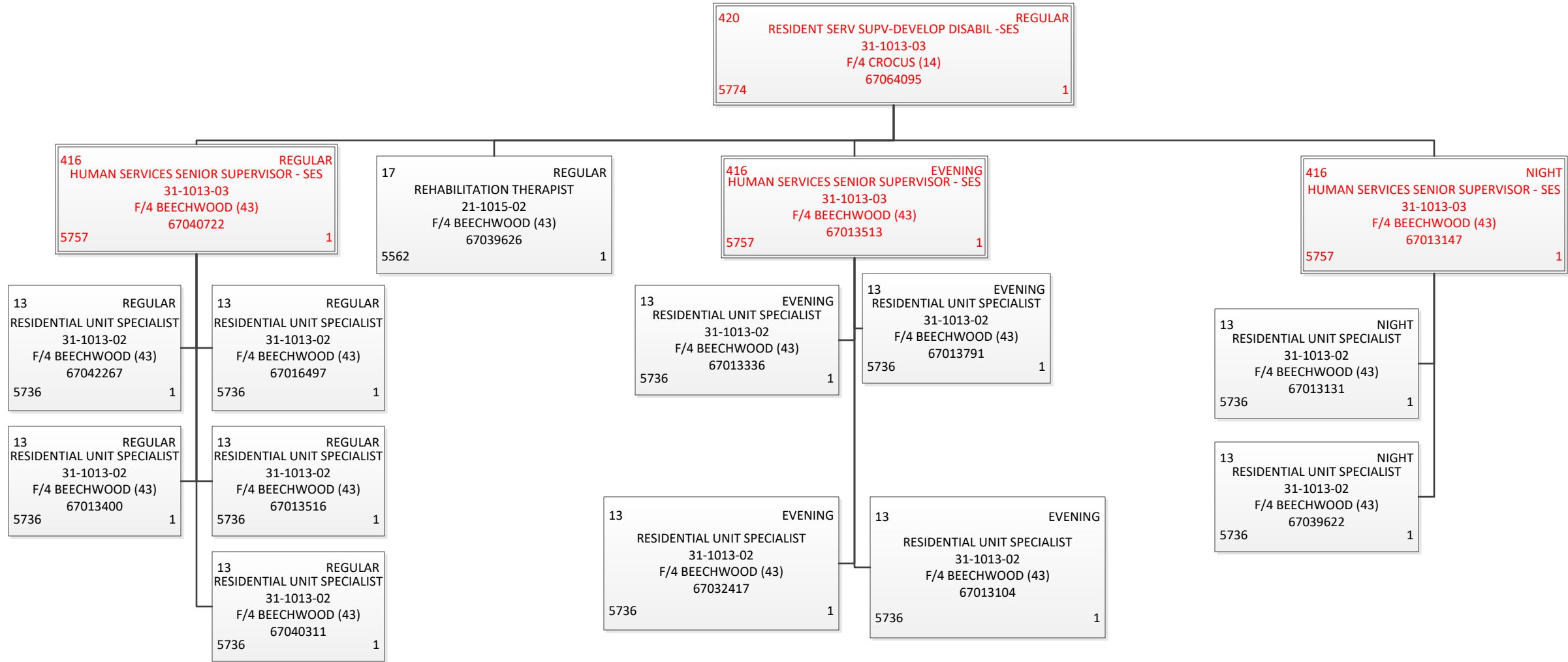
Crocus
Interdepartment #6202040400
of Positions/FTE: 23/23.0



Facility 4 - Beechwood

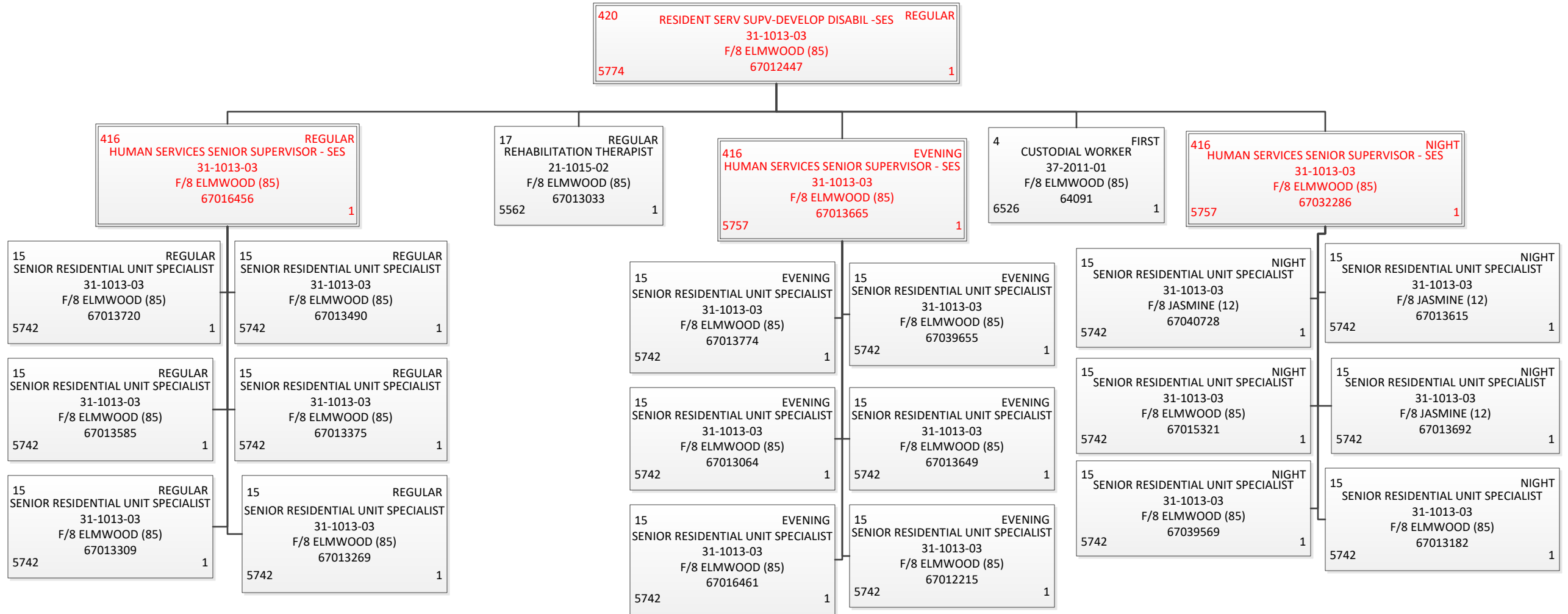
July 2021

Beechwood
Interdepartment #6202040500
of Positions/FTE: 14/14.0



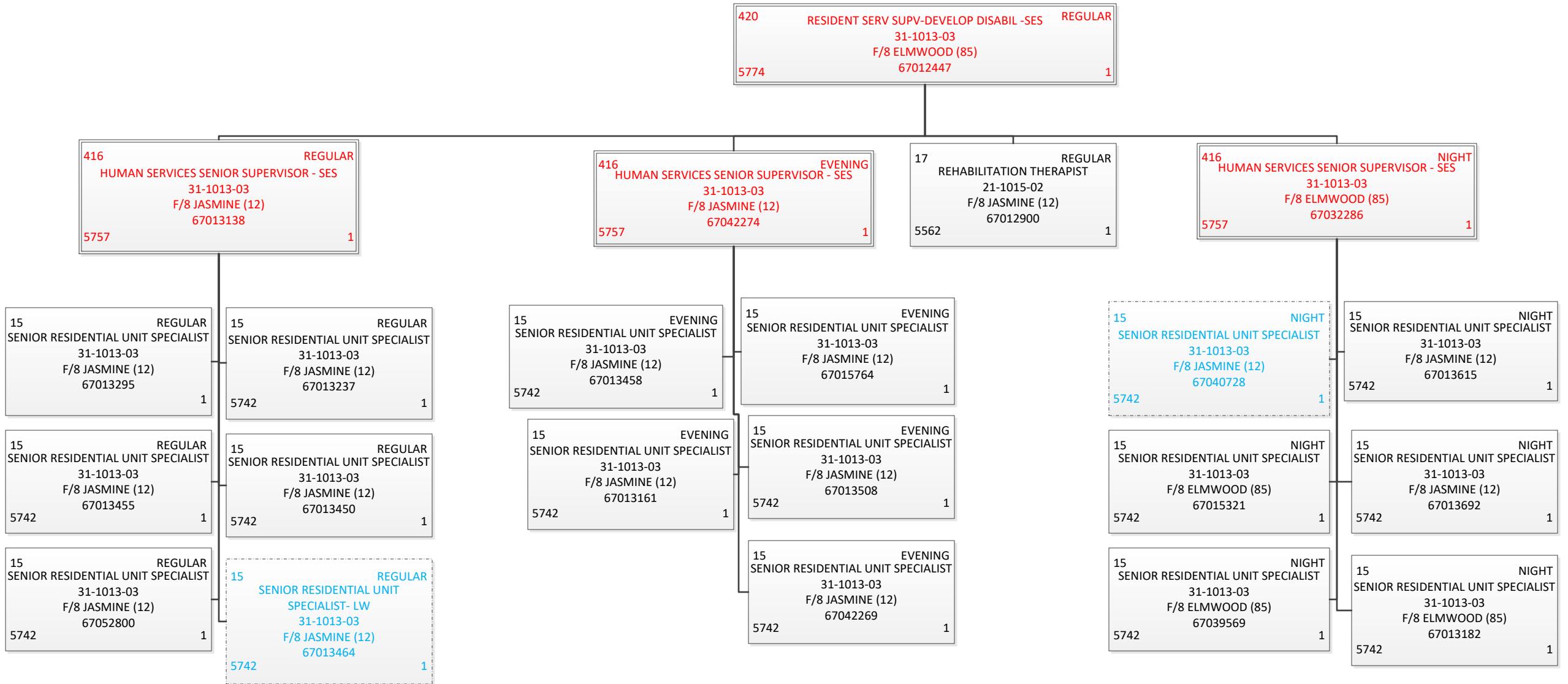
Facility 8 - Elmwood

June 2021



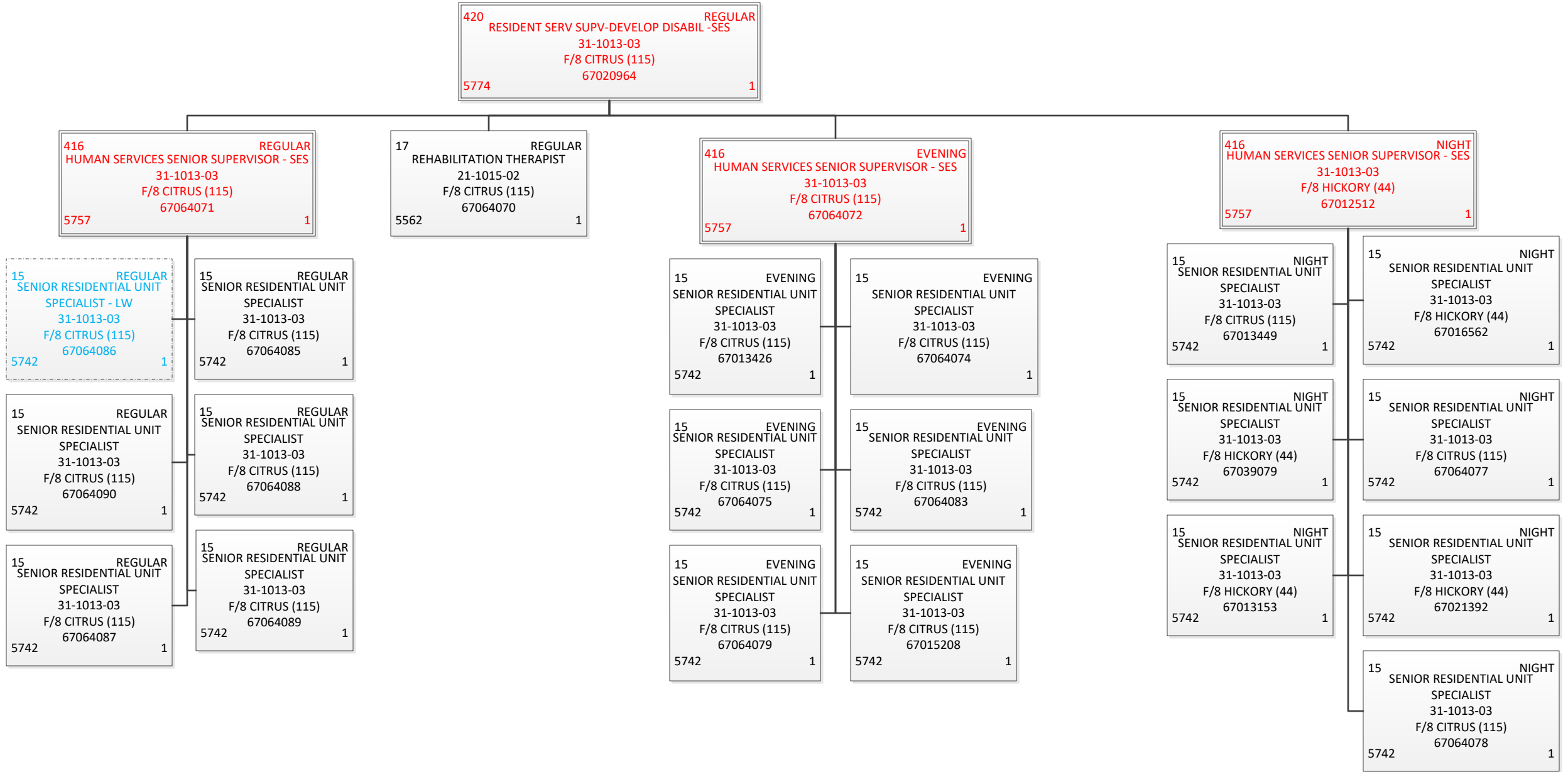
Facility 8 - Jasmine

February 2021



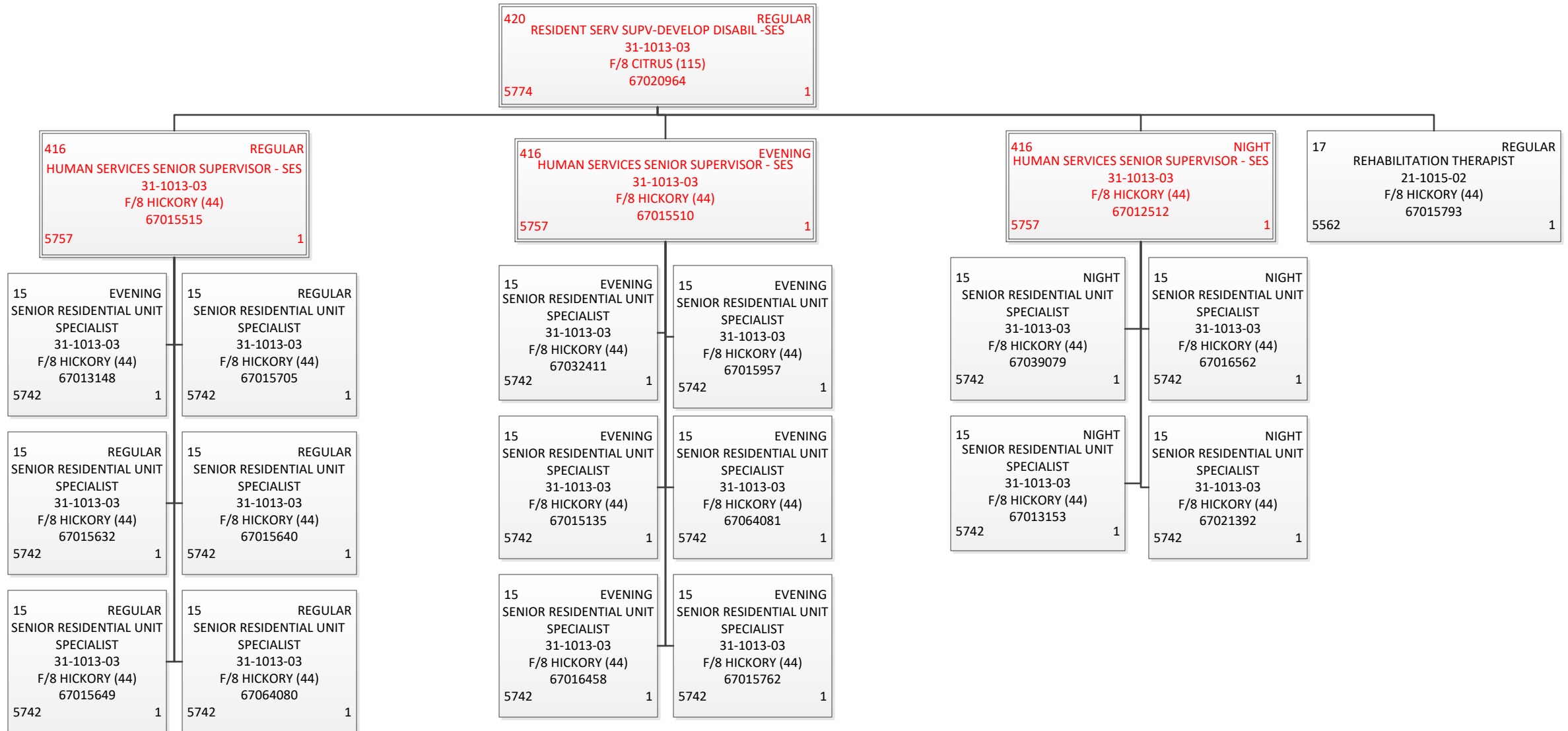
Facility 8 - Citrus

February 2021



Facility 8 - Hickory

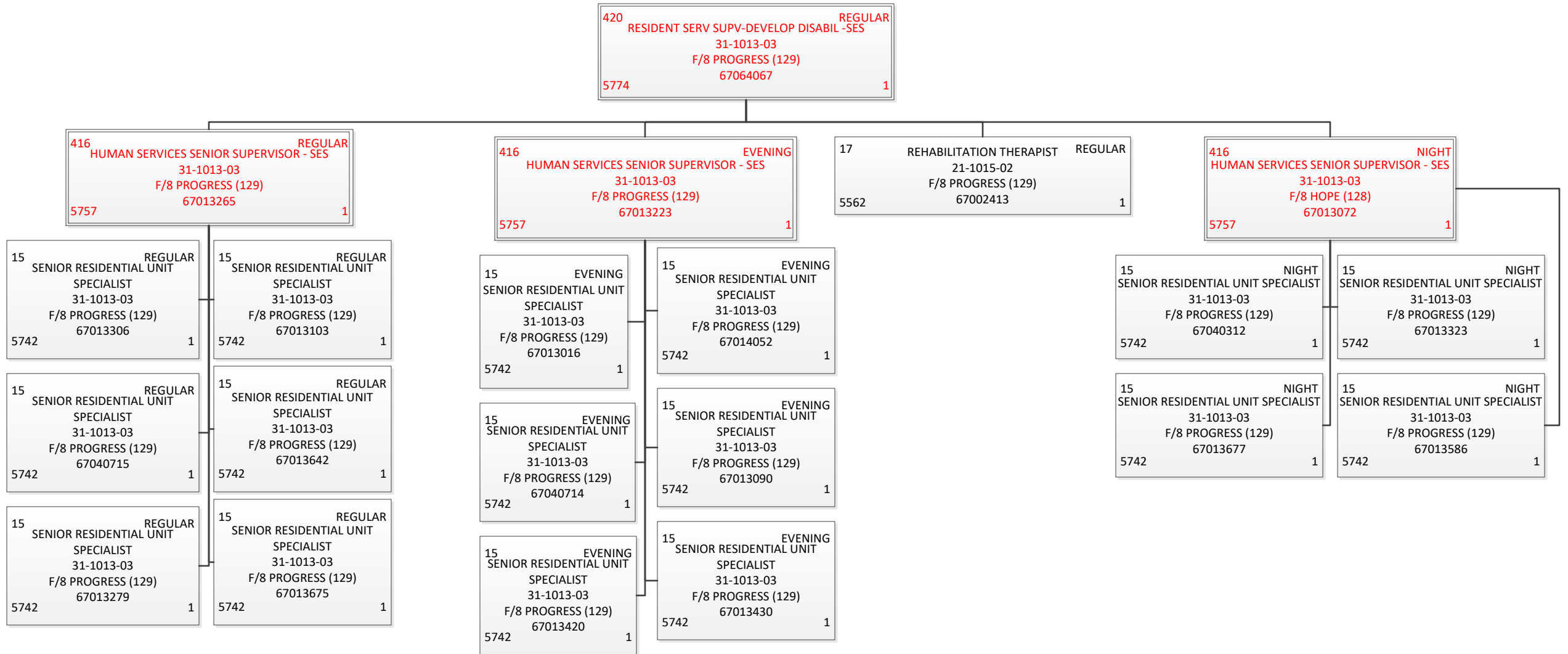
February 2021



Facility 8 - Progress

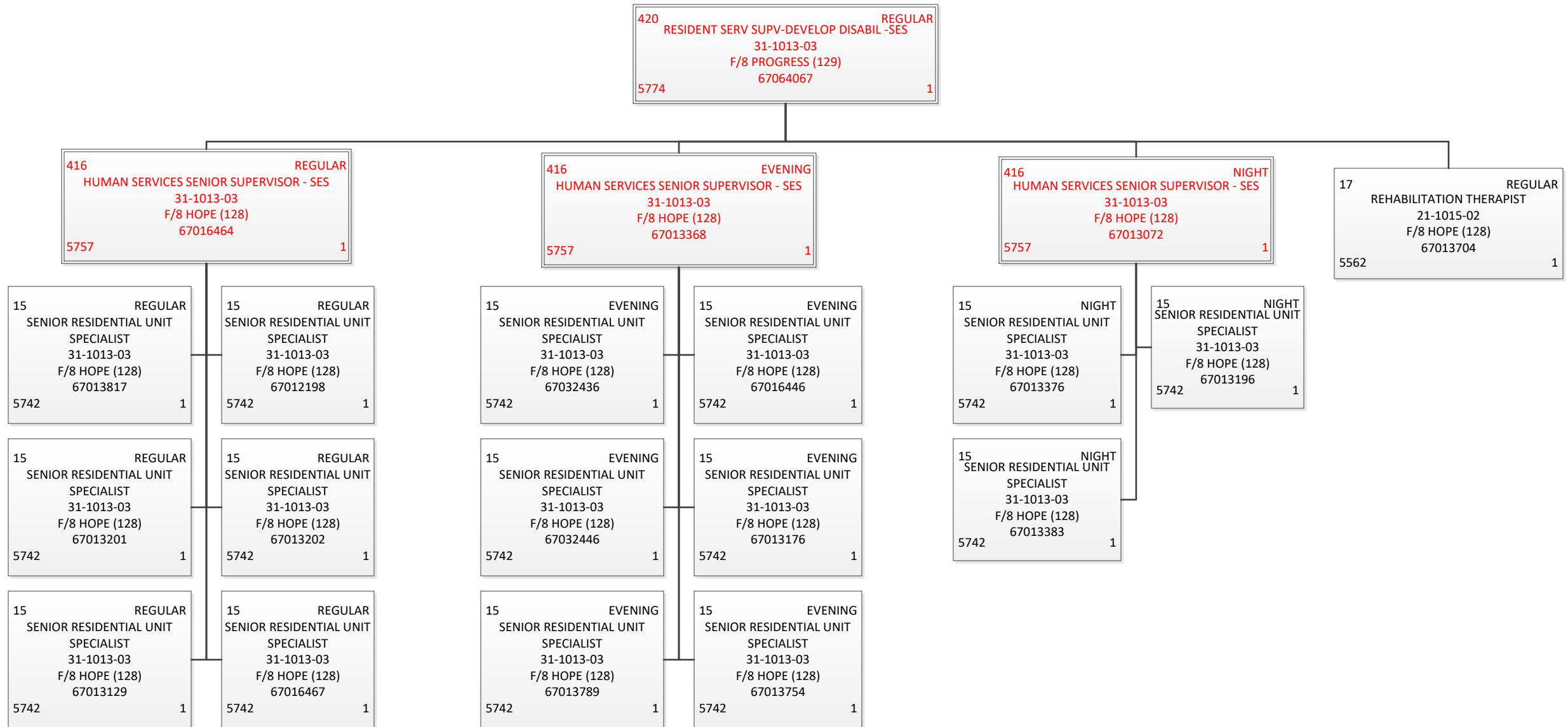
August 2021

Progress
Interdepartment #6202080600
of Positions/FTE: 19/19.0



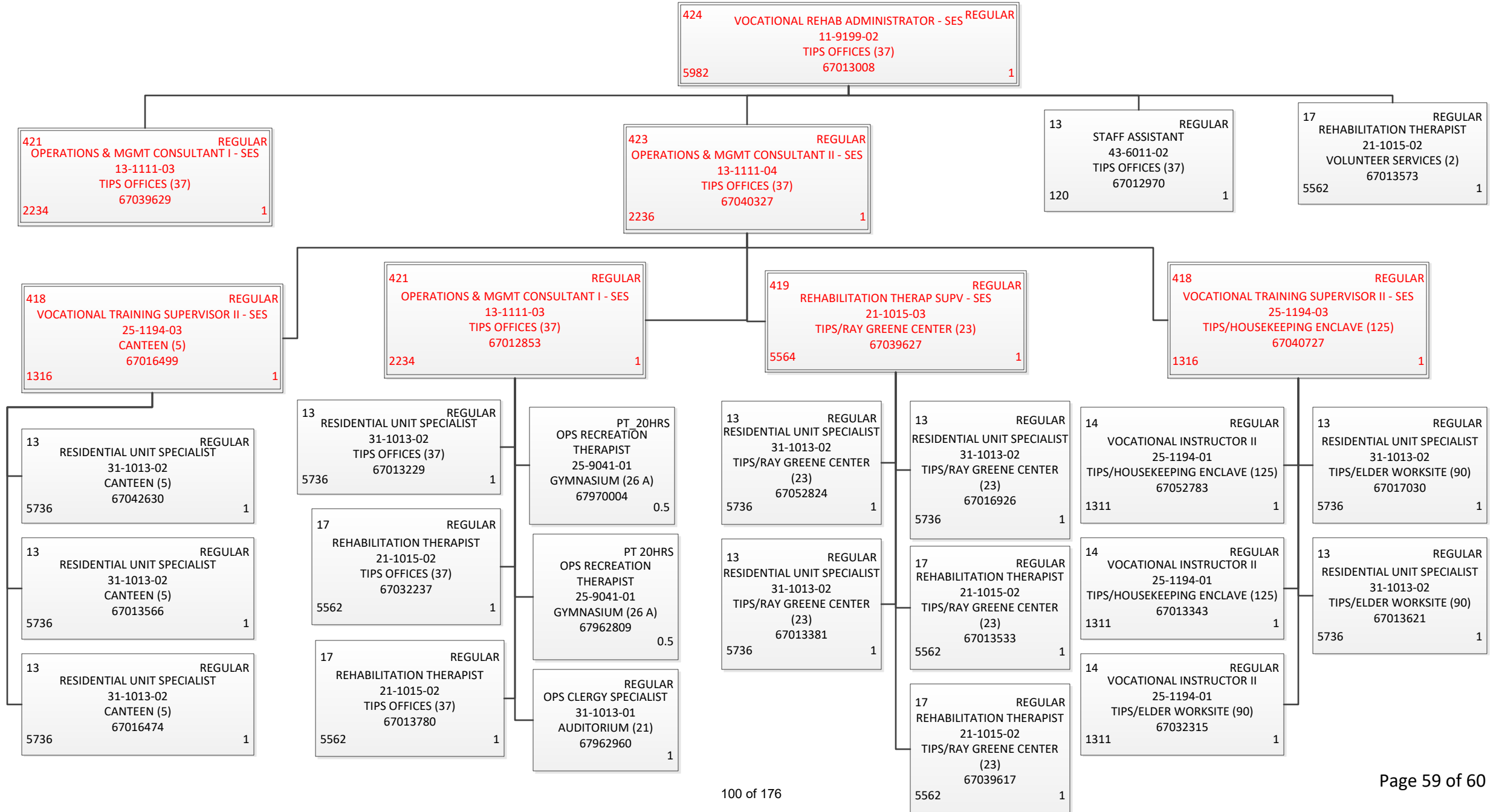
Facility 8 - Hope

August 2021



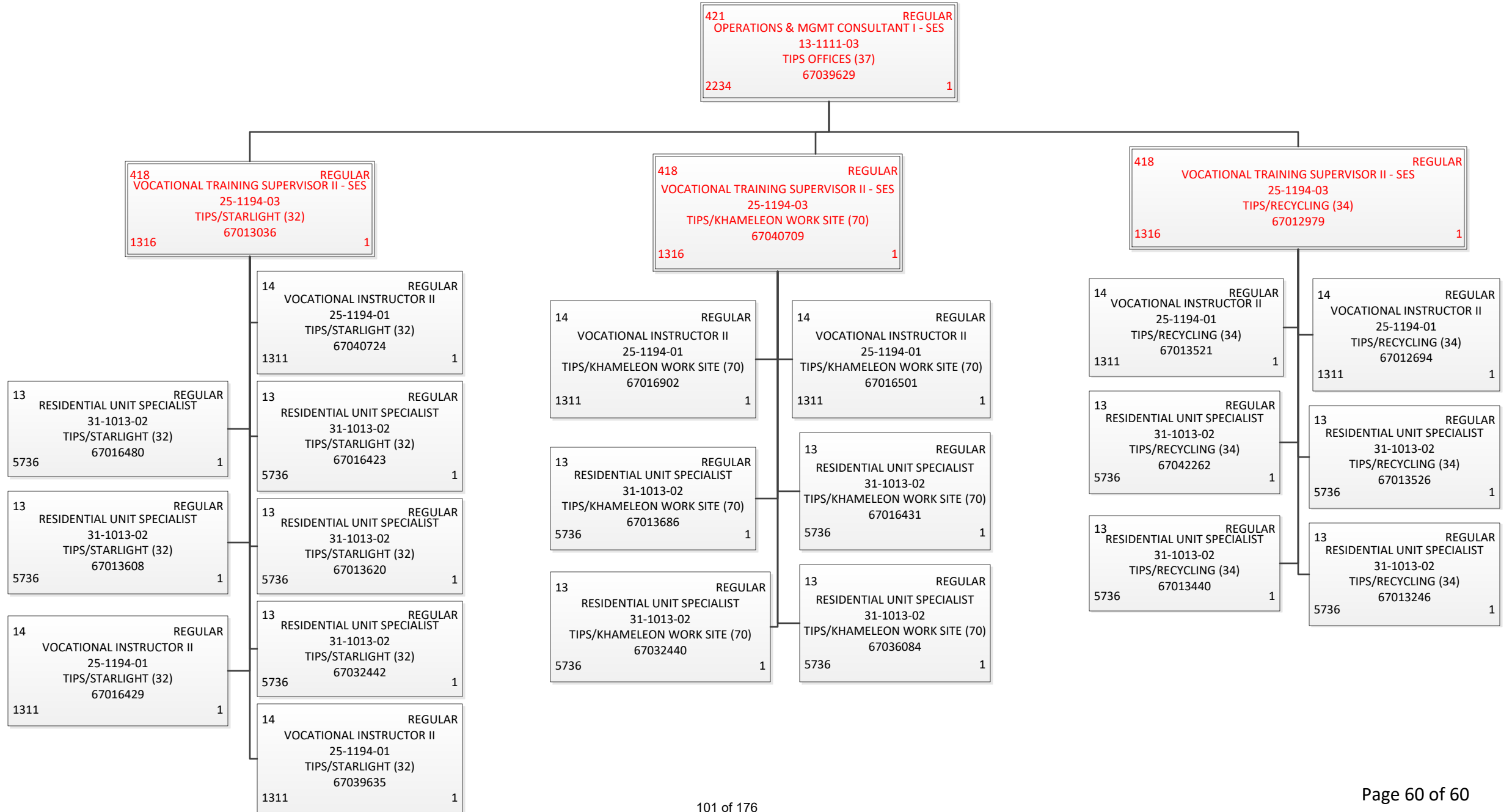
Tacachale Integrated Programs and Services (TIPS)

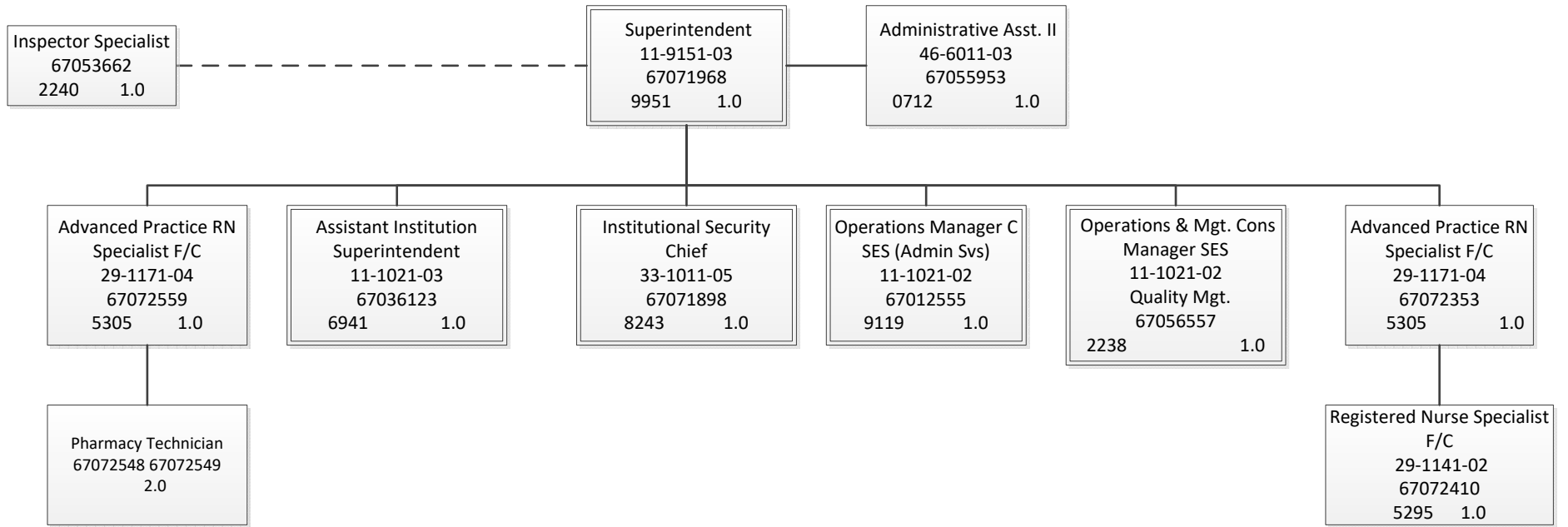
February 2021



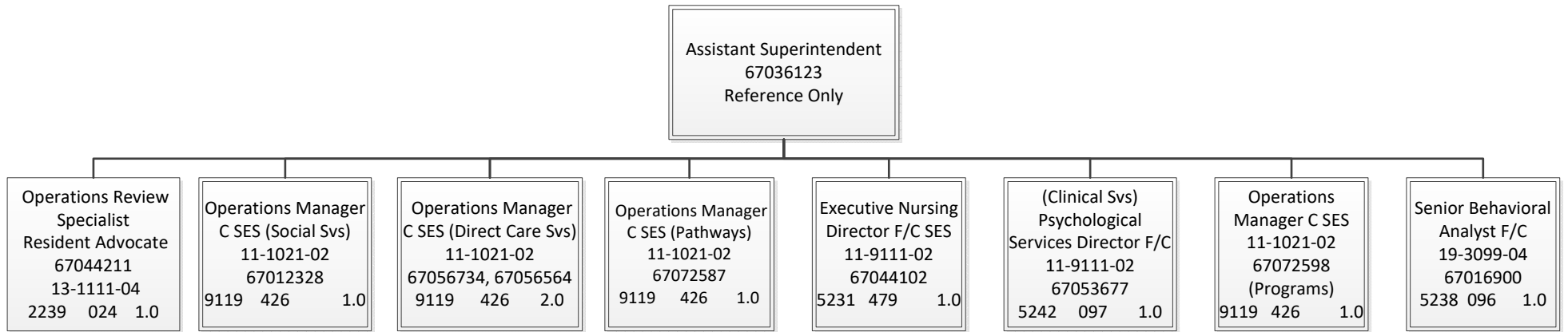
Tacachale Integrated Programs and Services (TIPS)

July 2021





Yellow-New Reporting Structure

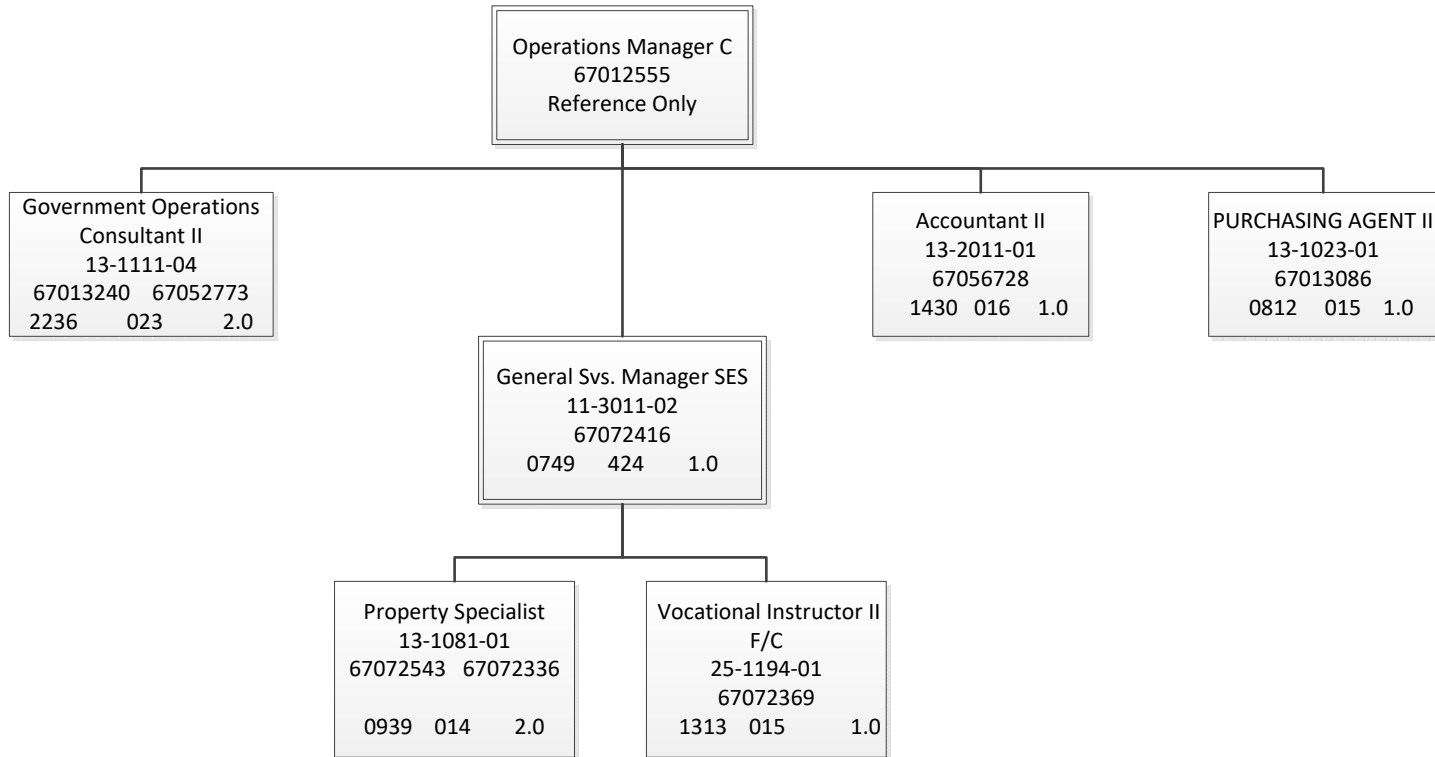


Yellow-New Reporting Structure
Red-Different Classification

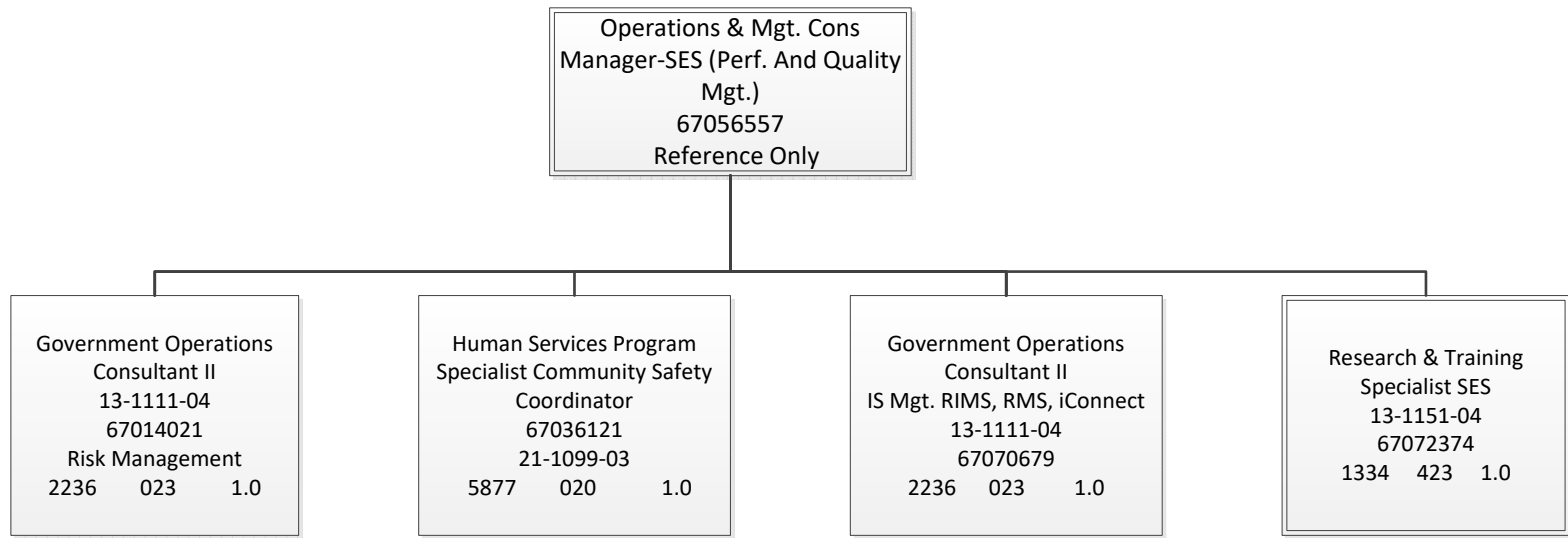
DDDP/Pathways
Administrative Services

Agency for Persons with Disabilities

Page 3
8.0 FTE
September 2021



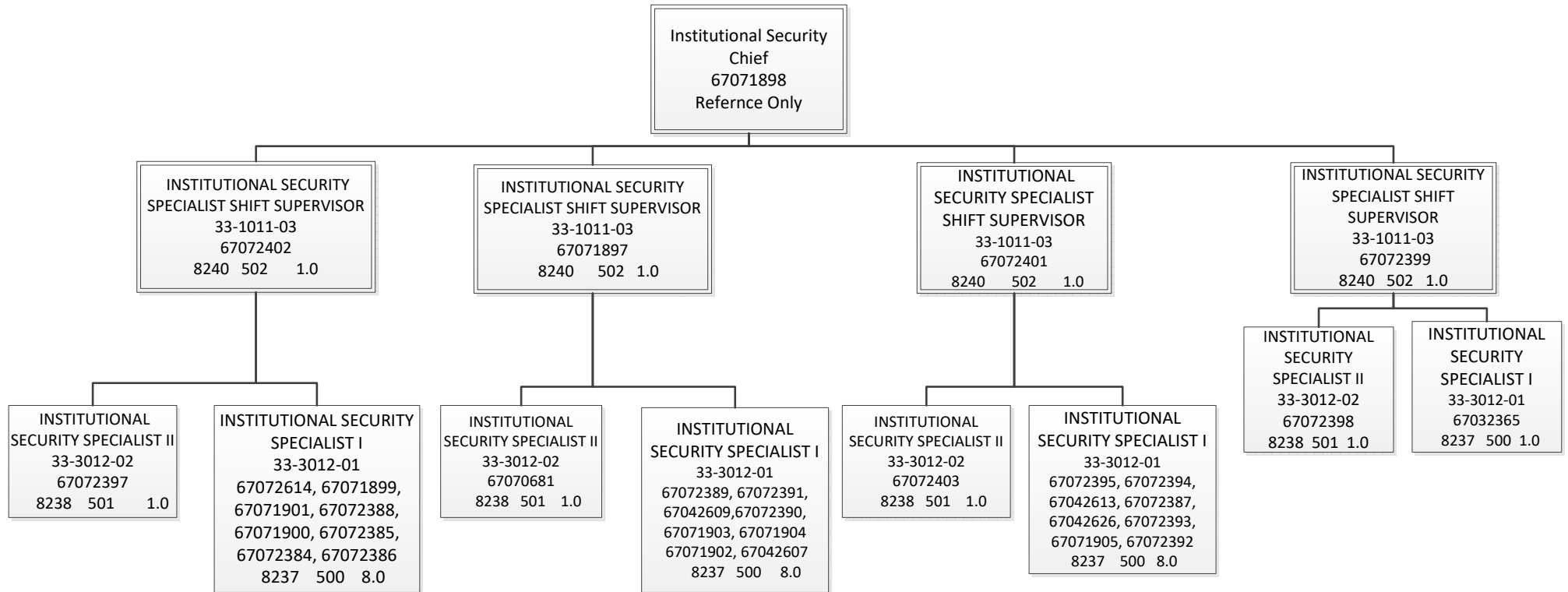
Yellow-New Reporting Structure
Red-Different Classification



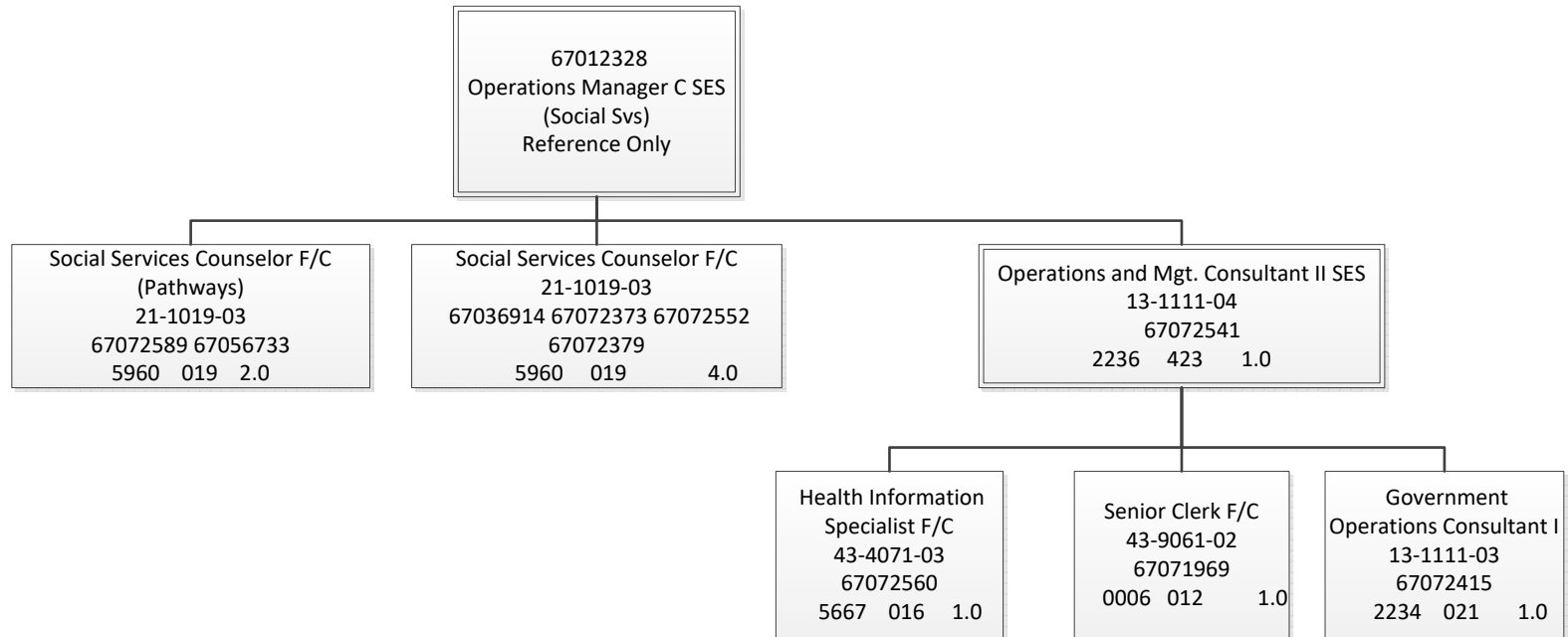
Yellow-New Reporting Structure
Red-Different Classification

DDDP
 Security

Agency for Persons with Disabilities



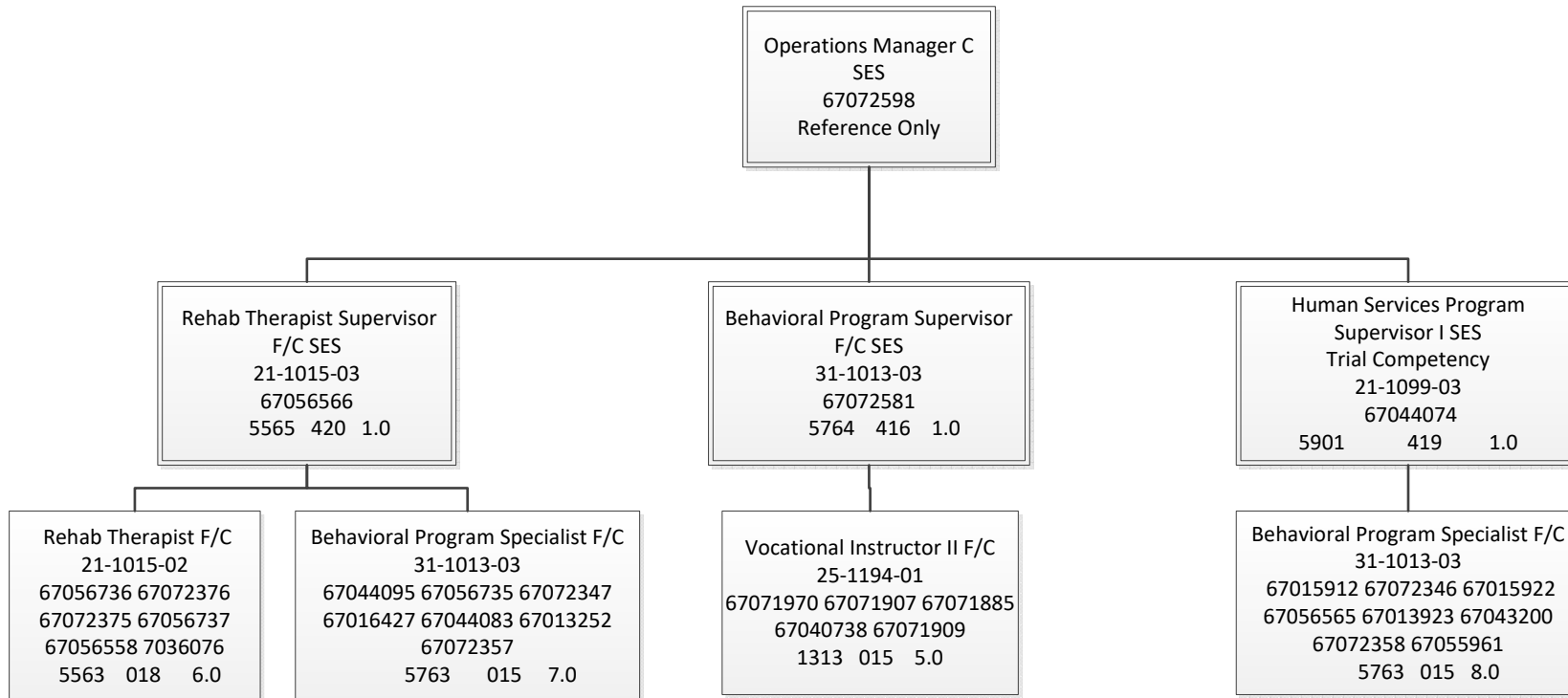
Yellow-New Reporting Structure
 Red-Different Classification



Yellow-New Reporting Structure
Red-Different Classification

Agency for Persons with Disabilities

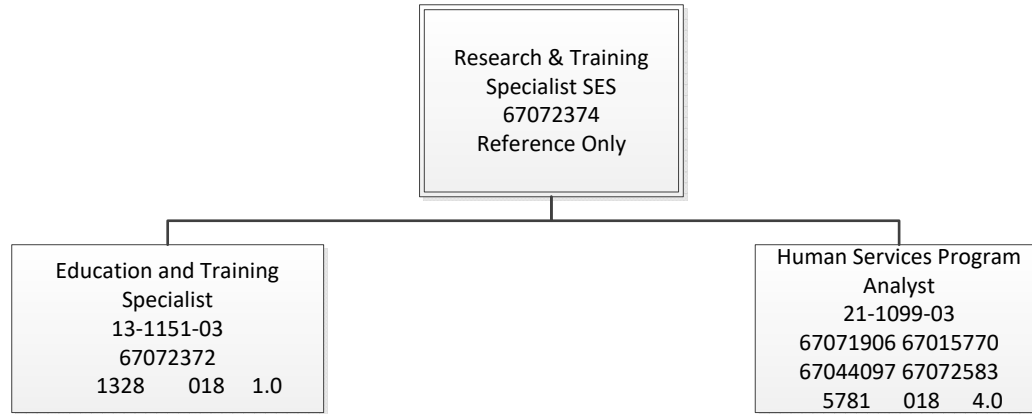
DDDP
 Programs



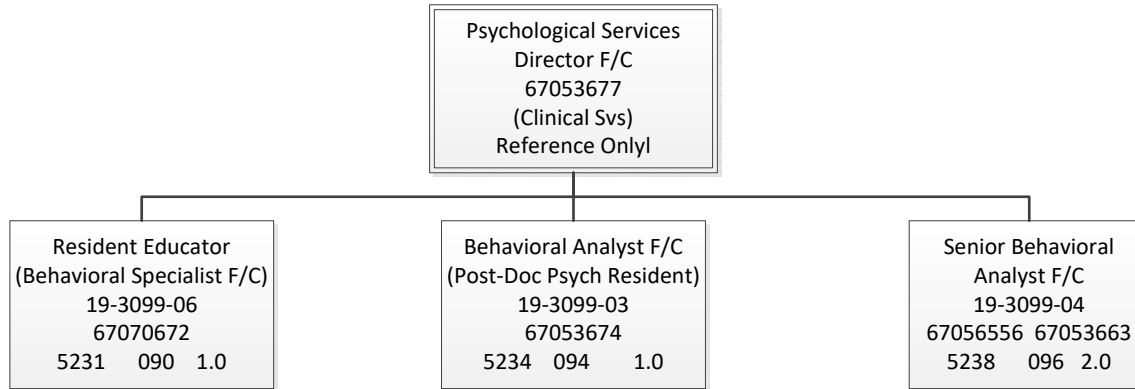
DDDP
Staff Development

Page 8
5.0 FTE
September 2021

Agency for Persons with Disabilities

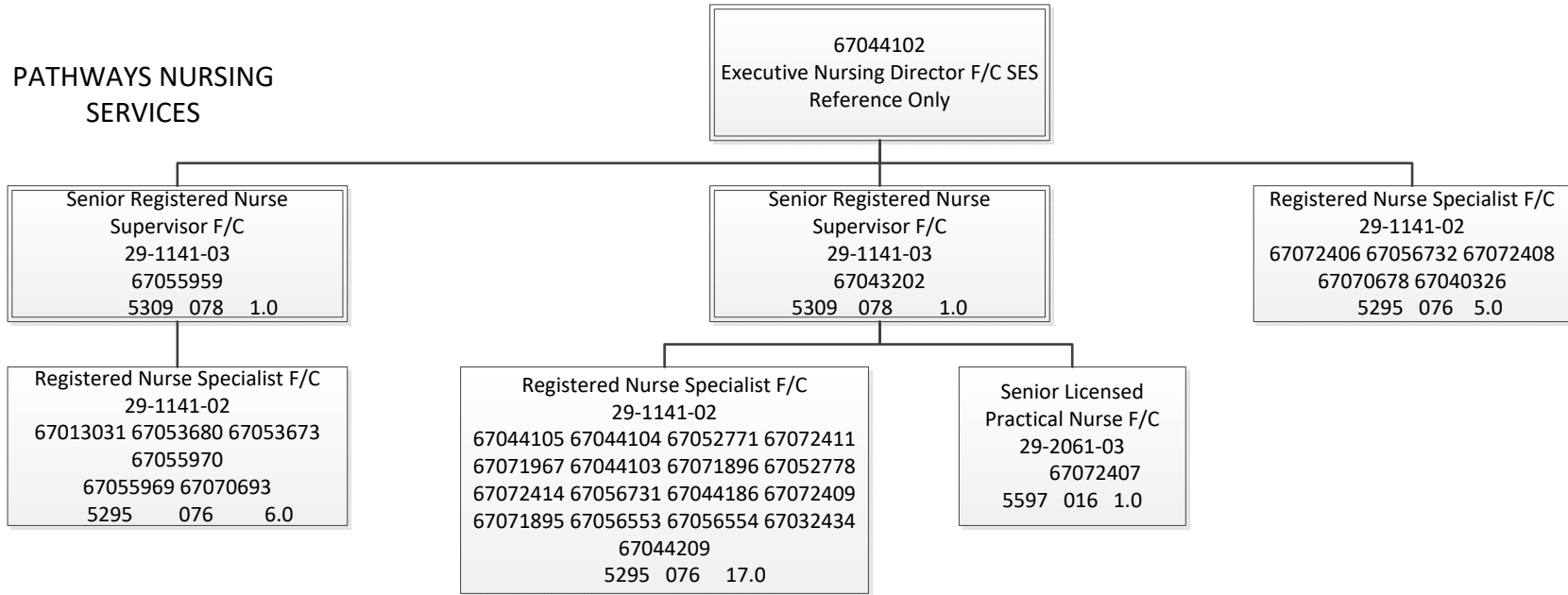


Yellow-New Reporting Structure
Red-Different Classification



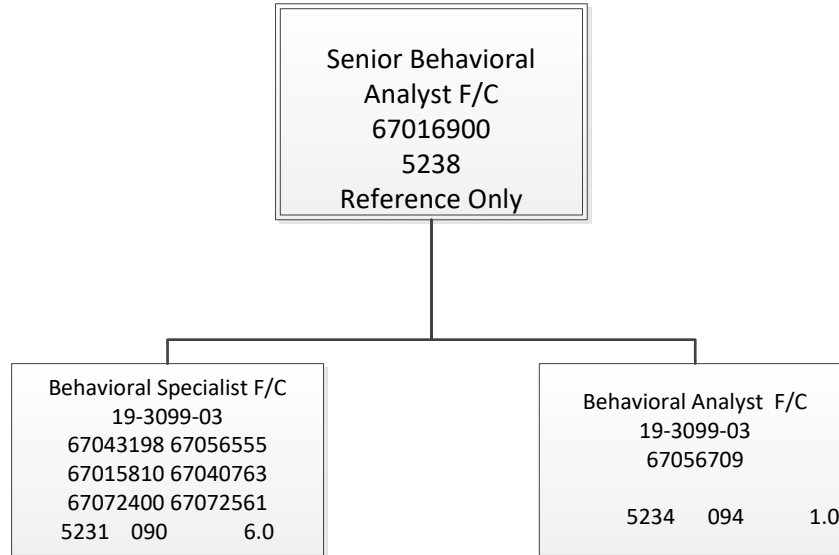
Yellow-New Reporting Structure
Red-Different Classification

**PATHWAYS NURSING
SERVICES**



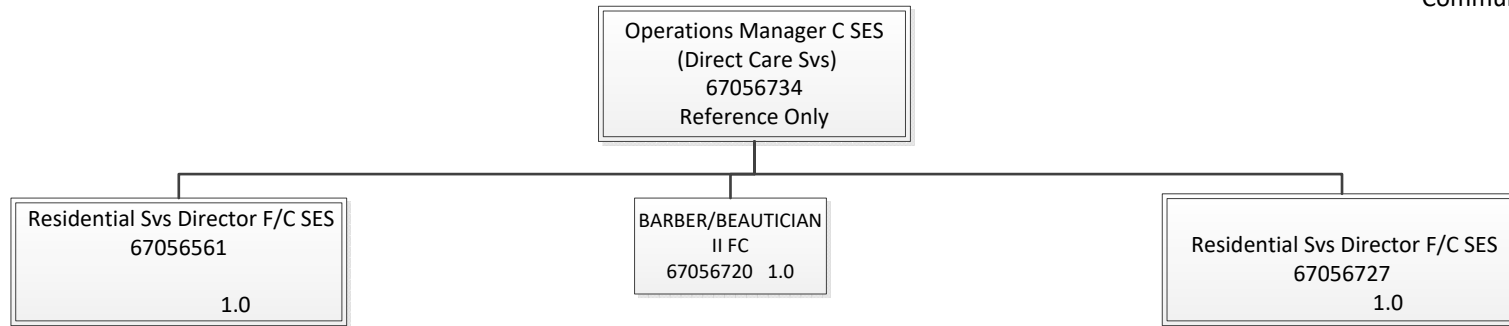
Yellow-New Reporting Structure
Red-Different Classification

DDDP/Pathways
Behavioral Services

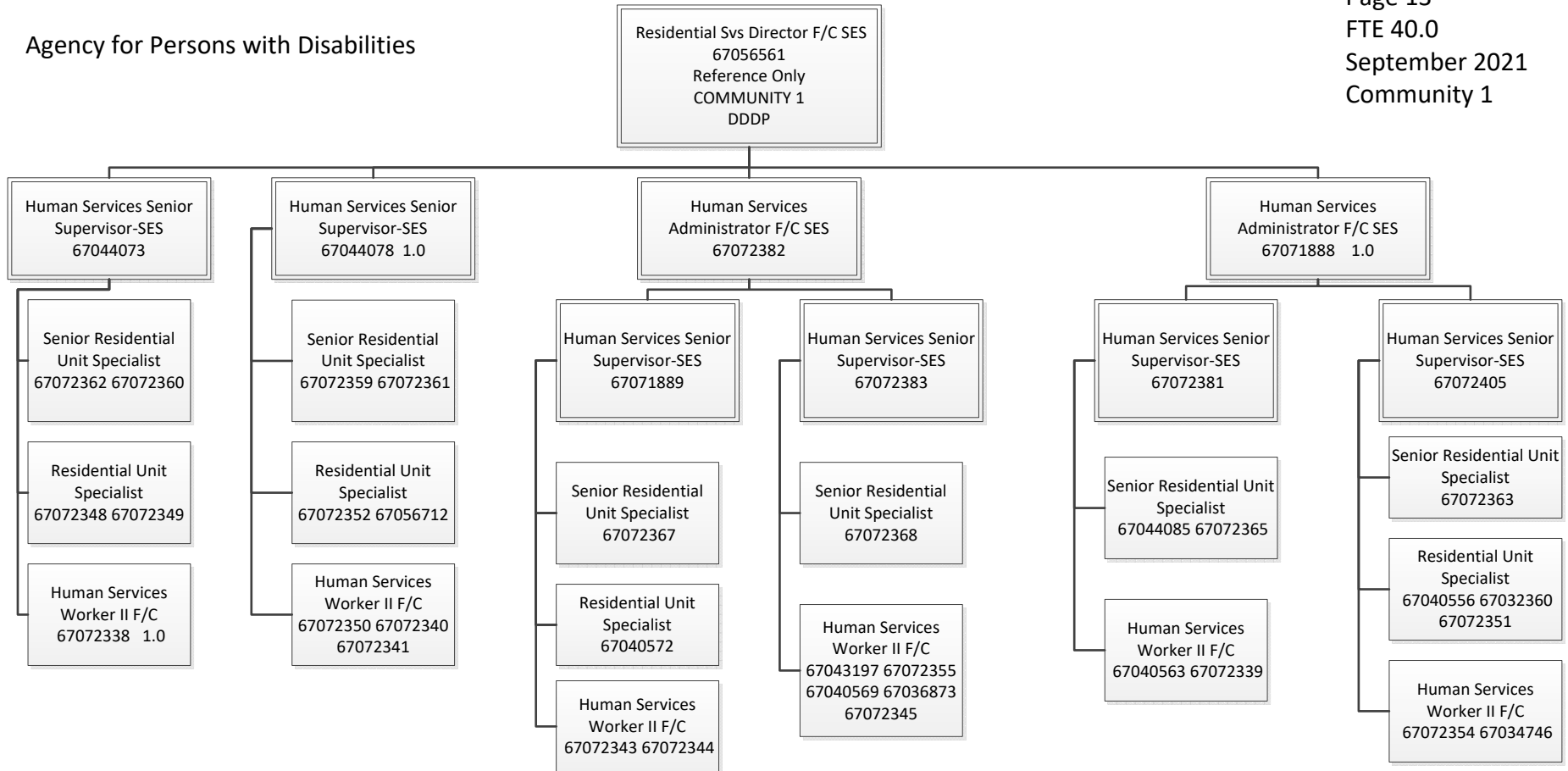


Agency for Persons with Disabilities

Page 12
FTE 3.0
Sept 2021
Communities 1 and 4

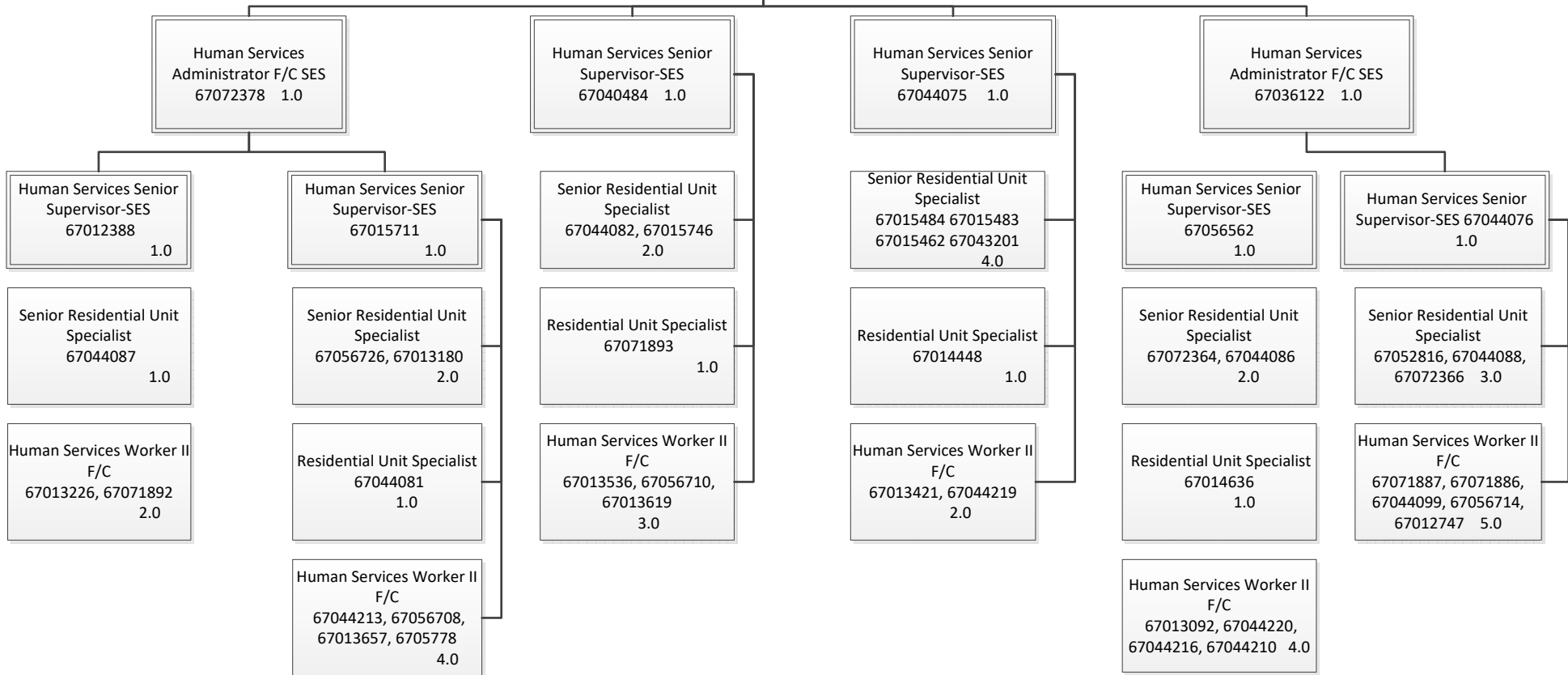


Yellow-New Reporting Structure
Red-Different Classification

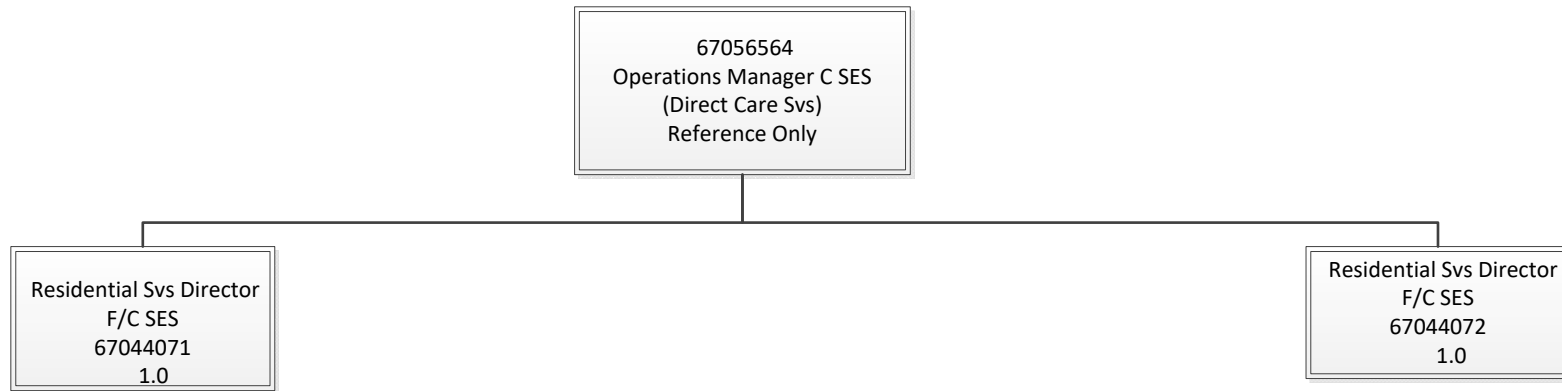


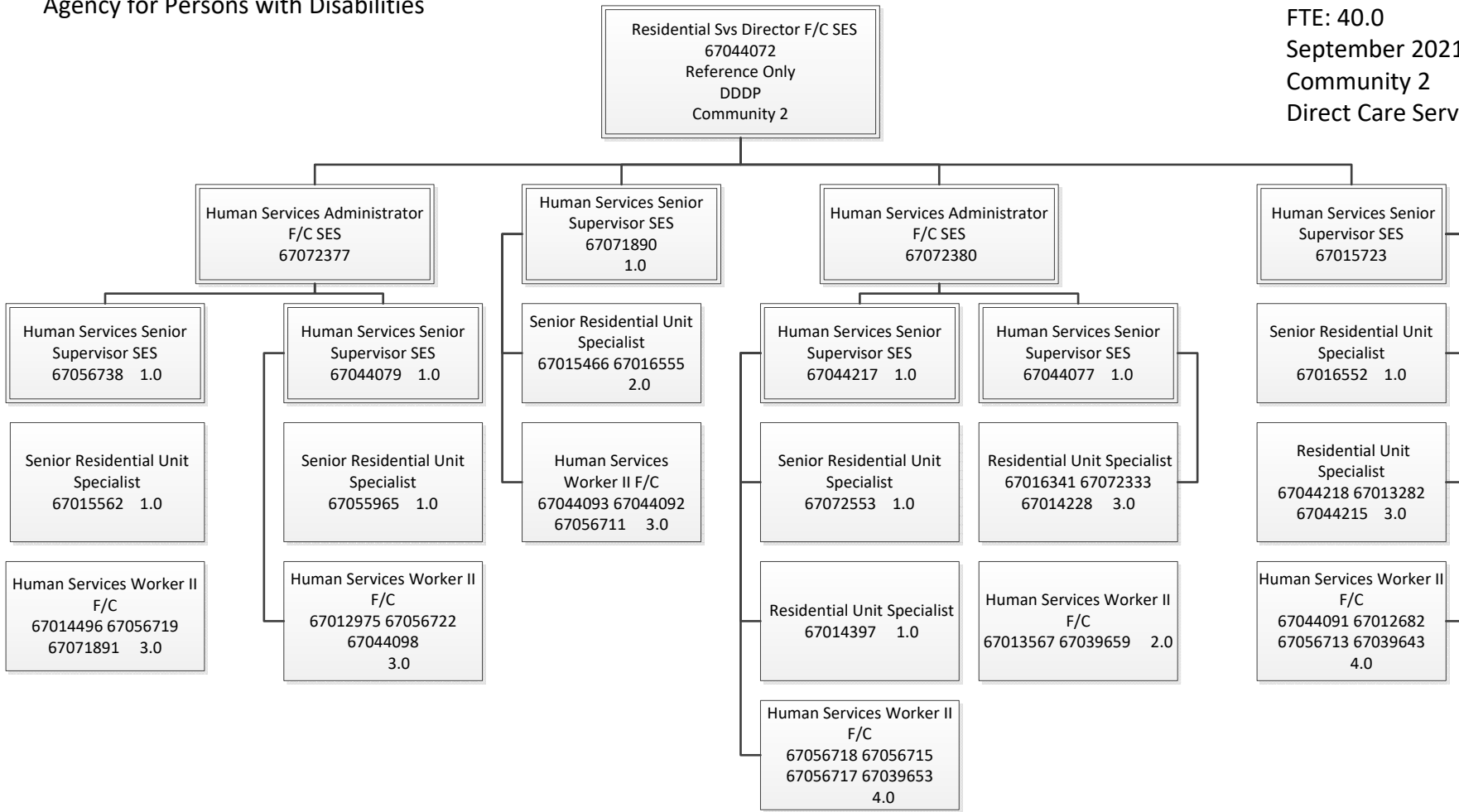
Agency for Persons with Disabilities

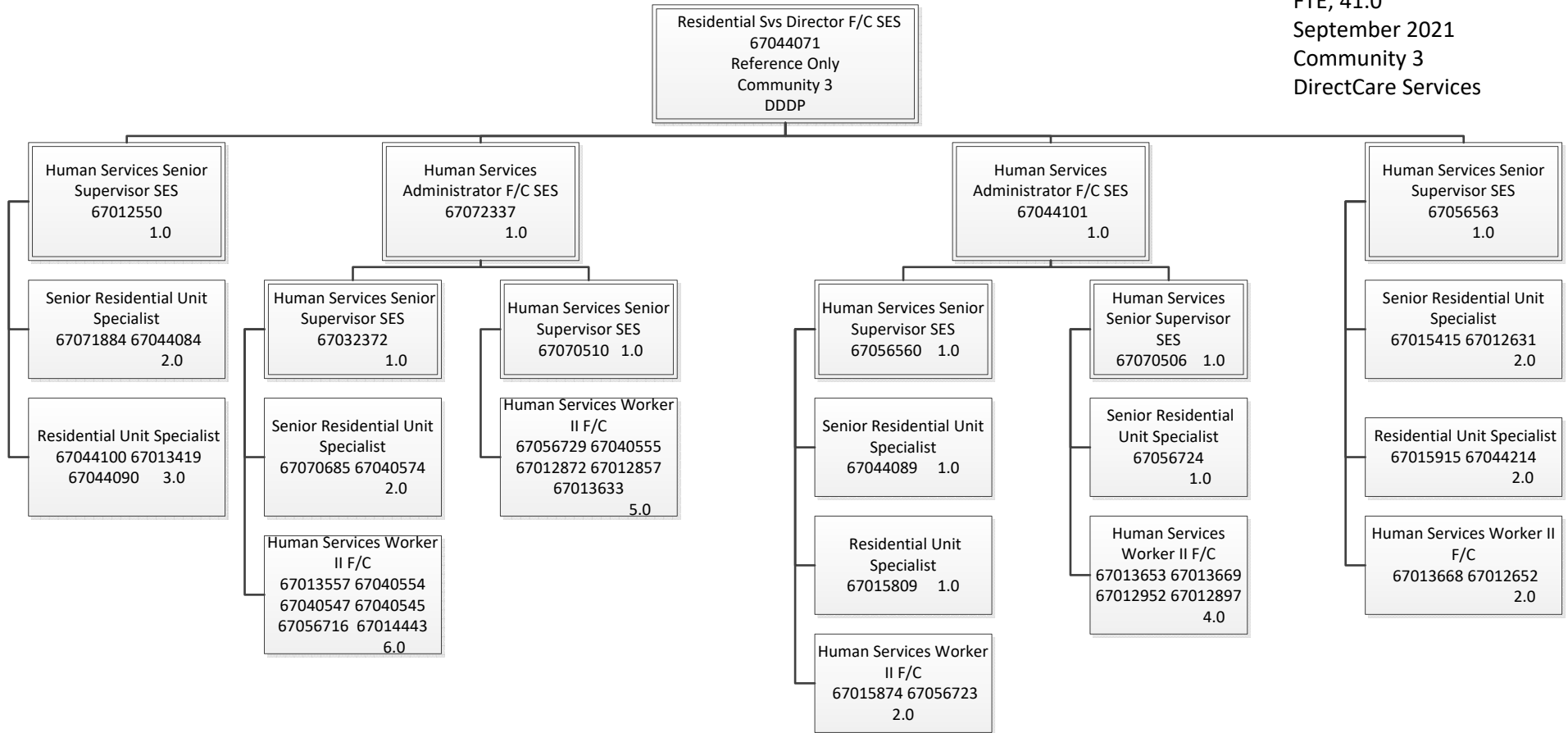
Residential Svcs Director F/C SES
 Reference Only
 Community 4
 DDDP



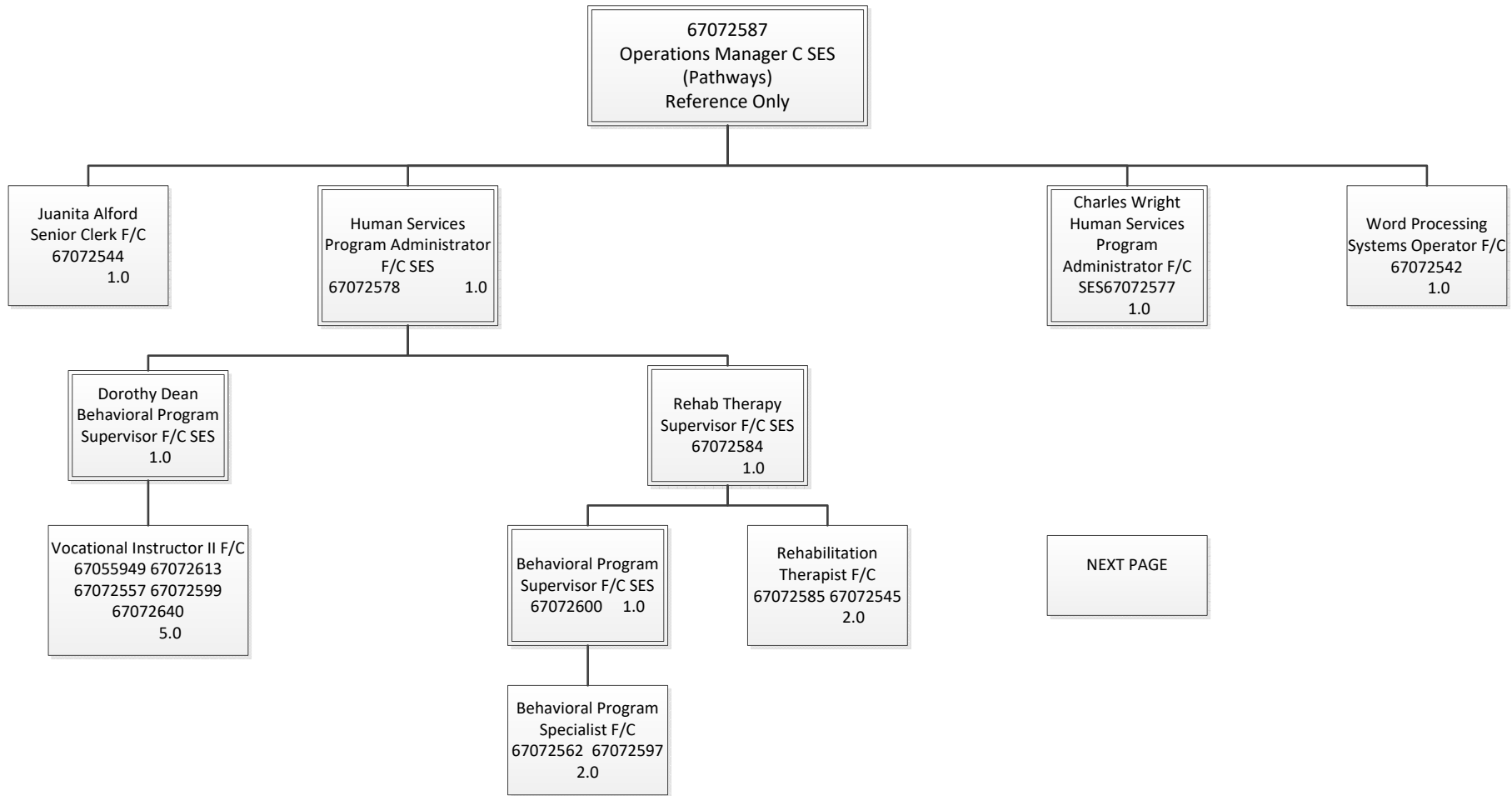
DDDP
Direct Care Services







Pathways

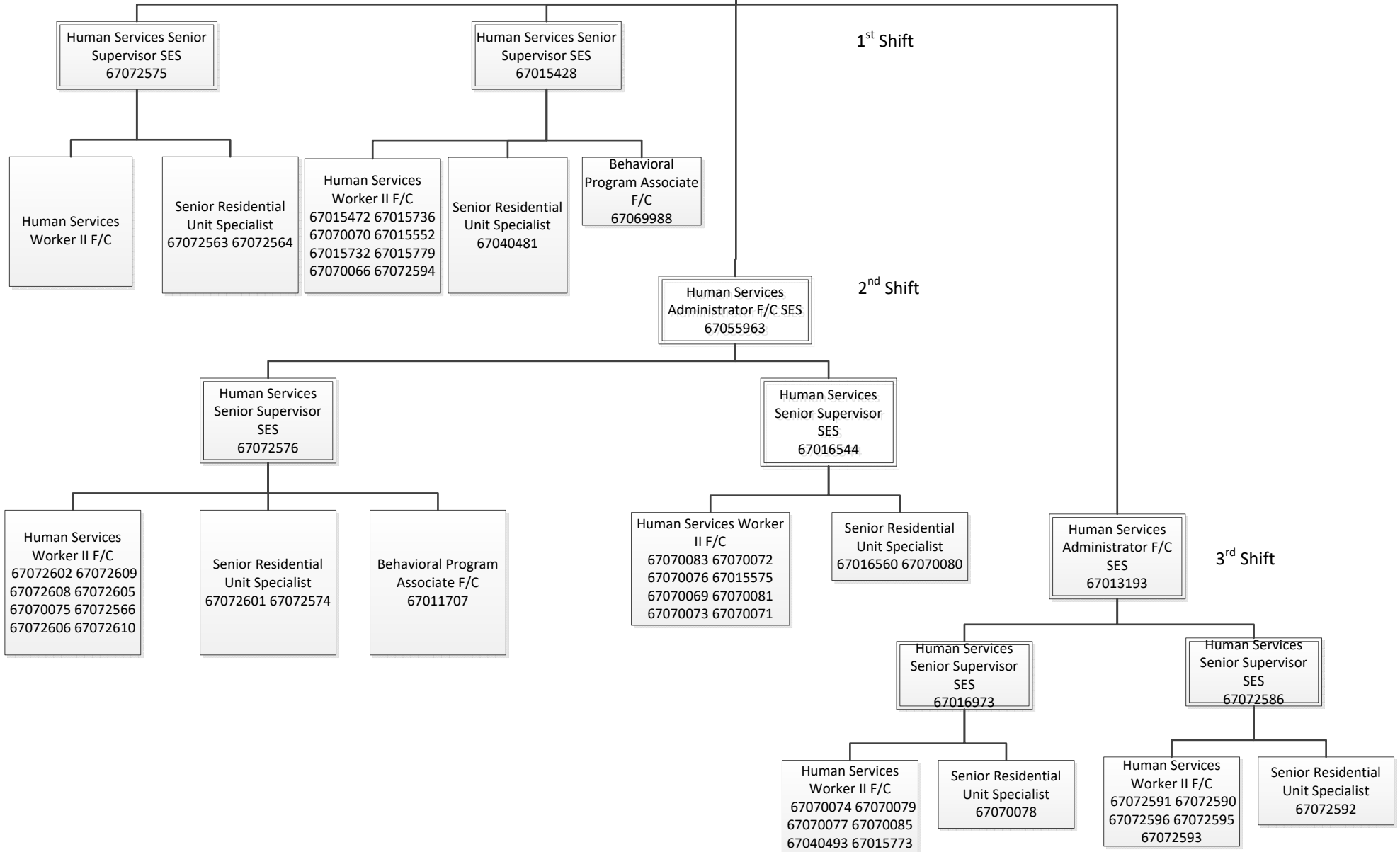


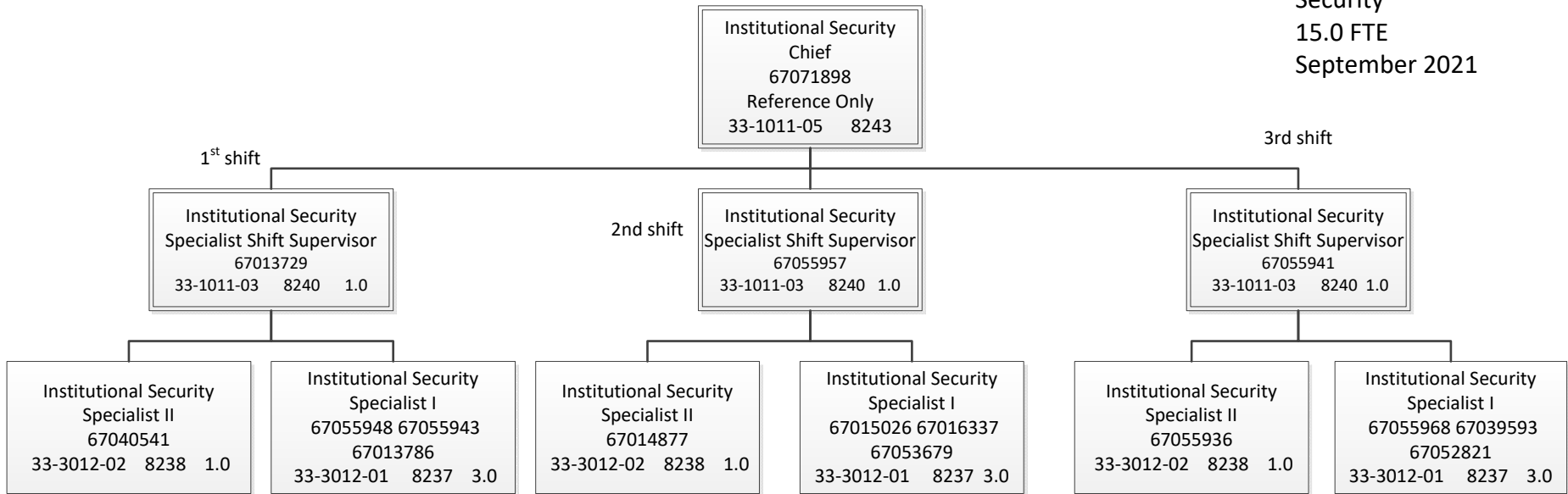
NEXT PAGE

Yellow-New Reporting Structure
Red-Different Classification

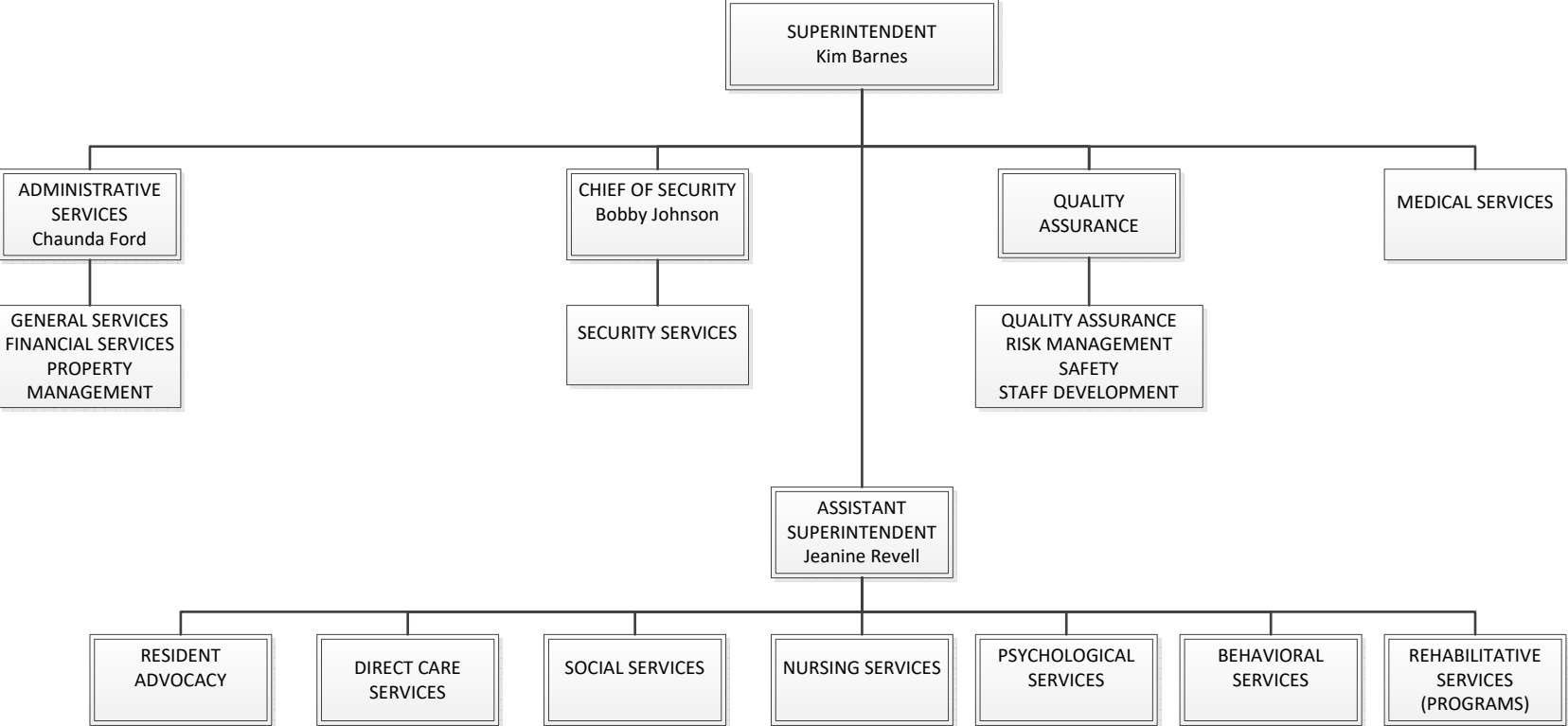
Agency for Persons with Disabilities

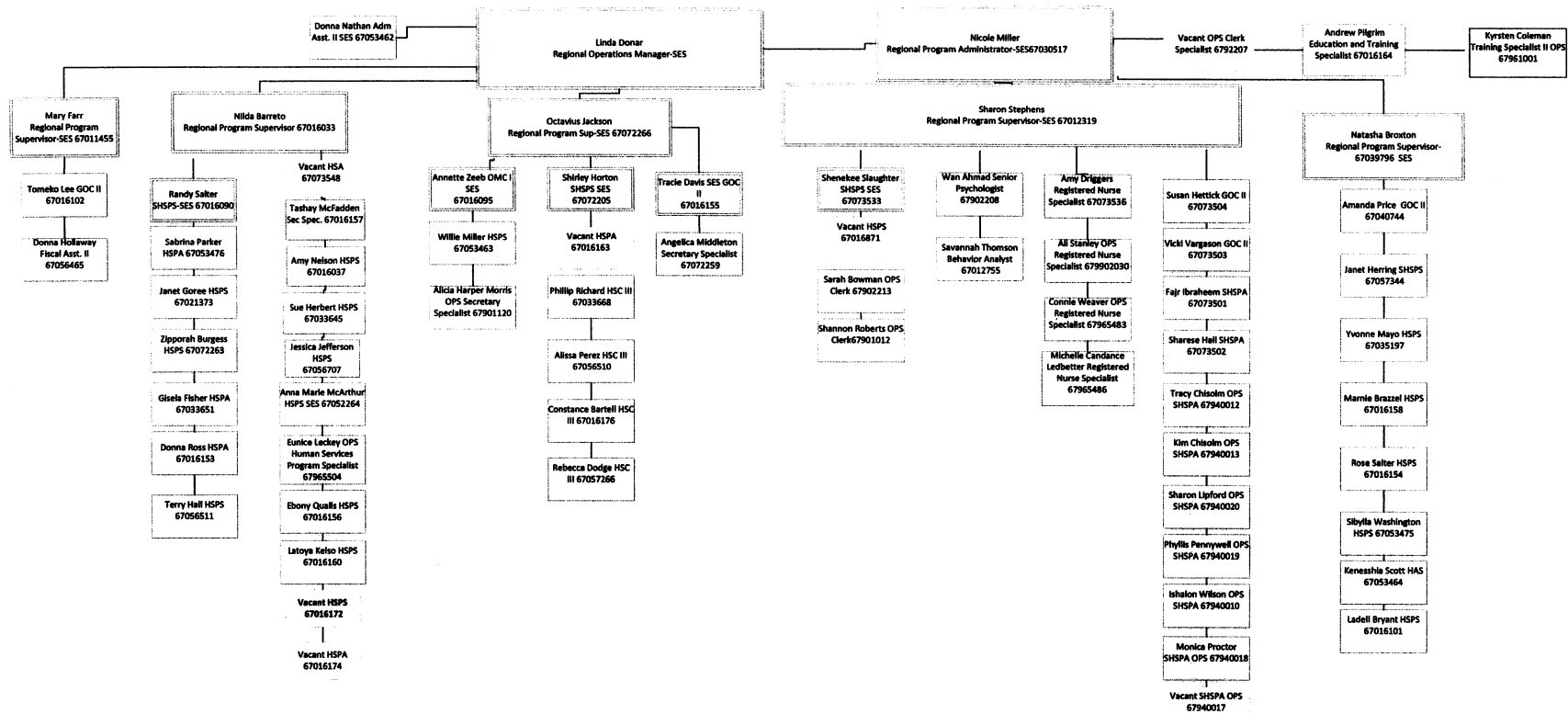
Residential Services
 Director F/C SES
 67072577
 Reference Only



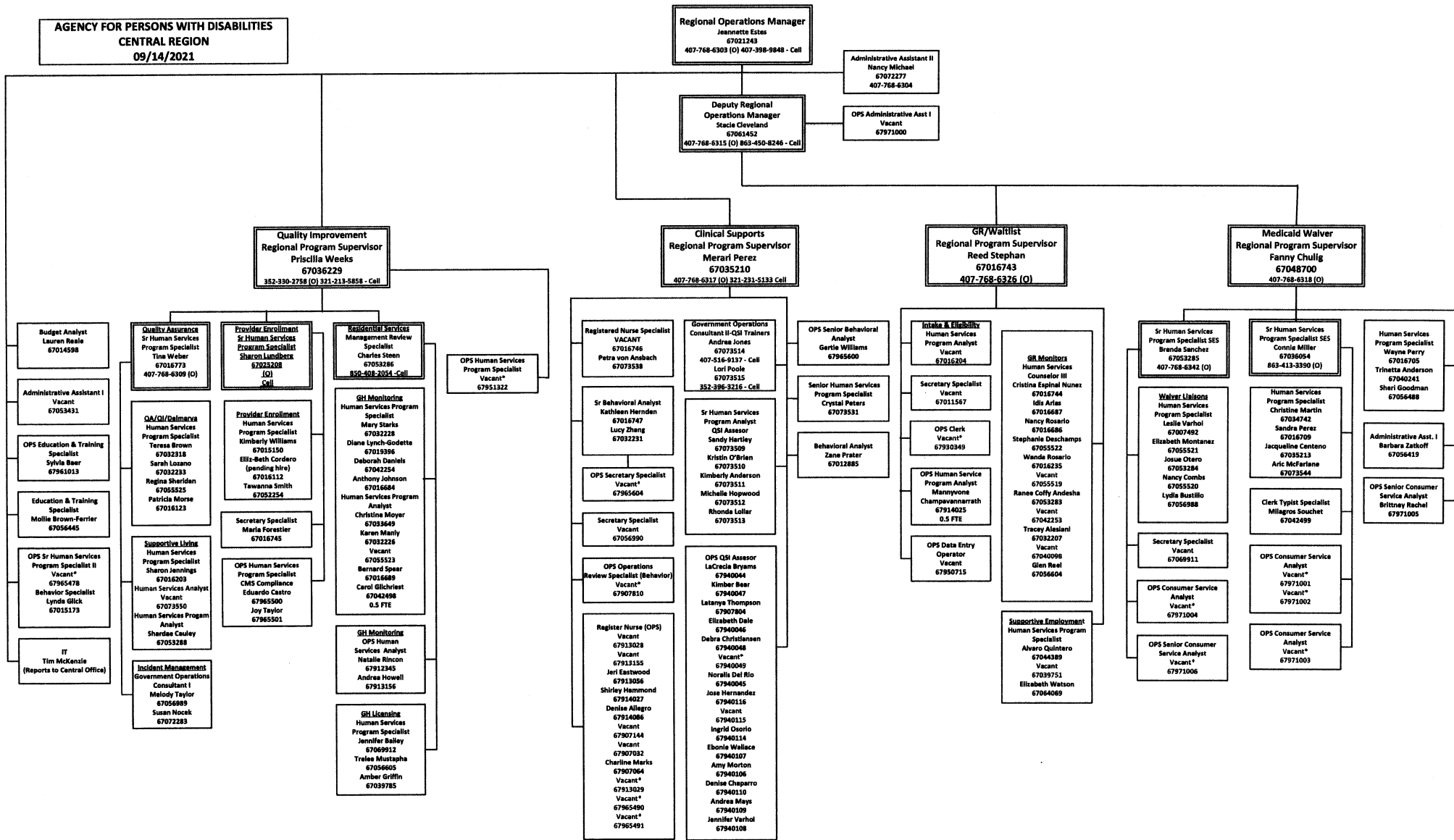


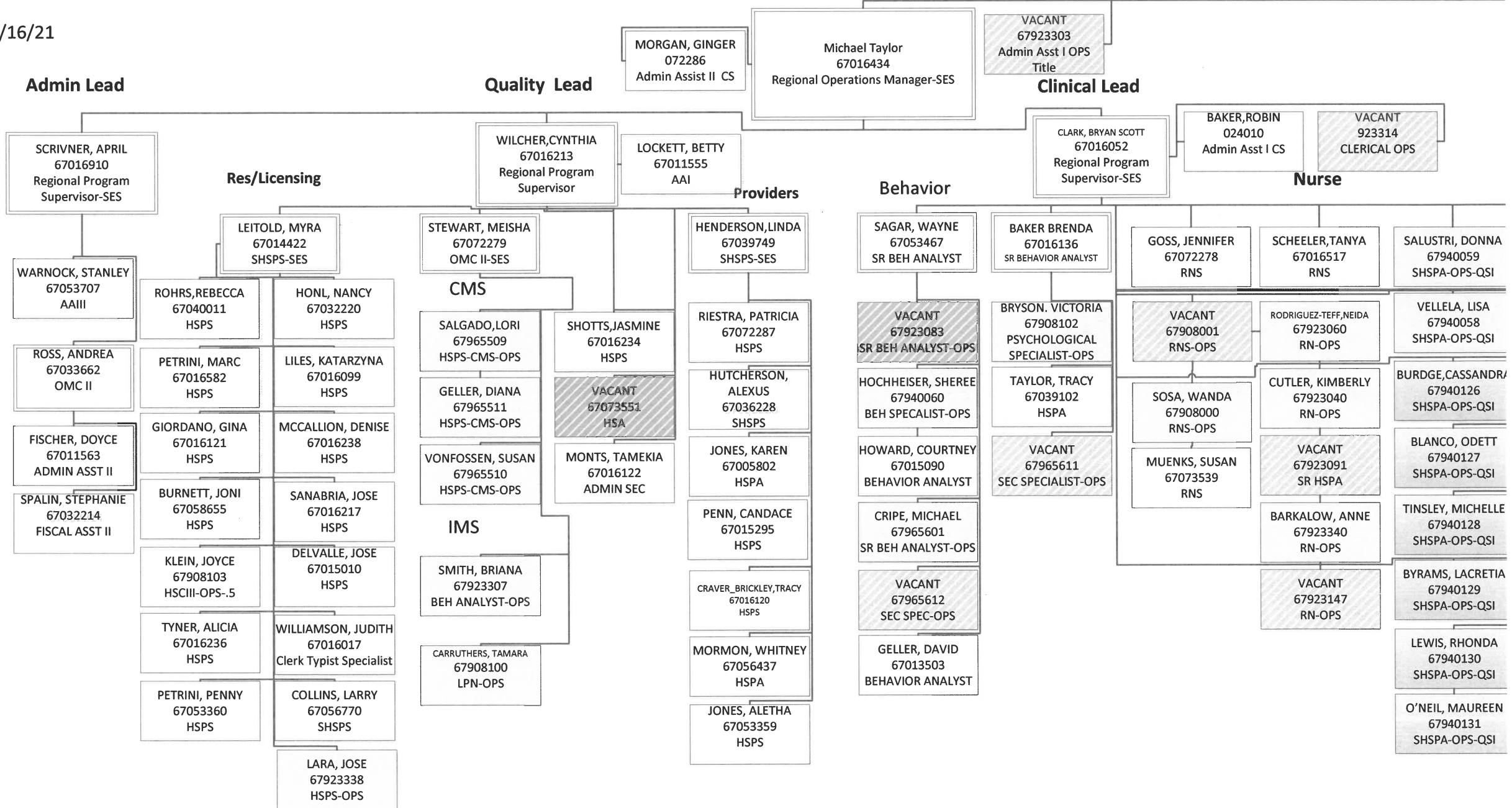
**The Agency for Persons with Disabilities
Developmental Disabilities Defendant Program and Pathways**





**AGENCY FOR PERSONS WITH DISABILITIES
CENTRAL REGION
09/14/2021**





Green stripe=Vacant OPS
 Pink Stripe=Vacant CS

Johnnie Coleman
67031730
Regional Program
Administrator-SES

BOONE, YOLANDA
67004549
AAI

COM/WAITLIST LEAD

NOEL, DEBRA
035215
Regional Program Sup-
SES

WAIVER LEAD

CANCELLIERE, COLLEEN
67053357
Regional Program Supervisor- SES

ORTIZ-CLAUDE,
MICHELLE
019011
ADMIN ASST I

QSI

Forensic

Iconnect train

GR

SE-SL

GR

CDC

NA
SI

BROTHER, LINDA
67940132
SHSOA-OPS-QSI

PAGAN, ANABELLE
67940133
SHSPA-OPS-QSI

BAEZ-HILDAGO, CATHELINE
67940134
SHSPA-OPS-QSI

WOODALL, RUBY
67940135
SHSPA-OPS-QSI

AMES, ANDREA
67940136
SHSPA-OPS-QSI

GRANDE, FREDA
67940137
SHSPA-OPS-QSI

YEARWOOD, SWANNA
67940138
SHSPA-OPS-QSI

PYLE-COLTON, CHRISAN
67941126
SHSPA-OPS-QSI

WILSON, JACALYN
67903127
SHSPA-OPS-QSI

OLSON, ANITA
67073520
GOCII

ULLOA, CHRISTI
67073521
GOCII

KURLYCHEK, MARY
67073516
SR HSPA

BUTLER, LEAURETTE
67073517
SR HSPA

WILSON, CHERITA
67073518
SR HSPA

DIAZ, NILSA
67073519
SR HSPA

LEE, MAE'RETHA
67016218
HSPA

FOWLER, MARIA
67056331
HSPA

OCCHIALINI, ALLISON
67073534
SR HSPS

SHORTER, CAROLINE
67053685
SR MANAGEMENT ANALYST II-
SES

SILVA, ABEL
67961099
TRAINING SPECIALIST
II-OPS

NICHOLS, SELPHINIA
67072280
ED & TRAINING SPEC

REDDING, JUDITH
016715
SHSPS-SES

BURNS, ALICIA
016704
HSCIII

O'BRYANT, BRITTNEY
058654
HSCIII

ESPIER, ISAAC
035214
HSCIII

HENDON, ANNE
032224
HSPA

Intake/Eligibility

BROOKS, CYNTHIA
016100
BEH SPECIALIST

ESTRELLA, STEPHANIE
016124
SHSPS

HOYOS, ANGELINA
057097
HSPS

CLARK, RHONDA
053417
HSPA

WATSON, LEAH
033659
HSPS

LACEY, MIKE
056655
HSPS

GOTTSCHALK, BRETT
060452
GOC II

GERSHOWITZ, GARY
016682
COMMUNITY
PLANNER

VACANT
952325
DATA ENTRY OPS

FAIN, DONNA
042577
SHSCS-SES

LOPEZ-GONZALES
MAGDALIA
016710
HSCIII

BORREGO, DALILA
053416
HSCIII

PEMBERTON, SONJA
057095
HSCIII

SCULLY, ASHLEY
032225
HSCIII

HERNANDEZ-RIZO
GRYCEL
016237
HSCIII

VEGA, CATHERINE
040093
HSCIII

MAJERICK, MARILYN
058656
HSCIII

BEST, DAWN
016071
SHSPS-SES

RAYNER, MARGIE
014883
HSPS

RICCIO, JEROME
005546
HSPS

CHAPMAN, KRISTEN
032216
ADMIN SEC

COSTELLO, JESSICA
032221
HSPS

McLEOD, KELSEY
073545
HSPS

VASQUEZ, JENNIFER
032219
HSPS

Algorithm

RUIZ-FARJARDO,
REBECCA
971019

VACANT
971020
Consumer Service
Analyst OPS

TOVES, CARL
011725
SHSPS- SES

RAO, NANCY
060786
HSPS

HORN, SCOTT
016703
HSPS

SWANIGAN, VIVIAN
004451
HSPS

HOWARD, JASMINE
056606
HSPS

LOPEZ, KATHLEEN
057482
HSPS

VACANT
015963
HSPS

BRUNING, LYNN
971018
ADMIN ASST OPS

BALAJADIA, TIM
971022
Consumer Service
Analyst OPS

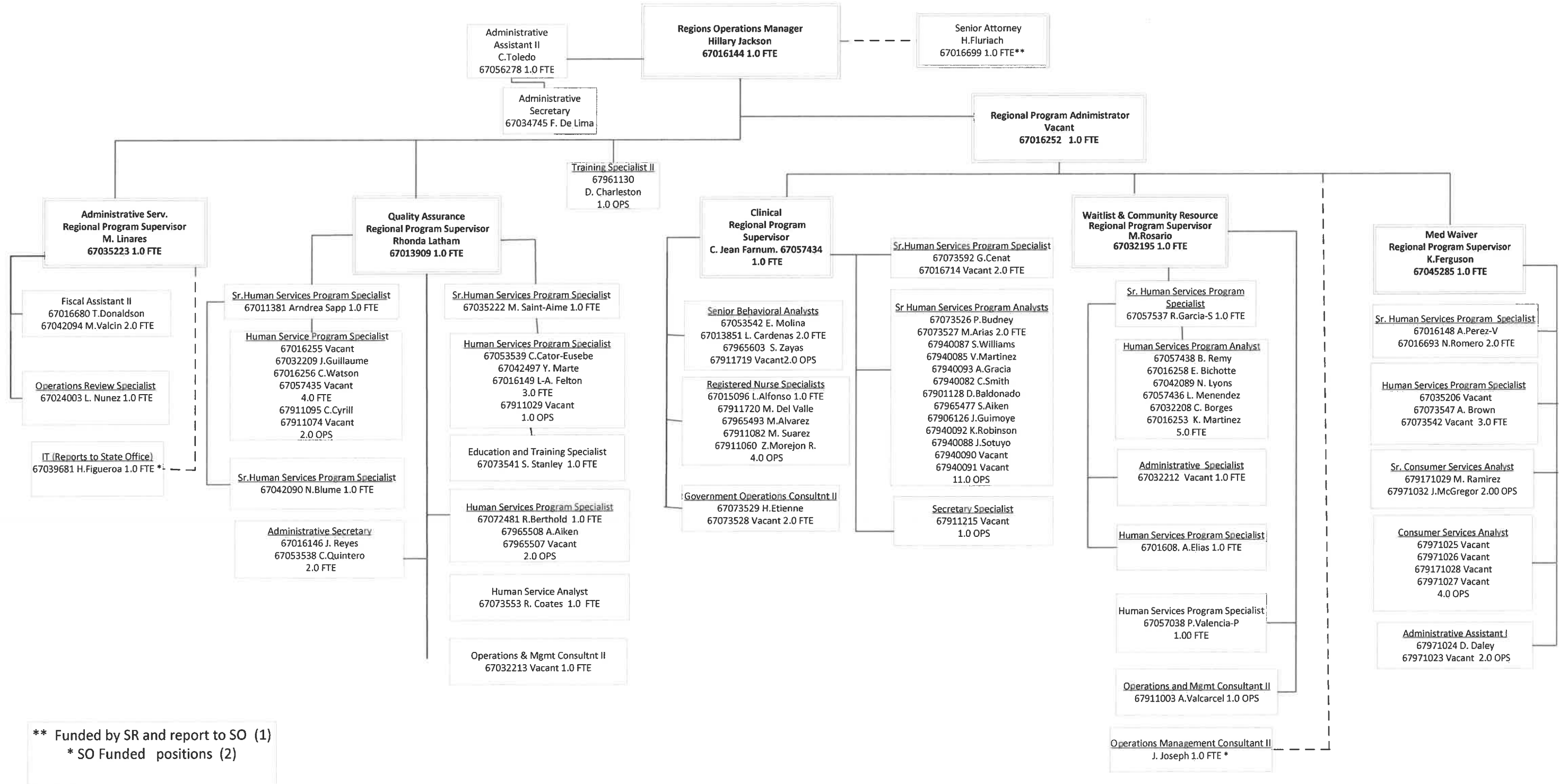
VACANT
971021
Consumer Service
Analyst- OPS

FLORES, SUBECCA
053686
HSPS

BURTON, CAROLYN
053687
CLERK TYPIST SPEC

VINCENT,
JONATHAN
016440
SHSPS- SES

Southern Region Proposed Table of Organization 09-2021 Rev.



** Funded by SR and report to SO (1)
* SO Funded positions (2)

AGENCY FOR PERSONS WITH DISABILITIES	FISCAL YEAR 2020-21			
SECTION I: BUDGET	OPERATING		FIXED CAPITAL OUTLAY	
TOTAL ALL FUNDS GENERAL APPROPRIATIONS ACT	1,579,795,918		5,563,428	
ADJUSTMENTS TO GENERAL APPROPRIATIONS ACT (Supplementals, Vetoes, Budget Amendments, etc.)	-85,841,393		-1,215,000	
FINAL BUDGET FOR AGENCY	1,493,954,525		4,348,428	
SECTION II: ACTIVITIES * MEASURES	Number of Units	(1) Unit Cost	(2) Expenditures (Allocated)	(3) FCO
Executive Direction, Administrative Support and Information Technology (2)				4,348,428
Home And Community Services Administration * Number of Medicaid Waiver clients enrolled	35,139	230.68	8,105,849	
Support Coordination * Number of people receiving support coordination	34,807	1,703.72	59,301,321	
Private Intermediate Care Facilities For The Developmentally Disabled * Number of adults receiving services in Developmental Service Public Facilities	490	194,264.51	95,189,611	
Program Management And Compliance * Based on Administrative Components of serving people in the Community and Institutional settings	62,392	247.90	15,466,883	
Adult Daily Living * Number of persons with disabilities served in Adult Daily Living	15,008	2,729.24	40,960,449	
Adult Day Service * Number of persons with disabilities served in Adult Day Training Service	9,594	1,958.91	18,793,737	
Adult Medical/Dental * Number of persons with disabilities served in Adult Medical/Dental	6,463	2,137.61	13,815,345	
Adult Respite Services * Number of persons with disabilities served in Adult Respite Services	510	3,459.28	1,764,234	
Adult Residential Habilitation * Number of persons with disabilities served in Adult Residential Habilitation	10,023	18,209.69	182,515,747	
Adult Specialized Therapies/ Assessments * Number of persons with disabilities served in Adult Specialized Assessments, Therapies, Equipment and Supplies	3,527	1,780.34	6,279,254	
Adult Supported Employment * Number of persons with disabilities served in Adult Supported Employment	1,343	1,636.08	2,197,255	
Adult Supported Living * Number of persons with disabilities served in Adult Supported Living and In Home Subsidies	12,715	8,477.08	107,786,018	
Adult Transportation * Number of persons with disabilities served in Adult Transportation	6,483	1,017.95	6,599,364	
Children Daily Living * Number of persons with disabilities served in Children Daily Living	151	16,843.54	2,543,375	
Children Day Services * Number of persons with disabilities served in Children Day Training Services	74	1,706.58	126,287	
Children Medical/Dental * Number of persons with disabilities served in Children Medical/Dental	146	1,537.18	224,429	
Children Respite Services * Number of persons with disabilities served in Children Respite Services	695	3,364.40	2,338,260	
Children Residential Habilitation * Number of persons with disabilities served in Children Residential Habilitation	426	17,963.54	7,652,467	
Children Specialized Therapies/ Assessments * Number of persons with disabilities served in Children Specialized Assessments, Therapies, Equipment and Supplies	26	1,315.23	34,196	
Children Support Employment * Number of persons with disabilities served in Children Supported Employment	8	9,252.13	74,017	
Children Supported Living * Number of persons with disabilities served in Children Supported Living and In Home Subsidies	128	3,532.41	452,149	
Children Transportation * Number of persons with disabilities served in Children Transportation	45	1,424.07	64,083	
Community Support Services * Number of persons served	17,221	422.41	7,274,287	
Forensic Care * Number of adults found incompetent to proceed who are provided competency training and custodial care in the Developmental Disabilities Defendant Program	192	158,548.57	30,441,325	
TOTAL			609,999,942	4,348,428
SECTION III: RECONCILIATION TO BUDGET				
PASS THROUGHS				
TRANSFER - STATE AGENCIES				
AID TO LOCAL GOVERNMENTS				
PAYMENT OF PENSIONS, BENEFITS AND CLAIMS				
OTHER				
REVERSIONS			883,954,626	
TOTAL BUDGET FOR AGENCY (Total Activities + Pass Throughs + Reversions) - Should equal Section I above. (4)			1,493,954,568	4,348,428

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

- (1) Some activity unit costs may be overstated due to the allocation of double budgeted items.
- (2) Expenditures associated with Executive Direction, Administrative Support and Information Technology have been allocated based on FTE. Other allocation methodologies could result in significantly different unit costs per activity.
- (3) Information for FCO depicts amounts for current year appropriations only. Additional information and systems are needed to develop meaningful FCO unit costs.
- (4) Final Budget for Agency and Total Budget for Agency may not equal due to rounding.

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

Agency: Agency for Persons with Disabilities Contact: 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 2021 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 2022-2023 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 2022-2023 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), rate increases for Medicaid Waiver providers, and HCBS Waiver Growth due to Significant Additional Needs	B	\$73.8 million GR	\$23.6 GR
b	Information Technology/Infrastructure iConnect (Client Data Management System)	B	\$6.8 million GR (Includes other agencies)	\$428 K nonrecurring GR
c	Fixed Capital Outlay	B	\$54.9 Million GR (Includes other agencies)	\$16.3 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.

The agency submitted LBR requests for reducing the waiting list, rate increases for behavioral services, additional administrative resources, and supported employment and internship programs. Due to changes in waiver operations related to SB 82, the agency is accessing future expenditures and will continue to work on the estimated need for the program.

* R/B = Revenue or Budget Driver



agency for persons with disabilities
State of Florida

**Legislative Budget Request
Fiscal Year 2022-23**

**Home and Community Services
67100100**

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 -23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Administrative Trust Fund
LAS/PBS Fund Number:	67100100
	2021

	Balance as of 6/30/2021		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, 07/01/21	(0)	(K)	0	(0)

*SWFS = Statewide Financial Statement

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

Office of Policy and Budget - June 2021

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2022-23

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, 07/01/21

Total all GLC's 5XXXX for governmental funds; 66,254 (A)
 GLC 539XX for proprietary and fiduciary funds

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description - Expenses - CF 0 (C)

SWFS Adjustment # and Description 0 (C)

Add/Subtract Other Adjustment(s):

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

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

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

Transfer to BE 67100300 (66,254) (D)

(D)

(D)

ADJUSTED BEGINNING TRIAL BALANCE: (0) (E)

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

DIFFERENCE: (0) (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 - 23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Operations and Maintenance Trust Fund
LAS/PBS Fund Number:	67100100
	2516

	Balance as of 6/30/2021		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(47,302,988)	(A)		(47,302,988)
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable		(D)		0
ADD: Transfer from 67100200	47,659,378	(E)		47,659,378
Total Cash plus Accounts Receivable	356,390	(F)	0	356,390
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	356,390	(H)		356,390
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, 07/01/21	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: 2022 - 23

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, 07/01/2021

Total all GLC's 5XXXX for governmental funds; [(37,153,204) (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 [37,123,314 (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 [29,889 (D)]

Adjustment to AP [(D)]

Adjustment to Fund Balance [(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: 2022 -23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Social Services Block Grant
LAS/PBS Fund Number:	67100100
	2639

	Balance as of 6/30/2021		SWFS* Adjustments		Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	13,552,839	(A)			13,552,839
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	13,552,839	(F)	0		13,552,839
LESS Allowances for Uncollectibles		(G)			0
LESS Approved "A" Certified Forwards	2,312,620	(H)			2,312,620
Approved "B" Certified Forwards		(H)			0
Approved "FCO" Certified Forwards	300,000	(H)			300,000
LESS: Transfer to BE 67100200	551,526	(E)			551,526
LESS: Transfer to BE 67100300	1,163,156	(E)			1,163,156
LESS: Transfer to BE 67100400	1,656,537	(E)			1,656,537
LESS: Transfer to BE 67100400	990,579	(E)			990,579
Unreserved Fund Balance, 07/01/21	6,578,421	(K)	0		6,578,421 **

Notes:

*SWFS = Statewide Financial Statement

** This amount should agree with Line 1, 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: 2022 - 23
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, 07/01/21	
Total all GLC's 5XXXX for governmental funds;	6,479,272 (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	(9,896) (C)
Approved "C" Carry Forward Total (FCO) per LAS/PBS	(300,000) (D)
Transfer to BE 67100200	(542,942) (D)
Transfer to BE 67100300	(1,069,580) (D)
Transfer to BE 67100400	(459,448) (D)
Transfer to BE 67100500	(206,298) (D)
SWFS Adjustment # and Description	(C)
Add/Subtract Other Adjustment(s):	
Approved "A" Carry Forward (Paybles) per LAS/PBS	(D)
PY Fund Balance adj (54900)	2,350,912 (D)
Current Compensated Absences Liability	320 (D)
Unreserved Fund Balance Adj (54900)	336,081 (D)
ADJUSTED BEGINNING TRIAL BALANCE:	6,578,421 (E)
UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)	6,578,421 (F)
DIFFERENCE:	(0) (G)*

***SHOULD EQUAL ZERO.**



agency for persons with disabilities
State of Florida

**Legislative Budget Request
Fiscal Year 2022-23**

**Program Management and
Compliance**

**67100200
Schedule I Series**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 -23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Administrative Trust Fund
LAS/PBS Fund Number:	67100200
	2021

	Balance as of 6/30/2021		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, 07/01/21	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: 2022-23

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, 07/01/21

Total all GLC's 5XXXX for governmental funds; 158,963 (A)
 GLC 539XX for proprietary and fiduciary funds

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description Expenses - CF (C)

 (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 (126,251) (D)

 (D)

 (D)

ADJUSTED BEGINNING TRIAL BALANCE: 32,712 (E)

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

DIFFERENCE: 32,712 (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 -23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Administrative Trust Fund
LAS/PBS Fund Number:	67100200
	2261

	Balance as of 6/30/2021		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, 07/01/21	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

Department Title:	Budget Period: 2021 - 22
Trust Fund Title:	Agency for Persons with Disabilities
LAS/PBS Fund Number:	Federal Grants Trust Fund - BE 67100200
	2261

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/20
 Total all GLC's 5XXXX for governmental funds; 39,507 (A)
 GLC 539XX for proprietary and fiduciary funds

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

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

Adjustment to Correct GL 31100 PY Payables 297 (C)

SWFS Adjustment # and Description (C)

Add/Subtract Other Adjustment(s):

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

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

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

(D)

(D)

(D)

ADJUSTED BEGINNING TRIAL BALANCE: 39,804 (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) 39,804 (F)

DIFFERENCE: 0 (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 - 23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Operations and Maintenance Trust Fund
LAS/PBS Fund Number:	67100200
	2516

	Balance as of 6/30/2021		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	66,710,570	(A)		66,710,570
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable	6,948,950	(D)	(4,146)	6,944,804
ADD: _____		(E)		0
Total Cash plus Accounts Receivable	73,659,520	(F)	(4,146)	73,655,374
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	1,079,023	(H)		1,079,023
Approved "B" Certified Forwards	1,335	(H)		1,335
Approved "FCO" Certified Forwards		(H)		0
LESS: Nonoperating A/P-SWCAP & GR Srv Chg	98,756	(I)		98,756
LESS: Transfer TO 67100100	47,659,378	(J)		47,659,378
LESS: Transfer TO 67100400	3,859,760	(J)		3,859,760
LESS: Transfer TO 67100500	38,700	(J)		38,700
Unreserved Fund Balance, 07/01/2021	20,922,568	(K)	(4,146)	20,918,422 **

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: 2022 - 23
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, 07/01/2021	
Total all GLC's 5XXXX for governmental funds;	56,474,158 (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	(37,123,314) (C)
Transfer to BE 67100500	(38,700) (C)
SWFS ADJUSTMENT	(4,146)
Add/Subtract Other Adjustment(s):	
Approved "B" Carry Forward (Encumbrances) per LAS/PBS	1,335 (D)
Approved "C" Carry Forward Total (FCO) per LAS/PBS	(D)
Compensated Absences Liability	(D)
Adjustment to Beginning Fund Balance	1,609,089 (D)
Adjustment to Fund Balance	(D)
	(D)
	(D)
ADJUSTED BEGINNING TRIAL BALANCE:	20,918,422 (E)
UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)	20,918,422 (F)
DIFFERENCE:	0 (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 -23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Social Services Block Grant
LAS/PBS Fund Number:	67100200
	2639

	Balance as of 6/30/2021		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	551,526	(E)			551,526
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: _____		(J)			0
Unreserved Fund Balance, 07/01/21	(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: 2022 - 23	
Department Title:	<u>Agency for Persons with Disabilities</u>
Trust Fund Title:	<u>Social Services Block Grant - 67100200</u>
LAS/PBS Fund Number:	<u>2639</u>

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/21	
Total all GLC's 5XXXX for governmental funds;	
GLC 539XX for proprietary and fiduciary funds	<input type="text" value="(542,942)"/> (A)

Subtract Nonspendable Fund Balance (GLC 56XXX)	<input type="text"/> (B)
---	--------------------------

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description	<input type="text"/> (C)
-----------------------------------	--------------------------

SWFS Adjustment # and Description	<input type="text"/> (C)
-----------------------------------	--------------------------

Add/Subtract Other Adjustment(s):

Approved "B" Carry Forward (Encumbrances) per LAS/PBS	<input type="text"/> (D)
---	--------------------------

Approved "C" Carry Forward Total (FCO) per LAS/PBS	<input type="text"/> (D)
--	--------------------------

A/P not C/F-Operating Categories	<input type="text"/> (D)
----------------------------------	--------------------------

Transfer from BE 67100100	<input type="text" value="542,942"/> (D)
---------------------------	--

Unreserved Fund Balance Adj (54900)	<input type="text"/> (D)
-------------------------------------	--------------------------

<input type="text"/> (D)

ADJUSTED BEGINNING TRIAL BALANCE:	<input type="text" value="(0)"/> (E)
--	--------------------------------------

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)	<input type="text" value="0"/> (F)
--	------------------------------------

DIFFERENCE:	<input type="text" value="(0)"/> (G)*
--------------------	---------------------------------------

***SHOULD EQUAL ZERO.**



agency for persons with disabilities
State of Florida

**Legislative Budget Request
Fiscal Year 2022-23**

**Developmental Disabilities Public
Facilities**

67100300

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 -23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Administrative Trust Fund
LAS/PBS Fund Number:	67100300
	2021

	Balance as of 6/30/2021		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, 07/01/21	(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 2021

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2022-23

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, 07/01/21
 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: 2022 - 23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Operations and Maintenance Trust Fund
LAS/PBS Fund Number:	67100300
	2516

	Balance as of 6/30/2021		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, 07/01/21	5,297,157	(K)	0	5,297,157 **

Notes:

*SWFS = Statewide Financial Statement

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

Office of Policy and Budget - June 2021

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2022 - 23

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, 07/01/2021
Total all GLC's 5XXXX for governmental funds; 5,297,157 (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: 5,297,157 (E)

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) 5,297,157 (F)

DIFFERENCE: (0) (G)*

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

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

Budget Period: 2022 -23
 Agency for Persons with Disabilities
 Social Services Block Grant
 67100300
 2639

	Balance as of 6/30/2021		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(733,784)	(A)		(733,784)
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	429,372	(F)	0	429,372
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards		(H)		0
Approved "B" Certified Forwards		(H)		0
Approved "FCO" Certified Forwards	429,372	(H)		429,372
LESS: Other Accounts Payable (Nonoperating)		(I)		0
LESS: _____		(J)		0
Unreserved Fund Balance, 07/01/21	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 2021

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2022 - 23
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, 07/01/21
 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 [(429,372.05) (D)]

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

Transfer from BE 67100100 [1,069,580.05 (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 2022-23**

**Developmental Disabilities Centers-
Civil Program**

67100400

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 - 23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Operations & Maintenance Trust Fund
LAS/PBS Fund Number:	67100400
	2516

	Balance as of 6/30/2021		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	2,842,451	(A)		2,842,451
ADD: Other Cash (See Instructions)		(B)		0
ADD: Investments		(C)		0
ADD: Outstanding Accounts Receivable	1,789,434	(D)		1,789,434
ADD: Transfer FROM 67100200	3,859,760	(E)		3,859,760
Total Cash plus Accounts Receivable	8,491,645	(F)	0	8,491,645
LESS Allowances for Uncollectibles		(G)		0
LESS Approved "A" Certified Forwards	1,222,858	(H)		1,222,858
Approved "B" Certified Forwards	28,479	(H)		28,479
Approved "FCO" Certified Forwards	7,240,308	(H)		7,240,308
LESS: Other Accounts Payable (Nonoperating)		(I)		0
LESS: _____		(J)		0
Unreserved Fund Balance, 07/01/21	(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 2021

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC

Budget Period: 2022 - 23

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, 07/01/2021

Total all GLC's 5XXXX for governmental funds; 2,082,412 (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 (28,479) (D)

Approved "C" Carry Forward Total (FCO) per LAS/PBS (7,240,308) (D)

Compensated Absences Liability (D)

Adjustment to AP (D)

PY Adjustment to beginning Fund Balance 5,186,375 (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: 2022 -23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Social Services Block Grant
LAS/PBS Fund Number:	67100400
	2639

	Balance as of 6/30/2021		SWFS* Adjustments		Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(912,821)	(A)			(912,821)
ADD: Other Cash (See Instructions)		(B)			0
ADD: Investments		(C)			0
ADD: Outstanding Accounts Receivable		(D)			0
ADD: Transfer from BE 67100100	1,656,537	(E)			1,656,537
Total Cash plus Accounts Receivable	743,716	(F)	0		743,716
LESS Allowances for Uncollectibles		(G)			0
LESS Approved "A" Certified Forwards	28,395	(H)			28,395
Approved "B" Certified Forwards		(H)			0
Approved "FCO" Certified Forwards	715,321	(H)			715,321
LESS: Other Accounts Payable (Nonoperating)		(I)			0
LESS: Transfer to BE 67100200		(J)			0
LESS: _____		(J)			0
LESS: _____		(J)			0
Unreserved Fund Balance, 07/01/21	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: 2022 - 23
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, 07/01/21
 Total all GLC's 5XXXX for governmental funds; 255,872 (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 (715,321) (D)

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

Transfer from BE 67100100 459,448 (D)

(D)

(D)

ADJUSTED BEGINNING TRIAL BALANCE: (0) (E)

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

DIFFERENCE: (0) (G)*

***SHOULD EQUAL ZERO.**



agency for persons with disabilities
State of Florida

**Legislative Budget Request
Fiscal Year 2022-23**

**Developmental Disabilities Centers-
Forensic Program**

67100500

Schedule I Series

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 - 23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Operations & Maintenance Trust Fund
LAS/PBS Fund Number:	67100500
	2516

	Balance as of 6/30/2021		SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(38,700)	(A)		(38,700)
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	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: _____		(J)		0
Unreserved Fund Balance, 07/01/21	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:	2022 - 23
Department Title:	<u>Agency for Persons with Disabilities</u>
Trust Fund Title:	<u>Operations and Maintenance Trust Fund - BE 67100500</u>
LAS/PBS Fund Number:	<u>2516</u>

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/2021

Total all GLC's 5XXXX for governmental funds;	<input type="text" value="(38,700)"/>	(A)
GLC 539XX for proprietary and fiduciary funds		

Subtract Nonspendable Fund Balance (GLC 56XXX)	<input type="text"/>	(B)
---	----------------------	-----

Add/Subtract Statewide Financial Statement (SWFS) Adjustments :

SWFS Adjustment # and Description	<input type="text"/>	(C)
-----------------------------------	----------------------	-----

SWFS Adjustment # and Description	<input type="text"/>	(C)
-----------------------------------	----------------------	-----

Add/Subtract Other Adjustment(s):

Approved "B" Carry Forward (Encumbrances) per LAS/PBS	<input type="text"/>	(D)
---	----------------------	-----

Approved "C" Carry Forward Total (FCO) per LAS/PBS	<input type="text"/>	(D)
--	----------------------	-----

Compensated Absences Liability	<input type="text"/>	(D)
--------------------------------	----------------------	-----

Adjustment to AP	<input type="text"/>	(D)
------------------	----------------------	-----

TRANSFER FROM BE 67100200	<input type="text" value="38,700"/>	(D)
---------------------------	-------------------------------------	-----

<input type="text"/>	(D)
----------------------	-----

ADJUSTED BEGINNING TRIAL BALANCE:	<input type="text" value="0"/>	(E)
--	--------------------------------	-----

UNRESERVED FUND BALANCE, SCHEDULE IC (Line K)	<input type="text" value="0"/>	(F)
--	--------------------------------	-----

DIFFERENCE:	<input type="text" value="0"/>	(G)*
--------------------	--------------------------------	------

***SHOULD EQUAL ZERO.**

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2022 -23
Trust Fund Title:	Agency for Persons with Disabilities
Budget Entity:	Social Services Block Grant
LAS/PBS Fund Number:	67100500
	2639

	Balance as of 6/30/2021		SWFS* Adjustments		Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	(990,579)	(A)			(990,579)
ADD: Other Cash (See Instructions)		(B)			0
ADD: Investments		(C)			0
ADD: Outstanding Accounts Receivable		(D)			0
ADD: Transfer from BE 67100100	990,579	(E)			990,579
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, 07/01/21	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:	<u>2022 - 23</u>
Department Title:	<u>Agency for Persons with Disabilities</u>
Trust Fund Title:	<u>Social Services Block Grant - 67100500</u>
LAS/PBS Fund Number:	<u>2639</u>

BEGINNING TRIAL BALANCE:

Total Fund Balance Per FLAIR Trial Balance, 07/01/21
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 INCIDENT MANAGEMENT SYSTEM

For Fiscal Year 2022-23



September 15, 2021

AGENCY FOR PERSONS WITH DISABILITIES

Contents

I.	Schedule IV-B Cover Sheet.....	2
	General Guidelines.....	3
	Documentation Requirements.....	3
II.	Schedule IV-B Business Case – Strategic Needs Assessment.....	4
	A. Background and Strategic Needs Assessment	4
	1. Business Need	4
	2. Business Objectives.....	5
	B. Baseline Analysis.....	5
	1. Current Business Process(es)	5
	2. Assumptions and Constraints	6
	C. Proposed Business Process Requirements	6
	1. Proposed Business Process Requirements.....	6
	2. Business Solution Alternatives.....	6
	3. Rationale for Selection	6
	4. Recommended Business Solution	6
	D. Functional and Technical Requirements.....	6
III.	Success Criteria	7
IV.	Schedule IV-B Benefits Realization and Cost Benefit Analysis.....	7
	A. Benefits Realization Table.....	7
	B. Cost Benefit Analysis (CBA).....	8
V.	Schedule IV-B Major Project Risk Assessment.....	10
VI.	Schedule IV-B Technology Planning	11
	A. Current Information Technology Environment	11
	1. Current System.....	11
	2. Information Technology Standards	11
	B. Current Hardware and/or Software Inventory.....	12
	C. Proposed Technical Solution	12
	D. Proposed Solution Description	13
	1. Summary Description of Proposed System	13
	2. Resource and Summary Level Funding Requirements for Proposed Solution (if known).....	13
	E. Capacity Planning (<i>historical and current trends versus projected requirements</i>).....	13
VII.	Schedule IV-B Project Management Planning	14
VIII.	Appendices	15

I. Schedule IV-B Cover Sheet

Schedule IV-B Cover Sheet and Agency Project Approval	
Agency: Agency for Persons with Disabilities	Schedule IV-B Submission Date: September 15, 2021
Project Name: Incident Management System	Is this project included in the Agency's LRPP? <u> X </u> Yes <u> </u> No
FY 2022-23 LBR Issue Code: 36215C0	FY 2022-23 LBR Issue Title: CONTRACTED SERVICES FOR INCIDENT MANAGEMENT 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: <u>Barbara Palmer</u>	Date: <u>9/13/21</u>
Printed Name: Barbara Palmer	
Agency Chief Information Officer (or equivalent): <u>Sriram Kommu</u>	Date: <u>9/15/21</u>
Printed Name: Sriram Kommu	
Budget Officer: <u>Rose Salinas</u>	Date: <u>9/15/2021</u>
Printed Name: Rose Salinas	
Planning Officer: <u>Clarence Lewis</u>	Date: <u>9/15/2021</u>
Printed Name: Clarence Lewis	<u>9</u>
Project Sponsor: <u>Clarence Lewis</u>	Date: <u>9/15/2021</u>
Printed Name: Clarence Lewis	
Schedule IV-B Preparers (Name, Phone #, and E-mail address):	
Business Need:	Clarence Lewis, 352-303-263. Clarence.Lewis@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:	Clarence Lewis, 352-303-263. Clarence.Lewis@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.

The Centers for Medicare and Medicaid Services (CMS) requires the generation of an incident report for every emergency room visit by an individual served through the Medicaid Home and Community-Based Services (HCBS) waiver. CMS requires that incident management systems include the following information and capabilities:

- Provider performance measures,
- Predictive analytics,
- Integration of claims data, encounter data and state incident management data.

The current Agency incident management system is outdated and housed in five (5) separate systems with no predictive analytic capabilities. It does not have the functionality to address the above requirements, therefore, many of the functions are performed manually. The existing technology requires manual analyses of data using only three sources of data, resulting in missing information that could negatively impact the health and safety of the individuals served.

Updating the Incident Management System will integrate, fuse, and analyze multiple data sets from any agency or source, including incident reports, Medicaid and Medicare claims, encounter forms, admit, discharge and transfer data, and multi-agency data.

Updating the system will also enable the Agency to respond to audits and be more proactive in addressing client incidents by consolidating data from multiple sources and providing a more holistic view of client situations. The updated system will enable Agency staff to research the living setting of the person at time of the incident, follow up with the provider or the waiver support coordinator who was serving the client at the time of the hospitalization, request the incident report, review the medical findings from the emergency room claims data to determine whether the incident report meets reportable or critical criteria, ensures proper follow up and closure of the incident occurs, and complete the provider remediation, all in a timely manner.

The goal for the agency is to secure a comprehensive analytical data analysis system with advanced business analytics and intelligence that streamlines a tedious manual workflow and prioritizes individuals who are most at risk of harm while transitioning from a compliance-based software system to a qualitative system capable of providing individualized big picture analyses efficiently. The agency is in the process of evaluating the options of procuring a SaaS system to meet these goals or hiring contracted staff who could enhance and expand the current IMS system to meet these requirements.

This incident management system will also provide a significant opportunity for innovation and improvement by the development of business analytics and algorithms to identify the individuals most at risk, the saving of limited staff resources and the ability to create a resounding impact by directing the most needed resources to those who need them most.

The new system would impact the individuals who provide services, those who receive services, and those who audit the provision of services to ensure individuals with the greatest need are having those complex needs met. A system with business intelligence and algorithms would be capable of proactively detecting critical incidents in healthcare claims data.

RETURN ON INVESTMENT:

The Agency will have a proactive data driven response that promotes the health and safety of clients. A comprehensive business analytics system could assist APD in identifying and help reduce fraud, waste, and abuse in the Medicaid program. Failure to comply with this CMS requirement could risk federal matching funding for the Home and Community Based Services (HCBS) Waiver.

The Incident Management Plan is linked to the Agency's Strategic Plan and Strategic Plan for Economic Development as follows:

LINKAGE TO AGENCY STRATEGIC PLAN:

Goal 3: Improve accountability of the agency and oversight of providers.

LINKAGE TO STRATEGIC PLAN FOR ECONOMIC DEVELOPMENT:

5.2 Improve the efficiency and effectiveness of government agencies at all levels.

2. Business Objectives

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

The following strategic objectives are sought for the Agency:

- Agency's compliance with the Centers for Medicare and Medicaid Services (CMS) requirements to accurately and timely generate an incident report for every emergency room visit by an individual served through the Medicaid Home and Community-Based Services (HCBS) waiver using their specified criteria.
- Provide business analytics and algorithms which will improve the agency's ability to identify individuals most at risk of harm while working within constraints of limited staff resources and to provide improved and more timely service delivery by directing the most critical resources to those who need them most.

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.

1. Current Business Process(es)

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

The current incident management compliance-based system maintains incidents that have occurred with individuals that APD serves.

The current system is report-centric and is a means of determining information on a granular level (one incident at a time) with limited analytical capabilities. The manual analyses that occur now are time-intensive and may not include information that can contribute to an individual's situation being more critical than one incident may suggest. Information that can contribute to an individual's situation may include:

- medications,
- past allegations of abuse,
- reported incidents and other known incidents.

There is also significant delay in identifying any potentially unreported incidents that may be indicative of potential abuse, neglect, and exploitation. Requirements for this proposed system will assist the APD in identifying some unreported incidents timelier to allow for faster interventions if needed.

2. Assumptions and Constraints

Assumptions and constraints for the Incident Management System are as follows:

- Must be able to receive and maintain data from all required data sources
- Meet all related criteria specified by the Centers for Medicare and Medicaid Services (CMS) to generate an incident report for every emergency room visit by an individual served through the Medicaid Home and Community-Based Services (HCBS) waiver. CMS also requires that incident management systems include the following information and capabilities:
 - Provider performance measures,
 - Predictive analytics,
 - Integration of claims data, encounter data and state incident management data.
- Must be able to adapt to any future CMS requirements for incident management

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
2. Business Solution Alternatives
3. Rationale for Selection
4. Recommended Business Solution

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

D. Functional and Technical Requirements

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

Since the project is still in the planning and analysis stages, functional and technical requirements have not been finalized.

Program functionality for the business solution will include:

- Ability to receive and house data from five (5) separate sources
- Ability to generate an incident report for every emergency room visit by an individual served through the Medicaid Home and Community-Based Services (HCBS) waiver.
- Ability to produce and track Provider performance measures,
- Ability to provide predictive analytics capabilities
- Ability to integrate claims data, encounter data and state incident management data.
- Must be compatible with existing hardware and software platforms

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 incident data.</p> <p>Compliance ensures state continues to receive federal matching funds for services under the federal waiver program.</p> <p>Federal match for FY 2021-22 is \$876.9M.</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>July 2024</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	<p>Ability to track client incidents and follow up needed to address the issue.</p>	<p>Client</p>	<p>Better analysis and trending of incident reports so that necessary corrective action can be implemented.</p>	<p>Reduction in type of incidents through more timely response and better tracking of corrective actions.</p>	<p>July 2024</p>
2	<p>Identify potentially unreported incidents that may not have been</p>	<p>Client</p>	<p>Receive information timelier and</p>	<p>Fewer critical incidents</p>	<p>December 2024</p>

BENEFITS REALIZATION TABLE					
	captured without predictive analytics		accurately	occurring	
3.	Identify providers who may require remediation or termination based on performance	Client	Better reporting and tracking capabilities by provider and incident	Reduction in abuse, neglect, and exploitation investigations	December 2024

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, the agency will develop and submit an enhanced funding plan to CMS in conjunction with the Florida Agency for Health Care Administration to seek enhanced federal matching rates for the system. This advanced planning document will be submitted upon the completion of the agency’s review and determination of potential business solutions. Whether the decision is to procure a SaaS system or develop a system in-house, enhanced funding is potentially eligible as follows:

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

If enhanced funding is not granted by CMS, the funding split will be provided at a 50% federal matching rate for all activities associated with the system.

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.</p> <p>There is not a specific net tangible benefit for the system, but rather a cost avoidance due to federal mandate that requires this system to be implemented. Failure to comply with the CMS requirements could risk federal matching funding for the Home and Community Based Services (HCBS) Waiver. Federal match for FY 2021-22 is \$876.9M.</p> <p>Please see Appendix A: APD Incident Management System Cost Benefit Analysis for specifics.</p>
CBA Form 2 - Project Cost Analysis	<p>The required CBA forms are included as Appendix A. Estimated one-time project costs are \$1.3 million. Please see Appendix A: APD Incident Management System Cost Benefit Analysis for specifics.</p>

Cost Benefit Analysis	
Form	Description of Data Captured
CBA Form 3 - Project Investment Summary	<p>The required CBA forms are included as Appendix A. The resulting information indicates there is no payback period for the project. This is due to the system is being implemented in response to CMS federal mandates, so the payback is cost avoidance in failure to comply with the CMS requirements. This noncompliance could risk federal matching funding for the Home and Community Based Services (HCBS) Waiver. Federal match for FY 2021-22 is \$876.9M.</p> <p>Please see Appendix A: APD Incident Management System 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 – APD Incident Management Project Risk Assessment Tool** for the completed Risk Assessment Tool workbook. The table below provides a summary of the required risk assessment conducted for the APD Incident Management System:

Project	APD Incident Management System	
Agency	Agency for Persons with Disabilities	
FY 2022-23 LBR Issue Code:	FY 2022-23 LBR Issue Title:	
36215C0	CONTRACTED SERVICES FOR INCIDENT MANAGEMENT SYSTEM	
Risk Assessment Contact Info (Name, Phone #, and E-mail Address):		
Rose Salinas -- 850-414-6058 -- Rose.Salinas@apdcares.org		
Executive Sponsor	Clarence Lewis	
Project Manager	Sriram Kommu	
Prepared By	Rose Salinas	9/15/2021
Risk Assessment Summary		
Business Strategy		
	Level of Project Risk	
Project Risk Area Breakdown		
Risk Assessment Areas		Risk Exposure
Strategic Assessment		MEDIUM
Technology Exposure Assessment		MEDIUM
Organizational Change Management Assessment		MEDIUM
Communication Assessment		HIGH
Fiscal Assessment		MEDIUM
Project Organization Assessment		HIGH
Project Management Assessment		HIGH
Project Complexity Assessment		MEDIUM
Overall Project Risk		HIGH

The completion of the Risk Assessment Tool (Appendix B) determined the overall project risk to be “High” in the areas of Communications, Project Organization, and Project Management.

Since the project is still in the analysis and planning phase, key items within these areas have not yet been formally codified, which contributed to the scoring on the Risk Assessment tool. The agency has extensive experience in managing larger IT projects and has staff who are trained on proper project management practices. The agency follows the PMBOK model of Project Management and will identify and develop mitigation strategies for all risks throughout the project life cycle.

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 currently has an incident management system from which necessary information is gathered and reported. The following table lists the current systems and provides information for items a-c below:

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

Name of Current System	a. Description of Current System	b. Current System Resource Requirements	c. Current System Performance
Incident Management System	<p>The Incident Management System is used by the APD Regional Office Staff and State Office staff to track, analyze, and manage incident reporting for Waiver clients.</p> <p>The system also facilitates an interface with DCF to transfer incidents reported to DCF which are tracked in IMS.</p> <p>IMS also contains various dashboards and reports that help management to take preventive and corrective actions.</p>	<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: 250</p> <p>Max Number of Concurrent User Sessions Supported: 250</p>

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
Incident Management System	Web Application	CRM 2011, .NET Framework 3.5	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.

If it is determined that a SaaS solution for the Incident Management System will meet the agency’s needs, no additional hardware or software will be needed by the agency.

C. Proposed Technical Solution

1. Technical Solution Alternatives

The following alternative options are being considered to address the Agency’s needs for the incident management system. The agency is currently in the planning and evaluation stage, so no decision has been finalized as to a chosen solution. Pros and Cons for each of the possible technical solutions explained below.

Options to Be Considered	Pros/Cons for Option
No Project (Status Quo) - Keep the current systems in place	<ul style="list-style-type: none"> ▪ Current system does not meet federal CMS assurances ▪ Agency is heavily dependent on inefficient manual processes ▪ Existing functionality of automated system does not meet Agency needs ▪ <i>Agency has decided this option is not viable.</i>
Provide Services In-House	<p>Pros</p> <ul style="list-style-type: none"> ▪ Control of software solution • Established business knowledge • Less dependence on outside vendor as system updates are required <p>Cons</p> <ul style="list-style-type: none"> • Potential of overburdening resources • Lack of expertise in predictive analytic technology

<p>Procure SaaS Solution</p>	<p>Pros</p> <ul style="list-style-type: none"> ▪ Shortened implementation timeframes resulting in needed functionality being available sooner ▪ Expertise in predictive analytic technology ▪ CMS criteria and requirements have already been fully documented <p>Cons</p> <ul style="list-style-type: none"> • Dependence on outside vendor for timelines and updates • Less control of the software solution
-------------------------------------	---

2. Rationale for Selection

Since the project is still in the planning and analysis stages, no selection has been finalized. However, 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 is considering the procurement of a Commercial Off the Shelf (COTS) solution that is offered as Software as a Service (SaaS) or developing the solution in house.

3. Recommended Technical Solution

Since the project is still in the planning and analysis stages, no technical selection has been finalized at this time.

D. Proposed Solution Description

1. Summary Description of Proposed System

Program functionality for the business solution includes:

- Ability to receive and house data from five (5) separate sources
- Ability to generate an incident report for every emergency room visit by an individual served through the Medicaid Home and Community-Based Services (HCBS) waiver.
- Ability to produce and track Provider performance measures,
- Ability to provide predictive analytics capabilities
- Ability to integrate claims data, encounter data and state incident management data.

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

The strategic direction of the Agency is 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 would be included in the cost of the service. The staffing required to augment the solution and provide continued operational support are included as part of the APD Incident Management LBR issue request. If a suitable COTS/SaaS solution cannot be obtained, the agency can work within the resources requested to perform the development in house.

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

The estimated capacity for the APD Incident Management System is based on the number of state staff 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 will be incorporated into the functional and technical

requirements provided in the ITN and subsequent vendor contract.

If procured as a SaaS system, the assumption is that the vendor will provide sufficient capacity both now and, in the future, to meet agency needs. To ensure this, the following provisions will be incorporated into the ITN and subsequent contract with the vendor:

- The system must provide sufficient capacity to accommodate all existing legacy data that supports the Incident Management System as of the deployment date as well as the following anticipated future workload and the associated office workers.
- Specifically:
 - a) The system must provide the capacity to store a to be determined number of incident records including all associated back up 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.

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.

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.

The Incident Management System Project will be implemented in three distinct phases:**Phase 1:**

- Identification of data elements to be included in the system and current data sources
- Preparation for data extracts from APD data warehouse
- Building of interface between contracted provider and data warehouse
- Configuration and UAT of hardware and software
- Provide names and email addresses of all internal APD users to contracted provider
- Training of APD staff by contracted provider
- User provisioning and account set up

Phase 2:

- Receive access to Medicaid claims for all waiver clients and the ability to identify and analyze critical incidents from Medicaid claims data.
- Analyze data and work with contracted provider in designing and implementing any needed modifications to data reports

Phase 3:

- Provide initial extract of incident report data
- Utilize contracted provider's algorithm to match critical incidents from Medicaid claims with a corresponding incident report.
- Develop prototype methodology to prioritize unreported critical incidents
- Conduct user acceptance testing and collaborate with contracted provider for validation.

Project Deadlines are as follows:

Phase 1: Within 12 months of initiation of contract

Phase 2: Within 6 months of data being provided to contract provider

Phase 3: Initiate during Phase 2. Completion within 6 months of initiation.

Project Milestones are as follows:

The following milestones are integral for a successful project implementation:

1. Collaborate and agree on reporting format
2. Develop incident definitions
3. Prioritize data roadmap, based on data sources and data availability
4. Ingest data from all sources and configure it to the dashboards and tools within the system
5. Train the internal stakeholders across the agency
6. Determine next actions to be taken
7. Implement the automatic systems for implementing data, matching data definitions to detect critical incidents, prioritizing action, applying the data analytics to support abuse and neglect investigations, provide proactive care, education, and care for the individuals
8. Launch education campaigns based on identified data trends
9. Identify unreported incident trends and begin provider notifications and provider education campaign.

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 Incident Management System Cost Benefit Analysis

Appendix B: APD Incident Management Project Risk Assessment Tool

CBAForm 1 - Net Tangible Benefits

Agency	Agency for Persons with Disabilities	Project	Incident Management System
--------	--------------------------------------	---------	----------------------------

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 (Recurring Costs Only -- No Project Costs)	FY 2022-23			FY 2023-24			FY 2024-25			FY 2025-26			FY 2026-27		
	(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	\$0	\$335,000	\$335,000	\$335,000	\$0	\$335,000	\$335,000	\$0	\$335,000	\$335,000	\$0	\$335,000	\$335,000	\$0	\$335,000
A.b Total Staff	0.00	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	\$0
A-1.b. State FTEs (#)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A-2.a. OPS Staff (Salaries)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A-2.b. OPS (#)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A-3.a. Staff Augmentation (Contract Cost)	\$0	\$335,000	\$335,000	\$335,000	\$0	\$335,000	\$335,000	\$0	\$335,000	\$335,000	\$0	\$335,000	\$335,000	\$0	\$335,000
A-3.b. Staff Augmentation (# of Contractors)	0.00	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	\$0	\$465,000	\$465,000	\$465,000	\$0	\$465,000	\$465,000	\$0	\$465,000	\$465,000	\$0	\$465,000	\$465,000	\$0	\$465,000
B-1. Managed Services (Staffing)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B-2. Hardware	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B-3. Software	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B-4. Other SaaS Software	\$0	\$465,000	\$465,000	\$465,000	\$0	\$465,000	\$465,000	\$0	\$465,000	\$465,000	\$0	\$465,000	\$465,000	\$0	\$465,000
C. Data Center Provider Costs	\$0	\$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	\$0
C-2. Infrastructure	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-3. Network / Hosting Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-4. Disaster Recovery	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-5. Other Specify	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
D. Plant & Facility Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E. Other Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E-1. Training	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E-2. Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E-3. Other Equipment/Ongoing Staff Expenses	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E-4. Other	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
Total of Recurring Operational Costs	\$0	\$800,000	\$800,000	\$800,000	\$0	\$800,000	\$800,000	\$0	\$800,000	\$800,000	\$0	\$800,000	\$800,000	\$0	\$800,000
F. Additional Tangible Benefits:		\$0			\$0			\$0			\$0			\$0	
F-1. Specify		\$0			\$0			\$0			\$0			\$0	
F-2. Specify		\$0			\$0			\$0			\$0			\$0	
F-3. Specify		\$0			\$0			\$0			\$0			\$0	
Total Net Tangible Benefits:		(\$800,000)			\$0			\$0			\$0			\$0	

CHARACTERIZATION OF PROJECT BENEFIT ESTIMATE -- CBAForm 1B		
Choose Type	Estimate Confidence	Enter % (+/-)
Detailed/Rigorous <input checked="" type="checkbox"/>	Confidence Level	90%
Order of Magnitude <input type="checkbox"/>	Confidence Level	
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 Incident Management System		CBAForm 2A Baseline Project Budget																		
Costs entered into each row are mutually exclusive. Insert rows for detail and modify appropriation categories as necessary, but do not remove any of the provided project cost elements. Reference vendor quotes in the Item Description where applicable. Include only one-time project costs in this table. Include any recurring costs in CBA Form 1A.					FY2022-23			FY2023-24			FY2024-25			FY2025-26			FY2026-27			TOTAL	
2					\$ 1,300,000			\$ -			\$ -			\$ -			\$ -			\$ 1,300,000	
3					\$ -			\$ -			\$ -			\$ -			\$ -			\$ -	
4	Item Description (remove guidelines and annotate entries here)	Project Cost Element	Appropriation Category	Current & Previous Years Project-Related Cost	YR 1 #	YR 1 LBR	YR 1 Base Budget	YR 2 #	YR 2 LBR	YR 2 Base Budget	YR 3 #	YR 3 LBR	YR 3 Base Budget	YR 4 #	YR 4 LBR	YR 4 Base Budget	YR 5 #	YR 5 LBR	YR 5 Base Budget	TOTAL	
5	Costs for all state employees working on the project.	FTE	S&B	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -
6	Costs for all OPS employees working on the project.	OPS	OPS	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -
7	Staffing costs for personnel using Time & Expense.	Staff Augmentation	Contracted Services	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -
8	Project management personnel and related deliverables.	Project Management	Contracted Services	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ -
9	Project oversight 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	\$ -		\$ 1,300,000	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -	\$ 1,300,000
14	Professional services with fixed-price costs (i.e. software development, installation, project documentation)	Project Deliverables	Contracted Services	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
15	All first-time training costs associated with the project.	Training	Contracted Services	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
16	Include the quote received from the 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	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -	\$ -
21	Total				\$ -	0.00	\$ 1,300,000	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ 1,300,000

CBAForm 2 - Project Cost Analysis

Agency	<u>Agency for Persons with Disabilities</u>	Project		<u>Incident Management System</u>
--------	---	---------	--	-----------------------------------

PROJECT COST SUMMARY	PROJECT COST SUMMARY (from CBAForm 2A)					TOTAL
	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27	
TOTAL PROJECT COSTS (*)	\$1,300,000	\$0	\$0	\$0	\$0	\$1,300,000
CUMULATIVE PROJECT COSTS <small>(includes Current & Previous Years' Project-Related Costs)</small>	\$1,300,000	\$1,300,000	\$1,300,000	\$1,300,000	\$1,300,000	
Total Costs are carried forward to CBAForm3 Project Investment Summary worksheet.						

PROJECT FUNDING SOURCES	PROJECT FUNDING SOURCES - CBAForm 2B					TOTAL
	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27	
General Revenue	\$1,050,000	\$0	\$0	\$0	\$0	\$1,050,000
Trust Fund	\$1,050,000	\$0	\$0	\$0	\$0	\$1,050,000
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	\$2,100,000	\$0	\$0	\$0	\$0	\$2,100,000
CUMULATIVE INVESTMENT	\$2,100,000	\$2,100,000	\$2,100,000	\$2,100,000	\$2,100,000	

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	<u>Agency for Persons with Disabilities</u>	Project	<u>Incident Management System</u>
--------	---	---------	-----------------------------------

COST BENEFIT ANALYSIS -- CBAForm 3A						
	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27	TOTAL FOR ALL YEARS
Project Cost	\$1,300,000	\$0	\$0	\$0	\$0	\$1,300,000
Net Tangible Benefits	(\$800,000)	\$0	\$0	\$0	\$0	(\$800,000)
Return on Investment	(\$2,100,000)	\$0	\$0	\$0	\$0	(\$2,100,000)
Year to Year Change in Program Staffing	2	0	0	0	0	

RETURN ON INVESTMENT ANALYSIS -- CBAForm 3B		
Payback Period (years)	NO PAYBACK	Payback Period is the time required to recover the investment costs of the project.
Breakeven Fiscal Year	NO PAYBACK	Fiscal Year during which the project's investment costs are recovered.
Net Present Value (NPV)	(\$2,044,990)	NPV is the present-day value of the project's benefits less costs over the project's lifecycle.
Internal Rate of Return (IRR)	NO IRR	IRR is the project's rate of return.

Investment Interest Earning Yield -- CBAForm 3C					
Fiscal Year	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27
Cost of Capital	2.69%	2.90%	3.09%	3.29%	3.48%

	B	C	D	E	F	G	H
3	Project		<i>APD Incident Management System</i>				
4							
5	Agency		<i>Agency for Persons with Disabilities</i>				
6	FY 2022-23 LBR Issue Code:			FY 2022-23 LBR Issue Title:			
7	<i>36215C0</i>			<i>CONTRACTED SERVICES FOR INCIDENT MANAGEMENT SYSTEM</i>			
8	Risk Assessment Contact Info (Name, Phone #, and E-mail Address):						
9	<i>Rose Salinas -- 850-414-6058 -- Rose.Salinas@apdcares.org</i>						
10	Executive Sponsor		<i>Clarence Lewis</i>				
11	Project Manager		<i>Sriram Kommu</i>				
12	Prepared By		<i>Rose Salinas</i>			<i>9/15/2021</i>	
14	Risk Assessment Summary						
15							
16	Business Strategy						
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							
28							
29							
30							
31							
32							
34							Project Risk Area Breakdown
35	Risk Assessment Areas						Risk Exposure
36	Strategic Assessment						MEDIUM
37							
38	Technology Exposure Assessment						MEDIUM
39							
40	Organizational Change Management Assessment						MEDIUM
41							
42	Communication Assessment						HIGH
43							
44	Fiscal Assessment						MEDIUM
45							
46	Project Organization Assessment						HIGH
47							
48	Project Management Assessment						HIGH
49							
50	Project Complexity Assessment						MEDIUM
51							
52							
53	Overall Project Risk						HIGH

	B	C	D	E
1	Agency: Agency for Persons with Disabilities		Project: APD Incident Management System	
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	Informal agreement 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	Most regularly attend executive 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 not 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	0% to 40% -- Few or none 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	No changes needed
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	Minimal or no 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	Single agency-wide use or 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	Between 1 and 3 years
35			Between 3 and 5 years	
36			Between 1 and 3 years	
37			1 year or less	

	B	C	D	E
1	Agency: Agency for Persons with Disabilities		Project: APD Incident Management System	
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	Installed and supported production system more than 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	Some 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 defined only at a conceptual level
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
1	Agency: Agency for Persons with Disabilities		Project: APD Incident Management System	
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	Minimal changes to organization structure, staff or business processes structure
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	0% to 40% -- Few or no process changes 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)	Minor or no changes
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 greater 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
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	No
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	No
11			No	
12	4.04	Are all affected stakeholders included in the Communication Plan?	Yes	No
13			No	
14	4.05	Have all key messages been developed and documented in the Communication Plan?	Plan does not include key messages	Plan does not include key messages
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	Plan does not include desired messages outcomes and 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 resources?	Yes	No
21			No	

	B	C	D	E
1	Agency: Agency for Persons with Disabilities		Project: APD Incident Management System	
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 1 year
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	Procurement strategy has not been identified and documented
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)	Combination FFP and T&E
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	No contract manager assigned
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	No
52			No	
53	5.16	Have all procurement selection criteria and outcomes been clearly identified?	No selection criteria or outcomes have been identified	No selection criteria or outcomes have been identified
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	Procurement strategy has not been developed
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
1	Agency: Agency for Persons with Disabilities		Project: APD Incident Management System	
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	No
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	Some 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	Not yet determined
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	2
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	Some or most staff roles and responsibilities and needed skills have been identified
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	No, project manager is assigned 50% or less 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	No, business, functional or technical experts dedicated 50% or less 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	No
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	No board has been established
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
1	Agency: Agency for Persons with Disabilities		Project: APD Incident Management System	
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	0% to 40% -- None or few 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	0% to 40% -- None or few 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	0% to 40% -- None or few 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	None or few 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	0% to 40% -- None or few 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	No
33			No	
34	7.11	Does the project schedule specify all project tasks, go/no-go decision points (checkpoints), critical milestones, and resources?	Yes	No
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	No 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	None or few have been defined and documented
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	No
48			No	
49	7.17	Are issue reporting and management processes documented and in place for this project?	Yes	No
50			No	

	B	C	D	E
1	Agency: Agency for Persons with Disabilities		Project: APD Incident Management System	
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	Less 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	5 to 8
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	2 to 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	Yes
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	Greater size and complexity
40			Lesser size and complexity	
41			Similar size and complexity	
42			Greater size and complexity	

SCHEDULE IV-B FOR – APD ICONNECT SYSTEM

For Fiscal Year 2022-23




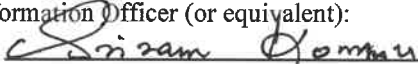



September 15, 2021

AGENCY FOR PERSONS WITH DISABILITIES

Contents

I.	Schedule IV-B Cover Sheet.....	2
	General Guidelines.....	3
	Documentation Requirements.....	3
II.	Schedule IV-B Business Case – Strategic Needs Assessment.....	4
	A. Background and Strategic Needs Assessment	4
	1. Business Need	4
	2. Business Objectives.....	4
	B. Baseline Analysis.....	5
	1. Current Business Process(es)	5
	2. Assumptions and Constraints	5
	C. Proposed Business Process Requirements	5
	1. Proposed Business Process Requirements.....	5
	2. Business Solution Alternatives.....	5
	3. Rationale for Selection	5
	4. Recommended Business Solution	6
	D. Functional and Technical Requirements.....	6
III.	Success Criteria	7
IV.	Schedule IV-B Benefits Realization and Cost Benefit Analysis.....	8
	A. Benefits Realization Table.....	8
	B. Cost Benefit Analysis (CBA).....	10
V.	Schedule IV-B Major Project Risk Assessment.....	11
VI.	Schedule IV-B Technology Planning	13
	A. Current Information Technology Environment	13
	1. Current System.....	13
	2. Information Technology Standards	14
	B. Current Hardware and/or Software Inventory.....	15
	C. Proposed Technical Solution	15
	D. Proposed Solution Description	16
	1. Summary Description of Proposed System	16
	2. Resource and Summary Level Funding Requirements for Proposed Solution (if known).....	17
	E. Capacity Planning (historical and current trends versus projected requirements)	17
VII.	Schedule IV-B Project Management Planning	18
VIII.	Appendices	19

I. Schedule IV-B Cover Sheet

Schedule IV-B Cover Sheet and Agency Project Approval	
Agency: Agency for Persons with Disabilities	Schedule IV-B Submission Date: September 15, 2021
Project Name: APD iConnect System	Is this project included in the Agency's LRPP? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
FY 2022-23 LBR Issue Code: 36204C0	FY 2022-23 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: 9/13/21
Printed Name: Barbara Palmer	
Agency Chief Information Officer (or equivalent): 	Date: 9/15/21
Printed Name: Sriram Kommu	
Budget Officer: 	Date: 9/15/2021
Printed Name: Rose Salinas	
Planning Officer: 	Date: 9-15-2021
Printed Name: Lisa Robertson	
Project Sponsor: 	Date: 9-15-2021
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 2021-22, the total federal match for the HCBS Waiver is \$876.9 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. APD successfully implemented EVV for personal care services in compliance with the federal deadline. EVV provides 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 before iConnect consisted 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 required considerable manual intervention for maintenance, operations, support, and integration with other systems. In addition, many of the business functions remain manual processes. The pre iConnect environment was inefficient, labor intensive, and did 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. APD successfully implemented EVV for personal care services in compliance with the federal 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 iConnect 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 iConnect Project is not currently subject to oversight as defined by 282.0051(d) F.S. because project cost is under \$10M.

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 2021-22 is \$876.9M.</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.</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 2021-22 is \$876.9 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.	November 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.	March 2021
6	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.	November 2021
7	Secure maintenance of client central record	Client Agency	Confidential information is stored securely in electronic format.	Number of records stored electronically versus paper.	On-going
8	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.)	November 2021
9	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.	March 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 2022-23, the net tangible benefit for the project is \$6,789,377.</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 2021-22 are \$6.49 million. Remaining one-time project costs are \$1.47 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 1/6 years and breakeven fiscal year is FY 2023-24. 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 2022-23 LBR Issue Code:	FY 2022-23 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	9/15/2021
Risk Assessment Summary		
Business Strategy	Most Aligned	Least Aligned
	Least Risk	Most Risk
Level of Project Risk		
Project Risk Area Breakdown		
Risk Assessment Areas		<i>Risk Exposure</i>
Strategic Assessment		MEDIUM
Technology Exposure Assessment		MEDIUM
Organizational Change Management Assessment		MEDIUM
Communication Assessment		LOW
Fiscal Assessment		LOW
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

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

- a. Description of Current System
- b. Current System Resource Requirements
- c. 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 currently used to process invoices for State funded services, identify and track expenditure information for agency’s consumers primarily not on the waiver. 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: 220</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.	<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: 1225</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
<p>No Project (Status Quo) - Keep the current systems in place</p>	<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 2021-22 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. APD successfully completed implementation for EVV for personal care services in compliance with the federal deadline. This Rollout (#3) was accomplished with the personal care service providers trained and deployed in progressive waves over a six-month period.

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.

All project deliverables are expected to be completed by December 2022 with project rollouts continuing through June 2023.

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
- 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.

The Agency pays an on-going maintenance of the system on a software-as-a-service basis. The annual ongoing fee is \$1,750,000. CMS provides a seventy-five percent match on the annual fee. The estimated annual ongoing cost of maintaining technology support and a 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. The Federal medical assistance percentage shall be reduced proportionately for those states who do not fulfill this requirement by their deadline. APD successfully implemented EVV for personal care services in compliance with the federal deadline. EVV provides 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 (Recurring Costs Only -- No Project Costs)	FY 2022-23			FY 2023-24			FY 2024-25			FY 2025-26			FY 2026-27		
	(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	\$0	\$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	0.00	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	\$0
A-1.b. State FTEs (#)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A-2.a. OPS Staff (Salaries)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
A-2.b. OPS (#)	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
A-3.a. Staff Augmentation (Contract Cost)	\$280,000	\$0	\$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	0.00	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	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000
B-1. Managed Services (Staffing)	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B-2. Hardware	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B-3. Software	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
B-4. Other WellSky SaaS Software	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000	\$1,750,000	\$0	\$1,750,000
C. Data Center Provider Costs	\$0	\$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	\$0
C-2. Infrastructure	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-3. Network / Hosting Services	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-4. Disaster Recovery	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
C-5. Other Specify	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
D. Plant & Facility Costs	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E. Other Costs	\$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	\$0
E-2. Travel	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
E-3. Other Equipment/Ongoing Staff Expenses	\$7,976	\$0	\$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	\$0	\$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	\$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	\$2,441,868	\$0	\$2,441,868
F. Additional Tangible Benefits:		\$6,789,377			\$6,789,377			\$6,789,377			\$6,789,377			\$6,789,377	
F-1. EVV		\$6,789,377			\$6,789,377			\$6,789,377			\$6,789,377			\$6,789,377	
F-2. Specify		\$0			\$0			\$0			\$0			\$0	
F-3. Specify		\$0			\$0			\$0			\$0			\$0	
Total Net Tangible Benefits:	(\$2,441,868)	\$6,789,377			\$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 90%
Order of Magnitude	<input type="checkbox"/>	Confidence Level
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																	
				FY2022-23			FY2023-24			FY2024-25			FY2025-26			FY2026-27			TOTAL		
				\$ 6,496,166	\$ 1,473,193		\$ -		\$ -		\$ -		\$ -		\$ -		\$ -		\$ 7,969,359		
4	Item Description (remove guidelines and annotate entries here)	Project Cost Element	Appropriation Category	Current & Previous Years Project- Related Cost	YR 1 #	YR 1 LBR	YR 1 Base Budget	YR 2 #	YR 2 LBR	YR 2 Base Budget	YR 3 #	YR 3 LBR	YR 3 Base Budget	YR 4 #	YR 4 LBR	YR 4 Base Budget	YR 5 #	YR 5 LBR	YR 5 Base Budget	TOTAL	
5	Costs for all state employees working on the project.	FTE	S&B	\$ -	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	\$ 2,958,903	10.00	\$ 601,976	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 3,560,879
8	Project management personnel and related deliverables.	Project Management	Contracted Services	\$ 1,604,435	1.00	\$ 239,904	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 1,844,339
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	\$ 1,932,829		\$ 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	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -		\$ -	\$ -	\$ -	\$ 43,868
21	Total			\$ 6,496,166	17.00	\$ 1,473,193	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	0.00	\$ -	\$ -	\$ -	\$ 7,969,359

CBAForm 2 - Project Cost Analysis

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

PROJECT COST SUMMARY	PROJECT COST SUMMARY (from CBAForm 2A)					TOTAL
	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27	
TOTAL PROJECT COSTS (*)	\$1,473,193	\$0	\$0	\$0	\$0	\$7,969,359
CUMULATIVE PROJECT COSTS <small>(includes Current & Previous Years' Project-Related Costs)</small>	\$7,969,359	\$7,969,359	\$7,969,359	\$7,969,359	\$7,969,359	
Total Costs are carried forward to CBAForm3 Project Investment Summary worksheet.						

PROJECT FUNDING SOURCES	PROJECT FUNDING SOURCES - CBAForm 2B					TOTAL
	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27	
General Revenue	\$428,199	\$0	\$0	\$0	\$0	\$428,199
Trust Fund	\$1,044,994	\$0	\$0	\$0	\$0	\$1,044,994
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	\$1,473,193	\$0	\$0	\$0	\$0	\$1,473,193
CUMULATIVE INVESTMENT	\$1,473,193	\$1,473,193	\$1,473,193	\$1,473,193	\$1,473,193	

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	

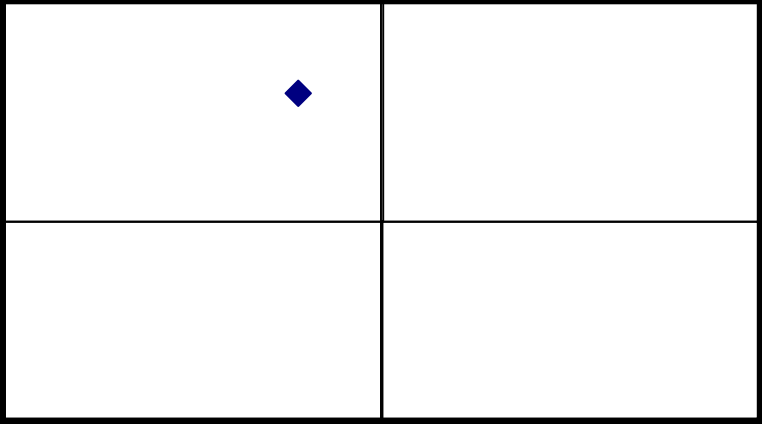
CBAForm 3 - Project Investment Summary

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

COST BENEFIT ANALYSIS -- CBAForm 3A						
	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27	TOTAL FOR ALL YEARS
Project Cost	\$1,473,193	\$0	\$0	\$0	\$0	\$7,969,359
Net Tangible Benefits	\$6,789,377	\$6,789,377	\$6,789,377	\$6,789,377	\$6,789,377	\$33,946,887
Return on Investment	(\$1,179,982)	\$6,789,377	\$6,789,377	\$6,789,377	\$6,789,377	\$25,977,528
Year to Year Change in Program Staffing	0	0	0	0	0	

RETURN ON INVESTMENT ANALYSIS -- CBAForm 3B		
Payback Period (years)	1 1/6	Payback Period is the time required to recover the investment costs of the project.
Breakeven Fiscal Year	2023-24	Fiscal Year during which the project's investment costs are recovered.
Net Present Value (NPV)	\$23,146,809	NPV is the present-day value of the project's benefits less costs over the project's lifecycle.
Internal Rate of Return (IRR)	575.10%	IRR is the project's rate of return.

Investment Interest Earning Yield -- CBAForm 3C					
Fiscal Year	FY 2022-23	FY 2023-24	FY 2024-25	FY 2025-26	FY 2026-27
Cost of Capital	2.69%	2.90%	3.09%	3.29%	3.48%

	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 2022-23 LBR Issue Code:			FY 2022-23 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>9/15/2021</i>		
14	Risk Assessment Summary							
15								
16	Business Strategy			Level of Project Risk				
17								Most Aligned
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28	Least Aligned							
29								
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						MEDIUM	
39								
40	Organizational Change Management Assessment						MEDIUM	
41								
42	Communication Assessment						LOW	
43								
44	Fiscal Assessment						LOW	
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
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	Moderate 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
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
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 1 year
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
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	Extensive 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
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.

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.

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 159 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	

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	

26		Behavioral Services	Behavioral Services	<p>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.</p> <p>See forms for data elements #51, 55</p>	5	
27		General	General	<p>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).</p> <p>See forms for data elements #53,53a</p>	5	
28		Behavioral Services	Behavioral Services	<p>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.</p> <p>See form for data elements #57, 59,</p>	5	
29		Behavioral Services	Behavioral Services	<p>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.</p> <p>See form for data elements #46, 47, 50, 53, 56, 57, 60, 61, 63, 100, 110</p>	5	

30		Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online to automate the rules, coverage and limitations of the current promulgated CDC+ handbook for all CDC+ processes including but not limited to the CDC+ Purchasing Plan Form and Quick Update form. <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	

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

39		Consumer Directed Care Plus (CDC+)	Consumer Directed Care Plus (CDC+)	The system shall provide the ability online for clients/representatives and consultants to select a client and submit a request for voluntary disenrollment from CDC+. <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.

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	

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

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

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	

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

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

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

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

84	F	Provider Services	Provider	The system shall provide the ability online for providers to create implementation plans for a client that include but are not limited to activities and tasks based on handbook rules.	5	
85	F	Provider Services	Provider	The system shall provide the ability online for agency staff and providers to produce reports based on client progress on implementation plan goals.	5	
86	F	Provider Services	Provider	The system should provide the ability online for providers to enter client progress on Support Plan goals and objectives. <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	

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	

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	

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

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

113		Supplemental Funding Request	Supplemental Funding Request	The system shall provide the ability online for support coordinators to enter a client Supplemental Funding Request and submit to agency staff for review and approval or denial. <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	

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

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

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

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

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

146		Waiver	Cost Plan	The system shall provide the ability online to notify agency staff when a cost plan is manually sent for review by the Support Coordinator or includes a service plan for critical service that has not been scheduled according to critical service rules.	5	
147		Waiver	Cost Plan	The system shall provide the ability to maintain a history of annual budget changes for each client.	5	
148		Waiver	Cost Plan	The system shall provide the ability online to associate paid claims with current approved cost plans for each client.	5	
149		Waiver	Cost Plan	The system shall provide the ability online to allow cost plans and service authorizations to be exported to a PDF or Excel formats for printing. <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	

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

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

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

167		Clinical	Clinical - MCM	<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	

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

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

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

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



Appendix E: Functional and Technical Requirements – APD iConnect

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

SECTION 1. Requirements

2.1 Functional Requirements

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

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

2.2 Non-functional Requirements

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

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

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

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

Extent Met by Proposed Solution:

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

SECTION 3. Information Technology and Business Supporting Requirements

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

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

As used in this section and its subsections:

- The words “must” and “shall” denote mandatory requirements
- The word “should” denotes a desired but not mandatory requirement
- The phrase “including but not limited to” denotes a list of items that is required but is not 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	

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	

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	

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	

			<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.

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

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

			<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	

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	<p>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:</p> <ul style="list-style-type: none"> 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	

			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	

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

78.	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	

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	

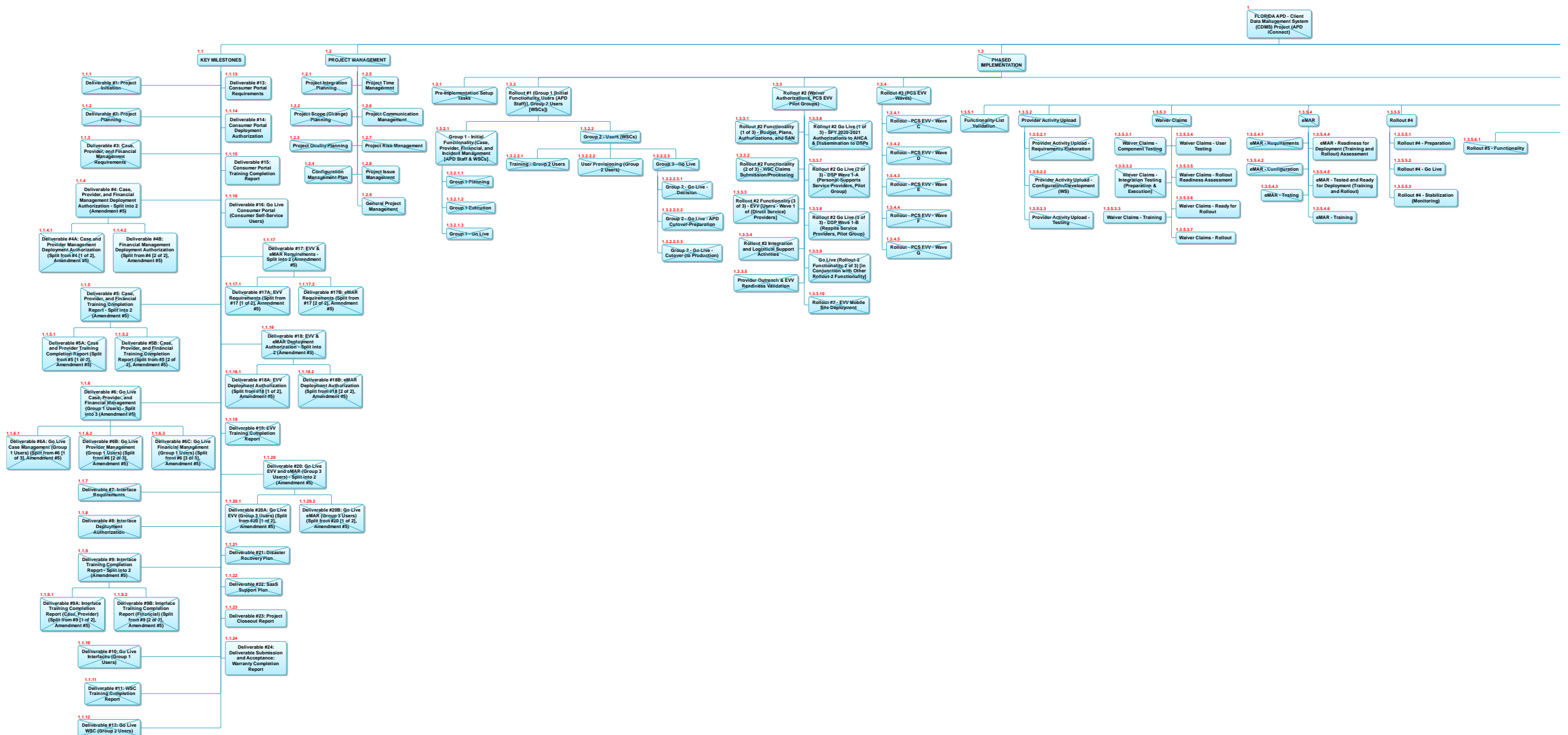
95.	Usability Requirements	General	<p>The system must minimize needed user keystrokes and pointer movement by providing at a minimum:</p> <ol style="list-style-type: none"> a. Cursor movement via a pointing device b. The ability to select from a limited number of possible input items, when appropriate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

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	

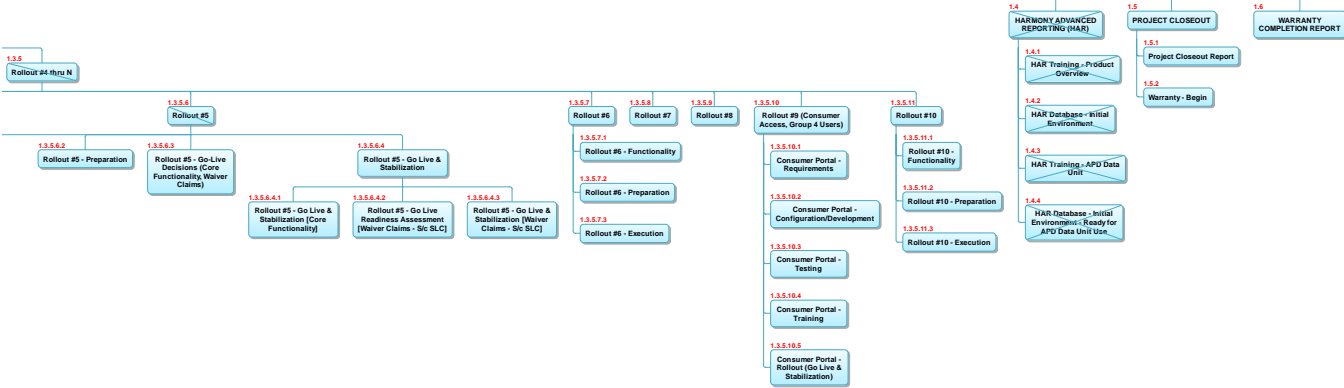
112.	Usability Requirements	General	The system, including training for the system, must be ADA compliant. All CDMS electronic information and technology must be accessible for persons with disabilities. Specifically, CDMS must provide access to persons with sight impairments, including those with visual 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



Box Markings:
 Crossed Out = Completed Package
 Diagonal Line = In Progress Package

APD iConnect Project WBS



Box Markings:
 Crossed Out = Completed Package
 Diagonal Line = In Progress Package

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS

Budget Period: 2022 - 2023

Department: Agency for Persons with Disabilities

Chief Internal Auditor: Stacey Emminger

Budget Entity: 67100100, 67100200, 67100400, 67100500

Phone Number: 850-414-8774

(1) REPORT NUMBER	(2) PERIOD ENDING	(3) UNIT/AREA	(4) SUMMARY OF FINDINGS AND RECOMMENDATIONS	(5) SUMMARY OF CORRECTIVE ACTION TAKEN	(6) ISSUE CODE
AG Report No. 2021-182	Report issued in March 2021	State of Florida - Compliance and Internal Controls Over Financial Reporting and Federal Awards	<p>Finding No. 2020-044: The FAPD did not monitor the quality improvement organization (QIO) responsible for providing utilization review (UR) and continued stay review (CSR) services to Intermediate Care Facilities for individuals with Intellectual Disabilities (ICF-IIDs) to ensure compliance with Federal regulations.</p> <p>Recommendation No. 1: We recommend that FAPD management take steps to ensure that FAPD records evidence appropriate monitoring and follow-up on QIO performance to ensure compliance with Federal regulations.</p>	<p>Partially Complete ICF/IID facilities are licensed and monitored by AHCA. Rules holding the facilities accountable for completing and providing necessary paperwork timely need to be addressed. FAPD has met with AHCA to discuss this issue and APD has documented the continued need for assistance.</p> <p>FAPD continues to conduct monthly Medical Case Management conference calls (Statewide and Regional) for FAPD staff (including supervisors). UR/CSR is a standard topic on the agenda.</p> <p>FAPD includes KEPRO on the admission/authorization emails and transfer/discharges to ensure all known admissions/transfers are accounted for to KEPRO. FAPD meets with KEPRO at least twice a month to review reports, performance measures, issues, admission paperwork, transfers/ discharges, and deaths.</p> <p>FAPD requires our Medical Case Managers to include the APD ICF/IID authorization with all admission paperwork. KEPRO will provide training updates for the ICF/IID facilities. KEPRO requests a resident census from each ICF/IID prior to each facility review. KEPRO issues a repeated fourteen (14) day email alert to the ICF/IIDs for required paperwork. The KEPRO contract was updated in June 2021 to realign the performance measures.</p>	

				<p>Contract Administration created CA-Form 43a to monitor the performance measures on a quarterly basis. The form is active and shall be utilized by the Contract Manager effective as of July 1, 2021.</p> <p>Contract Administration requested that the Vendor complete a Monitoring Self-Evaluation by April 30, 2021. The evaluation was completed timely and the Agency reviewed the evaluation and provided feedback.</p> <p>Contract Administration conducted a risk assessment, in January 2021, of the vendor's contractual performance during Fiscal Year 2020-2021 and determined the risk level as low risk. Low risk requires an onsite review every three years and an annual desk review.</p> <p>Contract Administration conducted a desk review in April 2021 and determined that requirements related to 1) Method of Payment; 2) Insurance; 3) Required Reports; 4) Subcontracting; and 5) Fixed Assets were met by the vendor and that the risk level remains low.</p>	

OIG Report No. 190806-01	Report issued in August 2020	Audit of the Agency's Fuel and Maintenance Card Program (Wex Cards)	<p>Finding No. 1: Wex Card Inventory, Access, and Usage</p> <p>Recommendation No. 1: We recommend the Agency create and implement operating procedures requiring WEX Cards be stored in a secure, locked location maintained by at least two individuals to ensure that access to the WEX Card, keys, logbook, and pin number is given only to authorized employees for approved use with Agency vehicles. We also recommend destroying the eight duplicate WEX Cards being stored at Tacachale.</p>	<p>Open The following actions have been taken and will be included in the policies and procedures.</p> <ul style="list-style-type: none"> •State Office – Has implemented a system to ensure the cards are held in a locked cabinet until needed. •Tacachale - WEX cards are stored in a locked box, within a locked office. Two staff maintain the cards – Dee Griffis and Pat Nattiel-Albright. The eight duplicate cards were destroyed. •Sunland - WEX Cards are maintained in the safe at the Cashier’s Office in the Administration Building for issue upon approval by appropriate supervisory staff. Keys to the vehicles and mileage logs are maintained in a secure location at the Departmental Managers’ Offices in various other buildings. The exception to this practice is the permanent issue cards at the Sunland Recycling Center and Rish Park. Cards and Pin #'s are locked in a secure area at the Recycling Center which is separate from the secure area where vehicle keys are maintained. Two supervisory staff at the Recycling control the issuance of the cards and pin #'s. At Rish Park, the WEX card and Pin # are maintained separately from vehicle keys and mileage log. Since the park manager (Victor Rowland) is currently the only employee at the location, it is not possible to have two (2) employees involved in the process. •DDDP - WEX Cards are kept in a locked safe in the control room with access only granted to the Security Shift Supervisor for issuance upon approval by appropriate supervisory staff. Keys to the vehicles and mileage logs are maintained in a secure location in the Security Control Room. •Pathways – WEX Cards are kept secure in a locked safe. Keys to the vehicles and mileage logs are kept by the Senior Clerk in a secured separate location.
-----------------------------	---------------------------------	---	--	---

Finding No. 2: Policies and Procedures

Recommendation No. 1: We recommend establishing approved policies and procedures for the Agency's WEX Card Program to provide clear and consistent guidance to employees for the purchase, payment, and reconciliation of fuel, maintenance, and repair items and services procured with the WEX Card.

Recommendation No. 2: We also recommend retaining Vehicle Usage Records and receipts for all WEX Card purchases for at least one year to provide verification of user identity and purchase amounts. All non-fuel receipts should include sufficient detail of repair items and services purchased.

Recommendation No. 3: We also recommend establishing a predetermined daily spending limit for each card. Employees who require a spending limit greater than the predetermined amount should be pre-approved by the State Office WEX Card Administrator. Employees who require additional spending limits should contact their supervisor or

Recommendation No. 4: We also recommend that designated custodians of the WEX Card Program at their respective locations should receive guidance from the State Office WEX Card Administrator on approved procedures regarding the use and physical security of the WEX Cards.

Recommendation No. 5: We also recommend that each Agency employee who uses the WEX Card is required to complete a formal Card-user Agreement acknowledging they have been instructed in the rules of proper usage and agree to personal liability for reimbursement of any improper, wasteful, or fraudulent use of the WEX Card.

Open

These recommendations will be included in policies and procedures.

Compliance with DOS General Records Schedules GS1-SL104 and GS1-SL224 will be included in the policies and procedures.

- Tacachale – Currently in compliance.
- Sunland - Maintains financial records a minimum of 3 years to include fuel purchase receipts.
- DDDP and Pathways - Complies with this standard. DDDP and Pathways maintain financial records for a minimum of 1 year.

After the preliminary and tentative findings, General Services dropped all daily card spending limits down to \$200 for fuel, \$200 for oil type products and \$500 for services. This will also be addressed in the policies and procedures.

Finding No. 3: Segregation of Duties

Recommendation No. 1: We recommend management appoint at least two staff members to perform the processing and reconciling duties resulting in continuous supervision to assure that the Agency's internal control objectives are achieved.

Recommendation No. 2: We also recommend all non-emergency maintenance and service purchases by the State Office and regional sites are authorized in advance, via written request, by the State Office WEX Card Administrator.

Recommendation No. 3: We also recommend each fuel, maintenance, or service purchase bill/receipt is signed by the Agency employee utilizing the WEX Card for this purchase.

Recommendation No. 4: We also recommend that all purchases of vehicular items (e.g. tires, battery, brake pads, etc.) are visually confirmed by the WEX Card custodian/co-custodian at each site, and this verification is documented on the service bill/receipt.

Open

This will be recommended in the policies and procedures, however due to limited staffing this may not be possible in many office locations.

- Tacachale -Processing and reconciling duties are performed by Dee Griffis and Pat Nattiel-Albright.
- Sunland - Has a staff person responsible for the processing and reconciling of WEX card receipts that is separate from those responsible for the issuance of cards. After reconciling and processing of receipts, the Accounting Supervisor reviews for accuracy and compliance.
- DDDP and Pathways - Have staff responsible for the processing and reconciling of WEX card receipts that is separate from those responsible for the issuance of cards. DDDP Financial Accounting staff reviews and processes the receipts for compliance. Gavin Tucker at Pathways is responsible for issuing WEX Cards and a separate person, Juanita Alford is responsible for reviewing receipts and reconciliation and forward to DDDP Accounting staff for compliance and accuracy. Copies of receipts and mileage logs are also submitted to Central Office (Colby Hough) for final

Open

This will be included in the policies and procedures.

- Tacachale - Has not used the WEX cards for this purpose
- Sunland - Does not use the WEX card for maintenance or repair services.
- DDDP - Utilizes FSH fleet maintenance operation staff and FSH fuel per the MOU agreement for maintenance and repairs. Pathways no longer uses the WEX card for maintenance and repairs.

Open

This will be included in the policies and procedures.

- Tacachale - Is in compliance.
- Sunland - Complies with this standard
- DDDP - Each fuel, maintenance, or service purchase bill/receipt is signed by the DDDP/Pathways staff utilizing the WEX Card when it is used.

Open

This will be included in the policies and procedures.

- Tacachale - Does not use the WEX cards for this purpose.
- Sunland - Does not use the WEX card for repair parts.
- DDDP and Pathways - Complies with this standard.

Fiscal Year 2022-23 LBR Technical Review Checklist

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

Agency Budget Officer/OPB Analyst Name: Debbie Patten / Julie Vickers

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

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

1. GENERAL

1.1 Are Columns A01, 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:

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 57 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 27)? Do they clearly describe the issue?	Y	Y	Y	Y

3. EXHIBIT B (EXBR, EXB)

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

AUDITS:

3.2 Negative Appropriation Category Audit for Agency Request (Columns A03 and A04): Are all appropriation categories positive by budget entity 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
--	---	---	---	---

Action		Program or Service (Budget Entity Codes)			
		67100100	67100200	67100400	67100500
3.3	Current Year Estimated Verification Comparison Report: Is Column A02 equal to Column B07? (EXBR, EXBC - Report should print "Records Selected Net To Zero")	Y	Y	Y	Y
TIP	Generally look for and be able to fully explain significant differences between A02 and A03.				
TIP	Exhibit B - A02 equal to B07: Compares Current Year Estimated column to a backup of A02. This audit is necessary to ensure that the historical detail records have not been adjusted. Records selected should net to zero.				
TIP	Requests for appropriations which require advance payment authority must use the sub-title "Grants and Aids". For advance payment authority to local units of government, the Aid to Local Government appropriation category (05XXXX) should be used. For advance payment authority to non-profit organizations or other units of state government, 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
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 2020-21 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)					

Action	Program or Service (Budget Entity Codes)			
	67100100	67100200	67100400	67100500
7.1 Are the issue titles correct and do they clearly identify the issue? (See pages 15 through 27 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 65 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 67 through 69 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.5 of the LBR Instructions.)	Y	Y	Y	Y
7.6 Does the salary rate request amount accurately reflect any new requests and are the amounts proportionate to the Salaries and Benefits request? Note: Salary rate should always be annualized.	Y	Y	Y	Y
7.7 Does the issue narrative thoroughly explain/justify all Salaries and Benefits amounts entered into the Other Salary Amounts transactions (OADA/C)? Amounts entered into OAD are reflected in the Position Detail of Salaries and Benefits section of the Exhibit D-3A. (See pages 93 through 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
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 #22-001?	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 26 and 90 of the LBR Instructions.)	Y	Y	Y	Y
7.17 Do the issues relating to <i>Information Technology (IT)</i> have a "C" in the sixth position of the issue code (36XXXCX) and are the correct issue codes used (361XXC0, 362XXC0, 363XXC0, 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

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

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
7.25	Has the agency entered annualization issues (260XXX0) for any issue that was partially funded in Fiscal Year 2021-22? Review Column G66 to determine whether any incremental amounts are needed to fully fund an issue that was initially appropriated in Fiscal Year 2021-22. Do not add annualization issues for pay and benefit distribution issues, as those annualization issues (26AXXXX) 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 65 through 70 of the LBR Instructions.				
TIP	Check BAPS to verify status of budget amendments. Check for reapprovals not picked up in the General Appropriations Act. Verify that Lump Sum appropriations in Column A02 do not appear in Column A03. Review budget amendments to verify that 160XXX0 issue amounts correspond accurately and net to zero for General Revenue funds.				
TIP	If an agency is receiving federal funds from another agency the FSI should = 9 (Transfer - Recipient of Federal Funds). The agency that originally receives the funds directly from the federal agency should use FSI = 3 (Federal Funds).				
TIP	If an appropriation made in the FY 2021-22 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

Action	Program or Service (Budget Entity Codes)			
	67100100	67100200	67100400	67100500
8.5 Have the required detailed narratives been provided (5% trust fund reserve narrative; method for computing the distribution of cost for general management and administrative services narrative; adjustments narrative; revenue estimating methodology narrative; fixed capital outlay adjustment narrative)?	Y	Y	Y	Y
8.6 Has the Inter-Agency Transfers Reported on Schedule I form been included as applicable for transfers totaling \$100,000 or more for the fiscal year?	Y	Y	Y	Y
8.7 If the agency is scheduled for the annual trust fund review this year, have the Schedule ID and applicable draft legislation been included for recreation, modification or termination of existing trust funds?	Y	Y	Y	Y
8.8 If the agency is scheduled for the annual trust fund review this year, have the necessary trust funds been requested for creation pursuant to section 215.32(2)(b), Florida Statutes - including the Schedule ID and applicable legislation?	Y	Y	Y	Y
8.9 Are the revenue codes correct? In the case of federal revenues, has the agency appropriately identified direct versus indirect receipts (object codes 000700, 000750, 000799, 001510 and 001599)? For non-grant federal revenues, is the correct revenue code identified (codes 000504, 000119, 001270, 001870, 001970)?	Y	Y	Y	Y
8.10 Are the statutory authority references correct?	Y	Y	Y	Y
8.11 Are the General Revenue Service Charge percentage rates used for each revenue source correct? (Refer to section 215.20, Florida Statutes, for appropriate General Revenue Service Charge percentage rates.)	Y	Y	Y	Y
8.12 Is this an accurate representation of revenues based on the most recent Consensus Estimating Conference forecasts?	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
8.25 Are current year September operating reversions (if available) appropriately shown in column A02, Section III?	Y	Y	Y	Y

Action		Program or Service (Budget Entity Codes)			
		67100100	67100200	67100400	67100500
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	N	Y
Per 1F 2516 there is a discrepancy between the CFO file total and the Summarized Balance Sheet as of June 30, 2020. The Summarized Balance Sheet reflects \$59,495.15 (GL 171XX) and -\$59,495.15 (GL 561XX). It appears this discrepancy is due to timing as there was an adjustment made on 7/19/21.					
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 126 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 156 of the LBR Instructions.)	Y	Y	Y	Y
10. SCHEDULE III (PSCR, SC3)					
10.1	Is the appropriate lapse amount applied? (See page 88 of the LBR Instructions.)	Y	Y	Y	Y

Action	Program or Service (Budget Entity Codes)			
	67100100	67100200	67100400	67100500
10.2 Are amounts in <i>Other Salary Amount</i> appropriate and fully justified? (See pages 93 through 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 Po				
14.1 Do the reductions comply with the instructions provided on pages 100 through 103 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 97 through 103 of the LBR instructions?	N/A	N/A	N/A	N/A
15.3 Does the issue narrative in A6 address the following: Does the state have the 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

Action	Program or Service (Budget Entity Codes)			
	67100100	67100200	67100400	67100500
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 2020-21 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/passthroughs 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 52 through 84 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
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 155-157) 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

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

<p>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.</p>	
--	--

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