

Michelle Branham
Secretary

Department of Elder Affairs Tallahassee, FL

October 14, 2022

Chris Spencer, Director Office of Policy and Budget Executive Office of the Governor 1702 Capitol Tallahassee, Florida 32399-0001

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

John Shettle, Interim Staff Director Senate Committee on Appropriations 201 Capitol Tallahassee, Florida 32399-1300

Dear Directors:

Pursuant to Chapter 216, Florida Statutes, our Legislative Budget Request for the Department of Elder Affairs 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 2023-24 Fiscal Year.

This submission has been approved by Michelle Branham, Secretary

Sincerely,

Michelle Branham

Michelle Brashan

Secretary



Temporary Special Duty General Pay Additives Implementation Plan For Fiscal Year 2023-2024

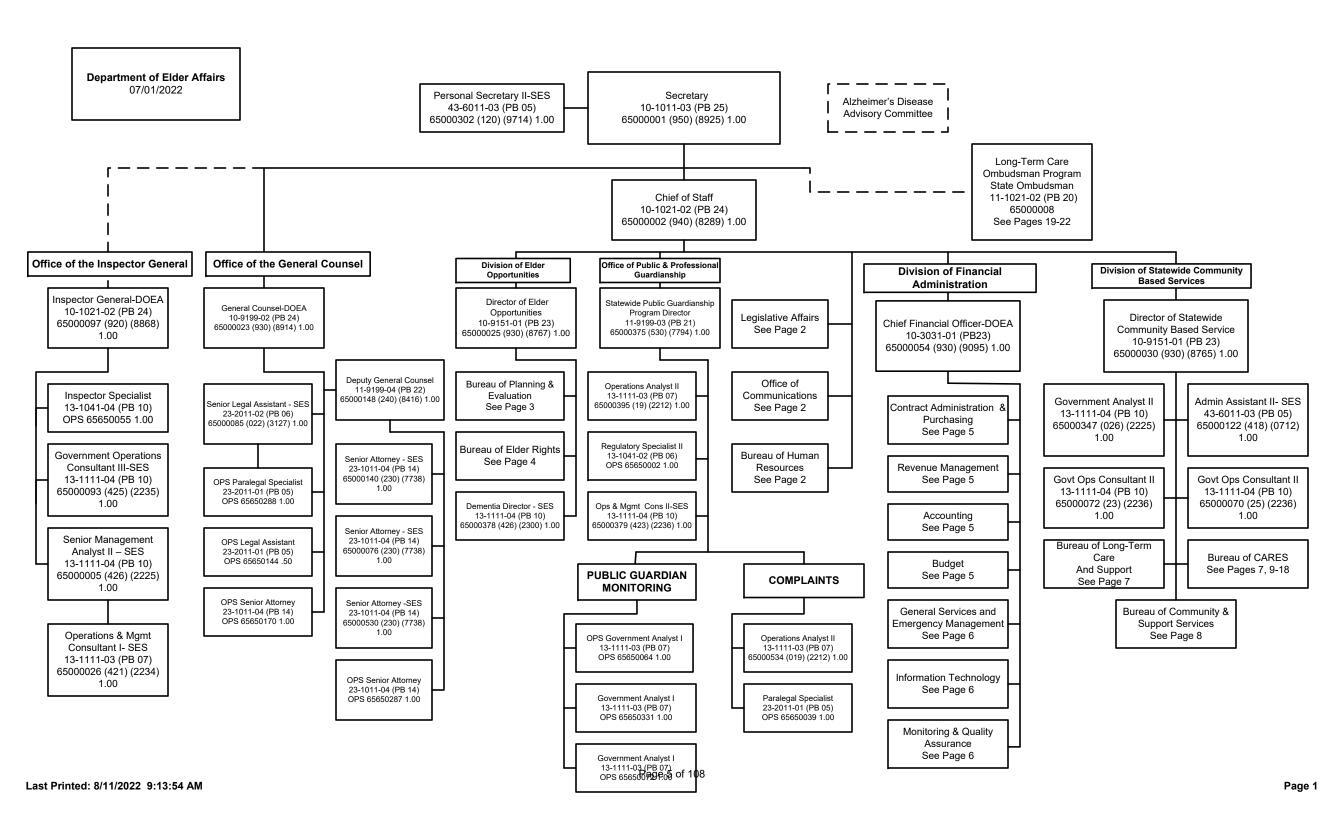
Not Applicable

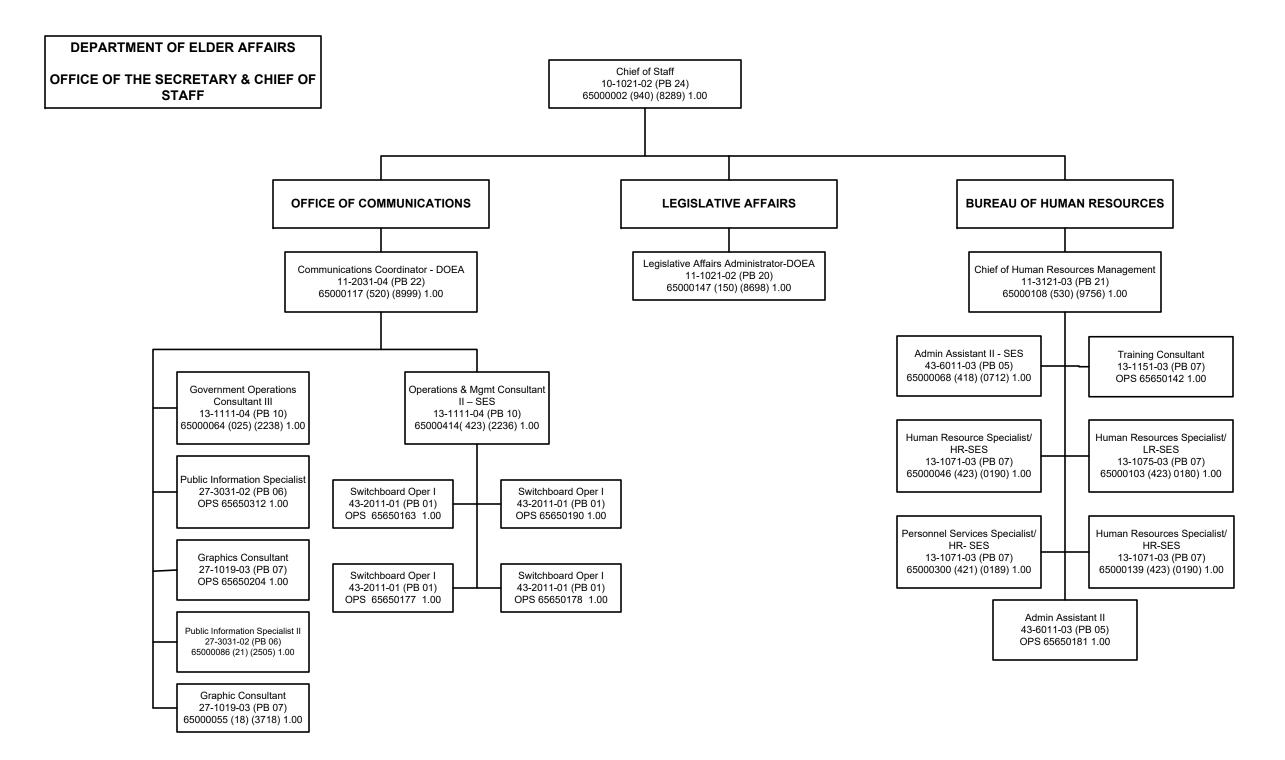


Department Level Exhibits and Schedules

LEGISLATIVE BUDGET REQUEST FY 2023-24 Schedule VII: Agency Litigation Inventory Agency: Department of Elder Affairs Contact Person: Ana Gargollo-McDonald Phone Number: (850) 414-2181 Names of the Case: (If N/A no case name, list the names of the plaintiff and defendant.) N/A Court with Jurisdiction: N/A Case Number: N/A Summary of the Complaint: Amount of the Claim: \$ N/A N/A Specific Statutes or Laws (including GAA) Challenged: N/A Status of the Case: Who is representing (of N/A Agency Counsel record) the state in this N/A Office of the Attorney General or Division of Risk Management lawsuit? Check all that apply. N/A **Outside Contract Counsel** If the lawsuit is a class N/A action (whether the class is certified or not), provide the name of the firm or firms representing the plaintiff(s).

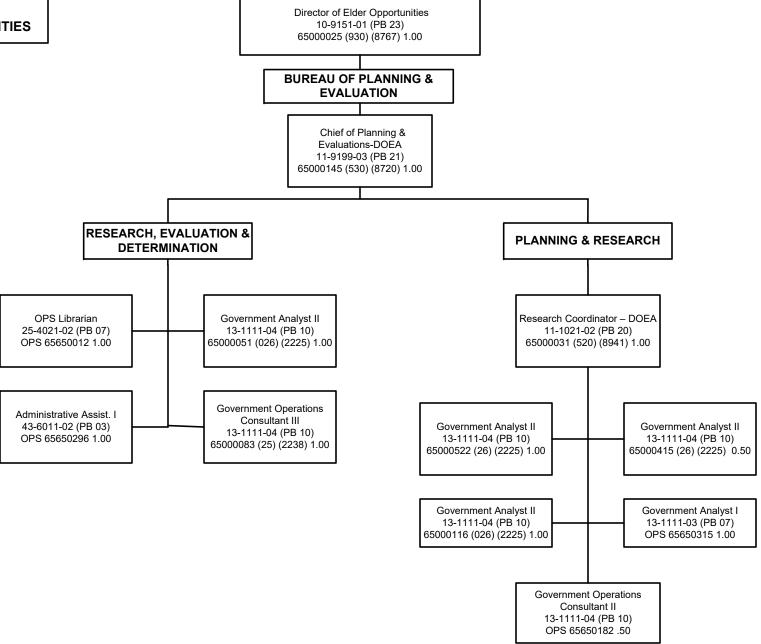
Office of Policy and Budget – June 2022

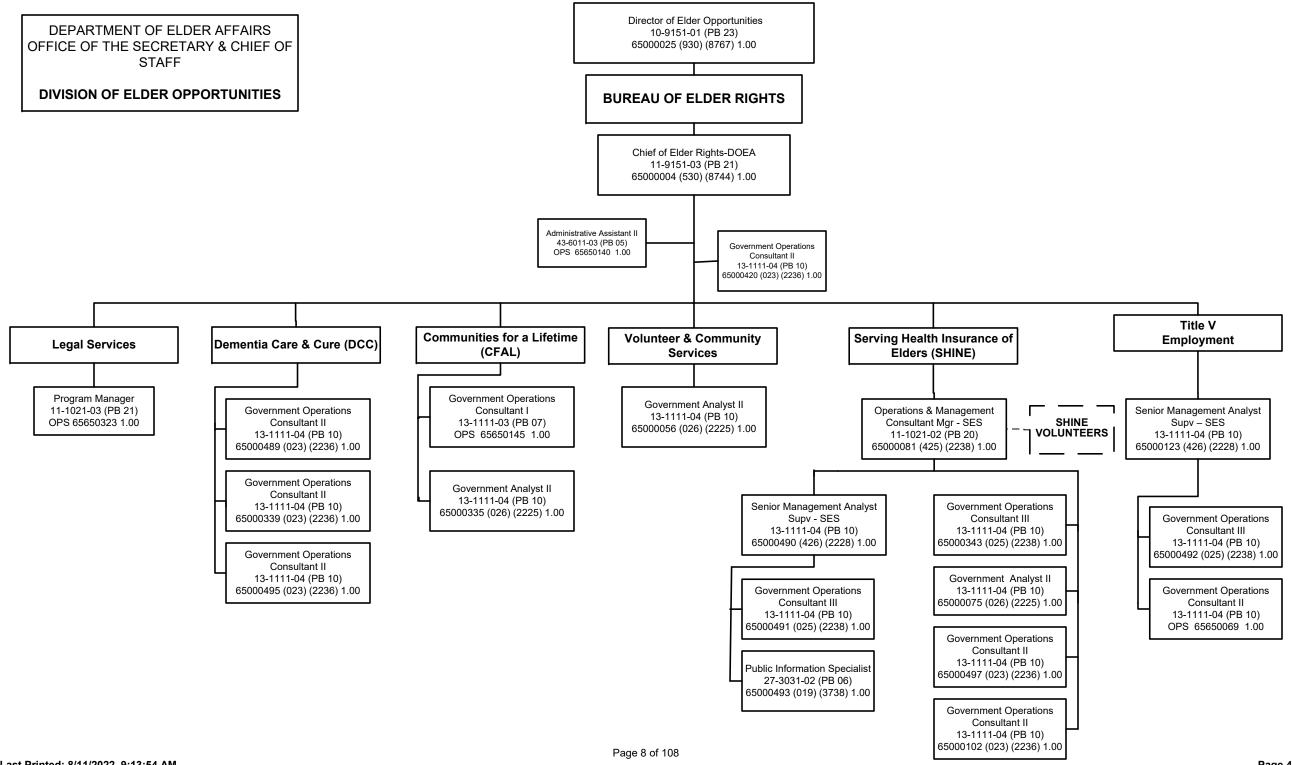


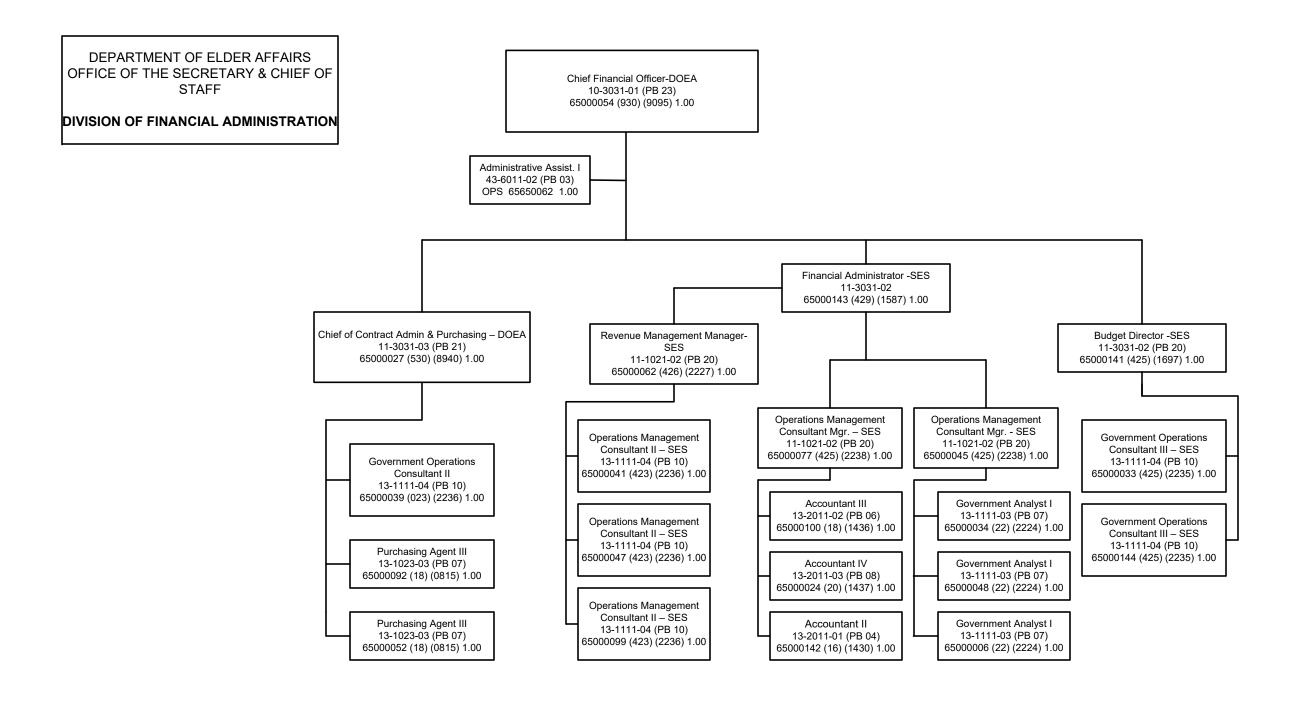


DEPARTMENT OF ELDER AFFAIRS OFFICE OF THE SECRETARY & CHIEF OF STAFF

DIVISION OF ELDER OPPORTUNITIES

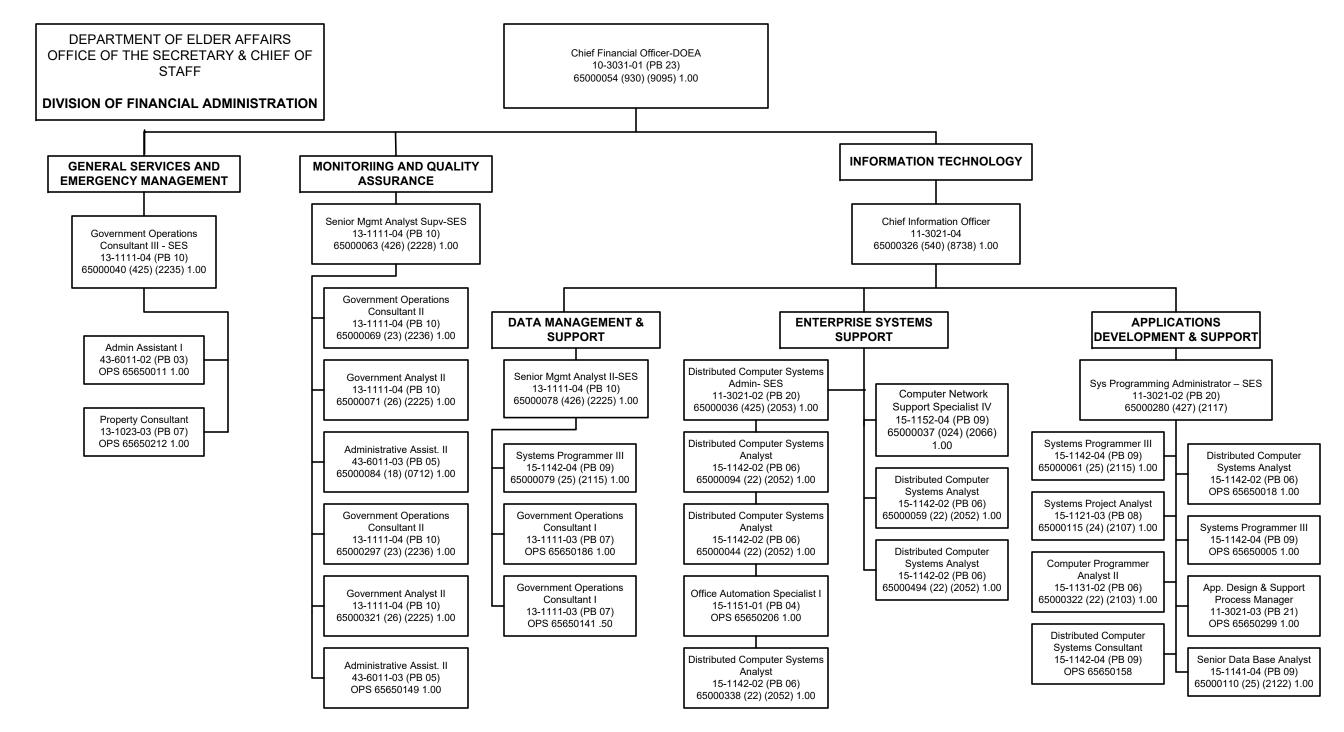


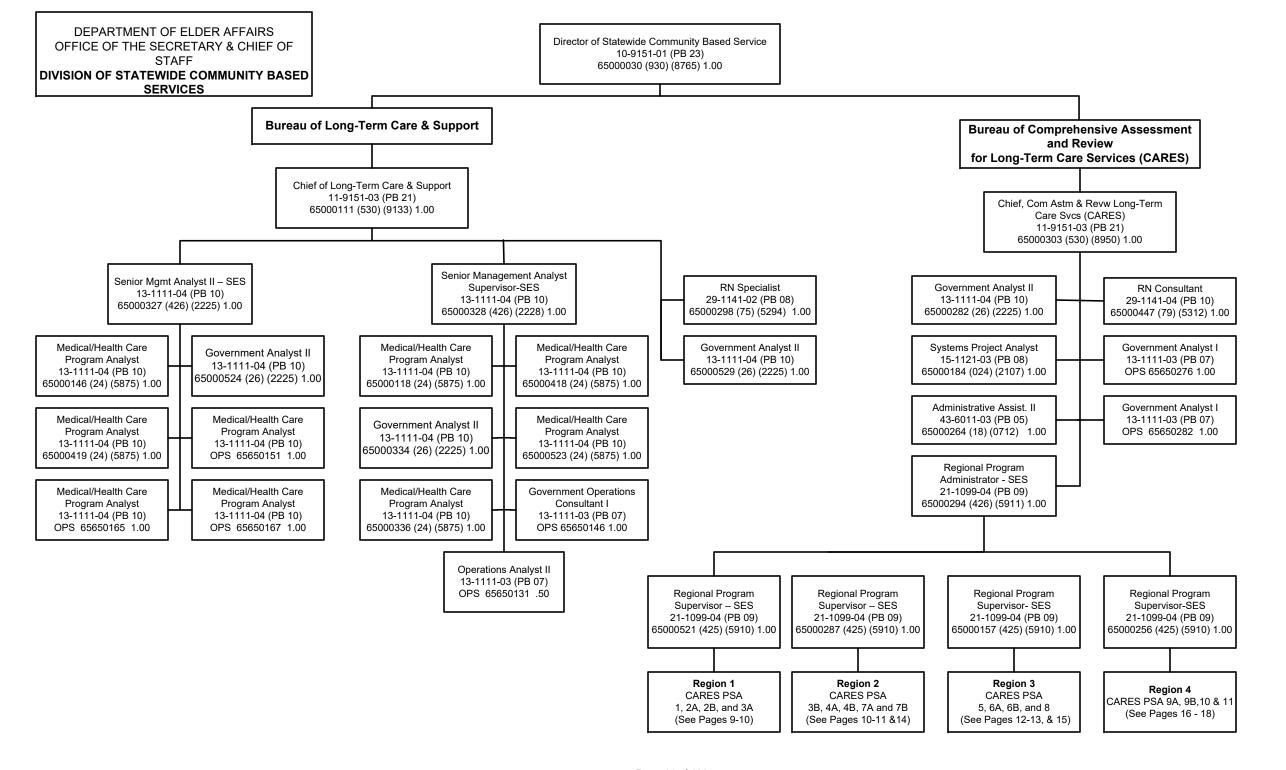


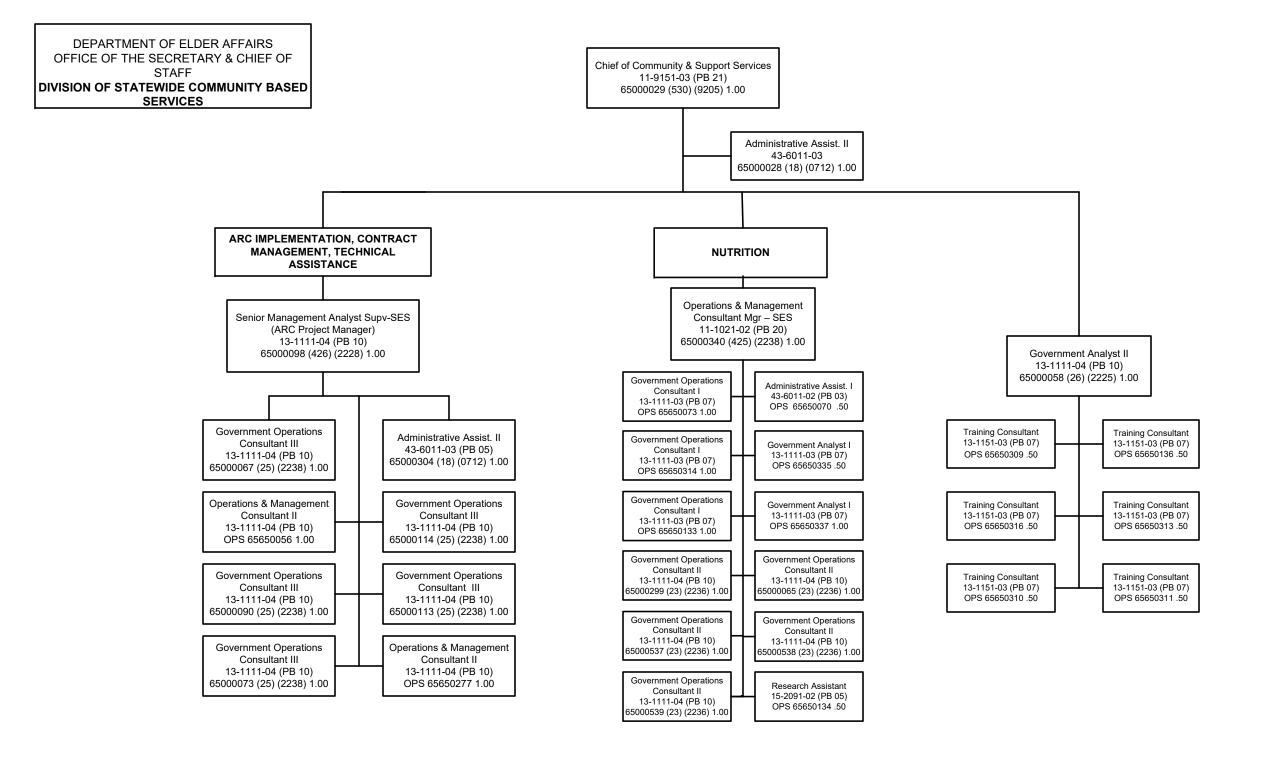


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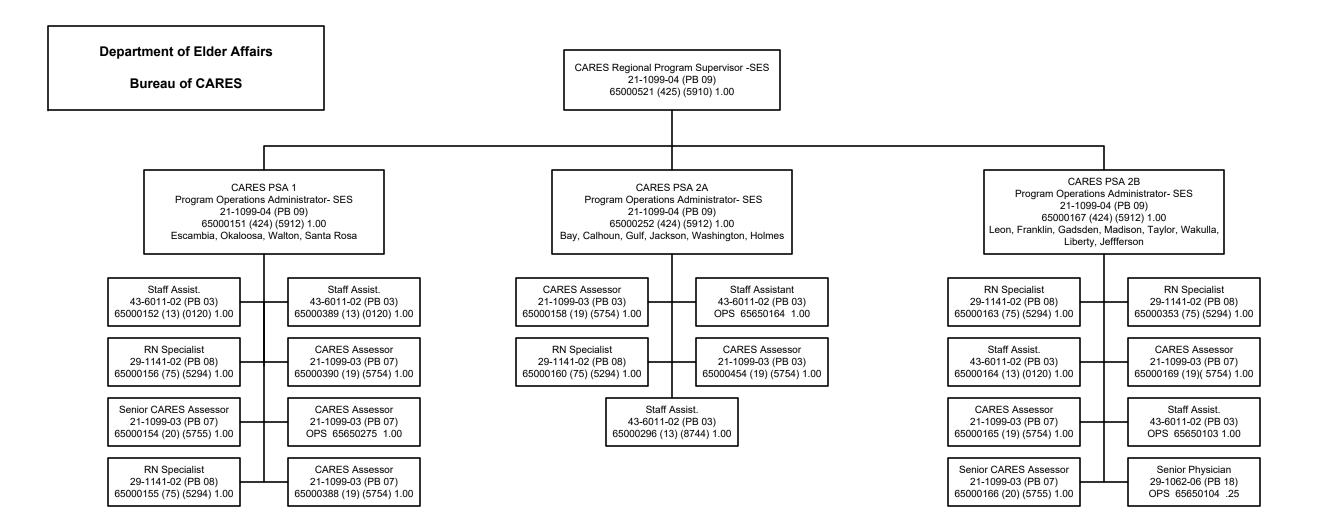
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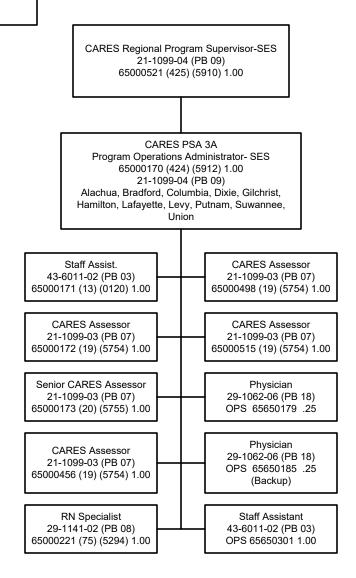


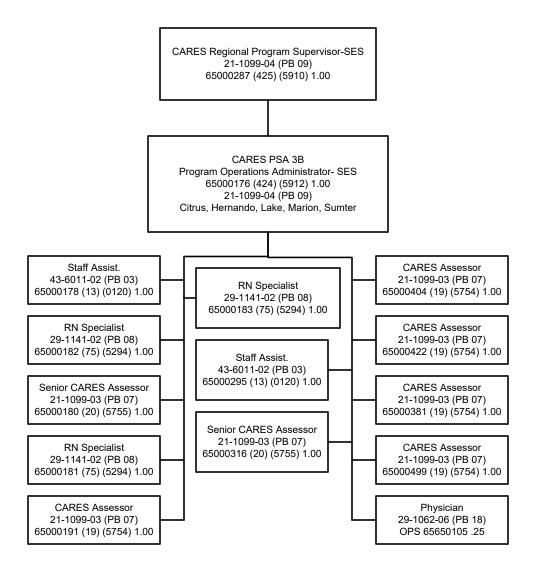


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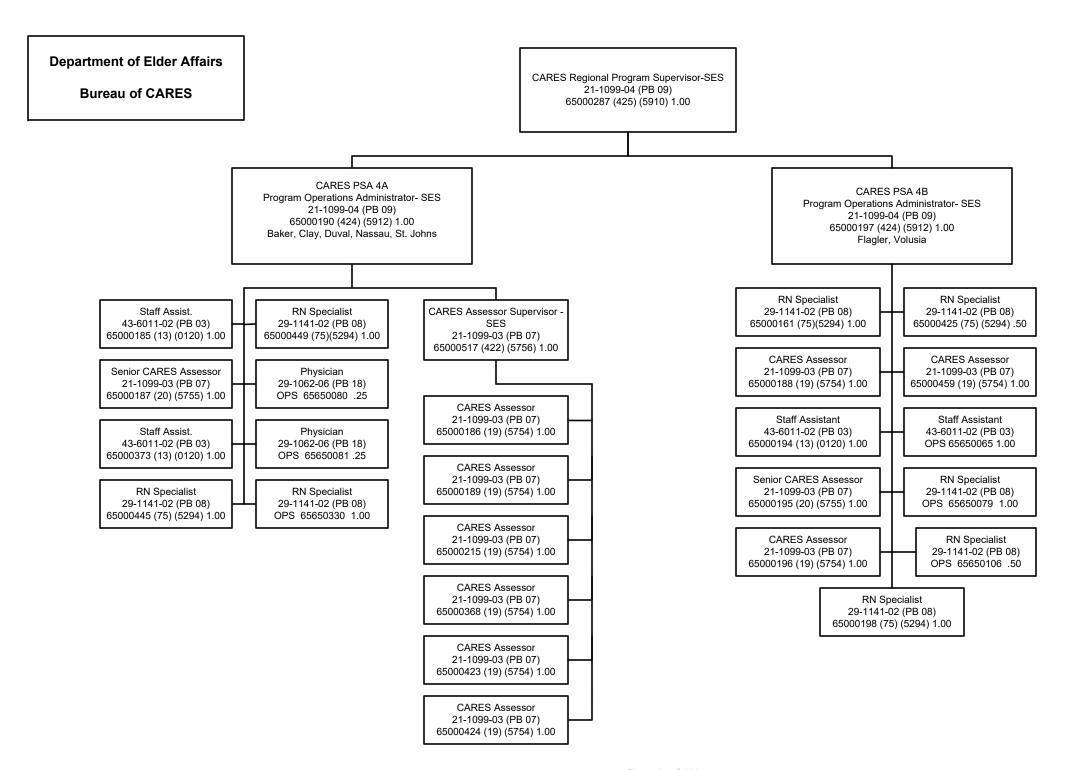


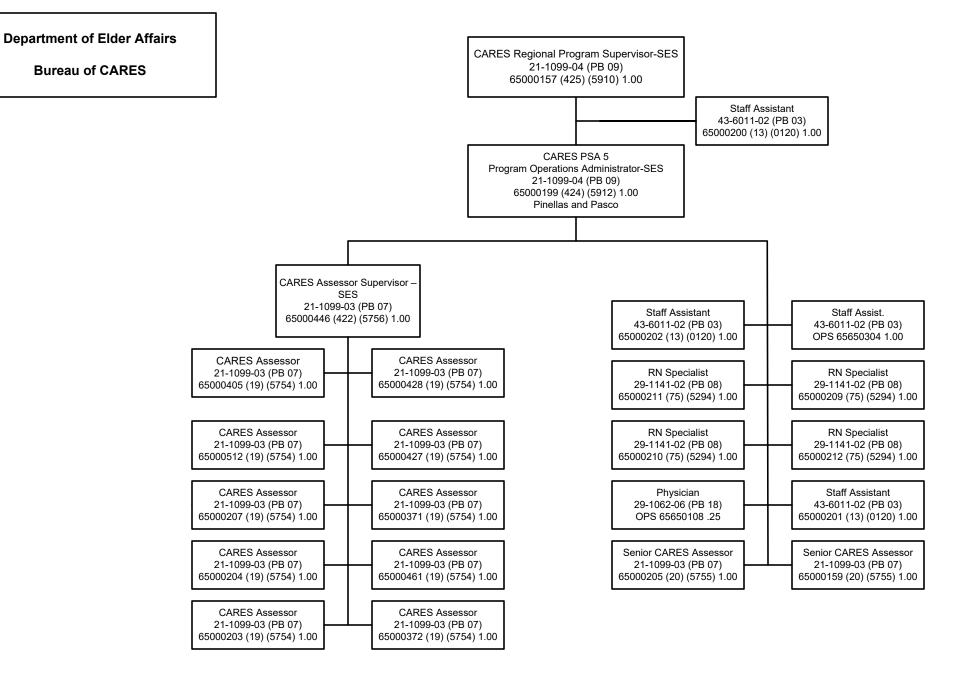
Bureau of CARES

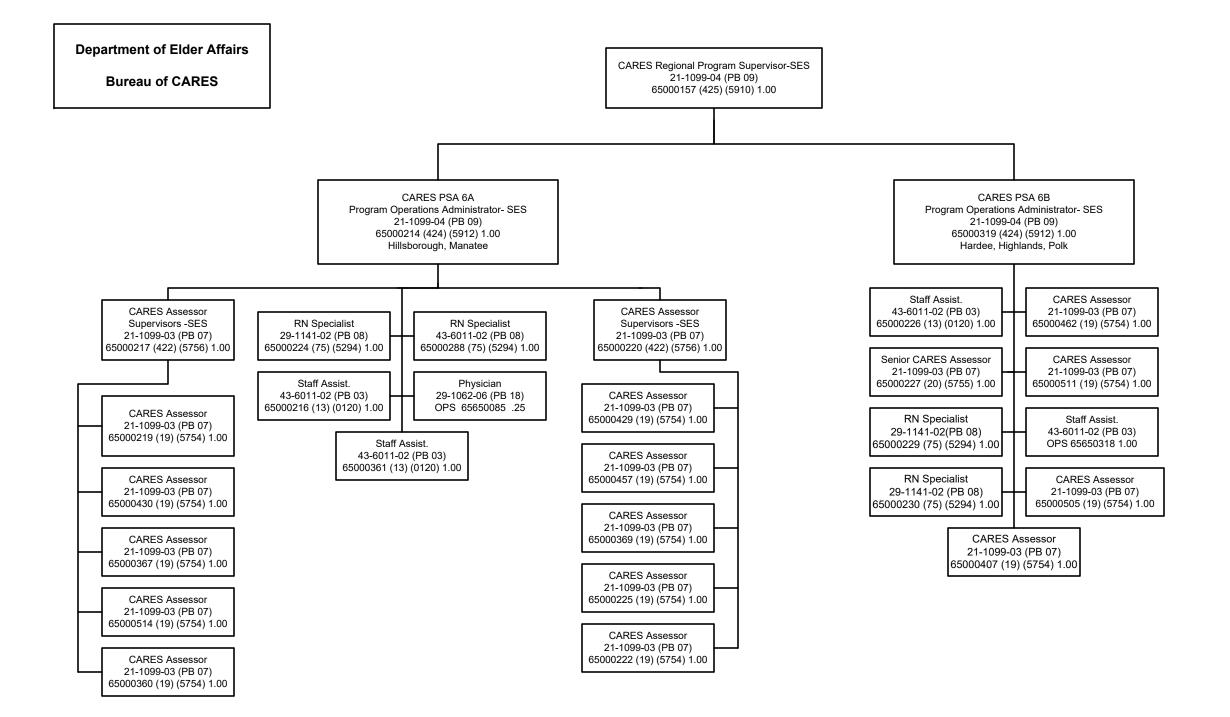




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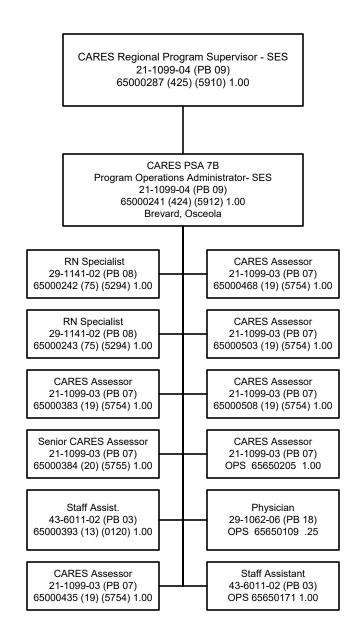


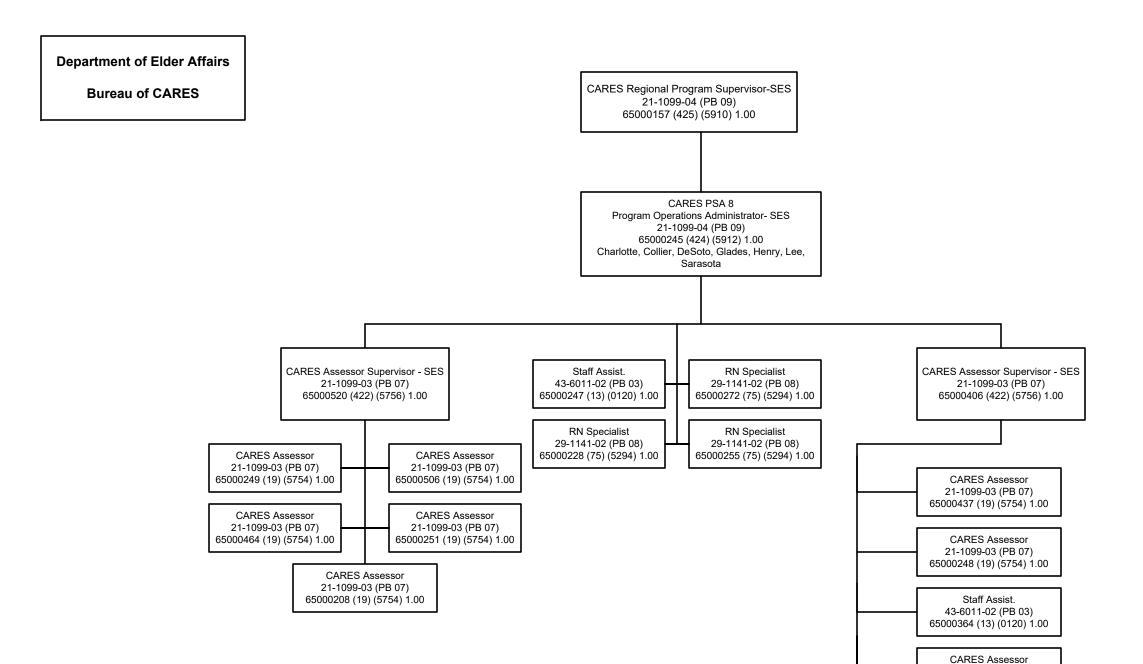


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Department of Elder Affairs Bureau of CARES CARES Regional Program Supervisor - SES 21-1099-04 (PB 09) 65000287 (425) (5910) 1.00 CARES PSA 7A Program Operations Administrator- SES 21-1099-04 (PB 09) 65000231 (424) (5912) 1.00 Orange, Seminole CARES Assessor Supervisor - SES Senior CARES Assessor **CARES Assessor** 21-1099-03 (PB 07) 21-1099-03 (PB 07) 21-1099-03 (PB 07) 65000308 (422) (5756) 1.00 65000234 (20) (5755) 1.00 65000516 (19) (5754) 1.00 **CARES Assessor** RN Specialist 21-1099-03 (PB 07) 29-1141-02 (PB 08) Staff Assist. **CARES Assessor** 65000236 (19) (5754) 1.00 65000528 (75) (5294) 1.00 43-6011-02 (PB 03) 21-1099-03 (PB 07) 65000309 (19) (5754) 1.00 65000232 (13) (0120) 1.00 **RN** Specialist Physician 29-1141-02 (PB 08) 29-1062-06 (PB 18) **CARES Assessor** OPS 65650086 .25 Staff Assistant 65000238 (75) (5294) 1.00 43-6011-02 (PB 03) 21-1099-03 (PB 07) OPS 65650157 1.00 65000411 (19) (5754) 1.00 Senior Physician 29-1062-06 (PB 18) OPS 65650102 .25 **CARES Assessor CARES Assessor** 21-1099-03 (PB 07) 21-1099-03 (PB 07) 65000432 (19) (5754) 1.00 65000434 (19) (5754) 1.00 **CARES Assessor** 21-1099-03 (PB 07) 65000455 (19) (5754) 1.00



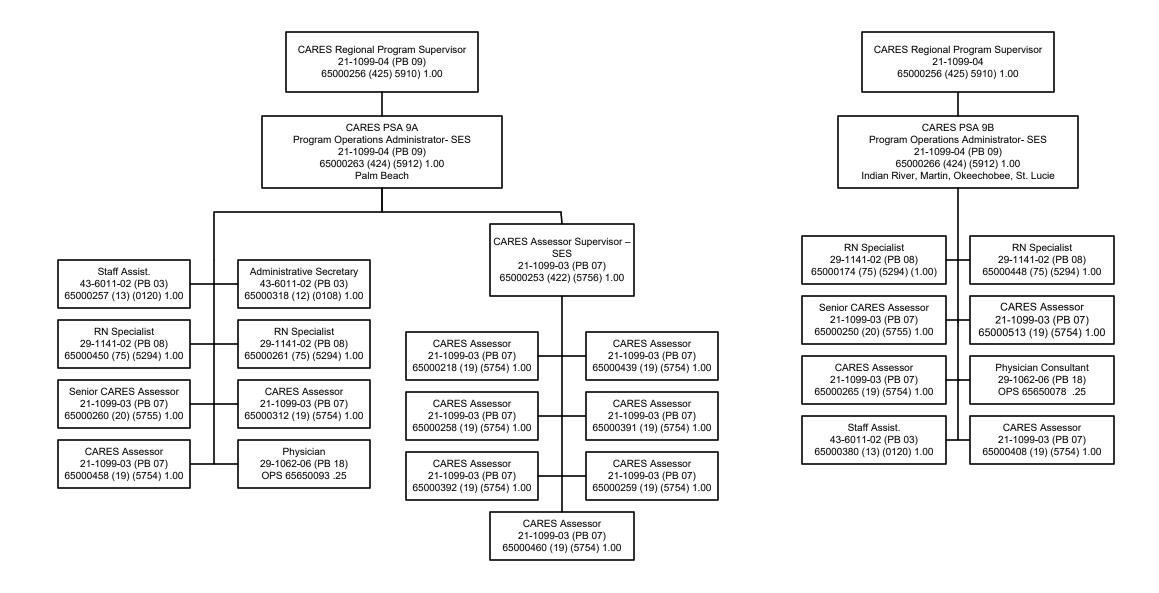


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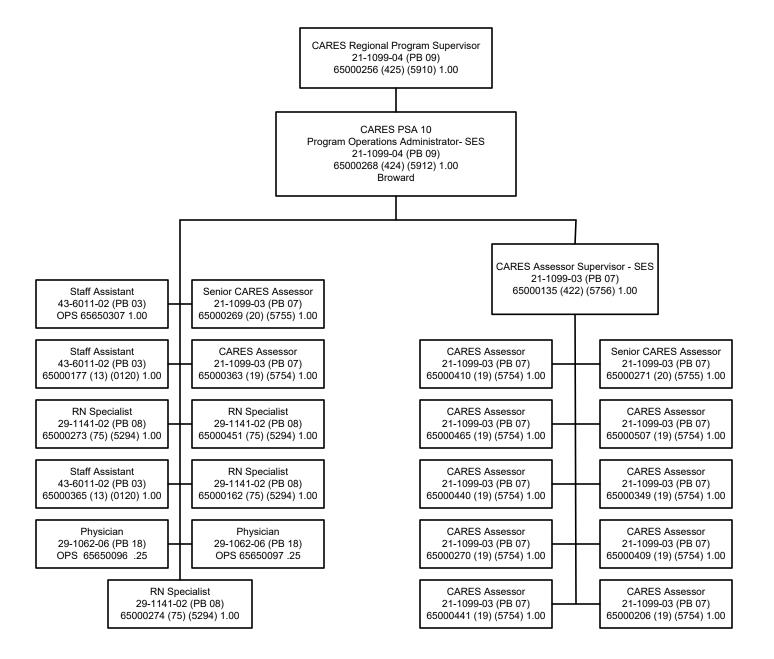
43-6011-02 (PB 07) 65000362 (19) (5754) 1.00

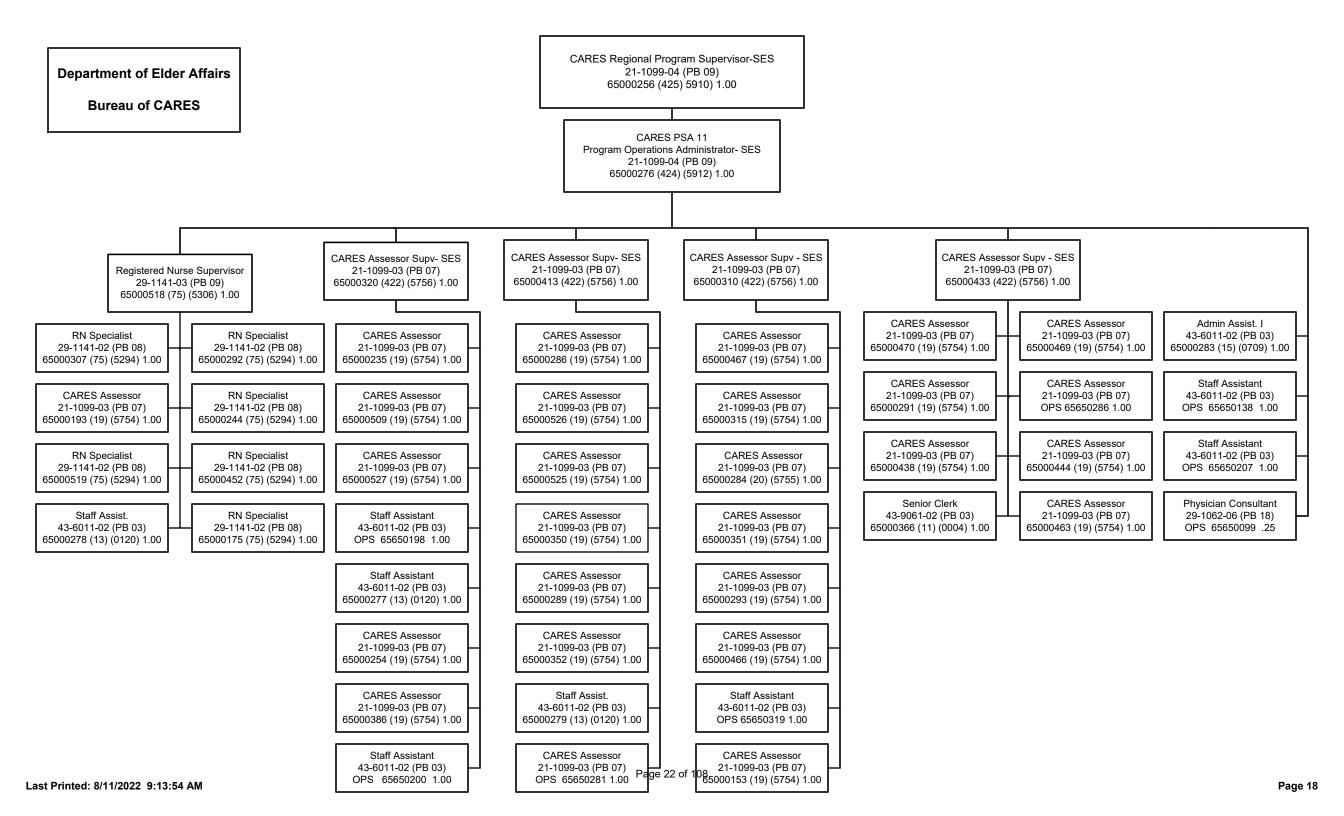
CARES Assessor 43-6011-02 (PB 07) 65000436 (19) (5754) 1.00

Bureau of CARES

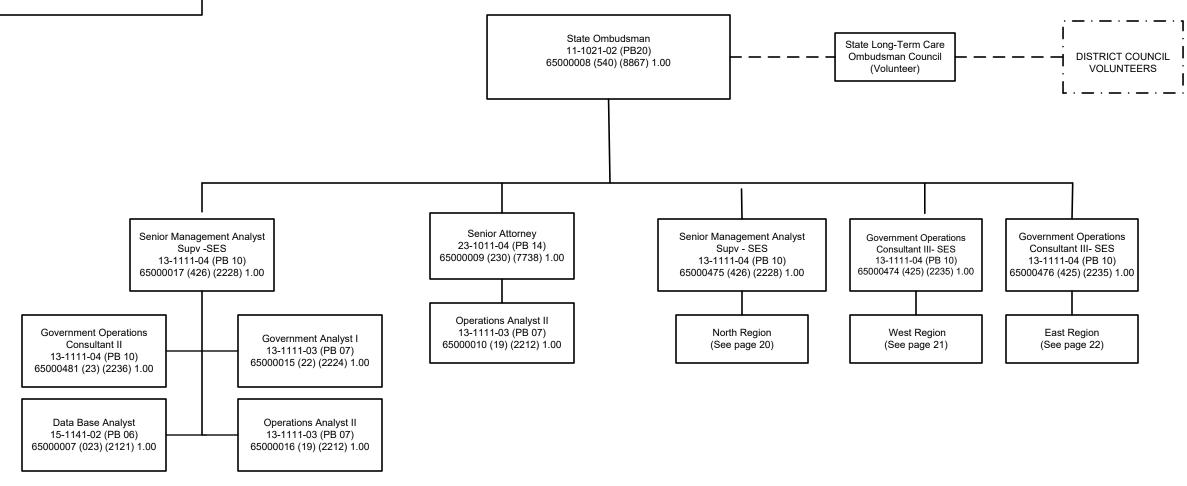


Department of Elder Affairs **Bureau of CARES**

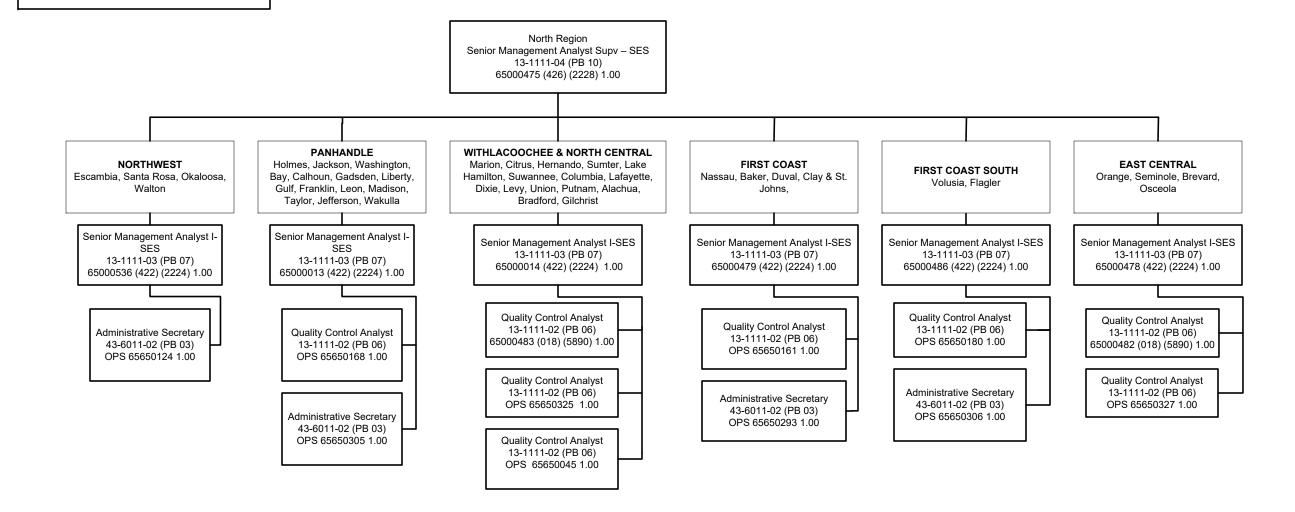


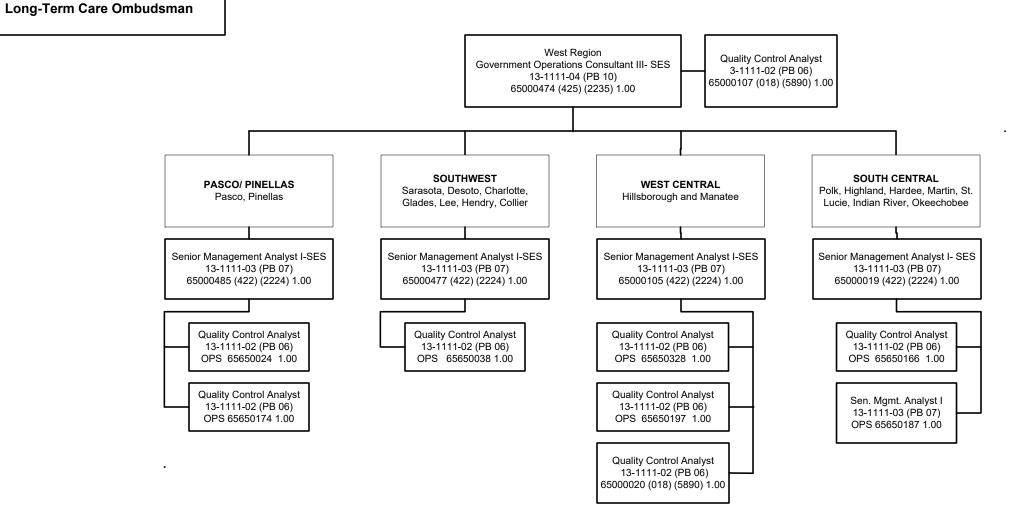


Department of Elder Affairs Long-Term Care Ombudsman

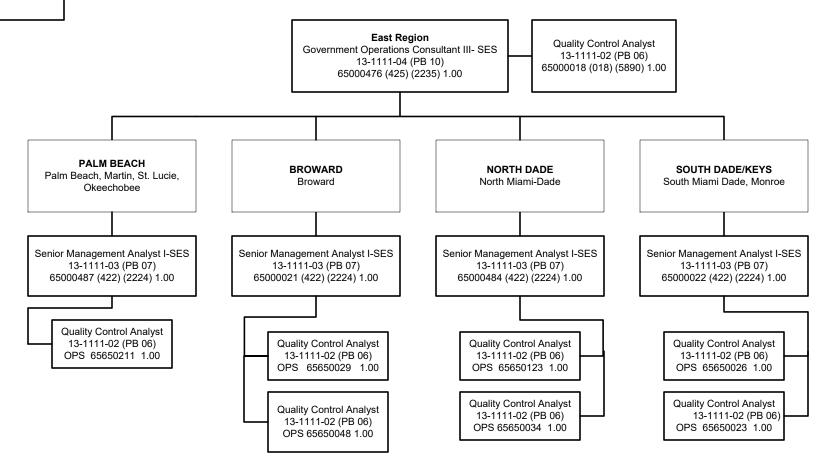


Long-Term Care Ombudsman





Long-Term Care Ombudsman



ELDER AFFAIRS, DEPARTMENT OF			FISCAL YEAR 2021-22	
SECTION I: BUDGET		OPERATI	NG	FIXED CAPITAL OUTLAY
TOTAL ALL FUNDS GENERAL APPROPRIATIONS ACT			401,087,048	4,000,000
ADJUSTMENTS TO GENERAL APPROPRIATIONS ACT (Supplementals, Vetoes, Budget Amendments, etc.) FINAL BUDGET FOR AGENCY		_	39,917,299	4 000 000
FINAL BUDGET FOR AGENCT	_		441,004,347	4,000,000
SECTION II: ACTIVITIES * MEASURES	Number of Units	(1) Unit Cost	(2) Expenditures (Allocated)	(3) FCO
Executive Direction, Administrative Support and Information Technology (2) Long-term Care Ombudsman Council*	2,760	1,891.46	5,220,422	4,000,000
Public Guardianship Program * Number of judicially approved guardianship plans	3,741		16,870,970	
Universal Frailty Assessment * Total number of CARES assessments	111,894		22,188,667	
Meals, Nutrition Education, And Nutrition Counseling * Number of people served	79,702		76,006,328	
Early Intervention/Prevention* Number of elders served Caregiver Support * Number of elders served	439,914 62,024	70.14	30,853,802 61,310,292	
Supportive Community Care * Number of elders served	31,739		42,752,209	
Home And Community Services Diversions * Number of elders served	50,810		78,837,884	
Long Term Care Initiatives * Number of elders served	3,020		27,481,536	
	 	1		
		1		
		1		
		-		
		1		
	-			
		1		
			 	
		1		
	-			
		1		
OTAL			361,522,110	4,000,00
SECTION III: RECONCILIATION TO BUDGET				
PASS THROUGHS				
TRANSFER - STATE AGENCIES				
AID TO LOCAL GOVERNMENTS PAYMENT OF PENSIONS, BENEFITS AND CLAIMS				
OTHER			417,457	
REVERSIONS			79,064,783	
TOTAL BUDGET FOR AGENCY (Total Activities + Pass Throughs + Reversions) - Should equal Section I above. (4)			441,004,350	4,000,00
COLLEGE E VICTORIE VI ACENSV I EVEL UNIT COCE SU	MMARY			
SCHEDULE XI/EXHIBIT VI: AGENCY-LEVEL UNIT COST SUI	WWAKY			

⁽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 XII: OUTSOURCING OR PRIVATIZATION OF A SERVICE OR ACTIVITY

Schedule XII Cover Sheet and Agency Proje	ct Approval	
Agency:	Schedule XII Submission Date:	
Project Name:	Is this project included in the Agency's LRPP? YesNo	
FY 2023 - 2024 LBR Issue Code:	FY 2023 -2024 LBR Issue Title:	
Agency Contact for Schedule XII (Name, Phone	#, and E-mail address):	
AGENCY APPRO	VAL SIGNATURES	
I am submitting the attached Schedule XII in suppo I have reviewed and agree with the information in t		
Agency Head:	Date:	
Printed Name:		
Agency Chief Information Officer:	Date:	
(If applicable) Printed Name:		
Budget Officer:	Date:	
Printed Name:		
Planning Officer:	Date:	
K.		
Printed Name:		
Project Sponsor:	Date:	
Drinted Names		

SCHEDULE XII: OUTSOURCING OR PRIVATIZATION OF A SERVICE OR ACTIVITY

I.	Background Information
1.	Describe the service or activity proposed to be outsourced or privatized.
2.	How does the service or activity support the agency's core mission? What are the agency's desired
	goals and objectives to be achieved through the proposed outsourcing or privatization and the rationale
	for such goals and objectives?
3.	Provide the legal citation authorizing the agency's performance of the service or activity.
4	
4.	Identify the service's or activity's major stakeholders, including customers, clients, and affected organizations or agencies.
	organizations of agencies.
-	
5.	Describe and analyze how the agency currently performs the service or activity and list the resources, including information technology services and personnel resources, and processes used.
6.	Provide the existing or needed legal authorization, if any, for outsourcing or privatizing the service or
	activity.

7.	Provide the reasons for changing the delivery or performance of the service or activity. What is the current cost of service and revenue source?
II.	Evaluation of Options
1.	Provide a description of the available options for performing the service or activity and list for each
	option the general resources and processes needed to perform the service or activity. If state employees are currently performing the service or activity, provide at least one option involving maintaining state provision of the service or activity.
2.	For each option, describe its current market for the service or activity under consideration for outsourcing or privatizing. How many vendors are currently providing the specific service or activity on a scale similar to the proposed option? How mature is this market?
3.	List the criteria used to evaluate the options. Include a cost-benefit analysis documenting the direct and indirect specific baseline costs, savings, and qualitative and quantitative benefits involved in or resulting from the implementation of the recommended option(s).
4.	Based upon the evaluation criteria, identify and analyze the advantages and disadvantages of each
	option, including potential performance improvements and risks.
5.	For each option, describe the anticipated impact on the agency and the stakeholders, including impacts
	on other state agencies and their operations.

6.	Identify changes in cost and/or service delivery that will result from each option. Describe how the changes will be realized. Describe how benefits will be measured and provide the annual cost.
	Changes will be realized. Describe now benefits will be measured and provide the alimual cost.
7.	List the major risks for each option and how the risks could be mitigated.
8.	Describe any relevant experience of other agencies, other states, or the private sector in implementing similar options.
III.	Information on Recommended Option
III. 1.	Information on Recommended Option Identify the proposed competitive solicitation including the anticipated number of respondents.
	Identify the proposed competitive solicitation including the anticipated number of respondents.
	Identify the proposed competitive solicitation including the anticipated number of respondents. Provide the agency's projected timeline for outsourcing or privatization of the service or activity. Include key events and milestones from the beginning of the procurement process through the expiration of a contract and key events and milestones for transitioning the service or activity from the state to the vendor. Provide a copy of the agency's transition plan for addressing changes in the number of agency personnel, affected business processes, employee transition issues including reemployment and retraining assistance plan for employees who are not retained by the agency or employed by the contractor, and communication with stakeholders such as agency clients and the



4.	Provide an analysis of the potential impact on federal, state, and local revenues, and expenditures. If federal dollars currently fund all or part of the service or activity, what has been the response of the federal funding agency(ies) to the proposed change in the service delivery method? If federal dollars currently fund all or part of the service or activity, does the change in the service delivery method meet federal requirements?
5.	What responsibilities, if any, required for the performance of the service or activity will be retained and performed by the agency? What costs, including personnel costs, will the agency continue to incur after the change in the service delivery model? Provide these cost estimations. Provide the method for monitoring progress in achieving the specified performance standards within the contract.
6.	Describe the agency's contract management process for the outsourced or privatized service or activity, including a description of the specific performance standards that must be met to ensure adequate performance and how the agency will address potential contractor nonperformance. Attach a copy of any competitive solicitation documents, requests for quote(s), service level agreements, or similar documents issued by the agency for this competitive solicitation if available.
7.	Provide the agency's contingency plan(s) that describes the tasks involved in and costs required for its implementation and how the agency will resume the in-house provision of the service or activity in the event of contract termination/non-renewal.
8.	Identify all other Legislative Budget Request issues that are related to this proposal.

9.	Explain whether or not the agency can achieve similar results by a method other than outsourcing or privatization and at what cost. Please provide the estimated expenditures by fiscal year over the expected life of the project.
10.	Identify the specific performance measures that are to be achieved or that will be impacted by changing the service's or activity's delivery method.
11.	Provide a plan to verify vendor(s) compliance with public records laws.
12.	If applicable, provide a plan to verify vender compliance with applicable federal and state law ensuring access by persons with disabilities.
13.	If applicable, provide a description of potential differences among current agency policies or processes and a plan to standardize, consolidate, or revise current policies or processes.
14.	If the cost of the outsourcing is anticipated to exceed \$10 million in any given fiscal year, provide a copy of the business case study (and cost benefit analysis if available) prepared by the agency for the activity or service to be outsourced or privatized pursuant to the requirements set forth in section 287.0571, Florida Statutes.

SCHEDULE XIII PROPOSED CONSOLIDATED FINANCING OF DEFERRED-PAYMENT COMMODITY CONTRACTS

Contact Information
Agency:
Name:
Phone:
E-mail address:
Deferred-payment commodity contracts are approved by the Department of Financial Services (department). The rules governing these contracts are in Chapter 69I-3, Florida Administrative Code and may be accessed via the following website https://www.flrules.org/gateway/ChapterHome.asp?Chapter=69I-3 . Information on the program and other associated information on the Consolidated Equipment Financing Program and Guaranteed Energy Savings Contracts may be accessed via the following website http://www.myfloridacfo.com/Division/AA/StateAgencies/default.htm under the Financing tab.
For each proposed deferred-payment commodity contract that exceeds the threshold for Category IV as defined in section 287.017, Florida Statutes, complete the following information and submit Department of Financial Services forms Lease Checklist DFS-A1-411 and CEFP Checklist DFS-A1-410 with this schedule.
1. Commodities proposed for purchase.
2. Describe and justify the need for the deferred-payment commodity contract including guaranteed energy performance savings contracts.
performance savings contracts.
3. Summary of one-time payment versus financing analysis including a summary amortization schedule for the financing by fiscal year (amortization schedule and analysis detail may be attached separately).
4. Identify base budget proposed for payment of contract and/or issue code and title of budget request increased authority is required for payment of the contract.

Office of Policy and Budget – July 2022

Schedule XIV Variance from Long Range Financial Outlook

Agency: Department of Elder Affairs Contact: Randy Pupo, Budget Director

		an estim	nate for your agency for Fiscal Year 2023- FY 2023-2024 Estimate/Request Amount		
	Issue (Revenue or Budget Driver)	R/B*	Long Range Financial Outlook	Legislative Budget Request	
а	Elderly Services	В	17.4	13.6	
b	Human Services Information Technology/Infrastructure - Enterprise	В	7.8	3.2	
С					
d					
е					
f					
The	dur agency's Legislative Budget Request does not conform to the long ran department's request reflects the FY 2023-2024 estimated cost to continue the new system.				

* R/B = Revenue or Budget Driver

Office of Policy and Budget - July 2022

SCHEDULE XV:

CONTRACT INFORMATION FOR EACH CONTRACT IN WHICH THE CONSIDERATION TO BE PAID TO THE AGENCY IS A PERCENTAGE OF THE VENDOR REVENUE AND IN EXCESS OF \$10 MILLION

Contact Information		
Agency:		
Name:		
Phone:		A (2)
E-mail address:		
1. Vendor Name		
2. Brief description of service	es provided by the vendor.	
3. Contract terms and years i	remaining.	
4. Amount of revenue genera		
Prior Fiscal Year	Current Fiscal Year	Next Fiscal Year (Request Year)
5. Amount of revenue remitte	d	
Prior Fiscal Year	Current Fiscal Year	Next Fiscal Year (Request Year)
6. Value of capital improvement	t	
7. Remaining amount of capital	improvement	
8. Amount of state appropriat		
Prior Fiscal Year	Current Fiscal Year	Next Fiscal Year (Request Year)

Office of Policy and Budget – July 2022



Schedule I Series

Administrative Trust Fund - 2021

Schedule I Narratives

Schedule I Inter-Agency Transfer Form

Schedule IA Detail of Fees and Related Program Costs

Schedule IC Reconciliation of Unreserved Fund Balance

Schedule IC Reconciliation of Beginning Trial Balance to Schedule IC

Federal Grants Trust Fund - 2261

Schedule I Narratives

Schedule I Inter-Agency Transfer Form

Schedule IC Reconciliation of Unreserved Fund Balance

Schedule IC Reconciliation of Beginning Trial Balance to Schedule IC

Grants and Donations Trust Fund – 2339

Schedule I Narratives

Schedule IC Reconciliation of Unreserved Fund Balance

Schedule IC Reconciliation of Beginning Trial Balance to Schedule IC

Operations and Maintenance Trust Fund – 2516

Schedule I Narratives

Schedule I Inter-Agency Transfer Form

Schedule IC Reconciliation of Unreserved Fund Balance

Schedule IC Reconciliation of Beginning Trial Balance to Schedule IC

SCHEDULE 1A: DETAIL OF FEES AND RELATED PROGRAM COSTS **Department:** Department of Elder Affairs Budget Period: 2023-2024 Administrative Trust Fund **Program: Fund:** 2021 **Specific Authority:** 744.1083:744.534 Public Guardianship Registration Fees, Abandon Property **Purpose of Fees Collected:** Type of Fee or Program: (Check **ONE** Box and answer questions as indicated.) Regulatory services or oversight to businesses or professions. (Complete Sections I, II, and III and attach **Examination of Regulatory Fees** Form - Part I and II.) Non-regulatory fees authorized to cover full cost of conducting a specific program or service. (Complete Sections I, II, and III only.) **SECTION I - FEE COLLECTION ACTUAL ESTIMATED** REQUEST FY 2021 -2022 FY 2022 -2023 FY 2023-2024 Receipts: Public Guardianship Unclaimed Property 93,902 168,000 168,000 32,350 Public Guardianship Registration Fees 29,850 32,350 **Total Fee Collection to Line (A) - Section III** 123,752 200,350 200,350 **SECTION II - FULL COSTS** Direct Costs: Salaries and Benefits Other Personal Services 125,649 125,649 125,649 Expenses 7,299 7,299 7,299 Operating Capital Outlay Service Chg. 310322 **Contracted Services** 11,908 11,908 11,908 Indirect Costs Charged to Trust Fund 144,856 144,856 144,856 Total Full Costs to Line (B) - Section III Basis Used: **SECTION III - SUMMARY** TOTAL SECTION I 123,752 200,350 200,350 (A) TOTAL SECTION II 144,856 144.856 144.856 (B) **TOTAL - Surplus/Deficit** (C) (21,104)55,494 55,494 **EXPLANATION of LINE C:** Deficits in estimated columns, Section III Summary (above), will be covered by unreserved fund balance, if necessary.

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title: Trust Fund Title:	Budget Period: 2023 - 2024 Department of Elder A Admin Trust Fund		
Budget Entity: LAS/PBS Fund Number:	2021		
	Balance as of 6/30/2022	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	302,179.41 (A)	0.01	302,179.42
ADD: Other Cash (See Instructions)	- (B)		-
ADD: Investments	- (C)		-
ADD: Outstanding Accounts Receivable	211,115.03 (D)	(107,054.27)	104,060.76
ADD:	- (E)		-
Total Cash plus Accounts Receivable	513,294.44 (F)	(107,054.26)	406,240.18
LESS Allowances for Uncollectibles	(G)		-
LESS Approved "A" Certified Forwards	115,357.65 (H)		115,357.65
Approved "B" Certified Forwards	- (H)		-
Approved "FCO" Certified Forwards	- (H)		-
LESS: Other Accounts Payable (Nonoperating)	425.04 (I)		425.04
LESS:	- (J)		-
Unreserved Fund Balance, 07/01/22	397,511.75 (K)	(107,054.26)	290,457.49 **

Notes:

Office of Policy and Budget - July 2022

^{*}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: 2023 - 2024 Department Title:** Department of Elder Affairs **Trust Fund Title:** Admin Trust Fund 2021 LAS/PBS Fund Number: **BEGINNING TRIAL BALANCE:** Total Fund Balance Per FLAIR Trial Balance, 07/01/22 395,515.83 Total all GLC's 5XXXX for governmental funds; GLC 539XX for proprietary and fiduciary funds **Subtract Nonspendable Fund Balance (GLC 56XXX)** 0.00 (B) Add/Subtract Statewide Financial Statement (SWFS)Adjustments: SWFS Adjustment # and Description (107,054.00) (C) SWFS Adjustment # and Description 0.00 (C) **Add/Subtract Other Adjustment(s):** 0.00 (D) Approved "B" Carry Forward (Encumbrances) per LAS/PBS Approved FCO Certified Forward per LAS/PBS 0.00 (D) 1,995.92 (D) A/P not C/F-Operating Categories Rounding (0.75)(D)0.00 (D) 0.00 (D) ADJUSTED BEGINNING TRIAL BALANCE: **290,457.00** (E) UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) **290,457.00** (F) **DIFFERENCE: 0.00** (G)* *SHOULD EQUAL ZERO.

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

	Budget Period: 2023 - 2024
Department Title:	Florida Department of
Trust Fund Title:	Federal Grants Trust Fund
Budget Entity:	6500000000
LAS/PBS Fund Number:	2261

	Balance as of 6/30/2022	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	5,067,632.59	(A) (4,575,706.74)	491,925.85
ADD: Other Cash (See Instructions)		(B)	-
ADD: Investments		(C)	-
ADD: Outstanding Accounts Receivable	3,595,460.05	(D) 14,637,665.17	18,233,125.22
ADD: Anticipated Revenue		(E)	_
Total Cash plus Accounts Receivable	8,663,092.64	(F) 10,061,958.43	18,725,051.07
LESS Allowances for Uncollectibles		(G)	-
LESS Approved "A" Certified Forwards	3,027,658.26	(H)	3,027,658.26
Approved "B" Certified Forwards	9,238,273.92	(H)	9,238,273.92
Approved "FCO" Certified Forwards		(H)	-
LESS: Other Accounts Payable (Nonoperating)	5,241.00	(I)	5,241.00
LESS:		(J)	-
Unreserved Fund Balance, 07/01/22	(3,608,080.54)	(K) 10,061,958.43	6,453,877.89

Notes:

Office of Policy and Budget - July 2022

^{*}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: 2023 - 2024 Department Title:** Florida Department of Elder Affairs **Trust Fund Title:** Federal Grants Trust Fund LAS/PBS Fund Number: 2261 **BEGINNING TRIAL BALANCE:** Total Fund Balance Per FLAIR Trial Balance, 07/01/22 Total all GLC's 5XXXX for governmental funds; (9,352,370.40) (A) GLC 539XX for proprietary and fiduciary funds Subtract Nonspendable Fund Balance (GLC 56XXX) 0.00 (B) Add/Subtract Statewide Financial Statement (SWFS)Adjustments: SWFS Adjustment # 1 Cash Balance adjustment (4,575,706.74) (C) 14,637,665.17 (C) SWFS Adjustment #2 and #3 Outstanding Accounts Receivable SWFS Adjustment #4 Outstanding Accounts Receivable 14,978,987.34 (C) Add/Subtract Other Adjustment(s): Approved "B" Carry Forward (Encumbrances) per LAS/PBS (9,238,273.92) (D) Approved FCO Certified Forward per LAS/PBS (D) A/P not C/F-Operating Categories (1,206.28) (D) Compensated Absences Adjustment 3,591.69 (D) Difference between CF report and Trial Balance 1,191.03 (D) (D) ADJUSTED BEGINNING TRIAL BALANCE: **6,453,877.89** (E) UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) **6,453,877.89** (F) **DIFFERENCE: 0.00** (G)* *SHOULD EQUAL ZERO.

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2023 - 2024 Department of Elder A Grants & Donations Trust Fund		
Trust Fund Title:			
Budget Entity:	650000		
LAS/PBS Fund Number:	2339		
	Balance as of 6/30/2022	SWFS* Adjustments	Adjusted Balance
Chief Financial Officer's (CFO) Cash Balance	68,339.25	(A)	68,339.25
ADD: Other Cash (See Instructions)		(B)	-
ADD: Investments		(C)	-
ADD: Outstanding Accounts Receivable		(D)	-
ADD:		(E)	-
Total Cash plus Accounts Receivable	68,339.25	(F) -	68,339.25
LESS Allowances for Uncollectibles		(G)	-
LESS Approved "A" Certified Forwards		(H)	-
Approved "B" Certified Forwards		(H)	-
Approved "FCO" Certified Forwards		(H)	-
LESS: (Nonoperating) Service charge	3.60	(I)	3.60
LESS:		(J)	-
Unreserved Fund Balance, 07/01/22	68,335.65	(K) -	68,335.65
Notes: *SWFS = Statewide Financial Stateme ** This amount should agree with Lin year and Line A for the following	ne I, Section IV of the Sci	hedule I for the most recent	completed fiscal

Office of Policy and Budget - July 2022

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC **Budget Period: 2023 - 2024 Department Title:** Department of Elder Affairs **Trust Fund Title:** Grants & Donations Trust Fund LAS/PBS Fund Number: 2339 **BEGINNING TRIAL BALANCE:** Total Fund Balance Per FLAIR Trial Balance, 07/01/22 68,339.25 Total all GLC's 5XXXX for governmental funds; GLC 539XX for proprietary and fiduciary funds **Subtract Nonspendable Fund Balance (GLC 56XXX)** (B) Add/Subtract Statewide Financial Statement (SWFS)Adjustments: SWFS Adjustment # and Description (C) SWFS Adjustment # and Description (C) **Add/Subtract Other Adjustment(s):** Approved "B" Carry Forward (Encumbrances) per LAS/PBS (D) Approved FCO Certified Forward per LAS/PBS (D) A/P not C/F-Operating Categories (D) (D) (D) (D) ADJUSTED BEGINNING TRIAL BALANCE: **68,339.25** (E) UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) **68,339.25** (F) **DIFFERENCE:** $(G)^*$ *SHOULD EQUAL ZERO.

SCHEDULE IC: RECONCILIATION OF UNRESERVED FUND BALANCE

Department Title:	Budget Period: 2023 - 2024 Department of Elder Affa		
Trust Fund Title:	Operations & Maintenance Trust Fund		
Budget Entity:	650000000		
LAS/PBS Fund Number:	2516		
	Balance as of	SWFS*	Adjusted
	6/30/2022	Adjustments	Balance
Chief Financial Officer's (CFO) Cash Balance	(6,756,360.00) (A)	7,420,168.00	663,808.00
Chief Financial Officer's (CFO) Cash Dalance	(0,730,300.00)(A)	7,420,108.00	003,808.00
ADD: Other Cash (See Instructions)	(B)		-
ADD. Income	(0)		
ADD: Investments	(C)		-
ADD: Outstanding Accounts Receivable	3,740,557.00 (D)		3,740,557.00
ADD	0600000		2,200,00
ADD:	86,398.00 (E)		86,398.00
Total Cash plus Accounts Receivable	(2,929,405.00) (F)	7,420,168.00	4,490,763.00
LESS Allowances for Uncollectibles	(G)		-
LESS Approved "A" Certified Forwards	838,427.00 (H)		838,427.00
Approved "B" Certified Forwards	86,398.00 (H)		86,398.00
Approved "FCO" Certified Forwards	(H)		-
LESS: Other Accounts Payable (Nonoperating)	(I)		-
LESS:	(J)		-
Unreserved Fund Balance, 07/01/22	(3,854,230.00) (K)	7,420,168.00	3,565,938.00 **
Notes:			
*SWFS = Statewide Financial Statemen	nt		
** This amount should agree with Line		or the most recent com	pleted fiscal
year and Line A for the following ye	ear.		

Office of Policy and Budget - July 2022

RECONCILIATION: BEGINNING TRIAL BALANCE TO SCHEDULE I and IC Budget Period: 2023 - 2024 Department Title: Department of Elder Affairs Trust Fund Title: Opertions & Maintenance Trust Fund LAS/PBS Fund Number: 2516 **BEGINNING TRIAL BALANCE:** Total Fund Balance Per FLAIR Trial Balance, 07/01/22 Total all GLC's 5XXXX for governmental funds; (3,862,620.14) (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 7,420,168.00 (C) Add/Subtract Other Adjustment(s): Approved "B" Carry Forward (Encumbrances) per LAS/PBS (86,398.00) (D) Approved FCO Certified Forward per LAS/PBS (D) A/P not C/F-Operating Categories 8,390.53 (D) A/P not C/F-Operating Categories 86,398.00 (D) **Anticipated Revenue** (D) (D)ADJUSTED BEGINNING TRIAL BALANCE: **3,565,938.00** (E) UNRESERVED FUND BALANCE, SCHEDULE IC (Line K) 3,565,938.00 (F) DIFFERENCE: 0.00 (G)* *SHOULD EQUAL ZERO.

SCHEDULE IV-B FOR ENTERPRISE CLIENT INFORMATION AND REGISTRATION TRACKING SYSTEM

For Fiscal Year 2023-24



October 13, 2022

DEPARTMENT OF ELDER AFFAIRS

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I. Schedule IV-B Cover Sheet

	Schedule IV-B Cove	r Sheet and Agency Proje	ect Approval
Agency: Department of Elder Affairs Schedule IV-B Submi		Schedule IV-B Submission	on Date: October 13, 2022
Project Name: Enterprise Client Information		Is this project included in	the Agency's LRPP?
and Registration I	Fracking System (eCIRTS)	<u>X</u> Yes	No
FY 2023-24 LBR	Issue Code: 36207C0	FY 2023-24 LBR Issue T Registration Tracking Sy	Fitle: Enterprise Client Information and stem (eCIRTS) Project
Agency Contact fo	or Schedule IV-B (Name, Pho	ne #, and E-mail address):	
Laura Anderson, 8	350-414-2149, <u>andersonl@eld</u>	eraffairs.org	
Jonathan Yeaton,	850-414-2317, <u>yeatonj@elder</u>	raffairs.org	
	AGENCY A	APPROVAL SIGNATUR	RES
estimated costs an	d benefits documented in the ded time for the estimated costs	Schedule IV-B and believe	adget request. I have reviewed the the proposed solution can be delivered benefits. I agree with the information in
Agency Head:	Michelle Branham (Oct 14, 2022 08:19 EDT)		Date: Oct 14, 2022
Printed Name: Michelle Branham, Secretary			
Agency Chief Information Officer (or equivalent): Johathan Yeaton		Date: Oct 13, 2022	
Printed Name:	Jonathan Yeaton, Chief Information Officer		
Budget Officer:	Pw Tw Randy Pupo (Oct 13, 2022 16:43 EDT)		Date: Oct 13, 2022
Printed Name:	Randy Pupo, Budget Directo	r	
Planning Officer:	Bridget McKay		Date: Oct 13, 2022
Printed Name:	Bridget McKay, Chief of Pla	nning and Evaluation	
Project Sponsor:	Jonathan Yeaton Jonathan Yeaton (Oct 13, 2022 16:40 EDT)		Date: Oct 13, 2022
Printed Name:	Jonathan Yeaton, Chief Infor		
Schedule IV-B Preparers (Name, Phone #, and E-mail address):			
Business Need: Ashley Apthorp, 850-414-2031, apthorpa@elderaffairs.org Jennifer Moore, 850-414-2164, moorej@elderaffairs.org			
Cost Benefit Analysis: Amit Bokey, 850-414-2385, bokeya@elderaffairs.org Jonathan Yeaton, 850-414-2317, yeatonj@elderaffairs.org		85, bokeya@elderaffairs.org	
	Risk Analysis:	Amit Bokey, 850-414-23	85, <u>bokeya@elderaffairs.org</u> 4-2317, <u>yeatonj@elderaffairs.org</u>
	Technology Planning: Amit Bokey, 850-414-2385, bokeya@elderaffairs.org Jonathan Yeaton, 850-414-2317, yeatonj@elderaffairs.org		85, bokeya@elderaffairs.org
	Project Planning:		85, bokeya@elderaffairs.org

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 mission of the Department of Elder Affairs (Department/DOEA) is to promote the well-being, safety, and independence of Florida's seniors, their families, and caregivers with the goal of helping Florida's older adults remain healthy, safe, and independent. Per Section 430.02, Florida Statutes, DOEA has the lead responsibility for administering human service programs for the elderly. To fulfill the legislative intent, DOEA, in conjunction with other state agencies and contracted Area Agencies on Aging (AAAs) which operate as Aging and Disability Resource Centers (ADRCs), advise, assist, and protect the state's elderly citizens to the fullest extent possible. The Department plays a critical role in the advocacy for and provision of health and human services to Florida's 5.5 million older residents and is focused on the social determinants of health. Designated as the State Unit on Aging, the Florida Department of Elder Affairs serves as the primary state agency for administering human and nutrition services to Florida's older adults and their caregivers. These services include home delivered meal programs (Meals-on-Wheels), nutrition programs, in-home services, elder abuse prevention, and caregiver support. By developing programs and services implemented in an easily accessible manner, DOEA ensures Florida's older adults maintain a state of maximum independence and quality of life.

In September 2016, DOEA underwent a process to update its Long-Range Program Plan (LRPP) for the 2017-2020 fiscal years. The updated LRPP outlines the Department's priorities by setting the goals needed to fulfill DOEA's mission and align with the Governor's priorities for improving education, increasing economic development, creating jobs, and ensuring public safety. These goals include:

- Enable older adults, individuals with disabilities, their families, and other consumers to choose and easily access options for existing mental and physical health, as well as longterm and end-of-life care;
- Provide home and community-based services to enable individuals to maintain the highest level of independence for as long as possible, including supports for family caregivers;
- Empower older adults, individuals with disabilities, and their caregivers to live active, healthy lives to improve their overall health status;
- Ensure the legal rights of older adults are protected and prevent their abuse, neglect, and exploitation;
- Promote planning and collaboration at the community level that recognize the benefits and needs of its aging population; and
- Maintain effective and responsive management.

To accomplish the goals outlined above, DOEA must overcome existing and future challenges. One of the primary challenges to DOEA is the anticipated precipitous increase in clients needing services. Demographic projections stated in the Florida State Plan on Aging 2017-2020, indicate

approximately one-quarter of Florida's current population are baby boomers and are expected to age into retirement within the next 10 years. Providing services that will effectively respond to the needs of the baby boomers and will require innovation, creativity, process optimization and enhanced technical capabilities.

In the Florida State Plan on Aging 2017-2020, DOEA identified several strategies to assist with the changes in the existing service model. These include:

- Develop innovative ways to get information to older adults on how to access health and long-term care services, including mental, cognitive, and behavioral health services;
- Maximize the responsiveness of Elder Helplines;
- Enhance resources to address, coordinate, and facilitate Long Term Care needs;
- Enhance an existing partnership with the Department of Children and Families (DCF) to automate service eligibility processes;
- Enhance an existing partnership with the Agency for Persons with Disabilities (APD) to collaborate on intellectual disability and mental illness services;
- Provide information and referral services to underserved individuals;
- Provide a clearinghouse for evidence-based programs for elders in Florida;
- Identify target populations using technology;
- Participate in statewide efforts to develop a uniform statewide reporting system;
- Develop and automate complaint intake procedures;
- Ensure federal and state funds are used to serve effectively and efficiently to facilitate DOEA client needs:
- Prepare for elder needs through planning, collaboration, and policy development through advanced analytics and reporting;
- Provide information to empower elders, adults with disabilities, caregivers, and their families to make informed decisions about long-term care options; and
- Strengthen the state's ability to prevent and report on elder abuse, neglect, and exploitation.

Implementation of these 14 strategies is critical to the continued success of DOEA. Based on the expanding elder population in Florida and the demand placed on existing resources, increased efficiency in providing services to our clients ranks as one of the Department's top priorities. DOEA will need to equip staff with the appropriate technology tools thereby enabling them to continue to meet client demands.

The Client Information and Registration Tracking System (CIRTS) is the current technology used by DOEA to provide services including medical eligibility determination of the State's older adult population for home and community-based services. CIRTS is a 25+ year old system using an obsolete and no longer supported technology. The impact of continuing to use older technology is reduced stability, dependability, extensibility, and supportability. Years of extensive programmatic changes have resulted in conflicting modifications and workarounds in code, creation of additional external "shadow" databases, and paper-based processes severely convoluting the workflow, data

management, and security processes resulting in significant inefficiencies in the system thereby reducing employee efficiency and productivity.

An example contributing to workload increases is the inability of the employee to have reliable mobile access. An online assessment optimally should take approximately 45 minutes. Oftentimes, staff start the online assessment only to discover it cannot be completed due to various technical problems. This requires staff to revert to a manual assessment which can add an additional hour to the assessment process. The inefficiency is further exacerbated in performing manual assessments which then must be entered manually resulting in increased labor and significant processing delays. Thus, reducing efficiency in performing the assessment results in lessening the ability to perform timely assessments and adds to a backlog of assessments to be completed each year. This inhibits DOEA's goal of effectively and efficiently serving Florida's 5.5 million older adults.

With the planned next generation of CIRTS (eCIRTS), workers can use today's modern technology including the provision of checkpoints and offline processing from their laptop, tablet, or phone to effectively perform assessments and have the data securely and accurately updated either immediately or upon the next available connection.

To determine the best approach for the next generation of CIRTS, DOEA contracted with an IT strategy firm to develop a market analysis report and recommendation for technical solutions to best assist DOEA with its challenges. Based on the findings of the report, DOEA's goal is to transition to an enterprise Commercial-Off-The-Shelf (COTS) or Framework-based customer relationship management (CRM) system. This modernization coupled with a business process reengineering initiative will allow DOEA to perform the core functions more efficiently providing an increase in worker productivity.

Implementation of a robust CRM platform allows DOEA to achieve its goals of standardizing and optimizing processes, improving client service, enhancing client data management and accountability. This will provide the opportunity for increasing the efficiency and effectiveness of staff as well as advanced data analytics and reporting. These improvements along with improved information technology will facilitate the ability to leverage the functionality described below.

a) Improved Client Service

The Department's goals for client service would be significantly improved with a solution providing the following capabilities:

- Easy and intuitive client access to DOEA information, services, and programs;
- Consolidated client record providing a holistic view of client activity and interaction;
- Automated workflow functionality streamlining the processing of service requests thereby decreasing client assessment wait times;
- An integrated resource directory web page to facilitate searching for various home and community-based services in the selected service area;
- Ability for DOEA clients to query their application status online rather than needing to call DOEA directly;

- Robust mobile device functionality supporting collection of all necessary client data streamlining the assessment process; and
- Increased reporting and analytics capability allowing DOEA leadership to monitor client service levels and plan strategically to meet their changing needs.

Based on the improvements described above, eCIRTS will allow DOEA to provide better access to client services. In addition, overall client satisfaction will be improved due to faster responsiveness in client requests. DOEA will gain numerous efficiency benefits from enhancing online service offerings to clients.

b) Increased Staff Efficiency

The Department is faced with meeting the needs of a growing client population without corresponding increases in staff resources. To effectively address this challenge, staff efficiency will need to increase by eliminating manual processes and implementing reengineered business processes designed for optimal productivity. Increased staff efficiency would be realized with a solution providing the following capabilities:

- Consolidated client record for managing all client-related information, documentation, and contacts (case notes, medical information, caregiver contact information, etc.);
- Master data management system to improve access to client-related information and reduce duplication of data;
- Efficient user interface providing a staff-specific work queue dashboard displaying current assignments, alerts, unified calendaring and scheduling, workflow, and automated communication and collaboration tools;
- Enhanced workflow minimizing or eliminating manual processes and increasing staff collaboration and efficiency;
- Better management capabilities via a staff management dashboard allowing supervisors to monitor staff work queues, assign tasks, and access productivity analytics and reports;
- Enhanced mobile capability allowing staff to complete work assignments remotely via Wi-Fi or cellular and/or work offline with automatic system synchronization;
- Enhanced and automated scheduling based on staff-defined business rules with appointment reminders and route mapping optimization for assessors who travel to client locations;
- Ability for electronic signatures on required documentation submission thereby eliminating several of the current paper processes regarding the printing, scanning, faxing, and mailing of relevant documentation; and
- Automated correspondence generation and delivery thereby reducing manual entry errors as well as mailing and faxing costs.

Enhanced technology using proactive notifications of assigned work, tracking, and case status, reduction of redundant data entry, and prevention of errors and repeat work will reduce manual processes and save valuable staff time.

c) Enhanced Data Management, Analytics, and Reporting

Effective and efficient management of client-centric data will enhance the capture, accuracy, integrity, security, and reporting of data tied to critical DOEA functions through the following:

- Improved data capture, accuracy, and integrity with standardized entry screens and forms;
- Field and screen level validations ensuring required data is entered and validated;
- Pre-defined, standardized drop-down list values significantly reducing or eliminating data entry errors;
- Enhanced data security with the encryption of all data in transit and at rest;
- Role-based access controls to restrict access to Health Insurance Portability and Accountability Act (HIPAA) Protected Health Information (PHI) and other confidential data to only those with a business need to know; and
- Improved data reporting and analytics allows for more advanced reporting capabilities.
 Using ad hoc and customizable reports facilitate the ability for trend analysis by using bar graphs, charts, and heat maps.

d) Increased Efficiency and Effectiveness of Information Technology Resources

Operation and maintenance of CIRTS is resource-intensive, inflexible, and costly. The Department's Bureau of Information Technology is being asked to do more with existing resources. Choosing the right technology solution as well as an appropriate operations and maintenance strategy augmenting Information Technology's strengths and reducing demands would provide the following benefits:

- Optimizes IT resources with the reduction of operation and maintenance support;
- Reduces the need to recruit and retain resources with out-of-date and costly skill sets;
- Enables key resources to provide timely configuration and customizations to address internal and external stakeholder requirements;
- Increases the reliability and security of remote system access by mobile users;
- Improves system performance by using multiple highly available, redundant, load-balanced web servers;
- Ensures all data is continually and reliably backed up by the vendor; and
- Provides robust disaster recovery and business continuity plans.

2. Business Objectives

The following key business objectives to improve process efficiencies were developed from the business process reengineering and "To-Be" requirements definition initiatives as well as input from key executive leadership, stakeholders, and operational staff:

- Standardize and optimize key business processes to improve operational efficiencies;
- Enhance overall DOEA staff efficiency and effectiveness with applicable technology tools;

- Reduce or eliminate manual tasks for DOEA, Area Agencies on Aging (AAAs), Aging and Disability Resource Centers (ADRCs), and Lead Agencies staff resulting in greater efficiency and faster response to client needs;
- Enhance intra- and inter-departmental workflow functionality allowing DOEA staff to provide services faster with greater efficiency;
- Increase data integrity, standardization, accuracy, and security toward improved operational efficiency, monitoring, reporting, and analytics;
- Facilitate better collaboration and communication among the DOEA Comprehensive Assessment and Review for Long-Term Care Services (CARES) program, AAAs, ADRCs, and Lead Agencies which increase the efficiency and accuracy of the intake and referral, assessment, staffing, monitoring, and compliance processes across DOEA;
- Improve access to client data by using document management while reducing duplication of data in disparate systems;
- Provide mobile monitoring and assessments workforce capabilities including real-time and offline data capture, scheduling, and Global Positioning System (GPS) route planning support; and
- Improve analytical and reporting capabilities by providing DOEA leadership with the tools
 to plan resource allotments and operational efficiencies tactically and strategically across
 the Department thereby increasing efficiencies and reducing operational costs.

The key components to assist with achieving the Department's objectives include:

- A business process reengineering and optimization effort designed to standardize, automate, and streamline the Department's processes;
- An enhanced technology infrastructure thereby increasing reliability and extensibility while reducing technical support needs;
- An enterprise CRM including a single intake, referral, and assessment platform with workflow and document management;
- A system which uses role-based security control to manage access to confidential client data;
- A robust mobile solution including GPS route mapping; and
- A master data management architecture which reduces or eliminates duplication of data among DOEA and partner organizations.

A CRM system implementation will greatly improve efficiency by consolidating several core business processes which are currently on disparate platforms thereby reducing IT support maintenance and cost for DOEA. A CRM system will result in decreasing the number of external system interactions and increasing productivity by implementing automated workflow processes. Regardless of the channels of access (phone calls, emails, faxes, internet, or in-person scheduling), implementing a CRM system will allow DOEA to provide clients with a more personalized and proactive service.

Implementing a CRM system creates efficient open communication channels between DOEA and partner organizations thereby reducing redundant data collection and enhancing monitoring and

client service across DOEA. Efficient process management is critical in effectively responding to increasing caseloads, potential emergencies or other issues affecting the well-being of Florida's older adult population. Improved analytical abilities will lead to efficient resource allotment and operational efficiencies within DOEA resulting in reduced support costs.

Departmental improvements with the optimizations of business processes and streamlined data normalization will provide improved operational efficiency, reporting, and monitoring. Capturing key analytical metrics will facilitate better proactive decision support and strategic planning for DOEA.

In alignment with the Department's strategic objectives, the deployment of an enterprise CRM System will empower its staff and allow DOEA to be more responsive to changing operational and environmental demands.

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

B. Baseline Analysis

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

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.

A description of the Department's current business processes, including workflow analysis, is included as Attachment C.

a) Specific Performance, Operational and/or Fiscal Issues

The Department has two defined groups which execute its core business processes. The first group consists of CARES personnel who collaborate with the AAA and ADRC offices located in the 11 Planning Service Areas (PSAs) throughout Florida. Introduction of a CRM system will streamline and improve the efficiency and effectiveness of interaction between DOEA, CARES, AAAs, and ADRCs by simplifying and automating intra-group workflows.

A summary of current (As-Is) business processes is listed below.

- CARES Intake Process
- CARES On-Site Assessment Process
- CARES Medical Case File Review
- CARES Staffing Process (Level of Care)
- CARES Level of Care Recommendation
- CARES Follow-Up Schedule
- ADRC Intake and Follow-Up Process

- AAA and Lead Agency Budget and Care Plans
- Grievance Handling
- Monitoring CARES, ADRCs and Lead Agencies

These mission critical process flows are fully described in Appendix C: Business Process Reengineering.

(1) Comprehensive Assessment and Review for Long-Term Care Services (CARES)

The Department is responsible for the federal CARES Program through an interagency agreement with the Agency for Health Care Administration (AHCA). CARES is Florida's federally mandated preadmission screening program for nursing home applicants. A registered nurse and/or assessor performs client assessments. A physician or registered nurse reviews each application to determine the level of care that is most appropriate for the applicant. The assessment identifies long-term care needs, establishes the appropriate level of care (medical eligibility for nursing facility care), and recommends the least restrictive, most appropriate placement.

Federal law mandates the CARES Program to perform an assessment or review of everyone who requests Medicaid reimbursement for nursing facility placement or who seeks to receive home and community-based services through all Medicaid waivers. A CARES assessment is also mandatory if a private-pay applicant is applying for placement in a nursing facility receiving Medicaid funding. Any person or family member can initiate a CARES assessment by applying for the Medicaid Institutional Care Program (ICP). These assessments include:

- Medical eligibility for the Medicaid ICP;
- Medical eligibility for Medicaid waivers providing community-based services;
- Medical assessment for all mentally ill individuals requesting ICP; and
- Medical assessment for individuals with intellectual disabilities requesting ICP services.

CARES field offices are located throughout the state. CARES personnel include registered nurses and assessors, administrative support staff, office supervisors, and regional program supervisors. Physicians are used as consultants as part of the staffing process.

(2) Area Agencies on Aging (AAAs) and Aging and Disability Resource Centers (ADRCs)

Section 430.2053, F.S., authorizes DOEA to work, in conjunction with AAAs and ADRCs, to serve the elderly population in Florida. The state's ADRCs provide information and referral to elders and adults age 18 and older who have severe and persistent mental illnesses (such as bipolar disorder, schizophrenia, or clinical depression).

The primary functions of the AAAs and ADRCs include:

- Provide information and referral services;
- Ensure medical eligibility determinations are done properly and efficiently;
- Triage clients who require assistance; and
- Manage the availability of financial resources for certain key long-term care programs for elders to ensure financial viability and stability.

To complete the primary functions, all of Florida's AAAs and ADRCs use a common information and referral (I&R) software application, ReferNET, which is a centralized database accessible via remote desktop connection comprised of two components. The first component is an online resource database available to the public and a private, confidential client information database. The second component provides individual ADRCs the ability to use the system for recording and tracking individual call information and using the information to make referrals and to schedule follow-up appointments.

The Department's performance issues within the current system consists of a growing backlog in client assessments to be completed on an annual basis by using older unsupported technology. Operational issues include the inconsistent application of business processes and lack of automated workflow along with the duplication of data and effort. One of the main fiscal issues is a projected 2.5% increase of needed client assessments each year without increasing staff or improving technology to offset the workload increase.

b) Explain Why the Current Process is not Desirable and Note the Drivers of Change

The client service-related applications for CARES, the AAAs, and the ADRCs currently in place use differing technologies, standards, processes, and interfaces. There are multiple databases that are unique to individual PSA functions and operate without centralized enterprise oversight. Several of these systems were created for certain PSA programs as workarounds for the shortcomings found in the legacy system. All of these systems house duplicate redundant data across PSAs thereby creating a challenging environment to effectively communicate and collaborate consistent client information.

Overlying the issues of the current systems, DOEA also identified four key strategic challenges.

- The proliferation of inefficient and redundant processes (manual and automated), along with the disparate supporting systems, databases and spreadsheets, exposed DOEA to operational challenges which have increased administrative and support costs while decreasing operational efficiency and effectiveness.
- The existing systems lacked the efficient functionality that is available in current technologies and are insufficient to meet the changing needs and demands of staff and clients. This is primarily due to outdated, unsupported, and difficult to modify, enhance, and maintain technologies.
- The age of existing automated processes and the impact of a siloed implementation and operation have made these systems difficult to continue to support and less than ideal in terms of cost-effectiveness to maintain, change, and operate.
- From an external perspective, state and federal legislative changes require DOEA to make frequent system modifications. It has been difficult for the Department to be agile enough to address these changes with outdated, inflexible and expensive-to-modify technologies.

c) Describe the Current Performance Metrics and Performance Data Requirements

The Department's current LRPP has performance indicators which are required to be statutorily reported. DOEA is unable to collect several of these metrics due to limitations of the legacy system. Currently, staff manually collects, analyzes, and assimilates the information needed for timely reporting of available performance metrics.

2. Assumptions and Constraints

The following assumptions and constraints have been identified for consideration in moving forward with the eCIRTS project. As project planning begins and more assumptions and constraints are identified, they will be added accordingly.

ASSUMPTIONS	CONSTRAINTS
The project is the top technology initiative for DOEA and has support from the DOEA Executive Project Sponsor and Business Sponsor.	The effort to replace CIRTS and the ancillary systems will extend over several years with the potential for leadership changes during that time.
All of DOEA's elder services processes fall into the standardized application framework.	The system will focus on a central Enterprise Client Information and Registration Tracking System and not outside functionality (e.g., accounting systems and human resource systems). As necessary, standardized interfaces will be provided for outside functionality.
All Divisions, Bureaus, Offices, AAAs, ADRCs, and Lead Agencies will be included in the eCIRTS project and will support the standardization of business processes.	DOEA has attempted large implementations in the past, and some areas may be hesitant to undergo another implementation effort.
There will be commitment, coordination, and communication among project teams, DOEA regional offices, and project stakeholders.	Staff availability for project related work will be limited thereby introducing a matrixed project team.
The requested funding for the eCIRTS project will be available in line with project expectations.	Funding for the eCIRTS project is subject to approval by the Florida Legislature and U.S. Department of Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS).
DOEA business functional and technical subject matter experts will be available for project activities.	

Table 1: 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 Joint Application Development (JAD) sessions, several DOEA, CARES, AAA, ADRC, and Lead Agency staff conferred to identify and analyze the current state of the client management applications across DOEA and to discuss their desired future state functionality. Over the course of the discussions, there were several overarching processes shared.

The primary business processes will be enhanced by using a scalable, more modern technology solution include the following.

- Information and Referral
- Intake
- Assessment
- Medical Case File Review
- Staffing and Determination of Level of Care
- Recommended Placement
- Follow-Up
- Screening
- Care Plans
- Monitoring
- Complaints
- Contracts and Billing

A detailed list of DOEA's proposed (To-Be) business processes is shown in the attached Business Process Reengineering (BPR) document as Appendix C and Requirements Traceability Matrix (RTM) as Appendix D. Associated descriptions of the functionality of DOEA's Core Processes are listed in the Project Glossary of Terms and Abbreviations attached as Appendix E.

DOEA has defined several requirements enhancing the services delivered to achieve the goals and initiatives defined in the LRPP. These include:

- Addition of central client record;
- Automation of manual and paper processes;
- Addition of staff dashboard for managing work activities;
- Addition of supervisor workforce activity management dashboard;
- Enhanced workflow and document management functionality;
- Enhanced mobile functionality (connected and offline);
- Automated calendaring and route-based scheduling;
- Centralized case management;
- Standardized intake and referral;
- Addition of master data management model;
- Enhanced security through role-based access control; and
- Addition of online claims submission by Lead Agencies and AAAs.

The addition of the requirements mentioned above will allow DOEA the ability to collect, analyze, and assimilate the information needed for timely reporting of available performance metrics.

2. Business Solution Alternatives

Based on the Market Analysis Report, DOEA considered three alternatives to meet the business goals of an enterprise client management system:

- Develop a custom solution;
- Deploy a COTS solution; and
- Deploy a configurable Framework platform.

For the full discussion of the business solution alternatives, refer to Appendix F: CIRTS Market Analysis, Section 6: Market Trends, Public Sector Trends, and Solution Options, and Section 7: Recommendation Report.

3. Rationale for Selection

The priorities, benefits, assumptions, and constraints for the proposed system are fully defined in Appendix F: CIRTS Market Analysis.

DOEA solicited and engaged a consulting company to assist in developing a Market Analysis of possible solutions. Within the Market Analysis, the company analyzed four types of solutions:

- Transfer from another state;
- Custom Application;
- Framework Application; and
- Commercial-Off-The-Shelf (COTS).

When considering a recommended approach to address DOEA's future technology needs, DOEA did so with the following in mind:

- The mission of DOEA and governing statutes, rules, policies, and procedures;
- The limitations and inefficiencies of the current processes and antiquated technology systems;
- DOEA's guiding priorities, goals, and objectives for a technology solution; and
- The knowledge gained into how comparable state government elder care agencies and the technology market have successfully responded to the challenges of implementing an enterprise client management system.

Building on the solutions options identified, the recommendation was structured with consideration of the following four elements:

- Alignment to Vision and Goals;
- Cost of Ownership Comparison;
- Benefits Comparison; and
- Risk Analysis and Mitigation.

4. Recommended Business Solution

The final recommendation, based on the documented analysis, was that it would be beneficial to tailor an agreement towards a COTS or Framework solution but keep an open mind and let the market offer solutions to provide the best value to DOEA, its stakeholders and client population.

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.

The proposed high-level functional and technical requirements are listed below. The detailed functional and technical requirements are attached as Appendix D.

1. Proposed Functional Requirements

During Stage 1 of the eCIRTS project, DOEA underwent an effort to define the functional requirements for a new enterprise CRM system. A summarized list of high-level functional requirements for the proposed system is shown below. A detailed list of the requirements is in Appendix D: Requirements Traceability Matrix.

AREA	HIGH-LEVEL FUNCTIONAL REQUIREMENTS
Client Management	 Central Client Record Case Management Lifecycle Management Workflow Management Complaint Management Case Prioritization System-Generated Correspondence Calendaring and Scheduling Electronic Signatures
Financial	 Claims Management and Financial Reporting Provider Claims Adjudication for General Revenue Funding Reconciliation
Workforce Management	 Resource Utilization Task Assignment Performance Evaluation Work Prioritization
Mobile Work Force	 Mobile Device Support (laptop, tablet, or smartphone) Mobile Assessments (Wi-Fi and Cellular) Offline Work Capabilities and Subsequent Data Synchronization Route Management (automated GPS route planning and directions)
Intake and Referral	ApplicationWorkflow

AREA	HIGH-LEVEL FUNCTIONAL REQUIREMENTS
Enterprise Content Management	 OCR Scan Capabilities Custom Document Type Configuration Document Upload, Storing, Versioning and Access (standard document types)
Business Intelligence	 Advanced Reporting Data Analytics Data Mining Executive and Worker Dashboards
Public Portal for Clients and Caregivers	 Easy access to client information, application statuses, and availability of services

Table 2: Proposed Functional Requirements

2. Proposed Technical Requirements

During Stage 1 of the eCIRTS project, DOEA underwent an effort to define the non-functional requirements needed for a new enterprise system. A summarized list of high-level technical requirements for the proposed system is shown below. A detailed list of the requirements is in Appendix D: Requirements Traceability Matrix.

AREA	HIGH-LEVEL TECHNICAL REQUIREMENTS
Infrastructure	 The enterprise client management system infrastructure should be cost-effective, flexible, and scalable. The solution should use the existing DOEA hardware, software, storage, and network to the extent possible to maximize the prior investment in technology. System should provide integration between State Data Centers and data hosted in the cloud, where applicable. System should adhere to applicable DOEA, Federal and State of Florida information technology security standards, policies, and procedures. The overall system should be able to make minor customizations and configuration changes by DOEA personnel after the deployment period and a reasonable amount of knowledge transfer. System should support integration with mobile device technology currently available in the market. System should provide data analytics and data mining capabilities in a manner that does not degrade system operations or performance.
User Access Management	 System should provide the ability to define users' role-based access. System should provide the capability for administrators and authorized business users to configure access management.
Maintenance	 System should allow maintenance activities which do not invalidate the upgrade path. System should allow DOEA personnel to coordinate planned maintenance activities.

AREA	HIGH-LEVEL TECHNICAL REQUIREMENTS
Data	 System should provide data segregation for Divisions and Offices defined by DOEA. System should provide in-transit and at-rest data encryption capabilities for the database for Divisions and Offices defined by DOEA.
	 System should provide extract, transform, and load (ETL) capabilities for the implementation. The solution must provide an enterprise data model.
Disaster Recovery	 System must provide Disaster Recovery capabilities with negotiated SLAs within agreed upon timeframes (Recovery Point Objective and Recovery Time Objective) to return to full operations. System must provide Data Backups with frequency and retention period defined by DOEA.
Technology Roadmap	 System should provide foundational releases while not impacting existing customizations. The Vendor should provide annual and quarterly advance communication for upcoming products and enhancements.

Table 3: Proposed Technical Requirements

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.

A critical initial step in the modernization of the DOEA systems portfolio was the development of clear goals and success criteria which align with the overall mission of DOEA. The goals and success criteria clearly address the key risks and challenges DOEA is facing while performing the statutorily required functions and duties. The format used to document the eCIRTS goals and success criteria were defined with goal descriptions and the business value expected to be realized once a new modernized solution has been fully implemented.

A. eCIRTS Solution Goals/Success Criteria

The following exhibits describe each of the seven identified solution goals.

Goal 1				
Standardize and optimize key business processes to improve operational efficiencies				
Goal Description				
•	Optimize current business processes. Provide standardized entry screens, forms, and data as well as efficiency across entities. Improve functionality and ease of use.			
Goal Business Value				
•	Enhancing intra- and inter-departmental workflow functionality decreases manual process time which improves operational efficiencies. Eliminates, where possible, the collection of duplicate data.			

Goal 2

Enhance overall DOEA staff efficiency and effectiveness with applicable technology tools Goal Description

- Reduce or eliminate manual tasks for staff.
- Provide automated workflow capabilities thereby increasing staff efficiency, intra- and inter-departmental collaboration, and customer response.
- Consolidate central client record.

Goal Business Value

- Minimizes or eliminates manual processes thereby increasing staff collaboration and efficiency.
- Reduces time spent managing all client-related information, documentation, and contacts.
- Automates scheduling and routing and provides mapping optimization to create efficiencies, accuracy, and time optimization for clients and staff.

Goal 3

Increase data integrity, standardization, and security toward improved accuracy, operational efficiency, monitoring, reporting, and analytics

Goal Description

- Provide improved data reporting and data analytics capabilities.
- Support enterprise master data strategies reducing duplicative data and improved data capture, accuracy, security and integrity.
- Implement interface standards and protocols.

Goal Business Value

- Supports paperless processing.
- Improves flexibility, timeliness, and integration of all data transactions.
- Reduces complexity of integration by leveraging a more flexible and adaptable technology framework and platform.

Goal 4

Facilitate better collaboration and communication between DOEA, CARES, AAAs, ADRCs, and Lead Agencies which increase the efficiency of the intake and referral, assessment, staffing, monitoring, and compliance processes

Goal Description

- Improve and expand client self-service capabilities.
- Enable staff-specific work queue dashboards.
- Consolidates central client record for managing all client-related information.

Goal Business Value

- Standardizes client management interface.
- Allows for proactive notifications of assigned work.
- Reduces redundant data and data entry errors.

Goal 5

Enhance mobile capabilities including remote data capture, scheduling, and GPS route planning support

Goal Description

- Provide robust mobile capabilities including assessments and quality assurance remotely via Wi-Fi, cellular, or offline.
- Provide appointment reminders and route mapping optimization for assessors and QA staff traveling to remote client locations.

Goal Business Value

- Reduces or eliminates manual paper assessments.
- Increases mobile staff efficiency.

Goal 6

Improve analytical and reporting capabilities providing DOEA leadership with the tools to plan resource allotments and operational efficiencies tactically and strategically across DOEA thereby increasing efficiencies and reducing operational costs

Goal Description

- Provide workforce management capabilities.
- Improve data reporting and analytics for workforce oversight and strategic planning.

Goal Business Value

- Provides supervisors with the ability to assign tasks, monitor staff queues, and access productivity analytics.
- Provides executive management the ability to access productivity dashboards and analytics.

Goal 7

Improve system flexibility, scalability, reliability, and cost of ownership

Goal Description

- Improve system performance, extensibility, and reliability.
- Simplify operations and maintenance responsibilities.
- Replace outdated hardware and software technologies with widely embraced current technology.

Goal Business Value

- Employs technology capable of scaling, evolving, and growing as business needs and demands change.
- Increases system security, stability, and recoverability with latest technology standards.
- Improves flexibility, timeliness, and integration of all data transaction processing.
- Simplifies infrastructure and application maintenance.

The following table describes the success criteria and key performance indicators to measure each of the seven identified solution goals.

	Success Criteria Table						
#	Description of Criteria	How will the Criteria be measured/assessed?	Who benefits?	Realization Date (MM/YY)			
1	Optimize current business processes.	 Time spent on manual processes Time to complete assessments Number of errors 	DOEAAAAs/ADRCsLead Agencies	Upon implementation			
2	Provide standardized entry screens, forms, and data as well as efficiency across entities.	 Time to retrieve data Time to generate reports Level of effort 	DOEAAAAs/ADRCsLead Agencies	Upon implementation			
3	Improve functionality and ease of use.	Time to complete assessmentsNumber of errors	DOEAAAAs/ADRCsLead Agencies	Upon implementation			
4	Reduce or eliminate manual tasks.	Time to complete assessmentsTime to process waitlist releases	DOEAAAAs/ADRCsLead AgenciesClients	Upon implementation			
5	Provide automated workflow capabilities increasing staff efficiency, intra- and inter-departmental collaboration, and customer response.	 Compare against baselined current business processes 	DOEAAAAs/ADRCsLead Agencies	Upon implementation			

	Success Criteria Table					
6	Consolidate central client records.	 Time spent managing client-related information Number of duplicate records 	-	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
7	Provide improved data reporting and data analytics capabilities.	 Time to generate reports Accuracy of data Time to retrieve data 	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
8	Support enterprise master data strategies thus reducing duplicative data and improving data capture, accuracy, and integrity.	Number of duplicate records	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
9	Implement interface standards and protocols.	Number of errors or exceptionsData transfer time	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
10	Improve and expand client self-service capabilities.	Client satisfactionTime to respond to clients	•	DOEA AAAs/ADRCs Lead Agencies Clients	Upon implementation	
11	Provide staff-specific work queue dashboards.	Number of assessments scheduledNumber of assessments completed	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
12	Provide robust mobile capabilities including assessments and quality assurance remotely via Wi-Fi, cellular, or offline.	 Number of paper assessments Number of redundant records Number of assessments completed 	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
13	Provide appointment reminders and route mapping optimization for assessors and QA staff traveling to remote client locations.	 Time to conduct assessments Time to complete assessments 	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
14	Provide workforce management capabilities.	 Number of assessments scheduled 	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	

	SUCCESS CRITERIA TABLE						
		-	Number of assessments completed Staff efficiency reports				
15	Improve data reporting and analytics for workforce oversight and strategic planning.	:	Staff efficiency reports Number of assessments completed	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
16	Improve system performance, extensibility, and reliability.		Compare against current baselined system performance	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
17	Simplify operations and maintenance responsibilities.	•	System performance System maintenance	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	
18	Replaces outdated hardware and software technologies with widely embraced current technology.		System availability System performance System extensibility System maintenance costs	•	DOEA AAAs/ADRCs Lead Agencies	Upon implementation	

B. Successful Procurement

To successfully support the development and execution of the eCIRTS procurement, DOEA is leveraging the Florida Department of Management Services' (DMS) Alternate Contract Source (ACS). Project artifacts related to the ACS procurement method as well as the selected vendor are located in Appendices M – U. The ACS procurement method will be governed by the following ideals.

- Mitigate the risk of protest: Address the known steps, procedures, legal requirements, or required reviews of Florida's state procurement requirements, and in applying a discipline and rigor to the process, this will ensure the procurement moves forward in a technically correct and transparent manner.
- Be precise and be flexible enough to allow for innovation: Present the requirements in such a way to allow vendors to bring new, innovative technologies or solutions to the procurement process for consideration, while clearly and appropriately addressing DOEA's needs.
- **Use Subject Matter Experts:** Identifying DOEA subject matter experts early is imperative when developing and implementing the procurement process.
- Establish a realistic and achievable procurement plan (schedule): A realistic and achievable schedule leaves ample room for schedule adjustments without sacrificing critical schedule elements.

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.

Over the last decade, DOEA has experienced a significant increase in all of its primary intake, referral, and assessment functional areas. Using statistics gathered from DOEA's Long Range Program Plans, for the period of 2011-2015, the total number of DOEA client interactions increased by an average of 8.15% per year, the number of clients served increased 12.59%, while the number of DOEA FTEs decreased 3.56%. An analysis of these historical trends indicates DOEA must either increase its workforce number or increase the operational efficiency of existing staff with a new enterprise client management system. Implementing a modern CRM will provide a workforce multiplier thereby allowing DOEA to avoid a significant increase in staffing. One of the benefits calculated for the eCIRTS project is an estimate of the savings from not hiring to the staffing levels which would be required across DOEA if the eCIRTS solution was not implemented. A detailed analysis of project costs is referenced in the Cost Benefit Analysis, which is attached as Appendix A.

A summary of the estimated tangible benefits, upon implementation of eCIRTS, is displayed in the following table.

	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	Implementation of a centralized client data management system that includes master data management supporting data sharing and integrity while reducing data duplication	DOEAAAAs/ADRCsLead AgenciesClients	 Increased data integrity and accuracy Reduced data duplication More accurate reporting and decision making Enhanced client service 	Compare against baselined current system data management	Upon implementation			
2	Enhanced functionality for mobile access to systems and information	DOEAAAAs/ADRCsLead AgenciesClients	 Enhanced workforce functionality and efficiency Access to Wi- Fi, cellular or offline functionality 	Compare against baselined current system functionality, accessibility, and processing time	Upon implementation			

	BENEFITS REALIZATION TABLE						
			 Addition of route-based scheduling 				
3	Enhanced workflow and workforce management capabilities thus increasing intra- and inter- departmental collaboration	 DOEA AAAs/ADRCs Lead Agencies Clients 	 Reduction or elimination of manual processes Increased staff efficiency Increased management oversight, staff accountability, and resource planning 	Compare against baselined current processing times	Upon implementation		
4	Addition of advanced reporting and analytics functionality	 DOEA AAAs/ADRCs Lead Agencies Clients 	 Improved staff productivity and efficiency Enhanced strategic planning and reporting capabilities 	Compare against baselined current reporting capabilities and time needed to create statutorily required reports	Upon implementation		
5	Improved system scalability to accommodate increased resource capacity needs, improved system modularity and extensibility with the addition of a business rules engine to expand system functionality	 DOEA AAAs/ADRCs Lead Agencies Clients 	 Enhanced ability to quickly address changing resource capacity needs More agile system configuration capabilities to address dynamic request for modifications 	Compare against baselined capacity planning and development time	Upon implementation		

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.

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

Cost Benefit Analysis		
Form	Description of Data Captured	
CBA Form 1 - Net Tangible Benefits	Agency Program Cost Elements: Existing program operational costs versus the expected program operational costs resulting from this project. The agency needs to identify the expected changes in operational costs for the program(s) that will be impacted by the proposed project.	
	Tangible Benefits: Estimates for tangible benefits resulting from implementation of the proposed IT project, which correspond to the benefits identified in the Benefits Realization Table. These estimates appear in the year the benefits will be realized.	
CBA Form 2 - Project Cost Analysis	Baseline Project Budget: Estimated project costs.	
	Project Funding Sources: Identifies the planned sources of project funds, e.g., General Revenue, Trust Fund, and/or Grants.	
	Characterization of Project Cost Estimate.	
CBA Form 3 - Project Investment Summary	Investment Summary Calculations: Summarizes total project costs and net tangible benefits and automatically calculates:	
	 Return on Investment Payback Period Breakeven Fiscal Year Net Present Value Internal Rate of Return 	

The Cost Benefit Analysis is attached as Appendix A.

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.

A project of this scope will have planning, design, and execution risks. To mitigate these risks, quality assurance procedures, including in-progress milestones and deliverable reviews, will be integrated into the routine operations of the project management activities to help ensure the project adheres to the implementation schedule. Ongoing risks and issue management protocols will be adhered to during project status reviews to mitigate potential issues.

Effective upward communication to stakeholders is critical to providing up-to-date project status reports, offering accurate and best judgment risk and issue assessments, and actively managing expectations. Similarly, effective downward communication to the project team is essential to building teamwork and communicating expectations and will guide the success of the project. Having executive, steering committee, and governance support, a dedicated project team, and built-in checkpoints will help ensure DOEA's success in implementing a new CRM system and delivering value to DOEA and the elder population of Florida it serves.

The Risk Assessment Tool and Risk Assessment Summary is referenced in Appendix B: DOEA eCIRTS Project Risk Assessment.xlsx. The resulting Risk Assessment Summary will follow.

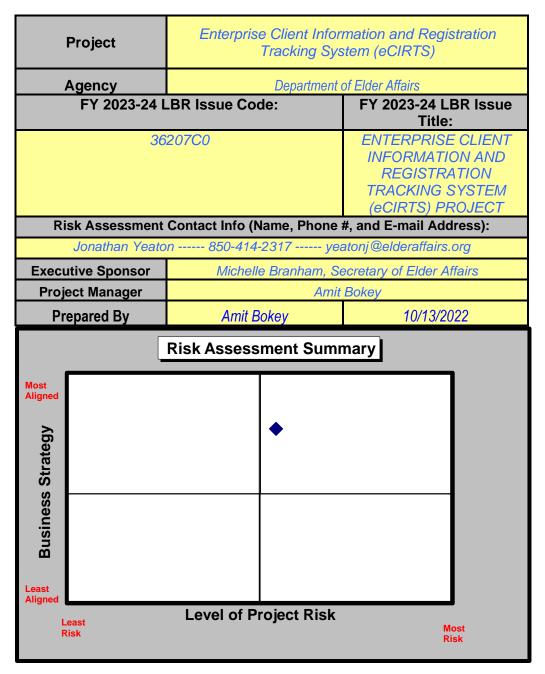


Exhibit 1: Risk Assessment Summary

The following exhibit illustrates the risk assessment areas that were evaluated and the breakdown of the risk exposure that was assessed in each area. As indicated above, the overall project risk should diminish significantly by the conclusion of the first year when the project structure is in place and the foundational technology elements have been implemented.

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

Exhibit 2: Project Risk Area Breakdown

When answering the questions in the risk assessment tool, it was assumed that the current project management and governance structure in place would remain in place throughout the eCIRTS project and DOEA would obtain the services of a qualified vendor to support project management services.

In the following table, there are examples of Risk Assessment (and Business Strategy alignment) areas that will be addressed by the conclusion of the first year of the project.

Category	Proposed Actions
Strategic Risk	 All the project objectives will be clearly aligned with DOEA's legal mission. The project objectives will be clearly documented and signed off by the stakeholders. The executive sponsor will sign the project charter. All the project requirements, assumptions, constraints, and priorities will be defined.
Technology Risk	 Detailed hardware and software capacity requirements will be defined.

Category	Proposed Actions
Organizational Change Management Risk	 The business process changes will be defined and documented. Organizational Change Management will be essential for success. An Organizational Change Management Plan will be developed and approved early in the project.
Communication Risk	 The Communication Plan will be approved. The Communication Plan will promote the routine use of feedback (at a minimum). All affected stakeholders will be included in the Communication Plan. All key messages will be documented in the Communication Plan. Desired message outcomes and success measures will be documented in the Communication Plan. The Communication Plan will identify and assign needed staff.
Fiscal Risk	 A Spending Plan will be documented and approved for the project lifecycle. All project expenditures will be identified and documented in the Spending Plan. The cost estimates for the project will be accurate within +/- 10-100% (Order of Magnitude). All tangible benefits will be identified and validated during the procurement phase. The procurement strategy will be reviewed and approved. A contract manager will be assigned to the project.
Project Organization	 The project organization and governance structure will be defined and documented. A project staffing plan will identify and document all staff roles and responsibilities. The change review and control board will include representation from all stakeholders.
Project Management Risk	 All requirements and specifications will be defined and documented. All requirements and specifications will be traceable to business rules. All project deliverables and acceptance criteria will be identified. The Work Breakdown Structure will be defined to the work package level. The project schedule will specify all project tasks, go/no-go decision points, milestones, and resources. Formal project status reporting will be in place. All planning and reporting templates will be available. All known project risks and mitigation strategies will be identified.
Complexity Assessment	 Organizational Change Management will be essential to mitigate the risks of multiple entities at multiple locations throughout the state. Communications Planning will be critical to ensure stakeholders are informed and involved.

Table 6: Project Risk Areas to be Addressed

DOEA's plan to continually identify, assess, and mitigate risks throughout the life of the project is discussed in Appendix G: Project Management Plan, Section 5 (Project Risk Management Plan) and Appendix O: eCIRTS Operational Work Plan.

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

A detailed description of the current information technology environment, hardware, and software inventory is detailed in Appendix H: DOEA eCIRTS Schedule IV-B Section VI Technology Planning.

2. Information Technology Standards

A detailed description of information technology standards is detailed in Appendix H: DOEA eCIRTS Schedule IV-B Section VI Technology Planning.

B. Current Hardware and/or Software Inventory

A detailed description of hardware and software inventory is detailed in Appendix H: DOEA eCIRTS Schedule IV-B Section VI Technology Planning.

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

C. Proposed Technical Solution

1. Technical Solution Alternatives

The current technology of CIRTS is not effective and drives less than optimal operational efficiency outcomes for DOEA and its clients. There is a business need to leverage new technology to achieve better operational efficiencies. The gains in operational efficiency from the realization of modern, modular, and maintainable technology will provide DOEA with the agility to dynamically meet the Department's changing business needs and growing client base. The new technology approach should meet or exceed DOEA business functional and business process reengineering requirements while adhering to the federal Centers for Medicare and Medicaid Services (CMS) conditions and standards for:

- **Modularity** Use of a modular, flexible, agile approach including the use of open interfaces;
- MITA standards Aligned and continued advancement in the Medicaid Information Technology Architecture (MITA);
- Industry compliance Alignment with, and incorporation of, industry standards, the Health Insurance Portability and Accountability Act (HIPAA) of 1996 security, privacy, and transaction standards;
- Leverage Promotes sharing, leverage, and reuse;

- Business results Supports accurate and timely processing of eligibility;
- **Reporting** Has the capability to produce reports supporting program evaluation, continuous improvement in business operations, transparency and accountability; and
- Interoperability Supports integration with the appropriate entities providing eligibility, enrollment, and outreach functions.

There were three viable technical solutions considered to achieve the Department's goals. The following section provides a description of each option under consideration.

a. COTS Solution

COTS solution is a term referencing non-developmental items sold in the marketplace. A COTS system is typically designed for a unique purpose (e.g., client management) and generally does not require custom development before installation.

COTS solutions are commercially available products typically sold to multiple customers without customization. COTS product evolution, support, and enhancements are provided by the software vendor via recurring maintenance charges. Configuration of a COTS solution are often required to meet detailed business requirements, rules, and policy needs.

b. Custom Development Solution

Software that is specially designed and developed from scratch to accommodate a customer's precise preferences and expectations.

c. Framework Solution

A software Framework is a universal, reusable environment providing a measure of defined functionality as part of a larger platform to facilitate and develop or customize applications, products, and solutions. Framework product evolution, support, and enhancement are provided by the software vendor via recurring maintenance charges. Development and customization to a Framework solution are often required to meet detailed business requirements, rules, and policy needs.

2. Rationale for Selection

The criteria used when comparing alternative solutions to meet the need of the proposed solution, including priorities, benefits, assumptions, and constraints, is described in Appendix F: CIRTS Market Analysis, Section 4.3 (Assumptions and Constraints) and Section 7 (Recommendation Report).

The following standards were considered when recommending an approach to address DOEA's technology needs today and into the future:

- The mission of DOEA and governing statutes, rules, policies, and procedures;
- The limitations and inefficiencies of the current processes and antiquated technology systems;
- DOEA's guiding priorities, goals, and objectives for a technology solution; and

• The knowledge gained into how comparable state government elder care agencies and the technology market have successfully responded to the challenges of implementing an enterprise client management system.

The following project vision statement was developed in collaboration with DOEA.

• Implement an enterprise client management system to assist staff efficiency, enable client access to services, and position DOEA to plan for and be responsive to changing environmental and operational demands.

Building on the solutions options, the recommendation methodology is structured around the following four elements:

- Alignment to Vision and Goals;
- Cost of Ownership Comparison;
- Benefits Comparison; and
- Risk Analysis and Mitigation.

To properly evaluate the solutions available to DOEA to replace their existing system, a minimum set of criteria is critical to ensure all options are compared to a common standard. The common base identified below will allow solution options to be compared in a consistent manner.

a) Evaluation Criteria

As part of the analysis, each option was assessed against the vision statement and solutions goals. This assessment was qualitative with the alignment presented for each option relative to the other options. Each option was given a score of High (3 points), Medium (2 points), or Low (1 point) for how well the option aligned to the vision and solution goal. The average score for each option was then calculated. The following exhibit reflects the output of this qualitative assessment.

	OPTIONS CONSIDERED		
Evaluation of Qualitative Criteria	OPTION 1: CUSTOM DEVELOPMENT	OPTION 2: FRAMEWORK PLATFORM	OPTION 3: COTS PLATFORM
Vision: Implement an enterprise client management system to assist staff efficiency, enable client access to services, and position DOEA to plan for and be responsive to changing environmental and operational demands.	Medium	High	High
Goal 1: Standardize and optimize key business processes to improve operational efficiencies.	Low	High	Medium
Goal 2: Enhance overall DOEA staff efficiency and effectiveness with applicable technology tools.	Low	High	High

	OPTIONS CONSIDERED		
Evaluation of Qualitative Criteria	OPTION 1: CUSTOM DEVELOPMENT	OPTION 2: FRAMEWORK PLATFORM	OPTION 3: COTS PLATFORM
Goal 3: Increase data integrity, standardization, and security toward improved accuracy, operational efficiency, monitoring, reporting, and analytics.	Medium	High	High
Goal 4: Facilitate better collaboration and communication between DOEA, CARES, AAAs, ADRCs, and Lead Agencies which increase the efficiency of the intake and referral, assessment, staffing, monitoring, and compliance processes.	Low	High	High
Goal 5: Enhance mobile capabilities including remote data capture, scheduling, and GPS route planning support.	Low	High	High
Goal 6: Improve analytical and reporting capabilities providing DOEA leadership with the tools to plan resource allotments and operational efficiencies tactically and strategically across DOEA thereby increasing efficiencies and reducing operational costs.	Medium	Medium	High
<i>Goal 7:</i> Improve system flexibility, scalability, reliability, and cost of ownership.	Low	Medium	High
Average Score	1.4	2.8	2.9

Exhibit 3: Alignment to Vision and Solution Goals

b) Benefits Comparison

All three options were evaluated for benefits to be realized with the implementation of an enterprise client management system. Each option was given a score of High (3 points), Medium (2 points), or Low (1 point) for how likely or how soon the option would realize each benefit. The average score for each option was then calculated.

	OPTIONS CONSIDERED		
BENEFIT	OPTION 1: CUSTOM DEVELOPMENT	OPTION 2: FRAMEWORK PLATFORM	OPTION 3: COTS PLATFORM
Increased efficiency via automation of manual tasks and optimization of processes.	Medium	High	High
Drives process standardization.	Low	Medium	High
Enhanced customer experience and response.	Medium	High	High
Enhanced mobile capabilities and functionality.	Low	High	High
Enhanced workflow and workforce management.	Low	High	High
Flexible solution with the agility to quickly address procedural or statutorily mandated changes as well as environmental and operational needs.	Low	High	Low
Easy scalable and extensible solution to address increased environmental and operational demands.	Low	High	High
Minimizes support and operations and maintenance responsibilities.	Low	Medium	High
Increases data integrity, standardization, and security.	Medium	High	High
Improves analytical and dashboard/reporting capabilities.	Medium	High	High
Average Score	1.4	2.8	2.8

Exhibit 4: Benefit Comparison

The full criteria used when comparing alternative solutions to meet the need of the proposed solution, including priorities, benefits, assumptions, and constraints, is described in Appendix F: CIRTS Market Analysis, Section 4.3 (Assumptions and Constraints) and Section 7 (Recommendation Report).

3. Recommended Technical Solution

The following exhibit provides a comparison of the three options across each of the key elements of alignment to goals, cost, benefits, and risk. For scoring purposes High = 3 points, Medium = 2 points, and Low = 1 point. The average points for each option are then calculated.

	OPTIONS CONSIDERED		
REVIEW CATEGORIES	OPTION 1: CUSTOM DEVELOPMENT	OPTION 2: FRAMEWORK PLATFORM	OPTION 3: COTS PLATFORM
Alignment to Vision and Goals	Low	High	High
Lower Cost of Ownership	Medium	Medium	High
Achievement of Benefits	Medium	High	Medium
Minimizes Risk	Low	High	High
Average Score	1.5	2.75	2.75

Exhibit 5: Summary Analysis

Based on the overall analysis, the following salient points addressing the Department's solution options are offered below.

Option 1: While Custom Development solutions can be designed to meet exact program requirements, several notable data points are listed below that make this option less desirable than Framework or COTS.

- Custom Development solutions typically take considerably more time and resources to design, develop and implement than COTS or Framework solutions;
- Custom Development solutions provide fewer benefits and are less likely to achieve project goals than COTS or Framework solutions;
- Custom Development solutions are expensive to implement as well as operate and maintain due to the need to retain IT professionals with the deep and often arcane skills required to support and enhance the system;
- Enhancements, patches, and updates to the solution (infrastructure and application) would be the responsibility of DOEA; and
- Custom Development solutions are inherently riskier primarily for the reasons listed above.

Option 2: A Framework solution provides a solid base upon which the solution can be further customized and configured. The notable data points for using Framework as a solution option to meet the Department's needs are listed below.

- The flexibility of a Framework solution provides a good balance between highly customizable Custom Development solutions and is more difficult and costly to customize than COTS solutions;
- Framework solutions provide greater benefits and are more likely to achieve project goals than Custom Development solutions;
- Framework solutions are typically implemented more quickly than Custom Development but not as fast as COTS;
- Enhancements, patches, and updates to the base application platform would be the responsibility of the provider;

- The overall costs of a Framework solution are typically less to implement and maintain than Custom Development solutions but more expensive than COTS; and
- There is less risk with Framework solutions compared to Custom Development since a project's starting point is a base platform rather than building from scratch.

Option 3: Although a COTS solution may not address all of the Department's program customizations, the available COTS solutions that were reviewed offered feature rich capabilities to address most of the business needs. The notable data points for including COTS as a solution option to meet the Department's needs are listed below.

- There is less flexibility to customize with a COTS solution than with Custom Development or Framework;
- COTS solutions provide greater benefits and are more likely to achieve project goals than Custom Development solutions;
- A COTS solution can usually be implemented more rapidly than a Custom Development or Framework solution along with meeting most of the business needs;
- Enhancements, patches, and updates to the application would be the responsibility of the provider;
- The overall cost of a COTS solution is typically less than Custom Development and Framework solutions; and
- There is less risk with COTS since the project would be restarting with an established solution rather than building it from scratch or customizing a Framework.

The approach for a technical solution which most closely aligns with the Department's needs is to implement a COTS or Framework solution which is typically less expensive and lower risk as well as more quickly implemented than a Custom Development solution. A detailed description of the reasons why these proposed alternative solutions meet the Department's business needs and are in the best interest of the State is detailed in Appendix F: CIRTS Market Analysis, Section 7.5 (Recommended Solution).

D. Proposed Solution Description

A detailed description of the technical requirements and features that tie directly to the Department's core business requirements is described in Appendix C: Business Process Reengineering and Appendix D: Requirements Traceability Matrix.

1. Summary Description of Proposed System

The solution being proposed is a modern enterprise COTS or framework system with the capability to manage the intake and referrals, assessments, or screenings. The scope and key functionalities of the solution will include:

- Case Management and Customer Relationship Management (CRM);
- Business Intelligence;
- Intelligent Workflow;
- Workforce Management;
- Mobile Workforce:

- Unified Calendaring and Scheduling;
- Public Self-Service Capabilities;
- Route Mapping Optimization; and
- Document Management.

The proposed eCIRTS architecture below displays a proposed model system architecture. This may be updated based on the solution chosen by DOEA.

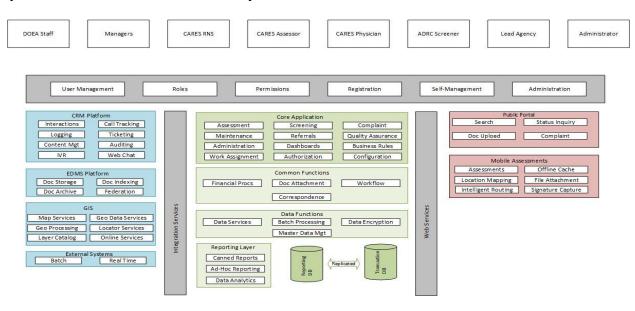


Exhibit 6: Functional Architecture of the Proposed System

To support the Department's business objectives and processes, the proposed system will require the following features and functionality.

a) System, Connectivity, and Security Requirements

System Type	The system will be either a cloud-centric Commercial-off-the-Shelf	
	(COTS) or Framework vendor-hosted system.	
Connectivity Requirements	The proposed new system must support both wired and wireless	
	connectivity.	
Security Requirements	Chapter 60GG-2, F.A.C.	
	■ Chapter 119, F.S.	
	Chapter 400, F.S.	
	■ Chapter 415, F.S.	
	Chapter 429, F.S.	
	• Chapter 430, F.S.	
	• Chapter 744, F.S.	
	 Health Insurance Portability and Accountability Act (HIPAA) of 	
	1996	
	• Section 282.318, F.S.	
	Sections 282.601-282.606, F.S.	

Table 7: System, Connectivity, and Security

b) Development and Procurement Approach

The proposed system is anticipated to be a COTS or Framework solution requiring minimal development effort. The DOEA-required functionality will be inherent or can be accomplished primarily through configuration with occasional minor development.

The procurement strategy for eCIRTS is discussed in Section III.B: Successful Procurement.

c) Internal and External Interfaces

The eCIRTS will need to interface with several external entities, which include the following.

ORGANIZATION	Interfaces	INBOUND/ OUTBOUND	FREQUENCY
Agency for Health Care Administration	Active waiver enrollment information for Statewide Medicaid Managed Care (SMMC) Long Term Care (LTC) and Program of All-Inclusive Care for the Elderly programs.	Inbound	Tri-monthly
Agency for Health Care Administration	Previously active, but now terminated, enrollment information.	Inbound	Tri-monthly
Agency for Health Care Administration	Complaints related to SMMC LTC waiver. Consumed by Independent Consumer Support Program used by the Medicaid Waiver/ADRC Unit.	Inbound	Daily
Agency for Health Care Administration	Level of Care data.	Outbound	Monthly
Department of Children and Families	DCF sends information about individuals who are being served by DCF in state programs and who are about to become 60 years old making them DOEA's responsibility.	Inbound	Quarterly
Department of Children and Families	Level of Care data.	Outbound	Daily
Department of Health	Death certificate data of individuals age 18 or older.	Inbound	Daily
Enrollment Broker	Client information with the Comprehensive Assessment and Review for Long Term Care Services, Level of Care determinations for the SMMC LTC program.	Outbound	Daily
Enrollment Broker	CARES' 701B assessments (pdf format) for client data referenced in the row above with a community recommendation (not nursing home clients) to the enrollment broker for the SMMC LTC program.	Outbound	Daily
Service Providers	Data is imported into CIRTS by using the DOEA Electronic Data Interchange (EDI) File Exchange system.	Inbound	Ad hoc

Table 8: Internal and External Interfaces

d) Maturity and Life Expectancy of the Technology

The proposed solution for eCIRTS must be commonly available to health and social services organizations and be an established system using a mature industry standard technology available for over five years.

e) Other System(s) Proposed Solution must Integrate With

If not already included, the proposed solution for eCIRTS must be able to integrate with a robust content management system which is scalable to accommodate a consistently increasing elder client population.

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

The full breakdown of DOEA's staffing requirements and funding sources are located in Appendix A: Cost Benefit Analysis – Tab: CBAForm2A Baseline Project Budget.

The selection of a vendor through the Alternate Contract Source will determine the full technical platform, hardware, software, and staffing requirements needed for eCIRTS. The minimum software requirements for eCIRTS is to use web-based technologies in conjunction with the existing DOEA standards for computer operating systems with the addition of mobile accessibility. The intent of the eCIRTS project is to use existing staff resources to operate and maintain the new system; therefore, no additional full-time/permanent staffing is needed.

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

1. How the Estimates were Derived

The objective of Capacity Planning is to verify a proposed solution which can absorb the current data stores and transaction loads, as well as provide the capability to meet the projected future demands of DOEA. CIRTS is currently hosted at the Department of Management Services, Division of State Technology (DST) State Data Center (now the Department of Management Services, Florida Digital Service (FL[DS]) on a shared clustered server environment. Using information available from the DST State Data Center, DOEA estimates the following minimum capacity requirements. DST was unable to provide CIRTS-specific average and peak utilization information.

Metric	Fiscal YTD
Number of Users	2,025
System Availability	Minimum 99.9% uptime
Number of Outages	0
Database Storage	100 GB
Document Storage	600 GB
Transactions	1,100,000
% Batch Transactions	4.5
% Minimum Growth	2.5
Peak arrival	Unavailable
Peak day	Unavailable
Peak day count	Unavailable

Table 9: Capacity Planning

2. Assumptions and Constraints

The following assumptions and constraints have been identified regarding capacity planning for consideration in moving forward with the eCIRTS project.

ASSUMPTIONS	Constraints
The proposed system will have sufficient capacity to store all current DOEA client-related data and documents as well as projected growth.	Appropriate funding amounts for the eCIRTS project is subject to approval by the Florida Legislature and U.S. Department of Health and Human Services (HHS), Centers for Medicare and Medicaid Services (CMS) as needed.
The proposed system will be scalable and extensible to meet the needs of DOEA's increasing client population.	
The proposed system will be configurable to make necessary modifications to accommodate changes to DOEA's dynamic business needs.	

Table 10: Assumptions and Constraints

3. Management Summary of the Issues

DOEA's current CIRTS application has met its end of life and is no longer extensible or supportable. This impacts DOEA's ability to meet the resource demands from its growing client population.

4. Service Summary with Current and Forecasted Concerns

A major concern of the current CIRTS system is that it experiences frequent downtime which interrupts the ability for DOEA staff to perform their job duties. From March 2014 through August 2017 (42 months), DOEA IT submitted 1,320 support tickets to DST, an average of approximately 30 tickets per month. Approximately 95% of the tickets were related to CIRTS. The need to submit tickets to support CIRTS is expected to continually increase as the Oracle resources currently in use have reached the end of support life thereby making the system more unstable and unreliable over time. The replacement system is expected to have minimal downtime guaranteed through the execution of a Service Level Agreement with the vendor.

5. Options and Alternatives Considered

DOEA considered several options for upgrading the system or doing a custom development to replace the system. A full description of the options and alternatives considered for the scope of this project, including custom, COTS, and framework solutions, are found in Appendix F: CIRTS Market Analysis.

6. Recommendations for the Effort

To support the effort of migrating from the existing on-premises legacy CIRTS to a cloud-centric client management system, it is recommended that the following actions be taken:

- Determine the number of unique client records in the current system;
- Determine the amount of data in the current system;

- Determine the average amount of data transferred daily;
- Determine the average amount of daily transactions;
- Determine the amount of paper records needing to be scanned and imported into the replacement system; and
- Determine what new workflow functionality can be used to automate DOEA business rules.

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.

The project planning components for the eCIRTS project, including project scope, project phasing plan, and project organization, are outlined in Appendix O: eCIRTS Operational Work Plan.

The eCIRTS project quality assurance plan, risk management, and implementation plan are outlined in Appendix G: Project Management Plan and Appendix O: eCIRTS Operational Work Plan.

The Master Project Schedule for the eCIRTS project is attached as Appendix K and Appendix S.

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

VIII. Appendices

Appendix	Description
A	Cost Benefit Analysis Workbook
В	Risk Assessment Tool and Risk Assessment Summary
С	Business Process Reengineering Document
D	Requirements Traceability Matrix
Е	Project Glossary of Terms and Abbreviations
F	CIRTS Market Analysis
G	Project Management Plan (includes Implementation Plan, Risk Management Plan, and Organizational Change Management Plan)
Н	DOEA eCIRTS Schedule IV-B Section VI Technology Planning
I	CIRTS User Guide (for CARES, 2013 version)
J	Service Level Agreement between DOEA and DST
К	Master Project Schedule
L	CIRTS User Guide (for Aging Networks, 2007 version)
М	National Association of State Procurement Officials (NASPO) Master Agreement No. AR2472
N	NASPO Pricing Sheet
0	eCIRTS Operational Work Plan
P	Project Organization Chart
Q	eCIRTS Transition Plan Approach
R	eCIRTS Statement of Work for Implementation
S	eCIRTS Project Schedule
Т	eCIRTS Project Spend Plan for FY 2020-21 – FY 2026-27
U	First Amendment to eCIRTS Statement of Work for Implementation

S	CHEDULE VI: DETAIL OF D	EBT SERVICE	
Department:		Budget Per	riod 2023-24
Budget Entity:	(2)	(3)	(4)
(1)	ACTUAL	ESTIMATED	REQUEST
SECTION I	FY 2021-22	FY 2022-23	FY 2023-24
Interest on Debt	(A)		
Principal	(B)		
Repayment of Loans	(C)		
Fiscal Agent or Other Fees	(D)		
Other Debt Service	(E)		
Total Debt Service	(F)		
Explanation:			
		101	
		1/0	
SECTION II			
ISSUE: (1) (2)	(3)	(4)	(5)
INTEREST RATE MATURITY		JUNE 30, 2023	JUNE 30, 2024
(6)	ACNIAL	(8) ESTIMATED	(9) REQUEST
	ACRAL	FY 2022-23	FY 2023-24
Interest on Debt			
	(G) (H)		
Principal Eigen A court on Other Feet	(n)		
Fiscal Agent or Other Fees			
Other Tatal Dalta Samia			
Total Debt Service	(K)		
ISSUE:			
INTEREST RATE MATURITY	DATE ISSUE AMOUNT	JUNE 30, 2023	JUNE 30, 2024
	ACTUAL	ESTIMATED EV 2022 22	REQUEST
	<u>FY 2021-22</u>	FY 2022-23	FY 2023-24
Interest on Debt	(G)		
Principal	(H)		
Fiscal Agent or Other Fees	(1)		
Other	(J)		
Total Debt Service	(K)		

SCHEDULE IX: MAJOR AUDIT FINDINGS AND RECOMMENDATIONS Budget Period: 2023-2024 Department: Elder Affairs Chief Internal Auditor: Inspector General Taroub J. Faraj Budget Entity: 65000000 Phone Number: (850) 414-2013 (3) (1) REPORT (2) PERIOD (4) SUMMARY OF (5) SUMMARY OF (6) ISSUE NUMBER ENDING UNIT/AREA FINDINGS AND RECOMMENDATIONS CORRECTIVE ACTION TAKEN CODE E1819DEA-022 Audit 6/30/2020 Office of Public and Finding 1: Contrary to State law, the OPPG Original response: Recommendation Accepted. OPPG management is of the Department of did not establish policies and procedures for currently in the research and planning phases of implementing monitoring Professional Elder Affairs' Office of Guardians (OPPG) monitoring private professional guardians, policies and procedures for the private professional guardian segment in Public and Professional develop or implement a monitoring tool, or addition to implementing a monitoring tool that would include forms and Guardians and Selected monitor private professional guardians for database system to house data as in parallel to the public guardian monitoring. Administrative compliance with OPPG standards of practice Current proposal and specifications are being developed with a vendor to Activities (AG Report produce system database for the Department to have an efficient way to monitor governing the conduct of professional No. 2021-010) and have oversight of the private professional guardians. Within the FY 2020guardians 2021 budget, an allocation of \$500,000 of non-recurring funds has been set aside for this purpose research and implementing the monitoring tool for rivate professional guardians for compliance with OPPG standards of practice Recommendation: To ensure that wards receive appropriate care and treatment, are safe, and their assets are protected, OPPG management establish monitoring policies and procedures, develop and implement a monitoring tool, and conduct monitoring of private professional guardians for compliance with OPPG standards of practice Six-Month Follow-up response: OPPG management is currently in the planning phases of implementing monitoring policies and procedures for the private professional guardian segment in addition to implementing a monitoring tool that would include forms and a database system to house data as in parallel to the public guardian monitoring. Current proposal and specifications are in final stages of review and approval to start implementation with vendor Wellsky to produce a system database for the Department to have an efficient way to monitor and have oversight of the private professional guardians in the area of client management and registration compliance. Within the FY 2020-2021 budget, an allocation of \$500,000 of non-recurring funds has been set aside for this purpose research and implementing the monitoring tool for private professional guardians for compliance with OPPG standards of practice. The OPPG anticipates the project to start prior to the end of FY 2020-2021. 12-Month Follow-up response: The OPPG is currently still undergoing design and incremental testing for Phase 1 of the monitoring tool by Wellsky. 18-Month Follow-up response: OPPG is in the final stages of Phase 1 of development with Wellsky for development and implementation of the Finding 2: OPPG efforts to monitor Public Original response: Recommendation Accepted. Effective April 2020, the OPPG Executive Director developed an exhaustive office staff policy and Guardian Offices (PGOs) were not always adequate to ensure that: OPPG records rocedure manual for the public guardian monitor job function. There has also evidenced that program monitors were free been a review of current monitoring forms and tools used for monitoring of the from conflicts of interest, all State PGOs. These forms have been updated to align with requirements detailed in guardianship rules were subject to adequate the contract with the Department, the PGOs, and the appropriate Florida monitoring, Monitoring Tool responses were statutes. The monitoring staff and the Executive Director currently have supported by and consistent with source completed "Department of Elder Affairs Conflict of Interest Questionnaire" documentation, and monitoring reports were forms for each PGO. appropriately reviewed and timely provided Effective August 2020, the OPPG is conducting a trial run of a newly to PGOs. developed "virtual monitoring" model in light of travel and visitation bans due to COVID-19. This "virtual monitoring" model will allow the OPPG to ensure that PGOs remain in compliance with the Department's contractual agree this includes PGOs registration of fiduciary employees. In the virtual nonitoring model, the OPPG will continue to use the monitoring tool that is currently in place for the PGOs without having to physically travel to locations across the state. Adjustments are being made to ensure large documents can be shared in accordance with Department and State practices and security. This monitoring will allow for compliance with all State guardianship rules and ensuring verification that employees with fiduciary responsibilities are appropriately reported to and approved by the OPPG. The Executive Director is engaged in the overall monitoring process and implementing process mapping and documents to ensure that monitoring results are timely reviewed, monitoring tool responses are supported by and consistent with source documentation, and monitoring reports are timely rovided to the PGOs.

		1	٦
		Recommendation: OPPG management: *Require program monitors to document that they are independent of, and have no conflicts of interest related to, the PGOs they are responsible for monitoring. *Enhance the Monitoring Tool to include all State guardianship rules and ensure verification that employees with fiduciary responsibilities are appropriately reported to and approved by the OPPG. *Strengthen supervisory review controls to ensure that monitoring engagement results are timely reviewed, Monitoring Tool responses are supported by and consistent with source documentation, and monitoring reports are timely provided to the PGOs.	
			Six-Month Follow-up response: The exhaustive office staff policy and procedure manual developed in April 2020 is currently the guiding document for the position and updates are made as needed. The OPPG is currently following the policies and procedures contained within the office manual. The OPPG successfully conducts monitoring of its Public Guardian offices (PGOs) using a virtual monitoring model in light of travel and visitation bans due to COVID-19. This virtual monitoring model will allow the OPPG to ensure that PGOs remain in compliance with the Department's contractual agreement, this includes PGOs' registration of fiduciary employees. The Executive Director remains engaged in the overall monitoring process and implementing process mapping and documents to ensure that monitoring results are timely reviewed, monitoring tool responses are supported by and consistent with source documentation, and monitoring reports are timely provided to the PGOs. The OPPG considers all recommendations related to Finding 2 fulfilled.
			12-Month Follow-up response: Corrective action taken. No follow-up warranted.
			18-Month Follow-up response: Corrective action taken. No follow-up warranted.
1			
		Finding 3: OPPG complaint processing controls need improvement to ensure that: complaints are referred and related investigation activities are conducted in accordance with State law, OPPG policies and procedures, other guidelines, and management expectations; investigations include all applicable complaint allegations; and guardians and complainants are timely notified of whether disciplinary actions are taken.	Original response: Recommendation Accepted. Effective March 2020, the Executive Director developed an exhaustive office staff policy and procedure manual for the complaint intake job function to ensure complaints are documented, recorded, and tracked appropriately and accurately. The manual sets standards for methods to ensure complaint files are maintained for future auditing and investigation needs including preservation of communication with complainant, documents received from complainant, communication with guardians and discipline of guardians. In addition, the Executive Director has implemented the following complaint policies and procedures: *Documentation and tracking of all complaints and complaint related inquires that come into the OPPG complaint toll-free hotline. *Notification to guardian registration staff to appropriately document when guardian discipline is related to guardian education requirement or renewal of
		controls need improvement to ensure that: complaints are referred and related investigation activities are conducted in accordance with State law, OPPG policies and procedures, other guidelines, and management expectations; investigations include all applicable complaint allegations; and guardians and complainants are timely notified of whether disciplinary actions are	Executive Director developed an exhaustive office staff policy and procedure manual for the complaint intake job function to ensure complaints are documented, recorded, and tracked appropriately and accurately. The manual sets standards for methods to ensure complaint files are maintained for future auditing and investigation needs including preservation of communication with complainant, documents received from complainant, communication with guardians and discipline of guardians. In addition, the Executive Director has implemented the following complaint policies and procedures: *Documentation and tracking of all complaints and complaint related inquires that come into the OPPG complaint toll-free hotline. *Notification to guardian registration staff to appropriately document when guardian discipline is related to guardian education requirement or renewal of registration. *Internal monthly audit process by non-complaint intake personnel to ensure that the documentation and tracking above is done effectively.
		controls need improvement to ensure that: complaints are referred and related investigation activities are conducted in accordance with State law, OPPG policies and procedures, other guidelines, and management expectations; investigations include all applicable complaint allegations; and guardians and complainants are timely notified of whether disciplinary actions are	Executive Director developed an exhaustive office staff policy and procedure manual for the complaint intake job function to ensure complaints are documented, recorded, and tracked appropriately and accurately. The manual sets standards for methods to ensure complaint files are maintained for future auditing and investigation needs including preservation of communication with complainant, documents received from complainant, communication with guardians and discipline of guardians. In addition, the Executive Director has implemented the following complaint policies and procedures: Documentation and tracking of all complaints and complaint related inquires that come into the OPPG complaint toll-free hotline. Notification to guardian registration staff to appropriately document when guardian discipline is related to guardian education requirement or renewal of registration. Internal monthly audit process by non-complaint intake personnel to ensure
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		controls need improvement to ensure that: complaints are referred and related investigation activities are conducted in accordance with State law, OPPG policies and procedures, other guidelines, and management expectations; investigations include all applicable complaint allegations; and guardians and complainants are timely notified of whether disciplinary actions are taken. Recommendation: OPPG management enhance complaint processing controls to ensure that complaints are timely referred for investigation, appropriately documented, and complaint information is accurately recorded. Such control enhancements should also promote the inclusion of all applicable complaint allegations in investigations and the timely notification to guardians and	Executive Director developed an exhaustive office staff policy and procedure manual for the complaint intake job function to ensure complaints are documented, recorded, and tracked appropriately and accurately. The manual sets standards for methods to ensure complaint files are maintained for future auditing and investigation needs including preservation of communication with complainant, documents received from complainant, communication with guardians and discipline of guardians. In addition, the Executive Director has implemented the following complaint policies and procedures: -Documentation and tracking of all complaints and complaint related inquires that come into the OPPG complaint toll-free hotline. -Notification to guardian registration staff to appropriately document when guardian discipline is related to guardian education requirement or renewal of registration. -Internal monthly audit process by non-complaint intake personnel to ensure that the documentation and tracking above is done effectively. -Process documentation and tracking for guardian discipline to ensure
		controls need improvement to ensure that: complaints are referred and related investigation activities are conducted in accordance with State law, OPPG policies and procedures, other guidelines, and management expectations; investigations include all applicable complaint allegations; and guardians and complainants are timely notified of whether disciplinary actions are taken. Recommendation: OPPG management enhance complaint processing controls to ensure that complaints are timely referred for investigation, appropriately documented, and complaint information is accurately recorded. Such control enhancements should also promote the inclusion of all applicable complaint allegations in investigations and the timely notification to guardians and	Executive Director developed an exhaustive office staff policy and procedure manual for the complaint intake job function to ensure complaints are documented, recorded, and tracked appropriately and accurately. The manual sets standards for methods to ensure complaint files are maintained for future auditing and investigation needs including preservation of communication with complainant, documents received from complainant, communication with guardians and discipline of guardians. In addition, the Executive Director has implemented the following complaint policies and procedures: *Documentation and tracking of all complaints and complaint related inquires that come into the OPPG complaint toll-free hotline. *Notification to guardian registration staff to appropriately document when guardian discipline is related to guardian education requirement or renewal of registration. *Internal monthly audit process by non-complaint intake personnel to ensure that the documentation and tracking above is done effectively. *Process documentation and tracking for guardian discipline to ensure compliance. *Six-Month Follow-up response: The exhaustive office staff policy and procedure manual developed in March 2020 is currently the guiding document for the position and updates are made as needed. The OPPG is currently following the policies and procedures contained within the office manual. The

		18-Month Follow-up response: Corrective action taken. No follow-up
		warranted.
	Finding 4: Contrary to State law, the Department had not adopted rules for certain OPPG processes, including the process for investigating complaints.	Original response: Recommendation accepted. The OPPG will work with DOEA General Counsel office to develop OPPG rules. While the OPPG acknowledges there are legislative rules or processes defined in the Administrative Code Chapter 58M-2 governing complainants and investigations, the OPPG did communicate to the Auditor General that they do in fact have a MOU with the Statewide Clerks Alliance and internal processes and procedures that are detailed in the complaint intake staff manual that governs following: *Investigating complaints against guardians; *Communicating the disciplinary process to guardians and complainants; and *Reporting determined or suspected abuse, neglect, or exploitation of a vulnerable adult to the central abuse hotline established by the Department of Children and Families.
	Recommendation: To ensure that OPPG management, staff, and other parties are provided authoritative Department direction, Department management adopt rules governing complaint, disciplinary proceeding, and enforcement processes.	
		Six-Month Follow-up response: The OPPG continues to work with and receive ongoing support from the DOEA General Counsel's office to develop OPPG rules. The OPPG is currently in the internal draft stages of the rule and anticipates having proposed rules ready to present by the end of FY 2020-2021.
		12-Month Follow-up response: The OPPG is near completion of the internal draft stages of the rule.
		18-Month Follow-up response: The OPPG has completed the draft update of the rule and are awaiting final Department approval to move forward.
	Finding 5: OPPG controls need enhancement to ensure that, prior to reimbursing Clerks of the Court for the direct costs of guardianship complaint investigations, invoiced amounts are adequately supported and agree with established rates.	Original response: Recommendation Accepted. Effective March 2020, the Executive Director has implemented a two-person review of County Clerks of Court invoices for complaint investigation work prior to submission for payment. This process includes verification of dollar amounts, time spent on individual investigations, time study of time spent, and ensuring in compliance with MOUs.
	Recommendation: Prior to reimbursing Clerks for the direct costs of complaint investigations, OPPG management ensure that invoiced amounts are adequately supported and agree with the salary rates established by the Memorandum of	
		Six-Month Follow-up response: Since March 2020, the Executive Director has implemented an office procedure of a two-person review of County Clerks of Court invoices for complaint investigation work prior to submission for payment. The OPPG considers this recommendation fulfilled.
		12-Month Follow-up response: Corrective action taken. No follow-up warranted.
		18-Month Follow-up response: Corrective action taken. No follow-up warranted.
	Finding 6: OPPG controls did not adequately promote the timely submittal of annual professional guardian renewal registrations or ensure that the courts responsible for appointing guardians were timely notified of lapses in guardian registration.	Original response: Recommendation Accepted. Effective March 2020, the Executive Director developed an exhaustive office staff policy and procedure manual for the guardian registrar job function. The manual provides guidance on handling notifications to professional guardians regarding renewals and handling untimely renewals of registrations. Specifically, regarding timely renewal and expiration notifications, the Executive Director has implemented the following registration policies and procedures: -Professional guardians are notified via email communication 30-45 days prior to registration expiration with details of all necessary components needed for the guardian and fiduciary staff to be in compliance and assist with timely registration. The email will include, as an attachment, the appropriate registration forms and a Registration Infographic for visual learners.
		•Professional guardians that may submit registration or renewal registration documents that are incomplete or missing necessary component are notified via email communication within 1-2 day of OPPG receiving documents. If OPPG does not receive required documents, staff will notify professional guardians via email communication or phone call every 8-10 days.
		•Professional guardians are notified after 10 days of registration expiration if no attempt to renew registration is made. •Oin working with the general counsel office, the OPPG has developed communication for professional guardians that fail to timely renew registration. This communication is a signed letter sent via mail or email to the professional guardian and in some circumstances, Chief Judges and Clerks of the Court will be notified of the untimely renewal.

			Recommendation: OPPG management establish renewal registration policies and procedures, including procedures for providing expiration notices to professional guardians prior to the date the registration is due to the OPPG. Also, OPPG management establish policies and procedures to ensure that lapses in guardian registrations are timely communicated to court personnel responsible for appointing guardians.	
				Six-Month Follow-up response: The exhaustive office staff policy and procedure manual developed in March 2020 is currently the guiding document for the position and updates are made as needed. The manual includes processes and procedures to ensure strict compliance of professional guardian registrations. The OPPG is currently following the procedures contained within the office manual. The OPPG considers this recommendation fulfilled.
				12-Month Follow-up response: Corrective action taken. No follow-up warranted.
				18-Month Follow-up response: Corrective action taken. No follow-up warranted.
E1819DEA-022 Audit of the Department of Elder Affairs' Office of Public and Professional Guardians and Selected Administrative Activities	6/30/2020	Bureau of Information Technology (BIT)	Finding 7: Security controls over mobile device utilization need improvement to ensure the confidentiality, integrity, and availability of Department data and information technology resources.	Original response: The Bureau of Information Technology (BIT) acknowledges the preliminary and tentative audit finding, related to mobile device security controls. BIT will work in collaboration with Department leadership to review and align policies and procedures with the Department's mission, business needs, and the AG's recommendations. In consideration of alternate work accommodations due to the coronavirus pandemic, a tentative target date of December 31, 2020 will be set for finalization and approval of the policies and procedures. The remaining AG recommendations, related to mobile device security controls, will be evaluated collaboratively by Department leadership and BIT to determine where operational changes may be made to enhance certain security controls while still supporting the Department's mission and business needs. Implementation of operational changes that may be approved will likely be a protracted endeavor as additional funding may be required. Due to the potential of needing additional funds, implementation of approved changes may be delayed until Fiscal Year 2020-2021 or Fiscal Year 2021-2022 to account for state legislative and budgetary cycles.
			Recommendation: Department management enhance certain security controls related to employee use of mobile devices to ensure the confidentiality, integrity, and availability of Department data and related IT resources.	No Six-Month Follow-up was conducted on this finding.
				12-Month Follow-up response: Currently in progress by the Auditor General.
E1819DEA-022 Audit of the Department of Elder Affairs' Office of Public and Professional Guardians and Selected Administrative Activities	6/30/2020	Division of Financial and Support Services (F&SS)	Finding 8: Department controls over employee access to the Florida Accounting Information Resource Subsystem continue to need improvement to reduce the risk of unauthorized disclosure, modification, or destruction of Department data.	Original response: The Division of Financial & Support Services acknowledges the preliminary and tentative audit finding related to FLAIR Access Controls. The Division has written procedures for FLAIR Access, dated 8/10/2020. Effective immediately, DOEA will utilize this procedure to ensure that access to FLAIR is reviewed periodically, provide documentation when an employee requires access to FLAIR as well as termination of access to FLAIR. In addition, as employees are reassigned duties within the Department, documentation will be maintained to support required updates to privileges.
			Recommendation: Department management establish policies and procedures for conducting periodic reviews of the appropriateness of FLAIR user access privileges. Also, Department management limit user access privileges to FLAIR to promote an appropriate separation of duties and require that, where incompatible access privileges are necessary, compensating controls are established and documented. Department management should also ensure that FLAIR access privileges are removed immediately upon a user's separation from Department employment.	

				Six- Month Follow-up response: The Accounting Section has revised the procedures for FLAIR access and it is enclosed. Currently Accounting Staff perform the following two functions: 1.New Hires Not all new employees utilize FLAIR. If they are required to have FLAIR Access, Supervisors will call the FLAIR Administrator (FA) to ensure proper forms are used. The FA discusses the forms with supervisor for understandability, and the forms are properly signed/initialed. 2.Terminated Employees The FA will utilize the automated offboarding report to terminate employees leaving the working day following their departure date. The Accounting Supervisor is in the process of training the Accountant IV to review FLAIR access forms routinely so that it can be determined if the employees are still working in the duties that require access for which they have acquired. The Accountant IV will begin to contact these employees this month (February). They will also ensure that job duties have remained the same.	
				12-Month Follow-up response: Corrective action taken. No follow-up warranted.	
				18-Month Follow-up response: Corrective action taken. No follow-up warranted.	
A-2021DEA-030 Audit of the Long-Term Care	6/30/2022	LTCOP	Finding 1: There were instances where the Ombudsman Certification Checklist and	Original response: We agree with the recommendation. LTCOP management will conduct a review of all active ombudsmen and ensure that the required	
Ombudsman Program (LTCOP) Performance Measure Report Date: 12/29/21			training records for volunteer ombudsmen and employees were incomplete and/or missing from the LTCOP Management Information System.	training for certification is completely and accurately documented. Procedure changes were proposed for Chapter 3 of the LTCOP Operations Manual.	
			Recommendation: LTCOP management take action to ensure proper documentation is maintained to evidence completion of all required training for conducting complaint investigations.		
				Six-Month Follow-up response: Currently in progress by DOEA Office of Inspector General's Internal Audit Section.	
			Finding 2: There were instances of missing and misfiled complaint records on the Department's SharePoint, namely the LTCOP SharePoint site.	Original response: We agree with the recommendation. LTCOP will undertake a review of all cases closed in state fiscal years (2019-2020, 2020-2021, and from 7/1/2021 to present) to ensure that all cases are uploaded into SharePoint and accurately filed in the proper location. Procedure changes were proposed for Chapter 4 the LTCOP Operation Manual.	
			Recommendation: LTCOP management take action to ensure complaint records are uploaded and properly maintained on the LTCOP SharePoint site to support complaint investigations and information recorded in OMIS.		
				Six-Month Follow-up response: Currently in progress by DOEA Office of Inspector General's Internal Audit Section.	
			Finding 3: LTCOP Management did not engage in the entire reporting process established by DOEA's Bureau of Planning and Evaluation.	Original response: We agree with the recommendation. LTCOP management will continue to collaborate with the P&E management and ensure that all directed communications with P&E management are fully and completely carried out throughout the entire reporting process to ensure the integrity of the reported results.	
			Recommendation: LTCOP management continue to collaborate with the P&E management and fully engage and communicate throughout the entire reporting process established to ensure the integrity of the reported results.		
				<u>Six-Month Follow-up response</u> : Currently in progress by DOEA Office of Inspector General's Internal Audit Section.	
A-2122DEA-022 The Department of Elder	6/30/2022	Bureau of Contract Administration and	Finding 1: Bureau Management has not developed written procedures for contract	Original response: Bureau management is currently in the development and review stages of Contract Administration procedures that will promote the	
Affairs Contract Procurement Compliance Audit Report Date: 4/7/22		Purchasing	administration.	continuity of activities in the event of prolonged employee absences or turnover and hopes to have the procedures fully approved in a few months.	

			event of prolonged employee absences or		
			turnover.		
				Six-Month Follow-up is due in October 2022.	
			Finding 2: Information posted in FACTS by	Original response: The Contract Administration procedures referenced above	
			DOEA personnel was out of compliance with	will incorporate a quality assurance process which will utilize the available	
				charts and reports in the FACTS system to ensure data is accurately recorded;	
				thereby eliminating future incidents of non-compliance with Section 215.3985(14)(a), F.S.	
				23000000 (17,0), 1.1.	
			Recommendation: Bureau management		
			implement and document a quality assurance		
			process, and as the DOEA FACTS access custodian, use the available charts and reports		
			in the system to ensure data is accurately		
			recorded; thereby, eliminating future		
			incidents of non-compliance with Section 215.985(14)(a), F.S.		
			213.763(14)(a), 1.5.		
				Six-Month Follow-up is due in October 2022.	
S-2122DEA-027	6/30/2022	Bureau of	Findings (5) - Pursuant to Section		
Enterprise Audit of		Information	282.318(4)(g), Florida Statutes, this report		
Security Continuous Monitoring Report		Technology	and associated records are CONFIDENTIAL and exempt from public disclosure.		
Date: 5/27/22			and exempt from public disclosure.		
				Six-Month Follow-up is due in November 2022.	

Office of Policy and Budget - July 2020

Department/Budget Entity (Service): Department of Elder Affairs Agency Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway

A "Y" indicates "YES" and is acceptable, an "N/J" indicates "NO/Justification Provided" - these require further explanation/justification

		Progran	et Entity (Codes)		
	Action	65 - Dept	65100200	65100400	65100600	65101000
1. G E	NERAL					
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	Y
1.2	Is Column A03 set to TRANSFER CONTROL for DISPLAY and UPDATE status					
ALIDIT	for both the Budget and Trust Fund columns? (CSDI)	Y	Y	Y	Y	Y
AUDIT		<u> </u>	I			
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	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	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	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. EXI	HIBIT 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 56 of the LBR Instructions?	Y	Y	Y	Y	Y
2.2	Are the statewide issues generated systematically (estimated expenditures, nonrecurring expenditures, etc.) included?	Y	Y	Y	Y	Y
2.3	Are the issue codes and titles consistent with <i>Section 3</i> of the LBR Instructions (pages 14 through 27)? Do they clearly describe the issue?	Y	Y	Y	Y	Y
3. EXI	HIBIT B (EXBR, EXB)	<u> </u>	l			
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.	N/A	N/A	N/A	N/A	N/A

Department/Budget Entity (Service): Department of Elder Affairs

Agency Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway

(addition	nal sheets can be used as necessary), and "TIPS" are other areas to consider.					
		Program	or Servi	ce (Budge	et Entity (Codes)
	Action	65 - Dept	65100200	65100400	65100600	65101000
AUDITS	S:					
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	Y
3.3	Current Year Estimated Verification Comparison Report: Is Column A02 equal to Column B07? (EXBR, EXBC - Report should print "Records Selected Net To Zero")	Y	Y	Y	Y	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. EXH	HBIT 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 59 of the LBR Instructions?	Y	Y	Y	Y	Y
4.2	Is the program component code and title used correct?	Y	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. EXH	HIBIT D-1 (ED1R, EXD1)					
5.1	Are all object of expenditures positive amounts? (This is a manual check.)	Y	Y	Y	Y	Y
AUDITS		ı	I			
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	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	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	Y

Department/Budget Entity (Service): Department of Elder Affairs	
Agency Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway	

	dicates "YES" and is acceptable, an "N/J" indicates "NO/Justification Provided" - these requinal sheets can be used as necessary), and "TIPS" are other areas to consider.	re furth	er expla	nation/ju	stificati	on
		Progran	n or Servi	ce (Budge	et Entity (Codes)
	Action	65 - Dept	65100200	65100400	65100600	65101000
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 2021-22 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. EXH	HBIT D-3 (ED3R, ED3) (Not required in the LBR - for analytical purposes only	7.)				
6.1	Are issues appropriately aligned with appropriation categories?	Y	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. EXH	HIBIT D-3A (EADR, ED3A) (Required to be posted to the Florida Fiscal Portal)					
7.1	Are the issue titles correct and do they clearly identify the issue? (See pages 15 through 27 of the LBR Instructions.)	Y	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 64 through 69 of the LBR Instructions.)	Y	Y	Y	Y	Y
7.3	Does the narrative for Information Technology (IT) issue follow the additional narrative requirements described on pages 66 through 69 of the LBR Instructions?	Y	N/A	N/A	Y	N/A
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	N/A	N/A	Y	N/A
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	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	Y

Department/Budget Entity (Service): Department of Elder Affairs

Agency Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway

		Program	or Servi	ce (Budge	et Entity (Codes)
	Action	65 - Dept	65100200	65100400	65100600	6510100
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 92 of the LBR Instructions.)	Y	Y	Y	Y	Y
7.8	Does the issue narrative include the Consensus Estimating Conference forecast, where appropriate?	N/A	N/A	N/A	N/A	N/A
7.9	Does the issue narrative reference the specific county(ies) where applicable?	N/A	N/A	N/A	N/A	N/A
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 #23-003?	N/A	N/A	N/A	N/A	N/A
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)	N/A	N/A	N/A	N/A	N/A
7.12	Does the issue narrative include plans to satisfy additional space requirements when requesting additional positions?	N/A	N/A	N/A	N/A	N/A
7.13	Has the agency included a 160XXX0 issue and 210XXXX and 260XXX0 issues as required for lump sum distributions?	N/A	N/A	N/A	N/A	N/A
7.14	Do the amounts reflect appropriate FSI assignments?	Y	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.	N/A	N/A	N/A	N/A	N/A
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 88 of the LBR Instructions.)	Y	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	N/A	N/A	Y	N/A
7.18	Are the issues relating to <i>major audit findings and recommendations</i> properly coded (4A0XXX0, 4B0XXX0)?	N/A	N/A	N/A	N/A	N/A
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	Y

Department/Budget Entity (Service): Department of Elder Affairs

Agency Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway

	nal sheets can be used as necessary), and "TIPS" are other areas to consider.	Program or Service (Budget Entity Codes)					
	Action	65 - Dept	65100200	65100400	65100600	65101000	
7.20	Does the General Revenue for 160XXXX (Adjustments to Current Year Expenditures) issues net to zero? (GENR, LBR1)	N/A	N/A	N/A	N/A	N/A	
7.21	Does the General Revenue for 180XXXX (Intra-Agency Reorganizations) issues net to zero? (GENR, LBR2)	N/A	N/A	N/A	N/A	N/A	
7.22	Does the General Revenue for 200XXXX (Estimated Expenditures Realignment) issues net to zero? (GENR, LBR3)	N/A	N/A	Y	N/A	N/A	
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))	N/A	N/A	N/A	N/A	N/A	
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	Y	
7.25	Has the agency entered annualization issues (260XXX0) for any issue that was partially funded in Fiscal Year 2022-23? Review Column G66 to determine whether any incremental amounts are needed to fully fund an issue that was initially appropriated in Fiscal Year 2022-23. Do not add annualization issues for pay and benefit distribution issues, as those annualization issues (26AXXXX) have already been added to A03.	N/A	N/A	N/A	N/A	N/A	
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 64 through 69 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).						

	Fiscal Year 2023-24 LBR Technical Review	Chec	klist			
Departm	ent/Budget Entity (Service): Department of Elder Affairs					
Agency 1	Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway					
	dicates "YES" and is acceptable, an "N/J" indicates "NO/Justification Provided" - these requi	ire furth	er expla	nation/ji	ustificati	on
(addition	nal sheets can be used as necessary), and "TIPS" are other areas to consider.					
		Program	or Serv	ice (Budg	et Entity (Codes)
	Action	65 - Dept	6510020	65100400	65100600	65101000
TIP	If an appropriation made in the FY 2022-23 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.					
	EDULE I & RELATED DOCUMENTS (SC1R, SC1 - Budget Entity Level <i>or</i> Seed to be posted to the Florida Fiscal Portal)	C1R, S	C1D -	Depart	ment L	evel)
8.1	Has a separate department level Schedule I and supporting documents package					
	been submitted by the agency?	Y				
8.2	Has a Schedule I and Schedule IB been completed in LAS/PBS for each operating trust fund?	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				
8.4	Have the Examination of Regulatory Fees Part I and Part II forms been included					
	for the applicable regulatory programs?	N/A				
8.5	Have the required detailed narratives been provided (5% trust fund reserve					
	narrative; method for computing the distribution of cost for general management					
	and administrative services narrative; adjustments narrative; revenue estimating					
	methodology narrative; fixed capital outlay adjustment narrative)?	Y				
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				
8.7	If the agency is scheduled for the annual trust fund review this year, have the					
	Schedule ID and applicable draft legislation been included for recreation,					
	modification or termination of existing trust funds?	N/A				
8.8	If the agency is scheduled for the annual trust fund review this year, have the					
	necessary trust funds been requested for creation pursuant to section 215.32(2)(b),					
	Florida Statutes - including the Schedule ID and applicable legislation?	N/A				
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,					
0.10	00107010	Y				
8.10	Are the Statutory authority references correct?	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				
8.12	Is this an accurate representation of revenues based on the most recent Consensus	1				
0.12	Estimating Conference forecasts?	N/A				
8.13	If there is no Consensus Estimating Conference forecast available, do the revenue	11/11			 	
0.15	estimates appear to be reasonable?	Y				

Department/Budget Entity (Service): Department of Elder Affairs

Agency Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway

		Program	Codes)			
	Action	65 - Dept	6100200	6100400	65100600	65101000
8.14	Are the federal funds revenues reported in Section I broken out by individual grant? Are the correct CFDA codes used?	Y				
8.15	Are anticipated grants included and based on the state fiscal year (rather than federal fiscal year)?	Y				
8.16	Are the Schedule I revenues consistent with the FSI's reported in the Exhibit D-3A?	Y				
8.17	If applicable, are nonrecurring revenues entered into Column A04?	N/A				
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				
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				
8.20	Are appropriate General Revenue Service Charge nonoperating amounts included in Section II?	Y				
8.21	Are nonoperating expenditures to other budget entities/departments cross-referenced accurately?	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				
8.23	Are nonoperating expenditures recorded in Section II and adjustments recorded in Section III?	Y				
8.24	Are prior year September operating reversions appropriately shown in column A01, Section III?	Y				
8.25	Are current year September operating reversions (if available) appropriately shown in column A02, Section III?	Y				
8.26	Does the Schedule IC properly reflect the unreserved fund balance for each trust fund as defined by the LBR Instructions, and is it reconciled to the agency accounting records?	Y				
8.27	Has the agency analyzed for continuing appropriations (category 13XXXX) and properly accounted for in the appropriate column(s) in Section III?	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				
8.29	Does Line I of Column A01 (Schedule I) equal Line K of the Schedule IC?	Y				
UDITS	S:			•		

Department/Budget Entity (Service): Department of Elder Affairs

Agency Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway

		Program	or Servi	ce (Budge	t Entity (Codes)
	Action	65 - Dept	65100200	65100400	65100600	6510100
8.30	Is Line I a positive number? (If not, the agency must adjust the budget request to					
	eliminate the deficit).	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				
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				
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?					
	<u> </u>	Y				
8.34	Have A/R been properly analyzed and any allowances for doubtful accounts been properly recorded on the Schedule IC?	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 pages 124					
	through 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.					
	EDULE II (PSCR, SC2)					
AUDIT:		ı				
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 155 of the					
	LBR Instructions.)					
	See issue narrative.	N/J	N/J	N/J	N/J	N/J
0. SCI	HEDULE III (PSCR, SC3)					
10.1	Is the appropriate lapse amount applied? (See page 90 of the LBR Instructions.)	N/A	N/A	N/A	N/A	N/A
10.2	Are amounts in Other Salary Amount appropriate and fully justified? (See pages					
	93 through 94 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	Y

	Fiscal Year 2023-24 LBR Technical Review	Chec	Klist			
Departm	ent/Budget Entity (Service): Department of Elder Affairs					
	Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway					
	dicates "YES" and is acceptable, an "N/J" indicates "NO/Justification Provided" - these required sheets can be used as necessary), and "TIPS" are other areas to consider.	ire furth	er expla	nation/j	ustificati	on
	•	Progran	n or Servi	ce (Budg	et Entity (Codes)
	Action	65 - Dept	65100200	65100400	65100600	65101000
111	A d (I C (' T 1 1 (TT)' 1 10	37	37	37	37	37
11.1	Are the correct Information Technology (IT) issue codes used?	Y	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. SC	HEDULE 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	Y
13. SC	HEDULE VIIIB-1 (EADR, S8B1)		•			
13.1	NOT REQUIRED FOR THIS YEAR	N/A	N/A	N/A	N/A	N/A
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 nonrecurring portion in Column A92.					
14. SC	HEDULE VIIIB-2 (EADR, S8B2) (Required to be posted to the Florida Fiscal P	ortal)				
14.1	Do the reductions comply with the instructions provided on pages 99 through 102 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	N/A	Y	N/A	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.	I	IN/A	I	IN/A	1
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. SC	HEDULE VIIIC (EADR, S8C) (NO LONGER REQUIRED)					
	HEDULE XI (UCSR,SCXI) (LAS/PBS Web - see pages 104-108 of the LBR Instred to be posted to the Florida Fiscal Portal in Manual Documents)	ruction	s for de	etailed	instruct	tions)
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	Y
16.2	Do the PDF files uploaded to the Florida Fiscal Portal for the LRPP and LBR					
	match?	Y	Y	Y	Y	Y
	S INCLUDED IN THE SCHEDULE XI REPORT:					
16.3	Does the FY 2021-22 Actual (prior year) Expenditures in Column A36 reconcile to Column A01? (GENR, ACT1)	V	v	v	V	V

Department/Budget Entity (Service): Department of Elder Affairs

Agency Budget Officer/OPB Analyst Name: Randy Pupo/Khari Calloway

		Program or Service (Budget Entity Codes)						
	Action	65 - Dept	65100200	65100400	65100600	65101000		
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	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	Y		
16.6	Has the agency provided the necessary standard (Record Type 5) for all activities which should appear in Section II? (Note: The activities listed in Audit #3 do not have an associated output standard. In addition, the activities were not identified as a Transfer to a State Agency, as Aid to Local Government, or a Payment of Pensions, Benefits and Claims. Activities listed here should represent transfers/pass-throughs that are not represented by those above or administrative costs that are unique to the agency and are not appropriate to be allocated to all other activities.)	Y	Y	Y	Y	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	Y		
TIP	If Section I and Section III have a small difference, it may be due to rounding and therefore will be acceptable.							
17. MA	NUALLY PREPARED EXHIBITS & SCHEDULES (Required to be posted to t	he Flor	ida Fis	cal Por	tal)			
17.1	Do exhibits and schedules comply with LBR Instructions (pages 52 through 109 of	***	***	3.7	37	37		
17.2	the LBR Instructions), and are they accurate and complete? Do manual exhibits tie to LAS/PBS where applicable?	Y Y	Y	Y	Y	Y		
17.3	Are agency organization charts (Schedule X) provided and at the appropriate level of detail?	Y	Y	Y	Y	Y		
17.4	Does the LBR include a separate Schedule IV-B for each IT project over \$1 million (see page 128 of the LBR instructions for exceptions to this rule)? Have all IV-Bs been emailed to: IT@LASPBS.STATE.FL.US?	Y	N/A	N/A	Y	N/A		
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)?	N/A	N/A	N/A	N/A	N/A		
AUDIT.	S - GENERAL INFORMATION							
TIP	Review <i>Section 6: Audits</i> of the LBR Instructions (pages 154 through 156) 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. CA	PITAL IMPROVEMENTS PROGRAM (CIP) (Required to be posted to the Flo	rida Fi	scal Po	rtal)				
18.1	Are the CIP-2, CIP-3, CIP-A and CIP-B forms included?	Y	Y	Y	Y	Y		
18.2	Are the CIP-4 and CIP-5 forms submitted when applicable (see CIP Instructions)?	Y	Y	Y	Y	Y		
18.3	Do all CIP forms comply with CIP Instructions where applicable (see CIP Instructions)?	Y	Y	Y	Y	Y		

Department/Budget Entity (Service): Department of Elder Affairs
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A "Y" indicates "YFS" and is acceptable an "N/I" indicates "NO/Justification Provided" - these require further explanation/justification

		Program or Service (Budget Entity Co					
	Action	65 - Dept	65100200	65100400	65100600	65101000	
18.4	Does the agency request include 5 year projections (Columns A03, A06, A07, A08 and A09)?	Y	Y	Y	Y	Y	
18.5	Are the appropriate counties identified in the narrative?	Y	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	Y	
TIP	Requests for Fixed Capital Outlay appropriations which are Grants and Aids to Local Governments and Non-Profit Organizations must use the Grants and Aids to Local Governments and Non-Profit Organizations - Fixed Capital Outlay major appropriation category (140XXX) and include the sub-title "Grants and Aids". These appropriations utilize a CIP-B form as justification.						
19. FL	ORIDA 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	Y	