

Report Title: IT Strategic Plan Summary

Agency: 720 Department of Behavioral Health and
Developmental Services

Date: 4/6/2017

Current Operational IT Investments

In this section, describe the high-level strategy the agency will use to manage existing operational IT investments over the next year to 5 years. This section should align with identified Business Requirements for Existing Technology (BReTs). At minimum, please address the following questions in your description of your agency's strategy for managing existing operational IT investments:

Are there existing IT investments that will require additional funding over the next year to 5 years, such as license renewals, re-competition of current IT contracts, or system enhancements required by the Agency Strategic Plan?

If there are systems that will no longer support the agency's business needs, either through poor performance or excessive cost, how does IT leadership in the agency plan to address the issues?

If the agency does not have the staff or funding to meet increasing demand for IT services, how will IT leadership fulfill the requests?

The Department of Behavioral Health and Developmental Services (DBHDS) central office provides financial resources, policy direction, programmatic, and financial oversight of Virginia's public behavioral health and developmental services system. The system includes nine state hospitals, a medical center, four training centers, and a treatment center for sexually violent predators all operated by the DBHDS, and 39 nine community services boards and a behavioral health authority (CSBs) established by local governments.

The DBHDS Information Services and Technology (IS&T) office provides coordination, guidance, oversight, and support for all information systems used by the DBHDS central office, and some of the systems used by state facilities, CSBs, and licensed private providers. Services include information technology (IT) security, Commonwealth IT standards compliance, web and application development and support, and data management. IS&T provides technical support for 29 applications and there has been a significant increase in agency and non-agency demand for implementation and support of DBHDS managed technology and related services.

The key business requirements driving additional spending and/or functional changes in currently operational IT investments include:

- Compliance with Audit Requirements
- Improving Application Configuration Management Capabilities
- Increasing Oversight over Third-Party Providers
- Ensuring the Physical Security of People in our Facilities
- Increasing Frequency and Quality of Licensing Specialist Visits to Providers
- Aligning with the Commonwealth Plan to Replace CIPPS
- Enabling Efficient Data Retention, Exchange, Analysis, and Reporting
- Expanding Efforts to Automate and Streamline Hospital Clinical Workflow
- Improving Reporting and Analytic Performance in OneSource Data Warehouse
- Reducing the Cost to Support Facility Dev/Test/Prod Environments
- Reducing the Facility Application Inventory
- Aligning Early Intervention Programs with Federal Outcome-based Results Requirements
- Preserving or Improving Technology Services through the Transition to New Infrastructure Service Providers

DBHDS does not have the staff or funding to meet increasing demands. DBHDS IS&T has submitted a set of budget decision packages in each of the last three fiscal years to DPB designed to address the staffing and funding concerns, but these requests have not been fulfilled.

Factors Impacting the Current IT

In this section, the agency will describe the changes in their business environment that will require or mandate changes to the agency's current IT investments. These are requirements and mandates

from external sources, such as other agencies or business partners, the agency's customer base, product and service providers, or new federal or state legislation or regulations. The agency must identify the business value of the change, any important deadlines that must be met, and the consequences if the deadlines are not met. In your discussion, be sure to note whether the proposed enhancements are funded or not. If the agency's existing current IT investments will not need enhancement due to requirements or mandates from external sources in the foreseeable future, the agency should enter the following text rather than leave the Factors Impacting the Current IT section blank

For each mandated change, summarize your agency's response from your Agency Strategic Plan, and is it the opinion of agency IT leadership that the IT portion of the response is adequately funded?

Do the mandated changes affect IT in other Commonwealth agencies, or in other states? If so, how?

--Mental health services system reforms: The behavioral health landscape is evolving rapidly and focused on access, consistency of services, equity of outcomes, patient experience, quality of care, and accountability. The Excellence in Mental Health Act has established a national model for core behavioral health services which includes evidence based practices for the specific populations being served, identified indicators of quality care, and established benchmarks for healthcare outcomes. DBHDS relationship with community services boards is expected to evolve into performance based contracting with identified quality indicators and specified outcome measures that are consistent with the national model. DBHDS oversight of the state hospitals will be increasingly based on indicators of organizational health and specific healthcare outcomes for the individuals receiving services. Technology services must expand to support behavioral health quality assurance and monitoring efforts, reporting on key quality indicators, and implementation of both clinical systems and back office technologies (such as financial reimbursement platforms).

--Development and expansion of developmental disabilities services: While the key elements are now in place, the ongoing improvements in a quality, person centered, responsive single system that increases community integration for individuals with developmental disabilities is dependent on reliable data. Virginia will have to meet the requirements laid forth in the Department of Justice Settlement Agreement with a quality assurance/quality management system that ensures the health, safety, and welfare of individuals who are living as independently as possible while retaining access to all vital services. DBHDS is allocating resources through the amended waivers, community housing, employment, habilitative, therapeutic, and crisis services, and reducing the time Virginians spend on the services waitlists. DBHDS will need to access data from key sister agencies, CSBs, and related health providers to manage and grow the community system of services and supports, while maintaining a secure data exchange environment in compliance with agency, Commonwealth, and federal regulations and standards.

--Commonwealth IT disentanglement from Northrop Grumman: The Commonwealth's contract with Northrop Grumman for information technology (IT) infrastructure services expires July 1, 2019. While VITA is responsible for ensuring the continuity and reliability of IT infrastructure services leading up to and through that date, DBHDS IS&T is responsible for ensuring the agency applications can be migrated to new third party infrastructure services while maintaining information security and cross application connectivity. In order to have all DBHDS applications moved off of the Northrop Grumman infrastructure by the end of FY19, DBHDS IS&T must begin remediating applications then executing transitions to new providers during the 2016-18 budget biennium.

--Comply with APA audit findings: DBHDS has been subject to two recent audits that identify opportunities for improving agency information technology services performance. In the Audit of the Agencies of the Secretary of Health and Human Resources for FY2014 the following management comments were made:

- Improve Database Security – Repeat
- Develop and Submit an Information Technology Audit Plan
- Improve Controls over Systems Access – Repeat
- Improve Controls over the VNAV System
- Improve Controls over Physical Inventory

DBHDS responded to these comments with a corrective action plan on January 21, 2015.

In the Commonwealth of Virginia Single Audit for FY2015 the following management comments were made:

- 2015-005: Develop Baseline Configurations for Information Systems
- 2015-006: Improve Database Security (2014-015)
- 2015-032: Improve Internal Controls Over System Access (2014-048)
- 2015-038: Improve Risk Management Processes
- 2015-049: Improve Information Technology Governance

- 2015-051: Develop Vulnerability Assessment Process
- 2015-056: Upgrade Unsupported Technology
- 2015-059: Increase Oversight over Third-Party Providers

DBHDS responded to these comments with a corrective action plan on January 15, 2016.

Proposed IT Solutions

In this section, describe the high-level strategy the agency will use to initiate new IT investments over the next year to 5 years in support of the agency strategic objectives documented in your Agency Strategic Plan. The agency does not need to consider specific technologies at this time, however, the strategy should identify how the IT implementation will provide business value to the organization. This section should align with identified Business Requirements for New Technology (BRnTs). At minimum, please address the following questions in your description of your agency's strategy for initiating new IT investments:

What are the most important solutions, based on the priority assigned to the requirements by the business sponsors in your agency, and what is the approach to achieving these priority solutions?

If any new IT initiatives will be started in the upcoming budget biennium, is it the opinion of agency IT leadership that it is adequately funded?

Does the agency's current IT staff have the appropriate skill set needed to support future agency technologies? If not, what skill sets need to be acquired?

If the agency will be engaged in multiple new IT initiatives, how will agency IT staff and agency subject matter experts be used across the initiatives?

The key components of the agency's approach to onboarding new systems and replacing aging technologies are 1) relying on third party systems, either vendor hosted or hosted by DBHDS through our infrastructure provider, and building internal skills to integrate across COTS products, 2) continuing to develop the OneMind EHRs as a health system-wide clinical platform, 3) developing SOA web services-based transactional data exchanges between DBHDS systems, and 4) using secure batch processes to receive data and consolidate reporting and analytics functions into the OneSource Data Warehouse. EHRs services and support, SOA web service development, COTS integration, and data management skills are the DBHDS's top IT training and hiring priorities. The key business requirements driving investment in new technologies are:

- Supporting Consolidation of Waivers
- Ensuring Financial Technology Remains Supportable
- Providing Mobile Remote Access Services to Staff
- Supporting Business Process Re-Engineering Efforts
- Improving the Performance of Information Security Functions
- Improving the Reporting and Analytic Performance of OneSource
- Implementing a Consolidated Critical Event Tracking System
- Enabling Prospective Payments from CSBs under the Excellence in Mental Health Act
- Aligning Early Intervention Programs with Federal Outcome-based Results Requirements
- Integrating Patient Billing and Registration into the OneMind EHR

VITA has asked each agency to answer a series of questions in this section of the ITSP. DBHDS does not currently have plans to use the IT Shared Security Service, but may take advantage of the option once we know more about the offering. We intend to increase our internet usage as we transition to cloud hosted application service providers, and will support that increased usage with additional investments in networking services. DBHDS infrastructure transition in advance of the Northrop Grumman disentanglement will be managed through the Facility Application Inventory Reduction (FAIR) Program. The program's objectives are to: a) reduce application count by selecting a suite of common applications for use by all facilities that are supported by the Central Office, b) upgrade remaining applications from legacy platforms to current technology and move them all to agency-wide infrastructure (at CESC), then c) migrate the applications from the agency-wide infrastructure to a cloud provider.

Report Title: Strategic Plan

Agency: Department of Behavioral Health and Developmental Services

Date: 4/6/2017

Current IT Services

Category	Costs Year 1		Costs Year 2	
	GF	NGF	GF	NGF
Projected Service Fees	\$11,819,984	\$4,161,606	\$11,766,986	\$4,142,946
VITA Infrastructure Changes	\$0	\$0	\$0	\$0
Estimated VITA Infrastructure	\$11,819,984	\$4,161,606	\$11,766,986	\$4,142,946
Specialized Infrastructure	\$0	\$0	\$0	\$0
Agency IT Staff	\$8,951,440	\$0	\$8,951,440	\$0
Non-agency IT Staff	\$0	\$0	\$0	\$0
Cloud Computing Service	\$0	\$0	\$0	\$0
Other Application Costs	\$2,234,750	\$0	\$2,301,795	\$0
Total	\$23,006,174	\$4,161,606	\$23,020,221	\$4,142,946

Proposed IT Investments

Category	Costs Year 1		Costs Year 2	
	GF	NGF	GF	NGF
Major IT Projects	\$1,131,095	\$2,979,852	\$700,000	\$0
Non-Major IT Projects	\$0	\$0	\$0	\$0
Agency-Level IT Projects	\$0	\$0	\$0	\$0
Major Stand Alone IT Procurements	\$329,600	\$0	\$329,600	\$0
Non-Major Stand Alone IT Procurements	\$193,627	\$325,000	\$193,627	\$0
Agency-Level Stand Alone IT Procurements	\$3,325,998	\$0	\$3,425,778	\$0
Procurement Adjustment for Staffing	\$0	\$0	\$0	\$0
Total	\$4,980,320	\$3,304,852	\$4,649,005	\$0

Projected Total IT Budget

Category	Costs Year 1		Costs Year 2		Total Costs
	GF	NGF	GF	NGF	
Current IT Services	\$23,006,174	\$4,161,606	\$23,020,221	\$4,142,946	\$54,330,949
Proposed IT Investments	\$4,980,320	\$3,304,852	\$4,649,005	\$0	\$12,934,177
Total	\$27,986,494	\$7,466,458	\$27,669,226	\$4,142,946	\$67,265,126

Report Title: Business Requirements For Technology**Agency:** Department of Behavioral Health and Developmental Services (DBHDS)**Date:** 4/6/2017**2016-18 Align Early Intervention Programs with Federal Outcome-based Results Requirements BRnT****BRT Type:** Business Requirement for New Technology**Date Submitted:** 9/13/2016**Mandate:** Yes**Mission Critical:** Yes**Description:**

Currently, the Infants and Toddlers Online Tracking System (ITOTS) does not comply with the U.S. Dept. of Education (DOE) newly-revised accountability system under the Individuals with Disabilities Education Act (IDEA). The new Results Driven Accountability (RDA), developed by the Office of Special Education Programs (OSEP), shifts the department's accountability efforts from a primary emphasis on compliance to a framework that focuses on improved results for children with disabilities, while continuing to ensure the Commonwealth meets IDEA requirements. RDA emphasizes improving child outcomes and DBHDS needs to move in a direction that stresses improvement over mere compliance.

2016-18 Align with the Commonwealth Plan to Replace CIPPS BReT**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 6/27/2016**Mandate:** Yes**Mission Critical:** Yes**Description:**

Upgrade or replace the current Department of Behavioral Health and Developmental Services' (DBHDS) licensing system with a system that will be used by DBHDS for licensing specialists and providers. DBHDS has a Va. Performs key measure to increase the percentage of licensed service providers that receive a visit from a licensing specialist per quarter and per year. The new system will also deliver improved functionality for performance reporting and data mining, event tracking, public-facing search options, and integration between other state agencies who use provider data.

2016-18 Comply with the 2015 Audit Requirements for Windows Server and SQL Server Upgrades BReT**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 6/9/2016**Mandate:** Yes**Mission Critical:** No**Description:**

Comply with the Windows Server and SQL Server upgrade requirements as identified in the Corrective Action Plan for the APA 2015 audit. This is a repeat finding from the 2013 audit.

2016-18 Enable CCBHC Reimbursement under the Excellence in Mental Health Act BRnT

BRT Type:	Business Requirement for New Technology
Date Submitted:	9/13/2016
Mandate:	Yes
Mission Critical:	No

Description:

The Excellence in Mental Health Act creates criteria for Certified Community Behavioral Health Clinics (CCBHCs) as entities designed to serve individuals with serious mental illnesses and substance use disorders. Participating states are required by SAMHSA to develop a Prospective Payment System (PPS) application to reimburse CCBHCs for required services provided by these entities.

2016-18 Ensure Financial Technology Remains Supportable BRnT

BRT Type:	Business Requirement for New Technology
Date Submitted:	8/23/2016
Mandate:	No
Mission Critical:	Yes

Description:

Replace the Financial Management System (FMS) application with modern technology that is cheaper to support, provides more robust reporting and analysis functions, and more easily integrates with Commonwealth partner financial applications such as Cardinal, Performance Budgeting, and the future CIPPS replacement.

2016-18 Ensure the Physical Security of People in our Facilities BReT

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	6/21/2016
Mandate:	Yes
Mission Critical:	Yes

Description:

DBHDS Facilities need comprehensive physical security systems in order to ensure staff, family, and individual safety at our facilities. Security systems can include, but are not limited to, duress systems, door access systems, and overhead enunciators.

2016-18 Expand Effort to Automate and Streamline Hospital Clinical Workflow BReT

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	6/27/2016
Mandate:	No
Mission Critical:	No

Description:

Expand use of the OneMind Electronic Health Record System (EHR), a suite of 29 applications that provides an electronic record of patient health information, including patient demographics, progress notes, clinical assessments, medication orders, past medical history, laboratory data and therapy reports. Also consolidate applications across facility lines for other clinical systems such as laboratory information systems (LIS), geriatric minimum data set reporting (MDS), and pharmacy systems.

2016-18 Facilitate CSBs Locating Inpatient Psychiatric Beds for Individuals in Crisis BReT

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/16/2016
Mandate:	Yes
Mission Critical:	Yes

Description:
 The Code of Virginia requires DBHDS to develop and administer a psychiatric bed registry. The bed registry is an important tool for Community Services Boards (CSBs) to locate inpatient psychiatric beds for individuals in crisis and to comply with the mandates of the last resort legislation. Since the establishment of the bed registry, first launched in March of 2014, and the implementation of the last resort legislation, every individual under a temporary detention order, who has needed a psychiatric hospital bed has been provided with the needed bed. Additionally, the bed registry is a valuable tool to help CSBs find alternative beds rather than relying upon state hospital beds.

2016-18 Implement a Consolidated Critical Event Tracking System BRnT

BRT Type:	Business Requirement for New Technology
Date Submitted:	9/12/2016
Mandate:	Yes
Mission Critical:	Yes

Description:
 DBHDS collects individual and facility level data regarding critical events along with triggers and thresholds data. Currently, the Access-based event reporting software that is used by the State facilities is not centralized and doesn't permit the Central Office (CO) to capture system-wide data related to risk-management. Consolidating these systems into an agency-wide critical event reporting platform will allow DBHDS to retire/eliminate costs for 16 individual Event Tracking applications and Access databases, the Seclusion & Restraint application and database, portions of the Forensics Information Management System (FIMS), the PAIRS application and database, and to enhance or eliminate the current CHRIS application and database. The initiative is tentatively titled All Critical Events System (ACES).

2016-18 Improve Application Configuration Management Capabilities BReT

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	6/9/2016
Mandate:	No
Mission Critical:	No

Description:
 Evaluate methodologies, assign resources, and execute the documentation of security baseline configurations for information systems in compliance with industry best practices and the Commonwealth Security Standard.

2016-18 Improve Performance of Information Security Functions BRnT

BRT Type:	Business Requirement for New Technology
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Date Submitted:	9/12/2016
Mandate:	Yes
Mission Critical:	Yes
Description:	
The current infrastructure of the Information Security Office within the Department of Behavioral Health and Developmental Services (DBHDS) does not have the necessary tools to implement the access and application controls, vulnerability scanning, application and administrator audit logging, or the ability to monitor data and network activities as required by VITA in the COV ITRM SEC501-09 Information Security Standard. These regulations are also tied to Virginia Code Title 2.2 Chapter 20.1 § 2.2-2009.	
2016-18 Improve Reporting and Analytic Performance in OneSource BReT	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	7/1/2016
Mandate:	No
Mission Critical:	Yes
Description:	
The OneSource Data Warehouse is a critical component of the agency's analytic capabilities. In FY17, we will be operating at or beyond the capability of our current technical infrastructure. We recommend migrating OneSource to a new SQL 2016 infrastructure, and leave the other applications in the current OneSource environment. SQL 2016 will provide needed functionality and speed the time to deliver reporting and data exchanges. The new environment should also include secure mailboxes, encryption, and de-identification functionality that will also improved data services.	
2016-18 Increase Frequency and Quality of Licensing Specialist Visits to Providers BReT	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	6/21/2016
Mandate:	Yes
Mission Critical:	Yes
Description:	
Upgrade or replace the current Department of Behavioral Health and Developmental Services' (DBHDS) licensing system with a system that will be used by DBHDS for licensing specialists and providers. DBHDS has a Va. Performs key measure to increase the percentage of licensed service providers that receive a visit from a licensing specialist per quarter and per year. The new system will also deliver improved functionality for performance reporting and data mining, event tracking, public-facing search options, and integration between other state agencies who use provider data.	
2016-18 Increase Oversight over Third-Party Providers BReT	
BRT Type:	Business Requirement for Existing Technology
Date Submitted:	6/9/2016
Mandate:	No
Mission Critical:	
Description:	

Evaluate methodologies, assign resources, and execute a formal process for gaining assurance that third party providers have secure IT environments to protect sensitive data.

2016-18 Integrate EHR with Billing and Registration BRnT

BRT Type: Business Requirement for New Technology

Date Submitted: 9/13/2016

Mandate: No

Mission Critical: No

Description:

The OneMind EHR system does not have full integration with the patient billing and registration systems at the facilities. While some integration exists, to date integration has been set aside in favor of expanding the use of the EHR to new facilities.

2016-18 Navigate IT Sourcing Requirements from VITA Disentanglement from Northrop Grumman BReT

BRT Type: Business Requirement for Existing Technology

Date Submitted: 9/16/2016

Mandate: Yes

Mission Critical: Yes

Description:

6500 Messaging Services users in our agency. No applications that have hooks into messaging services. DBHDS is an extensive user of WCS SharePoint. No applications serviced via AirWatch, but 404 AirWatch users.

IBM Mainframe is used to process DOA related transactions (CARS, CIPPS, TSO FINDS).

Server/Storage services include 163 servers which will need to be either decommissioned or migrated and tested during this transition.

DBHDS has 60 applications, 10,000 internal user accounts, and 30,000 external user accounts that will need to be migrated and tested during the authentication/directory services transition.

DBHDS currently has 2873 desktops, 1,042 laptops, 231 tablets, and 425 network printers that will need to be migrated.

DBHDS has no non-MPLS networks that will need to be migrated. DBHDS has several VPN tunnels at CESC and our hospitals that would be part of the MPLS.

DBHDS has 2055 UCaaS phone lines and 350 other phone lines which will need to be migrated. We have 4 facilities (CAT, CCCA, SWVMHI, SWVTC) that are not using UCaaS.

DBHDS intends to move 60 applications to a cloud hosting provider. The applications are not cloud ready, and DBHDS will have a significant spend to bring in outside consulting to become cloud ready.

DBHDS may engage VITA's Shared Security Services from an outside vendor, but has certain plan to do so at this time.

DBHDS projects that internet usage will increase by 30% over the next 4 years.

2016-18 Preserve or Improve Technology Services through the Transition to New Infrastructure Service Providers BReT**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 8/23/2016**Mandate:** Yes**Mission Critical:** Yes**Description:**

The Commonwealth contract with Northrop Grumman (NG) for infrastructure services will end in 2019. Some DBHDS technologies will have to transition to a new service provision model.

2016-18 Reduce the Cost to Support Facility Dev/Test/Prod Environments BReT**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 7/4/2016**Mandate:** No**Mission Critical:** No**Description:**

Move facility applications from their geographically and organizationally scattered locations to a central office managed development, test, and production environment stack.

2016-18 Reduce the Facility Application Inventory BReT**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 7/4/2016**Mandate:** Yes**Mission Critical:** Yes**Description:**

DBHDS facilities pay to maintain an inventory of over 450 unique applications. Duplication of functionality and inconsistent use of technology platforms and data storage architectures are costly. Shortfalls in facility IT staffing support has led to non-compliance with COV/CSRM mandated security requirements. By using Central Office IT Staff to support agency-wide, cross-facility applications, existing Facility IT Staff would be able to focus on supporting clinicians and the individuals in their care.

2016-18 Renew Licenses for Operational Technologies BReT**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 6/10/2016**Mandate:** No**Mission Critical:** Yes**Description:**

DBHDS has dozens of operational technologies that support our central office and facilities. For the technologies that we intend to keep, and that have renewals or license fees during 2016-18, we will need to execute procurements to pay the appropriate vendors.

2016-18 Support a Mobile, Statewide, Community-based Workforce BRnT**BRT Type:** Business Requirement for New Technology**Date Submitted:** 8/23/2016**Mandate:** No**Mission Critical:** No**Description:**

As the organization transitions to community based care, Mobile Remote Access Services (MRAS) will be required for high-speed mobile access to the COV network and DBHDS business infrastructure in even the most remote parts of the state, thereby enabling employees, CSB staff, and providers to access DBHDS and vendor-hosted applications and data with mobile devices.

2016-18 Support Business Process Re-Engineering Efforts BRnT**BRT Type:** Business Requirement for New Technology**Date Submitted:** 8/29/2016**Mandate:** No**Mission Critical:** No**Description:**

Implement a system-wide (CO and facilities) collaboration system that provides a single integrated location where employees can streamline business processes, efficiently collaborate, find organizational resources, and manage content.

2016-18 Support Consolidation of Waivers BRnT**BRT Type:** Business Requirement for New Technology**Date Submitted:** 8/23/2016**Mandate:** Yes**Mission Critical:** Yes**Description:**

Virginia has three waivers supporting people with I/DD: the Day Support Waiver, Intellectual Disability (ID) waiver, and the Individual and Family Supports Developmental Disabilities (DD) waiver. While these waivers have met some of the needs of Virginians with disabilities, they do not fully meet the increasing needs of individuals who rely on them. The current waiver structure does not have enough funding to support the number of individuals with I/DD, and it is not designed to serve individuals across the I/DD spectrum. Also, the current structure does not reflect changing needs and new requirements, and is not designed to achieve balance between the needs of the individual and the needs of the system.

BRnT Gartner-Fair 2**BRT Type:** Business Requirement for New Technology**Date Submitted:** 2/6/2017**Mandate:****Mission Critical:**

Description:

Gartner-Fair 2
Business Requirement for New Technology

Report Title: Appendix A 16 - 18 Report

Agency: Department of Behavioral Health and Developmental Services (DBHDS)

Date: 4/6/2017

Agency Head Approval:

No

Budget Category: Major Projects

DOJ - Licensing System

Oversight and Governance Category: Category 2: High/Medium or High/Low or Medium/High

Appropriation Act/Funding Status

Investment Business Case Approval -

Under the terms of the federal Department of Justice settlement agreement, the Department of Behavioral Health and Developmental Services (DBHDS) must collect and report data relating to compliance with the agreement. DBHDS must purchase or develop a licensing system for the storage, aggregation, and reporting of this data.

Planned project start date:	6/1/2016	Planned project end date:	3/31/2017
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PPEA Involvement: No

Estimated Costs:	Total	General Fund	Nongeneral Fund	
Project Cost (estimate at completion):	\$1,300,000	\$1,300,000	\$0	
Estimated project expenditures first year of biennium:	\$800,000	\$800,000	\$0	
Estimated project expenditures second year of biennium:	\$700,000	\$700,000	\$0	

Funding Required:	Total	General	Nongeneral	
Funding required for first year of biennium:	\$0	\$0	\$0	
Funding required for second year of biennium:	\$0	\$0	\$0	

Service Area	Weight
720 DMHMR 44507 Community Mental Retardation Services	Primary
720 DMHMR 78701 Facility and Community Programs Inspection and Monitoring	Primary
720 DMHMR 44501 Community Substance Abuse Services	Secondary
720 DMHMR 44506 Community Mental Health Services	Secondary

There are no procurements for this project.

DOJ – Waiver Management System

Oversight and Governance Category: Category 1: High/High

Appropriation Act/Funding Status

Project Initiation Approval -

To implement a Consolidated On-line Waiver System that is web-based and that maximizes use of the Internet and electronic data interchange capability. Anticipate solution will be COTS or SAAS. The State is seeking to implement a Waiver Management System (WaMS) that is web-based and that maximizes use of the Internet and electronic data interchange capability. The Waiver Management System (WaMS) must be configurable and user modifiable and it must support the configuration of automated work processes to support the business's needs and address the components of various state waiver programs. Flexibility features, such as user modifiable and configurable capabilities must support the efforts of non-technical business program staff to implement data and processing changes easily and quickly, thereby minimizing the need for major system modification and intervention by technical resources. The desired results of this contract are that the Waiver Management System (WaMS) must be able to track essential steps and processes related to the waiver programs including enrollment, waiting list management and service authorization.

Please Note: seeking 87.5% Federal Financial Participation (FFP) for entire project cost from Center for Medicare and Medicaid Services (CMS)

Planned project start date:	2/19/2016	Planned project end date:	3/17/2017
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PPEA Involvement:	
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Estimated Costs:	Total	General Fund	Nongeneral Fund	Nongeneral Funding Source
Project Cost (estimate at completion):	\$4,854,649			
Estimated project expenditures first year of biennium:	\$1,385,514	\$116,454	\$1,269,060	
Estimated project expenditures second year of biennium:	\$0	\$0	\$0	

Service Area	Weight
720 DMHMR 44507 Community Mental Retardation Services	Primary
720 DMHMR 56103 Regulation of Health Care Service Providers	Primary
720 DMHMR 43006 Geriatric Care Services	Secondary
720 DMHMR 43010 State Mental Retardation Training Center Services	Secondary
720 DMHMR 78701 Facility and Community Programs Inspection and Monitoring	Secondary

Project Related Procurements

DOJ - Waiver Management System Procurement

Procurement Description:	<p>Estimated Procurement Cost of 10,950,827.00 is for FY16 implementation and 6 years of operations and maintenance costs using net 12.5% GF and 87.5% CMS matching funds.</p> <p>To implement a Consolidated On-line Waiver System that is web-based and that maximizes use of the Internet and electronic data interchange capability. Anticipate solution will be COTS or SAAS. Virginia is seeking to implement a Waiver Management System (WaMS) that is web-based and that maximizes use of the Internet and electronic data interchange capability. The Waiver Management System (WaMS) must be configurable and user modifiable and it must support the configuration of automated work processes to support the business's needs and address the components of various state waiver programs. Flexibility features, such as user modifiable and configurable</p>
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capabilities must support the efforts of non-technical business program staff to implement data and processing changes easily and quickly, thereby minimizing the need for major system modification and intervention by technical resources. The desired results of this contract are that the Waiver Management System (WaMS) must be able to track essential steps and processes related to the waiver programs including enrollment, waiting list management and service authorization.

Please Note: seeking 87.5% Federal Financial Participation (FFP) for entire project cost from Center for Medicare and Medicaid Services (CMS).

Planned Delivery Date:	2/1/2016		
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Report Title: Appendix A 16 - 18 Report

Agency: Department of Behavioral Health and Developmental Services (DBHDS)

Date: 4/6/2017

Agency Head Approval:

No

Stand Alone Major Procurements

Procurement Name:	Kronos Time and Attendance Management System Procurement		
Procurement Description:	Approximately sixteen (16) years ago, the Department of Behavioral Health and Developmental Services (DBHDS), requested and received approval (see attached) from DGS/DPS to enter into a sole source contract with Kronos Incorporated for time and leave management reporting systems. DBHDS requested this approval in an effort towards standardizing information technology related procurements to the extent practicable for most if not all major software systems used throughout our 14-facility system. The department determined the need to enter into a sole source contract for Kronos's time and leave management system (hardware, software, maintenance and technical assistance) due to the degree in which Kronos time and leave management systems was already found in one-third of our facilities at that time, and our satisfaction with the Kronos system's performance. On June 30, 2016 DBHDS's current contract with Kronos Incorporated will expire, with no additional renewal options remaining.		
Procurement Planned Start Date		Procurement Planned Completion Date	6/30/2016
		Appropriation Act Status	
Service Area			Weight
There are no service areas for this project.			

Stand Alone Non-Major Procurements

Procurement Name:	Blood Glucose Monitoring System Procurement		
Procurement Description:	Issue an RFP to solicit a new contract to provide a bedside glucose monitoring system that is easy to use, reduces patient stress and stores results in a patient data management system. The current contract will expire on November 30, 2016, as well the software is currently outdated/sunset.		
Procurement Planned Start Date		Procurement Planned Completion Date	11/30/2016
		Appropriation Act Status	
Service Area			Weight
There are no service areas for this project.			
Procurement Name:	Direct Service Associate Web-based Training Procurement		
Procurement Description:	This procurement will acquire a web-based training system for Direct Service Associates (DSA) working in DBHDS Facilities, Community Service Boards (CSBs), and DBHDS-licensed private providers.		
Procurement Planned Start Date		Procurement Planned	1/2/2017

		Completion Date	
		Appropriation Act Status	
Service Area			Weight
There are no service areas for this project.			
Procurement Name:	Gartner-Fair 2 Procurement		
Procurement Description:	Facility Application Inventory Reduction (FAIR) is a multi-phase program to eliminate redundant applications at the DBHDS Central Office and facilities.		
Procurement Planned Start Date	3/1/2017	Procurement Planned Completion Date	2/6/2017
		Appropriation Act Status	
Service Area			Weight
There are no service areas for this project.			