

Agency IT Strategic Plan (Form) / 720 DBHDS FY14-16 ITSP

IT SUMMARY

General Information		
Item Name:	720 DBHDS FY14-16 ITSP	<i>Choose the CTP-prepared Agency ITSP item for the appropriate biennium</i>
Home Portfolio:	720 DBHDS IT Strategic Plans	<i>Choose your Agency Portfolio for ITSP</i>
ITSP Biennium:	FY14-16	
Proponent Secretary:	188 Secretary of Health & Human Resources	
Proponent Agency:	720 Department of Behavioral Health and Developmental Services	
Submitted by:	Administrator, System	
Agency has BRTs or Investments:	Yes	
Has CETR been updated?	Yes	
Date Submitted:		
For additional CETR information, secure link address or CETR access request go to the following VITA website:		
http://www.vita.virginia.gov/oversight/default.aspx?id=349		

About the IT Summary

The purpose of the agency IT Strategic Plan is to establish an agency-wide vision and priorities for agency investments in IT and IT operations so that they promote the achievement of agency’s mission and business outcomes. The IT Plan Summary describes how agency IT strategies, goals, and objectives align with the mission, vision, values, and daily operations identified in the Agency Strategic Plan. This IT Plan Summary identifies the implications outlined in the Agency Strategic Plan and integrates them into implementable objectives and directives.

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 6 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 6 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, and 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 (SVP) 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 to information systems affecting the central office, state facilities operated by DBHDS, CSBs, and licensed private providers. These 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 currently operational IT investments that have business requirements driving additional spending and/or functional changes include:

- Extending the implementation of a DBHDS-wide data warehouse to collect back-end data from most DBHDS applications and provide a reporting platform for all appropriate DBHDS needs;
- In coordination with DMAS, integrating processing functionality for the DD waiver and ID waiver (now supported by the Intellectual Disabilities Online System or IDOLS) into a new consolidated waiver system;
- Providing a new data exchange to eliminate CSB double entries into the Infant and Toddler Early Intervention Services System (ITOTS);
- Providing video conferencing and telepsychiatry services to the central office, state facilities, and local magistrates;
- Migrating remaining DBHDS servers to the Commonwealth Enterprise Solutions Center (CESC);
- Supporting non-technical projects initiated under the DOJ Settlement Agreement;
- Replacing the current Online Licensing System (OLIS) with a system that meets the organization's need for enhanced licensed provider data collection and performance tracking;
- Improving monitoring and reporting on CSB performance by providing integrated data exchange between the existing CSB Automated Reporting System (CARS) and the Community Consumer Services Submission System (CCS3);
- Replacing our Financial Management System (FMS) data exchange to DOA CARS with a data exchange to Cardinal;
- Upgrading server hardware and software to remain current with vendor application requirements and COV/VITA infrastructure software requirements; and
- Providing end-user technical support for all applications.

DBHDS does not have the staff or funding to meet increasing demands. DBHDS IS&T has submitted a set of budget decision packages to DPB designed to address the staffing and funding concerns.

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. Each requirement or mandate from an external source must have a corresponding Business Requirement for New Technology (BRnT) or Business Requirement for Existing Technology (BReT) entered into the CTP. 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 effect IT in other Commonwealth agencies, or in other states? If so, how?*

-- Mental health services system reforms: The Governor's Task Force on Improving Mental Health Services and Crisis Response is developing recommendations to improve the system and the Joint Subcommittee to Study Mental Health Services in the Commonwealth in the 21st Century created by the 2014 session of the General Assembly are currently studying Virginia's behavioral health services system. Potentially significant services system reforms resulting from these efforts may change how the current system operates.

-- Inadequate behavioral health service capacity in the community: Improving access to specialized services and community placements would provide safe and appropriate alternatives to state hospital forensic beds and expedite discharges of state hospital patients who are clinically ready for discharge. Despite the infusion of dollars after crises (around \$34.5 million in new money over the past ten year period or under \$23 million if adjusted for inflation), competing priorities and budget cuts in recent years resulted in significant set-backs that have made it difficult to maintain consistent and robust development of services. Even with funds provided by the 2014 General Assembly to expand crisis, local inpatient, assertive treatment, and other priority services, continued investments in innovative, evidence-based mental health and substanceuse disorder services programs, particularly trauma-informed crisis management and interventions focused on prevention and early intervention, are needed to address capacity issues.

-- Inadequate developmental service capacity: To meet the requirements of the Commonwealth's settlement agreement with the U.S. Department of Justice (DOJ), major expansion of new or enhanced waiver slots, work and housing supports, and crisis services is required to support individuals who are living in the community and those who are transitioning from training centers to the community. As of July 2, 2014, there were 7,173 individuals on the community intellectual disability waiver waiting list and 1,481 individuals on the community developmental disabilities waiver waiting list.

-- Implementation of Health Care Reforms: The DBHDS central office and the services system will be affected by implementation of Medicaid care coordination and managed behavioral care initiatives and associated service delivery requirements; potentially significant expansion in demand for community services resulting from newly insured enrollees seeking services and associated provider workforce capacity pressures; and potential changes to the arrays of federal mental health and substance abuse block grant services.

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 6 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 most important IT initiatives for DBHDS in the 14-16 biennium will be OneMind EHRs, FMS to Cardinal Interface, ICD-10, Waiver Consolidation, DOJ Data Warehouse and DOJ Licensing. OneMind EHRs has lost \$2.9M in funding for the biennium.. FMS to Cardinal Interface is under funded. Waiver Consolidation has no funding at all in spite of its mission critical requirements. ICD-10, DOJ Data Warehouse and DOJ Licensing have adequate funding based on the agency's current understanding of the requirements. All other new initiatives are adequately funded.

The key components of the agency's approach to replacing aging technologies are 1) integrating COTS products housed at CESC, 2) OneMind EHRs as a health system-wide clinical platform, and 3) developing SOA web services-based data exchanges between DBHDS partners, the COTS products, and the DBHDS Data Warehouse. EHRs services and support, SOA development and COTS integration skills are the agency's top IT training and hiring priorities.

The agency is aware that with multiple IT initiatives over the biennium, that IT projects will have to be carefully scheduled to prevent over use of business process SMEs.

Report Title: Strategic Plan

Agency: Department of Behavioral Health and Developmental Services

Date: 11/23/2015

Current IT Services

Category	Costs Year 1		Costs Year 2	
	GF	NGF	GF	NGF
Projected Service Fees	\$2,351,084	\$827,617	\$2,409,862	\$848,307
VITA Infrastructure Changes	\$348,500	\$73,400	\$374,637	\$78,905
Estimated VITA Infrastructure	\$2,699,584	\$901,017	\$2,784,499	\$927,212
Specialized Infrastructure	\$0	\$0	\$0	\$0
Agency IT Staff	\$4,946,777	\$0	\$5,662,295	\$0
Non-agency IT Staff	\$0	\$0	\$0	\$0
Cloud Computing Service	\$0	\$0	\$0	\$0
Other Application Costs	\$18,997,307	\$0	\$20,422,105	\$1,143,000
Total	\$26,643,668	\$901,017	\$28,868,899	\$2,070,212

Proposed IT Investments

Category	Costs Year 1		Costs Year 2	
	GF	NGF	GF	NGF
Major IT Projects	\$5,451,000	\$10,438,000	\$6,316,000	\$0
Non-Major IT Projects	\$0	\$681,000	\$0	\$397,000
Agency-Level IT Projects	\$0	\$231,000	\$0	\$0
Major Stand Alone IT Procurements	\$0	\$0	\$0	\$0
Non-Major Stand Alone IT Procurements	\$0	\$0	\$0	\$0
Agency-Level Stand Alone IT Procurements	\$117,400	\$0	\$85,700	\$0
Total	\$5,568,400	\$11,350,000	\$6,401,700	\$397,000

Projected Total IT Budget

Category	Costs Year 1		Costs Year 2		Total Costs
	GF	NGF	GF	NGF	
Current IT Services	\$26,643,668	\$901,017	\$28,868,899	\$2,070,212	\$58,483,796
Proposed IT Investments	\$5,568,400	\$11,350,000	\$6,401,700	\$397,000	\$23,717,100
Total	\$32,212,068	\$12,251,017	\$35,270,599	\$2,467,212	\$82,200,896

Report Title: Business Requirements For Technology**Agency:** Department of Behavioral Health and Developmental Services (DBHDS)**Date:** 11/23/2015**Comply with the Overall Audit Program Requirements for 2013 BReT****BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 2/2/2015**Mandate:** Yes**Mission Critical:** No**Description:**

Comply with the Overall Audit Program Requirements for 2013 as identified in the Corrective Action Plan for the APA FY 2013 audit.

Ensure Infrastructure Reliability and Security by Upgrading to Current Database Operating Systems BReT**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 2/2/2015**Mandate:** Yes**Mission Critical:** No**Description:**

Ensure infrastructure reliability and security by upgrading to current database operating systems. Aging versions of SQL Server OS will be migrated to newest available approved version.

Ensure Infrastructure Reliability and Security by Upgrading to Current Server Operating Systems BReT**BRT Type:** Business Requirement for Existing Technology**Date Submitted:** 2/2/2015**Mandate:** Yes**Mission Critical:** No**Description:**

Ensure infrastructure reliability and security by upgrading to current server operating systems. Aging versions of Windows Server OS will be migrated to newest available approved version.

Ensure the Physical Security of People in our Facilities**BRT Type:** Business Requirement for New Technology**Date Submitted:** 4/28/2015**Mandate:** No**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.

Fulfill Legal Requirement to Submit Critical Patient Incident Data BReT

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/4/2014
Mandate:	Yes
Mission Critical:	

Description:

The Patient Automated Incident Reporting System (PAIRS) is approximately 15 years old. It was developed using a MS Access front end and a MS SQL Server back end. Is used to submit critical incident data to the Disability Law Center of Virginia (formerly the Virginia Office for Protection and Advocacy " VOPA). The application has not keep up with changing reporting requirements nor technology. It is difficult to deploy since the MS Access front must be installed on each users'™ computer. Outages of the process that allows files to be transferred to the Disability Law Center occur frequently. DBHDS is required by law to submit incidents to the center as soon as possible after they occur.

Implement Mandated Patient Registration and Billing Code Changes BReT

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	8/26/2014
Mandate:	Yes
Mission Critical:	Yes

Description:

ICD-10 is the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD), a medical classification list by the World Health Organization (WHO). It codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases. In compliance with this change mandated by DHHS, the Commonwealth will establish a team of Business Users, Clinical and IT Staff to work with the patient registration and billing system vendor, NetSmart, to establish a plan and timeframe for receiving the ICD-10 patch, testing, training on the new format; and implementing the ICD-10 process and codes by October 1, 2015.

Share Data from Agency Financial Management System with Commonwealth Central System BReT

BRT Type:	Business Requirement for Existing Technology
Date Submitted:	9/8/2014
Mandate:	Yes
Mission Critical:	Yes

Description:

DBHDS uses FMS, a Financial Management System provided by Mitchell Humphries, to manage agency accounting. The interface from FMS to CARS must be replaced with an interface to Cardinal by 2/1/16.

Streamline, Automate and Standardize Clinical and Financial Processes BRnT

BRT Type:	Business Requirement for New Technology
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Date Submitted:	9/8/2014
Mandate:	No
Mission Critical:	Yes

Description:

The agency needs a comprehensive clinical information system for behavioral healthcare that manages the care data of patients in the facilities. In order to properly manage care, clinical data in the form of thousands of transactions per facility per day needs to be collected, stored and analyzed using an electronic medical record. The system would be implemented at fourteen facilities and Central Office and would help to eliminate the manual data processes still used in many clinical areas. An electronic medical record, supported by a suite of clinical applications will greatly reduce risk while greatly increasing operational efficiencies, cost savings and most important of all, patient satisfaction. Ancillary applications for food service, patient registration and billing, and data warehousing will have to be incorporated into the overall electronic health record implementation.

Support Consolidation of DBHDS Medicaid ID Waiver and DMAS Medicaid DD Waiver Processing BRnT

BRT Type:	Business Requirement for New Technology
Date Submitted:	9/21/2014
Mandate:	Yes
Mission Critical:	Yes

Description:

DBHDS Medicaid ID waiver and DMAS Medicaid DD waiver processing BRnT must be consolidated under a single operational unit at DBHDS by 07/01/16.

Support Transition of Individuals from Training Centers to Community-based Services BRnT

BRT Type:	Business Requirement for New Technology
Date Submitted:	6/20/2015
Mandate:	Yes
Mission Critical:	Yes

Description:

As individuals transition out of the agency's training centers and into community-based services, the agency will need a technical solution for ensuring support information is available to the groups that provide those services. These transitions are required under the DOJ Settlement. This is currently a manual, error prone, time-consuming, paper-based process.

Report Title: Appendix A 14 - 16 Report

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

Date: 11/23/2015

Agency Head Approval:

No

Budget Category: Major Projects				
DOJ - Data Warehouse				
Oversight and Governance Category: Category 2: High/Medium or High/Low or Medium/High				
Appropriation Act/Funding Status			Project Initiation Approval -	
Planned project start date:	10/1/2013	Planned project end date:	10/5/2015	
PPEA Involvement:	No			
Estimated Costs:	Total	General Fund	Nongeneral Fund	
Project Cost (estimate at completion):	\$3,200,000			
Estimated project expenditures first year of biennium:	\$956,000	\$956,000	\$0	
Estimated project expenditures second year of biennium:	\$744,000	\$744,000	\$0	
Service Area			Weight	
720 DMHMR 43010 State Mental Retardation Training Center Services			Primary	
720 DMHMR 43014 State Mental Health Facility Services			Secondary	
720 DMHMR 44507 Community Mental Retardation Services			Secondary	
Project Related Procurements				
DOJ - Data Warehouse-APR				
Procurement Description:				
Planned Delivery Date:	6/30/2014			
DOJ – Waiver Management System				
Oversight and Governance Category: Category 1: High/High				
Appropriation Act/Funding Status			Investment Business Case Approval -	
To implement a Consolidated On-line Waiver Sy				

Planned project start date:	1/10/2016	Planned project end date:	1/31/2017	
PPEA Involvement:				
Estimated Costs:	Total	General Fund	Nongeneral Fund	Nongeneral Funding Source
Project Cost (estimate at completion):	\$4,854,649	\$608,107	\$4,246,542	
Estimated project expenditures first year of biennium:	\$0	\$0	\$0	
Estimated project expenditures second year of biennium:	\$3,469,135	\$398,835	\$3,070,300	Non-general - Federal
Funding Required:	Total	General	Nongeneral	Nongeneral Funding Source
Funding required for first year of biennium:	\$0	\$0	\$0	
Funding required for second year of biennium:	\$3,469,135	\$398,835	\$3,070,300	Non-general - Federal
Service Area			Weight	
There are no service areas for this project.				
Project Related Procurements				
DOJ - Waiver Management System Procurement				
Procurement Description:	Estimated Procurement Cost of 10,950,827.00 is for FY16 implementation and 6 years of o			
Planned Delivery Date:	2/1/2016			
Electronic Health Records (EHR)				
Oversight and Governance Category: Category 1: High/High				
Appropriation Act/Funding Status		Project Initiation Approval - Fully Funded GF/NGF 100%		
The Virginia Department of Behavioral Health and Developmental Services (DBHDS) initiated planning and preparation work in 2011 to support implementation of an Electronic Health Record System (EHRS). Over the next three years this mission-critical				
Planned project start date:	1/7/2013	Planned project end date:	4/18/2016	
PPEA Involvement:	No			
Estimated Costs:	Total	General Fund	Nongeneral Fund	Nongeneral Funding Source
Project Cost	\$39,584,810			

(estimate at completion):				
Estimated project expenditures first year of biennium:	\$10,100,000	\$2,700,000	\$7,400,000	
Estimated project expenditures second year of biennium:	\$11,900,000	\$6,200,000	\$5,700,000	
Service Area				
			Weight	
720 DMHMR 42102 Inpatient Pharmacy Services			Primary	
720 DMHMR 43007 Inpatient Medical Services			Primary	
720 DMHMR 43010 State Mental Retardation Training Center Services			Secondary	
720 DMHMR 43014 State Mental Health Facility Services			Secondary	
720 DMHMR 49800 Facility Administrative and Support Services			Secondary	
Project Related Procurements				
Electronic Medical Record COT				
Procurement Description:	DMHMRSAS will issue a RFP for a vendor's off the shelf behavioral healthcare information system/electronic medical record. The procurement will cover Central Office and the sixteen facilities. Cost include infrastructure upgrades, additional hardware, vendor software and vendor training, IV&V and Contingency. Does not include ongoing maintenance.			
Planned Delivery Date:	6/30/2010			
Electronic Health Records (EHR) - Procurement				
Procurement Description:				
Planned Delivery Date:	6/30/2015			
OneMind EHR Project FY16 Staff Aug through CAI Procurement				
Procurement Description:	Procure 8 project management, clinical, and technical OneMind project contractors for F			
Planned Delivery Date:	7/1/2015			

Budget Category: Non-Major Projects

FMS to Cardinal Interface Project

Oversight and Governance Category: Category 1: High/High

Appropriation Act/Funding Status

Project Initiation Approval -

In 2008, VDOT and DOA partnered to plan for a system (Cardinal) that could serve as a basis for a statewide financial management system. This statewide system would ultimately replace the CARS system implemented in the 1070's. On December 5, 2011, Part 1 of the Cardinal Project was deployed at VDOT. On October 1, 2012, Part 2 of the Cardinal Project was deployed at DOA.

Part 3 of the Cardinal Project occurs in 2 "waves." Wave 1 implemented most on-line agencies and a few pilot interfacing agencies in October, 2014. In Wave 2, DBHDS, as part of the remaining agencies, will implement Cardinal in February, 2016.

DBHDS is considered an "interfacing agency" in that it will continue to use its vendor-owne

Planned project start date:	1/15/2015	Planned project end date:	9/30/2016
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PPEA Involvement:	No
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Estimated Costs:	Total	General Fund	Nongeneral Fund	Nongeneral Funding Source
Project Cost (estimate at completion):	\$783,000	\$0	\$783,000	
Estimated project expenditures first year of biennium:	\$0	\$0	\$0	Non-general - Other
Estimated project expenditures second year of biennium:	\$783,000	\$783,000	\$0	Non-general - Other

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 49800 Facility Administrative and Support Services	Primary

Project Related Procurements

Mitchell Humphries Interfaces from FMS to Cardinal Procurement

Procurement Description:	Mitchell Humphries is the vendor who supplies FMS, the DBHDS financial management system. In order to convert from CARS to Cardinal, Mitchell Humphries must develop and deploy new system interfaces between FMS and Cardinal.
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Planned Delivery Date:	10/1/2015
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Transition Support Tracking				
Oversight and Governance Category: Category 4: Low/Medium, Low/Low				
Appropriation Act/Funding Status			Investment Business Case Approval -	
As individuals transition out of the agency's training centers and into community-based services, the agency will need a technical solution for ensuring support information is available to the groups that provide those services. These transitions are required under the DOJ Settlement. DBHDS will replace the current manual, error prone, time-consuming, paper-based process with a CRM system.				
Planned project start date:	7/6/2015	Planned project end date:	12/31/2015	
PPEA Involvement:				
Estimated Costs:	Total	General Fund	Nongeneral Fund	
Project Cost (estimate at completion):	\$496,330	\$496,330	\$0	
Estimated project expenditures first year of biennium:	\$0	\$0	\$0	
Estimated project expenditures second year of biennium:	\$496,330	\$0	\$496,330	
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	
There are no service areas for this project.				
There are no procurements for this project.				
Video Conferencing and Telepsychiatry				
Oversight and Governance Category: Category 4: Low/Medium, Low/Low				
Appropriation Act/Funding Status			Investment Business Case Approval -	
The Video Conferencing project will provide secure, HIPAA compliant video communications between DBHDS an				
Planned project start date:	6/13/2014	Planned project end date:	12/12/2014	
PPEA Involvement:	No			
Estimated Costs:	Total	General Fund	Nongeneral Fund	Nongeneral Funding Source

Project Cost (estimate at completion):	\$603,200	\$446,820	\$156,380	
Estimated project expenditures first year of biennium:	\$197,000	\$0	\$197,000	Non-general - Other
Estimated project expenditures second year of biennium:	\$197,000	\$0	\$197,000	Non-general - Other
Funding Required:				
	Total	General	Nongeneral	Nongeneral Funding Source
Funding required for first year of biennium:	\$0	\$0	\$0	Non-general - Other
Funding required for second year of biennium	\$0	\$0	\$0	Non-general - Other
Service Area			Weight	
720 DMHMR 42102 Inpatient Pharmacy Services			Primary	
720 DMHMR 43014 State Mental Health Facility Services			Primary	
720 DMHMR 49800 Facility Administrative and Support Services			Secondary	
Project Related Procurements				
eo Conferencing and Telepsychiatry Procurement				
Procurement Description:	The Video Conferencing project will provide secure, HIPAA compliant video communications between DBHDS and our Business Associates such as courts and consulting physicians. Cost will cover \$209,200 in FY14 to install and \$197,000 in both FY15 and FY16 for renewals.			
Planned Delivery Date:	12/12/2014			
Video Conferencing - Adobe Connect Procurement				
Procurement Description:	Procure 200 seat licenses for Adobe Connect using the VITA statewide contract. \$209,200 impleme			
Planned Delivery Date:	6/30/2015			

Report Title: Appendix A 14 - 16 Report

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

Date: 11/23/2015

Agency Head Approval:

No

There are no major procurements for this agency.

Stand Alone Non-Major Procurements

Procurement Name:	KRONOS Contract Re-Establishment 2010		
Procurement Description:	Approximately ten (10) years ago, the Department of Behavioral Health and De		
Procurement Planned Start Date	7/1/2010	Procurement Planned Completion Date	6/30/2016
		Appropriation Act Status	
Service Area			Weight
720 DMHMR 49900 Administrative and Support Services			Primary
720 DMHMR 43010 State Mental Retardation Training Center Services			Secondary
720 DMHMR 43014 State Mental Health Facility Services			Secondary
720 DMHMR 49800 Facility Administrative and Support Services			Secondary
Procurement Name:	Staff Augmentation for ITOTS		
Procurement Description:	A		
Procurement Planned Start Date	11/7/2011	Procurement Planned Completion Date	6/30/2015
		Appropriation Act Status	
Service Area			Weight
720 DMHMR 78701 Facility and Community Programs Inspection and Monitoring			Primary
Procurement Name:	Western State Hospital Support Network Infrastructure and Systems		
Procurement Description:	Please expedite. This APR is being submitted in coordination with a request to VITA Service Management & D		
Procurement Planned Start Date	5/1/2014	Procurement Planned Completion Date	6/30/2015
		Appropriation Act Status	
Service Area			Weight
720 DMHMR 49800 Facility Administrative and Support Services			Primary
720 DMHMR 35707 Forensic and Behavioral Rehabilitation Security			Secondary
720 DMHMR 43014 State Mental Health Facility Services			Secondary

