2024 - 2026 IT Strategic Plan

Agency: 720 Dept of Behavioral Health & Developmental Services

Date: 11/30/2023

Current IT State

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?

It remains DBHDS' mission to support individuals by promoting recovery, self-determination, and wellness in all aspects of life. The vision is "A life of possibilities for all Virginians".

The Virginia Department of Behavioral Health and Developmental Services (DBHDS) has oversight of the community-based behavioral health system of care and directly operates psychiatric hospitals and treatment facilities, and a central office. DBHDS employs approximately 6000 staff throughout Virginia who have a wide variety of IT needs. Staff rely on efficient, effective information technology to meet vital clinical needs in the state facilities, and to provide financial resources, policy direction, automated, risk management and oversight for the entire system. Information Technology is a critical component to support DBHDS' ability to achieve its mission of "supporting individuals by promoting recovery, self-determination, and wellness in all aspects of life," and the vision of "A life of possibilities for all Virginians."

Virginia's behavioral health and developmental disabilities services system is comprised of 39 community service boards (CSBs) and 1 Behavioral Health Authority (BHA) that are locally run, 12 state-operated facilities consisting of more than 3100 beds. The system serves children and adults who have or who are at risk of mental illness, serious emotional disturbance, developmental disability, or substance use disorder. These facilities are open 24 hours 7 days a week and often find themselves working with IT supporting entities that don't understand or consider that requirement. It is imperative that they are recognized as critical systems and that their support recognizes their critical function.

DBHDS is consistently at or above census capacity at many of the 12 facilities. Dealing with the COVID 19 endemic, on top of high census is a major contributing factor to high turnover, high volumes of contract staff members, and extremely high rate of vacant positions.

The Office of Information and Technology provides and supports technical solutions and tools to DBHDS employees to assist them in achieving program and business goals. The office specifies, implements, and delivers technology tools including communication, hardware, software, and data management systems that facilitate monitoring, measuring, and reporting on delivery and outcomes of all programs managed by DBHDS staff. The office has three primary areas: Enterprise Applications, Operation and Maintenance, and Data Management.

The Office of Information Security is responsible for managing and ensuring an efficient and effective information security program that provides for the protection of the Agency's information assets. This includes managing and directing the agency's overall information security policies and procedures, applications, and network security issues; supervising staff who will assist and/or carry out relevant information security system functions such as protecting, detecting, and correcting controls for IT systems, disseminating relevant security information to staff and partners, administering security related training, and conducting security investigations. The office is headed by the Chief Information Security Officer who maintains a direct line of communication to the DBHDS Commissioner.

A primary focus for DBHDS is Right Help Right Now (RHRN). Governor Youngkin created RHRN to reform our current behavioral health system in Virginia and better support individuals in crisis. The goal of RHRN is to support Virginians before, during, and after a behavioral health crisis occurs. The RHRN Now plan aims to ensure that there will be same-day care delivered through mobile crisis units and Crisis Receiving Centers to reduce overcrowding at emergency departments. There will be less strain on law enforcement who can instead better serve the communities where they are needed. This will also serve to reduce the criminalization of mental health in Virginia. The RHRN plan includes specialized resources for individuals with substance use disorders or who have high risks of overdosing. Virginians should have immediate access to all the resources they need anytime and anywhere. The Right Help Right Now plan will transform the behavioral health system and make Virginia the best place to live, work, and raise a family.

DBHDS has established agency objectives for the upcoming biennium to provide overarching direction and help steer long term outcomes.
DBHDS Strategic Plan – includes the 9 Strategic Objectives below.
OKR 1 - Workforce Retention
☐ Increase recruitment and retention across the system of care to broaden and galvanize a BH/DD workforce that delivers exceptional public health services.
OKR 2 - Workforce Sustainability
☐ Achieve sustainability of BH/DD workforce by aligning all stakeholders to optimize regulatory, licensing and service delivery requirements.
OKR 3 - Prevention, Early Intervention & Youth Services
☐ Increase prevention, early intervention, and youth behavioral services.
OKR 4 - Integrated Services
☐ Increase number and utilization of integrated settings and supports across populations to improve system accessibility.
OKR 5 - Quality of Service
☐ Measure and monitor Quality of Service outcomes across the care continuum and improve quality indicators for all populations.
OKR 6 - Restrictive and Involuntary Settings and Interventions
☐ Decrease the number of restrictive and involuntary settings and interventions.
OKR 7 - Services Administration
☐ Transform the management and administration of Services among DBHDS, CSBs, facilities and private providers.
OKR 8 - Facility Systems Modernization
☐ Modernize mission critical facility operating systems.
OKR 9 - Modernization and Statewide Data Exchange
☐ Data Governance Tool implementation
☐ Deliver transactional and secure statewide data exchange for behavioral health and development disability data.

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 effect IT in other Commonwealth agencies, or in other states? If so, how?

DBHDS Information Technology and the Information Security Office, in continued partnership with executive and senior leadership, focus on work that helps to promote Commissioner Nelson Smith's agency strategic plan. The three main areas the plan is focused on are listed below:

 • Workforce – Staffing is a major concern throughout healthcare as the pandemic drove many workers to jobs that are safer and less stressful. We need to build and retain our workforce and create a pipeline for the future, which would have a positive impact on the entire system.
 • Comprehensive Continuum of Care – We must rebalance our system from a reliance on intensive interventions like inpatient and focus intently on prevention and wellness.
 • Modernization – Modernize systems and processes that leverage best practices to drive and sustain high quality service outcomes.

In August 2012, the United States District Court for the Eastern District of Virginia approved the DOJ Settlement Agreement. In May of 2019, the court entered an order directing the Commonwealth   to create a document library for all measurements and artifacts of the Commonwealth's compliance with the Settlement Agreement. This library can be found at https://dojsettlementagreement.virginia.gov. In January of 2020, the Court filed 317 compliance indicators that supported provisions the Commonwealth had not yet reached compliance with.

DBHDS Information Technology and Security staff will continue to work with the state auditor of public accounts (APA) to reduce the current number of audit points to zero for our respective areas. A major component of this is the required centralization of our account management processes. The process change will allow the agency to adhere to timely enrollment of new employees as well as the timely removal of access of an employee upon termination. The process change will also bring us closer to a single authentication tool vs. different tools/processes for what are currently extremely decentralized processes.

The 12 DBHDS facilities require support and connectivity 24 hours a day, 7 days a week, 365 days a year. There are frequent outages at one facility, some facilities, or all facilities at least monthly   . This lack of a consistent, reliable network adds unnecessary risk and additional work to our patients/residents/clients and staff. These outages ultimately affect patient safety and delivery of care.

Additional factors that impact IT include:
 o Network latency at facility locations.
 o Lack of visibility into projects and undefined project schedules.
 o ECOS challenges with regards to getting timely status updates.
 o Amount of time it takes VITA to investigate issues with Service offerings.
 o Offboarding challenges where accounts are not fully disabled.
 o Lack of visibility into the actions being taken to address service specific feedback, survey results feedback and generalized feedback related to VITA holistically.
 o Implementation of changes without proper change management control procedures. (i.e., weekend of 4/8 a push happened. DBHDS was not provided proper change notification. The change crashed end user's devices – LTSB machines).
 o Putting out new VITA service offerings without training, job aides/KBAs or information on how to use the new service and often without the ability of VITA or SAIC to support that service.

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?

For the ITSP period 2024-2026, DBHDS has established the groundwork for multiple initiatives moving forward. These initiatives are broken into three general sections. These will be further explained in the following text.

1. Required/Legislative/Regulatory Mandates/Contractual Issues
 1.1. Department of Justice (DOJ) Portfolio
  1.1.1. Department of Justice Settle Agreement Update
  1.1.2. Virginia Crisis Connect
  1.1.3. CONNECT Optimization or Replacement
  1.1.4. Incident Management System (IMS) RFP and Project
  1.1.5. CMS and Joint Commission Requirements for the EHR
  1.1.6. Tracers with AMP plus CMS
  1.1.7. APA, Internal and Security Audit Remediation
  1.1.8. CBORD Implementation and Optimization
  1.1.9. UKG/KRONOS Upgrade
  1.1.10. Financial Management System Replacement and Project

2. Transformational
 2.1. Right Help Right Now
 2.2. Agency Strategic Plan and OKRs
 2.3. Data Exchange Program (including Data Governance, Enterprise Data Warehouse, Data Exchange, and Modernization/CCS3 Sunset, and EDCC Integration)
 2.4. Standardize And Implement Enterprise Solutions, Consolidation of Services with VITA to Affect Cost Savings
 2.5. Revenue Cycle Enhancement/Replacement RFP
 2.6. Diveplane
 2.7. Discharge Assistance Plan (DAP)
 2.8. DBHDS Rental Assistance Program

3. Standard Initiatives

3.1. Server OS Version Management
3.2. Failover/Standby Server/Databases
3.3. Enterprise Automated Medication Dispensing Cabinets RFP and Deployment
3.4. EHR Optimization and Standard Upgrades
3.5. Grants Management Compliance Tool
3.6. Power App Development
3.7. WaMS Enhancements
3.8. TRAC-IT Early Intervention
3.9. Tracers with AMP plus CMS

Required Legislatively, Mandated by Regulation or Mandated by Contract

There are many initiatives underway at DBHDS that are required by legislative mandate, mandated by regulation, or mandated by contract. Some examples would include Department of Justice (DOJ) initiatives, enhancements to the Electronic Health Record to include Center for Medicare and Medicaid Services (CMS) and The Joint Commission regulation requirements, and more to be explained further below.

For the Department of Justice (DOJ) Portfolio, the compliance indicators on which the agency must report for the Settlement Agreement with the Department of Justice are not dependent on IT, the ability to collect and analyze data and report on the compliance indicators most certainly will be improved with more IT automation and enhanced systems and reporting capabilities. For the Commonwealth to demonstrate compliance and work towards sustainable reporting there are several projects underway in 2022 thru 2024 focused on improving data reporting for the divisions of developmental services and provider management. This includes continued enhancement to the Waiver Management System, the Crisis Call Center project (STEP VA), Connect (the Licensure Reengineering), Incident Management System Replacement (currently CHRIS), and the CSB Data Exchange Project.

Virginia Crisis Connect (VCC, STEP VA) created a statewide call center data platform that can be used both by CSB staff (potentially a subcontracted private provider), private and state hospital staff, as well as Central Office staff. This is to assure collection of caller information from those in crisis (demographics) along with dispatch and monitoring functionality (GPS enabled), linking to other services, maintaining a real-time bed registry, and text and chat function.

The CONNECT system was implemented in November of 2021 to manage the various providers of services supporting the ID/DD and SMI populations. DBHDS must collect and report data relating to compliance. The DBHDS Division of Licensing obtained approval to procure and customize a Commercial off the Shelf (COTS) Licensure product to support the newly re-engineered DBHDS Licensing process. This is aimed at providing consumer services in the least restrictive environment. The CONNECT solution continues to encounter performance issues and Procurement and Business staff are working on a revised contract with better defined SLA's and we are currently on a 3-month O&M renewal cycle. There is anticipation for either a massive optimization or RFP during fiscal 2025 and or 2026.

The Incident Management System replacement RFP and project will replace the current Comprehensive Human Rights Information System (CHRIS), Protection and Advocacy Incident Reporting System (PAIRS), and Incident Tracking applications. DBHDS expects to see cloud solution recommendations among the vendor responses. The priority is to combine the reporting of community providers & DBHDS operated facilities into a single system. This would include reporting of serious incidents, serious injuries, allegations of abuse and neglect, complaints about human rights violations, and instances of seclusion and restraint. The single system shall be scalable. Sometimes a single incident may need to be reported as both a serious incident/injury and an allegation of abuse or neglect (e.g., an individual falls and breaks his arm after being shoved by a staff member).

CMS and Joint Commission Requirements for the EHR
The agency is constantly evaluating and implementing new and updated functionality based on Center for

Medicare and Medicaid Services (CMS) and Joint Commission Requirements for the Electronic Health Record. The requirements that are currently met with NRI, a third-party core measure tool, have been included in the Revenue Cycle Enhancement/Replacement RFP. Once implemented, DBHDS can transition core measure reporting to the revenue cycle application. This will also follow the initiative to reduce the overall number of applications for DBHDS and adhering to industry standards and best practices.

We will continue to address each of the audit points that come from the APA, Internal, and Security audits and remediate as quickly as possible. Included in the overall remediation is the establishment of a Change Advisory Board, updating of DR and COOP documentation, removal of applications that no longer meet security guidelines and completing the BIA including baselines for each application in our inventory.

CBORD was identified as the vendor for the Food Management System Replacement Project because of an RFP. The purpose of this system is to assist in the management and control of food service operations across all DBHDS facilities, including but not limited to state-of-the-art provision of food and diet preparation, nutritional analysis, menu planning, preparation of tray tickets and inventory control. The proposed system shall provide information necessary to comply with the standards and regulatory requirements and interface directly to the Enterprise Electronic Health Record, Millennium. The focus for IT will be to optimize the use of CBORD and implement enhancements that were not included during the initial go live.

The current enterprise solution for timekeeping and scheduling, UKG/KRONOS Workforce Central, is nearing end of life December 31, 2025. The purpose of UKG Dimensions migration and implementation project is to offer and enterprise solution across the agency. There will be a migration from UKG/KRONOS Workforce Central (WFC) to UKG Dimensions Timekeeping and UKG Dimensions Absence (Accrual component) for all 12 facilities and Central Office. The project will also include the enterprise migration and implementation of UKG Dimensions Advanced Scheduling (for first time adopting facilities: HDMC, PGH, SEVTC, SVMHI, VCBR, WSH).
• Enterprise implementation of UKG Dimensions Absence (Leave and Attendance components); and
• Enterprise implementation of UKG Dimensions Analytics

DBHDS has used its current version of Financial Management System (FMS) for nearly 30 years. DBHDS needs to upgrade the current financial system to enhance the department's ability to manage all aspects of financial management including monitor and report on contracts, provide decision-making tools for facility operations, obtain better reporting tools for program managers and executives, and provide the system infrastructure to allow for connectivity to their crucial systems. The current system's technical limitations impede the department's ability to keep pace with its current operating environment. FMS is limited to the number of additional reporting elements that can be set up in the system. The Department's complexity and the number of funding streams have increased since adoption of the system 30 years ago. Additionally, the reporting and ability to query data are limited to the point that reports must be manually created and extracted out of the system. The system is outdated and needs to be replaced. Procurement options will be evaluated and then a submission to the Enterprise Investment Board to proceed.

Transformational Initiatives

The next several years DBHDS will continue to work on improved oversight of our state hospitals as well as Community Services Boards. We have set forth a path to review every investment with the goal to obtain enterprise IT solutions and work towards the vision to become the pinnacle of IT and Security for the Commonwealth of Virginia. This approach includes the transformational initiatives described below.

Governor Youngkin created Right Help, Right Now to reform our current behavioral health system in Virginia and support individuals in crisis. The goal of Right Help RightNow is to support Virginians before, during, and after a behavioral health crisis occurs. This effort consists of 6 workstreams:
• Workstream 1: Ensure Same-day Care for Individuals Experiencing Behavioral Health Crisis

• Workstream 2: Relieve Law Enforcement Communities' Burden
• Workstream 3: Develop More Capacity
• Workstream 4: Providing Targeted Support for Substance Use Disorder
• Workstream 5: Make the Behavioral Health Workforce a Priority
• Workstream 6: Optimizing and Re-Envisioning the Means by Which Services are Delivered.
DBHDS helps to support and develop the DBHDS Agency Plan

In the mindset of maturation, the agency is establishing metrics to review and improve performance based on the Commissioner and IT goals and key priorities. DBHDS is implementing Objectives and Key Results (OKRs) to define metric that outline the agency and team "objectives" along with the measurable "key results" that define the achievement of each objective. OKRs represent aggressive goals and define the measurable steps the agency takes towards achieving those goals.

With the Data Exchange and Modernization Program, DBHDS will partner with the 39 community service boards (CSBs) and 1 Behavioral Health Authority (BHA) to create a Data Exchange Platform (sunsetting the outdated legacy CCS3 application), implement, and adhere to Data Governance and establish a new Enterprise Data Warehouse. A modern, web-based enterprise solution for our exchange of data will drastically improve data gathering and integrity and reporting quality, standardize supporting technical frameworks and protocols, and reduce multiple outdated applications and ad-hoc processes and data streams. Another integration effort that will help [connect the DBHDS facility EHR to the Emergency Department Care Coordination (EDCC) Program via Virginia Health Information (VHI) with technology provided by Collective Medical. Eventually the goal would be to have the DBHDS facility EHR and all 40 CSBs connected to EDCC.

Standardize facilities' IT solutions, focusing on enterprise solutions (not facility specific applications) - the focus for all the initiatives within the agency at large are to create solutions that are enterprise wide. When a need arises within a facility we determine if other facilities already have a solution that can become a single solution. If a solution is not already in place, we will work to find the best solution for that need. Examples of this are enterprise SurveyMonkey, enterprise Zoom administration, and the virtual visitation solution.

AVATAR by NetSmart, is the current registration, reimbursement, and billing system used in DBHDS facilities. AVATAR's contract will expire soon causing DBHDS to pursue an RFP for Revenue Cycle Modernization. Without a more advanced system, DBHDS will continue to greatly rely on manual revenue cycle processes and lack sufficient financial data and reporting elements. The financial management application tool is used for billing facility claims and financial/reimbursement data management. This new system will replace the existing practice management system, AVATAR, used by facility and reimbursement staff. This new system will provide facility and reimbursement staff with enhanced functions, such as eligibility verification, claims processing, patient account communications, and data management. These enhancements provide staff with more electronic, streamlined processes, potentially increasing facility revenues and operational efficiency.

Introduction of Artificial Intelligence solution, Diveplane, that will enable the creation of synthetic de-identified records and information to be used in test and development environments to prevent unnecessary risk of exposure of production data. Additionally, this technology can be used in conjunction with the data trust to provide full access to all DBHDS patient records without the risks of PII/PHI/HIPAA breaches. This will allow for full analysis of mental health care within DBHDS facilities and community services as well as predictability modeling of care and successful treatments of present and future populations.

The management of Discharge Assistance Plan (DAP) is being planned for transition from the CSBs/Behavioral Health Authority to Central Office to improve and strengthen administration and oversight. The procurement of an online tool for the planning and financial tracking of the funding and associated services is needed for the agency and people we serve. The existing funds serve over 2,000 individuals.

The DBHDS State Rental Assistance Program's (SRAP) objective is to provide automation for the business process relating to the State Rental Assistance Program. The business has requested the solution be provided via a technologically contemporary and industry standard electronic system to manage rental assistance data from multiple contracted agencies. Rental assistance data is currently managed through separate Excel Workbooks for approximately 20 contractors. The current process is fraught with potential issues of data security, data integrity, heavy use of email for confidential information, use of complicated shared excel spreadsheets, lack of a clear view of historical data, and a lack of automated reporting. This project is envisioned to alleviate inconveniences arising out of this completely manual process.
Standard Initiatives

There are standard initiatives for DBHDS that facilitate fundamental operations and maintenance. Some efforts include improved processes or infrastructure like server upgrades, implementing full failover/standby servers and databases, applications implementations like for other operation and maintenance tasks for existing applications.
The server administration team will be working to a schedule to continuously ensure that all our servers are running the latest version of operating system. Each month servers will be upgraded with the eventual goal to be at N-1 or greater on every server.
To assure the highest level of availability, IT has built out and configured a redundant database and application servers. Not only does this serve as high availability for our infrastructure but is also a strategy for DR and COOP.

There will be a request to standardize and implement an enterprise Automated Dispensing Cabinet (ADC) solution across the facilities for medication dispensing cabinets. Currently, there are two vendors represented across several facilities at DBHDS, Omnicell and Pyxis. There is a need for a procurement and implementation project to standardize the solutions at the facilities. This would eliminate the need to maintain two different vendor relationships, configurations, and operating plans.
Other operation and maintenance tasks for the Electronic Healthcare Record (EHR), Oracle Millennium, are in more detail below:

The agency will implement upgrades to the EHR provides DBHDS with the most current system code level and enhanced behavioral health content and functionality to improve workflows and processes. The focus will also remain on stabilizing, optimizing, and enhancing the Electronic Health Record for DBHDS. Vital Sign machine and Blood Glucose Device integration allows the automated integration of vital sign and blood glucose results into the patients record in the EHR. This eliminates the need for manual result entry into the EHR which reduces inefficiency and reducing human error. This is efficient real-time data flow into the EHR updating the patient record nearly instantly wit rules and workflows in place to facilitate patient care effectively. The EDM Patient eSignature (formerly Clinical Formsuite) allows DBHDS to configure and integrate clinical forms in the EHR that require signature, so it becomes part of the electronic patient record.

This PGR is related to e-signatures on clinical documentation within the Electronic Health Record. ePen would not be an integrated option. Medical One Dragon Dictation is ready-to-use, cloud-based, desktop dictation solution that works across the existing infrastructure and allows physicians to save time and capture a more complete patient story. This is an enterprise-wide solutions available to all providers. Implementing Pyxis Automated Dispensing Cabinets (ADCs) at some facilities that do not currently have ADCs or to facilities that had ADCs at or near end of life. these are pharmaceutical dispensing, and inventory capabilities. This effort provides reduction in pharmaceutical errors while also improving inventory management resulting in patient safety, improved care, and reduction in costs.

The Virginia Department of Behavioral Health and Developmental Services (the "Department") seeks to implement a Grants Management system utilizing the Dulles Technology contract for the purposes of facilitating the application, review, approval, and distribution of grant payments to Virginia CSBs, Non-CSB providers and BHAs and report on the grant application and funds distribution processes. The Department currently uses traditional processes to collect, review, approve and report on the application and funds distribution processes. Incorporating automation into the grant application and review process will enable CSBs and Non-CSBs to seamlessly apply for and receive approval for grants, submit invoices and report on

expenditures. It will enable the DBHDS team to collect, track, monitor and report on key funding metrics at both the state and federal level and service any public records requests. Additionally, once implemented, this Grants Management solution can also be modified to create, manage, and track additional grant types and future solicitation rounds. DBHDS will use the Dulles Technology Partners Grants Management System state contract.

The introduction of Power Apps and Power App Development into the environment gives a solution of low code/ no code options. This option enables us to remove many of the Microsoft Access database applications and other applications out of the environment and centralize them into one secure, controlled platform.

The Waiver Management System (WaMS) including the Department of Justice Settle Agreement enhancements and the Medicaid Enterprise System (MES) project provides updates and enhancements. Annual operations and maintenance continue for WaMS along with some enhancements to functionality.
A major initiative for DBHDS continues to be the Application Reduction Initiative, a collaborative effort that includes all the facilities and Central Office. The agency at one time reported more than 400 applications, the numbers fluctuate due to applications being added and removed on a weekly basis. At the start of fiscal year 2024 there were just over 100 applications for DBHDS in Archer, the VITA application repository tool. This effort is now being done in partnership with Facility Services related to OKR 8 of the Commissioner's Agency Strategic Plan.

The Early Intervention Part C Data System, TRAC-IT, project was undertaken by the DBHDS Early Intervention Team and Strategic Solutions Group (SSG) to provide a state and federally compliant Early Intervention solution to support the requirements for the IDEA Part C Grant, implementing a data system capable of collecting all data requirements for State and Federal reporting, Medicaid and insurance billing, as well as IDEA Part C comprehensive monitoring and verification needs. The solution is a single, scalable, off-the-shelf cloud-hosted Software as a Service (SaaS) Early Intervention case management solution that replaced the state's legacy Early Intervention case management application (ITOTS).

DBHDS does not currently have a mechanism to analyze DBHDS and facility-level performance against federal and accrediting agency requirements, assess and prioritize improvement projects, assess organizational risk, increase collaboration, and build automated reports for leadership and frontline staff. The Tracers with AMP® plus CMS project will resolve this. This project includes the features of Tracers with AMP® and allows a user to store tracer data and trend compliance with Joint Commission and CMS standards over time. This will allow access to pre-populated CMS tracer templates that help identify critical CMS items, analyze your performance against CMS regulations, conduct compliance self-assessment, cross-referencing A-tags, E-tags, K-tags, and manage plans of correction.

IT Strategic Plan Budget Tables

Agency:	720 Dept of Behavioral Health & Developmental Svcs
Date:	11/30/2023

Current IT Services

Category	Costs Year 1		Costs Year 2	
	GF	NGF	GF	NGF
Projected Service Fees	$21,847,126.00	$2,115,377.00	$22,502,540.00	$2,178,839.00
VITA Infrastructure Changes				
Estimated VITA Infrastructure	$21,847,126.00	$2,115,377.00	$22,502,540.00	$2,178,839.00
Specialized Infrastructure				
Agency IT Staff	$12,282,198.11		$12,282,198.11	
Non-agency IT Staff	$500,000.00		$500,000.00	
Cloud Computing Service	$174,999.90		$350,000.00	
Other Application Costs	$1,533,177.54		$1,533,177.54	
Total:	$36,337,501.55	$2,115,377.00	$37,167,915.65	$2,178,839.00

Proposed IT Investments

Category		Costs Year 1		Costs Year 2	
		GF	NGF	GF	NGF
Major IT Projects:		$14,246,202.00	$4,700,000.00	$7,046,202.00	
Non-Major IT Projects:					
Agency-Level IT Projects:					
Major Stand Alone IT Procurements:		$352,859.93		$352,859.93	
Non-Major Stand Alone IT Procurements:		$400,714.50		$64,462.00	
Agency-Level Stand Alone IT Procurements:					
Procurement Adjustment for Staffing:					
Total:		$14,999,776.43	$4,700,000.00	$7,463,523.93	$0.00

Projected Total IT Budget				
		Costs Year 1		Costs Year 2	
Category	GF	NGF	GF	NGF
Current IT Services	$36,337,501.55	$2,115,377.00	$37,167,915.65	$2,178,839.00
Proposed IT Investments	$14,999,776.43	$4,700,000.00	$7,463,523.93	$0.00
Total	$51,337,277.98	$6,815,377.00	$44,631,439.58	$2,178,839.00

Business Requirements For Technology

Agency:	720 Department of Behavioral Health and Developmen
Date:	11/30/2023

2020- 22 Enable Efficient Data Retention, Exchange

BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023
Mandate:	Yes
Mission Critical:	Yes

Description:

DBHDS completed a Data Strategy Review to elicit recommendations to determine how to evolve to a future state where their data management enables efficient data retention, exchange, analysis, and reporting. These business functions are critical priorities that require material improvement from the current state to support existing programmatic requirements related to provision of quality care to individuals with behavioral health needs. In addition to continued expansion of the in-house Data Warehouse, additional technologies that connect the Department to CSB and private provider data sources will provide new reporting and analytics capabilities. This will enable DBHDS to better track of patients and continue to provide quality care to individuals with behavioral health needs.

2022- 24 Ensure the Physical Security of People i

BRT Type:	Business Requirement for Existing Technology
Requested Start:	10/4/2023
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.

2022-24 Ensure Financial Technology Remains Supp

BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023

Mandate:	Yes
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. Also assess other financial technologies for potential inclusion in a long-term ERP replacement strategy.

2022-24 Align Early Intervention Programs with Fed

BRT Type:	Business Requirement for Existing Technology
Requested Start:	10/4/2023
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.

2022-24 Implement a Consolidated All Critical Ev

BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023
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).

2022-24 Increase Frequency and Quality of Licenses

BRT Type:	Business Requirement for Existing Technology
Requested Start:	7/1/2023
Mandate:	
Mission Critical:	

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.

2022-24 Increase Oversight over Third-Party Prov

BRT Type:	Business Requirement for Existing Technology
Requested Start:	10/4/2023
Mandate:	Yes
Mission Critical:	Yes

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.

2022-24 Integrate EHR with Billing and Registrat

BRT Type:	Business Requirement for Existing Technology
Requested Start:	10/4/2023
Mandate:	Yes
Mission Critical:	Yes

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.

2022-24 Reduce/Eliminate servers or any IT devel

BRT Type:	Business Requirement for Existing Technology
Requested Start:	10/4/2023
Mandate:	Yes
Mission Critical:	Yes
Description:	

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

2022-24 Support Business Process Re-Engineering

BRT Type:	Business Requirement for Existing Technology
Requested Start:	10/4/2023
Mandate:	Yes
Mission Critical:	
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.

2022-24 Support the System Transformation Excell

BRT Type:	Business Requirement for Existing Technology
Requested Start:	10/4/2023
Mandate:	Yes
Mission Critical:	Yes
Description:	

DBHDS' System Transformation Excellence and Performance (STEP-VA) is an innovative initiative for individuals with behavioral health disorders featuring a uniform set of required services, consistent quality measures, and improved oversight in all Virginia communities. The first phase is implementing Same Day Access at 8 pilot CSBs. The next phases of STEP-VA include completing the work required for all of Virginia's CSBs to implement Same Day

Access, the installment of primary care screening and tight linkages to medical providers in all CSBs, addressing existing gaps in outpatient services, including medication assisted treatment for substance use disorders, and improving targeted case management services for children.

BReT Pantheon Senior Navigator

BRT Type:	Business Requirement for Existing Technology
Requested Start:	9/14/2023
Mandate:	Yes
Mission Critical:	Yes

Description:

The Virginia Navigator (VA-Navigator) was developed, launched, and is currently maintaining the data for the "My Life, My Community Virginia" (www.mylifemycommunityvirginia.org)website and the support of the users of the website. This website was designed to provide locality specific information to Virginia individuals, families, and others to obtain help understanding upcoming challenges to Developmental Disability (DD) Waivers and waiting lists. Contracting with VA-Navigator.com is critical to the successful compliance of the DOJ Settlement Agreement (SA) Section C.8.b Access and Availability of Services.

BRnT Counter Tools

BRT Type:	Business Requirement for New Technology
Requested Start:	9/14/2023
Mandate:	Yes
Mission Critical:	

Description:

The Virginia Department of Behavioral Health and Developmental Services' (DBHDS) Office of Behavioral Health Wellness (OBHW) requires the purchase of the Point of Sale Toolkit (POST©), Store Mapper©, Alcohol Mapper© and associated software tools and training, as manufactured and supplied exclusively by Counter Tools located in Carrboro, North Carolina as a continuation of our current work with them.

Specifically, the Counter Tools software will be utilized to continue tracking all retail tobacco outlets (i.e. sales of cigarettes, vapor products, hookah, etc.) so that DBHDS will be able to target its merchant education efforts as it relates to educating retailers about the penalties of selling tobacco to youth and reducing underage youth being able to purchase tobacco and linking this to environmental factors impacting youth tobacco use.

BRnT Data Exchange

BRT Type:	Business Requirement for New Technology
Requested Start:	9/15/2023
Mandate:	Yes
Mission Critical:	
Description:	

DBHDS is implementing a new service line that stands up a Data Exchange platform and Enterprise Data Warehouse. The Data Exchange platform allows facilities, CSBs, and other partners to exchange data and create a longitudinal record of a patient across the spectrum of care.

BRnT DBHDS Telehealth Solution

BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023
Mandate:	
Mission Critical:	
Description:	

DBHDS requires an Enterprise HIPAA compliant telehealth solution that provides the following to meet clinician and administration requirements.

Ability to expand behavioral and mental health programs by providing virtual behavioral and mental health in 1-1 or group sessions that patients may join from their homes.

Ability to examine and treat patients remotely (virtually)

Ability to utilize video communications to facilitate widespread, immediate coordination and real-time assessment for disaster, pandemic, and emergency responses.

Ability to provide progressive health education and preventative care for high-risk patient populations.

Ability hold virtual training sessions to reduce employee travel with cost-effective continuing education and ongoing training for healthcare professionals.

Ability to connect physicians, patients, and specialists for regular or urgent care appointments. Easily screen share medical results with all participants.

HD Video and Audio, Consistent high-quality video, even in low-bandwidth environments.

Meets HIPAA compliance with minimum 256-bit AES encryption

Ability to recorded session for consultation and review (local desktop recording with HIPAA BAA for clinical application)

Electronic Health Record and Medical device integration

Chrome Extension allowing participants to schedule telehealth meetings directly from Google Calendar.

Unified Login using Okta, support for single sign-on through Okta identify platform

Crisis Call Center_BRT	
BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023
Mandate:	Yes
Mission Critical:	Yes
Description:	
Crisis Call Center- Data Platform	
DBHDS - Discharge Assistance Planning	
BRT Type:	Business Requirement for New Technology
Requested Start:	10/24/2023
Mandate:	
Mission Critical:	
Description:	
The management of DAP is being planned for transition from the CSB/BHA's to Central Office to improve and strengthen administration and oversight, therefore an online tool for the planning and financial tracking of the funding and associated services is needed for the agency and people we serve.	
DBHDS - Facilities Enterprise UKG Dimensions/Pro	
BRT Type:	Business Requirement for New Technology
Requested Start:	10/24/2023
Mandate:	

Mission Critical:	Yes
Description:	

The current facilities' enterprise solution for employee timekeeping and scheduling, UKG/KRONOS Workforce Central and Advanced Scheduling, is end of life December 31, 2025. If another solution is not in place by that time, there will be disruption to critical agency operations, specifically those pertaining to employee timekeeping, leave management, payment, and scheduling of direct care employees across all DBHDS facilities. Migration to UKG Dimensions (product name changing to Pro Workforce Management in October 2023) including UKG Dimensions/Pro Timekeeping, UKG Dimensions/Pro Absence, UKG Dimensions/Pro Advanced Scheduling, and UKG Dimensions/Pro Workforce Management Analytics provides continuity of facilities operations. Facility Services and Facilities' leadership stakeholders endorse remaining with UKG as UKG Dimensions meets the business requirements for timekeeping, scheduling, and absence management for all 12 facilities that comprise the facilities enterprise. UKG Dimensions/Pro also is compatible with the latest model of timeclocks across the facilities, including the 100+ recently purchased timeclocks.

DBHDS - Proc Elsevier

BRT Type:	Business Requirement for Existing Technology
Requested Start:	3/29/2023
Mandate:	
Mission Critical:	
Description:	

Elsevier and the College of Direct Support Curriculum is a provider of web-based education for direct support professionals in over 38 states.

DBHDS Chad Jones FY2024 Engagement

BRT Type:	Business Requirement for Existing Technology
Requested Start:	7/1/2023
Mandate:	
Mission Critical:	
Description:	

DBHDS Chad Jones FY2024 Engagement with the Enterprise Health Record for staff augmentation and as the Project Manager on the Revenue Cycle (AVATAR) Replacement RFP and Project.

DBHDS CSH Xerox Refresh

BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023
Mandate:	
Mission Critical:	
Description:	

Under Services Contract # 7184343-001.
86 Print Devices, plus Managed Services.
See details in sample PO.

DBHDS Proc -Omnigo BRnT

BRT Type:	Business Requirement for New Technology
Requested Start:	3/10/2023
Mandate:	
Mission Critical:	Yes
Description:	

This is a Public Safety solution to support
DBHDS Facilities' safety and security processes.

DBHDS Proc Diveplane

BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023
Mandate:	
Mission Critical:	
Description:	

IFB A720-5962 was issued and awarded in January 2022, EP3427378. PGR is now required due to 12 mo. extension and contract amount now exceeds DBHDS authority. Iron Bow Technologies was sole responder and quoted pricing using its awarded VITA contract VITA VA-180915-IBTL / VITA VA-180915-IBTL in the amount of $249,000.00. Please refer to eVA PO EP342273378. Iron Bow Technologies provided its DivePlane reactor and associated services as required per VITA's Ironbow Contract VA-180915-IBTL for year 01/16/2022 – 01/17/2023. DBHDS accepted the services as provided and wishes to extend its contract for 12 mos. Iron Bow technologies was awarded VITA contract VA-180915IBTL therefore all vetting documents are contained within the VITA procurement file. DBHDS is requesting a 12 mo. extension to continue current services without interruption using the existing VITA contract VA-180915-IBTL.

DBHDS' information and data is extremely valuable to researchers and other partner agencies to conduct research on the effectiveness of treatment outcomes. By using the DivePlane (GeminAi) AI solution, DBHDS would be able to create entire synthetic data sets of our production PHI, PII, and HIPAA data and provide it for our DEV and Test environments in an absolute secure and compliant manner. Additionally, DBHDS would be able to provide ALL health information to researchers in a synthetic data set that would not be able to be re-engineered to expose PHI, PII, or HIPAA information and thus reducing our current risk of any accidental disclosure by a partner to zero.

This is different from simple data masking in that it creates false personas that would prohibit the ability to reverse engineer the data back to a real person where simple data masking would not meet this requirement.

Additionally, under HJ-578, requests the Department of Behavioral Health and Developmental Services to establish awork group to study the feasibility of developing a secure, de-identified, renewable, and relational database of criminal justice, behavioral health, and other human services records to facilitate development of more effective interventions. DivePlane's solution would position DBHDS to meet and exceed these requirements.

DBHDS Revenue Cycle Replacement

BRT Type:	Business Requirement for New Technology
Requested Start:	6/1/2023
Mandate:	
Mission Critical:	

Description:

Financial management application tool used for revenue cycle processes including billing facility claims and financial/reimbursement data management. This new system will replace the existing practice management system, Avatar, used by facility and reimbursement staff.

DBHDS SD-WAN Upgrade

BRT Type:	Business Requirement for Existing Technology
Requested Start:	3/1/2023
Mandate:	Yes
Mission Critical:	Yes

Description:

Configure existing routers to support SD-WAN capability across all agency locations. This approach prepares agency location(s) with the ability to add additional network capabilities (multiprotocol label switching (MPLS), broadband, wireless (i.e., Cradlepoint)) to take advantage of application -aware routing over private and public networks.

Three step process:

Remote internetwork operating system (IOS) software upgrade on the router.

Remote SD-WAN deployment

Circuit deployment as needed

DBHDS Website Modernization

BRT Type:	Business Requirement for New Technology
Requested Start:	6/16/2023
Mandate:	
Mission Critical:	Yes
Description:	

The primary objective of the COV Website Modernization and the CMS Virginia.gov projects are to ensure all state sites are on a single common platform and are following required VITA, COV and 508 standards

DBHDS_Food Service Management

BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023
Mandate:	
Mission Critical:	Yes
Description:	

Governor Ralph Northam's "Executive Order 19: Cloud Service Utilization and Readiness" requires agencies to take specific actions starting this month and continuing through fall 2019.

 The order requires VITA to adopt a model for evaluating and incorporating cloud services into the commonwealth's information technology (IT) strategy and services. VITA has: begun requirements gathering for new RFP

 Started the process of creating a cloud services model

 Begun obtaining information about agency systems that can be migrated to a cloud environment

 Provided an overview of the process at the recent agency information technology resources

(AITR) meeting

Planned additional announcements to AITRs regarding remaining steps

Included cloud-related services and migration to the new data center in the recently awarded infrastructure contracts

Additionally, VITA and all systems must move from the Commonwealth Enterprise Solutions Center (CESC) in Chester by December of 2021. One related strategy is to reduce the number of physical servicers at CESC to prepare for the move. This means migration to the cloud must be completed by that time. It is imperative to start planning now.

Agencies' IT staff members have been asked to complete cloud assessments and should be using the results to identify resource requirements. VITA encourages agencies to evaluate their resources and discuss resource planning with the appropriate financial staff to ensure work can begin as required. Resource needs should be included requests in the upcoming budget cycle. enabled, VITA will

To identify which existing solutions can be migrated to the cloud and ensure all new IT solutions proposed be cloud- issue a hosting standard in the coming weeks. This standard will define terminology and identify requirements agencies must consider when implementing cloud-based IT solutions.

Tracers BRNT

BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023
Mandate:	Yes
Mission Critical:	Yes
Description:	

Tracers with AMP will give you the data and insights you need to efficiently manage risk and help your organization stay survey-ready. This web-based software solution anticipates, reduces and reports risk across your organization. You can analyze performance, compare sites and departments, and prioritize improvements with user-friendly dashboards and easy-to-build, automated reporting.

Xerox via Convenience Contract

BRT Type:	Business Requirement for New Technology
Requested Start:	10/4/2023
Mandate:	

Mission Critical:	

Description:

Under Services Contract # 7184343-001.
86 Print Devices, plus Managed Services.
See details in sample PO.

Improve Security Audit Plan Score

BRT Type: Business Requirement for New Technology

Requested Start: 1/24/2024

Mandate: Yes

Mission Critical:

Description:

There has been turnover in the IT Auditor role in December 2022. The position has been filled as of August 10, 2023. Within three months of filling the vacant position, two audits are close to being wrapped up and we have kicked off another one end of November and is ongoing. We will be issuing reports on those in the coming weeks.

We are also working with facilities to retire systems not in use as some of those are still in Archer which VITA has visibility to and is impacting the overall score in this case. As of 12/05/23 plan, number of sensitive systems requiring an IT Security Audit is reduced to 77 (which was close to 150 on the 12/05/22 plan submitted to VITA) which may again change within next few months, as more applications are retired in Archer. Please note that we have one IT Auditor position in our department.

Due to these changes, it has been difficult to assess the number of positions needed to complete these audits. Due to an extremely high per hour cost of contracting these services along with the volume of systems to be audited we didn't think it was cost effective to contract these audit services out.
We will continue to work with CO and facilities to reduce the number of agency sensitive systems, will continue to work on the current audits as planned and will request additional staffing resources, as needed to improve the overall scoring.

Commonwealth Projects >= $250,000.00

Agency:	720 Department of Behavioral Health and Development Services
Date:	11/30/2023

Early Intervention Part C Data System (ITOTS)

Category 2		Project Initiation Approval	

 Purchase a comprehensive early intervention data system (SaaS) to replace the current Infant and Toddler Online Tracking system (ITOTS).

Project Start Date	9/30/2020	Project End Date	2/28/2024
Estimated Costs:	**Total**	**General Fund**	**Non-General Fund**
Project Cost	$2,500,000.00		$2,500,000.00
Estimated first year of biennium:	$0.00	$0.00	$0.00
Estimated second year of biennium:	$446,612.50	$0.00	$446,612.50

Project Related Procurements

There are no procurements for this project

Medicaid Enterprise System (MES) Project

Category 3		Investment Business Case Approval	

 The Department of Medical Assistance Services (DMAS) is transforming the current Virginia Medicaid Management Information System (VAMMIS) to the new Medicaid Enterprise System (MES) that will be required to interface with the existing Waiver Management System (WaMS) managed by DBHDS. This transformation is a federal mandate from the new Centers for Medicare and Medicaid services. This project will support the transformation of these systems by establishing connectivity between the WaMS system and the MES system interfaces and ensuring the delivery of services to the community through a well-managed service authorization and waiver system.

Project Start Date	12/1/2020	Project End Date	7/9/2021
Estimated Costs:	**Total**	**General Fund**	**Non-General Fund**
Project Cost	$813,731.25		
Estimated first year	$0.00	$0.00	$0.00

of biennium:			
Estimated second year of biennium:	$0.00	$0.00	$0.00

Project Related Procurements

There are no procurements for this project

CBORD Replacement - Statewide Food Service Project	
Category 4	Project Initiation Approval

 The purpose of this system is to assist in the management and control of food service operations throughout DBHDS including but not limited to state-of-the-art provision of food and diet preparation, nutritional analysis, menu planning, preparation of tray tickets and inventory control. The proposed system shall provide information necessary to comply with the standards and regulatory requirements.

Project Start Date	7/15/2022	Project End Date	6/18/2024
Estimated Costs:	**Total**	**General Fund**	**Non-General Fund**
Project Cost	$949,473.01	$949,473.00	
Estimated first year of biennium:	$0.00	$0.00	$0.00
Estimated second year of biennium:	$0.00	$0.00	$0.00

Project Related Procurements

CBORD Replacement - Statewide Food Service Procure

Crisis Call Center Project Tech Deliverables	
Category 3	Project Initiation Approval

 Create a statewide call center data platform that can be used both by CSB staff (potentially a subcontracted private provider), private and state hospital staff, as well as Central Office staff. This is to assure that we can collect caller information from those in crisis (demographics), dispatch function, monitoring function(GPS enabled), linking to other services, bed registry function, and text and chat function.

Project Start Date	11/30/2020	Project End Date	12/31/2023
Estimated Costs:	**Total**	**General Fund**	**Non-General Fund**
Project Cost	$3,970,982.66	$16,185,505.00	
Estimated first year of biennium:	$0.00	$0.00	$0.00

Estimated second year of biennium:	$2,985,836.00	$2,985,836.00		$0.00

Project Related Procurements

Crisis Call Center Procurement

DBHDS Incident Management System Project	
Category 2	Investment Business Case Approval

 Installation of a comprehensive human rights information system, replacing CHRIS, PAIRS, and Inncident Tracker.

DBHDS expects to see cloud solution recommendations among the vendor responses.

PAIRS Protection and Advocacy Incident Reporting System.

The priority is to combine the reporting of Community Providers & DBHDS Operated Facilities into a single system. This would include reporting of serious incidents, serious injuries, allegations of abuse and neglect, complaints about human rights violations, and instances of seclusion and restraint. The single system shall be scalable to combine reporting of Facilities for allegations of abuse and neglect, complaints about human rights violations, and instances of seclusion and restraint. Sometimes a single incident may need to be reported as both a serious incident/injury and an allegation of abuse or neglect (e.g., an individual falls and breaks his arm after being shoved by a staff member). Currently the provider must make two separate reports, one to licensing and one to human rights. Ideally they would enter the information in a single interface that would collect all information and send the relevant data to licensing and human rights staff.

Project Start Date		9/1/2023	Project End Date		11/30/2024
Estimated Costs:	**Total**		**General Fund**	**Non-General Fund**	
Project Cost	$5,000,000.00			$5,000,000.00	
Estimated first year of biennium:	$0.00		$0.00	$0.00	
Estimated second year of biennium:	$0.00		$0.00	$0.00	

Project Related Procurements

There are no procurements for this project

Tracers	
Category 4	Project Initiation Approval

 Sole source procurement from Joint Commission Resources, cloud SaaS, vendor hosted

The purpose of this project is to provide an enterprise solution to analyze DBHDS and facility-level

performance against federal and accrediting agency requirements, assess and prioritize improvement projects, assess organizational risk, increase collaboration and build automated reports for leadership and frontline staff.

A solution is needed in order to align practice with regulatory requirements and will enhance our ability to provide oversight of the facilities in response to DOJ, APA and OSIG findings/comments. The tool will help facilities and Central Office monitor performance against DOJ requirements. Example, "DBHDS is not in compliance with the requirements of III.C.5.d, a mechanism to monitor compliance with performance standards for case management." In addition, the DBHDS indicator for Provision V.C.6 states "DBHDS has Policies or Departmental Instructions that specify requirements for Training Centers to report serious incidents, including, deaths, or allegations of abuse or neglect and to implement and monitor corrective actions." Audits relative to these corrective actions can be customized using this tool.

Project Start Date		7/1/2021	Project End Date		6/27/2024
Estimated Costs:	**Total**		**General Fund**	**Non-General Fund**	
Project Cost		$380,752.43	$380,752.44		
Estimated first year of biennium:		$0.00	$0.00		$0.00
Estimated second year of biennium:		$0.00	$0.00		$0.00

Project Related Procurements

Tracers Procurement
VCBR Video Management Upgrade Procurement

Grant Management	
Category 4	Project Initiation Approval

Dulles Technologies Partners will configure their WebGrants solution to meet project requirements. In Phase 1, the solution will be configured to allow Finance to create the four major federal grant budgets and issue payments to CSBs and Non-CSB entities using an integration with Cardinal. In Phase 2, the solution will be configured to allow Program Staff and OMS to use the applications, agreements, status reports, and site visits functionalities. DBHDS will use the Dulles Technology Partners Grants Management System state contract.

Project Start Date		4/1/2022	Project End Date		12/29/2023
Estimated Costs:	**Total**		**General Fund**	**Non-General Fund**	
Project Cost		$555,901.00		$485,901.00	
Estimated first year of biennium:		$0.00	$0.00		$0.00
Estimated second		$0.00	$0.00		$0.00

year of biennium:			

Project Related Procurements

Grant Management Procurement

EDM Patient eSignature	
	Investment Business Case Approval

Configure and Integrate clinical forms in the EHR that require signature so it becomes part of the electronic patient record.

Configure Client-specific interface design on Cerner-hosted integration engine
• Perform Cerner interface build in test domain for the following interfaces:
o Millennium ADT outbound to Cerner Forms Suite
o Millennium Orders outbound to Cerner Forms Suite
• Submit firewall/request as needed
• Move interfaces to production domain

Project Start Date		2/16/2023	Project End Date	5/31/2024
Estimated Costs:	**Total**		**General Fund**	**Non-General Fund**
Project Cost		$580,000.00	$580,000.00	
Estimated first year of biennium:		$0.00	$0.00	$0.00
Estimated second year of biennium:		$0.00	$0.00	$0.00

Project Related Procurements

There are no procurements for this project

DBHDS – Proj – Data Governance	
Category 2	Investment Business Case Approval

The overall mission of the Data Governance project is to enable data-driven decision-making across the Agency by effectively managing and maintaining data resources, ensuring the integrity, reliability, availability, and compliance of organizational data and information. For data users to be able to make informed decisions, we need to establish a culture of information literacy at DBHDS. This project will establish a data governance model and tactical implementation plan that will support and align with the Agency's objectives to:
 1. Implement data governance, policy, process, and tools (OKR-9A)
 2. Adhere to data governance policy for all source systems to improve data reliability and validity (OKR-9D)
This project is foundational to providing comprehensive data analytics for the continuum of care and reducing administrative burden on provider reporting (OKR-9E).

Project Start Date	11/1/2023	Project End Date	12/31/2025

Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	$4,700,000.00		$4,700,000.00
Estimated first year of biennium:	$0.00	$0.00	$0.00
Estimated second year of biennium:	$0.00	$0.00	$0.00

Project Related Procurements

There are no procurements for this project

DBHDS Proj - Enterprise Data Warehouse	
Category 1	Investment Business Case Approval

 DBHDS will contract with a vendor (to be determined) to stand up, host, and maintain an Enterprise Data Warehouse (EDW) Software as a service (SaaS) platform to replace the existing data warehouse hosted by VITA and maintained by DBHDS. The existing reports will be refactored to use the new EDW platform. The new EDW will be populated with data that will be ingested directly from the source systems (i.e., investigate near real-time data ingestion).

Project Start Date	4/3/2023	Project End Date	2/28/2025

Estimated Costs:	Total	General Fund	Non-General Fund
Project Cost	$5,395,276.00		$4,720,000.00
Estimated first year of biennium:	$0.00	$0.00	$0.00
Estimated second year of biennium:	$0.00	$0.00	$0.00

Project Related Procurements

DBHDS Proc – Enterprise Data Warehouse

DBHDS Project - CCS3 Sunset	
Category 2	Project Initiation Approval

 The Virginia Department of Behavioral Health and Developmental Services (DBHDS) current data-sharing methodology is antiquated and does not support Virginia's ability to accurately determine service/program

impact on population health or Community Service Boards (CSB's) performance. As a result, DBHDS is seeking to replace the Community Coordination System Version 3 (CCS3) with a new integration tool that would allow for more real-time, transactional, bi-directional data exchange. CCS3 is the existing application that gathers outcomes from CSB's and reports them to the Substance Abuse and Mental Health Services Administration (SAMHSA) and the General Assembly.

The business objective is to provide a mechanism for DBHDS to understand the impact of public funding on the behavioral health of the population served by Virginia's publicly funded behavioral healthcare system. This will require the exchange of encounter-level data for services that are publicly funded either through Medicaid, General Funds from the legislature, or federal grant funding. This encounter-level data allows DBHDS to satisfy current reporting requirements to various funders while also allowing for advanced, population-level analytics to ensure every public dollar is put to its maximum use in deriving positive outcomes within the public behavioral healthcare system. The criticality of this objective has taken a prominent position in the DBHDS agency strategic plan.

Project Start Date		3/1/2023	Project End Date		2/28/2025
Estimated Costs:	**Total**		**General Fund**	**Non-General Fund**	
Project Cost		$2,806,260.96	$2,809,669.00		
Estimated first year of biennium:		$0.00	$0.00		$0.00
Estimated second year of biennium:		$0.00	$0.00		$0.00

Project Related Procurements

There are no procurements for this project

DBHDS Revenue Cycle (AVATAR) Replacement Project	
Category 1	Investment Business Case Approval

 DBHDS is seeking to implement a financial management application tool used for revenue cycle processes including billing facility claims and financial/reimbursement data management. This new system will replace the existing practice management system, Avatar, used by facility and reimbursement staff.

DBHDS currently collects limited revenue as regulated by the Federal Register, Centers for Medicare, and Medicaid Services (CMS), and the Department of Medical Assistance Services (DMAS) across its eight mental health facilities, one child and adolescent facility, one training center, and one medical center. In recent years, DBHDS has strived to achieve Medicare certification at those facilities who were not currently certified. Achieving and maintaining Medicare certification allows DBHDS facilities to bill applicable federal entitlements for medically necessary inpatient stays rather than determining a consumer's ability to pay from the total cost of care.

With these certification changes comes a need for more frequent and advanced billing processes. DBHDS currently utilizes a NetSmart application for accounts receivable billing processes. This non-cloud based system has allowed DBHDS to effectively process billing needs since May 2003 but the need for more

sophisticated SaaS solution to meet our current needs. By adopting a new accounts receivable billing system that better aligns with the EHR, certification changes, and facility needs, DBHDS will minimize inefficiencies and potentially increase revenue. Components of the new system will include registration, patient eligibility verification, utilization review needs, coding, claims submission, and reporting. Both eligibility verification and claims submissions will require a clearinghouse system add-on that will connect directly with the new billing system and payers.

This project will include an RFP solicitation, vendor selection and then implementation completely replacing the outdated legacy solution.

Project Start Date		6/1/2023	Project End Date	6/30/2025
Estimated Costs:	**Total**		**General Fund**	**Non-General Fund**
Project Cost	$13,400,000.00		$6,700,000.00	$6,700,000.00
Estimated first year of biennium:	$0.00		$0.00	$0.00
Estimated second year of biennium:	$0.00		$0.00	$0.00

Project Related Procurements

DBHDS Revenue Cycle
(AVATAR)
Replace/Procurement

DBHDS - State Rental Assistance Program Project	
Category 3	Investment Business Case Approval

 DBHDS now administers more rental assistance than all but 5 Public Housing Authorities in Virginia. Software to manage program data is essential to ensure effective oversight of state funds appropriated for this purpose. Rental assistance funds are part of the agency's base budget, so the agency has an indefinite commitment to the effective administration of these resources. Rental assistance data is currently managed through separate Excel Workbooks for approximately 20 contractors. The Office of Integrated Support Services developed the workbooks and has advised the Office of Community Housing that they are unstable and need to be replaced by an appropriate tool. Without effective data management, the OCH cannot ensure wise stewardship of these state resources. The current process is fraught with issues of

1. Data Security,

2. Data Integrity,

3. Heavy use of Email for Confidential Information,

4. use of complicated shared excel spreadsheets

5. Lack of a clear view of historical data

6. Lack of automated reporting

A solution to this request is envisioned to alleviate inconveniences arising out of this completely manual process.

The Project is to provide automation for the business process relating to the State Rental Assistance Program. The business has requested the solution be provided via a technologically contemporary and industry standard electronic system to manage rental assistance data from multiple contracted agencies.

An ECOS approved cloud based SaaS application has been identified to solve the business problem

Project Start Date		10/1/2023	Project End Date		3/31/2024
Estimated Costs:	**Total**		**General Fund**	**Non-General Fund**	
Project Cost		$413,912.00			$439,533.60
Estimated first year of biennium:		$0.00	$0.00		$0.00
Estimated second year of biennium:		$0.00	$0.00		$0.00

Project Related Procurements

There are no procurements for this project

DBHDS Proj Omnicell Modernization	
Category 4	Investment Business Case Approval

 This project will upgrade OmniCell medication dispensing servers from SWVMHI, SVMHI, and PGH facilities to OmniCell cloud virtual server 2019.
Omnicell Automated Dispensing Cabinets and related workflow automation provide safe, efficient, secure access to medications.
This a computerized automated cabinet full of medicines that nurses use to distribute the correct prescriptions to patients.

Project Start Date		6/23/2023	Project End Date		5/1/2024
Estimated Costs:	**Total**		**General Fund**	**Non-General Fund**	
Project Cost		$400,000.00	$400,000.00		
Estimated first year of biennium:		$0.00	$0.00		$0.00
Estimated second year of biennium:		$0.00	$0.00		$0.00

Project Related Procurements

DBHDS Proc – Omnicell Modernization

Commonwealth Procurements >= $250,000.00

Agency:	720 Department of Behavioral Health and Development Services
Date:	11/30/2023
Stand Alone Procurements:	

Procurement Name:	DBHDS - Proc - Crisis Call Center Platform
Procurement Date	12/30/2024
Procurement Description:	Continue and complete the deployment of a statewide call center data platform that can be used both by Community Service Board (CSB) staff (potentially a subcontracted private provider), private and state hospital staff, as well as Central Office staff. This is to assure that we can collect caller information from those in crisis (demographics), dispatch function, monitoring function (GPS enabled), linking to other services, bed registry function, and text and chat function. An emergency contract is required with Behavioral Health Link (BHL). BHL is already engaged in our current project as a 3rd party. BHL has provided all of the services deployed thus far. The contract has ended with our primary vendor, Netsmart, and there are no further services required of them. There is still work remaining to integrate the BHL system with CSBs and their EHRs, private and state hospitals (for the Bed Registry which is now a state mandate).

Procurement Name:	DBHDS - Proc - Data Exchange Staff Aug 2
Procurement Date	12/31/2025
Procurement Description:	Staff augmentation for Data Governance, Enterprise Data Warehouse, and CCS3 Sunset Project resources. Does not include the FY24 costs PM4s for CCS3 Sunset and Enterprise Data Warehouse, as those are included in PGR Work ID 1001545.

Procurement Name:	DBHDS - Proc - Data Governance Tool
Procurement Date	7/1/2023
Procurement Description:	Informatica Intelligent Data Management Cloud - Powered by CLAIRE®, our AI engine, it's the only cloud dedicated to managing data of any type, pattern, complexity, or workload across any location—all on a single platform with a simple and flexible consumption-based pricing model.

Procurement Name:	DBHDS - Proc AAIDD/Supports Intensity Scale (SIS
Procurement Date	6/1/2023
Procurement Description:	The Supports Intensity Scale® (SIS) is the required assessment for all individuals who are: A. Children 5 to 16 years old and receiving a tiered waiver service in one of the two available Developmental Disability (DD) Waivers (Building Independence (BI) waiver, one of the three DD waivers is not available to those under the age of 18). OR B. Individuals aged 16 and older enrolled in one of the three DD Waivers. The SIS assesses needed support in six life activity areas, protection and advocacy support, and exceptional medical and behavioral supports. Since 2016, DBHDS has used the results of the SIS to determine the level and tier for reimbursement rates for a variety of tiered DD waiver services, including supported living residential services, community engagement, group day services, group home residential services, independent living support services, and sponsored residential services

Procurement Name:	DBHDS Pantheon Senior Navigator
Procurement Date	3/31/2029
Procurement Description:	The Virginia Navigator (VA-Navigator) was developed, launched, and is currently maintaining the data for the "My Life, My Community Virginia" (www.mylifemycommunityvirginia.org)website and the support of the users of the website. This website was designed to provide locality specific information to Virginia individuals, families, and others to obtain help understanding upcoming challenges to Developmental Disability (DD) Waivers and waiting lists. Contracting with VA-Navigator.com is critical to the successful compliance of the DOJ Settlement Agreement (SA) Section C.8.b Access and Availability of Services. (Initial cost estimate includes 5 years of O&M at $257,675.79 for a total of $1,288,378.95) This PGR is for 5 years of O&M.

Procurement Name:	DBHDS Proc - Elsevier
Procurement Date	3/30/2023
Procurement	Elseview is a provider of web-based education for direct support professionals in

Description:	over 38 states. The CDS Curriculum is delivered through a robust learning management system known as Elseview Performance Manager. It is the only nationally validated curriculum designed to develop the skills of direct support workers.

Procurement Name:	DBHDS Proc - Omnigo
Procurement Date	3/10/2023
Procurement Description:	This is a Public Safety solution to support DBHDS Facilities' safety and security processes. Omnigo is the only solution that unifies all the operational processes and reporting in a single platform. The operational processes that are included in one platform are: computer aided dispatch, daily logs, training management, lost and found/ property management, parking management, key and equipment tracking, case and incident reporting for theft, hazardous conditions, violence incidents, etc., The software includes push notifications to alert staff when there is a need to be a heightened awareness. These features and more provided in one platform make this solution unique to meet the needs of the DBHDS facilities.

Procurement Name:	DBHDS Proc - Qualtrics Patient Survey
Procurement Date	5/17/2023
Procurement Description:	DBHDS needs a patient experience survey tool to be used at the facilities. DBHDS will purchase a tool though the state contract with Thundercat VA-180917-TCTL.

Procurement Name:	DOJ Waiver Management System Procurement FY 22 -26
Procurement Date	7/1/2026
Procurement Description:	This sole source contract is for web-based waiver management service. The system records, tracks and reports the data required to facilitate the enrollment/initial screening, appeal reasons and resolution, waiting list management, monitoring and service authorization necessary to ensure a comprehensive system.

The Department of Medical Assistance Services (DMAS) is transforming the current Virginia Medicaid Management Information System (VAMMIS) to the new Medicaid Enterprise System (MES) that will be required to interface with the existing Waiver Management System (WaMS) managed by DBHDS. This transformation is a federal mandate from the new Centers for Medicare and Medicaid services. This project will support the transformation of these systems by establishing connectivity between the WaMS system and the MES system interfaces and ensuring the delivery of services to the community through a well-managed service authorization and waiver system.

This contract covers the implementation work of WaMS changes in order to successfully remain connected to continue to exchange real-time data with MES modular configuration. This work entails analysis, development, testing, deployment to production, and post-production activities. The Commonwealth is seeking to continue with its Waiver Management System (WaMS) that is webbased and maximizes the use of the Internet and electronic data interchange capability and must support the configuration of automated work processes to continue to support the business's needs and address the components of 3 VA HCBS Waiver programs.

This is a renewal of the FEI Systems contract originally approved with PGR 16-026. DBHDS has ECOS approval.

Procurement Name:	Grant Management Procurement
Procurement Date	9/30/2022
Procurement Description:	The Virginia Department of Behavioral Health and Developmental Services (the "Department") seeks to implement a Grants Management system for the purposes of facilitating the application, review, approval and distribution of grant payments to Virginia CSBs, Non-CSB providers & BHAs and report on the grant application and funds distribution processes. DBHDS will use the Dulles Technology Partners Grants Management System state contract. VA-200218-DTPI

Procurement Name:	Thundercat VA-180917-TCTL - Procurement
Procurement Date	2/27/2026
Procurement Description:	DBHDS needs an employee experience survey tool. This will provide the ability to capture employee feedback for Commissioner through HR DBHDS will purchase a tool though the state contract with Thundercat VA-180917-

	TCTL.