REQUEST FOR PROPOSAL - FEA SUPPORT TO SELF-DIRECTION MEMBERS

STATE OF WEST VIRGINIA

DEPARTMENT OF ADMINISTRATION | PURCHASING DIVISION

Technical Response | CRFP # BMS2300000003

June 8, 2023

public partnerships PPL

	Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130	**State of West Virginia** **Centralized Request for Proposals** **Service - Prof**

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BID RECEIVING LOCATION

BID CLERK
DEPARTMENT OF ADMINISTRATION
PURCHASING DIVISION
2019 WASHINGTON ST E
CHARLESTON WV 25305
US

VENDOR

Ve r Customer Code: 000000100887

Vendor Name : Public Partnerships LLC

Address : 148 State Street

Street : Sixth Floor

City : Boston

State : MA **Country :** USA **Zip :** 02109

Principal Contact : Andrea Pederson

Vendor Contact Phone: (617) 865-9944 **Extension:** apederson@pcgus.com

FOR INFORMATION CONTACT THE BUYER
Crystal G Hustead
(304) 558-2402
crystal.g.hustead@wv.gov

Ve Signature X Cindy Rader
Cindy Rader (Jun 5, 2023 17:10 EDT) **FEIN#** 04-3468852 **DATE** June 7, 2023

All offers subject to all terms and conditions contained in this solicitation

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148 State Street, 6th Floor
Boston, Massachusetts 02109

June 7, 2023

Ms. Crystal Hustead
Department of Administration
Purchasing Division
2019 Washington Street, East
Charleston, WV 25305

Dear Ms. Hustead,

Public Partnerships is pleased to submit our proposal to Solicitation CFRP 0511-BMS2300000003, FEA Support to Self-Direction Members in West Virginia. Public Partnerships has been delivering customized and comprehensive financial management services to members and their families and does so in partnership with case managers and the Bureau of Medical Services (BMS) since 2007. We are confident that our already-built, West Virginia-specific solutions, and infrastructure will continue to grow and optimize the quality of self-direction in the State for years to come.

We are excited about the future and potential expansion of self-direction into State Plan Personal Care as we have seen together with BMS the success of self-direction in the other waiver programs. We care about the members and workers whom we interact with on a day-to-day basis and our local staff truly enjoy the opportunity to make direct impacts on the lives in their communities. As such, we have outlined an approach that is rooted in the firm foundation we have built with BMS and we expand on that with five solutions we believe to be superior:

1. Time4Care EVV-compliant time entry application (see section 4.2.1.145)
2. Transportation partnership local to WV (see section 4.2.1.11)
3. Concierge and Microsite (see section 4.2.1.133)
4. Automation for tracking member admissions (see section 4.2.1.17)
5. National Advisory Committee participation (see section 4.5.1.2)

Our response demonstrates how Public Partnerships exceed expectations. We will continue to:

1. Afford BMS the "best value" because of our intricate knowledge of service delivery.
2. Employ local, knowledgeable, and dedicated staff with significant years of experience in West Virginia including Resource Consultants.
3. Offer a fully integrated system solution specifically built for West Virginia.
4. Engage our staff who are industry experts in fiscal management and self-direction to support local operations.
5. Actively implement policy and procedures with outcome data that proves their effectiveness.
6. Support innovation with the use of our proprietary and easy-to-use EVV solution.
7. Have confidence that our mission and values align with BMS, members, and their supports and we will continue to build on our successes to enhance the quality of service delivery.

As reflected throughout our response, Public Partnerships appreciates and values our successful partnership with West Virginia. A transition in West Virginia is not as simple as migrating member and worker data to ensure payroll is met. There are established relationships of trust, not only with the State but also with the individuals who receive services. Some responders will say that they will be able to easily transition in as the new FMS and will undervalue the impact of years of relationships and the required changes to work in new systems. We are confident that we will continue to show you that we are flexible and stand ready to adjust to changes that will improve the lives and experiences of all stakeholders impacted by this contract.

For 24 years, Public Partnerships has performed financial administration functions to support individuals with disabilities or chronic illness and aging adults to remain independent in their homes and active within their communities. Few fiscal employer agencies can say their mission aligns so closely with the Bureau. We appreciate the opportunity to continue this mission through our work with West Virginia.

Sincerely,

Cindy Rader

Cindy Rader (Jun 5, 2023 18:02 EDT)

Cindy Rader
Chief Client Services and Innovation Officer
Public Partnerships LLC

public partnerships PPL

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: BMS2300000003

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:
(Check the box next to each addendum received)

[X]	Addendum No. 1	[ ]	Addendum No. 6
[X]	Addendum No. 2	[ ]	Addendum No. 7
[X]	Addendum No. 3	[ ]	Addendum No. 8
[X]	Addendum No. 4	[ ]	Addendum No. 9
[ ]	Addendum No. 5	[ ]	Addendum No. 10

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Public Partnerships LLC
Company

Cindy Rader
Cindy Rader (Jun 5, 2023 17:10 EDT)
Authorized Signature

June 5, 2023
Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

INTRODUCTION

In 2020, the West Virginia Bureau of Medical Services (BMS) prioritized eliminating the wait list for the Intellectual and Developmental Disabilities Waiver (IDDW) to permit more than a thousand families to access critical services to help loved ones remain living independently in their communities. This initiative rolled out as the COVID-19 public health emergency continued to impact in-person service delivery models across the State.

As a longstanding and experienced partner to BMS, Public Partnerships LLC | PPL enlisted dozens of our West Virginia Resource Consultants to help enroll these new IDDW waiver members into the self-directed service delivery option. We trained new participants on how to be the employer of the caregiver of their choice. We quickly adapted procedures and processes in response to the COVID pandemic to meet the needs of this new wave of consumers. Together, BMS, PPL, and community stakeholders succeeded in eliminating the IDDW waitlist.

The success of the elimination of the waitlist is an example of the successful partnership that exists with PPL and BMS which began in 2007. We are pleased to submit this response to Solicitation CFRP 0511-BMS2300000003, FEA Support to Self-Direction Members, confident that our already-built, West Virginia-specific solutions, and infrastructure will continue to grow and optimize the quality of self-direction in the State for years to come.

Public Partnerships will describe key features that distinguish our offerings, including:

- **Dedicated and Experienced staff.** PPL's collective experience in West Virginia is unmatched. We continue to fill the key staff positions with dedicated and experienced West Virginians. Our Project Manager for this engagement, Katherine Randall, began her career at PPL as a Resource Consultant 14 years ago. We supplement our local staff with industry-leading experts on F/EA FMS operations and self-direction. More details about our locally based staff can be found in Section 4.5.
- **A fully integrated enterprise-wide solution built for self-direction.** As we will fully describe in Section 4.4.10, PPL brings technology capabilities to support enrollment, time capture, payroll processing, Medicaid billing, and customer service all within one custom-built platform. Self-directed services bring unique business requirements to Medicaid long-term care programs. PPL has been navigating these requirements since 1999 and today offers an end-to-end business process with data integration that optimizes efficiencies and effectiveness.
- **An EVV solution that offers multiple modes for compliance.** PPL began implementing electronic visit verification (EVV) technology into our platform years before federal Medicaid rules required it. No other vendor has successful experience operating a fully integrated EVV solution for self-directed programs on the same scale as PPL. Our proprietary Time4Care™ app is one of several time entry options offered by PPL compliant with the 21st Century Cures Act. The full range of our time entry options meets the needs of participants whether or not they have internet access in their home and community.
- **Infrastructure already customized to West Virginia programs.** Every Medicaid home and community-based services (HCBS) waiver with BMS is unique, offering different rules for eligibility and a set of benefits that has been customized for the needs

of the population to be served. In partnership with West Virginia since 2007, PPL has established enrollment guidance, payroll rules and billing standards that all reflect the unique set of West Virginia business requirements. No other vendor has established these state-specific solutions and will need to re-create them over time.

- **Resource Consultants who are part of their communities.** PPL employs dozens of Resource Consultants who live in communities throughout West Virginia. Many of them are long-tenured and have sustained relationships with participants over several years. Twenty-four of PPL's West Virginia-based Resource Consultants have 235 years of combined experience working with members and their families. They are present in local communities, in all 55 counties, volunteer at events like the Special Olympics (Morgantown and Charleston) and participate in events like the Autism Walk of North Central WV. They have supported thousands of members in locating services and resources in their community and in developing spending plans year after year.
- **Engrained understanding of the local culture.** PPL understands the rural nature of West Virginia and the challenges of supporting individuals, locating services, and accessing web-based systems in remote areas. PPL systems and processes are uniquely designed to accommodate folks who are multi-generational, do not have access to the internet, and have different cultural backgrounds.
- **Substantial experience with both fiscal management and resource consulting.** PPL is a leader nationally with states that have their fiscal/employer agent provide both financial management and resource consulting. In addition to supporting these functions in West Virginia since 2007, PPL has performed similar work in Tennessee and New Jersey. PPL capabilities in both areas have helped stimulate program growth in these states. In 2023, PPL will begin to offer both financial management and counseling to self-direction programs in Arkansas.

For all of us at Public Partnerships, the most satisfying result of our work is when the participants we serve share the meaningful difference self-direction makes in their lives. It's an outcome that keeps driving us to innovate self-directed services, to make it easy for members as well as their direct care service workers (DCSW). We're proud to have impacted lives in West Virginia, as reflected in the quote from a parent/DCSW below:

"My job as her mother is to be her advocate and secondly, I am (and my husband too), do everything we can to create the fullest life we can create for her. The freedom that we have to make some choices because we have self-directed care contributes to that, and that's the path we hope for her, and we're grateful to walk it with Public Partnerships" –

Mrs. Green, West Virginia

BACKGROUND

Since 2007, the West Virginia Bureau of Medical Services (BMS) and Public Partnerships have collaborated to grow and expand participant-directed opportunities for West Virginians. Beginning with the Aged and Disabled waiver in 2007, our working partnership has ensured that individuals with any type of disability can self-direct their services. PPL managed the implementation of self-directed service options on the Intellectual and Developmental Disabilities waiver (2011) and the Traumatic Brain Injury waiver (2012). Our management team worked with the Agency to establish all Personal Options policies and procedures and define requirements that were configured in our web portal and financial management system.

In 2018, we began providing Fiscal/Employer Agent (F/EA) Financial Management Services (FMS) for the Take Me Home (TMH) program which proved critical during the COVID-19 pandemic.

In 2020, PPL supported a spike in those self-directing their services when West Virginia added more than 1,200 slots to its IDDW waiver enrollment cap. Eliminating the IDDW waiver waitlist was a major State priority that PPL helped accommodate in the middle of the COVID-19 pandemic.

In 2023, West Virginia is a national leader in participant direction by any measure. The enrollment growth per program, the number of options available to self-direct, total annual budget dollars and range of services are just some metrics demonstrating success. A key factor has been the recognition that Resource Consultant (Information and Assistance (I&A)) is delivered more effectively and efficiently when shared by the Case Manager and F/EA. The roles and responsibilities have been clarified over time in West Virginia and are distinct and complementary. These established working relationships are critical. We understand the distinctions, have the relationships, and know the separate role of the Resource Consultant is necessary, not optional.

The focus of this proposal is to demonstrate to BMS a program process built together and introduce goals, measurable outcomes and approaches that will continue to improve the quality of services. **The collective knowledge and expertise in Personal Options spans all areas of our organization and is exemplified by Katharine Randall. Katharine has been with Public Partnerships and the Personal Options program since the early stages. Katharine has not only served in nearly every role within an FMS, but she has also directly provided Resource Consultation, supervised teams and continues to oversee our performance and adherence to our policies and procedures.** The Public Partnerships West Virginia team will continue to be led by Katharine Randall as Project Manager, employed since 2009, and


Katharine Randall

supported by more than a dozen teammates with a decade or more as Resource Consultants, as well as industry experts behind the scenes making sure operations run smoothly. Our Project Manager is empowered to lead the necessary changes and adjustments to both processes and technologies to ensure our services' efficiency and efficacy over the next contract term. We remain committed to making self-direction easier for all.

Public Partnerships is excited for the future of self-directed services in West Virginia. The company will continue to build on its service delivery strengths and relationships with members and their families, DCSWs, case managers, and State officials. System enhancements will also be refined, and policies and procedures adjusted to improve the quality of services. We do not want a change in FMS vendor to disrupt the lives of West Virginians. Re-enrollment and learning new processes and systems is stressful especially when the member and family are managing daily health challenges. Staff have worked hard, and will continue to do so, to meet our value – to *transform more lives by making self-direction easier for All.*

SECTION 4.2

PROJECT GOALS AND MANDATORY REQUIREMENTS

4.2 PROJECT GOALS AND MANDATORY REQUIREMENTS

Project Goals and Mandatory Requirements: The Vendor should describe its approach and methodology to providing the service described by meeting the goals/objectives identified below. Vendor's response should include any information about how the proposed approach is superior to other possible approaches.

Public Partnerships presents our responses to the itemized Goals and Objectives outlined in Section 4.2 of the CRFP. In summary, we have established processes with the Agency to fulfill the requirements as the F/EA FMS subagent that we have been refining since first working with the Agency beginning in 2007. We recognize that certain processes are working well, and others need reexamination and revision because the program is evolving.

Public Partnerships' approach is superior because we will leverage our strong relationships within the State, our local, dedicated staff who bring a caring enthusiasm and creativity to our solutions, and simple to implement improvements to further our strong foundation for supporting self-direction. We want to highlight five solutions that set us apart:

1. Time4Care EVV-compliant time entry application (see section 4.2.1.145) –
2. Transportation partnership local to WV (see section 4.2.1.11)
3. Podcast, Concierge and Microsite (see section 4.2.1.133)
4. Automation for tracking member admissions (see section 4.2.1.17)
5. National Advisory Committee (see section 4.5.1.2)

4.2.1 Goals and Objectives

4.2.1.1 The Vendor should describe to the Agency how it will provide efficient and cost-effective F/EA FMS as a subagent to the Agency (the Government F/EA FMS agency).

Public Partnerships has partnered with the Agency for 16 years to expand self-directed options across the State. We began in 2007 designing and implementing the participation-directed option for the Aging and Disabled Waiver (ADW) services. A hallmark of the design was giving the F/EA FMS a role in providing Information and Assistance (I&A) (i.e., Resource Consultants) in support of self-direction. F/EA FMS is a social service at its core and maximizing efficiency means effectively collaborating and communicating across stakeholders. The I&A Resource Consultant provides an additional ally on the member's team to coordinate service delivery and service authorization management with the Case Manager. Public Partnerships has emerged as the leader of F/EA FMS provision by providing our staff, members/representative employer direct care service workers (DCSW), and service providers with useful technology and straight forward processes to make managing self-directed services quick and easy.

Efficiency

Our staff, including Program Supervisors, Resource Consultants, and Customer Service Representatives, have established relationships across the State. We collaborate daily with members, their workers, provider agencies, and Case Managers. We have longstanding and trusted relationships with staff at the West Virginia Tax Division, in municipalities across the State, and with the Kepro, Gainwell, and Bureau of Senior Services (BoSS) staff. These relationships facilitate communication and problem-solving that enhances and sustains our efficiency. PPL differentiators that create efficiencies include:

Institutional Knowledge Processes developed in conjunction with Agency staff and with input from members, employers, DCSWs, vendors, Case Managers, and other stakeholders.

- *Proof point*: The social service delivery system is most efficient when each stakeholder understands the other's roles and responsibilities within the process.

Asset to Case Managers Clear and timely communication with Case Managers because of our knowledge of Personal Options and the Take Me Home program, as well as experience performing the F/EA FMS functions.

- Proof point: To avoid false starts in services, double billing during hospitalizations, and overutilization, working relationships with Case Managers are imperative.

Taking Time to Explain Complete, in-person orientation for members, representatives, and DCSWs to self-direction during an enrollment home visit.

- *Proof points:*
  - Our staff thoroughly train the member/representative employer about being a Common Law Employer, as well as train DCSWs on caregiving responsibilities
  - We emphasize training on Electronic Visit Verification (EVV), which reduces mistakes in time submission or service utilization that add administrative burden to all stakeholders.

Streamlined Authorization Process Service authorization data accuracy established between the Electronic Data Interchange (EDI) with the Utilization Management Contractor (UMC) vendor Kepro and our fully integrated self-direction enterprise portal, eliminating errors in payments and billing.

- *Proof point*: Our service claim denial rate is less than 1%, eliminating the time that Agency and Case Management staff would otherwise spend assisting in denial clarification and resolution.

Overall, PPL's experience, relationships, and commitment to continuous improvement in West Virginia over 16 years is what powers our efficiency as the F/EA FMS provider.

Cost Effectiveness

PPL's efficiency drives our cost-effectiveness. Our experience as a trusted partner to all of the stakeholders of the self-directed service model in West Virginia makes their daily experiences easier, saving time and resources across the delivery system. We understand that cost-effectiveness is achieved through superior people, processes, and systems.

1. PPL has 5,000 existing relationships with members/representative-employers and another 7,000 with DCSWs across West Virginia. We make self-direction easier for all by offering:
    - Superior training that provides clarity of roles and responsibilities
    - A 21st Century Cures Act compliant time capture solution that is fully integrated with our enterprise IT portal. Our mobile application, Time4Care, is easy to use and provides multiple options for compliance
    - An efficient process for hiring new DCSWs or adding service providers
    - Support for spending plan development that empowers members and their families
    - On-going support and problem-solving
2. We deliver budget utilization reporting to the Agency monthly, providing member-level spending detail allowing both the Agency and Public Partnerships to monitor and adjust to trends.
3. Our Resource Consultants continue to provide full-service I&A to Aged and Disabled waiver members at the same rate as all other members.
4. Public Partnerships maintains a sufficient line of credit to meet the 3-month service spend requirement of the Agency. Since the COVID-19 pandemic, the cost of capital has been on a steady rise, and interest rates are at historic highs in 2023.
5. The Agency reimburses the F/EA FMS approximately 90 days in arrears equating to approximately $3.75M in organizational operating capital.

Public Partnerships' successful track record with Kepro and the Bureau of Senior Services (BoSS), alongside positive Medicaid audits, is evidence that we deliver services in compliance with federal and state regulations and are fiscally sound.

4.2.1.2 The Vendor should propose systems, policies, procedures, and internal controls to perform the F/EA FMS tasks as a subagent listed in the Scope of Work below. This includes how adjustments would be made to respond to Agency needs, as well as any changes in State or Federal regulations that may occur during the contract period.

4.2.1.2.1 The Vendor should be the Subagent to the West Virginia Government F/EA FMS agency (the Agency) and should be wholly responsible for completing all Subagent-F/EA FMS and deliverables.

4.2.1.2.2 The Vendor should participate in a Subagent-F/EA FMS Readiness Review, if requested by the Agency; and should provide the findings within thirty (30) calendar days of request.

4.2.1.2.3 The Vendor should participate in an annual Subagent-F/EA FMS - Ongoing performance Review, if requested by the Agency.

4.2.1.2.4 The Vendor should prepare a plan of correction that addresses the findings of the Subagent-F/EA FMS Readiness Review/Ongoing Performance Review and a timeline for implementation, as needed.

4.2.1.2.4 The Vendor should prepare a plan of correction that addresses the findings of the Subagent-F/EA FMS Readiness Review/Ongoing Performance Review and a timeline for implementation, as needed.

PPL collaborated with BMS in 2007 to draft the initial policies and procedures(P&P) for Personal Options. Per PPL policy, we review and revise policy and procedures annually. All of our departments stay current on federal and state rules and industry best practices. For the past 16 years, we have successfully implemented new programs, facilitated significant increases in waiver slots, implemented the 21st Century Cures Act Electronic Visit Verification (EVV) requirement as well as a National Provider Identifier (NPI) for every DCSW, and modified our approaches to daily operations during the COVID-19 global pandemic all of which have required effective policy, procedure, and processes.

We organize each procedure to include: the primary responsible party, a backup resource, detailed instructions inclusive of system screenshots, and applicable troubleshooting guidance. Since we include details about service level agreements and performance expectations, upon contract award, we will review and update existing procedures to bring P&Ps current with the new contract.

Our West Virginia self-directed programs and operations manual includes more than 50 distinct policies and procedures. In each functional area (e.g., payroll, billing) supervisory staff are responsible for annual reviews of P&Ps and proposing continuous improvement. All new hires review critical policies and procedures for their role within the FE/A FMS operations and with annual training during team meetings. Our Project Manager will be responsible for communicating updates to all cross-functional teams to ensure all staff responsible for executing our procedures are informed and knowledgeable.

Public Partnerships' ability to make program adjustments is driven by our self-direction and long-term care policy expertise. From a policy standpoint, our strategy and technical assistance team for self-direction exceeds expectations. The strategy and technical assistance team is comprised of staff who have extensive networks within CMS, have co-authored countless national publications on self-direction and the role of the fiscal intermediary, and are multi-time presenters at the National Home and Community Based Services conference.

Our Policy & Procedures for West Virginia Combine National and Local Expertise

Organizationally, PPL is structured as a functional matrix this enables each client access to subject matter experts in each functional area. Each of those designated subject matter experts define our operational procedures in support of the policy.

Sandy Kasprzak, Vice President, Client Success is an innovative and visionary human service professional with over 30 years of experience that includes 25 years implementing and providing contractual and operational oversight of self-directed service options. Sandy is a well-known, highly respected, and engaged leader in the national consumer direction community. She will continue to provide Executive oversight to the West Virginia team working directly with the Project Manager and the Agency. She has been the Executive leader since 2020 and understands the unique needs of the Agency and the individuals served through its programs. Together with the Project Manager, they are the primary point of contact for the Agency as well as the internal teams to ensure delivery of services. She will continue to provide national insights for policy support.

Roni Zaletel, R.N. Vice President, Customer Experience is a Registered Nurse who brings over 30 years of long-term services and supports experience, including 11 years directing clinical & care management operations within Medicaid/Medicare managed care organizations. She is skilled at managing large teams that support specialty waiver populations and implementing self-directed care programs. She oversees our Customer Service and Information and Assistance teams. She will use this experience to support the Resource Consultant role and support the implementation of workflows and processes for case management services needed for the proposed state plan population.

Jason Ramos, Vice President, Advanced Analytics brings more than a decade of project management experience that is informed by data analytics. He has extensive experience managing projects, driving quality improvement outcomes, and creating operational efficiencies. Jason and his team have access to all source data across our enterprise financial management system to measure our performance against service levels and to trend information like call center volumes. His team will be responsible for development and maintenance of all data reporting in compliance with program requirements.

Christine Grant, Director, Financial Operations has more than 15 years of financial and operational management experience. Christine oversees PPL's Financial Operations Center, ensuring that proper quality controls are in place so that wages, taxes, voluntary and involuntary deductions are calculated accurately. Her team is responsible for all payments to DCSWs. In addition, she leads a team that is accountable for the management of Unclaimed Property, Garnishments, and compliance related reporting. She will collaborate with our Project Manager should any potential payroll, tax, or other financial issues arise.

Emery Boehm, Senior Director, Enrollment is a passionate human service professional with national operations and leadership experience in administering Medicaid self-directed program services. He has significant experience with project implementation and management of enrollment requirements for large, medium, and small-scale contracts. He has established a lasting process improvement track record focused on compliance, policy and regulation, and service efficiencies. He will collaborate with our Project Manager to provide operational leadership and oversight for all enrollment-related activities, including optimizing enrollment of the proposed state plan population.

Ken Henry, Senior Director, Customer Service has almost 15 years of experience managing

financial operations and customer experience associated with Medicaid programs. Ken uses his knowledge and expertise in FMS F/EA financial operations as a foundation for building a well-trained and knowledgeable customer service team to serve our clients. In addition to managing our Customer Service team, Ken is also responsible for oversight of our escalations team who provide resolution and root cause analysis for emergent issues. He will coordinate with our Project Manager to ensure our Customer Service team is current on West Virginia programs and related communications.

Suzanne Crisp, Senior Advisor is regarded as one of the most influential leaders in the field of self-direction and HCBS policy and regulation. Before joining PPL, Suzanne headed the National Resource Center for Participant Directed Services technical assistance efforts. Topics ranged from designing, implementing, and managing self-directed programs with a focus on quality oversight. She continued supporting self-direction by assisting the Center for Medicare & Medicaid Services (CMS) to develop models to embed self-direction into federal authorities. She is a co-author of the F/EA Core Standards - a set of standards the leading fiscal intermediaries agree are industry best practices. She will be available to the West Virginia team as a subject matter expert.

Public Partnerships experts have collaborated over the years to ensure that national best practices are known and implemented with a sound understanding of self-direction in West Virginia.

Further, we adjust our policies and procedures using the feedback from our Resource Consultants serving the members directly every day. Our WV staff includes ten resource consultants each with over a decade of experience explaining Personal Options policy and procedure, soliciting feedback, and relaying it to our program, operations, finance, and information technology staff. Our general approach to systems, policies, procedures, and internal controls to perform the F/EA FMS is person-centered and has always been driven by the voice of the member.

State or Federal changes impacting our operations or information technology systems run through a standard assessment process. Each proposed change begins with an in-depth review by staff and a briefing of the operation and information technology teams. Our Project Manager is responsible for writing up the change request, identifying all key staff, and the deliverables, and setting the timeline for completion. Our Project Manager will review the change, our understanding, solution, and timeline for completion with the Agency. During our time in West Virginia as the F/EA FMS our most notable responses to change have been implementing self-direction on the IDD waiver, followed by the TBI waiver, and then assuming management of the Take Me Home program.

Internal Controls Through Technology

Adherence to policy and procedure is always vulnerable to human error. Therefore, our staff and processes are supported by our customized F/EA FMS for the Personal Options programs and Take Me Home program. Key technology and internal control features provided by PPL include:

- An Electronic Data Interchange (EDI) with the Agency's Utilization Management Contractor (UMC) ensures service authorization integrity.
- Unique identifiers for Members (WV Medicaid IDs) and DCSWs (NPIs) as an internal control for service billing integrity.
- Member/Employer and DCSW checklists that provide documentation and payment integrity
- Accessible documentation through a web portal to support all UMC, BoSS and CMS audit requests

4.2.1.2.1 The Vendor should be the Subagent to the West Virginia Government F/EA FMS agency (the Agency) and should be wholly responsible for completing all Subagent-F/EA FMS and deliverables.

Public Partnerships has functioned as the Subagent to the West Virginia Government F/EA FMS agency for 16 years. We currently have an IRS Form 2678 signed and dated with the Agency as the appointed subagent for approximately 5,000 members and complete all Subagent-F/EA FMS tasks and deliverables described in detail within this proposal.

4.2.1.2.2 The Vendor should participate in a Subagent-F/EA FMS Readiness Review, if requested by the Agency; and should provide the findings within thirty (30) calendar days of request.

Public Partnerships will participate in a readiness review within 30 calendar days of request to demonstrate existing or proposed systems and processes. As an FMS member of the national self-direction technical assistance group, Applied Self Direction, we have drafted and complied with their Fiscal/Employer Agent Core Standards, which are often the basis for state readiness reviews.

4.2.1.2.3 The Vendor should participate in an annual Subagent-F/EA FMS - Ongoing performance Review, if requested by the Agency.

Public Partnerships has participated in annual Subagent- F/EA FMS performance reviews in collaboration with BMS and the Utilization Management Contractor. The annual quality reviews have been conducted by Kepro for the Intellectual and Developmental Disability and Traumatic Brain Injury waivers and the WV Bureau of Senior Services for the Aged and Disabled waiver. Our staff have consistently provided all documentation

*Public Partnerships in **16 years** as the Subagent F/EA FMS, has **never failed** the WV Quality Audit.*

and readily followed through on qualitative improvement recommendations and supplied supporting documentation. PPL has completed audits on the following schedule:

- Aged and Disabled Waiver, September 2022
- Traumatic Brain Injury Waiver, November 2022
- Intellectual and Developmental Disabilities Waiver, February 2023

4.2.1.2.4 The Vendor should prepare a plan of correction that addresses the findings of the Subagent-F/EA FMS Readiness Review/Ongoing Performance Review and a timeline for implementation, as needed.

Our management team will lead the planning for any corrective action that results from a readiness review and present a timeline for completion. The project manager will identify other team members from applicable areas (e.g., operations, billing) responsible for addressing the finding, if applicable.

4.2.1.2.5 The Vendor should prepare and maintain a Quality Management System to ensure that its systems, policies, procedures, and internal controls for each Subagent - F/EA FMS are performed as required.

PPL has an integrated quality management system and quality assurance process to ensure the program is in full compliance with federal and state rules and laws, program regulations, and organizational processes. Policies and procedures are established with Internal controls. Continual data gathering determines compliance with policy and procedures. If outcomes or quality controls are not met, action steps are put in place to improve quality. This is a cyclical process for improvement.

Figure 1. PPL's Cyclical Quality Process Improvement

Establishing Policy and Procedures and Internal Controls

Figure 2. Policy and Procedure process.

The West Virginia team managers and supervisors are responsible for both maintaining documented policies and procedures and consistently ensuring adherence. PPL has a WV policies and procedures manual documenting the subject, policy statement, the responsible operations supervisor and team, the associated procedures, and quality control. Our F/EA FMS operations are ***functionalized*** across the core areas of payroll, tax compliance, project management, customer experience, business process management, and enrollment. Those procedures requiring process flows and chains of approval include the contractual service level agreement. Our WV Project Manager and supervisory team review and revise all existing policies and procedures annually. Revised or new policies and procedures are submitted to the Agency for review and approval. The Project Manager, Katharine Randall, and the respective area supervisor are responsible for the distribution of and training to the policy and procedure.

Gathering Outcome Data - F/EA FMS Technology System that Drives Compliance

Public Partnerships has always invested in building our own F/EA FMS technologies given the range of functions and requirements. Our FMS platform is truly end-to-end with all core components directly interfacing through a shared database. This approach allows us to configure "good to serve" criteria for each self-directed option to ensure unique waiver and/or program requirements are met.

Examples of metrics include:

- Participant Enrollment, including the time between a referral and first phone contact, is measured and reported monthly on the Discovery and Remediation report.
- Employee enrollment time frames
- Measures for payment processing, including:
    - On-cycle versus off-cycle payments
    - Pended payment and reason
    - Partial payments and reason
- Customer service measures qualitative and quantitative adherence to our policy of *first-call resolution* and time to live answer. Metric data is displayed in Figure 1 below.
- Customer Satisfaction Surveys
    - Call center surveys
    - Enrollment and training satisfaction surveys
- Customer Complaints
- EVV Compliance
- Termination Reasons

The Operational Supervisor Monitors performance via data. The Project Manager and Supervisors access daily, weekly, and monthly reports to determine whether defined outcomes are achieved.

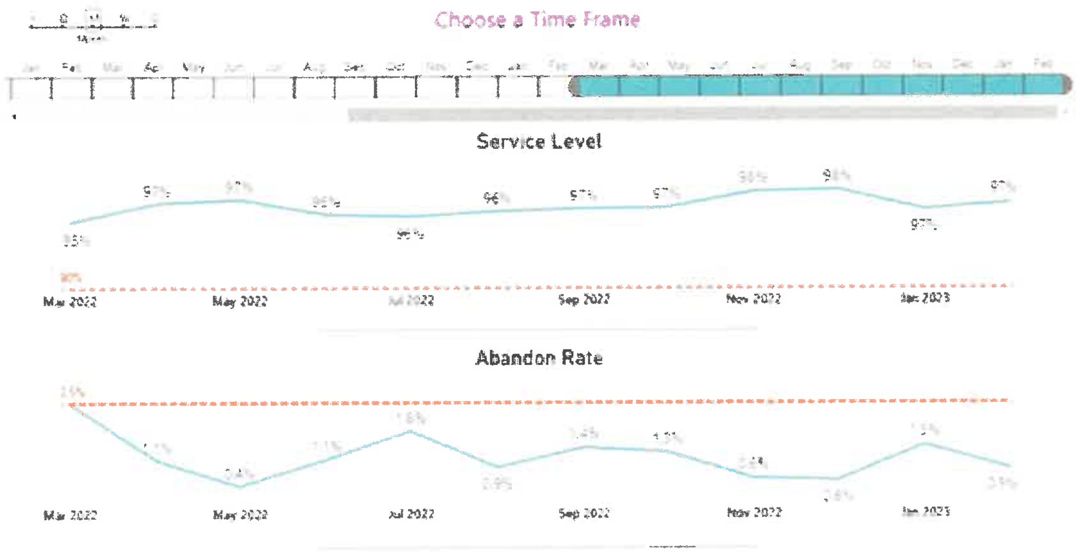


Figure 3. Aggregated Service Levels indicate speed of answer and live answer.

Reviewing Findings

PPL IT Team produces a variety of reports on a daily, weekly or monthly schedule from data captured in the integrated system. The Project Manager regularly reviews the reports and works with the West Virginia team to make sure quality outcomes or internal controls are met. PPL Department Managers use the same process. The project Manager and Department Managers report outcomes to the Executive Leadership Team who provide improvement feedback. PPL has a motto - "data does not lie" - which is why so much effort goes into system design.

Implementing Quality Improvement Strategies

If outcome measures or internal controls are not met or customer feedback indicates room for improvement, quality improvement Action Steps are identified and implemented. Policies and procedures may be revised as a result. The quality improvement cycle has come full circle and is continuing.

4.2.1.2.6 The Vendor should prepare a Transition Plan that addresses when/if the Vendor is ending its contract with the Agency and no longer will provide Subagent - F /EA FMS to the Agency and the functions/forms to be closed out by the Vendor and are transitioning to a new Vendor, giving the Agency at least sixty (60) calendar days' notice.

Should circumstances ever require it, Public Partnerships will prepare and submit a Transition Plan giving BMS at least sixty (60) calendar days' notice if we intend to end our contract. PPL's team of project management professionals and subject matter experts will ensure this is done timely and accurately. We provide more detail about our approach to transitions in Section 4.4.20. PPL will continue to work tireless to avoid this disruption for members and their families, DSCWs case managers and state officials.

4.2.1.3 The Vendor should maintain systems, policies and internal controls that comply with Agency, Chapter 600, Reimbursement Methodologies of the West Virginia provider manuals.

Public Partnerships has configured our service and administrative claiming systems and established policies and procedures specific to the West Virginia self-directed services. Our proprietary Medicaid billing system is integrated with our budget/service authorization database and payment system to ensure service claim integrity. Service claims are submitted in electronic 837P format per the Gainwell MMIS companion guide. Our claims files also meet National Level 1 CPT and II HCPCS code requirements.

Public Partnerships understands the reimbursement methodologies to the provider and understands Medicaid is a secondary payer and their relationship with Medicare.

4.2.1.4 The Vendor should provide additional services to comply with externally driven changes to Agency programs and requirements, including any state or federal laws, rules, and regulations. Services provided by the Vendor may include assistance with policy development, impact analysis, requirements definition and testing activities that require substantial subject matter expertise derived from experience in other states, other healthcare organizations or participation in federal activities. The Vendor should provide implementation support as requested.

The self-directed options in West Virginia have both changed and expanded in numerous ways over the past 16 years. We worked closely with the Agency to roll out the Take Me Home program in 2018, which positioned us well when the Agency requested that we be ready to support a large number of transitions from nursing homes amid the COVID-19 pandemic. Although the increase in transitions did not materialize, PPL distributed Covid Provider Relief payments in 2020. In the last two years since we launched Electronic Visit Verification (EVV) in March 2021, PPL has complied and supported the expansion of our payment processing services to include Personal Emergency Response System (PERS) purchasing, payment of therapies on the IDD waiver and use of national provider identifications numbers for DCSWs. This demonstrates our ability to provide additional resources when needed.

Our response to external changes includes leveraging our in-house experts like Suzanne Crisp, Sandy Kasprzak, and Katharine Randall, reaching out to trusted associates at federal agencies such as the HHS Administration for Community Living (ACL) and the Centers for Medicare and Medicaid Services (CMS), collaboration with other industry leaders at Applied Self-Direction, and communicating changes organizationally so that we are continually prepared.

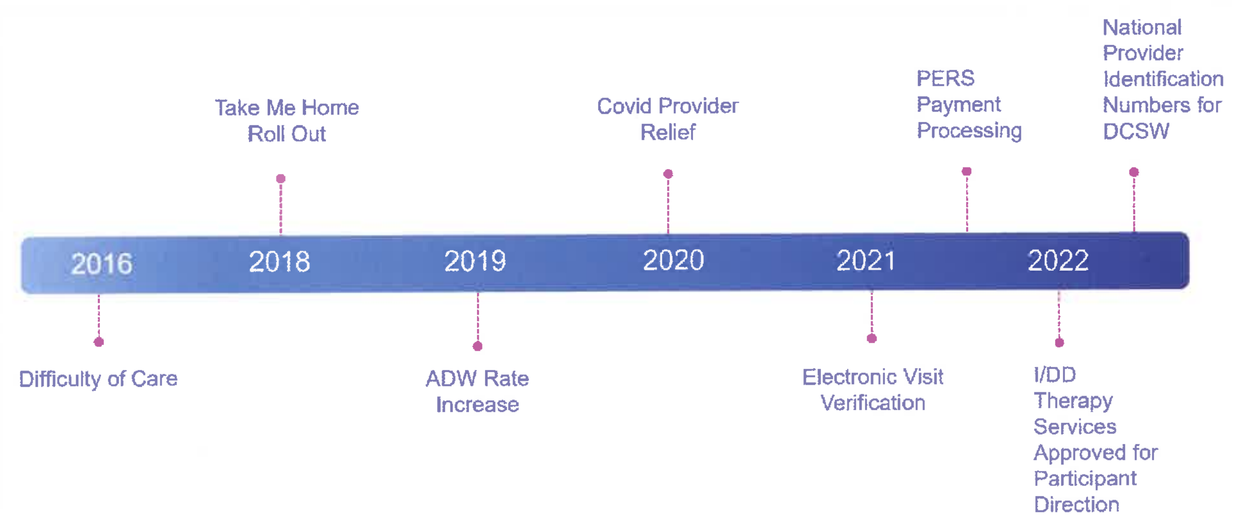


Figure 4. Timeline of Changes.

4.2.1.5 The Vendor should prepare and maintain a West Virginia-specific, Comprehensive Subagent-F/EA FMS Policies and Procedures (P&P) Manual that documents the systems, policies, procedures, and internal controls used to perform and monitor the effectiveness of all Subagent-F/EA FMS functions and tasks in West Virginia. The Manual should be submitted in a mutually agreed upon electronic format to the Agency for review and approval thirty (30) calendar days prior to implementing Subagent-F/EA FMS. The P&P Manual should be updated to reflect changes when they occur, and a current version of the manual should be available to the Agency at all times.

Public Partnerships has developed and implemented policies and procedures for each core Sub-agent F/EA FMS function and task as part of a West Virginia Programs Operational Guide. Our Project Manager ensures that all PPL department policies and procedures are current and that internal controls are in place. Public Partnerships will submit revised policies and procedures in both paper and electronic formats to the Agency for review and approval within 30 calendar days before project implementation. We will always make the current version of the manual available to the Agency.

4.2.1.6 The Vendor should apply for and receive approval from applicable Federal and State agencies to act as the Subagent to the Agency (as Government F/EA FMS) and to members/representative-employers in the ADW, IDDW and TBIW programs as well as participants in TMH. To do so, the Vendor should have a system in place and written policies, procedures, and internal controls to complete the following tasks:

4.2.1.6.1 The Vendor should use its own separate Federal Employer Identification Number (FEIN) to file IRS Forms and deposit Federal taxes.

4.2.1.6.2 The Vendor should describe its plan/process to execute IRS Form 2678, Employer/Payer Appointment of Agent, with the Agency (Government F/EA FMS agency) per IRS instructions.

4.2.1.6.3 The Vendor should execute an IRS Form 8821, Tax Information Authorization with the Agency (Government F/EA FMS agency).

4.2.1.6.4 The Vendor should renew the IRS Form 8821, Tax Information Authorization with the Agency (Government F/EA FMS agency) periodically per IRS instructions.

4.2.1.6.5 The Vendor should describe its plan/process to execute IRS Form 2678, Employer/Payer Appointment of Agent between the Agency (Government F/EA FMS agency) and each member-employer and retain the executed Form in the member-employer's file at the Vendor's location.

4.2.1.6.7 The Vendor should facilitate the execution of an informed consent statement between the Agency (Government F/EA FMS agency) with each member/representative-employer acknowledging the member/representative-employer is informed the Government F/EA FMS agency is using a Subagent, the tasks the Subagent is performing and that the member-employer agrees.

4.2.1.6.8 The Vendor should file a West Virginia Forms WV-ARI-001, Authorization to Release Information authorizing the West Virginia State Tax Department to release information to the Vendor regarding the member/representative-employer's West Virginia state income tax withholding tax and unemployment tax to the Subagent-F/EA FMS.

4.2.1.6.9 The Vendor should file West Virginia Forms 2848, Authorization of Power of Attorney informing the West Virginia State Tax Department that the member/representative-employer authorizes the Subagent-F/EA FMS to receive and sign the tax forms listed relative to state income tax withholding and unemployment insurance taxes.

4.2.1.6.10 The Vendor should implement revisions, additions and discontinuations of federal, state, and local government forms pertaining to the self-direction of HCBS.

Public Partnerships has applicable approval from Federal and State agencies to perform all Subagent F/EA FMS tasks as described below.

4.2.1.6.1 The Vendor should use its own separate Federal Employer Identification Number (FEIN) to file IRS Forms and deposit Federal taxes.

Public Partnerships maintains a separate Federal Employer Identification Number (FEIN) to file IRS forms and deposit taxes for the West Virginia Personal Options programs. We have a copy of our SS-4 and IRS Confirmation on file with the Agency.

4.2.1.6.2 The Vendor should describe its plan/process to execute IRS Form 2678, Employer/Payer Appointment of Agent, with the Agency (Government F/EA FMS agency) per IRS instructions.

Public Partnerships has maintained an Internal Revenue Service (IRS) Form 2678 with the Bureau for Medical Services (BMS) since 2007. We will continue to sign any update to Form 2678 required by the Agency.

4.2.1.6.3 The Vendor should execute an IRS Form 8821, Tax Information Authorization with the Agency (Government F/EA FMS agency).

Public Partnerships maintained an Internal Revenue Service (IRS) Form 8821 with the Bureau for Medical Services (BMS) from 2007 – 2018. In 2018, the IRS 8821 was no longer deemed necessary to maintain on an ongoing basis; however, if a tax matter requires the presence of the 8821, Public Partnership and BMS have agreed to execute one as necessary.

4.2.1.6.4 The Vendor should renew the IRS Form 8821, Tax Information Authorization with the Agency (Government F/EA FMS agency) periodically per IRS instructions.

Public Partnerships maintained an Internal Revenue Service (IRS) Form 8821 with the Bureau for Medical Services (BMS) from 2007 – 2017. In 2017, the IRS 8821 was no longer deemed necessary to maintain on an ongoing basis. However, if a tax matter required the presence of the 8821 Public Partnership and BMS has agreed to execute one as necessary.

4.2.1.6.5 The Vendor should describe its plan/process to execute IRS Form 2678, Employer/Payer Appointment of Agent between the Agency (Government F/EA FMS agency) and each member-employer and retain the executed Form in the member-employer's file at the Vendor's location.

Upon receipt of a referral, our resource consultant schedules an enrollment visit with the member. During the visit, they explain the role and responsibilities of being a Common Law Employer of record and explain that signing the IRS Form 2678 appoints Public Partnerships as their payroll agent allowing us to pay their workers. The signed and dated Form 2678 is sent to the Internal Revenue Service for processing and a copy is stored in our online portal in PDF format. Currently, PPL is appointed the payroll agent for 5,000+ employers in West Virginia

4.2.1.6.6 The Vendor should facilitate the execution of an IRS Form 8821, Tax Information Authorization between the Agency (Government F/EA FMS agency) and each member-employer with Vendor's staff reported as a second appointee on the Form and maintain a copy of the executed Form in the member-employer's file.

PPL received BMS approval in 2017 to cease collecting Form 8821 to reduce the administrative burden on the members. Form 8821 is no longer required by the IRS to provide services for a Home Care Service Recipient (HCSR). Form 2678 provides sufficient authority to act on behalf of the member/representative-employer. If further authorization is required to address a specific tax situation, we will request Form 2848 to grant Public Partnerships authorization to work with the IRS for the specific tax type and tax period as needed. Form 2848 grants total authority for the time period indicated on the form, unlike Form 8821 which grants only limited authority.

4.2.1.6.7 The Vendor should facilitate the execution of an informed consent statement between the Agency (Government F/EA FMS agency) with each member/representative-employer acknowledging the member/representative-employer is informed the Government F/EA FMS agency is using a Subagent, the tasks the Subagent is performing and that the member-employer agrees.

Upon receipt of a referral, our resource consultant schedules an enrollment visit with the member to explain the informed consent form and our role as a payroll agent. Public Partnerships includes a Sub-Agent Agreement approved by BMS in our enrollment packet. We explain that Public Partnerships is the Bureau's sub-agent, acting on their behalf to manage worker payroll and tax reporting. The resource consultant also highlights that BMS is not the Common Law Employer; they are being hired by the member. A signed and dated copy is stored on our web portal in PDF format.

4.2.1.6.8 The Vendor should file a West Virginia Forms WV-ARI-001, Authorization to Release Information authorizing the West Virginia State Tax Department to release information to the Vendor regarding the member/representative-employer's West Virginia state income tax withholding tax and unemployment tax to the Subagent-F/EA FMS.

Under guidance from the West Virginia State Tax Department, Public Partnerships is not required to collect Form WV-ARI-001. Form WV-2848 gives sufficient authorization to release information regarding the member-employer's West Virginia state income tax withholding tax and unemployment tax. PPL checks regularly to ensure there are no changes to this ruling.

4.2.1.6.9 The Vendor should file West Virginia Forms 2848, Authorization of Power of Attorney informing the West Virginia State Tax Department that the member/representative-employer authorizes the Subagent-F/EA FMS to receive and sign the tax forms listed relative to state income tax withholding and unemployment insurance taxes.

The Resource Consultant reviews Form WV-2848 during the home visit (this is a State form). They explain that signing allows Public Partnerships to apply for an account with the State Tax Department to pay State income tax and unemployment insurance tax on their behalf. The signed and dated Form WV-2848 is submitted to the WV State Tax Department and a copy is stored on our web portal in PDF format.

4.2.1.6.10 The Vendor should implement revisions, additions and discontinuations of federal, state, and local government forms pertaining to the self-direction of HCBS.

Our WV F/EA FMS management team meets with BMS monthly for steering committee meetings intended to ensure ongoing discussion of looming program changes. When either BMS or Public Partnerships becomes aware of a possible Medicaid or state-level change impacting the program enrollment forms we document the requirements and meet internally with the appropriate operations group on processing and our information technology team on incorporating the form or change into our WV web portal.

4.2.1.7 The Vendor should have a web-based portal to which referrals and prior authorizations for services are issued by the State's Utilization Management Contractor (UMC) for members who have chosen self-direction.

4.2.1.7.1 The Vendor should enroll with the UMC's system to input and obtain data regarding members' eligibility, services, and other pertinent information.

Public Partnerships has built a proprietary F/EA FMS web portal tailored to the West Virginia self-directed options. This is an end-to-end accounting and information system designed to ensure program integrity and Medicaid compliance. Our FMS technologies begin at the time of a member's referral through service claim reconciliation. This technology solution integrates member/provider administrative requirements with service authorizations housed in an accounting application to ensure accurate DCSW payment processing. The FMS is agile enough to keep pace with evolving State and Medicaid policy and regulation changes through a modularized infrastructure. The modularized approach and overall integration account for the four key compliance and integrity components: Service Detail, Pre-Claim Adjudication, Payment Processing, and Service Billing.

Public Partnerships has an established secure file exchange process with BMS and Kepro for receipt of referrals and processing. Our information technology team members have a working relationship with Kepro (i.e., UMC contractor) and an established file exchange of Excel files that include newly referred members and service authorization changes. We import these files into our financial management system and make them accessible to participants through our WV Personal Options web portal. The financial management system includes integrated payment processing and service-claiming file outputs to ensure the highest level of service-claiming integrity.

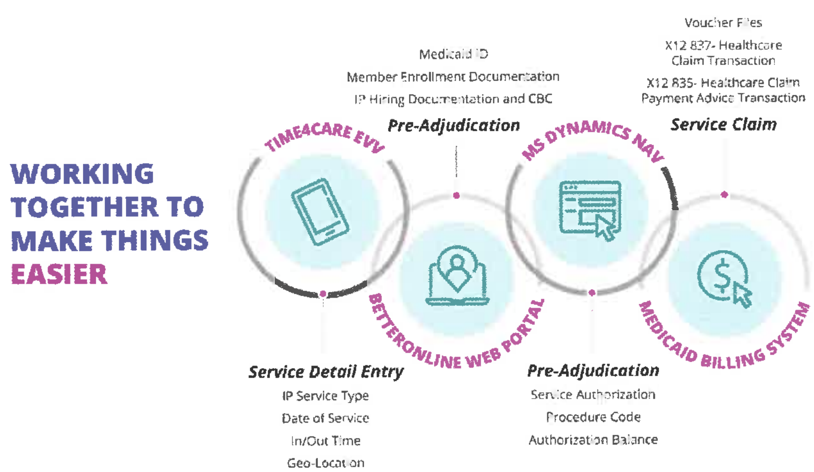


Figure 5. How PPL works together.

4.2.1.7.1 The Vendor should enroll with the UMC's system to input and obtain data regarding members' eligibility, services, and other pertinent information.

All Public Partnerships' in-state management and resource consultant staff are currently registered users of the UMC's system, the CareConnection®. We are knowledgeable and experienced with the CareConnection and our staff log in each day to receive information from and provide information to the UMC. The CareConnection is essentially an information hub that many users rely upon for data and information—i.e., BMS, the Utilization Management Contractor, Bureau of Senior Services, agency Case Managers, and Service Coordinators. In addition to providing required data through CareConnection, our staff uploads important documents about the participants' medical eligibility and self-directed budgets, such as the Medical Necessity Evaluation Request for ADW participants and Spending Plans for IDDW participants.

Public Partnerships Electronic Data Interface (EDI) Capabilities

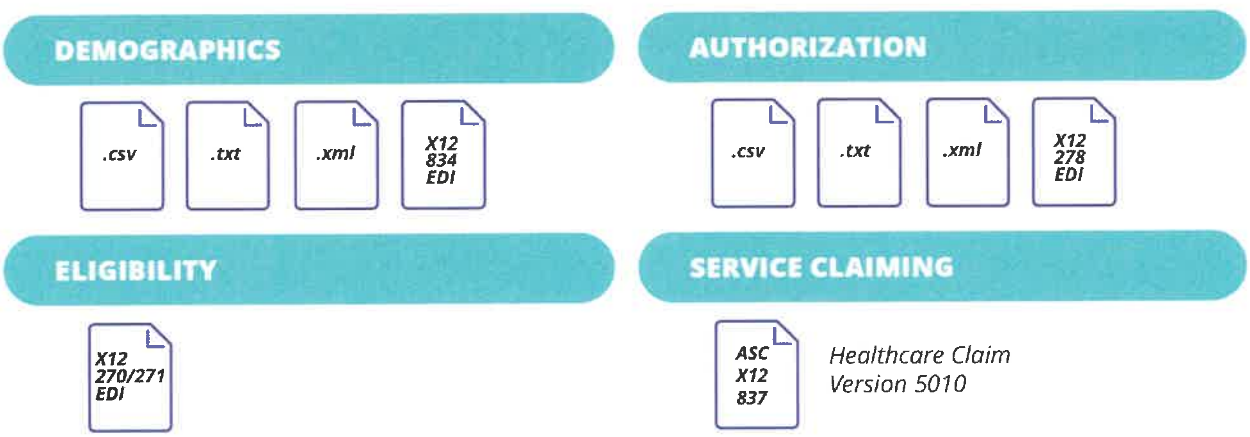


Figure 6. File types.

4.2.1.8 The vendor should be capable of adding and removing services and/or changing service rates in its processes and systems within sixty (60) days of notification by the Agency at no additional cost.

During the COVID-19 pandemic, Public Partnerships saw unprecedented DCSW rate changes across all self-directed programs. Rate changes require extensive communication and coordination with the participant, DCSW, case manager/support coordinator, and BMS management. As a result of the volume of rate changes, we identified a configuration issue in our financial management system, which made the process cumbersome. As a result of the discovery of system limitations, we have made configuration updates to improve the rate change processes. In fact, the most recent service rate change requested by BMS for the Personal Options programs was completed in under 30 days.

*The most recent service rate change requested by BMS for the Personal Options programs was completed in **under 30 days.***

The updated configuration of our financial management system allows Public Partnerships to make aggregated rate changes by service type, expediting the entire process. Upon notification of a change in a service rate, our account management team opens a rate change request within 2 business days to our information technology team. Our technology team executes the rate change script in our test environment and the QA team runs diagnostics to validate each employer–DCSW combination for validity. Upon confirmation of all testing output, the script is run in the production environment overnight and final validation testing is performed the following morning. This revised process and technology will allow all future rate changes to be completed within 60 days we completed our most recent rate change for West Virginia in fewer than 30 days.

4.2.1.9 The Vendor should enroll with the State's Medicaid Management Information System (MMIS) and obtain a West Virginia Medicaid Provider ID to submit claims electronically to the Agency through the State's claim system, MMIS, for Medicaid services rendered within ninety (90) calendar days of the date of service and in accordance with the member's spending plan and established service rate(s); and in accordance with Agency billing and contract requirements and procedure codes. Billing should comply with the 42 CFR part 447 including, but not limited to the requirements for timely payment to DCSWs, set forth in 42 CFR part 447.

4.2.1.9.1 The Vendor should regularly monitor the MMIS portal for notifications and information.

4.2.1.9.2 The Vendor should submit member service claims to, and receive payments from, the State's MMIS for Medicaid services rendered to members in compliance with Chapter 600 after services are rendered (See 4.2.1.3).

Public Partnerships currently possesses a West Virginia Medicaid Provider ID and is enrolled with the State's MMIS vendor, Gainwell. We have a proven track record of submitting electronic claims timely every week per the published payroll schedules for the Personal Options programs.

4.2.1.9.1 The Vendor should regularly monitor the MMIS portal for notifications and information.

Public Partnerships has a Revenue Cycle Management (RCM) team with an assigned claiming specialist for the West Virginia program. The claiming specialist and supervisor are both set up for Gainwell portal notifications. Changes impacting self-directed service claiming are raised at our status meetings with BMS.

4.2.1.9.2 The Vendor should submit member service claims to, and receive payments from, the State's MMIS for Medicaid services rendered to members in compliance with Chapter 600 after services are rendered (See 4.2.1.3).

Public Partnerships has invested in the design and development of our own Medicaid billing system for self-directed services. We have established Electronic Data Interchanges (EDI) with Medicaid Management Information Systems (MMIS) including the Gainwell system in West Virginia. We are currently submitting ASC X12 837P Health Care Claims through the Gainwell system. Our system is configurable for all claiming formats and HCPCS medical code sets including 837P encounter claims submitted to Managed Care Organizations.

Public Partnerships' web portal has automated payroll rules and validations to ensure that Chapter 600 requirements are met before submitting service claims to the State's MMIS system.

Subagent-F/EA FMS and RC administrative fees are not submitted to the State's MMIS system. Instead, these fees are invoiced to the Bureau for Medical Services monthly based upon the contractual per-member-per-month (PMPM) rate. In compliance with Chapter 600 rules and the terms of the Vendor's contract, PMPM fees are invoiced only after the F/EA FMS services have been provided.

4.2.1.9.3 The Vendor should submit administrative per-member-per-month (PMPM) claims to the Agency monthly in accordance with Chapter 600 (See 4.2.1.3).

Our administrative billing team currently submits claims to WV BMS for Personal Options services. Each month, the team pulls the prior month's payment ledger entries to determine which member had a payroll activity. The payroll ledger accounts for all financial transactions for the Personal Options program and provides the auditable information behind every per member per month administrative claim. Public Partnerships imports all service authorizations to our proprietary financial management system processes our payroll and generates our service claims using no outside vendor or systems.

4.2.1.10 The Vendor's administrative services should be delivered or billed only for members that have authorizations for the dates of service being billed. All services should be prior authorized at time of enrollment. Administrative services only for TMH participants can begin if authorized by the TMH office up to three (3) months prior to transition to the community. Administrative services for the Waiver programs may not be billed until the date the member's enrollment meeting was completed and the member has at least one DCSW that is qualified to provide paid services.

Public Partnerships has a dedicated authorization team and has established an effective system to ensure that only authorized services are billed to the State's MMIS

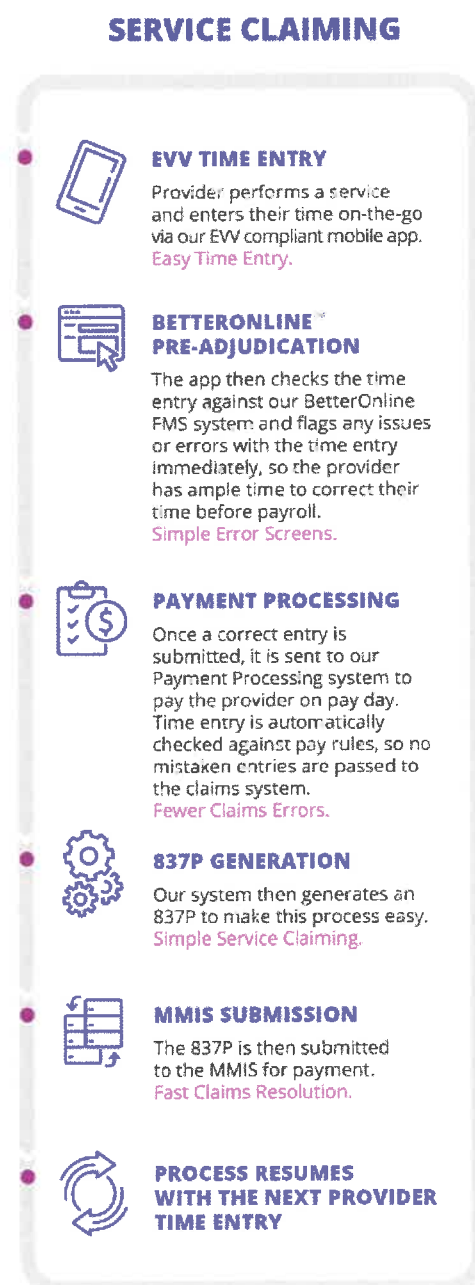


Figure 7. Systems Integration.

system. Services billed are compliant with the type and amounts of services that have been prior authorized for the participant and all services billed fall within the date ranges specified in the prior authorizations. Modifications to prior authorizations and changes to the participants' levels of care are uploaded to our web portal within 24 hours of receipt from the State's Utilization Management Contractor (UMC). This ensures that the data in our system is in sync with the data in the UMC's system.

Public Partnerships bills the Agency for services for F/EA FMS and Resource Consulting after a member has been determined to be fully enrolled in the Personal Options program.

For Take Me Home West Virginia (TMHWV) program participants, PPL collaborated with the Agency and the TMHWV program staff to establish specific policies and procedures for authorization and billing. The enrollment process was defined for referral through the three-month pre-transition period to the community and payment of services.

4.2.1.11 The Vendor should propose a plan to establish and convey its rules and requirements for payroll and invoice payment and develop a rules-based system (i.e., compare its "rules" for paying for Participant-Directed Goods and Services (PDGS), Environmental Accessibility Adaptations (EAA), and other Participant-Directed vendor services, to an actual invoice to determine if the purchase(s) was completed).

Public Partnerships has processed millions of dollars of PDGS, EAA, and vendor-authorized services since the introduction of the IDD waiver in 2012. As with DCSWs, communication across stakeholders on PDGS, EAAs, and other participant-directed vendor services is imperative. The channels must include the participant, the vendor, the Case Manager, Resource Consultant, and Payroll and Invoice Payment Manager to ensure accurate and timely payment.

2022 Transaction Summary

PDGS, EAA and Transportation

$1M Transportation
$385k PDGS
$1.3M Total Paid

10 EAAs
100+ Providers paid
10 Different Procedure Codes

Figure 8. PDGS Transaction Summary

Public Partnerships plan is to streamline the processes for PDGS, EAA, and other participant-directed vendor services, as much as possible given inherent differences in current procedures, e.g., Kepro provides authorizations for PDGS and EAA but not therapies. We will expand our use of a corporate credit card to minimize the use of checks and expand online purchase options. Our overarching approach will be to provide timely, flexible, and efficient review and processing of vendor packets and payment forms, and to collect and archive invoices or receipts to confirm the purchase was completed.

As we examine how best to streamline our processes, it is important to understand the nuanced differences across programs, as illustrated in the table below. In particular, we currently follow a hands-on approach for Take Me Home, where our Project Manager and Payroll and Invoice Manager work directly with the TMH Program Manager to receive requests and often make purchases using a corporate credit card, distinct from the formalized process for PDGS, EAA, and therapies. The system is configured to allow purchases based on the defined business requirements.

Table 1. PDGS Across WV Programs.

	I/DD	ADW	TBI	TMH
PDGS	✓			
EAA	✓	Coming soon	Coming soon	
Therapies	✓			
PERS		✓	✓	
Community Transition Funds				✓

Plan, Rules, and Requirements for Processing Participant-Directed Goods and Services

1. PPL recognizes that PDGS, EAA, and other service providers have a broad range of business profiles that mandate flexible operating practices:

   - Occupational Therapists and independent providers of IDD waiver therapies want to submit their invoice templates. The invoice must contain data requirements.
   - Day Habilitation providers want to submit aggregated invoices segregated by participant.
   - Small providers are dependent on timely reimbursement to make payroll.

2. PPL will accommodate the provider's preference for invoicing.

   - The Physical Therapist can submit their standard invoice from their QuickBooks account by email to PPL.
   - The Day Habilitation Provider can submit an Excel file for multiple participants
   - Small providers with no invoicing technology can use our web portal.

3. PPL will provide direct account management support to each provider authorized on a spending plan. Our staff will work with members/representative-employers and our Payroll and Invoice Payment Manager will outreach to providers (e.g., therapists) to:

   - Introduce our organization and role as F/EA

- Explain the requirement to complete and submit the required documentation, which includes their IRS Form W-9, and explain the 1099 process
- Explain options for invoicing and common errors
- Review the payment schedule and options for payment
- Discuss what good(s) and service is authorized for invoicing
- Send a vendor application with a W-9, sample invoice, and payment schedule and instructions for completion. The application is also available on our website.

4 PPL will efficiently process invoices from all providers, and for all goods and services promptly through staffing and technology.

- Inform providers within 2 business days of submission if an invoice has an error
- Online purchase requests will be processed within 3 business days of submission
- Payments to providers will be made weekly
- Approved escalated payment requests will be processed the same/next day

5 PPL will engage other LTSS partners to improve accessibility to self-directed services.

- Key Service Access Improvement – Transportation

Non-medical transportation needs and forms of delivery changed dramatically due to COVID-19. The emergence of services like Uber and Lyft now complements traditional modes of personal or group transportation. Community integration services are most effective when transportation is not a barrier due to a bus schedule or large transportation agency route. The challenge for F/EA FMS' has historically been accommodating payments and processing across many different types of transportation providers.

Public Partnerships is continuously exploring innovative HCBS technologies that can advance our mission of making self-direction easier. A primary focus is on accessible transportation for the HCBS community and allows PPL to streamline our invoice processing. PPL has identified a single-source transportation provider with multi-channel transportation options and partners. This partnership will allow PPL to offer more flexibility to individuals authorized for transition in when, how, and who delivers it.

Rules and Requirements

Each member/representative-employer and service provider will be given an overview of our role as a payment agent and rules for purchasing goods and reimbursing for services. The rules overview focuses on four simple keys to ensuring timely and accurate receipt of goods and service payments.

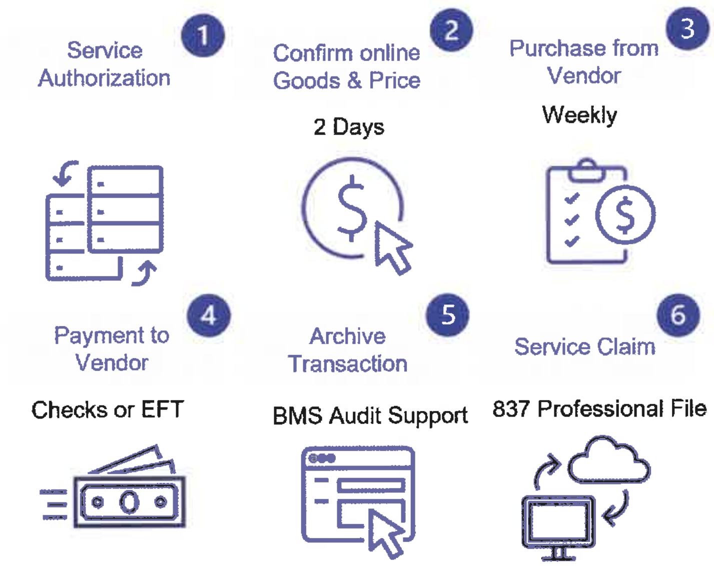
1 Have an approved service authorization/budget from the West Virginia Utilization Management Contractor for the good or service.

2 Review and approve the vendor application and supporting documentation

3. Have an invoice on vendor letterhead with identifying information about the member and other required information (applicable to therapies and other ongoing services).

4. Have a valid FEIN for providers.

Our staff is trained on the policy and procedures for goods and services processing that are enforced through our rules-based system. PPL's financial management system and web portal have been configured to the West Virginia AD, I/DD, and TBI waiver and Take Me Home goods and services approved for participant-direction. Each service is tied to good-to-pay logic in our web portal. Our systems come together to validate that the necessary documentation is on file, service authorizations cover the dates of service and amounts, and all payment details are archived.



4.2.1.11.1 The rules and requirements for invoice payments should include the option for electronic payments for purchases from online vendors.

Our solution has been to obtain a corporate credit card for the Take Me Home Program for goods and services purchasing. This approach allows PPL to be timely and flexible with purchasing and payment processing while providing detailed transaction summaries for

Figure 9. PDGS payment processing.

purchases and reimbursement. We will work with the Agency to develop a process to allow the option for electronic payments for purchases from online vendors for the remaining programs.

4.2.1.12 The Vendor should be prepared to bill each Managed Care Organization (MCO)based on member enrollment for services rendered at such time as the State moves into a Medicaid managed long-term care system.

Public Partnerships has self-directed contracts or service agreements with 13 Managed Care Organizations (MCO) to deliver financial management services including service and administrative billing. Our end-to-end financial management system allows for multiple "companies" to be set up under the same operating and systems rules and logic. We will configure our systems to segregate all service authorization, participant, DCSW/provider, and reporting modules by MCO. Each MCO will have a segregated payment ledger to ensure their participants, associated payments and ultimately servicing billing are never co-mingled across MCOs. The single database also allows us to support transitions of participants between MCOs with seamless accounting of service authorizations and payments to date. This approach provides the most validity and integrity of MCO billing for service rendered.

Our existing MCO programs use an established best practice for billing for services. After each payroll file is processed, Public Partnerships sends the MCO a payroll voucher indicating the dollar amount of the payroll supported by a detailed backup file. After the MCO reimburses Public Partnerships the dollar amount of the payroll voucher, Public Partnerships marks the payroll as fully reimbursed and generates the 837P Encounter EDI file. This file is sent to the

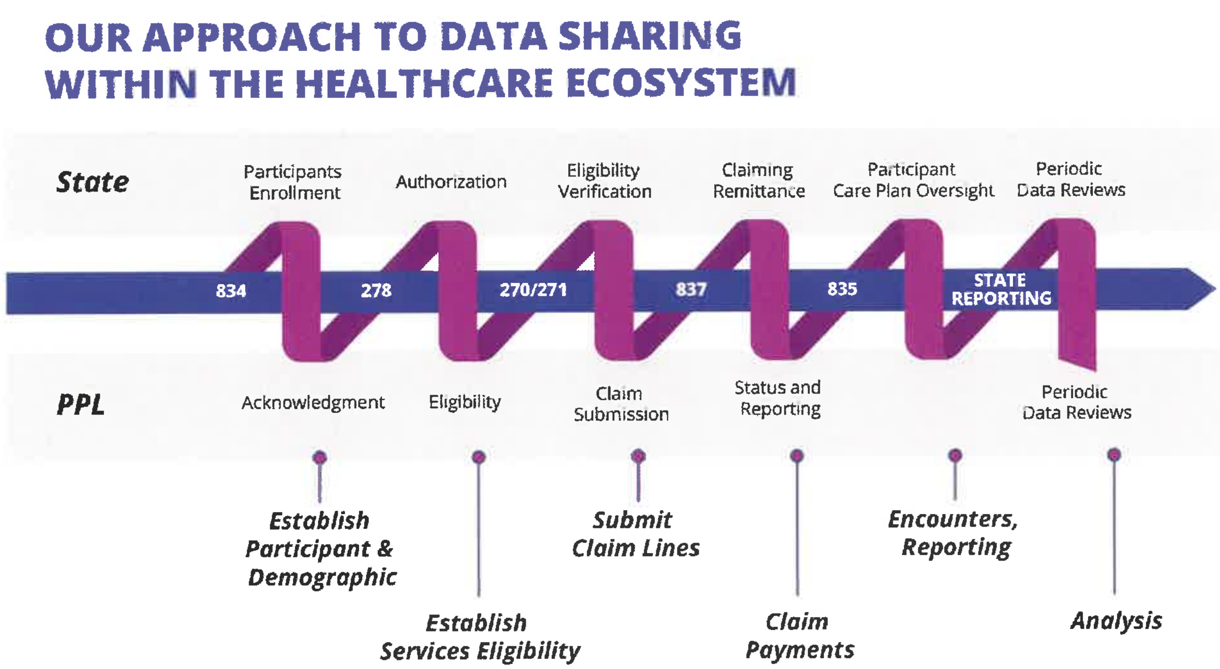


Figure 10. File Sharing.

MCO via a secure file transmission as required for the MCO's reporting requirements. The MCO responds by sending Public Partnerships a 999 EDI file and a 277 EDI file to indicate the file transfer was successful.

The initial payroll and all subsequent payrolls are funded by an advanced payroll dollar amount which is transferred to Public Partnerships before the initial payroll. The funds remain in a non-interest-bearing bank account that is used only for funding the specific program. The advance amount is determined through an analysis of the payroll and reimbursement schedules and the expected payroll amount. Periodically Public Partnerships will collaborate with the State to increase or decrease the funding advance based on actual payroll data.

4.2.1.13 The Vendor should ensure that billing records support the amounts of Medicaid services claimed on the Health Insurance Portability and Accountability Act (HIPAA) electronic claim form.

Public Partnerships regularly reconciles the claims data between our proprietary Medicaid Billing System and the payroll timesheet/invoice data in our payroll system. We use unique identifiers within our systems to track the relationships between participant eligibility, service authorization, payroll, and service claims data. This allows Public Partnerships to maintain a historical record of the service claims as well as the related data to support the service claims submitted to the State's MMIS vendor.

4.2.1.14 The Vendor should provide a plan to ensure that the amount claimed does not exceed the member's approved Spending Plan and specific service rates and should have a system for how and when over-billing occurrences will be addressed.

4.2.1.14.1 The vendor should be responsible for recoupment of overpayment within ninety (90) calendar days of identification.

4.2.1.14.2 The vendor should be responsible to replace funds if recoupment is not possible.

Our plan to ensure accurate billing is built on systems integration and technology designed for self-directed options. The Public Partnerships information technology team has a secure file transfer protocol (SFTP) established with the Management Contractor (UMC) for exchanging service authorization information.

1. We pick up daily files from the SFTP and import them into our web portal.
2. The web portal shares a database with our financial management and payment system.
3. The payment system calculates worker payments from hours submitted through our Electronic Visit Verification (EVV) system.
4. The resulting claimed amount is decremented from the service authorization balance.
5. Payment is made to the DCSW, provider, or participant-directed good/service
6. An 837p is generated by our integrated Medicaid billing system from the payment ledger

The West Virginia management team delivers a monthly Budget Utilization Report that reports all participant service authorization amounts and billed to date. The data is a direct extract from the UMC service authorization data and payment ledgers. The report is intended to identify over-billing that can result if service authorization changes are made by Case Managers while payments are in process. In these cases, our staff has effectively worked with the Case Manager to determine an equitable approach to resolution. During this time our billing team reverses the known overbilled amount through a claims adjustment through the MMIS vendor.

4.2.1.14.1 The vendor should be responsible for recoupment of overpayment within ninety (90) calendar days of identification.

The Public Partnerships financial management system stores prior authorization data from Kepro in a fully integrated payment processing system. By design, no payment request (timesheet or invoice) will calculate and pay at an amount over the prior authorization amount. This integration also ensures that if recoupment is necessary, PPL can handle all accounting adjustments to both the DCSWs earnings and the prior authorization to ensure financial integrity. Within 90 calendar days of the overpayment, PPL takes the following steps:

1. Notify the member/employer of the overpayment, how it occurred, and what the plan of resolution will be with the DCSW.
2. Contact the DCSW to inform them of the overpayment and process for recoupment
3. We determine with the DCSW, taking into consideration the amount of the overpayment, a recoupment schedule.
4. A "garnishment" is set up to deduct the overpayment from the next DCSW payment(s)
5. Our authorizations and eligibility team manually adjust the prior authorization per the final accounting to restore the overpaid dollars.

4.2.1.14.2 The vendor should be responsible to replace funds if recoupment is not possible.

The Public Partnerships financial management system is configured to strictly enforce prior authorization dollar limits when processing payments. However, we understand that there have been instances with either a system or process not executed properly resulting in an overpayment to a DCSW or provider. If recoupment is not possible, PPL will replace the funds.

4.2.1.15 The Vendor should utilize a process for reconciling Medicaid services paid to units billed.

Each 835 Remittance Advice received from the State's MMIS vendor is reconciled to the data in Public Partnerships' proprietary Medicaid Billing System to identify any discrepancies between the amounts of service units billed and paid. Service claim issues are promptly researched and when appropriate we collaborate with the State's MMIS vendor, the Utilization Management Contractor, and/or BMS to achieve a timely resolution to systemic issues and prevent any disruption to participants' services.

4.2.1.16 The Vendor should resubmit any rejected or denied claims for Medicaid services, as appropriate, within three hundred sixty-five (365) calendar days from the date of denial in accordance with Agency timely filing requirements.

Public Partnerships has a designated Revenue Cycle Management (RCM) responsible for the West Virginia programs service and administrative billing. The RCM supervisor is accountable for validating service claim summary reports before submission and the follow through with the resulting denial resolution. The billing specialist for WV submits an 827P (professional) service claim bi-weekly to the Gainwell Medicaid Management and Information Systems (MMIS). Upon receipt of the 835 Remittance File, the billing specialist imports the file into our proprietary Medicaid billing system.

The output file from our billing system is aggregated into a denied claim report by type, amount, and participant. The billing specialist then follows the corresponding policy and procedure for denied claim resolution. Our internal goal is for all denied claims to be researched and resubmitted within 30 days of the initial claim.

4.2.1.17 The Vendor should propose a process for identifying and tracking when a member is admitted to a nursing facility, hospital, or Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) and the length of stay.

Public Partnerships will work with the Agency to develop a more robust tracking method when a member is admitted to a nursing facility, hospital, or Intermediate Care Facility for Individuals with Intellectual Disabilities, including the length of stay. We currently work with a state where we have coordinated to develop a daily file exchange that integrates with our systems to automatically suspend time entries while the member is admitted. This provides for real-time accountability and allows us to employ immediate measures to avoid later recoupments. With the daily file exchange, we can track the length of stay in real time as well. The file exchange will require cooperation among other agencies to share information about admissions, and PPL can help to facilitate a successful program for West Virginia based on our experience in other states. We will review this solution with the Agency to bring a similar approach to West Virginia.

Currently, we capture data regarding facility admissions on a monthly report (Hospitalization Report) where we track the admission date, discharge date, and reason for admission for those on the ADW or TBI waivers. At the beginning of each month, we provide BoSS with the Hospitalization Report from the prior month. We also include data from the Hospitalization Report in the Personal Options ADW Activity Report that is presented each month at the ADW/PC meeting. Although we do not currently have a Hospitalization Report for the IDD waiver program because reporting admissions was the responsibility of the Case Manager, we will discuss with the Agency their preferences for creating the same tracking and reporting for IDD.

At the time of enrollment in the Personal Options program, the member/representative-employer is informed of the responsibility to report hospitalizations, nursing home and inpatient care facility admissions, and incarcerations to their Resource Consultant within 48 hours. They are also informed that no Waiver services can be billed by the DCSWs during the time that the member is admitted to a facility. In addition, each month when the Resource Consultant contacts the member/representative-employer, this is one of the required discussion topics and is documented on the Monthly Contact form.

4.2.1.18 The Vendor should propose a process for ensuring self-directed HCBS services are not provided or billed when a member is admitted to a nursing facility, hospital, or ICF/IID.

> 4.2.1.18.1 The process should include a recoupment plan or plan to replace HCBS funds that were claimed and paid when a member was admitted to a nursing facility, hospital, or ICF/IID, except for participants of the TMH program that are in the process of transitioning to the community.

Based on the process that we propose in Section 4.2.1.17, once implemented, a daily review of admission status will prevent the provision of and billing for self-directed HCBS services during an admission to a nursing facility, hospital, or ICF/IID because we can suspend time entry while the member is admitted.

Currently, we have developed a system for identifying and monitoring participants who are admitted to nursing homes, hospitals, ICF/IID facilities, and jails. ADW, IDDW, TBIW, TMHWV participants who remain admitted to a facility for an entire month (first day through last day) are not included in that month's Per-Member-Per-Month (PMPM) Administrative Services Invoice submitted by Public Partnerships to the Agency. We will track TMHWV participants to ensure the pre-transition timelines are not exceeded.

4.2.1.18.1 The process should include a recoupment plan or plan to replace HCBS funds that were claimed and paid when a member was admitted to a nursing facility, hospital, or ICF/IID, except for participants of the TMH program that are in the process of transitioning to the community.

In the unlikely event that services are claimed and paid when a member was admitted to a nursing facility, hospital, or ICF/IID, we will follow our usual recoupment approach. We begin by engaging the case manager regarding the services billed during the admission. We will also communicate to the member the situation and contact the DCSW. We then inform the DCSW of the context for the overage and set up a garnishment plan with the DCSW dependent on the amount of the overage. If the overage is minimal (i.e., under $25) we garnish the overage from the next payment and can set up staggered garnishment for larger amounts that would create an immediate DCSW hardship if fully recouped.

4.2.1.19 The Vendor should propose a process for billing the member or representative - employer directly when any established service limit is exceeded.

Public Partnerships' integrated payroll system processes and validates timesheets and invoices against imported UMC service authorizations. Every timesheet and invoice submitted to our payroll system is automatically tested against many payroll rules including one that verifies that there are adequate budget funds to issue payment. This validation control prevents us from issuing payments that exceed the participant's monthly budget limit.

When a DCSW or participant submits an electronic timesheet through our web portal or Time4Care mobile application, all payroll validations occur within seconds and the submitter receives an immediate notification of any errors preventing submission, including insufficient funds in the approved Spending Plan. Invoices are similarly validated, and error notifications are displayed in the web portal. *This proactive approach enables us to prevent overbilling before it occurs.*

Paper timesheets that are faxed to Public Partnerships are also automatically validated against the payroll rules. If a timesheet pends due to inadequate budget funds, hours will be processed for payment until the monthly budget is exhausted and any remaining hours will be placed in 'pending" status. If they cannot be resolved for payment, they will be moved to "denied" status.

Public Partnerships' Resource Consultants utilize the timesheet data from the web portal (discussed in section 4.153) on at least a monthly basis to identify billing issues and discuss them with the member/representative-employers. When indicated, the Resource Consultants retrain and provide additional assistance to the member/representative-employers and their DCSWs.

The Personal Options Employer Guide provided to the member/representative-employer at the time of the enrollment meeting includes information regarding the employer's responsibility to monitor the DCSW's billing per the approved Spending Plan.

In the unlikely event that an overpayment is issued due to an error, such as an IDDW service modification to decrease units being received after the payment has already been issued, Public Partnerships has an established system for recouping the funds from the DCSW's subsequent payment(s) and correcting the related service claims.

4.2.1.20 The Vendor should propose a process for monitoring the filing and payment of Federal Insurance Contributions Act (FICA), Federal Unemployment Tax Act/State Unemployment Tax Act (FUTA/SUTA) paid for each DCSW by the employer when applicable exemptions apply (i.e., certain DCSWs may qualify for the Difficulty of Care Federal Income Tax Exclusion or qualify as a foster care or supportive living provider and be exempt from paying federal and possibly state income tax withholding, certain family members who are paid DCSWs may be exempt from paying into FICA and/or FUT A/SUT A. The State also may be subject to the United States Department of Labor FUTA Credit Reduction process, or some DCSWs may not meet the applicable FICA and/or FUTA wage thresholds.

Public Partnerships understands how Federal, State, and local laws, the Fair Labor Standards Act (FLSA) Home Care Rule, and the Difficulty of Care regulations impact self-directed programs. Our web portal is configured to process DCSW timesheets and invoices per these laws and regulations and it can be updated as required to comply with future changes or additions.

Included in each DCSW enrollment packet is the easy-to-understand Personal Options Tax Exemption Form which allows DCSWs to identify if they qualify for the Family Employee exemption addressed in IRS Publication 13, section 3. For example, it is common for self-directing IDDW members to employ a parent. When this Employer/Employee relationship is identified on the Personal Options Tax Exemption Form, Public Partnerships accordingly does not withhold FICA/SUTA from the DCSW's payments.

Public Partnerships is very familiar with the requirements in IRS Notice 2014-7 regarding the treatment of certain payments to workers through a state Medicaid Home and Community-Based Services Waiver program. We have developed the Difficulty of Care Federal Income Tax Exclusion Form and implemented systems that allow us to efficiently identify DCSWs who qualify and handle their Federal and State income tax withholdings as required. Based upon guidance provided by the West Virginia State Tax Department, Public Partnerships does withhold state income tax from payments made to DCSWs who qualify for the Difficulty of Care Exclusion.

In recent years, labor laws related to FLSA have become much more complex and the level of research and planning that states have done relative to FLSA and the Home Care Rule is as varied as the actual programs. We are well-versed in the different models of compliance and have configured the web portal logic to support West Virginia's specific labor laws as well as protocols related to FLSA.

In collaboration with the Bureau for Medical Services (BMS), we have implemented the FLSA Live-In Exemption Form. This form is included in the DCSW enrollment packet and DCSWs who indicate that they meet the requirements are exempt from overtime pay whereas DCSWs who do not meet the requirements are eligible for overtime pay. Per BMS' guidance, the member/representative-employers are trained that it is their responsibility to manage the cost of their services, including when overtime is incurred. The member's self-directed budget is not adjusted to cover the additional cost of overtime.

4.2.1.21 The Vendor should have a one-time minimum reserve to pay for three (3) months of estimated service costs prior to the contract start date to account for retroactive payments from the Agency for billed claims.

For each program that we manage, Public Partnerships analyzes all activities that affect the program's cash flow, such as Federal and State laws about wage payments, the program's payroll schedule, claiming and reimbursement schedules, and rules regarding the timely filing of service claims. We use this information to create an integrated program schedule that optimizes the program's cash flow process and is most acceptable to all stakeholders.

Public Partnerships acknowledges the need to maintain cash flow sufficient to cover the current cost of the West Virginia Personal Options programs' biweekly payroll. We understand that issuing timely and accurate payments to DCSWs is one of the most important responsibilities of an FE/A FMS Vendor and we take pride in our successful record in meeting this requirement.

As the incumbent Vendor, should this contract be awarded to Public Partnerships there will be no cause for retroactive payments from the Agency for billed claims. Should the cost of the programs' biweekly payroll significantly increase due to program or regulatory changes, Public Partnerships will collaborate with the Agency to develop a strategy for funding the payroll payments.

4.2.1.22 The Vendor should not bill in advance for any services, except for community transition services, EAA, and PDGS.

Public Partnerships' integrated financial management system includes prior authorization storage, payroll processing, and billing applications. The Medicaid billing system generates 837P service claims from the payment ledgers accounting for payments to DCSWs and providers. The sequential relationship of the systems prohibits the generation and submission of service billing in advance.

Historically, Public Partnerships has not billed BMS in advance for community transition services, EAA, and PDGS. The overall costs of these services in comparison to the service billing reconciliation have not proved cost-effective. Services requiring substantial up-front payments (e.g., community classes, summer camp) will be assessed and discussed with the Agency if advanced billing should be used.

4.2.1.23 The Vendor should provide monthly, in a format and schedule to be agreed upon by Vendor and Agency, utilization data/reports inclusive of claims and expenditure information that compares monthly self-directed service expenditures to the amounts allocated in the member's budget and spending plan. The Vendor should also make available utilization data/reports for members and their representatives, as requested by member/representative or Agency, that compares monthly self-directed service expenditures to the amounts allocated in the member's budget/spending plan (for the month and cumulative).

Public Partnerships currently provides the following Over and Under Budget Utilization report monthly to the Agency. A similar report is available to members and their representatives.

Budget Utilization Over/Under | West Virginia

public partnerships PPL

ADW Under 26%

Program	Participant PPL ID	Enrollment Status	Enrollment Date	Disenrollment Date	Allocated	Spent	Balance	Utilization %
ADW	00000267020	ACTIVE	6/30/2010		$2,788.00	$76.50	$2,711.50	2.743902
ADW	00101327342	ACTIVE	9/27/2010		$2,796.50	$629.00	$2,167.50	22.492401
ADW	00400160756	ACTIVE	2/8/2011		$2,269.50	$480.25	$1,789.25	21.161049
ADW	C000302	ACTIVE	2/2/2012		$2,795.10	$219.00	$2,576.10	7.83514
ADW	C000348	ACTIVE	1/18/2012		$2,782.50	$480.00	$2,302.50	17.250674
ADW	C000529	ACTIVE	5/30/2013		$2,269.50	$467.38	$1,802.12	20.593963
ADW	C000582	ACTIVE	12/31/2013		$2,267.75	$273.94	$1,993.81	12.079815
ADW	C001368	ACTIVE	8/25/2017		$2,790.27	$327.25	$2,463.02	11.728256
ADW	C001575	ACTIVE	5/12/2021		$2,796.77	$396.97	$2,399.80	14.193874
ADW	C001612	ACTIVE	7/2/2018		$2,269.50	$518.50	$1,751.00	22.846442
ADW	C001742	ACTIVE	1/23/2019		$2,795.52	$399.36	$2,396.16	14.285714
ADW	C001791	ACTIVE	3/1/2019		$2,266.50	$253.75	$2,012.75	11.195676
ADW	C001867	ACTIVE	5/22/2019		$2,269.50	$170.00	$2,099.50	7.490637
ADW	C002230	ACTIVE	6/11/2020		$2,269.50	$437.75	$1,831.75	19.28839

Figure 11. Utilization Report.

4.2.1.24 The Vendor should establish and maintain an accounting and information system for receiving and disbursing Medicaid and other Federal funds and for tracking all transactions and balances.

Public Partnerships has established and maintains a proprietary Medicaid Billing System which, along with our web portal, effectively and accurately tracks the receipt and disbursement of Medicaid and other Federal funds and tracks all transactions and balances.

Our web portal serves as a centralized information dock and is an efficient and secure mechanism for Personal Options and Public Partnerships staff, as well as members, to monitor and track the entry of HCBS expenditures. We store data under each member's unique pre-assigned ID number. The system automatically calculates and tracks all payments made on behalf of the member. The remaining fund balance and each expenditure entry are available for viewing. All Spending Plan allocations are independent and are not intermingled in our system; Medicaid funds in the accounts are appropriately deducted to illustrate expenditures made on behalf of the member enrolled in the Personal Options programs. We have programmed this secure expenditure entry feature to accommodate varying levels of budget accessibility with a role-based hierarchy of access. All individual transactions are recorded in the payroll ledger entry, which provides an audit trail of disbursements. Our Financial Management System can produce detailed reports on payments disbursed at an individual or aggregate level. Public Partnerships reconciles project billings and remittances against payments issued on behalf of the member. Remittances are entered into Public Partnerships' claims management system to track reimbursement of funds against funds that have been disbursed.

4.2.1.25 The Vendor should propose a system and policies, procedures and internal controls to enroll each member choosing the Personal Options or his/her representative, as appropriate as an employer, including preparing the Employer Enrollment Packet and conducting quality control of the production of the Packet; assisting member representative-employers in completing all forms and providing the information requested in the Packet and collecting and processing the completed forms and information provided. The Vendor's system, policies, procedures, and internal controls should recognize the Vendor's understanding of all required forms by referencing each form within the proposal. The Vendor's proposal should address, but not be limited to, its understanding of the following processes or procedures:

4.2.1.25.1 Preparing the Employer Enrollment Packet and having an internal control for monitoring the quality of production. The Packet should include as applicable, but not be limited to:

4.2.1.25.1.1 Cover Letter

4.2.1.25.1.2 IRS Form SS-4, Application for Employer Identification Number.

4.2.1.25.1.3 West Virginia Office of Business Registration Application.

4.2.1 .25.1.4 IRS Form 2678, Employer Appointment of Agent.

4.2.1.25.1.5 West Virginia Forms 2848, Authorization of Power of Attorney.

4.2.1.25.1.6 IRS Form 8821, Tax Information Authorization.

4.2.1.25.1.7 West Virginia Forms WV/EFT-5, State Tax Department Electronic Funds Transfer Application.

4.2.1.25.1.8 Subagent Consent Form.

4.2.1.25.1.9 West Virginia Forms WV/ARI-001, Authorization to Release Information.

4.2.1.25.1.10 Instructions for completion of all forms and provision of requested information.

4.2.1.25.1.11 Employer Enrollment Packet Check List.

4.2.1.25.1.12 Self-addressed stamped envelope or means for electronically submitting completed Packet to Vendor.

Public Partnerships has established policies, procedures, and internal controls for the production, completion, and maintenance of the Member Enrollment Packet for all Personal Options programs. Our approach is dynamic, that is, we regularly review state and federal requirements and quickly support changes as programs evolve. Public Partnerships is currently conducting a review and update to existing policies and procedures available on the program websites. The current approved Member Enrollment Packet includes the following documents:

4.2.1.25.1.1 Cover Letter	This document provides information regarding the Personal Options program, Public Partnerships' role as the Subagent-F/EA FMS and Resource Consultant Vendor, contact information, instructions for completing the Enrollment Packet, and a checklist of forms to be completed.
4.2.1.25.1.2 IRS Form SS-4, Application for Employer Identification Number.	Application for Employer Identification Number informs the IRS that the member will act as a household employer. Public Partnerships uses this form to obtain the member's FEIN from the IRS and establish state employer accounts and designate all tax deposit and filing responsibility to Public Partnerships.
4.2.1.25.1.3 West Virginia Office of Business Registration Application.	West Virginia Office of Business Registration Application (4.2.1.25.1.3) registers the member/employer with the West Virginia State Tax Department.
4.2.1 .25.1.4 IRS Form 2678, Employer Appointment of Agent.	Employer Appointment of Agent notifies the IRS that the member/employer authorizes Public Partnerships as the subagent of WV DHHR Bureau for Medical Services to withhold taxes from DCSWs' paychecks and deposit those taxes with the IRS.
4.2.1.25.1.5 West Virginia Forms 2848, Authorization of Power of Attorney.	Authorization of Power of Attorney informs the West Virginia State Tax Department that the member/employer authorizes Public Partnership's CPA to receive and sign the tax forms listed relative to SIT and SUI. WV UI POA authorizes Public Partnerships to act as an agent for all unemployment compensation matters.
4.2.1.25.1.6 IRS Form 8821, Tax Information Authorization.	IRS Form 8821 (4.2.1.25.1.6) (Tax Information Authorization) authorizes specific Public Partnerships and WV DHHS staff as appointees to contact the IRS on the member/employer's behalf and to inspect and/or receive confidential tax information in any office of the IRS for the

	tax matters regarding income tax withholding and employment taxes.
4.2.1.25.1.7 West Virginia Forms WV/EFT-5, State Tax Department Electronic Funds Transfer Application.	West Virginia State Tax Department Electronic Funds Transfer Application (4.2.1.25.1.7) allows Public Partnerships as the member/employer's agent to initiate Automated Clearing House credit transactions that meet West Virginia State Tax Department requirements for withholding State income tax and worker's compensation severance taxes.
4.2.1.25.1.8 Subagent Consent Form.	WV Subagent Consent Form confirms the member/employer's understanding that the West Virginia Bureau for Medical Services has contracted with Public Partnerships as its subagent to perform F/EA tasks on behalf of the Agency and member/employer per Section 3504 of the IRS code, Revenue Procedure 80-4 and Notice 2003-70.
4.2.1.25.1.9 West Virginia Forms WV/ARI-001, Authorization to Release Information.	WV Forms WV-ARI-001 (4.2.1.25.1.9) (Authorization to Release Information) authorizes the West Virginia State Tax Department to release information to Public Partnerships regarding the member/employer's withholding tax and unemployment tax for SIT and SUI.
4.2.1.25.1.10 Instructions for completion of all forms and provision of requested information.	Public Partnerships provides instructions for completion of all forms (4.2.1.25.1.10) when the Resource Consultants assist each member with their enrollment.
4.2.1.25.1.11 Employer Enrollment Packet Check List.	We follow an Employer Packet checklist that is viewable as part of the member view in our web portal (4.2.1.25.1.11).
4.2.1.25.1.12 Self-addressed stamped envelope or means for electronically submitting completed Packet to Vendor.	Should the member need to submit paper enrollment forms to Public Partnerships, we make available a self-addressed stamped envelope (4.2.1.25.1.12).

Public Partnerships also provides the following forms:

Enrollment Form	This document explains the member's rights, role, and responsibilities as an employer and confirms his/her voluntary participation in the Personal Options program.
Appointment of Representative Form	This document must be completed by members who are required or choose to have a representative assist them with their responsibilities as an employer. In addition to the member or legal representative's signature, the Appointment of Representative Form must also be signed by the appointed Program Representative to acknowledge his/her acceptance of the role/responsibilities.
Emergency Back-Up Plan	This document must be completed by all member/representative-employers to identify the individuals who will be responsible for providing support to the member if the scheduled DCSW is unable to provide services.
Enrollment Satisfaction Survey	This survey is provided to all member/representative-employers at the time of the enrollment meeting along with a prepaid envelope.

As we regularly review national and state policy, we are quickly able to respond to changes to required forms and the introduction of new forms. This allows us to customize our enrollment packets for each state and be flexible when changes arise. As such, the following tax documents are currently not included in the Personal Options Member Enrollment Packet. Should Public Partnerships be awarded the contract, we propose that these documents be reviewed with BMS to determine whether they will be required.

- West Virginia Office of Business Registration Application (*4.2.1.25.1.3*) registers the member/employer with the West Virginia State Tax Department.
- IRS Form 2848 (Power of Attorney and Declaration of Representative) notifies the IRS that the member/employer authorizes Public Partnerships' CPA to receive and sign the specified tax forms.
- IRS Form 8821 (*4.2.1.25.1.6*) (Tax Information Authorization) authorizes specific Public Partnerships and WV DHHS staff as appointees to contact the IRS on the member/employer's behalf and to inspect and/or receive confidential tax information in

any office of the IRS for the tax matters regarding income tax withholding and employment taxes.

- WV Forms WV-ARI-001 (*4.2.1.25.1.9*) (Authorization to Release Information) authorizes the West Virginia State Tax Department to release information to Public Partnerships regarding the member/employer's withholding tax and unemployment tax for SIT and SUI.

Before the face-to-face enrollment meeting, Public Partnerships' Resource Consultants will verify the preference of the member regarding the method by which the forms are completed, in electronic format, including using Adobe Sign for electronic signature or using the traditional paper Member Enrollment Packet. If the paper packet is chosen, the Resource Consultant prepares for the meeting by pre-populating the forms with the member/employer's information including the member's name, Social Security Number, date of birth, and physical address. The pre-population of the tax packet helps to prevent omissions and mistakes and allows the Resource Consultant to focus on educating the member/representative-employer regarding the purpose of each form.

Following the enrollment meeting, the Resource Consultant verifies each form in the packet has been accurately completed and signed before submitting it to Public Partnerships' Enrollment Team for processing. Our Enrollment Team is well-trained to follow the established Policies and Procedures (P&P) for processing each document in the Employer Enrollment Packet. These P&P are the standard for quality controls and are used to evaluate the effectiveness of Enrollment systems and staff performance.

All documents in the Member Enrollment Packet are stored electronically in our web portal.

4.2.1.26 The Vendor should propose a plan, to be approved by the Agency, to assist member/representative-employers with completing and submitting the required information and forms included in the Employer Packet.

Public Partnerships proposes to continue to use Resource Consultants, who are local to West Virginia and currently assist member/representative-employers with completing and submitting the required information and forms included in the Employer Packet. Upon the member's referral to the Personal Options program, Public Partnerships assigns a Resource Consultant and contacts the member or legal representative to schedule the enrollment meeting during which the Employer Packet will be completed. Before the meeting, the Resource Consultant reviews the referral information, assessments, and other available documentation to gain an understanding of the member's needs. Appropriate measures are taken to accommodate members who have visual, hearing, or speech impairments, are unable to read or write or have other special needs.

The face-to-face enrollment meeting is held within 14 days of receipt of the referral and at a time that is convenient for the member, legal representative, Program Representative (when required), and DCSWs (when available). From experience, we know that the time spent educating the member/representative-employer and DCSWs during the enrollment meeting is extremely important. The Resource Consultant allows ample time to ensure the orientation and skills training are conducted at a pace that matches the member/representative-employer's needs.

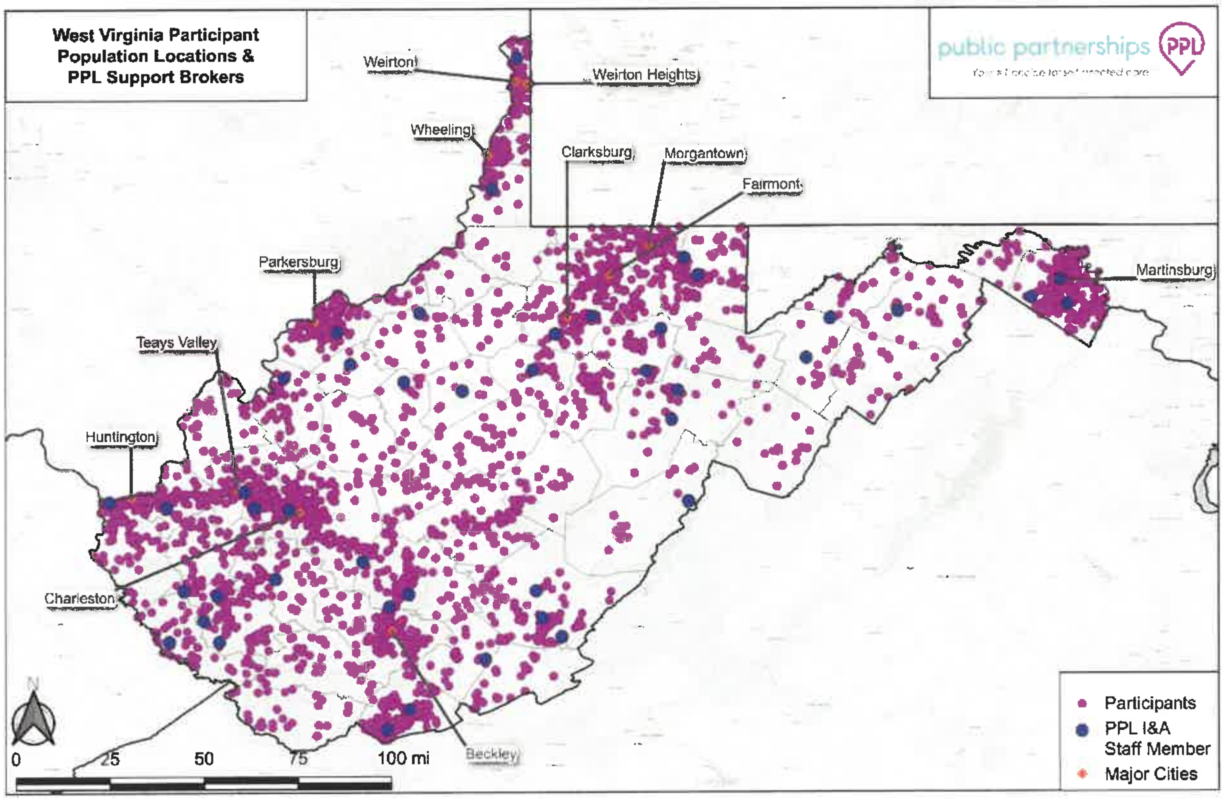


Figure 12. Location of Participants and Resource Consultants.

An Enrollment Binder containing program information, training materials, and all enrollment forms is prepared in advance of the meeting. The cover of the Enrollment Binder includes useful information including the Resource Consultant's name and contact information, instructions for submitting timesheets and invoices, and Public Partnerships' customer service telephone number. Public Partnerships encourages completing all enrollment paperwork in electronic format, including using Adobe Sign for electronic signature, but if the member chooses to complete a traditional paper Member enrollment packet, the Resource Consultant pre-populates the forms in the Member enrollment packet with the member's information and adds the printed documents to the Enrollment Binder.

During the enrollment meeting, the Resource Consultant first provides an overview of the materials in the Enrollment Binder. Using these materials for reference, the Resource Consultant then provides the member/representative-employer with an orientation to the Personal Options program and skills training regarding the role of the employer. Throughout the in-person enrollment process, the Resource Consultant provides the member/representative-employer with an explanation of each form and assists, as needed, to ensure the forms are accurately completed and signed.

Development of the member's Spending Plan is a key component of the enrollment meeting. The Resource Consultant provides the member/representative-employer with the amount of the self-directed budget and explains how the amount was determined. For IDDW and TBIW members the self-directed budget is based on the units of authorized services whereas the ADW members' budgets are based on the assigned Level of Care. Using our program-specific Spending Plan templates, the Resource Consultant assists the member/representative-employer to develop a person-centered Spending Plan that meets the member's needs. The Spending Plan template allows the Resource Consultant to show the member/representative-employer how the DCSW's wage rate, FICA exemption (when applicable) and potential overtime rates directly impact the amounts of services that can be provided. Program restrictions regarding the member/representative-employer's budget and employer authority are also addressed to ensure the final Spending Plan meets the member's needs and also complies with program and policy requirements.

When we assist the member/representative-employer in completing the Employer Packet in electronic format, including using Adobe Sign for electronic signature, the Resource Consultant collects the files for submission to the Enrollment Team. Resource Consultants validate the paper packets following the enrollment meeting and then submit the paper packets for processing. Regardless of the method used, Public Partnerships' Enrollment Team receives the enrollment documents, and performs additional validation to ensure each form has been accurately completed and signed before entering the data in our web portal and filing the documents as required with Federal, State, and local agencies.

4.2.1.27 The Vendor should collect and process information from the Employer Packet and file completed forms with the applicable Federal and State agencies within two (2) business days of receipt of information.

Public Partnerships will process Employer Packets and the file completed forms with the appropriate Federal and State agencies within 2 business days of receipt of information. Our current process includes two (2) quality checks to ensure forms have been accurately completed and signed as required.

Public Partnerships provides a comprehensive, user-friendly Employer Packet that includes all the necessary information and forms to establish members as employers, as described in Sections 4.2.1.25 and 4.2.1.26. With hands-on assistance from the Resource Consultant, the member or legal representative can complete all employer paperwork in electronic format, including using Adobe Sign for electronic signature. Paper enrollment packets will remain available for members who do not have internet access or prefer the traditional method of enrollment. PPL provides Resource Consultants in rural areas with a portable internet hotspot that helps to facilitate electronic enrollment.

With the future introduction of PPL's MyAccount, electronic enrollment documents will virtually eliminate the risk of omissions and errors that can occur with paper forms. This significantly reduces the time it takes to complete the enrollment process because faxing, triaging, and verification of the enrollment documents are eliminated. This technology makes it possible for Public Partnerships to easily file the completed forms with the applicable Federal and State agencies within two (2) business days of receipt. Another benefit of the electronic enrollment process is that makes it possible for members to have even faster access to services.

Figure 13. MyAccount Member Dashboard

After the online Employer Packet has been submitted, the member/representative-employer can click "My providers" on the employer's MyAccount dashboard and select "Hire a New Provider" to start the DCSW enrollment process.

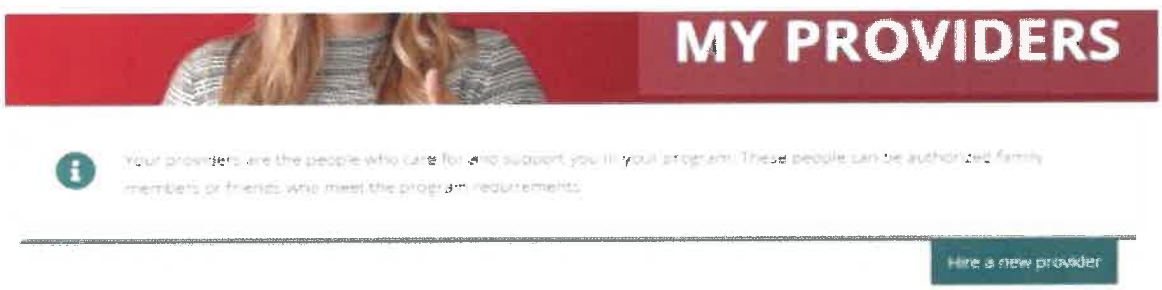


Figure 14. MyAccount Dashboard - Hire A New Provider

4.2.1.28 The Vendor should maintain copies of documentation in the applicable member/representative-employer's file, in electronic format or other medium to be mutually agreed upon by the Vendor and the Agency.

Public Partnerships electronically maintains all documents from Member Enrollment Packets and other related documents in our web portal. An embedded document management system allows us to store all documents for the required time period on a secure, limited-access server. Electronic documents received via our secure fax line (Efax) can be instantly moved to the secure server location. Similarly, documents received via the United States mail can be scanned directly to the designated server. The server location is mapped to our web portal so that documents are readily viewable to authorized web portal users. The benefits of this system are accessibility, security, and efficiency.

4.2.1.29 The Vendor should notify the member/representative-employer regarding missing or incorrect information submitted from the Employer Packet and assist the member/representative-employer with obtaining it within five (5) business days.

With hands-on assistance from Resource Consultants when completing the Employer Packet missing or incorrect information should be rare. If it is determined that a paper enrollment packet contains an error or a form is missing, we will identify this issue when our Enrollment Team validates the documents for processing. The Enrollment Team informs the Resource Consultant of the issue within 3 business days of receipt of the Member Enrollment Packet via our Client Relationship Management (CRM). We require the Resource Consultant to follow up with the member/representative-employer by the next business day and offer support.

4.2.1.30 The Vendor should file an IRS Form SS-4, Application for Federal Employer Identification Number and obtain a FEIN for each member/representative employer per IRS procedures. The Vendor should maintain a copy of the Form and the member/representative-employer's FEIN in the member file.

The IRS Form SS-4 is included in the member enrollment tax packet and is completed by the member or his/her legal guardian during the enrollment meeting. Following the enrollment meeting, Form SS-4 is submitted to our Enrollment Team to be processed. The Enrollment Team has internal controls to monitor the employer tax registration process, including obtaining the Federal Employer Identification Number (FEIN) for the member/employer. A quarterly management audit is also performed to confirm policies and procedures for obtaining the FEIN are being followed. All member enrollment packet documentation, including the IRS Form SS-4, is stored electronically in the web portal. Public Partnerships maintains stringent internal controls to monitor the establishment and maintenance of current and archived member and DCSW documentation.

4.2.1.31 The Vendor should file the WV /BUS-APP, Business Registration, obtain employer account numbers for state income tax withholding and state unemployment insurance purposes, and maintain copies of the Form and the account numbers in the member/representative-employer's file.

Public Partnerships has an established enrollment process that includes obtaining, on behalf of the member/employer, the employer account numbers for West Virginia state income tax and state unemployment insurance withholding and reporting. We have internal controls to monitor the State employer registration process for state income tax and unemployment tax and the maintenance of relevant documentation.

Each step of the member/representative-employer enrollment process, including obtaining state employer account numbers, is tracked in our web portal and information systems. This includes obtaining state employer numbers; initial receipt of executed state employer forms; quality check of executed state employer forms; completion of state employer forms with newly obtain FEIN; submission of state employer forms to state registration agency; and receipt of state employer account numbers. All documentation is electronically stored in the web portal.

As stated in Section 4.2.1.25, in agreement with the Agency, the use of the WV Office of Business Registration Application was discontinued in January 2017. Should Public Partnerships be awarded this contract, we will review this document with the Agency to determine whether it will be required.

4.2.1.32 The Vendor should file with the municipality as required to register the member as an employer. The member/representative registration and account number should be maintained in the member/representative-employer's file.

Public Partnerships has done extensive research on West Virginia's municipality user fees. As of October 2017, eight (8) municipalities require a weekly user fee for individuals that work within the city limits of Charleston, Fairmont, Huntington, Madison, Morgantown, Parkersburg, Romney, and Weirton. Public Partnerships has a dedicated Tax Team that stays current and is notified if the amount of the user fee changes or if additional municipalities enact a user fee. When user fees are enacted or new member/representative-employers are enrolled in Personal Options, Public Partnerships will continue to file with the applicable municipalities.

We have developed forms and processes to identify the DCSWs who are required to have the weekly municipal fee withheld from their payments. Each member/employer must complete a form, included in the Enrollment Packet, that identifies whether the member lives within the city limits of one of the eight (8) municipalities. If the member/employer lives in the city limits, Public Partnerships will register the member/employer with the municipality. All forms related to municipality service fees will be electronically stored in our web portal.

4.2.1.33 The vendor should withhold and submit municipal fees (city service fees) for members' qualified workers as applicable.

Public Partnerships has configured its systems to withhold applicable West Virginia municipal fees and taxes, such as the city service fees. City service fees are currently applicable in the Charleston, Fairmont, Huntington, Madison, Morgantown, Parkersburg, Romney, and Weirton localities. Members that live in a municipality that requires a user fee will complete the Verification of City Service Fee Withholding Form that allows Public Partnerships to determine if the fee applies to the member's Direct Care Service Workers (DCSW).

At the time of the enrollment meeting, the Resource Consultant reviews the municipal user fee requirements with the member/representative-employer and their DCSWs and assists them with completing the necessary forms and paperwork to exempt or withhold the fee as required. Upon determining that a member/employer lives within the city limits of a municipality that requires a user fee, PPL will flag the member/employer and the DCSWs in our web portal and payroll system. The applicable fee will be withheld, once per earning period, from the DCSWs paycheck, per the municipalities' requirements. PPL will continue to withhold and file the fee using the municipalities' filing schedule, on behalf of the applicable member/representative-employers. PPL will maintain electronic copies of forms and filings on our secure servers.

4.2.1.34 The vendor should be responsible for any penalties for failure to register the member/representative-employer or failure to pay municipal fees as required by the municipality.

Public Partnerships understands as the appointed payment agent we are responsible for the proper registration and payment of municipal fees. We acknowledge we are responsible for the payment of any penalties resulting from failure to register or accurately withhold, file, and pay municipal fees. In our 16 years as the F/EA FMS vendor PPL has never failed to register the member/representative-employer or failed to pay municipal fees.

4.2.1.35 The Vendor should propose a system in place and policies, procedures and internal controls for processing DCSWs' human resource documentation and participant-directed vendors' information (PDGS, EAA, etc.) and input it into the Vendor's payroll and billing invoice payment system. Tasks/requirements of the Vendor include, but are not limited to, the following:

4.2.1.35.1 The Vendor should prepare the DCSW Employment and Vendor Engagement Packets; that include, but are not limited to:

4.2.1.35.1.1 Cover Letter.

4.2.1.35.1.2 Instructions for completing forms and providing information requested.

4.2.1.35.1.3 DCSW Data Form to collect personal and emergency contact information.

4.2.1.35.1.4 IRS Form W-4, Withholding Allowance Certificate, and instructions.

4.2.1.35.1.5 West Virginia Form IT-104, West Virginia Employee Withholding Exemption Certificate.

4.2.1.35.1.6 US BCIS Form I-9, Employment Eligibility Verification Form, and instructions.

4.2.1.35.1.7 Medicaid Provider Agreement.

4.2.1.35.1.8 West Virginia Employment Agreement.

4.2.1.35.1.9 West Virginia DHHR Protective Service Check Form when required by program policy.

4.2.1.35.1.10 Application for pre-employment Criminal Background Check through WV Clearance for Access: Registry and Employment Screening (WV CARES).

4.2.1.35.1.11 Consent form for pre-employment criminal background check through WV CARES.

4.2.1.35.1.12 Employee Training Verification Form.

4.2.1.35.1.13 Confidentiality Agreement acknowledging that the DCSW agrees to respect the privacy and confidentiality of members' protected health information.

4.2.1.35.1.14 Instructions for reporting hours worked by DCSWs (i.e.,time sheet instructions).

4.2.1.35.1.15 Due dates for DCSWs to report hours worked and pay schedule.

4.2.1.35.1.16 Participant-directed Goods and Services, Environmental Accessibility Adaptations, and Community Transition Services Disallow List, if applicable.

4.2.1.35.1.17 Application for Approval of Participant-directed Goods and Services, Environmental Accessibility Adaptations, and other vendor-provided services if applicable.

4.2.1.35.1.18 Provider Service Agreement.

4.2.1.35.1.19 IRS Form W-9, Request for Taxpayer ID Number and Certification.

4.2.1.35.1.20 (PDGS), (EAA), and other participant-directed vendors engagement information form (if applicable).

4.2.1.35.1.21 Participant-directed vendors invoice format for submission of payment requests and instructions for submitting invoices for payment (if applicable).

4.2.1.3 5.1.22 Participant-directed vendor invoice due dates and payment schedule (if applicable).

4.2.1.35.1.23 Form to collect information for West Virginia New Hire Reporting Form requirement.

4.2.1.35.1.24 Form to collect required information to determine if a DCSW meets one of the criteria below:

4.2.1.35.1.24.1 To be FICA and/or FUT NS UTA exempt as a family employee per Section 3 of IRS Publication 15.

4.2.1.3 5.1.24.2 Qualifies for Difficulty of Care payments (i.e., exempt from Federal income tax withholding).

4.2.1.35.1.24.3 Qualifies under the Fair Labor Standards Act(FLSA) as a live-in domestic service employee and is exempt from overtime pay.

4.2.1.35.1.24.4 Qualifies as a foster care or shared living provider (i.e., exempt from Federal income tax withholding).

4.2.1.35.1.25 Application for optional use of direct deposit.

4.2.1.35.1.26 DCSW Employment and Vendor Engagement Packet Check List.

Public Partnerships has developed program-specific Personal Options DCSW enrollment packets and an IDDW Participant-Directed Goods and Services (PDGS) packet. These packets contain all required forms as well as instructions for completing the forms. DCSW enrollment packets and PDGS Packets (currently IDDW only) are included in the Enrollment Binder provided to each member at the time of the enrollment meeting. Additional packets can be requested from the Resource Consultant and Customer Service. All forms contained in the DCSW enrollment packet and Participant-Directed Goods and Services (PDGS) Packet are available through Public Partnerships' website: www.publicpartnerships.com

As described in Section 4.2.1.27, Public Partnerships' Resource Consultants provide hands-on assistance to the member/representative-employer to complete all enrollment forms. The member and DCSW have the option to complete forms based on their preference: electronically with Adobe Sign for electronic signature or using paper forms with a wet signature. Individuals in rural areas may not have internet access causing them to prefer paper forms. With the future introduction of PPL's MyAccount, online enrollment will be a reality allowing Member and DCSW enrollment packets to be immediately integrated into the web portal. Completing enrollment directly in our web portal is the best practice but paper packets will still be available to member/representative-employers and their DCSWs who do not have access to the internet or choose to use the traditional method for completing enrollment documents. PPL provides Resource Consultants in rural areas with a portable internet hotspot that helps to facilitate electronic enrollment. Resource Consultants will also be on hand to assist DCSWs with the completion of forms and to answer any questions that they may have.

We are aware that many of the forms required by the IRS are complicated and can be confusing, so we prepopulate each form in the DCSW enrollment packet and PDGS Packet with the member/representative-employer's and DCSW's demographic information. This allows the Resource Consultant to spend sufficient time explaining each form before signing and dating. We have found that this approach can greatly improve the member/representative-employer's and DCSW's experience with the enrollment process.

Public Partnerships has developed detailed Policies and Procedures (P&P) that are currently used to verify that all DCSW enrollment packet forms are accurately completed and appropriately signed/dated by the DCSW and member/representative-employer. The P&P also identifies the internal processing procedures used by Public Partnerships' Enrollment Team which is responsible for processing and maintaining the DCSW enrollment packet and PDGS Packet forms. These P&P are the standard for quality controls and are also used to train and evaluate the performance of Enrollment staff.

Our process will guide the DCSW through the submission of his/her personal information, attestations, and tax information. We provide instructions online and the Resource Consultant is also available to assist the DCSW. Once the DCSW has completed each of the steps, he or she has the option to sign and submit the application using the electronic signature feature.

After the DCSW completes the DCSW enrollment packet, he/she submits it to the member/representative-employer to review and counter-sign the required documents.

The Enrollment process is completed for the DCSW once the member/representative-employer reviews, signs, and submits the DCSW enrollment packet to Public Partnerships. Before final submission, the member/representative-employer can reject the forms back to the DCSW to correct.

DCSW Employment and Vendor Engagement Packet Contents

4.1.35.1.1 Cover Letter	An instructional cover letter is included in each Personal Options DCSW enrollment packet and Participant-Directed Goods and Services Packet. A checklist is also provided so that the DCSW or member/program representative can verify that all required forms have been completed before submitting the packet to the Resource Consultant.

4.1.35.1.2 Instructions for completing forms and providing information requested.	In addition to providing instructions for the completion of forms in the DCSW enrollment packet and Participant-Directed Goods and Services Packet, the Resource Consultant is available to assist the DCSW or member/representative and answer their questions. This helps to ensure that the required forms are completed accurately and there will be no delays in processing.
4.1.35.1.3 DCSW Data Form to collect personal and emergency contact information.	This information is used to create the Employee Profile in the web portal. Employees are informed of the importance of notifying Public Partnerships whenever there is a change in this information such as a change of an emergency contact person, address, or phone number.
4.1.35.1.4 IRS Form W-4, Withholding Allowance Certificate, and instructions.	Each DCSW enrollment packet includes the IRS Form W-4 and instructions. Public Partnerships Resource Consultants are not allowed to provide tax advice but do refer DCSWs to tax resources when requested.
4.1.35.1.5 West Virginia Form IT-104, West Virginia Employee Withholding Exemption Certificate.	A West Virginia Form IT-104 and instructions are included in each DCSW enrollment packet. DCSWs who do not live in West Virginia are required to complete the West Virginia Certificate of Non-residence.
4.1.35.1.6 US BCIS Form I-9, Employment Eligibility Verification Form, and instructions.	The member/representative-employer is solely responsible for the proper execution of USCIS Form I-9, as defined in Instructions for Form I-9, Employment Eligibility Verification Department of Homeland Security.
4.1.35.1.7 Medicaid Provider Agreement.	Each DCSW enrollment packet includes a Medicaid Qualified Support Worker Agreement which outlines the terms and conditions of providing services for a Personal Options member. These include the DCSW's responsibilities to adhere to the policies and procedures of the West Virginia Intellectual/Developmental Disabilities Waiver and Personal Options program.

4.1.35.1.8 West Virginia Employment Agreement.	A program-specific Personal Options Employee Agreement is included in the DCSW enrollment packet. It is the form used to document the services that the DCSW will provide to the member and also identifies the DCSW's rate of pay for each service. The roles and responsibilities of the DCSW and member/representative-employer are outlined in the Employee Agreement. This document is a useful reference when the member/representative-employer needs to address a DCSW's work performance issue.
4.1.35.1.9 West Virginia DHHR Protective Service Check Form when required by program policy.	Each DCSW enrollment packet includes the West Virginia DHHR Protective Services Check Form. Under the current waiver program policy manuals, each DCSW doesn't need to be screened through the DHHR Protective Services registry, therefore it is the member/representative-employer's option to have their DCSWs complete the form and be screened.
4.1.35.1.10 Application for pre-employment Criminal Background Check through WV Clearance for Access: Registry and Employment Screening (WV CARES).	Public Partnerships has an established process to ensure the pre-employment Criminal Background Check (CBC) is completed through WV CARES for each DCSW. The WV CARES Self-Disclosure Application and Consent Form is included in the DCSW enrollment packet and is also provided to the member/representative-employer at the time Public Partnerships receives the referral. This allows the member/representative-employer to have the DCSW initiate the CBC process before the enrollment meeting is held and decreases the amount of time the member must wait to begin receiving services.
4.1.35.1.11 Consent form for pre-employment criminal background check through WV CARES.	As mentioned in 4.1.35.1.10, the WV CARES consent form will continue to be part of the DCSW enrollment packet and PPL will provide it to the member/representative-employer at the time of referral to expedite the CBC process.
4.1.35.1.12 Employee Training Verification Form.	Each DCSW enrollment packet contains a program-specific Employee Training Verification Form. This form must be completed and signed by the DCSW and member/representative-employer upon hire and annually thereafter to document that the DCSW has

	met all training requirements. In addition to the Employee Training Verification Form, Public Partnerships requires all DCSWs to provide proof of current CPR and First Aid certification obtained through a vendor approved by the Bureau for Medical Services.
4.1.35.1.13 Confidentiality Agreement acknowledging that the DCSW agrees to respect the privacy and confidentiality of members' protected health information.	A Confidentiality Agreement is included in each DCSW enrollment packet. By signing the agreement, the DCSW acknowledges that he/she may not discuss the member's name or otherwise disclose information about the member except under the terms specified in the agreement.
4.1.35.1.14 Instructions for reporting hours worked by DCSWs (i.e.timesheet instructions).	We encourage DCSWs and member/representative-employers to submit electronic timesheets and invoices through the web portal and Time4Care™ mobile device application. Web portal user guides and Time4Care instructions are provided to members/representative-employers and their DCSWs during the enrollment meeting and Resource Consultants assist as needed with the creation of user accounts. The user guides are also available through the Public Partnerships' website: www.publicpartnerships.com. A program-specific Personal Options Timesheet and instructions are also included in the DCSW enrollment packet. The Resource Consultant reviews the documents during the enrollment meeting to ensure the DCSW and member/representative-employer understand how to complete and submit timesheets.
4.1.35.1.15 Due dates for DCSWs to report hours worked and pay schedule.	A detailed program-specific Personal Options Payroll Schedule is included in the DCSW enrollment packet. During the enrollment meeting, the Resource Consultant reviews the payroll schedule and timesheet instructions in detail with member/representative-employers to ensure they understand their responsibilities and the timeframes associated with approving their DCSWs' timesheets. At this point in the enrollment meeting, the Resource Consultant also reviews the instructions and invoice form used for billing for Transportation services. An

	electronic version of the transportation invoice is available through the web portal.
4.1.35.1.16 Participant-directed Goods and Services, Environmental Accessibility Adaptations, and Community Transition Services Disallow List, if applicable.	The Participant-Directed Goods and Services (PDGS) Packet contains a Goods and Services Instructions document that includes a full listing of the disallowed items cited in the IDDW policy manual. The instructions also address the steps required to access PDGS including the responsibilities of the member's Service Coordinator to obtain authorization through the Utilization Management Contractor (UMC).
4.1.35.1.17 Application for Approval of Participant-directed Goods and Services, Environmental Accessibility Adaptations, and other vendor-provided services if applicable.	The Participant-Directed Goods and Services (PDGS) Packet contains the Application for Participant-Directed Goods and Services. This document must be completed and signed by the member/representative-employer along with supporting documentation that includes but is not limited to the estimate from the PDGS vendor.
4.1.35.1.18 Provider Service Agreement.	Depending upon the type of PDGS requested by the member/representative-employer, a Provider Service Agreement may be required to be included with the supporting documentation submitted with the Application for Participant-Directed Goods and Services.
4.1.35.1.19 IRS Form W-9, Request for Taxpayer ID Number and Certification.	An IRS Form W-9 is included in the Participant-Directed Goods and Services (PDGS) Packet. Public Partnerships will not issue a PDGS payment unless we have the vendor's tax information in our system.
4.1.35.1.20 (PDGS), (EAA), and other participant-directed vendors engagement information form (if applicable).	This form is not currently required for IDDW PDGS applications. If awarded this contract, Public Partnerships will consult with BMS to determine if this form and those referenced below in Sections 4.37.1.21 and 4.37.1.22 will be added to the IDDW PDGS packet or required for TMHWV participants.
4.1.35.1.21 Participant-directed vendors invoice format for submission of payment requests and instructions for submitting invoices for payment (if applicable).	This form is not currently required for IDDW PDGS applications.

4.1.35.1.22 Participant-directed vendor invoice due dates and payment schedule (if applicable).	This form is not currently required for IDDW PDGS applications.
4.1.35.1.23 Form to collect information for West Virginia New Hire Reporting Form requirement.	The DCSW enrollment packet includes the Personal Options Employee Data Form which captures the DCSW's name, address, social security number, and date of hire. Public Partnerships uses this information to register new hires and returning workers in the West Virginia New Hires Reporting Center as required.
4.1.35.1.24 Form to collect required information to determine if a DCSW meets one of the criteria below:	
4.1.35.1.24.1 To be FICA and/or FUTA/SUTA exempt as a family employee per Section 3 of IRS Publication 15.	Included in the DCSW enrollment packet is the easy-to-understand Personal Options Tax Exemption Form which allows DCSWs to identify if they qualify for the Family Employee exemption addressed in IRS Publication 13, section 3. For example, it is common for self-directing IDDW members to employ a parent. When this Employer/Employee relationship is identified on the Personal Options Tax Exemption Form, Public Partnerships does not withhold FICA/SUTA from the DCSW's payments.
4.1.35.1.24.2 Qualifies for Difficulty of Care payments (i.e., exempt from Federal income tax withholding).	In 2016, Public Partnerships implemented the Employee Application for Difficulty of Care Federal Income Tax Exclusion Form. This form and the accompanying instructions are included in the DCSW enrollment packet. For DCSWs who indicate that they meet the qualifications for the Difficulty of Care Exclusion, Public Partnerships does not withhold Federal Income Tax from their payments and reports the payments per the IRS guidelines.
4.1.35.1.24.3 Qualifies under the Fair Labor Standards Act (FLSA) as a live-in domestic service employee and is exempt from overtime pay.	The DCSW enrollment packet includes the Fair Labor Standards Act Live-in Exemption form. The member/representative-employer provides information about themselves, and the DCSW and answers residency statements that help determine eligibility for the live-in exemption that would make the DCSW ineligible for paid overtime.

4.1.35.1.24.4 Qualifies as a foster care or shared living provider (i.e., exempt from Federal income tax withholding).	Public Partnerships is familiar with the requirements in IRS Notice 2014-7 regarding the treatment of certain payments to workers through a state Medicaid Home and Community-Based Services Waiver program. We have developed the Employee Application for Difficulty of Care Federal Income Tax Exclusion Form and implemented systems that allow us to efficiently identify DCSWs who qualify as foster care or shared living providers and process their Federal and State income tax withholdings as required. Based upon guidance provided by the West Virginia State Tax Department, Public Partnerships does withhold state income tax from payments made to DCSWs who qualify for the Difficulty of Care Exclusion.
4.1.35.1.25 Application for optional use of direct deposit.	A Direct Deposit Application and instructions are included in the DCSW enrollment packet and Public Partnerships encourages all DCSWs to sign up.
4.1.35.1.26 DCSW Employment and Vendor Engagement Packet Check List.	The Personal Options DCSW enrollment packet contains the forms that must be completed by DCSWs as well as instructions for completing the forms. The Participant-Directed Goods and Services Packet contains detailed instructions and all forms that the member/representative-employer must submit when requesting PDGS. Both the DCSW enrollment packet and PDGS packet contain a checklist to verify that all required forms have been completed.

4.2.1.36 The Vendor should assist member/representative-employers with completing and submitting the required information and forms included in the DCSW Employment and Vendor Enrollment Packet, as needed.

Our approach to engaging with the DCSWs to complete the Employment Enrollment Packet is to request that they attend the member's enrollment meeting. This allows the Resource Consultant to provide the DCSWs the same information provided to the member/representative-employer regarding the Personal Options program, Public Partnerships' role, and program policies and procedures, including those that pertain to timesheet and invoice submission, approval, and payment.

During the enrollment meeting, the Resource Consultant reviews the DCSW employment enrollment packet and explains each form the DCSW must complete and sign. Detailed instructions for each form and a checklist are included in the DCSW employment enrollment packet.

When the DCSW does not attend the enrollment meeting with the member, the Resource Consultant is available to assist the member/representative-employer and DCSW. The DCSW employment enrollment packet and instructions are available on our website.

Upon receipt of the DCSW employment enrollment packet, our Enrollment Team validates each form before processing. The Resource Consultant is informed of any issues and promptly follows up with the member/representative-employer and/or DCSW to resolve the issue. We understand the importance of obtaining and efficiently processing the DCSW employment enrollment packet so that the DCSW can begin providing services to the member as soon as possible.

Participant-Directed Goods and Services (PDGS) and Environmental Accessibility Adaptation (EAA) Packets are included in every IDD waiver member's Enrollment Binder. The packets contain detailed information and instructions, a checklist, and all forms required to apply for PDGS or EAA. During the enrollment meeting, the Resource Consultant educates the member/representative-employer on the contents of the PDGS and EAA packets, the process for submitting the packet, and the timelines for approval and issuance of payments. The Resource Consultant is available to assist the member/representative-employer with the completion of the forms and obtaining required documents including the estimate or quote for the item or service being requested, the IRS Form W-9, the member's Individual Program Plan (IPP) indicating the Interdisciplinary Team (IDT) has approved the requested item or service and the IDDW-08 Form.

Upon receipt of the PDGS or EAA Packet, the Resource Consultant validates the submission to confirm that all required documents are present and have been accurately completed. If the Resource Consultant identifies issues, the Resource Consultant follows up with the member/representative-employer within one (1) business day and assists the member/representative-employer as needed until the PDGS or EAA packet is complete.

4.2.1.37 The Vendor should collect and process information from the DCSW Employment and Vendor Engagement Packets and file completed forms with the appropriate Federal and State agencies within two (2) business days of receipt of information.

Public Partnerships will process Direct Care Service Worker (DCSW) Packets and Participant-Directed Goods and Services (PDGS) Packets and file completed forms with the appropriate Federal and State agencies within 2 business days of receipt of information. Our current process includes two (2) quality checks to ensure forms have been accurately completed and signed as required.

DCSW Enrollment Packets:

Newly referred members are encouraged to have their DCSWs attend the enrollment meeting. This allows the Resource Consultant to provide consistent information to the member/representative-employer and DCSW regarding the Personal Options program including the payroll schedule and timesheet processing rules. The DCSW can complete all enrollment paperwork in electronic format, including using Adobe Sign for electronic signature, or by using the traditional paper enrollment packet. Regardless of the method, the Resource Consultant explains the forms and assists the DCSW as needed. After the enrollment meeting, the Resource Consultant uses a checklist to confirm all required forms have been accurately completed before submitting them to Public Partnerships' Enrollment Team to be processed. (Quality check #1)

When the DCSW is not present at the member enrollment meeting or when an existing member hires a new DCSW, a paper DCSW Enrollment Packet is completed and is sent by the member/representative-employer to the Resource Consultant who reviews them for completeness and accuracy. The Resource Consultant works with the DCSW to correct any errors before submitting the forms to the Enrollment Team for processing. (Quality check #1) The Resource Consultant is required to submit the Packet to Enrollment within one (1) business day of receiving it.

Upon receiving the completed DCSW Packet, our Enrollment staff review the forms for accuracy before inputting the DCSW's information into the web portal. (Quality check #2) Data from each of the forms (worker's demographic data, federal, state, and municipal tax withholding data, FLSA overtime pay and Difficulty of Care eligibility, training qualifications, etc.) are stored in the web portal and used to accurately pay the DCSW's timesheets and invoices and appropriately withhold and report taxes.

Each form from the original DCSW Packet and any updated forms subsequently submitted by the worker are stored electronically in the web portal. Federal, state, and municipal tax forms are not required to be sent or filed in the agencies' systems. The WV New Hire Directory requires Public Partnerships to file new and returning DCSWs in their system within 14 days of hire.

PDGS and EAA Packets:

The PDGS and EAA Packet is provided to the member at the time of the enrollment meeting, as applicable. The member/representative-employer is responsible for submitting the completed PDGS and/or EAA packet to the Resource Consultant once the Interdisciplinary Team (IDT) has approved the item/service that will be requested and it has been documented in the member's Individual Program Plan (IPP). Upon receipt of the PDGS and/or EAA Packet, the Resource Consultant reviews it for accuracy and completeness and when necessary, follows up with the member/representative-employer or the Service Coordinator to correct or obtain documents. (Quality check #1). The Resource Consultant is required to submit the complete PDGS and/or EAA packet for processing within 1 business day of receipt. Before issuing vendor payments, Public Partnerships support staff review the packet to determine that the requested item/service meets the requirements of the IDDW Policy Manual. (Quality check #2). For more details on the PDGS payment process, please refer to Section 4.2.1.11.

4.2.1.38 The Vendor should maintain copies of documentation, electronic or other media, in the applicable DCSWs' and vendors' files.

Public Partnerships electronically uploads and stores DCSW enrollment packets and related DCSW documentation including the Criminal Background Check Fitness Determinations, CPR and First Aid certifications, and annual training documents on our WV Personal Options web portal.

Participant-Directed Goods and Services Packets and related documentation including the IRS Form W-9, the member's Individual Program Plan (IPP) indicating the Interdisciplinary Team (IDT) has approved the requested item or service, and the IDDW-08 Form are stored in the same manner described above for DCSW enrollment packets.

4.2.1.39 The Vendor should notify the member/representative-employer regarding missing or incorrect information submitted from the DCSW Employment and Vendor Engagement Packet and assist with obtaining it within five (5) business days of completion or submission.

Public Partnerships has created program-specific Policy and Procedure (P&P) documents for processing Personal Options DCSW and Participant-Directed Goods and Services (PDGS) Packets. These P&Ps include step-by-step instructions for processing packets including the handling of missing, incomplete, or inaccurate documents.

We understand the importance of members being able to access services as soon as possible. This is why our Resource Consultants encourage members to include DCSWs in their enrollment meetings, whenever possible. With hands-on assistance from the Resource Consultant, the DCSW can complete all enrollment paperwork in electronic format, including using Adobe Sign for electronic signature. When this is not possible, the Resource Consultant receives the paper DCSW and PDGS/EAA packets and verifies the documents for accuracy and completeness before submitting them to the Enrollment Team for processing. Resource Consultants must verify packets within one (1) business day of receipt and promptly follow up with the member/representative-employer and/or DCSW to resolve any identified issues. After the Resource Consultants submit the packets to Enrollment, a second quality check of each document is completed before inputting all required data into the web portal. Enrollment processes all documents received through the eFax within three (3) business days.

These well-established processes and timelines will allow us to obtain missing or corrected documents within the five (5) business days specified in this requirement unless the member/representative-employer or DCSW fails to cooperate with our request. After the Resource Consultant has made three (3) attempts to obtain the document(s), a written notification will be mailed to the member/representative-employer. Depending on the specific circumstances, the DCSW may be disassociated from the member or the PDGS application may be rejected until all required documentation is obtained. Members who have chronic issues with documentation requirements may be referred to transfer to the Traditional Service Model where they will receive greater oversight. All involuntary transfers are reviewed with the Agency to obtain prior approval.

4.2.1.40 Vendor should distribute and collect completed IRS Forms W-9, Request for Taxpayer ID, and Certification within thirty (30) calendar days, when it is determined that a participant-directed vendor is an independent contractor.

Public Partnerships has developed a Participant-Directed Goods and Services (PDGS) packet for the Intellectual/Developmental Disabilities Waiver (IDDW) program. The packet includes:

- PDGS Application Instructions and Checklist;
- PDGS Application Form;
- PDGS Payment Request Form;
- Blank IRS W-9 form - Request for Taxpayer ID and Certification

At the enrollment meeting, Public Partnerships' Resource Consultants provide each member with an Enrollment Binder which includes the PDGS packet. Once the member/representative-employer completes the PDGS packet, it is submitted to the Resource Consultants for review. A completed PDGS packet includes the documents listed above as well as an itemized estimate/quote for the item/service being requested, a copy of the member's Individual Program Plan (IPP) which documents the Interdisciplinary Team (IDT) approved the item/service, supporting documents (i.e. physician's or therapist's recommendations, detailed drawings for home modifications to improve accessibility, etc.), and the IRS W-9 form which has been completed and signed by the PDGS vendor. The Resource Consultant will follow up with the member/representative-employer regarding any issues with the documents. If the member/representative-employer fails to submit all required documents within a reasonable amount of time, the Resource Consultant will mail a written notification.

Once the Resource Consultant receives the complete and accurate PDGS packet, it is submitted within 1 business day of receipt to our program support staff for final approval and payment processing. No PDGS payments are issued to the vendor unless Public Partnerships has received all required documents including the vendor's completed and signed IRS W-9 form. PDGS payments issued to independent contractors are reported as required by the IRS.

4.2.1.41 Vendor should process the DCSWs' IRS Forms W-4 Withholding Allowance Certificate and the West Virginia Forms IT-104, West Virginia Employee Withholding Exemption Certificate within thirty (30) calendar days.

Upon receiving a completed DCSW enrollment packet, Public Partnerships' Financial Operations Enrollment team will process the documents and verify that all have been received, accurately completed, and signed by the DCSW in the appropriate sections. This includes IRS Form W-4 and the West Virginia Form IT-104. Because these enrollment documents are time-sensitive and must be processed quickly and accurately, we have developed an internal module in our web portal that allows us to organize and process documents efficiently. Business Process Management (BPM) is a workflow management tool for incoming documentation. All paperwork is reviewed and then assigned as necessary to the appropriate queue for attention. BPM tracks how long documents have been waiting for review so that staff can verify the processing time meets service line agreements. IRS Forms W-4 and West Virginia Forms IT-104 are processed with the DCSW enrollment packet in a timeframe shorter than thirty (30) calendar days.

4.2.1.42 Vendor should maintain copies of the IRS Forms W-4 and West Virginia Form IT-104, when applicable, in each DCSW's file.

Once the DCSW enrollment packet has been processed by our Enrollment Team and assigned a completed status in our WV Personal Options web portal, the documents in the packet, including IRS Form W-4 and the West Virginia Form IT-104 are stored in the web portal's Document Management system. Registered users can easily access the DCSW's documents at any time.

4.2.1.43 The Vendor should collect and maintain copies of the USCIS Form I-9, Employment Eligibility Verification Form in each DCSW's file.

Public Partnerships provides the USCIS Form I-9 and the USCIS instructions for its completion in the DCSW enrollment packet. During the enrollment meeting, the member/employer is trained by the Resource Consultant to understand the purpose of the USCIS Form I-9 and how to accurately complete the form. The member/representative-employer is solely responsible for the proper execution of USCIS Form I-9, as defined in Instructions for Form I-9, Employment Eligibility Verification Department of Homeland Security.

Upon receipt of the completed DCSW enrollment packet, our Enrollment Team will acknowledge the receipt of Form I-9 as executed by the member/representative-employer. We cannot attest that fields have been completed or are otherwise accurate; the member/representative-employer retains full responsibility for ensuring that those sections are complete, accurate, and verified. Public Partnerships maintains an electronic copy of each DCSW's Form I-9 in our WV Personal Options web portal's document management system.

4.2.1.44 The Vendor should execute a Medicaid Provider Agreement with DCSWs and a West Virginia Provider Service Agreement, which will be provided to the successful vendor upon contract award, with vendors of authorized Participant-Directed Goods and Services, Environmental Accessibility Adaptation (EAA), Personal Emergency Response System (PERS), Extended Professional Services/therapies, and Community Transition Services. The Vendor should maintain copies of these documents in the DCSWs' and vendors' files.

Each DCSW Packet includes a Medicaid Provider Agreement which outlines the terms and conditions of providing paid services for a Personal Options member. The Medicaid Provider Agreement must be signed by DCSW and also by the Resource Consultant who represents Public Partnerships as the subagent providing F/EA FMS and Resource Consulting services for the Bureau of Medical Services.

Upon receipt of the Employee Packet, the Resource Consultant validates each form for accuracy, including the Medicaid Provider Agreement. The Employee Packet is then submitted to the enrollment processing for processing (e.g., criminal background check). The DCSW is not allowed to provide paid services to the member until our staff has confirmed that all required documentation is signed, dated, and archived. The DCSW packet documents are electronically stored through our Document Management system in the web portal.

When appropriate, a Provider Service Agreement is obtained from providers/vendors of authorized member-directed goods and services (PDGS). Upon receipt of the PDGS Packet, the Resource Consultant reviews the documents to ensure all have been submitted and have been accurately completed. PDGS requests for ongoing services such as approved therapies for IDDW members or transition services for TMHWV members will include a Provider Service Agreement that includes details of the vendor, the service, the frequency, duration, location, and cost of service.

After approving and processing the PDGS Packet, including the Provider Service Agreement, the documents are electronically stored through our Document Management system in the web portal. The Document Management system allows Public Partnerships to maintain required documents on a secure, limited-access server. Please see Section 4.40 for more details on our record retention process.

4.2.1.45 The Vendor should participate in the West Virginia Clearance for Access: Registry & Employment Screening (WV CARES) program for the required documentation for fingerprint-based state and federal criminal background checks for all DCSWs hired by the member/representative-employer.

Public Partnerships is currently registered and fully participating in the West Virginia Clearance for Access: Registry & Employment Screening (WV CARES) program. Per program policies and WV CARES requirements, Public Partnerships ensures that all Personal Options DCSWs are initially determined to be fit for employment before providing services. Existing DCSWs are re-determined to be fit for continued employment at least every five years.

We provide a WV CARES Criminal Background Check Packet to DCSW applicants and to existing DCSWs who need to renew their criminal background check eligibility status. The packet includes:

- Instructions
- Public Partnerships internal scheduling form
- WV CARES Self-Disclosure Application and Consent form
- WV CARES Request for Variance of Fitness Determination form

DCSWs are required to complete the packet and return it to Public Partnerships along with their Identigo fingerprint fee and WV CARES Administrative fee payments. We validate each packet to ensure it is complete and the DCSW has signed the consent document and provided proper payment. Packets are processed by entering the DCSW's identifying information into the WV CARES system, checking all required registries, and scheduling the fingerprint appointment with Identigo. Once the appointment is scheduled, we inform the DCSW of the date, time, and location of the fingerprint appointment.

The DCSWs' payments for their criminal background checks are batched and submitted to Identigo and WV CARES each week. Daily we monitor the WV CARES system and respond to notifications as needed to ensure criminal background checks are completed and fitness determinations are obtained as quickly as possible.

We have developed a system to track criminal background check packets throughout the entire process. This allows us to monitor the efficiency of the system and to promptly follow up when issues are identified. The DCSW's criminal background check status and date range are stored in the web portal and this allows us to notify the DCSW 90 days in advance of the date the background check needs to be renewed.

DCSWs who are determined unfit for employment are notified by phone and written letter within one (1) business day of Public Partnerships receiving the notification from WV CARES. The member/representative-employer is also notified and assisted as needed with implementing the Emergency Backup Plan and recruiting a new DCSW.

4.2.1.46 The Vendor should receive and maintain fitness determinations of criminal background check results from the WV CARES on DCSW candidates on file and provide results of the fitness determination to member/representative-employers within two (2) business days of receipt.

4.2.1.46.1 The Vendor should receive and maintain "rap back" notifications regarding WV CARES fitness determinations on active DCSWs.

Public Partnerships has a process and procedure for obtaining, maintaining, and reporting WV CARES fitness determinations for DCSWs. We monitor the WV CARES system daily and process the DCSW fitness determinations within one (2) business days of receipt of the electronic notification (see below) and e-mail issued by the system.

Upon receipt of the fitness determination through the WV CARES system, the Resource Consultant is informed of the DCSW's criminal background check status. When a DCSW has been determined to be fit for employment, the Resource Consultant notifies the member/representative-employer within one (1) business day of receipt of the DCSWs status. During this call, the Resource Consultant confirms that the DCSW is fully qualified to begin providing services and informs the member/representative-employer of the DCSW's start date. If a DCSW has been determined as ineligible the resource consultant notifies the member/employer and at their preference the DCSW by phone and written letter. The letter provides instructions regarding the process and responsibilities for submitting a Variance Request to WV CARES should the DCSW and member/employer choose to appeal the fitness determination decision.

Public Partnerships uploads and maintains each DCSW's completed CBC Packet, fitness determination letter(s) from WV CARES, and all related documentation electronically through the Document Management system in the WV Personal Options web portal.

4.2.1.46.1 The Vendor should receive and maintain "rap back" notifications regarding WV CARES fitness determinations on active DCSWs.

Public Partnerships will update its WV CARES existing process and procedure to include receipt and maintenance of "rap back" notifications regarding fitness determinations on active

DCSWs. We understand that the "rap back" notifications allow timely monitoring of changes to criminal history. Specifically, a "rap back" notification goes to the West Virginia Department of Health and Human Resources when an individual who has undergone a fingerprint-based, state or federal criminal history record information check has a subsequent state or federal criminal history event.

4.2.1.47 The Vendor should verify each DCSW's social security number and providers' and vendors' FEIN through the Social Security Administration and IRS as appropriate.

Public Partnerships verifies each Direct Care Service Worker's (DCSW) Social Security Number (SSN) at the time of hire. Our staff verifies SSNs using the Social Security Administration's Business Services online system. If the SSN cannot be verified, the program support staff is notified of the issue, and the Resource Consultant follows up with the DCSW to verify the number on his/her Social Security Card matches the number in our system.

Vendors of Participant-Directed Goods and Services (PDGS) provide their Federal Employer Identification Number (FEIN) on an IRS Form W-9. Public Partnerships verifies the FEIN through the Internal Revenue Service's e-Services system.

Following the initial verification of DCSWs' Social Security Numbers and PDGS vendors' FEINs, Public Partnerships verifies the numbers quarterly. If a mismatch is identified, the resource consultant is notified of the issue and will follow up with the DCSW or PDGS vendor.

4.2.1.48 The Vendor should report member/representative-employers' new worker hires into the West Virginia New Hires Directory within twenty (20) calendar days of hire.

Public Partnerships has established internal controls to monitor the reporting of new hires per state requirements. This critical bi-weekly routine is part of our Standard Operating Procedures and is the responsibility of the Payroll Supervisor. Our internal controls include a formal management review of the status of activity completion versus the requirements documented in the West Virginia New Hire Directory. New hires are reported to the WV New Hires Directory within 14 calendar days of hire.

4.2.1.49 The Vendor should maintain copies of West Virginia New Hire Reporting documentation in workers' files.

Public Partnerships completes the WV New Hire Report on a bi-weekly schedule. Documentation about new hire reporting is maintained on our secure servers. We also conduct quarterly file audits to verify the integrity of all required documentation, including new-hire reporting.

4.2.1.50 The Vendor should provide member/representative-employer orientation and skills training in a culturally sensitive manner and in accordance with the philosophy of self-direction, which supports empowering members and their representatives by expanding their degree of choice and control over the services they need to live at home, and vesting decision-making and managerial authority in members/representative-employers.

Public Partnerships currently provides F/EA FMS and Resource Consulting services to Personal Options program members with a wide range of disabilities. Our Resource Consultants are trained and use People First Language and a person-centered approach in their interactions with the members, their families, and Direct Care Service Workers (DCSWs). Our goal is to develop a relationship of mutual respect and trust.

Our Resource Consultant team currently consists of 60 resource consultants and five supervisors located in communities throughout West Virginia. They are knowledgeable of the local resources available to support the needs of the members and their DCSWs. They have built relationships with case managers, and presented policies and procedures for member direction The Resource Consultants' knowledge of their community and LTSS partners ensure a person-centered and self-directed approach.

Public Partnerships is aware that self-directing services may initially seem overwhelming and complicated to our members. We provide the member/representative-employers with tools and support that allow them to exercise choice and control over their services and be successful employers. The orientation and skills training does not end after the enrollment meeting. Our program support staff and Resource Consultants monitor the performance of member/representative-employers so that we can proactively re-educate and provide assistance as needed.

4.2.1.51 The Vendor should have a member/representative-employer orientation process that uses a standard curriculum and materials that have been pre-approved by the Agency. The orientation curriculum should include, but is not limited to, information reported in Section 4.2.1.51 below.

4.2.1.51.1 Prior to conducting the member/representative-employer orientation, the Vendor should perform a readiness assessment to identify and address any issues that may impede the member/representative-employer's success in self-directing their services.

Public Partnerships has implemented a standard orientation process using a curriculum and documents, as part of the Employer Guide, which has been approved by the Agency. The topics included in the standard curriculum are as follows:

1) Overview of Personal Options
2) Employer Roles and Responsibilities
    i) Personal Options Enrollment Process
3) Supports for Self-Direction
4) Personal Options Planning
5) Developing the Service Plan (if applicable)
6) Developing the Spending Plan
7) Selecting, Hiring, Training, and Supervising DCSWs
8) Employee Timesheets and Payments

9) Program Safeguards
10) Summary of Program Responsibilities

The orientation occurs during the face-to-face enrollment meeting scheduled upon receipt of the member's referral and budget amount. If an authorized representative will be used their presence is mandatory in the review of the standard curriculum.

4.2.1.51.1 Prior to conducting the member/representative-employer orientation, the Vendor should perform a readiness assessment to identify and address any issues that may impede the member/representative-employer's success in self-directing their services.

The WV Personal Options account management team will work with BMS leadership on the development of self-directed assessment criteria for members. There are several key areas that we have identified as success factors in participant direction. While not an exhaustive list, we recommend considering the following areas in the readiness assessment.

1. **Social Support System:** Who is in the member's paid and unpaid support system, the proximity of friends and relatives, and their availability.
2. **Understanding of Roles**: During the review of the participant-directed option, we expect members to readily understand their role as a Common Law Employer and our role as payment agent.
3. **Understanding of Responsibilities**: The member should express confidence and willingness in supervising a self-hired DCSW, adhering to the prior authorized hours per week and using Electronic Visit Verification.
4. **Desire to Self-Direct**: Our Resource Consultants have found that in some instances, the member simply misunderstood the expectations and expresses hesitancy or extensive concerns.

4.2.1.52 During orientation, the Vendor should provide information and review with member/representative-employer the following:

4.2.1.52.1 Role and responsibilities of the member/representative-employer.

4.2.1.52.2 Role and responsibilities of the Vendor.

4.2.1.52.3 How the member/representative-employers can contact Customer Service.

4.2.1.52.4 Subagent - F/EA FMS services provided.

Public Partnerships will schedule an in-person enrollment meeting with the member along with their representative, if applicable, and any known DCSWs. This enrollment meeting serves the purposes described below and provides a detailed orientation to their waiver program, PPL, and their responsibilities as an employer.

We have included a QR code to be used to view our Roles and Responsibilities video. Please use your camera and center the code to be brought directly to the video.

4.2.1.52.1 Roles and responsibilities of the member/representative-employer.

During the enrollment visit, the Resource Consultant guides the meeting using the enrollment binder containing all information and forms to self-direct. The Resource Consultants review the member/representative-employer's roles, rights, and responsibilities in a participant-directed service option. The fundamental role and responsibility of being a Common Law Employer and managing services using a payment agent is the focal point. Resource Consultants focus on the following key aspects of being a member-employer.

1. **Self-Directed** – Members opting to self-direct are proactive, ask questions and readily understand their role.
2. **Supervision** – Providing feedback to the DCSW
3. **Oversight** – Electronic Visit Verification usage is critical as is monitoring hours worked by the DCSW.
4. **Communication** – Any changes in care need, admittance to a hospital, or change in backup plan staffing need to be communicated to the case manager and FMS.
5. **Eligibility** – On an annual basis Medicaid eligibility will need to be redetermined to ensure self-directed services can continue.

4.2.1.52.2 *Role and responsibilities of the Vendor.*

During the enrollment visit, the Resource Consultant provides an overview of Public Partnerships as the member's Fiscal/Employer Agent. Our core roles and responsibilities focus on pre-enrollment and ongoing support. The fundamental role and responsibility of being a Common Law Employer and managing services using a payment agent is the focal point. Resource Consultants focus on the following key aspects of being a member-employer.

1. **Explanation of Payroll Agent** – Public Partnerships nor BMS is the Common Law Employer of the DCSW. We are only responsible for payment to DCSWs and providers.
2. **Enrollment Support** – Resource Consultants are assigned and readily available during the enrollment period.
3. **Training** – Resource Consultants provide best practice tips on hiring and supervising in addition to using our systems like Electronic Visit Verification.
4. **Payment Processing** – Public Partnerships will make all authorized payments to DCSWs and providers, file all applicable employee and employer taxes, and issue W-2s and 1099s.
5. **Back-Up Planning** – Resource Consultants are in contact with members throughout the plan year to ensure staff identified in the backup plan remain viable options.

4.2.1.52.3 How the member/representative-employers can contact Customer Service.

Members have several ways to get support from referrals through payments. We provide the member with their Resource Consultants name, phone number, and email as their primary contact during their time with Public Partnerships. In the event their consultant is not available, we have a designated toll-free number for the WV Personal Options program 1-866-429-3465. Additionally, we have designated email accounts for each of the WV participant-directed options (e.g., pplwvadw@pcgus.com).

4.2.1.52.4 Subagent - F/EA FMS services provided.

During the enrollment meeting, the Resource Consultant provides the member/representative-employer with an Enrollment Binder that contains detailed information regarding Public Partnerships' F/EA FMS services. The Resource Consultant conducts an orientation and skills training during which this information is reviewed with the member/representative-employer in a manner to promotes learning, including providing examples and providing hands-on assistance with creating a user account for the web portal for electronic timesheets/invoices and budget monitoring. The member/representative-employer is encouraged to take notes and ask questions.

Our F/EA FMS services are explained to the member/representative-employers to provide an understanding of:

- Public Partnerships' role as the F/EA FMS
- The scope of services and responsibilities of the F/EA FMS
- Understanding their responsibilities as an employer;
- Understanding and complying with program policies;
- Completing required paperwork;
- Evaluating their needs and plan for services;
- Hiring, training, and managing their DCSWs;
- Developing their individualized spending plan;
- Identifying additional community resources.

4.2.1.52.5 Vendor's hours of operations.

Our Resource Consultants provide our hours of operation during the enrollment visit. Public Partnerships' business hours are from 8:30 a.m. to 5:00 p.m., Monday through Friday. Customer Service Representatives are available from Monday through Friday from 9:00 a.m. to 6:00 p.m.

4.2.1.52.6 Key contacts at the Vendor.

Member/representative-employers are informed during the orientation session that their key contacts at Public Partnerships are the assigned Resource Consultant and Customer Services Representatives.

4.2.1.52.7 Toll free telephone, TIY, and fax numbers.

Public Partnerships has held the toll-free telephone number (866) 429-3465 since 2007 for Personal Options members and DCSWs. The program-specific toll-free Customer Services telephone numbers with TTY capabilities for members who are deaf or hard of hearing. We continue to maintain 1-866-388-1626 as our Personal Options fax number most often used by transportation providers for invoice submission.

4.2.1.52.8 Member Rights and Responsibilities.

We review the Members' Rights and Responsibilities and let them know how to contact Public Partnerships in the event they are not satisfied with our services. We highlight that all members have the right to:

1. Freedom from abuse, neglect, and exploitation;
2. Transfer to the traditional service model if desired;

3. Request a West Virginia DHHR Fair Hearing;
4. Appropriate and respectful care from their DCSW(s);
5. Participate in their person-centered planning and service delivery process;
6. Confidentiality regarding all services provided through the Personal Options program;
7. Appoint a Program Representative if desired;
8. Access documents about your Personal Options services;
9. Be treated with dignity and respect at all times;
10. Receive information as needed to make informed decisions;
11. Be notified promptly of any changes to the Personal Options program.

4.2.1.52.9 Instructions for completing forms included in the Member/Representative-Employer Enrollment Packet.

Our enrollment packet contains a cover letter that explains how Public Partnerships will support them and instructions on packet contents. The instructions provide an overview of the forms that the Resource Consultant will complete during the enrollment visit including the Self-Directed Service Plan. The instructions distinguish forms the member needs to complete and those to keep for reference. They also provide an overview of the key payroll forms including the Transportation Invoice. Our instructions include our phone number, Personal Options program email account Public Partnerships website where all program forms are posted. Our process has been stable and consistent and we have successfully executed since 2007.

4.2.1.52.10 Incident reporting process.

The skills training session of the enrollment meeting includes a detailed overview of the Personal Options Incident Report form and the member/representative-employer's responsibility to document incidents and report them to the Resource Consultant as soon as possible following the occurrence of an incident. Written instructions for documenting and reporting incidents are included in the Enrollment Binder and the DCSW initial and annual training materials provide information regarding the DCSW's responsibilities for identifying and reporting incidents.

4.2.1.52.11 Process for ensuring that DCSW criminal background checks are conducted in accordance with program policy.

Public Partnerships' Resource Consultants review with the member/representative-employers the required qualifications for DCSWs including a pre-employment Criminal Background Check (CBC) which must be completed through the West Virginia Clearance for Access: Registry and Employment Screening (WV CARES). A CBC Packet with instructions is included in the Enrollment Binder and during the skills training session of the enrollment meeting, the Resource Consultant reviews the forms, required payments, process, and timelines for obtaining the DCSWs' criminal background checks and fitness determinations through WV CARES.

4.2.1.52.12 Description of who can be a representative, how to determine when a member should have a representative and the role and responsibilities of a representative as specified by the Agency.

Public Partnerships provides information regarding the role and responsibilities of the Program Representative to the member or legal representative during the initial call which is made within 3 business days of receipt of the member's referral. This allows the member or legal representative to consider whether a Program Representative will be needed and if so, to invite them to participate in the enrollment meeting. During the orientation and skills training sessions of the enrollment meeting, the Resource Consultant reviews the role and specific responsibilities of the Program Representative.

All members have the choice of appointing a Program Representative to assist them with the responsibilities of self-directing services and being a household employer. Under certain circumstances, members are required to have a Program Representative. These include members who are under the age of 18, members who have a legal guardian, and ADW members whose Medical Necessity Evaluation Request (MNER) and/or Pre-Admission Screening (PAS) indicate a diagnosis of Alzheimer's, brain multi-infarct, senile dementia or a related condition.

The Program Representative cannot be a paid DCSW and must be sufficiently involved in the member's life and knowledgeable of their needs and services to assist with the responsibilities of self-directing services through the Personal Options program. These responsibilities include:

- Approving DCSWs' timesheets and invoices;
- Monitoring the delivery of services and supports to the member by the DCSWs;
- Participating in the monthly phone call and six-month face-to-face meeting with the Resource Consultant as required;
- Assisting with the development of the member's Spending Plan;
- Participating in the enrollment meeting;
- Recruiting, interviewing, hiring, training, scheduling, and supervising DCSWs;

- Reporting incidents;
- Reporting suspected fraud.
- Reporting abuse, neglect, and exploitation; and
- Terminating DCSWs per laws and program requirements;

Resource Consultants monitor the performance of member/representative-employers and assist and re-training when there are trends such as late timesheet submission, failure to follow the approved Spending Plan, non-compliance with monthly contacts, etc. If the performance issues persist, the Resource Consultant will recommend that a Program Representative be appointed or may recommend that the member transfer to the traditional service delivery model.

4.2.1.52.13 Description of methods available to member/representative employers, DCSWs and vendors for contacting Vendor which include, but are not limited to, telephone contacts with designated West Virginia support staff.

Public Partnerships make several methods available to member/representative employers, DCSWs, and vendors for contacting PPL:

4.2.1.52.14 Time frame and process for returning voice mail messages from member/representatives, DCSWs and vendors.

Public Partnerships staff will respond to voicemail messages within one (1) business day. The same timeframe applies to e-mail communications. The Resource Consultants' outbound voicemail messages also instruct callers to contact our Customer Service Center if they have an urgent matter and reference the program-specific Customer Service toll-free number which is on the cover of the Enrollment Binder.

4.2.1.52.15 Completing forms included in the DCSW Employment and Vendor Engagement Packet.

Public Partnerships currently utilizes the DCSW enrollment packet and the PDGS and EAA packets that have been preapproved by the Agency. If the potential DCSW attends the enrollment meeting with their member/representative-employer, Public Partnerships' Resource Consultants will explain and assist them with completing their DCSW enrollment packet to help ensure packet accuracy and timely processing. With hands-on assistance from the Resource Consultant, the DCSW can complete all enrollment paperwork in electronic format, including using Adobe Sign for electronic signature. Paper enrollment packets will remain available for those who do not have internet access or prefer the traditional method of enrollment. PPL provides Resource Consultants in rural areas with a portable internet hotspot that helps to facilitate electronic enrollment.

4.2.1.52.16 Process for receiving and processing workers' hours worked including a schedule for submitting hours and paydays.

At the enrollment meeting, the Resource Consultant provides the member/representative-employer and DCSWs with a program-specific payroll schedule, timesheet, invoices, and instructions. We highly encourage the use of electronic time entry through our Time4Care EVV-compliant smartphone application and the submission of invoices through our web portal. We include user guides for these systems in the Enrollment Binder and through Public Partnerships' website: www.publicpartnerships.com.

The Resource Consultant explains in detail the required steps and timelines for recording the DCSWs' hours worked and transportation miles provided to the member. During this portion of the skills training, the Resource Consultant reiterates that Public Partnerships is not the employer of record and therefore can process timesheets and invoices only after they have been reviewed and approved by the member/representative-employer. The payroll schedule is reviewed to ensure the member/representative-employer and DCSWs understand the pay periods, the deadline for timesheet submission, and the corresponding payment dates.

Figure 15. Pay Schedules for Personal Options Program.

4.2.1.52.17 Process for disbursing DCSWs' payroll checks/electronic fund transfers (EFT).

Public Partnerships has established program-specific payroll schedules which comply with the Federal and State requirements for the timely payment of employees. The payroll schedules which are provided to DCSWs upon hire identify the biweekly payment dates. During the review of the payroll schedule, the Resource Consultant encourages DCSWs to sign up for direct deposit. A direct deposit form is included in the DCSW Enrollment Packet. DCSWs are also encouraged to create a user account for the web portal which allows them to monitor the status of their timesheets, invoices, and payments in real-time, 24/7.

4.2.1.52.18 Process for purchasing approved Participant-Directed Goods and Services, EAA, PERS, Extended Therapy Services and Community Transition services.

As much as possible, Public Partnerships seeks to streamline the process for purchasing approved PDGS, EAA, PERS, Extended Therapy Services, and Community Transition services, using common forms, while providing flexibility due to the nuanced nature of these purchases. All of these services require specific documentation to be submitted to make a valid purchase. Some purchases result in payments issued to the vendor in the form of a check based on a work order/invoice, e.g., EAA home or vehicle modifications. Within Community Transition Services, the use of online vendors is common, with PPL using its corporate credit card to make purchases directly at Walmart.com and Amazon. PPL will expand its use of its corporate credit card beyond Community Transition Services to bring this convenience for other purchases, whenever possible. Extended Therapy Services means multiple visits throughout a specified timeframe, as such, the total payment amount is unknown at the time of PPL's documentation review but the monthly invoice from the provider will be used as the basis for payments. PPL holds each vendor and transaction to the highest standard, with our *Payroll and Invoice Payment Manager* overseeing the process for every transaction and coordinating across the Agency and within PPL to ensure that all purchases can be substantiated, and we have the proper documentation to support audits of payments.

As an example, we include a PDGS and EAA Packet in the enrollment binder the Resource Consultant reviews during the orientation and enrollment visit. We will explain in detail the process and timelines for submitting the completed PDGS or EAA packet and subsequent approval by Public Partnerships. The Resource Consultant emphasizes that before accessing PDGS or EAA, the specific item or service and need or goal must be documented in the member's Individual Program Plan (IPP) along with required supporting documentation, approved by the Interdisciplinary Team (IDT) and the funds must be prior authorized by the Utilization Management Contractor (UMC).

Upon receipt of the complete PDGS or EAA Packet, Public Partnerships' *Payroll and Invoice Payment Manager* will review and approve the PDGS or EAA Packet within three (3) business days unless the requested item/service is forwarded to BMS for review before approval. Once a PDGS Packet has been approved:

- Providers will know within 2 business days of submission if an invoice has an error
- Online purchase requests will be processed within 2 business days of submission
- Payments to providers will be made weekly
- Approved escalated payment requests will be processed the same/next day

Please see Section 4.2.1.11 for additional details regarding Public Partnerships' vendor purchasing process.

4.2.1.52.19 Other forms and agreements to be determined by the Agency.

Public Partnerships will update the Enrollment Binder as required to reflect changes in program policy and to include additional forms and agreements as determined by the Agency. Our Payroll and Invoice Payment Manager and Resource Consultants will be trained on these changes/additions to ensure they are prepared to explain them to the member/representative-employers and assist as needed with the completion and review of required documents.

4.2.1.52.20 Process for submitting invoices for payment.

The process for submitting invoices for vendor payments begins with PPL receiving and affirming all required documents are in place to substantiate the purchase. An invoice can take the form of a completed Payment Request Form with supporting documentation or an invoice from a vendor, e.g., a monthly therapy service invoice. Regardless, the overarching process centers around the Payroll and Invoice Payment Manager following our P&Ps to approve a purchase and issuance of a payment within 30 days of the request. The table below summarizes, at a high level the process.

- PPL has received authorization of service
- PDGS application and Payment Request Form reviewed by Resource Consultant
- Payroll and Invoice Payment Manager verifies application *and* authorization
- Application is sent to finance to prepare payment
- Payment is prepared in accordance with the Payment Request form
- Payment is reviewed by Payroll and Invoice Payment Manager
- Payment is executed to vendor or to member.

4.2.1.52.21 Process for issuing electronic payments for on-line purchases of PDGS, EAA, PERS and TMH Community Transition services.

Public Partnerships currently issues electronic payments for online purchases using its corporate credit card, limited to transactions within the Community Transition Services program. PPL will expand this practice to include PDGS, EAA, and PERS, whenever that payment approach is preferred. The most common use for online purchases is at common vendors like Walmart.com and Amazon, which do not accept checks but offer convenience and low prices to members seeking goods and services. The overarching process for purchasing something online will be the same as described in 4.2.1.52.20.

4.2.1.52.22 Process for receiving and addressing complaints.

During the enrollment meeting, the Resource Consultant explains the process that the member/representative-employer and DCSWs may use for reporting issues and complaints. The majority of issues and complaints are reported to the Resource Consultant, but the member/representative-employer may also notify program support staff or Public Partnerships' Customer Service Center. All complaints are documented and tracked internally via CRM. This allows us to accurately assign the complaint to the appropriate staff person for follow-up/resolution and to generate reports that can be sorted to identify trends regarding the volume and types of complaints and the amount of time to resolve them. These tools allow us to resolve issues or complaints as quickly as possible and to identify and proactively address systemic causes.

Depending on the nature of the issue or complaint, it may be resolved at the time of the initial contact or may be escalated to the Resource Consultant, the Resource Consultant's supervisor, and/or the Program Manager. When appropriate, the member's Case Manager or Service Coordinator is involved, particularly when the issue/complaint is related to program policy or pertains to a service authorization.

If an issue or complaint is not resolved to the satisfaction of the member/representative-employer, DCSW, or other stakeholder, we offer a grievance form that can also be found on the program page at www.publicpartnerships.com. We escalated all grievances to the Agency Program Manager to review and provide input regarding the resolution.

4.2.1.52.23 Process for reviewing member/representative-employer workplace safety issues and strategies for effective reporting and management and of workplace injuries.

The Enrollment Binder includes information regarding the member/representative-employer's responsibility to maintain a safe workplace for their DCSWs. These include member-specific issues such as training DCSWs on the proper use of techniques and equipment for lifting and transferring the member as well as environmental issues such as adequate household maintenance to prevent falls and injuries. During the enrollment meeting, the Resource Consultant reviews this information with the member/representative-employers and informs them of their responsibility to notify the Resource Consultant of any injuries or safety issues involving the member or DCSWs.

Our Resource Consultants are trained to recognize and report safety concerns. In addition to addressing these with the member/representative-employer, the Resource Consultant documents their concerns on the Monthly Contact form and/or in CRM. Concerns are shared as appropriate with the member's Case Manager or Service Coordinator and may be escalated to the Agency and the Bureau of Senior Services. In some cases, the member may be recommended to transfer to the traditional service delivery model so that greater oversight of the member's health and welfare can be provided.

4.2.1.52.24 Process for identifying and addressing member/representative employer performance issues.

Each month the Resource Consultant contacts the member/representative-employer by phone or in person. In addition to obtaining information regarding the member's health and welfare, the Resource Consultant evaluates how effectively the member/representative-employer is carrying out their responsibilities as a household employer including the completion of required paperwork, the accurate and timely submission of DCSWs' timesheets and invoices, training, and supervision of DCSWs and compliance with program policies and rules. Any identified issues are addressed with the member/representative-employer and when appropriate, the Resource Consultant provides additional training and assistance.

Specific performance issues may also be identified by program operations and Customer Service staff who document the issue in CRM and notify the Resource Consultant. If performance issues persist after the Resource Consultant has addressed them with the member/representative-employer, the member may be recommended to transfer to the traditional service delivery model.

4.2.1.52.25 Process for completing and submitting the Notice of Worker Termination Form to the Vendor within twenty-four (24) hours of when a DCSW ceases working for the member/representative employer for any reason so the Vendor can complete the Reason for Separation Notice for unemployment.

A Notice of Separation from Employment form is included in the Enrollment Binder which is provided to the member/representative-employer at the enrollment meeting. The Resource Consultant trains the member/representative-employer on the steps to complete the form and the requirement for submitting it within twenty-four (24) hours of the DCSW's last date of service. The form includes the information necessary for Public Partnerships to notify Workforce West Virginia of the reason for the DCSW's separation of employment. The DCSW's final timesheet must also be submitted at that time to ensure payment is issued to the DCSW per Federal and State agency regulations.

4.2.1.52.26 Process for conducting member/representative-employer satisfaction surveys following enrollment and annually thereafter.

At the time of each member's enrollment meeting, the Resource Consultant provides the member/representative-employer with a satisfaction survey and prepaid envelope to return the completed survey to Public Partnerships. The survey includes questions regarding the Resource Consultant's performance as well as the level of satisfaction with the length of the enrollment meeting and willingness to recommend Public Partnerships to other waiver members who may be considering self-direction through the Personal Options program.

Every quarter, Public Partnerships' Program Supervisors conduct phone surveys of a sample of member/representative-employers to determine their level of satisfaction with our F/EA FMS and Resource Consulting services. The information obtained through these surveys is used to make program improvements and also to evaluate the Resource Consultants' performance.

4.2.1.53 The Vendor should describe a process for providing skills training to members/ representatives-employers that use a standard curriculum and materials preapproved by the Agency. Skills training should include, but not be limited to, guidance on problem-solving and decision making; performing employer tasks including the completion and submission of DCSWs' hours worked, Vendor and Agency requirements; purchasing, receiving and paying for PDGS, EAA, PERS Extended Therapy and Community Transition services; recognizing and reporting critical incidents; monitoring self-directed services included in members' budgets to ensure receipt of appropriate services; preparing and implementing corrective action plans as needed and developing and using risk management and emergency DCSW back-up plans and designation.

Public Partnerships has an established process for providing skills training to member/representative-employers using a standard curriculum and materials pre-approved by the Agency. A Resource Consultant provides the skills training during the enrollment meeting with the member, legal representative (if applicable), and Program Representative (if applicable), and the member's DCSW(s) are also encouraged to attend.

The enrollment meeting, particularly the skills training session, is an important factor in the member/representative-employer's success in self-directing services. Resource Consultants receive initial and routine training to ensure they effectively conduct enrollment meetings. In addition, new Resource Consultants are mentored by a Lead Resource Consultant or Resource Consultant Supervisor for at least 90 days after being hired. During this mentoring phase, the new Resource Consultant is given opportunities to observe and take notes while the mentor conducts enrollment meetings. Gradually, the new Resource Consultant conducts the orientation and skills training sessions of enrollment meetings while being observed by the mentor. The mentor determines when the new Resource Consultant is fully prepared to conduct enrollment meetings independently.

The skills training session of the enrollment meeting includes the following curriculum topics:

- Selecting, hiring, training, and supervising DCSWs
- The process for terminating a DCSW
- The process to apply for and purchase participant-directed goods and services (PDGS)
- The mandated reporter's role and responsibilities for reporting abuse, neglect, and exploitation
- Guidance on problem-solving and decision making;
- Managing risk and providing a safe workplace for DCSWs
- Verifying and approving DCSW timesheets and invoices
- Recognizing and reporting incidents including fraud, waste, and abuse
- Monitoring services received and budget spending per the Spending Plan
- Developing and using the emergency backup plan

4.2.1.54 The Vendor should develop an evaluation form and process for evaluating the effectiveness of the member/representative-employer skills training sessions. The form should be submitted to the Agency for approval prior to implementation.

Public Partnerships currently evaluates the effectiveness of the member/representative-employer skills training sessions through follow-up phone surveys conducted by Resource Consultants. The Resource Consultants are probing for information about the success and outcomes of the enrollment process.

Public Partnerships will formalize this evaluation through the development of an automated feedback survey for all enrollments and home visits. Having a survey that member/representative-employers complete on their own through a survey tool will allow for the collection and aggregation of this data for analysis and monitoring. We will discuss the scope and content of the survey with the Agency, develop a proposed approach, and submit our proposed survey to the Agency for review and approval before implementation. Once we have Agency approval, we will begin to implement the automated survey. An aspect of our approach will be to develop recommendations for reporting and analysis. The reporting and analysis will assist PPL and the Agency to evaluate the effectiveness of our skills training sessions and allow us to collaborate with the Agency to make adjustments where needed.

The survey will allow the member/representative-employer to provide feedback regarding the Resource Consultant's knowledge and effectiveness when explaining the Personal Options program, providing skills training, and assisting with the completion of enrollment documents. The survey will also capture the promptness, professionalism, and overall satisfaction with the Resource Consultant during the enrollment meeting. We will allow additional space on the survey form for the member/representative-employer to provide additional comments and the member/representative-employer may also request to be contacted to discuss their enrollment experience.

The Program Manager and Program Supervisors will review information from completed Enrollment Satisfaction Surveys to determine if the member/representative-employer requires additional training and support. We will aggregate and analyze the survey data to identify opportunities to improve the enrollment and orientation process.

The most recent enrollment satisfaction survey results show 98% of members/representatives agreed and reported that their Resource Consultant provided guidance and support to successfully enroll in the PPL program.

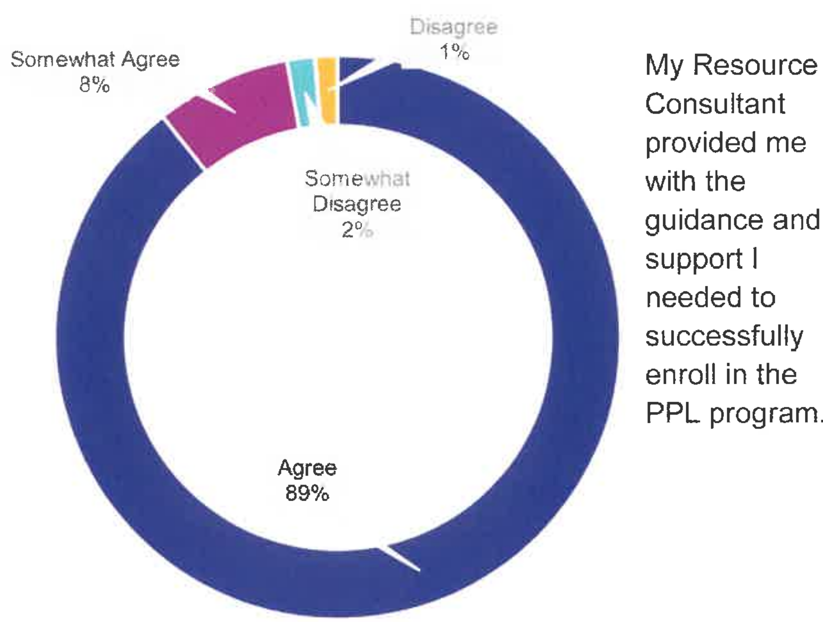


Figure 16. Survey Response regarding Resource Consultant Guidance and Support.

The effectiveness of the orientation and skills sessions conducted during the enrollment meeting is also evaluated by the Resource Consultant by monitoring the member/representative-employer's and DCSW's performance regarding the submission of timesheets, invoices and required documents. These are strong indicators of the member/representative-employer's ability to self-direct services and fulfill his/her role as an employer.

4.2.1.55 The Vendor should process and distribute DCSWs' payroll and related federal, state, and municipal tax withholdings and employment-related taxes in compliance with all federal, state, and municipal requirements.

Public Partnerships has developed and implemented program-specific payroll schedules for member/representative-employers and their DCSWs to utilize. The payroll schedules comply with Federal, State, and municipal requirements for the timely payment of workers.

Our payroll processes and internal controls monitor the payments to DCSWs per the bi-weekly payroll periods. Our integrated payroll system validates whether timesheets and invoices are submitted by the deadline and the timesheets/invoices are validated against other requirements including confirmation of sufficient funds in the member's budget and that the DCSW meets all required qualifications. For timesheets that pass all validations, payment will be issued to DCSWs on the next scheduled pay date. During the processing of timesheets and invoices, all employer and employee-related taxes are withheld and processed in compliance with all federal, state, and municipal requirements.

4.2.1.56 The Vendor should process fitness determinations of fingerprint-based state and federal background checks per Agency requirements.

Public Partnerships will establish fitness determinations processes based on the Agency requirements. We will process fitness determinations via the WV CARES state system. Upon receipt of the fitness determination through the WV CARES system, our program support staff processes all documents and informs the Resource Consultant of the disposition of the DCSW.

If a DCSW has been determined ineligible, the program support staff will notify the Resource Consultant who notifies the member/representative-employer as well as the DCSW.

When DCSW has been determined to be fit for employment, the Resource Consultant notifies the member/representative-employer.

4.2.1.57 The Vendor should propose a plan to verify the member's Medicaid eligibility prior to authorizing payment to a DCSW or a vendor of participant-directed services (PDGS, EAA, etc.).

Public Partnerships systems also have Electronic Data Interchange (EDI) capabilities to support Eligibility Inquiry and Response exchanges. This exchange is referred to as a 270/271 process whereby the 270 file generated by Public Partnerships systems is the eligibility inquiry and the state-generated 271 files are the response (i.e., eligibility verification). The results of the 271 file is ingested and processed electronically and fed to the PPL payroll system.

Time entry is stored in portal and cleared nightly but must pass many business rules to do so. One business rule is payment for hours worked will "pend" for payment if the member is not eligible. **The Resource Consultant runs a Pend Report weekly and follows up with case managers about authorization and eligibility issues.** Additionally, If a member is not eligible, they are flagged in the system and the employee cannot enter work time until eligibility is cleared. Once the issue is resolved, the payment is moved to "good to pay" status.

In the Aged and Disabled waiver program, before sending member referrals to Public Partnerships, the Bureau of Senior Services verifies that the member meets medical and financial eligibility. Our program support staff uses Kepro CareConnection® system to verify the member's Medicaid eligibility start and end date and enter these dates in our web portal.

Public Partnerships has implemented similar processes for the IDD and TBI waiver programs. Member's Medicaid eligibility start and end dates are also recorded in our web portal system. Our Resource Consultants work closely with the UMC and the member's case manager to assist members with completing their medical and financial review each year.

4.2.1.58 The Vendor should determine if the DCSW is a paid family member of the member/representative-employer who is exempt from paying into Federal Insurance Contributions Act (FICA) and/or Federal Unemployment Tax Act (FUTA) and State Unemployment Tax Act (SUTA) (i.e., spouse or parent of minor child who is the participant/authorized representative-employer) per IRS regulations.

Public Partnerships' current DCSW enrollment packet includes the Application for Tax Exemptions Based on Age, Student Status, and Family Relationship form. This form allows the DCSW to identify their family relationship with the member/representative-employer. When the packet is processed, the responses to these questions will be captured in the DCSW's checklist in our web portal. Our financial management and payroll system utilizes this information to identify DCSWs who are exempt from paying into FICA, FUTA, and SUTA.

4.2.1.59 The Vendor should determine if the DCSW qualifies for Difficulty of Care payments (exclusion from federal income tax withholding) per IRS Notice 2014-7.

Public Partnerships has developed and implemented the Difficulty of Care Federal Income Tax Exclusion Form and instructions as part of the DCSW enrollment packet. The form asks the necessary questions to determine if the DCSW qualifies for the Difficulty of Care federal tax exclusion per IRS Notice 2014-7. Based on the DCSW's answers to the applicable questions, Public Partnership's Enrollment team captures the information in the DCSW's profile checklist in our web portal. Our payroll system automatically recognizes this information and applies it appropriately for DCSWs that qualify for DOC Federal tax withholding exclusion.

4.2.1.60 The Vendor should maintain documentation in the DCSW's and member/representative-employer's files and be capable of reporting the relationship of the member to worker.

Public Partnerships maintains all documentation for both the DCSW and the member/representative-employer. When Public Partnerships processes the completed forms, we verify the accuracy and completeness of each form and electronically store them in our Document Management system in the web portal. This allows us to access the forms electronically 24/7 in a secure manner. We are capable of reporting the relationships as defined by user roles as defined requirements within our system.

4.2.1.61 The Vendor should determine if a DCSW is a non-resident of West Virginia and determine the appropriate method to be used for state income tax withholding for non-resident workers.

Public Partnerships' current DCSW enrollment packet includes the West Virginia Certificate of Non-Residence WV/IT-104 form that allows the DCSW to identify their non-West Virginia-resident status. When Public Partnerships' Enrollment team processes the packets, the information from the completed form is entered into our web portal. If the DCSW is identified as not subject to West Virginia state income tax withholding, our financial management system will not compute or withhold any West Virginia state income taxes when processing payroll.

4.2.1.62 The Vendor should maintain documentation on a DCSW's non-West Virginia resident status in the DCSW's file.

The DCSW's completed enrollment packet, inclusive of the WV/IT-1-104 West Virginia Certificate of Non-Residence Form, is electronically stored in our web portal document management system.

4.2.1.63 The Vendor should ensure DCSWs' hourly wages are in compliance with all applicable federal and West Virginia department of labor wage and hour rules, including payment of overtime wages.

The Public Partnerships Payroll and Tax Department research minimum wage requirements and all applicable federal and West Virginia department of labor rules. Changes are made to policy and procedures and integrated into the payroll system. The Project/Account Manager is informed of any changes and shares the information with WV staff.

Public Partnerships configures the portal to the minimum wage requirement to ensure DCSWs' hourly wage rates do not fall below Federal and State minimum wage requirements or exceed the waiver program's current Medicaid Fee Schedule. These upper and lower limits are reconfigured when there are changes in law or Medicaid rates.

During the member's enrollment meeting, the Resource Consultant provides information on West Virginia minimum wage law and the waiver program's service rates member-employers are informed that changes in Federal and State minimum wage laws and the Medicaid Fee Schedules may require changes to their Spending Plans and their DCSWs' wage rates.

These dictate the minimum and maximum wage rate that a DCSW can be paid. Although there is no minimum rate for reimbursement of Transportation services, the maximum rate is also limited to the amount in the current Medicaid Fee Schedule for the waiver program.

PPL pays overtime (OT) to the DCSW in compliance with wage and hour rules if authorized by the employer. OT is discussed with the member at enrollment. Their budget is designed to include OT, if needed, because of workforce shortage, etc. If an emergent issue arises and OT is accessed, the RC talks with the member about how to adjust schedule to accommodate the extra hours and funds used so that the member does not run out of funds.

4.2.1.64 The Vendor should determine if the DCSW is a foster care or shared living provider in accordance with DOL Fact Sheet #79

Public Partnerships has developed and implemented the FLSA Live-in Exemption Form and instructions which are included in the DCSW Enrollment Packet. The form includes questions to help the member/representative-employer and DCSW determine if the DCSW resides in the member/employer's home, either permanently or for extended periods. Both the member/representative-employer and DCSW are required to sign and date the form to certify that the DCSW is eligible for the live-in exemption from overtime pay per DOL Fact Sheet #790 and Administrator's Interpretation No. 2014-1.

When the completed form is submitted to Public Partnerships, our Enrollment team enters the information in the DCSW's profile checklist in the web portal. The effective date of the DCSW's FLSA live-in exemption from overtime pay status is automatically posted at the time the form is processed. Our payroll system automatically recognizes this exemption status and applies it appropriately for DCSWs that qualify for the FLSA live-in exemption from overtime pay.

Public Partnerships has established payroll rules to accurately process and issue overtime payments. Our system automatically recognizes when a DCSW timesheet contains greater than 40 hours per work week per member/employer. All hours exceeding that limit are automatically computed at the DCSW's overtime pay rate. For DCSWs who are eligible for FLSA live-in exemption from overtime pay, our payroll system computes all timesheet hours at the DCSW's regular pay rate.

4.2.1.65 The Vendor should develop, produce, and distribute instructions to be approved by the Agency for DCSWs to submit hours worked to member/representative employers.

Public Partnerships will develop, produce, and distribute instructions for the DCSWs to submit hours worked to the member/representative employers, for approval by the Agency. All Agency recommendations will be integrated with the instructions. Upon approval, all instructions will be used by the Resource Consultant at the enrollment meeting.

4.2.1.66 The Vendor should collect, verify and process DCSWs' worked hours per state department of labor and maintain copies in the DCSW's file.

Public Partnerships collects DCSWs worked hours via Time4Care, Telephony, web portal, or fax/mail. Worked hours are verified via the rules configured within our technology, which includes all applicable state Department of Labor requirements and member's service and budget authorizations. Our advanced payroll software notifies us of any DOL updates, in addition, our Tax team regularly monitors applicable state websites for pertinent information and any changes.

Public Partnerships processes worked hours per the bi-weekly payment schedule. All worked hours submitted are stored in the DCSW's profile and paired with their employer of record's profile. When worked hours are fully processed an electronic record is stored in full detail, including, the date and method of payment in our Document Management System. Upon request, all worked hours and paystubs can be printed and mailed.

Figure 17. Time4Care Login Screen.

4.2.1.67 The Vendor should propose a system for addressing situations when a member/representative-employer allows his/her DCSWs work hours in excess of approved hours.

Public Partnerships processes timesheets and invoices against an established set of payroll rules which includes confirming a DCSW has not submitted work hours or invoices in excess or of approved hours and verifying the timesheet was appropriately approved by the member/representative-employer. Any timesheet that does not meet all payroll rules will partially or completely pend and will be denied if it cannot be resolved. These pay controls are an important mechanism to enforce program requirements to prevent DCSWs from billing and/or being paid for hours that exceed the member/representative-employers' authorized budget. This prevents over-utilization of budget funds while still maintaining the record of the time billed within our system. Member/representative-employers can use this record to manage the schedules of their DCSWs. Systematically preventing unauthorized payments from being released also prevents claims denials which require time and expense on the part of all stakeholders to resolve. These controls enable us to only process payments and generate claims for services that are within the member's authorized budget.

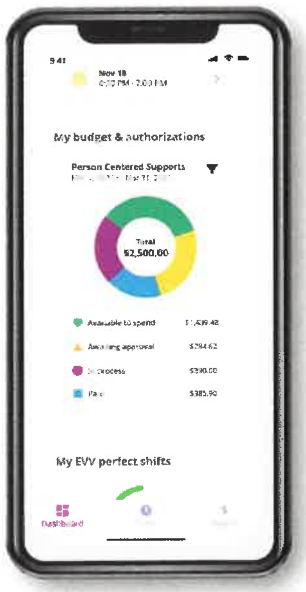


Figure 18. Time4Care Budget Utilization view.

Every week, our program support staff process a report of all pending timesheets and invoices. This report is provided to the Resource Consultants so that they may follow up, as needed, with the member/representative-employer and/or DCSW to resolve specific timesheet and invoice issues. During the monthly phone contacts and 6-month home visits with the member/representative-employers, the Resource Consultants address any trends with timesheets and invoices including work hours exceeding approved hours in the spending plan. The Resource Consultants reeducate the member/representative-employer on the Spending Plan and assist, as needed, such as developing standardized work schedules for DCSWs to help ensure they provide services and bill per the member's Spending Plan.

4.2.1.68 The Vendor should propose a system for recouping overages when a DCSW works in excess of approved hours. If the overage is due to an oversight by the Vendor, then the Vendor should be responsible to pay back the Agency for any overpayments made to DCSW.

The Public Partnerships financial management system is configured to prevent overages; however, we have a system in place for recoupment. Our end-to-end financial management system uses a single segregated database that stores service authorizations imported from the Agency's UMC. The database is embedded in the Microsoft Business Centrals NAV module – a payment processing application. NAV is configured with a rules engine that has been tailored to WV to account for all documentation, signatures, and dates for both the member and their DCSW or provider. The payment calculation logic validates all documentation, the presence of a service authorization for the submitted service and the logic calculates submitted payment requests (i.e., timesheet or invoice) against the remaining service authorization balance.

The only true way an overpayment can occur is when a service authorization amount is adjusted down by a case manager while a payment is in process. In these cases, we contact the case manager regarding the budget reduction. If the service authorization change was also communicated to the member, we explain the scenario and contact the DCSW. We then inform the DCSW of the overage and how it occurred. We then set up a garnishment plan with the DCSW depending on the amount of the overage. If the overage is minimal (i.e., under $25) we garnish the overage from the next payment and can set up staggered garnishment for larger amounts that would create an immediate DCSW hardship if fully recouped. If the recoupment is for a large amount and garnishment is not an option (e.g., DCSW stops working), PPL will send garnishment information to the DCSW's bank for garnishment of funds.

The following sections focus on Federal Taxes, Computations, Deposits, and Withholdings.

4.2.1.69 The Vendor should compute, withhold, file, and track federal income tax withholding, Medicare, and Social Security taxes for member/representative employers and their DCSWs quarterly in the aggregate using the Subagent-F/EA FMS entity's separate FEIN and using the IRS Form 941, Employer's Quarterly Federal Tax Report, and the IRS Form 941 Schedule R. The Subagent-F/EA FMS entity's federal income tax withholding and FICA (Medicare and Social Security tax) depositing use rules based on the entity's aggregate deposit liability. Therefore, an IRS Form 941 Schedule B is required in most cases and Vendor maintains copies of the filed IRS Forms 941, IRS Form 941 Schedule Rand Schedule B, as applicable and related correspondence in Subagent-F/EA FMS division's file.	Public Partnerships computes, withholds, files, and tracks federal income tax withholding, Medicare, and Social Security taxes for member/representative-employers and their Direct Care Service Workers (DCSW) quarterly in the aggregate using our own reporting Federal Employer Identification Number (FEIN) per Procedure 2013-39 for all member/representative-employers in the Personal Options program. We use rules according to Publication 15 to aggregate the deposit liability. Due to the size of the program, we use Schedule B for the daily liability and Schedule R to provide member/representative-employer-specific information to support the totals reported on an aggregate. We file these withholdings quarterly with our sub-agent FEIN and store the documentation of these filings on our secure servers.
4.2.1.70 The Vendor should deposit federal income tax withholding in the aggregate using the	Public Partnerships deposits all DCSWs' federal income tax withholdings for member/representative-employers. We use our

Subagent-F/EA FMS entity's separate FEIN (electronic EFTS filing) and per IRS depositing rules for Government F/EA FMS.	separate FEIN to deposit these withholdings in the aggregate per IRS depositing rules through the Electronic Federal Tax Payment System (EFTPS).
4.2.1.71 The Vendor should deposit FICA tax in the aggregate using the Subagent-F/EA FMS entity's separate FEIN (electronic EFTS filing) and per IRS depositing rules.	Public Partnerships deposits all FICA tax withholdings for member/representative-employers and their DCSWs. We use our separate FEIN to deposit these withholdings in the aggregate per IRS depositing rules through the Electronic Federal Tax Payment System (EFTPS).
4.2.1.72 The Vendor should maintain copies of Federal income tax withholding and FICA filing/deposit documentation in its files.	Public Partnerships maintains copies of Federal income tax withholding and FICA filing and deposit documentation on our secure servers. Documents are maintained as contractually required and per IRS rules for record retention.
4.2.1.73 The Vendor should compute, withhold and file FUTA annually in the aggregate using the Subagent - F/EA PMS-Counseling entity's separate FEIN and the IRS Form 940, Employer's Annual Federal Unemployment (FUTA) Report and the IRS Form 940 Schedule R.	PPL computes and files FUTA payments annually in the aggregate using our separate FEIN and the IRS Form 940, Employer's Annual Federal Unemployment (FUTA) Report, Schedule R, and Allocation Schedule for Form 940 Filers. Using the Payroll module of our financial management system, PPL automatically calculates FUTA payments that are accrued and remitted quarterly. PPL's Financial Operations Center uses a Tax Reporting and Payment Processing Schedule to ensure that all required tax filings are systematically made per the required periodicity. IRS Form 940 is filed in the aggregate to remit federal unemployment insurance contributions. PPL files a single IRS Form 940 on behalf of all common law employers in aggregate in the program using PPL's separate agent FEIN. Form 940 is filed by January 31 of the calendar year after the year for which FUTA taxes are due.

4.2.1.74 The Vendor should maintain copies of the annually filed IRS Form 940, and IRS Form Schedule R and related documentation in its files.	Public Partnerships maintains copies of filed Form 940 and Schedule R, as appropriate, and related documentation in our files in the Tax Department on behalf of each CLE. PPL stores electronic copies of Form 940 and related documentation on our secure network which can be accessed by authorized PPL staff.
4.2.1.75 The Vendor should deposit FUTA in the aggregate (electronic EFTS filing) using the Subagent-F/EA FMS entity's separate FEIN in accordance IRS depositing rules for Government F/EA FMS entities.	PPL deposits FUTA in the aggregate electronically EFTS filing using our separate FEIN per IRS depositing rules. PPL's Financial Operations Center uses a Tax Reporting and Payment Processing Schedule to ensure that all required tax deposits are systematically made per the required periodicity. PPL bases FUTA calculations on the first $7,000 of annual income for each employer – SSP combination. When an individual employer reaches $1,000 in paid wages in any calendar quarter, our financial management system is used to calculate and accrue a FUTA rate of .06% for all wages paid. If an individual employer pays less than $1,000 in wages in each calendar quarter, FUTA is not remitted. If $1,000 or more is paid in wages to all SSPs in a single calendar quarter, FUTA is paid on all wages in a calendar year.
4.2.1.76 The Vendor should maintain copies of FUTA deposit documentation in the Subagent-F/EA FMS entity's files.	Public Partnerships maintains copies of FUTA deposit documentation in our file. PPL stores electronic copies of FUTA deposit documentation on our secure network by the tax compliance team which can be accessed only by authorized PPL staff.

The following sections focus on West Virginia State Taxes, Computation, Withholding, and Deposits.

4.2.1.77 The Vendor should enroll as an electronic filer and payer for state income tax withholding, unemployment insurance tax with the	Public Partnerships is enrolled as an electronic filer and payer for state income tax withholding, unemployment insurance tax with the West Virginia State Tax Department, and WorkForce West Virginia Job

West Virginia State Tax Department and West Virginia Job Service/Unemployment program.	Service/Unemployment. We currently file and pay electronically for all taxes and tax forms to the State Tax Department monthly and reconcile annually. We file and pay electronically to WorkForce West Virginia Job Service/Unemployment quarterly and reconcile annually.
4.2.1.78 The Vendor should compute, withhold, and file state unemployment insurance taxes quarterly for each member/representative-employer using his/her state unemployment insurance tax employer identification number and the WVUC-A-154, Contribution Report and WVUC-154-A Wage Report per the West Virginia Job Service/Unemployment program, Unemployment Compensation Insurance requirements and maintain copies of forms and documentation in the member/representative-employer's file.	Public Partnerships currently computes, withholds, and files state unemployment insurance taxes quarterly in the aggregate using our reporting FEIN per Procedure 2013-39 for all member/representative-employers in the Personal Options program. We file these withholdings quarterly with our sub-agent FEIN and store the documentation of these filings on our secure servers.
4.2.1.79 The Vendor should compute, withhold, and file state income tax withholding quarterly using the member/representative-employer's state income tax employer identification number and the West Virginia State Tax Department Form WV/IT-101, Employer's Return of West Virginia Income Tax Withheld for each West Virginia resident member/representative-employer and qualifying West Virginia non-resident employee. The Vendor should maintain copies of state income tax withholding filings and related documentation in the member/representative employers' files.	Public Partnerships electronically computes, withholds, and files all state income tax withholding each quarter in the aggregate using our reporting FEIN per Procedure 2013-39 for all member/representative-employers in the Personal Options program. We file these withholdings with our sub-agent FEIN and store the documentation of these filings on our secure servers.
4.2.1.80 The Vendor should deposit state income tax withholding for each member/representative employer West Virginia resident and qualifying nonresident DCSW s. The Vendor should maintain copies of documentation in each member/representative-employer's file.	Public Partnerships currently deposits all DCSWs' state income tax withholdings electronically in the aggregate using our separate FEIN per Publication 13 through the Electronic Federal Tax Payment System (EFTPS). We maintain copies of documentation of these deposits and filings on our secure servers.

4.2.1.81 The Vendor should withhold and file municipal taxes, as required, for each member/representative-employer. The Vendor should maintain copies of municipal tax filings and related documentation in each member/representative employer's file. The Vendor should deposit municipal taxes, as required for each member/representative-employer. The Vendor should maintain copies of municipal tax payments and related documentation in each member/representative-employer' s file.

Member/representative-employers that live in a municipality that requires a user fee will complete the Verification of City Service Fee Withholding Form that allows Public Partnerships to determine if the fee applies to the member's Direct Care Service Workers (DCSWs). At the time of the enrollment meeting, the Resource Consultant will review the municipal user fee requirements with the member/representative-employer and their DCSWs and assist them with completing the necessary forms and paperwork to exempt or withhold the fee as required from the DCSWs' payments.

Upon determining that a member/employer lives within the city limits of a municipality that requires a user fee, we will flag the member/employer and DCSWs in our web and payroll system. The applicable fee will be withheld, once per earning period, from the Direct Care Service Workers' paycheck, per the municipalities' requirements. Public Partnerships will continue to withhold and file the fee using the municipalities' filing schedule, on behalf of the applicable member/representative-employers. Public Partnerships will maintain electronic copies of forms and filings on our secure servers.

4.2.1.82 The Vendor should process all judgments, garnishments, tax levies, or other related holds on DCSWs' pay as may be required by federal, state, or municipal governments and maintain copies of documentation in the DCSW's file.

Public Partnerships has internal controls to monitor the accuracy and timelines of the application of garnishments, levies, and liens on DCSW payroll checks in an accurate and timely manner, and to maintain relevant documentation. Our internal controls include processing garnishment, judgment, and levy requests impacting DCSWs so the payments are distributed in the following payroll to the necessary parties. We also conduct a formal management review of all wages paid and tax deposits and filings on behalf of member/representative-employers and a quarterly audit of program files to ensure payroll garnishments, levies, and liens are properly documented and entered into the payroll system and maintained in the DCSWs' electronic files. This includes a sample audit of wages paid to ensure these payroll adjustments were processed properly.

4.2.1.83 The Vendor should generate DCSW payroll checks and mail or perform electronic direct deposits of checks.

Public Partnerships has established payroll procedures for issuing payroll checks and direct deposits to members' DCSWs per the requirements in Chapter 600 of the West Virginia Medicaid Manual. Our web portal and Financial Management System maintain each member's prior authorized services and budget amount as well as the service codes and rates in the current program-specific Medicaid Fee Schedules.

Public Partnerships processes DCSW timesheets and invoices using the program-specific Personal Options payroll schedules to ensure we issue the payroll checks and direct deposits per Federal and State agency requirements for timely payment. We validate all timesheets and invoices against the programs' payroll rules to determine that the member has been authorized to receive the services being billed, that the DCSW is qualified to provide the service, and that the cost of the services being billed does not exceed the member's approved spending plan amount. Upon verifying that these requirements have been met, Public Partnerships processes the timesheet/invoice for payment and submits the service claims to the State's MMIS vendor.

4.2.1.84 The Vendor should process direct deposits of DCSWs' payroll checks as requested and maintain copies of documentation in the DCSW's file

Public Partnerships' DCSW Enrollment Packet includes an easy-to-complete Direct Deposit Application. During the enrollment meeting, the Resource Consultant reviews the Direct Deposit Application with the member/representative-employer and explains the benefits of having DCSWs sign up for direct deposit of their payroll checks. Doing so allows DCSWs to receive their payments without the delays and risks associated with payroll checks which are sent by U.S. mail.

Public Partnerships maintains completed Direct Deposit Applications along with all DCSW documents in our web portal. Our web portal also maintains all remittance advices (pay stubs) issued to the DCSWs. DCSWs who are registered users of the web portal can view their remittance advices at any time. DCSWs who receive payments through direct deposit may request to have their remittance advices sent by mail.

4.2.1.85 The Vendor should develop a system for managing improperly cashed or issued payroll checks, stop payment on checks, and for the re-issuance of lost, stolen or improperly issued checks including, but not limited to:

> 4.2.1.85.1 Maintenance of a log of voided and reissued checks, including detailed information.
>
> 4.2.1.85.2 Proper authorization of all stop payments and re-issuances.

4.2.1.85.3 Timeframe to be mutually agreed upon between vendor and state for re-issuance of checks (i.e., within three (3) business days of notification of lost/stolen check) and issuance of stop payment request.

Public Partnerships payroll process for the West Virginia Personal Options programs is configured with business rules that will pend a timesheet for review to avoid improperly issued payments. We also have a specialized Payment Resolution team that manages payroll-related issues including improperly cashed checks, stop payments on checks, and re-issue of lost or stolen checks. The Payment Resolution team has a recoupment Policy and Procedure to address situations where checks are cashed improperly. This team also works closely with the Resource Consultants and the Customer Service team to promptly address stop payment or reissue requests from DCSWs.

Upon being requested by the DCSW to stop payment and reissue a check, the Resource Consultant or Customer Service representative reviews the DCSW's data in our web portal to confirm the posting date of the requested check and the DCSW's mailing address. CRM is used to document the request from the DCSW and track resolution actions.

Our standard process for stop payment and reissue of a check is 10 business days if we confirm the check was mailed on time according to the payroll schedules and to the DCSW's correct mailing address. This is to allow proper time for the check to be delivered by U.S. postal service before voiding it. Experience has proven that stopping a check before this timeframe often results in the DCSW receiving the voided check shortly after contacting us. Once a check is voided, it cannot be reversed and if the DCSW tries to cash or deposit the voided check, bank fees could incur for the DCSW.

In the unlikely event that Public Partnerships issues a check to an incorrect address, once notified and confirmed, our Payment Resolution team verifies through our banking website whether the check has been cashed before initiating a stop payment and reissuing the check. The process for the Payment Resolution team to verify the banking information, stop the payment on the original check, and reissue a new check along with updating the accounting system is three (3) business days.

Public Partnerships maintains all information and documentation of voided and reissued checks in our Financial Management System and on our secure server.

4.2.1.86 The Vendor should research, track, and resolve all tax notices, including those received from the IRS, West Virginia State Tax Department and West Virginia Job Service/Unemployment program regarding DCSWs' tax liabilities/liens, including all information and steps to resolution.

Public Partnerships researches and resolves all tax notices received from the IRS, West Virginia State Tax Department, and WorkForce West Virginia Job Service/Unemployment regarding DCSWs' tax liabilities/liens. We track all information and steps to resolution. Form 2678 in the member-employer enrollment tax packet authorizes us to research any tax notices received from West Virginia State Tax Department and WorkForce West Virginia Job

Service/Unemployment. Most tax notices from the IRS are regarding aggregate tax notices and can be addressed with the paperwork we already have on file. In the rare occurrence that a federal tax notice received from the IRS is received for a specific member/representative-employer, we will obtain a Form 2848 for that specific tax type and tax period to grant us authorization to complete the research and resolve.

4.2.1.87 The Vendor should maintain copies of all documentation related to electronic West Virginia tax filings and payments in the Subagent-F/EA FMS entity's file.

Public Partnerships maintains copies of all documentation related to electronic West Virginia tax filings and payments on our secure servers. Documents are maintained as contractually required and per IRS rules for record retention.

4.2.1.88 The Vendor should verify that each DCSW s social security number matches the name and date of birth information obtained from the Social Security Administration prior to submitting IRS Forms W-2 to the employer, the West Virginia State Tax Department, and the Social Security Administration each calendar year.

Public Partnerships confirms each DCSW's Social Security Number (SSN) and date of birth through the Social Security Administration's Business Services Online system quarterly before processing unemployment tax filings and at the end of the year before issuing IRS Forms W-2. If there is a mismatch in the date of birth or Social Security Number, Public Partnerships will initiate a call to the DCSW to obtain the correct information within 30 days.

IRS Forms W-2 are issued to the West Virginia State Tax Department and Social Security Administration each year as required. With our extensive F/EA FMS experience, we have found that issuing W-2 forms directly to the DCSWs rather than to the member/representative-employers is the most efficient method. Our Resource Consultants and Customer Service representatives are available to assist DCSWs who request a copy of their W-2 to be re-issued.

4.2.1.89 The Vendor should file the annual reconciliation, by January 31st, of West Virginia state income tax withholding for each member/representative-employer using the West Virginia State Tax Department Form WV/IT-103, Annual Reconciliation of West Virginia Income Tax Withheld for each West Virginia resident and qualifying non-resident member/representative-employer, and the member/representative-employer's employer identification number and maintain copies of the form and related documentation in each member/representative employer's file.

Public Partnerships currently files West Virginia state income tax withholding for each member/representative-employer every month and will complete an annual reconciliation, by January 31st, of West Virginia income tax withheld for each West Virginia resident and qualifying non-resident member/representative-employer during the end of the year tax process. All documentation of these filings and reconciliations is stored on our secure servers.

4.2.1.90 The Vendor should process refunds of over-collected FICA as required by the IRS for eligible member/representative-employers to DHHR and eligible DCSWs.

Public Partnerships' DCSW Enrollment Packet includes an Application for Tax Exemption Form that allows the DCSW to apply for FICA tax exemption based upon their family relationship with the member/representative-employer. When the completed DCSW Enrollment Packet is processed by our Enrollment Team, the information from the Application for Tax Exemption Form is entered into the web portal. This information will translate into the DCSW's tax exemption status in our Financial Management System. If the DCSW is determined as FICA tax-exempt, our Financial Management System lifts applicable withholding requirements when processing payroll.

Public Partnerships tracks all taxes withheld and paid on behalf of the member/representative-employer and the DCSW. On November 1st or the nearest business day of each calendar year, we produce a report that identifies DCSWs who have yet to reach the established threshold in wages for work performed for employers. FICA refunds are issued to those DCSWs before the year-end tax processing.

To prepare for FICA refunds, Public Partnerships sends a letter to each DCSW who is identified as earning below the threshold as of November 1st to confirm their mailing address. We refund FICA to each DCSW by mailing a check with a letter explaining the reason for the refund. We transmit both employer and DCSW refunds within one standard pay period of receiving the refund from the IRS and deposit the funds into the individual accounts that we have established for each payer of service claims.

After all DCSW payments have been issued, Public Partnerships reports FICA-exempt wages on IRS Form 941 by adjusting Form 941 to deduct wages that make up the FICA-exempt total for the calendar year from total program wages in the fourth quarter.

4.2.1.91 The Vendor should maintain documentation related to FICA refunding in each applicable member/representative-employers' and DCSWs' files.

Public Partnerships maintains all documentation related to FICA refunding on our secure servers. Documents are maintained as contractually required and per IRS rules for record retention.

4.2.1.92 The Vendor should process, file, and distribute IRS Forms W-2, Wage and Tax Statement for all DCSWs and in accordance with IRS instructions for agents. As part of this process, the total gross payroll per the Form W-2 should be reconciled to the calendar year's total gross payroll and to gross payroll values filed on Forms 941 and 940.

Public Partnerships calculates and prepares the required IRS Form W-2 data using our Financial Management System payroll module. We have customized this to file per IRS Rev. Proc. 70-6, Notice 2003-70 for household employers. We have developed both the paper and electronic versions of Form W-2 to automatically populate the agent name and address data in the "Employer" box and the employer data in boxes 15a and 15b. This customization enables us to accommodate differences in Federal and State W-2 filing requirements. We mail W-2s to all DCSWs by January 31st.

Per our established internal controls, a Public Partnerships tax expert reviews a statistically valid sample of prepared W-2 Forms and compares the data reported on each form to the data reported on the employer's behalf to the Federal and State governments. This method allows us to efficiently capture any systemic reporting error. Since we file W-2 forms electronically in the aggregate, using our separate F/EA FEIN, we are not required to file IRS Form W-3.

4.2.1.93 The Vendor should maintain copies of the federal copy of Forms W-2 and related documentation in each DCSW's file.

Public Partnerships stores an annual electronic file of all IRS Forms W-2 issued to the member's DCSWs as well as related documentation on our secure servers. This allows us to access and reissue a copy of a W-2 from any year upon request from a DCSW.

4.2.1.94 The Vendor should process and file the IRS Form W-3, Transmittal of Wage and Tax Statement, as applicable and maintain a copy of the form in the member/representative-employer's file.

As described in Section 4.2.1.92, Public Partnerships files IRS Forms W-2 electronically in the aggregate, using our separate FEA FEIN. This eliminates the need to process and file IRS Form W-3.

4.2.1.95 The Vendor should process any returned DCSWs' payroll checks in accordance with the West Virginia Unclaimed Property Act, which can be found at: https://wvtreasu:ry.com/, and CFR 42 Part 433 Section 40, which can be found at: https://www.cms. gov/files/document/cms-1734-p-pdf.pdf.

Public Partnerships has an established process and procedure for managing returned payments from uncashed DCSW payroll checks per the West Virginia Unclaimed Property Act. Our Unclaimed Property team proactively conducts due diligence on open checks as early as one month after issuance. If the payroll check owner cannot be located, we will perform formal due diligence procedures and issue letters. We also attempt to contact the appropriate DCSW via outbound calls based on any new information received. Following due diligence, if the check owner cannot be located, we will compile a report per the WV Unclaimed Property Act.

4.2.1.96 The Vendor should maintain copies of West Virginia Unclaimed Property-related documentation including returned DCSWs' payroll checks or providers' and/or vendors' payments in its files.

Public Partnerships maintains copies of West Virginia Unclaimed Property-related documentation related to returned DCSWs' payroll checks or providers' and/or vendors' payments within our Document Management system. Documents are maintained as contractually required and per IRS rules for record retention.

4.2.1.97 The Vendor should process, issue and track payments to vendors of approved participant-directed services (PDGS, EAA, etc.) Tasks/requirements include, but are not limited to, the following:

4.2.1.97.1 The Vendor should receive, verify, and process all invoices from approved vendors in accordance with the member's Spending Plan and monitor expenditures against it and maintain this documentation in the provider/vendor's file and electronic exchange data information with the Agency.

4.2.1.97.2 The Vendor should obtain receipts and/or other proof of the goods or services purchased with PDGS or EAA funds to ensure funds were spent per the approved plan.

4.2.1.97.3 The Vendor should pay vendors' invoices for approved participant-directed services (PDGS, EAA, etc.) in accordance with the member's Spending Plan within thirty (30) calendar days of receiving the invoice and maintain this documentation in the provider/vendor's file.

4.2.1.97.4 The Vendor should process any returned provider or vendor payments in accordance with the West Virginia State Treasury Department's Division of Unclaimed Property requirements and procedures and in compliance with CFR 42 Part 433 Section 40 (See. 4.2.1.95).

4.2.1.97.5 The Vendor should maintain copies of West Virginia Unclaimed Property-related documentation in the service provider's and vendor's file.

4.2.1.97.6 The Vendor should distribute IRS Forms SS-8, Determination of Worker Status for Purpose of Federal Employment Taxes, and Income Tax Withholding when there is a question of whether a participant directed vendor is an independent contractor.

4.2.1.97.7 The Vendor should distribute, collect, and process IRS Forms W-9, Request for Taxpayer Identification and Certification as appropriate for vendors of Participant-directed services (PDGS, EAA, etc.).

Public Partnerships has processed, issued and tracked thousands of PDGS and EAA transactions with hundreds of vendors. For members with approved PDGS or an EAA approved in their spending plan, the resource consultant reviews the good/service, each form involved and how the payments are made. We review a timeline to ensure we are all on the same page as far as when goods will be received, or payments made. The other key point of emphasis is the submission of the supporting documentation associated with the payment.

Upon receipt of the PDGS & Payment Request Application, we process them within 3 business days. Processing involves:

- Ensuring all information on the PDGS and Payment Request Application is entered
- Entering the information into our web portal
- Verifying the presence of IRS Form W-9
- Verifying the supplied Federal Employer Identification Number (FEIN) with the IRS
- Associating the provider to the member in our web portal

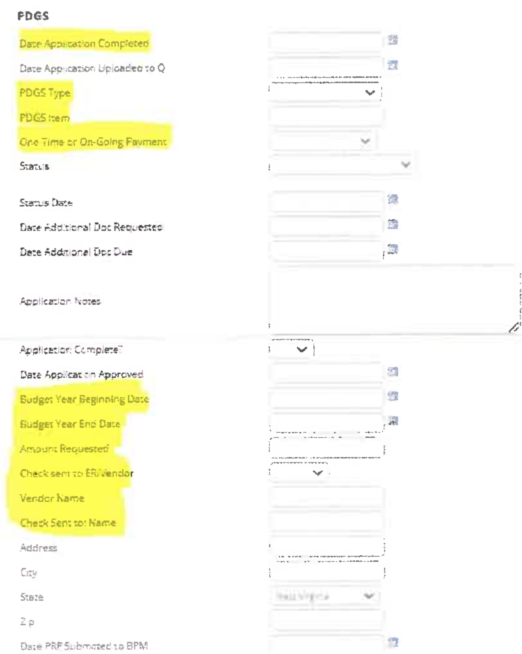


Figure 19. PDGS Web-Based Information Tracking.

Our web portal was designed with a PDGS module that records all information for both tracking the payment and validating it against the service authorization. Key fields like budget start and end date ensure the transaction/service is delivered during the authorized time period. Tracking the date the request was received and processed is included to ensure we meet service levels for prompt payment.

Public Partnerships processes our payments in-house through our proprietary financial management system. Our end-to-end FMS system tracks all PDGS and EAA transactions at the procedure code, member, provider, and service authorization level. All associated payment ledgers are digitally archived and readily reportable.

Public Partnerships processed approximately $1.4M in PDGS and EAA services in 2022.

Program	Payroll Control Code	Payroll Control Name	CTN of Consumers	Paid Amount	AVG Paid Amount Per Consumer
WVBMS	A016	Homemaker Transportation	24	$ 21,531.90	$ 897.16
WVBMS	S5161U5UK	PERS (Personal Emergency Respo	297	$ -	$ -
WVIDD	A0160U3	Transportation	357	$ 1,018,042.95	$ 2,851.66
WVIDD	T2028SC	Participant-Directd Goods&Services	312	$ 223,101.61	$ 715.07
WVIDD	92507GNUG	Speech Therapy	14	$ 15,898.16	$ 1,135.58
WVIDD	97530GOUG	Occupational Therapy	9	$ 12,293.07	$ 1,365.90
WVIDD	S5165UG	EAA Home	6	$ 3,467.00	$ 577.83
WVIDD	T2039UG	EAA Vehicle	3	$ 2,284.00	$ 761.33
WVIDD	97530GPUG	Physical Therapy	7	$ 2,126.13	$ 303.73
WVIDD	92507GNUG	Self - Directed Speech Therapy	1	$ 1,532.70	$ 1,532.70
WVTBI	TRANS	Transportation	7	$ 5,729.51	$ 818.50
WVTBI	S5161U5UK	PERS (Personal Emergency Respo	5	$ -	$ -
WVTMH	T2028-U1	Community Transition	51	$ 124,518.69	$ 2,441.54

Figure 20. PDGS and EAA Services in 2022.

4.2.1.97.1 The Vendor should receive, verify, and process all invoices from approved vendors in accordance with the member's Spending Plan and monitor expenditures against it and maintain this documentation in the provider/vendor's file and electronic exchange data information with the Agency.

The member/representative-employer is required to complete a PDGS and/or EAA Packet and submit it to Public Partnerships before their budget year expiration. A completed PDGS and EAA Packet must include:

- Application for Approval of Goods and Services form;
- Payment Request Form (PRF);
- Itemized estimate/quote for the requested item/service;
- A spending plan that indicates the specific item/service has been approved;
- W-9 (Request for Taxpayer Identification Number and Certification); and

Within two (2) business days of receipt of the PDGS or EAA Packet, our Payroll and Invoice Payment Manager will review the packet to confirm that all documents have been accurately completed and to verify that the following requirements are met:

- The requested item/service is specifically addressed in the member's IPP and is directly related to an assessed need and/or goal;
- Public Partnerships has received authorization, where applicable
- For I/DD, the requested item/service is not included in the restricted list of items/services in Chapter 513.16 of the IDDW Policy Manual; and
- There are adequate funds in the member's PDGS Spending Plan to purchase the requested item/service.

Once Public Partnerships approves a PDGS or EAA Packet, we process the invoice through a series of rules in the web portal including validation that the member's Medicaid eligibility is current and PDGS funds are available. Invoices that meet all requirements are processed (1) whenever possible we will purchase services online using our corporate credit card and (2) purchases other than online will result in the issuance of a check to the vendor for payment. After issuing payments, PPL claims the funds through the State's MMIS vendor. Our web portal electronically maintains all documents in the PDGS and EAA Packets, including an itemized receipt once the item or service(s) is received.

4.2.1.97.2 The Vendor should obtain receipts and/or other proof of the goods or services purchased with PDGS or EAA funds to ensure funds were spent per the approved plan.

The current PDGS and EAA process includes the completion of a standard PDGS payment request form and the collection of proof of purchase/service delivery. Members with an approved PDGS or EAA in their spending plan get an in-depth overview of the invoicing and payment process during the orientation and enrollment meeting, including a review of our PDGS Application and Payment request form. Our payment request form asks for key details including whether the payment is recurring and is used as a quality checklist for supporting documents (e.g., EAA quote, receipts). The payment request form must be signed and dated by both the member/representative-employer and the vendor providing the service when applicable. The PDGS Application and Payment request form also serve as a written agreement on the agreed-upon rate.

Public Partnerships digitally archives every PDGS and EAA transaction in our payroll journal, each transaction must be supported by:

- A signed and dated copy of the PDGS Application and Payment Request form
- Supporting cost validation for PDGS
- Supporting quote for EAAs
- Receipt from PDGS
- Verification of EAA (e.g., picture of home accessibility modification) and sign-off by member/employer

WV I/DD Waiver Program – Participant Directed Goods and Service Application and Payment Request Form

To ensure timely processing, please ensure all the following are included in this application packet:			
☐Current IPP showing the item/service requested and required need	☐Supporting Documentation as required	☐W9 for all new vendors	☐Quote for cost of item/service
Participant Name		PPL ID	
Program Representative (if applicable)		Resource Consultant	
Budget Year		Approved Budget Amount	
Vendor Name		Vendor ID	
Vendor Address		Vendor Phone	
Amount Requested		Service Code	T2028SC
Ongoing Payment	☐Yes ☐No	If yes, current Amount Requested	
Payment Full Name and Mailing Address or type Mail to Vendor			

Figure 21. IDD Waiver Goods and Services Application and Payment Request Form.

RECEIPTS

- PDGS Receipts are required for auditing purposes and failure of the participant/guardian to provide a receipt within 30 days could result in a Fraud Referral.
- This information is also used to provide a summary of payments to the state client monthly.

RECEIPTS ARE REQUIRED FOR PDGS, EAA-HOME/VEHICLE, & PROFESSIONAL THERAPY SERVICES

Figure 22. Receipts for PDGS.

4.2.1.97.3 The Vendor should pay vendors' invoices for approved participant directed services (PDGS, EAA, etc.) in accordance with the member's Spending Plan within thirty (30) calendar days of receiving the invoice and maintain this documentation in the provider/vendor's file.

Public Partnerships will pay vendors' invoices for approved participant-directed services within thirty (30) calendar days of receiving the invoice and will maintain this documentation within the Document Management system in our web portal. Whenever possible, we intend to exceed this expectation. We will process online purchase requests within two (2) business days of submission. Our operations will be set up to make payments to providers weekly and issue payments within ten (10) business days from the date the participant-directed service invoice was approved. This allows Public Partnerships to pay vendors well within thirty (30) calendar days of receiving the invoice.

4.2.1.97.4 The Vendor should process any returned provider or vendor payments in accordance with the West Virginia State Treasury Department's Division of Unclaimed Property requirements and procedures and in compliance with CFR 42 Part 433 Section 40 (See. 4.2.1.95).

Following the procedure described in Section 4.2.1.95, Public Partnerships manages returned payments from uncashed PDGS provider or vendor checks per the West Virginia Unclaimed Property Act. In addition, the Payroll & Invoice Manager researches the returned PDGS check to confirm the address is correct. If the address is correct, the check is sent through regular mail. Receipts should be received within 60 days of check issuance. If the payment has not been received by the member/representative-employer or vendor within 10 business days of the date it was issued, we can void and reissue the check before it becomes unclaimed.

4.2.1.97.5 The Vendor should maintain copies of West Virginia Unclaimed Property-related documentation in the service provider's and vendor's file.

As stated in Section 4.2.1.96, Public Partnerships maintains copies of West Virginia Unclaimed Property-related documentation in our secure servers. We also track all related steps via CRM.

4.2.1.97.6 The Vendor should distribute IRS Forms SS-8, Determination of Worker Status for Purpose of Federal Employment Taxes, and Income Tax Withholding when there is a question of whether a participant directed vendor is an independent contractor.

IRS Form SS-8 should be submitted to the IRS by the individual/vendor if there is an issue with the vendor's status and the vendor is not sure if they are considered an employee or an independent contractor. Public Partnerships will distribute this form upon request.

Per the service description and restrictions in Chapter 513.16 of the IDDW policy manual, a PDGS vendor does not meet the qualifications to be an employee of the member. All IDDW PDGS vendors are required to submit an IRS Form W-9 and are appropriately classified as independent contractors in our web portal.

Take Me Home West Virginia (TMHWV) members may request support services during the pre-transition period. Public Partnerships will require vendors to submit IRS Form W-9 and we will appropriately classify them as independent contractors in our web portal. The W-9 provides backup documentation for the IRS if 1099 is incorrect.

4.2.1.97.7 The Vendor should distribute, collect, and process IRS Forms W-9, Request for Taxpayer Identification and Certification as appropriate for vendors of Participant-directed services (PDGS, EAA, etc.).

Public Partnerships distributes, collects, and processes IRS Forms W-9 for all vendors of Participant-directed services, including PDGS and EAA.

4.2.1.98 The Vendor should provide reports as requested by the Agency within seven (7) calendar days of the request or other schedule that is mutually agreed upon by the Agency and the Vendor.

PPL's Data Analytics team has efforts underway to improve PPL's range of reporting further and to develop ad hoc reports timely and accurately. One major project is to deliver to clients "Dashboards" which will present critical information in a streamlined manner. For example, below is a ***mock-up*** dashboard for West Virginia's "Authorization Activity." As you can see this dashboard shows the program and member-level authorizations with procedure code-level spending details. Future dashboards will include views for Enrollment and Payroll in addition to Authorizations. This functionality will provide the Department with a powerful tool to robustly interact with its data.

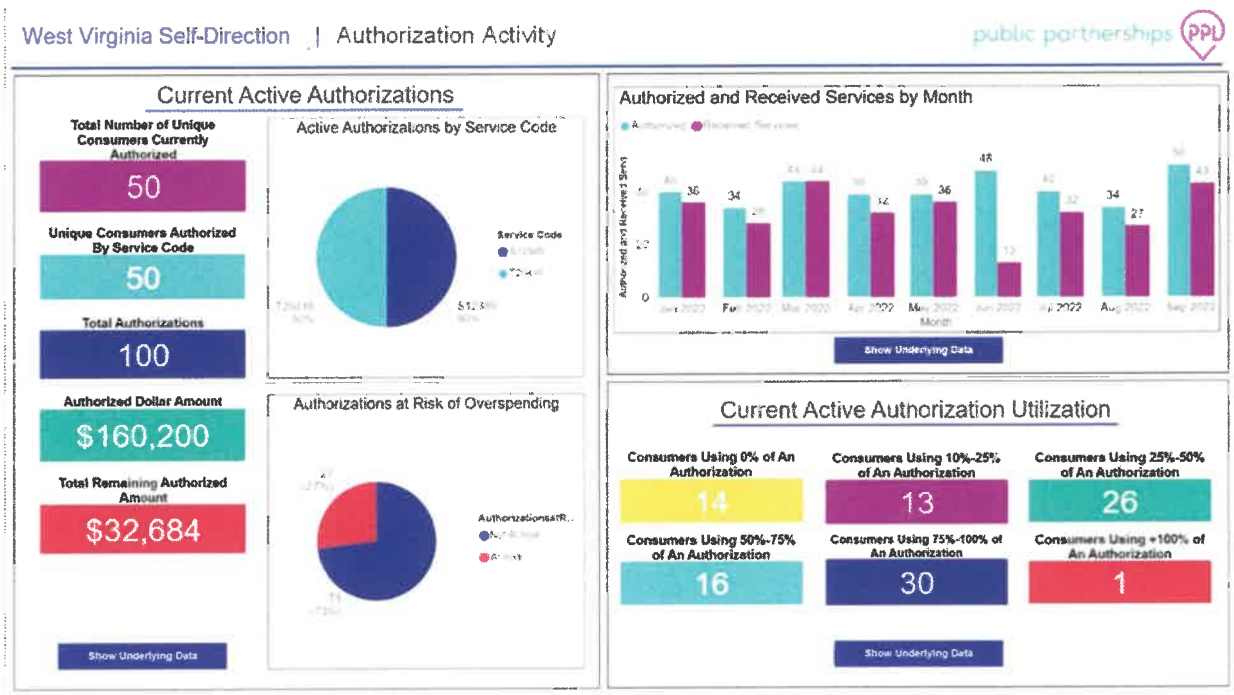


Figure 23. Mock Up of Authorization Activity Dashboard.

PPL will use a business intelligence platform for reporting that will be embedded in the user's portal. This platform will provide the user immediate choice and control with filtering, drilling down, and reviewing data from both an aggregate and record-level perspective. Once all the needed data fields are identified, PPL will build program dashboards accessible to the State. PPL will review all current report requirements, and past reports, to ensure that all data fields are captured.

Once the Dashboard is built, PPL will establish standard reports that address the reporting requirements of the Agency. At the same time, the user will be able to filter the data to create their reports. This is a simpler process than offering users to build reports themselves because the enhanced reporting platform allows the user to drill down to a detailed level. Functionality is much improved. If the data is in the system, the user can access it in real-time, so reporting is immediate. The user can also create a subscription to the report that will deliver it to the user at their preferred time and frequency. Reports can be exported from the tool in Excel or as a PDF.

PPL's Data Analytics team members will train Agency staff to use this robust reporting system.

4.2.1.99 The Vendor should provide ad hoc reports requested by the Agency within seven (7) calendar days of the request or other schedule that is mutually agreed upon by Agency and Vendor.

Public Partnerships has broad experience in designing reports based on specific program requirements. Upon receiving a request for an ad hoc report from the Agency, we will collaborate with the Agency to identify the required data fields and the format of the report. Once these specific details have been confirmed, we will generate the report within seven (7) calendar days.

4.2.1.100 The Vendor should provide the Agency a copy of the monthly statement from the dedicated payroll bank accounts within fifteen (15) calendar days of the request along with any other financial information that may be necessary for the Agency to oversee the delivery of Subagent-F/EA FMS. The Vendor should maintain relevant documentation in the Vendor's files.

Public Partnerships currently has and will continue to maintain dedicated bank accounts for the WV ADW program, WV IDDW program, WV TBIW program, and TMHWV.

Upon request, Public Partnerships will provide the Agency with a copy of the monthly statement from the dedicated payroll bank accounts within fifteen (15) business days of the request along with other financial information that may assist the Agency to oversee the delivery of F/EA FMS services. Public Partnerships maintains documentation of all bank account activity, copies of bank statements, and related correspondence on our secure server.

4.2.1.101 The Vendor should provide the Agency with a monthly Discovery and Remediation Report one (1) week prior to scheduled contract meetings based on performance measures identified by the Agency.

Public Partnerships currently delivers monthly Discovery and Remediation reports to the Agency one week before the scheduled contract meeting and will continue to follow that schedule. The performance measures included were agreed upon with the Agency and have been expanded over the years as the needs of the Agency have changed. The current Discovery and Remediation report is derived in Microsoft Excel format and includes a separate report per program. There are 13 performance measures ranging from enrollment cycle times to DCSW payment integrity.

Performance Measure: 5		100% of participants' paid employees meet required qualifications (CBC, CPR, FA, and annual training)																
Month		Jul	Aug	Sep	Q1	Oct	Nov	Dec	Q2	Jan	Feb	Mar	Q3	Apr	May	Jun	Q4	YTD
ADW	# of paid employees that meet required qualifications	1329	1327	1305	1305	1321	1326	1347	1347	1363			0				0	1347
	# of paid employees	1329	1327	1305	1305	1321	1326	1347	1347	1363			0				0	1347
	Compliance %	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	100.0%
	Non-Compliance %	0%	0%	0%	0%	0%	0%	0%	0.0%	0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0.0%
	Total %	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%
I/DD	# of paid employees that meet required qualifications	4478	4511	4493	4493	4525	4529	4588	4588	4612			0				0	4588
	# of paid employees	4478	4511	4493	4493	4525	4529	4588	4588	4612			0				0	4588
	Compliance %	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	100.0%
	Non-Compliance %	0%	0%	0%	0%	0%	0%	0%	0.0%	0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0.0%
	Total %	100%	100%	100%	100%	100%	100%	100%	100.0%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%
TBI	# of paid employees that meet required qualifications	42	45	45	45	44	45	45	45	44			0				0	45
	# of paid employees	42	45	45	45	44	45	45	45	44			0				0	45
	Compliance %	100%	100%	100%	100%	100%	100%	100%	100%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	100.0%
	Non-Compliance %	0%	0%	0%	0%	0%	0%	0%	0%	0%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	0.0%
	Total %	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100.0%

Figure 24. Discovery and Remediation Report Snapshot.

4.2.1.102 The Vendor should provide the Agency with quarterly and year-end financial reports within forty-five (45) calendar days of the end of the quarter or end of the year.

Public Partnerships currently provides the Agency with summaries of the quarterly and year-end financial reports of payments made to FICA, FUTA/SUTA, and commit to providing these reports within forty-five (45) calendar days of the end of the quarter or end of the year. If awarded this contract, we will meet with the Agency within thirty (30) calendar days of contract award to provide examples of quarterly and year-end financial reports and to develop the specifications, format, and timelines that will be used for ongoing reports provided to the Agency.

4.2.1.103 The Vendor should provide an up-to-date monthly spending report upon request to members who do not have access to the Internet within five (5) business days following the end of the payroll period that includes the last day of the month.

When a member requests an up-to-date monthly spending report and they do not have access to the Internet, Public Partnerships will deliver that report to the member, via U.S. Mail, within five (5) business days following the end of the payroll period that includes the last day of the month.

All member/representative-employers who are authorized users of the web portal have 24/7 access to their self-directed budgets including the amount of funds designated for each month's Spending Plan, the service-specific expenditures from the monthly spending plans, and the monthly and year-to-date budget balances.

4.2.1.104 The Vendor should ensure that copies of information and reports are not distributed to other parties without the written permission and direction of the Agency.

Public Partnerships ensure that copies of information and reports are not distributed to other parties without the written permission and direction of the Agency. Public Partnerships' policies and procedures regarding confidentiality and authorization for the release of Protected Health Information (PHI) comply with the Health Insurance Portability and Accountability Act (HIPAA) and the HIPAA Business Associate Addendum. We use secure encrypted e-mail in transmitting PHI to external audiences including the Agency, the Bureau of Senior Services (BoSS), Kepro, the State's Utilization Management Contractor (UMC), and traditional agency Case Managers. Public Partnerships obtains a signed written consent form before releasing PHI to any party other than the Agency, BoSS, or Kepro. Public Partnerships stores all PHI on secure servers with password-protected access based on authorized user roles as approved by the Agency.

4.2.1.105 The Vendor should propose a system and policies, procedures, and internal controls for establishing and managing member/representative-employer, DCSW and vendor files in a secure manner for the length of the contract and for the period of time mandated by applicable federal and West Virginia rules and regulations.

Public Partnerships has well-established policies, procedures, and internal controls to ensure that all documentation about the WV Personal Options programs is maintained in a complete, secure, and confidential manner for the length of the contract and the period in compliance with Federal and State rules and regulations (six years after termination of the agreement for retention of documents containing PHI). Each WV program that we serve has its portal where documents are managed.

We establish and maintain member/representative-employer, DCSW, participant-directed goods and services provider and vendor, and TMH members' information electronically through the Document Management system. The Document Management system allows us to store all files on a secure, limited-access server. Electronic documents received via e-fax are instantly moved to the secure server location and documents received via the United States Postal Service or standard fax machine are scanned directly to this location. This server location is mapped to our web portal allowing documents to be easily retrieved and viewable through the portal to authorized users.

Public Partnerships' Document Management system allows for continuous back-up of the server information protecting us against document loss and with access limited to authorized individuals only, it provides for stricter security than a conventional filing system. Only designated Public Partnerships staff and user roles that are pre-approved by the Agency can access this system. The information stored on the server is routinely backed up to help the continuity of service and protection against loss of information due to unforeseen natural events. Our Document Management System meets all the requirements established under the HIPAA and other applicable Federal and State rules and regulations.

Throughout our contract with the Agency, Public Partnerships has established a secure and effective procedure for maintaining all files related to the program (subagent F/EA and RC files). We maintain physical documents including archived files that have not been converted to electronic format in filing cabinets in secure, HIPAA-compliant offices.

4.2.1.106 The Vendor should have a master checklist, to be approved by the Agency, for each file type to ensure that all required documents are included in each of these files used by the operating agencies for each of the waiver programs.

Public Partnerships utilizes our proven Business Process Management (BPM) system to maintain current files and documentation for ADW, IDDW, TBIW, TMH members, DCSWs, participant-directed goods, and services providers, and vendors confidentially and securely. BPM allows Public Partnerships to effectively manage all required forms and program documents.

BPM is a workflow management tool that manages incoming documents and efficiently processes them. Its capabilities allow us to track and report on the status of files and documentation as they are processed and to maintain them for the life of the contract and as required by Federal and State rules and regulations.

We propose to review with the Agency, upon contract award, our current master checklist for Agency feedback and approval. Resource Consultants currently use a program-specific master checklist to send all member, DCSW, and PDGS-related documents to the BPM to be processed. The master checklist corresponds to the electronic "Good to Go" checklist in the web portal. As files are submitted to the web portal, the BPM system places them in a queue to be processed. Public Partnerships' Financial Operations staff manage queue items by opening a request, reading the scanned document, verifying the information, and completing the checklist in the web portal. The BPM tracks the receipt and processing of documents in real-time, allowing staff to monitor the workload in the queue and effectively process a large volume of documents in a short timeframe.

If any required documents are missing or incomplete, Public Partnerships' staff will log the issue in our CRM system. This will trigger our Customer Service team to make an outbound call to obtain the required information. The Customer Service Specialist will explain to the member/representative-employer what remains to be completed. Public Partnerships' Customer Service team, often with assistance from our Resource Consultants, will continue to follow up as necessary to obtain the documents.

The member and DCSW documents referenced in Sections 4.2.1.25 and 4.2.1.35 are already included on our master checklists and the checklists in the web portal. This allows us to quickly orient the operating agencies with our filing systems and for the operating agency staff to efficiently access documents during the annual performance and quality reviews of the Personal Options programs.

4.2.1.107 The Vendor should have a master checklist, to be approved by the Agency, for each type of archived files to ensure that all required documents are included in each of these files.

When we review with the Agency the master checklists described in Section 4.2.1.106 we will discuss our recommendation to continue using the same checklist for archived files of members, DCSWs, PDGS vendors, and TMH members who are no longer active on the Personal Options programs. This consistency reduces confusion and allows Public Partnerships' staff and the staff of the Agency's operating agencies to efficiently access archived documents during the annual performance and quality reviews of the Personal Options programs. We will work with the Agency to agree to the final content and procedure for using the master checklist for archived files, obtaining the Agency's approval.

We process and maintain all documents included on the master checklist in compliance with HIPAA requirements and applicable Federal and State rules and regulations. Specific details regarding Public Partnerships Information Security Program are provided in Section 4.2.1.108.

4.2.1.108 The Vendor should meet all HIPAA requirements, which can be found at: https://www.hhs.gov/hipaa/for-professionals/privacy/index.html, for current and archived files and documentation.

Public Partnerships meets all HIPAA requirements in its business and systems processes. The company takes a multi-faceted approach to HIPAA compliance:

1. Public Partnerships requires all employees to complete privacy and security training annually. The goal of such training is to ensure that each employee understands their role in carrying out the company's privacy and security efforts. At the end of the training, each employee must attest that they understand the requirements and agree to abide by them.
2. Public Partnerships requires all new employees to review and agree to its privacy and security policies.

3. Public Partnerships maintains a Compliance Department which is responsible for maintaining and supervising the company's overall compliance program. HIPAA compliance is one of the Compliance Department's major functions. The Compliance Department includes the company's privacy officer and information security officer.
4. Public Partnership maintains a SharePoint page for staff to report privacy or security incidents. Upon receipt of such a report, a Compliance Department staff member immediately begins an investigation to discover the root cause of the incident and to determine remedial actions. When client data is involved, the Compliance Department staff reports the incident to the client and ensures that the company resolves the issue to the client's satisfaction.
5. Public Partnerships maintains an Information Risk Council which meets quarterly to (1) review privacy and security risks, (2) develop a plan for managing those risks, and (3) determine how to best implement that plan.
6. Public Partnerships maintains a Quality Improvement Department which conducts regular reviews of operating procedures and business processes throughout the company, with the goal of discovering and remediating non-compliant or risky processes or procedures.
7. Finally, Public Partnerships maintains all best practice information security controls including (but not limited to) access controls (such as role-based access, minimum-necessary access, and periodic access reviews), vulnerability testing, malware detection, firewall configuration, patch management, mobile device security, vendor management, disaster planning and more.

4.2.1.109 The Vendor should establish and adhere to an incident/disaster management procedure, to be approved by the Agency, outlining the steps and related timeframes to report, document, mitigate, and recover from computer/network and HIPAA security breaches and noncompliance

Public Partnerships has an established and tested Business Continuity and Resiliency Plan and a Disaster Recovery Plan that encompasses our incident/disaster management procedures. We define "disaster" as any critical event that prohibits normal occupancy or usage of PPL facilities or restricts PPL from conducting its normal business operations. A disaster may be caused by a wide range of factors, including weather, fire, accidents, epidemic/pandemic, or a major information systems or telecommunications failure. An incident may include HIPAA security breaches and noncompliance. We will continue to provide the Agency with revisions to our incident/disaster management procedures for approval after the contract is awarded.

Procedures are adjusted based on the incident. The stages for a response are as follows:

Stage 1 – Assessment and Declaration – Management is alerted of a potential disaster and initial notifications are issued. Emergency Response Teams and the Crisis Management Team perform an assessment and the Executive Team makes a disaster declaration decision.

Stage 2 – Activate Business Continuity Plan(s) – The Crisis Management Team activates the Crisis Command Center, coordinates recovery and communication efforts, and ensures all other plans are activated, as required.

Stage 3 – Resume Business Function – Complete Departmental action items to assist in resuming business functions. Establish regular touchpoints to evaluate ongoing progress toward full recovery.

Stage 4 – Business Continuity Plan Close-out – Perform all close-out tasks.

Response to disaster and incidences are analyzed. Action steps for improvement are put in place to improve next time response, if applicable. Prevention strategies are also identified. Public Partnerships **will continue to update** the Agency PPL's detailed procedures outlining the steps and related timeframes to report, document, mitigate, and recover from computer/network and HIPAA security breaches and noncompliance.

4.2.1.110 The Vendor should establish and maintain a Business Continuity and Resiliency Plan and a Disaster Recovery Plan, to be approved by the Agency, for maintaining back-up files and for restoring software and files, as needed. The plan should be provided to the Agency within thirty (30) calendar days of contract award

Public Partnerships has an established and tested Business Continuity and Resiliency Plan and a Disaster Recovery Plan that we will provide to the Agency within thirty (30) calendar days of contract award. We understand that the Agency will review our Plans and provide their approval.

PPL has carefully designed our Business Continuity program, inclusive of the Business Continuity and Resiliency Plan and Disaster Recovery Plan, to meet the needs of our business and clients, spanning all of our business units. We designed the program with the intention of unifying PPL in case we experience a disaster.

Below are highlights from our approach to business continuity and disaster recovery.

1. Performance of Financial Administration and Supports Brokerage functions

PPL is fully prepared to maintain our financial operations and Resource Consultant functions operations in the event of a disaster. It is important to note that PPL has never experienced a systems failure impacting our ability to administer services, nor been delayed in our ability to perform due to a natural disaster. PPL's information technology systems consist of applications (e.g., MyAccount and Time4Care) that are integrated through MS Business Central providing the industry's best stability of our core operational systems. Our systems have an annual SOC1 Type 2 attestation provided by a third-party auditing firm for four trust principles including availability. This system resiliency allows PPL to:

1. Continue to process enrollment and hiring documentation including through staff located outside of Tennessee in the event of a natural disaster.

2. Collect time and EVV-compliant shift data during times of no internet connectivity and store it locally through our Time4Care time capture mobile application
3. Process payments on schedule from multiple locations around the country
4. Continue to handle inbound and outbound calls through our Five9 cloud call center system
5. Exchange information across Supports Brokers to ensure our statewide collective workforce can quickly collaborate on meeting member needs during a prolonged disaster.

2. Communication Processes, including maintenance of Customer Services lines

The PPL Customer Services lines are supported by Five9 a leading cloud contact center software. Five9 and our current telephonic vendor have consistently maintained our phone lines for more than a decade. Our Customer Service representatives have the underlying system stability, and our communication capacity is strengthened by our organizational size. During a disaster, PPL can draw on trained Customer Service representatives across our organization and locate across the country to provide intermediate support during the crisis.

Both our Customer Service Representative and Supports Broker are also supported by MS Business Central and Teams. Teams provide an alternate option for PPL staff to make outbound calls in the event our Five9 software were to fail. Staff can also use Teams to communicate internally.

3. Maintenance of Records

The business continuity program was designed with the intention of unifying PPL in the case that we experience a disaster so that we can operate effectively and efficiently as a consolidated unit to recover as quickly as possible in the face of adversity. The Business Continuity program, however, also recognizes that each of our business units has unique customer requirements to address that would not fit into a single unified plan. To address the organizational structure of our company, we have created a program that branches from one Business Continuity Plan (BCP) into two Disaster Recovery Plans (DRPs, described below), and several Product-Level DR Plans (described below) based on the requirements of each business unit.

The Business Continuity Plan details the step-by-step process for declaring a disaster, handling the creation of a Crisis Management Team, communicating with PPL staff and clients, and many other procedural elements that would be required in the event of a disaster. The Business Continuity Plan can be activated for many types of disasters, including the pandemic response. PPL's BCP is regularly reviewed and updated to continuously improve our response to various events, including COVID-19.

Disaster Recovery

PPL's Disaster Recovery Plans are designed to provide immediate response and subsequent recovery from any unplanned computing services interruption, such as loss of utility services, building evacuation, or a catastrophic event at data centers in Austin, Texas, and Watertown, Massachusetts. Two plans are maintained to accommodate the two potential failover flows: one from Austin to Watertown and one from Watertown to Austin.

The corporate information technology team works with business units to determine the prioritization of key systems that need to be recovered, as well as their timeline for recovery.

We test our Disaster Recovery Plans at least annually (in both failover directions) and adapted as necessary to support efficiency and success in meeting required Recovery Point Objectives (RPO) and Recovery Time Objectives (RTO). PPL has identified its RPO as requiring that systems are recovered no earlier than the night before the disaster occurs, and its RTO as being no more than 72 hours unless otherwise required by the client contract. As testing determines areas for improvement, the plans are updated to reflect any required changes.

Disaster recovery is only one facet of our business continuity planning. Our DRP addresses restoring software, master and electronic files, hard copy files, and hardware backup in the event information systems are disabled, to abate payroll and payment system interruptions.

It also uses a collection of artifacts that establishes formal procedures and supporting technical solutions for mitigating and reacting to an emergency.

Preventive Measures: Taking measures to prevent or mitigate a disaster's effects beforehand is critical. These prevention activities play a vital role in how our clients and stakeholders securely access records and interact with our systems. We regularly schedule, communicate, and complete security updates to our systems throughout the year. The updates that apply to our user interfacing tools, MyAccount, and Time4Care mobile application are posted as announcements on the login screen. This way all users see and are aware of our maintenance windows upon login. These preventive measures are coordinated across all functional departments to ensure updates are achieved timely, without impacting performance deliverables such as timesheet submission, payroll, or annual and quarterly tax deadlines. The list below identifies critical areas where we have made significant investments in prevention. This list continually evolves with system upgrades and procedural updates.

Data Center: Business critical systems are hosted in Tier III or higher data centers. Fault-tolerant site infrastructure guarantees high availability with uninterruptable power supply, redundant power, and network paths for information technology systems and environmental systems.

Architecture Design: Secure-hosted systems that leverage database clustering and fail-over techniques and are designed to be redundant and provide high availability within each data center.

Backups: Systems and data, including payroll and claims files, are regularly and securely backed up using commercial backup applications with different types of data (e.g., operational data, non-data software installations) backed up at different frequencies (e.g., daily, weekly, quarterly).

Maintenance: Regular maintenance is performed on systems to ensure software patches are up to date. Servers and network device hardware are supported by well-established and/or reliable vendors. Hardware is regularly replaced or refreshed before it becomes obsolete and there is on-hand or on-contract backup hardware to replace devices that might fail, such as laptops or network routers.

Audit Compliance: A third-party audit firm evaluates PPL at least annually to validate the effectiveness of our security posture and all solutions in place. These evaluations compare security policies and standards to operational effectiveness to validate that documented actions are being performed as required. Additionally, the evaluations determine whether processes are aligned with various assessment frameworks, such as SOC1 and SOC2. PPL's data centers and third-party IT service providers are subjected to annual external validation and auditing by a certified auditing firm in good standing. PPL maintains SOC2 accreditation for our facilities and IT hosting.

4.2.1.111 The Vendor should test its Business Continuity and Resiliency Plan and a Disaster Recovery Plan at least annually, at a schedule to be mutually agreed upon Vendor and the Agency. Results of testing of the Vendor's Disaster Recovery Plan should be available and provided to the Agency, its designee, and member/representative employers within in five (5) business days of request.

PPL's Disaster recovery test plan facilitates the breaking down of enterprise components into functional areas, and where appropriate, a further breakdown within enterprise functional areas into specialized functional areas to facilitate Business Continuity Planning for business and Data Center recovery. Currently, we perform testing on an annual basis and will provide results to the Agency upon request.

4.2.1.112 The Vendor should make all documents and records available for receipt and inspection by the Agency, its designee, and member/representative-employers, within five (5) business days of request.

Should Public Partnerships be awarded this contract, we agree to make all documents and records required in the contract details available for receipt and inspection by the Agency, its designee, and member/representative-employers within five (5) business days of a request.

4.2.1.113 The Vendor should dis-enroll member/representative-employers from receiving Subagent-F/EA FMS and terminate their employment status within one (1) business day of being informed of the member's change in status-i.e., no longer Medicaid eligible, deceased, opted off the program, etc.

Public Partnerships has established policies and procedures (P&P) to ensure members are dis-enrolled from the Personal Options program in an accurate and timely manner. The reasons for dis-enrollment are varied and the P&P outlines the required steps for each of the following scenarios:

1. Transfer to the Traditional Service Model (voluntary request, inability to self-direct services, unsafe environment, non-compliance)

2. Loss of slot (member voluntarily withdraws from the Waiver program, moves out of state, loses financial or medical eligibility, receives no direct care services for 180 consecutive days)

3. Death of the member.

Upon being made aware of the need to dis-enroll a member, the Resource Consultant will submit a Closure Request form within one (1) business day to our program support staff. In addition to the Closure Request form, the Resource Consultant provides supporting documentation as required for the particular type of dis-enrollment and notifies Case Managers, Service Coordinators, and other stakeholders as appropriate.

The program support staff reviews the Closure Request form and supporting documents before deactivating the member in the web portal, issuing notifications, and submitting required documents to the State's Utilization Management Contractor and Bureau of Senior Services. In the event of a member's death, an IMS report is submitted, and additional documents such as the Estate Recovery Program form which is submitted to WV DHHR.

Dis-enrolling a member in the web portal automatically end-dates the member's services so that the member's DCSWs cannot continue to bill for services. Our Tax Team revokes the member's IRS Form 2678 and files final reports as appropriate with Federal, State, and local agencies. The month following the member's dis-enrollment date, Public Partnerships ceases to invoice the Agency for FMS/FEA administrative fees.

4.2.1.114 The Vendor should describe its plan/process to revoke the IRS Form 2678, Employer/Payer Appointment of Agent with the member/representative-employer, when appropriate, per IRS Form instructions.

Public Partnerships has an established process to revoke the IRS Form 2678, Employer/Payer Appointment of Agent with the member/representative-employer, when appropriate. The process is initiated upon receipt of notification of a member's status being changed to "dis-enrolled" in the web portal. This activates the following process to revoke Form 2678:

1. A new Form 2768 is completed following the IRS instructions for dis-enrolling a domestic employer. Each of the three parts of the form is completed as required.

2. The Form 2678 is submitted to the Department of the Treasury

3. Public Partnerships receives documentation from the IRS confirming that form 2678 has been revoked

4. All documentation about the IRS Form 2678 is electronically stored on our secure servers.

4.2.1.115 The Vendor should maintain a copy of the revoked IRS Form 2678, Employer/Payer Appointment of Agent, and IRS Notice of Agent Revocation in the member/ representative-employer's archived file, per IRS Form instructions.

Public Partnerships stores the revoked IRS Form 2678 and related documentation on our secure servers. We maintain documents per IRS rules for record retention.

4.2.1.116 The Vendor should revoke the IRS Form 8821 with the participant/authorized representative-employer, when appropriate and per IRS Form instructions.

Public Partnerships will revoke IRS Form 8821 with the member/representative-employer, when appropriate and per IRS Form Instructions. An IRS Form 8821 is executed between the F/EA and a member/representative employer to authorize the F/EA to inspect and receive the member employer's confidential employment tax information. IRS Form 2678 has been updated to authorize F/EA to represent participants for purposes of FUTA, so Form 8821 may not be necessary. IRS Form 8821 is also used to revoke prior tax information authorizations. A new submission of Form 8821 automatically revokes authorizations listed on prior forms unless prior forms are attached as copies of the new submission.

In January 2017, the Agency approved the removal of Form 8821 from the member enrollment packet. Should Public Partnerships be awarded this contract, we propose that we review with Agency the member enrollment packet to ensure there is a mutual understanding of the purpose and need for each document including Form 8821.

4.2.1.117 The Vendor should maintain a copy of the revoked IRS Form 8821, Tax Information Authorization in the participant/authorized representative-employer's archived file.

Should IRS Form 8821 be required, upon the dis-enrollment of a member in the web portal, the process to revoke the form will be initiated:

- Complete a new Form 8821 indicating that the authorization to disclose information to Public Partnerships is revoked.
- Submit Form 8821 to the IRS
- Receive documentation from the IRS confirming that Form 8821 has been revoked
- Store all documentation of the IRS Form 8821 electronically on our secure servers.

4.2.1.118 The Vendor should retire the member/representative-employer's FEIN, when appropriate. Note: The IRS requests to be notified if the member/representative employer is deceased when being informed that a FEIN needs to be retired.

The IRS does not offer Public Partnerships or any other F/EA the means and authority to retire a member/representative-employer's FEIN. We can retire the State accounts when appropriate but not the FEIN. When we revoke IRS Form 2678, filing requirements for forms 940 and 941 are discontinued for Public Partnerships (see Section 4.2.1.115 – Revoke the IRS Form 2678) but continue for the member/representative-employer. It is up to the employer to decide whether or not to keep the FEIN open. Additionally, if an employer is deceased, it is the responsibility of the individual handling the estate to inform the IRS that the employer is deceased.

4.2.1.119 The Vendor should maintain a copy of the documentation of the FEIN retirement in the participant archived file.

Please see the prior section 4.2.1.118 for our response about retiring the FEIN for a member/representative-employer.

4.2.1.120 The Vendor should withhold, file and deposit final West Virginia state income tax (even when the final filing is zero wages) for each applicable member/representative-employer.

The Public Partnerships Financial Management System is configured to withhold state income tax for each DCSW associated with a member/representative-employer per the rates and rules established by the West Virginia Department of Revenue. We bulk file employee withholdings monthly through an established FTP site. We deposit monthly ACH credit payments for DCSW withholdings to the State's account from our bank.

Final filing occurs with the end-of-year reconciliation completed online at https://my taxes.wvtax.gov on or before January 31st. We complete Form WV/IT-103 - *West Virginia Withholding Annual Reconciliation*, and check the box in the section titled, *Employer's Withholding Change Order* that indicates that the member/representative-employer has ceased paying wages.

4.2.1.121 The Vendor should maintain a copy of the final West Virginia state income tax withholding filing and deposit documentation and related correspondence in the member/representative-employer archived file.

Public Partnerships stores a copy of the final West Virginia state income tax withholding filing and deposit documentation and related correspondence on our secure servers. We maintain documents as contractually required and per IRS rules for record retention.

4.2.1.122 The Vendor should compute, withhold, file, and deposit final West Virginia unemployment taxes (even when the final filing is zero wages) for each applicable member/representative-employer.

Public Partnerships' Financial Management system is configured to withhold unemployment taxes per the rates and rules established by WorkForce West Virginia. We use an established SFTP site to bulk file unemployment taxes quarterly. Payment is made using ACH credit from our bank to the State. Final withholding for each applicable member/employer occurs automatically per the system configuration that enables bulk filing and ACH payment.

We understand and comply with the requirement described in the WorkForce West Virginia Handbook for Employers that mandates reporting even when the final filing is zero wages. We will continue to inform WorkForce West Virginia if a member/employer is no longer active.

4.2.1.123 The Vendor should maintain a copy of the final West Virginia unemployment tax, filing and payment documentation and related correspondence in each member/representative-employer's archived file.

Public Partnerships stores a copy of the final West Virginia unemployment tax filing, payment documentation, and related correspondence on our secure servers. We maintain documents as contractually required and per IRS rules for record retention.

4.2.1.124 The Vendor should compute, withhold, file, and deposit any final municipal taxes.

Public Partnerships has completed extensive research and outreach to all eight (8) West Virginia municipalities that currently have user fees. We are confident that our approach and process meet each municipalities' requirements for computing, withholding, filing, and depositing any final municipal fees per the municipality requirements.

Public Partnerships programs its systems to withhold applicable municipal fees and taxes, such as the city service fees currently applicable in the Charleston, Fairmont, Huntington, Madison, Morgantown, Parkersburg, Romney, and Weirton localities. Participants who live in a municipality that requires a user fee will complete the Verification of City Service Fee Withholding Form that allows PPL to determine if the fee applies to the participant's Direct Care Service Workers. At the time of the enrollment meeting, the Resource Consultant reviews the municipal user fee requirements with the member/representative-employer and their DCSWs and assists them with completing the necessary forms and paperwork to exempt or withhold the fee as required. Upon determining that a member/employer lives within the city limits of a municipality that requires a user fee, PPL will flag the member/employer and the DCSWs in our web portal and payroll system. PPL will withhold the applicable fee, once per earning period, from the DCSWs paycheck, per the municipalities' requirements. PPL will continue to withhold and file the fee using the municipalities' filing schedule, on behalf of the applicable member/representative-employers. PPL will maintain electronic copies of forms and filings on our secure servers.

When we have determined that municipal fees are no longer required due to (1) a member/employer no longer living in a municipality that requires a fee, (2) when a member/employer is dis-enrolled from the Personal Options program, or (3) if a DCSW no longer works for a member/employer, Public Partnerships will send, and mark as final, the final fees to the municipality at the time of the next scheduled filing.

4.2.1.125 The Vendor should maintain copies of all documentation and related correspondence in each member/representative-employer's archived file.

Public Partnerships stores copies of all documentation and correspondence including any related to filing and deposits for final municipal taxes on our secure servers. We maintain documents as contractually required and per IRS rules for record retention.

4.2.1.126 The Vendor should retire the member/representative-employer's West Virginia Department of Taxation and Bureau of Employment Programs, Unemployment Insurance employer identification numbers.

Public Partnerships understands that there are two types of accounts and associated account numbers that need to be retired: the State Income Tax (SIT) account and the Unemployment Insurance account. Once we learn that a member/representative-employer has been dis-enrolled we complete the required steps to retire the SIT and Unemployment Insurance accounts. We describe below the processes and procedures (P&P) that we have in place to retire each type of account.

1. The process to retire the SIT account with the West Virginia State Tax Department:
    - Complete and submit Part 2 of Form WV/IT-101A (West Virginia Employer's Annual Return of Income Tax Withheld). This informs the Department of Taxation of wages that have been paid and reconciles payments made to liability filed annually.
    - Complete and submit page 2 of Form WV/IT-103 to indicate that we have ceased paying wages. This reconciles payments to W-2s.
2. The process to retire the Unemployment Insurance account with the Bureau of Employment Programs:
    - After determining that the member/representative-employer has been dis-enrolled, we notify WorkForce West Virginia of the member/employer's Unemployment Insurance account number that is to be closed. We provide the cumulative list of accounts to be closed to WorkForce West Virginia quarterly.

4.2.1.127 The Vendor should maintain copies of all documentation and related correspondence in the member/representative-employer's archived files.

Public Partnerships stores copies of all documentation and correspondence related to the member/representative-employer and DCSWs on our secure servers, including those who are no longer active on the Personal Options program. Documents stored in the web portal are accessible to registered users at any time. We maintain documents as contractually required and per Federal and State agency regulations.

4.2.1.128 The Vendor should retire the member/representative-employer's municipal tax account and identification number. The Vendor should maintain the documentation and related correspondence in the member/representative employer's archived files. The Vendor should inform the state department of labor of any DCSWs no longer employed when the member/representative-employer stops being an employer for any reason.

Public Partnerships will inform the municipality if a member/representative-employer is no longer an employer on Personal Options, or if the member/employer no longer lives in the city limits, per the municipality's requirements. We will store documentation and correspondence related to municipal fees on our secure network.

When a DCSW is no longer employed by a member/representative-employer, we inform WorkForce West Virginia that the member/employer is no longer an employer by sending a disenroll form when the member/employer is dis-enrolled from the Personal Options program. We store all documentation and correspondence regarding WorkForce West Virginia on our secure servers.

4.2.1.129 The Vendor should maintain documentation and related correspondence with the State Department of Labor in each DCSW' s archived file.

Public Partnerships stores documentation and related correspondence on each member/employer's DCSWs with the State Department of Labor on our secure servers. We maintain documents as contractually required and per Federal and State regulations of record retention.

4.2.1.130 The Vendor should coordinate and communicate its role, responsibilities and activities as the Subagent-F/EA FMS Vendor with Case Managers, Utilization Management staff and Claims Payer staff to ensure that all required procedures and forms are completed and processed so that members do not experience disruptions in service.

Public Partnerships has established effective working relationships with the Agency, the Bureau of Senior Services (BoSS), the Utilization Management Contractor (UMC), Kepro, the traditional agencies' Case Managers and Service Coordinators, Personal Care Agencies, TMHWV Transition Navigators, and DHHR Economic Social Workers. Our program support staff and Resource Consultants interact with these entities daily and are registered users of their systems to ensure that all required procedures and forms are completed so that members may promptly access services and do not experience service disruptions.

Our staff collaborates closely with BoSS, Kepro, Case Managers, and Service Coordinators to ensure that members efficiently transfer to and from the traditional and Personal Options of self-directed service delivery models. The collaboration starts from the day we receive the notice of the member's referral. For Take Me Home West Virginia members, our Resource Consultants will continue to work closely with the Transition Navigators to enable the members to begin receiving services as soon as possible during their transition back to the community.

Resource Consultants monitor the members' medical and financial eligibility and assist as required and needed to prevent gaps in eligibility. When necessary, the Resource Consultants collaborate with the member's Economic Service Workers to resolve eligibility issues. For members who are eligible for dual services, the Resource Consultants also communicate with

Personal Care Nurses and Case Managers to establish and maintain their Personal Care services.

Our program management and support staff attend and participate in the ADW, IDDW, and TBIW quarterly provider meetings, Quality Council meetings, policy clarification conference calls, and periodic training on program policies. It is our goal to understand the roles and responsibilities of all stakeholders and to educate them to understand Public Partnerships' role and responsibilities as the F/EA FMS Vendor for the Personal Options programs.

4.2.1.131 The Vendor should establish and maintain an on-line searchable DCSW Registry.

Essential to home- and community-based services (HCBS) delivery is the ability to find a worker who can be trusted to come into one's home. In late 2022, Public Partnerships began transitioning away from the MyChoice4Care DCSW registry we launched in 2017 to PPL Provider Connect, a technology upgrade that supports greater security for the user. We provide the platform for members and workers to find each other and with our process for securely messaging workers, the member is in control of finding a match on a personal level.

Members register in PPL Provider Connect to view DCSWs who have created a profile. Individuals who are interested in being a DCSW register in PPL Provider Connect and create a profile for members to view.

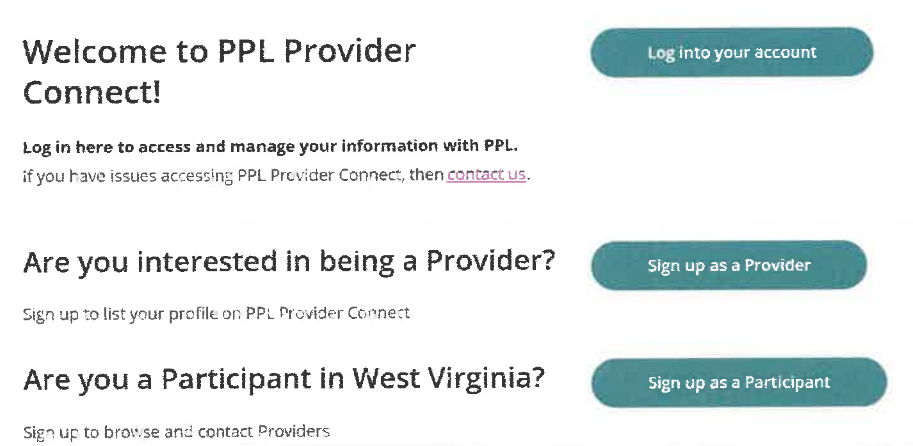


Figure 25. Provider Connect log in screen.

The DCSW, once they have created and verified their account, will need to create a profile that will allow a member to match their preferred criteria to find the DCSW. The DCSW will make a series of selections that create a profile of their experience, skills, licenses, distance willing to travel, and availability, along with other personal information they can choose to share such as preferences with whom to work with and the work environment. Finally, we encourage DCSWs to complete a written profile that introduces themselves and their skills and experience, bringing a personal touch to their profile that will be viewed by members.

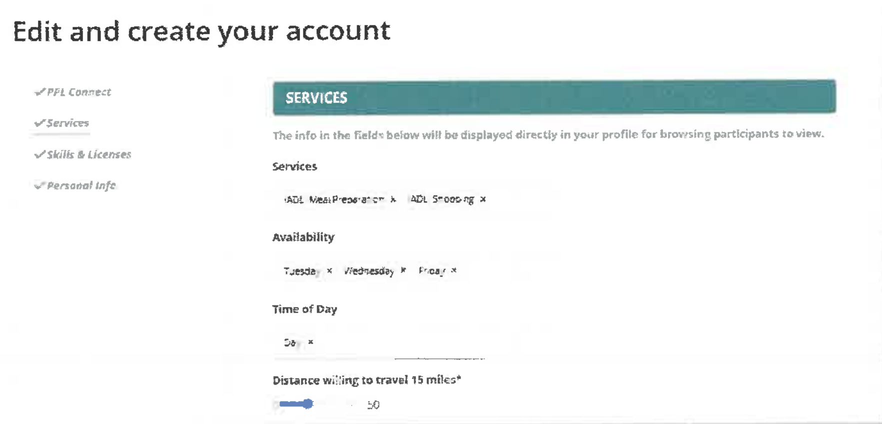


Figure 26. Create account in Provider Connect.

For the member, once they have created and verified their account, they will be able to log in and access the member dashboard. From the dashboard, the member can review their profile, view their messages, and search for a provider/DCSW. When selecting "Find a provider," the member can view DCSWs in the directory and filter results based on select criteria such as care preferences, languages, licensing, type of service experience, and availability.

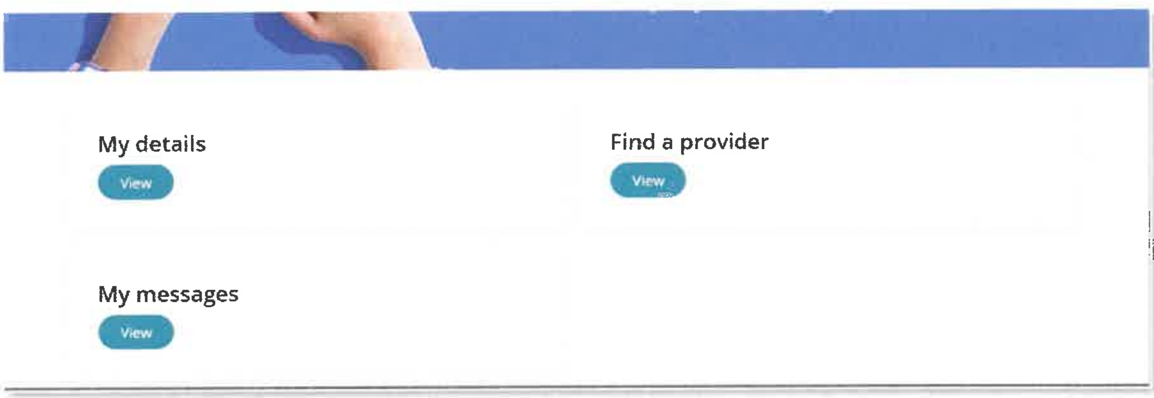


Figure 27. Click 'Find a Provider' to begin the search for a provider

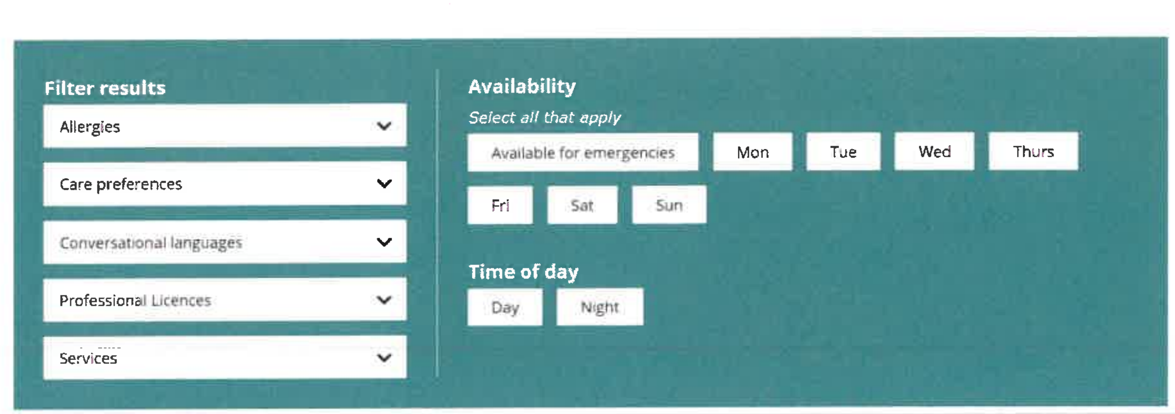


Figure 28. Filter results based on several attributes.

After viewing DCSW profiles, members can send messages to DCSW candidates within the PPL Provider Connect site. Members and DCSWs receive an email notification when a message is available in PPL Provider Connect. Only the member has the option to initiate the conversation through PPL Provider Connect messaging.

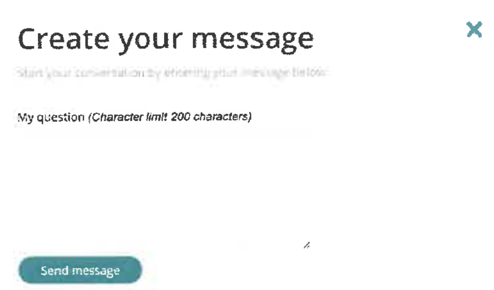


Figure 29. Messaging feature to connect with potential providers.

We are developing the capability for members to create job postings that DCSWs can view and apply to, making finding work much more tangible for DCSWs.

Public Partnerships continues to reach out to members and DCSWs to promote the use of PPL Provider Connect. We launched a promotion in late 2022 that our Resource Consultants distributed as a postcard to members and their DCSWs. Images of the two-sided postcard are displayed below.

Figure 30. Provider Connect Post Cards.

4.2.1.132 The Vendor should participate in annual quality reviews conducted by the Agency or its contractor for each program using a quality review tool and web-based systems approved by the Agency.

Public Partnerships will continue to participate in annual quality reviews for each of the waiver programs as required by the Agency as we have done since the inception of the Personal Options Programs in 2007. At the time of the annual review, we promptly provide all required files and documents and our Program Manager and supporting Resource Consultants are on hand to assist the review team and answer any questions that may arise.

We are knowledgeable of the annual quality review process and the program-specific review tools. The annual reviews have proven to be valuable because they provide a learning opportunity and strengthen the working relationships and shared knowledge between our staff and Agency contracted vendors.

Public Partnerships strives to continuously improve the quality of the services that we provide. We have established internal controls to measure performance in all areas to ensure compliance. The annual quality audits complement these initiatives and confirm their effectiveness.

4.2.1.133 The Vendor should propose a plan to develop, implement and maintain a system for collecting information and following up with program members and their representatives who express an interest in using participant-directed services.

Public Partnerships has been exploring opportunities to educate and engage with members and their representatives who are eligible but not yet using participant-directed services. This

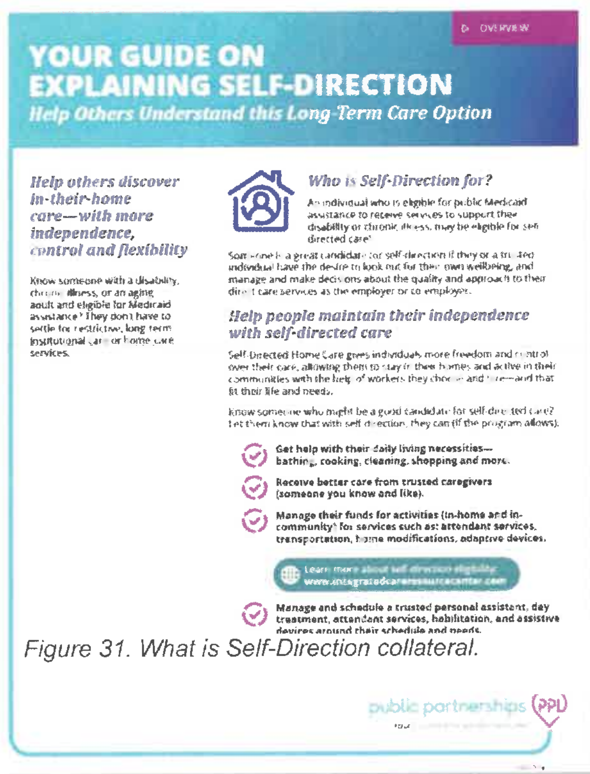


Figure 31. What is Self-Direction collateral.

population is not always accessible to PPL because we often don't have a line of sight into who may be eligible until the member has made their choice to self-direct. Our approach to develop, implement, and maintain a system for collecting information and following up with program members requires 1) engagement and education with ADRCs and AAAs in West Virginia, 2) awareness campaigns for PPL's concierge line and self-direction microsite for those new to self-direction. Through these channels, we will identify and follow up with program members and their representatives who express an interest in using participant-directed services.

Our approach to engagement and education with the ADRCs and AAAs will leverage PPL collateral that we have shared within other states to bring awareness to the importance of presenting new members with all of their options, including participant-directed services. Our recent experience reaching out to ADRCs and AAAs has shown us that options counseling often favors agency-based services. Our outreach intends to break down the barriers and hesitations of understanding how self-direction can be a viable option for most.

Currently, we are in development of a podcast to highlight Self-Direction from the perspective of PPL employees who support members/participants across all of our portfolio, as well as providers and eventually, members/participants themselves and stakeholders.

PPL has also developed a Concierge Line and Self-Direction Microsite available nationwide to anyone interested in self-direction. PPL will promote how individuals in West Virginia may access these resources to learn more about self-direction.

Concierge Line – in 2023, PPL launched a Concierge Line, a toll-free number staffed by a team of professionals trained to educate anyone who inquires about self-direction. We understand that the path to self-direction is complicated, so the Concierge Line is intended to help simplify the journey through a 1:1 experience for those who need additional support and guidance, pre-referral. Our caring representatives are there to educate the individual and provide market-specific links to external websites and information, e.g., the Medicaid eligibility process, as appropriate.

Self-Direction Microsite – Still in development, but launching in 2023, the Self-Direction Microsite will be a self-serve website for interested individuals to answer questions about where they are in their Medicaid journey and receive education about self-direction and steps individuals can take to participate. The site will include links to FAQs, overviews of self-direction, and videos. The microsite will be connected to a CRM to allow us to track and nurture leads.

4.2.1.134 The Vendor should propose a plan to develop and implement a system for receiving and processing member enrollment, DCSW employment and vendor information including the preparation of enrollment and employment packets and monitoring the effectiveness of the system.

Public Partnerships values the time and effort that members, their representatives, DCSWs, vendors, and other stakeholders must devote to completing the enrollment paperwork. We designed our systems to reduce the opportunity for error and minimize re-work as a standard operating practice. We have internal controls that govern the accuracy of enrollment information and systems that track and report the submission of each required form. Our internal controls occur pre- and post-production.

Public Partnerships currently receives Personal Options referrals through secure encrypted e-mail from BMS' Operating Agency, the Bureau of Senior Services (BoSS), and through the CareConnection® system of BMS' Utilization Management Contractor (Kepro). These referral files leave electronic footprints allowing us to meet the Agency's contractual requirements for processing members' referrals.

Our web portal allows us to pre-populate demographic and other pertinent data on each required enrollment form. Members and their representatives are only required to review, sign and date the forms. This user-friendly approach reduces the administrative burden on the member and representative, decreases the incidence of errors, and streamlines the enrollment process for members, their representative, and their DCSWs.

As described in Sections 4.2.1.27 and 4.2.1.35, Public Partnerships' Resource Consultants provide hands-on assistance to the member/representative-employer to complete all enrollment forms. The member and DCSW have the option to complete forms based on their preference: electronically with Adobe Sign for electronic signature or using paper forms with a wet signature. Individuals in rural areas may not have internet access causing them to prefer paper forms. With the future introduction of PPL's MyAccount, online enrollment will be a reality allowing Member and DCSW enrollment packets to be immediately integrated into the web portal. Completing enrollment directly in our web portal is the best practice but paper packets will still be available to member/representative-employers and their DCSWs who do not have access to the internet or choose to use the traditional method for completing enrollment documents. PPL provides Resource Consultants in rural areas mobile hotspot for internet, that helps to facilitate electronic enrollment. Resource Consultants will also be on hand to assist DCSWs with the completion of forms and to answer any questions that they may have. Regardless of the method used to complete the required enrollment documents, upon their receipt our Enrollment Team promptly validates each form, enters the information into our web portal, and files the documents as required with Federal, State, and local agencies.

Public Partnerships understands that enrollment documents are time-sensitive and must be processed quickly and accurately. We have developed the Business Process Management (BPM) system in our web portal that allows us to efficiently organize, process and maintain documents. One of the many benefits of our web portal is that member/representative-employers and DCSWs can track the status of their enrollments. All web portal-authorized users have visibility into their records allowing them to monitor updates in real time.

4.2.1.135 The Vendor should propose a plan to develop, implement and maintain an electronic system for receiving, responding to, tracking all communications from any source (including complaints and grievances), and maintaining a log that includes the individual's name; who received the communication; the reason for the communication; action taken; if any mandatory reporting occurred; and the final resolution of the issue.

Figure 32. CRM fields for tracking encounters/communications.

Public Partnerships has implemented a Customer Relationship Management (CRM) system to document all encounters/communications from;

- members,
- their representatives,
- DCSWs,
- the Agency,
- Kepro,
- Case Managers, and
- Service Coordinators

CRM electronically tracks any encounter and is categorized. This categorization allows us to accurately assign the issue to the appropriate staff person for follow-up/resolution and to generate reports.

The case includes a title, category, subcategory, and detailed description of the encounter/contact. We capture the information of the person who made contact as well as how to reach the person should there be a need for follow-up. The CRM system tracks the entire process from initial contact through to resolution and the disposition of each step along the way. It also includes the name and contact information of the individual who made the contact, the staff person who responded, the nature of the communication, the action taken, and the final resolution.

Depending on the nature of the communication, we may resolve it at the time of the initial contact or may escalate to a Resource Consultant, a program support staff, and/or the Program Manager. If the communication involved a complaint, which was not resolved to the satisfaction of the individual, we offer a grievance form. We will continue to escalate all grievances to the Agency's Program Manager to review and provide input regarding the resolution.

4.2.1.136 The Vendor should propose a plan to respond to all member and representative communications within one (1) business day from receipt of the communication.

Public Partnerships staff are trained, experienced, and held to high standards for delivering exceptional customer service including responding to all member, representative, and DCSW communication requests within one (1) business day from receipt of the communication.

We have developed a system to track and document all member/representative-employer and DCSW contacts with Customer Service. We record, track, and document all voice messages and communications for auditing purposes and to help ensure we meet contractual requirements and internal performance metrics. We offer members, their representatives, and DCSWs multiple methods to communicate including calling our program-specific toll-free Customer Service numbers, e-mailing the program-specific general e-mail boxes, calling or e-mailing the Resource Consultants, or sending faxes and letters. Please see Section 4.2.1.144 for more details regarding Customer Service.

4.2.1.137 The Vendor should propose a plan for identifying and reporting critical incidents involving a program member to the Agency's Incident Management System (IMS) within 24 hours of becoming aware of the incident.

All Resource Consultants are trained in the process of critical incident reporting, as well as in what constitutes a critical incident. Critical incidents are occurrences with a high likelihood of producing real or potential harm to the health and welfare of the participant or incidents which have caused harm or injury. It could also include any type of suspected criminal activity.

Resource Consultant training includes identification of critical incidents which include but are not limited to, suicidal ideation, criminal activity/violence in the members' social circle, drastic change in living conditions, emergency backup plan failure, medication distribution was inaccurate, fall or other injuries, impact by loss of utilities caused by a natural disaster, house fire, etc.

In cases where the Resource Consultant is first to be informed of a critical incident, the following process begins.

1. Notification is made to the Case Management or Service Coordination Agency, as applicable.
2. Within 24 hours of becoming aware of the incident, an incident report is created in the Agency's Incident Management System (IMS) (https://dhhrimsportal.wv.gov/).
3. Document details of the incident as reported by the source to the Member record.
4. Notify Public Partnerships supervisor of any incidents involving possible criminal activity.

5. Contact WV Protective Services Hotline Centralized Intake (800-352-6513) for verbal reporting.
6. Submit required written reports to local APS or CPS within 48 hours; reports are generated in the IMS system.
7. Coordinate notifications to avoid multiple IMS reports related to one incident from multiple sources.
8. Upload a copy of the IMS report to our internal system to ensure proper tracking.

Per program compliance, critical incidents require follow-up with details entered into the IMS system within 14 days.

Follow Up

Resource Consultant will maintain contact with participant/representative and will complete required follow-up in WV IMS within 14 days by using the *Create* tab located on the participant IMS report and checking *Complete* when finalized.

Follow-up includes the disposition of members and identification of any ongoing needs for interventions or supports and how those needs will be addressed.

Should document that case will be continued to be followed as needed with support offered for situations that are not yet resolved.

4.2.1.138 The Vendor should propose a plan to identify any cases of substandard performance on the part of a member or representative, or a staff from Subagent F/EA FMS. This plan should include notifying the member/representative and the Agency of the substandard performance, providing appropriate remedial skills training as appropriate, assisting the member/representative to develop and implement a written plan of correction to address the area(s) identified for correction, monitoring the successful implementation of the corrective action plan by the member/representative and informing the Agency of final disposition and any need to initiate involuntary termination proceedings with the member/representative. Examples of substandard performance include, but are not limited to:

4.2.1.138.1 Repeated or intentional incorrect reporting and/or late submission of DCSWs' hours worked.

4.2.1.138.2 Incorrect and/or late submission of vendors' invoices for participant directed services. (PDGS, EAA, etc.)

4.2.1.138.3 Hiring of ineligible DCSWs.

4.2.1.138.4 Monthly or cumulative overutilization of the member's individual budget.

4.2.1.13 8.5 Ineffective emergency DCSW back-up plan.

4.2.1.138.6 Inappropriate firing of DCSWs.

4.2.1.138.7 Failure to comply with the waiver programs' policies and procedures.

Public Partnerships understands that self-directing services and fulfilling the role of a household employer can be intimidating to member/representative-employers. We believe it's important to set our member/representative-employers on the right track from the start by providing orientation, training, and the tools that they need to successfully self-direct their services and comply with program policies and rules. We monitor the performance of member/representative-employers through our web portal, reports, and direct contact during monthly phone contacts and 6-month visits. Common attributes among members/representative-employers having difficulties include:

- Repeated or intentionally incorrect recording and/or late submission of timesheets;
- Repeated attempts to over-utilize their authorized budgets;
- Assigning inappropriate tasks or unprofessional treatment of DCSWs;
- Failing to provide a safe workplace for DCSWs;
- Non-compliance with program terms and conditions.
- Failure to follow up with DCSWs to complete their required qualification on time;
- Poor choices in the hiring of DCSWs;
- The inappropriate firing of DCSWs;
- Insufficiently supervising DCSWs and failing to monitor hours and performance; and
-

Under our current contract with the Agency Resource Consultants play a critical role as a conduit of information between the member/representative-employer, DCSWs, and Public Partnerships.

When we identify performance issues, our Resource Consultants document the details in a monthly contact form and create a "case" within our Client Relationship Management software. The Resource Consultant meets with the member/representative-employer to discuss the issue and takes appropriate steps to improve the situation. Depending on the type and severity of the issue, additional training may be provided to the member/representative-employer, a Plan of Correction or a Behavioral Contract may be developed, and/or the member may be recommended to transfer to the traditional service delivery model. Members who remain on the Personal Options program will be monitored by the Resource Consultant to ensure that performance has improved and when appropriate additional training and assistance are provided. When appropriate, the Resource Consultant works with the member's Service Coordinator or Case Manager, the Utilization Management Contractor, and/or the Bureau of Senior Services. Similarly with our staff, when we have identified performance issues of a staff member we work with the individual and their manager to develop a plan. The plan provides retraining opportunities as well as close monitoring with the manager. Once we identify substandard performance, we take the following actions as part of our performance plan, depending on whose performance is in question:

	Performance Metric	Member/Representative	Public Partnerships
1	Provide notification about substandard performance	Public Partnerships notifies the member/representative and the Agency of the substandard performance.	The immediate supervisor notifies the responsible staff person.
2	Provide skills training	Public Partnerships Resource Consultants will meet with the member/representative to discuss the issue and provide targeted skills training.	The supervisor conducts a performance review meeting to discuss causes and solutions that include providing targeted skills training
3	Develop and implement a written plan of correction	Resource Consultants may develop a Plan of Correction or a Behavioral Contract, depending on the severity of the issue. Or may recommend the member transfer to the traditional service delivery model.	Supervisor documents actions in a Performance Improvement Plan, signed by the staff person
4	Monitor the successful implementation of the corrective action plan	Resource Consultant monitors the member/representative's performance for improvement and during additional training and assistance.	The supervisor will monitor task completion and progress compared to the Performance Improvement Plan.

5	Communicate to the Agency the final disposition and need to initiate involuntary termination proceedings, as applicable	Regardless of the outcome of the corrective action plan, Public Partnerships will communicate the final recommendation to the Agency as to whether the member/representative has improved their performance or if we recommend the member be diverted from self-direction.	Public Partnerships will inform the Agency of any performance issues and resolutions of key program staff.

4.2.1.139 The Vendor should propose a plan to develop and distribute a Member/Representative-Employer Handbook, to be approved by the Agency, that provides information about the participant-directed services, the role, responsibility and function of Subagent-F/EA FMS and the role and responsibilities of the member, representative and DCSW, and on the member/representative performing employer-related tasks.

Working in collaboration with the Program Managers at the Agency, Public Partnerships has developed program-specific Employer Guides that contain information regarding the Personal Options program and the roles and responsibilities of the Subagent-F/EA FMS Vendor, the Resource Consultant, and the member/representative-employer. The current Employer Guides are available through the Agency's and Public Partnerships' websites and are a resource for waiver program members who may be considering self-direction of their services. Upon contract award, PPL will initiate discussions with the Agency to review the current member/representative-employer handbook and discuss updates and changes the Agency would like to see, as well as recommendations for improvements from PPL. We will have those changes approved by the Agency before finalizing the Employer Handbook.

We include the Employer Guide in the Enrollment Binder, which we provide to the member/representative-employer at the time of the enrollment meeting. The information in the Employer Guide provides an outline for the orientation and skills training provided by the Resource Consultant to the member/representative-employer. Our Resource Consultants understand that the orientation and training must be conducted in a culturally-sensitive manner and at a pace that meets the member/representative-employer's needs. Providing the member/representative-employer with the necessary knowledge and skills at the time of enrollment is key to their success in the Personal Options program.

Topics included in the Employer Guide and supported by additional documents in the Enrollment Binder include:

- An overview of Personal Options that highlights benefits to the member by choosing participant-direction, such as having choice and control over their services including who will provide the services.

- The role of the Subagent-F/EA FMS Vendor whose responsibilities include payroll processing, tax withholding and reporting, and verification of the authorized budget and DCSWs' qualifications before processing timesheets.
- The role of the Program Representative and why it may be necessary to appoint someone to this position. For example, members of the Aged and Disabled Waiver program who choose Personal Options are required to have a Program Representative if their Pre-Admission Screening (PAS) indicates the member has a specific diagnosis that may impair cognitive functioning.
- The role of the Resource Consultant as a support to the member/representative-employer and the importance of maintaining contact at least monthly to discuss issues such as changes in the member's needs, upcoming training deadlines for DCSWs, updates to the Spending Plan, timesheet errors, etc.
- A detailed discussion of the employer's role and responsibilities concerning budget and employer authority. These responsibilities include recruiting, selecting, hiring, training, and supervising DCSWs; determining their rates of pay; reviewing and approving timesheets and Transportation invoices; and monitoring monthly spending per the approved Spending Plan.

The Resource Consultant advises the member/representative-employer to keep the Enrollment Binder on hand as a reference tool. Periodically, the Resource Consultants provide the member/representative-employer with updates to existing documents and new resources to add to the Enrollment Binder.

4.2.1.140 The Vendor should propose a plan to develop, implement, analyze, and summarize the results of a Member/Representative Satisfaction Survey and submit a report to the Agency annually, at a schedule and format to be mutually agreed upon by Vendor and Agency, that should include a plan of correction for the Subagent-F/EA FMS based on the results of the Survey. The Survey developed and the format for the annual report are to be approved by the Agency.

Public Partnerships conducts member satisfaction surveys to gain feedback on our performance and identify areas for improvement. We have conducted satisfaction surveys for the Agency throughout our contract. Recently, the Agency has approved a revised satisfaction survey that will be released to members before the summer of 2023. Our close collaboration with Agency staff has allowed us to develop a Personal Options Satisfaction Survey that is sensitive to the populations and gathers information that will result in performance improvements. This will mark the beginning of a new annual survey process to be conducted through mail and/or through web-based assessment to ensure satisfactory representation across all programs. We will provide the survey results on a schedule and in an annual report format that we will have approved in advance by the Agency. We will comply with corrective action plans based on the results of the satisfaction survey categories that do not meet our 95% target for quality.

While our primary goal is to perform at the highest level in all of our service delivery and operations, we understand that violations of the contract or poor performance must be addressed promptly and methodically. If a Corrective Action Plan becomes necessary as a result of the Satisfaction Survey data, Public Partnerships will quickly address deficiencies in any area of our F/EA, FMS, or Resource Consulting services and will readily comply with the development and delivery of a comprehensive plan of action. We share the Agency's commitment to ensuring that all members and providers always receive our highest quality of services.

4.2.1.141 The Vendor should propose a plan to have a system in place for acting as a mandatory reporter, as required by the state program agency.

Public Partnerships has established a system for the mandated reporting of abuse, neglect, and exploitation of members as required by West Virginia State Code. Public Partnerships trains all Resource Consultants and key program staff in their responsibilities as mandated reporters upon hire and annually. This training follows the curriculum that was developed by the IDDW Quality Improvement and Advisory Council. Please refer to Section 4.145 for information regarding our reporting of incidents involving abuse, neglect, or exploitation of a member.

It is Public Partnership's experience that much abuse, neglect, and exploitation can be prevented if members, their representatives, and DCSWs discuss and develop a mutual understanding of the member's rights, needs, and preferences. During the enrollment meeting, the Resource Consultants provide training for the member/representative-employers and the DCSWs so that they are aware of what defines abuse, neglect, and exploitation and how to report suspected incidents to the proper entities and authorities. The Resource Consultant provides the Personal Options Incident Reporting form and contact information for reporting suspected abuse, neglect, or exploitation. We also explain the legal ramifications of not reporting suspected abuse, neglect, or exploitation.

4.2.1.142 The Vendor should propose a plan to develop and implement the provision of orientation and skills training and related materials for members and their representatives and monitor its effectiveness.

Public Partnerships has an Agency-approved orientation and skills training curriculum for members and their representatives that will be reviewed with the Agency upon contract award. We propose to review the scope and content of our curriculum, gather feedback from the Agency, and identify follow-up actions we can take to further enhance our training and related materials based on the Agency review. Public Partnerships provides the member and their representatives a survey after enrollment and encourage feedback regarding their satisfaction with the information and training that was provided.

Following the enrollment meeting, the Resource Consultants monitor the performance of the member/representative-employers to ensure they are effectively self-directing their services and carrying out their responsibilities as a household employer. If issues are identified, the Resource Consultant follows up with additional training and support. More information about the provision of orientation and skills training can be found in Sections 4.2.1.50, 4.2.1.51, 4.2.1.52, and 4.2.1.53.

4.2.1.143 The Vendor should propose a plan to develop and implement customer service training and related materials for Subagent-F/EA FMS and monitor its effectiveness.

All Public Partnerships customer service representatives complete an initial one-week training that features topics specific to their role. This is in addition to Public Partnerships orientation where the topics include but are not limited to principles of self-determination, self-directed service models, fraud, waste and abuse, person-centered thinking, and cultural sensitivity.

	Training Topics
Monday	Training Team & New Hire Introductions, Equipment Check, Customer Service Orientation, Customer Service Supervisor Meet & Greet, Productivity & Support Tools, New Hire Support Tools, Compliance Training
Tuesday	Program Specific Training, Program Employer and Employee Enrollment Forms, Web Portal, Agent Shadowing, Compliance Training (continued)
Wednesday	Tax 101, Time4Care EVV, Verification of Employment Process, Time Sheet Pend Messages De-Escalation, Web Portal (practice)
Thursday	Customer Relations Manager, Five9, Customer Relations Manager Practice, Agent shadowing Customer Relations Manager Quiz

Friday	Customer Service Quality, Time Reporting, Verint Call Scripts, PPL Help, Agent shadowing, Good Calls/Bad Calls Listening Session, Role Play

In addition, PPL onboards and provides refresher orientation and training using our WV Program Operations Guide as the basis. Depending on the functional area, we ensure all staff have read and sign off on understanding our policies, procedures, and their role in delivery. Our operational supervisors are responsible for maintaining their respective policies and procedures and submitting changes to the Program Operations Guide through our Project Manager.

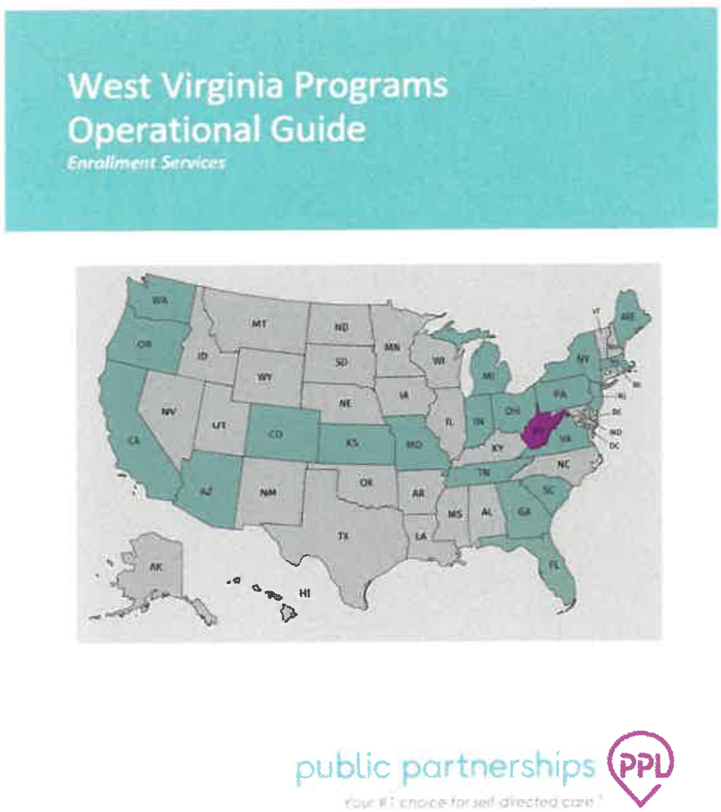


Figure 33. West Virginia Personal Options Operational Guide.

Monitoring the effectiveness of the customer service training is in partnership with our Quality Assurance (QA) team. Following the program-specific and systems training completed by Customer Experience, QA initiates same-day call auditing and coaching of new agents. QA partnership with new agents typically begins week 3 of training, once new agents are actively taking first calls, through week 8.

> I wanted to tell you that **Becky [Dunn]** had me straighten up, and she's done a wonderful job. In a few minutes, she had me logged into my account. I'm glad I had her assist me for the second time. She's very patient and professional, and I'm grateful for her.
>
> **Beverly,** a provider from the IDD program

Our Quality Assurance team audits a sample of each representative's calls every month. Each call is scored on a Quality Performance Index (QPI):

1. Call opening (5 pts)
2. Verifying Caller Identity (15 pts)
3. Call reason (5 pts)
4. Resolving the Issue (20 pts)
5. CRM and Call Reporting (15 pts)
6. Resources (5 pts)
7. Call closing (5 pts)
8. Professionalism (25 pts) and
9. Timely Servicing (5 pts).

This provides data on which aspect of the process requires improvement or coaching. The resolution of the issue is highly rated at 20 points, the second highest after professionalism. Ensuring call resolution is a high priority, training our staff on program-specific topics, understanding the culture by program, and being able to provide first call resolution empowers our staff to reach the highest QPI. Which results in efficiently resolving the caller's issue.

The Customer Service supervisor meets weekly with account management and the resource consulting supervisors. This meeting is where all information is shared regarding the overall state of the program, specific issues that need attention, changes requested by the client, or any implementations of mandates. This enables the Customer Service supervisor to identify specific training needs, for example when EVV and NPI were implemented.

In addition, we solicit customer and stakeholder feedback via post-call surveys and the annual satisfaction survey. Customers provide immediate feedback via phone, email, chat, and text. We trend complaints and adjust training, as applicable.

Public Partnerships' comprehensive training and monitoring provide our customers with the support they need on their journey.

4.2.1.144 The Vendor should propose a plan to establish, operate and maintain a customer service system that serves members, their representatives and DCSW and service providers and vendors in a culturally and linguistically sensitive manner. All communication methods should be accessible, including alternative formats upon request. The Vendor should describe the system and written policies, procedures, and internal controls, to be approved by the Agency, that will be used to implement and perform the following tasks:

4.2.1.144.1 Have a toll-free number with voice mail functional capabilities.

4.2.1.144.2 Have a TTY line or alternative method of communicating with members and their representatives with hearing impairments.
4.2.1.144.3 Have a functioning fax machine and number.

Our goal in West Virginia has always been to be an active and key member of the individual's social service and support network. We share the same goals of empowering independent living, and our staff are trained and appreciate the five principles of self-determination – freedom, authority, support, responsibility, and confirmation.

We have an established a customer service system that serves the stakeholders in West Virginia, including serving members, their representatives, DCSWs, service providers, and vendors in a culturally and linguistically sensitive manner. We understand that with this RFP, the Agency will approve our plan to operate and maintain a customer service system and we are prepared to review and refresh our approach under the guidance of the Agency. Upon award of the contract, Public Partnerships will meet with the Agency to review our established customer service system and how we operate and maintain it.

Public Partnerships supports our programs in-house, meaning we provide our customer service agents and systems. Public Partnerships has a highly culturally and linguistically diverse staff. We have customer service staff fluent in 13 languages (in addition to a language line partner) including commonly spoken languages in West Virginia, such as English, Spanish, Arabic, Cantonese, and Mandarin.

PPL staff providing customer service have received a comprehensive onboarding, and staff is trained to handle and quickly resolve common problems. Our customer service representatives are also trained on all systems to promote first-call resolution; however, there may be complex circumstances that need additional time for further investigation and resolution. We have a designated team for any escalated issues requiring increased attention. If issues remain unresolved, senior staff become involved.

All project staff are trained in cultural competence and can communicate effectively by voice and TTY/TTD technology. PPL provides materials in alternate formats upon request for members with limited sight and for those who read other languages. Our company website and web portal are both 508 compliant and include functionality to translate our site into over 100 languages. Furthermore, our site includes an accessibility widget visitors can use to make site changes like increasing the font size, adjusting the spacing between letters and words, and increasing the contrast for helping users read in their best format.

Through our approach, all Customer Service Representatives are expected to be a prime resource for program members with attention to:

- Providing prompt and courteous responses to questions in a culturally and linguistically sensitive manner

- Providing callers with answers to questions about payroll, check processing status, withholding amounts, rate of pay, services, and any questions related to reports received
- Supporting inbound and outbound calls with follow-up correspondence to members and their DCSWs
- Tracking and digitally logging all calls, monitoring issues, and documenting resolutions

In our experience, customer needs are best met by offering multiple options. Calls may be answered by either a live representative or our Interactive Voice Response (IVR) system, depending on the needs and desires of the caller. Callers routed to the IVR system can self-identify their issues through a series of prompts. The answers to these prompts allow the system to route each caller to a customer service representative with the training and skill set best suited to respond to their specific questions or concerns. Callers may also utilize the IVR to obtain answers to their most frequent questions without the involvement of a customer service representative.

> **Jennifer [Howie]** is super! I was lucky enough to talk to her 3 times. She helped me so much. She taught us how to approve timesheets. She took her time and is pleasant to work with…and she cares! There is nothing more important than an employee who cares.
>
> **Carolyn**, a Provider from the IDD program

Through our BLAZE technology, an automated outbound call or email can be sent to distribute information quickly and effectively on everything from program-wide notifications to reminders of missing documents to a specific member/representative-employer or DCSW. By leveraging our IVR queue system and adequately staffing our Customer Service Center to respond to anticipated call volume, Public Partnerships can manage estimated call volume, including increases in call volume on payroll days. Callers will never receive a busy tone on any call. They will be assisted through the IVR system, a live representative, or voicemail based on their needs and preferences.

Public Partnerships' implementation of Five9, a cloud-based call center technology, allows us to design and modify call campaigns and generate summary-level reports at the call agent level. The Five9 platform ensures our specialists have the tools and training necessary to ensure our program members are supported and successful in self-directing. The "preview dialer" feature allows our customer service specialists to review an account before handling the call. Our customer service supervisory team randomly samples calls and provides timely feedback and resolution. We also can launch automated calls with tailored updates and notifications for various stakeholders.

Each year, our Customer Service and Quality teams reviews thousands of call interactions with their customers, scoring each call on a comprehensive list of more than 35 attributes. Customer service representatives receive feedback and targeted training, as necessary. We believe this approach holds us to the highest quality standard applied in the industry.

4.2.1.144.1 Have a toll-free number with voice mail functional capabilities.

Public Partnerships has established a toll-free number with voice mail capabilities for each of the West Virginia Personal Options programs.

Waiver	Toll-free number
Aged & Disabled	1-866-429-3465
Intellectual and Developmental Disabilities	1-877-908-1757
Traumatic Brain Injury	1-877-908-1755

4.2.1.144.2 Have a TTY line or alternative method of communicating with members and their representatives with hearing impairments.

Public Partnerships supports individuals with hearing and speech impairments, and we can accommodate their needs using a variety of tools, such as our TTY services or e-mail. We have a separate phone line (1-800-360-5899) that connects callers to our TTY system. We describe our email capacity in Section 4.2.1.144.4 below.

4.2.1.144.3 Have a functioning fax machine and number.

Public Partnerships has established toll-free, high-speed fax numbers that are available 24/7 for each of the West Virginia Personal Options programs. Documents faxed to this number are received as an electronic image in a secure format that conforms to HIPAA requirements.

Waiver	Fax number
Aged & Disabled	866-388-1626
Intellectual and Developmental Disabilities	877-567-0071
Traumatic Brain Injury Waiver	866-616-5497

4.2.1.144.4 Have internet e-mail capacity.

Public Partnerships has established an e-mail address for each of the West Virginia Personal Options programs. Documents or inquiries received through the e-mail conform to HIPAA requirements.

Waiver	Email address
Aged & Disabled	pplwvadw@pcgus,com
Intellectual and Developmental Disabilities	pplwvidd@pcgus,com

Traumatic Brain Injury	pplwvtbi@pcgus.com

4.2.1.145 The Vendor should propose to plan to develop, implement and maintain a secure web portal and secure web-based interactive payroll and accounts payable system that includes specific user roles for the Agency, member/representative employers, DCSWs, vendors and the members' Case Managers. The web portal should provide users with real time 24/7 access to member, DCSW and vendor data and the ability to submit and monitor processing of DCSW hours worked and vendor invoices.

4.2.1.145.1 The Case Manager user role should allow the member's assigned Case Manager to perform the tasks required of a Resource Consultant (Support Broker), including creation and revision of Spending Plans, monitoring service utilization, etc. If the Vendor provides optional Resource Consultant services, the Case Manager user role will have "read only" access to the Vendor's web portal.

The PPL web portal currently implemented, maintained and used by the Agency, member/representative employers, DCSWs, vendors and Case Managers is available 24/7 with access to vendor data and corresponding invoices, DCSW data and corresponding hours worked. Our web portal is customizable by user role, including existing roles for the Agency, member/representative-employers, DCSWs, vendors, and member's Case Managers (specific to I/DD currently). This role-based access configuration means that each portal user is assigned to a role, which in turn has specific access rights. For example, all member/representative-employers belong to the member role. Users assigned to this role only have access to view their profile, completed forms, employee information, budget authorizations, Spending Plans, and spending history. They cannot view any other member's information, preventing unauthorized access to PHI. PPL's web portal provides real-time, 24/7 access to member, DCSW, and vendor data and the ability to submit and monitor the processing of DCSW hours worked and vendor invoices.

Personal Options member/representative-employers, their DCSWs, Resource Consultants, Program Management, and support staff use the web portal daily to monitor member enrollments, budget authorizations and utilization, timesheet status, and payment history.

Active member/representative-employers and DCSWs who wish to sign up to use the web portal can do so online using their unique Personal Options Identification numbers and other qualifying data. This ensures that DCSWs are linked only to their member/employers and cannot submit timesheets or invoices to any other member/employers. The web portal automatically logs users out of the system after a specified period of inactivity. This minimizes opportunities for unauthorized users to access PHI if a user has not logged out.

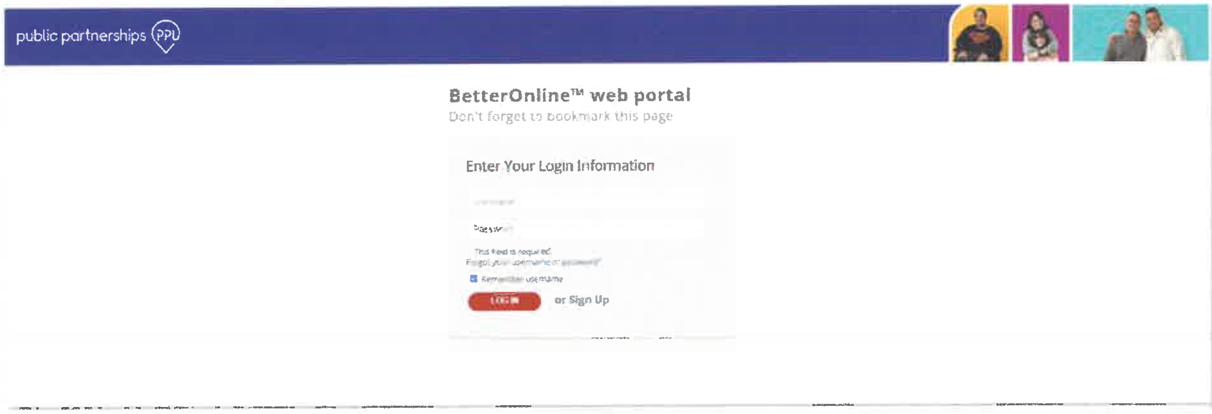


Figure 34. Portal Log-In.

We also maintain all records and files associated with members and DCSWs electronically on the web portal. We convert all documents to electronic format upon submission and store them in our Document Management system. This limits access to only those users who are authorized to view the records and documents and also enables those users to have access from any location.

Web Portal Budget and Spending History Tool

Members/representative-employers with access to our web portal can take advantage of the spending report (Family Friendly Report) and budget tool that are available to monitor spending activities and utilization of services by service type.

These reports and features allow users to proactively monitor the use of DCSW hours to the total number of dollars or units authorized for each service in real-time. This information can also be used by Resource Consultants to see if a member is under or trending to over-utilizing their services and whether assistance or re-training may be needed.

Following are two screenshot examples from the web portal. The first screenshot shows a summary of member's monthly authorized budget in the budget year.

Monthly Spending Plans:

Id	Start	End	Amount	Spent	Balance	Detail	Action
[redacted]	2/1/2023	2/28/2023	$9,757.44	$8,421.60	$1,335.84	Budget Detail	
[redacted]	3/1/2023	3/31/2023	$10,802.86	[illegible]	[illegible]	Budget Detail	
[redacted]	4/1/2023	4/30/2023	$10,854.40	[illegible]	[illegible]	Budget Detail	
[redacted]	5/1/2023	5/31/2023	$11,202.88	$0.00	$11,202.88	Budget Detail	
[redacted]	6/1/2023	6/30/2023	$10,854.40	$0.00	$10,854.40	Budget Detail	
[redacted]	7/1/2023	7/31/2023	$11,202.88	$0.00	$11,202.88	Budget Detail	

Figure 35. Budget view on portal.

The below 'Budget Status' snapshot displays the total budget, authorized services, allocated amounts, spending details, and balance for the month.

The information available to all authorized user roles in the web portal is also useful when the user has questions outside of normal business hours. An example of this would be when a member wants to know how much money is available for an authorized service. The member logs in to the web portal to view their profile and see all authorized services, the start and end date, how much is authorized, how much has been paid, and remaining to date.

Web Portal Additional Functionality and Tools.

Years of experience providing F/EA FMS and Resource Consulting services have provided Public Partnerships with the knowledge and skills to develop quality monitoring tools within our web portal. In addition to the web portal functionality and tools outlined earlier in this section, our web portal allows certain authorized users to:

- Document communication and activities;
- Track required timelines and monitor Resource Consultant activities and assignments;
- Check adherence to timeframes for service initiation;
- Look up names and contact information;
- Document Resource Consultant dates of initial contacts, enrollment visits, monthly contacts, and 6-month face-to-face visits; and

- Monitor DCSW qualifications, such as CPR and First Aid, initial and annual training, and criminal background checks.

All of the web portal's functions and tools provide all authorized users direct, real-time access to information necessary to be successful in their role within the WV Personal Options programs. Most importantly, members are given the tools they need to exercise choice, control, and independence.

Additionally, the web portal supports the Fair Labor Standards Act (FLSA), including recordkeeping, overtime hours, and overtime payments. In all WV Personal Options programs, we process overtime payments for DCSWs who do not qualify for the FLSA live-in exemption provided the member has funds available in their budget authorization. The member/representative-employer must monitor their budget utilization consistently to ensure awareness of the current balance. This is especially important when overtime rates are being utilized. The web portal's budget tool provides member/representative-employers with an easy way to view and monitor their authorized budgets because they are updated automatically with every transaction.

Time Capture

Public Partnerships has designed, tested, and deployed time capture tools per current program requirements. Our technology allows DCSWs to submit timesheets and invoices, and for member/representative employers to approve/reject them in the following ways:

- Time4Care mobile application
- Telephony
- Online using our web portal (requires live-in exemption)
- Fax traditional paper timesheets and invoices which are uploaded to the web portal (requires live-in exemption)

We offer program-specific user guides to DCSWs and member/representative-employers for all timesheet submission options. The above four (4) choices for timesheet/invoice submission along with our web portal's budget functionality provide member/representative-employers and their DCSWs with a line of sight into the status of timesheets and invoices. For example, if a DCSW submits a timesheet and wants to know whether the member/representative-employer has approved or rejected it, they can log in to the web portal at any time to view that information.

With the submission of each timesheet, the web portal verifies the service entries do not violate any programmatic rules. The web portal fully integrates with our back-end financial management and accounting system. The program-specific logic is a safeguard so that each DCSW can submit a timesheet only for the member with whom they are associated in the system. The web portal provides real-time validation of all services and hours entered so there are no errors that would prevent the timesheet from being paid. Should a timesheet not meet program requirements to allow payment, the DCSW is notified at the attempt to submit. The DCSW can then make the necessary corrections and try again to submit the timesheet or the

DCSW can call our Customer Service Center or Resource Consultant if they have questions. Once the timesheet is submitted, the member may electronically approve it through the web portal.

The web portal integration with our financial management system ensures thorough validation in real time to check for common timesheet errors and other issues that would prevent the timesheet from being paid such as:

1	Time Validation	The system will not allow the user to enter a start time that begins after the end time. For example, a DCSW could not enter the 8:00 am start time and 7:00 am end time. The web portal would prompt the DCSW to enter a correct out time.
2	Budget Validation	Time entries are validated against the member's Spending Plan in real-time. If the submitted time exceeds the authorized Spending Plan amount, the transaction will be flagged. The DCSW can correct and resubmit the timesheet or contact our Customer Service/Resource Consultants if he or she has a question.
3	Cross-Validation	The web portal checks the timesheet against existing timesheets per program rules. For instance, two DCSWs submit timesheets for the same shift under one member. The web portal also prevents the submission of any time by a DCSW who has not completed the required training or certifications. With the submission of each timesheet, the system verifies that it does not violate any program-specific rules.

A few examples of specific rules for WV Personal Options programs include:

- Members cannot receive services from more than one DCSW at a time.
- DCSWs cannot serve more than one member at a time.
- Date worked cannot be before or after a required training start or expiration date.
- If a timesheet is received for more hours than are available in a member's authorized budget, we will issue payment up to the available units and pend the exceeding amount.

When a DCSW submits an electronic timesheet, all of these validations occur within seconds and the DCSW receives an immediate confirmation of timesheet acceptance or notification of any errors preventing submission, with the opportunity to correct the error(s) and resubmit the timesheet.

Below is an example from our web portal of a DCSW receiving a pending message when submitting an electronic timesheet that does not pass rules within the web portal. This DCSW would not be able to submit their timesheet until their entry met all program and service rules.

Figure 36. Example of Pend messaging. [redacted]

Upon payment, an electronic record is stored with full detail on the payment, including the day the payment was issued, and whether the payment was a paper check or electronic file transmission. The integrated capacities of the web portal and back-end accounting platform provide us with the capacity to maintain timesheet data regardless of the status. This allows for a comprehensive record-keeping system that can be used to readily comply with audit requests and other inquiries on claims paid to DCSW.

Time4Care Mobile Application

Public Partnerships' mobile time capture application, Time4Care, complies with all the 21st Century Cures Act requirements. PPL created our application to serve the self-direction model, as opposed to time capture tools adapted to the self-direction model. This proprietary application is used in 13 states today, including West Virginia, serving members/workers across all programs. This includes:

1. Arizona, Department of Economic Security, Division of Developmental Disabilities, Developmental Disabilities, Home and Community Based Participant Directed option.
2. California, Department of Developmental Disabilities, Title 17 Respite participant-directed option.
3. Colorado, Department of Health Care Policy and Financing, HCBS Waiver programs including Elderly, Blind and Disabled, Brain and spinal cord injuries.
4. Maine, Department of Health and Human Services, Participant Directed Option for elderly and disabled.
5. Rhode Island, Executive Office of Health and Human Services, Independent Provider option for elderly and disabled.

We continue to enhance features offered with the end user in mind, for example, the EVV compliance dashboard, notes feature, electronic signature feature, the provider-only calendar feature rolled out to WV in early April 2023, and our latest addition the member only budget and authorization view.

MyAccount – Next Generation Web Portal

Public Partnerships' next generation web portal, MyAccount, provides a streamlined business process flow, inclusive of enrollment, budget management, EVV, payroll, claims and reporting. MyAccount is in the final stages of development and we are excited to demonstrate the new features of the portal to West Virginia for implementation approval at contract renewal. All features are fully integrated, eliminating the need for data imports and exports that can cause mismatches and errors. With defined roles for member/representative-employers, employees/DCSWs, and Case Managers and Administrators, MyAccount provides a modern user interface, 24/7 self-service features, improved enrollment processes and electronic conveniences.

Additional features of MyAccount include an automated methodology for management of individual budgets that will greatly modernize and enhance West Virginia's current processes. MyAccount links claiming and authorizations to assure accurate management of individual budgets.

The MyAccount platform provides a dashboard for each member. Here, they will be able to see their authorized services and utilization progress. The user interface is colorful and friendly so that the member is encouraged to access their budget utilization real time rather than waiting for a monthly report. With MyAccount, employees can find pay statements and W-2s online, employers can e-sign enrollment documents that have been prepopulated with key information. It is available 24/7.

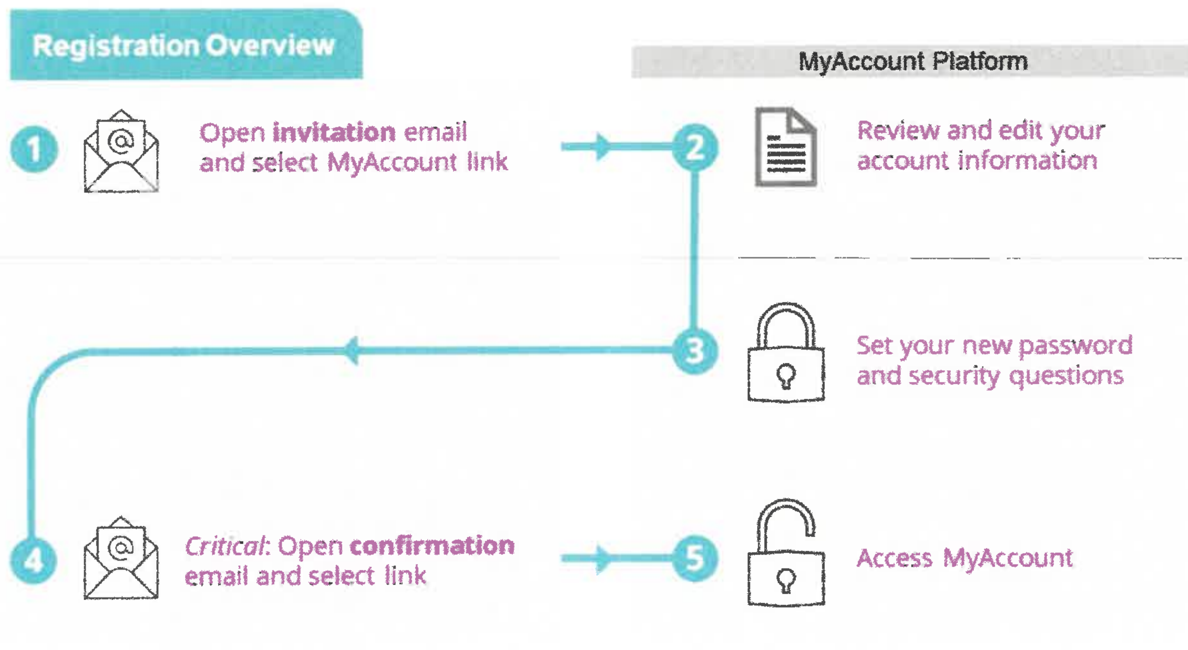


Figure 37. MyAccount Enrollment process.

Through MyAccount, enrollment packets are all electronic and integrated with DocuSign for a full electronic experience. The MyAccount enrollment process begins with an invitation email where registration in MyAccount begins.

All required forms for member enrollment will be mapped to MyAccount to ensure compliance with completion, logs all signature dates, and archives the documentation. As a result of stakeholder focus groups, MyAccount now provides an enrollment checklist, inclusive of red/green progress tracking.

Hiring DCSWs

Member/representative-employers will use MyAccount to enroll DCSWs electronically, which requires the DCSW to have an email address for fastest enrollment. While electronic enrollment will be preferred, as it will be faster and leave less room for error, paper enrollment will continue to be an option. Public Partnerships staff will continue to support member/representative-employers with enrollment tasks like this.

Member/representative-employers will be able to track the progress of the DCSW enrollment within the MyAccount dashboard. For example, in the figure that follows, the DCSW has completed their enrollment paperwork, but credentials & training and criminal background check have not been completed.

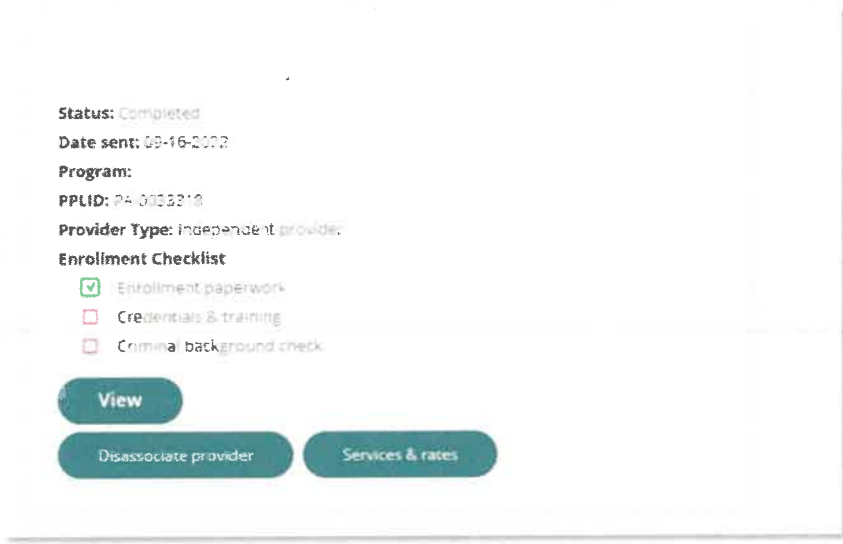


Figure 38. MyAccount Enrollment Checklist.

Financial

PPL's innovative technology, MyAccount, is configured to meet each payment processing requirement and to support payment reporting. For example, MyAccount and Time4Care will not process timesheets associated with an employee who is missing the IRS Form W-4. While internal processes are set up to identify missing documentation, this extra step ensures that payments are made only for approved, enrolled members / employers and employees.

The PPL EVV compliant Time4Care mobile application, as well as our MyAccount online portal, is integrated with our payroll and claiming system allowing us to process shifts daily against spending plans. Members/representative-employers are able to monitor their budget and service authorization spending and spending history in MyAccount.

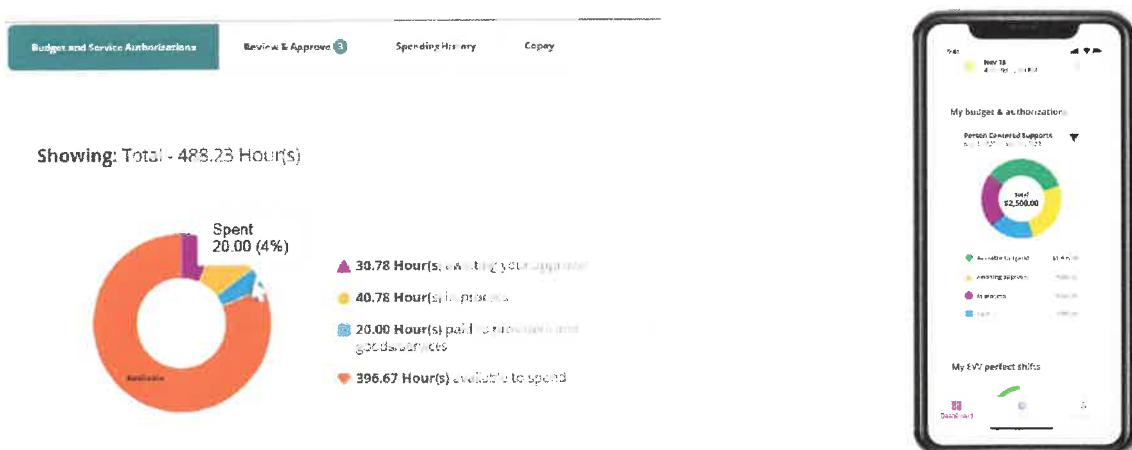


Figure 39. Member/Representative Employer Budget and Service Authorization status in MyAccount and Time4Care.

With MyAccount, DCSWs are able to manage their earnings. MyAccount couples with Time4Care to ensure compliance with Electronic Visit Verification requirements. DCSWs can view interactive charts and make certain corrections to time entries. DCSWs can use filters to drill into information about earnings, work history, and to view pay stubs.

Figure 40. DCSW"'s Payroll Status and Filter Options in MyAccount.

4.2.1.145.1 The Case Manager user role should allow the member's assigned Case Manager to perform the tasks required of a Resource Consultant (Support Broker), including creation and revision of Spending Plans, monitoring service utilization, etc. If the Vendor provides optional Resource Consultant services, the Case Manager user role will have "read only" access to the Vendor's web portal.

Public Partnerships' web-based portal currently offers user role functionality, including a user role defined for Case Manager and Resource Consultant. Should the Agency require the use of the Case Manager user role, we are able to activate this functionality at any time. Public Partnerships currently provides Resource Consultant services under this contract, and assuming that continues, we will provide all Case Managers "read only" access to our web portal. Should the Agency choose to have the Case Managers take on the scope of work of the Resource Consultant, this role is already fleshed out in our portal and will be the quickest pathway to a fully functional Case Manager portal role. We will work with the Agency to assess any changes needed to the definition of the Case Manager role in our web portal.

4.2.1.146 The Vendor should propose a plan to verify that the Vendor will not bill the Agency in advance for participant-directed vendors' services. (PDGS, EAA, etc.).

Section 4.2.1.22 describes Public Partnerships' established Policy and Procedure (P&P) for vendor payments. Our P&P includes quality controls to ensure that payments will not be issued before PDGS applications being reviewed and approved. The sequential relationship of vendor payment process prohibits generation and submission of service billing in advance.

Only after a thorough review of required documentation by our Payroll and Invoice Payment Manager will Public Partnerships process payment for the requested item/service and issue the payment payable to the vendor. Vendor payments are never made payable to the member, legal representative or DCSW. Per the IDDW Policy manual, PDGS payments are not issued to reimburse for items/services which have already been obtained and not pre-approved by Public Partnerships.

Our monthly reporting includes data regarding the number of vendor requests received, approved, rejected, and receipt confirmation. This report allows Public Partnerships and the Agency to monitor the efficiency of the various vendor payment processes and address any issues in a timely manner.

4.2.1.147 The Vendor should describe their plan for processing invoices and payments for Aged and Disabled and Traumatic Brain Injury Waiver Community Transition Services on approved Transition Plans including the process for qualifying vendors of these services.

4.2.1.147.1 The plan for processing invoices and payments for Community Transition Services should include electronic payments for purchases from online vendors.

4.2.1.147.2 Claims for Community Transition Services payments that are issued prior to the member's transition to the community should specify the member's transition date as the date of service.

Public Partnerships has served the Take Me Home West Virginia (TMHWV) program since its inception in 2018. We have assisted many participants who have transitioned out of nursing homes with Community Transition Funds. We have developed positive working relationships with the program's Manager as well as Transition Coordinators, which is an essential component to optimize our invoice process.

We are responsive to the on-demand needs of the Agency, e.g., providing security deposit checks overnight to allow for seamless transitions from nursing homes back into the community. This is the program where we are currently managing online purchases, e.g., Walmart.com and Amazon, for almost instantaneous fulfillment of requests, in addition to standard payments, i.e., checks.

PPL has established a system for ADW and TBIW Community Transition Services that is personalized and hands on. Our Project Manager and Payroll and Invoice Payment Manager work side-by-side with the Take Me Home Program Manager to handle requests directly to keep the process simple. We obtain specific information regarding the good or service being requested, a fund request comes via email and our Payroll and Invoice Manager works directly with our FOC Team to process invoices and to make the purchase.

Please see Sections 4.2.1.10, 4.2.1.11, and 4.2.1.22 for details regarding administrative services fee (Per Member Per Month) billing, Goods and Services invoice processing, and timesheet processing.

Public Partnerships is continuously identifying ways to improve our process for qualifying vendors and processing invoices and payments. We will work with the Agency and Take Me

Home Program Manager to revise processes and address any issues that arise so we can support the approved Transition Plans for the ADW and TBI Community Transition Services.

4.2.1.147.1 The plan for processing invoices and payments for Community Transition Services should include electronic payments for purchases from online vendors.

Public Partnerships' plan for processing invoices and payments for Community Transition Services will continue to include the use of our corporate credit card to make electronic payments for purchases from online vendors. Our current approach is flexible and responsive to the on-demand needs of the Agency, e.g., providing security deposit checks overnight to allow for seamless transitions from nursing homes back into the community. We currently manage online purchases, e.g., Walmart.com and Amazon, for almost instantaneous fulfillment of requests, in addition to standard payments, i.e., checks.

Our Project Manager and Payroll and Invoice Payment Manager work side-by-side with the Take Me Home Program Manager to handle requests directly to keep the process simple. We obtain specific information regarding the good or service being requested, a fund request comes via email and our Payroll and Invoice Manager works directly with our FOC Team to process invoices and to make the purchase.

We are committed to processing requests within three (3) business days. Our Payroll and Invoice Payment Manager ensures that all required documentation is in order and that documentation, including receipts, are stored in our web portal Documentation Management System. Overall:

- Online purchase requests will be processed within three (3) business days of submission
- Payments to providers will be made weekly
- Approved escalated payment request will be processed same/next day

4.2.1.147.2 Claims for Community Transition Services payments that are issued prior to the member's transition to the community should specify the member's transition date as the date of service.

As the incumbent, Public Partnerships understands that claims for community transition services should specify the member's transition date as the date of service to properly issue payments. We include this information in our training for invoicing and claiming for vendors.

Public Partnerships' Payroll and Invoice Payment Manager currently identifies the transition date based on requests that come directly from the Take Me Home Program Manager, validates the date, and then ensures that date is accurate on the payments. This is done to meet the need of the claimant and to reduce any potential confusion on the day of transition.

4.2.1.148 The Vendor should describe the process for notifying the Agency, within one (1) business day of becoming aware of any interruptions, delays or errors regarding the payroll process and payments to members' vendors.

Public Partnership's process for notifying the Agency, within one (1) business day of becoming aware of any interruptions, delays or errors regarding the payroll process and payments to members' vendors involves our Project Manager, Katharine Randall, reaching out to our Agency point of contact by phone as soon as the issue is identified and confirmed internally. Katharine will reach out to the Agency point of contact directly by phone to initiate the discussion and notify them of the potential interruption, delay or error within one business day of becoming aware. As much as we would like to avoid the need for these occurrences, we have encountered such issues in the past and our process has proven to be timely and communicative. We always try to anticipate client questions and be prepared with information, e.g., number of people impacted, estimated timeframe to correct the issue.

4.2.1.149 The Vendor should propose a plan to correct any discrepancies or reimburse the Agency of overpayments/underpayments, if any, and detail the credit on the next submitted claim within thirty (30) calendar days.

On the isolated occasions where an identification of overpayment or underpayment to a self-directed provider has occurred- PPL's proprietary claiming system will create an 'adjustment' claim on the very next scheduled X12 837p claim file. In the case of an underpayment, PPL will submit an adjusted claim line that seeks reimbursement for the difference between the original claim and the realized underpayment amount. In the case of an overpayment, PPL will also submit an adjustment claim line- however the amount will be a credit back to West Virginia based on the determined overpayment amount. This claim submittal process will take place within thirty (30) days of identification of the payment discrepancy.

SECTION 4.3

OPTIONAL SERVICES

4.3 OPTIONAL SERVICES

4.3.1 RESOURCE CONSULTING

The vendor should propose a system and policies, procedures, and internal controls for providing Resource Consulting (RC) (Support Broker) services statewide to support members enrolled in Personal Options in all areas of directing their services. The Vendor's proposal should include an organizational chart for RC services and address, but need not be limited to, the following tasks:

4.3.1.1 Assisting interested and eligible members and their employees to enroll in Personal Options, including the completion and submission of Employer Enrollment and DCSW Employment and Vendor and Service Provider Packets.

4.3.1.2 Entering member and representative (when applicable) information into the web-based portal utilized by the Agency for project management and reporting.

4.3.1.3 Conducting monthly phone calls with members to provide oversight and support while members are using Personal Options.

4.3.1.4 Assisting members and representatives, as appropriate, in developing and implementing their initial Service/Spending Plan and subsequent updates and reviewing Service/Spending Plans with members and their representatives, as appropriate, during the monthly calls and during the six (6) month in-person visits. The monthly phone call can be made on any day during any given month.

4.3.1.5 Assisting members and representatives, as appropriate, to ensure DCSWs meet qualification referenced in the program policy manuals, including the WV CARES background check and training requirements. DCSWs cannot provide or bill for services unless qualifications are current.

4.3.1.6 Assisting the Subagent-F/EA FMS Division to develop and maintain an up-to-date searchable directory of potential DCSWs.

4.3.1.7 Assisting members and representatives, as appropriate, to identify and retain services of qualified agencies and/or individuals for services available under each Self-Directed program.

4.3.1.8 Assisting the member or representative, as appropriate, in identifying and providing DCSW benefits, as applicable.

The function of PPLs Resource Consultants is both mandated and critical to the success of the self-directed option. West Virginia has emerged as a national leader by any statistical measure because the participant is oriented, trained, and supported while self-directing. Many states nationally place all roles and responsibilities for Resource Consulting/Information and Assistance (I&A) on the Case Manager and fundamentally do not understand the Resource Consultant function. West Virginia has recognized that the best experience for the member is when the Case Manager and FMS collaborate to deliver Resource Consulting. The roles and responsibilities defined between PPL Resource Consultants and the Case Manager regarding the transition to self-direction of services have proven effective.

> *The Resource Consultant is the greatest part of PPL. It is a huge part of why we are successful in self-direction. Our Resource Consultant ensures that we are understand the roles and responsibilities. If I ask a question four times, they answer four times. I can't overstate how important that is, until you get comfortable with self-direction, doing it yourself, you really do need somebody who can help walk you through it. Our Resource Consultant helped us a tremendous amount.*

Mrs. Green, DCSW for member Ms. Julie Green in the West Virginia I/DD waiver program, self-directing with PPL since 2018

Our *65 Resource Consultants* are providing **information, education and support** about self-direction to the members on the Personal Options Programs in West Virginia, including:

- Education on being a Household Employer and the meaning of an IRS Form SS-4 and Form 2678 in addition to all IRS and state tax forms
- Employer Skills Training regarding the roles and responsibilities in a self-directed waiver program option
- Requiring the use of Electronic Visit Verification for time entry for non-live in DCSW's
- Presenting the Personal Options programs, policies, and procedures for enrollment to Case Managers
- Engaging advocacy and community groups in awareness of the Personal Options service delivery model (option)
- Offering and maintaining a Personal Options web site separated by program a including over 50 programmatic forms

Additionally, our **65 Resource Consultants** are empowering members by providing **assistance** to self-direct services and supports in West Virginia, including:

- Providing in-home self-direction orientation, employer skills training and registration
- Developing of spending plan within budget amount and service rate limits
- Providing a monthly phone call to review service utilization and any Personal Options back-up staffing plan changes
- Support in finding Direct Care Support Workers (DCSW)
- Supporting member/employers with hiring documentation and background check coordination with DCSWs
- Training DCSWs on EVV and providing ongoing technical support
- Engaging service providers identified in spending plans for IRS Form W-9 and to review invoicing policies, procedures, and options.
- Ongoing problem solving and support when challenging situations arise

The PPL West Virginia Resource Consultant Team

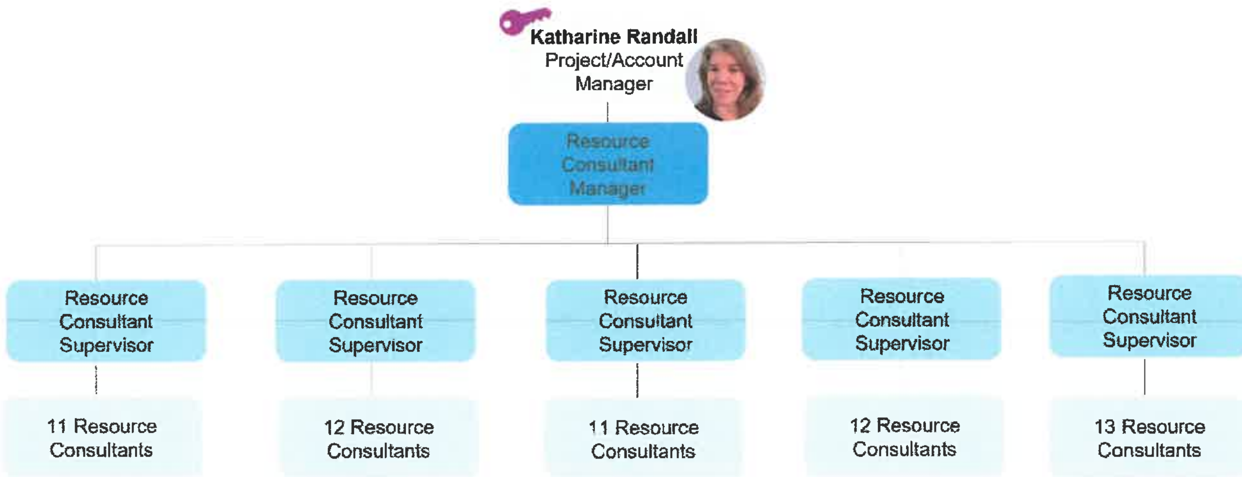
Our resource consultants in West Virginia are among the longest tenured staff in our company. Twenty-four of the WV Resource Consultants combine for 235 years of experience working with members and their families. Their backgrounds include experience in home- and community-based service agencies, care coordination, and several maintain licensure in social work. They are present in their communities as volunteers at events like the Special Olympics (Morgantown and Charleston) and members in events like the Autism Walk of North Central WV. They have supported thousands of members in developing spending plans, coordinated countless resources in support of those plans and consider themselves key team members. We believe the Information and Assistance they provide for Personal Options has played a critical role in the growth of participant direction in West Virginia.

Public Partnerships' core West Virginia team has been with the self-directed program since its inception. Not only does this team provide high quality consultation, but they also train and mentor new consultants.

At a recent TBI QIA Council Meeting, **Leslie Slack, TBI Survivor and TBI QIA Council Member** had this to say about two of our long time Resource Consultants. Radene has been with PPL for over 15 years and her entire career has been dedicated to serving others. Suzanne has been with PPL for over 13 years and has served many in her community. It is people like Radene and Suzanne who are connecting with and making a difference in the lives residents of West Virginia.

> **Suzanne** (Hale) does not "tell" me what to do but assists me in finding the resources I need, and I appreciate her monthly calls and support. **Radene** (Hinkle) has been very helpful and knowledgeable when I speak with her as well.
> ***It is a reflection of the good work that PPL does.***

We recognize that our Resource Consultants are most effective and impactful with a project manager. That project manager is also most effective when directly supported by our most seasoned staff. The West Virginia Resource Consultant team is led by the Project Manager, Katharine Randall. She is supported by the aforementioned staff. They work with another twenty consultants, all with more than 5 years of experience. The team receives supervision both individually and at the group level to discuss challenges and successes, exchange resource information and leverage known resources across the team. Katharine is empowered to adjust PPL operating policies and procedures to meet the care needs of the members and expectations of the Agency. She also coordinates with Public Partnerships' Information and Assistance Department. Together they monitor the quality of services. Our core leadership team will be responsible and accountable for ensuring our resource consultation is delivered timely and collaboratively with the case managers and service providers.



4.3.1.1 Assisting interested and eligible members and their employees to enroll in Personal Options, including the completion and submission of Employer Enrollment and DCSW Employment and Vendor and Service Provider Packets.

Our Resource Consultant's number one priority is assisting members in moving to a self-directed option. We understand our role and responsibilities within the member's social support system and that successful enrollment involves working with the member, DCSW, case manager and any providers in the spending plan.

The assistance our Resource Consultants provide during enrollment into Personal Options includes:

1. Personal Options overview to interested members including role and responsibilities of being a Common Law Employer
2. Supporting members in understanding and completing IRS and WV employer tax registrations
3. Working with the member-employer to:
    a. Identify workers
    b. Assistance with hiring documentation (e.g., USCIS Form I-9)
    c. Back up planning and assisting with working hiring documentation completion and follow through on criminal background checks
    d. Identify goods or services and supporting providers when authorized

4. Understanding Public Partnerships' policy, procedures, and processes, including EVV

5. Educating the member/representative-employer and DCSW(s) about Medicaid fraud and abuse, neglect, and exploitation

Resource consultants complete an enrollment and orientation home visit within 14 days of receipt of a referral. During the scheduling call we review the purpose of the visit, handle any initial questions, and attempt to coordinate a time that the DCSW (s) partially attend. The purpose of the visit is twofold – to complete necessary forms and orient the member to their role and responsibility in the self-directed program. The first half of the meeting is employer orientation and skills training to further ensure the member is informed and committed to the role and responsibilities in a self-directed option. The Resource Consultants bring laptop computers with our web portal loaded to demonstrate functioning and printed copies of the member enrollment documentation and DCSWs packets as needed. The Resource Consultant explains each document in detail before member signature and date. Ideally, the DCSW(s) are present for the second half of the meeting during which the Resource Consultant reviews our role of payment agent, completes all required documentation for hire, and consents to a background check. We scan all employer enrollment forms and upload them to our web portal after the home visit. We file the appropriate forms with the IRS and West Virginia Division of Labor. Please see Sections 4.2.1.27, 4.2.1.35, and 4.2.1.134 for more information about enrollment processes.

4.3.1.2 Entering member and representative (when applicable) information into the web-based portal utilized by the Agency for project management and reporting.

Public Partnerships' web portal allows the Resource Consultant to capture key information during the enrollment visit and archive copies of documents. The enrollment milestones including date of referral, first phone contact and home visit date are required and used to assess enrollment cycle times. Each member has an associated Resource Consultant in the web portal, allowing staff level reporting and performance management. The member has access to the portal and learns what documents, timesheets, etc. are housed there and where to find them.

4.3.1.3 Conducting monthly phone calls with members to provide oversight and support while members are using Personal Options.

The monthly phone call made by our Resource Consultants has a different focus from contact made by the case managers because of differing roles. The Resource Consultants are highly focused on DCSW service quality, consistency, and back-up planning, as well as service utilization. Our staff have access to DCSWs worked time in comparison to service authorizations and discuss over- and underutilization when applicable. This allows us to ask questions that may result in disclosure of a change in need that we can pass on to the case manager.

We understand that being an employer in a self-directed option is a new role with new responsibilities. While we provide an orientation and employer training during enrollment, foreseen and unforeseen issues arise that go with the role. In instances where a new hire is not working out, our Resource Consultants are able to offer guidance and recommendations based on experience with hundreds of other members/representative-employers. If a new need emerges during the plan year our Resource Consultants support members in re-allocating participant directed goods and services or coordinating environmental accessibility adaptations. We can also join calls with case managers to discuss changes to service authorizations.

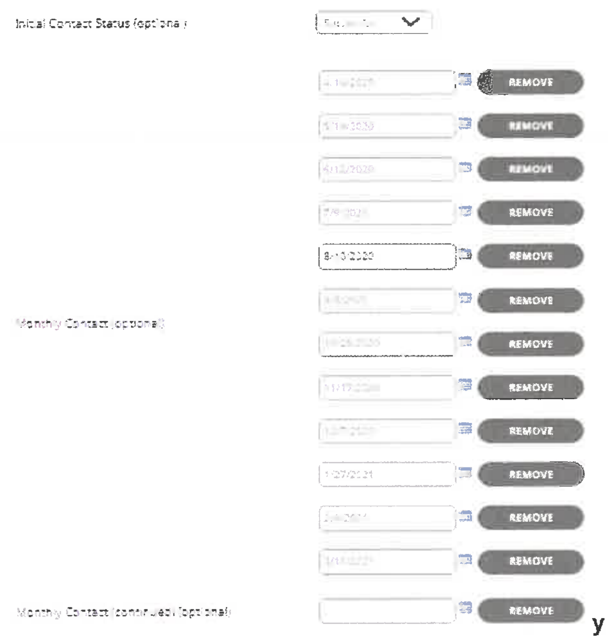


Figure 41. Monthly Call Tracking & Compliance

Our Resource Consultants use a base set of questions and observation during each monthly call. The questions and notes attempt to identify issues that have a direct impact on continuity of care through the participant-directed options. Each month, the Resource Consultant reviews:

- Significant changes in care needs including hospitalizations/nursing home placement in the past month
- The need for or any changes to existing direct care services
- Issues regarding DCSW including supervision issues, new hires or terminations
- Upcoming medical eligibility redetermination
- DCSW certification and training dates that need to be updated within the next 90 days
- Over/Under Utilization if applicable
- Spending plan review and updates

Resource Consultants document and store the answers and information in the members web-based profile.

4.3.1.4 Assisting members and representatives, as appropriate, in developing and implementing their initial Service/Spending Plan and subsequent updates and reviewing Service/Spending Plans with members and their representatives, as appropriate, during the monthly calls and during the six (6) month in-person visits. The monthly phone call can be made on any day during any given month.

Development of the member's Service/Spending Plan is a key component of the orientation and enrollment meeting. The Resource Consultant provides the member with the amount of the participant-directed budget and explains how the amount was determined. We review the waiver specific participant-directed support services, Participant Directed Goods and Services, Environmental Accessibility Adaptations, and Community Transition Services. We introduce the concept of budget authority and while it allows autonomy and control of services, change needs to be managed. Based on a review of the member's needs and goals we begin developing the initial Service/Spending Plan.

Our Spending Plan template allows the Resource Consultant to show the member how the DCSW's wage rate, taxes and overtime can directly impact the amounts of services that can be received.

6.3.2021 **WV IDD Personal Options Spending Plan**

Participant Name:	
Participant ID:	
Program Representative	
Resource Consultant:	
Service Coordinator:	

	Start Date	End Date
Budget Period:		
Monthly Spending Plan Period:		
Annual Budget Amount:		

EAA-Vehicle (T2039 UG)	EAA-Home (S5165 UG)	Dietary (97802 AE UG)	OT (97530 GO UG)	PT (97530 GP UG)	ST (92507 GN UG)	PDGS (T2028SC)
$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

Employee Name		Service & Service Code	# of Hours	Hourly Wage	Tax Exemption	Employer Taxes	Wages & Taxes	Total Cost
Live-in employee								
		PCS - S5125UA	0.00	$0.00	Parent	$0.00	$0.00	$0.00
		PCS - S5125UA	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		PCS - S5125UA	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		PCS - S5125UA	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
Non live-in employee								
		PCS - S5125UA	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		PCS - S5125UA	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		PCS - S5125UA	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		PCS - S5125UA	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		PCS - S5125UA	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
	regular hours	PCS - S5125UA	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		Respite - T1005UD	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		Respite - T1005UD	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		Respite - T1005UD	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		Respite - T1005UD	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		Respite - T1005UD	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		Respite - T1005UD	0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00

Figure 42. IDD Program Spending Plan Template.

During completion on the spending plan template, we talk through available DCSWs and thoughts on PDGS and other self-directed services. We assign our Resource Consultant caseloads based on geography to ensure they are highly familiar with the home and community-based service provider community. If the member has identified staff and service providers we discuss next steps in hiring and onboarding (unless the DCSW can attend the meeting). If they have not, we begin working through our provider directory to find DCSWs and the Resource Consultant's known network of service providers. The Resource Consultant provides a copy of the Spending Plan to the member and their Case Manager.

Spending Plan revisions may be necessary several times throughout the member's budget year and may involve the following:

- New service authorizations
- Changes to existing service amounts
- Change in DCSW wage
- Shift in PDGS funds
- Temporary hospitalization
- Addition of provider service

The Resource Consultant is responsible for updating the web portal budget page to reflect the member's current Spending Plan.

4.3.1.5 Assisting members and representatives, as appropriate, to ensure DCSWs meet qualification referenced in the program policy manuals, including the WV CARES background check and training requirements. DCSWs cannot provide or bill for services unless qualifications are current.

The Resource Consultant provides a comprehensive overview of the DCSW hiring process and requirements during the enrollment home visit. They review the DCSW hiring packet, including the consent to a WV CARES background check and required trainings, with the member-employer and ideally the DCSW. Either during the enrollment visit, or with the Resource Consultant's support thereafter, the DCSW moves through the hiring process submitting the required documentation, verification and our staff store copies of all documentation in the DCSW profile in our web portal. Our staff review each form, for completion, signature and date before recording in the web portal DCSW Profile checklist. We store Training Verification Forms and log dates to trigger renewal reminders in the following year.

Figure 3: DCSW Provider Profiles Ensure Background Check Compliance

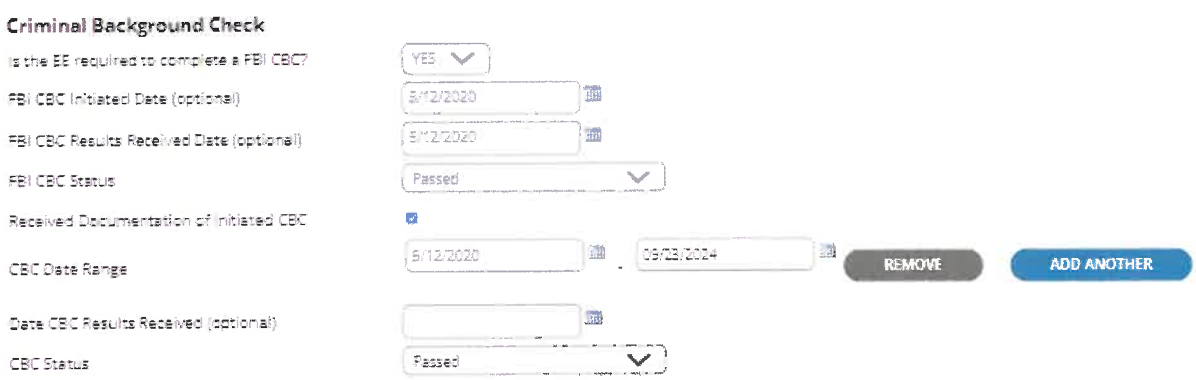


Figure 43. DCSW Provider Profiles Ensure Background Check Compliance.

DCSWs cannot provide or bill for services unless they are in 'good-to-go' status, which means that their paperwork is complete and all their eligibility checks have been verified.

4.3.1.6 Assisting the Subagent-F/EA FMS Division to develop and maintain an up-to-date searchable directory of potential DCSWs.

The PPL Connect provider directory is available for use in West Virginia. The directory was launched to support workforce capacity for the Personal Options programs and replaced PPL's MyChoice4Care directory. The site is currently being promoted by our Resource Consultants to all members and the DCWS to accelerate initial registrations. In time, the directory is intended to provide potential DCSWs as primary workers and as back up workers on other member plans. In the coming months we intend to make further enhancements to PPL Connect that will expand its capacity as a workforce solution in Personal Options.

4.3.1.7 Assisting members and representatives, as appropriate, to identify and retain services of qualified agencies and/or individuals for services available under each Self-Directed program.

Our Resource Consultation team meets regularly to discuss local and statewide service providers supporting spending plans. During these meetings staff share service agency events happening within the state and service provider availability by region. Resource consultants can search our web portal for agencies previously included in Spending Plans including contact information and billing rates at the time of service delivery. Resource Consultants actively network within their local Centers for Independent Living, Area Agencies on Aging and ARCs so we can quickly connect members to the broader long-term supports and services network.

4.3.1.8 Assisting the member or representative, as appropriate, in identifying and providing DCSW benefits, as applicable.

During the face-to-face enrollment meeting, the Resource Consultant explains the benefits available to DCSWs through the Personal Options program. We address Social Security, Medicare, and unemployment taxes as well as overtime compensation. Health insurance, workers' compensation insurance and vacation days are not available through the Personal Options or Take Me Home program but if requested, the Resource Consultant assists the member or representative with researching options for health and/or workers' compensation insurance.

4.3.1.9 Conducting in-person home visits at least every six (6) months with members that do not receive Case Management services. The purpose of the visits is to monitor the member's health and welfare and to provide guidance and support to members/representatives and their DCSWs.

At least every six months following the enrollment meeting, the Resource Consultant will conduct a face-to-face visit with member/representative-employers who do not receive Case Management services. The discussion topics of the visit are the same as those addressed during the monthly phone contacts described above. The Resource Consultant documents the six-month visit on the contact form and in addition to his/her signature, the member/representative-employer is also required to sign the document. The completed document is uploaded to the member's documents in the web portal. The date of the six-month visit is entered in the member's portal profile allowing program managers the ability to monitor the Resource Consultant's performance and compliance with this requirement.

4.3.1.10 Assisting members and representatives, as appropriate, to purchase authorized participant-directed services. (PDGS, EAA, etc.)

Members with PDGS, EAA and other indirect long term supports and services often need help sorting their options and engaging vendors. Our Resource Consultants leverage known vendors and service providers supporting their caseloads and share information and resources with teammates across West Virginia. PPL has developed a PDGS Packet and Payment Request Form that we review with the member as we begin discussing how to allocate PDGS in the spending plan. We explain that for actual goods we can make purchases on their behalf and have items shipped to their home. For services like therapies, our Resource Consultants can make a call on the member's behalf, or with the member, to explain our role as a payment agent, how to submit Form W-9, and the process for invoicing and payment. EAAs can be home or vehicle modifications and follow the same process for payment as PDGS.

Public Partnerships will continue to assist members/representative-employers to purchase authorized participant-directed services. The process that we define in Sections 4.2.1.11, 4.2.1.52, and 4.2.1.97 will bring more flexibility and customer support to members and vendors by PPL.

4.3.1.11 Monitoring members' health, safety, and welfare through the enrollment and initial planning process and required monthly calls and six (6) month in-person visits with members.

Public Partnerships' Resource Consultants complete and/or review the member's assessment and service plan at the initial Personal Options enrollment meeting or the initial Take Me Home transition planning visit. We provide the employer orientation and training to members and their representatives regarding identifying and reporting all incidents at the enrollment meeting. Our Resource Consultants continue to monitor the members' health, safety, and welfare through monthly contacts and 6-month home visits.

4.3.1.12 Maintaining member and representative files and records including member notifications in automated systems.

Public Partnerships electronically maintains all documents from members and representatives in our web portal. Documents are archived on a secure, limited-access server.

4.3.1.13 Documenting and reporting evidence and observations of members' and representatives' inability to self-direct.

Public Partnerships' Resource Consultants provide the orientation and skills training to members at the enrollment meeting and continue to monitor the members' ability to self-direct their services through monthly contacts and 6-month home visits when applicable. Re-training occurs if a participant is struggling to complete a task. If still struggling, observations and evidence of member and/or representative's inability to self-direct will be documented and reported to the program management team and escalated to the Agency's attention.

4.3.1.14 Reporting and responding to all member/representative complaints and grievances regarding Subagent-F/EA FMS and RC services.

Our Resource Consultants are often the first point of contact for member complaints, any dissatisfaction with services, and grievances – a perceived violation of individual rights. The Resource Consultants works to resolve the complaint and involves other staff for resolution as necessary. They record the complaint in CRM. The Resource Consultant directs the member to the Grievance Form available on our website or by mail. The Resource Consultant notifies the Project Manager if a grievance is filed, then the Project Manager initiates follow up and resolution with the respective operations supervisors.

We trend complaints and grievance and use that information to improve the quality of service delivery.

4.3.1.15 Acting as a mandatory reporter and report and respond to all required incidents, including, but not limited, to, any allegations or reports of suspected abuse, neglect, and exploitation.

Public Partnerships trains all Resource Consultants and key program staff, at hire and refreshed throughout their tenure, in their responsibilities as mandated reporters in West Virginia. Any concern of abuse, neglect, or exploitation is reported to the appropriate authority and documented in CRM. The Resource Consultant tells their supervisor of the report and necessary follow-up.

4.3.1.16 Assisting members and representatives as needed to be re-evaluated for eligibility for services, request for a change in level of care, request for dual service provision, and request for transfer to traditional agency-directed services.

Public Partnerships has developed and implemented a process to assist members and their representatives with completing their medical eligibility for services in a timely manner. Our program support team send the reminders and required forms to the members before their re-evaluation due date allowing them to have sufficient amount of time to complete and return the forms to their Resource Consultants. The Resource Consultants also follow up in their monthly contacts to help ensure forms are completed and submitted on time.

The Resource Consultants are also knowledgeable of the policy and processes for requesting a Service Level change, dual service provision, and transfer to traditional service delivery option. The Resource Consultants and program support staff coordinate with the Agency's UMC (Kepro) and Operating Agency (BoSS) on a routine basis to help ensure program members receive the services they need.

4.3.1.17 Interacting and collaborating with staff from the Subagent-F/EA FMS Division and other state program staff to ensure efficient program operation.

We value the long-standing relationships that we have developed and believe they have been built and thrive on collaboration. Our Project Manager, Katharine Randall, is always a phone call away and often meets daily with our primary contacts at the State. With these open lines of communication, we can quickly problem solve issues to maintain program efficiency and operations.

4.3.1.18 The Vendor should assist with the development and approve all self-directing members' spending plans

At the core of the Resource Consultant's role is development of a spending plan. Our Resource Consultants receive comprehensive training when hired and annual refreshers on each waiver, the approved and authorized services for participant direction and the Take Me Home program. For direct care services like Personal Attendant the Resource Consultants are trained on employer taxes, costs, and billable rates versus the hourly wage, so they are comfortable explaining the impact on the budget balance to the member. Resource Consultants keep Spending Plan templates on their computers and walk through the initial plan template during the enrollment and orientation home visit.

For the Aged and Disabled waiver, the Resource Consultants reviews the following template that shows the member their total service cost based on wage and hour.

Personal Attendant Services (S5130U1)							
Live-in employee							
Employee Name		# of Hours	Hourly Wage	Tax Exemption	Employer Taxes	Wages & Taxes	Total Cost
		133.50	$15.32	Non-Exempt	$1.68	$17.00	$2,269.50
		0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
Non live-in employee							
	regular hours			Non-Exempt	$0.00	$0.00	$0.00
		0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
	over-time hours	0.00	$0.00	Parent	$0.00	$0.00	$0.00
		0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
		0.00	$0.00	Non-Exempt	$0.00	$0.00	$0.00
Transportation Services (A0160U4)							
Employee Name		# of Units	Cost of Units				Total Cost
		0	$0.00				$0.00
		0	$0.00				$0.00
		0	$0.00				$0.00
PERS (S5161 U6 UK)							
Vendor Name		*# of Unit*	*Cost*				*Total Cost*
Medical Guardian		1	$40.00				$40.00
							Summary of Spending Plan
Total Amount of Monthly Personal Attendant Services:							$2,269.50
Total Amount of Monthly Transportation Services:							$0.00
Total Amount of Monthly PERS Services							$40.00
Total Amount of Overall Monthly Services:							$2,309.50
Total Budget Amount Remaining:							$0.50

Figure 44. ADW Total Service Cost Template.

For the Intellectual and Developmental

Disabilities waiver, the Resource Consultants reviews a template that includes fields to account for Participant Directed Goods and Services (PDGS) and Environmental Accessibility Adaptations.

6.3.2021 **WV IDD Personal Options Spending Plan**

Participant Name:	0
Participant ID:	0
Program Representative:	0
Resource Consultant:	0
Service Coordinator:	0

	Start Date	End Date
Budget Period:	1/0/1900	1/0/1900
Monthly Spending Plan Period:		
Annual Budget Amount:	$0.00	

EAA-Vehicle (T2039 UG)	EAA-Home (S5165 UG)	Dietary (97802 AE UG)	OT (97530 GO UG)	PT (97530 GP UG)	ST (92507 GN UG)	PDGS (T2028SC)
$0.00	$0.00	$0.00	$0.00	$0.00	$0.00	$0.00

Figure 45. IDD Personal Options Spending Plan Sample.

4.3.1.19 RC's should review spending plan utilization with members or their representatives during their monthly telephone contacts and home visits (if applicable).

One of the most critical functions of the monthly telephone contact is reviewing utilization with the member or their representative. The member and our Resource Consultants have real time access to information on spending and service authorization utilization through our web portal and as of April, on Time4Care. Members can access the information themselves online, via Time4Care or call their Resource Consultant to check on balances. The monthly call is also an opportunity to review the most recent spending plan with members opting to receive them.

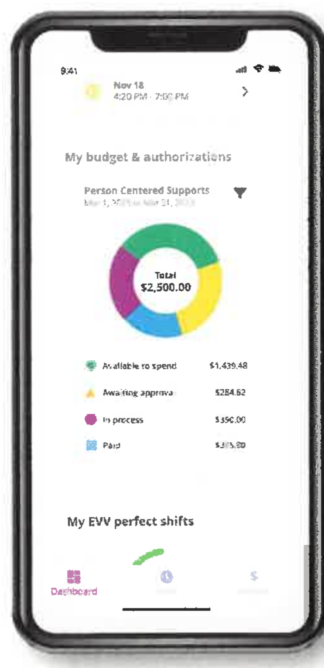


Figure 46. Budget Utilization via Time4Care.

Any over or underutilization is discussed and assessed for next steps. Variances in utilization are assessed as either singular events or changes requiring notification to the Case Manager. In the event of perceived changes in need in advance of the monthly call the Resource Consultant will offer to coordinate a three-way call with the Case Manager. Any determinations made during the call for changes to the budget are transferred to the spending plan and service authorizations.

A screenshot of the Utilization Report reviewed by Resource Consultants is below. The report demonstrates the effectiveness of calls as there are no participants listed.

4.3.1.20 The Vendor should ensure that all RC's are current Notary Publics.

We require each Resource Consultant to obtain their Notary Public commission within 4 weeks of employment. Resource Consultants must be Notary Publics before independently conducting any member enrollment that requires notarization of tax forms. The term of WV Notary commission lasts five years. All Resource Consultants currently employed by Public Partnerships meet this requirement.

4.3.2 The Vendor should propose a system and policies, procedures, and internal controls for providing Fiscal/Employer Agent (F/EA) Financial Management Services (FMS) and optionally Support Brokerage (otherwise known as Resource Consulting (RC) services on Agency behalf to eligible West Virginia State Plan Personal Care (PC) members who choose to self-direct services should the state elect to include the Personal Options service delivery model to the Personal Care program. The Vendor's responsibilities for F/EA FMS and optional RC services for the Personal Care program would be consistent with the responsibilities for the Personal Options service delivery model in the waiver programs.

Public Partnerships is ready to assist the Agency to support more individuals to self-direct their personal care services in West Virginia. We will bring deep knowledge and real-world experience to serving this additional population.

The §1915(j) of the Social Security Act allows states to duplicate the Robert Wood Johnson Foundation demonstration and evaluation program referred to as Cash and Counseling. It offers individuals the greatest level of choice and control over their services and supports. West Virginia was part of the second round of Cash and Counseling.

Public Partnerships serves over 30,000 members under the §1915(j) in New Jersey, and we understand the unique operational standards of the authority. The most positive feature of this State Plan Option is that a self-directed support system is used across populations and programs and appears as one self-directed system across all self-directed programs. This option allows self-direction to "wrap around" other waiver services and State Plan Personal Care Services to create one infrastructure to support self-direction. Typically, the (j) characteristics are added to 1915(c) programs, and services are vetted through person-centered service planning to prevent gaps or duplications.

Our proposal is to model the system, policies, procedures, and internal controls for providing F/EA FMS and optionally Support Brokerage after our current approach. Our current approach has a proven track record that has been able to meet the needs in West Virginia as proven by the successful growth. Our approach is described throughout this RFP response. We will work closely with the Agency to work on future enhancements also described in this response to address the needs of this new population.

We understand that one important difference for this population is that the members may not have a Case Manager, raising the importance of leaning on our Resource Consultants to be on the ground with new members educating and training them about self-direction in West Virginia. No other Vendor will be able to provide as smooth of a transition due to our longstanding relationships and 16 years of experience. We have invested in the people of West Virginia for so long that bringing in this population furthers our resolve to partner with the Agency to expand self-direction in West Virginia. We are prepared to hire additional staff for the optional Resource Consultant role to meet these unique needs.

4.3.3 The Vendor may bill administrative fees only once per month for Waiver program members who are eligible to also receive Personal Care services.

Public Partnerships understands that members may qualify for more than one program that we serve within the scope of this RFP. As such, we will ensure through our invoicing system and controls that we are not duplicating counts of members who are dually enrolled when we invoice the Agency for our services.

SECTION 4.4

MANDATORY PROJECT REQUIREMENTS

4.4 MANDATORY PROJECT REQUIREMENTS

Public Partnerships agrees to comply with all mandatory requirements outlined within this CRFP and described in Section 4.4.

4.4.1 The Vendor must perform the Subagent-F/EA FMS tasks as a Subagent to the West Virginia Government F/EA FMS (the Agency) directly and without the use of a subcontractor.

As the incumbent vendor, Public Partnerships currently performs all required F/EA FMS tasks as a Subagent to the Agency without the use of any subcontractor. Should we be awarded this contract, we will continue to be wholly responsible for performing all F/EA FMS tasks described in the contract details without using a subcontractor.

4.4.2 The Vendor must provide F/EA FMS directly and not subcontract with another entity to perform any of the related or optional tasks.

Public Partnerships is currently solely responsible for providing the entirety of F/EA FMS services directly, including all related or optional tasks. We will continue to assume prime contractor responsibility for all services offered and products to be delivered under the terms of this contract. The Agency will consider Public Partnerships to be the sole point of contact with regard to all contractual matters.

4.4.3 The Vendor must develop and maintain a Subagent FEA FMS Policy and Procedures Manual, to be approved by the Agency, within 30 calendar days contract award and update manual at least annually by August 31.

Under the current contract, Public Partnerships has developed comprehensive and program-specific FEA/FMS and Resource Consulting policy and procedure manuals. We revise our manuals in response to Agency requests, changes in state and federal laws and regulations, advancement in technology, and evolution of best practices in the field of self-direction.

If Public Partnerships is awarded this contract, we will collaborate with the Agency to revise our FEA/FMS and Resource Consulting policy and procedure manuals to address the additional requirements specified in this RFP, e.g., enhancements to Goods and Services processes. Public Partnerships will submit the revised manuals for Agency review and approval within the 30 calendar days of contract award.

4.4.4 The Vendor must maintain an auditable system for managing members' spending plans, payroll processing and related reporting, and claims submission.

Public Partnerships has an established system in place to manage members' Spending Plans. All Spending Plans are developed by the member/representative-employer with the assistance of a Resource Consultant. Completed Spending Plans are verified and approved by Public

Partnerships' program support staff before they are entered in our web portal. This process is to help ensure all spending plans are developed per the member's authorized services and budget amount. All approved spending plans are stored in our secure program specific archive folder for auditing purposes. Our web portal and Financial Management System provide an auditable history of all payroll transactions and related reporting.

We designed our Medicaid Billing System to track changes in data to allow the system to be auditable. We are currently able to track the history of a single submitted claim, noting when and how many times it was submitted, the number of times the claim was adjudicated by the State's MMIS system, per the payment reconciliation process, and the amount of the associated payment and any denials for the adjudication event.

Public Partnerships participates in regular program reviews from third parties assigned by the Agency, e.g., Kepro, that audit our processes and provide a quality review. We have consistently passed all audits throughout our 16-year history as the F/EA FMS.

4.4.5 The Vendor must have and maintain the capacity to receive funds by electronic funds transfers (EFT).

As the incumbent F/EA FMS Vendor, Public Partnerships currently receives funds by electronic funds transfer (EFT). Should we be awarded this contract, we will continue to maintain this capacity.

4.4.6 The Vendor must, as a Subagent - F/EA FMS, establish and maintain a separate administrative bank account for the sole purpose of receiving all payments from the Agency for Medicaid-funded self-directed services rendered and Subagent - F/EA FMS administrative fees. The Agency may, at any time and at its discretion, audit the Vendor's administration and use of public funds including the management of the separate administrative bank accounts for each Waiver Program.

Public Partnerships currently has, and will continue to maintain, a separate bank account for the sole purpose of receiving payments from the Agency for Subagent-F/EA FMS administrative fees invoiced on a monthly basis. Should the Agency request to audit this account's activity or the activity of the program-specific bank accounts used to process service claims payments, Public Partnerships will provide the Agency with requested bank statements and other financial information upon request.

4.4.7 The Vendor must receive, disburse, and track Medicaid and State funds as specified in this RFP.

Public Partnerships has established and maintains a proprietary Medicaid Billing System which along with our web portal effectively and accurately tracks the receipt and disbursement of Medicaid and other Federal funds and tracks all transactions and balances.

Our web portal serves as a centralized information dock and is an efficient and secure mechanism for Personal Options and Public Partnerships staff, as well as members, to monitor and track the entry of HCBS expenditures. We store data under each member's unique pre-assigned ID number. The system automatically calculates and tracks all payments made on behalf of the member. The remaining fund balance and each expenditure entry are available for viewing. No two member Spending Plan allocations are intermingled in our system; Medicaid funds in the accounts are appropriately deducted to illustrate expenditures made on behalf of the member enrolled in the Personal Options programs. We have programed this secure expenditure entry feature to accommodate varying levels of budget accessibility with role-based hierarchy of access. All individual transactions are recorded in the payroll ledger entry, which provides an audit trail of disbursements.

Our Financial Management System can produce detailed reports on payments disbursed at an individual or aggregate level. Public Partnerships reconciles project billings and remittances against payments issued on behalf of the member. Remittances are entered into Public Partnerships' claims management system to track reimbursement of funds against funds that have been disbursed.

4.4.8 The Vendor must have a process for reimbursing the State for any funds remaining in the separate bank account for managing participant-directed funds on June 30 of each state fiscal year.

As the current Vendor of F/EA and Resource Consulting services for the Personal Options programs, Public Partnerships does not receive funds in advance for managing participant-directed funds.

The member's self-directed budget allocations are issued in the form of service and Level of Care authorizations from the Utilization Management Contractor (UMC). Once received by Public Partnerships, we upload into our web portal the authorized budget amounts to each member's budget page. When timesheets and invoices are validated and pass all program safeguard rules and policy, Public Partnerships will submit the service claims into the state's MMIS system. We receive the claim payments approximately 1 week after we issue payments to Direct Care Service Workers (DCSWs) and Participant-Directed Goods and Services (PDGS) vendors.

Based upon the current timing of claims submissions and payments, the requirement listed above is not applicable. However, should policy changes occur, Public Partnerships will work with the Agency to develop a plan for reimbursement of participant-directed service funds.

4.4.9 The Vendor must have a website available to members and their representatives, and the general public, that includes up-to-date information and internal controls documented for its West Virginia-specific Subagent-F/EA FMS Policies and Procedures Manual to monitor the accuracy and currency of the materials posted on the website and the effectiveness of the system.

Public Partnerships has a comprehensive website that provides easy access to critical contact information (including hours of operation and a link to our web portal), programmatic forms, key policies, and frequently asked questions. Our content is clearly readable and easy to understand. The Public Partnerships website complies with the Americans with Disabilities Act and Section 508 of the Rehabilitation Act.

The Public Partnerships website provides a hub for program resources including, but not limited to, program information. Program resources can also be made available to be downloaded as Adobe PDF documents. Public Partnerships has internal controls to monitor the accuracy and currency of the materials posted on the website and the effectiveness of the system. We will review with the Agency our current Policies and Procedures Manual to ensure our approach to monitoring the accuracy and currency of materials posted on our website exceed expectations.

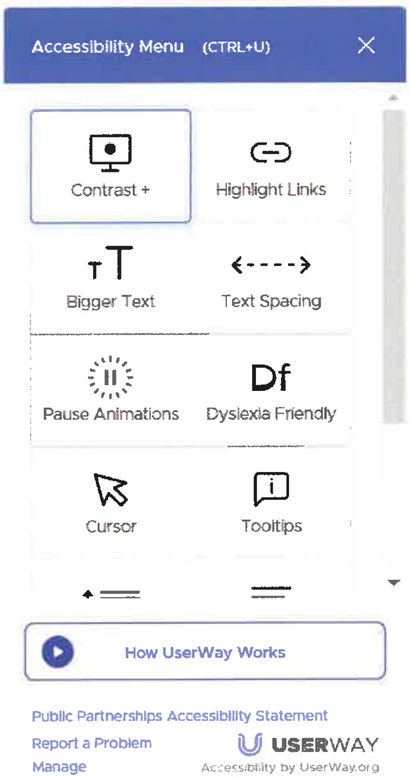


Figure 47. UserWay Accessibility Widget

In early 2020, we relaunched the PPL website which dramatically upgraded access to information for members and DCSWs. The PPL website can be translated into 108 languages. Our website utilizes the UserWay Accessibility Widget, which meets the legal and regulatory requirements of the Americans with Disabilities Act (ADA), Section 508, EN 301 549, and AODA. This widget allows users of any ability level to get the supports they need to take full advantage of our website. The widget's features may be viewed and turned on via any of our web pages by clicking on the blue accessibility icon in the bottom left corner. Any stakeholder can also email us through the website, give us feedback through Facebook or email directly with a member of our customer service team.

Further, we have a chat feature on our website which members, providers, and other stakeholders can utilize as another channel for urgent and efficient communication. Many of those in our programs prefer to chat or "Instant Message" instead of making a phone call to get a quick question answered. This chat feature is online during business hours Monday through Friday and monitored by our Customer Experience Team. Our email inbox is monitored daily, and any inquiries will be responded to either immediately or by the next business day from the day the message was received.

PPL has also designated a section on our website for those who wish to connect online. The section includes presentations, tips on managing services effectively, frequently asked questions (FAQs), and key programmatic forms. Screenshots of some of our West Virginia program pages demonstrate the types of information, content and documents available to users.

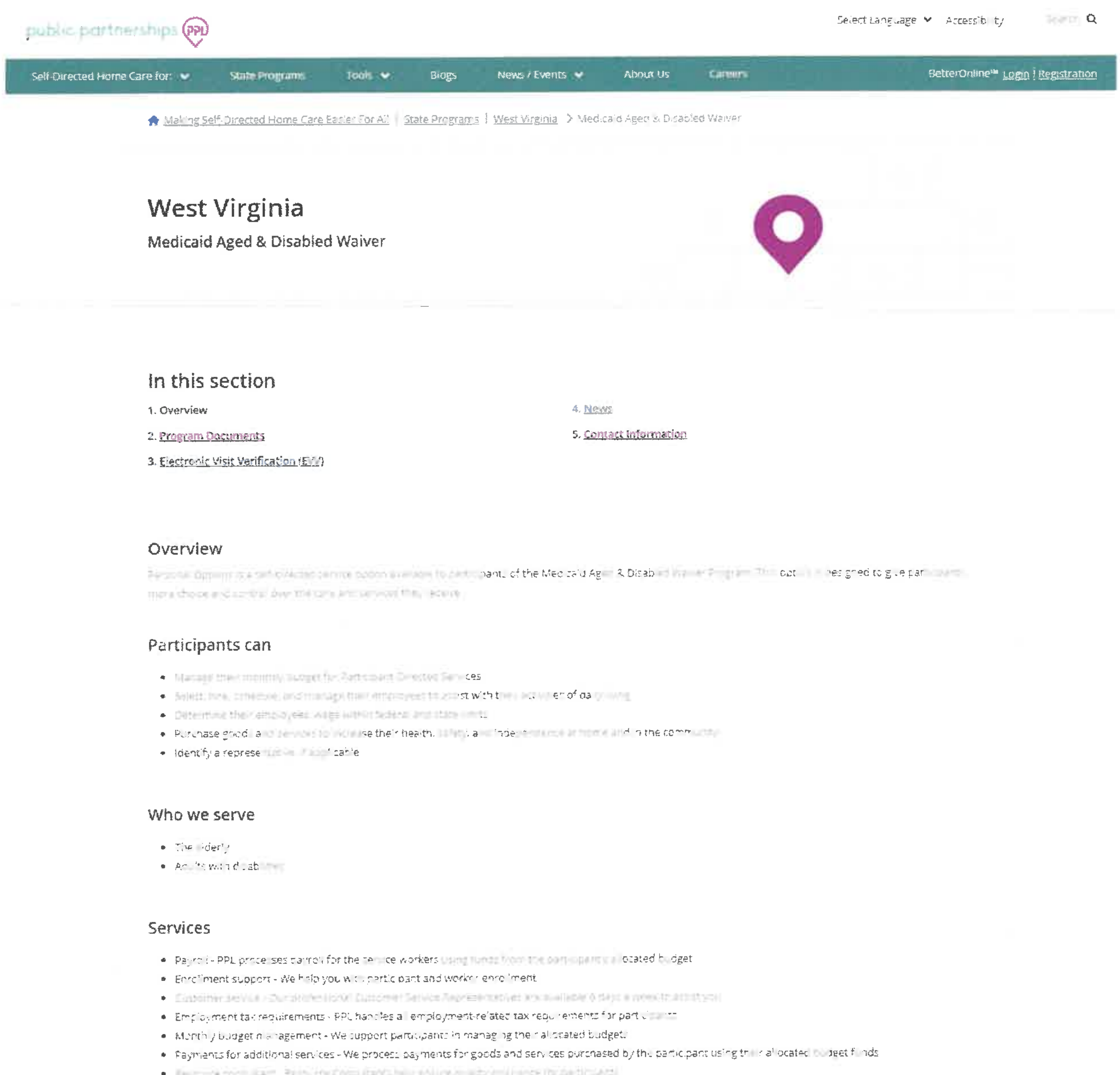


Figure 48. West Virginia Program Page on PublicPartnerships.com

We provide an extensive library of member/representative-employer and DCSW content, easy to locate via Program Documents

4.4.10 The Vendor must develop, implement, and maintain a web portal; a secure web-based interactive payroll and accounts payable system that provides the Agency, members enrolled in Personal Options, their representatives, Resource Consultants, and Case Managers (if applicable) with real time 24/7 access to member's budgets and spending history with the ability to electronically submit and monitoring processing of DCSW hours worked and invoices.

Our web portal is a “front door” that provides access to our FMS enterprise platform. This platform has been built for self-direction. It manages enrollment and training. It includes fully integrated EVV-compliant time capture. It houses a process flow that imports authorizations, executes the full suite of payroll functionality, including withholdings and then proceeds to turn payroll into healthcare claims that can be exported to West Virginia’s Medicaid Management Information System (MMIS).

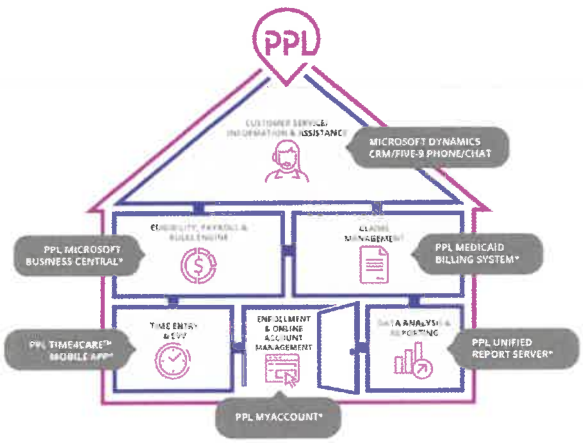


Figure 49. PPL Under one roof.

At a high level, PPL’s solution is about having one interconnected business process for all of these diffuse program requirements. We have spent 24 years building what we call an “enterprise-wide solution” for self-direction FMS. It is centered around our web portal, which we continue to upgrade. PPL is ready to bring its next generation web portal, MyAccount, to West Virginia. MyAccount will improve both user interfaces and user-centered display features for members and workers. MyAccount provides a streamlined business process flow, inclusive of referral processing, enrollment documentation tracking, budget/service authorization detail, EVV, payroll, claims and reporting. All features are fully integrated, eliminating the need for data imports and exports that can cause delays in the enrollment process. Transitions from BetterOnline to MyAccount for existing programs involve a staged process. PPL wishes to work with the Agency to determine an optimal timeline for a transition.

Public Partnerships web portal meets the requirements of:

- Secure web-based interactive payroll and accounts payable system
- Real time 24/7 access to member budgets and spending history
- Electronic submission and monitoring of DCSW hours worked and invoices
- Access for a variety of user roles: Agency, members, representatives, Resource Consultants, Case Managers

We understand that a variety of stakeholders need access to member information to ensure coordination of services and continuity of care. We tailor user access and privileges to the needs of each stakeholder. The Agency, members and their representatives, Public Partnerships staff, and Service Coordinators/Case Managers can have real-time access to member demographic information, individual budgets, authorizations, and spending and savings activity. We understand based on Section 4.2.1.145.1, that the Case Manager role will have “read only” access to the web portal, when Public Partnerships provides optional Resource Consultant services, and we are able to accommodate that within our systems.

Please see Section 4.2.1.145 for additional details regarding the web portal.

4.4.11 The Vendor must agree to operate and maintain a customer center with representatives that are dedicated to the West Virginia Personal Options program. Hours of operation are at a minimum 9:00 a.m. to 6:00 p.m. (EST) Monday through Friday excluding federal holidays, which can be found at: https :/ /www .opm.gov/policy-data-oversight/pay-leave/federal-holidays/.

Public Partnerships will be open for business from 9:00am to 6:00pm (EST/EDT) Monday through Friday, excluding federal holidays: New Year's Day, Martin Luther King Day, President's Day, Memorial Day, Juneteenth, Independence Day, Labor Day, Columbus Day, Veterans Day, Thanksgiving Day, and Christmas Day.

4.4.11.1 The Vendor must have a voicemail system activated for after-hours receipt of messages for members using self-direction services and their representatives and DCSWs to access needed information concerning their services.

We have a voicemail system set up for after-hours phone calls, where callers can ask for a call back at a specific time. After established business hours, PPL utilizes an Interactive Voice Response (IVR) system. Our IVR technology provides access to timesheet status and payment history. We also use the IVR Message of the Day functionality to keep all callers informed about specific events, i.e., scheduled maintenance, change in hours. Having multiple points of contacts for our members, their representatives as well as workers ensures we are here when they need us. Each program has a dedicated toll-free number, we provide a separate phone line that connects callers to our TTY system. This is for our members with hearing and/or speech impairments who use text telephones.

We also provide HIPAA and HITECH compliant e-mail address and fax numbers for each program. During regular business hours we offer a 'chat' feature on the PublicPartnerships.com site.

4.4.12 The Vendor must have the ability to provide translation and interpreter services that are compliant with language access laws, which can be found at: https ://www.hhs.gov/ civil-rights/for-individuals/special-topics/limited-englishproficiency/index.html, and the ability to provide materials to members and representatives in alternative print (i.e., Spanish, large print, and Braille).

Public Partnerships confirms that we have the ability to provide translation and interpreter services that are compliant with language access laws we also have the ability to provide materials in alternative print.

We are able to provide some translation services directly through our customer service representatives. Several of our customer service representatives are bilingual in English and Spanish who will provide assistance when necessary. We have customer service agents across our portfolio who are fluent in the following languages:

- Arabic
- Spanish

- Cantonese
- Korean
- Mandarin
- Russian
- Somali
- Tagalog
- Ukrainian
- Vietnamese

    - In addition to the above languages spoken by some of our customer service representatives, we also offer a language line with over 100 languages available.
    - Our company website and web portal are both 508 compliant and include functionality to translate our site in over 100 languages.
- Public Partnerships supports individuals with hearing and speech impairments, and we can accommodate their needs using a variety of tools. For example:
    - Some clients may wish to utilize our TTY services, while others will prefer to communicate via e-mail.
- We support visually impaired individuals as well
    - We can support individuals who utilize large-print type on our website or need alternative print such as Braille. Our websites are program-specific and host program resources, including enrollment materials, which can accommodate large-print screen readers.

We train all project staff in cultural competence and can communicate effectively by voice and TTY/TTD technology. PPL provides materials in alternate formats upon request for members with limited sight and for those who read other languages. Furthermore, our website includes an accessibility widget visitors can use to make site changes like increasing the font size, adjusting the spacing between letters and words and to increase the contrast for helping users read in their best format.

We are committed to assisting members, representatives, and DCSWs to access the information they need to fully participate in the Personal Options program, in whatever form that may be.

4.4.13 The Vendor must establish a separate administrative bank account for each Self-Directed Program into which all payments received from the Agency may be deposited and should submit to the Agency written evidence that the bank accounts have been established. The Vendor entity shall complete all forms as specified by the Agency and the bank to establish electronic fund transfers from the Agency to the bank account. The separate administrative bank account must be:

4.4.13.1 Maintained, to the extent legally permissible, in a manner that prevents creditors of the Vendor from in any way encumbering or acquiring funds in the separate bank account.

The funds in the program bank accounts are uniquely identified as *For the Benefit of Client "Name"* which will allow for creditor protection. The name on the account identifies the state as the beneficiary of funds in the accounts and is protected from Public Partnership LLC creditors. A communication is also on file with our banking institution stating the purpose of the client accounts.

4.4.14 The Vendor shall absorb at no additional cost to the Agency all bank charges including monthly fees and stop payment fees that were initiated by the contractor and not reduce the balance of the separate administrative bank account or reduce the balance of the participant's self-directed budget. It should be noted that should the participant or his/her authorized representative requests a stop payment, the fee may be charged to him or her.

Bank fees are absorbed by Public Partnerships and paid via an automated charge-back to Public Partnership's business account. This method is seamless and fees are not assessed to the program accounts. Stop payments will not be excluded from our automated charge back process. For example, if a DCSW loses a check we will reissue it without penalty to the worker. Public Partnerships will obtain information from the DCSW and will verify the original check has not been cashed and create the required audit trail. We withdraw from the administrative bank account all payments made by the using agencies within seven (7) business days of receipt. We use several standardized reports across the accounts to assist stakeholders in monitoring activity.

4.4.15 The Vendor must not co-mingle other funds into the separate administrative bank account.

Public Partnerships has established standard controls to ensure that there is no co-mingling of funds between the separate administrative bank account and funds from any other source.

4.4.16 The Vendor must ensure that funds deposited into the separate administrative bank account cannot be used by the entity or by any other agent or third party to satisfy, temporarily or otherwise, any Vendor liability or for any other purpose, except as provided under its contract with the Agency.

Public Partnerships has established separate, non-interest bearing, accounts for each of the West Virginia Personal Options programs. Funds are separated by these bank accounts to prevent any co-mingling of funds between the programs. No other entities, agents, or third parties have access to or use the funds received in these accounts. If awarded this contract, a separate account will be established for the State Plan Personal Care members when that population becomes in scope of this contract and the controls described above will apply to that account.

4.4.17 The Vendor must withdraw from the separate administrative bank account all payments made by the Agency for the Subagent - F/EA FMS administrative fees within seven (7) calendar days of receipt.

Public Partnerships will withdraw from each of the administrative bank account all payments made by the Agency for administrative fees within seven (7) calendar days of receipt.

4.4.18 The Vendor must prepare and submit monthly reports to the Agency on separate administrative bank account activity.

Public Partnerships will collaborate with the Agency within 30 days of contract award to develop the reporting formats for the monthly bank account activity and bank statement reports as required.

4.4.19 The Vendor must provide the Agency a copy of the monthly statement from the dedicated payroll bank account within fifteen (14) calendar days of the request along with any other financial information that may be necessary for, or requested by, the Agency to oversee the delivery of F/EA FMS services and to maintain relevant documentation in the Vendor's files.

Upon request, Public Partnerships will provide the Agency with a copy of the monthly statement from the dedicated payroll bank account within fifteen (15) business days of the request along with any other financial information that may be necessary for the Agency to oversee the delivery of F/EA FMS and Resource Consulting services. We maintain all relevant documentation in our secure server.

4.4.20 The Vendor must work jointly with any subsequent Vendor upon expiration and/or termination to supply historical Employer of Record and Employee information needed to ensure a smooth transition of services during the integration period.

We understand the necessity of collaboration with the incoming Fiscal Employer/Agent in the event of a transition. Our end-to-end financial management system stores all relevant data and documentation necessary for a smooth transition. We can provide data in various format types, export to secure FTP sites and provide bulk .pdf documentation in secure zip files. We will assign a project manager to collaborate with the incoming vendor's management team and the Agency to arrive at an agreed upon transition schedule. As the incumbent, PPL understands best the complexity of a transition to a new vendor across the West Virginia programs.

PPL's successful participation in any transition is always approached with the member's best interest at heart. Over our 24-year experience, we understand the timing and urgency of a seamless transition and will collaborate to ensure continuity of care for all members. Our transition plan assumes a comprehensive and collaborative partnership with any incoming FEA vendor as well as the Agency and our role in the transition of members and workers will focus on several key areas.

1. The members' continuity of care is our collective goal, as such, collaboration from our Program Manager and marketing team on the communication planning and execution is essential. We will advise on a communication plan for transitioning members and workers.
2. Meeting as needed with the key stakeholders that include, the Agency, and the new vendor, to review existing policies, procedures and transition information requests
3. Provision of accurate and timely data and information on program members and workers.
4. Providing prompt, clear and direct support to all members and workers transitioning using our Resource Consultants and customer service representatives.
5. Meeting every expected deliverable within the approved timeframe.

We have Electronic Data Interchange (EDI) capabilities to support any bulk file and format through HIPAA compliant transfer processes (e.g., SFTP). As necessary, to ensure there will be no disruption to the timing of the plan, we will maintain complete disaster recovery systems and protocols.

A transition in West Virginia is not as simple as migrating member and worker data to ensure payroll is met. There are established relationships of trust, not only with the Agency but also with the individuals who receive services. Some responders will say that they will be able to easily transition in as the new F/EA FMS vendor and undervalue the impact of years of relationships and the required changes to work in new systems.

TRANSITION TIMELINE

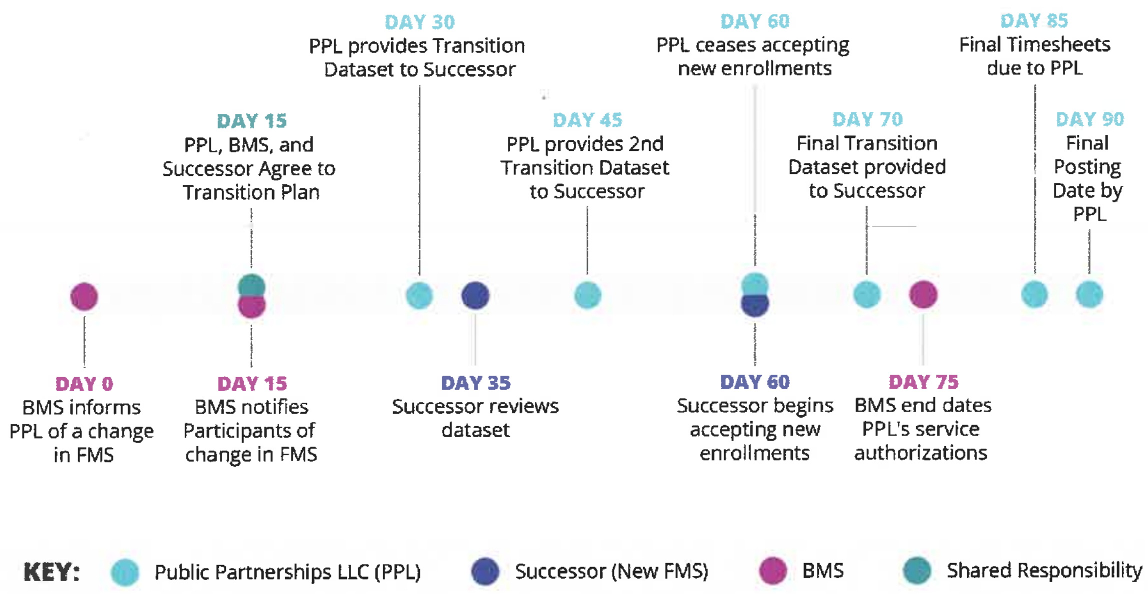


Figure 50. Example Transition Timeline

4.4.21 The Vendor must provide the Agency with sample versions of reports at least thirty (30) calendar days prior to the Operations Start Date for the Agency review and approval. The Vendor must not begin operations without the Agency approval of reports. Report formats may include paper reports or data files. Upon the Agency request, the Vendor must supply the underlying data to support any report submitted. The data is to be in an Agency - approved electronic file format.

Public Partnerships agrees to work with the Agency to develop and provide sample versions of the reports specified below for the Agency's review and approval at least 30 calendar days before the operation's start date. Our Program Manager and representatives from our Data Analytics team will engage the Agency in detailed report requirements gathering discussions. As we look forward to initiating a new contract with the Agency, we are excited to review the recent improvements we have made to dashboard reports within our Time4Care application to understand the impact of those improvements as data points for improvement in other reporting. How reports are accessed, how reports will be used, the content and presentation, and the push/pull nature of reporting will be discussed to identify how best to meet the needs of the Agency.

The reports that have been mentioned in this RFP and/or exist today include:

- Member Spending Report

- Discovery and Remediation Report on Quality Indicators
- Member Enrollment/Disenrollment
- Member/Representative Satisfaction Survey
- Financial Report
- Claims Utilization Report
- Monthly Bank Account Activity Report
- Bank Statement

If requested, Public Partnerships will provide the underlying data in the agreed upon format with the Agency to support the specific report.

4.4.22 The Vendor must agree to be bound by the Service Level Agreement(s) (SLAs) included in Appendix A.

Public Partnerships recognizes the importance of Service Level Agreements as a tool for states to ensure that their contractors comply with program requirements. Upon implementation of the contract, we will comply with the Service Level Agreements in Appendix A.

4.4.23 The Vendor must enroll required workers in the Agency's current Fiscal Agents System/MMIS prior to their providing paid services.

Public Partnerships confirms that our processes and controls currently require workers to be "good to go" in our systems, e.g., workers are enrolled in the current Fiscal Agents System/MMIS before a worker being able to provide, bill, or be paid for services. Public Partnerships will review its Policies and Procedures to make sure this process and control is documented and followed.

Public Partnerships' Resource Consultants verify that all workers meet program qualifications and complete training requirements before providing services. Our web portal has worker hiring *checklists* to log dates of qualifications and trainings and store supporting documentation. The checklist items correlate to required documentation from the worker hiring packet and are mandatory fields in our web based *good to serve* logic. Workers are categorized as *good to serve* when all required hiring documentation including background checks, qualifications and trainings are complete and on file. PPL has configured its system with *good to serve* logic that will flag upcoming renewal dates and when a worker qualification or training expires.

4.4.24 The Vendor shall agree to invoice for FEA and optional services only once for any members who are dually enrolled in a waiver program and the TMH or Personal Care program.

Public Partnerships understands that members may qualify for more than one program that we serve within the scope of this RFP. As such, we will ensure through our invoicing system and controls that we are not duplicating counts of members who are dually enrolled when we invoice the Agency for our services.

4.4.25 The Vendor must agree to complete all implementation activities within three (3) months.

Public Partnerships agrees to complete all implementation activities within three (3) months. As the incumbent, if we are awarded this contract, implementation activities will include reviewing processes and reporting with the Agency to gain review and approval where required by this RFP. Public Partnerships will be ready to engage with the Agency at their convenience when West Virginia State Plan Personal Care members are allowed to choose the Personal Options service delivery model and will complete those activities based on the schedule determined with the Agency.

4.4.26 If the Agency elects to utilize optional services, the Vendor must provide RC services directly and not subcontract with another entity to perform any of the RC tasks.

As the incumbent vendor, Public Partnerships currently performs all required Resource Consultant tasks without the use of any subcontractor. Should the Agency elect to utilize optional services within this contract, we will continue to be wholly responsible for performing all Resource Consultant tasks described in the contract details without using a subcontractor.

SECTION 4.5

QUALIFICATIONS AND EXPERIENCE INFORMATION

4.5 QUALIFICATIONS AND EXPERIENCE INFORMATION:

Vendor should provide information and documentation regarding its qualifications and experience in providing services or solving problems similar to those requested in this RFP. Information and documentation should include, but is not limited to, copies of any staff certifications or degrees applicable to this project, proposed staffing plans, descriptions of past projects completed (descriptions should include the location of the project, project manager name and contact information, type of project, and what the project goals and objectives where and how they were met.), references for prior projects, and any other information that vendor deems relevant to the items identified as desirable or mandatory below.

Public Partnerships has 24 years of experience providing financial management services for self-directed programs and 16 years providing financial management services combined with resource consulting/information and assistance.

We serve members and workers in 21 states across a variety of programs, including state funded programs, Medicaid State Plan funded, 1115, 1915 (b), 1915 (c) and 1915 (j) waivers serving aging adults, individuals with disabilities, individuals with intellectual and developmental disabilities, children with autism, and individuals with complex medical needs.

Public Partnerships staff are located nationally and recruited from a broad range of fields including long-term supports and services operations, social services, service coordination, financial management, payroll processing, and managed care. Positioning us as national, experienced leader with a broad perspective and deep set of skills within the HCBS self-direction industry.

We have experience providing counseling support integrated with F/EA FMS for approximately 40,000 members across three states including West Virginia. As a pioneer, we were one of the first to launch Resource Consulting (I&A) in 2007 and now have over 300 counseling staff dedicated to supporting members with all aspects of their self-directed journey. In Connecticut and Oregon, we also provide online competency-based self-direction training for members.

Certifications and applicable degrees are listed on the direct staff resumes in Appendix C. All certifications and accolades are kept in the personnel file.

The Staffing Plans are multi-level. The Executive Leadership Team (ELT) sets strategy and monitors quality for the company and oversees all operations. They are a resource to the local WV Team and easily accessible. Other members of Public Partnerships departments are readily available to WV operations and support and the local Program Manager with problem solving, revising processes and forms, enhancing systems, etc. Please refer to section 4.5.1.1 for these key staff.

In Exhibit 2 we have provided detailed information regarding our experience and qualifications including the required location of the project, project manager name and contact information, type of project, and what the project goals and objectives were and how they were met. A more complete description of past projects can be found in 4.5.2.

References follow in Section 4.5.1.4.

4.5.1 Qualification and Experience Information: Vendor should describe in its proposal how it meets the desirable qualification and experience requirements listed below.

4.5.1.1 The Vendor should propose a work plan that should include, but not be limited to, the following components:

4.5.1.1.1 Organizational Chart for the overall organization and for the Subagent F/EA FMS and related functions and includes the contractor's staff assigned to perform the required services.

4.5.1.1.2 A description of the roles, responsibilities and skill sets associated with each position on the organizational chart, which should include the following:

4.5.1.1.2.1 The Vendor should propose a key position of project manager for the Subagent-F/EA FMS with experience leading and effectively managing F/EA FMS and optional RC operations. The project manager should have a bachelor's degree from an accredited four-year college or university and have three (3) years' experience managing the provision of F/EA FMS, members' budgets and managing Subagent-F/EA FMS staff. The project manager's experience should include:

4.5.1.1.2.1.1 Leading and managing the enrollment and disenrollment of members and their representatives with a F/EA FMS entity.

4.5.1.1.2.1.2 Developing/completing Employer Enrollment and DCSW Employment/Service Provider and Vendor Engagement Packets

4.5.1.1.2.1.3 Implementing the provision of common law employer orientation and skills training for members and representatives.

4.5.1.1.2.2 The Vendor should have a payroll and invoice payment manager with a bachelor's degree from an accredited four-year college or university and two (2) years' experience processing DCSWs' hours worked and preparing and issuing DCSWs' payroll; processing and paying invoices to service providers and participant-directed vendors; and performing related activities including developing and maintaining a separate bank account, data base copies, files and records and preparing and issuing reports to participants and government agencies, as required.

4.5.1.1.2.3 The Vendor should have a key position of an ADW supervisor with a bachelor's degree from an accredited four-year college or university and two (2) years' experience working members who are self-directing their services.

4.5.1.1.2.4 The Vendor should have a key position of an IDDW supervisor with a bachelor's degree from an accredited four-year college or university and two (2) years' experience working members who are self-directing their services.

4.5.1.1.2.5 The Vendor should have a key position of a TBIW supervisor with a bachelor's degree from an accredited four-year college or university and two (2) years' experience working members who are self-directing their services.

4.5.1.1.2.6 If optional F/EA FMS Personal Care is provided, the Vendor should have a key position of a Personal Care supervisor with a bachelor's degree from an accredited four-year college or university and two (2) years' experience working members who are self-directing their services.

4.5.1.1.3 Key staff positions should be identified with named individuals and resumes demonstrating experience with participant-direction and best practices for HCBS.

4.5.1.1.4 The Vendor should have one (1) Full Time Employee (FTE) assigned to each key staff indicated except for the TBIW supervisor. Key staff should be based in West Virginia and 100% dedicated to the WV Personal Options Program.

4.5.1.1 Public Partnerships believes that one of the most important keys to a successful project is staffing competent, energetic, staff sensitive to the needs of members and their families. We employ curious, engaged, empathetic, and hardworking professionals in West Virginia to support the Personal Options program.

Currently employing ~1,000 professional managers and support staff that are leaders in the industry, Public Partnerships can direct additional staff and other resources as needed to meet future challenges such as the possible transition of the West Virginia programs to a managed care model. This level of agility combined with our demonstrated experience set us apart from our competitors.

Our dedicated team of staff has an established local presence and effective working relationships with Bureau for Medical Services (BMS) program leadership and key stakeholders including the staff at the West Virginia Tax Division, in municipalities across the state and with the Kepro, Bureau of Senior Services (BoSS) and Gainwell staff.

We take pride in the services we provide and instill in our staff the following values and competencies:

- A person-centered focus combined with the knowledge of resources and networks that support individuals across the Personal Options programs
- A working understanding of the principles and policies of the Personal Options programs
- Established relationships with the program members and familiarity with the communities in which they live
- A strong work ethic grounded in the core values of customer service, including responsiveness, compassion and knowledgeable assistance

- Knowledge and expertise regarding F/EA FMS requirements including the processes for establishing program members as the employers of record and efficiently managing payroll, tax withholding and reporting

The organizational chart provides details of Public Partnerships' overall structure, lines of authority and the functional teams for the WV Personal Options programs.

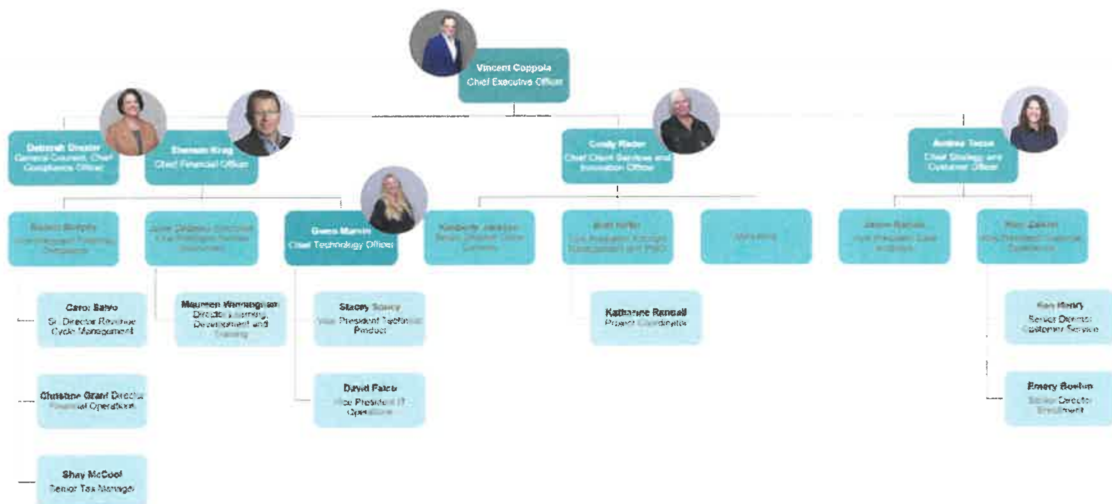


Figure 51. Leadership Organizational Structure

More specifically the figure below identifies staff critical to the operations of West Virginia.

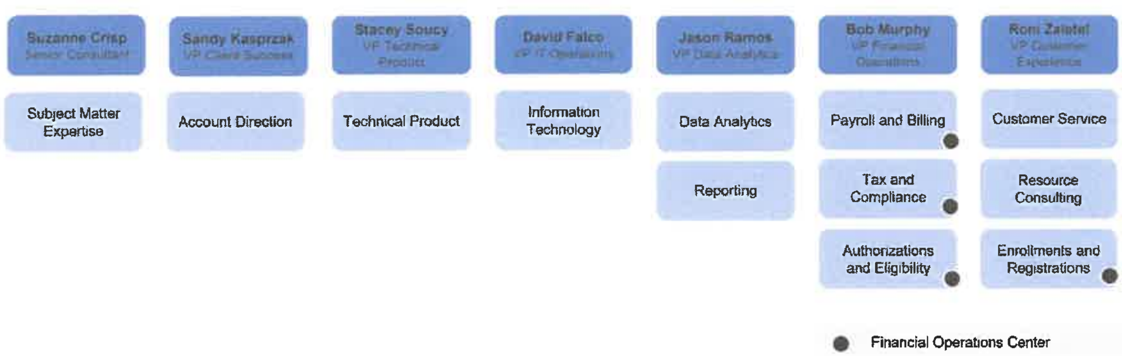


Figure 52. Functional Group Leadership

4.5.1.1.2.1 - 4.5.1.1.2.6 A description of the roles, responsibilities and skill sets associated with each position on the organizational chart.

4.5.1.1.2.1 Project Manager. The key position of Project Manager's skill set includes; leadership, service oriented, empathy, solution oriented, growth mindset, experiential knowledge of the member and provider journey, knowledge of the WV Personal Options program from the perspective of the State client and the member/provider with a deep understanding of the Public Partnerships infrastructure, a member of the communities in which we serve, understanding of HCBS functions, limitations and initiatives. Experience in designing, revising, and implementing policies and procedures that comply with state and federal rules and regulations, creation and revision of enrollment packets, development of a spending plan, training members and representatives/providers on roles and responsibilities, and interfacing with our departments to meet program outcomes. Ability to manage staff effectively ensuring that all staff are appropriately trained, empowered, and supported to succeed in their defined roles.

The project manager will be responsible for leading the West Virginia program in support of the F/EA FMS and optional Resource Consultant functions. This resource has deep experience in several key areas and longevity with not only PPL but the West Virginia program.

Katharine Randall has been with Public Partnerships and the Personal Options program since 2009. Katharine has served in nearly every role within a F/EA FMS, she has directly provided Resource Consultation, including enrollment/disenrollment of members/authorized representatives, enrolling, and training DCSW's. Katharine continues to engage with the community in various organizations who support many of the families in the Personal Options programs, which has helped with program growth. Supervising and developing cohesive teams is a strength.

Katharine has a bachelor's degree from Salisbury State University and over 14 years of relevant experience. She has 11 years of experience as a Resource Consultant and Manager in West Virginia giving her the necessary experience of:

- Leading and managing the enrollment and disenrollment of members and their representatives for Public Partnerships as the F/EA FMS entity.
- Developing and completing Employer Enrollment and DCSW Employment and Service Provider and Vendor Engagement Packets.
- Implementing the provision of common law employer orientation and skills training for members and representatives.

Katharine has the credentials, skill set, the experience, the expertise, the understanding, the foresight and the knowledge to serve as the Project Manager for the West Virginia Personal Options program.

4.5.1.1.2.2 Payroll and Invoice Payment Manager. The skill set for the key position of Payroll and Invoice Payment manager should include, meticulous attention to detail, responsiveness, leadership, understanding of all goods and services requirements, solid understanding of payroll processing, including processing pay during each pay period and ensuring the right amount goes to the right employee, using payroll software to manage employee data, managing W-2s and W-4s for employees, including deductions, withholdings, and withholding allowances, complying with IRS tax laws, paying payroll taxes, and filing taxes, employee time tracking, ability to solution and trouble shoot.

The responsibilities of the payroll and invoice payment manager include but are not limited to; ensuring vendors or service providers are in the data base, validating data and executing payment executing error free payroll, executing error free invoice payment, monitoring the payroll team and the invoice team, providing training regarding the requirements across the Personal Options programs. In addition, the payroll and invoice payment supervisor will create reports for members to provide to the Project Manager

In the key position of Payroll and Invoice Payment Manager, Tiffany Angel will be supported by the management and operations staff in Public Partnerships' Financial Operations Center (FOC). Tiffany was grandfathered into this position by the Agency.

Since joining Public Partnerships in 2014, Tiffany has provided oversight and support for F/EA FMS services to all WV programs. She has extensive knowledge of the WV program requirements and direct experience with processing DCSWs' timesheets and invoices.

Public Partnerships' Financial Operations Center is responsible for ensuring all financial transactions, including payments and taxes, are handled in an accurate and timely manner. The Financial Operations Team oversees program accounting activities including member and DCSW enrollment, payroll operations, financial analysis, tax reporting, and depository and management reporting. The Tax Team is part of the Financial Operations Center and is responsible for processing daily tax deposits, garnishment orders, information return filing, and regular tax reporting and closeout procedures. The Tax Compliance Supervisor and the Assistant Tax Compliance Supervisor manage the Tax Team. Public Partnerships also has a dedicated Enrollment Team that is responsible for processing client and support worker enrollment packets, as well as a dedicated Registration Team that is responsible for processing all required employer and employee tax forms with appropriate state and federal agencies. The Financial Operations Center also contains a dedicated Audit Team that is responsible for conducting internal monitoring and reporting to ensure compliance in meeting contract requirements.

Consolidation of these important functions enables Public Partnerships to deliver best-in-industry, scalable operations that benefit members and DCSWs. The responsibilities of the West Virginia Payroll and Invoice Manager within Public Partnerships include coordinating with the consolidated operations teams to verify all required functions and deliverables are met or exceeded per the contract.

4.5.1.1.2.3 The ADW Supervisor. The skill set for the key role of ADW supervisor includes leadership, empathetic constitution, excellent communication, deep understanding of the program, understanding of the F/EA FMS services to be provided to this program, the processes that Public Partnerships is responsible for, billing, payroll, taxes on behalf of the members, enrollment and as necessary disenrollment, customer service, active in the community in which we serve, analytical skills, and is solution focused. This role should also have experience with the elderly and disabled within the self-directed service delivery model.

The responsibilities of the ADW supervisor are to ensure staff are properly trained in the waiver, ensuring all escalations have a quick resolution, the program requirements are all met per the performance indicators and SLAs. The ADW supervisor also provides all necessary information to the Project Manager to ensure the ADW program metrics are accurately reported.

Radene Hinkle, as one of the longest tenured staff on the West Virginia Personal Options program, will continue to serve as the ADW Supervisor. She joined Public Partnerships in 2008. She is a Licensed Social Worker and has over 35 years of experience working with the elderly and disabled population. She received her bachelor's degree in social work from Concord University. Radene participates in the ADW Quality Assurance and Improvement Council and Public Partnerships' representative at the quarterly ADW statewide provider meetings. Her experience with the Personal Options program stems from working with members, DCSWs, the Agency and her understanding of the community in which we serve.

Radene Hinkle, LCW has the skill set, education, expertise, and experience to continue to provide excellent supervision to the ADW program.

4.5.1.1.2.4 IDDW Supervisor. The skill set for the key role of IDDW supervisor includes leadership, empathetic constitution, excellent communicator, active listening, knowledge of the self-directed I/DD waiver program, understanding the families we serve, familiarity with the F/EA FMS services to be provided to this program, the processes that Public Partnerships is responsible for, billing, payroll, taxes on behalf of the members, enrollment and as necessary disenrollment, customer service, active in the I/DD community, analytical skills, and solution focused.

The responsibilities of the IDDW Supervisor include ensuring all escalations have a quick resolution, all staff are properly trained in the I/DD waiver, and the program requirements are all met per the performance indicators and SLAs. The IDDW Supervisor routinely provides all necessary information to the Project Manager to ensure the IDDW program metrics are accurately reported.

Nasim Molavi joined Public Partnerships in 2013. Since that time, she has worked extensively and exclusively on the Personal Options program. Nasim's professional career has been dedicated to working with I/DD communities across the state of West Virginia. Her experience with the Personal Options program stems from working with members, DCSWs, the Agency and her understanding of the community in which we serve. She received her Bachelor of Science degree in Psychology from West Virginia University. Nasim has the education, the skills, the expertise, the credentials, and the experience within Public Partnerships to meet the needs of this role.

4.5.1.1.2.5 TBIW Supervisor. The skill set for the TBIW supervisor includes leadership, empathetic constitution, excellent communicator, active listening, working knowledge of contract requirements and program specifics of the TBI waiver program, understanding the families we serve, responsiveness, and solution focused, understanding of the F/EA FMS services to be provided to this program, the processes that Public Partnerships is responsible for, billing, payroll, taxes on behalf of the members, enrollment and as necessary disenrollment, customer service.

The responsibilities of the TBIW Supervisor include ensuring all escalations have a quick resolution, all staff are appropriately trained on the TBIW program, the program requirements are all met in accordance with the performance indicators and SLAs. The TBIW Supervisor provides all necessary information to the Project Manager to ensure the TBIW program metrics are accurately reported.

Lisa Brooks will continue to lead the TBIW team, as the TBIW supervisor. She earned a bachelor's degree in Psychology and a Masters in Organizational Leadership from Wheeling Jesuit University. She began her career more than 20 years ago as a service coordinator working with individuals with I/DD. She has been with Public Partnerships since 2011 working on the West Virginia Personal Options programs as a Resource Consultant and Supervisor. Lisa currently attends quarterly TBI Waiver Quality Improvement Advisory Council meetings and holds a certification as Brain Injury Specialist from the Brain Injury Association of America.

Lisa has the education, the skills, the credentials, the experience, and the expertise to serve as the TBIW supervisor for the TBI waiver program.

4.5.1.1.2.6 Optional Personal Care Supervisor.

The skill set for this role includes, understanding of the intersection of the State Plan Personal Care and the Personal Options program, understanding of the F/EA FMS services, the processes that Public Partnerships is responsible for; billing, payroll, taxes on behalf of the members, enrollment and as necessary disenrollment, customer service and as optional service, Resource Consulting. This person should possess similar attributes of the ADW, IDDW and the TBIW Supervisors, including the ability to lead, analytical problem solving, active listening, effective communication style, meticulously detail oriented, working knowledge of contract requirements and program offering of West Virginia State Plan Personal Care and the understanding of the families we serve.

The responsibilities of the Personal Care Supervisor include ensuring all escalations have a quick resolution, all staff are appropriately trained in the PC program, the program requirements are all met in accordance to the performance indicators and SLAs. Provide all necessary information to the Project Manager to ensure the Personal Care program metrics are accurately reported.

Suzanne Hale, LSW has been with Public Partnerships for 14 years. She has worked exclusively and extensively on the Personal Options program for the entirety of her tenure. She is well prepared to serve as our Personal Care Supervisor based on her experience as a case manager and as a Resource Consultant in West Virginia. She brings to this role a breadth of understanding of West Virginia policies and procedures related to self-direction and Medicaid. She received her Bachelor of Social Work from Marshall University. Suzanne has the education, the experience, the expertise, and the credentials to serve as the Personal Care supervisor.

4.5.1.1.3 Key staff positions should be identified with named individuals and resumes demonstrating experience with participant-direction and best practices for HCBS.

As discussed throughout this proposal, local WV staff are key to service delivery in the Mountain state. A description of the position held and staff qualifications are in sections 4.5.1.1.2.1 - 4.5.1.1.2.6. Resumes are located in Exhibit 1.

In the figure below we demonstrate the Project Manager's oversight of key staff positions.

4.5.1.1.4 The Vendor should have one (1) Full Time Employee (FTE) assigned to each key staff indicated except for the TBIW supervisor. Key staff should be based in West Virginia and 100% dedicated to the WV Personal Options Program.

Public Partnerships confirms that each key position, Project Manager, ADW Supervisor, IDDW Supervisor and the optional Personal Care Supervisor, will continue to be filled with one full-time staff person, 100% dedicated to the WV Personal Options Program, as described in Section 4.5.1.1.2. We understand that our proposed TBIW supervisor is not required to be full time; regardless her qualifications will allow her to be extremely effective even if the TBIW grows.

Figure 53. West Virginia Key Staff Organizational Chart.

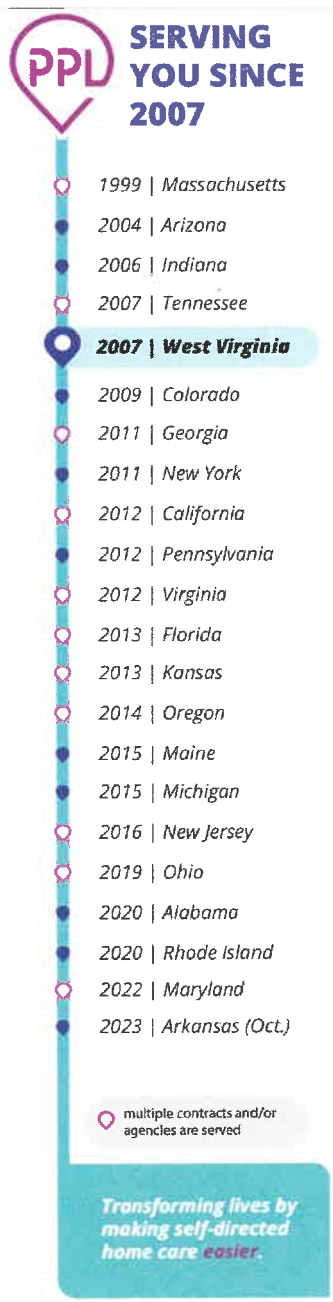
4.5.1.2 The Vendor should have management and operations staff with five (5) years' experience in providing F/EA FMS services, and serving older adults and individuals with physical, intellectual, and developmental disabilities and traumatic brain injury and their representatives, as necessary.

Our management and operations staff have a minimum of five (5) years' experience providing all aspects of F/EA FMS services. Public Partnerships is uniquely positioned as our average experience in serving individuals in the West Virginia program, exceeds five years of experience. We have served West Virginia for over 16 years to provide F/EA FMS subagent and Resource Consultant services, with many of our current management and operations staff making their life's work serving West Virginia self-directing waiver populations. For example, our Project Manager, Katharine Randall, started out as a Resource Consultant with us 14 years ago and will continue to oversee management and operations staff on the next contract. Our experienced, local staff are subject matter experts when it comes to West Virginia's self-direction waivers and the populations they serve. Our staff are committed to making self-direction easier for the members in West Virginia. Within our experience we have served a variety of populations including older adults and individuals with physical, intellectual, and developmental disabilities and traumatic brain injury and their representatives. Our close ties within West Virginia alongside our national footprint within F/EA FMs allow us access to state agency leaders, MCO executives, subject matter experts, and other industry leaders. Please see Section 4.5.1.1 and resumes in Exhibit 1 for more details about our local staff.

In West Virginia, we regularly attend local conferences. We are deeply engrained and involved within the communities of West Virginia, as well as the advocacy organizations.

Recognizing the importance of the voice of the individuals we serve, Public Partnerships has started a **National Advisory Committee** comprised of *members, legal guardians, and employees* from states throughout the country. The role of the Committee member is to advocate for self-directed services. Members will also have the opportunity to provide feedback and influence change to PPL forms, packets, and training and education materials available to members and their employees, as well as provide feedback on systems and processes used by PPL. We are working closely with our current Project Manager for representation on the Committee from the West Virginia program. The Agency Contract Manager will have final approval over who is selected from West Virginia to serve on this Committee.

4.5.1.3 The Vendor should have experience in providing F/EA FMS (either as a subagent to a Government F/EA FMS agency or as a Vendor F/EA FMS entity) to Medicaid members. The Vendor should provide a narrative that demonstrates its experience in providing F/EA FMS services, as the subagent to a Government or Vendor F/EA FMS and providing optional RC services, has considered all the requirements, and developed an approach that will support the continued successful implementation of self-directed services in West Virginia.



Public Partnerships, founded in May 1999, has been providing financial administration functions in self-directed services for 24 years. In 2006 we added Supports Broker functions. We are registered as a fiscal agent to perform withholding, filing and depositing employer-related taxes under Section 3504, Rev. Proc. 70-6, Proposed Notice 2003-70 of the Internal Revenue Code. We serve members and workers in 21 states across a variety of waiver and state plan services including employer authority and budget authority. We provide fiscal management services in both the fee for service and the managed care model, including state funded programs, Medicaid State Plan funded, 1115, 1915 (b), 1915 (c) and 1915 (j) waivers serving aging adults, individuals with disabilities, individuals with intellectual and developmental disabilities, children with autism, and individuals with complex medical needs. In our 24 years we have:

- Paid thousands of workers
- Applied for thousands of FEIN numbers
- Processed thousands of employer and employee enrollment packets
- Created easy to understand employer and employee training materials
- Paid taxes on behalf of thousands of workers
- Created thousands of W-2s
- Paid goods and services on behalf of participants
- Reconciled thousands of claims on behalf of our participants
- Answered countless phone calls
- Collected time entries from thousands of workers, via paper, fax, mobile application and phone

- Created our own 21st Century Cures Act compliant time capture solution, Time4Care mobile application used by thousands of participants and their workers

Designed and created a web portal used by thousands of participants and their workers

For 16 of those 24 years, we have successfully provided Resource Consulting. We began providing Resource Consulting services in West Virginia and Tennessee in 2007, followed by New Jersey in 2016. Since PPL began providing information and assistance as Resource Consultants, we have:

- Built the largest, most experienced Supports Brokerage team in the country
- Adapted our role for the inclusion of managed care organizations and their care coordinators
- Developed budgeting tools that make managing supports and services in self-directed models easier
- Driven thousands and thousands of miles to meet participants and workers
- Completed thousands of enrollments
- Counseled thousands of participants on their spending plans
- Assisted in creating thousands of back up plans
- Trained thousands of participants and workers on our proprietary technology
- Provided training and support for thousands of new employers of record
- Ensured the completion of thousands of background checks
- Have had the privilege of deeply meaningful relationships with our clients

PPL continues to review and refine its approach to providing information and assistance. The combination of our extensive experience with F/EA FMS and Information and Assistance, alongside our policy expertise, positions Public Partnerships to continue to be the best partner for West Virginia.

Today, Public Partnerships continues to be an industry leader. We are:

- A trusted partner to states and MCOs, with continuous contracts for more than 5 years in 19 states.
- A member of the original National Resource Center for Participant-Directed Services.
- Supportive to many advocacy groups, locally and nationally
- Co-Author of the Fiscal/Employer Agent Core Standards
- Repeatedly selected to present at the national Home and Community Based Services Conference on quality assurance in participant-directed options.

We are the current F/EA FMS for the following programs:

PROVEN INDUSTRY LEADERSHIP

AL	25 individuals served	3 years
AZ	500 individuals served	19 years
CA	1,500 individuals served	11 years
CO	3,200 individuals served	14 years
FL	2,700 individuals served	10 years
GA	10 individuals served	12 years
IN	200 individuals served	17 years
KS	200 individuals served	10 years
MA	1,400 individuals served	24 years
MD	100 individuals served	1 year
ME	20 individuals served	8 years
MI	300 individuals served	8 years
NJ	36,000 individuals served	7 years
NY	1,300 individuals served	12 years
OH	3,250 individuals served	4 years
OR	8,100 individuals served	9 years
PA	700 individuals served	11 years
RI	100 individuals served	3 years
TN	4,230 individuals served	16 years
VA	13,000 individuals served	11 years
WV	4,900 individuals served	16 years

Intellectual/Developmental Disabilities Aging Physical Disabilities Traumatic Brain Injury

Figure 54. PPL Portfolio by State.

Our experience with one waiver in 1999 provided Public Partnerships with the opportunity to become a subject matter expert and be at the forefront of policy change and growth in Self-Direction. Currently across our portfolio we serve the following waivers and plans.

More than two decades later, PPL is proud of the difference we have made in the lives of thousands of individuals with disabilities, those with chronic illnesses, and the elderly, by supporting their choice to remain independent and active within their chosen community. Our mission remains clear and simple: ***To transform more lives by making self-directed home care easier for ALL.***

21 States

- **11** 1915(c)
- **5** 1115
- **3** 1915(b)/(c)
- **1** 1915 (j)
- **5** Federal/State Funded
- **2** Medicaid State Plan

Figure 55. We serve several plans across our portfolio.

Public Partnerships has the demonstrated experience in providing F/EA FMS services, as the subagent to many states and health plans, as well as experience providing Resource

Consultant services for three states collectively supporting more than 35,000 members. We have thoroughly reviewed and considered all the requirements outlined in this CRFP and we affirm that Public Partnerships understands and will comply with each. The approach that we present throughout sections 4.2, 4.3. and 4.4 meet and exceed the mandatory requirements and allow us to continue to support West Virginia in its successful offering of self-directed services. As the incumbent, our focus will be to continue to enhance current services versus implementation. Our approach builds on our firm foundation and existing structures developed and refined side-by-side with the Agency since 2007. Working collaboratively with the Agency we will continue to look for ways to optimize our delivery and customer service. We pride ourselves on the deep relationships we have built and assure the Agency that the entirety of Public Partnerships is committed to its success.

4.5.1.4 The Vendor should provide detailed information from three (3) references detailing evidence of their experience in providing both Subagent F/EA FMS and optional RC services described in this RFP performed in the past three (3) years. References should include contact name, phone number, email address and the responsible project administrator familiar with the firms' performance; along with length of time the vendor provided services, what type of services and level of satisfaction (i.e.-(1) Not Satisfied with explanation, (2) Satisfied, (3) Very Satisfied).

Public Partnerships is pleased to present the following three references from current long-standing clients. In addition to our experience successfully performing the F/EA FMS and Resource Consulting scope of work for West Virginia since 2007, we have performed a similar scope of work for New Jersey and are primed to do the same for Florida Community Care. Our Colorado experience demonstrates a similarly tenured client with Public Partnerships, serving similar populations, where we have supplemented our scope of work to include advocacy for expanding self-direction in that State.

1 New Jersey

Division of Medical Assistance and Health, and Division of Developmental Disabilities Personal Preference and Supports Programs

7 years FMS Supports Brokerage	Rebecca Thomas Program Administrator (609) 651-2502 Rebecca.Thomas@dhs.nj.gov	It is not NJ DMAHS practice to respond to level of satisfaction related questions in reference requests. Please call should you want to confirm performance.

Project Background: **New Jersey** sought a more streamlined approach to fiscal/employer agent functions in 2015, seeking a single vendor capable of managing multiple programs and growing those programs at statewide scale over time.

Public Partnerships' Role: PPL has facilitated significant growth of the self-direction model in New Jersey, in part by offering counseling services to participants that help them understand how to serve as an employer and how to manage their budget. We are very proud of our work in these communities throughout the state to closely serve thousands of program constituents.

We provide the full range of financial management services solutions, from enrollment, through time capture and payroll and concluding with the submission of claims to the state MMIS system and to managed care organizations (MCOs). We also offer a "goods and services" solution in New Jersey to facilitate billing of non-payroll items participants can utilize as part of their waiver budgets.

2 Florida

Florida Participant Direction Option is available through Florida Community Care

10 years

F/EA FMS I&A, Supports Brokerage*

implementing July 2023

Jesus Tundidor, MBA
Delegation Oversight Manager

305.262.1292
ext. 103870

jtundidor@fcchealthplan.com

Not Satisfied	Satisfied	Very Satisfied
○	○	●

Project Background: **Florida's** Participant Direction Options (PDO) program is available to Medicaid-eligible managed care members who are elderly and/or disabled. The managed care plans that Florida contracts with select the FMS to perform the fiscal intermediary function for the PDO program. Self-direction is available to members who receive at least one of the following five services: homemaker, personal care, adult companion care, attendant care, and/or intermittent nursing services (LPN/RN).

Public Partnerships' Role: Public Partnerships currently contracts with two health plans in Florida as the FMS for PDO. Our responsibilities include: managing enrollment packets, processing criminal background checks for workers, and processing biweekly payroll. We have staff on the ground in Florida who engage in the community to present and educate about self-direction at conferences, association meetings, and at senior centers.

We are set to expand our services to provide support broker (resource consultant) services to the Florida Community Care (FCC) plan starting July 1, 2023. We worked with FCC to launch the support broker service based on our experience in WV, TN, and NJ and our knowledge and understanding that separating support broker services from case management services is the ideal arrangement for self-direction.

3 Colorado

Colorado Department of Health Care Policy and Financing, HCBS Waiver programs including Elderly, Blind and Disabled, Brain and spinal cord injuries.

14 years

FMS

Jessica Coral

(303) 866-3504

Jessica.Corral@state.co.us

Not Satisfied	Satisfied	Very Satisfied
○	●	○

Project Background: **Colorado's** Consumer-Directed Attendant Support Services (CDASS) is a compilation of several HCBS waivers that include self-direction and require the assistance of an FMS. The programs are complex as they allow members to self-direct 45 different services across four waivers.

Public Partnerships' Role: Public Partnerships provides both financial and personnel services for CDASS including the processing of all timesheets, payroll, and attendant applications as well as, providing skills training to participants to ensure that they understand the philosophy of consumer direction, are able to manage their budgets and recognize and monitor the quality of services s/he receives. We assist CDASS with its rigorous rules regarding EVV through our proprietary app, Time4Care, where we provide regular reporting of EVV compliance and work closely with the State's MMIS and data aggregator to monitor compliance.

4.5.2. Mandatory Qualification/Experience Requirements: The Vendor and/or any sub-contractors shall have at least 5 years' experience providing Government Fiscal/Employer Agent (F/EA) Financial Management Service (FMS) and the optional support brokerage services comparable to the size and scope of the program(s) outlined in this RFP.

4.5.2.1. The Vendor and/or any subcontractors shall have at least five (5) years' experience providing Government Fiscal/Employer Agent (F/EA) Financial Management Services (FMS) and the optional support brokerage (Otherwise known as Resource Consulting (RC) services comparable to the size and scope of the program(s) outlined in this RFP.

Public Partnerships has at least five (5) years' experience providing Fiscal/Employer Agent (F/EA) Financial Management Service (FMS) and the optional Resource Consulting (RC) services comparable to the size and scope of the program.

We have 24 years of experience supporting F/EA FMS functions across 22 states. 16 of those 24 years we have provided support brokerage services. For 16 of our 24 years, we have provided both F/EA FMS and supports brokerage services for Tennessee and Resource Consulting to West Virginia.

16 years of experience providing F/EA FMS and information and assistance through Resource Consulting in comparable size and populations.

We exceed the Mandatory Qualification/Experience Requirements providing F/EA FMS and the optional Resource Consulting.

The combination of our experience with F/EA FMS and Resource Consulting, alongside our policy expertise, positions Public Partnerships to continue to be the best partner for West Virginia.

We have provided Supports Brokerage/Resource Consulting to the following programs who are comparable in size and scope of the West Virginia Personal Options program.

New Jersey Division of Medical Assistance and Health, And Division Of Developmental Disabilities Personal Preference And Supports Programs

Contract Term: 2016 – Present

In 2016, PPL was selected by the New Jersey Department of Human Services as the statewide Fiscal Intermediary and Cash & Counseling Service provider for the Division of Medical Assistance and Health Services (DMAHS). PPL provides financial counseling (comprehensive supports brokerage) for approximately 25,000 participants enrolled in the Personal Preference Program (PPP), one of the flagship Cash and Counseling programs. The PPP program serves elderly and adults with disabilities. PPL's financial counselors conduct in-home and virtual orientation and training and enrollment for participant employers, help develop individual spending plans (known as cash management plans as this program allows a portion of the budget to be taken as cash), assist with recruitment of direct support professionals, and provide ongoing supports for self-direction, including purchasing goods and services. More recently, PPL has begun to provide I&A services for individuals with intellectual and developmental disabilities participating in the Supports Waiver.

State of Tennessee, Division of TennCare, TennCare Employment and Community First CHOICES Waiver Program

Contract Term: 2007- Present

The Tennessee Medicaid Department, TennCare, administers the Employment and Community First CHOICES waiver program serving aging adults and individuals with disabilities. The CHOICES program grants participants employer authority to recruit and hire employees, establish wages and set worker schedules. PPL provides supports brokerage services for over 4,400 participants. Our services include education and training on self-direction, enrollment, and assistance in developing emergency back-up plans.

Our support brokers ensure that participant and provider enrollment is completed accurately and timely. Support brokers also provide training and outreach to case managers from Managed Care Organizations (MCOs) and Area Agencies on Aging and Disability (AAADs).

State of West Virginia, Department of Health and Human Resources, Bureau for Medical Services Personal Options Program

Contract Term: 2007 – Present

The West Virginia Bureau for Medical Services contracts with PPL to provide FMS and counseling services for Personal Options (the self-directed service option available within the Aged and Disabled waiver program, the Intellectual and Developmentally Disabled waiver program, and the Traumatic Brain Injury waiver program). Personal Options provides over 4,900 waiver participants with full budget authority and employer authority.

PPL resource consultants conduct in-home and virtual orientation and training and enrollment, help develop individual spending plans, assist with recruitment of direct support professionals, and provide ongoing supports for self-direction, including purchasing goods and services were permitted.

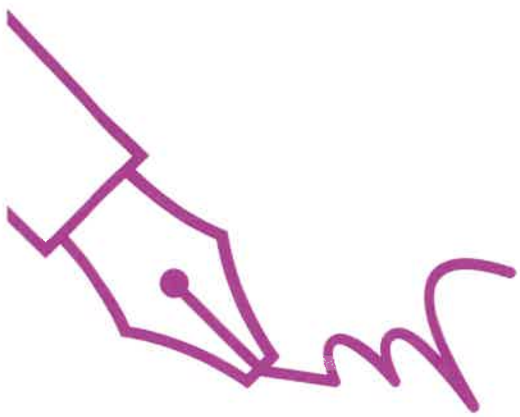
16 years of experience providing F/EA FMS and information and assistance through Resource Consulting in comparable size and populations.

We exceed the Mandatory Qualification/Experience Requirements providing Resource Consulting to comparable to the size and scope of the West Virginia Personal Options program.

Today, Public Partnerships continues as an industry leader, serving more states, more members and more workers in both F/EA FMS provision and F/EA FMS combined with Resource Consulting.

In Exhibit 3 we have provided detailed information regarding our experience and qualifications including the required location of the project, project manager name and contact information, type of project, and what the project goals and objectives were and how they were met.

EXHIBIT 1. SECTION 6: EVALUATION AND AWARD



REQUEST FOR PROPOSAL
CRFP BMS2300000003
Fiscal/Employer Agency Support to Self-Direction Members

SECTION 6: EVALUATION AND AWARD

6.1. Evaluation Process: Proposals will be evaluated in two parts by a committee of three (3) or more individuals. The first evaluation will be of the technical proposal and the second is an evaluation of the cost proposal. The Vendor who demonstrates that it meets all of the mandatory specifications required, attains the minimum acceptable score and attains the highest overall point score of all Vendors shall be awarded the contract.

6.2. Evaluation Criteria: Proposals will be evaluated based on criteria set forth in the solicitation and information contained in the proposals submitted in response to the solicitation. The technical evaluation will be based upon the point allocations designated below for a total of 700 of the 1000 points. Cost represents 300 of the 1000 total points.

Evaluation Point Allocation:

Project Goals and Proposed Approach (§ 4.2)	
- Approach & Methodology to Goals/Objectives (§ 4.2.1)	(350) Points Possible
Optional Services (§ 4.3)	
- Approach & Methodology to Optional Services (§ 4.3.1)	(100) Points Possible
- Approach & Methodology to Compliance with Mandatory Project Requirements (§ 4.4)	(100) Points Possible
Qualifications and experience (§ 4.5)	
- Qualifications and Experience Generally (§ 4.5.1)	(100) Points Possible
- Exceeding Mandatory Qualification/Experience Requirements (§ 4.5.2)	(50) Points Possible
(Oral interview, if applicable) (§ 4.6) (N/A)	(0) Points Possible

Total Technical Score: 700 Points Possible

Total Cost Score: 300 Points Possible

Total Proposal Score: 1000 Points Possible

6.3. Technical Bid Opening: At the technical bid opening, the Purchasing Division will open and announce the technical proposals received prior to the bid opening deadline. Once opened, the technical proposals will be provided to the Agency evaluation committee for technical evaluation.

6.4. Technical Evaluation: The Agency evaluation committee will review the technical proposals, assign points where appropriate, and make a final written recommendation to the Purchasing Division.

6.5. Proposal Disqualification:

6.5.1. **Minimum Acceptable Score ("MAS"):** Vendors must score a minimum of 70% (49 points) of the total technical points possible in order to move past the technical evaluation and have their cost proposal evaluated. All vendor proposals not attaining the MAS will be disqualified.

6.5.2. **Failure to Meet Mandatory Requirement:** Vendors must meet or exceed all mandatory requirements in order to move past the technical evaluation and have their cost proposals evaluated. Proposals failing to meet one or more mandatory requirements of the RFP will be disqualified.

6.6. Cost Bid Opening: The Purchasing Division will schedule a date and time to publicly open and announce cost proposals after technical evaluation has been completed and the Purchasing Division has approved the technical recommendation of the evaluation committee. All cost bids received will be opened. Cost bids for disqualified proposals will be opened for record keeping purposes only and will not be evaluated or considered. Once opened, the cost proposals will be provided to the Agency evaluation committee for cost evaluation.

The Purchasing Division reserves the right to disqualify a proposal based upon deficiencies in the technical proposal even after the cost evaluation.

6.7. Cost Evaluation: The Agency evaluation committee will review the cost proposals, assign points in accordance with the cost evaluation formula contained herein and make a final recommendation to the Purchasing Division.

Cost Evaluation Formula: Each cost proposal will have points assigned using the following formula for all Vendors not disqualified during the technical evaluation. The lowest cost of all proposals is divided by the cost of the proposal being evaluated to generate a cost score percentage. That percentage is then multiplied by the points attributable to the cost proposal to determine the number of points allocated to the cost proposal being evaluated.

Step 1: Lowest Cost of All Proposals / Cost of Proposal Being Evaluated = Cost Score Percentage

Step 2: Cost Score Percentage X Points Allocated to Cost Proposal = **Total Cost Score**

Example:

Proposal 1 Cost is $1,000,000
Proposal 2 Cost is $1,100,000
Points Allocated to Cost Proposal is 300

Proposal 1: Step 1 – $1,000,000 / $1,000,000 = Cost Score Percentage of 1 (100%)
Step 2 – 1 X 300 = Total Cost Score of 300

Proposal 2: Step 1– $1,000,000 / $1,100,000 = Cost Score Percentage of 0.909091 (90.9091%)
Step 2 – 0.909091 X 300 = Total Cost Score of 272.7273

6.8. Availability of Information: Proposal submissions become public and are available for review immediately after opening pursuant to West Virginia Code §5A-3-11(h). All other information associated with the RFP, including but not limited to, technical scores and reasons for disqualification, will not be available until after the contract has been awarded pursuant to West Virginia Code of State Rules §148-1-6.3.d.

By signing below, I certify that I have reviewed this Request for Proposal in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that, to the best of my knowledge, the bidder has properly registered with any State agency that may require registration.

Public Partnerships LLC
(Company)

Cindy Rader, Chief Client Services and Innovation Officer
(Representative Name, Title)

732-447-8207/866-260-6260
(Contact Phone/Fax Number)

6/7/2003
(Date)

Cindy Rader
Cindy Rader (Jun 5, 2023 17:10 EDT)

EXHIBIT 2. KEY STAFF RESUMES

KATHARINE RANDALL, *Project Manager*

EDUCATION

Salisbury State University
Salisbury, MD
BACHELOR OF ARTS – *Social Work*

CERTIFICATIONS AND TRAINING

Licensed Social Worker – West Virginia

Project Management Training – PPL

Management Certification Program Training - PPL

Person-Centered Planning and Assessment Training

CMS Fraud, Waste and Abuse Training

Katharine Randall brings over 14 years of relevant experience to the Project Manager role supporting West Virginia's Personal Option Program. As a resident and licensed Social Worker in West Virginia, Katharine understands the member experience within the State. She began her PPL career as a Resource Consultant, out in the field, experiencing the impact that these three Medicaid HCBS waivers have in the community. Prior to PPL, Katharine served as a Housing Coordinator and Advocate in various communities in West Virginia, including assisting people with disabilities, establishing a firm foundation in community engagement across the State. Currently, as the Account Manager in the role of Project Manager, Katharine manages the day-to-day of delivering F/EA FMS and Resource Consultant services. As the Project Manager, Katharine will continue to serve as the primary point of contact for the Agency, attending monthly and quarterly meetings and available to the Agency, as needed, during normal business hours. Katharine will coordinate across all functions of PPL and have direct influence and line of sight into each team. Katharine will communicate Agency directives to teams and receive daily updates in turn, with an emphasis on improved coordination and accountability with Resource Consultant staff. The following experience and characteristics of Katharine demonstrate that she is qualified and capable of performing the duties of the Project Manager position.

- Proven leader, skilled at cross-functional coordination of internal teams
- Experienced with functions of a F/EA FMS entity, especially leading and managing enrollment/disenrollment of members and their representatives

- First-hand experience developing and assisting with completion of forms and enrollment packets with employers, workers, and vendors
- Experienced at designing and implementing trainings for various stakeholders, including common law employer orientation and skills training for members and representatives
- Extensive experience facilitating meetings and delivering trainings
- Adept at developing collaborative and positive relationships with clients and stakeholders
- Strong communication and presentation skills
- Subject Matter Expert in long-term service and supports programs, HCBS waivers, and vendor reimbursement
- Experienced managing three Home- and Community-Based Services (HCBS) Medicaid Waiver Programs
- Self-motivated, consistently producing high-quality results within identified timelines

RELEVANT PROJECT EXPERIENCE

Public Partnerships LLC – *2009 - Present*

Account Manager, *West Virginia Personal Options Program*

January 2020 to Present

- Manages client interaction and relationships as well as complex daily project functions within internal teams.
- Promotes technology improvements, particularly launch of EVV and continuous feature upgrades intended to increase utilization.
- Develop and facilitate trainings and new curriculum with effective and structured materials, lead staff trainings when policies change and at the launch of new systems or procedures.
- Serve as the subject matter expert of the WV ADW, I/DD, TBI and TMH Waivers.
- Explores opportunities for growth and program development and improvement.
- Collaborate effectively with different internal project teams to improve processes and implement new services.

- Engages with the community, attends regional conferences to educate about self-direction.

Supports Broker/Manager, *West Virginia Personal Options Program*

2009- January 2020

- Supported the management of the three Medicaid Home and Community Based Waiver Programs (Aged and Disabled, Intellectual and Developmental Disabilities and Traumatic Brain Injury) in the West Virginia contract.
- Responsible for the management, supervision, training, and compliance for the 41 Support Broker staff in WV.
- Attended monthly contract meetings as the subject matter expert with state client and stakeholders.
- Trained all staff upon hiring on Medicaid policies and regulations as well as Person-Centered Planning.
- Attended Aged and Disabled and Traumatic Brain Injury Quality Assurance Council and Quarterly Provider meetings to provide input for policy and procedure improvement as well as education and insight for the self-directed portion of the Home and Community Based waiver programs.

RELEVANT EXPERIENCE

Northern WV Center for Independent Living - *March 2007 – April 2008*

Housing Director/Advocate

- Responsible for providing resources and information regarding housing related services for people with disabilities and to interested clients throughout West Virginia.
- Executed a Fair Housing Initiatives Program (FHIP) grant through HUD, to educate the public about the laws of Fair Housing in Design and Construction as well as with Human Rights issues.
- Worked with HUD, WV Housing Development Fund and other state and federal housing entities to further fair housing through education and outreach.
- Conducted seminars and coordinated public speaking events throughout the state.

- Assisted with advocacy and referral to community agencies as needed to assist members in finding appropriate housing and understanding their rights and responsibilities under the laws of Fair Housing.

Harrison County Housing Authority - *September 2003-October 2006*

Housing Coordinator, Inspector, Assistant Director

- Coordinated multiple loan programs designed to place low to moderate income families in affordable housing.
- Developed a program to provide credit counseling and training programs for participants to assist them with working through financial barriers and into becoming homeowners.
- Managed the rental inspection department for the Section 8 Rental Program.
- Trained Housing Authority employees and other loan originators throughout the State.

Central West Virginia Community Action Assoc., *April 1997- June 2001*

Housing Coordinator / Family Mentor Counselor

- Coordinated with local DHHR office on the Welfare-to-Work program to provide participants with tools for education and job opportunities.
- Worked directly with WVHDF administration to secure 28 loans for homes North Central West Virginia through special financing.
- Received grant (CHDO) to develop a neighborhood in Salem, WV consisting of 6 single family homes.
- Developed the Family Mentor Program to assist welfare clients' move to self-sufficiency through counseling, budgeting, and financial literacy courses.
- Wrote CHDO and other grants through WVHDF and Community Works to secure funding for programs.

TIFFANY ANGEL, *Payroll and Invoice Manager*

Ms. Angel brings over 20 years of relevant experience to the Payroll and Invoice Manager role supporting West Virginia's Personal Options Program. As a resident of West Virginia and former State employee, Tiffany knows what it takes to serve the waiver population. The early stages of her career started her on a path with the West Virginia Bureau for Behavioral Health & Health Facilities, serving what has become the I/DD Waiver population. Her journey continued on that path with Kepro (formerly APS Healthcare), which all prepared her for her current role at Public Partnerships continuing to serve West Virginia's Medicaid waiver populations. Currently, as the Payroll and Invoice Manager, Tiffany manages the day-to-day of executing the process to reimburse vendors for goods and services, as well as addressing any payroll-related issues. The following experience and characteristics of Tiffany demonstrate that she is qualified and capable of performing the duties of the Payroll and Invoice Manager position.

CERTIFICATIONS AND TRAINING

Getting Things Done

Crucial Conversations

GRIT

Six Sigma Training

- Experienced with functions of a F/EA FMS entity, especially enrollment and payment of goods and services
- First-hand experience developing and assisting with the completion of forms and enrollment packets with employers, workers, and vendors
- Adept at developing collaborative and positive relationships with clients and stakeholders
- Strong communication skills
- Subject Matter Expert in enrollment and vendor reimbursement
- Self-motivated, consistently producing high-quality results within identified timelines

RELEVEANT PROJECT EXPERIENCE

Public Partnerships LLC *2014 - Present*

Account Specialist/Payroll and Invoice Manager, *September 2022 to Present*

West Virginia Personal Options Program

- Serves as overall manager of payroll and invoicing while coordinating within the Financial Operations Center.
- Manages the review and process of Goods and Services (G&S) and EAA applications and payment request forms, including adding new vendors to the web portal.
- Coordinates the processing and payment of invoices for G&S and EAA, and professional therapy services, including tracking all documentation, e.g., receipts and internal and external reporting.
- Monitors invoice payments throughout the payment process.
- Researches and resolves escalated issues related to payroll and invoices for the WV programs.
- Responsible for updating Policies and Procedures related to payroll and invoicing.
- Communicates with vendors, staff, participants, and providers regarding issues and questions.

Enrollment Supervisor, *July 2019 to September 2022*

Various State Contracts

- Collaborated with other Enrollment Supervisors to standardize Enrollment tasks.
- Provided cross training to all staff
- Developed training materials, new Standard Operating Procedures (SOP) specific for Enrollment processes
- Facilitated staff meetings to ensure all staff were kept abreast of updates within department
- Reviewed reports to ensure compliance with contractual obligations
- Participate in team meetings regarding SLA timelines, Enrollment Management team, and special projects.
- Responded to Enrollment escalations

Senior Business Process Analyst (Enrollment), *February 2018 to July 2019*

Various Contracts

- Reviewed Standard Operating Procedures (SOP) or Process and Procedures (P&Ps) for Enrollment and update as necessary
- Standardized Enrollment tasks across all states

- Assisted with subject matter expertise for RFP responses
- Provided analysis of special projects regarding Enrollment

Business Analyst, *February 2014 - February 2018*

West Virginia Personal Options Program

- Provided support in improving policy, program, and operational objectives.
- Primary point of contact for ongoing communications with the client.
- Responsible for a variety of tasks to support the program: preparing training material, completing criminal background check process for all participant employees, and processing WV Cares payments.
- Updated standard operating procedures and policies and procedures documentation.

RELEVANT EXPERIENCE

APS Healthcare (now Kepro) - *April 2010 - February 2014*

Member and Family Liaison

- Supported contract with West Virginia I/DD Waiver
- Provided training and assistance to participants and families regarding participation in the I/DD Waiver
- Conducted focus groups and surveys, and managed a committee of participants and providers to identify improvements to procedures

West Virginia Bureau for Behavioral Health & Health Facilities - *October 2000 to April 2010*

Administrative Services Assistant I/Secretary I

- Designed a database to organize and store MR/DD Waiver program data.
- Managed and organized information related to the MR/DD Waiver.
- Primary point of contact to obtain information for MR/DD Waiver hearings.
- Created procedures for MR/DD Waiver hearings and administered hearings.
- Performed process improvements and assisted with the development of documentation, e.g., manuals.

RADENE HINKLE, *ADW Supervisor*

EDUCATION

Concord University, *St. Athens WV*

BACHELOR OF SOCIAL WORK

CERTIFICATIONS AND TRAINING

Wv Notary Public

Ms. Hinkle brings over 40 years of relevant experience to the I/DDW Supervisor role supporting Personal Options members. As a seasoned Resource Consultant, Radene understands the ADW member experience within the State. Prior to joining Public Partnerships, Radene worked directly with the aged and disabled population as a Medical Social Worker and as a Case Manager. She began her career at Public Partnerships as a Resource Consultant, supporting the ADW population out in the field. Currently, as the ADW Supervisor, Radene ensures all escalations have a quick resolution, all staff are properly trained in the waiver, and the program requirements are all met per the performance indicators and SLAs. She regularly communicates and collaborates with our Project Manager. The following experience and characteristics of Radene demonstrate her qualifications to perform the duties of the ADW Supervisor role.

- Respected supervisor skilled at mentoring and overseeing staff
- Experienced with functions of a F/EA FMS entity, especially leading and managing enrollment/disenrollment of members and their representatives
- First-hand experience developing and assisting with the completion of forms and enrollment packets with employers, workers, and vendors
- Experienced in training internal F/EA FMS staff and Resource Consultants, as well as training employers and DCSWs
- Effective communication and presentation skills
- Subject matter expert in HCBS and Aged and Disabled Waiver population

RELEVANT PROJECT EXPERIENCE

Public Partnerships LLC - *2008- Present*

Resource Consultant Supervisor, West Virginia Personal Options Program

- Serves in the role of ADW Supervisor as F/EA FMS for WV's Aged and Disabled Waiver.
- Orient, train and supervise Resource Consultants.
- Supports the monitoring of member services, health, and safety through coordination with State staff.

- Tracks incidents and coordinates audit activities for the ADW.
- Participates in program material development through the ADW Quality Improvement Council.
- Experienced supporting WV Medicaid Fraud Unit investigations and prosecutions.
- Create and coordinate training for new Resource Consultants.
- Conduct monthly staff meetings regarding project updates and policy changes.
- Attend monthly Waiver Contract Meetings with the WV Bureau of Medical Services.
- Assist with the review and revision of internal policies and training materials.

RELEVANT EXPERIENCE

Coordinating Council for Independent Living - *2000-2008*

Case Manager

- Performed case management services for participants in the West Virginia ADW program.
- Monitored participant services, home and safety issues, and support systems.
- Monitored and updated participant Service Coordination Plans.
- Assisted with advocacy and referral to community agencies to allow participants to remain in their homes.

Appalachian OH-9 Inc/Mountaineer Home Nursing - *1982-2000*

Medical Social Worker

- Provided social services to homebound patients receiving skilled nursing care.
- Conducted home visits for assessment of needs, advocacy, and referral to community resources.
- Counseled patients and families to assist with the recovery process or end-of-life care per the physician's plan of treatment.

NASIM MOLAVI, *I/DDW Supervisor*

EDUCATION

West Virginia University
Morgantown, WV

BACHELOR OF SCIENCE – Psychology/Minor in Philosophy

CERTIFICATIONS AND TRAINING

WV Notary Public

Ms. Molavi brings over 15 years of relevant experience to the I/DDW Supervisor role supporting Personal Options members. As a resident of West Virginia and an experienced Resource Consultant, Nasim understands the I/DDW member experience within the State. She began her PPL career as a Resource Consultant, out in the field. Prior to joining PPL, Nasim served as a support coordinator where she developed her passion for supporting individuals with intellectual and developmental disabilities. Currently, as the I/DDW Supervisor, Nasim ensures all escalations have a quick resolution, all staff are properly trained in the I/DD waiver, and the program requirements are all met per the performance indicators and SLAs. She regularly communicates and collaborates with our Project Manager. The following experience and characteristics of Nasim demonstrate that she is qualified and capable of performing the duties of the I/DDW Supervisor position.

- Experienced with functions of a F/EA FMS entity, especially leading and managing enrollment/disenrollment of members and their representatives
- First-hand experience developing and assisting with the completion of forms and enrollment packets with employers, workers, and vendors
- Experienced in training internal F/EA FMS staff and Resource Consultants, as well as training employers and DCSWs
- Effective communication and presentation skills
- Skilled at assessing, revising, and developing forms, policies, and procedures.
- Subject matter expert in HCBS and Intellectual and Developmental Disabilities Waiver
- Solutions focused, organized and detail-oriented

RELEVANT PROJECT EXPERIENCE

Public Partnerships LLC - *July 2013- Present*

Resource Consultant Supervisor, West Virginia Personal Options Program

- I/DDW Supervisor for WV's largest program. Bi-weekly participant status review, monthly incident reporting, attending monthly contract meetings with our state client, and addressing escalations.
- Supervise a team of up to 15 Resource Consultants, including recurring scheduled 1:1 check-ins, goal and performance development, auditing and reporting of deliverables, and new-hire and ongoing staff training.
- Create training materials and train staff, draft and implement policies and procedures, and work with the enrollment team to maintain up-to-date and accurate enrollment forms.
- Identify pain points and develop solutions for internal processes, such as portal changes, process flow, and staffing needs.
- Coordinates with Project Manager regarding program status and process improvements.
- Maintain a caseload of up to 20 participants and carry out deliverables monthly.

Lead Resource Consultant, West Virginia Personal Options Program

- Support direct supervisor by fielding team questions and managing issues in which supervisory intervention is not warranted while maintaining the duties of a Resource Consultant with a mixed caseload of up to 100 participants.
- Represent West Virginia Information and Assistance (I&A) program and refine PPL best practices by participating in departmental and cross-departmental functional teams.
- Act as WV liaison to the Organic Growth Action Team (OGAT) for the purpose of stimulating growth through education and outreach to traditional service providers.

Senior Resource Consultant, West Virginia Personal Options Program

- Effectively manage a mixed caseload of up to 100 participants who have chosen to self-direct their services on the Intellectual and Developmental Disabilities Waiver (IDD) and the Aged and Disabled Waiver (ADW) programs.
- Enroll and continually support self-directed waiver participants through monthly phone contacts, 6-month home visits, spending plan development, and ongoing re-training to understand program rules and responsibilities.

- Assess participant needs and complete their service and spending planning so they can live more independently and feel confident managing their self-directed Waiver Services.
- Support new and current staff by training them on policy and procedure both individually and through group presentations.
- Represent West Virginia in PPL's Information and Assistance functional team meetings for CRM and staff development.

RELEVANT EXPERIENCE

The City of Virginia Beach Developmental Services Division - *August 2011 - July 2013*

Support Coordinator

- Managed a caseload of children and adult consumers on the Medicaid State Plan Option and Waiver Program.
- Developed consumer service plans and monitored linkage and services with other agencies, including those providing Intellectual Disability (ID) and Elderly or Disabled with Consumer Direction (EDCD) Waiver services; coordinated service plan meetings; conducted assessments; monitored and updated waiting list placement; conducted home visits for enhanced case management recipients.
- Secured resources and services for consumers including medication, medical, psychiatric, housing, financial, vocational, educational, recreational, transportation, and other services as needed.

The Arc of the Three Rivers, December *2008 to July 2011*

Service Coordinator

- Coordinated medical, psychological, and financial evaluations to secure Annual Waiver Recertification for IDD Waiver members living in 24-hour staffed settings and provided ongoing support through home visits, linkage and referral, and person-centered planning.
- Coordinated and led Interdisciplinary Team Meetings; evaluated the implementation of the Individual Program Plan and services on a quarterly basis.
- Assisted the Arc with developing a service utilization review system to ensure services provided by agency staff matched the member's plan and the agency was reimbursed by the state.

LISA BROOKS, TBIW Supervisor

EDUCATION

Wheeling Jesuit University

Wheeling, WV

BACHELOR OF ARTS – *Psychology*

MASTERS – *Organizational Leadership*

CERTIFICATIONS AND TRAINING

Brain Injury Association of America –

Brain Injury Specialist - December 2015 to Present

WV Notary Public

Getting Things Done

Crucial Conversations

GRIT leadership training

Lisa Brooks brings over 20 years of experience to the TBIW Supervisor role supporting West Virginia's Personal Options program. As a certified Brain Injury Specialist and an experienced Resource Consultant, Lisa understands the TBIW member experience within the State. Prior to joining Public Partnerships, Lisa served as a service coordinator supporting individuals with intellectual and developmental disabilities. She began her career at Public Partnerships as a Resource Consultant, out in the field. She received her certification with the Brain Injury Association of America in 2015. Currently, as the TBIW Supervisor, Lisa ensures all escalations have a quick resolution, all staff are properly trained in the TBI waiver, and the program requirements are all met per the performance indicators and SLAs. She regularly communicates and collaborates with our Project Manager. The following experience and characteristics of Lisa demonstrate that she is qualified and capable of performing the duties of the TBIW Supervisor position.

- Respected supervisor skilled at mentoring and overseeing staff
- Experienced with functions of a F/EA FMS entity, especially leading and managing enrollment/disenrollment of members and their representatives
- First-hand experience developing and assisting with the completion of forms and enrollment packets with employers, workers, and vendors
- Experienced in training internal F/EA FMS staff and Resource Consultants, as well as training employers and DCSWs
- Effective communication and presentation skills
- Skilled at quality and compliance reviews.
- Subject matter expert in HCBS, TBI, and Intellectual and Developmental Disabilities
- Organized and detail-oriented

RELEVANT PROJECT EXPERIENCE

Public Partnerships LLC - *2011-2023*

Resource Consultant Supervisor, *West Virginia Personal Options Program*

- TBIW Supervisor for WV's TBI member population.
- Create and coordinate training for new Resource Consultants.
- Conduct monthly staff meetings regarding project updates and policy changes.
- Performs monthly audits of direct report documentation for quality and compliance with State contractual requirements.
- Participate in multi-state functional team meetings to improve and standardize policy and procedures.
- Attend monthly Waiver Contract Meetings with the WV Bureau of Medical Services.
- Attend quarterly TBI Waiver Quality Improvement Advisory Council meetings.
- Assist with yearly state documentation audits of compliance with contractual requirements.
- Assist with the review and revision of internal policies and training materials.
- Maintain a caseload of up to 20 participants and carry out deliverables monthly.

Lead Resource Consultant/Resource Consultant, *West Virginia Personal Options Program*

- Acted as a leader and mentor for new Resource Consultants to ensure their success with the organization.
- Performed review and revision of internal policies, procedures, and training materials in accordance with state guidelines and regulations.
- Assisted management with in-state documentation audits for compliance with contractual requirements.
- Performed review of state Medicaid Waiver Policy Manuals to ensure company compliance with regulations.
- Coordinated Personal Options Self-Directed Waiver Services for 60+ individuals with a variety of age-related needs and physical disabilities,

varied types and severities of Brain Injury and Traumatic Brain Injury, and varied types and severities of Autism and other Intellectual and Developmental Disabilities.

- Conducted monthly health and safety phone contacts and bi-annual in-home visits including follow-up progress documentation.
- Assisted participants with maintaining eligibility for the Medicaid Waiver.
- Assisted participants with enrollment into the Personal Options Program, tax paperwork, employee paperwork, training requirements, and review of roles and responsibilities of self-direction and being an employer.
- Completed Personal Options Assessments and Service Plans with members.
- Created Personal Attendant logs for participants' employees.
- Created Spending plans for Medicaid Waiver monies.
- Maintained participant records in accordance with Medicaid regulations.

RELEVANT EXPERIENCE

Northwood Health Systems - *February 2002 to October 2011*

I/DD Day Treatment Manager

- Supervised daily job duties of 10 direct care staff providing day habilitation services to individuals with Intellectual and Developmental Disabilities.
- Created and maintained staff schedules to ensure proper coverage of staff-to-client ratios.
- Processed payroll for direct reports.
- Monitored active treatment and client care for approximately 15 individuals with Intellectual and Developmental Disabilities.
- Completed thorough audits of documentation monthly to ensure all procedures were updated and current.
- Monitored safety and cleanliness of day treatment area in compliance with OHFLAC regulations to ensure the safety of the clients.

Service Coordinator/Supervisor

- Supervised daily job duties of 12 direct report Service Coordinators.
- Maintained a caseload of individuals with Intellectual and Developmental Disabilities and/or Traumatic Brain Injury.

- Processed payroll for direct reports.
- Facilitated weekly staff meetings regarding process updates and policy changes.
- Coordinated and supervised the training of new employees.
- Completed documentation audits for compliance with Medicaid Waiver rules.
- Member of the Human Rights Committee - worked to ensure that behavior management plans and protocols did not violate a client's rights and included the least restrictive measure to accomplish the goal of decreasing or eliminating the targeted behavior.
- Member of the Regulatory Compliance Committee - worked to ensure the organization maintained compliance with state documentation and billing regulations.
- Coordinated services for 20 individuals with intellectual disabilities including monthly home visits.
- Conducted quarterly interdisciplinary team meetings to review client progress and determine areas of need
- Maintained client records in accordance with state Medicaid regulations.

SUZANNE HALE, *Optional Personal Care Supervisor*

EDUCATION

Marshall University
Huntington, WV

BACHELOR OF SOCIAL WORK

CERTIFICATIONS AND TRAINING

WV Notary Public

Licensed Social Worker – West Virginia

Suzanne Hale brings over 20 years of relevant experience to the optional Personal Care Supervisor role supporting Personal Options members. As a licensed Social Worker in West Virginia and an experienced Resource Consultant, Suzanne has a firm understanding of BMS policies and the populations served through the HCBS waivers within the State. Prior to joining Public Partnerships, Suzanne worked directly with the aged and disabled population as a Case Manager. She began her career at Public Partnerships as a Resource Consultant, supporting the ADW population out in the field. For the optional Personal Care Supervisor role, Suzanne is well qualified to create this role in support of the introduction of self-direction to the State Plan Personal Care program. She brings to this role a breadth of understanding of West Virginia policies and procedures related to self-direction and Medicaid. She will ensure all escalations have a quick resolution, all staff are properly trained in the waiver, and the program requirements are all met per the performance indicators and SLAs. She will regularly communicate and collaborate with our Project Manager. The following experience and characteristics of Suzanne demonstrate that she is qualified and capable of performing the duties of the Personal Care Supervisor position.

- Collaborative approach to problem-solving and process improvement
- Respected supervisor skilled at mentoring and overseeing staff
- Experienced with functions of a F/EA FMS entity, especially leading and managing enrollment/disenrollment of members and their representatives
- First-hand experience developing and assisting with the completion of forms and enrollment packets with employers, workers, and vendors
- Experienced in training internal F/EA FMS staff and Resource Consultants, as well as training employers and DCSWs
- Effective communication and presentation skills
- Subject matter expert in Medicaid, HCBS, State Plan Personal Care (dual service), and Aged and Disabled Waiver population

RELEVANT PROJECT EXPERIENCE

Public Partnerships LLC - *August 2009- Present*

Lead Resource Consultant, *West Virginia Personal Options Program*

- Provide Resource Consulting services to individuals choosing to participate in Personal Options, the self-directed service option within the WV Aged & Disabled, Traumatic Brain Injury, and Intellectual Developmental Disability Waivers.
- Responsible for training and ongoing support to Resource Consultants in West Virginia.
- Collaborates with state clients regarding the development of program materials and policy revision pertaining to Personal Options.
- Participates in state client monthly provider meetings and provides documentation and training on relevant information to the Resource Consultants.
- Create reports to exchange information regarding the status of closed and transferred members and to provide information on trends and potential issues.
- Responsible for yearly external audit preparation.
- Expert-level user of Public Partnerships systems.

RELEVANT EXPERIENCE

Coordinating Council for Independent Living, *January 2001 to May 2009*

Case Manager

- Performed case management services for participants in the West Virginia ADW program.
- Monitored participant services, home and safety issues, and support systems.
- Monitored and updated participant Service Coordination Plans.
- Assisted with advocacy and referral to community agencies to allow participants to remain in their homes.
- Coordinated planning and monitoring of State Plan Personal Care program with Personal Care Nurses.
- Trained new employees on ADW policies and procedures.
- Tracked referrals, participated in peer reviews, and helped market agency programs.

EXHIBIT 3. QUALIFICATIONS AND EXPERIENCE

EXHIBIT 3: QUALIFICATIONS AND EXPERIENCE

Public Partnerships has more than 24 years of experience providing financial management services and more than 16 years of experience providing Resource Consulting services (also referred to as information and assistance). In the interest of brevity, we highlight some of our most relevant past projects in the pages that follow, including details about the location of the project, project manager name and contact information, type of project, and scope inclusive of how we achieved objectives.

Client	**STATE OF WEST VIRGINIA** **WEST VIRGINIA BUREAU FOR MEDICAL SERVICES**
Type of Project	**Financial Management and Resource Consulting (Support Broker) Services**
Timeline	2007 to Present
Scope	The West Virginia Bureau for Medical Services has contracted with Public Partnerships to provide full-service fiscal/employer agent financial management (F/EA FMS) and resource consulting services for *Personal Options*, the self-directed option within the WV Waiver programs since February 2007. *Personal Options* provides waiver participants with budget authority and employer authority over certain home and community-based services. *Personal Options* programs include the Aged and Disabled Waiver, the Intellectual/Developmental Disabilities Waiver, and the Traumatic Brain Injury Waiver, as well as the Take Me Home program. Public Partnerships provides participant enrollment and ongoing support, provider enrollment and credentialing, budget management, payroll and accounts payable activity, Medicaid claims submission, and customer service. We operate our proprietary EVV solution, Time4Care, across West Virginia as an electronic time capture solution for self-direction services. Our scope includes processing invoices from provider agencies for services that include Community/Individual Transportation, Vehicle Modifications, and Non-Traditional Therapies.
PPL Project Manager	Katharine Randall (304)381-3114 krandall@pcgus.com

Client	**New Jersey Department of Human Services**
Type of Project	**Fiscal Intermediary and Financial Cash & Counseling Services**
Timeline	2006 to Present
Scope	Public Partnerships was selected by the New Jersey Department of Human Services (DHS) as the statewide Fiscal Intermediary and Cash & Counseling Services for the Division of Aging Services (DoAS), the

	Division of Developmental Disabilities (DDD), and the Division of Disability Services (DDS). Public Partnerships has been serving the DoAS as the Fiscal Intermediary for the Jersey Assistance for Community Caregiving (JACC) program since 2006. JACC is a state-funded program that provides about 2,000 participants with employer authority. In 2016, Public Partnerships was awarded the contract as the statewide Fiscal Intermediary and Cash & Counseling Services provider for three divisions of NJ DHS serving over 11,500 participants at that time, which has since grown to 37,000. Public Partnerships serves the following programs: • Division of Aging Services – Jersey Assistance for Community Caregiving and Veteran-Directed Home and Community Based Services (VD HCBS); • Division of Developmental Disabilities – Community Care Waiver, Interim-Funded Individuals, and Support Waiver; and • Division of Disability Services – Personal Preference Program (PPP). We have played a significant role in the growth of New Jersey's self-direction programs, particularly supporting the Personal Preference Program to grow by approximately 127 percent to 30,000 participants self-directing. For our part in this growth, our support brokers (resource consultants) make a significant impact on the ability of participants to successfully self-direct. We operate our proprietary EVV solution, Time4Care, statewide for PPP as an electronic time capture solution for self-direction services. Public Partnerships has agreements with all five Managed Care Organizations (MCOs) operating in New Jersey: • Aetna Better Health of New Jersey • Amerigroup • Horizon NJ Health • United Healthcare • WellCare For all programs, Public Partnerships provides participant orientation and training, enrollment and ongoing support; provider enrollment and credentialing; workers' compensation; budget management; payroll and accounts payable activity; co-pay collection; claims submission; monitoring health and safety; and customer service. For VD HCBS and PPP, Public Partnerships provides Financial Counseling (i.e., Supports Brokerage) services as well. Launch challenges included:

	• Supporting the transition of over 11,500 individuals from two incumbent contractors, including over 1,500 individuals transitioning from the Agency with Choice (AWC) model to the Fiscal Employer Agent (F/EA) model of financial management services; and • Developing Cash Management Plans for over 9,500 individuals. The State commended our efforts to work collaboratively to overcome the difficulties of the transition to make financial services more effective.
PPL Project Manager	Andrew Thornton (617) 865-8261 athornton@pcgus.com

Client	**STATE OF FLORIDA, Agency for Healthcare Administration; Statewide Medicaid Managed Care Program, Long-term Care**
Type of Project	**Participant Direction Option (PDO)**
Timeline	2013 to Present
Scope	Public Partnerships has contracted with several Florida Managed Care Organizations to provide Fiscal/Employer Agent (F/EA) services for qualified members who elect to participate in the Participant Direction Options program. The Medicaid-eligible managed care members who are elderly and/or disabled and who are receiving at least one of these five services: homemaker, personal care, adult companion care, attendant care, and/or intermittent nursing services (LPN/RN) can elect to participate in PDO. In the state of Florida, Public Partnerships currently contracts with two health plans: Florida Community Care and Amerigroup to provide fiscal management services to members participating in PDO. This includes but is not limited to managing enrollment packets, processing criminal background checks for workers, and processing biweekly payroll. We operate our proprietary EVV solution, Time4Care, across Florida as an electronic time capture solution for self-direction services. We are set to expand our services to provide support broker (resource consultant) services to the Florida Community Care (FCC) plan starting July 1, 2023. We worked with FCC to launch the support broker service based on our experience in WV, TN, and NJ and our knowledge and understanding that separating support broker services from case management services is the ideal arrangement for self-direction.
PPL Project Manager	Sandy Kasprzak (651) 456-8283 skasprzak@pcgus.com

Client	**State of Colorado Department of Health Care Policy and Financing**
Type of Project	**Consumer-Directed Attendant Support Services (CDASS)**
Timeframe	2009 to Present
Scope	In Colorado, PPL has contracted with the Department of Health Care Policy and Financing since 2009, having completed three contract terms in that State. We administer Financial Management Services (FMS) for consumer direction across four Colorado waivers, including the Elderly, Blind and Disabled, Community Mental Health Supports, Spinal Cord Injury, and Brain Injury. Members can self-direct 45 different services across the four waivers, with many delivered and billed by other Medicaid service providers. Public Partnerships provides both financial and personnel services for CDASS including the processing of all timesheets, payroll, and attendant applications as well as, providing skills training to participants to ensure that they understand the philosophy of consumer direction, are able to manage their budgets and recognize and monitor the quality of services s/he receives. We operate our proprietary EVV solution, Time4Care, across Colorado as an electronic time capture solution for self-direction services. PPL engages stakeholders including the Department program managers, Medicaid service providers (e.g., transportation, (fee for service) case management network, EVV aggregator (SanData), and MMIS vendor (also Gainwell Technologies). Public Partnerships currently provides FMS to Colorado CDASS under the F/EA FMS model, as we do in West Virginia. Prior to 2015, we acted solely as an “Agency with Choice,” where the Client and/or an Authorized Representative are designated as the managing employer and Public Partnerships served as the common law employer of record.
PPL Project Manager	Sandy Kasprzak (651) 456-8283 skasprzak@pcgus.com

Client	**STATE OF TENNESSEE** **The Bureau of TennCare**
Type of Project	**Financial Management and Support Broker Services**
Timeline	2010 to 2023
Scope	The Tennessee Bureau of TennCare contracted with Public Partnerships to serve as the Fiscal/Employer Agent, including providing supports broker services, for three Medicaid managed care waiver programs: • CHOICES waiver for elderly and disabled Tennesseans • Employment and Community First (ECF) CHOICES for children and adults with intellectual and developmental disabilities

	• Katie Beckett Program, Part A for children with complex medical needs Public Partnerships services included: managing participant and provider enrollment, processing criminal background checks, processing semi-monthly payroll for payments to individual providers and home care agencies, processing payments for goods and services, providing customer service, and providing support brokerage (resource consulting). In this program, TennCare also contracts with three Managed Care Organizations (MCOs) to provide and oversee service coordination for members. Public Partnerships provided participant enrollment and ongoing support, provider enrollment and credentialing, budget management, payroll and accounts payable activity, Medicaid claims submission, and customer service. We operated our proprietary EVV mobile application, Time4Care, across Tennessee as an electronic time capture solution for self-direction services. We regularly engaged stakeholders including the Department program managers, Medicaid service providers (e.g., transportation, managed care case managers, (fee for service) case management network, and MMIS vendor (also Gainwell Technologies) to fulfill contract scope.
PPL Project Manager	Sarah Deming (617) 717-1115 sdeming@pcgus.com

Client	**STATE OF TENNESSEE** **Department of Intellectual and Developmental Disabilities**
Type of Project	**Financial Management and Support Broker Services**
Timeline	2006 to 2023
Scope	The Tennessee Bureau of TennCare contracted with Public Partnerships, to serve as the Fiscal/Employer Agent, including providing support broker services, for the fee-for-service Self Determination Waiver Program. Public Partnerships services included: managing participant and provider enrollment, processing criminal background checks, processing semi-monthly payroll for payments to individual providers and home care agencies, processing payments for goods and services, providing customer service, and providing support brokerage (resource consulting). Public Partnerships provided participant enrollment and ongoing support, provider enrollment and credentialing, budget management,

	payroll and accounts payable activity, Medicaid claims submission, and customer service. We operated our proprietary EVV solution, Time4Care, across Tennessee as an electronic time capture solution for self-direction services. We regularly engaged stakeholders including the Department program managers, Medicaid service providers (e.g., transportation, (fee for service) case management network, and MMIS vendor (also Gainwell Technologies) to fulfill contract scope.
PPL Project Manager	Sarah Deming (617) 717-1115 sdeming@pcgus.com