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WV Purchasing Division

Executive Summary

Consumer Direct Care Network (Consumer Direct) is pleased to submit our proposal to perform Fiscal/Employer Agent Financial Management Services (F/EA FMS) and Resource Consulting (RC) services for the West Virginia Department of Health and Human Services, Bureau for Medical Services ("Agency").

Our response is intended to address four objectives to assist in your evaluation process:

1. **Meet and exceed the goals and objectives of the Agency** by providing informative responses to the 149 mandatory requirements contained in the RFP (*RFP Section 4.2.1 through Section 4.2.149*)
2. **Provide an in-depth, transparent description of the Resource Consultant function** so that the Agency has a clear line of sight into how Consumer Direct applies this role in a cost-effective manner (*RFP Section 4.3*)
3. **Demonstrate the Consumer Direct F/EA FMS solution, where approach and methodology combine with experience and capabilities,** meets all contractual obligations (*RFP Section 4.4*) and should exceed expectations (*RFP Section 4.5*)
4. **Address the risk/reward ratio** you must consider in replacing an incumbent vendor.

Consumer Direct comprises a network of service companies supporting older adults and people with physical and intellectual/developmental disabilities since our founding in Missoula, Montana in 1990. Consumer Direct Care Network West Virginia, LLC (CDWV) is our newest service company established to provide F/EA FMS and RC services for West Virginia's self-direction members.

Consumer Direct currently supports more than 82,000 members and 107,000 workers across 14 states and the District of Columbia (hereafter referred to as 15 states). Serving this many members who are older adults or people with physical or intellectual/developmental disabilities means we are the largest self-direction company in the country. Many factors have influenced our steady upward trajectory, including best-in-class technology, amazing and committed personnel, and hard-earned program expertise, but none have had more influence on our growth than our deep roots in caregiving and our ability to maintain stability. These two aspects are foundational influences in all that we do for our payers, our members, and their Direct Care Service Workers (DCSW).

Consumer Direct was founded by caregivers, not a consulting or technology firm. Our culture of caregiving permeates all we do – from hiring support personnel to ongoing trainings to emphasize and reinforce our mission to provide care and support for people in their homes and communities. A caregiving culture attracts employees who are themselves former caregivers or who have supported members or caregivers through their work in social services. Many of the staff assigned a role on this contract meet this description as well.

Consumer Direct's original ownership of 30+ years is still in place. We have not been purchased by private sector interests seeking to monetize the country's aging demographics. We started out as a home care agency in Montana in 1990 and eight years later Montana introduced self-direction as a care option. Our founders recognized the value and potential of self-direction based on personal experience, not projections of long-term care spending in the coming decades. They soon became early adopters in providing F/EA FMS for people self-directing their care and today are laser-focused on supporting self-directed services for Medicaid members so they have more choice and control in how they receive services.

Our roots have promoted organizational stability in an industry that is currently struggling with different ownership models and/or new management philosophies. One important metric that demonstrates stability: our seven-member Executive Team, which does not include ownership, have been with Consumer Direct for a combined 86 years, and have more than 110 years of experience with F/EA FMS on their resumes. There are companies in self-direction today that have turned over their senior management team several times *in the last five years alone.*

Stability translates directly into tangible benefits for our clients. First, Consumer Direct's organizational stability extends well into the company. For example, the person we have named as Interim Project Manager assigned to West Virginia for the implementation phase is Kari Vinopal who has been with Consumer Direct for 15 years. She has nearly 20 years' experience leading and managing F/EA FMS, and 15 years' experience supporting Support Broker/Resource Consulting services. She began her career 28 years ago working with people with developmental and intellectual disabilities.

Second, Consumer Direct's philosophy for local project management decision-making is successful because our people have worked together for a long time and trust each other to do the right thing by our clients. Consumer Direct empowers local, state-based managers to make informed decisions because Consumer Direct provides them with the information and data, as well as the policies and procedures, to do so. There is no need to continually consult headquarters or turn every client question or request into a Teams call with multiple corporate attendees.

Third, a stable organization leads to a greater degree of expertise and sophistication. For example, Consumer Direct's subject matter experts are respected nationally and play senior roles in trade and advocacy organizations. Consumer Direct has an active government affairs and public policy function to stay one step ahead of legislative and regulatory developments. Additionally, we attract and retain some of the finest systems developers in the industry.

Finally, a stable organization fosters knowledge and wisdom. It becomes second nature to constantly monitor state-issued provider manuals and notices, maintain up-to-date policies and procedures, and keep abreast of local developments that could impact the program. It inspires continuous technology improvements without the need for change orders. And a stable organization promotes accountability because you cannot blame your predecessor or promise things will improve under your watch. These two foundational influences -- caregiving and stability -- are important to the Consumer Direct story. But they are not the entire story.

Agency Goals and Objectives

Our staffing model is consistent with the Agency's desire to fill positions locally. Consumer Direct does not utilize out-of-state call centers. Our Resource Consultants (RC) are hired from the communities we support. This means we will hire a nexus of RCs based at our Charleston office, but will also have field-based RCs throughout the state. We build a local workforce that reflects the geography, language, and culture of those we serve.

Throughout *Section 4.2,* Consumer Direct demonstrates how our technology, policies, procedures, and internal controls align with the Agency's goals and objectives. Our *technology* is scalable, adaptable, and highly responsive to individual client needs. It is designed for easy integration, sophisticated functionality, and enterprise-level capacity. Well-functioning technological solutions can provide ease of operations and robust transparency and reporting. It is how we successfully support tens of thousands of users and transact billions of dollars in payroll every year.

Consumer Direct will proactively raise and discuss *policy* issues with the Agency's team, whether they are generated by the federal government, the State Legislature, the Agency, or even the media. Those discussions will occur naturally because our local staff will develop positive working relationships with you and act as a partner in addressing policy matters. Consumer Direct's *procedures* are designed to encourage and subsequently maintain engagement with members and DCSWs, a key Agency objective if the program is to grow. We do this by getting it done right, quickly, and the first time. As a responsible steward of billions of dollars in public funds, our *internal controls*, or system safeguards, for claiming, reconciliation, filing/paying, and other financial transactions are highly robust (see *Section 4.2.1.14 through 4.2.1.24*).

Resource Consultants

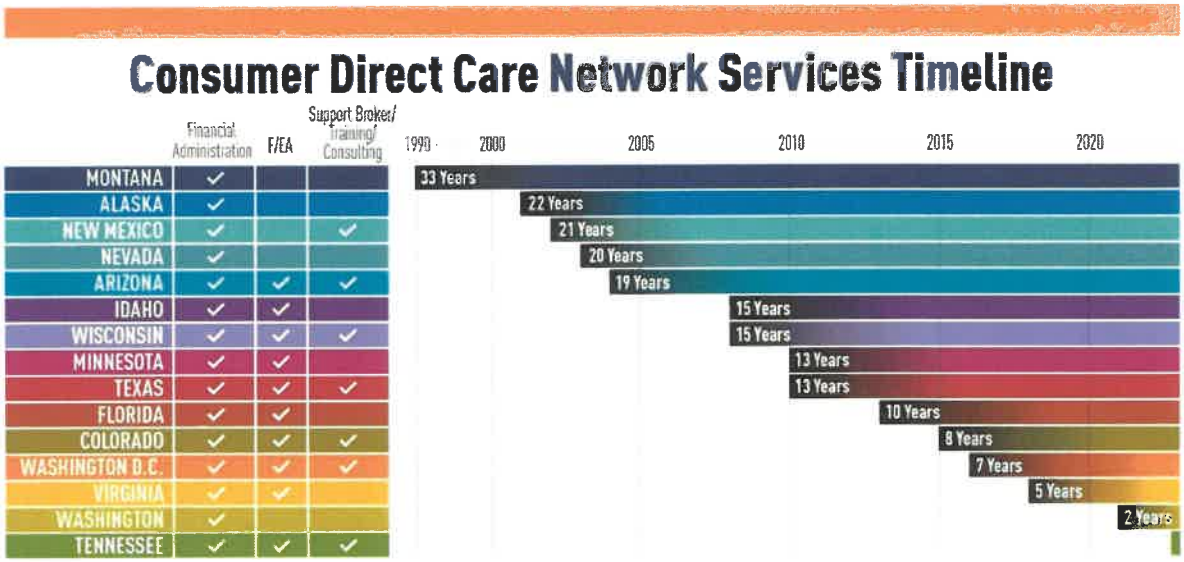
For Consumer Direct, RCs play a crucial role in getting things done right, quickly, and the first time. They are a key asset in walking individuals through the enrollment process and helping individuals complete their enrollment forms. We ensure that our RCs are trained to support the people we serve with a culturally sensitive and person-centered approach.

We believe the manner in which Consumer Direct would use RC resources will convince you to maintain the RC function with the F/EA FMS. We share the policies, procedures, and controls we apply to the Resource Consultant model. The approach features 1) hiring empathetic and service-oriented individuals from local geographies, and 2) deploying RCs thoughtfully and efficiently so that the member onboarding experience ensures successful self-directing of their care. Consumer Direct's technology allows RCs to focus on the member while incorporating administrative accuracy.

Contractual Requirements

Consumer Direct is fully capable and prepared to perform both F/EA FMS and RC tasks as the Subagent of the Agency. Consumer Direct supports F/EA FMS or other types of FMS for people with long-term disabilities in 15 states. We currently provide F/EA and Resource Consulting services in seven states: Arizona, Colorado, District of Columbia, New Mexico, Tennessee, Texas, and Wisconsin. We have the experience and capacity to provide high quality services to West Virginia. Our timeline of longevity says it succinctly.

Figure 1: Consumer Direct Services Timeline



In *Section 4.4.20 through Section 4.4.24* and also in *Section 4.4.26*, Consumer Direct affirms it can and will carry out the core contractual requirements defined in the RFP. We do so with confidence collected over many years of making and keeping those same promises. But we do more than make a promise. In *Section 4.4.25,* Consumer Direct lays out in substantial detail the methodology it follows, one that has always led to a successful outcome for the client. This methodology addresses 1) the project management approach, 2) work plan development, 3) staffing, 4) change management, 5) communication, and 6) readiness review.

The project management approach is driven using tools developed based on Project Management Book of Knowledge (PMBOK) principles.

- The work plan addresses all project activities required to complete an implementation and begin operations e.g., delivering services as the F/EA FMS.
- The staffing plan anticipates an award of contract so the process of identifying individuals in West Virginia who would be appropriate to lead the on-the-ground program permanently can commence. However, in the initial weeks between contract award and the projected contract signing date prior to anticipated implementation on October 2, 2023, the most important staff is the Implementation team already employed by Consumer Direct.

- Change management strategies are designed to minimize avoidable upset while setting the stage for positive first impressions.
- The communication formula is simple and straightforward. Transparency and truthfulness equal credibility. They also generate trust among stakeholders.
- The readiness review addresses function, performance, capacity, and integration.

Risk/Reward Ratio

Consumer Direct has conducted approximately 80 transitions/implementations in the course of our 30+ years in operation. This includes both standing up a program for the first time as well as assuming responsibility from another vendor. Consumer Direct has developed an informed understanding of how to successfully transition from an incumbent vendor to us. In the last nine years, Consumer Direct has completed 12 transitions in seven states. By the end of this month, we will have transitioned the Tennessee program from your incumbent provider, including the critical data transition process in which we utilized our F/EA-to-F/EA Transition Data Request Workbook that outlines the data required. This alone may uniquely position Consumer Direct in West Virginia if we are fortunate to be selected as your F/EA FMS.

There are legitimate concerns when considering a vendor change. West Virginia must be assured selecting a new vendor does not carry with it unmanageable risk. In choosing Consumer Direct you can be confident that you have the most competent and experienced vendor taking over the program. Consumer Direct offers West Virginia some additional assurances as well. We have:

- Invested time and resources prior to and during this procurement process to learn about your programs and the incumbent so that we can hit the ground running.
- Transitioned programs similar in size to West Virginia.
- Successfully completed, prior to the Tennessee transition, the largest self-directed program transition in the country (Washington State).

Current Implementations

As you will read in our proposal, we are proud to have been awarded the contract to perform Financial Administration and Supports Brokerage functions for the State of Tennessee in March 2023. Similar to West Virginia's transition timeline, we had 90-days to transition TennCare's self-direction members from the incumbent F/EA provider, Public Partnerships Limited (PPL).

Consumer Direct's transition approach (detailed in Mandatory Requirements section 4.4.25) was put into action for the TennCare transition and we are on track to complete all implementation activities within the three months allotted. While all transitions have their challenges, the degree of difficulty is influenced by the incumbent's willingness to fulfill its own transition obligations with the interests of members and workers paramount. As an F/EA vendor experienced in the transition process, and with transitioning PPL as the incumbent,

Consumer Direct was well prepared to establish transparent and effective transition processes with all stakeholders.

We have Tennessee-based personnel in place and begin taking telephone calls and training members and workers about moving from PPL to Consumer Direct the first week of June. We begin accepting time submission from workers on July 1. Based on our track record, we are confident that the Tennessee program will be in a steady state well before West Virginia's contract start date of October 2, 2023.

Conclusion

Consumer Direct was founded on a philosophy of self-determination and the commitment to support every individual's independence and full integration into the community. We embrace the opportunity to help older adults, people with long-term physical disabilities and intellectual or developmental disabilities so they may thrive in their home and community. These opportunities include the option, when appropriate, to manage their own budget, and recruit and manage Workers who can provide necessary supports.

Our personnel have genuine passion and commitment to make sure the individuals we serve can live the life they want. Many of the staff assigned to this contract have previously provided care and support to people in their own homes and communities through their work in social services. Our management team has been together for years. We benefit, and our clients benefit, from the consistent leadership we bring year over year. We employ the best system developers in the business. Our state-based management teams are pro-active, continually acting in service to our clients while building partnerships across the stakeholder spectrum.

Consumer Direct is excited for the opportunity to work in West Virginia. Our deep roots in caregiving, our stability as an organization, outstanding customer service, collaborative approach, and industry leading technology make us the best choice to support your current programs and provide the foundation for additional growth. Thank you for your consideration.

DESIGNATED CONTACT

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

(Printed Name and Title) Ben Bledsoe, President/CEO

(Address) 100 Consumer Direct Way, Missoula, MT 59808

(Phone Number) / (Fax Number) Phone: 406-532-2001 Fax: 406-541-7058

(Email address) benb@consumerdirectcare.com

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that: I have reviewed this Solicitation/Contract in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation/Contract for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that this bid or offer was made without prior understanding, agreement, or connection with any entity submitting a bid or offer for the same material, supplies, equipment or services; that this bid or offer is in all respects fair and without collusion or fraud; that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; that I am authorized by the Vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on Vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

By signing below, I further certify that I understand this Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law; and that pursuant to W. Va. Code 5A-3-63, the entity entering into this contract is prohibited from engaging in a boycott against Israel.

Consumer Direct Care Network West Virginia, LLC
(Company)

(Signature **of Authorized Representative)**
Ben Bledsoe, President/CEO
(Printed **Name and Title of Authorized Representative) (Date)**
Phone 406-532-2001, Fax 406-541-7058
(Phone Number) (Fax Number)
BenB@consumerdirectcare.com
(Email Address)

ADDENDUM ACKNOWLEDGMENT FORM

SOLICITATION NO.: CRFP 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)

✓ Addendum No. 1	☐ Addendum No. 6
✓ Addendum No. 2	☐ Addendum No. 7
✓ Addendum No. 3	☐ Addendum No. 8
✓ 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.

Consumer Direct Care Network West Virginia, LLC

Company

Authorized Signature

June 5, 2023

Date

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

Revised 11/1/2022

4.2 Project Goals and Mandatory Requirements

4.2 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.

Introduction to Section 4.2

Section 4.2 initiates the fundamental purpose of a proper proposal response. The Vendor is tasked with describing how it meets a (lengthy) set of mandatory requirements, thus demonstrating its ability to fulfill the project goals and objectives set out by the Department of Health and Human Services, Bureau of Medical Services. Consumer Direct's response to the 149 mandatory requirements runs over 125 pages. We seek throughout to provide insights at a macro level to illustrate how Consumer Direct understands the larger perspective and we provide a level of granularity to assure the Agency that Consumer Direct is capable of managing the details that matter most to the member and the direct care service worker.

To better organize our ability to communicate to the evaluator that Consumer Direct both understands the requirements and has the demonstrated capability to successfully execute them, we have devised a roadmap to guide evaluators throughout Section 4.2.1. While several of the early requirements (specifically, Section 4.2.1.1 through Section 4.2.1.6) can and should stand alone as prominent topics, we discerned that many of the subsequent requirements, beginning at Section 4.2.1.7, could be logically grouped by subject area. In doing so, we believe the evaluators can more easily grasp by subject how individual and technical program components work together to achieve the Agency's desired outcome.

The roadmap unfolds like this:

EFFICIENT AND COST-EFFECTIVE F/EA FMS

Efficient and Cost-Effective F/EA FMS	Systems: Policies, Procedures, and Controls	Compliance: Systems, Policies, and Controls
4.2.1.1	4.2.1.2	4.2.1.3
Applying SME Knowledge To Support All Programs	Policies and Procedures Manual	Federal and State Agency Approvals
4.2.1.4	4.2.1.5	4.2.1.6

INTERFACES

Interfaces: UMC, MMIS, On-Line Vendors, and MCOs

4.2.1.7 – 4.2.1.13

PLANS AND PROCESSES

Plans and Processes

4.2.1.14 – 4.2.1.20

FINANCE AND FINANCIALS

Finance and Financials

4.2.1.21 – 4.2.1.24

MEMBER ENGAGEMENT

Initial Member Engagement

4.2.1.25 – 4.2.1.34

DCSW ENGAGEMENT

Initial DCSW Engagement

4.2.1.35 – 4.2.1.49

ORIENTATION AND SKILLS TRAINING

Orientation and Skills Training

4.2.1.50 – 4.2.1.54

DCSW REQUIREMENTS

Ongoing DCSW Requirements -- Fiscal and Other

4.2.1.55 – 4.2.1.96

SPENDING MANAGEMENT

Participant Directed Spending Management

4.2.1.97

REPORTING

Reporting

4.2.1.98 – 4.2.1.104

MAINTAINING RECORDS AND FILES

Maintaining Records and Files (including Special Plans)

4.2.1.105 – 4.2.1.129

REMAINING NOTEWORTHY ISSUES

Remaining Noteworthy Issues

4.2.1.130 – 4.2.1.149

4.2.1 Goals and Objectives

4.2.1 Goals and Objectives -The project goals and objectives are listed below.

EFFICIENT AND COST-EFFECTIVE F/EA FMS

4.2.1.1 Provision of Efficient and Cost Effective F/EA FMS

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).

Consumer Direct Care Network (Consumer Direct) approaches key service delivery aspects differently from many of our competitors. This drives not only an efficient and cost-effective F/EA FMS but an effective program as well. First, we are laser-focused on remaining out in front of regulatory and policy changes, which is of continual benefit to our clients. No vendor is more active in this regard than Consumer Direct. Second, we believe in locally-based project staff as the best way to serve you – our client – and the state's members and direct care service workers. While some argue that out-of-state call centers provide economic efficiencies, we find it impacts member and worker touchpoints negatively. Lastly, we centralize our administrative and technical resources in Missoula because it promotes knowledge-sharing and the right kind of efficiencies, e.g., would an IT change order for State A also benefit State B, even though State B has not requested it.

Consumer Direct will bring our decades of experience successfully serving as a subagent providing F/EA FMS to support West Virginia self-direction members. We provide core administrative supports, such as accounting, payroll, claims processing, human resources, labor relations, risk management, program development, training, quality assurance and improvement, and information systems, from our national base in Missoula, Montana. This type of centralization of our administrative support team is a best practice because the business processes that are core to F/EA FMS, and common across all states, rely so heavily on the same technology. Being together in one place allows for staff to easily compare notes and collaborate on policies, procedures, and protocols. It also maximizes scalability and flexibility. That business office supports more than 82,000 members and 107,000 workers across 15 states.

An equally important part of our service model is hiring and maintaining locally-based teams in the markets where services are provided. To fulfill this goal, we establish unique operating companies in the states where we work. Consumer Direct Care Network West Virginia, LLC (CDWV) has been registered and has established a unique FEIN for our work there.

Locally-based, high-touch support combined with scalable administrative functions offers multiple advantages for our current members and DCSWs. By centralizing administrative support, we gain economic efficiencies, and we ensure best practices are applied consistently across all programs. While our model provides efficiency through scalability, we also account for the fact that each state is unique in how they administer their program. Our administrative teams are knowledgeable and adept at customizing business processes that reflect state regulations and policy objectives. Our information technology systems are equally able to reflect those customizations.

> "Working with the Consumer Direct Care Network has allowed us to introduce a high-quality, user-friendly solution to supporting individuals with disabilities and their families to self-direct their home and community-based services. Their team comes to every new opportunity with passion, creativity, and a willingness to innovate in real time to support new solutions often informed by people with lived expertise." *MCO Senior Director, LTSS and Community Life*

The net result is that our local, in-state staff can focus on providing excellent customer service and support to those we serve. High-touch, results-focused customer service, which we seek to provide every day, is only possible when functional roles and responsibilities are clearly defined, understood, and maintained. We believe this type of management discipline contributes to our high customer satisfaction percentages. CDWV's locally-dedicated personnel will focus on West Virginia's members and DCSWs thus providing a higher level of customer service for the people we serve. These individuals understand the members and DCSWs with whom they come in contact. They know the state environment, watch the same local news programs, read the same local newspapers, and better understand the local supports available to members and workers.

Our programs are run by the people on the ground who work closely with members/representatives, families, and the local agencies and advocacy groups. We hire our staff from the communities they serve. It is important to have our services managed by the people on the ground in each state. Our business structure gives our local program teams the support they need so that they are freed up to focus on relationships and provide excellent customer service to members, families, DCSWs, and service partners such the Agency and MCOs.

In section 4.5, the RFP requires evidence of our qualifications and experience, thus we provide detailed evidence of work with three Medicaid partners across the United States. The Mi Via Self-Directed Wavier in New Mexico, the Arizona Long Term Care System Program, and the Wisconsin Adult and Children's Long-Term Care programs.

In addition to our references, we provide relevant testimonial quotes from payer representatives, members, and DCSWs. You'll find these in bright blue speech bubbles throughout the proposal.

SYSTEMS

4.2.1.2 Systems, Policies, Procedures and Internal Controls to Perform F/EA FMS

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.

Nothing impacts an F/EA FMS more than technology. The most efficient business processes, the clearest programmatic policies and procedures, and the most helpful customer service all can be compromised by poor F/EA FMS technology. Consumer Direct's systems, along with its policies, procedures and controls, is best-of-breed and can provide the Agency great comfort as it seeks to expand program participation.

Contrast with other vendors Consumer Direct's technological evolution. We opted to develop and deploy scalable, adaptable, and high-quality technology solutions in concert with our ability to support clients. Consumer Direct did not chase market share over the last decade at the expense of its technology lagging in its ability to support the needs of our clients. Today, our consumer direction technology ranks among the best in the industry. It efficiently supports tens of thousands of users and billions of dollars in financial transactions and payments. It is adaptable and can support change orders in a timely fashion. It does not require workarounds as a standard operating procedure.

Consumer Direct provides an overview of our proposed information technology systems, policies, procedures and internal controls to perform the F/EA FMS tasks listed in the scope of work of this RFP.

Systems

Systems - IT Goals

To effectively support our company mission – *To provide care and support for people in their homes and communities* – our information technology goals are focused on these principles:

- **Deliver technology solutions that are intuitive and user friendly** to support the largest self-directed programs in the nation.
- **Deploy scalable and adaptable information technology** solutions to deliver innovations in the self-directed personal care industry.
- **Deliver high-quality technology solutions** that scale to effectively support the largest self-directed programs in the nation.
- **Provide a stable infrastructure and operating environment** for online processing and administrative processing that is responsive to volume demands and can accommodate change orders in a timely manner.

Systems - IT Strategy

For the past 10 years, our information technology strategies have been developed specifically to improve the caregiving experience, the customer service experience, and administrative accuracy. Some of our specific strategies include:

- We leverage custom-developed technology solutions paired with best-in-class commercial off-the-shelf solutions to address the unique operating requirements of self-directed programs. The former allows Consumer Direct to effectively deliver custom solutions to specific customer requests, and the latter provides the capacity to do so because conventional and traditional workloads are left to commercial software solutions.
- Our operating environment is built to support 250,000 members and 300,000 workers. We currently support approximately 82,000 members and 107,000 workers. Adding the members and DCSWs in West Virginia will be well within our operating environment.
- We continually invest in technology capabilities that improve the customer experience, enhance self-service, and accommodate evolving program operating requirements. Our solutions evolve in anticipation of shifting customer requirements and to drive efficiencies in operations. Our core platforms and core workloads are regularly updated to use current technology and solution approaches. We incorporate end-user feedback in the development approach to provide user-friendly applications.

> Even with the addition of the West Virginia caseload, our IT operating environment will be operating at less than half its capacity. System change orders will be addressed efficiently and in a timely manner.

- Our technology solutions are resilient by providing failover and fallback capabilities end-to-end in the operating environment through engineering and best practices.
- Our technology footprint provides end-to-end operational support to a variety of self-directed programs on a single operating platform, by architecting and designing those capabilities from the ground up.

Systems - IT Features

The feature set of our information technology solution is extensive. Some of the more compelling features include the following:

- **Cloud-based technology:** Our solutions leverage cloud technology to provide a secure environment, a scalable infrastructure, high performance, and administrative controls. Our custom-developed applications reside in the Microsoft Azure cloud. Several of our commercial-off-the-shelf applications, such as Workday, reside on the Amazon cloud.
- **Web Portal:** Our web portal is custom developed and provides a rich user experience, with role-based access to time-entry, profile information, notifications/messages, on-

demand reports, status information, and payroll information. The web portal serves members, DCSWs, and payer personnel.

- **Application Development Approach:** We partner with Microsoft to support our custom application development efforts and complement our internal development teams. With this approach, we effectively address capacity and capability issues when necessary, and, with access to off-shore resources, sustain work on a 24-hours basis.
- **Electronic Visit Verification (EVV):** Our EVV solution offers payer choice for deployment of specific EVV technologies. Consumer Direct partners with CellTrak to provide the CareAttend solution. We also support and integrate with other vendor solutions, including SanData, Authenticare, HHAeXchange, Therap, and Vesta.
- **Business Rules Engine:** Our custom-developed business rules engine provides a configurable platform for logical and conditional evaluation of every transaction input to the system. Rules are constructed based on payer requirements and differ from program to program. The rules engine allows transactions to be pended or denied based on transaction characteristics. This powerful capability allows us to implement or change rules quickly to address payer requirements.
- **Electronic Data Interchange:** We leverage the 1EDI platform to support EDI workloads, with particular emphasis on the transaction sets for claims (837/835), eligibility (270/271), and claim status (276/277).
- **Payroll:** We deliver payroll workloads through two platforms: Workday (for agency with choice operations) and Microsoft Dynamics SL (for F/EA operations). Both payroll platforms integrate with our custom transaction processing and claims payment system to provide high scalability, high performance, and customized functionality.
- **Human Resources Management (HRM):** Caregiver administration workloads, including recruiting, onboarding, learning management, and benefits administration are delivered through our U2 system. U2 is our custom Microsoft system to maintain authorization information and interact with various other internal systems. We have the ability to offer fully electronic worker onboarding capability but maintain flexibility as required.
- **Reporting:** We provide extensive and flexible structured and ad-hoc reporting capabilities through a data warehouse with Power BI technology. This allows external users, with appropriate access, the ability to obtain structured reports on-demand and perform ad-hoc queries on authorized datasets.
- **Configuration Based Deployment:** The adaptability designed in our web portal, business rules engine, payroll system, and HRM system allow new program deployments to be conducted with a high degree of configuration changes, in contrast to system programming changes. As a result, deployment timelines are shorter and deployment accuracy is higher.

Policies and Procedures

We operate in 15 states, each with its own set of rules and regulations. To ensure compliance, we develop detailed policy and procedures manuals for every state in which we work. These manuals include policies and procedures for enrolling and obtaining FEINs for member/representative employers, hiring workers, tax filing, and ongoing payroll procedures. For West Virginia, Consumer Direct will draft and finalize a policy and procedures manual that incorporates state requirements. This manual will be designed specifically for West Virginia and can be updated as needed. Local and administrative staff are trained on the manual upon hire.

Our Fiscal Employer Agent (F/EA) department provides FEA services and is responsible for monitoring and updating all F/EA related policies and procedures according to federal, state and F/EA program requirements. The F/EA team regularly reviews and monitors all F/EA related policies and procedures, updates them as necessary, and submits them to the Consumer Direct executive team for review and approval. To ensure continued compliance, policies and procedures are reviewed by our state-based staff. We also seek input from other Consumer Direct departments and directors, such as the Quality Improvement (QI) department and the Compliance Director, to formulate these policies.

Our manuals are available in both electronic and print formats to accommodate the needs of users. We update our state-specific manual by incorporating federal and state regulatory frameworks, as well as new policies and procedures as necessary to ensure best practices. The manual covers federal and state requirements related to the tasks associated with performing F/EA functions and internal controls for monitoring the completion of all F/EA tasks. It ensures consistency with policies and states the responsible party for each task.

Internal Controls

Throughout our company, we have integrated quality assurance practices to strengthen internal controls and promote efficiency. To ensure consistent compliance with all program regulations and expectations, Consumer Direct maintains a Quality Improvement (QI) department specifically tasked with monitoring quality improvement activities on an ongoing basis and performing annual program reviews of each of our programs.

The QI department is an independent reviewer within our company and works separately from the program operations teams to prevent conflict of interest. QI analyzes and administers annual customer satisfaction surveys, performs program reviews, and monitors program metrics to ensure requirements are being met. The outcome of our QI internal reviews ensures accuracy of our systems, processes, and records, and has resulted in external audits with minimal to no negative findings. For example, our program in Idaho recently underwent a 6-day external audit for which we were given 10 days to prepare. The audit found no deficiencies in our services as testament to our ability to provide services with high standards and to consistently comply with laws, rules and regulations. In addition to our Quality Improvement department, Consumer Direct utilizes a variety of internal controls to monitor F/EA FMS services:

Internal Controls - Financial

All financial exchanges including Medicaid funds budgeted, received, disbursed and remaining balances are tracked in our financial and accounting systems. These systems process member budget authorization information and track spending summaries, budget utilization, and whether a member is over budget or claiming services they are not authorized to use in real time. Reports on utilization of these funds can be pulled at the individual and aggregate levels. Consumer Direct has several teams dedicated to monitoring the different sides of service transactions.

Additionally, our Accounting department is responsible for systematically recording transactions, following procedures, and performing ongoing account reconciliations. Accounting manages internal controls and ensures financial records follow Generally Accepted Accounting Principles (GAAP). Consumer Direct has strict policies in place regarding documenting financial/accounting transactions. Financial documentation is required to include complete and transparent information on transactions.

Internal Controls - Business Rules Engine

Our Universal Time and Expense (UTEX) system applies business rules to each service transaction. These business rules are configurable to meet program specific requirements.

More than 60 business rules are in place and reflect program-specific requirements to verify that time is submitted within the set rules and parameters. These rules automatically evaluate a series of program specific requirements such as:

- Member's eligibility for the service
- Worker's eligibility to provide services (i.e., passed background checks and meets certification/training requirements)
- Duration and frequency of services

If any service delivery transaction violates one of the 60+ rules, it is automatically held in a queue based on the rule that was broken. From that point, the service delivery transaction is manually evaluated and is either approved, denied, or sent back for revision. By submitting all transactions through our extensive automatic business process, we ensure that service delivery is provided according to program rules.

Internal Controls - Documentation

All documentation related to service provision including members and DCSWs documentation is maintained in our secure electronic document management system, DocuWare.

All member and DCSW requirements and documentation must be met or provided before service provision can occur. We utilize our Customer Relationship Management (CRM) system for onboarding DCSW and our electronic document database to store and track required documents and forms for both members and DCSWs.

Our electronic document database pairs with our proficiency tracker reporting system to ensure all member, worker, and service documentation is present and accurate before service provision occurs. The proficiency tracker identifies all documentation required for members and DCSWs, per program requirements and ensures each form is complete and accurate in our systems. All documents are reviewed by two teams for accuracy – initially at the local Operations level and again by our central Document Review team.

Local operations staff continuously monitor the proficiency tracker to verify all required documentation meets program standards. If documentation is missing, incomplete, or expired, the appropriate parties are contacted by local staff for corrections.

Making Adjustments and Responding to Change

This sub-requirement of Section 4.2.1.2 foreshadows additional requirements that follow in Sections 4.2.1.3, 4.2.1.4, and 4.2.1.5. Here the requirement speaks to the vendor's general ability to adjust and change. In those three sections that follow, the RFP is more explicit. The wording requires the selected vendor to 1) be constantly aware of changes to state provider manuals, 2) maintain an accurate West Virginia-specific vendor-authored policy and procedure manual at all times, and 3) actively assist the Agency in staying abreast of F/EA FMS developments outside of West Virginia.

For Consumer Direct, there is a unifying theme that ties all these requirements together. The Agency wants a vendor it can rely on to simply do its job. This requires a vendor willing to embrace these responsibilities without equivocation; offer corrective actions, not excuses, if it falls short on occasion; and share its intellectual capital freely without first trying to monetize it. Consumer Direct is such a partner as you will learn below.

Reliability starts with Consumer Direct communicating continually with our state partners (and payers) to ensure we maintain a constant pulse on any changes to a state's programs or requirements. For example, we are proactive in reviewing with our state counterparts those aspects of a state program that are more likely to change over the course of a contract. Examples would include eligibility, rates, and member spending that is covered.

Reliability continues with a Consumer Direct policy that requires state-assigned staff to review, as they are issued, their state-specific Medicaid Program bulletins, postings, and other provider and recipient communications for implications to existing waiver programs. We have our Government Relations (GR) team work in tandem with state-based personnel to review state budgets for their impact before and after they become law, as well as the various federal directives that could impact a particular state. These activities encourage our team to remain fully engaged with our state clients, always working together to avoid unintended oversights.

This approach to these requirements, and contract management overall, and its implications on making adjustments, is the direct result of Consumer Direct's emphasis on initiating, developing, and maintaining positive relationships with our service partners. No matter which state or program we are providing services for, our local staff seek friendly and collaborative relationships with our service partners and others within the community. Again, the presence

of local leadership, empowered with the ability to propose and deploy solutions with a minimum of bureaucracy, promotes healthy relationships with Agency staff, MCO staff, members, workers, and advocacy groups.

The Agency will enjoy a productive relationship with Consumer Direct when it comes to ongoing adjustments that become necessary over the lifetime of the contract. We address our value to the Agency in responding to substantive change in detail in Section 4.2.1.4.

4.2.1.2.1 – 4.2.1.2.6 Requirements

We will work with the Agency to incorporate any changes to the program in a smooth and efficient manner. The next several subsections (4.2.1.2.1 through 4.2.1.2.6) describe requirements.

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.

If awarded, Consumer Direct will be the Subagent to the West Virginia Government F/EA FMS and recognizes that we are wholly responsible for completing all Subagent – F/EA FMS tasks and deliverables. Consumer Direct will not subcontract any tasks outlined in this Scope of Work and will take all responsibility for completing the required 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.

Consumer Direct will participate in a Subagent-F/EA FMS Readiness review, if requested by the Agency. We will provide the findings of the Readiness Review within thirty (30) calendar days of the request. When we begin providing services for a new program, we work to ensure that we are ready to provide services according to the program requirements.

Prior to providing any services, we perform systems testing to demonstrate that our systems appropriately interact with each other and with any external systems required to provide services. The system test process is done according to what is laid out in a systems plan to validate the functionality, capacity performance, and integration of the automated system capabilities necessary to support statewide operations throughout West Virginia. We will communicate system statuses to West Virginia as they relate to readiness.

In addition to systems testing, we recognize that West Virginia may request a readiness review of specific deliverables. We will provide any and all requested deliverables as part of the readiness review. Consumer Direct will obtain approval of readiness to meet the program's service loads prior to initiating services. If there are issues with readiness review deliverables, Consumer Direct will address them and develop a corrective action plan to fix any deficiencies identified by the Readiness Review. We have a proven track record of successful readiness reviews. Through our decades of providing FEA services, we are constantly seeking ways to assess and improve our FEA processes.

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

We will participate in an annual Subagent- F/EA FMS ongoing performance review as requested by the Agency. In all states where we work, our Operations team remains ready for Ongoing Performance Reviews. We participate in external reviews regularly with our state and MCO partners. We regularly perform annual internal audits of our programs to ensure that we consistently deliver high quality services and we also participate in annual performance reviews with our partners in other markets regularly. Our staff will cooperate with all requests related to an ongoing performance review. We will seek to address any issues identified in an annual ongoing performance review in a timely manner.

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.

If requested, Consumer Direct will provide a corrective action plan to address any deficiencies identified by the Readiness Review or an Ongoing Performance Review. The plan of correction will include an estimated time for implementation as needed. Additionally, we will update our Requirements Traceability Matrix (RTM) to address any identified changes required during the corrective action process. The RTM captures all requirements to perform the scope of work and organizes them into functional areas (i.e., payroll, data interfaces, systems, project management, staffing, etc.), and assigns the responsibility of meeting these requirements to specific teams and subject matter experts. We discuss the RTM more along with other implementation activities in section 4.4.25. By tracking corrective actions within our RTM, we can better assign subject matter experts to resolve issues and track corrective action progress.

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.

Consumer Direct will prepare and maintain a Quality Management system to ensure our systems, policies, procedures, and internal controls meet program requirements and Subagent – F/EA FMS tasks are performed as required. Consumer Direct approaches monitoring and quality management activities in multiple ways. Both local operations staff and administrative support have defined roles and responsibilities. At the administrative support level, we further divide roles and responsibilities between a Quality Management (QM) Team and a Quality Improvement (QI) Team. Consumer Direct delivers high quality services on a consistent basis in part because the operations and administrative support staff focus on quality management and complement each other while also providing the necessary arms-length oversight required to be effective.

> Consumer Direct utilizes Quality Improvement (QI) and Quality Management (QM) teams to oversee consistent compliance with all program regulations and expectations and ensure program quality.

This two-level approach is effective because we have integrated quality management practices throughout our company to strengthen internal controls and promote efficiency. Consumer Direct places a strong emphasis on monitoring and quality management activities both to meet program standards and identify ways to improve service quality.

Local leadership is responsible for overseeing program-specific metrics and conducting project-specific monitoring and quality assurance activities. Our West Virginia-based Project Manager will utilize a dashboard that provides an overview of the various metrics required by the program. The dashboard will be customized to meet specific reporting requirements of the West Virginia program. Corporate resources act in a complementary fashion.

Consumer Direct utilizes Quality Improvement (QI) and Quality Management (QM) teams to ensure consistent and accurate application of all program regulations and to identify opportunities for quality improvements. QM is specifically tasked with monitoring quality management activities on an ongoing basis. QI is specifically tasked with overseeing training and performing annual program reviews.

The QM and QI departments work separately from the program-based operations staff to prevent conflict of interest and preserve objectivity in the review process. They work hand in hand to administer annual customer satisfaction surveys, perform annual program reviews, collect program metrics, and assist local leadership with ensuring quality of services meet program requirements. QM and QI perform annual reviews of all Operations programs, review their findings internally, then share their findings with local leadership and assist as necessary to help local teams achieve compliance and improvements. We update systems, policies, procedures, and internal controls to ensure services are provided with quality and according to program specific requirements.

Consumer Direct utilizes industrial strength systems with sophisticated functionality and easy integration to monitor metrics. Our technology supports the robust reporting capabilities on metrics that our payers across the country require.

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

Consumer Direct will prepare a Transition Plan that addresses when/if the contract ends with the agency. This Transition plan will include the functions and forms to be closed out by Consumer Direct and will be provided in a manner that gives the Agency at least sixty (60) calendar days' notice.

The members we serve are incredibly important to us. We recognize the Agency may choose another vendor to provide services. Regardless of whether services are being transitioned to us or transitioned to another vendor, we develop transition plans with members and their workers in high consideration. We work collaboratively with all parties involved to ensure that all transitions go as smoothly as possible.

Consumer Direct has conducted approximately 80 transitions/implementations in the course of our 30+ years in operation. This includes standing up a program for the first-time, assuming responsibility from another vendor, or turning over services to another vendor. In any situation, whether a small or large program, state-specific strategies and tactics must be developed if the transition is to succeed. But it is certainly an advantage to have done a number of transitions in order to develop a sense of what works and what doesn't work. In the last nine years, Consumer Direct has successfully completed 12 transitions in seven states.

COMPLIANCE

4.2.1.3 Maintaining Systems, Policies, Internal Controls to Comply with West Virginia Provider Manuals

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, which can be found at: https://dhhr.wv.e:ov/bms!Provider/Documents/Manuals/bms manuals Chapter 600%20Reimburs ement%20Methodolol!ies.pdf

Consumer Direct will comply with the requirements specified in the BMS Provider Manual, Chapter 600, Reimbursement Methodologies. Our payroll and billing systems apply the necessary West Virginia-specific business rules and policy requirements programmatically to all services delivered in order to ensure authorized services are delivered to eligible participants in the proper amount, scope, and duration. Approved claim transactions are prepared in the system, following fee schedule specifications, and transmitted to the MMIS via a HIPAA EDI 837 transaction. Any overpayments that occur (due to rate/eligibility errors or upon audit findings, for example) are processed via a direct check or claim adjustment transaction within thirty (30) days of identification by Consumer Direct. We continue to monitor these to maintain a current understanding of reimbursement methodologies.

SUPPORTING PROGRAMS

4.2.1.4 Maintain Continued Compliance with Applicable Requirements, Laws, and Regulations

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.

Consumer Direct's accumulation of intellectual capital in the self-direction field is second to none and we readily share it with our clients. We closely monitor changes in federal and state

labor, tax, employment, and workers' compensation laws that may affect our service delivery or our clients' thinking on these issues. Thus, Consumer Direct is very effective in responding to substantive change driven by factors and influences outside of any single state's policy. And our initial instinct is to always suggest member-centric improvements and solutions first and discuss the contractual implications second.

Consumer Direct's subject matter knowledge is such an asset to our clients because of the investments we make. We believe we dedicate more resources to policy, regulatory, and legal research than any of our competitors. We are actively involved with Applied Self Direction (an advocacy organization that provides self-direction industry expertise regarding labor, tax, and employment law, Medicaid rules and requirements, and more) and their work to track and support states and providers on changes, trends and best practices in self-directed services.

We believe we dedicate more resource to policy, regulatory, and legal research than any of our competitors.

We are also part of the leadership team with the American Network of Community Options and Resources (ANCOR) and work with them to monitor and influence national policy in the IDD space. Our partnership with ANCOR improves our understanding of activities at the federal level and provides the opportunity to impact governmental decisions around worker classifications, wages, and possible changes to Medicaid and waiver services.

In addition, we work closely with state advocacy and provider associations across the country for more focused policy guidance when possible. When necessary, we consult with attorneys for guidance on specific topics related to the self-directed employment model.

We synthesize all this effort and knowledge, which always includes consulting with local program staff, to be sure we understand and interpret relevant changes with accuracy. Once definitive impacts to operations or service delivery are clearly identified, we integrate necessary procedural and policy changes into our ongoing operational protocol through our operations, programs and quality improvement teams. We seek outside legal counsel in scenarios where we are unclear how to interpret or respond to a regulatory change. We have processes in place for policy change absorption, clarification and research, and dissemination to operations and program teams, who oversee policy manual changes, communications to members, and other aspects of incorporating new policies.

POLICIES AND PROCEDURES MANUAL

4.2.1.5 Policies and Procedures Manual

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.

Consumer Direct will prepare and maintain a Comprehensive Subagent-F/EA FMS Policies and Procedures (P&P) Manual that is specific to West Virginia program rules. This manual will document our systems, policies, procedures, and internal controls used to perform and monitor the effectiveness of all F/EA FMS functions and tasks. We will submit the manual in a mutually agreed upon electronic format to the Agency for review and approval thirty (30) days prior to implementation. We will maintain the P&P manual at all times and provide a current version to the Agency.

Each of the 15 states in which we operate has different rules and regulations, and each has its own organizational procedures manual. We are accustomed to developing and employing detailed policy and procedures manuals outlining procedures for every state in which we work, including policies and procedures for enrolling and obtaining FEINs for members, hiring DCSWs, tax filing procedures, and ongoing payroll procedures. Consumer Direct will draft and finalize the policy and procedures to incorporate all West Virginia requirements.

> "Consumer Direct has provided self-directed services to our members in New Mexico for many years. They are a collaborative partner and have reliably and responsively supported our members and caregivers throughout the state." VP LTSS of National MCO

Local and administrative staff are trained on the manual upon hire. We have created a specific team/department called the F/EA team. This group ensures employer forms are correct and manages employer tax related accounts with IRS and state tax agencies. The F/EA team monitors and updates all F/EA related policies and procedures according to federal, state and F/EA program requirements. Each year, the F/EA team reviews all F/EA related policies and procedures, updates as necessary, and the Consumer Direct executive team reviews, provides input, and approves the updated policies and procedures. To remain current, the manuals, policies and procedures are reviewed by our state-based staff. In addition to oversight by our leadership, we seek input from other Consumer Direct departments and directors, namely the Quality Improvement (QI)

department and the Compliance Director to formulate these policies and ensure continued compliance.

Our manuals are available in electronic and print format to accommodate the needs of users. We will update our state-specific manual by incorporating federal and state regulatory frameworks, and new policies and procedures as necessary to continue best practices. The manual will cover federal and state requirements related to the tasks associated with performing Subagent-F/EA FMS functions and internal controls for monitoring the completion of all F/EA FMS tasks. The manual ensures consistency with policies and states the responsible party for each task. We provide the table of contents of our FEA policy and procedure manual from Idaho as **Enclosure A**.

FEDERAL AND STATE AGENCY APPROVALS

4.2.1.6 Receive Federal and State Approval to Act as F/EA FMS

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:

Consumer Direct will apply for and receive approval from the applicable Federal and State agencies in to act as the Subagent to the Agency and to members/representative employers in West Virginia waiver programs. Before Consumer Direct can successfully transition the program from the incumbent, we must obtain the required credentials for F/EA FMS from federal and state regulatory and oversight authorities. Consumer Direct has never failed to obtain the proper credentials whether entering the state as the first F/EA or, as in this situation, where Consumer Direct will replace existing vendors.

There are few, if any, companies with the experience Consumer Direct has working with federal, state, and program requirements as an F/EA. The federal standard is to provide F/EA FMS services in accordance with all §3504 of the Internal Revenue Service (IRS) Code, Revenue Procedure 70-6, 1970-1 C.B. 420, as modified by IRS Proposed Notice 2003-70 and IRS REG-137036-08. We then establish our state F/EA status in accordance with specific state regulations and requirements.

We maintain compliance with federal and state regulations and requirements by dedicating trained and experienced employees to support local projects' needs regarding general F/EA and tax-related policy. Nearly two dozen subject matter experts are organized into F/EA and Tax teams to monitor and update central office-based staff and local project Operations staff on all F/EA and tax-related policies and procedures that are under development, under review, or scheduled for implementation, at either the federal or state level. A valuable resource in executing this daunting task are the resources available at Applied Self Direction (ASD). In Section 4.2.1.2, we referenced our relationship with ASD and how our work with them impacts

the way we approach making adjustments and responding to change. We bring up this important organization again as they are an invaluable resource for providing practical knowledge on policy and tax issues to multiple stakeholders and we gladly share our expertise with them.

Any changes in requirements at the federal level are reviewed by our F/EA and Tax teams as they will likely apply to all existing Consumer Direct projects. Internal policies and procedures are updated accordingly. At the state level, our local Operations project teams, working with their state counterparts, ensure ongoing compliance with state-based requirements as they evolve. As an additional layer of accountability and protection, the Consumer Direct Quality Improvement (QI) department and our Compliance Director participate in these processes as well. Finally, Consumer Direct's executive team reviews, provides input, and approves the updated policies and procedures as they occur, and again during an annual review cycle.

Consumer Direct has established systems and processes in place to ensure all required forms at both the federal and state levels are appropriately completed, submitted, and filed. Our teams work diligently to locate specific forms for each program required for F/EA operations at the state level regarding workers' compensation, unemployment, power of attorney, or any other business-related forms that might be required on behalf of a self-directing member. We describe these processes in greater detail 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.

For each state where we provide F/EA FMS services, Consumer Direct registers with the IRS to obtain a Fiscal Vendor Agent (FVA) Federal Employer Identification Number (FEIN) to file IRS Forms and deposit Federal taxes. This FEIN is different from the FEIN that we obtain for member/representative employers and is used to file IRS forms and deposit Federal Taxes.

Process & Timeline to Obtain CDCN FEIN

- Notification provided to Consumer Direct Employment Analyst and Caregiver Entry (CGE) & FEA Manager
- Employment Analyst and/or CGE & FEA Manager create Form SS-4 and email it to the CEO/President within 24 hours of notification
- CEO/President reviews, approves, signs, and sends back to Employment Analyst and/or CGE & FEA Manager within 24 hours of receipt of the request
- Employment Analyst and/or CGE & FEA Manager apply for and receive the specific FVA FEIN via the IRS online FEIN registration process within 24 hours of receipt of signed SS-4
- Employment Analyst and/or CGE & FEA Manager provides FVA FEIN to applicable parties within 24 hours of receipt of FEIN online and places documentation where required

CDWV has received assignment of EIN from the IRS to perform as Fiscal Agent.

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.

As required in West Virginia, Consumer Direct will execute IRS Form 2678 Employer/Payer Appointment of Agent with the Agency per IRS instructions. Consumer Direct will execute this form during the implementation of the program and will ensure it is maintained and remains updated for the duration of the contract. Our implementation team and FEA Team will execute IRS form 2678 according to WV program requirements and IRS instructions. The completed document will be securely maintained in our electronic database and updated/reviewed as necessary.

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.

As required by West Virginia, Consumer Direct will execute an IRS Form 8821, Tax Information Authorization with the Agency. This form will also be executed with the Agency upon contract award. This form will be executed by our FEA/Tax teams and will be maintained in our secure electronic document management system (DocuWare). We will renew IRS Form 8821, Tax Information Authorization with the Agency periodically and in accordance with 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.

To establish Consumer Direct as the member's employer agent, Consumer Direct obtains IRS Form 2678, Employer/Payer Appointment of Agent, during the enrollment process and uses our Fiscal Agent FEIN for the sole purpose of filing IRS Form 2678. Once completed, these forms are filed by a F/EA Coordinator who resolves any submission issues before proceeding. Corresponding documentation such as approval of Consumer Direct as the member's agent via IRS Notice of Appointment, LTR 1997C, is verified and scanned into the member's file in our electronic filing system. As with all required forms, we use our proficiency tracker system to confirm that all forms required for services are accounted for in the member's files. If these files are missing or incorrect, our proficiency tracker system will notify Consumer Direct if this documentation is missing or incorrect and needs attention.

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.

As applicable, Consumer Direct will file IRS Form 8821, Tax Information Authorization, if we are unable to obtain an employer's previously assigned FEIN. Form 8821 is obtained in exceptional situations where a prior FEIN is unobtainable by other authorized means. Consumer Direct follows all instructions when completing Form 8821. All updated forms and related correspondences will be maintained in the member's electronic file in our system.

Consumer Direct will 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. A copy of the executed Form will be maintained in the member-employer's file. When we execute this form, we use our company name or our F/EA manager as the second appointee on the form.

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.

Consumer Direct will facilitate the execution of an informed consent statement with each member/representative-employer to acknowledge that member/representative-employer is informed of Consumer Direct's role as an F/EA. During enrollment, Consumer Direct will explain our role as Subagent and the specific tasks we will be doing on behalf of the member/representative-employer. With the understanding of the member/representative, we will direct the member/representative to the informed consent statement for their approval and signature. We maintain similar agreements in many of the other states where we provide F/EA services. The signed informed consent statement will be maintained in the member's secure electronic file.

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.

Consumer Direct will file West Virginia Forms WV-ARI-001, Authorization to Release Information authorizing the West Virginia State Tax Department to release information regarding the member/representative-employer's West Virginia state income tax withholding tax and unemployment tax to the Subagent-F/EA FMS. This form is completed in accordance with form instructions and as necessary we will consult with the West Virginia State Tax Department regarding best practices for obtaining required tax information. We file equivalent

forms in other states for the purpose of receiving necessary tax information. Similar forms in other states are filed by our FEA and/or Tax teams depending on form requirements that are unique to each state. We will develop specific processes for the WV-ARI-001 form to ensure efficient and accurate filing. We will maintain the completed form and related correspondences in the member/representative-employer's electronic file.

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.

Consumer Direct will file West Virginia Forms 2848, Authorization of Power of Attorney to inform the West Virginia State Tax Department that the member/representative-employer authorizes Consumer Direct to receive and sign the tax forms listed relative to state income tax withholding and unemployment insurance taxes. As necessary, we will consult with the State Tax Department regarding best practices for file West Virginia Forms 2848, Authorization of Attorney. This form will be included in member/representative/employer packets. We will process this form in accordance with form instructions. The completed form and related correspondences are maintained in the member/representative-employer's electronic file.

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.

Consumer Direct will implement all revisions, additions, and discontinuations of federal, state and local government forms pertaining to self-direction of HCBS. We maintain compliance with all federal and state regulations and requirements by dedicating trained and experienced employees to monitor general F/EA and tax-related rules and regulations. We consistently monitor any federal or local regulatory changes with potential to require changes to service delivery for members or DCSWs, or our operations on any level. Policy areas we track include (but are not limited to) labor, tax, employment, and workers' compensation laws. We invest time with our policy research, legal research, and local operations staff to be sure we understand and interpret changes accurately, and we base changes to our operations on those sound interpretations. We do not hesitate to seek outside legal counsel in scenarios in which we are unclear how to interpret or respond to a regulatory change. We have processes in place for policy change absorption, clarification and research, and dissemination to operations and program teams who work to translate regulatory changes into policy manual changes, communications to members, changes to forms, reporting, data security, document storage, program operations, or any other aspect of service delivery wherein changes may be required. We employ full time staff who are committed to monitoring federal, state, and local changes continually. Our F/EA and Tax teams are responsible for monitoring the federal and state rules/regulations to ensure Consumer Direct continues to file the appropriate forms with the appropriate agencies/departments.

INTERFACES

The flexibility and adaptability of Consumer Direct's technology is demonstrated by our ability to seamlessly interface with third parties and create intuitive solutions to business process needs. Sections 4.2.1.7 through 4.2.1.13 define several such situations.

To support needs of the Utilization Management Contractor (UMC), our custom Microsoft system, U2, can accommodate all aspects of the prior authorization process including formats, budgets, units, spending plans, updates and inquiries. To issue claims through the state's MMIS, our technology demands user discipline in filing claims according to set specifications.

While other vendors have struggled to manage participant-directed goods and services vendor payments, we have not. In fact, we were among the first vendors to develop an innovative approach to processing electronic payments for online vendor purchases.

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.

Consumer Direct's system can receive referrals and prior authorizations issued by the State's Utilization Management Contractor. We can receive authorizations and referrals in a variety of formats and our systems are flexible to account for authorizations as budgets and/or units of services. We manage services in a variety of programs and have experience working with spending plans, budget dollars and service units as well as related forms of documentation that authorize services for members. Consumer Direct maintains a custom Microsoft system – U2 – to maintain authorization information and communicate with various other systems in Consumer Direct's system architecture. This system allows us to accommodate and accept member-specific information in a variety of formats. Our robust system can account for authorization changes and updates as they are supplied from the State's Utilization Management Contractor. The system allows for eligibility inquiries in real time and we utilize several checks to ensure authorization data is current and accurate. Our Authorization team is responsible for monitoring these processes and verifying that authorization information is correctly reflected and updated in our systems.

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.

Consumer Direct will enroll with the UMC's system to input and obtain data regarding members' eligibility, services, and other pertinent information. Depending on the UMC system's processes, we may seek to engage in design sessions with the State's Utilization Management Contractor to develop an Interface Control Document (ICD). The ICD is used to ensure all elements of transmitting member-specific information and authorizations are documented and agreed to by all parties. We are experienced in using state systems to check

eligibility and enter information according to system processes. For example, in Texas our Authorization team checks eligibility every month through the Texas's system. In New Mexico, our Supports Brokers (Resource Consultants) use the state's system to enter budget allocations into the system.

4.1.2.8 Capability to Add, Remove and/or Change Service Rates at No Additional Cost

4.1.2.8 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.

Consumer Direct is capable of and commits to adding and removing services and/or changing/adjusting service rates in our processes and systems as necessary. We can do this within sixty (60) days of notification by the Agency and at no additional cost. We make similar adjustments as services and rates are changed according to payer request. We do not charge for these types of changes.

4.2.1.9 Enroll in West Virginia's MMIS to Submit Claims Electronically

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, which can be found at: https://www.ecfr.gov/current/title-42/chapter-IV/subchapter- C/part-447?toc=1

Consumer Direct will enroll with West Virginia's Medicaid Manage Information System (MMIS) and obtain a West Virginia Medicaid Provider ID for the purpose of submitting claims electronically to the Agency through the State's claim system. Claims will be submitted for Medicaid services rendered within ninety (90) calendar days of the date of service according to the member's spending plan and established service rates.

We currently submit more than 600,000 claims every two weeks to more than 60 payers.

Consumer Direct has extensive experience and expertise in submitting claims for services according to varying requirements and timelines. We have engineered our claims system to allow for a broad range of configurations as we work with a large number of state and MCO payer systems.

With each new program, we configure our systems to adapt to the current systems of each new payer source. We leverage our expertise in claims submission and billing to effectively communicate with new payer sources and understand the unique requirements and processes

necessary to administer the program. Our claims staff are accustomed to accommodating various claims submission systems and will become familiar with the billing specifics for processing and management for West Virginia's programs. We submit claims electronically through our Electronic Data Interchange (EDI) or other channels as required and can send invoices/claims to payers per their requirements.

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

Consumer Direct's billing teams regularly monitor our state partners' MMIS portals for notifications and information to incorporate information. We monitor payer portals for notifications that require attention, such as:

- Changes to billing processes
- Updates to services or rates
- Portal maintenance and downtime

We appreciate this efficient method of communication to reach all users.

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)

We will 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. We acknowledge the importance of keeping accurate records and filing claims accurately based on member information. To successfully submit claims, all the required information is inputted and submitted on the claim. Any claims submitted will not exceed the applicable service amounts authorized to the member. Claims are not submitted until after services have been rendered.

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 4.2.13)

Consumer Direct will submit administrative PMPM claims to the agency monthly in accordance with Chapter 600. We have extensive experience submitting PMPM claims for administrative services rendered.

4.2.1.10 Deliver and Bill Only for Members with Active Authorizations

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.

Administrative services will only be delivered or billed to members who have authorizations for the dates of services being billed. We ensure all services are authorized at the time of enrollment. Business rules in our Universal Time and Expense (UTEX) system automatically prevent billing of unauthorized services. We recognize that administrative services only for TMH participants can begin if authorized by the TMH office up to three (3) months prior to the transition to the community. We also recognize that administrative services for 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.

Member's authorization statuses are routinely checked to ensure authorizations are in place. Claims are not submitted for members who are not actively receiving services and who do not have at least one DCSW qualified to provide services. Our U2 system allows for eligibility inquiries in real time and we employ an Authorization team who is responsible for monitoring processes and verifying authorization information is correctly reflected in our systems. Services are not billed unless an active authorization is in place.

4.2.1.11 Plan to Establish and Convey Rules and Requirements for Payroll and Invoice Payment

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).

Our robust systems and processes manage and record every service delivery transaction including time worked, services delivered, and payments made. We have sophisticated internal controls to verify time worked. All time submissions are subjected to the unique business rules for the program and payor involved. This process is done through our UTEX system where 60+ business rules are in place and reflect program-specific requirements to verify that time is submitted within the set rules and parameters. Examples of these rules include:

- Member's eligibility for the service
- Worker's eligibility to provide services (i.e., meets certification/training requirements)
- Whether the service has been authorized
- Whether the Participant's budget has sufficient funds or units for services

If any service delivery transaction violates one of the 60+ rules, it is automatically held in a queue based on the rule that was broken. From that point, the service delivery transaction is manually evaluated where it is either approved, denied, or held for confirmation/correction from a worker or member. By submitting all transactions through our extensive automatic business rules process, we ensure all time submissions are verified for each payroll accurately and on time. We employ a UTEX team of approximately 30 employees to verify any shifts that do not successfully pass through the business rules before payment is made to workers.

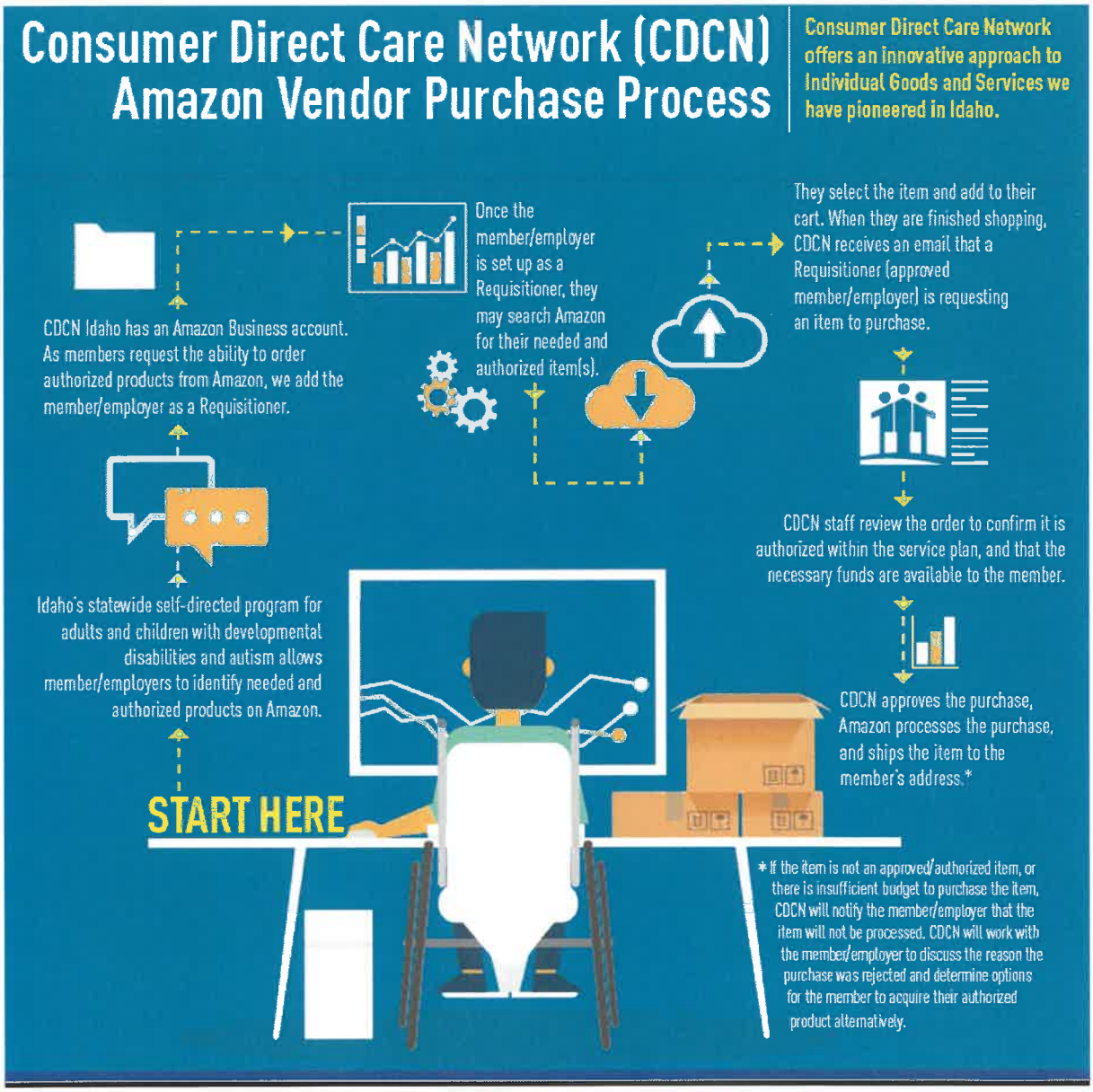
For Goods and Services, Consumer Direct employs an electronic document management system to meet all requirements for invoicing for approved goods and services provided by vendors. Invoices are reviewed, approved and scanned at the local office and routed to the accounting office electronically for prompt payment by the Accounts Payable department. This weekly process ensures prompt payment to vendors for approved goods and services and ensures they are provided according to members' Spending Plans.

In similar programs where we provide these services, we process all requests for vendor payment forms for participant-directed goods and services in accordance with the member's Spending Plan for approved goods and services. Pre-authorized goods and services are recorded and matched to vendor payment requests to determine that amounts are authorized and for the purpose of generating spending/utilization reports. All requests are maintained in the member's electronic file.

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

Consumer Direct has developed innovative approaches to processing electronic payments for purchases from online vendors. For example, in Idaho we have developed a way for purchases of goods and services through online vendors such as Amazon. The following graphic outlines how this process works.

Figure 2: Online Vendor Purchase Process



We will work collaboratively with the Agency to develop and implement a similar process that meets program requirements in the state of West Virginia.

4.2.1.12 Bill MCOs for Services Rendered

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.

Consumer Direct is prepared to bill each Managed Care Organization (MCO) based on member enrollment for services rendered if and when the state moves into a Medicaid managed long-term care system.

In the 12-month period ending 3/31/23, the Claims team has created/submitted nearly 18 million claims.

We work with state agencies and MCO payers across the fifteen states where we provide services. Our Claims team can accommodate various claims/invoice submission systems and processes. We only bill for services authorized to the member by the MCO or agency at the time-of-service delivery. Our team is highly experienced with the claims submission process for both state agencies and managed care organizations. We are already working with and submitting claims to managed care organizations across many of our states:

Consumer Direct Managed Care Experience

ABT - Agency-based traditional
AWC - Agency with Choice
FEA – Fiscal/Employer Agent
SBS - Supports Brokerage/Resource Consulting

Services Began	State	MCO	Service Provided
2014	Arizona	UnitedHealthcare	FEA, AWC, ABT
2017	Arizona	Banner University Family Care	FEA, AWC, ABT
2017	Arizona	Mercy Care Plan	FEA, AWC, ABT
2013	Florida	Molina Healthcare	FEA
2013	Florida	UnitedHealthcare	FEA
2015	Nevada	Anthem	AWC, ABT
2018	Nevada	Health Plan of Nevada (UnitedHealthcare)	AWC, ABT
2022	Nevada	Molina	AWC, ABT
2014	New Mexico	Blue Cross and Blue Shield of New Mexico	FEA, AWC, ABT, SBS
2014	New Mexico	Presbyterian Network	FEA, AWC, ABT, SBS
2019	New Mexico	Western Sky Community Care (Centene)	FEA, AWC, ABT, SBS
2023	Tennessee	Amerigroup	FEA, SBS

2023	Tennessee	BlueCare Tennessee	FEA, SBS
2023	Tennessee	United Healthcare	FEA, SBS
2016	Texas	Aetna Better Health of Texas	FEA
2016	Texas	Amerigroup Texas	FEA
2016	Texas	BlueCross BlueShield of Texas	FEA
2016	Texas	Children's Medical Center Health Plan	FEA
2016	Texas	HealthSpring Life & Health Insurance	FEA
2016	Texas	Community First Health Plans	FEA
2016	Texas	Cook Children's Health Plan	FEA
2016	Texas	Molina	FEA
2016	Texas	Superior HealthPlan (Centene)	FEA
2016	Texas	Texas Children's Health Plan	FEA
2016	Texas	United Healthcare	FEA
2019	Virginia	Aetna Better Health of Virginia	FEA
2019	Virginia	Virginia Premier Health Plan	FEA
2023	Virginia	Sentara Health Plans, Inc.	FEA
2022	Washington DC	UnitedHealthcare	FEA
2008	Wisconsin	Community Care, Inc.	FEA, AWC, SBS
2009	Wisconsin	Community Care Connections Wisconsin	FEA, AWC, SBS
2009	Wisconsin	My Choice Wisconsin	FEA, AWC, SBS
2011	Wisconsin	Lakeland Care District	FEA, AWC, SBS
2017	Wisconsin	Inclusa (now part of Humana)	FEA, AWC, SBS,
2017	Wisconsin	Independent Care Health Plan (iCare)	FEA, AWC, SBS

4.2.1.13 Billing Records Support Medicaid Services Claimed

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 claims form.

We will ensure that billing records support the amounts of Medicaid services claimed on the HIPAA electronic claims formed. Claims submission is based directly on the time that was entered and the services that were rendered. Processing through UTEX business rules ensures both claims and time entered stay within authorization or budgetary limits.

Time entry and expense transactions are evaluated to certify:

- Member eligibility on the date of service
- Employee authorization to provide services, including all necessary certifications
- Authorization from the state/payer for the proper amount, duration, and frequency of services
- Services are within existing limits or caps

Consumer Direct processes services based on unit rates, hourly rates, encounter rates, or per-diem rates. Our portal and financial safeguards prevent duplication of time entered and duplication of payroll for any single hour worked. Consumer Direct generates electronic claims directly from the billing records that passed business rule processing.

PLANS AND PROCESSES

Checks and balances exist to prevent unintended and undesirable outcomes. Allowing spending plans, service rates and/or units, and tax requirements to get out-of-kilter creates unnecessary and avoidable anxiety, stress, and aggravation. Those issues are even more problematic when they occur for a member who is temporarily admitted to a facility.

Consumer Direct utilizes a two-pronged approach to prevent these problems. One is a people approach and the other is a technology approach. The more effectively the former is employed, the less frequently the latter is deployed.

4.2.1.14 Ensure Claims Do Not Exceed and Spending Plans and Service Rates

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.

Consumer Direct ensures that the amount claimed does not exceed the member's approved Spending Plan and specific service rates. We have various systems and processes in place to prevent over-billing occurrences and address them if they were to occur.

Consumer Direct takes a two-pronged approach to preventing overspending – supporting members and systems safeguards.

Supporting Members

Consumer Direct's Resource Consultants (RCs) play a key role in helping members manage their budget to avoid overspending. Our RCs are trained to notice that a member is overspending against their Spending Plan during monthly calls or six-month in person visits. When this occurs, our RCs work alongside members to assist them in keeping their spending under control. In many of our other programs where members have budget authority, our RCs review their Spending Plan each month to ensure that members are on track with their budgets. If they are not on track our staff are trained to offer guidance in how to better manage their Spending Plans.

In some circumstances, members may be overspending their Spending Plans because their care needs have shifted. While we always seek to support individuals in their self-direction journey, we also recognize that sometimes circumstances change and the situation needs to be evaluated more closely. Our RCs are trained to identify these changes in the member's situation. When these changes occur, the RC will work with the member to determine if they still wish to direct their own care, would like to identify a representative (if they don't already have one) to help them manage their care, or if their care needs have indeed changed to the point where they are unable to successfully self-direct. If self-direction is no longer the best option, our staff can provide the member/representative and their families information on other services available to them.

Systems Safeguards

Our custom U2 system processes member/budget authorization information and tracks spending summaries, spending plan/budget utilization, and whether a member is over budget or using services they are not authorized to use. Reports on the use of these funds are available at the individual and aggregate levels. We process spending plan/authorization adjustments, amendments, or renewals once received to ensure all information is up to date. Consumer Direct has several teams dedicated to monitoring the different sides of these transactions.

We utilize our Universal Time and Expense (UTEX) system that applies configurable business rules to each service transaction. These business rules are adjustable to meet program specific requirements. There are 60+ business rules in place and reflect program-specific requirements to verify that time is submitted within the set rules and parameters. These rules include whether or not the member is authorized or has the funds to support the transaction.

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.

Consumer Direct has built extensive systems and processes to prevent overpayment. Our UTEX system runs many business rules ahead of time resulting in the rare occurrence of overpayment.

Should the rare overpayment occur, Consumer Direct will be responsible for recoupment within (90) calendar days of identification.

Our recoupment process includes:

- Notifications to caregivers that the overpayment occurred
- Options for repayment
- Compliance with state and federal guidelines for recoupments
- Standard processes to ensure funds are returned to the payer as applicable

If recoupment is not possible, Consumer Direct recognizes our responsibility to replace funds.

4.2.1.15 Reconcile Medicaid Services Paid to Units Billed

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

Consumer Direct will submit claims and will reconcile and document claims according to business rules developed to meet program requirements. Our platforms run automated reconciliations daily to resolve any discrepancies between time submitted, payroll, and claims. Our timekeeping and time submission review systems and processes reduce the likelihood of problematic claims. That said, we will make adjustments and correction of claims in a timely manner.

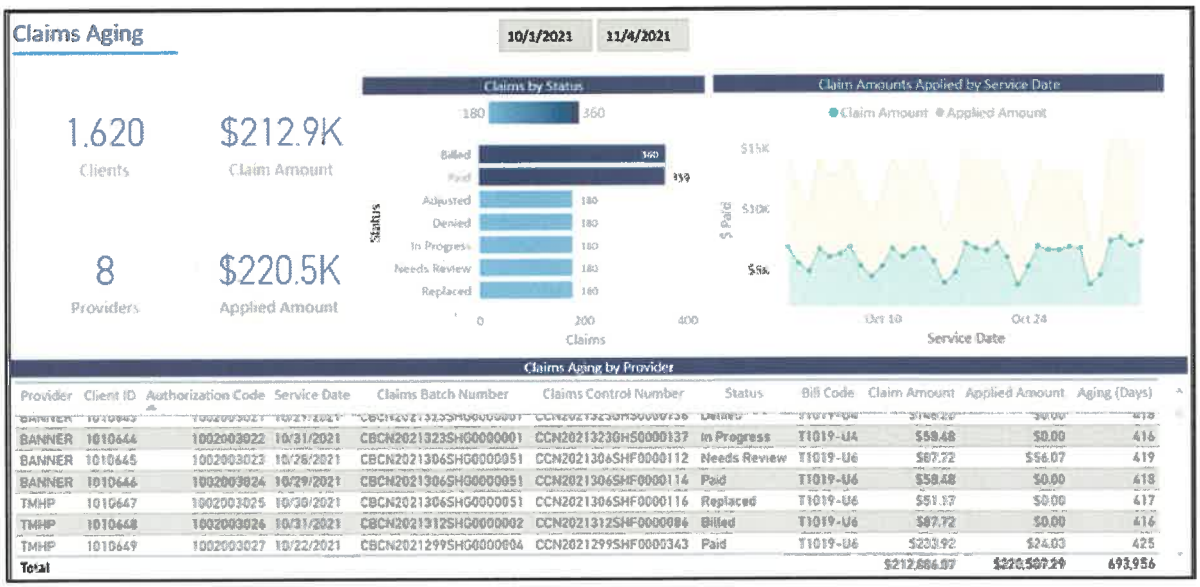
4.2.1.16 Resubmit Rejected or Denied Claims within 365 Calendar Days

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, which can be found at: https://dhhr.wv.gov/bms/Provider/Documents/Manuals/bms_mauals_chapter_800A_GenAdmin.pdf

We will resubmit any rejected or denied claims for Medicaid services, as appropriate, within 365 calendar days from the date of denial in accordance with Agency timely filing requirements.

Consumer Direct's Claims team is responsible for researching all issues that lead to denied claims or claims requiring reconciliation. The Claims team uses the Claims Aging Report to identify an outstanding amount that has not been received. The report provides all invoice details, if anything has been applied, and how old the claim is. The following example demonstrates what this report looks like. All data portrayed in this report is fictional.

Figure 3: Claims Aging Report



Provider	Client ID	Authorization Code	Service Date	Claims Batch Number	Claims Control Number	Status	Bill Code	Claim Amount	Applied Amount	Aging (Days)
BANNER	1010644	1002003022	10/31/2021	CBCN2021323SHG0000001	CCN2021323GHS0000137	In Progress	T1019-U4	$58.48	$0.00	416
BANNER	1010645	1002003023	10/28/2021	CBCN2021306SHG0000051	CCN2021306SHF0000112	Needs Review	T1019-U6	$87.72	$56.07	419
BANNER	1010646	1002003024	10/29/2021	CBCN2021306SHG0000051	CCN2021306SHF0000114	Paid	T1019-U6	$58.48	$0.00	418
TMHP	1010647	1002003025	10/30/2021	CBCN2021306SHG0000051	CCN2021306SHF0000116	Replaced	T1019-U6	$51.17	$0.00	417
TMHP	1010648	1002003026	10/31/2021	CBCN2021312SHG0000002	CCN2021312SHF0000086	Billed	T1019-U6	$87.72	$0.00	416
TMHP	1010649	1002003027	10/22/2021	CBCN2021299SHG0000004	CCN2021299SHF0000343	Paid	T1019-U6	$203.92	$24.03	425
Total								$212,666.07	$220,507.29	693,956

Claims analysts can look at the report to determine the denial reason, which is automatically pulled from the Electronic Remittance Advice (ERA). Some denial reasons may include: missing authorization, exceeding the authorized amount, client ineligibility or past timely filing. Our claims processes and controls are extremely effective in preventing denied claims or claims requiring reconciliation.

In 2022, we submitted nearly 18 million claims with less than 0.68% denied.

4.2.1.17 Process for Tracking When a Member is Unauthorized for their DCSW to Submit Time

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.

As part of the enrollment process, members/representatives-employers are trained to notify Consumer Direct if they are admitted to a nursing facility, hospital, or Intermediate Care Facility for Individuals with Intellectual (ICF/IID) disabilities. Upon notice that the member has been admitted to a facility, Consumer Direct will note in our systems that the member is currently in a care facility and that the member's DCSW cannot provide services or submit time during the member's facility stay. Members and DCSWs are informed services cannot occur while the member is in a care facility and that claiming services during this time constitutes as Medicaid fraud. Both parties are educated that instances of reporting false services or time worked will be reported and could have potential legal ramifications for both the member and the DCSW.

In addition to member and DCSW training, our RCs ask about hospitalizations or nursing facility stays during our monthly phone calls and semi-annual in-person visit. Responses are documented, including any dates that the member was in a nursing facility, hospital, or Intermediate Care Facility. The resulting documentation is noted in our CRM system and stored in the member's electronic file.

4.2.1.18 Ensure Self-Directed HCBS Services are Not Provided during Unauthorized Periods

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.

Consumer Direct will ensure HCBS services are not provided or billed when a member is admitted to a nursing facility, hospital or Intermediate Care Facility (ICF) for Individuals with Intellectual Disabilities.

When we are notified of changes to a member's eligibility, we can implement multiple safeguards to prevent time submission for an ineligible member. These safeguards include:

- Set specific member statuses to acknowledge if they are ineligible, receiving facility services or are otherwise inactive
- Set date parameters around these statuses that enable us to ensure that time cannot be submitted or billed during a member's ineligible period.
- Incorporate an attestation during the time submission process where the DCSW confirms that the member is not currently in a nursing facility, hospital or ICF
- Block time submission for a particular member if we are aware they are in a facility

4.2.1.19 Process for Billing Member or Representative when Established Service Limit is Exceeded

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.

Consumer Direct can bill members or representatives for services and goods provided above authorized amounts (when the State allows it), and for services and goods not covered by the State but obtained by the member under a separate agreement.

In some of our other programs, we bill members under certain circumstances. For example, in Washington, some members pay client responsibility based on criteria established by the program. Each month, these members receive a letter of their client responsibility that has accrued over the time period, based on how many hours their workers provided services. In West Virginia, members would be notified that they exceeded the service level and are responsible for the amount they went over their limit. We would send them a letter explaining their over utilization with a breakdown of the bill and the various methods that they pay.

While we can bill members, we always aim to avoid those situations by helping the member better manage their budgets in the first place. Over-budget situations are minimized or eliminated through careful monitoring of each member's budget utilization, and through programmatic application of business rules in the service delivery lifecycle. For example, over-budget service episodes can be prevented prior to their delivery through notice to the member that budget limits have been reached for a specific timeframe. Services submitted that create an over-budget situation can be suspended for processing, and partially paid or even denied for payment. In these cases, the need for billing the member for over-budget services is controlled and minimized. As we notice potential over utilization, our staff reach out to member to notify them of potential overspending and help them strategize budget management.

4.2.1.20 Process for Filing and Paying FICA, FUTA, SUTA Appropriately

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 FUTA/SUTA. 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.

Exemptions from paying into FICA, FUTA, and SUTA are dependent on the relationship between the DCSW and the member serving as the Employer of Record. The Employee-Employer Payroll Tax Exemptions Determination form is included in the worker enrollment packet and helps Consumer Direct determine which DCSWs are exempt from these taxes. Consumer Direct's standard operating procedure dictates that we withhold necessary federal income taxes and FICA/Medicare, FUTA, or SUTA taxes. We calculate and withhold based on the information provided in the Payroll Tax Exemptions Determination form to ensure we adhere to DOL and IRS exemptions. We also monitor hardship and live-in federal and state tax exemptions and apply these rules accordingly. The Payroll Tax Exemptions Determination form is maintained in the DCSW's electronic form. This form can be updated to meet the needs of the program in West Virginia. An example of the Payroll Tax Exemption Determination form is included below. The form is completed by the DCSW and signed by both the DCSW and the Employer of Record. This form must also be completed for each member/DCSW relationship, meaning if a DCSW provides services to more than one member, they must complete this form for each member. An example of this form can be found on the following page.

Figure 4: Payroll Tax Exemptions Determination Form

PAYROLL TAX EXEMPTIONS DETERMINATION

Attendant Name	Employer of Record (EOR) Name	Consumer Name

Background: Employees providing domestic services may be exempt from some payroll taxes. This is based on the Attendant's age and relationship to the Employer of Record (EOR). Consumer Direct Care Network (CDCN) will apply any exemptions based on the relationships identified below. **Incorrectly filling this form out may result in inaccurate tax withholdings.**

Note: If the Attendant and EOR qualify for tax exemptions, they must be taken. Exemptions cannot be waived. If the Attendant's earnings are exempt from these taxes, they may not qualify for related benefits. An example is unemployment insurance.

Attendant-Employer Relationship

Attendant select <u>one</u> relationship below.

☐ **I am the spouse of the Employer.** *Exempt from FICA[1], FUTA[2], and SUTA[3].*

☐ **I am the parent of the Employer.**

If parent checked, check <u>any</u> of the following that apply:

- ☐ I provide care for the EOR's child or stepchild that lives in the home.
- ☐ The EOR's child or stepchild is less than 18 years old or requires personal care of an adult for at least 4 straight weeks in 3 months.
- ☐ The EOR is a widow, widower, divorced or married and lives with a spouse, but the spouse has a physical or medical condition that prevents them from caring for the child at least 4 straight weeks in 3 months.

Exempt from FUTA and SUTA. Subject to FICA if all three boxes checked above; else FICA exempt.

☐ **I am the child of the Employer.**

If child checked, check <u>one</u> option below:

- ☐ I am 21 years of age or older. *Subject to FICA, FUTA, and SUTA.*
- ☐ I am less than 21 years old. *Exempt from FICA, FUTA, and SUTA.*

☐ **I am not related to the Employer or my relationship is not described above.** *Subject to FICA, FUTA, and SUTA.*

Acknowledgement: The Attendant and EOR attest the exemptions listed above are accurate. If this information changes, the Attendant must notify CDCN. If CDCN is not notified of changes, the Attendant may have to pay back money that should have been withheld from pay.

Attendant Signature	*Date*	*Employer of Record Signature*	*Date*

[1]FICA – Federal Insurance Contributions Act (Social Security and Medicare)
[2]FUTA – Federal Unemployment Tax Act
[3]SUTA – State Unemployment Tax

FINANCE AND FINANCIALS

The requirements defined in the next four sections (Section 4.1.2.21 through Section 4.2.1.24) address the essential need that your vendor is a responsible steward of public funds. As a privately held company we have no interest in being anything other than that. We are under no pressure from stockholders or investors to maximize the potential utility of any public dollars flowing through the systems we are entrusted to manage.

4.2.1.21 Establish 1-Time Minimum Reserve for 3 Months Estimated Service Costs

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.

Consumer Direct will maintain a one-time minimum reserve capable of paying for three (3) months of estimated services costs prior to the contract start date to account for retroactive payments from the Agency for billed claims. Consumer Direct practices a minimum liquidity of $60mm accomplished with access to an $81.5mm revolver and cash balances.

4.2.1.22 Advance Billing Only for Allowed Services

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

Consumer Direct will not bill in advance for any services except for approved community transition services, EAA, and PDGS. It is standard procedure that Consumer Direct approves and tracks the purchase of goods and services and tracks this as a part of the member's service authorization and budget.

Funds approved for payment of goods and services are tracked against the member's budget and available 'real-time' via the CDCN web portal, and receipts will be logged in the member's electronic profiles.

All requests are date stamped upon receipt. Our staff will review the request for completion and accuracy and cross-check that the item/service is authorized in the member's spending plan and funds are available. All requests, invoices, receipts or quotes will be maintained in the member's electronic file.

The invoices are processed by our data entry department where they are loaded into the accounting system. The natural integration into the accounting system ensures that all payments correspond to the correct plan upon payment.

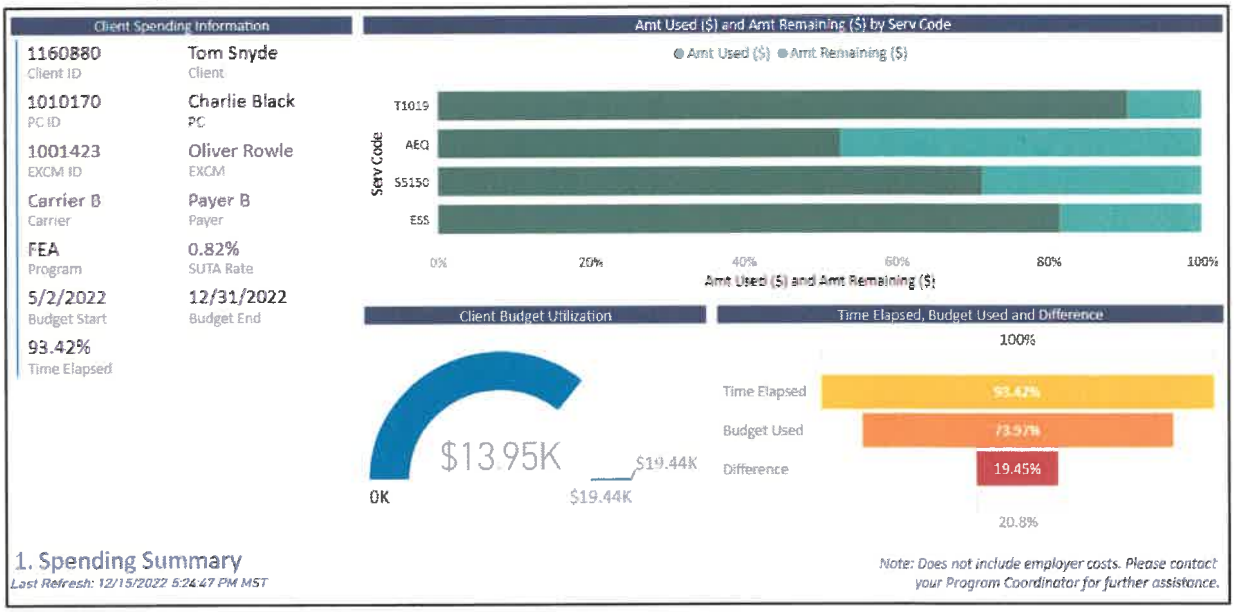
4.2.1.23 Provide Approved Monthly Utilization Data/Reports

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).

Consumer Direct will provide monthly (in an agreed upon format and schedule) 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.

We can produce comprehensive reports that can be provided both to the Agency as well as members and their representative as requested. This report compares monthly self-directed service expenditures to the amounts allocated in the member's budget/spending plan and can be adjusted to show information at a monthly or cumulative level. We provide a sample of a budget utilization report below. All information is fictional.

Figure 5: Budget Utilization Report Example



4.2.1.24 Maintain Accounting and Information System to Receive, Disburse, and Track Medicaid and other Federal Funds

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.

All financial exchanges including Medicaid funds budgeted, received, disbursed and remaining balances are tracked in our financial and accounting system. Consumer Direct has developed a robust system to ensure reliable and efficient day-to-day operations. As Consumer Direct has grown, we have updated our systems to remain current, scalable and flexible. We have been deliberate and thorough in choosing, designing and upgrading our system architecture. Our primary system is a pairing of a custom Microsoft platform with Workday. This allows for the handling of authorizations, business rules and program specific requirements. We deliver payroll workloads through two platforms: Workday (for agency with choice operations) and Microsoft Dynamics SL (for F/EA operations). Both payroll platforms integrate with our custom transaction processing and claims payment system to provide high scalability, high performance, and customized functionality. We are confident in our system architecture and its ability to support services in West Virginia.

Our custom U2 system processes member/budget authorization information and track spending summaries, budget utilization, and whether a member is over budget or using services they are not authorized to use in real time. Reports on the use of these funds can be pulled at the individual and aggregate levels. We process budget/authorization adjustments, amendments, or renewals once received from the Agency. Consumer Direct has several teams dedicated to monitoring the different sides of these transactions. Our systems and teams work together to ensure that all transactions and balances are recorded, tracked, and maintained in our systems.

MEMBER ENGAGEMENT

The Consumer Direct approach to initial member engagement is to get it done right, quickly, and the first time. Operationalizing this attitude requires three key elements. Staff must know their roles, know the Agency's preferred process, and know the Agency's forms and their requirements. In Section 4.2.1.25 through Section 4.1.2.34, we demonstrate that knowledge. Our intense focus on cultivating this knowledge immediately after contract award helps ensure every member's experience is pleasant and productive. (It should also help assure the Agency that Consumer Direct can support the growth of the existing programs the RFP forecasts.)

Consumer Direct has clearly defined the role of on-site staff operating in West Virginia and our Missoula-based staff. The roles are designed to be supportive, complementary, and integrated. In this section you will read which personnel are responsible for which process and how we make that seamless throughout. You will read below about the multiple factors that make initial member engagement successful. They include the technical (e.g., paper and electronic forms, prepopulated documents, and clear instructions) as well as the human element. For Consumer Direct, Resource Consultants play a crucial role in getting things done right, quickly, and the first time.

4.2.1.25 Policies, Procedures, and Internal Controls to Enroll Members in Personal Options

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:

We use various internal controls to ensure complete and accurate member and worker information during the enrollment process. This includes design and set-up of accurate and easy to use enrollment packets and teams dedicated to processing the required forms and set-up of members and workers in our internal systems. The following narrative outlines how we design and prepare our enrollment packets and subsequently enroll members to receive services.

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 Virginian WV/ARI-001, Authorization to Release

information

4.2.1.25.1.10 Instructions for completion of all forms and provision of request 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

Developing Enrollment Packets

Employer enrollment packets contain all necessary federal and state tax forms to establish member/representatives as employers according to federal and state forms. The forms are accompanied by descriptive, easy to read explanations that address the intent and purpose of each form as it relates to the member.

We have extensive experience creating user-friendly and accurate enrollment packets. Packets, though typically processed electronically, are available in hard-copy format upon request and can be pre-populated with member data. Once the packet is completed, it is stored within the member's or DCSW's electronic profile. Our Quality Improvement (QI) team will identify and incorporate into the packets all applicable requirements and we will ensure that all West Virginia-specific forms and requirements are met. Consumer Direct's F/EA, Caregiver Entry, Billing, and Payroll teams provide additional support to guarantee that respective enrollment and hiring packets meet all company, state, and federal requirements.

Our enrollment and employment packets are created to provide accurate information in a user-friendly format.

The QI team will train local staff and implement processes in West Virginia to ensure that local staff understands requirements and how to complete documentation correctly at the initial enrollment. The QI department will consistently and regularly monitor that the most current forms from state and federal agencies are in use by local offices. The QI department has demonstrated their repeated success with requirement gathering, packet design and implementation during the rollout of services in the District of Columbia, Florida, Idaho, Minnesota, Texas, Virginia, Washington, and Wisconsin.

Member Enrollment Packets will include the following as outlined by RFP requirements:

Member Enrollment Packet - Cover Letter

- Welcomes member/representative to program, introduces Consumer Direct, and outlines the forms that need to be completed and submitted to Consumer Direct.

Member Enrollment Packet - IRS Forms

- **IRS Form SS-4, Application for Employer Identification Number**
  - Establishes a federal employer identification number for the member/representative as an employer.
- **IRS Form 2678, Employer Appointment of Agent**
  - Establishes Consumer Direct to act as Employer Agent on behalf of the member/representative.
- **IRS Form 8821, Tax Information Authorization**
  - Authorizes Consumer Direct to inspect/receive federal tax information for the type of tax and years/periods listed on the form. Also revokes prior tax information authorizations.

Member Enrollment Packet - West Virginia Forms

- **West Virginia Subagent Consent Form**
  - Member consents to using Consumer Direct as a subagent.
- **West Virginia Forms 2848, Authorization of Power of Attorney**
  - Gives Consumer Direct the power to act on behalf of the member/representative in matters related to the West Virginia State Tax Department.
- **West Virginia Office of Business Registration Application**
  - Register the member as an employer with the state of West Virginia.

- **West Virginia Forms WV/EFT-5, State Tax Department Electronic Funds Transfer Application**
  - Allows state taxes to be paid via Electronic Funds Transfer (EFT).
- **West Virginian WV/ARI-001, Authorization to Release Information**
  - Authorizes Consumer Direct to inspect/receive state tax information for the type of tax and years/periods listed on the form.

Member Enrollment Packet - Packet Aids

- **Instructions for completion of all forms**
  - Helpful aids for completing forms and requesting information.
- **Employer Enrollment Packet Checklist**
  - A checklist to help the member and RC confirm that all forms have been completed and provided to Consumer Direct.
- **Self-addressed stamped envelope or means for electronically submitting completed Packet to Vendor**
  - A process for submitting all completed forms to Consumer Direct.

As the selected vendor, we would work closely with West Virginia program staff and any other relevant state agencies or parties to develop accurate enrollment packets that include all required forms to meet West Virginia requirements and best practices for member/representative- employer enrollments. As part of this process our staff would seek input from the Agency, program staff, the West Virginia State Tax Department, and WorkForce West Virginia.

For ease of access, forms will be readily available on Consumer Direct West Virginia's website and can be printed out in hard copy format. Resources for completing the forms will also be included on Consumer Direct's West Virginia's website.

Being member- and worker-centric means working diligently to get it right.

Members can submit enrollment packets via electronic packet process, by email, or by providing the completed physical forms to their Resource Consultant. Regardless of submission method, the completed packet is scanned and stored in the member's electronic file.

Electronic Packets

Members and DCSWs are encouraged to utilize our electronic packets for a streamlined online enrollment process. Electronic packets have several benefits compared to paper enrollment packets including:

- Increased efficiency in packet completion as key demographic information can be pre-populated throughout all necessary forms so the individual completing the form doesn't have to fill out the same information repeatedly

- Reduction in errors due to less redundant entry and built-in data validation making sure all required fields are filled out
- Improved security and timeliness as the packet is easily and securely submitted to CDWV once complete

Members and DCSWs will be able to access the electronic enrollment packet from our website or via email. From the initial link, the individual will fill out a brief form on the webpage including their email address. The process for completing an electronic enrollment process is intuitive and easy to follow.

West Virginia readers can review our DocuSign User Guide here: http://www.consumerdirectva.com/wp-content/uploads/2020/05/DocuSign-User-Guide-20200507-1.pdf

4.2.1.26 Plan for Assisting Members/Representative-Employers with Employer Packet

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.

Consumer Direct proposes multiple resources and checks to aid member/representative-employers in completing and submitting the required information and forms included in the Employer Packet. These include:

Resource Coordinators

One of the most important factors in helping individuals complete their enrollment forms is our RCs. Our RCs can meet with members/representatives and walk them through the enrollment process. They will be able to answer members' questions, explain what the forms mean, and direct them to other helpful resources as necessary. Our RCs will also be Notaries Public for the purpose of signing forms that require notarization. We ensure that our RCs are trained to support the people we serve in a culturally sensitive and person-centered manner.

Prepopulated Forms

We use pre-populated forms when applicable and appropriate to reduce the information that member/representative-employers must complete. This reduces the likelihood of errors, and the time individuals spend completing forms.

Electronic Form Submissions

Member/representative-employer are encouraged to opt for electronic form submission. Electronic form submission has several benefits:

- Fields (i.e individuals name) that repeat across forms automatically populate throughout a packet once the first field of that kind is completed.

- Fields that don't need to be completed can be restricted for editing, thus preventing the individual from putting information in the wrong place.
- Prompts can be set up to prevent someone from moving on until they complete the entire form.
- Enrollment packets can be saved and completed later. Users are prompted via email after a scheduled number of days if their enrollment packet is still pending or has not been sent to Consumer Direct.
- Reduced likelihood of delays as forms are easy to send to Consumer Direct and if there are errors they are sent back to the individual in real time for corrections.
- Forms are cleaner and easier to read.
- Our electronic process has features that support electronic notarization. We will work with the state to ensure any electronic signature and notarization collection complies with state requirements.

Instructional/Reference Resources

To help members/representatives-employers understand what forms they are completing and why, we produce a variety of instructional/reference resources. These include documents and videos that walk the individual line by line through forms that can potentially be difficult to understand. These resources and videos would be accessible on our Consumer Direct West Virginia website. For example, in Virginia, we have created videos that walk member/representative-employers and workers through each form of the enrollment packet. These videos can be found on our training materials page of our Virginia website: https://www.consumerdirectva.com/training-materials/

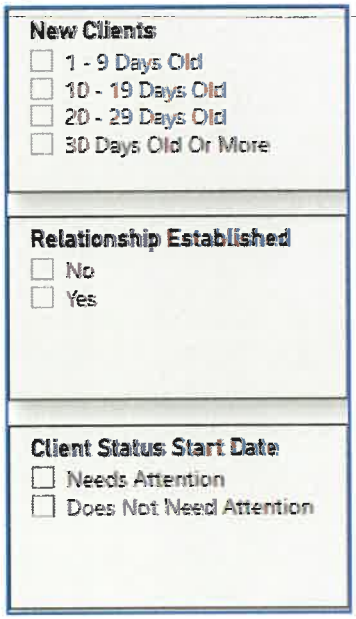
Multiple Form Checks

When enrollment packets are submitted and processed, they go through multiple checks to confirm they are accurate and complete. If the packets are submitted electronically, many potential errors such as missing fields are caught automatically. For example, if a required field is not complete, the individual is prompted by a notification that a required field is incomplete. Required fields must be completed to finish the signing process. The member's RC also plays a key role in ensuring forms are completed accurately. RCs are trained in the form process and will help the member complete forms correctly. Once completed enrollment forms are sent to Consumer Direct, they are checked yet again by our Document Review team. Our Document Review team carefully reviews each form for completeness and accuracy. If the form needs revision, they contact local operations who will reach out to the individual to make corrections to forms as necessary. The Document Review team and our reporting systems work together to ensure that all required forms for both members and their DCSWs are in our system and completed fully and accurately.

4.2.1.27 Process Completed Employer Packet within 2 Business Days

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.

Figure 6: Client Status Report



Our staff will collect and process information from the Employer Packet and file forms with the applicable federal and state agencies within two (2) business days of receipt of complete information. Our local West Virginia and Missoula-based administrative teams collaborate for ongoing reviews of enrollment information. Our staff are trained to process employer packet information in a timely manner.

We have several levels of internal controls in place from when we first receive the referral to the final step of member and DCSW enrollment. All steps in the process help us to verify that member and DCSW enrollment accounts are set up to be complete with all state, federal, and local regulatory standards in mind.

Our system allows us to search for members by how long they have been in our system, whether a relationship has been established with a DCSW, and whether or not their account set up needs attention as shown in the left screenshot.

Member enrollments status is tracked through information documented in our CRM. Once a referral is received, the referred information is populated into our CRM system where the referral is assigned to a Resource Coordinator. The RC initiates contact with the referred member and begins setting up the initial enrollment meeting. The RC monitors each step of the enrollment process through the CRM. All member requirements including documentation must be met before service provision. The RC can assign certain tasks to different Consumer Direct Departments if there is something holding up the enrollment process.

We have multiple teams in place to process enrollment packets and forms once they have been received. Our F/EA and Tax teams are responsible for onboarding, offboarding and day to day management of employers (member/representatives). When a member completes an enrollment packet, the F/EA team establishes FEINs, creates unemployment and withholding accounts, and files powers of attorney as necessary.

Our Authorization team plays a role in setting up a members' accounts for services by monitoring authorization information in our system. We work through the enrollment process to verify all member information prior to payment for services rendered against their budget. We also maintain local staffing availability and customer support for the member throughout the process to get them enrolled and enable DCSWs to provide their services in a timely manner. This internal control ensures the same individuals creating the member account in the system are not also creating an authorization.

4.2.1.28 Maintain Member/Representative-Employer Documentation in Approved Format

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.

We maintain all records and reports in a secure and reliable manner using state-of-the-art information technology systems. Our systems are scalable and adaptable to meet unique program requirements. We operate an electronic document management platform called DocuWare. DocuWare is secure, meets all HIPAA compliance standards, and integrates with other systems in the Consumer Direct IT infrastructure.

Consumer Direct stores all operational records in our secure DocuWare system. This system is backed up on secure servers in different locations. We monitor version control closely and require change verifications/approvals for our records. DocuWare stores all forms and documents completed by members and DCSWs during the enrollment and hiring process.

We maintain all current and archived member/representative, DCWS, and vendor/provider files needed to comply with federal, state, and local program rules and for the required duration. All records are maintained for auditing purposes. We adhere to all state and federal policies that define specific retention schedules for different types of records. Consumer Direct follows a conservative retention schedule according to industry standards.

4.2.1.29 Notify and Correct Missing Member/Representative-Employer Information within 5 Business Days

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.

Consumer Direct will notify the member/representative-employer regarding missing or incorrect information submitted in the Employer packet and assist the member/representative-employer with obtaining it within five (5) business days.

Regardless of whether enrollment packets are electronic or physical, all completed packets are viewed by two teams for accuracy – initially at the local operations level and again by our central Document Review team. This process ensures all required enrollment forms are present, accurate, and complete. Any incomplete or incorrect forms are noted and are sent back to the RC to follow-up with the member or DCSW to fix the issue. Our proficiency tracker report identifies any member or DCSW who has incomplete or inaccurate forms as per review from the Document Review team. In addition, our expiration report is used to track any forms or documentation that may expire such as background check results, First Aid or CPR Certifications for DCSWs (depending on the program). This report incorporates all applicable state and federal expiration timelines.

Local Operations staff continuously monitor the proficiency tracker to verify all required documentation continues to meet program standards. If documentation is missing, incomplete, or expired, the appropriate parties are contacted by local staff for corrections. Our onboarding and enrollment process will meet the specific documentation requirements in West Virginia.

4.2.1.30 File and Maintain IRS Form SS-4 and FEIN Per IRS Procedures

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 member or their representative completes a pre-populated IRS Form SS-4, Application for Employer Identification Number, during the enrollment process for the sole purpose of obtaining a FEIN for the member/representative-employer. Consumer Direct will complete the SS-4 for each individual to obtain a FEIN. This FEIN for the member (or their representative) is used for the sole purpose of withholding, filing, and depositing certain federal employment tax forms and federal tax payments on behalf of members who employ DCSWs. These FEINs will not be used for processing wages or related federal forms/taxes for workers of Consumer Direct.

To obtain a previously assigned FEIN, the F/EA Team submits Form SS-4 to the IRS by fax and continues to do so bi-weekly until receipt of the previously assigned FEIN by fax or mail. Additionally, outreach to the previous vendor is done weekly, as necessary. During the implementation, we will work closely with the incumbent F/EA to transfer all relevant information regarding FEINs and related tax information as efficiently as possible to provide members and DCSWs with a seamless transition. We pre-populate forms related to FEIN obtainment with the appropriate information to simplify the enrollment/transition process for members and prevent errors in submitting forms to the IRS. We also reach out to the employer to have the employer provide their previously assigned FEIN, whether they get it from the previous vendor or they contact the IRS themselves. Instructions are provided to them informing them where they can find their previous FEIN and how to contact the IRS if necessary.

A copy of Form SS-4 as well as any correspondence from the IRS, including IRS Confirmation via IRS Letter CP 575 or IRS Letter 147C are maintained in each member's HIPAA compliant electronic file. To ensure compliance while establishing FEINs, the Consumer Direct F/EA team will file forms with the IRS and resolve any submission issues before proceeding with setup. Corresponding documentation will be scanned into DocuWare, our electronic filing platform, where we securely store and track required documents. The F/EA team will follow up with all future IRS requirements and correspondence. We will use our Proficiency Tracker system to monitor that required records are on file. Our F/EA Supervisor reviews records and documentation monthly.

4.2.1.31 File and Maintain Employer Account Numbers for State Income Tax and Unemployment Insurance

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.

Similar to the process of completing an SS-4, Consumer Direct will file the WV/Bus-APP, Business Registration, to obtain employer account numbers for state income tax withholding and state unemployment insurance purposes. This form will be completed and filed with the West Virginia State Tax Department per form rules. All documentation and related correspondence is maintained in the member/representative-employer's file.

4.2.1.32 File with Municipalities as 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.

Consumer Direct understands there are currently eight municipalities requiring additional filings. We will file with these municipalities, and others as necessary, to register members as employers if they reside in the following:

Charleston	**Huntington**	**Morgantown**	**Romney**
Fairmont	**Madison**	**Parkersburg**	**Weirton**

Our Tax team and our local operations team will develop a process to register member/representative-employers who reside in these municipalities for the purpose of taxes. Documentation of the registration including the member's account number are maintained in the member/representative-employer's electronic file.

4.2.1.33 Withhold and Submit Municipal Fees as Applicable

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

When applicable, Consumer Direct will withhold and submit municipal fees for member's qualified DCSWs. Municipal fees paid will appear on the DCSW's pay stub.

4.2.1.34 Responsibility for Penalties for Failure to Register as Required

4.2.1.34 The vender 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.

Consumer Direct will take responsibility for any penalties for failure to register the member/representative-employer or failure to pay municipal fees as required by the municipality.

DCSW ENGAGEMENT

The collaboration described earlier between the Missoula team and the local on-site team for initial member engagement also applies to the DCSW. Consumer Direct staff must know their roles, know the Agency's preferred process, and know the Agency's forms and their requirements. Consumer Direct has clearly defined the role of on-site staff operating in West Virginia and our Missoula-based staff for the DCSW initial engagement. Here too, the roles are designed to be supportive, complementary, and integrated.

For the member, it is important to engage quickly with the DCSW so that services can begin as soon as possible and appropriate. But it is also important to get it done right so that the member is not put at risk because a DCSW lacks qualifications or training or does not meet a background check requirement. Consumer Direct takes our responsibility here seriously.

In Section 4.2.1.35 through Section 4.2.1.49, we describe how Consumer Direct executes the more than 20 steps/requirements defined in this section, as well as provide a visual that outlines the "OK to Work Process." We describe how we execute the required administrative steps once a DCSW is deemed "Ok to Work" such as obtaining and maintaining different forms.

4.2.1.35 System, Policies, Procedures, and Internal Controls for Processing DCSWs' HR Documentation and Vendor Information

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 Est Virginia Form IT-104, West Virginia Employee Withholding Exemption Certification

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

4.2.1.3.5.1.7 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 Screen (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., timesheet 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 Adaptions, 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 Adaptions, 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 request and instructions for submitting invoices for payment (if applicable)

4.2.1.35.1.22 Participant-directed 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 require information to determine if a DCSW meets one of the criteria below:

4.2.1.35.1.24.1 To be FICA and/or FUTA/SUTA exempt as a family employee per Section 3 of IRS Publication 15

4.2.1.35.1.24.2 Qualifies for Difficulty of Care payments (i.e., exempt for 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

Consumer Direct will prepare DCSW Employment and Participant-directed Goods and Services Provider and Vendor Engagement Packets. These packets will include all required documents listed in 4.2.1.35.1.1 through 4.2.1.35.1.26.

At a high level these will include an introductory cover letter, packet instructions, a personal data collection form, federal and state tax documents, background check information and related forms, training information, information on submitting time, and a confidentiality agreement.

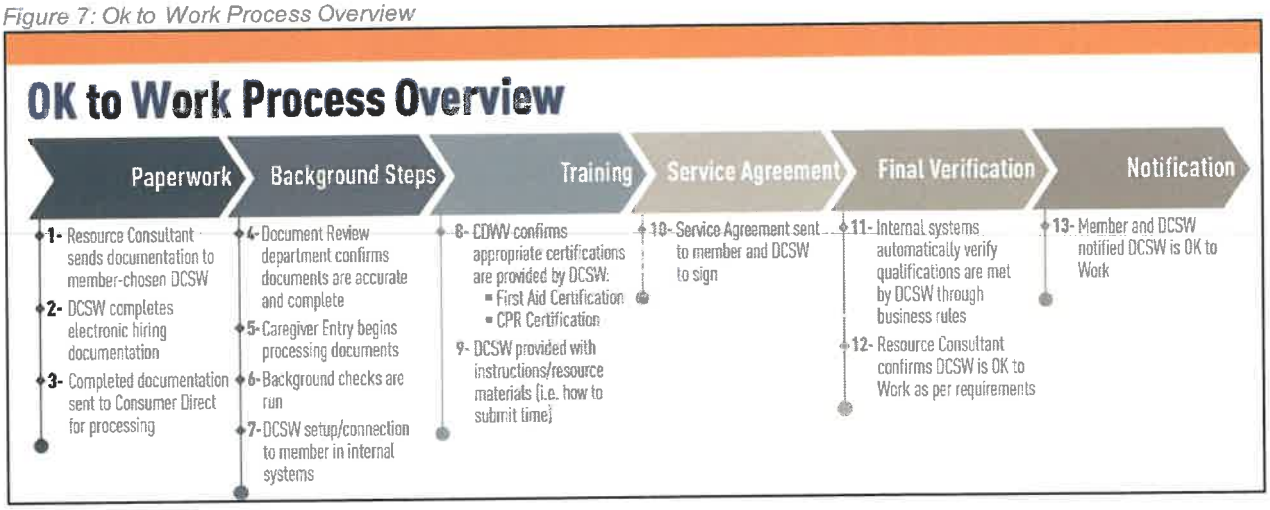
We have extensive experience creating user-friendly and accurate enrollment packets. As we prepare to transition members and their DCSWs from the current F/EA vendor, our experienced program and QI teams will adapt the best features of the existing packets while we consult with the Agency to determine where there is room for improvement in DCSW enrollment packets.

Our hiring process has built-in internal controls and monitoring to ensure the worker meets qualifications and training requirements and is "OK to Work" before they can begin providing services. Any potential disqualifying factors are detected early in the process. DCSW qualifications are verified through a series of automatic system processes and manual reviews by various Consumer Direct Departments. This verification process is designed to be efficient and convenient so DCSWs can begin providing services to members as soon as possible. Throughout the process, DCSWs and members remain informed by our staff. During the enrollment and hiring processes, DCSWs and members are notified that DCSWs are unable to work without the Ok to Work notification from Consumer Direct.

Once the hiring process is complete and Consumer Direct determines that all qualification and training requirements have been met, Consumer Direct will notify the DCSW and the member of the DCSW's "OK to Work" status. The "OK to Work" notification can only be sent once specific conditions have been met (i.e., the DCSW is qualified and has completed all hiring activities and documentation) and the member's authorization for services has been verified.

DCSW qualifications are monitored in our custom Microsoft-platform "U2" system which is paired with Workday where DCSWs can access trainings. In our U2 system, we specify the qualifications required for a DCSW to be considered "OK to Work". If these specifications are not met by the DCSW, they will not receive an "OK to Work" notification from Consumer Direct. Depending on the missing qualifications, DCSWs may need to update forms they submitted or provide Consumer Direct proof of any required trainings. RCs will inform DCSWs what information is missing and can assist them with resubmitting information as needed. Additionally, instructions in our hiring documentation will remind prospective DCSWs that they cannot provide paid services until they have received the "OK to Work" notification from Consumer Direct.

Figure 7: Ok to Work Process Overview



Consumer Direct employs established internal controls to assure completed and accurate member and DCSW information, along with West Virginia and Missoula-based administrative team collaboration for ongoing reviews of enrollment information. All steps in the process help verify that the DCSW's electronic profile is developed in compliance with all state, federal, and local regulatory standards. We work through the enrollment process to verify all DCSW information prior to payment for services rendered. We maintain local staffing availability and customer support for the member throughout the DCSW hiring process.

We will adapt and finalize the draft policies and procedures manual with Agency staff to create a comprehensive F/EA FMS and Resource Consultant manual to guide our work in West Virginia. This manual will be reviewed for accuracy by our Project Manager and accounting, payroll and QI departments as we collaborate with the Agency. We include in **Enclosure A,** a sample table of contents from our Idaho Policies and Procedures Manual for F/EA FMS.

For each new program we operate, our operations and QI teams work together to establish new DCSW and vendor/provider enrollment paperwork, establish hiring processes, set up vendor payments processes, establish DCSW qualification requirements, and all other tasks required to establish a DCSWs and vendors/providers in our systems.

4.2.1.36 Assist Member/Representative-Employer to Complete and Submit DCSW Employment and Vendor Enrollment Packet

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.

Similar to the assistance we give member/representative-employers when they complete their own enrollment packet (discussed in more detail in section 4.2.1.26), we provide the same level of service to members with completing DCSW Employment and Vendor Enrollment Packet.

This assistance includes:

- Assistance from our RCs and our other staff
- Pre-populated forms when applicable and appropriate
- The option for electronic form submissions
- Instruction/reference resources
- Multiple form checks to ensure completeness and accuracy

4.2.1.37 Collect, Process, and File DCSW Employment and Vendor Engagement Packet Information within 2 Business Days

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.

Our staff will collect and process information from the DCSW Employment and Vendor Engagement Packets and file completed forms with the applicable federal and state agencies within two (2) business days of receipt of information.

As mentioned above, we track DCSW hiring by using an "OK to Work" process. Once a DCSW successfully completes all steps of the hiring process, they receive an "Ok to Work" notification from Consumer Direct. Members are notified when their DCSWs are approved to provide services.

We have reports that help track the status of the DCSWs in the hiring process. The following picture is an example.

Figure 8: Qualification Statuses

ID	Category	Subcategory	Status	OK to Provide Care Date	Hire Date
	New	Active	Pending I-9		
	New	Active	Started Onboarding		
	New	Active	Okay to Provide Care	5/19/2022	5/18/2022

We have multiple teams in place to process packets and forms once they have been received:

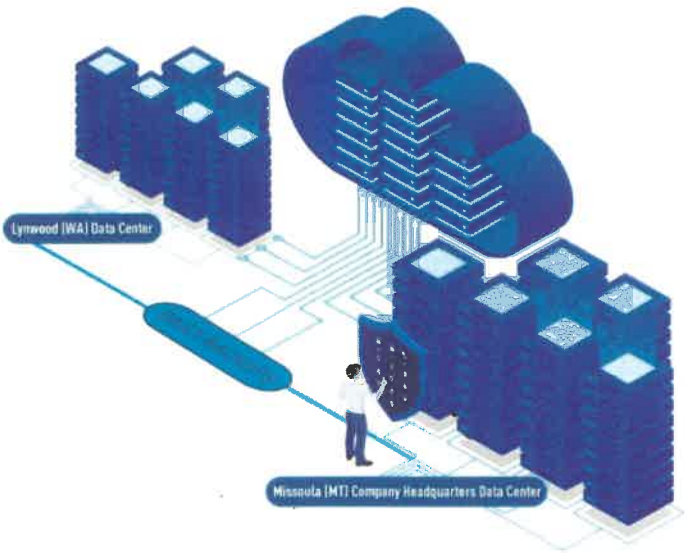
Our local West Virginia team will assist members/representative-employers and DCSWs in completing the forms and our Document Review team will review the forms in a timely manner to ensure they are complete and accurate in our systems. Our Caregiver Entry team is responsible for processing DCSW packets and reporting all employee demographic and pay information, processing pay selection information and communicating with payroll to resolve any set up issues. Our staff are trained to process packet information in a timely manner.

4.2.1.38 Maintain Copies of All Documentation in Applicable DCSW and Vendor Files

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

We maintain all records and reports in a secure and reliable manner using state-of-the-art information technology systems. Our systems are scalable and adaptable to meet unique program requirements. We operate an electronic document management platform called DocuWare. DocuWare is secure, meets all HIPAA compliance standards, and integrates with other systems in the Consumer Direct IT infrastructure. Consumer Direct stores all operational records in DocuWare. This system is backed up on secure servers in different locations. We monitor version control closely and require change verifications/approvals for our records. DocuWare stores all forms and documents completed by members and DCSWs during the enrollment and hiring process.

Figure 9: Consumer Direct Data Centers



We maintain all current and archived member/representative, DCWS, and vendor/provider files needed to comply with federal, state, and local program rules and for the required period of time. All records are maintained for auditing purposes. We adhere to all state and federal policies that define specific retention schedules for different types of records. Consumer Direct follows a conservative retention schedule according to industry standards.

Our voice, email, instant messaging and database servers are in redundant clusters where the failure of one server will not impact the delivery of service. Features include:

- Redundant network switches, firewall devices, and a SAN (storage device) with dual controllers.
- Other servers are virtualized in a Hyper-V cluster where each server (host) has redundant network connections and power supplies.
- Our Primary Data Center has multiple communication circuits.

Our recovery strategy is based in having two physical locations that house primary and secondary data centers. These data centers provide the network infrastructure, computing and storage to support the business functions of the company. Data is backed up from the primary (Lynnwood, WA) to the secondary (Missoula, MT) data center throughout the day and at the end of each day.

4.2.1.39 Notify and Assist Member/Representative-Employer of Missing or Incorrect Information within 5 Business Days

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.

Consumer Direct will notify the member/representative-employer regarding missing or incorrect information submitted in the DCSW Employment and Vendor Engagement packet and assist them with obtaining it within five (5) business days.

All completed packets are viewed by two teams for accuracy – initially at the local operations level and again by our central Document Review team. This process ensures all required enrollment forms are present, accurate, and complete. Any incomplete or incorrect forms are noted and are sent back to the RC to follow-up with the member or DCSW to fix the issue. Our proficiency tracker report identifies any member or DCSW who has incomplete or inaccurate forms as per review from the Document Review team. In addition, our expiration report is used to track any forms or documentation that may expire such as background checks, First Aid and CPR Certifications for workers (as required by the program). This report incorporates all applicable state and federal expiration timelines.

Local Operations staff continuously monitor the proficiency tracker to verify all required documentation continues to meet program standards. If documentation is missing, incomplete, or expired, the appropriate parties are contacted by local staff for corrections. Our onboarding and enrollment process will meet the specific documentation requirements in West Virginia.

4.2.1.40 Appropriate Steps if Participant Vendor is Determined to be Independent Contractor

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.

Consumer Direct will 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.

If requested and where there is a dispute, Consumer Direct provides IRS Form SS-8, Determination of Worker Status for Purpose of Federal Employment Taxes and Income Tax Withholding. Consumer Direct processes, electronically files, and distributes IRS Form 1099-Misc, Miscellaneous Income to each applicable vendor and the appropriate Federal and state tax authorities. In the unforeseen circumstance that electronic filing is not achieved, Form 1096, Annual Summary and Transmittal of U.S. Information Returns are filed as well. All W-9s, 1099s, and 1096 Forms are filed and stored in Consumer Direct's electronic files in accordance with HIPAA Compliance. We will update our vendor payment process to meet West Virginia program specifics.

4.2.1.41 Process DCSW's RS Forms W-4 Withholding Allowance Certificate and West Virginia Forms IT-104, West Virginia Employee Withholding Exemption Certificate within 30 Calendar Days

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.

Consumer Direct will 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. Consumer Direct processes all federal and state tax withholding documents in a timely manner to appropriately process pay for DCSWs. Consumer Direct is highly experienced processing both federal and state withholding documents for the purpose of payroll.

4.2.1.42 Maintain Copies of IRS Form W-4 and WV Form IT-104

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.

As with all other DCSW documentation, Consumer Direct will maintain copies of the IRS Forms W-4 and West Virginia Form IT-104 in the DCSW's electronic file. Our Document Review team and our proficiency tracker report will ensure that these forms are on file for each DCSW.

4.2.1.43 Collect and Maintain US BCIS Form 1-9, Employment Eligibility Verification Form

4.2.1.43 The Vendor should collect and maintain copies of the US BCIS Form 1-9, Employment Eligibility Verification Form in each DCSW's file.

Consumer Direct will collect and maintain copies of the US BCIS Form I-9, Employment Eligibility Verification Form, in each DCSW's file. The US BCIS Form I-9 will be provided in the DCSW's enrollment packet along with instructions of how to complete the form. Because the member/representative employer is the actual employer, they will be responsible for reviewing the completed I-9 and verifying the DCSWs eligibility to work in the United States. Member/representative-employers are given resource materials and instructions on how to review an I-9 and the required documentation with their employer handbooks. RCs are available to assist member/representative employers.

Completed I-9 forms are submitted to Consumer Direct along with the other DCSW hiring forms and documentation. Once received, these forms are reviewed by both our local administrative staff or RCs, and our Document Review team for completeness and accuracy. If the I-9 is incomplete or missing required information, it is sent back to the DCSW and/or the member/representative-employer for correction.

4.2.1.44 Execute and Maintain Copies of Medicaid Provider Agreement with DCSWs and a West Virginia Provider Service Agreement

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 contact 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.

Consumer Direct collects and maintains electronic copies of all employment files including US BCIS Form I-9, Employment Eligibility Verification Form in each DCSW's file. We will execute a Medicaid Provider Agreement with DCSWs and a Provider Service Agreement with providers/vendors of authorized individual-directed goods and services. Consumer Direct will maintain copies of these documents in the DCSWs' and providers'/vendors' files.

4.2.1.45 Participate in WV CARES for Required DCSW Checks

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. Resources for the WV CARES program can be found at: https://dhhr.wv.gov/bms/Provider/Documents/Manuals/Chapter%20700%20WV%20CARES%20Policy%20FinalApprovedforManual.pdf

Consumer Direct will 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.

Consumer Direct has existing policies and procedures to run background checks on prospective DCSW and provide notification of the results to members accordingly. We run all background checks in accordance with program and state requirements. This includes fingerprint-based background checks in states and programs where they are required.

All DCSWs will have had the appropriate background checks before providing services and background check results will be maintained in the individual's secure electronic file. Background checks will be done as part of the hiring process for new DCSWs. It is our standard to run OIG, LEIE, SAM and Social Security Death Master File checks on DCSWs monthly. This is done at no cost to the member or DCSW. If any disqualifying results appear on these monthly checks, we will inform the member that the DCSW is no longer qualified to provide services.

4.2.1.46 Receive and Maintain Fitness Determinations from WV CARES

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. The definition for "rap back" can be found at: https://dhhr.wv.gov/bms/Provider/Documents/Manuals/Chapter%20700%20WV%20CARES%20Policy%20FinalApprovedforManual.pdf. The member/representative-employer should be notified within (1) business day of receipt of a notification that disqualifies a DCSW and the DCSW' s employment terminated at that time.

Consumer Direct will receive and maintain fitness determinations of criminal background check results from the WV Cares on DCSW candidates and provide the determination of the background check to the member/representative-employers within two (2) business days. We recognize that results of fitness determination may show up as "eligible" or "non-eligible." Regardless of the determination, Consumer Direct will maintain the outcome of the background check in our records to ensure that ineligible candidates do not attempt to seek employment as DCSWs again.

Consumer Direct appreciates that the WV CARES systems performs monthly rechecks of all current employees against the required registries including the OIG and LEIE lists. When we receive "rap back" notifications of new criminal history of a DCSW we will maintain that notification in the DCSW's electronic file. If the notification indicates the DCSW no longer qualifies to provide services, their employment will be terminated, and the member/representative-employer will be notified of the "rap back" results within (1) business day. Member safety is vitally important to Consumer Direct.

4.2.1.47 Verify DCSW's SSN, and Providers' and Vendors' FEIN as Appropriate

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.

Consumer Direct will verify each DCSW's social security number and providers'/vendors' FEINs through the Social Security Administration and IRS as appropriate. Any corresponding documentation will be maintained in the DCSW's or provider's/vendor's electronic file. For DCSWs, Consumer Direct run Social Security Death Master File checks monthly.

4.2.1.48 Report Member/Representative-Employers New Worker Hires Within 20 Calendar Days

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.

Consumer Direct will report all new hires into the West Virginia New Hires Directory. We will report each new hire of DCSWs on behalf of members within 20 calendar days of the date of hiring including whether the DCSW is considered full time, part-time, back-up, occasional, etc. We pull bi-monthly reports of all newly hired DCSWs including Consumer Direct administrative staff and DCSWs employed by members. The reports are entered into a specific template and uploaded electronically. We will submit these reports to the state timely and within timeframes required by West Virginia. We are accustomed to sending new hire reports to states and currently report thousands of hires every year. Our HR department is responsible for these reporting processes.

4.2.1.49 Maintain Copies of WV New Hire Reporting Documentation

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

We will maintain copies of West Virginia New Hire reporting documentation in our workers' electronic files.

ORIENTATION AND SKILLS TRAINING

Within this section we address the needs of the comprehensive orientation process. Orientation is essential but can also be overwhelming. Consumer Direct addresses both challenges by utilizing a curriculum and a teaching approach that has been successful elsewhere with similar populations. We will customize it for West Virginia-specific requirements, but experience has confirmed we cover all the bases and that our methods work.

We offer the Agency yet another differentiator here. Many vendors can get lost in the mechanics of orientation, as there are many procedures that must be communicated. Consumer Direct makes a special effort not to lose sight of the core principles of self-direction while communicating contact information, safety issues, and numerous policies. Consumer Direct is led by former caregivers and caseworkers who embrace the potential of self-direction after working with members both in the community and in facilities. For us, orientation is about helping both first-time and long-time members understand the benefits and responsibilities of self-direction.

We also understand that the most enthusiastic member may need help in developing a skill set to ensure their participation maximizes their experience and the program's advantages. Our goal in providing orientation and skills training is to help each member achieve a comfort level with all aspects of their responsibilities.

4.2.1.50 Provide Member/Representative-Employer Orientation and Skills Training

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.

Consumer Direct provides member/representative-employer orientation and skills training in a culturally sensitive manner and in accordance with the philosophy of self-direction. We also utilize Plain Language principles in our training. By applying Plain Language principles, our messaging is clear, concise and easy to read. We use common words, rather than jargon, acronyms or unnecessary legal language whenever possible.

Consumer Direct was founded on a philosophy of self-determination and the commitment to support every individual's independence and full integration into the community. We embrace any opportunities that help older adults, people with long-term physical disabilities as well as intellectual or developmental disabilities thrive in their home and community. These opportunities include the option, when appropriate, to manage their own budget, and recruit and manage DCSWs who can provide necessary services and supports.

Consumer Direct serves and employs people across the country who reflect diversity of cultures, ethnicities and beliefs, preparing us to better support the unique needs of West Virginia. The basis of culturally and linguistically competent and diverse services is hiring Resource Consultants in the communities where members live. We seek to hire qualified staff within local communities who can best understand members and DCSWs and their varying cultural and language needs.

We work with a nationally-certified Person-Centered Thinking training through the Learning Community. More information about this organization can be found here: https://tlcpcp.com/. Person-centered thinking and planning is emphasized throughout the training process for our RCs so they may provide member/representative-employer orientation and skills training in a manner that is culturally sensitive and focused on principles of self-direction. This empowers RCs to provide high quality and thoughtful assistance to the people we serve.

We offer this training to both our administrative staff and interested external stakeholders. In Colorado and New Mexico our Training Coordinators and Support Brokers (Resource Consultants) spend two days learning about the concepts of person-centered thinking. In Colorado this training was offered to external stakeholders (Case Managers, Provider Agencies, State Staff) as a partnership with our internal team as a Community Workshop for those people working in self-direction. During these trainings, they learn how to be inclusive and how to develop person-centered thinking skills and tools. Person-centered thinking focuses on how RCs can help members plan their care and make their own decisions. With support from our trained RCs, members are empowered to direct their own services.

4.2.1.51 Use of Approved Curriculum and Materials for Orientation

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 it not limited to, information reported in Section 4.2.1.51 below.

Consumer Direct has an existing library of content material to adapt and apply to specific states and state-specific programs. The content base is populated by whatever information is common and consistent across states (e.g., respective roles in self-directed care). It is also populated by Consumer Direct's own policies, procedures, protocols, and instructions for utilizing the day-to-day tools and solutions used by members and DCSWs. Finally, the library contains a virtual state-specific manual reflecting the state customizations we have made to support each individual state and state program.

This is the foundation upon which we would write a manual specific to West Virginia. It would reflect West Virginia's state and program-specific content added to our existing content. We will adapt existing orientation and instructional materials for the programs in West Virginia and in compliance with federal, state, and program specific rules and requirements. For example, Consumer Direct will update our training materials on Spending Plan management, and recruiting, hiring, training and managing DCSWs to program requirements.

Member/representative-employer and DCSW enrollment are part of the training toolbox, as they include program-specific forms and describe the roles and responsibilities of Consumer Direct, the member/representative-employer and DCSW.

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.

Prior to conducting the member/representative-employer orientation, Consumer Direct will perform a readiness assessment to identify and address any issues that may impede the member/representative-employers success in self-directing services. This will be done during the member/representatives-employers enrollment. Our RCs will work with the individual to identify any concerns or potential issues they may have in performing the responsibilities of directing their care. Our staff can help members determine if they need a representative to help them. We will develop questions and a process to assess and record any issues that the individual may face while directing their care.

4.2.1.52 Member/Representative-Employer Orientation Requirements

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

4.2.1.52.5 Vendor's hours of operations

4.2.1.52.6 Key contacts at the Vendor

4.2.1.52.7 Toll free telephone, TIY, and fax numbers

4.2.1.52.8 Member Rights and Responsibilities

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

4.2.1.52.10 Incident reporting process

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

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.

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

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

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

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

4.2.1.52.17 Process for disbursing DCSW's payroll checks/electronic fund transfer (EFT)

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

4.2.1.52.19 Other forms and agreements to be determined by the Agency

4.2.1.52.20 Process for submitting invoices for payment

4.2.1.52.21 Process for issuing electronic payments for online purchase of PDGS, EAA, PERS and TMH Community Transition services

4.2.1.52.22 Process for receiving and addressing complaints.

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

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

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.

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

During the orientation, Consumer Direct will provide member/representative-employers information and training on RFP items 4.2.1.52.1-4.2.1.52.26. This training will primarily be provided to the member/representative-employer by the Resource Consultants.

Our Resource Consultants can help individuals understand program rules and details, including:

How the program works

- Roles/responsibilities of the member/representative-employer
- Roles/responsibilities of Consumer Direct

Contact Information

- The appropriate parties to contact for assistance depending on the issue
- How to contact Consumer Direct
- Hours of availability

Employing a DCSW

- Recruiting, hiring, managing etc.
- Background checks
- Workplace safety
- DCSW time submission and payment
- DCSW performance
- Submitting worker termination forms

Other Processes

- Managing a budget
- Completing forms
- Goods and services processes/submitting invoices
- Incident Reporting processes
- Selecting a representative

We will provide this information in a way the member wishes – whether it be in-person, by telephone, or directing them to on-line tools and resources. Group enrollment information sessions may be an option if approved by the Agency. We offer group information sessions in Colorado, Virginia, and Washington State detailed at the following web addresses:

- **Colorado** https://consumerdirectco.com/schedule/
- **Virginia** https://www.consumerdirectva.com/sfforms/
- **Washington State** https://www.consumerdirectwa.com/schedule/

In addition to on-line trainings, we will develop an informational brochure and make it available on our website for potential members that explains how Consumer Direction and Self-Direction work. Consumer Direct is highly experienced in providing training. In Colorado we work as the CDASS training and operations vendor to help members understand self-directed Home and Community Based Services in the state.

A brief overview document we created for people interested in self-directed services in Colorado is included here:

Figure 10: CDASS Overview

4.2.1.53 Providing Additional Skills Trainings for Members/Representatives-Employers

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 pre- approved 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.

We have broad experience in orienting new members to the nature of self-direction and of operating as the employer of their workers. Particularly through our work in Colorado, the District of Columbia, Florida, Montana, and New Mexico we have created training materials and curricula for self-directed programs serving qualified older adults and people with disabilities. We value programs that allow us to combine both the training/orientation components (Resource Consulting) with the delivery of F/EA FMS, since this combination creates a more comprehensive system of support for members and their workers.

We understand the commitment required to provide orientation and ongoing training for members and workers and are fully capable of combining the two in an effort to be a more supportive partner for both. We have long advocated for both the F/EA and some type of training services to be provided together in the interest of providing members with the most seamless member-directed service delivery experience, and we are confident that our company can provide extremely high level of both services.

Consumer Direct meets Americans with Disabilities Act (ADA) standards for all enrollment materials either in paper or available via our website. We maintain our training and orientation materials in various formats and develop additional documents in various languages and formats as requested by members or workers. We adhere to the principles of Plain Language including using common words, personal pronouns such as “you” and “us”, active voice, and keeping the information as short and relevant as possible. We strive to make all information accessible to members, families, and workers. Our program and customer service staff are trained to meet the highest expectations of accessibility at all times.

Curriculum Reflective of Regulatory Environment

We will adapt existing orientation materials for the Agency’s approval and in compliance with West Virginia Statutes, Codes, and Medical Assistance Rules and Regulations. We are capable of adapting an existing curriculum for the Agency’s HCBS programs or creating our own. While the content will be standardized, we are accustomed to adding pieces when we identify areas where the member may need additional support.

Member Skills Training Content

Member Enrollment Packets and DCSW Enrollment Packets will be discussed in detail during orientation, and members and DCSWs will receive ample information to guide them to online trainings and resources after the orientation has concluded. All materials will be available on our website if the member or DCSW require ongoing training and access to refreshers. Our staff will also be available at any time should members or DCSWs have questions, concerns, or need additional assistance.

Member Employer Packet Completion

Members are assisted with the completion of their enrollment/employer packets during the orientation. Packet information is available on the Consumer Direct West Virginia website. Employer Packets are pre-filled based on demographic information or other information obtained from the referral source or member in advance of the enrollment or hiring process.

Face-to-Face Meetings

Consumer Direct's RCs will assist members in understanding their roles and responsibilities as employers during the in-person orientation meeting or when members request in-person assistance. The RCs and locally-based administrative staff are available if the member requires additional information. All Agency program information will be available on the Consumer Direct West Virginia website and any training materials will be housed in modules. This allows members access to the information on an ongoing basis for training refreshers or to update their member or DCSW forms.

Member Documentation

Our RCs are trained on all documentation contained in the member enrollment packets and will explain roles and responsibilities to members and their DCSW. During the orientation, members will have an opportunity to ask questions regarding processes for managing their own care, including seeking vendors and other providers of services, and hiring and managing their own DCSWs. During the initial online, phone, or in-person meetings, members are informed of all contact information for Consumer Direct and other relevant information needed for them to self-direct and access customer service. Member enrollment packets and orientation curricula contain detailed information on time submission and approval process for DCSWs.

All documentation specified in the RFP will be incorporated into the member employment packets and reviewed with the member during the orientation. The draft member employment packet will be submitted to the Agency for review and approval prior to being made available to members. Packets are pre-filled with known demographic information prior to distribution to members to ease the process for packet completion. Relevant documents include workers' compensation information, guidance for creating job descriptions, interviewing, hiring new employees, terminating workers, timelines for satisfaction surveys, and worker and member rights and responsibilities. We have reviewed and will incorporate all enrollment documents noted within this response.

Ongoing Employer Skills Training

All training and enrollment materials will be available to members at any time should they request a copy from our Resource Consultants, F/EA FMS, or administrative staff, and all documents will be made available online 24/7. Standard curriculums containing all documents and rules outlined in this section around member orientation and member skills training will be available at any time if members need a refresher or need to update any of their documents related to member-direction. There is no limit to the number of times members will be able to provide updated paperwork if their program or demographic information changes throughout the course of using F/EA FMS and Resource Consulting with Consumer Direct.

4.2.1.54 Evaluating Effectiveness of Member/Representative-Employer Skills Training

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.

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

We continually work to improve the quality of member/representative-employer skills training sessions providing members a form to provide. We utilize a similar form in Colorado where the member/representative can provide feedback to our Training Coordinators regarding the effectiveness and quality of their training experience. We welcome submission of comments, questions, or concerns at any time, either directly to our program staff or via our state-specific website. Results from evaluation forms are used to help identify needs for improvement to employer skills training. Our annual Customer Satisfaction surveys offers members an additional opportunity to evaluate the effectiveness of our trainings. Our QI team analyzes satisfaction survey results to identify any trends in customer satisfaction in multiple aspects of service provision, including training. If our training requires improvement, Consumer Direct will implement improvement plans to address deficiencies in coordination with designated Agency staff.

DCSW REQUIREMENTS

Consumer Direct is highly cognizant of the critical role direct care service workers play in self-direction. At the individual member level, finding and maintaining a DCSW is crucial to achieving the level of independence self-direction envisions. Yet, as the population in this country continues to age, it has become increasingly difficult to find sufficient numbers of care workers to meet the demand, in self-direction and across the healthcare ecosystem.

That is why it is critical for vendors like Consumer Direct to design and execute their business processes so that otherwise willing people do not turn down this line of work because of the hassle or bureaucracy of the enrollment process. It is our collective responsibility as F/EA FMS vendors in self-direction to eliminate improper and unnecessary barriers that would discourage individuals from becoming DCSWs. This is a national imperative but likely a high priority for West Virginia as the Agency considers additional projected growth.

Consumer Direct works every day to ensure that its DCSW-related responsibilities are designed to be efficient and logical. We are also hard at work every day making sure we execute those responsibilities flawlessly. We are constantly seeking to strike the right balance between necessity and burden. We cannot compromise program integrity, fiscal integrity, or member wellbeing but we try to make the enrollment and hiring process as simple as possible.

We believe you will conclude after reviewing our approach to the next 40-plus requirements that Consumer Direct strikes the right balance between integrity and efficiency. You will also conclude that our approach will not be an impediment to retaining DCSWs, crucial during the implementation, and can serve as a basis for recruiting more DCSWs into the program in the future.

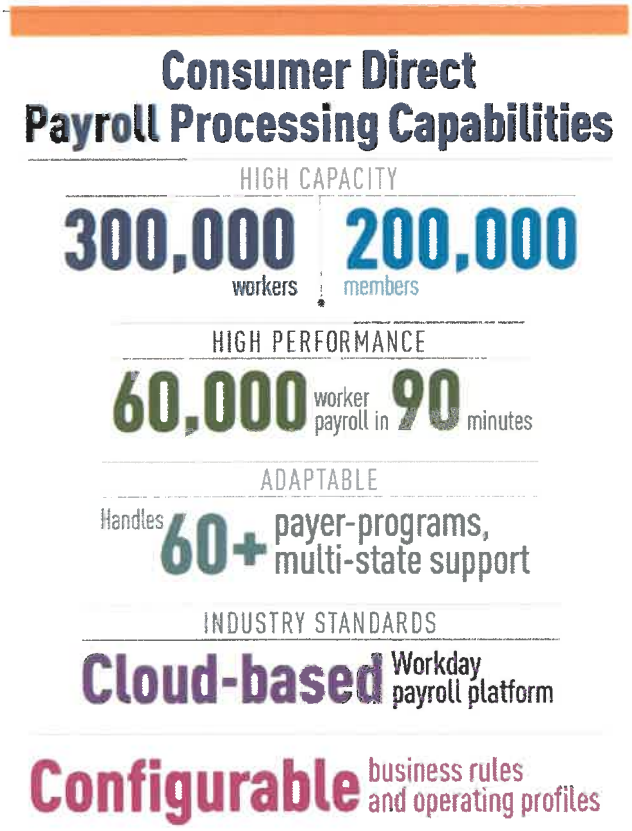
4.2.1.55 Processing and Distributing Compliant DCSW Payroll

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.

Consumer Direct will process and distribute DCSW's payroll and related federal, state and municipal tax withholdings and employment-related taxes in compliance with all federal, state and municipal requirements.

We are experienced with paying thousands of workers according to various payroll processing requirements. Consumer Direct's payroll system can:

Figure 11: Payroll Processing Capabilities

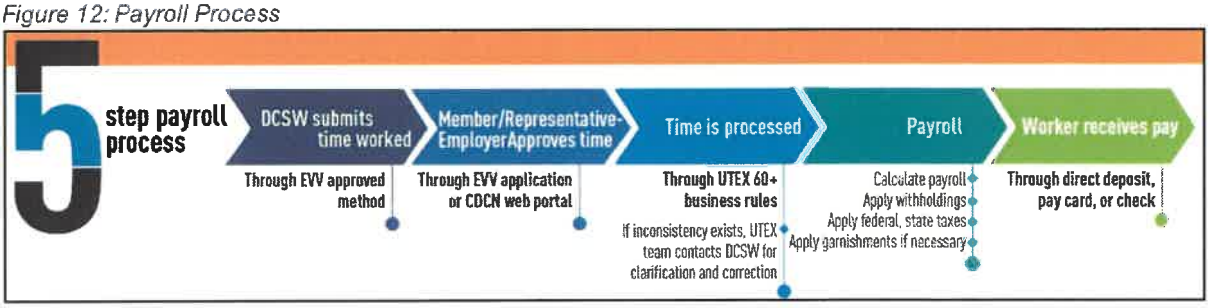


- Pay workers weekly or bi-weekly, adhering to all rules and laws, including, but not limited to the Department of Labor, Fair Labor Standards Act, State of West Virginia, and the Internal Revenue Service.
- Pay workers for administrative activities (where applicable by program rules) such as travel time, mileage, training time, and any agency authorized reimbursements they may submit.
- Reimburse workers for non-taxable reimbursement such as mileage where program rules allow.
- Pay wages and withhold taxes according to employment laws such as state withholding tax, if any, federal withholding tax, employee portion of FICA (or Social Security), municipal/city taxes and any other applicable taxes to employee withholding.
- Pay taxes per IRS and state regulations, state unemployment taxes, and any other taxes that may apply.
- Calculate and withhold voluntary deductions such as union deductions.
- Track accumulated and claimed PTO by the individual's pay rate (where program rules allow).
- Deduct benefits, co-payments, and other payments from the gross pay.
- Withhold and pay all types of garnishments, child support and tax liens.
- Adjust the pay schedule to accommodate holidays by distributing pay on the banking day prior to the holiday.

- Accommodate paying workers for more than three categories of leave, which include jury duty and bereavement.
- Pay workers via electronic fund transfers (EFT) such as direct deposit or debit card. We discourage the use of paper checks but make exceptions if necessary.
- Configure all payroll deductions at the date and time the payroll is generated.
- Correct errors in payroll immediately upon receiving notice of such errors.
- Provide retroactive payments or run special payrolls if needed.
- Collect and store assigned time and completed tasks from our EVV solution.

The follow graphic provides a high-level example of the payroll process in West Virginia.

Figure 12: Payroll Process



4.2.1.56 Process DCSW Fitness Determinations Per Agency Requirements

4.2.1.56 The Vendor should process fitness determinations of fingerprint-based state and federal background checks per Agency requirements, which can be found at: https://dhhr.wv.gov/bros/Provider/Documents/Manuals/Chapter%20700%20WV%20CARES%20Policy%20FinalApprovedforManual.pdf, for each member/representative- employer's DCSW, track the findings, notify the member/representative-employer in three (3) business days of receipt of findings and maintain information in each DCSW's file.

Consumer Direct will process fitness determinations of fingerprint-based state and federal background checks per Agency for each DCSW. We ensure all DCSWs are cleared to provide services before allowing them to care for the member and submit time. We discuss the background check process in more detail in sections 4.2.1.45-4.2.1.46 of our response.

We employ internal controls to track and report the progress of member enrollments and onboarding of newly hired DCSWs. With each new program we operate, our quality improvement team develops a proficiency tracker tool which outlines all federal, state, and program-specific requirements of the roles of members and DCSWs. We use our proficiency tracker to track enrollment or onboarding, or other milestones required by the local program, as completed, in progress, or incomplete. We generate reports based on the status of each item at any time, and at a frequency determined by the Agency. The QI team implement and train staff on a new tool tailored to HCBS programs in West Virginia. We will report deficiencies, expirations, or completed progress at a frequency determined by the Agency and in an approved format.

For DCSWs, we utilize an "Ok to Work" process before allowing them to provide services or submit time to Consumer Direct. The "Ok to Work" process ensures that a prospective DCSW has completed all documentation and meets all qualifications to provide services. This includes successfully passing the required fingerprint-based state and federal background checks. Both the member and the prospective worker are informed DCSWs cannot provide services or submit time until they receive the "Ok to Work" notification. We will provide the member/representative-employer the results of fitness determinations within three (3) business days as required by this RFP. We will maintain all fitness determination results in each DCSW's electronic file and will notify the employer of the results in the event a DCSW's check produces a negative outcome.

4.2.1.57 Verify Member's Medicaid Eligibility Prior to Authorizing DCSW or Vendor Payment

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.).

Consumer Direct will access the state's MMIS portal to verify the eligibility of each member prior to authorizing payment to a DCSW or for participant-directed goods or services (including EAA, etc.). Consumer Direct has multiple built-in internal controls to verify members qualify for services before they are provided.

Regular Eligibility Checks

First, members successfully complete the enrollment process before they can receive services. Medicaid eligibility is verified as part of the enrollment process and is routinely checked through the MMIS system to verify continued eligibility.

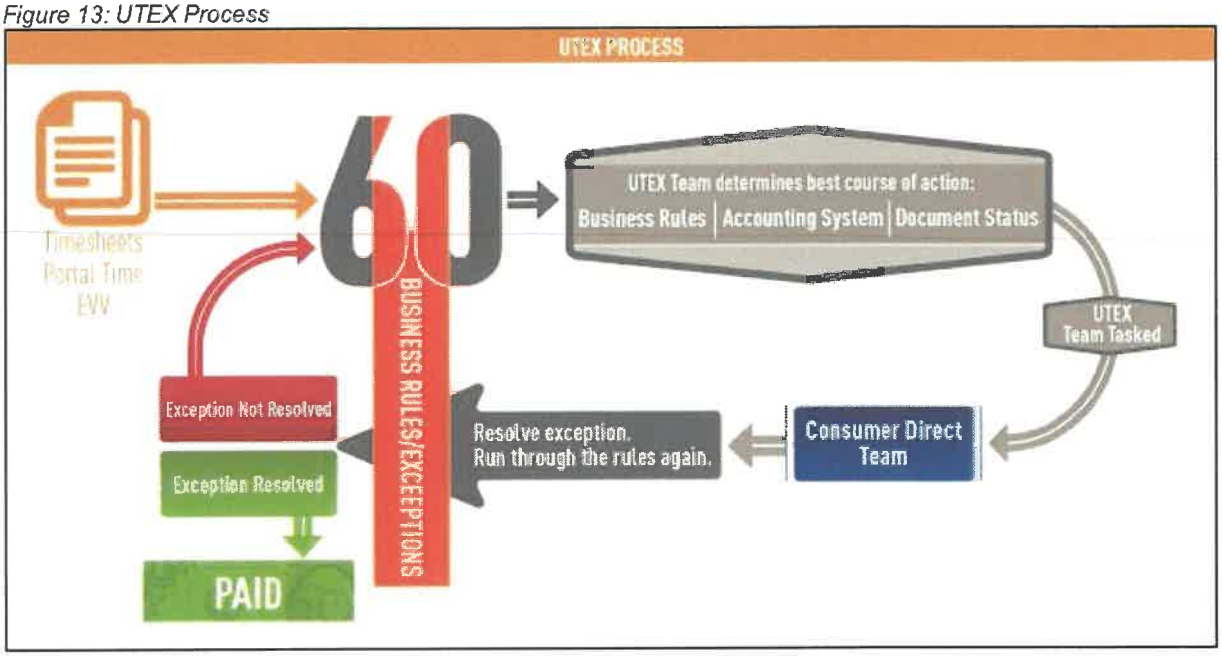
Spending Plan Review

Second, our RCs regularly review member's spending plans and utilization reports during the monthly contacts. This serves as another opportunity to ensure that the member has maintained Medicaid eligibility.

Business Rules

Finally, our systems and processes manage and record every service delivery transaction including time worked, services delivered, and payments for individual goods/services. We continuously monitor time submitted and ensure each submission meets a series of business rules and requirements customized according to program rules. This system is sophisticated enough to accept time submitted in a variety of ways including EVV solutions such as an EVV smartphone application, Interactive Voice Response (IVR) submissions, or submissions made via our web portal (when the program allows). We have sophisticated internal controls for identifying and resolving time submission errors. Our Universal Time and Expense (UTEX) business rules engine applies configurable business rules to each service transaction. These business rules are adjustable to meet program specific requirements. Follow the UTEX business rules engine process below.

Figure 13: UTEX Process



60+ business rules are in place and reflect program-specific requirements to verify that time is submitted consistent with program requirements. These rules automatically evaluate the following:

- Member's eligibility for the service
- Worker's eligibility to provide services (i.e., meets certification/training requirements)
- Duration and frequency of services

If any service delivery transaction violates one of the 60+ business rules, it is automatically held in a queue based on the rule that was broken. Dependent on the queue, the remediation is either automated or resolved manually.

By submitting all transactions through this process, we prevent incorrect billing and overutilization of budgeted funds or allocations. Members' authorization statuses are routinely checked to ensure prior authorizations are in place and are not submitted for members who are not actively receiving services. The UTEX system provides a method in which Consumer Direct can perform exemption processing to allow for optimized error resolutions.

4.2.1.58 Determine Appropriate DCSW Exemptions

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.

Consumer Direct determines if DCSWs will be paid family members of the member/representative-employer during the enrollment process.

Exceptions from paying into FICA, FUTA, and SUTA are dependent on the relationship between the DCSW and the member serving as the Employer of Record. The Employee-Employer Payroll Tax Exemptions Determination form allowing Consumer Direct to determine which DCSWs are exempt from these taxes and is included in the employee enrollment packet. Consumer Direct's standard operating procedure dictates that we withhold necessary federal income taxes and FICA/Medicare, FUTA, or SUTA taxes. We calculate and withhold based on information provided in the Payroll Tax Exemptions Determination form to ensure we adhere to DOL and IRS exemptions. We monitor hardship and live-in federal and state tax exemptions and apply these rules accordingly. This form can be adjusted to meet the needs of the programs in West Virginia. An example of the Payroll Tax Exemption Determination form is included below. The form is completed by the DCSW and signed by both the DCSW and the member/representative-employer. This form is required for each member the DCSW serves and is maintained in the DCSW's electronic file.

Figure 14: Payroll Tax Exemptions Determination Form

PAYROLL TAX EXEMPTIONS DETERMINATION

Attendant Name	Employer of Record (EOR) Name	Consumer Name

Background: Employees providing domestic services may be exempt from some payroll taxes. This is based on the Attendant's age and relationship to the Employer of Record (EOR). Consumer Direct Care Network (CDCN) will apply any exemptions based on the relationships identified below. **Incorrectly filling this form out may result in inaccurate tax withholdings.**

Note: If the Attendant and EOR qualify for tax exemptions, they must be taken. Exemptions cannot be waived. If the Attendant's earnings are exempt from these taxes, they may not qualify for related benefits. An example is unemployment insurance.

Attendant-Employer Relationship

*Attendant select **one** relationship below.*

☐ **I am the spouse of the Employer.** *Exempt from FICA[3], FUTA[2], and SUTA[3].*

☐ **I am the parent of the Employer.**

If parent checked, check any of the following that apply:

- ☐ I provide care for the EOR's child or stepchild that lives in the home.
- ☐ The EOR's child or stepchild is less than 18 years old or requires personal care of an adult for at least 4 straight weeks in 3 months.
- ☐ The EOR is a widow, widower, divorced or married and lives with a spouse, but the spouse has a physical or medical condition that prevents them from caring for the child at least 4 straight weeks in 3 months.

Exempt from FUTA and SUTA. Subject to FICA if all three boxes checked above; else FICA exempt.

☐ **I am the child of the Employer.**

If child checked, check one option below:

- ☐ I am 21 years of age or older. *Subject to FICA, FUTA, and SUTA.*
- ☐ I am less than 21 years old. *Exempt from FICA, FUTA, and SUTA.*

☐ **I am not related to the Employer or my relationship is not described above.** *Subject to FICA, FUTA, and SUTA.*

Acknowledgement: The Attendant and EOR attest the exemptions listed above are accurate. If this information changes, the Attendant must notify CDCN. If CDCN is not notified of changes, the Attendant may have to pay back money that should have been withheld from pay.

Attendant Signature	*Date*	*Employer of Record Signature*	*Date*

[1]FICA – Federal Insurance Contributions Act (Social Security and Medicare)
[2]FUTA – Federal Unemployment Tax Act
[3]SUTA – State Unemployment Tax

4.2.1.59 Determine DCSW Status in Accordance with IRS Notice 2014-7

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

With each new enrollment, we require that DCSWs who claim a difficulty of care exemption to complete and sign an affidavit with their new hire paperwork attesting to the status of the member for whom they provide care and attesting to their qualification for such an exemption per IRS Notice 2014-7. A copy of this affidavit is maintained in the DCSW's electronic file.

4.2.1.60 Maintain Documentation of DCSW and Member/Representative Relationship

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.

All packets for DCSWs and member/representatives contain employment agreements which lay out the roles and responsibilities of the DCSW as the employee, and the DCSW's relationship to the member. We provide and require a completed family relationship form to establish appropriate tax filing status. All documentation related to enrollment or employment by a member or representative is maintained in each member or DCSW's file. An example of this form and how we use it to determine exemptions is shown above in section 4.2.1.58.

4.2.1.61-4.2.1.62 Determine Resident Status of DCSWs and Maintain Documentation

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.

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

Our employment and background check process determine if a DCSW is a non-resident of West Virginia. We process non-West Virginia-resident state income tax withholding appropriate for non-resident workers and the state they reside in. Non-residents are required to fill out WV Form IT-104, Withholding Exemption Certificate for non- residents. As with all other documentation, the completed WV form IT-104 and any related correspondence and documentation are maintained in the DCSW's secure, electronic file. Consumer Direct is experienced with workers who live in neighboring states. For example, through our work in the District of Columbia, we regularly pay and process taxes for workers who reside in Virginia and Maryland.

4.2.1.63 Ensure DCSWs' Hourly Wages are Fully Compliant

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.

Consumer Direct ensures DCSW's hourly wages are in compliance with all applicable federal and West Virginia department of labor wage and hour rules, including rules regarding payment of overtime wages. We will adapt our systems and processes to meet state and program specific requirement. We regularly refer to rules, and ensure they are updated regularly.

Consumer Direct carefully monitors overtime for DCSWs. We have well-established policies and procedures to ensure all employees are paid in compliance with federal Department of Labor and State Department of Labor wage and hour rules for regular and overtime pay. We will update our systems and policies and procedures for West Virginia to monitor DCSW service hours and ensure they are providing services in compliance with program rules once awarded. We consult with legal counsel and state agency partners when necessary to further understand and comply with state agency requirements. As a partner to members directing their care, it is important that Consumer Direct informs members of the rules and consequences of having DCSWS work overtime. Consequences may include recouping funds from the member for payment to the DCSW for working overtime. During the member training, members are advised about the program rules regarding overtime. DCSW 's who exceed normal hours of work will deplete authorized funds quickly and may require the member to fund overtime hours. Consumer Direct provides members with training on how to manage their spending budget to avoid overtime, such as hiring additional DCSWs or utilizing backup plans.

If a member's DCSW is exceeding the member's authorized service units/budget or the DCSW is working more hours than the program permits, one of our RCs will notify both parties as appropriate and inform them of program rules and offer alternative solutions.

4.2.1.64 Determine DCSW Status if a Foster Care or Shared Living Provider

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, which can be found at: htlps://www.dol.gov/agencies/whd/fact-sheets/79g-flsa-shared-living#:~:text=Compliance%20with%20the%20FLSA.over%2040%20in%20the%20workweek;., and Administrator's Interpretation No. 2014-1, which can be found at: https://www.dol.gov/agencies/whd/opinion-letters/administrator-interpretation/flsa/2014-1, to determine the application of the Federal Fair Labor Standards Act (FLSA).

Consumer Direct will determine if the DCSW is a foster care or shared living provider in accordance with DOL Fact Sheet #79. Fact Sheet 79G, Application of the FSLA to shared living programs. We comply with record keeping requirements, minimum wage, overtime, companionship rules, live-in exemption rules as well as IRS ruling 2014-7. All records pertaining to the DCSW are kept in their electronic file.

4.2.1.65 Agency-Approved Instructions for DCSW Submitting Hours to Member/Representative-employer

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.

Consumer Direct will develop, produce and distribute instructions for DCSWs to submit hours worked to member/representative-employers. These instructions will be approved by the Agency prior to distribution. Consumer Direct offers various methods for submitting time. Electronic Visit Verification (EVV) and electronic submission through our web portal will be the primary ways that DCSWs and member/representative employers submit and approve time. Consumer Direct can also accommodate interactive voice response (IVR) time submission and paper timesheets if required. Regardless of the time submission method, Consumer Direct produces instructions on how to submit time effectively and within compliance of applicable rules.

4.2.1.66 Collect, Verify, Process DCSW Hours in Compliance with Applicable Regulations

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.

Consumer Direct will collect, verify and process DCSW's worked hours per state department and labor and maintain copies in the DCSW's file.

Prior to paying workers, all time submissions whether by EVV, the portal, or Interactive Voice Response (IVR) or timesheet, pass through our UTEX system. This system runs each time submission through a series of business rules that are customized to program requirements. If a time submission fails to meet one of the requirements, it is held in a queue where it is manually reviewed by our UTEX team who determines whether the time submission needs to be corrected, declined or approved. This process verifies that service codes are correct and that time has been submitted according to program rules. Once UTEX processing is complete, the time submission continues to payroll for processing where taxes and other deductions are withheld. We are proud of our well-honed policies and procedures that result in our ability to verify all time is submitted within program rules, process payroll efficiently, and provide pay accurately to DCSWs.

> "This company helps the patients being cared for and caregivers by providing an app that requires you to check in and out when providing care for the consumer. And a phone number that you can contact for any reason at all with questions." *Worker review on Glassdoor*

Our UTEX system detects any errors with time submissions prior to processing. Our UTEX system prevents any incorrect, or incomplete time submissions from being fully processed. Each business rule in our UTEX system has a queue for time submissions that fail to pass the

requirements of that rule. These include rules regarding whether the DCSW properly submitted their time and the member/representative-employer approved the time. If the payroll doesn't process due to an incorrect, incomplete or late time submission, the UTEX system will identify the error and prevent the time submission from being paid until the UTEX team has reviewed and resolved the error. Our UTEX team works to resolve time submission errors within the current payroll processing period so that payment is timely processed to the DCSW. Issues are resolved before submitting a claim for the payment.

In the event there is a discrepancy, the UTEX team will investigate with relevant parties which could include the DCSW, the member, and/or the program office to determine a solution. We provide additional instruction and training to DCSWs for repeated incorrect time submissions to prevent future errors.

Copies of documentation related to hours worked are maintained in the DCSWs electronic file.

4.2.1.67 How to Address Time Submitted in Excess of Approved Hours

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.

Consumer Direct will educate the member/representative regarding any overtime worked. Hours worked must be covered by the member's approved spending plan and within their authorization. If a time submission is submitted over-budget, the member is responsible for payment of the amount over the budget. We continue to train member/representatives regarding the rules of the program and staying within approved budget amounts.

Prevention is the best way to deal with overutilization. Consumer Direct utilizes the following safeguards to prevent member/representative-employers from having DCSWs work more than their approved hours in the first place.

Training

Both member/representatives-employers and their DCSWs are informed and trained by local Consumer Direct staff that working overtime or overutilizing funds from the Spending Plan should be avoided. This training occurs when the member enrolls or the DCSW is hired, but our RCs may remind both parties regarding stewardship of the Spending Plan.

Tracking

During monthly calls, our RCs discuss the Spending Plan with the member. They can help the member evaluate where they are with their spending and can detect when a member is projected to overspend. The member and/or RC can access the spending report on-demand to assess the member's current spending relative to the funds they have available. This report is available to our RCs and the member/representative-employer on our web portal.

RCs can identify situations where the member is close to overutilization of services. For example, we have implemented thresholds that notify both our staff and the member when the

member is within a certain percentage of utilizing their services (i.e., the member has utilized 90% of their annual budget). When overutilization of services is detected, the RC reaches out to the member about how to make spending adjustments to remain compliant to program rules and continue to successfully self-direct their services.

Transaction Monitoring

Our UTEX also has features designed to prevent overutilization of budget funds. The UTEX system utilizes over 60+ business rules that are in place to reflect program-specific requirements to verify that time is submitted within the set rules and parameters, including the member's authorizations and Spending Plan. If any service delivery transaction violates one of the 60+ rules, it is automatically held in a queue based on the rule that was broken. Dependent on the queue, the remediation is either automated or resolved manually.

- **Automated Resolution:** The UTEX system has built in shift trimming functionality. In cases where the DCSW exceeds the member's authorization, the trimmer will process up to the authorized amount and queue the remainder of the submitted time that exceeds the authorization. For example, if a member only has enough authorized units/budgeted dollars for a DCSW to provide 5 more hours of service, but the DCSW submits an 8-hour shift that exceeds the authorization by 3 hours, the trimmer will set 5 hours to be paid and will queue the remaining 3 hours that are over the authorization. Ideally the member and their Resource Consultant would be aware that they are nearing maxing out their services and we have other processes to prevent over authorization from happening in the first place. However, this functionality is built in as an extra safeguard.
- **Manual Resolution:** Some rules require additional research and outreach to the member/representative-employer to confirm the time worked and correct shifts as applicable.

Consumer Direct's UTEX system capitalizes on efficiency, scalability, and transparency while providing a premier front end quality control in assuring shifts are paid appropriately. Additionally, our web portal is integrated with our entire shift processing system so both DCSWs and employers have visibility into the status of each shift submitted to Consumer Direct. By submitting all transactions through our extensive automatic business process, we prevent incorrect billing and overutilization of budgeted funds or allocations. Member/representative's authorization statuses are routinely checked to ensure prior authorizations are in place. Claims are not submitted for members who are not actively receiving services.

In the rare event a DCSW submits time that exceeds the member's budget Consumer Direct will utilize a corrective process to prevent future occurrences. This includes additional training to help the member better utilize their funds. For example, members may be advised to schedule their services differently, utilize back-up services, or hire additional DCSWs to prevent a worker from working overtime. Depending on the circumstances, Consumer Direct may also work closely with the Agency or MCO to determine if the member's service needs have changed and a different level of care or service type is needed. Regardless, Consumer Direct collaborates with our service partners and seeks to find the solutions that work best for those we serve.

4.2.1.68 System to Recoup Overage Paid to DCSW, Including When Due to Vendor Oversight

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.

Consumer Direct can bill member/representative-employers for services and goods provided above authorized amounts (when the Agency allows it), and for services and goods not covered by the Agency but obtained by the member under separate agreement. Over-budget situations are minimized or eliminated through careful monitoring of each member's budget and utilization, and through programmatic application of business rules in the service delivery lifecycle. For example, over-budget service episodes can be prevented prior to their delivery through notice to the member that budget limits have been reached for a specific timeframe. Services submitted that create an over-budget situation can be suspended for processing, and partially paid or even denied for payment. In these cases, the need for billing the member for over-budget services is controlled and minimized. Consumer Direct has processes in place to collect payment/recoup overages when necessary. When an overbilling does occur, Consumer Direct will submit a corrected claim to repay the Agency.

4.2.1.69 Compute, Withhold, File, and Track Quarterly

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 R and Schedule B, as applicable and related correspondence in Subagent-F/EA FMS division's file.

Consumer Direct computes, withholds, files, tracks, and pays federal income tax withholding, Medicare and Social Security Taxes (FICA) for member/representative-employers and their DCSWs. We file the Employer's Quarterly Form 941 in aggregate and attaching the Schedule R using the assigned FEIN as the fiscal employer agent for the member. Additionally, Consumer Direct is a semiweekly schedule depositor and files IRS Form 941, Schedule B. We pay federal taxes electronically in the aggregate using Consumer Direct's FEIN in accordance with IRS depositing rules. We maintain copies of all forms filed and deposit verifications in our electronic payroll files.

4.2.1.70 Deposit Federal Income Tax Withholdings in the Aggregate

4.2.1.70 The Vendor should deposit federal income tax withholding in the aggregate using the Subagent-F/EA FMS entity's separate FEIN (electronic EFTS filing) and per IRS depositing rules for Government F/EA FMS

Consumer Direct will deposit federal income tax withholding in the aggregate using the subagent- F/EA FMS FEIN. This will be filed electronically and per IRS depositing rules for Government F/EA FMS. As an FMS entity in nearly all of the states in which we operate, we are experienced at researching and incorporating varied state taxation requirements into our procedures to file taxes on behalf of members. Consumer Direct timely files IRS form 941, Employer's Quarterly Federal Tax Report and the IRS Form 941, Schedule R in the aggregate using the assigned FEIN as the F/EA for the member. Additionally, Consumer Direct is a semiweekly schedule depositor and files IRS Form 941, Schedule B. Copies of all forms filed and deposit verifications are maintained in Consumer Direct's electronic payroll files.

4.2.1.71-4.2.1.72 Deposit FICA Tax in the Aggregate and Maintain Copies

4.2.1.71The 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.

4.2.1.72 The Vendor should maintain copies of Federal income tax withholding and FICA filing/deposit documentation in its files.

Consumer Direct computes, withholds, files, and tracks federal income tax withholding, Medicare and social security taxes (FICA) for members and their DCSWs. We timely file IRS form 941, Employer's Quarterly Federal Tax Report and the IRS Form 941, Schedule R in the aggregate using the assigned FEIN as the F/EA for the member. Additionally, Consumer Direct is a semiweekly schedule depositor and files IRS Form 941, Schedule B. Copies of all forms are filed and deposit verifications are maintained in our electronic payroll files.

Copies of federal income tax withholding, FICA filing documentation will be scanned and maintained in our electronic files.

4.2.1.73-4.2.1.74 Compute, Withhold, File FUTA Annually in the Aggregate and Maintain Copies

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.

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.

Consumer Direct computes and files Form 940, Employer's Annual Federal Unemployment (FUTA) Report and the IRS Form 940 Schedule R annually. FUTA tax is deposited quarterly in aggregate. The annual 940 return is filed in aggregate and includes the Schedule R form. Copies

of Form 940, including Schedule R, and evidence of confirmed IRS deposits are maintained in Consumer Direct's digital files.

Consumer Direct will maintain copies of the annually filed IRS Form 940, and IRS Form Schedule R and related documentation in our electronic files.

4.2.1.75-4.2.1.76 Deposit FUTA in the Aggregate and Maintain Copies

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.

4.2.1.76 The Vendor should maintain copies of FUTA deposit documentation in the Subagent-F/EA FMS entity's files.

In accordance with IRS depositing rules for Government F/EA FMS entities, FUTA is deposited quarterly using the F/EA Federal Employer Identification Number (FEIN) in accordance with IRS deposit rules. Copies of Form 940, including Schedule R, and evidence of confirmed IRS deposits are maintained in Consumer Direct's electronic files.

Copies of FUTA deposit documentation will be scanned and maintained in our electronic files.

4.2.1.77 Enroll as Electronic Filer and Payer with Appropriate West Virginia Authorities

4.2.1.77 The Vendor should enroll as an electronic filer and payer for state income tax withholding, unemployment insurance tax with the West Virginia State Tax Department and West Virginia Job Service/Unemployment program.

We will enroll as an electronic filer with the West Virginia Department of Revenue and Workforce West Virginia as well as all other applicable taxing agencies. We will enroll as an electronic filer whenever possible. WV forms WVUC-154-A Wage Report, and WV/IT-101, will be filed, as well as any other required forms or form designations such as IT101A, IT-101Q, IT101V and UC-154 and UC-154-A.

4.2.1.78 Compute, Withhold, File State Unemployment Insurance Taxes Quarterly and Maintain Copies

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.

Consumer Direct will calculate and file state unemployment insurance taxes quarterly for each member/representative-employer using his/her state unemployment insurance tax identification number and their SUTA rate and the WVUC-A-154, Contribute Report and

WVUC-154-A Wage Report per the West Virginia Job Service Unemployment program. All forms and related documentation are maintained in the member/representative-employers file in DocuWare. DocuWare is our HIPAA secure electronic filing system that pairs with our reporting system to verify that all required documentation is in our systems. Documentation is reviewed by our Document Review team who verifies that documentation is complete and accurate in each member/representative-employer's file.

4.2.1.79 Compute, Withhold, File State Income Tax Quarterly and Maintain Copies

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.

Consumer Direct will 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. Prior to filing, Consumer Direct will determine if any member/representative employs DCSWs who are exempt from filing and pay SUTA pursuant to the Fair Labor Standards act and state laws.

We will maintain a report in each employer's file of wages paid and correspondence in each calendar year for qualified DCSWs who are non-tax liable under § 131 of the Internal Revenue Code. We will maintain copies of state income tax withholding filings and related documentation in the member/representatives-employers electronic file in DocuWare.

4.2.1.80 Deposit State Income Tax Withholding and Maintain Copies

4.2.1.80 The Vendor should deposit state income tax withholding for each member/representative employer West Virginia resident and qualifying non- resident DCSWs. The Vendor should maintain copies of documentation in each member/representative-employer's file.

Consumer Direct will deposit state income tax withholding for each member/representative employer West Virginia resident and qualifying non-resident DCSWs. We will maintain copies of documentation in each member/representative-employer's electronic file in DocuWare.

4.2.1.81 Withhold and File Municipal Taxes as Required and Maintain Copies

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.

Consumer Direct will withhold and file all municipal taxes, as required, and will deposit municipal taxes, as required, for each member/representative-employer. We recognize that the following municipalities have their own municipal taxes.

Charleston	**Huntington**	**Morgantown**	**Romney**
Fairmont	**Madison**	**Parkersburg**	**Weirton**

Our Tax team and local Operations team will establish processes for each municipality above. We will deposit taxes for each member/representative-employer and DCSW according to municipal rules. We will continually monitor municipal requirements to stay current with all municipalities.

We will maintain copies of all municipal tax filings, tax deposits, and related documentation in each member/representative-employer's electronic file in DocuWare.

4.2.1.82 Process Judgments, Garnishments, Tax Levies, or Other Related Holds as Required and Maintain Copies

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.

Consumer Direct will withhold and pay all judgments, garnishments, tax levies, or other related holds on DCSWs' pay required by federal or state governments. Amounts are withheld and processed every pay period according to the garnishment order. Consumer Direct conducts administrative tasks including new hire reporting, informing the employee of a garnishment, responds to wage requests, and corresponds with the agency on payments and managing garnishment releases. Copies of all related documentation are filed in the DCSW's electronic file. As with member/representative-employer documentation, DCSW documentation is also stored in our DocuWare system where it is reviewed by our Document Review team and tracked by our reporting system. We maintain physical copies of all judgements, garnishments, tax levies, and other related hold documents received in house. Garnishment reports are saved each payroll processing run where garnishments are taken. An audit is conducted after each payroll to ensure the amount withheld matches with the amount paid to the agency accordingly.

4.2.1.83-4.2.1.84 Generate DCSW Payroll, Distribute Checks by Mail or Electronic Direct Deposit, and Maintain Copies of Documentation

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

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

We will generate DCSW payroll checks and mail or perform electronic direct deposits for checks.

Consumer Direct has systems in place to distribute payroll to DCSWs in a variety of ways. Most payments are made via a pay card or direct deposit to the DCSWs account. Use of a pay card or direct deposit is the most efficient way for a DCSW to receive their pay without delays. Use of a pay card or direct deposit also helps reduce potential mail fraud.

While we encourage DCSWs to use a pay card or select direct deposit when they enroll with us, we also process paper checks as necessary. We utilize a pay selection form for DCSWs to select how they would like to be paid. This form can collect the individual's checking/saving account information for the purpose of direct deposit. All documentation related to the DCSW's payroll processing will maintained in the DCSW's secure electronic file.

4.2.1.85 Managing Improperly Cashed or Issued Checks, Stop Payments, and Re-Issuance of Checks

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 reissuance of checks (i.e. within three (3) business days of notification of lost/stolen check) and issuance of stop payment request.

Consumer Direct will develop a system for managing improperly cashed or issued payroll checks, stop payment on checks, and for the re-issuance of lost, stolen, or properly issued checks. This will include a maintenance log of voided/reissued checks, including all detailed information.

Our accounting team will develop procedures for this process to specifically comply with West Virginia rules and regulations. We will ensure proper authorization of all stop payments and re-issuances within a time frame that is mutually agreed upon by Consumer Direct and the Agency for the reissuance of checks.

To minimize the risk with uncashed checks, our accounting department sends a monthly report to each operations team if there are uncashed checks that month. From this report we can call the DCSW to see if they need to have their funds reissued. Our payroll department is prepared to reissue a check within three (3) working days of notification that a check has been lost or stolen. We maintain related records in our secure electronic files.

4.2.1.86-4.2.1.87 Research, Track, Resolve All Tax Notices and Maintain Copies

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.

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.

Consumer Direct will 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. Our tax team is highly experienced with appropriately handling tax documentation. All tax documents related to West Virginia tax filings and payments are maintained in Consumer Direct's file system.

4.2.1.88 Verify DCSW Information Before Submitting IRS Forms W-2

4.2.1.88 The Vendor should verify that each DCSWs 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.

During the hiring process for a DCSW, Consumer Direct files Social Security Number (SSN) verifications with Social Security Business Services Online. Any names and/or SSNs that do not match, are investigated so that information can be corrected for the SSA and year-end reporting. We run SSN verifications monthly on all active workers. Social Security information is verified prior to submitting IRS Forms W-2 to the employer, the West Virginia State Tax Department, and the Social Security Administration each year.

4.2.1.89 File Annual State Income Tax Reconciliations Accurately and Timely

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.

We will file the annual reconciliation of West Virginia state income tax withholding for each member/representative-employer by January 31st each year. This will be done 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. Copies of associated documentation are scanned and maintained in each member/representative-employers' files. At year-end, Consumer Direct will engage in filing all state and federal employment reports as required by state and federal law. These forms include, but may not be limited to, WV/IT103, as well as any other state agency forms as required. Consumer Direct's Tax team will be responsible for developing processes to complete these state forms according to form instructions. We are accustomed to annually reconciling state and federal income tax withholdings and processing them accordingly.

4.2.1.90-4.2.1.91 Process Refunds of Over-Collected FICA and Maintain Associated Documentation

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

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

We process refunds of over-collected FICA in accordance with federal requirements. At the end of the calendar year, we use a report to identify all employees who have not earned the threshold wage amount for the year. For each employee for whom we have over-collected FICA, for both current and terminated DCSWs, the full amount of over-collection is refunded in January of the year following the over-collection. Payroll Tax will file a Form 941X to correct the taxes that were initially paid and reported on the quarterly 941s. All relevant documentation is scanned and maintained in Consumer Direct's document management system. We provide an example of this policy below.

We issued over $1,385,000 in FICA refunds to nearly 23,000 people in 2022.

Figure 15: Refunding Over Collected FICA

Refunding Workers for Over Collected FICA Taxes (Employee's Contribution)

POLICY: Consumer Direct refunds workers for over-collected FICA taxes (employee's contribution) when the community support worker has not earned the threshold wage amount for paying FICA in accordance with the Household Worker Medicare and Social Security Tax (FICA) wage threshold.

PROCEDURE:

1. After the final payroll in December, Payroll runs a report summarizing wages earned year-to-date by each employee (including terminated employees) to identify all employees who have not earned the threshold wage amount for the year. The Household Worker Medicare and Social Security Tax (FICA) wage threshold changes from time to time and is updated each year according to the annual *Publication 15 (Circular E), Employer Tax Guide*.
2. For each over-collected employee, both current and terminated, the full amount of the over collection is refunded. Payroll Tax Specialist will file an amended 941 with IRS
3. A Payroll Tax Specialist scans and files all relevant documentation in the company's electronic records system.

INTERNAL CONTROL: After the refunds have been processed and refunded to the employee's, the Payroll Tax Specialist will review the updated tax reports and record the differences on Form 941X. The Tax Manager will review the 941X.

Refunding the State for Over Collected FICA Taxes (Employer's Contribution)

POLICY: Consumer Direct refunds the State for over collected FICA taxes (employer's contribution) when the Participant's Participant-employed community support worker has not earned the threshold wage amount for paying FICA in accordance with the Household Worker Medicare and Social Security Tax (FICA) wage threshold set each year the annual IRS *Publication 15 (Circular E): Employer Tax Guide.*

PROCEDURE:

1. Payroll identifies amounts that have been over collected from Participant's budgets for FICA taxes (employer's contribution) on behalf of employees who have not earned the threshold wage amount for paying FICA in accordance the Household Worker Medicare and Social Security Tax (FICA) wage threshold set each year in the annual IRS Publication 15 (Circular E): Employer Tax Guide.
2. Payroll summarizes, by Participant, the amount of the FICA refund due.
3. Accounts Payable issues a check to the State for each Participant's account in compliance with instructions provided by the State. A cover letter and copies of the Internal Revenue Service refund checks are included.
4. Payroll and Accounts Payable scan and file all relevant documentation in the company's electronic file.

INTERNAL CONTROL: 1) Refunds to the State are not issued until the Company has received funds back from the filing of 941X with the Internal Revenue Service. 2) Refund amounts from the Internal Revenue Service are compared to the form 941X filed with the Internal Revenue Service by a Payroll Tax Specialist.

4.2.1.92-4.2.1.93 Process, File, Distribute IRS Forms W-2 and Maintain Copies

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.

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.

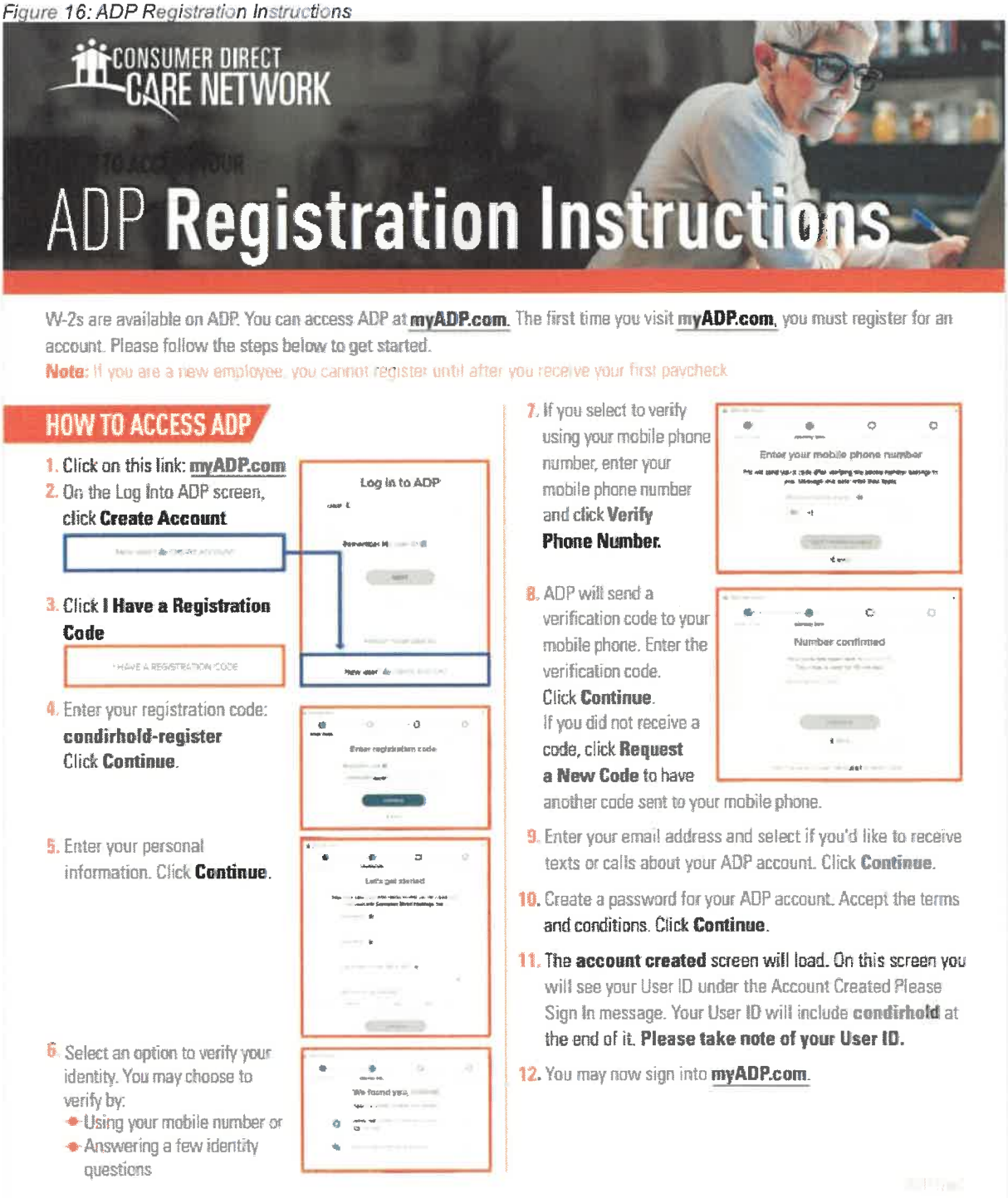
Consumer Direct is experienced at processing and filing taxes, forms, and federal and state tax payments across a variety of programs. We have established policies to support our processes regarding IRS Forms W-2, Wage and Tax Statement, per IRS instructions for agents. This includes electronic filing when processing 250 or more forms by January 31st each year.

Our policies and procedures for all of our programs in which we operate as an F/EA detail the timelines regarding when DCSWs can expect to receive their W-2 forms. Income reported on W-2 forms reflect the DCSW's taxable wages for the total preceding calendar year. Our centralized payroll and human resources departments work diligently at the beginning of each calendar year to guarantee that DCSWs and administrative staff receive their W-2 information by the required IRS deadline.

As evidence of our experience in preparing, filing and distributing IRS Form W-2, we point to the more than 100,000 W-2s distributed to employees for 2022 pay. We will bring this expertise to our work in West Virginia.

Consumer Direct prepares and issues IRS Form W-2 annually on behalf of DCSWs and our own staff by January 31st of the following year. Income reported on W-2 forms reflect the employee's taxable wages for the total preceding calendar year. W-2s are available to all DCSWs electronically through ADP. DCSWs who are no longer employed by Consumer Direct, or who need an additional copy of their W-2, can easily access their Forms W-2 online at any time. We provide information on how DCSW can register with ADP here:

Figure 16: ADP Registration Instructions



Copies of the federal copy of Forms W-2 and related documentation are maintained in the DCSW's electronic file.

4.2.1.94 Process and File IRS Form W-3 and Maintain Copies

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.

Consumer Direct prepares and electronically files IRS Form W-3: Transmittal of Wage and Tax Statement for member/employers in accordance with IRS instructions and regulations for agents. This process is done when a Payroll Tax Specialist summarizes the annual W-2's and records the total on the Form W-3. The Payroll Tax Specialist then follows the procedures outlined by form instructions to prepare and file the W-3. The form is electronically filed with the Social Security Administration by January 31st. We maintain copies of W-2s filed in each qualified worker's electronic file. We also maintain copies of IRS Form W-3's in our files.

4.2.1.95-4.2.1.96 Process Returned DCSWs' Payroll Checks and Maintain Copies

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://wvtreasury.com/, and CFR 42 Part 433 Section 40, which can be found at: https://www.cms.gov/files/document/cms-1734-p-pdf.pdf.

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.

Consumer Direct will process any returned or unclaimed checks or funds in accordance with West Virginia Unclaimed Property Laws and processes. Our accounting team will develop procedures for this process to specifically comply with West Virginia rules and regulations. We recognize that wages and other compensation for personal services are presumed abandoned one year after the compensation becomes payable in West Virginia. Prior to reporting to the state, Consumer Direct will ensure due diligence in attempting to reach the owner of the unclaimed property. Our processes will meets all requirements for unclaimed property as per West Virginia code. As with all other documentation, Consumer Direct will maintain copies of West Virginia Unclaimed Property and related documentation such as returned DCSW's payroll checks in our electronic files.

SPENDING MANAGEMENT

As noted earlier in the proposal (see the introduction to Sections 4.2.1.7 - 4.2.1.13 "Interfaces: UMC, MMIS, On-Line Vendors and MCOs"), Consumer Direct was among the first vendors to develop the ability to process this type of participant spending. Today, as you will learn below, Consumer Direct deploys user-friendly technology backed by the necessary policies and procedures to meet this requirement.

This aspect of self-direction is important for a number of reasons but one worth noting here is program integrity. It is incumbent on the self-direction vendor to make participant directed spending on goods and services intuitive and easy to execute, for both the member and the vendor who supplies the authorized product or service. If errors occur here, others may raise concerns about the potential for fraud and abuse. Consumer Direct understands the importance of maintaining stakeholder confidence in all aspects of self-direction and most especially fiscal matters.

4.2.1.97 Process, Issue, Track Vendor Payments

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:

Consumer Direct is highly experienced processing, issuing and tracking payments to vendors for approved participant-directed services (PDGS, EAA). We are accustomed to working with state programs in which our role includes supporting members who need to purchase authorized products/services to improve their health and safety while they self-direct their supports. We provide this service in Idaho, Colorado, New Mexico, Texas, Washington DC, and Wisconsin.

We provide two examples from other states.

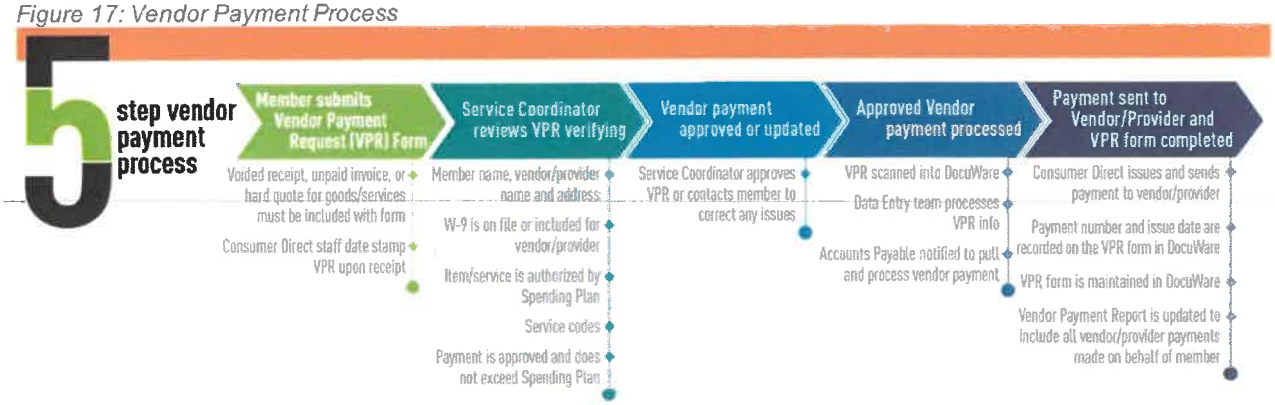
In Texas, pay for Physical Therapists (PT) and Occupational Therapists (OT) is submitted through a Vendor Payment processes. Consumer Direct is paid a Per Member Per Month (PMPM) fee, even if we are just processing the vendor payments for these services. Nursing has its own service codes and operates similar to any other service. Consumer Direct collects and retains their licensure, and completes specific state forms for nursing that must be signed. Once the service is provided we bill by the unit.

In Idaho this service is offered in a few ways. Any OT, PT, etc. goes through our Goods & Services/Vendor Payment (VP) process. Consumer Direct receives a VP request from the agency that employs the clinician. In the case of nursing, some requests are submitted through the VP process if the nurse is employed by an agency. However, we also work with a few nurses who are employees under the state's Skilled Nursing Services (SNS) part of the plan.

We look forward to working with West Virginia to establish procedures that work best with your programs.

The following sections provide an overview to how Consumer Direct process vendor payments.

Figure 17: Vendor Payment Process



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.

Consumer Direct will receive, verify and process all invoices from approved vendors in accordance with the member's Spending Plan. Documentation related to vendor payments will be maintained in the provider/vendor's electronic file as well in electronic exchange data information with the Agency.

In our Idaho program, members or authorized representatives can complete a Vendor Payment Request (VPR) form. We anticipate using a similar process in West Virginia. The VPR form is submitted to Consumer Direct by email, fax, mail, or in person. For payments direct to the Vendor, the form must be accompanied by a quote or invoice. The member or representative must ensure in advance of submitting the VPR that the product or services is a reimbursable service or authorized service as per their Spending Plan. Consumer Direct's RCs assist members as necessary.

Expenses specifically approved for the member are paid. A copy of the processed VPR is maintained in the member's electronic file. As an internal control, the check number and issue date are recorded. A report is created in the computerized accounting/information system documenting all vendor payments for the member. We provide a sample of this report below. All information is fictional.

Figure 18: Vendor Payment Report by Participant

Vendor Payment Report by Participant

VendID	Vendor Name	Point of Contact	Address	Phone	Email Addr	Fed Tax ID	Last Paid	Times Paid	Total Paid
ABCVendor	ABC Vendor Services		100 Main St, Boise, ID 83702			11-1111111	6/12/2019	6	$750.00

Check Nbr	Check Date	Chk Amt	Doc Type	Clear Amt
052687	6/12/2019	$125.00	VO	$125.00

Acct	Batch Nbr	Ref Nbr	Inv Date	Tran Type	Tran Amt	Descr	Per Post	CustID	Participant	ServCode	Agree Nbr
52460	007479	060919	6/3/2019	VO	$125.00	ABCVendor - 1099188 - 5600111	201906	1234567	Participant, Patrick	ESS	000000

052280	5/15/2019	$125.00	VO	$125.00					
052177	5/8/2019	$125.00	VO	$125.00					
051992	4/24/2019	$125.00	VO	$125.00					
051410	3/13/2019	$125.00	VO	$125.00					
050760	1/23/2019	$125.00	VO	$125.00					

VendID	Vendor Name	Point of Contact	Address	Phone	Email Addr	Fed Tax ID	Last Paid	Times Paid	Total Paid
123Vendor	123 Vendor Services		101 State St, Boise, ID 83701			11-1111111	6/26/2019	4	$975.00

Check Nbr	Check Date	Chk Amt	Doc Type	Clear Amt
052900	6/26/2019	$150.00	VO	$0.00

Acct	Batch Nbr	Ref Nbr	Inv Date	Tran Type	Tran Amt	Descr	Per Post	CustID	Participant	ServCode	Agree Nbr
52460	007500	061239	6/6/2019	VO	$150.00	123Vendor - 1099188 - 5641603	201906	1234567	Participant, Patrick	ESS	000000

052316	5/15/2019	$150.00	VO	$150.00					
051823	4/10/2019	$525.00	VO	$525.00					
050460	1/2/2019	$150.00	VO	$150.00					

Our reporting is customizable allowing us to adjust the report to meet all requirements of programs in West Virginia.

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.

Consumer Direct will obtain receipts and other proof of goods or services that have been purchased with PDGS or EAA funds to ensure that funds were spent per the approved plan. In all programs where we provide similar services, we require proof of goods and services to ensure funds are 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.

Consumer Direct will pay vendors' invoices for approved participant-directed services in accordance with the member's Spending Plan within thirty (30) calendar days of receiving the invoice. Our Accounts Payable team issues vendor payment checks weekly for approved invoices. All invoice documentation and proof of payment are maintained 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.

We will process any returned provider or vendor payments in accordance with the West Virginia State Treasury Department's Division of Unclaimed Property requirement and procedures in compliance with CFR 42 Part 433 Section 40. Copies of West Virginia Unclaimed Property-related documentation are maintained 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.

We distribute IRS Forms SS-8, Determination of Worker Status for Purpose of Federal Employment Taxes, and Income Tax withholding whenever there is a question of whether a participant-directed vendor is an independent contractor. We are readily able to distribute these forms upon request.

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.).

Consumer Direct distributes, collects and processes Form W-9, Request for Taxpayer Identification and Certification, for vendors who are independent contractors.

Consumer Direct paid almost 18,000 vendor payments in 2022.

We are experienced in completing a variety of tax documents for providers and vendors in programs with participant-directed goods and services. Consumer Direct processes, electronically files, and distributes IRS Form 1099-Misc, Miscellaneous Income to each applicable vendor and the appropriate Federal and state tax authorities. In the unforeseen circumstance that electronic filing is not achieved, Form 1096, Annual Summary and Transmittal of U.S. Information Returns are filed as well. All W-9s, 1099s, and 1096 Forms are filed and stored in Consumer Direct's electronic files in accordance with HIPAA Compliance. We will update our vendor payment process to meet all West Virginia program requirements.

4.2.1.97.8 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.

Consumer Direct will 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 Consumer Direct.

REPORTING

Consumer Direct employs a sophisticated Analytics Team capable of providing its clients with useful and actionable program insights. We use this resource to continually monitor our own activities (e.g., seeking data that can lead to continuous process improvement) and the Agency should view these resources similarly. We believe reporting is a useful tool for improvement as well as accountability.

4.2.1.98-4.2.1.99 Provide All Requested Reports Within 7 Days

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.

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.

We will produce reports as requested by the Agency within seven (7) calendar days or within the time period mutually agreed upon by Consumer Direct and the Agency. Both standard and ad hoc reports are delivered within these timeframes. Consumer Direct has extensive experience developing reports to address a broad range of state, federal or MCO needs. We ensure all requested reports are submitted timely, completely, and accurately. We operate a robust reporting system and have an Analytics team dedicated to managing, maintaining and customizing reports to meet program requirements.

The CDCN reporting workload is delivered through a cloud-based data warehouse platform and provides secure access to both source data and reports for authorized users. Access is typically administered on role-based basis, but can be customized to meet the requirements of individual users. Reports and data requests are fulfilled through scheduled delivery and on an on-demand basis. Report and data formats are delivered in structured, established formats or they can be determined on an ad-hoc basis at runtime. Data downloads to users – both ad-hoc and structured -- are supported for authorized users. Microsoft's Power BI application is leveraged to provide a powerful and flexible analytical capability for users.

> We currently provide more than 70 reports to the various payers with whom we partner.

Combining the capability to render user-defined reports, on demand, with Power BI provides users with a high degree of flexibility, and the opportunity to develop new insights to program operations. Data queries can be formed in real time in Power BI, and processed against transactional source data, eliminating traditional delays in capturing and processing operational results.

We will develop a report dashboard that incorporates all reports required by the program. The dashboard is monitored and managed by Consumer Direct's operational leadership in West

Virginia and other program leadership on a regular basis with the support of our Data Analytics team. The dashboard provides users insight into valuable reporting metrics. Our reporting system allows us to categorize figures by month, region, county, waiver, program and in the aggregate. Our program leadership monitors program trends and will work with the Agency to address any trends or issues identified.

Reflective of our ability to produce a variety of reports, here are some statistics on our reporting in Virginia.

Monthly reports	Quarterly reports	Annual reports	Total reports
48	54	13	118

4.2.1.100 Provide the Agency with Monthly Statement from Dedicated Payroll Bank Accounts Within 15 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.

Consumer Direct currently works under a similar guideline for another statewide program which also requires a separate bank account. For West Virginia, we will 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 the Agency may oversee for the delivery of Subagent-F/EA FMS. We track receipt of service funds in our financial system and maintain a dedicated bank account for the deposit of service funds.

Our Accounting department is responsible for systematically recording transactions, following procedures, and performing ongoing account reconciliations. Accounting manages internal controls and ensures financial records follow Generally Accepted Accounting Principles (GAAP)

Consumer Direct has strict policies in place regarding documenting financial/accounting transactions. Financial documentation is required to include complete and transparent information on transactions. The Accounting department is overseen by the Controller who reports to the CAO.

Consumer Direct isolates contract-related income and expenditures by assigning accounting by company, cost center, source, and location. Internal controls provide a thorough record of expenditures for purposes of an audit. All Consumer Direct Care Network companies undergo internal monthly review of financial records. This process begins when an internal accountant prepares a trial balance account reconciliation and drafts financial statements. The Controller reviews the reconciliations and draft financial statements. Then they are reviewed with the program Senior Director. Financial statements are reviewed by the CAO, other executives, and Board of Directors for final approval. An independent CPA firm audits our financial records annually. The audit opinion provides reasonable assurance that the financial statements are presented fairly, in all material respects, according to GAAP.

4.2.1.101 Provide the Agency with Monthly Discovery and Remediation Report

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.

Consumer Direct will provide a monthly Discovery and Remediation Report based on performance measures identified by the Agency one (1) week prior to scheduled contract meetings. During contract meetings, we will work with the Agency to gain more clarity on what is required in this report.

4.2.1.102 Provide the Agency with Quarterly and Year-End Financial Reports

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.

We will provide the Agency with quarterly and year-end financial reports within forty-five (45) calendar days of the end of the quarter or the end of the year.

4.2.1.103 Upon Request, Provide Current Monthly Spending Report to Members Without Internet Access

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.

Use of the web portal provides the most rapid access to the monthly Spending Report. However, for those members who do not have access to the internet we will mail a printed copy of their monthly spending report within five (5) business days following the end of the payroll period that includes the last day of the month. This ensures that the spending report reflects spending of the last pay period in the prior month, and if there is anything pending to be paid.

We recognize the importance of assisting members to be cognizant of their spending. Members using the web portal will receive real-time alerts as to where they stand relative to their available budget. Those relying on paper spending reports can always call their Resource Consultant if they have questions mid-month regarding their budget status. To facilitate effective use of the portal, we also have West Virginia-based and customer support line available during regular business hours to answer questions and concerns from members DCSWs should any arise.

4.2.1.104 Ensure No Distribution of Information or Reports Occurs without Written Permission of the Agency

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.

Copies of information and reports will not be distributed to other parties without written permission and direction of the Agency.

Consumer Direct maintains all member and DCSW data by applying industry best practices and HIPAA and HITECH requirements to ensure we continuously meet federal and state privacy and security standards. Our systems are HIPAA-compliant and are designed to protect personally identifiable information (PII) and protected health information (PHI). We ensure data is only accessible to designated Consumer Direct personnel or parties that have been approved by the Agency. We will maintain a HIPAA and HITECH Compliant email address for communications and sharing relevant information and documentation with member/representatives. Our email address will be available on our website and on materials that we provide members and DCSWs. Additional measures to protect information include encrypted emails through ZixCorp.

In addition to our email address dedicated to customer service inquiries, members and their workers will be able to directly contact the RC who has been assigned to them via email routing. These emails are protected by the same levels of security as all other emails to and from Consumer Direct staff, and all staff are required to complete initial and refresher trainings covering in HIPAA, PII, and PHI. Protecting information related to members, DCSWs, providers/vendors, etc. is an important concern of Consumer Direct.

MAINTAINING RECORDS AND FILES

Over the course of our 33 years in the business, Consumer Direct has encountered almost every imaginable circumstance acting as an F/EA FMS. And while we are sure that something new likely lies around the next corner, it does provide us with a high degree of confidence in our Business Continuity and Resiliency Plan as well as our Disaster Recovery Plan, two important requirements found in the approximately 25 requirements that follow. In both cases, our superior technological capabilities and attention to detail form the backbone of both plans. We dedicate four pages alone to a description of our Business Continuity Plan, using Washington State as an example. We are confident that our existing plans can be easily customized for West Virginia's purposes.

This set of requirements also focuses on good data management, whether it applies to maintaining, sharing, retiring, or archiving data elements or files. Data security is paramount in all those circumstances. That is why we make data security a shared responsibility of the IT, Risk, Quality Improvement, and Systems departments. This redundancy reduces the likelihood of human error leading to a data breach, for example.

4.2.1.105 System for Secure Maintenance of all Files

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, https://www.govinfo.gov/app/details/CFR-2002-title42-vol3/CFR-2002-title42- vol3-sec431-17.

We maintain all current and archived member/representative-employer, DCSW, and Contractor files for the period of time required by federal, state, and program rules. All records are maintained for auditing purposes. Files are stored in a secure, HIPAA-compliant electronic database. We adhere to all state and federal policies that define specific retention schedules for different types of records. Consumer Direct also follows a conservative retention schedule according to industry standards.

4.2.1.106-4.2.1.107 Maintain Approved Master Checklist to Ensure All Required Documents and Archived Files are Stored Appropriately and Securely

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.

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.

Consumer Direct will develop a master checklist that is 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 waiver programs. Our Operations and Quality Improvement teams will develop the master checklist of all files and required documents for service provision in the state of West Virginia. This master checklist will serve as the basis for our proficiency tracker report. Our electronic document management system pairs with our proficiency tracker report to ensure that all required documentation is accurate, present, and complete in each member's, worker's, and vendor/provider's respective files. After forms and documentation have been provided to Consumer Direct, our Document Review team inspects each form for completeness and accuracy ensuring all form requirements are met. If a form is incomplete, missing information, or not present in our systems, our Document Review staff will flag the form as missing or incomplete. The results of Document Review's inspection populates into our proficiency tracker report, allowing our local staff to determine what files, forms, or information is missing, and needs to be collected for any particular member, worker, or vendor/provider. Consumer Direct's internal controls ensure all required documentation is on file and accurate.

4.2.1.108 Meet All HIPAA Requirements

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.

We maintain all records and reports in a secure and reliable manner using state-of-the-art information technology systems. Our systems are scalable and adaptable to meet unique program requirements. We operate an electronic document management platform called DocuWare. DocuWare is secure, meets all HIPAA compliance standards, and integrates with other systems in the Consumer Direct IT infrastructure.

Consumer Direct stores all operational records in our secure DocuWare system. This system is backed up on secure servers in different locations. We monitor version control closely and require change verifications/approvals for our records. DocuWare stores all forms and documents completed by members and DCSWs during the enrollment and hiring process.

4.2.1.109 Establish and Adhere to Approved Incident/Disaster Management Procedure

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.

Consumer Direct is committed to safeguarding the privacy of health information in both electronic and paper formats. When exchanging data with partners, Consumer Direct sends and receives data securely via electronic data interchange. It is both our policy and practice to maintain HIPAA compliant associate agreements with all applicable business partners. To continually strengthen our compliance measures, we:

- Train our staff on the use and exchange of electronic Protected Health Information (ePHI). Training is initial upon hire and at least annual thereafter.
- Documenting software and hardware maintenance.
- Never release or divulge Personally Identifiable Information (PII) or Protected Health Information (PHI) without an approved release of information form from the member.
- Comply with HIPAA's breach and notification and requirements.
- Equip all offices with printed HIPAA policy manuals.
- Maintain an electronic copy of the manual on the company's shared drive for easy access to up-to-date requirements and policies.

Consumer Direct's policies ensure that PHI is stored safely, maintains PHI accessibility only to those given clearance, and protects information from being shared beyond those approved for access. Our experienced IT technicians actively support, automate, and put into effect HIPAA's security requirements through our computer systems.

Additionally, IT works closely with the company's Legal, Risk, and Quality Improvement departments to ensure HIPAA security breaches are prevented. To date, our security measures have been highly effective and include:

- Storing information on multiple secured servers in different geographic locations to protect the information in the event of a disaster. Designated roles and associated responsibilities limit access to PHI and assure HIPAA compliance.
- System capabilities allow quick and easy internal functions to institute immediate changes to access levels per changes of employment or job responsibilities.
- Protecting access by password, requiring a new password in regularly scheduled intervals, recording inappropriate and attempted logins, and automatically logging off inactive users.
- Incorporating multi-factor authentication tools.
- Encrypting relevant emails through ZixCorp to ensure confidentiality.
- Recording and reviewing of activity and information systems to identify and respond to unauthorized access.
- Consumer Direct's HIPAA manual includes written policies, procedures, and internal controls. It explicitly segregates duties for all tasks related to processing payroll and annual independent CPA reviews of our internal controls.

We encourage Agency staff and members to communicate directly with us using HIPAA compliant secure email. Secure email is sent through ZixCorp to ensure confidentiality. Consumer Direct will also comply with all secure communication methods designated by the Agency.

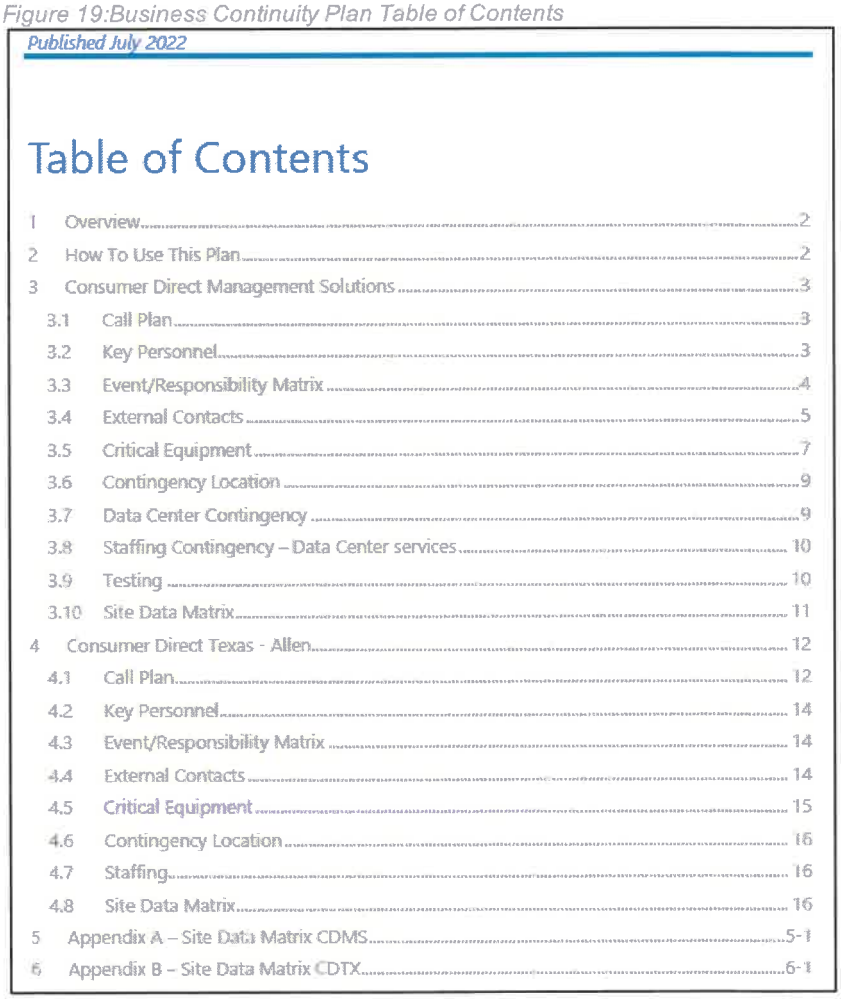
4.2.1.110 Establish and Maintain Approved Business Continuity and Resiliency Plan and Disaster Recovery Plan

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.

We will maintain a Business Continuity and Resiliency Plan and a Disaster Recovery Plan to be approved by the Agency. We will provide the plan to the Agency within thirty (30) calendar days of contract award.

Consumer Direct places the highest priority on ensuring services continue without interruption. We have the technological systems in place to provide the greatest protections of information and to ensure continuation of services in the event of a disaster that potentially impacts service provision.

Figure 19:Business Continuity Plan Table of Contents



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Consumer Direct annually produces and updates Business Continuity/Disaster Recover Plans for each of our program locations. As the selected F/EA FMS vendor, we will incorporate our future West Virginia operations, and any associated systems or business affiliates providing critical network or infrastructure support, into the documented procedures. As with all other programs, we will designate staff for these location(s) to plan for continuous systems and business operations specific to West Virginia in the event of an emergency. Our Business Continuity Plan/Disaster Plan will reaffirm our testing processes and illustrate consistency in file security and recovery throughout unforeseen disasters.

Consumer Direct's high availability network, cross-trained nationwide staff, and remote work flexibility is the foundation of our approach to continuity of operations and recovery from emergencies or longer-term situations like a pandemic. We point to our quick response to the national pandemic emergency that began in March 2020 as an example.

On the first Monday after the federal announcement of a national emergency concerning the COVID-19 pandemic, our staff arrived at offices across the US and were given instructions to collect their laptops or desktops, monitors, keyboards, desk chairs – whatever they needed – and take it to their homes until we could safely return to offices. For those people who did not have internet access at home, they could make arrangements to create safe, socially distanced space in their local Consumer Direct office. On that day, March 16, 2020, our IT support staff assisted approximately 600 staff from Alaska to Florida to safely and securely set up a virtual private network (VPN) to continue to access Consumer Direct's CRM, telephone system, accounting system, secure file system, and other necessary tools to continue to support our company's members, caregivers, and state and health plan partners.

The majority of our staff worked from home offices until state and local regulations allowed people to begin to come back to their offices. Should another pandemic or similarly-disruptive situation occur again, we are confident the lessons we learned will allow us again to successfully meet the needs of our members, DCSWs, and state and MCO partners.

Our plans are specifically written for continuation of operations in an emergency. These plans incorporate the following elements.

Staffing

All personnel receive annual emergency response training pertinent to their location. Trainings at minimum include building fire drills, but may also include location-specific trainings related to floods, tornados, hurricanes, volcanoes, earthquakes, wildfire, or other regional needs.

Our staffing structure works to eliminate single points of failure where possible. Among our Operations personnel, many are cross-trained to understand and be conversant about similar programs. Our regional structure of Operations leadership ensures familiarity across programs to allow personnel to quickly provide back-up support to other teams when necessary. By creating a strong chain of trained and knowledgeable personnel, we work to eliminate situations where a single state office is the only source to support a program. By placing administrative duties – accounting, payroll, data management, IT support – outside of

Operations functions, we create efficiencies and broader foundational support for continuous functionality.

By eliminating single points of failure, Consumer Direct anticipates that operations will continue in a time of crisis. For example, in 2017, two of the states where we work were hit with natural disasters. Hurricane Harvey brought massive flooding and the displacement of people to Texas. A few weeks later, Hurricane Irma hit Florida.

As weather forecasters were predicting hurricane landfall, we prepared our personnel to work safely and securely from home offices. Additionally, we contacted our members and caregivers in those states to let them know we would accept late time submission and would run additional payroll cycles to ensure caregivers who couldn't submit time on the regular cadence would receive pay as quickly as possible.

Consumer Direct considers it a best practice to establish alternative lines of communication among our key personnel for back-up communication access. Key leaders are encouraged to share alternative forms of contact such as personal home and cell numbers with supervisors. It is important to note that we have strict policies against the sending and receiving of PII and PHI on personal devices or to personal accounts. These alternative lines of communication are strictly for communication between key staff during emergencies.

Supplier contacts are listed in our Business Continuity Plan which is updated at least annually or when we are notified of contact changes.

Essential Business Functions in the Business Continuity Plan

Each of our 35 offices across the US has an office-specific Business Continuity Plan which details:

Business Continuity Plan Features	
✓ Call Plan	✓ Contingency Location
✓ Key Personnel	✓ Data Center Contingency
✓ Event/Responsibility Matrix	✓ Staffing Contingency – Data Center
✓ External Contacts	✓ Testing
✓ Critical Equipment	✓ Site Data Matrix

Our Business Continuity Plans ensures essential staff are ready and key systems and functions remain operational during an emergency situation. Our centralized administrative offices are located at our company headquarters in Missoula, MT, where we provide support for state-based program offices with claims submission, invoicing, payroll processing, tax research, quality control, policy, analytics, document review, and the human resources functions of Consumer Direct. The nationwide success of our company is partially due to the various benefits of this arrangement, including the ability of centralized administrative staff to assist individual companies at any time and in a number of ways.

The human resources element of any business recovery plan is rooted in our management structure, and direction received from our seven-member executive team. Consumer Direct's

management structure allows for clear lines of duty and reporting. The chain of supervision flows from the top down and encourages collaboration and feedback up and down the chain. Regardless of the type of emergency, we have staff in place across the country who are familiar with each of our programs and who can step in and ensure continuity of services for people in West Virginia. We utilize backups systems to ensure continuation of all critical business processes.

Protection and Security of Data

We have two data centers – one in Missoula, MT and another in Lynnwood, WA. Both data centers operate around the clock and capture 100% of data. The data centers provide services to handle data, voice, network, program management, and financial management services. This IT infrastructure is designed to be secure, highly available, redundant, and scalable in both data centers. Should disaster strike West Virginia offices, CDWV staff can access the necessary information and maintain operations with minimal to no interruption. Our back-up processes enable continuation of critical business processes and the protection and security of data in core business areas.

Voice, Messaging and Email Services

Due to the criticality and timeliness of these services, live backups of this data is made to the secondary data center Teams and Outlook Exchange servers. In the event of an interruption to the primary data center, voice and email can be restored in less than 30 minutes.

In addition to our backups to voice message and email services, Consumer Direct informs members, workers and service partners of any disruptions of services during disasters. Our Communications team can send out update emails and text notifications regarding details surrounding an emergency and any resulting outages. We may also post updates on our social media pages and website as necessary. Program leadership will also contact Agency staff as necessary.

Business Software

Databases are backed up every 15 minutes using a process called log shipping. This data is sent from the primary data center to the secondary data center. This short timeframe would allow the restoration of our key software applications such as UTEX with a minimum of data loss.

File Server

Our file server contains our working data directories, company shares, personnel files, and is constantly synchronizing its data with a server in the other data center using a process called DFS. This allows for transitioning the file server function from one data center to the other in matter of an hour.

4.2.1.111 Annual Testing of Business Continuity and Resiliency Plan and Disaster Recovery Plan

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.

Consumer Direct tests our Business Continuity and Resiliency Plan and a Disaster Recovery Plan annually. We will provide test results to the Agency, its designee, and member/representative-employers within five (5) business days of request.

Consumer Direct's emergency plans are reviewed annually as part of our annual internal review process, and we utilize regular testing and review processes;

- Software backups tested bi-weekly
- Generator is on a weekly test run, yearly full-load test
- Internet connections are monitored internally and externally
- External monitoring creates call tree events for outages
- Entire Business Continuity Plan is tested annually
- The Business Continuity Plan is reviewed and updated at least once a year or as needed when there are changes to systems or testing methods
- We produce separate Business Continuity Plans for services in each new state

4.2.1.112 Availability of Documents and Records for Inspection

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.

Consumer Direct will 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.

We maintain all records and reports in a secure and reliable manner using state-of-the-art information technology systems. Our systems are scalable and adaptable to meet unique program requirements. We operate an electronic document management platform called DocuWare. DocuWare is secure, meets all HIPAA compliance standards, and integrates with other systems in the Consumer Direct IT infrastructure.

Consumer Direct stores all operational records in our secure DocuWare system. This system is backed up on secure servers in different locations. We monitor version control closely and require change verifications/approvals for our records. DocuWare stores all forms and documents completed by members and DCSW during the enrollment and hiring process.

We maintain all current and archived member/representative-employer, DCSW, and Contractor files needed in compliance with all reporting requirements and for the period of time required by federal, state, and program rules. All records are maintained for auditing purposes. Files are stored in a secure, HIPAA-compliant electronic database. We adhere to all state and federal policies that define specific retention schedules for different types of records. Consumer Direct follows a conservative retention schedule according to industry standards.

4.2.1.113 Dis-Enrollment of Member/Representative Employers

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.

Consumer Direct will 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 such as no longer Medicaid eligible, deceased, or opted off the program. This is a typical activity and time frame for Consumer Direct when we receive the eligibility information daily and electronically. We will begin the disenrollment process immediately and the appropriate parties will receive communication regarding the disenrollment process. All communications regarding the disenrollment process are recorded in our Customer Relationship Management (CRM) system.

4.2.1.114-4.2.1.115 Revoking IRS Form 2678 and Maintaining Copies

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.

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.

If Consumer Direct no longer represents a member, we revoke IRS Form 2678 by filing Form 2678 with the IRS to revoke the Appointment of Agent. This will be completed by our tax team, and according to IRS form instructions. Upon completion of filing, Consumer Direct staff scan and maintain the form in the member's file with all other required documentation. Even though the member is no longer receiving services from Consumer Direct, the revoked IRS Form 2678 will be maintained in their archived folder according to federal, state, and program retention requirements.

4.2.1.116-4.2.1.117 Revoking IRS Form 8821 and Maintaining Copies

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.

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.

Similar to the revocation of IRS Form 2678, Consumer Direct's tax team will revoke IRS Form 8821 when appropriate and according to IRS form instructions. The revoked IRS Form 8821, Tax Information Authorization, and related IRS Notice of Agent Revocation (IRS LTR 4238C) will be maintained in the member/representative-employer's archived file.

4.2.1.118-4.2.1.119 Retiring Member/Representative-Employer's FEIN and Maintaining Documentation

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.

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

Consumer Direct, will retire the member/representative-employer's FEIN, when appropriate and when Consumer Direct revokes IRS Form 2678. As part of the process, Consumer Direct will notify the IRS if the member/representative-employer is deceased when informing the IRS that the FEIN needs to be retired.

The resulting documentation will be maintained in the member's archived file.

4.2.1.120-4.2.1.121 Withholding, Filing, Depositing Final WV State Income Tax and Maintaining Documentation

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.

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.

We will withhold, file and deposit final West Virginia state income tax (even when the final filing is zero wages) for each applicable member/representative-employer. Consumer Direct will ensure this step is completed even when the member/representative-employer is no longer receiving services from Consumer Direct. Copies of the final West Virginia state income tax withholding filing and deposit documentation and all related correspondence will be maintained in the member/representative-employer archived file.

4.2.1.122-4.2.1.123 Compute, Withhold, File, Deposit Final WV Unemployment Taxes and Maintain Documentation

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.

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.

Consumer Direct will compute, file and deposit final West Virginia unemployment taxes (even when final filing is zero wages) for each applicable member/representative-employer. We file a quarterly report and pay the taxes owed. This is done as part of the disenrollment process and Consumer Direct's Tax team is responsible for completing this process. We will maintain a copy of the final West Virginia unemployment tax, filing and payment documentation and all related correspondence in each member/representative-employer's archived files in our electronic database.

4.2.1.124-4.2.1.125 Compute, Withhold, File, Deposit Final Municipal Taxes and Maintain Documentation

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

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

Consumer Direct will compute, withhold, file, and deposit any final municipal taxes as part of the disenrollment process. Copies of all related documentation and correspondence will be maintained in each member/representative-employer's archived file.

4.2.1.126-4.2.1.127 Retirement of Member/Representative-Employer's Employer Identification Number from Appropriate Authorities and Maintain Copies

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.

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

We will retire a member's State Unemployment Insurance employer identification number with the West Virginia Department of Taxation and Bureau of Employment Programs when the member is no longer the employer of DCSWs. All filed and submitted forms regarding the member's disenrollment including tax filings and payments are maintained in the member's archived file. As with all other records pertaining to this contract, these records will be maintained for the duration required by federal, state, and program guidelines.

4.2.1.128-4.2.1.129 Retirement of Member/Representative-Employer's Municipal Tax Account and ID Number and Maintain Documentation

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.

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

We will retire the member/representative-employer's municipal tax accounts and identification numbers during the disenrollment process. We maintain the documentation and related correspondence in the member/representative employer's archived file. We will immediately inform the state Department of Labor of any DCSWs who are no longer employed due to the member/representative-employer no longer being an employer. This reporting will be done as part of the disenrollment process.

REMAINING NOTEWORTHY ISSUES

The remaining 30 requirements (Section 4.2.1.130 through Section 4.2.1.149) address a cross-section of issues. Although the issues are broad in nature, the breadth and depth of experience in providing FMS services allows us to be responsive to each issue. In this final overview section for Section 4.2.1, we would like to highlight the following:

- *We believe Resource Consultants play an effective role in achieving several of the outcomes described in these requirements. This includes avoiding disruptions, utilizing an on-line DCSW registry, complaints and grievances, and supporting member interest in self-direction.*
- *Knowing that finding and retaining workers is of the utmost importance to members, Consumer Direct provides an accessible effective method for pairing members and workers through our Provider Directory. Our provider directory has helped members find workers in many of the states we work.*
- *Consumer Direct will be transparent about complaints and grievances as well as all aspects of substandard performance, including by members of our own staff. We strongly believe in identification, education, and remediation. While termination (used broadly here to describe the most serious repercussion facing a member, DCSW, or a Consumer Direct employee) may be a last resort unless the offense is egregious and/or compromises health and safety.*
- *The Agency will find that the Consumer Direct web portal is user-friendly and equally beneficial to members, DCSWs, and the Agency.*

4.2.1.130 Communication with Case Managers, Utilization Management Staff, and Claims Payer Staff

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.

Ensuring members don't experience a disruption of service is important to Consumer Direct. We will coordinate and communicate our 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 don't experience disruptions in service.

Upon award of contract, we will work with the Agency to identify essential stakeholders, and determine appropriate communication messaging and channels. These channels will be established, and our staff will be trained on utilizing these channels before we begin providing services to members. We will offer to conduct trainings for Case Managers,

Utilization Management Staff, and Claims Payer staff, either online or at locations of their choice, to educate these groups on who is Consumer Direct, what is our role, and how our groups will interact going forward. As appropriate and necessary, other service partners will be informed of any updates that impact them in service provision for members/workers.

4.2.1.131 Maintaining Online Searchable DCSW Registry

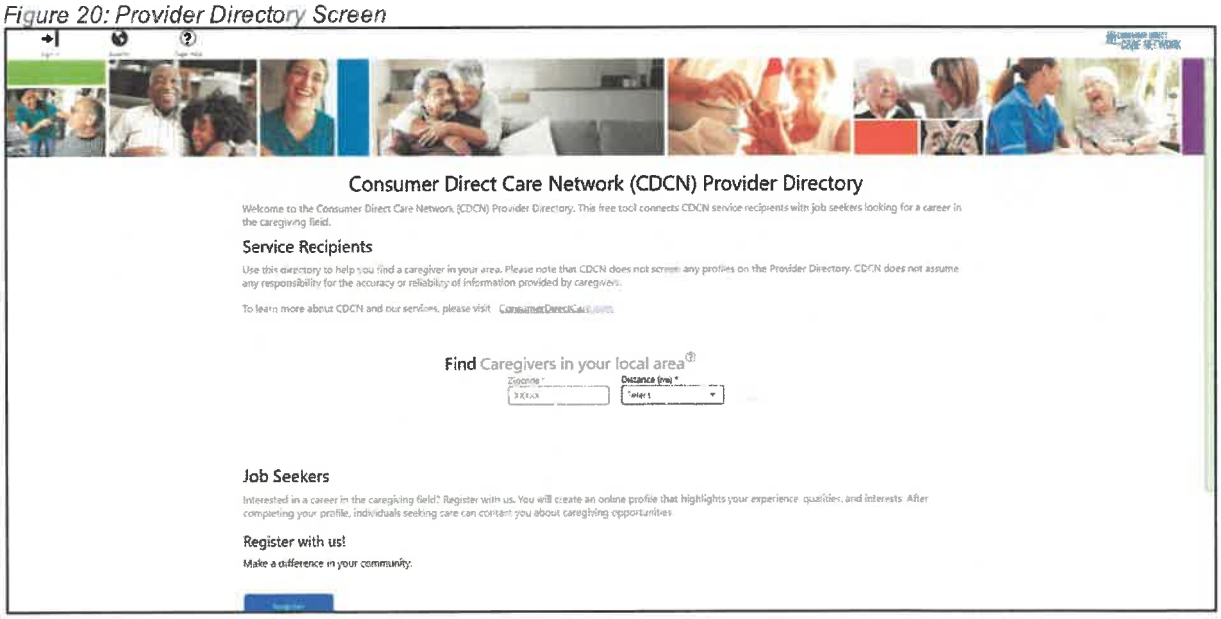
4.2.1.131 The Vendor should establish and maintain an on-line searchable DCSW Registry.

Consumer Direct has developed a Provider Directory which will be available to member/representatives as an optional tool for finding DCSWs. For programs that allow use of the Provider Directory, this is an option for potential or current DCSWs to post a profile and member/representative-employers to search for a match. We currently have almost 4,000 combined users (members and workers) across participating states who use this matching tool.

Resource Consultants can help members upload available jobs to the Provider Directory. This allows DCSWs who have gone through the hiring process to seek out additional hours or find members to serve. This may be because they are working part time, or their member may no longer qualify for self-directed service. The screen shot below provides an example of our Provider Directory home page where both members and DCSWs can initiate a caregiving match. Currently our Provider Director is voluntary for both members and workers.

Interested West Virginia readers can find the landing page for the Provider Directory here: https://providers.consumerdirectcare.com/Home

Figure 20: Provider Directory Screen



4.2.1.132 Participation in Annual Quality Reviews

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.

Consumer Direct will 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. Consumer Direct approaches monitoring and quality assurance activities in multiple ways. Both local project staff and corporate staff have defined roles and responsibilities. At the corporate level, we further divide roles and responsibilities between a Quality Management (QM) Team and a Quality Improvement (QI) Team. Consumer Direct delivers high quality services on a consistent basis in part because the project and corporate staff focused on quality assurance complement each other while also providing the necessary arms-length oversight required to be effective.

Local leadership is responsible for overseeing program-specific metrics and conducting project-specific monitoring and quality assurance activities. Our West Virginia-based Project Manager will utilize a dashboard that provides an overview of the various metrics required by the program. The dashboard will be customized to meet specific reporting requirements in West Virginia.

QM and QI perform annual reviews of all Operations programs, review their findings internally, then share their findings with local leadership and assist as necessary to help local teams achieve compliance and improvements. In addition to Quality Management tasks, Consumer Direct utilizes annual Customer Satisfaction surveys to assess quality of service delivery.

4.2.1.133 Assisting Members and Representatives Interested in Participant-Directed Services

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.

When a member indicates they are interested in taking the next step to participant-direct or self-direct their care they may first be directed to our website either by Agency staff or someone else on their care team. There they will have the option to complete our contact form or call us directly using our phone number listed on our website. We will contact the member or their family and answer any questions they may have about the program and how directing their own care may work for them. Our staff can help them understand program rules and details, including how to recruit and hire a DCSW, how to create a back-up plan of natural supports, or how to manage a budget. We can provide this information in a way the member wishes – whether that be in-person, by telephone, or directing them to on-line tools and resources.

For interested West Virginians, we will work with the Agency to develop an informational brochure that explains how self-direction works and make it available on our website for potential members. The brochure will include information on the roles of members, DCSWs, the Agency, and Consumer Direct. An example of a brief overview document we created for people interested in self-directed services in Colorado is included here:

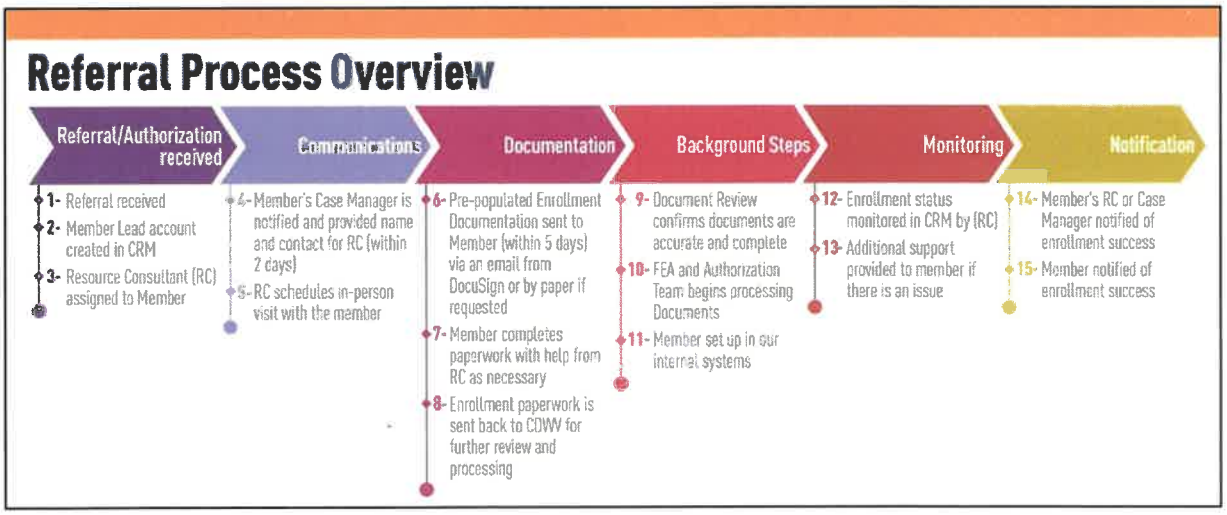
Figure 21: CDASS Overview

4.2.1.134 Receiving and Processing Member Enrollment, DCSW Employment, and Vendor Information

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.

Consumer Direct is accustomed to receiving and processing member, DCSW employment, and vendor information packets. The following graphic demonstrates our process of enrolling a member.

Figure 22: Referral Process Overview



Consumer Direct has developed an enrollment process that minimize errors by utilizing electronic enrollment packets. We will adapt our packets to meet West Virginia requirements. We support members with an enrollment process that is easy and reduces the likelihood of errors in enrollment paperwork. We encourage the use of electronic packets and use this method unless a member requests a paper packet be mailed to them. Electronic packets have several benefits compared to paper enrollment packets.

In Washington State in 2022, we were able to enroll 40,000 members using electronic packets, even though not all members have access to the internet. With in-person enrollment support, Consumer Direct is able to work with a member at a location of their choosing and enroll the member electronically using a Consumer Direct tablet. Even for members and families who are not comfortable with technology, this approach has distinct advantages.

Electronic packets:

1) Have built-in data validation to make sure all required fields are completed.
2) Key demographic information is pre-populated through all necessary forms which prevents the individual completing the form from the repetitive process of retyping the same information.
3) Minimizes frustrations due to incorrect or incomplete packets
4) Are easily and securely submitted to Consumer Direct once the packet is complete. (i.e. once the Consumer Direct RC or the member/representative has confirmed the packet is complete, the packet auto-submits to Consumer Direct. There is no emailing, faxing, or mailing of packets to Consumer Direct.)
5) Speeds up processing due to more complete and accurate information.
6) Allows for the Member/representative to use an electronic signature. Our electronic packets even have a feature for electronic notarization in states where electronic notarization is permissible.

Regardless of the member's choice of an electronic or physical packet, their RC is available to assist them with any questions or concerns. All contact with members, Case Managers, or potential DCSWs regarding the enrollment or hiring process is documented in our Customer Relationship Management (CRM) system.

Our reporting capabilities and CRM system allows us to track where each individual is in the enrollment process. RCs will monitor the enrollment status of the prospective referrals assigned to them. If there is anything delaying the process, the RCs can identify where the enrollment is stalled in the set-up process. If any issues occur in the enrollment process, CRM allows tasks to be assigned to specific individuals or teams who can research and resolve the issue. Consumer Direct closely monitors enrollments to ensure that they are completed within the timeframes outlined by program requirements. By monitoring enrollments, we address any issues that are within our control early on and contact the prospective members to provide them with updates or request additional information.

4.2.1.135 Tracking All Communications Electronically

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.

Responding to and Tracking Communications

Consumer Direct utilizes two primary tools for tracking all communications from members, DCSWs, vendors/providers, Agency staff and any other individual who may contact Consumer Direct. CxOne, our call support system and CRM, our Customer Relationship Management system.

All calls are recorded in our CXOne call support system. CXOne software is programmed to track the following:

1. The number of the caller;
2. The date and time the call was received;
3. The purpose of the call;
4. The name of the person who handled the call;
5. If the call required additional time to resolve, when the caller was contacted with the additional information (date and time) and by whom.

Calls made through the CxOne system are recorded, including inbound and outbound calls. This allows us to assess quality of customer experience and provides internal training opportunities. We also record emails and text messages inbound and outbound. Consumer Direct will generate reports and conduct audits based on these recordings as well as the customer service metrics as required by the contract. In addition, call notes are logged in our CRM including the call reason and resolution. These records give insight to previous conversations so we can resolve issues faster and identify call trends. The CRM system also captures complaints and grievances submitted to Consumer Direct. If a communication is considered a complaint or grievance, we flag the related communication in our CRM system and utilize an additional report that monitors complaint/grievance resolution and follow up. We discuss our complaint and resolution process in further detail in section 4.3.1.14.

Figure 23: Call Details

CASE DETAILS

Case Title *	Can't Enter Time
Regarding *	Caregiver Test
Regarding Client	Amy D. Tester
Subject *	Complaint
Company *	CDWA
Origin *	Phone
Due By	5/1/2023
Priority	Normal
Confidential	☐

FEEDBACK DETAIL

Date Complaint Received	4/10/2023
Date Incident Occurred	4/6/2023
Date Incident was Discovered	4/10/2023
Complaints Type	Time Entry
Number of People Affected by Compl	1

RESOLUTION DETAIL

Initial Response Date to Complaint	4/10/2023
Complaint Resolution Decision Date	4/11/2023
Complaint Resolution Decision Delive	Phone Call
Complaint Resolution	Time Entered and/or Resubmitted
Response to Complaint Resolution	Accepted

We log all call history under the caller's name in our CRM system, whether the member or the DCSW initiates the call. This provides our staff handling the call the ability to quickly look up previous conversations with the caller. The caller simply provides us with their name and key identifying information and we can pull up all information on previous calls/contacts, including when the call occurred, and who and how the previous requests were handled. CRM allows us to track calls to assure continuity of services. Within CRM, we can also monitor whether the issue was resolved or is still pending. Unresolved issues are escalated to higher level staff as necessary.

CxOne is a reliable, industry-leading call platform.

CXOne software allows us to easily route calls to the same staff member (when available) each time so the caller is always speaking to the same person. If that person is unavailable, another staff member can take the call. Our call system makes it easy to transfer calls or allow additional staff to join a call. For example, a supervisor can easily join a call if there is need for escalation.

It is worth noting that while our call software is sophisticated and enterprise-capable, our focus is on excellent customer service located in the communities we serve. Our West Virginia staff will be hired from and trained to know the community and understand the unique needs of members, their families, and their DCSWs in West Virginia.

4.2.1.136 Responding to Member and Representative Communications Within One Business Day

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.

We will respond to all member and representative communications within one (1) business day of receipt. It is our standard policy to respond to communication requests within one business day and we meet this requirement for other programs across the country.

4.2.1.137 Reporting Critical Incidents Within 24 Hours

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.

Consumer Direct applauds the Agency's development of an Incident Management System (IMS) to streamline reporting critical incidents that impact the safety and wellness of members in West Virginia. We appreciate the Agency's approach to conduct both individual and systemic remediation to protect others receiving services in the system.

Consumer Direct is a mandatory reporter in all programs where we provide services. As a mandatory reporter, it is important to maintain a system and process for reporting critical incidents, and we will continue this practice in a manner compliant with West Virginia regulations and processes regarding critical incidents. We recognize that as a provider agency, we are expected to complete a thorough investigation of any critical incidents we report. Any contact related to a critical incident is maintained with the appropriate details in our CRM system, allowing us to accurately and comprehensively document all communication with members, DCSWs, Agency staff, and other parties as applicable. By maintaining this information, we can provide all documentation.

Consumer Direct's policies and procedures will align with the Critical Incident requirements as defined in West Virginia. We ensure all applicable staff have undergone any training and review/evaluation required for critical incident management. This includes identifying what is reportable, understanding definitions related to the Incident Management System, understanding what constitutes as a critical incident, properly reporting and investigating all critical incidents, and our staff's role throughout the process. We take critical incidents and the safety of the members seriously. We recognize incidents may fall into the following categories:

- Critical
- Abuse/Neglect/Exploitation (ANE)
- Simple

We will train our staff on the process for reporting an event based on the category. We also recognize that Incident Management compliance is a requirement for Provider Certification and we will maintain this compliance. We contact Adult Protective Services (APS), Child Protective

service or law enforcement immediately and according to state law and the Agency's Incident Management process. Specific staff members are trained to act as investigators for Consumer Direct and are responsible for investigating critical incidents. All contacts related to critical incidents are logged in our CRM system under the member's account. The member is flagged in our system to ensure follow-up on the situation is completed.

All critical incident reports are fully documented including the date of the incident, when we learned of the incident, facts of the incident, type of incident, initial determination of the incident and verification that an approved professional conducted the investigation. As part of the process, we will seek to determine the cause of the incident, identify preventive measures, document any action taken, and assess any potential change in needs for the member. Ensuring member health, safety, and welfare is of upmost importance to Consumer Direct. As we address any critical incidents, we will address changes that can be made both to protect a particular member from a situation as well as systemic changes that can be made to protect all individuals receiving services.

4.2.1.138 Identification and Notification of Substandard Performance by Member, Representative, or Staff

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

4.2.1.138.5 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

Consumer Direct has processes in place to address any cases of substandard performance on the part of the member or representative, or a staff from Subagent. This plan includes notifying the member/representative and Agency of substandard performance, the

provision of appropriate remedial skill straining, assisting the member/representative develop and implement a written plan of correction to address areas identified, and monitoring the corrective action plan. Consumer Direct will also inform the Agency if there is a need to initiate involuntary termination. We recognize that 4.2.1.138.1-4.2.1.38.7 are all potential examples of substandard performance.

Detecting Substandard Performance

Consumer Direct staff are in a unique position to notice substandard performance or changes in a member's situation. Our RCs establish relationships with members and their DCSWs through our face-to-face enrollment, six-month in-person visits and monthly contact calls.

Our staff are trained to recognize circumstances leading to substandard self-directing practices during interactions with members. Our RCs play a role in monitoring member's success directing their own care as well as the members' utilization of budget dollars or services units. RC can identify situations where the member is close to overutilization of services. For example, in other states, we have implemented thresholds that notify both our staff and the member when the member is within a certain percentage of utilizing their services (i.e., they have utilized 90% of their annual budget). When overutilization of services is detected, our staff will reach out to the member and notify the member's Case Manager or other appropriate parties of overutilization. Overutilization could be a sign that a member's care needs have changed.

Our RC are trained to ask questions to assess the member's status and success directing their own care. These communications are documented and recorded in our CRM system. These records help us identify trends in members' needs.

Consumer Direct encourages cooperative relationships between our Resource Consultants and other service partners involved in the member's care.

We recognize that circumstances may change, and our staff is trained to notice and report such changes. We will work with the member and their other supports as appropriate, to determine the best course of action for the member. This may mean the member will need additional training, have conversations about their other supports and/or they may need reassessment and updated Spending Plans. Members are encouraged to bring up any issue or concerns they may have directing their own care. Circumstances and needs change. Self-direction or consumer direction may no longer be the best option for the member. Ensuring safety and welfare is of the upmost importance to Consumer Direct.

Notifying the Member and Agency of Substandard Performance

Our RCs are primarily responsible for notifying the member of substandard performance. This can occur during the monthly phone contacts or in-person visits, or as needed if required. During regular contacts, our RCs will speak with the member about how they self-assess their performance directing their own care. If the member has questions or concerns about directing their care, our RCs will assist them as needed. During this time the RC may gently remind members/representatives of the responsibilities they have in

directing their own care. Depending on the situation, the RC may begin working with the member to develop a written plan of correction to address deficiencies. We will notify the appropriate parties at the Agency when a member is displaying substandard performance in a timely manner.

Plan of Correction

If a plan of correction is required, our RCs will work with the member to identify areas for improvement. During this process, additional training for the member and their DCSW may be recommended, or the member may be required to improve their emergency backup plan. Whenever a written plan of correction is developed, we note this in our CRM system, and the resulting documentation is stored in the member's electronic file. The member's profile in CRM is flagged so that the member's assigned RC can set notifications to check on progress of the correction plan during monthly calls or other scheduled contacts with the member.

Training

Detailed and thorough member education is the first step towards ensuring the member/representative-employer understands that with greater freedom comes greater responsibility. Our RCs are trained to differentiate between a member who may not be an appropriate candidate for self-direction and a member who can be successful with additional training. A member/representative may not be able to recruit and hire DCSWs, they may determine they don't want the responsibility of hiring and managing their DCSW or the responsibility may become burdensome, their health and safety may be at risk, or other factors may occur. If training is the best solution for the member, Consumer Direct will provide them with the appropriate training resources. These may be instructional training materials and additional instruction from the member's assigned Resource Consultant. We develop a variety of instructional resources and training materials to help members understand how to better direct their care.

Involuntary Termination

While Consumer Direct advocates for member's ability to direct their own care, we recognize there are circumstances where this may no longer be the best option for the member.

As with initiating Consumer Direction or Self-Direction, we will implement processes for disenrollment when members can no longer or no longer wish to direct their own care, or in situations where a DCSW is unable to deliver appropriate services and supports to the member and the member's backup plan doesn't provide adequate levels of support.

We have various methods and means in place to detect circumstances that may trigger a discussion between Consumer Direct and the member's other supports or the Agency regarding the appropriateness of self-direction for the member. These situations may be identified through means such as:

- Assessment from the RC after a periodic contact such as a monthly call
- The member reporting concerns about their DCSW or their own ability to self-direct
- Reports from DCSWs that the member is having difficulties or needs more support
- Critical incidents or detection of possible fraud, waste or abuse
- Misutilization or attempted misutilization of budget units or funds (i.e., overspending)
- Repeated failures to maintain time submission and time approval compliance
- Changes in the member's health status
- Inability to find DCSW or other supports to meet the member's needs indicated in their Spending Plan.
- Consumer Direct has made multiple contact attempts and is unable to reach the member/representative and/or the DCSW

If the issue is with a DCSW, Consumer Direct will inform the member of potential risks associated with continuing to use the DCSW and will encourage the member to utilize their back-up supports and/or hire a new DCSW instead.

If involuntary termination is the best solution, Consumer Direct will abide by the Agency's processes and rules regarding involuntary termination. As part of this process, we will provide members/representatives an advance notice and the options available to them as well as the steps they can take to locate other services. Consumer Direct will work with the member/representative and their other supports to facilitate a smooth transition to contract providers and to prevent gaps in service provision.

When involuntary termination occurs, Consumer Direct will communicate with the Agency. We maintain all documentation in the process including our CRM records and the Plan of Correction that we initiated with the member. When a member is no longer directing their own care, Consumer Direct retires the member's FEIN and completes final filings of state income and unemployment taxes and retires the member's state income and unemployment registration numbers.

4.2.1.139 Approved Member/Representative-Employer Handbook

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.

To support members, we will develop an Employer Handbook and seek written approval from the Agency. The Employer Handbook will meet all requirements outlined by the Agency Including information on:

- The role member/representative-employer in directing their own care
- The role of Consumer Direct as the Fiscal Employer Agent
- The role of the Resource Consultant

- Being an employer and evaluating DCSW performance and managing them to comply with time submission requirements.
- Recruiting, hiring, and selecting DCSWs
- Training on abuse neglect and explosion prevention and reporting, including critical incidents as per program requirements
- Initial and annual ongoing training of what constitutes Medicaid fraud, waste and abuse
- Use of EVV application and web portal and ensuring time submission and approval compliance
- Scheduling workers and back-up planning

During the enrollment process, our Resource Consultant will be available to walk members through the Employer handbook and answer any questions or concerns the member may have. We provide an example of our Employer-handbook from our work in Idaho as **Enclosure B.**

4.2.1.140 Using Member/Representative Satisfaction Surveys for Program Improvement or Corrective Action

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.

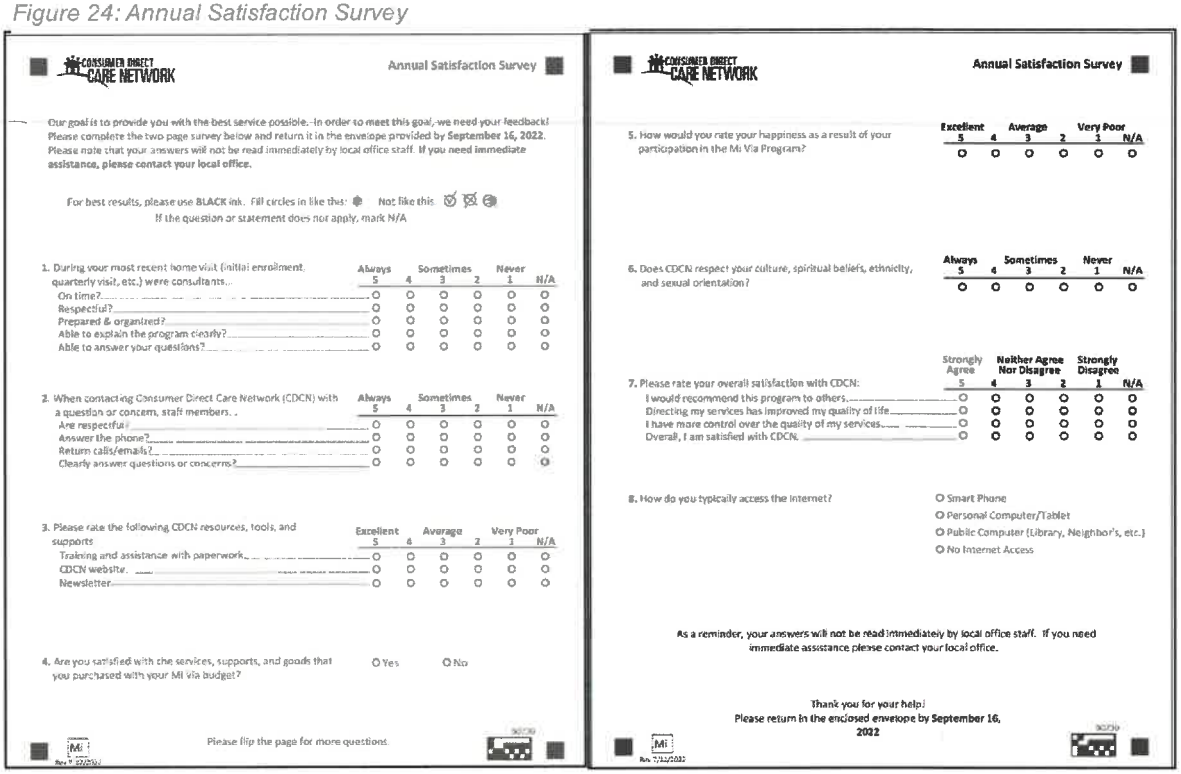
We have been conducting annual Satisfaction Surveys since 2010. We initiated these before many state programs were requesting them. Now most states realize the value in surveying members for satisfaction and feedback.

Our annual Satisfaction Surveys are managed, administered and reviewed by our Quality Improvement (QI) team which operates independently from local program operations staff. This method prevents any potential for conflict of interest of local staff. We administer satisfaction surveys with a 5-point Likert scale to measure member satisfaction with the core areas our business supports. The Likert Scale is a rating scale used to measure opinions, attitudes, or behaviors towards our services. It consists of a statement or a question, followed by a series of five or seven answer statements. Respondents choose the option best corresponding with how they feel about the statement or question. A common 5-point Likert scale example of satisfaction ranges from very satisfied, neutral, to very dissatisfied. We design our questions to determine key sources of customer satisfaction such as how our staff interact with members, our responsiveness, and the quality of our resources. We can adjust surveys to meet program requirements or seek answers to more specific questions such as how individuals are accessing the internet. Collecting this

> Conducting annual Satisfaction Surveys allows us to gauge member satisfaction and identify areas for improvement.

quantitative data allows us to readily identify and prioritize operational areas for improvement and monitor member satisfaction over time. We will provide these surveys on an annual basis in a schedule that aligns with program and reporting requirements.

Figure 24: Annual Satisfaction Survey



Annual Satisfaction Survey

Our goal is to provide you with the best service possible. In order to meet this goal, we need your feedback! Please complete the two page survey below and return it in the envelope provided by **September 16, 2022.** Please note that your answers will not be read immediately by local office staff. **If you need immediate assistance, please contact your local office.**

For best results, please use BLACK ink. Fill circles in like this: ● Not like this: ⊘ ⊠ ◍

If the question or statement does not apply, mark N/A

1. During your most recent home visit (initial enrollment, quarterly visit, etc.) were consultants...

	Always 5	4	Sometimes 3	2	Never 1	N/A
On time?	O	O	O	O	O	O
Respectful?	O	O	O	O	O	O
Prepared & organized?	O	O	O	O	O	O
Able to explain the program clearly?	O	O	O	O	O	O
Able to answer your questions?	O	O	O	O	O	O

2. When contacting Consumer Direct Care Network (CDCN) with a question or concern, staff members...

	Always 5	4	Sometimes 3	2	Never 1	N/A
Are respectful	O	O	O	O	O	O
Answer the phone?	O	O	O	O	O	O
Return calls/emails?	O	O	O	O	O	O
Clearly answer questions or concerns?	O	O	O	O	O	O

3. Please rate the following CDCN resources, tools, and supports

	Excellent 5	4	Average 3	2	Very Poor 1	N/A
Training and assistance with paperwork	O	O	O	O	O	O
CDCN website	O	O	O	O	O	O
Newsletter	O	O	O	O	O	O

4. Are you satisfied with the services, supports, and goods that you purchased with your MI Via budget? O Yes O No

Please flip the page for more questions.

5. How would you rate your happiness as a result of your participation in the Mi Via Program?

Excellent 5	4	Average 3	2	Very Poor 1	N/A
O	O	O	O	O	O

6. Does CDCN respect your culture, spiritual beliefs, ethnicity, and sexual orientation?

Always 5	4	Sometimes 3	2	Never 1	N/A
O	O	O	O	O	O

7. Please rate your overall satisfaction with CDCN:

	Strongly Agree 5	4	Neither Agree Nor Disagree 3	2	Strongly Disagree 1	N/A
I would recommend this program to others.	O	O	O	O	O	O
Directing my services has improved my quality of life	O	O	O	O	O	O
I have more control over the quality of my services	O	O	O	O	O	O
Overall, I am satisfied with CDCN.	O	O	O	O	O	O

8. How do you typically access the Internet?
- O Smart Phone
- O Personal Computer/Tablet
- O Public Computer (Library, Neighbor's, etc.)
- O No Internet Access

As a reminder, your answers will not be read immediately by local office staff. If you need immediate assistance please contact your local office.

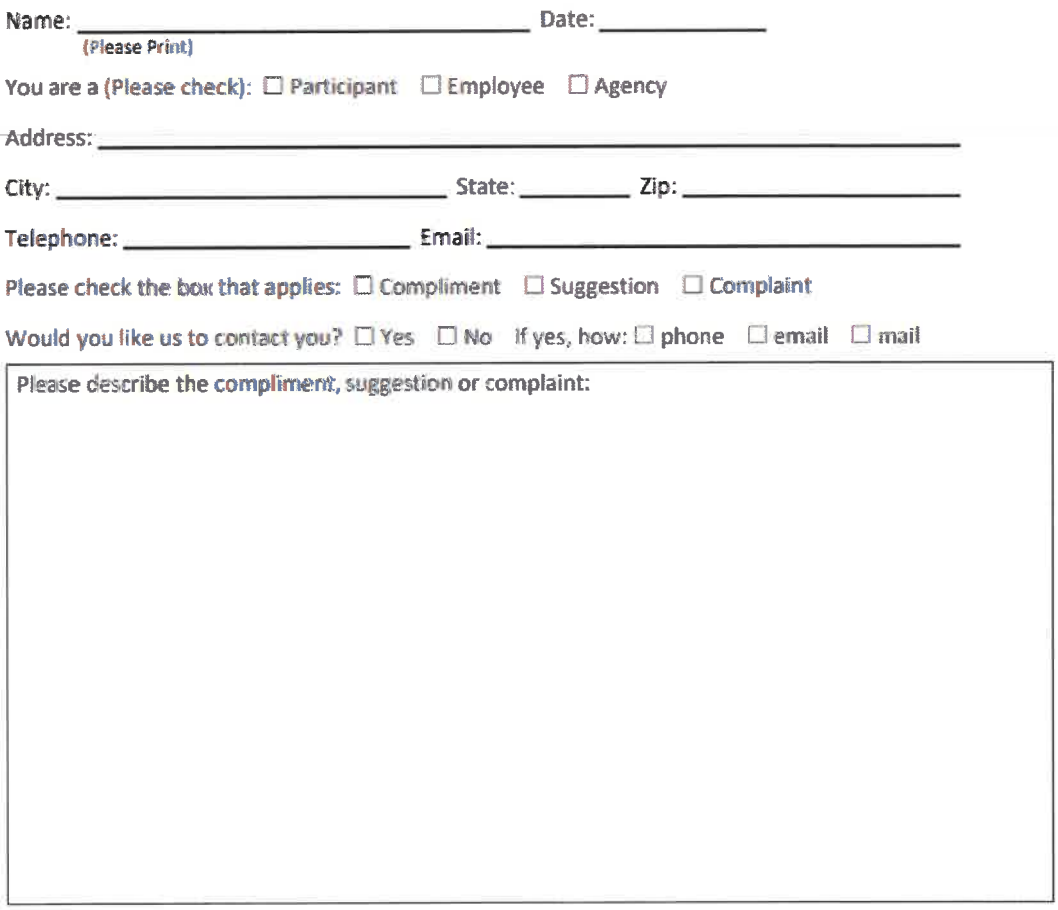
Thank you for your help!
Please return in the enclosed envelope by September 16, 2022

We offer surveys via both paper and digital formats. Paper surveys are mailed to the member/representative-employers and contain a prepaid business reply envelope for the individual to mail us their reply. Electronic surveys are emailed with a link to the survey administered through Survey Monkey. Survey questions are the same between digital and paper formats. All survey results are aggregated electronically. The survey is designed for member responses to be anonymous. Our satisfaction survey questions will be adjusted to meet the requests or requirements of West Virginia.

Aggregated satisfaction survey results and member feedback are analyzed for trends, strengths, and areas needing improvement. Survey results and other information are compiled into a report provided to the Agency. The report includes the number of surveys and the response rates. Program leadership and Consumer Direct's Executive Team also have access to this report. If trends or issues do not meet expected company best practice standards, Consumer Direct will initiate a corrective action plan to identify strategies and deadlines for immediate improvement. Solutions to identified issues are incorporated into our ongoing quality improvement processes, policies, procedures, and internal controls, as appropriate.

We also give members the ability to provide feedback through our feedback form where they can submit compliments, suggestions, and complaints.

Figure 25: Feedback Form



Name: _____ Date: _____
(Please Print)

You are a (Please check): ☐ Participant ☐ Employee ☐ Agency

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Please check the box that applies: ☐ Compliment ☐ Suggestion ☐ Complaint

Would you like us to contact you? ☐ Yes ☐ No If yes, how: ☐ phone ☐ email ☐ mail

Please describe the compliment, suggestion or complaint:

Finally, in addition to our annual surveys and feedback form, our CxOne customer service system includes an aftercall survey feature where callers can leave feedback regarding their satisfaction once the call is completed. Callers are not required to submit a response, but for those who do, their assessments provide Consumer Direct another way to keep a pulse on customer satisfaction and identify potential areas for improvement.

4.2.1.141 Plan for Acting as a Mandatory Reporter

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.

Consumer Direct is a mandatory reporter in all programs where we provide services. As a mandatory reporter, it is important to maintain a system for reporting critical incidents, and we will continue this practice in a manner compliant with West Virginia regulations and processes regarding critical incidents. This includes, appropriately reporting through the Agency's Incident Management System discussed in section 4.2.1.137. Any contact related to a critical incident is maintained with important details in our CRM system, allowing us to accurately and comprehensively document all communication with members/representatives, DCSWs, and/or Agency staff, and other parties as applicable. By maintaining this information, we provide all documentation required for reporting a situation or an event. As a mandatory reporter Consumer Direct will:

- Ensure all Consumer Direct staff are trained on mandatory reporting
  - What circumstances/events need to be reported
  - Recognizing signs of fraud, waste, abuse, etc.
  - Recognizes changes in the member's health, safety and welfare
  - Processes for reporting and required timeframes
  - Steps to protect the member/representative-employer
- Develop a process for reporting according to state and program requirements
  - What incidents are reported to which agencies
  - Time requirements for reporting
  - How to record what was reported
- Develop steps for protecting the member
  - Do emergency services such as APS or CPS need to be contacted
  - Helping the member find a new DCSW or use temporary support from their back-up plan

Consumer Direct utilizes various components to detect and prevent fraud and abuse. Detection components of our program include internal reviews, methods for DCSWs and members to report fraud/abuse themselves, and staff vigilance. Detection of actual/suspected fraud is documented, tracked, and reported. Consumer Direct also proactively reviews member spending and utilization of hours and services using a combination of our IT systems, standard operating procedures, and reporting tools to detect fraud and abuse. Our fraud prevention program and fraud prevention video can be viewed on the following link: https://consumerdirectcare.com/fraud-prevention/

Our Resource Consultants and other local staff will be the first line of defense in detecting fraud or abuse. These staff will be trained on how to recognize and report instances of fraud, waste,

or abuse. This training occurs when hired and is reviewed at least annually by each Consumer Direct Staff. Additionally, we employ reporting and quality assurance measures to help us detect inappropriate use of Medicaid funds. If Resource Consultants or other staff receive a tip of suspected fraud waste or abuse, they are required to immediately notify local program leadership. Communications and notes regarding the tip are logged in our CRM system. We will report all cases of suspected or confirmed fraud, waste, and abuse to the appropriate parties in West Virginia.

4.2.1.142 Member and Representative Orientation and Skills Training

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

Consumer Direct provides orientation and skills training and related material for members and their representatives and monitors its effectiveness. A key part of successfully initiating services for members is providing them the resources to successfully direct their own care. As an experienced F/EA and Resource Consulting provider, Consumer Direct has developed an extensive base of trainings and resources to help members understand their responsibilities as an employer of their own DCSWs. The trainings and materials are available to members who are already enrolled as well as members who are interested in learning about directing their own care. For each new program we update our training resources to meet program requirements. In West Virginia, we will ensure our training materials and resources meet Agency specifications and approval standards. Consumer Direct's approach to success in self-directed programs is founded on providing training materials to members and their DCSWs so each understands their role in self-directed care.

> Consumer Direct prides itself on our ability to connect with adult learners.

In Colorado we serve as the training and operations vendor, facilitating enrollments and other ongoing supports for over 3,700 individuals served by the state's Consumer Directed Attendant Support Services (CDASS) program. As the training vendor, we assist individuals to navigate their enrollment with their choice of the FMS providers serving the CDASS program. We provide in-person and group training across all 64 Colorado counties providing us with experience for both urban and rural populations. Upon completion of the training, every member/representative completes a plan for managing their budget and DCSWs as well as completing a Post Training Assessment to ensure understanding of the consumer directed services and roles and responsibilities of all involved.

In several of our states including the District of Columbia and New Mexico, where we provide support brokerage/resource consulting, we train member/representative on their role as an employer, and support them with tools for recruiting, hiring, training and managing their DCSWs and budget. All training documentation and records are stored in our digital files where we can track timelines and record all contacts ensuring all training needs have been met.

We have developed expertise with a variety of training formats including individual face-to-face training, phone training, self-paced web training, and group training. During the pandemic we utilized the Teams platform and cameras to provide trainings in Colorado. This method allowed trainers to share their screens and interact with members during the trainings. Following the face-to-face individualized enrollment, follow-up training for members who require it is offered in a format corresponding to their person-centered decision and their learning style/needs.

To better organize how virtual and in-person visits to the office will occur, we utilize a system called QLess which allows members and DCSWs to schedule appointments right from our website. West Virginia reviewers are invited to view the QLess system by viewing it here: https://www.consumerdirectwa.com/appointments/

Orientations

We have broad experience creating and implementing trainings and orientations. Our RCs are trained on how to work with member/representatives, their families, and DCSWs for best practices in providing accurate and friendly support. Consumer Direct RCs will orient and train members/representatives in all aspects of how to succeed in a self-directed program. We will incorporate the topics specified by West Virginia program requirements and will work collaboratively the Agency to assess and refine topics and training approaches.

Consumer Direct will develop member orientation packets written in clear and concise language. Packets will include program-specific information on the roles and responsibilities of the member/representative, workers, Consumer Direct, and other parties involved in consumer direction. Training topics include:

- The role member/representative-employer in directing their own care
- The role of Consumer Direct as the Fiscal Employer Agent
- The role of the Resource Consultant
- Consumer Direct's hours of operation
- How to contact Consumer Direct
- Being an employer and evaluating DCSW performance and managing them to comply with time submission requirements
- Recruiting, hiring, and selecting DCSW
- Training on abuse neglect and explosion prevention and reporting, including critical incidents as per program requirements
- Initial and annual ongoing training of what constitutes Medicaid fraud, waste and abuse
- Use of EVV application/web portal and ensuring time submission/approval compliance
- Scheduling workers and back-up planning
- How to manage Spending Plan
- How to manage services and avoid overutilization
- Enrollment packets and how to complete

Employing a DCSW can be a new experience for some members, and as a result, they may require additional support getting started. With input from the member/representative and

their other supports, we assess if/ when there is need for additional training to better understand the member's roles and responsibilities. We work with members to find the best approach for supporting them to successfully direct their own care. We utilize training checklists to verify the member has completed and understands their training. Our RCs go through the checklist with the member providing them opportunities to ask questions or seek clarification. The completed training checklist documentation is recorded in the member's electronic file and is available to the Agency upon request.

4.2.1.143 Customer Service Training and Monitoring

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.

Customer Service Training

With a proven and effective philosophy in place, Consumer Direct focuses on excellent staff training, recognizing that well-trained staff is where excellent customer service begins.

To ensure high quality staff training, Consumer Direct's Training team consists of four training specialists and three instructional designers who develop and deploy effective learning tools for adult learners. This team has deep experience creating tools for our nationwide programs and will bring that experience to create trainings for our operations staff in West Virginia. A point of emphasis for all project staff, including our RCs, is ensuring culturally competent customer service.

No competitor invests more FTEs in the Training function than Consumer Direct.

The Training team supports our Operations staff by developing program specific training to help them understand the West Virginia Aged and Disabled Waiver (ADW), Intellectual/Developmental Disabilities Waiver (IDDW), Traumatic Brain Injury (TBIW), and the Take Me Home (TMH) Waiver programs.

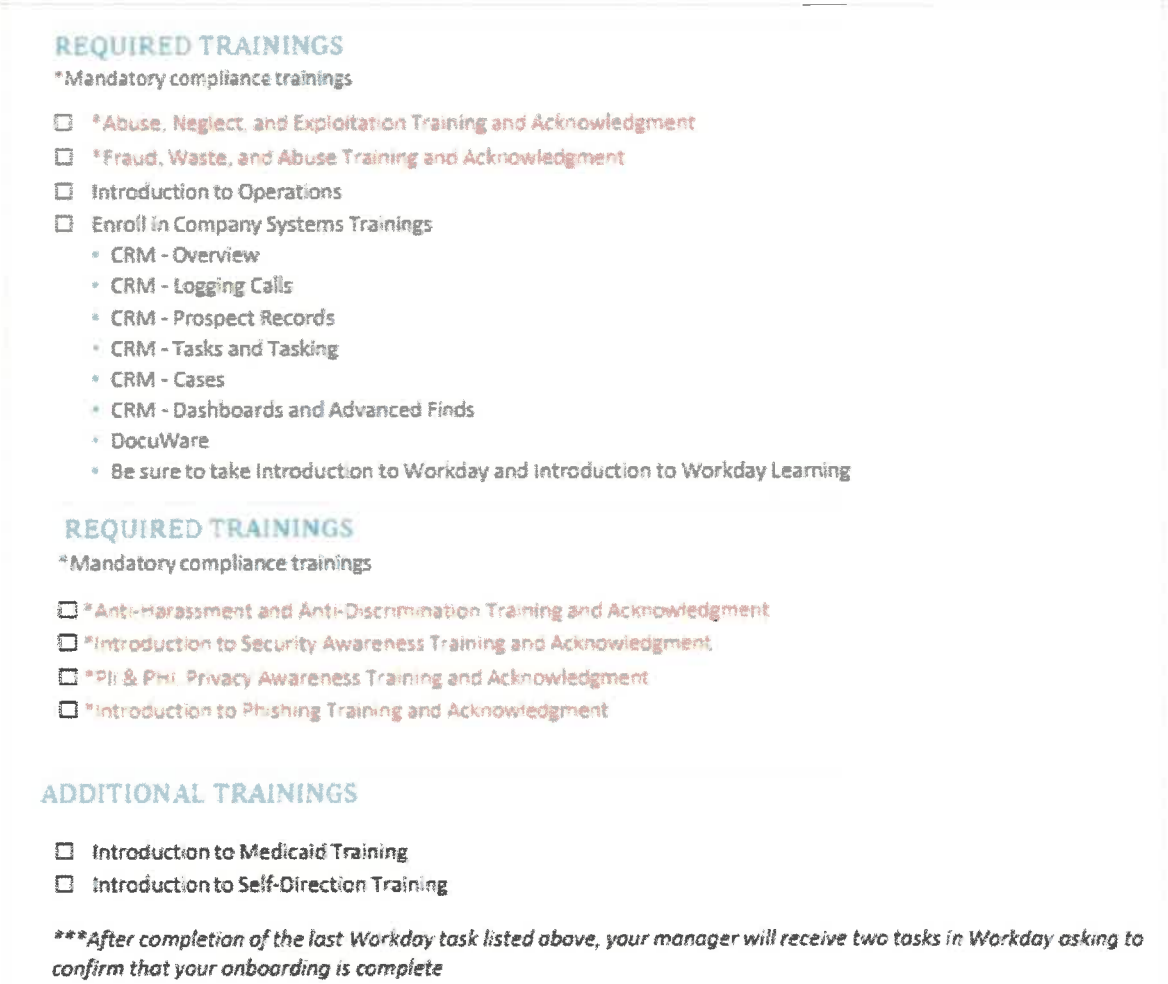
The Training team approaches training with a "Learn, Do, Review" approach to self-directed pre-course work. Consumer Direct uses a Workday-based Learning Management System (LMS), with interactive instructor-led training and a formalized review and feedback session that is automated within the LMS. The Training team ensures that materials are accessible for a wide range of audiences. Self-directed training materials are labeled with meta-descriptors to better communicate with text-to-speech programs, all video materials have integrated closed captioning, as well as the availability of translations for learners with limited English proficiency.

"Extensive online information, easy to connect with a real person for help." *Caregiver review on Glassdoor*

Onboarding Training

Onboarding training is an integral part of training for our staff, so they are well prepared to support member/representatives-employers and their DCSWs. The following screenshot of our onboarding checklist demonstrates some of the initial trainings our new staff must take during their onboarding process.

Figure 26: Training Checklist



REQUIRED TRAININGS

*Mandatory compliance trainings

- ☐ *Abuse, Neglect, and Exploitation Training and Acknowledgment
- ☐ *Fraud, Waste, and Abuse Training and Acknowledgment
- ☐ Introduction to Operations
- ☐ Enroll in Company Systems Trainings
  - CRM - Overview
  - CRM - Logging Calls
  - CRM - Prospect Records
  - CRM - Tasks and Tasking
  - CRM - Cases
  - CRM - Dashboards and Advanced Finds
  - DocuWare
  - Be sure to take Introduction to Workday and Introduction to Workday Learning

REQUIRED TRAININGS

*Mandatory compliance trainings

- ☐ *Anti-Harassment and Anti-Discrimination Training and Acknowledgment
- ☐ *Introduction to Security Awareness Training and Acknowledgment
- ☐ *PII & PHI Privacy Awareness Training and Acknowledgment
- ☐ *Introduction to Phishing Training and Acknowledgment

ADDITIONAL TRAININGS

- ☐ Introduction to Medicaid Training
- ☐ Introduction to Self-Direction Training

***After completion of the last Workday task listed above, your manager will receive two tasks in Workday asking to confirm that your onboarding is complete*

Other required onboarding trainings not captured in the screenshot above include:

- Consumer Direct Management Solutions (CDMS) – Who We Are (Instructor-Led)
- Anti-Harassment and Anti-Discrimination (eLearning)
- CDCN Culture Vision (eLearning)

Additionally, some of our programs have other training requirements our staff must meet before serving those particular programs. For example, our programs in Florida, Montana, and New Mexico require trainings on Bloodborne Pathogens. These trainings are additional onboarding training requirements designed specifically to meet local program requirements.

Finally, there are a series of eLearnings that all new managers are enrolled into upon hire. These trainings are designed to empower management staff to lead and support our customer service staff. These trainings include:

- Effective Communication and Difficult Conversations
- Attendance Policy
- Behavioral-Based Interviewing
- Coaching, Corrective Action, and PIPs
- Form I-9
- Intro to Avature
- Performance Appraisals
- Terminations
- The Hiring Process
- Understanding FMLA and ADA

Overall, our eLearning Trainings are self-paced and can be reviewed at any time while our Instructor- Led Training (ILT) dates are available on our training calendar. Training programs can include content such as custom graphics, text, screen capture videos, interactive exercises, animated videos, voice narration, and more. Instructor-Led Trainings, in fact all eLearnings, can be recorded and posted on-line to Workday for the benefit of all staff. We currently have approximately 50 different courses available in our learning management system. Course topics reflect staff evaluation and feedback submitted following a training which inform additional course selections and ongoing improvements.

> We currently have over 50 different courses available in our learning management system.

Diversity, Equity and Inclusion

We have initiated a Diversity, Equity, and Inclusion (DEI) training program to instill a DEI mindset and practices within the company culture. We have engaged with a DEI consulting organization who is helping us reach our company-wide DEI principles in hiring and with ongoing training opportunities. Consumer Direct serves and employs people across the country who reflect diversity of cultures, ethnicities, and beliefs. We are committed to strengthening the values of diversity, equity, and inclusion in our company culture.

In addition to these trainings, we have also developed a culture vision statement and implemented an Employee Experience Committee to help us reach our vision of diversity, equity, and inclusion. Our culture vision statement is:

At Consumer Direct, we strive to create a workplace where everyone is supported and motivated to be their best; we collaborate on shared goals and celebrate our accomplishments.

The Employee Experience Committee (EEC) is a cross-departmental group who partners with Consumer Direct leadership to guide the company in implementing our culture vision. The committee is comprised of employees across the network from various programs, departments, positions, and cultural backgrounds, representing all areas of the company.

The EEC was formed in the spring of 2021 and holds monthly meetings. Members apply to serve terms of at least six months, with new members rotating in at different times to continually represent the diversity of employees at Consumer Direct. EEC ambassadors strive to serve as culture vision champions, communicating throughout the company to create support for our culture vision and supporting changes to achieve it.

Working towards our culture vision will bring significant benefits to Consumer Direct, including creating a good work environment for all, improving employee retention, and enabling us to reach our goals as a company. The EEC is excited to contribute to the development of Consumer Direct's company culture and the future of our company.

Additional Course Offerings

We also require ongoing training to help staff remain current on industry standards, program requirements, and policies and procedures. Company-wide, we provide annual trainings on:

- HIPAA, PHI, and PII
- Diversity, Equity, and Inclusion
- Abuse, Neglect and Exploitation
- Introduction to Operations
- Benefits
- Changes to Policies and Procedures

In 2022, the Training team led 648 Instructor-Led Trainings. Staff completed 27,588 eLearning courses.

Project-specific training is designed to match the needs of the project and is developed by local project leadership in collaboration with the Training team. In Virginia, for example, we provide a monthly training for our Service Facilitators that covers the basic responsibilities of Service Facilitators and provides an opportunity for more experienced staff to attend a refresher.

The Training team facilitates an ongoing series of lunch-and-learn training sessions for Consumer Direct staff on a variety of topics from sessions on internal processes and department level overviews to personal reflections by staff on their experiences working with professional caregivers, to professional development opportunities regarding leadership, emotional intelligence, and workplace communication.

Finally, staff are trained on requirements of the program and understanding all the systems (i.e., payroll, billing) they use to perform the responsibilities of their role. All training materials are continuously reviewed and updated to remain current with the IT systems in use and the program's processes and procedures. If there are program changes that significantly impact staff training, we will update our training to reflect those changes.

Our Lunch-and-Learn meetings provide a great forum for employees to share personal reflections about their professional experiences.

Our RCs and Service Coordinators who provide customer service to members and DCSWs in West Virginia will receive training in three core areas:

1) Consumer Direct companywide training
- Company history and culture
- Philosophy of Participant-direction and determination
- Workplace communication and etiquette
- Customer service techniques
- Resource availability and escalation paths
- Industry compliance training (i.e., HIPAA, recognizing fraud and abuse)

2) Role specific training
- Process and procedures for completing role responsibilities
- Systems and tools used within role

3) Program Specific Training
- Overview of programs we serve
- Program specific requirements
- Program specific process and procedures
- Program specific systems and tools

4.2.1.144 Robust and Culturally and Linguistically Sensitive Customer Service Channels

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 voicemail 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

4.2.1.144.4 Have internet email capacity

Consumer Direct will operate and maintain a customer service system that serves members, representatives, DCSWs and service providers/vendors in a culturally and linguistically sensitive manner. We provide communications methods that are accessible and available in alternative formats.

Toll-Free Number with Voicemail Functional Capabilities and TTY Capabilities

Our customer service numbers are toll free and we have an active TTY/TDD phone line for individuals who are hard of hearing or speech impaired. We will establish a West Virginia-specific toll-free number and customer support email address prior to providing services in West Virginia. In addition to TTY/DDD lines, we provide language support for individuals who have limited English proficiency. Because our RCs are recruited and hired from the communities they support, we commonly have RCs who speak English and an additional language common in their community. Languages spoken by Consumer Direct staff in other programs include (in alphabetical order):

Languages Spoken by Consumer Direct Staff		
• American Sign Language	• Korean	• Somali
• Amharic	• Lao	• Spanish
• Arabic	• Mandarin	• Swahili
• Cantonese	• Navajo	• Tagalog
• Farsi	• Punjabi	• Traditional Chinese
• English	• Russian	• Ukrainian
• Khmer	• Samoan	• Vietnamese

We will hire RCs throughout West Virginia who represent the demographic and linguistic diversity of their communities. In addition to contacting their RCs directly, members and DCSWs can contact Consumer Direct's toll-free telephone line. From this line, callers are routed directly to their assigned RC or another available staff member. If there are no RCs available, we have a team of trained Service Coordinators to assist members. Service Coordinators have access to our CRM system where they can look up member/DCSW information and see reasons for previous phone or email contacts.

> "It's always a pleasure working with Tina at Consumer Direct Care Network. She is friendly, shows a genuine commitment to our members and community, and is a genuine professional."
> *MCO network manager*

Consumer Direct's telephones are available for live customer service support Monday through Friday, 9:00 am – 6:00 pm eastern time. Phone lines are closed during state or federal approved holidays. We maintain voicemail capabilities for calls made outside of working hours. In the event an individual calls or emails us outside of business hours, they can leave a message and expect a response within one business day.

Our local teams are trained to answer and troubleshoot questions related to technical program operations and F/EA and RC services. The quality and timeliness of our responses are

continuously tracked by CXOne, our call center software. We are confident in our team's ability to respond and resolve requests respectfully and in a timely manner. In addition to fully staffed phone lines for appropriate support during business hours, we continually invest in training our staff so they are knowledgeable about our programs and can consistently provide excellent customer service. Through our CXOne system, we commonly track the following metrics, have the capability to track even more.

Commonly Tracked Consumer Direct Contact Metrics		
• Total Calls	• Avg. Talk Time	• Text Handle Time
• Non-English Calls	• Avg. Answer Speed	• Emails Handled
• Reason for Call	• Call Back Requests	• Email Response Time
• Abandoned Calls	• Outbound Calls	• Longest Call

CxOne allows us to report statistics of individual queues. For example, separate queues can be set up to handle calls related to a specific waiver program, or to handle calls based on the language spoken by the caller. We monitor incoming calls, emails and other forms of contact to adjust our staffing levels to meet volume. If there are unexpected changes in customer service requests, we notify our partners who may be impacted.

Toll-Free Fax Machine

Consumer Direct maintains an operational toll-free fax number for the purpose of communicating and sharing relevant information and documentation. We will obtain a fax number specifically for services in West Virginia and the number will be available on our West Virginia website and other resources provided to members and DCSWs. All receipt and storing of communications made through fax is in accordance with HIPAA best practices.

Internet Email Capacity

We will maintain a HIPAA and HITECH Compliant email address for communications and sharing relevant information and documentation with member/representative-employers and DCSWs. Our email address will be available on our website and on materials that we provide members and DCSW. Consumer Direct maintains all member and DCSW data by applying industry best practices and HIPAA and HITECH requirements to continuously meet federal and state privacy and security standards. Our systems are HIPAA-compliant and are designed to protect personally identifiable information (PII) and protected health information (PHI). Data is only accessible to designated Consumer Direct personnel. Additional measures to protect information include encrypted emails through ZixCorp.

In addition to our email address dedicated to customer service inquiries, members and their DCSWs can directly contact their assigned RC via email routing. These emails are protected by the same levels of security as all other emails to and from Consumer Direct staff, and all staff are required to complete initial and refresher trainings covering in HIPAA, PII, and PHI.

Distribution Lists

We serve and accommodate many people with differing communication needs. We provide our services to older adults, individuals with varying disabilities, and people who speak varying languages. There are multiple reasons to communicate with members, individually, in groups, or universally. Consumer Direct utilizes different methods in doing so that fit the audience and the purpose.

When it comes to targeting communications to specific audiences, Consumer Direct has a lot of control over distribution lists. We stratify communications lists by state and role type. For example, we can pull a list for workers, members, or both. In West Virginia we could target communications to members and their workers based on a variety of factors including role type and can send communications via, email, text, phone, or direct mail. Depending on the communication needs, we can also target communication recipients at a more detailed level. During the implementation in Washington, we generated unique lists for caregivers at different stages of the hiring status. We pulled lists of workers who started the hiring process but hadn't finished or we could pull lists of workers stuck at the I-9 step. More recently, we've generated targeted lists related to where workers may be missing training. For example, we can target communications to workers who are missing a specific training by a specific deadline. Program Operations, Data Management, or Analytics typically play a role in generating more detailed communication lists.

4.2.1.145 Secure Web Portal with User-Defined Access

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.

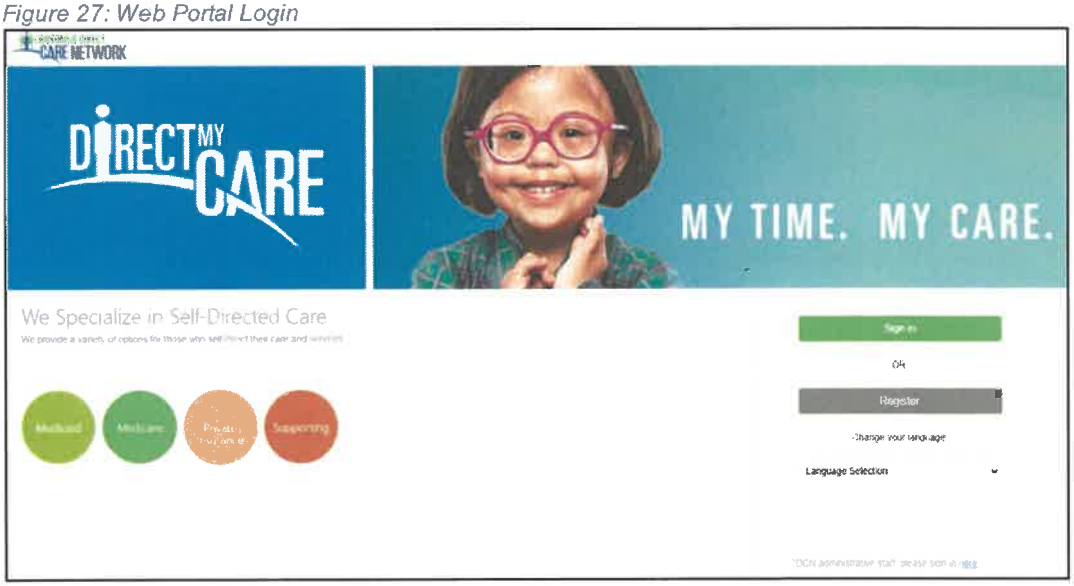
4.2.1.145.1 The Case Manager user role should allow the member's assigned Case Manager to perform the tasks required of a Resource Consultant (Support Broker), including creation and revision of Spending Plans, monitoring service utilization, etc. If the Vendor provides optional Resource Consultant services, the Case Manager user role will have "read only" access to the Vendor's web portal.

Our secure web-based portal enhances our EVV solution and allows DCSWS to view, submit, and adjust their time submissions and members to approve time submitted by their DCSWs. The portal is HIPAA compliant, secure, and confidential. Access is password protected and role-based, meaning each user is associated with a specific role that influences the type of information available to them. Members and DCSWs can only access information related to themselves. In addition to features associated with time entry and approval, the portal serves as an additional tool to communicate with member/representative-employers and their DCSWs. Consumer Direct can post announcements to all users through the portal and

messaging and notifications to specific members and DCSW is also possible. Finally, the portal serves as a tool for providing reports to members and their workers. We can produce reports outlining the member budget information, service utilization and pending payroll for DCSW. Reports available on the portal can be added, removed, or customized according to program requirements or payer preferences.

Web Portal Features	
Members/Representatives	**DCSW**
✓ View time entries submitted by DCSW ✓ Approve or reject time entries ✓ Access to authorization information ✓ View budget/authorization info/reports ✓ Receive announcements and notifications ✓ View service documents	✓ View status of time entries ✓ Adjust time entries (in applicable programs) ✓ Access to Paystub and W-2 information ✓ View qualifications status (training, etc.) ✓ Receive announcements and notifications ✓ View employment documents

Figure 27: Web Portal Login



Our web portal also provides access to RCs and Agency staff as necessary. RCs can review information related to their member caseloads and their associated DCSWs, and Agency staff (i.e., Case Managers etc.) can have read only access to the web portal to view member and DCSW information as needed.

Web Portal Dashboard

The web portal provides members and DCSW with their own dashboard that gives them a high-level overview of important information related to service provision. From the portal dashboard, DCSWs can view the status of their shifts and members/representatives-employers can review and approve/reject shifts submitted by DCSWs.

Figure 28: Member Dashboard

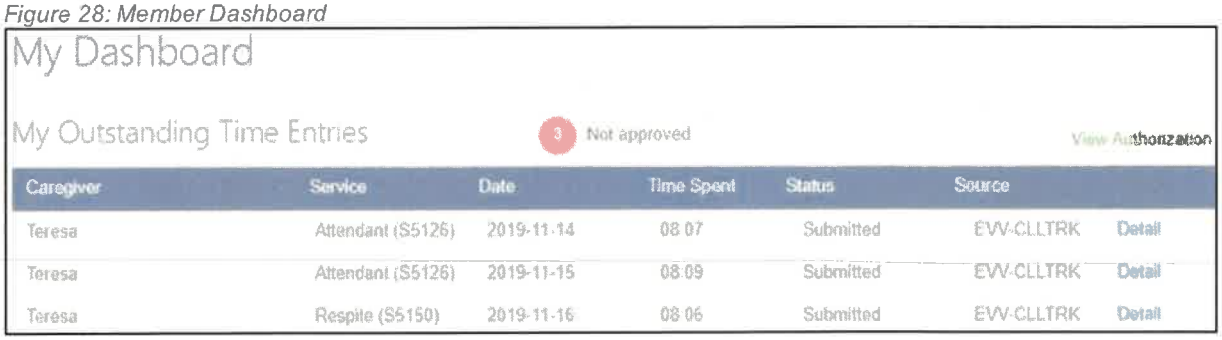
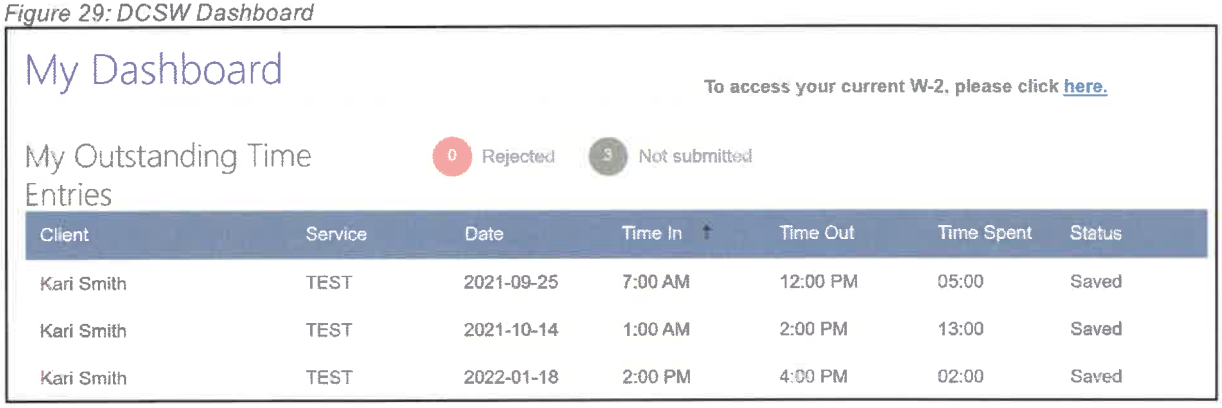


Figure 29: DCSW Dashboard



The DCSW's dashboard provides an overview of all shifts saved, pending approval or rejected. The member's dashboard shows all shifts submitted by DCSWs that are pending review and approval. From the dashboard, members/representatives and DCSWs can access additional details on shifts by going to the time entry page. From here members/representatives can approve or reject DCSW shifts, and DCSWs can adjust shifts (in allowable situations) and view shift statuses. Shift information is provided over the entire week (or two week) period depending on the user's preference.

Figure 30: Member Shift Review

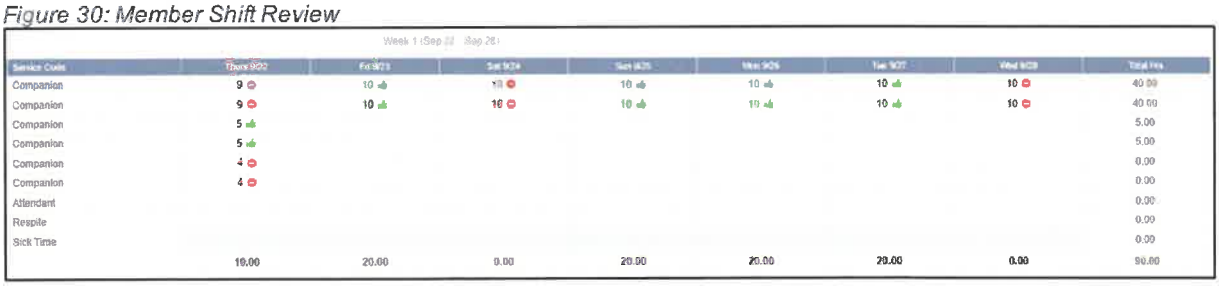


Figure 31: DCSW Shift Review

	Client	Service Code	Sun 10/10	Mon 10/11	Tue 10/12	Wed 10/13	Thurs 10/14	Fri 10/15	Sat 10/16	Total Hrs.
☐	Kari Smith	Test Shift					13			13.00
☐	Kari Smith	Test Shift					3.25 TEST			0.00
☐	Kari Smith	Personal Care	ⓘ	ⓘ	ⓘ	ⓘ	12 ⊖ ⓘ	12 ⊖ ⓘ	ⓘ	0.00
			0.00	0.00	0.00	0.00	0.00	0.00	0.00	13.00

Depending on the status of a shift, the DCSW or member/representative may be required to take action to ensure the shift is properly submitted and approved. The following legend highlights the various shift statuses portal users may see.

Figure 32: Status Legend

- Approved
- Deleted
- Denied
- Edited
- In Progress
- Paid
- Ready to be paid
- Rejected
- Removal In Progress
- Saved
- Submitted
- Suspended
- Test
- Not Ok to Work

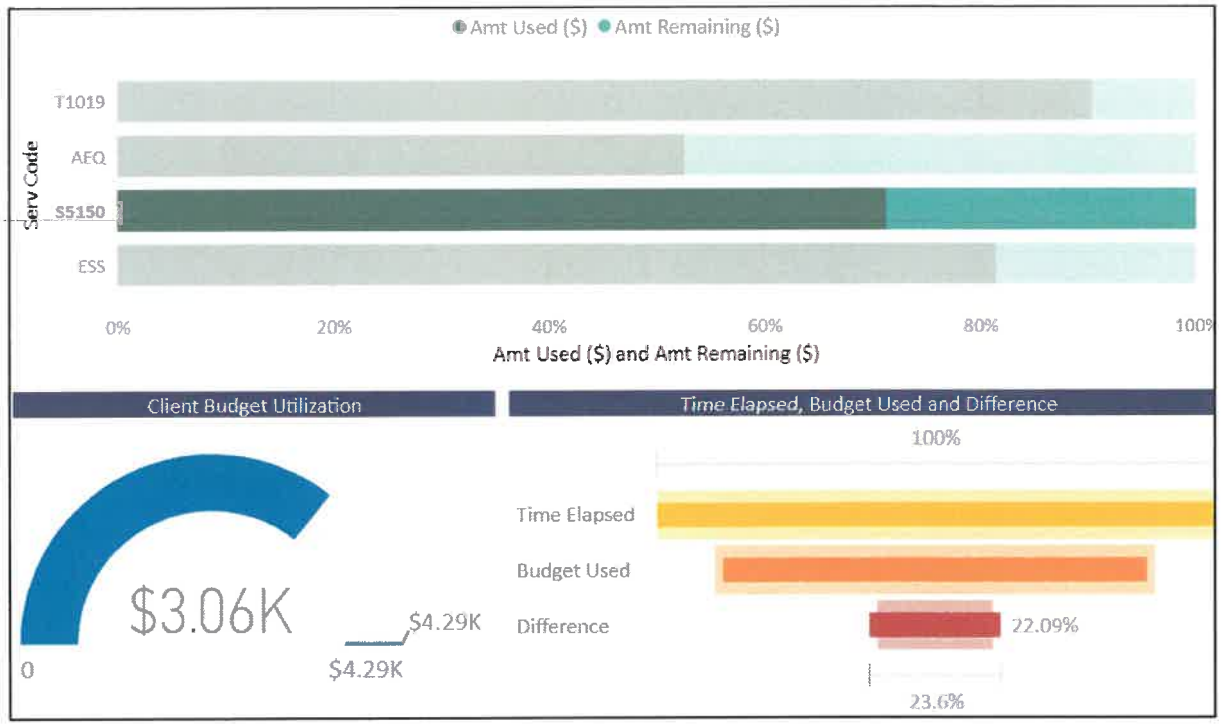
Need More Information?

Member-Specific Portal Features

The web portal provides important information to members. The Service Summary Report provides members/representatives with valuable budget and authorization information. This report can be updated to reflect units or dollars depending on how services are authorized.

We recognize the importance of assisting members with spending management or utilization of authorized hours. Members can view where they stand relative to their available budget or authorized service hours. This report shows total units authorized, the units used, and the units remaining in both number and percentage formats. To facilitate management of service utilization, our RCs are available during posted office hours to assist with questions/concerns from members and DCSWs.

Figure 33: Budget Utilization Report Sample



DCSW-Specific Portal Features

By using the portal, DCSWs can submit time and view the status of their shifts. Other DCSW specific features for the portal include mileage entry (in applicable programs), and access to DCSW specific information such as paystubs and W-2 information. DCSWs can access information on their DCSW qualifications and training resources from the portal. Qualifications vary depending on program.

Figure 34: DCSW Qualifications View

Qualifications

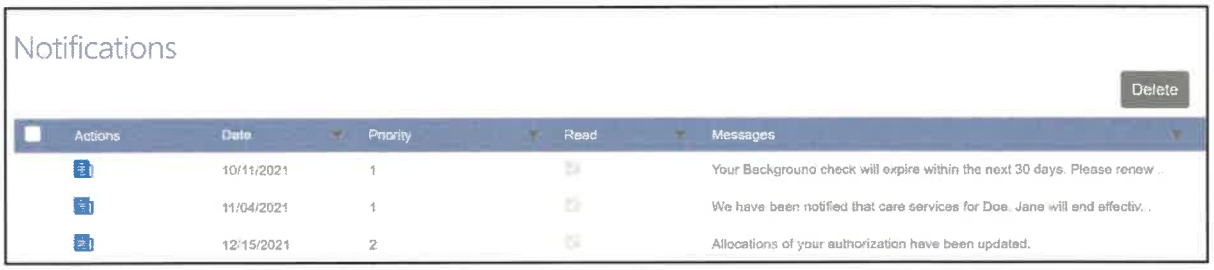
Qualification	Description	Category	Expires	Expiration Date
Continuing Education	Continuing Education	Training	Y	10/24/2024
Char Comp & Suit	Character Competency and Suit...	Background Check	Y	01/31/2023
Orientation & Safety	Orientation & Safety	Training	N	
I-9Verification	I-9Verification	Basic	N	01/01/2079
BT Cohort 3	Basic Training Cohort 3 (Due Da...	Training	N	06/06/2079

"The website and portal were easy to use."
Caregiver review on Glassdoor

The qualification page allows DCSWs to monitor whether they meet program required qualifications and provides them information on the expiration dates of certain qualifications such as First Aid and CPR Certifications. Qualifications required for each DCSW can vary depending on the program and the member they serve.

Overall, Consumer Direct's web portal offers useful tools for both members and DCSWs. Among features previously described, the portal allows users to receive notifications and announcements and access their own documentation with Consumer Direct. The portal is optimized to meet program or payer specific requirements and preferences and is capable of being updated to meet future needs.

Figure 35: Portal Notifications



4.2.1.146 Plan to Not Bill Agency in Advance

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, BAA, etc.).

Consumer Direct will not bill the Agency in advance for participant-directed vendor's services. Consumer Direct ensures members have received the good/service and that an invoice has been received from the vendor before submitting claims for participant-directed vendors' services such as PDGS, BAA, etc. Across all our programs, we do not bill in advance but rather only after a transaction has taken place. Consumer Direct maintains documentation with each vendor/provider. We do not bill until after service provision has occurred.

4.2.1.147 Processing Invoices and Payments

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.

Consumer Direct will leverage our existing policies and procedures to develop a specific plan for processing invoices and payments for Aged and Disable and Traumatic Brain Injury Waiver Community Transition Services.

Consumer Direct processes all requests for invoices and payments from qualified and approved vendors in accordance with the member's care plan and budget. Pre-authorized goods and services are recorded and matched to vendor payment requests to determine that amounts are authorized and for the purpose of generating spending/utilization reports. All requests are maintained in the member's electronic file.

We employ an electronic document management system to produce a workflow that meets all requirements for invoicing for goods and services. Invoices are reviewed, approved, and scanned at the local office before routing to the accounting office electronically for prompt payment by the Accounts Payable department.

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.

Consumer Direct will notify 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. When becoming aware of an error, our West Virginia Project Manager will be responsible for notifying the Agency of any interruptions, delays or errors regarding payroll or payments. Notification to the Agency will include why the error occurred, how Consumer Direct intends to resolve the issue, and a timeline for when the issue will be resolved. We can run off-cycle payrolls as necessary to ensure DCSWs receive their correct payroll in a timely manner. We also send out communications to affected parties what happened and when they can expect to receive their corrected pay.

4.2.1.149 The Vendor should propose a plan to correct any discrepancies or reimburse the Agency

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.

Consumer Direct will submit claims as cleanly as possible. In the rare event that there are discrepancies, Consumer Direct will reimburse the Agency for overpayments/underpayments if they occur. If they do occur, we will detail the credit on the next submitted claims within thirty (30) calendar days. The foundation of our approach to dealing with claims issues is to apply a relentless focus on preparing and submitting only valid, payable claims from the start. We only submit claims that are billed accurately, that pay accurately, and that represent genuine, approved services. This means having processes and methods at every point in the workflow to ensure transaction accuracy and integrity, from service delivery through to claims payment.

Because we operate in a high-volume transactional environment, many processes and methods are conducted programmatically. Our backend systems are set-up to accurately capture and maintain information on members and DCSWs, program rules and guidelines, and service delivery specifics to make preparation of a clean claim possible and repeatable. UTEX, our automated business rules engine, evaluates every service delivery transaction against 60+ processing rules, tuned to the specifics of the West Virginia programs via configurable settings. Our goal is to achieve a zero-defect rate with claims and invoices. Our systems programmatically issue claims and process remittances, allowing administrative staff to focus on exceptions and make the needed adjustments in the backend systems to allow correct billing to proceed as quickly as possible. These corrective actions involve a host of activities, from system and programming adjustments to coordinating and improving information exchanges with the Agency.

Ongoing claims processing operations and transaction flows are monitored continuously for key performance indicators to detect problem situations at the earliest possible moment. The rich set of data generated in the system is vital to understanding the efficacy of the claims processing experience and highlighting areas for efficiency improvements. We are dedicated to efficiently researching and resolving billing errors when they do occur. Ongoing claims operations and transaction flows are monitored continuously to detect problems. Our Electronic Data Interface (EDI) system allows for automated and electronic eligibility inquiries.

Consumer Direct's Claims team is responsible for researching all issues leading to denied claims or invoice errors. The Claims team uses our Aging Invoice Detail report to identify any outstanding amount that we have not received. The report provides all invoice details, if anything has been applied, and claim age. Claims Analysts review denied claims reports to determine the denial reason, which is often provided by the payer. Our claims processes and controls are extremely effective in addressing denied claims or invoices with issues.

4.3 Optional Services

4.3 The vendor should propose the optional service(s) listed below:

Section 4.3 inventories tasks specifically assigned to the Resource Consultant (Support Broker) at a more granular level than Section 4.2 allowed. (Section 4.2 focused primarily on tasks, roles and responsibilities at the organization level; this Section goes one step further by bringing it down to an employee/function level.) Section 4.3, however, does follow a similar organizing principle to Section 4.2. It first sets forth tasks that must be executed by the Resource Consultant to bring a referral into a program successfully (Section 4.3.1.1 through Section 4.3.1.8). It then defines the tasks required of the Resource Consultant to ensure the new member manages the responsibilities and reaps the benefits of self-direction (Section 4.3.1.9 through Section 4.3.1.20). Consumer Direct's response to Section 4.3.1.1 groups together requirements here as it did to prior subsections within Section 4.2.

Section 4.3.2 asks the bidder to describe how it would respond to an expansion of the Resource Consultant function from the self-direction waiver programs to another program, the Personal Care Program. Lastly, Section 4.3.3 sets out a billing requirement.

4.3.1 Providing Resource Consulting (RC) Support Broker Services Statewide

4.3.1 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: `

Consumer Direct appreciates the Agency's clarification of the use of the term "Optional Services" in respect to Resource Consulting. We interpret this to mean the Agency is interested in bringing a needed focus to the Resource Consultant (RC or Support Broker) function, not to reconsider its inclusion in West Virginia's self-direction program. We believe the Agency is seeking to ascertain whether Resource Consulting will be (and has been) provided cost-effectively and returns the value the Agency expects.

The RFP language makes clear the Agency requires more granular detail describing the bidder's approach. The RFP language also makes clear the Agency is keeping its option open in determining the best way to contract for Resource Consulting. For example, earlier in the RFP (at Section 4.2.1.145.1), the Agency requires a bidder's technology to allow a member's assigned Case Manager to perform certain tasks currently the responsibility of the Resource Consultant (e.g., create and revise Spending Plans).

- *In this section Consumer Direct shares with you the policies, procedures, and controls it applies to its Resource Consultant model. The approach features: hiring empathetic and service-oriented individuals from local geographies*
- *deploying RCs thoughtfully and efficiently so that neither opportunity nor enthusiasm is*

squandered at the point of initial member contact

- *practical and useful technology that allows RCs to focus on the* member *and not administrivia.*

Hiring

Local: Hiring local staff is the cornerstone of Consumer Direct's Resource Consulting service model. We want our staff to live in the communities where they work. There is no better way in which to understand the environment and the people we support. The unique needs and challenges members face do not occur in a vacuum. Whether in Morgantown or Huntington, Moorefield or Bluefield, real solutions are local. Consumer Direct will hire and employ local staff in West Virginia to provide RC functions. They will come to their job informed about the local area (for example, how long will it take a DCSW to get from their home to the member's home at 10 in the morning). In addition, our local hiring model precludes the possibility of the Agency-funded Resource Consultant also needing to learn travel patterns for a community four states away.

Our Resource Consultants carry a caseload. Members contact a person they can get to know and who lives in the area. Not someone on the other end of a 1-800 number.

Diverse: We serve a diverse population. It is important that we meet the people we serve where they are at. We take a proactive approaches and methodologies to remove/reduce subconscious biases by:

- Utilizing tools such as Diversity.com which aggregates job postings to other diversity-based job boards
- Removing gender-coded words from job descriptions
- Partnering with state specific workforce centers
- Using diverse images when promoting our employer brand
- Joining and posting in DEI related Facebook groups (veteran, cultural, language, etc.)
- We remove/hide pictures from sourcing accounts on Linkedin.

Incumbent Staff: Consumer Direct commits to interviewing the incumbent's existing cadre of Resource Consultants. We will look seriously at hiring any existing RCs that can demonstrate a track record of success while employed by the incumbent and who we believe show the greatest potential for quickly assimilating Consumer Direct's approach and culture. We would also take into consideration the source of the references any incumbent RC applicant provided.

Deployment

Consumer Direct will assign the local Resource Consultants to assist new members with directing their care. We will notify the members' Case Manager (if applicable) and provide the name and contact information of the assigned Resource Consultant. The Resource Consultant

will contact the member after receipt of the referral and inform them that they are his/her assigned Resource Consultant. The assigned RC is responsible for the enrollment meeting, the semi-annual meetings, and the monthly phone calls.

Factors impacting RCs assignments include language spoken, physical proximity, and the ability of the RC to add new members to their caseload. Consumer Direct will monitor caseloads along with the RC's demonstrated ability to provide quality services. RC Leads will carefully monitor member to RC caseloads. As the program grows, Consumer Direct will hire additional RCs to continue providing quality support to member/representative-employers and their DCSWs. The Consumer Direct staffing model also anticipates the occasional unavailability of a member's RC. If an RC is out of the office or otherwise temporarily unavailable, procedures kick in to alert other Consumer Direct staff to provide assistance as needed.

Technology

We use our CRM system to monitor prospective members and members who are already receiving services through Consumer Direct. Through the CRM system, we assign RCs to existing and new members and log communications that have been made with each member. Contact information and other critical information about the member or referred member is available to the RC via CRM and our document management system.

By having all contacts and support provided to the member logged in the CRM, staff covering for the assigned RC can review key information to appropriately support the member. It also enables the member's assigned RC to know what support was provided during their absence.

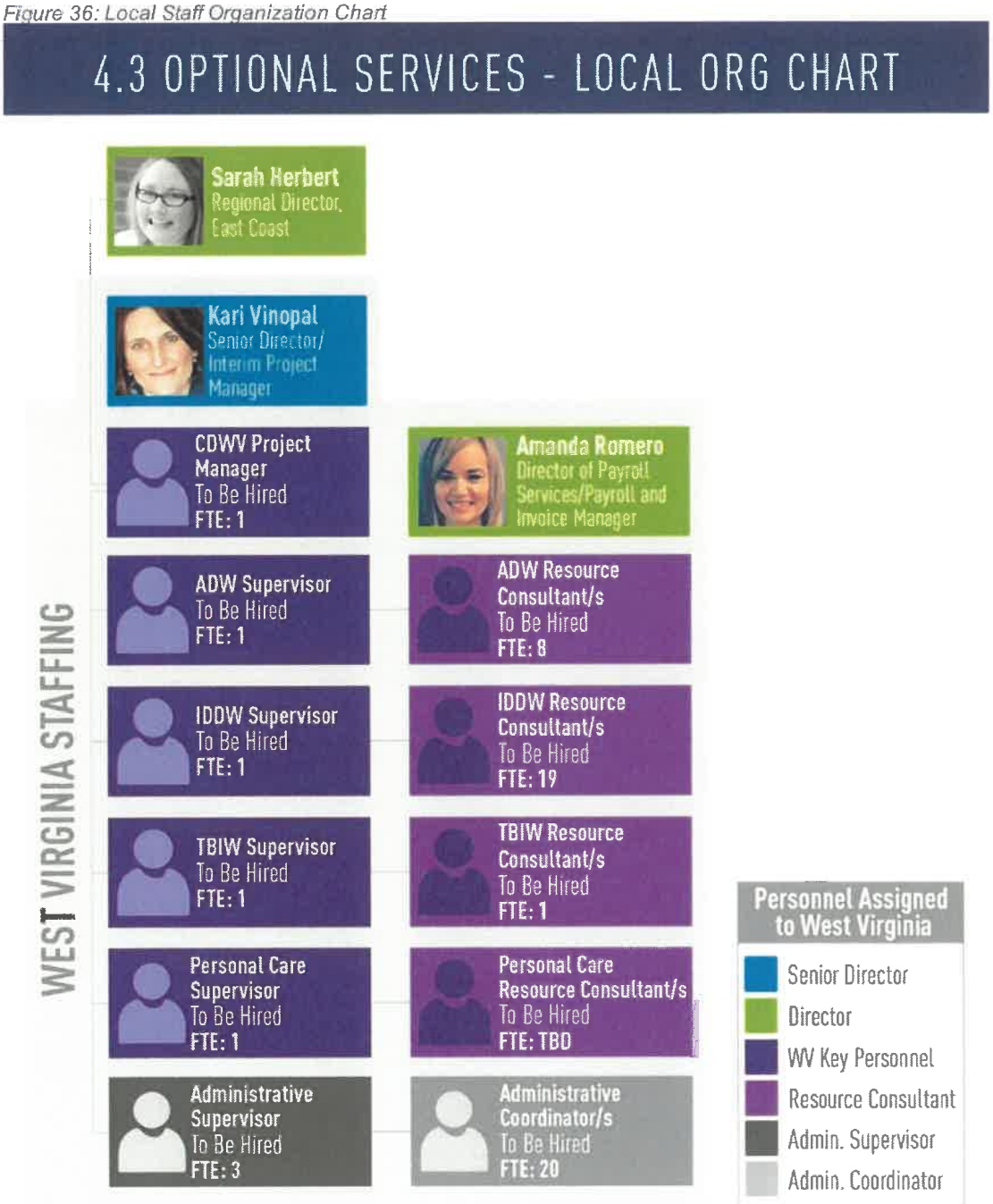
Staff Planning and Organizational Chart for RC Services

To build the foundation for providing services in West Virginia we will begin hiring and training local leadership and Resource Consultant staff upon notice of award. This allows staff who will manage West Virginia operations to be well trained and prepared to manage the program before we begin providing services. The following table outlines the number of Resource Coordinators and local staff that Consumer Direct intends to hire.

West Virginia-Assigned Personnel			
Position	Surge FTE	Ongoing FTE	West Virginia-based
Project Manager	1.00	1.00	Yes
ADW Supervisor	1.00	1.00	Yes
IDD Supervisor	1.00	1.00	Yes
PC Supervisor	1.00	1.00	Yes
Resource Consultant Lead	7.00	6.00	Yes
Resource Consultant	72.00	59.00	Yes
Service Coordinator Supervisor	5.00	3.00	No
Service Coordinators	35.00	21.00	No

Consumer Direct will begin recruiting for key positions early in the implementation so these key leaders can assist with hiring the other roles supporting the West Virginia program. These positions will report to our Regional Director who will oversee the management of services in West Virginia and support the Project Manager to develop relationships the Agency and other service partners.

Figure 36: Local Staff Organization Chart



We provide an organizational staffing chart to demonstrate how we intend to staff services in West Virginia. Our organizational chart indicates the staffing supervision levels we intend to use. In addition to Resource Consultants, we will employ Service Coordinators who handle administrative tasks of processing paperwork and assisting members and DCSWs over the phone. While members and DCSWs will primarily contact the RC assigned to them, our Service Coordinators are available to provide on-the-phone assistance when the RC is unavailable.

RCs are hired at levels to provide consistent coverage for each member/representative-employer and DCSW. We monitor program populations and support levels to inform our staffing.

4.3.1.1 Assist Members and Workers to Enroll in Personal Options

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

A significant number of the tasks defined in Section 4.3.1.1 through Section 4.3.1.20, which are performed beginning at the onset of a referral and continuing throughout the weeks and months that follow require the type of empathetic and service orientation we described earlier. RCs must demonstrate knowledge and technical skill, while exuding confidence and kindness. In states in which Consumer Direct is the F/EA FMS and Support Brokers are used, we have a reputation for "white glove" service when providing those services that require contact and interaction. Below are the results of a question regarding our success with enrollments from our 2022 Annual Customer Satisfaction Survey.

Figure 37: Survey Results

Referrals

We use a referral and communication system to receive referrals of members interested in self-direction. Consumer Direct inputs and maintains referral information in our U2 system that shares data with our CRM system. Inputted data includes important information received via the referral. Once added into our systems, an RC is assigned to the member based on factors such as the RC's existing workload, language spoken, and physical proximity to the member.

Using CRM, we document the RC introduction call and include the date and time of the enrollment meeting. Every effort is made to meet with the member within a reasonable amount of time according to the member's availability to meet. This detail is also documented.

Enrollment

Our RCs are trained to help members throughout the enrollment process. This includes assisting members understand their responsibilities and Consumer Direct's responsibilities in the program. Our RCs can explain each form and its purpose in the enrollment packet. They can also answer any questions or concerns the member/representative-employer has throughout the entire process. We want the people we serve to feel like they can call or email us if they need help or have any concerns.

RCs verify that all forms are completed and accurate before they begin processing through Consumer Direct's systems. Our RCs monitor the completion and submission of paperwork documentation. We have various checks in place to assist members/representatives-employers (and DCSWs) in accurately completing their required documentation. We can provide enrollment documents with certain fields pre-populated to reduce the burden on the individual completing the form. We also utilize a tool called DocuSign that allows one to electronically complete forms and submit them to Consumer Direct. DocuSign has features such as auto-filling of fields that repeat on multiple forms (i.e. name, birthdate, etc.) and required fields that prompt the individual that they are missing information or need to complete the field before moving on. DocuSign allows us to customize packets to meet program requirements and notifies our staff when the packet has been submitted. Because DocuSign utilizes a user's email address, we can also use DocuSign to send notifications to remind the user that their packet is still incomplete or has not yet been submitted.

For members who wish to complete their enrollment paperwork independently, we have also created reference materials and videos that explain form requirements. An example of these resources can be found on our Virginia website. https://www.consumerdirectva.com/training-materials/

RCs monitor the status of Enrollment Packets in our system. As necessary, the RC will make check-in calls to the member/representative-employer and/or their DCSW to ensure completion of the enrollment paperwork. These calls occur in a scheduled cadence until the documentation paperwork is completed or the individual is no longer involved in consumer direction. RCs are trained on the specific forms and how to assist individuals in completing their documentation.

4.3.1.2 Enter Member and Representative Information into Portal for Agency Project Management and Reporting

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.
As applicable, our we will enter member and representative information into the web-based portal utilized by the Agency for project management and reporting

purposes. Our RCs will be able to do this manually and we will explore developing processes and systems to automatically update information in the web-based portal utilized by the Agency. We are accustomed to entering information for similar tasks such as documenting caseload assignments, level of care assessments, and enrollment issues in web-based portals used by the agencies.

4.3.1.3 Provide Oversight and Support with Personal Options During Monthly Phone Call

4.3.1.3 Conducting monthly phone calls with members to provide oversight and support while members are using Personal Options.

Consumer Direct's RCs will conduct monthly phone calls with members to provide oversight and support while members are using the Personal Options. RCs are responsible for conducting any enrollment meetings, semi-annual in-person meetings, or monthly phone calls with their assigned members as per program requirements. All communications are logged in our Customer Relationship System (CRM) to monitor communications with each member/representative employer or DCSW.

We are experienced conducting member visits and phone calls. During these visits and calls, we record member's responses using documentation designed to meet the specific standards of the program. Key information recorded includes, when and where the update occurred and whether there are any health, safety and welfare concerns for the member. During these calls, we discuss the Spending Plan with members and monitor their success in directing their own care. Each monthly or semi-annual meeting report is uploaded into our DocuWare system and stored in the member's secure file. As an internal control, our Document Review staff review the resulting documentation to ensure all required information has been recorded by the RC. If there is missing information, Document Review marks the form as incomplete, and the RC is notified when the form needs to be reviewed and completed on their end.

If anything significant comes up during a call or visit, the RC is trained on the channels they must use to appropriately address the situation, such as communicating concerns with the Agency. As with other contacts, all monthly call contacts are logged in our CRM system. In addition, calls are recorded by our CXOne system for quality assurance monitoring purposes of our Resource Consultant staff. This allows us to provide documentation when there is a service delivery issue. From CRM, follow-up tasks can be assigned to the RC or to other Consumer Direct staff as necessary. In some cases, the RCs may also complete a status update form so that administrative staff can update member or DCSW information in our systems.

We ensure RCs meet the minimum requirements for contacts and program documentation. This includes in-person enrollments, semi-annual in-person visits, and monthly phone calls. In many of our other programs we utilize monthly and quarterly contact forms to document these contacts and their outcomes.

4.3.1.4 Assist Members and Representative to Develop and Implement Service/Spending Plan During Monthly Calls or Bi-Annual In-Person Visits

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.

Our RCs can participate in the development of the member's initial Service/Spending Plan, including the risk assessment process as appropriate. We provide similar services in other programs where we provide RC services. Part of our role is to educate and empower members and representatives on their role and responsibilities of self-directing their services. If a member needs additional support, our RCs are available to assist them in developing their Back-up Plan, scheduling DCSWs, and accessing authorized participant-directed goods or services per the member's Spending Plan.

Consumer Direct provides Resource Consulting/Support Brokerage services in: CO, DC, NM, TN, TX, WI

In other programs where we provide similar services, our Resource Consultants discuss spending/budget information during each monthly and semi-annual visit. This includes reviewing the member's current Spending Plan and utilization report that is available to members through our web portal. If the member is close to running out of funds or overutilizing their budget, our RCs can help them keep their utilization or spending in check. If there are updates needed to the Spending Plan, our RCs can initiate and work with the member to implement updates. All communications, including those related to the Spending Plan are recorded in the visit documentation and stored in the member's secure, electronic file.

4.3.1.5 Assist to Ensure DCSWs Meet Required Qualifications

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.

Consumer Direct utilizes a two-pronged approach to verifying that DCSWs are qualified to provide services according to the program policy manuals including the WV CARES background check and training requirements. First, our RCs inform members of the DCSW requirements and hiring process. Members are educated that they cannot have a DCSW work until Consumer Direct has provided the "Ok to Work" notification to both the member and the prospective DCSW. Second, our teams capitalize on the efficiency of our electronic hiring process to verify potential DCSWs meet all qualifications before providing services. Our electronic hiring process collects demographic information on DCSW and monitors where they are at with each step of the hiring process. DCSWs and members are notified that a

DCSW has successfully completed the hiring process and required training through an "Ok to Work" process. DCSWs can't provide services, use the EVV app, or submit time on the portal until they have received this notification. If there are holds or delays in the DCSW's hiring process, the DCSW is notified that they either do not meet qualifications to work, or that they need to do additional steps to complete the hiring process (i.e., ensuring they have completed and submitted all required forms).

As with member requirements, Consumer Direct utilizes some of the same processes to verify all paperwork is completed and the DCSW meets all qualifications before they can provide or bill for services. These include:

- Pre-populated hiring packet is provided to prospective DCSW
- Electronic hiring packets notify DCSW which fields need to be completed and prevent worker from submitting packet if fields or forms are missing
- RCs verify hiring forms are complete before forms are processed through our system
- Document Review Team reviews forms again for accuracy and compliance to form requirements
- Caregiver Entry team reviews documentation while establishing worker in our system
- Reporting system accessible to RC and other local staff maintains worker records and reports confirming all forms are present
- Systems prevent service provision if the hiring process is incomplete

4.3.1.6 Assistance with Finding a DCSW

4.3.1.6 Assisting the Subagent-F/EA FMS Division to develop and maintain an up-to-date searchable directory of potential DCSWs.

Our RCs will assist our subagent-F/EA FMS division to develop and maintain an up-to-date searchable directory of potential DCSWs. DCSWs interested in providing services or finding more members to work for are encouraged to sign up for Consumer Direct's Provider Directory. Our RCs will inform both members and workers about the Provider Directory and can assist individuals with using the directory. West Virginia readers can view the Provider Directory by going to this link: https://providers.consumerdirectcare.com/Home

4.3.1.7 Assist to Identify and Retain Services Available

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.

We train members/representatives on their role as an employer, and support them with tools for recruiting, hiring, training and managing their DCSWs and utilizing other vendors/providers for qualified goods and services. This support includes assistance identifying qualified agencies and/or individuals for services. We provide members with tools to help them identify and retain qualified DCSW and workers. We produce educational materials to empower our RCs to provide meaningful assistance to member/representative employers. For example, in our employer handbooks, we provide information on how to recruit, interview, hire, and manage DCSWs.

Our RCs can provide guidance to members/representatives in:

Recruiting

- How to use the Provider Directory
- People the individual may know who could work as a DCSW
- Ideas to where they could advertise a job position
- Developing job descriptions and postings

Hiring

- Interviewing and things to consider for interviews including examples of questions that are good to ask
- Assessing potential applicants. Requirements for DCSW including passing the required background checks
- Completing the employee packet, required forms and what is required of member/representative on signing certain forms

Managing

- DCSW orientation including a tour of the living space, workplace safety
- Setting expectations
- Communications expectations and providing positive and constructive feedback
- Training the DCSW
- Scheduling
- Mindfulness of service utilization and staying within the Spending Plan

Our RCs also assist member/representatives in identifying qualified vendors/providers for participant-directed goods and services. RCs can not only direct members to known providers but can also assist the member in directing potential vendors/providers to our vendor/provider packets on our website. Members will have assistance with determining what goods/services they qualify for and what services they can access according to their Spending Plan.

4.3.1.8 Assist to Identify and Provide DCSW Benefits, As Applicable

4.3.1.8 Assisting the member or representative, as appropriate, in identifying and providing DCSW benefits, as applicable.

As appropriate, our RCs will assist members/representatives in identifying and providing DCSW benefits. We will ensure all/any benefits provided to the DCSW are allowable per program rules and the members Spending Plan. We provide DCSW benefits in other programs. A common benefit that we offer when applicable is workers' compensation.

If the state ever requires it, Consumer Direct has a companywide workers' compensation insurance policy. Providing workers' compensation insurance through our policy assures coverage on Day 1 for all workers, results in a lower cost, and offers all the benefits of a large group plan. Consumer Direct meets all requirements for providing workers' compensation and provides wage information to our workers' compensation insurer.

4.3.1.9-4.3.1.11 Conduct Visits, Monitor Health, Safety and Welfare, and Assist to Purchase Authorized Participant-directed Services

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.

4.3.1.10 Assisting members and representatives, as appropriate, to purchase authorized participant-directed services. (PDGS, EAA, etc.)

4.3.1.11Monitoring 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.

Our RCs will conduct in-person home visits at least every six (6) months with members who do not receive Case Management services. We use monthly contacts to monitor health and welfare and provide ongoing support to the members we are serving.

Monitoring Health and Safety

Our RCs are trained to recognize when members' health, safety or welfare may be at risk or if there has been a change in condition with the member. They are also trained to recognize concerns regarding DCSWs. RCs may notice changes during visits or phone calls with members and are trained to ask questions identify when health, safety or welfare are at risk. For example, for our programs in Washington DC and New Mexico, our RCs have monthly and quarterly contact forms they complete with the member. These include asking the member if there are any changes in their life, if there is anything that affects how they direct their care, if they have had any hospital visits or other medical visits since their last visit, and if they have utilized their back up plan recently.

The member's answers are documented in the contact form and stored in the member's secure electronic file. If there are any concerns regarding the health, safety, or welfare, our RCs will address the issue in the appropriate manner. Member health and safety is our first and foremost priority. As necessary and appropriate our RCs will contact the appropriate parties to inform them of the situation. Contact with the member as well as resulting contact with the member's other supports or the Agency are recorded in our CRM system. As necessary our staff can set up tasks within CRM for follow-ups with the member, their other supports, or the Agency.

Additional Support

During these visits, we also ask members/representatives-employers if they have any questions or concerns about managing their DCSW/s. If so, we direct members to resources to help them manage their DCSWs. We assist members when they wish to identify a new DCSW to provide their services. During these visits, the member's Spending Plan and the overall quality of services are also discussed. If the member wishes to purchase participant-directed goods

and/or services, our RCs can help them with the process, including identifying what good/services are available to them based on their Spending Plan and their remaining funds. We can help members find vendors/providers who are already providing goods/services to other members or can direct new vendors/providers complete our vendor/provider packet.

4.3.1.12 Maintain Member and Representative Files and Records

4.3.1.12 Maintaining member and representative files and records including member notifications in automated systems.

We maintain all records and reports in a secure and reliable manner using state-of-the-art information technology systems. Our systems are scalable and adaptable to meet unique program requirements. We operate an electronic document management platform called DocuWare. DocuWare is secure, meets all HIPAA compliance standards, and integrates with other systems in the Consumer Direct IT infrastructure. Contact records are stored in our CRM system. This includes all contacts between our staff and the member/representative and/or the DCSW. Monthly and semi-annual visit information and all other operational records are stored in DocuWare. Records are backed up on secure servers in different locations and we monitor version control closely. We require change verifications/approvals for our records.

All records are maintained for auditing purposes. We maintain all current and archived member/representative-employer, DCSW, and Contractor files needed in compliance with all reporting requirements and for the period of time required by federal, state, and program rules. We adhere to all state and federal policies defining specific retention schedules for different types of records. Consumer Direct follows a conservative retention schedule according the law and industry standards.

4.3.1.13 Documenting and Reporting Evidence of Members and Representatives Inability to Self-direct

4.3.1.13 Documenting and reporting evidence and observations of members' and representatives' inability to self-direct.

While Consumer Direct advocates for member's ability to direct their own care, we recognize there are circumstances where this may no longer be the best option for the member.

As with initiating Consumer Direction or Self-Direction, we have processes for reporting when members can no longer or no longer wish to direct their own care, or in situations where a DCSW is unable to deliver appropriate services and supports to the member and the member's backup plan doesn't provide adequate levels of support.

We train and remind our RCs to never hesitate to bring up concerns about member safety with others who have contact with the member or with other more experienced RCs and Supervisors.

We have various methods and means in place to detect circumstances that may trigger a discussion between Consumer Direct and the member's other supports or the

Agency regarding the appropriateness of the member continuing to self-direct. These situations may be identified through means such as:

- Assessment from the RC after a periodic contact such as a monthly call
- The member reporting concerns about their DCSW or their own ability to self-direct
- Reports from DCSWs that the member is having difficulties or needs more support
- Critical incidents or detection of possible fraud, waste or abuse
- Misutilization or attempted misutilization of budget units or funds (i.e., overspending)
- Repeated failures to maintain time submission and time approval compliance
- Changes in the member's health status
- Inability to find DCSW or other supports to meet the member's needs indicated in their Spending Plan
- Consumer Direct has made multiple contact attempts and is unable to reach the member/representative and/or the DCSW

All evidence of the member's inability to manage their services is documented on our monthly/semi-annual contact documentation and stored in our system. Our RC will report evidence of inability to self-direct to the Agency and other appropriate parties. Documentation of the report is maintained in Consumer Direct's electronic file system. If self-direction is no longer the best option for the member, Consumer Direct cooperates in assisting transition of the member to other services.

4.3.1.14 Reporting and Responding to Complaints and Grievances

4.3.1.14 Reporting and responding to all member/representative complaints and grievances regarding Subagent-F/EA FMS and RC services.

Complaints and Grievances

Consumer Direct understands the importance of monitoring complaints and uses standardized processes for responses and escalations. Consumer Direct seeks to resolve all reasonable complaints to the satisfaction of members and any other related parties. In the exceptional situation where a complaint may, in fact, be unreasonable, Consumer Direct with confer with the Agency to determine an appropriate solution.

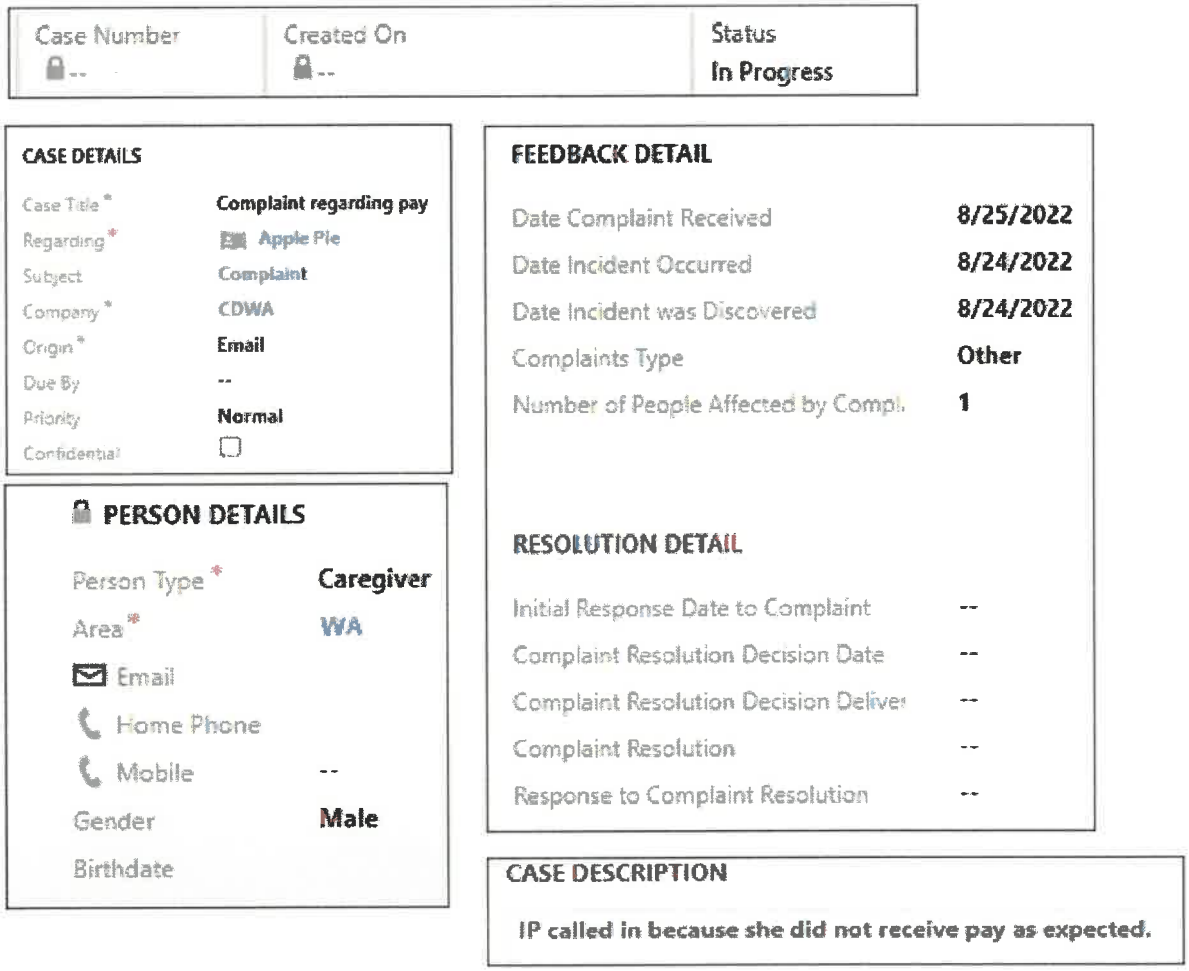
We provide individuals various methods to submit feedback. Feedback can be captured on any of our state-specific websites, by calling us directly, or by email. Through our websites, we provide a feedback form that can either be completed on our website, faxed, mailed or dropped off in person. All member/representative-employers and DCSWs are informed of the complaint process when they begin services with Consumer Direct.

We provide written notice when to an individual when their complaint is received. This is to acknowledge that we received the compliant and we are working on a resolution with an expected resolution date. Regardless of whether a complaint is written or verbal, Consumer Direct makes a record of it in our CRM system. Depending on the nature of the complaint, we resolve and notify member/representative-employers the resolution of each complaint in

writing as soon as feasible. The notice includes the resolution and the basis for the resolution. All responses to complaints, both verbal and written are documented in our CRM system.

We track the source of the complaint, the member involved, the reason for the complaint, the date it was made, the action taken to resolve the complaint, the resolution status/date, and the outcome of the resolution in our CRM system. CRM produces a report for the purpose of tracking the complaint resolution process. All steps toward resolution are logged in CRM to track ongoing progress and developments. If a complaint is against an RC or another Consumer Direct staff, the complaint is escalated to program leadership from the start. The follow screenshot demonstrates our complaint tracking capabilities.

Figure 38: Complaint Tracking



Our RCs are often the first to receive feedback or reports of complaints. RCs resolve complaints according to our policies and procedures and program requirements. They assist individuals with the complaint process and may direct them to a formal complaint form if they wish to submit a complaint in writing. If unable to resolve the issue themselves, our staff will escalate the matter to their supervisor who will assess the complaint. If the complaint is not successfully

resolved at this level, it will continue to escalate up supervisory levels until it can be resolved. This includes our West Virginia Project Manager (called a State Director on the Consumer Direct organizational chart) who oversees the program and will be responsible for overall customer satisfaction of the program. Unresolved complaints will escalate to the executive team if local leadership is unable to reach a resolution. If Consumer Direct is unable to resolve the complaint, we may refer the complaint to the Agency or another party such as an MCO when appropriate. The number of complaints submitted and resolved is closely monitored by the West Virginia Project Manager. Any trends in complaints will be noted and Consumer Direct will develop an action plan to address issues behind any trends if the problem is the result of our systems, processes, or staff.

4.3.1.15 Acting as Mandatory Reporter for Any Allegations or Reports of Suspected Abuse, Neglect, and Exploitation

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.

Consumer Direct is a mandatory reporter in all programs where we provide services. As a mandatory reporter, we maintain a system for reporting critical incidents. We will continue this practice in a manner compliant with West Virginia regulations and processes regarding critical incidents. Any contact related to a critical incident is maintained with the appropriate details in our CRM system, allowing us to document all communication with members/representatives, DCSWs, and/or Agency staff, and other parties. By maintaining this information, we can provide documentation required for reporting purposes. As a mandatory reporter Consumer Direct will:

- Ensure all Consumer Direct staff are trained on mandatory reporting
  - What circumstances/events need to be reported
  - Recognizing signs of fraud, waste, abuse, etc.
  - Recognizes changes in the member's health, safety and welfare
  - How to report and when
  - Steps to protect the member/representative-employer
- Develop a process for reporting according to state and program requirements
  - What incidents are reported to which agencies
  - Time requirements for reporting
  - How to record what was reported
- Develop steps for protecting the member
  - Do emergency services such as APS or CPS need to be contacted
  - Helping the member find a new DCSW or use temporary support from their back-up plan

Consumer Direct utilizes various methods to detect and prevent Fraud and Abuse. Detection methods include internal reviews, methods for DCSWs and members to report fraud/abuse

themselves, and staff vigilance. Detection of actual/suspected fraud is documented, tracked, and reported to the appropriate external agencies. We proactively review member spending and utilization of hours and services through our IT systems, standard operating procedures, and reporting tools designed to detect fraud and abuse.

Our RCs and other local staff are the first line of defense in detecting fraud or abuse. These staff are trained to recognize and report instances of fraud, waste, or abuse. If our staff receive a tip of suspected fraud waste or abuse, they are required to immediately notify local program leadership. Communications and notes regarding the tip are logged in our CRM system. We will report all cases of suspected or confirmed fraud, waste, and abuse to the appropriate parties in West Virginia.

4.3.1.16 Assisting Members and Representatives as Necessary

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.

Our RCs provide assistance as requested or as needed, when a member seeks to be re-evaluated or requests a change in level or care or types of care. They also assist when they recognize that the member may not be a good candidate for self-direction. Assistance may include helping the individual transfer to other services such as traditional agency-directed services at the member's request.

4.3.1.17 Collaborating to Ensure Efficient Program Operation

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 are a collaborative partner and work with state program staff and other service partners to ensure efficient program operations. Whether it be our Resource Consultants, administrative staff, program leadership or executive team, our teams always seek to develop transparent and collaborative relationships with our service partners. We communicate regularly with state program staff to ensure efficient program operations and address any questions or concerns. Our program teams are managed with an eye to open, responsive and accountable communication.

Our success in a variety of different programs and working with different people, is the result of our company culture that emphasizes collaboration with our service partners. We hire and train our local staff to work with state program staff and other service partners to problem solve, improve processes, or join forces to ensure an efficient program operation. As the new vendor, we will seek the best lines of communication with state program staff, so that when there is a need, both parties can easily contact each other with updates. We seek to engage our service partners in the ways that they wish to be engaged, whether through formal meetings, specific processes or simply picking up the phone for a quick call. Our local leadership and implementation staff are primarily responsible for developing relationships and communication

channels with state program staff. Once our services our established, our local staff will take more of the responsibilities of ensuring continued communications. We would like to note that our executive team and other Consumer Direct leadership are available to provide their assistance when the need arises. Many of our service partners have told us that they appreciate our responsiveness and collaboration.

4.3.1.18-4.3.1.19 Assisting, Approving, Reviewing Member Spending Plans

4.3.1.18 The Vendor should assist with the development and approve all self-directing members' spending plans.

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).

Consumer Direct assists with the development and approval of members' Spending Plans including goods and services. Consumer Direct will prepare and bill for expenditures disbursed based on the approved plan of care and spending; Our real-time spending reports for members are available for member access 24 hours per day, 7 days per week on our online web portal. We commit that every report provided to members contains the most updated information at the time the spending information is accessed from the portal.

Consumer Direct's accounting systems track expenses for each member's approved spending. We monitor performance by tracking DCSW time submission reporting and spending in compliance with the member's spending and plan of care.

Our RCs review the Spending Plan with members initially and discuss it during each monthly contact and semi-annual in-person visit. During these visits, the member and the RCs look at the spending report to see how they are doing in terms of budget utilization. In other states, we have implemented thresholds to notify both our staff and the member when the member is within a certain percentage of utilizing their services (i.e., the member has utilized 90% of their annual budget). In cases where our systems or staff identify non-compliant performance on the part of a member, the RC will follow-up with the member to determine where the challenges lie. We constantly monitor program compliance to identify and address needs for more training or an adjustment in program expectations.

4.3.1.20 RCs Must Have Notary Public Certification

4.3.1.20 The Vendor should ensure that all RC's are current Notary Publics.

All Consumer Direct RCs will be qualified Notary Publics. We understand certain West Virginia tax forms require notarization by a Notary Public. Should a prospective RC not have the required Notary Public certification, we will work with them to obtain required certification before they can perform RC duties.

4.3.2 Policies, Procedures, and Internal Controls for F/EA FMS and Optional RC

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.

Consumer Direct recognizes the state may elect to add the Personal Options service delivery model to the Personal Care program. We will provide the same F/EA FMS and Optional Resource Consultant services for the Personal Care program. These services would be consistent with the services we would provide to members in the waiver programs that already have the option to self-direct.

4.3.3 Bill Administrative Fees Only Once Monthly

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.

We recognize that we may only bill an administrative fee once per month for Waiver program members who are eligible to also receive Personal Care services through a separate program.

Similar to our approach to resolving claims issues, we focus on preparing our system to prepare and submit only valid administrative service invoices to prevent invoice issues. We will translate West Virginia's program requirements to the business rules and processing methods needed to accomplish the state's objective of resolving any issues with submitted administrative services invoices promptly and to the state's satisfaction. To do this, we will direct resources and attention toward having accurate and comprehensive understanding of what is expected of us in the invoice submission process.

Our backend systems are designed to accurately capture and submit administrative services invoices only for members who have had a direct service provided in the given month. As with our approach to handling claims, our goal is to achieve a zero-defect rate with administrative services invoices. Our systems programmatically issue administrative service invoices only for members who have received services in the month. Our administrative staff confirm and correct invoices, if necessary, before submitting administrative service invoices to the Agency. These corrective actions involve a host of activities, from system and programming adjustments to coordinating and improving information exchanges with the Agency.

4.4 Mandatory Project Requirements

4.4 Mandatory Project Requirements - The following mandatory requirements relate to the goals and objectives and must be met by the Vendor as a part of its submitted proposal. Vendor should describe how it will comply with the mandatory requirements and include any areas where its proposed solution exceeds the mandatory requirement. Failure to comply with mandatory requirements will lead to disqualification, but the approach/methodology that the vendor uses to comply, and areas where the mandatory requirements are exceeded, will be included in technical scores where appropriate. The mandatory project requirements are listed below.

In Section 4.2 the RFP set forth the mandatory requirements in detailed fashion within the context of the Agency's goals and objectives. Here, in Section 4.4, those same mandatory requirements are summarized in a more concise manner, making clear the bidder's contractual obligations.

4.4.1-4.4.4 Performing F/EA FMS

Unless it is a contractual requirement (e.g., the inclusion of a small, veteran, minority and/or woman-owned business enterprise), Consumer Direct does not subcontract to external entities. CDWV will subcontract to one of our network companies, Consumer Direct Management Solutions (CDMS) for payroll and claims services. CDMS and CDWV share ownership and leadership while filling unique scopes of work to fulfill contract requirements for West Virginia. Not needing to subcontract externally is another benefit of having built our business from the ground up, with founders who were caregivers, not businesspeople or investors. This is also why Consumer Direct's Policy and Procedure Manuals are accurate and articulate.

4.4.1-4.4.2 Performance of F/EA FMS Tasks Without Use of Subcontractor

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.

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.

Consumer Direct is fully capable and prepared to perform both F/EA FMS and RC tasks as the Subagent of the Agency. We will not subcontract any of this work to an external entity. We currently provide F/EA and Resource Consulting services in six states: Arizona, Colorado, District of Columbia, New Mexico, Texas, and Wisconsin. We have the experience and capacity to provide high quality services without the use subcontracts. We believe that this is the best way to maintain a level of quality assurance and customer service.

4.4.3 Maintain Approved F/EA FMS Policy and Procedures Manual

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.

Consumer Direct will prepare and maintain a Comprehensive Subagent-F/EA FMS Policies and Procedures (P&P) Manual according to West Virginia program rules. This manual will document our systems, policies, procedures, and internal controls used to perform and monitor the effectiveness of all F/EA FMS functions and tasks. We will submit the manual in a mutually agreed upon electronic format to the Agency for review and approval thirty (30) days prior to implementation. We will maintain the P&P manual at all times and provide a current version to the Agency and will update this manual at least annually by August 31.

Each of the 15 states in which we operate has different rules and regulations, and each has its own organizational procedures manual. We are accustomed to developing and employing detailed policy and procedures manuals outlining procedures for every state in which we work, including policies and procedures for enrolling and obtaining FEINs for members, hiring DCSWs, tax filing procedures, and ongoing payroll procedures. Consumer Direct will draft and finalize the policy and procedures to incorporate all West Virginia requirements.

4.4.4 Maintaining Auditable Systems

4.4.4 The Vendor must maintain an auditable system for managing members' spending plans, payroll processing and related reporting, and claims submission.

All financial exchanges including Medicaid funds budgeted, received, disbursed and remaining balances are tracked in our financial and accounting system. Consumer Direct has developed a robust system to ensure reliable and efficient day-to-day operations. As Consumer Direct has grown, we have taken great consideration in our system architecture and we continue to update our systems to remain current, scalable and flexible. Our primary system is a pairing of a custom Microsoft platform – our U2 system - with Workday. It allows for the handling of authorizations/Spending Plans, business rules and program specific requirements. We utilize Workday as our finance, human capital management and payroll system. This system is a customized solution designed specifically to adapt to the various programs through which we provide services. We are confident in our system architecture and its ability to support services in West Virginia.

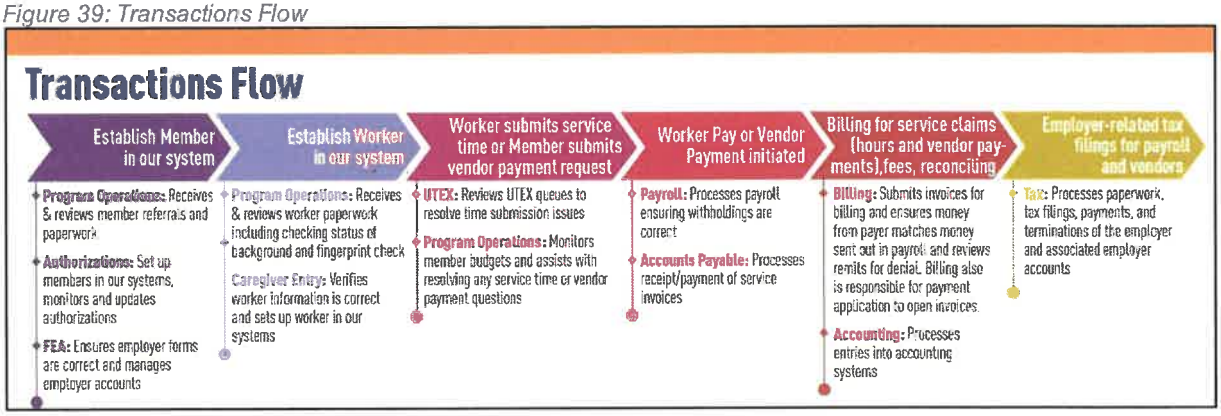
Our custom U2 system processes member/budget authorization information and tracks spending summaries, budget utilization, and whether a member is over budget or using services they are not authorized to use in real time. Reports on the use of these funds can be pulled at the individual and aggregate levels. We process budget/authorization adjustments, amendments, or renewals once received from the Departments. Consumer Direct has several teams dedicated to monitoring the different sides of these transactions. Our systems and staff work together so that all transactions and balances are recorded, tracked, and maintained accurately.

Because we operate in a high-volume transactional environment, many processes and methods are conducted programmatically. Our backend systems are set-up to accurately capture and maintain information on members and DCSWs, program rules and guidelines, and service delivery specifics to make preparation of a clean claim possible and repeatable. UTEX, our automated business rules engine, evaluates every service delivery transaction against 60+ processing rules, tuned to the specifics of the West Virginia programs via configurable settings.

Our goal is to achieve a zero-defect rate with claims and invoices. Our systems programmatically issue claims and process remittances, allowing administrative staff to focus on exceptions and make the needed adjustments in the backend systems so correct billing can proceed as efficiently as possible. These corrective actions involve a host of activities, from system and programming adjustments to coordinating and improving information exchanges with the Agency.

Ongoing claims processing operations and transaction flows are monitored continuously for key performance indicators to detect problem situations at the earliest possible moment. The rich set of data generated in the system is vital to understanding the efficacy of the claims processing experience and highlighting areas for efficiency improvements. The following graphic provides a level view of transaction flows through our systems and processes.

Figure 39: Transactions Flow



Our systems and teams work together to ensure that all claims for services rendered are accurate and precise. All records related to billing are verified and maintained in our systems.

4.4.5-4.4.8 Responsible and Accurate Stewardship

Nothing destroys taxpayer confidence in government programs faster than fraud, waste, and abuse. Those concerns are particularly acute when taxpayer dollars are transferred into the control of a beneficiary. That is just one reason why Consumer Direct is so vigilant in its stewardship of the billions of dollars nationally that flow through its systems. We will apply that same vigilance to West Virginia.

4.4.5 Capacity to Receive Funds Electronically

4.4.5 The Vendor must have and maintain the capacity to receive funds by electronic funds transfers (EFT).

Consumer Direct maintains the capacity to receive funds by electronic funds transfers (EFT). We are also experienced working with Automated Clearing Houses (ACH) in our work across our 15 states. We are an ACH originator with our main operating bank and processed more than 2,700 ACH batches in the last 12 months. We are accustomed to engaging with ACH partners to ensure smooth exchange of required data and funds such as electronic remittance advice.

4.4.6 Establish and Maintain Separate Administrative Bank Account

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.

We track receipt of service funds in our financial system and maintain a dedicated bank account for the deposit of service funds. Consumer Direct utilizes separate accounts to prevent the co-mingling of service funds with any other funds. We can set these accounts for administrative funds and service funds for each Waiver Program. Internal controls used allow for a thorough record of income and expenditures for purposes of an audit. These funds never mix with any other funds as we have strict policies and procedures to protect services funds for their intended purposes. Each month, we perform an internal monthly review of financial records. This process includes multiple levels of review and checks and balances to ensure proper isolation and monitoring of contract-related income and expenditures. This process begins when an internal accountant prepares a trial balance account reconciliation and drafts financial statements. These documents are then reviewed by several internal financial stakeholders.

- Controller reviews reconciliations and drafted financial statements
- Senior Director of the relevant operations team reviews
- Chief Administrative Officer presents to executive team
- Board of Directors for final approval

An independent CPA firm audits our financial records annually to provide reasonable assurance that the financial statements are presented fairly according to GAAP. We recognize that the Agency at any time may audit Consumer Direct's administration and use of public funds.

4.4.7 Receive, Disburse, Track Medicaid and State Fund as Specified

4.4.7 The Vendor must receive, disburse, and track Medicaid and State funds as specified in this RFP

Consumer Direct will receive, disburse and track Medicaid and State funds as specified in this RFP. All financial exchanges including Medicaid funds budgeted, received, disbursed and remaining balances are tracked in our financial and accounting systems. For each new program, we update our systems and processes to receive, disburse, and track Medicaid funds as specified by the programs by which we provide services. Consumer Direct has several teams dedicated to monitoring the different sides of these transactions:

- **Accounting:** Processes entries into accounting systems
- **Accounts Payable:** Processes receipt/payment of invoices
- **Authorizations**: Monitors and updates authorizations
- **Billing**: Submits invoices for billing and ensures money from payer matches money sent out in payroll and reviews remits for denial
- **Caregiver Entry:** Verifies Worker information is correct in systems
- **Data Management and EDI:** Monitors data exchanges and system health
- **F/EA:** Ensures Employer forms are correct/manages Employer accounts
- **Payroll**: Processes payroll ensuring withholdings are correct
- **Program Operations**: Completes initial review of member and DCSW enrollment documents, including the members Spending
- **Tax:** Processes paperwork, tax filings, payments, and terminations of the employer and associated employer accounts
- **UTEX**: Reviews UTEX queues to resolve time submission issues

Our systems and teams work together to ensure all operations and services are rendered according to program requirements. All records related to Medicaid and State Funds and maintained in our systems.

4.4.8 Ability to Reimburse State for Remaining Funds

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.

We recognize the role of the Subagent F/EA FMS is to process approved payroll and approved payment for all self-directed services and goods delivered to members in the program ahead of reimbursement from the state. Therefore, we do not anticipate that unexpended funds will need to be reimbursed to the state often. We appreciate that at times, and for various reasons,

members may not use or require the use of their full authorized budget. Resource Consultants and other appropriate CDWV staff will work directly with members through the duration of their self-directed care to ensure budgeted services are being monitored, and that reasons or circumstances surrounding the unexpended funds are communicated to Agency staff for consideration in the member's reauthorization.

4.4.9-4.4.12 Customer Service

The technology Consumer Direct uses to support customer service has proven to be high quality and user friendly. More importantly, the people we use to support Customer Service have also proven to be high quality and people friendly. We are confident we will find staff with the right set of hard and soft skills and that our customer service technology will be implemented seamlessly.

4.4.9 User Friendly and Up-to-Date Website to Retrieve Accurate Information

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.

Consumer Direct will maintain a website specifically for members/representatives and the general public for each state in which we provide services. This website will include up-to-date information regarding programs in West Virginia. Our websites are managed by our Marketing and Communications Team in conjunction with our local Operations team. Our Operations team, through working with the local program directly, are keenly aware of any updates that are needed to various resources and materials on our websites. We update our materials routinely and ad hoc as needed to maintain accuracy and currency with program standards. We ensure that the most up to date versions of content is on our website.

We have a process where our Operations Team can request changes to our West Virginia website at any time through a ticketing system. These changes can be content changes to certain webpages, adding new announcements or notifications, or changes/updates to the informational materials on our website. Regardless of the type of change, this ticketing process ensures that changes are made in a timely manner that each website change is reviewed by the appropriate parties (i.e. Operation leadership, Agency representatives) prior to the updates going live.

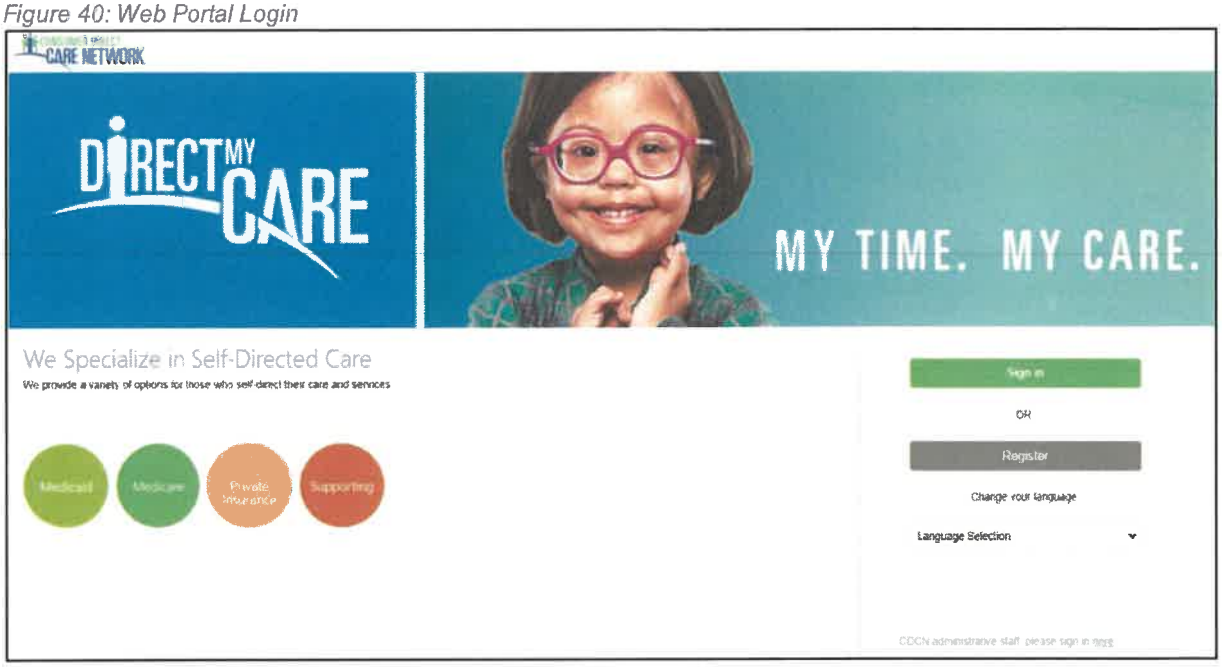
4.4.10 Secure and Interactive Web-Based Portal

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 secure web-based portal enhances our EVV solution and allows DCSWS to view, submit and adjust their time submissions and members to approve time submitted by their DCSWs. The portal is HIPAA compliant, secure, and confidential. Access is password protected and role-based, meaning each user is associated with a specific role that influences the type of information. Members and DCSWs can only access information related to themselves. In addition to features associated with time entry and approval, the portal serves as an additional tool to communicate with member/representative-employers and their DCSWs. Consumer Direct can post announcements to all users through the portal and messaging and notifications to specific members and DCSW is also possible. Finally, the portal serves as a tool for providing reports to members and their workers. We can produce reports outlining the member budget information, service utilization and pending payroll for DCSW. Reports available to users on the portal can be added, removed, or customized according to program requirements or payer preferences.

Web Portal Features	
Members	**DCSW**
✓ View time entries submitted by DCSW ✓ Approve or reject time entries ✓ Access to authorization information ✓ View budget/authorization info/reports ✓ Receive announcements and notifications ✓ View service documents	✓ View status of time entries ✓ Adjust time entries (in applicable programs) ✓ Access to Paystub and W-2 information ✓ View qualifications status (training, etc.) ✓ Receive announcements and notifications ✓ View employment documents

Figure 40: Web Portal Login



Our web portal also provides access to Resource Consultants and Agency staff as necessary. Resource Consultants can review information related to their member caseloads and their associated DCSWs, and Agency staff (i.e., Case Managers etc.) can have read only access to the web portal to view member and DCSW information as needed.

4.4.11 Dedicated Customer Service

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/.

4.5.111.1 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.

Consumer Direct's telephones will be available for live customer service support Monday through Friday, 9:00 am – 6:00 pm Eastern time. Phone lines will not open during state or federal approved holidays. We maintain voicemail capabilities for calls made outside of working hours. In the event an individual calls or emails us outside of business hours, they can leave a message and expect a response within one business day.

Our local teams are trained to answer and troubleshoot questions related to technical program operations and F/EA and Resource Consultant services. The quality and timeliness of our responses are continuously tracked by CXOne, our call center software. We are confident in our team's ability to respond and resolve requests respectfully and in a timely manner. In addition

to ensuring our phone lines are fully staffed for appropriate support during business hours, we continually invest in training our staff so they are knowledgeable about our programs and can consistently provide excellent customer service.

Consumer Direct is accustomed to meeting customer service metrics. Through our CXOne system, we commonly track the following metrics, and can track even more.

Commonly-tracked Consumer Direct Call Center Metrics		
• Total Calls	• Avg. Talk Time	• Text Handle Time
• Non-English Calls	• Avg. Answer Speed	• Emails Handled
• Reason for Call	• Call Back Requests	• Email Response Time
• Abandoned Calls	• Outbound Calls	• Longest Call

Additionally, CxOne allows us to report statistics of individual queues. For example, separate queues can be set up to handle calls related to a specific waiver program, or to handle calls based on the language spoken by the caller.

We monitor incoming calls, emails and other forms of contact and are able to adjust our staffing levels to meet volume. If there are unexpected changes in customer service requests, we inform our partners who may be impacted.

4.4.12 Language Accessibility Including Translation, Interpreters, and Alternative Print

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-ene:lish- proficiency/index.html, and the ability to provide materials to members and representatives in alternative print (i.e., Spanish, large print, and Braille).

We serve many people with differing communication accessibility needs. Our years of experience supporting people with unique learning styles and language abilities has taught us to expand the way we communicate. We offer enrollment and training information in print and video, in English, Spanish, and an array of other languages. We provide enrollment materials and manuals in large print and Braille as requested. For those who speak a language we haven't already translated, we offer translation and/or interpretation services.

All communications in West Virginia will be fully compliant with the Americans with Disabilities Act (ADA). Beyond our ability to provide excellent, culturally-appropriate face-to-face customer service, we offer communications on multiple channels:

Consumer Direct Communication Channels		
• Toll-free phone	• SMS Text	• Website
• Toll-free fax	• Email	• In-Person/Virtual appointments

Digital communications are routinely assessed for 508 ADA compliance, and we maintain our websites to Web Content Accessibility Guidelines (WCAG) 2.1 AA standards. We ensure all stakeholder communication methods are fully compliant with the letter and spirit of the ADA.

We produce written materials in alternate print, large print, or Braille upon request. We also support teletypewriter (TTY), sign language interpretation, and other alternative methods of communications. Written materials can be translated in a variety of languages. We have worked with translation vendors extensively in other states. In Washington State we provide a range of language supports on our website: https://www.consumerdirectwa.com/language-support/

As we build our local team in West Virginia, we will hire people to meet the language needs of the communities and people we serve. At minimum we will employ bilingual staff who speak Spanish in communities where this is required. If we cannot find staff to meet a particular individual's language needs, we will use an interpretation line to support members who speak varying languages. We also have experience translating to American Sign Language – either with a vendor to provide interpretation services through phone/virtual appointment or will locate sign language services. We are experienced providing translated materials in a variety of languages. In many of our states, we provide enrollment and training materials in English and Spanish. In Washington we support over 12 languages and maintain the capability to add new languages as needed. Our staff can note in our CRM system whether a member has indicated a language preference other than English so we can be responsive to that need.

4.4.13-4.4.19 Administrative Management

In the following sections, Consumer Direct describes specific administrative activities that support stewardship. Upon award, we would like to discuss alternative methods to streamline the administration and separation of funds.

4.4.13-4.4.14 Separate Administrative Bank Accounts at No Additional Cost

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.

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.

We will establish one separate bank account for each Self-Directed Program and track the individual funds separately. Consumer Direct will provide the Agency written evidence that the bank account has been established, including required forms as specified by the Agency to establish electronic funds transfer from the Agency to the bank account. Our policies and procedures prevent the withdrawal of funds except for payment of F/EA-FMS including taxes, insurances, and fees. We maintain all bank accounts for programs in a manner that prevents creditors from in any way encumbering or acquiring funds from our bank accounts. If there are any bank charges such as stop payment fees, Consumer Direct will absorb the charges so that they are not taken from the separate administrative bank account or reduce any members self-directed budget account. Funds will only be used for the purposes provided under this RFP. We recognize that should the participant or his/her authorized representative request a stop payment, the fee may be charged to him/her.

4.4.15-4.4.16 Ensure No Co-Mingling of Funds

4.4.15 The Vendor must not co-mingle other funds into the separate administrative bank account.

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.

Consumer Direct isolates contract-related income and expenditures by assigning accounting by company, cost center, source, and location. Consumer Direct utilizes separate accounts to prevent the co-mingling of any other funds. We will ensure that funds deposited into the separate administrative bank account cannot be used by the entity or any other agent/third party to satisfy, temporarily or otherwise, any Vendor liability for any other purpose except as provided under our contract with the Agency.

Internal controls used will allow for a thorough record of income and expenditures for purposes of an audit. Each month companies within the Consumer Direct Care Network undergo internal monthly review of financial records. This process includes multiple levels of review and checks and balances to ensure proper isolation and monitoring of contract-related income and expenditures. This process begins when an internal accountant prepares a trial balance account reconciliation and drafts financial statements. These documents are reviewed several times. First, the Controller reviews the reconciliations and drafted financial statements. Then they are reviewed with the Senior Director. Financial statements are reviewed by the CAO, other executives, and Board of Directors for final approval. An independent CPA firm audits our financial records annually. The audit opinion provides reasonable assurance that the financial statements are presented fairly, in all material respects, according to GAAP.

4.4.17 Timely Payment Withdrawal from Separate Administrative Bank Accounts

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.

Consumer Direct will 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.

4.4.18-4.4.19 Prepare and Submit Required and Requested Reports and Statements

4.4.18 The Vendor must prepare and submit monthly reports to the Agency on separate administrative bank account activity.

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.

Consumer Direct customizes reports to meet all agency reporting needs. We will provide monthly reporting that summarizes separate administrative bank account's monthly bank activity, reconciliation of the bank activity, reconciliation of the bank balance to General Ledger, and reconciliation of any amounts advanced from the Agency.

We will also submit within fifteen (15) business days of request, monthly statements from the dedicated payroll bank account along with any other financial information requested by the Agency to oversee the delivery of F/EA FMS services. Relevant documentation will be maintained in our files.

Our Accounting department is responsible for systematically recording transactions, following procedures, and performing ongoing account reconciliations. Accounting manages internal controls and ensures financial records follow Generally Accepted Accounting Principles (GAAP)

Consumer Direct has strict policies in place regarding documenting financial/accounting transactions. Financial documentation is required to include complete and transparent information on transactions. The Accounting department is overseen by the Controller who reports to the CAO.

4.4.20-4.4.26 Vendor Responsibilities

In Section 4.4.20 through Section 4.4.24 and also in Section 4.4.26, Consumer Direct affirms it can and will carry out these core contractual requirements and we do so with confidence collected over many years of making and keeping those same promises.

But we do more than make a promise. In Section 4.4.25, Consumer Direct lays out in substantial detail the methodology it follows, one that has always led to a successful outcome for the client. This methodology addresses 1) the project management approach, 2) work plan development, 3) staffing, 4) change management, 5) communication, and 6) readiness review.

4.4.20 Ensure Smooth Transition Upon Expiration or Termination of Contract

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 need to ensure a smooth transition of services during the integration period.

Consumer Direct works to meet the needs of members and to advance their best interests. Consumer Direct commits to being as collaborative of a partner as the Agency deems appropriate in the interest of West Virginia's self-directed programs for growth and success. To this end, we will collaborate openly and often with all partners for service delivery.

We will activate our data transition plan, quickly deploy policies, procedures and protocols for data integrity and data sharing but, more importantly, our IT Team will establish personal relationships with their peer IT staff across all data-holding entities. By establishing direct, friendly, and cooperative working relationships across the IT universe, we maximize our ability to ensure the changeover will not be compromised by data issues.

4.4.21 Seek Agency Approval of All Reports Before Operations Start Date

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.

Consumer Direct will provide the Agency with sample version of reports at least thirty (30) calendar days prior to the Operations Start Date for the Agency review and approval. We recognize that we cannot begin operations without the Agency approval of reports.

Consumer Direct has extensive experience developing reports to address a range of state, federal or MCO needs. Consumer Direct is confident in our ability to provide accurate and easy to read reports to our service partners. All required reports will be submitted timely, completely, and accurately. We operate a robust reporting system and have an Analytics team dedicated to customizing our report formats to meet program requirements.

The CDCN reporting workload is delivered through a cloud-based data warehouse platform and provides secure access to both source data and reports for authorized users. Access is typically administered on role-based basis, but can be customized to meet the requirements of individual users. Reports and data requests are fulfilled through scheduled delivery and on an on-demand basis. Report and data formats are delivered in structured, established formats or they can be determined on an ad-hoc basis at runtime. Data downloads to users – both ad-hoc and structured -- are supported for authorized users. Microsoft's Power BI application is leveraged to provide a powerful and flexible analytical capability for users.

Combining the capability to render user-defined reports, on demand, with Power BI provides users with a high degree of flexibility, and the opportunity to develop new insights to program operations. Data queries can be formed in real time in Power BI, and processed against transactional source data, eliminating traditional delays in capturing and processing operational results. Our customizable reporting system is extensive and can provide information on a range of service requirements.

Sharing Report Data with the Agency

Consumer Direct is accustomed to transferring
variety of methods and formats. Consumer Di
EDI team to assure that both the implementat
function properly. Our policy is that all data co
encrypted and transmitted using a secure tran
incorporate data integrity and authentication
Protocol (FTP) site for file transfer to and from
varying data transfer needs. We automatically
virtual private networks for maximum data se
site like SharePoint. We are confident in our a
variety of requested formats.

Monitoring Reports

We will develop a report dashboard that inco
dashboard will be monitored and managed by
Virginia and other program leadership on a re
team. The dashboard provides users insight in
system allows us to categorize figures by mon
aggregate. Our program leadership monitors
address any trends or issues identified throug

4.4.22 Agree to Be Bound by SLA in App

4.4.22 The Vendor must agree to be bound by
Appendix A.

Consumer Direct agrees to be bound by the S
Appendix A.

4.4.23 Enroll Workers in Agency's Fisca

4.4.23 The Vendor must enroll required work
System/MMIS prior to their providing paid se

Consumer Direct will enroll required worke
System/MMIS prior to their providing paid
part of our "Ok to Work" process for worke
notification until Consumer Direct has prop

Consumer Direct works to meet the needs of members and to advance their best interests. Consumer Direct commits to being as collaborative of a partner as the Agency deems appropriate in the interest of West Virginia's self-directed programs for growth and success. To this end, we will collaborate openly and often with all partners for service delivery.

We will activate our data transition plan, quickly deploy policies, procedures and protocols for data integrity and data sharing but, more importantly, our IT Team will establish personal relationships with their peer IT staff across all data-holding entities. By establishing direct, friendly, and cooperative working relationships across the IT universe, we maximize our ability to ensure the changeover will not be compromised by data issues.

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Combining the capability to render user-defined reports, on demand, with Power BI provides users with a high degree of flexibility, and the opportunity to develop new insights to program operations. Data queries can be formed in real time in Power BI, and processed against transactional source data, eliminating traditional delays in capturing and processing operational results. Our customizable reporting system is extensive and can provide information on a range of service requirements.

Sharing Report Data with the Agency

Consumer Direct is accustomed to transferring data, reports, and other information through a variety of methods and formats. Consumer Direct employs a data integrity team as well as a full EDI team to assure that both the implementation and ongoing operational data exchanges function properly. Our policy is that all data communications containing PII and/or PHI must be encrypted and transmitted using a secure transmission protocol. All data transmission methods incorporate data integrity and authentication controls. We utilize a secure File Transfer Protocol (FTP) site for file transfer to and from contracting agencies and can accommodate varying data transfer needs. We automatically encrypt all emails to outside users, and we utilize virtual private networks for maximum data security. This can be done through the secure FTP site like SharePoint. We are confident in our ability to provide report data to the Agency in any variety of requested formats.

Monitoring Reports

We will develop a report dashboard that incorporates all reports required by the program. The dashboard will be monitored and managed by Consumer Direct's Project Manager in West Virginia and other program leadership on a regular basis with the support of our Data Analytics team. The dashboard provides users insight into the required reporting metrics. Our reporting system allows us to categorize figures by month, region, county, waiver, program and in the aggregate. Our program leadership monitors program trends and will work with the Agency to address any trends or issues identified through reports.

4.4.22 Agree to Be Bound by SLA in Appendix A

4.4.22 The Vendor must agree to be bound by the Service Level Agreement(s) (SLAs) included in Appendix A.

Consumer Direct agrees to be bound by the Service Level Agreement(s) (SLAs) included in Appendix A.

4.4.23 Enroll Workers in Agency's Fiscal Agents/MMIS System

4.4.23 The Vendor must enroll required workers in the Agency's current Fiscal Agents System/MMIS prior to their providing paid services.

Consumer Direct will enroll required workers in the Agency's current Fiscal Agents System/MMIS prior to their providing paid services. We will implement this requirement as part of our "Ok to Work" process for workers. Workers will not receive the "Ok to Work" notification until Consumer Direct has properly enrolled them in the MMIS system.

4.4.24 Invoice Once Only for Dually Enrolled Members

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.

Consumer Direct recognizes and agrees to invoice for F/EA and optional services only once for any members who are dually enrolled in a waiver program and the TMH or Personal Care Program.

4.4.25 Complete Implementation Activities Within 3 Months

4.4.25 The Vendor must agree to complete all implementation activities within three (3) months.

Consumer Direct agrees to complete all implementation activities within three (3) months. Implementation within 3-months is achievable, and Consumer Direct has made this happen in two states due to requirements, but this time frame inevitably causes member abrasion because change is challenging. When adequate time is allowed for communication and to implement change management principles, members, their workers, state personnel, and other stakeholders can prepare and adjust for change.

Consumer Direct has conducted approximately 80 transitions/implementations in the course of our 30+ years in operation. This includes both standing up a program for the first time as well as assuming responsibility from another vendor. In either situation, whether a small or large program, state-specific strategies and tactics must be developed if the implementation is to succeed. We bring the advantage of having done a number of transitions/implementations and an understanding of what works and what doesn't work. In the last nine years, Consumer Direct has completed 12 transitions/implementation in seven states.

While most transition mechanics are the same whether applied to brand new programs or vendor changes, the psychology of the two can be quite different. For example, fear of change is a well-documented human condition which elicits a counter response expressed colloquially as *the devil you know may be better than the devil you don't know*.

There are legitimate concerns when considering a vendor change. What if something happens to the data? What if people get confused because of poor communication? What if the new vendor fails to deliver? West Virginia must be assured selecting a new vendor does not carry with it unmanageable risk. In choosing Consumer Direct you can rest assured you have the most competent and experienced vendor taking over the program. Consumer Direct offers West Virginia key strengths as you consider the trade-off between risk and reward.

1. Invested time and resources prior to and during this procurement process to learn about your programs and the incumbents so that we can hit the ground running.
2. Transitioned programs similar in size to West Virginia in the recent past.
3. Successfully completed the largest self-directed program implementation in the country.

Consumer Direct also offers West Virginia a plan to execute the implementation. Our approach to the successful vendor-to-vendor transitions mentioned earlier in this section will be applied in West Virginia as well. It is a seven-part blueprint for success that addresses project management, work plans, technology, staffing, change management, communications, and the readiness review.

1) Project Management Approach

The Project Management Book of Knowledge (PMBOK) is a set of standard terminology and guidelines utilized by certified Project Management Professionals (PMP) to administer all aspects of project management including communication, governance, cost, risk, time, quality, and other factors. Originally published in 1996, the 7th edition was released in 2021. We utilize tools from the PMBOK Guide to help us successfully launch programs. PMBOK can be especially useful in implementations where it is highly likely that the other vendors involved have a familiarity with it too.

> When PMBOK is applied effectively, it helps the team focus and prevents distractions.

We most recently applied PMBOK to implementations in Virginia, Washington, and Tennessee. In assessing the West Virginia project from our current vantage point, we anticipate utilizing the following PMBOK artifacts and tools along with an array of formal written plans to help make sure work is performed in a meaningful and ordered way. Below we provide a brief description of each item:

Project Management Tools	
Document	**Purpose**
Work Breakdown Structure	A strategic breakdown of how the work will be performed and who will lead the workstreams.
Requirements Traceability Matrix (RTM)	The RTM captures all requirements to perform the scope of work and organizes them into functional areas (i.e., payroll, data interfaces, systems, project management, staffing, etc.), and assigns the responsibility of meeting these requirements to specific teams and subject matter experts
Stakeholder Register	A list of all stakeholders, internal and external who may be impacted by the project.
Risk Register	A list of risks to the project
Communication Plan	Plan for internal and external communications to ensure everyone is aware of key milestones, deadlines, and events
Risk Register/ Risk Plans	Assess and plan for risks
Staffing Plan	Establish who needs to be hired when

Project Management Tools	
Document	**Purpose**
System Development Plan	Comprehensive plan to assure any unmet needs in the system are met
Data Conversion Plan	Plan to assure data conversion from the Agency, and other entities is timely and accurate
Systems Test Plan	Plan to ensure systems are ready to perform as planned
Stakeholder Register	Comprehensive list of stakeholders in West Virginia
Post-implementation Plan	A plan to walk through how key parties will work together as implementation turns to operations.

Our experience executing these PMBOK Plans should significantly reduce, if not eliminate, real and perceived member/DCSW disruption concerns.

2) Work Plan Development

The work plan addresses all project activities required to complete the Anticipated Implementation starting October 2, 2023 and begin Anticipated Operations, e.g., delivering services, as the F/EA on January 2, 2024. The work plan is constructed following terminology and guidelines developed by the Project Management Institute (PMI) and found in the PMBOK, seventh edition.

The work plan describes the tasks, services, deliverables and schedule to fulfill the West Virginia contract requirements. These will be represented in a Work Breakdown Structure (WBS) document prepared using Microsoft Project for Office 365. Project milestones will be identified and tracked in the WBS.

See **Enclosure D** for our Work Plan.

Consumer Direct employs a rolling wave methodology for managing projects wherein work to be accomplished in the immediate future (defined as three months) is planned in detail, while work further into the future is planned at a higher, summary level. Consumer Direct will continually update the WBS and project schedule during implementation, and the work plan narrative as necessary to reflect precise plan adjustments impacting future activity as they come into view.

The Consumer Direct Requirements Traceability Matrix (RTM) is a signature work plan artifact guiding implementation, as it ultimately demonstrates our readiness to move to Ongoing Operations. The RTM captures all requirements to perform the scope of work and organizes them into functional areas (i.e., payroll, data interfaces, systems, project management, staffing, etc.), and assigns the responsibility of meeting these requirements to specific teams and subject matter experts. Requirements are tracked as met or unmet, and updates are regularly made to the RTM for progress monitoring.

Our Implementation team will be responsible for writing and managing the RTM as we execute implementation for West Virginia. The RTM will be hosted on Consumer Direct's SharePoint site where it can be shared with the Agency and other relevant parties involved in the implementation.

Work Plan - IT Implementation Activities

The technology lift specifically tied to the implementation for Consumer Direct has two main components. There is a body of work to determine system readiness. That involves a breakdown of the RTM to see if there are any elements that our system is not prepared to do. Utilizing a systems plan, we will develop a plan to complete the necessary development to close any gaps. Consumer Direct will initiate the system development process through a fit-gap analysis, identifying functional areas that need to be created or amended to meet the needs for West Virginia. Through the inquiry process of fit-gap, as those gaps are identified, user stories will be created detailing out the requirement additions/changes for Consumer Direct systems. The user stories will contain specific requirement outcomes to be achieved through development. Once the development process is complete, the user story requirements will be used as testing criteria for technical capability, followed by complete testing of the overall updated environment. Once technical bugs are worked out of the system, the business will review processes and sign-off on meeting of functional gaps identified during readiness review. There is an additional component of the system setup necessary to configure the existing Consumer Direct systems to accommodate the specific Agency business rules.

> Consumer Direct is currently working the Agency's incumbent on a project transition in Tennessee. As is the case in West Virginia, we will continue to meet the other vendor more than halfway to protect the State's interests.

The second large body of work in the technology domain is the data transition exercise. Consumer Direct will take on the responsibility of contacting stakeholders so we can begin the data transition process. We will activate our data transition plan, quickly deploy policies, procedures and protocols for data integrity and data sharing but, more importantly, our IT Team will establish personal relationships with their peer IT staff across all data-holding entities. This includes the Agency, the incumbent vendor and any other stakeholders or state departments who may have data we need. By establishing direct, friendly, and cooperative working relationships across the IT universe, we maximize our ability to ensure the changeover to Consumer Direct will not be compromised by data issues. We also build the foundation for the technology support required for ongoing operations, which we will discuss later.

A successful implementation requires the successful exchange of existing data required to provide services to existing members (i.e., incumbent data, etc.). Consumer Direct is accustomed to receiving, sending, and otherwise exchanging data sets, compiling reports, conducting data audits and forensics, and otherwise producing information for state and

stakeholder use during the implementation period. We are skilled at utilizing a variety of methods and formats to meet the end goals of our partners during the implementation.

Data partners who will maintain a relationship with us during the contract, such as MCOs and the Agency, are mutually invested in making sure data transition issues are addressed quickly and thoughtfully. While we have no reason to expect anything less from the incumbent vendor, that is not always the case in these matters. No doubt there will be grey areas and differences of professional opinion on data issues that will need to be navigated. This is where Consumer Direct's reputation for collaboration will shine in a material way. Our approach is to find the best way to work with everyone to get it done right and on time.

Consumer Direct IT systems leverage cloud technology to provide a secure environment, scalable infrastructure, high performance, and administrative controls.

We are confident in our capabilities for transitioning accurately all relevant data information to and from data-holding entities during transition. Important data includes, but is not limited to, participant information, worker information, service authorizations, billing, and claiming and other data that ensures the provision of services without interruption.

Consumer Direct is accustomed to receiving and transferring data, reports, and other electronic information through a variety of methods and formats and we have amassed some of the best F/EA technologists in the industry. We organize those resources into two teams -- a Data Integrations and Intelligence Support (DIIS) and an Electronic Data Interchange (EDI) team. They are deployed to work with the incumbent vendor's counterparts as soon as the client authorizes it. The work performed by these teams during transition assures that not only do the transition-focused operational data exchanges function properly at the outset, but also that those policies, procedures, and protocols establish the solid foundation for ongoing success throughout the operations phase. DIIS focuses on data validation (and ongoing data oversight). EDI focuses on data integration. That means on Day 1 we have the right data in the right place, and subsequently the pathways that receive and send data will also support operational needs.

Data integration starts with a F/EA-to-F/EA Transition Data Request Workbook that outlines the data required from the incumbent. We will work with the incumbent and the Agency, to ensure a smooth transition of data. If required data is missing after the initial data transitions, we have processes to make additional data requests to the incumbents as necessary and appropriate. In fact, we have transitioned services from the incumbent provider, PPL, six times in the last 10 years. We have learned invaluable lessons in how to lessen impacts on members, workers, and the state doing data transitions from this FMS vendor.

All data transmission methods incorporate data integrity and authentication controls. Our data teams develop data interface control documents to ensure accurate, complete and secure data transmission between systems. Our processes assure that transition data exchanges function properly, that all data communications containing Personally Identifiable Information (PII) and/or Protected Health Information (PHI) are encrypted and transmitted using a secure

transmission protocol, that a secure File Transfer Protocol (FTP) site for file transfer to and from current data holders is established and can accommodate varying data transfer needs of our transition business partners. We automatically encrypt all emails to users outside our domain, and we utilize virtual private networks for maximum data security. An example of a secure FTP site is SharePoint.

3) Staffing

Sufficient staffing is essential during an implementation. In anticipation of award of contract, Consumer Direct will begin the process of identifying individuals in West Virginia who would be appropriate to lead the on-the-ground program permanently. However, in the initial weeks between contract award and the Anticipated Implementation start date of October 2, 2023, the most important staff is the Implementation team already employed by Consumer Direct. It is a priority to have local leadership in place soon after the contract is awarded to begin the immersion process for assuming their long-term roles. It can also be highly useful to have local leadership involved in the hiring of line staff, including RCs.

As soon as the contract is awarded, Consumer Direct will accelerate its efforts to recruit local, in-state staff in West Virginia who understand the home care environment, are familiar with these types of state programs, and, most importantly, demonstrate general knowledge, insight, and empathy for how services need to be delivered in the local environment.

Consumer Direct will ensure that we have RCs and other staff hired and sufficiently trained to assist members and their DCSWs during the implementation. We understand that the incumbent will maintain operational responsibilities that involve RC while Consumer Direct is building its own RC workforce. We also recognize that high performers currently employed by the incumbent are logical and attractive hires for Consumer Direct. We will work with the state to balance those objectives during that timeframe when they may be in conflict.

We also recognize there is an increased number of inquiries directed at both the new vendor and other parties during transitions. We account for that additional demand in our staffing strategy through contingency planning. For example, at the outset we will hire RCs in excess of the required staffing levels. Because we have similar operations in other states, staff from our other programs who are already trained on F/EA and RC services can provide temporary remote assistance. These individuals, already versed in the basics of F/EA and self-directed employment, will be tasked with helping answer basic questions. Finally, we maintain the option of utilizing a local staffing agency to provide additional local resources. Our staffing plan builds in time to both hire AND train staff so they can provide knowledgeable support to the people we serve.

Staffing - Implementation Approach

Consumer Direct will deploy an Implementation team to oversee the implementation that includes executive leadership, program leadership, project managers, and numerous specialized

subject matter experts to assist with the planning and execution of an implementation. The following individuals make up our Implementation team leadership.

- Executive Sponsor: Mickey Ogg
- Operations: Kari Vinopal, Sarah Herbert
- Systems – Data Transfer and Systems Setup: Steve Rosenbaum
- Systems – Transaction Management: Maria Trujillo
- Payroll: Amanda Romero
- Quality Improvement – Onboarding, Enrolling, Credentialing: Anthony Maricich

Upon award of contract, Consumer Direct will deploy these in-house resources to begin fleshing out implementation by engaging with state staff to quickly gather specific West Virginia-oriented details. Our staffing model includes additional staff (surge) during the implementation period to ensure we are adequately resourced to provide support to members and their workers. Surge personnel includes primarily RCs (support brokers) and Service Coordinators from other states who will be trained on West Virginia-specific policies. Surge personnel will work alongside newly-hired West Virginia RCs and Service Coordinators to provide excellent customer service. Once members and workers are enrolled with Consumer Direct – a period we anticipate requires approximately three months – surge personnel will step away from West Virginia and return to their regular assignments.

West Virginia-Assigned Personnel			
Position	Surge FTE	Ongoing FTE	West Virginia-based
Project Manager	1.00	1.00	Yes
ADW Supervisor	1.00	1.00	Yes
IDD Supervisor	1.00	1.00	Yes
PC Supervisor	1.00	1.00	Yes
Resource Consultant Lead	7.00	6.00	Yes
Resource Consultant	72.00	59.00	Yes
Service Coordinator Supervisor	5.00	3.00	No
Service Coordinators	35.00	21.00	No

With guidance from the Implementation Steering Committee directors, Consumer Direct will begin recruiting key positions so these leadership staff can assist with the transition and have a foundational knowledge when the program moves to Ongoing Operations. These positions will report to our West Virginia-based Project Manager. The Project Manager will oversee the management of services in West Virginia and will develop relationships with the Agency and other service partners/stakeholders.

We will also hire Service Coordinators who will perform work associated with F/EA tasks and vendor reimbursement.

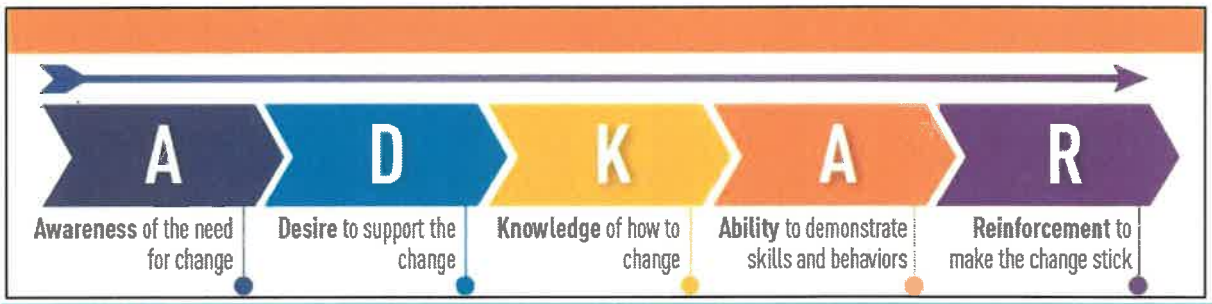
4) Change Management

Over the years and through multiple transitions/implementations, Consumer Direct has learned that implementation events make an indelible impression, setting the stage for how members and DCSWs view the new vendor and even their satisfaction levels with the program well into ongoing operations. One goal of the implementation is to minimize avoidable upset on the part of the state and all stakeholders, most especially members and DCSWs.

But that does not mean there will be no changes to operations and routines. This can involve relatively neutral and mundane changes (e.g., different logos, colors, and layouts for documents and forms) or significant and positive changes (technology requests changes done timely and at no additional cost). Today's project management methods put great emphasis on attending to change management – particularly helping people adapt to change. Key to effective change management is setting realistic expectations and then managing those expectations. We work closely with our state clients, for example, to set expectations constructively and cooperatively, in a manner consistent with the client's goals, objectives, philosophies, resources, and other factors.

Consumer Direct will utilize the ADKAR change management model to guide us, the Agency, and affected stakeholders through this implementation. ADKAR is a framework for change.

Figure 41: ADKAR Change Management



ADKAR - Awareness

By raising awareness and communicating the benefits of the change we can better prepare members, DCSWs and other parties for an implementation. This is done through initial communications devised by Consumer Direct and cascaded through the Agency and the incumbent regarding the upcoming changes associated with an implementation.

ADKAR - Desire

By educating stakeholders about what is upcoming, and hearing and responding to their concerns, this step in the process creates the desire to make the change. This step will include communicating the strengths Consumer Direct brings to services such as an easy-to-use EVV application, high quality customer service for members and DCSWs, experienced and knowledgeable staff, flexible systems and processes that can adapt to program changes, and a robust reporting system that provides payers with high quality data regarding program and service metrics.

ADKAR - Knowledge

During the knowledge phase, we transition our communications to sharing the knowledge of how to change. For example, during this phase, members and DCSWs are informed when they will officially transfer over to Consumer Direct's services, what information we will need from them to transition, and how we will support them during the implementation.

ADKAR - Ability

Training and competency assessments occur during the ability phase and ensure members and DCSWs can use our systems such as our EVV application and the web portal.

ADKAR - Reinforcement

As the implementation comes to a close and we move to operational status, we continue to reinforce the change with ongoing customer support from Consumer Direct through our RCs and other staff.

5) Communication

Communication and change management go hand in hand. It is important to relay to the community the changes that are coming and their possible impacts in advance and on an ongoing basis as they play out. Communication, along with data sharing/integrity, are the most significant critical success factors for a successful implementation. (In fact, the real or perceived impact of data sharing/integrity issues can be significantly impacted by the quality of a Communication Plan.) Once again, PMBOK-based processes and procedures lay a strong foundation for successful communication efforts. The typical Consumer Direct Communication Plan defines the audience, substance, requirements, modalities, delivery methods, cadence, and owner for all communication. Attention to these seven variables defines appropriate communication channels and relationships with stakeholders, helps establish the need for regular meetings and/or correspondence with selected stakeholders, and results in well-informed stakeholders who feel valued and respected during the process.

> Transparency and truthfulness generate significant credibility in a short period of time.

Our formula for communication is simple and straightforward. Transparency and truthfulness equal credibility. They also generate trust among stakeholders, who are then more willing to move quickly beyond any mistakes in the moment to focus on long-term fixes for the future. In practice, transparency and trust mean never getting out in front of the client, never lying to stakeholders, and never creating communications that serve one's self-interest more than the interests of the intended audience.

Communication - Client

We operate hand-in-glove with our client (in this case the Agency) for all communication efforts. For example, one of the first relationships we seek to establish with the client is with those responsible for agency communication strategy, tactics, and execution. Operationally, we

recommend engagement with this staff as soon as practical. This can be done either in-person or through video calls.

While we develop the agenda for our implementation communications, we will want to work closely with Agency communications leads to ensure coordinated communications. All implementation communication initiatives and all communication content are presented first to the client for direction and approval, respectively, before broader circulation among stakeholders. Finally, we work closely with the client on populating a Stakeholder Registry which will define how the PMBOK variables mentioned above will be defined and implemented. Eventually, we will want to educate client front line staff about implementation topics and issues and subsequently keep them aware of communication plans and content directed at members and DCSWs.

Communication - Case Managers

Yet another important channel of communication to reach stakeholders are the member's Case Manager (when applicable). They will play an important role in informing members of the upcoming change in vendors. Consumer Direct's Communication Plan will identify them as key leverage points in initial communications with members and DCSWs who are transitioning. We envision these coordinators and managers playing a significant supporting role in providing assurances to members and DCSWs during implementation.

Communication - Members and DCSWs

The true test of any Communication Plan is how well it serves the needs of the ultimate stakeholders -- members and DCSWs. The Communication Plan must include components that provide support and assistance, that anticipate questions and provide answers, and address as many issues as possible before they become problems to solve. We utilize our significant implementation experience, most recently evidenced in 2021-2022, with the successful transition of approximately 45,000 members and approximately 47,000 workers in Washington State.

Consumer Direct's first and subsequent communications prepare the member and worker for the implementation. In Washington, we created member, worker and Case Manager specific resources addressing concepts and actions related to implementation. The content was reviewed in partnership with key Washington State staff and consultants assigned to the implementation. We also hosted and recorded multiple public webinars focused on implementation (and operations) topics. These topics included a changing payroll schedule, changing ways to submit time, tasks and mileage, work week limits, Consumer Direct's enrollment and hiring process, and topics specific to parent- and live-in providers. We also provided self-help resources on the Consumer Direct Washington website.

Interested West Virginia readers can review examples of the resources we prepared for the work in Washington here: https://www.consumerdirectwa.com/resources/

The Communication Plan provides the basis for members and DCSWs to understand and prepare for the implementation and daily operations. This part of the plan addresses the "how,

what, and when" provided in the resource materials we produce to help individuals navigate and use our systems and processes. These include resources like FAQs, videos, webinars, and one-page informational tools. If awarded this contract, we will produce informational resources and materials to assist members and DCSWs according to the specific program rules and requirements in West Virginia. We provide an example of those produced for Washington.

- **Member Resources:** https://www.consumerdirectwa.com/client-resources/
- **Worker Resources:** https://www.consumerdirectwa.com/ip-resources/

Communication - Incumbent Provider

Another key constituent of the communication plan is the incumbent, PPL. We have already discussed their critical role in data sharing and data integrity, but they are also a crucial partner during transition for communications. Current RCs employed by the incumbent vendor(s) are an obvious and effective channel for carrying key messages and assurances directly to members and DCSWs. With West Virginia's permission, we will ask PPL to designate a Communications Liaison with whom we can work directly to coordinate applicable aspects of the implementation-related Communications Plan.

Communication - Stakeholders

Stakeholders play a significant role throughout but nowhere more so than during implementation. Consumer Direct must quickly establish relationships and define, in cooperation with the Agency, how we will work and communicate with stakeholders. Stakeholders outside the Agency include advocate, governance and regulatory bodies, MCOs, members/representatives, DCSWs, and other impacted or interested parties.

The goal is to provide stakeholders with accurate and timely information regarding the implementation process and timelines, and ultimately ongoing operations.

6) Readiness Review

Prior to providing any services, we perform systems testing to demonstrate our systems appropriately interact with each other, and with any external systems required to provide services. The system test process is done according to what is laid out in the systems plan to validate the functionality, capacity performance, and integration of the automated system capabilities necessary to support statewide operations in West Virginia. The system test process will verify that applications have been implemented as defined in the Requirements Traceability Matrix (RTM). Our testing proceeds in four major areas:

1. **Functional** – evaluation of the functionality of a method, process, workload or subsystem
2. **Performance** – evaluation of system ability to provided expected performance levels
3. **Capacity** – evaluation of system ability to support additional Participant and Worker loads
4. **Integration** – evaluation of cross-subsystem capabilities

As necessary, we will communicate system statuses to the Agency as they relate to readiness.

In addition to systems testing, we recognize the Agency may conduct a readiness review. We will provide any requested deliverables as part of the Readiness Review process.

Consumer Direct will obtain approval of readiness to meet the program's service loads prior to initiating services. If requested, Consumer Direct will provide a corrective action plan to address any deficiencies identified by the Readiness Review. Our RTM and Work Plan will be updated to address any changes required that have been identified during the corrective action process. We will demonstrate readiness to the Agency within thirty (30) calendar days of request.

Implementation Case Studies

Each new implementation or program transition improves our ability to design and implement smooth transitions for members and DCSW to Consumer Direct. We are experienced with transitioning from other vendors in existing programs, as is the case with West Virginia.

Case Study - Virginia

One example of Consumer Direct transitioning members and their DCSWs from an existing F/EA vendor is in Virginia. We worked with the Department of Medical Assistance Services (DMAS), Virginia Premier Health Plan, and Aetna. We now provide F/EA services through these three contracts and provide here a snapshot of the members we transitioned at the time and how the program has grown since. Aetna members are not included in the table above because Virginia's Aetna members were new enrollees rather than transitioning from another vendor. Also not included here is a recently signed contract with Sentara Health Plans. That transition is in process.

Virginia Transition Summary

Payer	Transitioned Participants (2018-2019)	Current Participants
Department of Medical Assistance Services (DMAS)	4,500~	5,500~
Virginia Premier Health Plan	3,500~	4,400~
Total	8,000~	9,900~

Case Study - Washington CDE Program

More recently, we successfully executed the largest transition of members and DCSWs in the country for the Washington CDE Program. In a nine-month period (October 2021-June 2022), we transitioned more than 45,000 members and 47,000 workers. This transition required careful planning and communications with a variety of stakeholders.

To address Washington's large volume, we leaned on lessons learned in Virginia including staffing, systems and communications.

We applied lessons learned to staffing at a large scale. We benefited from hiring leadership in advance of line staff which creates a hierarchy of knowledge that allowed newly hired leaders to participate in training workers alongside existing Consumer Direct staff. We put new teams in place for data transition and communication and dedicated a team to focus on the transition.

> We consider Washington State to be the ultimate stress test for our implementation methodology.

In addition to upgrading our payroll, billing and human capital management systems, we leveraged technology in new ways. During the Washington transition, we transitioned all members and workers without utilizing any paper documents. Individuals were able to access our system through a combination of the Consumer Direct portal and a Workday application allowing for transparency and tracking through the enrollment and hiring process.

We also began implementing test shifts for workers as part of the onboarding process. Test shifts allow the worker, and the member who approves submitted shifts, to demonstrate they know how to operate our EVV system or the web portal before submitting real shifts. This gives individuals the opportunity to experience the time capture system prior to go live.

From a communications standpoint we expanded from the traditional routes of phone and email with additional communication channels including two-way texting and chat. We enhanced text blasts and emails with translated communications in 12 languages. During the nine months of the Washington transition, we sent out 48 unique mass email communications, eight unique paper mailings, and 82 unique texts blast communications to members and workers. During the transition we tracked the following statistics around communications:

- **Total Calls:** 247,367
- **Average Daily Calls:** 1,388
- **Total Non-English Calls:** 27,037
- **Emails:** 251,426
- **Outbound Calls:** 140,498
- **Text Messages:** 52,640

The ability to scale up to operate such a large transition demonstrated the strength and reliability of our transition procedures and prepared us for the West Virginia transition.

Case Study - Tennessee

We are currently transitioning approximately 4,500 PPL members and their workers to Consumer Direct to provide F/EA and Supports Broker services. Employing the implementation principles detailed in this section 4.4.25, we are working with Tennessee's TennCare, Department of Intellectual and Developmental Disabilities, and three health plans – Amerigroup, Blue Care Tennessee, and United Healthcare. TennCare has mandated a 90-day transition period. As we mentioned earlier in this section, this pace of implementation comes with challenges for all stakeholders, but is achievable. We are working side-by-side with the incumbent, the state, the MCOs, and advocacy groups to eliminate member abrasion and ensure successful implementation, time capture, and payroll.

4.4.26 Provide RC Services Directly and Without Subcontractor

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.

If the Agency elects to utilize optional Resource Consultant services, Consumer Direct agrees that we will provide these services directly and will not subcontract with any other entity to perform any of the Resource Consultant tasks.

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.

4.5.1 Qualification and Experience Information

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 Work Plan

4.5.1.1 The Vendor should propose a work plan that should include, but not be limited to, the following components:

We propose a multi-pronged approach to meeting the qualifications and experience required to satisfy requirements in the RFP. Our approach consists of three elements:

1. Work plan indicating steps required to minimize, if not eliminate, risk factors that could be associated with transitioning from the incumbent vendor to Consumer Direct
2. Organizational chart representing the deep industry expertise West Virginia-based operational staff will rely on as Consumer Direct hires local leadership and personnel to provide the best solutions for West Virginians
3. Descriptions of roles and responsibilities for West Virginia-based key personnel to provide exceptional customer service to members, their DCSWs, and state personnel

Consumer Direct's executive team has a combined 86 years working with our company – giving our team an average 12-years+ tenure each.

Our comprehensive qualifications and experience demonstrate we are the best vendor candidate to offer Subagent – F/EA FMS and optional

Resource Consulting for West Virginia. Our work and project artifacts demonstrate we are also the best prepared vendor to transition from the current incumbent and improve overall operations as well.

We provide **Enclosure C** representing our draft Work Plan, which outlines the implementation transition tasks required to be performed during project Anticipated Implementation beginning on October 2, 2023. The plan encompasses major activities that occur in preparation for Anticipated Operations indicated to commence on January 2, 2024. This will be designated as the day when Consumer Direct assumes the role of the F/EA FMS.

The work plan addresses all project activities required to complete an implementation and begin operations e.g., delivering services as the Subagent - F/EA FMS. The work plan is constructed following terminology and guidelines developed by the Project Management Institute (PMI) and found in the PMBOK, seventh edition.

The work plan describes the tasks, services, deliverables and schedule to fulfill the Agency's program requirements. These will be represented in a work breakdown structure (WBS) document prepared using Microsoft Project for Office 365. Project milestones will be identified and tracked in the WBS.

Our draft work plan assumes implementation activities will begin no later than October 2, 2023 and Consumer Direct to begin operations on January 2, 2024.

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.

Let's talk about our people. We hire and retain awesome people who are committed to the philosophy of self-direction, and to providing excellent customer service for our state and MCO partners and for the members and DCSWs who are so critical to ensuring people with disabilities can stay safely in their homes and communities.

Our people are what set us apart from our competitors and we look forward to the opportunity to prove this point. Many of the staff assigned to a role on this contract have previously worked as caregivers or have supported members and caregivers through their work in social services. Our management team has been together for years, unlike some competitors who have turned over their senior management team several times in less than five years.

Our subject matter experts are respected nationally and play senior roles in trade and advocacy organizations. Our payroll experts study IRS and state tax regulations on an ongoing basis, having tracked years of differing federal and state fiscal policy. Our state-based management teams are pro-active, continually acting in service to the client while building partnerships across the stakeholder

In any industry, it takes time to improve key metrics after a change in senior leadership. Self-direction is no different.

spectrum. Finally, and in some ways most important to the Agency, we employ the best system developers in the business to support your IT needs.

To fully grasp the credentials of the proposed West Virginia implementation and ongoing operations team, it is important to understand Consumer Direct's approach to implementation and ongoing operations. We have divided the project into two phases – the implementation phase and the ongoing operations phase. The implementation begins as soon as the contract is awarded, and is formalized as soon as the contract is signed. At a minimum, implementation encompasses the three months indicated as the start-up period.

Assuming Anticipated Implementation of October 2, 2023, the implementation period will incorporate the subsequent 90-day period through January 2, 2024. Ongoing Operations begins when the "switch is flipped" and Consumer Direct becomes contractually accountable for the programs, with Public Partnerships (PPL) having no further official outward-facing role. West Virginia may wish to flip switches sequentially for certain tasks and activities whose cross-over from vendor to vendor must be well-timed to avoid member or worker disruption. Consumer Direct will be flexible and work with the Agency to further member/worker interests if cross-over timing adjustments are necessary.

All staff named below are current employees of Consumer Direct. (West Virginia-based staff will be added to the group as soon as practical – more on that below.) Most staff named below play a role in both phases, implementation and ongoing operations. Those who are more expert in transition implementations have a higher percentage of time committed to this stage, while those skilled in operations may have a lower time commitment. As we get closer to flipping the switch for Ongoing Operations, those time commitment percentages will flip, with experts in Ongoing Operations assuming a larger and more visible role.

"Consumer Direct is a responsive, nimble, and consumer-friendly F/EA partner for the state." Former Medicaid Director

Consumer Direct commits to meeting the contractual requirement for West Virginia-based staff to hold designated key roles. Consumer Direct intends to hire for those roles as soon as practical and we have begun preliminary identification of possible candidates in anticipation of the contract award. Our goal is to fill those positions as soon as possible after the award announcement so that these individuals can play a role in the transition. However, we will not approach any incumbent RCs until we have the Agency's approval to do so.

Figure 42: Consumer Direct West Virginia Organizational Chart

The state asks that prospective vendors should provide information and documentation regarding its qualifications and experience that relates to work and problem solving as outlined in this RFP. In addition to our work plan and the staffing plan outlined in the work plan, we include **Enclosure D**: Personnel Resumes as evidence of staff degrees and certifications applicable to this project. All personnel listed here have at minimum a

bachelor's degree from a nationally-recognized and accredited college or university. The state asks for "copies of degrees and certifications." Not all our personnel were able to acquire hard copies of such. For instance, some institutions require an in-person request; not all Consumer Direct personnel were able to achieve this in the time frame allowed for RFP response submission.

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 a 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

Consumer Direct is committed to meeting all staffing requirements indicated in 4.5.1.1.2-4.5.1.1.2.1.3. The person hired for this role of Project Manager (equivalent to a State Director in CDCN terminology) will have experience leading and managing F/EA FMS and RC operations. Their educational background will include, at minimum, a bachelor's degree from an accredited four-year college or university, and they will bring at least three (3) years' experience managing the provision of F/EA FMS, members' budgets, and managing Subagent – F/EA FMS staff.

We agree with the Agency that the people of West Virginia will be best served by West Virginians. The West Virginia Project Manager will be new to Consumer Direct; they will be hired because they meet the Agency's stated qualifications, bring familiarity with West Virginians receiving in-home personal care, and align with Consumer Direct's mission to provide care and support for people in their homes and communities. The local Project Manager will be empowered to make decisions to positively impact service to members, DCSWs, and state stakeholders.

Upon award of contract, one of our first activities, as indicated in our draft Work Plan **(Enclosure C),** will be to recruit a qualified candidate for Project Manager. Consumer Direct will meet or exceed the staffing requirements outlined in the RFP. Recruiting for this role will be based on the following job description:

Project Manager

Operations:

- Direct day-to-day operations within West Virginia to support company strategic anchors and thematic goals.
- Ensure compliance with Federal/State Regulations and Managed Care Organization (MCO) program rules.
- Direct daily intake and referral processes, local payroll processes, and AR processes to ensure positive business growth and development.
- Provide continuous excellent service to clients, employees, and 3rd party organizations including MCOs.
- Direct staff training and provide organizational leadership.
- Support day-to-day operations and client advocacy.
- Direct collaboration of stakeholders regarding delivery of services.
- Direct complex service programs and special projects as needed including:
    - Annual review of policy and procedures
    - Annual review of standard operating procedures
    - Large-scale enrollments and transitions as needed
- Identify and implement process improvement efforts.

Professional Development:

- Participate in professional development and training activities.

Representation:

- Represent company at stakeholder meetings, health fairs and provider fairs.

Travel:

- Travel within the assigned geographic area as required.

Financial Health:

- Responsible for maintaining positive financial health of the programs.

Client Services:

- Direct client enrollment, assessments, and supervisory visits as required.
- Direct the development of the service/support plan and budgets within the programs.
- Implement provision of common law employer orientation and skills training for members and representatives

Database Management:

- Direct the management of Customer Relationship Management (CRM) database to ensure it is updated accurately and in a timely manner.

Payroll Operations:

- Direct payroll, authorization, and AR operations for the programs

Qualifications:

- Bachelor's degree from an accredited four-year college/university and three (3) years' experience managing the provision of F/EA FMS, members budgets and managing F/EA-FMS staff
- Proficient public speaker

- Effective written and verbal communication
- Demonstrate effective problem solving and decision-making skills
- Maintain necessary skills and knowledge to coordinate workflow.
- Prioritize and multitask effectively

Because the key position of Project Manager requires extensive experience and expertise in the provision of F/EA FMS, until we have a local person in place who meets these qualifications, Consumer Direct will install Kari Vinopal, Senior Director, to be 100% committed to West Virginia. Ms. Vinopal will remain in this role until a qualified West Virginian is recruited, hired, trained, and achieves competency in leading and effectively managing F/EA FMS and optional RC operations.

Ms. Vinopal has been with Consumer Direct for 15 years. She has nearly 20 years' experience leading and managing F/EA FMS, and 15 years' experience supporting RC services. She began her career 28 years ago working with people with developmental and intellectual disabilities. Her experience spans programming, readiness review preparation, state and MCO relationship management, customer service training, F/EA FMS management, training material development, and project implementation. Ms. Vinopal's extensive career history is included in **Enclosure D**, enclosure pages 35-38.

Once the local West Virginia Project Manager is hired, they will receive extensive support from our experienced operational leadership. As indicated in **Figure 42,** RFP page 207, the Project Manager will report to Sarah Herbert, our East Coast Regional Director, who brings four years' experience managing the provision of F/EA FMS in the Commonwealth of Virginia where she directly managed approximately 60 administrative personnel supporting approximately 13,000 members and their DCSWs. Prior to coming to Consumer Direct, Ms. Herbert gained extensive compliance experience working for five years with a Virginia MCO and in other health care capacities.

As a result of her excellent service with Consumer Direct to state and MCO clients in Virginia, Ms. Herbert was promoted to oversee our eastern United States operations including Florida, Virginia, and Washington DC. She will bring her deep knowledge of F/EA FMS and support broker provision to West Virginia where she will assist in the recruiting, hiring, training, and ongoing support of the WV Project Manager. See Ms. Herbert's resume in **Enclosure D**, enclosure pages 88-91, for further information about her qualifications.

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.

Consumer Direct will assign the role of payroll and invoice payment manager to our highly skilled and qualified payroll director, Amanda Romero. Ms. Romero brings almost 20 years' experience in payroll processing, accounting process, and team management to handle the West Virginia payroll and invoice payments workload. Ms. Romero exceeds the educational and experience requirements listed in the RFP, including having a bachelor's degree from an accredited four-year college or university, and having more than two (2) years' experience processing DCSW hours worked and preparing and issuing DCSW payroll. Ms. Romero leads a team of payroll support staff who are skilled at processing and paying invoices to workers and participant-directed vendors.

Ms. Romero will perform duties related to payroll and invoice payment including developing and maintaining a separate bank account, data base copies, files and records, and preparing and issuing reports to participants and government agencies. She and the payroll team will work with the West Virginia operations team and our claims team to support ongoing payroll and claims functions for this contract.

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 an 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.

We believe it's important to the long-term functionality and efficiency of our state programs that the Project Manager be in place to have a role in selecting and hiring other roles in West Virginia. Consumer Direct will post all key roles upon award. We will seek to identify and hire the Project Manager first so they can help select the remaining key personnel. The Waiver and Personal Care supervisor positions will be filled in compliance with all education and self-direction experience requirements for the roles of the four key positions managing the applicable waiver and Personal Care programs.

Recruiting for this role, and taking into account the unique requirements for each waiver or program, will be based on the following job description:

Program Supervisor

Operations

- Manage compliance with Federal/State Regulations and MCO program rules
- Manage daily intake and referral processes, local payroll processes, and AR processes to ensure positive business growth and development
- Recruit, hire, train, and supervise employees
- Manage staff training and provide organizational leadership
- Promote cohesiveness in the office environment
- Manage day-to-day operations and client advocacy
- Collaborate with stakeholders regarding delivery of services
- Manage program score card, dashboard, and key performance indicators
- Identify and implement process improvement efforts

Customer Service

- Provide excellent customer service to internal and external clients
- Manage the provision of continuous excellent service to clients, employees, and 3rd party organizations including MCOs

Professional Development:

- Participate in, and assign, professional development and training activities

Qualifications

- Bachelor's degree from an accredited four-year college/university and two (2) years' experience working with members who are self-directing their services
- Comfortable with public speaking
- Communicate effectively
- Demonstrate effective problem solving and decision-making skills
- Maintain necessary skills and knowledge to coordinate workflow
- Prioritize and multitask effectively

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.

All staff named in this response are current employees of Consumer Direct. Consumer Direct commits to meeting the contractual requirement for West Virginia-based staff to hold designated key roles. Consumer Direct intends to hire for those roles as soon as practical and we have begun preliminary identification of possible candidates in anticipation of the contract award. Our goal is to fill those positions as soon as possible after the award announcement so that these individuals can play a role in the implementation. However, we will not approach any incumbent RCs until we have the Agency's approval to do so.

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.

We commit to recruiting and hiring one (1) FTE to each key staff indicated. These personnel will be based in West Virginia and will be 100% dedicated to the West Virginia Personal Options Program.

As we get established in West Virginia, and until we can recruit and hire qualified key personnel to fill the positions listed in the RFP, Consumer Direct will install Kari Vinopal, Senior Director, to be 100% committed to West Virginia. Ms. Vinopal will remain in this role until a qualified West Virginian is recruited, hired, trained, and achieves competency in leading and effectively managing F/EA FMS and optional RC operations.

4.5.1.2 Qualified Management and Operations Staff

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.

As your vendor for F/EA FMS and RC, Consumer Direct's management and operations staff meet and exceed the RFP's requirement for leading with five (5) years' experience in providing F/EA FMS services, and serving older adults and people of all ages with physical, intellectual and developmental disabilities (I/DD) and traumatic brain injury (TBI), and their representatives and families.

Our executive team comprises of people who bring well-rounded, deep and personal experience to the management of our company. Our people are experienced in a variety of nuanced self-direction programs including:

> We love the work we do, and we are motivated to do it better than anyone else.

- Fiscal/employer agent programs
- Agency with choice programs
- Traditional agency programs
- Programs with vendor payments
- Veteran directed care programs
- Programs administered through Area Agencies on Aging
- Managed care programs
- Statewide programs

Additionally, many of leadership staff started out working directly with the people we serve. Many of our competitors cannot claim the same depth of experience and expertise.

Ben Bledsoe, CEO, joined our company in 2004 as a caregiver. Over the course of the 19 years, he has been with the company, he advanced through roles in human resources, compliance, program operations, and now has served as CEO since 2012.

Beth Peterson, COO, began her caregiving career working in a nursing home while she was still in high school. She has remained a tireless proponent of person-centered philosophy and planning to support older adults and people with I/DD in the 39 years since. She started with Consumer Direct in 2010 as a program manager to recertify fiscal management agencies in Minnesota. She then brought her operational expertise to supervise operations in several states served by Consumer Direct. She has served in the executive leadership role for operations for ten years.

Jim McInnis, CAO, is the parent of a person with a disability and understands the real challenges of recruiting and retaining in-home caregivers. To his role overseeing Consumer Direct's payroll and associated taxes and withholdings to 107,000 caregivers, he also brings his unique personal experience as someone who sees the impact of innovative home-care on a daily basis.

Beyond the three executive leaders highlighted above, the remaining four on the team bring similar depth of F/EA FMS experience. In the table below, we summarize our executive team's management and operations experience relative to West Virginia's specified populations and the provision of F/EA FMS. Full resumes for our seven-member executive team can be found in **Enclosure D**.

Figure 43: Longevity in Executive Leadership

Executive Team Years

Role	Name	Years with CDCN	Years providing F/EA FMS	Years serving Older Adults and Individuals with Physical, I/DD, TBI, and their Representatives
CEO	Ben Bledsoe	19	18	19
COO	Beth Peterson	13	20	39
CTO	Jeff Harriott	11	11	11
CFO	Daryl Holzer	20	20	20
CAO	Jim McInnis	2	23	23
CIO	Jack Nichols	5	5	5
CDO	Mickey Ogg	16	16	16
Total Cumulative Years		86	113	133

As of May 2023

4.5.1.3 Experience Providing F/EA FMS, Consideration of Requirements, and Approach for Continued Successful Implementation of Self-Directed Services

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.

Throughout our response to this RFP, Consumer Direct has worked to provide detailed answers to the Agency's important areas of inquiry to make clear our company is deeply experienced in the provision of Vendor F/EA FMS and support brokerage or RC services. We have carefully considered all West Virginia requirements and determined we meet or exceed requirements in each section and subsection in this RFP.

"Consumer Direct has been a dedicated partner providing Participant Directed Options to our Participants and their Caregivers since July 2018. Consumer Direct is a quick and responsive partner whenever there are any issues with time submissions because they understand the importance of providing accurate and timely payments to workers."

VP Provider Network Management and Operations, National MCO

We summarize our qualifications and experience by reflecting on how Consumer Direct's goals and approach align with the RFP in Section 4.2, our ability and expertise offered to provide RC in Section 4.3, our ability to meet and exceed the mandatory requirements in Section 4.4, and our broad-based qualifications and experience in Section 4.5.

Experience

At this point in our response, we hope we have established that Consumer Direct is an industry leader in providing F/EA FMS necessary for self-directed in-home care. We were founded in Montana as a home care agency in 1990. Eight years later our state made self-directed services an option. Consumer Direct recognized the significant value self-directed services brought to people with long-term disabilities and their families, as well as the cost savings to the state when people needing long-term care could self-direct and stay in their home and community rather than being institutionalized. We are proud of our history being an early adopter in providing F/EA FMS for people self-directing their care.

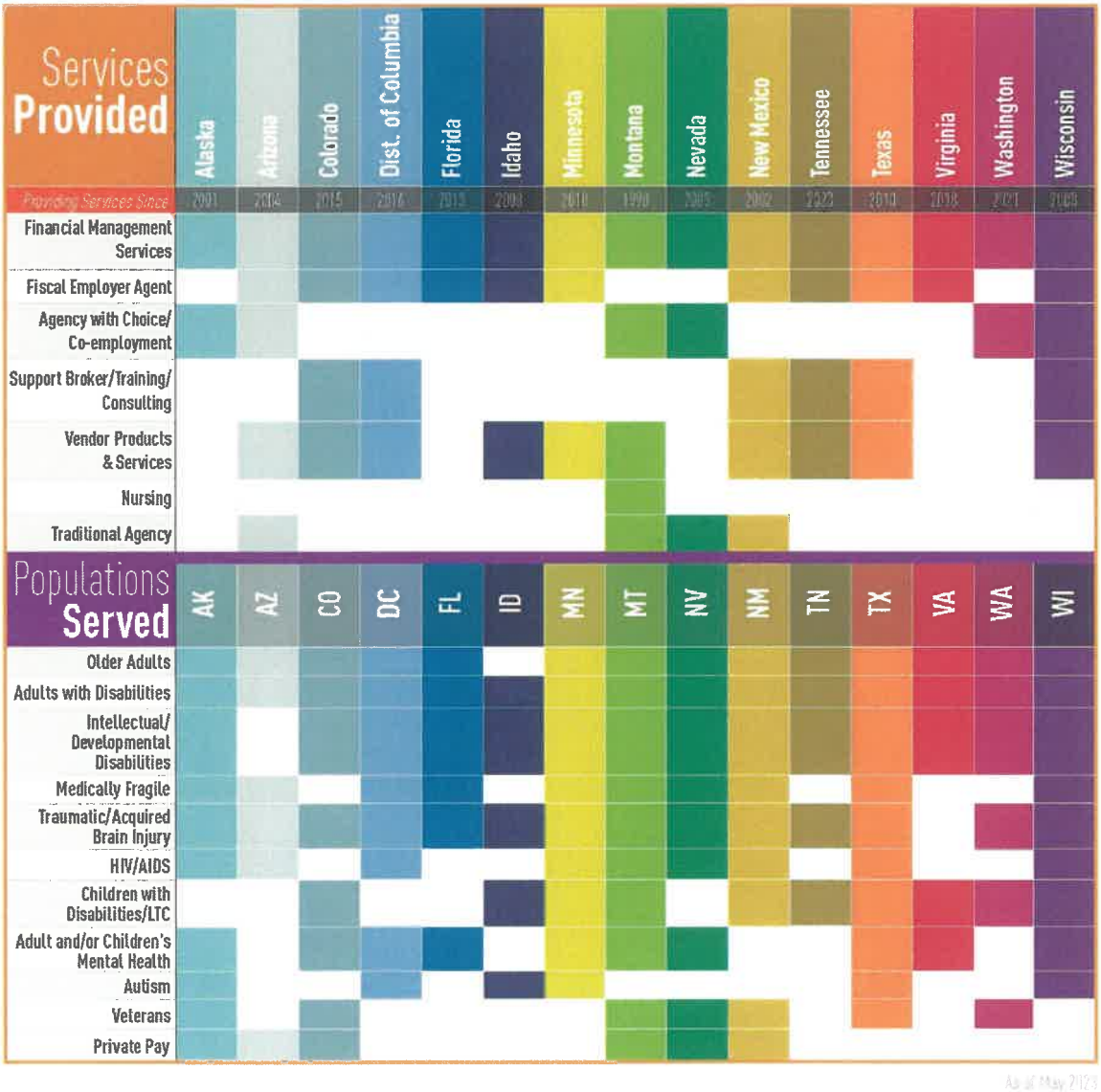
From Montana, we were able to bring our member-focused customer service and now are grateful for the opportunity to work with 15 states and numerous health plans.

Embracing self-directed services is at our core. Our company has worked hard to support and expand self-directed services for Medicaid members so they have more choice and control in how they receive services. Our company's leadership has applied optimism and hard work to help states establish F/EA FMS and RC programs to help people with disabilities stay in their homes and communities.

Consumer Direct operates in 15 states providing:

- F/EA services in eleven states
- Resource Consulting (called Support Brokerage or Training in some programs) in seven states
- AWC and ABT in four states (Agency with Choice and Agency Based Traditional)

Figure 44: Services Provided and Populations Served including our newest state in the Care Network, Tennessee, where we begin time capture in July 2023



Our experience is deep in both Fee for Service (FFS) and managed care F/EA. Consumer Direct initially provided services on FFS contracts with states. Many of our longest relationships continue directly with states in an FFS environment. Consumer Direct also has vast experience performing F/EA services for consumer-directed services in a managed care delivery system, from smaller county or regional programs, to larger, statewide programs.

Requirements

Section 4.2 provides bidder with a comprehensive list of goals and requirements, and the tasks associated with successfully complying with all mandatory requirements. Our long history of providing F/EA FMS has allowed Consumer Direct to hone our processes and procedures to provide the best possible service in an efficient and cost-effective manner. We bring to West Virginia's project core administrative supports such as accounting, payroll, claims processing, human resources, labor relations, risk management, program development, training, quality assurance and improvement, and information systems. This type of centralization is a best practice because the business processes core to F/EA FMS, and common across all states, rely so heavily on the same technology. Working together as a cohesive team allows for staff to easily compare notes and collaborate on policies, procedures, and protocols. It also maximizes scalability and flexibility.

We also recognize the essential value of hiring and maintaining locally-based individuals to staff our projects. These teams are fully dedicated to the state projects they serve, resulting in a higher level of customer service for members and DCSWs. These individuals understand the members and DCSWs with whom they come in contact. They know the state environment and understand the nuances of the state's Medicaid program.

Ultimately our programs are run by the people on the ground who are working closely with members/representatives, families, and the local agencies and advocacy groups. We hire our staff from the communities they serve. We think it is important to have our services managed by the people on the ground supported by efficient administrative personnel. Our business structure is designed to give our local program teams the support they need so they are freed up to focus on relationships and providing excellent customer service to members, families, DCSWs, and service partners such the Agency and MCOs.

Consumer Direct welcomes the opportunity to perform the optional services of Resource Consulting as outlined in **Section 4.3.** We are one of the most experienced RC providers in the nation. Whether by the name of RC, supports broker, or training, we have provided RC services since 2006. New Mexico was our first state contract to do this work. We now offer RC supports in seven states, representing approximately 4,500 members receiving this service. Having served members for more than 15 years in this capacity has allowed us to hone our processes and procedures to provide the best possible service. We understand how to support

We now offer RC supports in seven states, representing approximately 4,500, receiving services.

people in both urban and rural environments, and how to help members hire, train, supervise and guide their self- directed workers.

We look forward to working with West Virginia should the Agency choose to proceed with this optional service.

In **Section 4.4** we described in depth how we will meet and exceed West Virginia's mandatory requirements to perform as vendor F/EA FMS without the use of a subcontractor. Consumer Direct has shared our history of, starting in 2001, providing uninterrupted F/EA FMS. In these 22 years of F/EA FMS provision, we have never used a subcontractor.

For 22 years, we have worked with older adults, people with long-term disabilities, people with physical, developmental, and intellectual disabilities so they may stay in their homes and communities. In states with programs that support RC services, we have expanded our scope to include those options. That brings us to a total of providing F/EA FMS in 11 states, and RC (or similar Support Broker or Training) in seven states.

We have worked to address the Agency's 26 unique and important mandatory project requirements.

4.4.1-4.4.4 We expanded on our experience performing as F/EA FMS under all relevant Internal Revenue Service codes including Section 3504 of the IRS Code and IRS Procedure 70-6, as modified by IRS Regulation 137036-08, and IRS Procedure 2013-39. We began performing this work in 2008 and have continuously and successfully performed these functions in what is now 11 states.

4.4.5-4.4.8 Responsible and accurate stewardship of Medicaid funding is essential. West Virginia can rely on Consumer Direct to have and maintain the capacity of administering public monies safely and transparently. We will maintain and report on the separate bank account established for the sole purpose of receiving payments for Medicaid-funded services.

4.4.9-4.4.12 Consumer Direct commits to providing member-focused, West Virginia-based customer service for members and workers in the Agency's self-directed programs outlined in this RFP. We will maintain a user-friendly website and web portal. Members, their workers, their representatives, RCs, Case Managers (as applicable), and Agency representatives will have user-based access to essential resources. Consumer Direct will maintain compliance with the state's language access laws.

"Easy to use app and website."
Caregiver review in WA

4.4.13-4.4.19 Consumer Direct will bring accounting best practices for establishment and maintenance of a separate administrative bank account for our work in West Virginia. We will continue to work collaboratively with the Agency to ensure ongoing compliance and satisfaction with our performance.

4.4.20-4.4.26 We look forward to hearing of award of contract to initiate the three (3) months implementation activities. During implementation we will work collaboratively with the Agency and stakeholders to ensure readiness to enroll members and workers, and enroll worker in the Agency's Fiscal Agents System/MMIS to prepare for them submitting time worked to Consumer Direct. We will operate in accordance with the SLA in Appendix A. Should the contract be cancelled or expire, we will work cooperatively with the Agency and the new vendor to turn over historical Employer of Record and Employee information.

Approach

As we do in the 15 states where we support F/EA FMS or other types of FMS for people with long-term disabilities, Consumer Direct will support the continued successful implementation of self-directed services in West Virginia. Our approach to serving West Virginians is based on locally-based leadership, member-focused customer service, and working collaboratively with the Agency and stakeholders.

We are pleased to bring our deep technical knowledge and capabilities that include easy integration, sophisticated functionality, and enterprise-level capacity. We don't rely on technology to replace our relationships with members, workers, authorized representatives, or Agency personnel. But we do recognize that well-functioning technological solutions can provide ease of operations and robust transparency and reporting.

4.5.1.4 References

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).

Consumer Direct provides detailed program experience from three (3) references. These programs have been in existence for more than three (3) years and we have continuously served these programs since their inception.

Arizona programs in existence for 16 years

- **Reference contact name:** Lawrence (Larry) O'Connor, ALTCS Administrator, Banner University Family Health Plans
- **Reference phone number:** 480-827-5875 office, 480-543-9973 mobile
- **Reference email address:** Lawrence.oconnor@bannerhealth.com
- **Project administrator:** Maxine Hartranft, Consumer Direct Regional Director - Southwest
- **Length of time in the state:** 16 years (since 2007)
- **Service provision:** F/EA FMS
- **Population**: Approximately 900 adults under the Elderly and Physically Disabled program
- **Level of satisfaction:** 3

Detailed description of project:

We currently serve approximately 900 functionally eligible Arizonans through our existing programs in Arizona. We do this through the Arizona Health Care Cost Containment System (AHCCCS), and United Healthcare Community Plan, Banner University Family Care, and Mercy Care Plan. We also contract with South Eastern Arizona AAA (SEAGO) through the Arizona Department of Economic Security. For these agencies and health plans, we provide Financial Management Services (FMS) Vendor Fiscal/Employer Agent (VF/EA), Agency-Based Traditional (ABT), and Agency With Choice (AWC)/Co-Employment (COE) services.

New Mexico programs in existence for 21 years

- **Reference contact name:** Richard Fredrickson, Regional Vice President, LTSS Business Development, Western Sky Community Care (Centene)
- **Reference phone number:** 314-566-9591
- **Reference email address:** Richard.L.Fredrickson@centene.com
- **Project administrator:** Maxine Hartranft, Consumer Direct Regional Director - Southwest
- **Length of time in the state:** 21 years (since 2002)
- **Service provision:** F/EA FMS and RC (termed support broker in NM)
- **Population:** Approximately 1,600 older adults and I/DD members
- **Level of satisfaction:** 3

Detailed description of project:

We established services in New Mexico in 2002 when we began providing Personal Care Services (PCS) statewide. We offer PCS in both the self-directed and agency-based models. Our local, bilingual, and culturally diverse staff support a population of approximately 1,100 clients and their 1,400 caregivers in managing their PCS services through the state's Agency-Based Community Benefit (ABCB). We also support around 650 clients through Support Brokers/Consultant services under the Mi Via self-directed waiver, as well as the Self-Directed Community Benefit (SDCB). In these roles, we provide guidance to Medicaid members about their self-directed services and supports. This includes training and support with implementation of the approved plan and budget, hiring and supervising employees and providers, managing services, ensuring supports, and monitoring the health and safety of the clients.

Wisconsin programs in existence for 15 years

- **Reference contact name:** Susie Myers, Self Determination Manager, Inclusa, Inc.
- **Reference phone number:** 608-647-1521 or 877-622-6700
- **Reference email address:** Susie.myers@inclusa.org
- **Project administrator:** Christin Grimes, Consumer Direct Care Network Wisconsin (CDWI) State Director
- **Length of time in the state:** 15 years (Since 2008)
- **Service provision:** F/EA FMS and RC (termed support broker in WI)
- **Population:** Approximately 1,700 older adults and I/DD members
- **Level of satisfaction:** 3

Detailed description of project:

Consumer Direct has worked with the state, MCOs, and counties in Wisconsin since 2008. We provide a robust array of services in this state including F/EA FMS, AWC, and RC services. Inclusa is our largest payer in Wisconsin. They utilize all service models offered by Consumer Direct. Inclusa values the high-touch model we offer, and has asked that we maintain in-person enrollments and ongoing RC activities even as other plans have requested less contact with their members. Inclusa values the RC's role in supporting members to help them navigate their budget thus alleviating the workload for Inclusa case managers.

4.5.2 Mandatory Qualifications/Experience Requirements

4.5.2 Mandatory Qualification/Experience Requirements - The following mandatory qualification/experience requirements must be met by the Vendor as a part of its submitted proposal. Vendor should describe how it meets the mandatory requirements and include any areas where it exceeds the mandatory requirements. Failure to comply with mandatory requirements will lead to disqualification, but areas where the mandatory requirements are exceeded will be included in technical scores where appropriate. The mandatory qualifications/experience requirements are listed below.

4.5.2.1 Experience in Government F/EA FMS and Resource Consulting

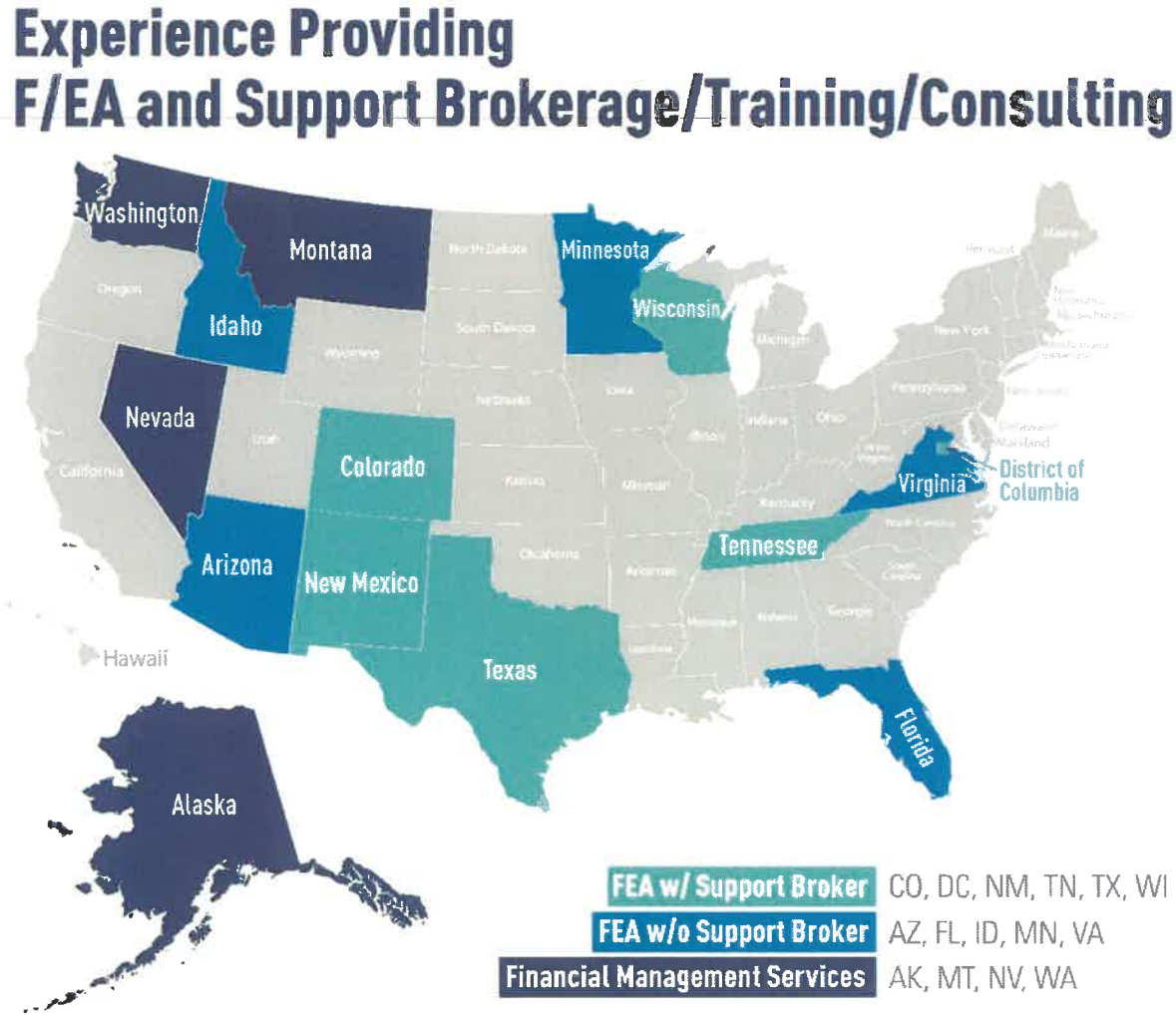
4.5.2.1 The Vendor and/or any subcontractors shall have at least five (5) years' experience providing Government Fiscal/Employer Agent (F/EA) Financial Management Services (FMS) and the optional support brokerage (Otherwise known as Resource Consulting (RC) services comparable to the size and scope of the program(s) outlined in this RFP.

Consumer Direct has more than five (5) years' experience providing Government F/EA FMS. In fact, we've provided Resource Consulting for 17 years (since 2006) and F/EA FMS for 15 years (since 2008). Consumer Direct provides F/EA FMS functions under all relevant Internal Revenue Service codes including Section 3504 of the IRS Code and IRS Procedure 70-6, as modified by IRS Regulation 137036-08, and IRS Procedure 2013-39.

Consumer Direct is one of the most experienced providers of F/EA and Resource Consulting in the United States.

In this map graphic, we document where we provide F/EA services with and without resource consulting.

Figure 45: Experience Providing F/EA, FMS, and RC



Consumer Direct operates as an F/EA FMS provider in eleven states including Arizona, Colorado, Florida, Idaho, Minnesota, New Mexico, Tennessee, Texas, Virginia, Washington DC, and Wisconsin. In the remaining four states, we provide Agency with Choice (AWC) and Agency Based Traditional (ABT) services for a total of 15 states served by Consumer Direct. We serve approximately 21,000 participants and 39,000 caregivers in those F/EA states. We provide Consulting (referred to by some states as Support Brokerage or Training) in seven jurisdictions including Arizona, Colorado, New Mexico, Tennessee, Texas, Washington DC and Wisconsin. Approximately 4,500 participants benefit from Support Brokerage in those states.

Additional information that illustrates our F/EA and Resource Consulting experience nationally:

- 2006 begin Support Brokerage in New Mexico
- 2008 begin F/EA in Idaho and Wisconsin
- 12,900 members receiving F/EA services in Virginia, with largest contract representing over 5,500 members
- 2,000 members receiving Resource Consulting/Supports Brokerage services in Texas and Wisconsin
- 9 states with managed care contracts representing more than 30 MCO payers

We acknowledge it is easy for F/EA vendors to talk about the numbers of members and DCSWs served as a proxy for experience. But citing caseloads, and even years holding a contract, is not a full credit answer when describing experience. A complete answer includes the vendor's experience and success designing, developing, and operationalizing the myriad of business processes involved in this program and delivering reliable and flexible technologies to support them. It is not just the volumes of people that demonstrate vendor experience. It is the capabilities that evolve and improve with servicing caseloads of members and DCSWs that also provide insight into experience.

Consider, for example, the financial solutions, comprised of business processes and technologies, that are required to make timely and accurate bi-weekly payments to approximately 107,000 workers. Consider the administrative solutions that are required to ensure authorizations and budgets are in place and managed properly for approximately 82,000 members. Finally, consider the technology required to align member and worker needs with government-established program requirements while being a good steward of taxpayer dollars. Our solutions allowed us to successfully complete the largest transition of participants and workers ever attempted in this market's history when we transitioned Washington's approximately 50,000 members and workers from being independent contractors with the state to being our employees in an Agency with Choice (AWC) model. Our solutions now support our management of the largest consumer direction program in the country. We have developed the best capabilities in this field through experience acquired over the years and we continue to hone that expertise with every new project.

> Overall, we provide our services in 15 states for approximately 82,000 self-directing Members and 107,000 Workers.

Consumer Direct has deep operational knowledge that extends beyond F/EA because we also have *experience* providing AWC services, and Agency-Based Traditional (ABT) services. We are unique among our competitors in understanding the needs of clients who may transition to or from F/EA FMS, AWC, and ABT. We also provide AWC services in Alaska, Arizona, Montana, Nevada, and Wisconsin.

We mention here our experience with AWC provision to raise awareness to the state. AWC services may be important with the potential outcome of the case of Ralph Talarico v. Public Partnerships, LLC, Case No. 5:17-cv-02165, U.S. District Court, Eastern District of Pennsylvania.

The plaintiff's class action group alleges that Public Partnerships, LLC (PPL) violated federal and Pennsylvania state law when it denied or underpaid overtime wages to direct care workers who provide home care for individuals with disabilities. We believe if the case is decided adversely against PPL, such a decision could negatively impact the provision of self-directed care in the F/EA model. We believe that the decision might impact how F/EA caregivers would be considered employees of the F/EA vendor similar to how caregivers are treated in an AWC model. For example, F/EA caregivers would be eligible for overtime under the Fair Labor Standards Act and eligible for medical insurance coverage under the Affordable Care Act.

If these circumstances come to pass, Consumer Direct is uniquely positioned among all FMS vendors to help West Virginia evaluate its implications for your programs and to develop recommendations for your review. Most good business partners can react to a change in situation. Consumer Direct prides itself on its ability to anticipate changes. That is an added value in selecting Consumer Direct.

West Virginia will have the country's #1 AWC vendor already operating in-house if this change becomes necessary, sparing the necessity and expense of reprocuring a vendor for an expertise you will already have at your disposal.

Proposal Conclusion

We appreciate this opportunity to provide information regarding our ability to support your F/EA FMS and RC functions on behalf of West Virginia's eligible Medicaid HCBS members who choose to receive self-directed HCBS using the Agency's Personal Options model. We hope you've found our answers to be clear, thoughtful, and thorough.

We believe we are your best potential provider who can:

1. **Meet and exceed the mandatory requirements** defined in RFP Sections 4.2.1 through Section 4.2.149
2. **Provide comprehensive description of our experience** providing Resource Consultant services as outlind in RFP Section 4.3.
3. **Demonstrate that our experience, consideration of requirements and operational capabilities** not only set us apart from our competitors but also address your current needs and meet contractual or exceed contractual obligations in RFP Sections 4.4 and 4.5.
4. **Address the risk/reward ratio** you face when considering the value of replacing your existing F/EA FMS and RC vendor.

Consumer Direct's commitment to providing excellent customer service is at the heart of all we do. It is the basis of our mission to provide care and support for people in their homes and communities. It inspires our collaborative partnerships with our state clients, and it drives us to invest in and build robust and reliable technical solutions.

We look forward to your evaluation of our proposal, and to providing more information and insight during your optional proposal negotiations period.

6.8 Availability of Information

6.8 Availability of information: Proposal submissions become public and are available for review immediately after opening pursuant to West Virginia Code §5A-3-1 l(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.

Consumer Direct Care Network West Virginia, LLC

(Company)

Ben Bledsoe, CEO

(Representative Name, Title)

Phone: 406-532-2001 Fax: 406-541-7058

(Contact Phone/Fax Number)

June 5, 2023

(Date)

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Enclosure D: Personnel Resumes and Degrees

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CONSUMER DIRECT CARE NETWORK

Fiscal Employer Agent

Employer Handbook

Revised January, 2020

EVERY LIFE. EVERY MOMENT. EVERY DAY.

This handbook is property of the Consumer Direct Care Network (CDCN) and may not be duplicated in any form without express permission from CDCN.

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Contact Information

Consumer Direct Care Network (CDCN) Customer Service Representatives can be reached Monday-Friday 8 am to 5 pm, excluding holidays. Office hours may vary depending on staffing; we recommend making an appointment if you would like to visit. Messages can be left outside of business hours and will be returned the next business day. Contact information is presented below:

Office Location
CDCN Idaho
280 E Corporate Dr., Suite 150
Meridian, ID 83642-2953

Important Phone Numbers

CDCN Main Line 888-898-0470

CDCN Fraud Hotline 877-532-8530

CDCN Fax Line 877-898-0417

Adult Protective Services

Area I (Coeur D'Alene) 208-667-3179

Area II (Lewiston) 208-743-5580

Area III (Boise) 208-332-1745

Area IV (Twin Falls) 208-736-2122

Area V (Pocatello) 208-233-4032

Area VI (Idaho Falls) 208-522-5391

Area I = Benewah, Bonner, Boundary, Kootenai, & Shoshone
Area II = Clearwater, Idaho, Latah, Lewis, & Nez Perce
Area III = Ada, Adams, Boise, Canyon, Elmore, Gem, Owyhee, Payette, Valley & Washington
Area IV = Blaine, Camas, Cassia, Gooding, Jerome, Lincoln, Minidoka, & Twin Falls
Area V = Bannock, Bear Lake, Bingham, Caribou, Franklin, Oneida, & Power
Area VI = Bonneville, Butte, Clark, Custer, Fremont, Jefferson, Lemhi, Madison, & Teton

State Fraud Hotline 208-334-5754

Office of Inspector General Line 208-334-4100

Email
InfoCDID@ConsumerDirectCare.com

Website (forms and information)
http://www.ConsumerDirectID.com

Web (online time entry)
https://MyDirectCare.com

Welcome!

Welcome to self-directed services! We are the Consumer Direct Care Network. CDCN encourages people to have more control and choice over the services they receive. We want you to live the life that you want. People who self-direct their services report being happier with the services they receive. They also like the freedom they have as a result.

CDCN provides services and supports that help older adults and people with disabilities remain safe, healthy, and independent in their own homes. We specialize in self-directed care. We provide a variety of options for those who self-direct their care and services. We have extensive experience with Medicaid, Medicare, private insurance, and supporting people who manage their own care. We believe deeply in the philosophy of self-determination, a process that enables a person to remain in control of their own life. We value the strength and ability of each person. We believe that by helping you stay involved in the direction of your own care, we contribute to your health and help build healthier, happier communities.

Mission
To provide care and support for people in their homes and communities.

Vision
To help people live the life they want.

Values

- Respect
- Integrity
- Service
- Excellence

Handbook
The purpose of this Handbook is to help Service Recipients and Employers understand their responsibilities in a self-directed program. Please read this Handbook carefully. We suggest you keep it as a reference for the future.

Definitions

- Service Recipient – The individual receiving services. Also known as the Participant. They are the Employer Identification (EIN) holder.
- Employer – The Employer may be the Service Recipient or their Representative, Legal Guardian, etc. The Employer is tasked with hiring, firing, and scheduling Employees.
- Employee – An individual hired by the Employer to provide authorized services for the Service Recipient. Also known as the Community Support Worker.
- Case Manager – A healthcare professional that assesses, plans, facilitates, coordinates care, and evaluates the Service Recipient to ensure that the Service Recipient receives the appropriate level of care.

If you have questions, you can get more information by:

- ☑ Looking up the information in this Handbook
- ☑ Calling CDCN

Welcome to CDCN! We hope your experience with CDCN is enjoyable and rewarding.

CDCN's Role and Responsibilities

What does CDCN do as the Fiscal Employer Agent?

CDCN follows all applicable Federal, State, and local laws. We also follow Federal and State Medicaid regulations, policies, and procedures.

Service Agreement

As the Employer, you must sign a service agreement. In the Agreement, you accept responsibility for all aspects of the Service Recipient's care. This includes hiring, training, scheduling and managing Employee(s). The Agreement is used to identify the Employer and CDCN's responsibilities. Please reference the most recent agreement for more information on duties unique to the Service Recipient's program.

Reporting of Abuse, Neglect and Exploitation

CDCN staff are mandatory reporters of suspected abuse, neglect and exploitation. This means if you tell us of an incident of abuse, we must report it. More information is included in the Abuse, Neglect, and Exploitation training module located in the Appendix. As an Employer, you must report any suspected abuse, neglect, or exploitation to Adult Protective Services (APS); please see the Contact Information page for the APS phone number.

Corporate Compliance Policy Statement

A policy is in place to assure compliance with all governmental laws, rules, and regulations. CDCN maintains and promotes integrity and ethical behavior. CDCN supports:

- Ethical standards.
- Standards of conduct.
- Has zero tolerance for fraud and abuse.

CDCN's Corporate Compliance Policy is available upon request.

Complaints and Grievances

Your feedback is very important to us. If you have a complaint or grievance regarding the services you receive from CDCN, please let us know. CDCN will respond to all complaints and grievances in a reasonable and prompt manner. We will work with you to attempt to reach a resolution.

Filing a Complaint or Grievance

A complaint should be filed if you have an issue with something within CDCN's reasonable control. For example, issues with our enrollment procedures, handling of payment issues, or web portal concerns. Complaints may be made verbally or in writing. Written complaints may be submitted using our Feedback Form and sent via email, USPS mail, or fax. The Feedback Form may be found in the Appendix or on the CDCN website.

If you feel your rights have been violated or you disagree with a CDCN Policy, you may file a grievance. Grievances must be submitted in writing for our review.

Once you file a complaint or grievance, CDCN staff will work with you to address your concerns. If you are not satisfied with the initial recommendations, then the issue will be escalated to the next supervisory level until your issue is resolved. All complaints and grievances will be responded to within CDCN policy timelines. Our Complaint and Grievance Policy is available upon request.

Service Recipient/Employer Responsibilities

Recruiting and Interviewing

Are you ready to hire your first Employee? Let's get started! Here are some helpful tips! Consider the community where the Service Recipient lives. The Employer may be able to create an advertisement on a flyer and post it in the community. Possible locations to post the advertisement:

- Grocery Store
- Laundromat
- Community college or university
- Community newspaper
- Center for Independent Living
- Grocery store
- Church
- Social service agency
- Free weekly advertising guide
- Rehabilitation agency
- Social media websites
- State and local professional website

Call these places first. Find out whom to talk to and about their rules for posting flyers or submitting an advertisement.

Get the Word Out

The Employer may tell family, friends, other Service Recipients and even people they meet that they are looking for an Employee. Many times other Service Recipients have Employees who want to work more hours or who are willing to fill in. Be sure to tell the Service Recipient's Case Manager. The Case Manager may know someone to recommend. Getting the word out can increase the chance of finding a reliable candidate for the job.

Things to Remember While Screening Job Applicants

There are some questions that cross a legal boundary and the respect of a potential Employee. These types of questions cannot be asked while screening job applicants. **Here are some examples of questions that can and cannot be asked in an interview:**

Can Ask

- Tell me about yourself
- Why do you want this job?
- A normal day would like... Are you still interested in this position?
- What experience do you have in providing care to someone?
- What types of training have you had that would aid you in this position?
- What are your goals in the next year?
- There are a lot of tasks that need to be completed within the shift. If one took longer than it normally does, what would you do to ensure that the rest of the tasks were completed within the allotted time?

Cannot Ask

- How old are you?
- What is your native language?
- Are you married?
- Do you have any children?
- Have you ever been arrested?
- What church do you attend?
- What is your religion?
- Do you belong to any clubs/organizations?
- What is your credit rating?
- Do you own or rent your home?
- What country were you born in?
- Do you have a disability or medical condition?

- What do you look for in an Employer?
- Do you have any questions for me?
- Are you a Republican or Democrat?
- What are your family members' names?

Criminal Background Checks

A background check, or waiver to the background check, must be performed on all applicants prior to hire. Prospective workers must meet one of the three requirements below to be approved for hire:

- Pass a background check;
- Have a background check waiver filled out by the Employer and signed by the Support Broker; or
- If the prospective worker fails a background check, the Employer may fill out a waiver. By filling out this waiver, the Employer acknowledges that they understand the worker has failed the background check and would still like to hire them. The Support Broker must sign the waiver.

If a prospective worker fails a background check and the Employer does not fill out a waiver, the prospective worker cannot be hired.

Hiring Employees

As an Employer, it is your responsibility to hire your Employee(s). It is our role at CDCN to support you through this process. The following is an outline of the paperwork that will be required of each Employee that you hire.

Employee Packet

Once an Employer finds the person they would like to hire, the prospective Employee needs to complete an Employee Enrollment Packet. This packet can be obtained by visiting the CDCN website, emailing, or calling us.

The Employer is required to ensure that the Employee Enrollment Packet is completed. Please double check that the packet is filled out completely. Incomplete packets will be returned for corrections and may cause a delay in pay for the Employee. Employees should not begin working until the Employer receives an okay to work confirmation from CDCN. No time will be paid to an Employee until the Employee Enrollment Packet is processed. All time worked must fall within the Service Recipient's Support and Spending Plan dates.

Remember: Contact CDCN if there is a problem with an Employee and you don't know how to respond.

Managing Employees

As the Employer, you will have to manage and supervise Employee(s). Managing and supervising Employees requires that the Employer:

- Give new Employees an orientation to the job.
- Train all Employees
- Set a work schedule.
- Be direct and assertive with communication.
- Give positive and constructive feedback.

- Create a good working relationship.
- Treat all Employees consistently and fairly.
- Deal with conflict.
- If necessary:
    - Implement corrective action.
    - Terminate Employees.

How you manage and supervise your Employees may affect how happy they are working. Employee happiness may affect the quality of the services that your Employee provides and how long an Employee will work for you.

Orientation

An Employee's first day of work is the perfect time to orient them to the job and discuss expectations. Try to schedule the first day at a time when the Employer and the Employee do not have to rush. The Employer may consider:

- Being very clear about job duties.
- Organizing paperwork, training materials, etc.
- Thinking ahead: If the Employee will be cleaning the house, think about how to get supplies, their role in buying supplies, the need to keep receipts, where to store the supplies, etc.
- Setting the work schedule.
- Identifying house rules that the Employee may need to know about.

At the end of the first day, tell the new Employee the things they did well. That will help them know to keep doing those things.

Orientation may include:

1. A tour of the living space.
    a. Show the new Employee where supplies and equipment are kept.
    b. Tell the Employee of any living space that is off limits.
    c. Show the Employee where emergency exits are.
    d. Show the Employee where the fire extinguisher is and how to use it. Tell them how to get out of the house if there is a fire.
2. Give information about the Service Recipient's disability – is there anything specific the Employee should know (i.e., trouble falling asleep? sensitive to certain smells? blood sugar issues? seizures? any allergies?)
3. Give information about the house rules.
    a. Style of communication.
    b. Dress code.
    c. No smoking on premises.
    d. Limiting cell phone usage to emergency calls.

e. No loud music.

4. Explain and show what the Employee needs to do.
   a. Give an overview of the job duties.
   b. Use a checklist, job description, or other method to explain specific duties in the order the Service Recipient wants them done.
   c. Have him or her observe an experienced natural support completing all the tasks.
   d. Instruct one step at a time. Make sure the Employee can do the step before going on to the next step.
   e. Consider using a training video.
5. Safety and Security
   a. Lifts and Transfers - Review safe procedures for completing lifts and transfers. A pamphlet on this is available upon request.
   b. Discuss safety guidelines for any disability-related equipment the Employee will be expected to use.
   c. Reinforce safety guidelines for any household appliances or equipment the Employee will be expected to use.
   d. Discuss the emergency and backup plan with the Employee.
   e. How will the Employee get in and out of the Service Recipient's home? If the Service Recipient is not able to open the door, set up a procedure so that the Employee can get in and out.
   f. Infection Control - Reinforce the importance of washing hands thoroughly before preparing food, and before and after personal care duties. Discuss the use of gloves and where they are stored if preferred. Let him or her know if there is a sharps container.). An Infection Control Plan training pamphlet is available upon request.
   g. A Safety Orientation pamphlet is available upon request.
6. Expectations – The Employer needs to be clear with expectations of the Employee's performance. It is better to start firm and then relax. The Employer needs to stress the topics that are important to him or her. Here are some examples:
   a. Confidentiality - What you (the Service Recipient/Employer) say and do while the Employee works should remain confidential. The kind of help being provided by the Employee is personal. Your Employee(s) should not discuss your confidential information with others, including friends, family members, or other individuals. Some people think that as long as they are not saying something bad about the Service Recipient, then what they say is not a violation of confidentiality. The Employee should be reminded that it is not only disrespectful, but that violating confidentiality can be grounds for termination. A HIPAA Employee Training Guide is included in the Appendix. As the Employer, you may have your Employee review this guide.
   b. Use of household items – The Employer needs to give some thought to the rules regarding use of the phone, car, washing machine, computer/printer, and eating the

Service Recipient's food. State these rules clearly at orientation. It is easier to state the rules clearly during the first meeting, than to wait until after an offense has happened.

c. Tell the Employee the rate of pay. Explain the pay schedule and other time sheet reporting requirements.

Training Employees

As the Employer, you will need to train all new Employees. Below are some training tips to consider.

1. Here are three steps that may be used when training the Employee:
   - Tell the Employee what he or she will be taught.
   - Tell the Employee what they are expected to learn.
   - Repeat what the Employee was told.

   If more training is needed, have a second session. Briefly review what was taught in the first session and then begin new material.
2. When giving instructions for a task, such as transferring out of the wheelchair, describe each step of the task. Do not move to the next step until the Employee has the first step down.
3. Do not assume that the Employee will understand what is being taught right away. Ask for feedback and encourage questions.
4. When explaining any task or routine to the Employee, describe why it is important for something to be done in a certain way or at a specific time.
5. Be consistent in explaining things. If something is changed, explain why it was changed.
6. Be patient. The Employee probably will not get all your directions right the first time.
7. Try to be aware of how much the Employee can learn at one time. Some individuals may be able to learn a whole task or routine at once; others may require more gradual training sessions.
8. Give the Employee both constructive feedback (how to improve) and positive feedback.

Make sure to treat all Employees equally. What is done for one Employee must be done for another. Being consistent with training and orientation for each Employee is important; doing so will help prevent discrimination charges and unemployment claims.

Work Schedule

The work schedule helps the Employee know what days of the week and times he or she needs to work. The Employer sets the schedule and outlines the tasks the Employee needs to complete at work. This may be found on the agreement between the Employer and Employee and the Employee's job description.

Sometimes issues come up where the Employee may not be able to work a scheduled shift. The Employer may choose to be flexible with the work schedule during these times or choose to use a backup Employee. Just remember that the work schedule should be based off of the Service Recipient's needs and authorized level of care; **the Employee should never dictate the work schedule.**

Direct Communication and Being Assertive

Working with an Employee that provides in-home services is different from other working relationships. Most other Employer-Employee relationships do not involve such personal contact. In order to be a good supervisor and be sure needs are being met, the Employer will have to be assertive and direct with communication. Employer

How the Employer communicates with the Employee is a big part of the success of the Employer-Employee relationship. Sometimes a friendship already exists. If this is the case, it is important for both the Employer and Employee to remember the roles in the working relationship.

Being assertive and direct with communication means:

- Speaking up for oneself.
- Explaining care needs.
- Being clear with likes and dislikes.
- Being respectful.
- Using "I statements." For example, "when you do _____, I feel _____."

This communicates the effect of the Employee's behavior and does not personalize the feedback.

Positive and Constructive Feedback

Being a supervisor means that it is the Employer's responsibility to help the Employee do his or her job to the Service Recipient's satisfaction. The Employer should give specific feedback about how the Employee is doing.

There are two forms of feedback – constructive feedback and positive feedback. Constructive feedback should be used to inform the Employee on how to improve their job performance. Positive feedback lets the Employee know that they are doing a task to the Service Recipient's satisfaction.

Constructive Feedback:

If the Service Recipient is unhappy with how the Employee is doing something, use constructive feedback to tell or show the Employee how to do the task differently. For example: "I need you to cut up my food into smaller pieces, please."

- When the Employee does a procedure incorrectly, bring it to their attention. Patiently remind him or her of the correct way to do it.

Positive feedback:

If the Service Recipient is happy with how the Employee is doing a task, use positive feedback by complementing, thanking, and showing appreciation to the Employee. Positive feedback lets the Employee know that they are doing the task correctly and to keep doing it that way. For example: "Thanks for cutting up my meat this size. It is easier for me to chew and swallow."

- When the Employee does a procedure correctly, praise their performance by telling the Employee exactly what was performed correctly.

Open communication and feedback with the Employee is important. The more transparent the

Employer is the better. This will ensure that everyone is on the same page.

The Employer should try to:

- Create a positive relationship with the Employee.
- Create a pleasant work atmosphere.
- Give clear feedback – both positive and negative as necessary. Employee
- Explain the rules clearly and expect them to be followed.
- Explain the consequences of breaking the rules.
- Be consistent in how they respond to each Employee.
- Be a coach. Teach and encourage.

Creating a Good Working Environment

It is hard to find good Employees so it is important to create a relationship that is long lasting. Most Employees stay with a job because it is personally rewarding. You want the Employee to be satisfied with his or her work and continue to work for you. Below are some ideas for creating a good working environment:

- Treat Employees with kindness, fairness, and respect.
- Be constructive with feedback. Focus on the behavior, not the person.
- Keep communication open.
- Discuss problems as they arise. Avoid taking out frustrations on the Employee.
- Be flexible when possible. For example, if the Employee asks to come in a few minutes late because they have an event at school for their child.
- Get feedback from the Employee to help you evaluate how the job is going.

To summarize, you have the opportunity to provide a positive work environment for the Employee. This, in turn, helps the Employee be happy, productive, and motivated to work. An Employee who is happy in his or her work will stay longer and do a better job.

Treating Employees Consistently and Fairly

It is important to treat all Employees consistently. If not, an Employee may feel like the Employer is discriminating against him or her. For example, if the Employer lets one Employee be flexible with the time she starts her shift, allowing another Employee the same courtesy is something to consider. When Employees have special requests, like leaving early to go to a child's baseball game, it is nice to grant the request; just remember the same consideration for each Employee.

It is equally important to treat Employees fairly. Use both constructive and positive feedback to teach Employees how to do their job. It is important to keep track of the feedback given in a notebook, in case the Employee does not improve and the Employer needs to dismiss them. That way, if the Employee claims unemployment, he or she cannot say that they were wrongfully discharged. A wrongful discharge can result in unemployment rates increasing.

Be respectful of all Employees. Raising one's voice, calling the Employee names or yelling at them affects how Employees feel about their job. This behavior can be viewed as abusive even if the Employee is a family member. The Employer should treat Employees as he or she wants to be treated. This is called mutual respect.

Employer Responses
After working for a while, the Employee may start doing some things that the Employer does not approve of. For example, an Employee is frequently late for work. A policy may need to be set that applies to being late. The policy could be that being late three times automatically means that the Employer will decide whether to keep using the Employee.

The Employer may set a policy that if an Employee takes something without asking, he or she will be dismissed immediately. If you dismiss an Employee, please notify CDCN immediately.

It is good to inform the Employee of consequences to negative behavior. **Remember, a policy set for one Employee must be applied to all Employees.**

Resolving Conflict
Conflicts are a natural part of establishing and building a relationship. Conflict is not the problem. It is usually how people deal with the conflict that is the problem. It is important to deal with conflicts as they come up. It is best to keep emotions in check so things do not get worse than they should be. Employees will usually respond in a non-threatening and positive way if the Employer is fair and consistent.

If there is a conflict over job duties, pay, time off, social conduct or use of property, remind the Employee of the original agreement. If the Employee refuses to follow the rules, be prepared to replace them.

If a problem comes up, it may help to use a step-by-step process to resolve the problem. Here is a helpful guide in the event of a conflict:

1. Identify the Problem
   This seems simple enough, but sometimes not everyone will agree that there is a problem. As an example, it may be a problem for the Employer that the Employee wears headphones and listens to music when cleaning the house, but it is not a problem for the Employee.
2. Define the Problem
   Try not to attach motives, blame and make value judgments. Ask open-ended questions and use active listening to get a better understanding and definition of the problem. Whose responsibility is it to solve the problem? Examples include:
   - A broken wheelchair is the Employer's problem, but the Employee could help solve the problem.
   - An Employee who listens to music when cleaning is the Employer's problem because the Employee cannot hear when the Service Recipient might need him or her.
   - The Employee lost her childcare and cannot make other arrangements for a week. This

problem belongs to both the Employer and Employee.

When solving problems, each person involved should have input. Whoever has ownership of the problem should make the final decision.

3. Brainstorm Ideas for Solutions
   Everyone involved should suggest solutions. Do not criticize any suggestions at this step. Brainstorm as many ideas as possible. Write down every solution, no matter what it is.
4. Discussion and Evaluation
   Everyone involved should discuss the positives and negatives of each solution suggested. Writing out a list of the good and bad can help in the evaluation process.
5. Recognize if Compromise is Necessary
   Decide on the solution that will best solve the problem.
6. Make a Plan
   Everyone involved should agree on who will do what, where, when, and how to solve the problem.
7. Evaluate the Solution
   Set a date and time to discuss whether the solution is working and revise the plan as needed. By facing problems right away, working relationships can be strengthened and improved. Working relationships that use problem solving can keep everyone working as a team and with less stress.

Corrective Action

When an Employee is not following rules or meeting the Employer's expectations, it is the responsibility of the Employer to let the Employee know so he or she can correct his or her behavior. Many Employers use a 3-step process called "progressive discipline." This process helps Employees understand that their work must be improved or corrected. The steps are:

1. Verbal warning
2. Written warning
3. Job termination

Progressive discipline gives the Employee opportunity to improve. If they do not, the Employer will need to think about whether he or she wants them to continue working. By putting it in writing (even if a verbal warning), the Employee cannot deny being talked to before he or she was dismissed. It is also a good idea to decide a plan of action. What will the Employee do to improve? Is there something the Employer can do to help?

Remember to write down issues as they occur. This way you have specific examples when discussing the issue(s).

If there is a problem, it helps to:

1. Schedule an extra appointment with the Employee. In order for it to be paid time, the discussion must occur within the authorized hours.

2. Before the meeting, write down any concerns. This way thoughts are organized and key points are remembered. Discuss concerns. Be aware of emotions and how they affect what is being said. Anger, being critical or defensive will not help explain concerns.
3. Use "I" statements. This shows ownership of the experience. For example: "I feel frustrated about your late arrival every day. It makes me anxious because I worry about getting to the bathroom." Avoid blaming. For example, saying "you do not care about me or you would be on time" will put the Employee immediately on the defensive. They will not hear the whole problem.
4. Let the Employee have a chance to voice his or her concerns.
5. The Employer needs to be willing to examine him or herself and own their part in the conflict.
6. Come to a final agreement about the problem. Put it in writing so that each person leaves with the same understanding of what will happen.

If it is not possible to solve the problem, remember that there is support available. Sometimes involving someone else is helpful. Call CDCN or the Case Manager.

Terminating Employees

Employees may choose to end their employment with the Employer, or vice versa. Upon termination of employment, a final time sheet must be submitted. CDCN must receive the final timesheet within two (2) business days of the last date of employment so that the Employee receives final payment timely. The Employee's final check will be paid either by the next payday or within 10 days, whichever comes sooner. If the Employee submits a written request for immediate pay, then they will receive their final paycheck within 48 hours of the request.

Paying Employees

Employers are required to submit documentation of time worked for each Employee that is providing services. Online time cards and paper timesheets are legal documents that track actual hours worked. Paper timesheets should be filled out bi-weekly and submitted to CDCN by no later than midnight on Monday following the payroll week. Online time cards should be entered into the system and approved no later than midnight on the Wednesday following the payroll week. Submitting time online via the web portal is the best method of time entry. It is a more accurate and efficient process:

- There are no paper forms to deal with when using the web portal. Employees enter time in the secure and confidential site. When the pay period is complete they can then submit the time for Employer approval. There is no paper involved. This means that there is no paper to lose, misplace, or forget to send.
- There's no worry about mis-typing Employee ID numbers, or service codes; the system already knows those settings.

For web portal, the Employee must enter the time they worked, not the Employer. The Employer must approve the time after the Employee has submitted it. Instructions for submitting time via the web portal are available on the CDCN website.

In addition to the web portal, paper timesheets may be used. If using paper timesheets, it is important to remember that they cannot be photocopies of previously submitted timesheets. **Signatures must be originals every time.** For timesheet requirements, please refer to the timesheet instructions on the CDCN website.

CDCN will issue payment to the Employee on behalf of the Employer. Payment will occur on a biweekly basis following submission of accurate time. **Please approve all time worked upon completion of the Employee's last shift of the work week.** Time must be submitted no later than the following Monday at midnight in order to be paid according to the pay schedule. Late time may result in late pay.

Making Corrections
For online time, corrections must be made prior to the Employer approving the entry. For paper timesheets, corrections may be made before or after submitting a paper timesheet.

If you need to make a correction and have not submitted the timesheet yet, simply:

- Draw a single line through the error; and
- Enter the correct information on a new line.

Please do not use whiteout when making corrections.

If a correction must be made after submitting the paper timesheet, **do not** correct and resubmit the original. Instead, please:

- Use a blank timesheet; and
- Fill out only the lines of time that require correcting.

Incorrect or incomplete submission of time will need to be resubmitted with corrections. This may result in a delay of pay.

Working Hours
Employees must fulfill their commitments to all hours and schedules they accept from the Employer. Definite hours are not guaranteed. Positions are classified as "temporary" because the work is not guaranteed. The Employer will determine job duties and work schedules based on the Service Recipient's current and approved plan of care.

An Employee will not be paid for hours worked or tasks performed that are not authorized on the plan of care. The Employer may be responsible for payment if the Employer has the Employee:

- Work hours that are not authorized on the plan of care.
- Do tasks that are not approved.
- Work is performed prior to receiving approval to work from CDCN.

Payroll
Payment may be issued through direct deposit to the Employee's bank account or by pay card. Pay days are every other Friday. For more information, please see the Payroll Calendar located on the CDCN website. Paper checks may be used from time to time. The Employee's first and second

paycheck will likely be sent via paper check. Paper checks are sent via United States Postal Service (USPS). Delivery time depends on the local USPS. Paystubs (a summary of pay) are sent to the Employee's current address on file; they are mailed from CDCN's processing center on Thursday of each payroll week. In order for the Employee to be paid correctly, time **must** be received by midnight on the Monday following the week worked.

W2's are issued to all Employees for the previous year. These will be sent out in accordance with IRS requirements. If an Employee has not received a W2 by February 10th, please contact CDCN.

If an Employee's address changes, they must update their address with CDCN. Otherwise, their W2 and paystubs will continue to go to their old address.

Workplace Harassment

The Employer has a responsibility to keep the workplace harassment free. All forms of harassment, including sexual harassment, are prohibited. Harassment includes the use of degrading words, or behaviors toward an individual or individual's characteristics. Characteristics include:

- Race
- Color
- Religion
- Gender
- Sexual Orientation
- Gender Identity
- National Origin
- Age
- Disability
- Genetic Information
- Marital Status
- Any other characteristic protected by the law

Harassment is prohibited by Title VII of the Civil Rights of 1964, the Equal Opportunity Commission, and State regulations.

Sexual Harassment

Sexual harassment, as defined by the U.S. Equal Employment Opportunity Commission (EEOC), is any unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature when any of the following occur:

- The conduct implicitly or explicitly affects an individual's employment.
- The conduct unreasonably interferes with an individual's work performance.
- The conduct creates an intimidating, hostile, or offensive work environment.

Sexual harassment may include a range of subtle and not-so-subtle behaviors. It may involve individuals of the same or different gender. Examples of prohibited sexual harassment include, but are not limited to:

- Sexual flirtations, touching, advances, or propositions.
- Verbal abuse of a sexual nature.
- Graphic or suggestive comments about an individual's dress or body.
- Sexually degrading words to describe an individual.
- The display of sexually suggestive objects or pictures, including nude photographs.

Reporting Harassment
Everyone in the workplace must always conduct themselves in a manner consistent with the spirit and intent of this policy. If an individual believes he or she is a victim of harassment, he or she may choose to take action before filing a formal complaint. When talking to another individual regarding harassment, the individual must:

- State the facts as they see them.
- Describe their feelings or reactions to the incident (s).
- State what he or she would like to happen next.

An individual may, at any time, file a complaint. It is recommended that the individual initially file a complaint with CDCN. This provides the Company the opportunity to intervene in and potentially resolve the situation. Retaliation or intimidation directed towards anyone who makes a complaint will not be tolerated. Complaints concerning a perceived violation of this policy may also be filed with either your state's Equal Rights Division or the United States' Equal Employment Opportunity Commission.

Alcohol and Drug Free Workplace

The Employer has the right to an alcohol and drug free workplace. Being under the influence of /or having alcohol or any illegal drug, in any amount while working, is not allowed. Violating this practice may result in an Employee losing his or her job.

Confidentiality and Disclosure

The Service Recipient's information is private. Your Employees should **not** share any of the Service Recipient's information. This includes the Service Recipient's medical care.

There are special circumstances when an Employee may disclosure the Service Recipient's information. **Your Employees should report to CDCN any situations of potential harm.** They should also report the issue to the Service Recipient's Case Manager and, if necessary, the authorities. CDCN may forward these reports on to the appropriate authorities. Below are examples of concerns that CDCN may report to the appropriate authorities.

Any reasonable cause to suspect:

- That the Service Recipient has threatened, or poses a threat to, the physical safety of another person, and it appears possible that the threat may be carried out.
- That the Service Recipient is at risk of imminent bodily harm.
- Death or other reportable incidents.

Termination of Services

Services may be terminated by CDCN or the Service Recipient. The process is as follows:

By CDCN
CDCN may terminate the working relationship with a Service Recipient. In accordance with our policy, we must provide advance written notice to the Service Recipient. We will not terminate services without offering additional training to the Service Recipient or encouraging the use of a personal

representative. However, for violations of CDCN policies or state regulations, services may be terminated immediately. Please refer to the most recent service agreement for more information; a blank copy may be found on the CDCN website.

By the Service Recipient
The Service Recipient may choose to terminate services at any time; however, 30-days prior notice is preferred. The termination may involve dropping out of the self-directed program or transferring services to another program. If the Service Recipient would like to transfer services to another provider, please give CDCN a 60 day notice prior to transferring.

Reporting Status Changes/Notifications to CDCN

The Service Recipient/Employer and Employee must inform CDCN within one (1) business day of any change in the following:

- Name (Please submit an updated Social Security Card)
- Mailing address
- Phone number
- Employee bank account (if Employee is using Direct Deposit)
- Dismissal or resignation of an Employee
- Service Recipient hospitalization or rehabilitation intake and discharge dates
- Guardianship status

Delayed reporting of this information could result in delayed or incorrect pay.

Safe Work Environment

The Employer and their Employee are responsible for:

- ✓ Maintaining a safe and healthy work environment
- ✓ Following all federal, state, and local health and safety laws and requirements
- ✓ Always following correct practices and procedures to avoid injuries and illnesses

Please report any unsafe conditions immediately to the Service Recipient's Case Manager, Adult Protective Services, or the authorities, as appropriate. The number to Adult Protective Services is included on the Contact Information sheet for your convenience.

A Home Safety Check Resource Form is included in the Appendix. This form may be used to assist in identifying safety issues within the Service Recipient's home. Usage of this form is not required and is given as a resource.

Employee Safety and Accident Prevention

Employees must follow usual procedures for working safely and preventing accidents. Employees are expected to follow all safety rules and procedures. If personal protective equipment is required, Employees must wear it. The Employer provides personal protective equipment, if it is necessary. Employees should report any unsafe conditions, equipment, or practices immediately to the Employer or CDCN.

Medicaid Fraud

The money for services in the program comes from state and federal governments. Fraud or abuse of this Medicaid program is against the law. Suspected cases of Medicaid fraud or abuse must be reported to the State by the Company.

Examples of Service Recipient/Employer or Employee fraud and abuse of Medicaid funds are:

- Writing down more time than was actually worked on a time sheet.
- Accepting pay for time that was not worked.
- "Padding" time sheets. Examples are:
    - Showing up late or leaving early and writing down more time than actually worked.
    - Taking a break and not subtracting break time when the time is recorded.
- Changing another person's time sheet or paperwork.
- Forging an Employee's or Service Recipient/Employer's signature.
- Turning in a false claim for time worked or tasks completed when these were not done and there was knowledge of it.
- Suggesting or helping a Service Recipient get services or supplies that are not required for the person's disability.
- Not providing the quality of services for a Service Recipient that is expected.
- Falsifying employment documentation.

All cases of possible Medicaid fraud and abuse must be reported immediately. Please report cases to CDCN by calling the Fraud Hotline at 1-877-532-8530. You may also report to your state's fraud hotline or the Office of Inspector General. Their respective phone numbers can be found on the Contact Information page at the beginning of this Handbook.

For additional training, please see our fraud prevention video on the CDCN website.

Appendices

Home Safety Check Resource Form
HIPAA Guide
Fraud Prevention Program
Abuse, Neglect & Exploitation
Web Portal
Mileage Reimbursement
Paying Vendors
Zsecure
Feedback Form

CONSUMER DIRECT CARE NETWORK

HOME SAFETY CHECK

Participant	Location	Date

FIRE:

Is an Evacuation Plan in place in the event of a fire? ☐ Yes ☐ No ☐ N/A

Are there Special Needs to be considered during an evacuation? ☐ Yes ☐ No ☐ N/A

If yes, what are the Special Needs? *Example: Oxygen in use.*

_____

_____

_____

Has the local Fire Department been notified that this is a Special Needs Residence? ☐ Yes ☐ No ☐ N/A

Phone number of local emergency agency: _____

ELECTRICAL:

Ground fault interrupters on outlets near bathroom and kitchen sinks? ☐ Yes ☐ No ☐ N/A

Are electrical cords in safe condition? ☐ Yes ☐ No ☐ N/A

Electrical switches and outlet boxes have covers? ☐ Yes ☐ No ☐ N/A

BUILDING SERVICES AND SAFETY EQUIPMENT:

Any concerns with the following?

Building Services - ☐ Heat ☐ Sewer ☐ Phone ☐ Water ☐ Electricity

Safety Equipment - ☐ Smoke Detector ☐ Fire Extinguisher ☐ Flashlight ☐ Other: _____

WALKWAYS:

Clear, adequately lit, free of trip hazards? ☐ Yes ☐ No ☐ N/A

Handrails along stairways and balcony edges? ☐ Yes ☐ No ☐ N/A

Safe, unobstructed emergency escape route? ☐ Yes ☐ No ☐ N/A

Provisions made for maintaining outdoor walkways? ☐ Yes ☐ No ☐ N/A

Who will you contact if walkways need clearing?

Name: _____ Phone: _____

PERSONAL SAFETY:

Does parking allow safe access to home? ☐ Yes ☐ No ☐ N/A

Parking location: _____

Describe any apparent safety risks associated with this residence: _____

_____

CONSUMER DIRECT CARE NETWORK

HOME SAFETY CHECK

Describe procedures to minimize risks: _____

_____

Any pet issues?: _____

_____

HAZARDOUS MATERIALS:

Are sharps (needles, etc.) properly disposed of? ☐ Yes ☐ No ☐ N/A

Are there any hazardous materials in the home? ☐ Yes ☐ No ☐ N/A

If yes, please describe:

_____

_____

_____

ADDITIONAL COMMENTS/OBSERVATIONS:

_____

_____

_____

_____

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_____

_____

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_____

DO NOT RETURN TO CONSUMER DIRECT CARE NETWORK

This form is for use by you, the Participant. It is intended to assist you in identifying safety issues in your home. All actions taken in response to any issues that may arise from completing the Home Safety Check are the sole responsibility of the Participant.

CONSUMER DIRECT CARE NETWORK

HIPAA Employee Training Guide

Revised January, 2018

EVERY LIFE. EVERY MOMENT. EVERY DAY.

What is HIPAA?

The Health Insurance Portability and Accountability Act of 1996 (also known as "Kennedy-Kassebaum Act").

HIPAA regulations address the use and disclosure of Protected Health Information (PHI).

Key HIPAA Elements:

- Health Insurance Portability
- Standards for Electronic Claims Submission
- Security and Privacy Protection

Security and Privacy are addressed in this Training Guide.

Who is covered by HIPAA?

Covered Entities (CEs) are organizations that are required to comply with HIPAA standards. There are three types of covered entities:

1. Health plans
2. Health care clearinghouses
3. **Health care providers*** who transmit any health information in electronic form in connection with one of the standard transactions.

* Consumer Direct Care Network (CDCN) is a health care provider and therefore considered a CE.

When did the "HIPAA Privacy Rule" go into effect?

Effective as of April 14, 2003; Revised January 25, 2013

What is PHI (Protected Health Information)?

PHI is any health information that contains a unique identifier (to a patient) such as full name, social security number, phone number, etc. PHI is to be protected and kept confidential, whether in **handwritten, printed, electronic, or verbal form**.

Patients Will Be Notified of Their HIPAA Rights

Each patient will receive the CDCN Notice of Privacy Practices which explains how medical information may be used and disclosed, and how the patient can access their information. **Ask a Program Manager or the Privacy Officer if you have or receive questions.**

Patients Can Request Confidential Communication

CDCN will accommodate reasonable requests from patients to use alternate channels of communication (e.g. work telephone instead of home telephone, alternate mailing address, etc.). **Ask a Program Manager if you have questions.**

When is "Authorization to Release Information" NOT required by the Patient?

For treatment, payment, or healthcare operations.

What are HIPAA "Uses and Disclosures" of PHI?

Use: The sharing, employment, application, utilization, examination, or analysis of such information by an entity that maintains such information.

Disclosure: The release, transfer, provision or access to, or divulging in any other manner of information outside the entity holding the information.

Patients Access to Medical Records

Patients may wish to view information in their medical records and may express disagreement with its content. CDCN has procedures in place for patients to request access and make corrections to their CDCN records. In the event of any such request by a patient, **ask a Program Manager or the Privacy Officer for assistance.**

"TOP TEN" HIPAA Tasks

1. Assign overall responsibility for privacy and security.
   *The CDCN **Privacy Officer is Daryl Holzer,** who has overall responsibility for privacy issues. **Program Managers** are available to address any HIPAA-related questions. **Jeff Harriott** is the **Security Official** responsible for security measures.*

2. Establish procedures for handling PHI.
   *CDCN has a Privacy Policy (a copy of which is enclosed in this Training Guide) and a Privacy Manual with which to manage privacy issues. **A Program Manager or the Privacy Officer can address your questions.***

3. Provide physical security.
   Includes physical security of office facilities, medical records, billing information, and other PHI. Physical security measures may include using locking file cabinets where PHI is stored.

4. Provide technical security.
   Includes securing information stored and transmitted via computers.

5. Establish rules for protecting patient privacy.
   This is an essential part of maintaining patient confidentiality. CDCN has Patient Confidentiality requirements outlined in the Employee Handbook that require each employee to maintain the confidentiality of patient information.

6. Allow patient access to medical records.
   *Patients have the ability to access their medical information and have control over who may review their information. **Ask a Program Manager for more information.***

7. Respond to complaints
   CDCN has HIPAA compliant forms available for handling any complaint that may occur as a result of privacy protection. ***Ask a Program Manager for more information.***

8. Publish a Notice of Privacy Practices.
   *CDCN has posted a **N**otice of **P**rivacy **P**ractices (NPP) and also provided written notice to each of our patients regarding their rights.*

9. Ensure that Business Associates protect patient privacy.
   Business Associates are not Covered Entities (health care providers), like outside consultants, who may come in contact with our Protected Health Information. CDCN will ensure that any business associate protects PHI via contractual agreement.

10. Train the workforce
    CDCN will ensure employees are educated on HIPAA, maintaining confidentiality, protecting PHI, and are familiar with the CDCN HIPAA policy.

HIPAA PENALTIES

- $100 civil penalty up to a maximum of $25,000 per year for each standard violated
- Criminal penalties for knowingly disclosing PHI up to a maximum of $250,000

PRIVACY POLICY STATEMENT

Purpose: *The following privacy policy is adopted to ensure that CDCN complies fully with all federal and state privacy protection laws and regulations. Protection of patient privacy is of paramount importance to CDCN. Violations of any of these provisions will result in severe disciplinary action including up to termination of employment and possible referral for criminal prosecution.*

Effective Date: *This policy is in effect as of April 1, 2003; revised March 26, 2013*

Expiration Date: *This policy remains in effect until superseded or cancelled.*

Privacy Officer: *Daryl Holzer (877) 532-8530*

Uses and Disclosures of Protected Health Information

It is the policy of CDCN that protected health information may not be used or disclosed except when at least one of the following conditions is true:

1. The individual who is the subject of the information has authorized the use or disclosure.

2. The individual who is the subject of the information has received our Notice of Privacy Practices and acknowledged receipt of the Notice, thus allowing the use or disclosure, and the use or disclosure is for treatment, payment or health care operations.
3. The individual who is the subject of the information agrees or does not object to the disclosure, and the disclosure is to persons involved in the health care of the individual.
4. The disclosure is to the individual who is the subject of the information or to the U.S. Department of Health and Human Services for compliance-related purposes.
5. The use or disclosure is for one of the HIPAA "public purposes" (i.e. required by law, etc.).

Deceased Individuals

It is the policy of CDCN that privacy protections extend to information concerning deceased individuals.

Notice of Privacy Practices

It is the policy of CDCN that a Notice of Privacy Practices must be published, that this Notice and any revisions to it be provided to all individuals at the earliest practicable time, and that all uses and disclosures of protected health information are in accordance with CDCN's Notice of Privacy Practices.

Restriction Requests

It is the policy of CDCN that serious consideration must be given to all requests for restrictions on uses and disclosures of protected health information as published in CDCN's Notice of Privacy Practices. It is furthermore the policy of CDCN that if a particular restriction is agreed to, then CDCN is bound by that restriction.

Minimum Necessary Disclosure of Protected Health Information

It is the policy of CDCN that (except for disclosures made for treatment purposes) all disclosures of protected health information must be limited to the minimum amount of information needed to accomplish the purpose of the disclosure. It is also the policy of CDCN that all requests for protected health information (except requests made for treatment purposes) must be limited to the minimum amount of information needed to accomplish the purpose of the request.

Access to Protected Health Information

It is the policy of CDCN that access to protected health information must be granted to each employee or contractor based on the assigned job functions of the employee or contractor. It is also the policy of CDCN that such access privileges should not exceed those necessary to accomplish the assigned job function.

Access to Protected Health Information by the Individual

It is the policy of CDCN that access to protected health information must be granted to the person who is the subject of such information when such access is requested, or at the very least within the timeframes required by the HIPAA Privacy Rule. It is the policy of CDCN to inform the person requesting access where protected health information is located if we do not physically possess such PHI but have knowledge of its location.

Amendment of Incomplete or Incorrect Protected Health Information

It is the policy of CDCN that all requests for amendment of incorrect protected health information maintained by CDCN will be considered in a timely fashion. If such requests demonstrate that the information is actually incorrect, CDCN will allow amending language to be added to the appropriate document and this addition will be done in a timely fashion. It is also the policy of CDCN that notice of such corrections will be given to any organization with which the incorrect information has been shared.

Access by Personal Representatives

It is the policy of CDCN that access to protected health information must be granted to personal representatives of individuals as though they were the individuals themselves, except in cases of abuse where granting said access might endanger the individual or someone else. We will conform to the relevant custody status and the strictures of state, local, case, and other applicable law when disclosing information about minors to their parents.

Confidential Communications Channels

It is the policy of CDCN that confidential communications channels be used, as requested by the individuals, to the extent possible.

Disclosure Accounting

It is the policy of CDCN that an accounting of all disclosures subject to such accounting of protected health information be given to individuals whenever such an accounting is requested.

Marketing Activities

It is the policy of CDCN that any uses or disclosures of protected health information for marketing activities will be done only after a valid authorization is in effect. It is the policy of CDCN to consider marketing any communication to purchase or use a product or service where an arrangement exists in exchange for direct or indirect remuneration, or where CDCN encourages purchase or use of a product or service. CDCN does not consider the communication of alternate forms of treatment, or the use of products and services in treatment to be marketing. Furthermore, CDCN adheres to the HIPAA Privacy Rule that face-to-face communication with the patient, or a promotional gift of nominal value given to the

patient, does not require an Authorization. All marketing activities will be approved in advance by the Privacy Officer.

Judicial and Administrative Proceedings

It is the policy of CDCN that information be disclosed for the purposes of a judicial or administrative proceeding only when: accompanied by a court or administrative order or grand jury subpoena; when accompanied by a subpoena or discovery request that includes either the authorization of the individual to whom the information applies, documented assurances that good faith effort has been made to adequately notify the individual of the request for their information and there are no outstanding objections by the individual, or a qualified protective order issued by the court. If a subpoena or discovery request is submitted to us without one of those assurances, we will seek to notify the individual, obtain his or her authorization, or obtain a qualified protective order before we disclose any information. In no case will we disclose information other than that required by the court order, subpoena, or discovery request. All releases of information for Judicial and Administrative Proceedings must be approved in advance by the Privacy Officer.

De-Identified Data and Limited Data Sets

It is the policy of CDCN to disclose de-identified data only if it has been properly de-identified by a qualified statistician or by removing all the relevant identifying data. We will make use of limited data sets, but only after the relevant identifying data have been removed and then only to organizations with whom we have adequate data use agreements and only for research, public health, or health care operations purposes.

Authorizations

It is the policy of CDCN that a valid authorization will be obtained for all disclosures that are not for: treatment, payment, health care operations, to the individual or their personal representative, to persons involved with the individuals care, to business associates in their legitimate duties, to facility directories or for public purposes. This authorization will include all the mandatory elements and any authorizations generated from outside CDCN will be checked to see if they are valid.

Complaints

It is the policy of CDCN that all complaints relating to the protection of health information be investigated and resolved in a timely fashion. Furthermore, it is the policy of CDCN that all complaints will be addressed to the Privacy Officer who will be duly authorized to investigate complaints and implement resolutions if the complaint stems from a valid area of non-compliance with the HIPAA Privacy and Security Rule.

Prohibited Activities

It is the policy of CDCN that no employee or contractor may engage in any intimidating or retaliatory acts against persons who file complaints or otherwise exercise their rights under HIPAA regulations. It is also the policy of CDCN that no employee or contractor may condition treatment, payment, enrollment or eligibility for benefits on the provision of an authorization to disclose protected health information.

Responsibility

It is the policy of CDCN that the responsibility for designing and implementing procedures to implement this policy lies with the Privacy Officer.

Verification of Identity

It is the policy of CDCN that the identity of all persons who request access to protected health information be verified before such access is granted.

Mitigation

It is the policy of CDCN that the effects of any unauthorized use or disclosure of protected health information be mitigated to the extent possible.

Safeguards

It is the policy of CDCN that appropriate physical safeguards will be in place to reasonably safeguard protected health information from any intentional or unintentional use or disclosure that is in violation of the HIPAA Privacy Rule. These safeguards will include physical protection of premises and PHI, technical protection of PHI maintained electronically, and administrative protection. These safeguards will extend to the verbal communication of PHI. These safeguards will extend to PHI that is removed from CDCN.

Business Associates

It is the policy of CDCN that business associates must be contractually bound to protect health information to the same degree as set forth in this policy. It is also the policy of CDCN that business associates who violate their agreement will be dealt with first by an attempt to correct the problem, and, if that fails, by termination of the agreement and discontinuation of services by the business associate.

Training and Awareness

It is the policy of this CDCN that all members of our workforce have been trained by the compliance date on the policies and procedures governing protected health information and how CDCN complies with the HIPAA Privacy and Security Rule. It is also the policy of CDCN that new members of our workforce receive training on these matters within the employee's

probationary period time after joining the workforce. It is the policy of CDCN to provide training should any policy or procedure related to the HIPAA Privacy and Security Rule materially change. This training will be provided within a reasonable time after the policy or procedure materially changes. Furthermore, it is the policy of CDCN that training will be documented indicating participants, date and subject matter.

Sanctions

It is the policy of CDCN that sanctions will be in effect for any member of the workforce who intentionally or unintentionally violates any of these policies or any procedures related to the fulfillment of these policies.

Retention of Records

It is the policy of CDCN that the HIPAA Privacy Rule records retention requirement of seven years from the date of discharge will be strictly adhered to. For minors, records will be retained for at least three years after the minor reaches the age of majority. All records designated by HIPAA in this retention requirement will be maintained in a manner that allows for access within a reasonable period of time. This records retention time requirement may be extended at CDCN's discretion to meet with other governmental regulations or those requirements imposed by our professional liability carrier.

Cooperation with Privacy Oversight Authorities

It is the policy of CDCN that oversight agencies such as the Office for Civil Rights of the Department of Health and Human Services be given full support and cooperation in their efforts to ensure the protection of health information within CDCN. It is also the policy of CDCN that all personnel must cooperate fully with all privacy compliance reviews and investigations.

Investigation and Enforcement

It is the policy of CDCN that in addition to cooperation with Privacy Oversight Authorities, CDCN will follow procedures to ensure that investigations are supported internally and that members of our workforce will not be retaliated against for cooperation with any authority. It is our policy to attempt to resolve all investigations and avoid any penalty phase if at all possible.

Feder /State law: fraud must be reported

As an approved provider or contracted agency with public health and human services departments, employers must comply with all applicable Federal, State and local laws. Therefore, employers **are charged by Federal and State law** with the responsibility of identifying, investigating, and referring to law enforcement officials, **cases of suspected fraud or abuse**.

Fraud is a crime against all taxpayers and is a State and Federal crime.

Employers are mandatory reporters of any suspected fraud.

All cases of possible fraud and program abuse should be reported immediately.

To make a report, please call

1-877-532-8530

Fraud Hotline Toll Free

CONSUMER DIRECT CARE NETWORK

Be Aware

PARTICIPANTS

Fraud Prevention Program

- *Understanding fraud and the possible risks*
- *Assuring compliance with Federal and State laws*
- *Preventing fraudulent activities*

CONSUMER DIRECT CARE NETWORK

Understanding fraud

Because you receive home-based health services, it is important to know what fraud means. Professionals, friends, and even family members can commit fraud.

It is **your responsibility to recognize the signs of fraud** so you can avoid this problem.

Fraud is defined as:

The intentional deception or misrepresentation that an individual knows, or should know to be false, or does not believe to be true, and makes, knowing the deception could result in some unauthorized benefit to himself or some other person(s).*

(Centers for Medicare & Medicaid Services)

**Some States define fraud in varied terms. For example, Alaska defines fraud as "knowingly... with reckless disregard".*

Examples of fraud:

- Using programs to receive unnecessary services and supplies
- Billing for services that were never provided
- Billing for services that pay at a higher rate than those provided
- Submitting hours on a time sheet that employees did not work
- Failing to keep required records or failing to make them available to authorities
- Abusing a program or behaving unethically

Committing fraud

Intentional or reckless fraud results in significant sanctions ranging from oral warnings to a suspension, termination, or financial penalties. There will be consequences for fraudulent conduct. Any Participant or Personal Representative participating in fraudulent acts **will be reported to Medicaid Fraud units** and subject to **possible discharge from the company.**

If a Participant or Personal Representative gives false information or knows of false information and fails to report it, they may be convicted of a **crime**. It may also result in **large fines** or **jail time**.

Preventing fraud

Components to help prevent fraud:

- Participants receive initial and ongoing **training on fraud topics** (regular fraud prevention training, as well as education topics in newsletters).
- **All employees** are required to pass a criminal and Office of Inspector General (OIG) **background check.**
- Acknowledgement and anti-fraud statement included on every time sheet. Documents and time sheets are audited weekly.
- A **Fraud Prevention Hotline** for response to compliance issues.

These components are in line with the employer's goals:

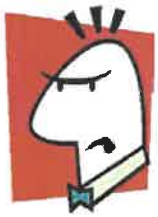
- Promoting **integrity** and **ethical behavior**
- Assuring **compliance with all governmental** laws, rules and regulations
- Supporting ethical standards, standards of conduct and **zero tolerance for fraud and abuse**

Abuse, Neglect and Exploitation

Abuse, neglect, and exploitation are difficult issues to talk about but probably are the most important issues to deal with. Most workers provide excellent care. However, some workers may take advantage of the individuals they work for who need their help. For your own safety, we want to make sure you know what abuse is and how to deal with it if it happens to you. Please let your Program Coordinator or Case Manager know if abuse, neglect or exploitation has occurred. S/he can help you plan for safety. Abuse, neglect and exploitation are against the law.

The different types of abuse are:

Physical Abuse includes hitting, slapping, pinching, kicking and other forms of rough treatment. If a worker does something on purpose to cause you physical pain, it may be physical abuse. For example, you have fallen down. Your worker gets mad and grabs you and forcefully pulls you up. Bruises are left on your arms.



Verbal Abuse means any time a worker uses spoken or written words or gestures that are meant to insult or attack you or make you feel bad. For example: you forget to take your pills and your worker says, "you are so stupid."

Psychological Abuse happens if a worker uses actions or makes statements that are meant to humiliate or threaten you or to cause you emotional harm. For example, your worker continually tells you that, "you cannot take care of yourself. Without me you would be nothing."

Sexual Abuse includes any unwanted sexual annoyance, touching, fondling or attack. Any sexual behavior by a worker that makes you uneasy is sexual abuse. For example, your worker fondles your breasts when giving you a bath.

Neglect means a worker is not meeting your basic needs for food, hygiene, clothing or health maintenance. Neglect includes repeated acts of carelessness. After you have given the service provider/worker directions about these things, s/he should make sure your basic needs are met. For example, your worker consistently takes your good food. She then cooks you meals with the leftovers but the meals are not balanced and do not follow your diet restrictions.

Exploitation happens when you trust someone and the person lies to you or scares you in order to take or use your property or money for himself/herself. An example of exploitation would be a worker taking something of value from you without permission. For example, taking your television, DVD player or automobile without asking your permission is exploitation. If your worker asks you to put their name on your bank account, this is exploitation. For example, your worker convinces you to put his name on your checking account. He then takes some money from your account telling you it is for the extra time he has worked.

If you feel a worker is abusing or exploiting you, take care of the situation right away. If the abuse is slight, you can try talking with the worker:

- Tell him/her what actions or behaviors you do not like.
- Tell the worker that if the behaviors do not stop right away you will need to find another worker.

This approach may be effective for a worker who may not be aware of how you are feeling. Be ready to take more action right away if the behaviors do not stop.

In most abuse cases, you should dismiss the worker immediately. **DO NOT** put up with mistreatment. Protect yourself. Your safety is the priority. Remember you can use your Emergency and Backup Plan to use a "backup" worker if you have to dismiss someone because of abuse.

How to Recognize Potential Abuse

- Does your caregiver ignore your instructions and requests?
- Does your caregiver make mistakes and then blame you or other people?
- Does your caregiver ask personal questions unrelated to your care, such as how you manage your finances?
- Does your caregiver eat your food without asking?
- Does your caregiver make unwanted comments about your appearance, weight, clothing, speech, eating habits, etc.?
- Do you sometimes find less money in your wallet then you expected?
- Are there unfamiliar charges on your checking or credit card account?
- Does your caregiver attempt to control your choices such as what you wear and what you eat?

If you answer "yes" to any of these questions, there may be potential for abuse.

All persons employed by Consumer Direct Care Network are mandatory reporters of suspected abuse, neglect, exploitation, or self-neglect. This means if you tell us of an incident of abuse we must report it. Please report any of the following acts to our office immediately:

- Engaging in, or threatening a Member or a person in the Member's household with physical, sexual, mental abuse or coercion
- Exploiting a Member for financial gain or failing to remove a caregiver who has exploited a Member for financial gain
- Theft of medication, money, property, supplies, equipment, or other assets of a Member
- Failing to report a theft as described in this section
- Failing to remove from contact with a Member any employee who is under the influence of alcohol or drugs while providing services to a Member, or whose use of alcohol or drugs interferes with work performance or Member safety.
- Violating, or knowingly allowing an employee to violate, state or federal laws regulating prescription drugs and controlled substances, including forging prescriptions and unlawfully distributing
- Failing to report facts known to the provider agency or an agency's caregiver regarding the incompetent or illegal practice or conduct of a care provider in connection with services
- Performing, or allowing a caregiver to perform, a service that is beyond that person's professional training
- Failing to perform the acts that are within a person's scope of competence and training that are necessary to prevent harm or an increase in the risk of harm to a Member

- Violating the disclosure of information provisions of the Health Insurance Portability and Accountability Act of 1996
- Discriminating, or allowing a caregiver to discriminate, on the basis of race, religion, color, national origin, ancestry, or sex in the provision of care to a Member

Remember, reports of abuse, neglect and exploitation must be investigated. When Ault Protective Services receives a report, they will contact you to find out more information. Do not be alarmed. Their job is to keep the public safe.

Incident Management and Reporting

Incident Management refers to the prevention and reporting of abuse, neglect, or exploitation of Members. In the event an incident should occur, the Member, caregiver, or other party must:

- Ensure the safety of the Member
- Obtain medical assistance as needed
- Involve law enforcement as needed
- Report incidents to your county human services department

Examples of reportable incidents include:

- **Abuse, Neglect and Exploitation**
  - **Abuse** means the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain or mental anguish to a Member.
  - **Neglect** means the failure to provide goods and services necessary to avoid physical harm, mental anguish, or mental illness to a Member.
  - **Exploitation** means the deliberate misplacement, exploitation, or wrongful, temporary or permanent use of a Member's belongings or money without the voluntary and informed consent of the Member.
- **Death**
  - **Unexpected Death** - death caused by an accident, unknown, or unanticipated cause.
  - **Natural or Expected Death** - any death of an individual caused by a long-term illness, a diagnosed chronic medical condition, or other natural or expected condition resulting in death.
- **Other Reportable Incidents**
  - **Environmental Hazard** - an unsafe condition that creates an immediate threat to life or health of a Member.
  - **Law Enforcement Intervention** - the arrest or detention of a person by law enforcement, involvement of law enforcement in an incident or event, or placement of a person in a correctional facility.
  - **Emergency Services** - admission to a hospital or psychiatric facility or provision of emergency services that result in medical care, which is not anticipated for the Member, and would not routinely be provided by a primary care provider.

CONSUMER DIRECT CARE NETWORK

Online Services through My Direct Care

www.mydirectcare.com

Employers and Employees associated with Consumer Direct Care Network (CDCN) have access to online services available through a secure website www.mydirectcare.com. The primary benefits of this secure site include:

- Online time entry and approval. Provides an efficient and error-minimizing way to enter time into the CDCN payroll system. The electronic timesheets provide information on the status of all time and payroll entries.
- Spending summaries. Provide up to date budget and spending information. Both summary and detailed information is available regarding staff gross wages, employer related taxes, and vendor payments.
- The Job Board. A tool for employers to post job openings and for job seekers to respond. New applicants and existing employees wishing to work more hours can post their availability.

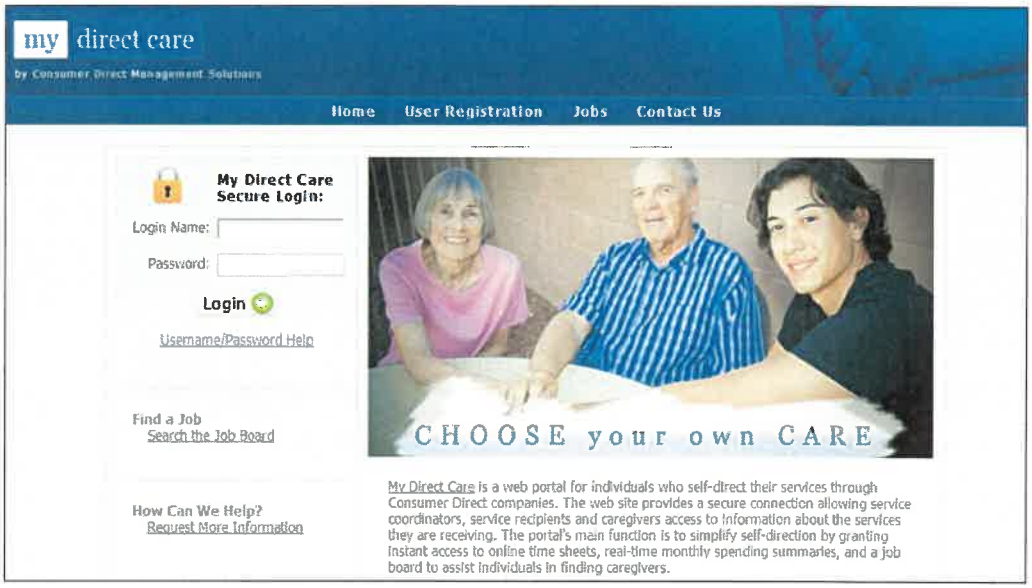


Figure 1. My Direct Care Home Page with Login

Note on terminology: My Direct Care uses the terms "Client" and "Participant" for Medicaid program recipients. In the descriptions below, the terms "Client" and "Participant" refer to the individual enrolled in Idaho's Self-Direction program. The term Employer refers to the Participant or the Participant's guardian.

User Registration

CDCN will issue User ID numbers to employers and employees after approving completed enrollment packets. Once you have your ID number you can self-register at My Direct Care and establish your Login Name, Password and User Profile. To register, follow these steps:

1. Enter www.mydirectcare.com in the address bar or click on the My Direct Care links on the CDCN Idaho website. This will take you to the home page of My Direct Care as shown in Figure 1.
2. Click on the ***User Registration*** tab to open the User Registration page (Figure 2).
3. In the *Register As* field, select Employee if you are an employee. Select Participant if you are the Employer (Figure 3).

Figure 2. Opening User Registration Page

4. After selecting a Registration Type, fill in the additional fields that appear (Figure 4).
   - *State* – select Idaho.
   - *User ID* – enter the ID provided to you by CDCN Call the CDCN Meridian office if you have not received your ID.
   - *Date of Birth* – enter in the format shown.
   - *Zip Code* – enter in the format shown.
   - *SSN* – this field only appears for Employees. Enter the last 4 digits of your social security number.

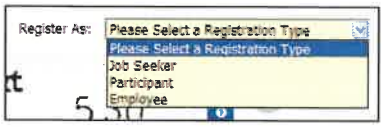


Figure 3. Selecting a Registration Type

Note to Employers: User Registration fields are specific to the Participant. Date of Birth and Zip Code must be those of the Participant.

Figure 4. User Registration Page Fields

5. Enter the security phrase as two unique words separated by a space. Click continue. Since this is your first time using My Direct Care, you will now be directed to a User Registration Profile page (Figure 5).

6. Complete your User Registration Profile – This is where you will set up your login name and password for logging into My Direct Care. You will also provide contact information and answer two security questions, which may be used later if you forget your password and need to reset it.

   Your password must be at least seven characters in length, and contain at least one special character (#,%,&,*,+, etc.) and at least one number. You may wish to write this down and keep in a secure location. You will enter your login name and password every time you login to My Direct Care.

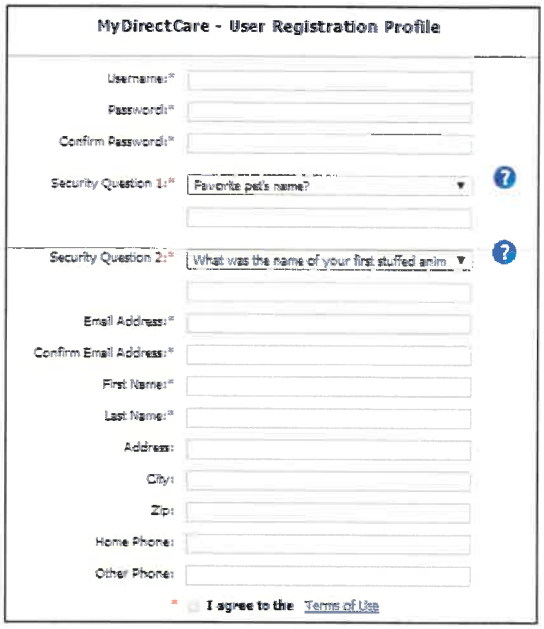


Figure 5. User Registration Profile

7. Finish the Registration Process - When you have completed all the profile fields, check the "I agree to the Terms of Use" checkbox at the bottom of the page. After checking the box, a "Register" button will appear (Figure 6). Clicking the button will complete the registration process and direct you back to the home page.

Figure 6. Register button

8. You can now login and begin using online services – The login area is in the upper left corner of the home page, next to the padlock (Figure1). Enter your login name and password into the fields and click on the Login button.

After you have successfully registered, your User Profile information can be updated at any time by selecting ***Settings*** tab and Update Your Online Information from the main menu. To change your password, select Settings and Update Password from the main menu.

Overview of the Time Entry and Approval Process

- Upon completion of a scheduled shift, the Employee will log into My Direct Care and enter the shift worked. Time entry for each shift will include the Participant's name, the service provided (Service Code), and beginning and ending shift times.
- Shifts should be entered after they are worked.
- Time is due for approval every two weeks. Time must be approved by **Wednesday at midnight MST** of timesheet due weeks or payment could be delayed.
- Once the time has been approved by the Employer, entries can be processed and paid by CDCN.

Employee Time Entry

Select ***Service Card*** from the top menu (Figure 7).

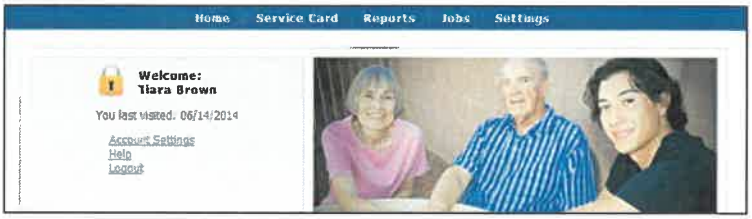


Figure 7. Employee Main Menu

Time Card will open (Figure 8). The current pay period will display by default. You can navigate to other weeks by changing the dates in the "show entries between" area or using the drop down menu under the "show entries for period" area.

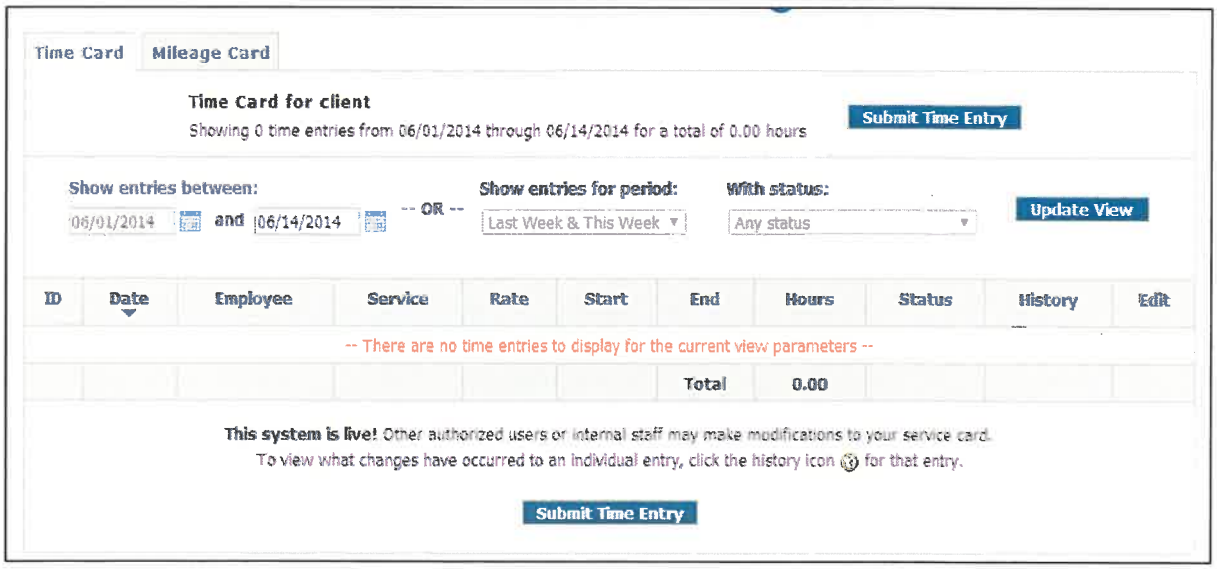


Figure 8. Time Card

Create a New Time Entry by clicking the "Submit Time Entry" button. This will open the service card window (Figure 9).

Enter the following information for each shift worked:

- Service Date – enter date in the format shown or select date using the calendar icon.
- Client – from the drop down, select the Participant worked for.
- Service Code – from the drop down, select the code for the service provided.
- Start Time – enter the start time in the format show and select AM or PM.
- End Time: enter the end time.

Figure 9. Service Card

Click on the "Submit Time Entry" button when you have entered all the information for the shift worked.

Note: Time entries can only be made after a shift is completed. Trying to enter a date or starting/ending time in the future will be denied and return an error message.

You will receive a pop-up window (Figure 10) asking if you would like to create another time enter. Click yes or no.

Figure 10. Time Entry Pop-up

Your time will appear in the time card area once it has been entered (Figure 11). This area will display the service date, employee/client names, rate of pay, hours worked, and the status of where the entry is at in the payroll process. Click the status icon to see what each symbol means (Figure 12).

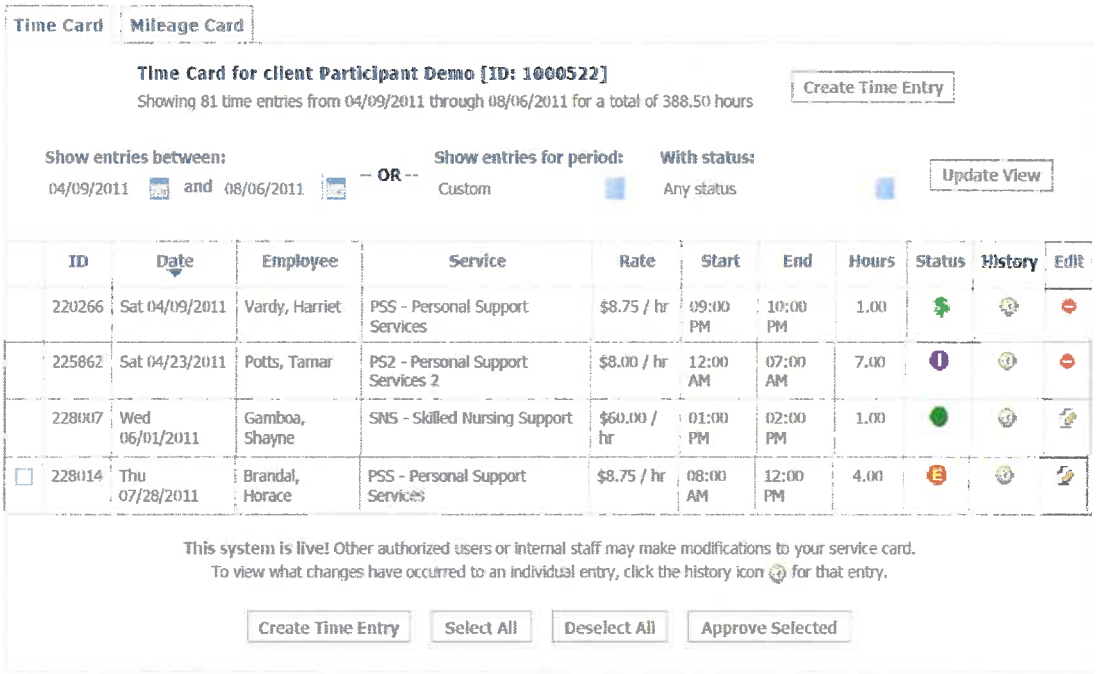


Figure 11. Time Card

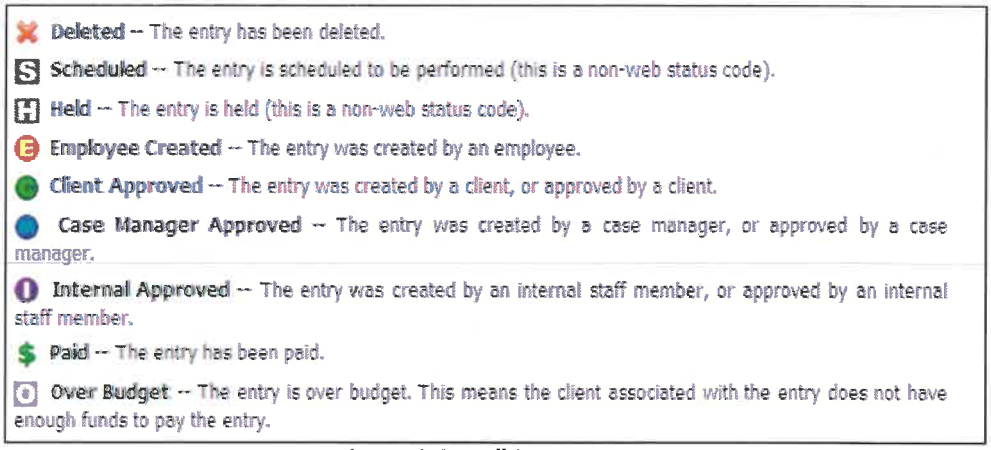


Figure 12. Payroll Status

Edit or Delete Time Entry

If you saved a time entry with the wrong information, click the edit icon in the time card area (Figure 11) to make corrections to the entry. Edits are no longer allowed to the entry once this symbol appears .

Once you click the edit icon, the edit time entry box will display (Figure 13). Make the necessary corrections, add a comment on why you are correcting the entry, and click the "update time entry" button.

To delete the entry, click the "delete time entry" button and add a comment on why the entry is being deleted.

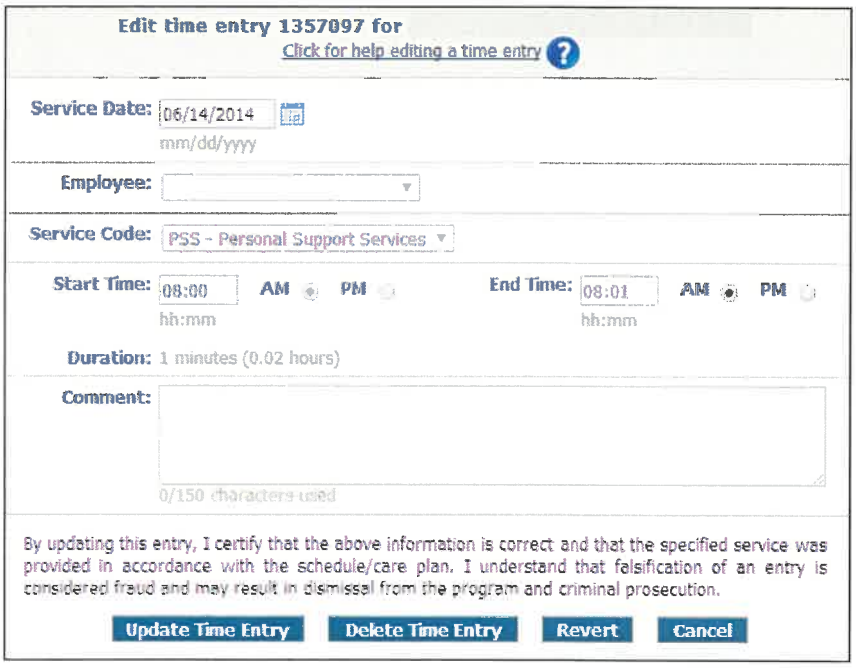


Figure 13. Edit Time Entry

Employer Time Approval

For Employers, the online time approval process is similar to a paper time sheet process in that both systems require review and approval of Employee time entries. With the online timesheet system it minimizes data entry errors and provides the Employer with far more information regarding the exact status of their budget, payroll, and Employee hours.

Approving Time

All entries with an E indicates the shift was submitted for approval by the Employee. The Employer must review all entries and verify the times are correct.

You can manually select each entry to approve using the check box on the far left side of the entry or you can select all entries by clicking the "select all" button. To approve the selected time, click the "approve selected" button.

A will now appear indicating the shift was approved by the "client" (Employer).
After you have approved the entries, Consumer Direct will complete the payroll process.

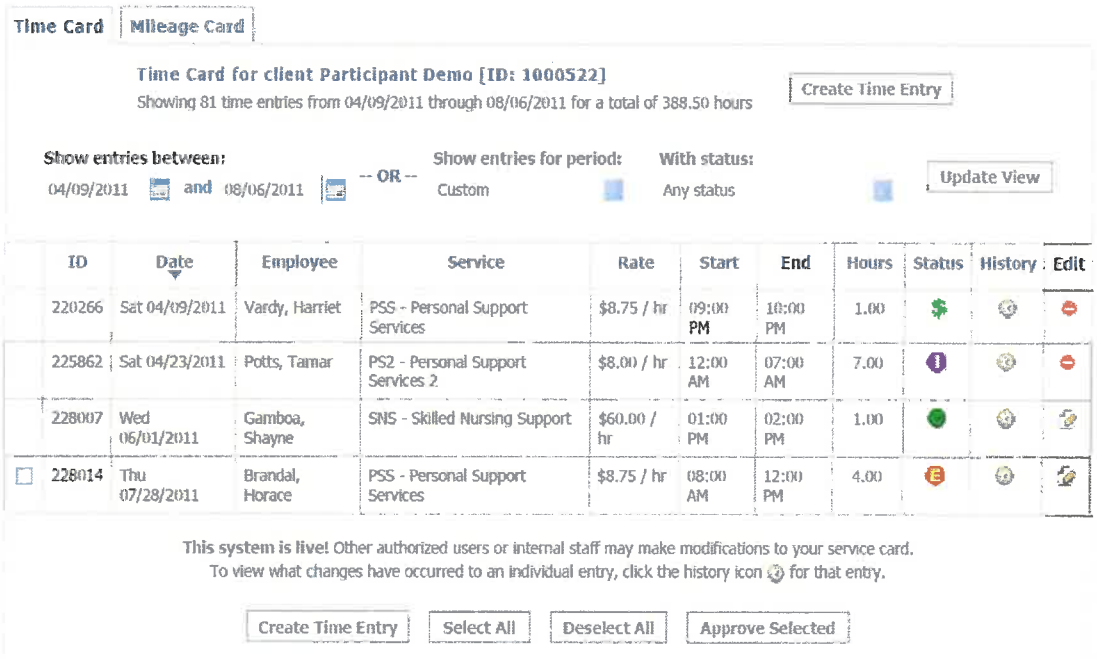


Figure 11. Time Card

Note: employers can create time entries for employees by following the same steps for employee time entry. If the employer creats the entry it automatically approves the time.

CONSUMER DIRECT CARE NETWORK

Idaho
Mileage Reimbursement

Mileage forms are due every two weeks. Mileage forms are due by the Monday following the end of the service period by Midnight if faxed or dropped off, and postmarked by Monday if mailed. Due to the timing of the payroll cycle, late mileage forms will result in late pay. Mileage forms must be signed AFTER all work is completed. Advance mileage forms will not be accepted. **Want to avoid the hassle of paper timesheets & mileage forms? Enter your time the quick, easy, and secure way at www.mydirectcare.com today!**

Employee Name (Please Print): Mickey Smith

Participant Name (Please Print): Laura Gluekert

Employee ID: 5171288

Participant ID: 5432123

For best results:
* Use BLACK ink
* Print clearly inside the boxes
* Fill out the Mileage Reimbursement completely and accurately

	Service Date (MM/DD/YYYY)	Mileage - Rounded to nearest mile	Service Code
1	02/07/2016	35	TSM
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			

EXAMPLE

I, the Employee, certify that I have provided the services indicated above and that the Participant was not in a hospital, nursing home, or institution. False information or misrepresentation constitutes Medicaid Fraud.

Employee Signature: Mickey Smith **Date:** MM 02 / DD 13 / YY 16

I, the Participant or Legal Guardian, certify that the above Employee provided the services listed for this Participant, the services were provided in accordance with the Support & Spending Plan, and the Participant was NOT in a hospital, nursing home, or institution. Falsification of this time sheet is considered Medicaid Fraud and may result in dismissal from the program and/or criminal prosecution.

Participant Signature: Laura Gluekert **Date:** MM 02 / DD 13 / YY 16

Toll-Free: 1-888-898-0470 • Toll-Free Fax: 1-877-898-0417
280 E. Corporate Dr. Suite 150 • Meridian, ID 83642

CONSUMER DIRECT CARE NETWORK

VENDOR PAYMENT REQUEST FORM INSTRUCTIONS

A Vendor Payment Request Form must accompany all requests for vendor payment. Make sure your vendor payment request is filled out completely and correctly. Print all entries neatly. Each receipt or invoice listed must include Date, Service Code, Description, Quantity, Rate and Total. Incorrect, incomplete or illegible forms may result in payment delays.

1. Name of Individual Receiving Services. Print Individual's Name.

2. CDCN Participant/Employer ID. Seven-digit ID number.

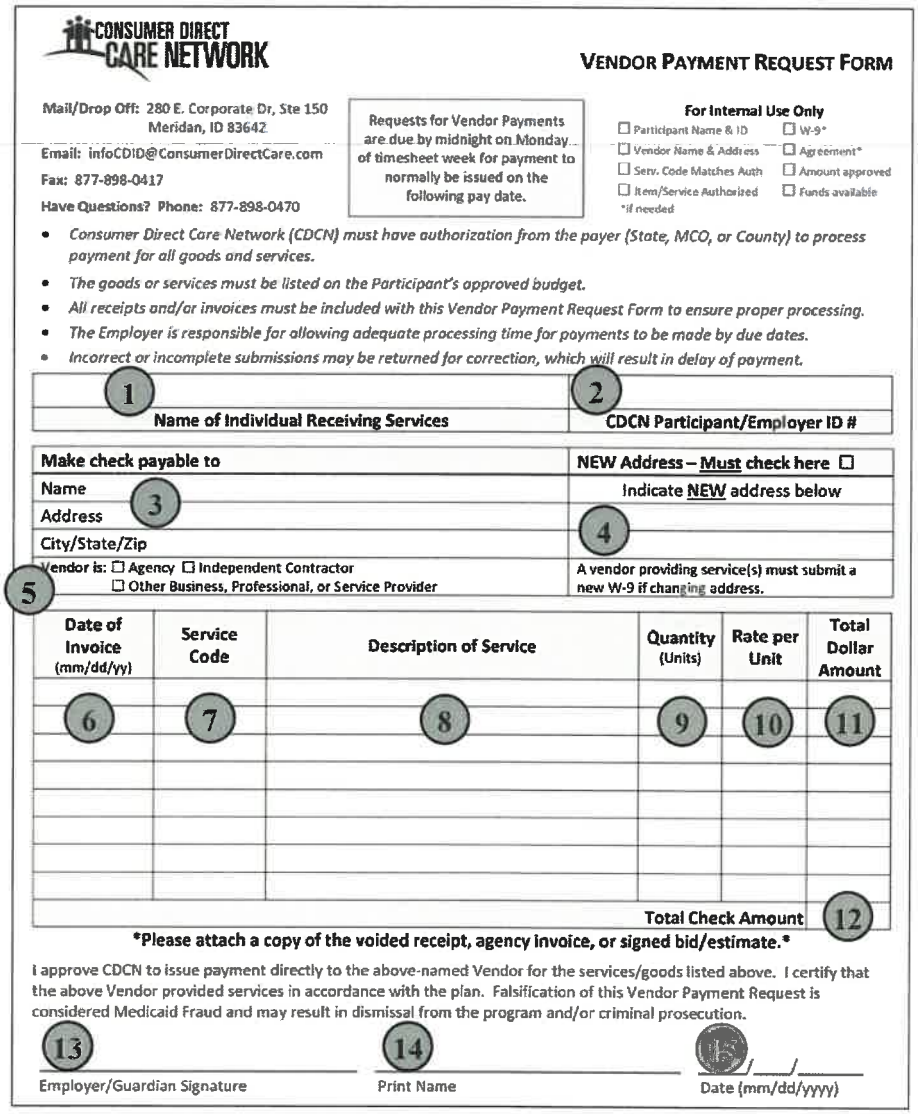
3. Make check payable to. Indicate who the check should be made out to. Include Name and full address. Please list one vendor per Request Form.

4. New Address. If this vendor has moved since the last time you submitted a request for payment, check the box and fill in the new address. If the vendor provides service(s), you will also need to submit a new W-9.

5. Vendor Type. Indicate which type of vendor this is. If marked Agency or IC, you will need to submit that type of agreement to CDCN.

6. Date of Invoice. The date on the invoice or receipt. In MM/DD/YY format. Please list each invoice on a separate line, one date per line. Attach a copy of each receipt, invoice, or signed bid/estimate.

7. Service Code. Fill in the Service Code for the service provided on this invoice. Ensure the service code is approved on the budget/auth/plan.



CONSUMER DIRECT CARE NETWORK

VENDOR PAYMENT REQUEST FORM

Mail/Drop Off: 280 E. Corporate Dr, Ste 150 Meridan, ID 83642
Email: infoCDID@ConsumerDirectCare.com
Fax: 877-898-0417
Have Questions? Phone: 877-898-0470

Requests for Vendor Payments are due by midnight on Monday of timesheet week for payment to normally be issued on the following pay date.

For Internal Use Only
☐ Participant Name & ID ☐ W-9*
☐ Vendor Name & Address ☐ Agreement*
☐ Serv. Code Matches Auth ☐ Amount approved
☐ Item/Service Authorized ☐ Funds available
*if needed

- *Consumer Direct Care Network (CDCN) must have authorization from the payer (State, MCO, or County) to process payment for all goods and services.*
- *The goods or services must be listed on the Participant's approved budget.*
- *All receipts and/or invoices must be included with this Vendor Payment Request Form to ensure proper processing.*
- *The Employer is responsible for allowing adequate processing time for payments to be made by due dates.*
- *Incorrect or incomplete submissions may be returned for correction, which will result in delay of payment.*

1 Name of Individual Receiving Services	2 CDCN Participant/Employer ID #

Make check payable to	NEW Address – Must check here ☐
Name	Indicate NEW address below
Address 3	4
City/State/Zip	
5 Vendor is: ☐ Agency ☐ Independent Contractor ☐ Other Business, Professional, or Service Provider	A vendor providing service(s) must submit a new W-9 if changing address.

Date of Invoice (mm/dd/yy)	Service Code	Description of Service	Quantity (Units)	Rate per Unit	Total Dollar Amount
6	7	8	9	10	11
			Total Check Amount		12

Please attach a copy of the voided receipt, agency invoice, or signed bid/estimate.

I approve CDCN to issue payment directly to the above-named Vendor for the services/goods listed above. I certify that the above Vendor provided services in accordance with the plan. Falsification of this Vendor Payment Request is considered Medicaid Fraud and may result in dismissal from the program and/or criminal prosecution.

13 _____ Employer/Guardian Signature
14 _____ Print Name
15 ___/___/_____ Date (mm/dd/yyyy)

8. Description of Service. Write out what service or good the vendor provided on each invoice/receipt.

9. Quantity. The number of items, units, hours, or times the good or service was provided.

10. Rate per Unit. The cost for one item, unit, hour, or time of this good or service.

11. Total Dollar Amount. The total amount of this line.

12. Total Check Amount. The total for all invoices to be paid to this vendor.

13. Employer/Guardian Signature.

14. Print Name. Print the name of the employer/guardian.

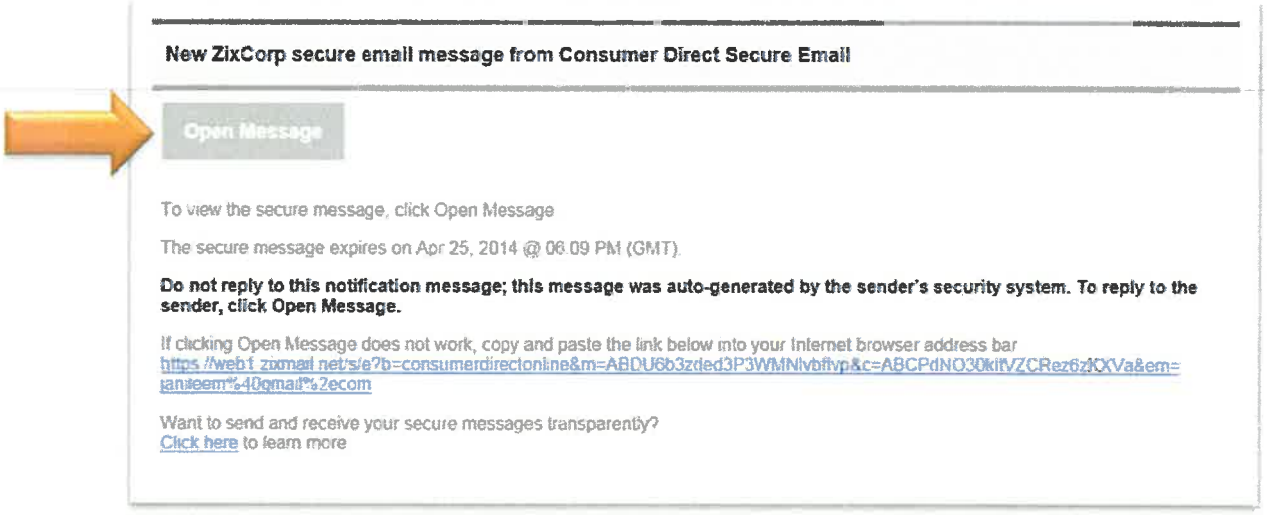
15. Date. Employer/Guardian signature date. In MM/DD/YYYY format. This must be **on or after** the last invoice date. Future signature dates are not accepted and will be returned for correction.

Accessing Secure Email Sent by Consumer Direct Care Network (CDCN)

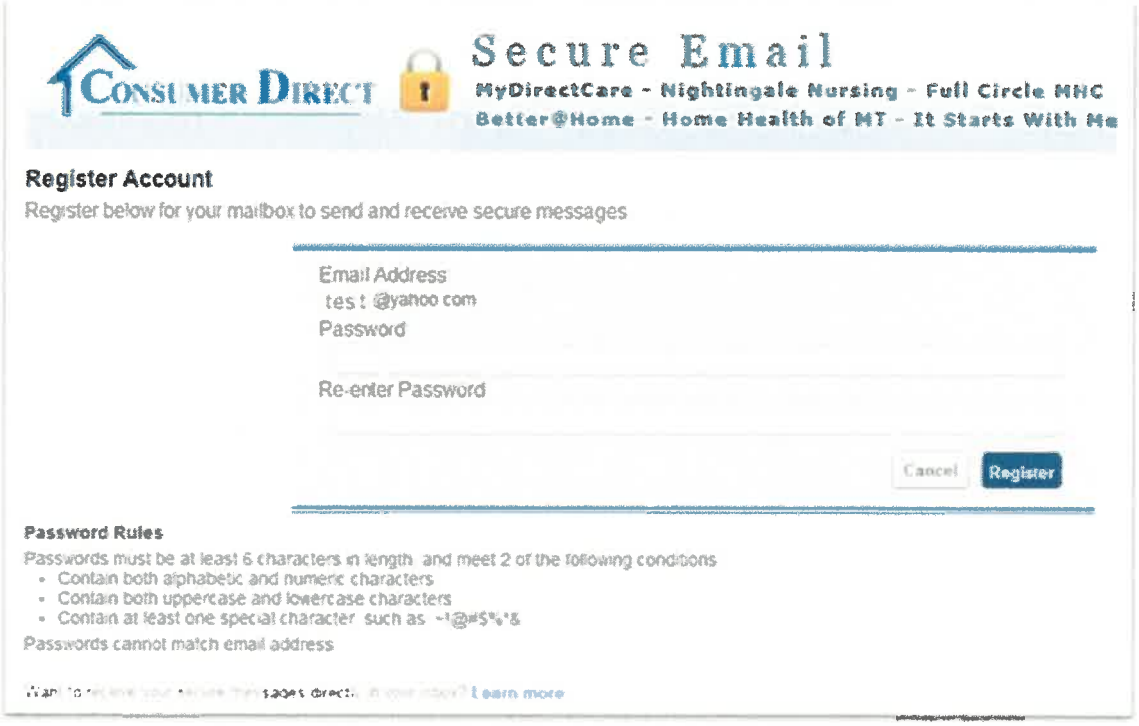
CDCN uses a secure messaging system to send protected health information.

Below is an example of a secure message. This is not spam so do not delete.

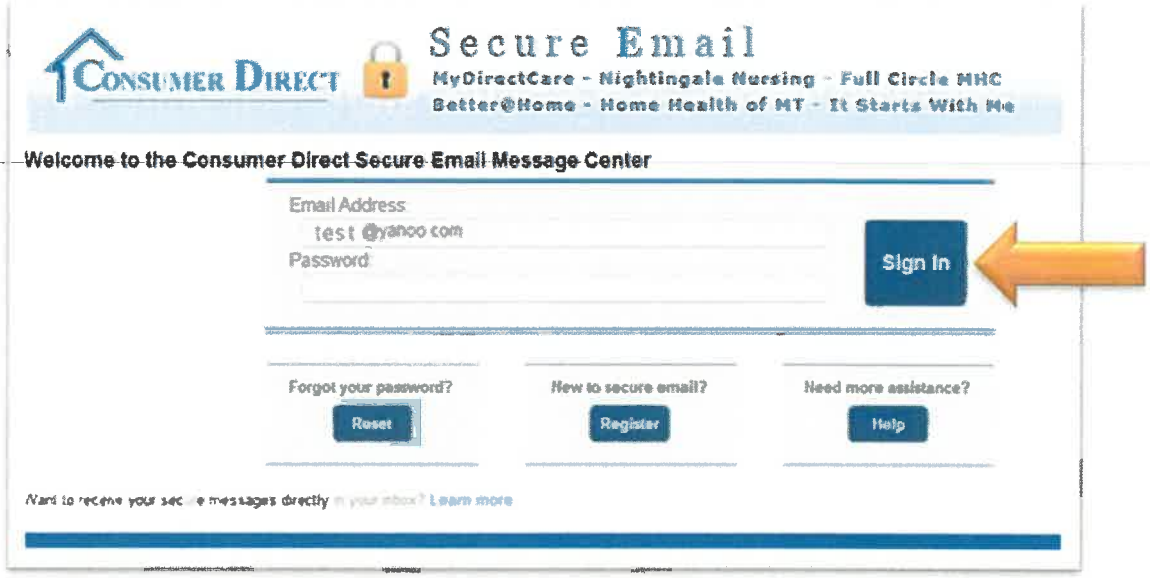
Step 1: To view the message, click the "open message" button.



Step 2: You will need to register the first time you view a secure email. This is different than your web portal login. Create a password. Passwords must meet the password rules. Enter your password and click the register button.



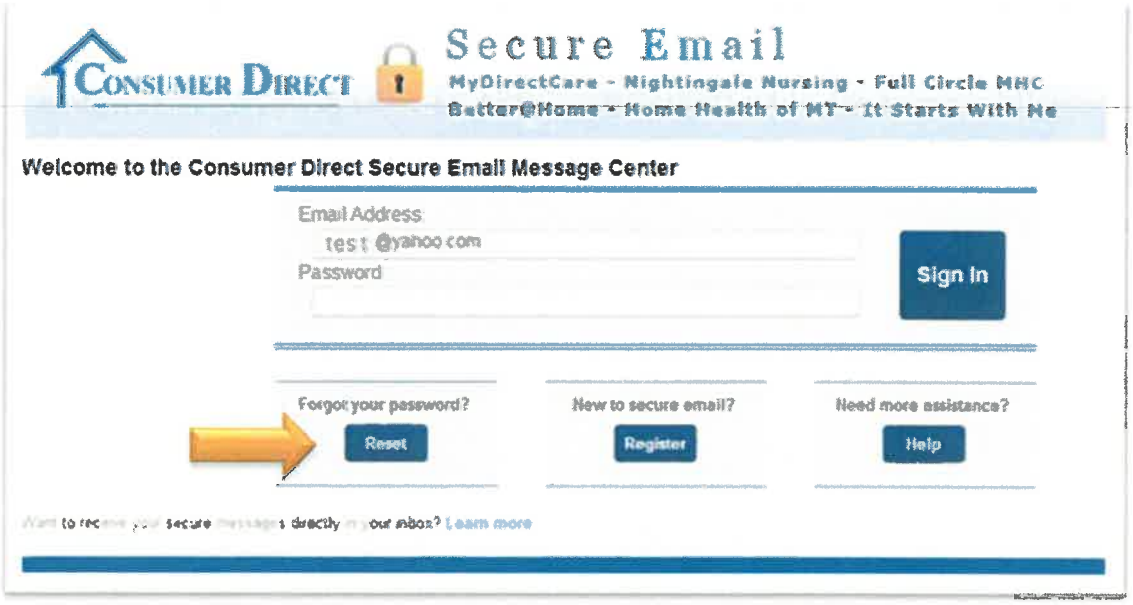
Step 2 Continued: If you've already created a password, you will get the login screen below. Enter your password and click the sign in button.



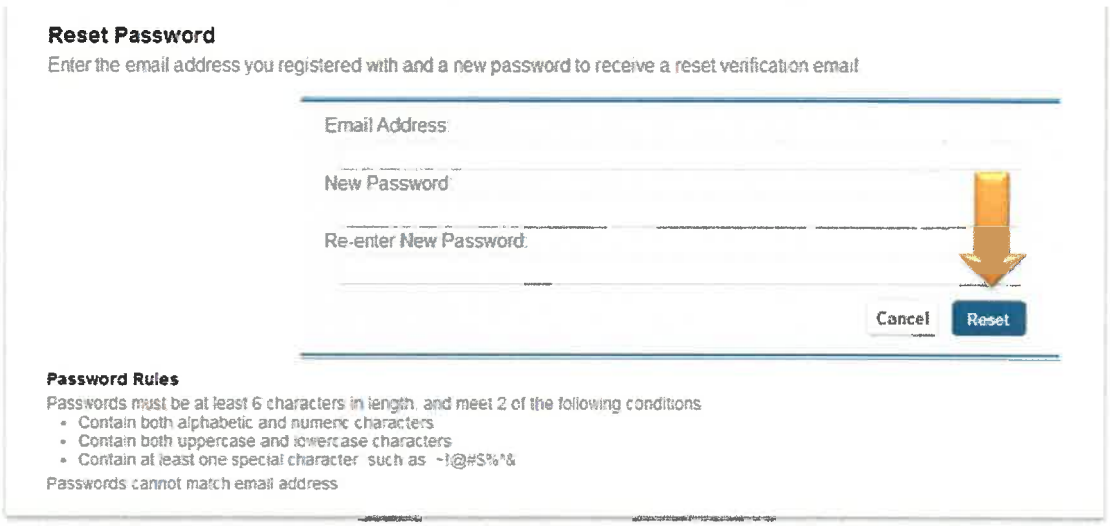
Step 3: After signing in you will be able to read and respond to your message(s). Messages do expire so print or save the email if you wish to keep it. Remember to check your spam/junk folder often.

Changing Your Secure Email Password

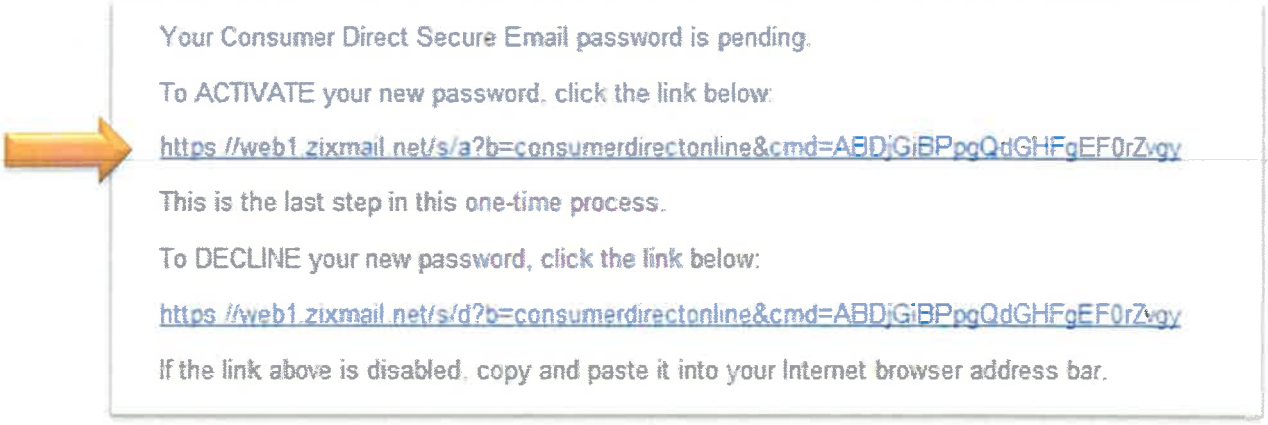
Step 1: From the login screen, click the reset button under the "forgot your password" section.



Step 2: Enter your e-mail address and new password. Click the reset button.



Step 3: You will receive an e-mail with the links below. Click the activate link to accept your new password.



Your Consumer Direct Secure Email password is pending.

To ACTIVATE your new password, click the link below:

https://web1.zixmail.net/s/a?b=consumerdirectonline&cmd=ABDjGiBPpgQdGHFgEF0rZvgy

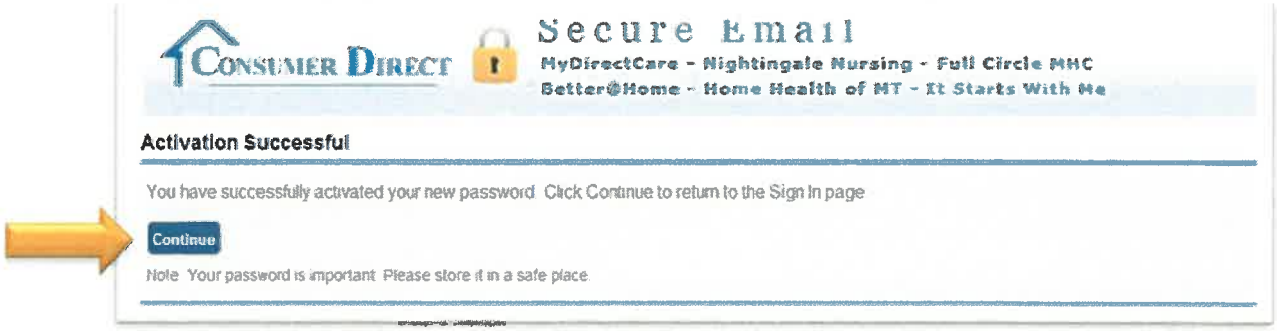
This is the last step in this one-time process.

To DECLINE your new password, click the link below:

https://web1.zixmail.net/s/d?b=consumerdirectonline&cmd=ABDjGiBPpgQdGHFgEF0rZvgy

If the link above is disabled, copy and paste it into your Internet browser address bar.

Step 4: You will receive the message below after you click the activation link. Click the continue button to proceed to the login screen.



CONSUMER DIRECT

Secure Email

MyDirectCare - Nightingale Nursing - Full Circle MHC
Better@Home - Home Health of MT - It Starts With Me

Activation Successful

You have successfully activated your new password. Click Continue to return to the Sign In page.

Continue

Note: Your password is important. Please store it in a safe place.

CONSUMER DIRECT CARE NETWORK

PARTICIPANT/EMPLOYEE FEEDBACK FORM

Directions: Please complete all the sections except the gray one at the bottom of the page. Mail or fax the form to Consumer Direct Care Network.

Name: _____ Date: _____
(Please Print)

You are a (Please check): ☐ Participant ☐ Employee ☐ Agency

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Please check the box that applies: ☐ Compliment ☐ Suggestion ☐ Complaint

Would you like us to contact you? ☐ Yes ☐ No If yes, how: ☐ phone ☐ email ☐ mail

Please describe the compliment, suggestion or complaint:

Please fax, mail or drop off completed and signed form to:

Toll Free Fax: 1-877-898-0417
Consumer Direct Care Network
280 E. Corporate Drive, Suite 150
Meridian, ID 83642-2953

For CDCN office use:

Date Received: ____/____/____ Signature: _____

Action Taken: ☐ Resolved ☐ Not Resolved ☐ Submitted to Program Manager

Plan: (Please use back of form)

CONSUMER DIRECT CARE NETWORK

West Virginia Department of Administration, Purchasing D	
ID	Task Name
0	**West Virginia Department of Administration**
1	**Initiation Phase**
2	Tentative award announcement
3	90 Day Transition phase begins
4	Agreement date - Contract Execution
5	Initial meeting with WV Health and Human R Services
6	Define Common Goals and confirm Scope of
7	Define Requirements
8	**Planning Phase**
9	**Project Planning**
10	Define Project Team
11	Review state of West Virginia requiremen
12	Assign project document/plan creation ba
13	Document deliverables as noted in the RF
14	Revise Work Plan and Work Breakdown St
15	Establish Project Baseline
16	Define Project Milestones and Implement
17	Project Kick-off
18	Create Risk Register
19	Create Project Issue Log
20	Develop Requirements Traceability Matri
21	Develop Post-Implementation Plan
22	**Staffing Plan**
23	Assess program office staffing needs
24	Review current CDMS staffing plan for su Payroll, etc)
25	**Office Plan**
26	Determine office requirements

CONSUMER DIRECT CARE NETWORK

West Virginia Department of Administration, Purchasing Divi	
ID	Task Name
27	**IT Setup Plan for Office**
28	Evaluate office for IT needs
29	Determine workstation requirements for We
30	**Systems Plan**
31	Review program needs/requirements (gap a
32	Develop System Development Plan
33	Develop Data Conversion Plan
34	Develop System Test Plan
35	**Communications Plan**
36	Determine Agency's communications appro
37	Identify partner stakeholders who will be in operations
38	Conduct initial stakeholder interviews with a
39	Identify communication channels with stake
40	Establish meeting cadence with key stakeho
41	Create Stakeholder Register identifying all s
42	Develop Communications Plan
43	Develop CDWV website
44	**Execute Phase**
45	**Staffing**
46	**Recruit and hire CDWV staff**
47	Recruit leadership
48	Hire leadership
49	Onboard leadership
50	Recruit staff
51	Hire staff
52	Onboard staff

CONSUMER DIRECT CARE NETWORK

West Virginia Department of Administration, Purchasing Divi	
ID	Task Name
53	Training
54	**Recruit and Hire Administrative staff at CDN**
55	Recruit staff
56	Hire staff
57	Onboard staff
58	Training
59	**Office**
60	Identify realtor
61	Tour potential office locations
62	Initiate lease
63	Determine office layout and furniture
64	Identify construction needs
65	Complete any construction needs
66	Set up furniture and workstations
67	Set up vendor accounts (Phones, internet, cl
68	Staff occupy office
69	**IT Setup for Office**
70	Order, receive, and configure workstations f
71	IT Hardware on site setup
72	**Systems Development**
73	Fit-gap analysis
74	Develop user stories
75	Complete development
76	Test newly developed features
77	**Systems Setup**
78	**Integrations**
79	Identify integration needs
80	Build integrations
81	Validate integrations

CONSUMER DIRECT CARE NETWORK

West Virginia Department of Administration, Purchasing Divis	
ID	Task Name
82	**EVV**
83	EVV system setup
84	Initial EVV data upload
85	Testing
86	**Payroll**
87	Review payroll module
88	Setup business rules
89	Testing
90	**Billing**
91	Review billing module
92	Testing
93	**CRM**
94	Setup CRM for customer service
95	Testing
96	**CXOne**
97	Setup call system
98	Create call trees
99	Testing
100	**Finance**
101	Develop financial reports as needed
102	Set-up GL Accounts
103	Set-up SubAccounts
104	Set-up Accounting Structure
105	Testing
106	**Reporting**
107	Setup additional reports required interr
108	Testing
109	**Final Systems Testing**
110	Run Systems Test

CONSUMER DIRECT CARE NETWORK

West Virginia Department of Administration, Purchasing Divisi	
ID	Task Name
111	System Test results
112	**Policies and Procedures**
113	Create Policy and Procedure Manual
114	Create/Update business processes according t
115	Document processes and procedures
116	**Develop Enrollment Materials**
117	Update Enrollment Packet/Packet Checklist
118	Submit Enrollment Packet to State for review
119	**Communication**
120	**Stakeholder Engagement**
121	Ongoing stakeholder engagement (meetin
122	**Website**
123	Build new website
124	Launch new website
125	**Customer Service**
126	Produce Scripts
127	Produce FAQs
128	**Member and Worker Communication**
129	Create communication distribution list
130	Develop communication materials
131	Draft initial communications for Members
132	Ongoing Member and Worker communica
133	**Member and Worker Training Materials**
134	Produce and update training/reference m
135	Training and reference materials available
136	**Member and Worker Transition**
137	**Data Conversion**
138	**Initial Data Transfer**

CONSUMER DIRECT CARE NETWORK

West Virginia Department of Administration, Purchasing Divisi	
ID	Task Name
139	Receive data
140	Review initial data transfer
141	Scrub and reformat data
142	Upload data into Consumer Direct systems
143	Analyze data
144	Evaluate need for additional data transfers
145	**Final Data Transfer**
146	Review secondary data transfer
147	Scrub and reformat data
148	Upload data into Consumer Direct systems
149	Analyze data
150	**API**
151	Build API to populate enrollment and hiring DCSW information
152	Pre-populate packets with known informat
153	**Member and DCSW Enrollment**
154	Program-wide enrollment
155	Resource Consultants contact Members for n cases
156	Workers submit test shifts
157	Members approve test shifts
158	**Readiness Review**
159	Review deliverables
160	Onsite visit
161	Finalize and update deliverables
162	Readiness review approval
163	**First Time Capture and Payroll**
164	Time capture begins
165	First payroll
166	**Monitor and Control**

ID	Task Name	Duration	Sta
167	Monitor dashboard of performance standards	23 days	Sun
168	Monitor project effectiveness through established measurements	23 days	Sun
169	Analyze issues that have surfaced during lessons learned	22 days	Tue 1
170	Analyze deviation from original goal state, schedule, and budget	23 days	Sun 1
171	Initiate post-implementation plan	1 day	Sun 12/
172	**Closing**	**1 day**	**Fri 1/26**
173	Transfer project ownership to operational phase	0 days	Fri 1/26/
174	Full implementation of all solution requirements as agreed to	0 days	Fri 1/26/

Draft

Enclosure D: Personnel Resumes and Degrees

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Directors 49
Managers 108

Executive Team

Ben Bledsoe
President and Chief Executive Officer (CEO)

Mr. Bledsoe developed his expertise in home and community-based services through education, experience, and service. After obtaining his bachelor's from the University of Virginia, he successfully completed two years of Peace Corps service in Tonga and went on to receive a master's in health administration. Starting out at Consumer Direct Care Network as a caregiver in 2004, Mr. Bledsoe has applied his compassion for people and interests in business efficiencies to roles across the company including human resources and program management. Eleven years after being named CEO, he remains committed to ensuring the people we serve have a choice over the lives they lead.

Having worked his way up from an entry-level caregiver to president and CEO of Consumer Direct Care Network, Mr. Bledsoe has a comprehensive understanding of service provision that is rare in today's healthcare industry. In 2006, he served as manager of Consumer Direct Care Network's program in Arizona, then returned to Consumer Direct Care Network's Missoula headquarters in 2009 as Vice President of Operations. In 2012 he was named CEO of Consumer Direct. His international, executive, and practical field experience has helped Consumer Direct Care Network thrive as today's self-direction services industry leader.

Education

M.S. Health Administration, Kennedy Western University | 2006
B.A. Sociology, University of Virginia | 1999

Current Position

Director of Consumer Direct Holdings, Inc. (CDH) and CEO | Consumer Direct Care Network 2012-present

- Directs vision and goals for national family of home-based care companies
- Responsible for finances and operations in 14 states
- Maintains relationships with federal, state, and local government officials, appointees, and staff
- Collaborates with national and local managed care organizations on partnerships and new services
- Presents company initiatives and opportunities at events and conferences
- Makes and approves policy, personnel, investment, and strategic decisions
- Leads team of high-level executives
- Reports to the board of directors of CDH

Employment History

Vice President | Consumer Direct Care Network | 2009-2012

- Managed quality assurance measures for twelve affiliated companies
- Responsible for operations of nine companies in multiple states
- Implemented internal review procedures and tools
- Developed fraud prevention program
- Tracked and trended complaints, compliments, incidents and system issues
- Supervised electronic documentation systems and reports
- Supervised risk management, human resources and program development departments
- Lead responses to requests for proposals (RFPs) and identified new business opportunities
- Chaired quality improvement committee
- Oversaw and led special projects

Program Manager | Consumer Direct Personal Care Arizona | 2006-2009

- Developed self-directed models of personal care in Pima, Santa Cruz, and Maricopa Counties
- Initiated financial management services for several counties
- Communicated and collaborated with local and state program officials
- Assisted in securing contracts throughout Arizona
- Maintained operations and cohesion of Arizona offices including financial, procedural, regulatory (local, state, and federal), and human resources components
- Managed and supervised office supporting more than 350 employees

HR Associate | Nightingale Nursing and Caregiving | 2004-2006

- Trained staff on hands-on personal care to over 50 clients with developmental, physical, and emotional disabilities
- Conducted company orientation for new employees
- Handled newspaper and online advertising of open job positions
- Audited timesheets for Medicaid payment
- Responsible for emergency on-call tasks
- Safety committee member

Caregiver | Nightingale Nursing and Caregiving | 2004

- Provided in-home personal care to multiple clients in Northwest Montana

Kennedy-Western University

To all to whom these letters shall come Greeting
The Board of Governors of Kennedy-Western University on
the recommendation of the faculty by virtue of the
authority in them vested have conferred upon

Benjamin E. Bledsoe

who has satisfactorily completed the requirements therefor the degree of

Master of Science
Health Administration

August eleventh, two thousand and six

with all the rights and privileges pertaining thereto pursuant
to the State of Wyoming Private Schools Licensing Act.

Given at Kennedy-Western University, Cheyenne, WY U.S.A.

President

Board of Governors

EDUCATIO PRAEMIUM VITAE EST
KENNEDY - WESTERN

Chancellor

Board of Governors

The University of Virginia

The General Faculty of the University of Virginia have confirmed the degree of

Bachelor of Arts

upon

Benjamin Eric Bledsoe

who has completed the courses prescribed for this degree, In Testimony Whereof the General Faculty have caused this Diploma to be issued, verified by the signatures of the President of the University and the Dean of the School, and under the corporate seal of the University, attested by the Registrar, at Charlottesville, Virginia, this the twenty-first day of May, 2000 and in the two hundred twenty-fourth year of the Commonwealth.

Ann R. Antrobus
Registrar

President

Melvyn P. Zeffler
Dean

PEACE CORPS
Certificate of Appreciation
for
BENJAMIN ERIC BLEDSOE
2002 ~ 2004
Completing Service as a
United States Peace Corps Volunteer
in the
Kingdom of Tonga

Beth Peterson

Vice President/Chief Operating Officer

Ms. Peterson joined Consumer Direct Care Network in 2010 as a program manager and has since managed the operational implementations of several new state programs along with ongoing supervision of operations in the 14 states where we provide services. In addition to managing state programs, Ms. Peterson oversees our Quality Improvement, Claims and Training departments. She began her career working to improve the care of individuals with developmental disabilities. She has more than 22 years' experience managing F/EA -FMS and RC services. She is a certified trainer for person-centered planning. Her FMS services experience includes management of service delivery, billing, accounts payable, and payroll. Ms. Peterson received her bachelor's in psychology from the College of St. Benedict and advanced studies from St. Catherine University.

Education

Post-Baccalaureate Education, St. Catherine University | 1994
B.S. College of St. Benedict | 1991

Current Position

Vice President/Chief Operating Officer | Consumer Direct Care Network | 2013-present

- Oversees program operations of companies providing services in 14 states
- Oversees Quality Improvement, Claims and Training departments
- Develops and implements policies and procedures companywide
- Service development and implementation for new and existing programs
- Customer service and relations to our service partners
- Training and development of person-centered planning techniques and philosophies

Employment History

Regional Director | Consumer Direct Care Network | 2012-2013

- Supervised program operations of Consumer Direct Care Network companies providing services in four states
- Service development and implementation to diversify funding
- Developed and implemented policies and procedures
- Customer service and relations
- Training and development of person-centered planning techniques and philosophies

Program Manager | Consumer Direct Care Network | 2010-2012

- Lead reviewer for contract with Department of Human Services to recertify Fiscal Management Agencies for State of Minnesota
- Program lead on special projects related to accounts receivable, document management and maintenance and system efficiencies
- Customer service and relations to our service partners

Director of Services – Fiscal Management Agency | Partners in Community Supports| 2005-2010

- Supervised business operations of organization with annual revenue over $16 million
- Provided service to over 600 families within six programs
- Developed and implemented policies and procedures for organization
- Provided training to all employees about service delivery, participant directed services and person-centered service

Support Services Supervisor-Developmental Disabilities | Dakota Communities Inc. | 1991-2005

- Supervised services and employees providing participant care
- Service development and implementation
- Training and development of employees
- Managed budget and operations of over 20 different homes
- Provided support broker services to over 20 families using consumer directed services

College of Saint Benedict

Saint Joseph Minnesota

To all to whom these presents shall come, Greeting

Be It Known That

Elizabeth Marie Pearson

having completed the studies and satisfied the requirements for the degree of

Bachelor of Arts

has accordingly been admitted to that degree with all Rights and Privileges thereunto appertaining.

In Witness Whereof, we have caused this diploma to be signed and our Seal to be hereunto affixed this twenty-fifth day of May, in the year of our Lord One Thousand Nine Hundred Ninety-one.

Sr. Colman O'Connell
President of the College

C. J. Vidette
Vice President for Academic Affairs

Jeff Harriott

Vice President/Chief Technology Officer

Mr. Harriott joined Consumer Direct Care Network in 2012, bringing with him over 30 years of IT consulting, service delivery, and management experience. Prior to joining us, Mr. Harriott was a senior manager at Microsoft's consulting services organization. In that role, Mr. Harriott led major technology initiatives for Microsoft's enterprise customers across the U.S. Mr. Harriott 's experience also includes six years with KPMG Peat Marwick where he was a manager in the Government Services Practice that focused on planning, development, and implementation of Medicaid Management Information Systems (MMIS) for state Medicaid agencies. Mr. Harriott received his master's in business administration from Arizona State University and his bachelor's from the University of Montana. His professional certifications include Microsoft Certified Systems Engineer (MCSE), and Microsoft Certified Technology Specialist (MCTS) - Dynamics.

Education

M.B.A. Arizona State University | 1979
B.S. Business Administration, University of Montana | 1978

Current Position

Vice President/Chief Technology Officer | Consumer Direct Care Network | 2019-present

- Executive lead for the Consumer Direct Care Network Washington business unit, providing personal care services to over 45,000 Medicaid clients across the state of Washington
- Maintains profit and loss responsibility for a $2 billion annual business with 550 administrative employees and over 45,000 caregivers in a consumer-directed/co-employment framework
- Leads information technology strategy development and execution across Consumer Direct Care Network

Employment History

Chief Information Officer | Consumer Direct Care Network | 2012-2019

- Led and managed information technology operations for the Consumer Direct family of companies
- Oversaw scope of operations covering network infrastructure for data, video and voice, data center operations, custom application development, application support/maintenance, and help desk support for over 500 employees
- Strategic planning for technology services across the enterprise

Senior Manager | Microsoft Consulting Services, Microsoft Corporation | 2001-2012

- Managed consulting services projects for Microsoft's largest customers in the western US, with a focus on large-scale e-commerce and messaging implementations

- Responsible for $4 million consulting revenue a year, management and development of technical resources, and the entire service delivery lifecycle for customer engagements

Principal | IBM Corporation | 1999-2001

- Directed operations for a 70-person consulting and development group focused on e-commerce and system integration using Microsoft technologies
- Led recruiting and marketing efforts

Managing Consultant | Excell Data Corporation | 1996-1999

- Responsible for account development, account management and service delivery in a strategic planning and infrastructure development practice for a regional Microsoft Solution Provider

Chief Information Officer | Swedish Medical Services | 1994-1995

- Directed implementation of a new data center, including all planning, design, product procurement, system testing, and implementation for a start-up administrative services organization, across fourteen remote sites

Manager, Government Services Practice | KPMG Peat Marwick | 1988-1994

- Directed Medicaid Management Information Systems (MMIS) design and implementation projects for state Medicaid agencies

Arizona State University

Greeting to all to whom these Letters shall come

The Arizona Board of Regents
by virtue of the authority vested in it by law and
on recommendation of the University Faculty does hereby confer on

Jeffrey Bernard Harriott

who has satisfactorily completed the Studies prescribed therefor
the Degree of

Master of Business Administration

with all the Rights, Privileges and Honors thereunto appertaining

In witness whereof the Seal of the University is hereto affixed
Done at Tempe, Arizona, this tenth day of August, in the
year of our Lord one thousand nine hundred and seventy-nine

ARIZONA STATE UNIVERSITY · 1885 · GREAT SEAL OF THE STATE OF ARIZONA 1912

Ralph M. Bibby
President of the Board

William D. Payne
Secretary of the Board

Bruce Babbitt
Governor of Arizona

Lynn A. Townsend
President of the University

Lynn A. Underwood
Registrar of the University

11

The Montana University System

The Board of Regents of Higher Education by virtue of the authority vested in them and on the recommendation of the Faculty of

University of Montana

Hereby confer upon

Jeffrey Bernard Harriott

The Degree of

Bachelor of Arts in Business Administration

With Honors

with all the rights, privileges and honors, as well as the obligations and responsibilities appertaining

Given at Missoula, Montana, June 11, 1978.

THE GREAT SEAL OF THE MONTANA UNIVERSITY SYSTEM

Richard L. Bowers
President

Ted James
Chairman of the Board of Regents

Paul B. Blomgren
Dean

Lawrence K. Pettit
Commissioner of Higher Education

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Daryl Holzer

Chief Financial Officer

Mr. Holzer joined Consumer Direct Care Network in 2003 as a Systems Director. In this role, Mr. Holzer improved companywide accounting, payroll, accounts receivable, accounts payable, data entry, information technology and cash management processes. In 2013 he became the company's Chief Analytics Officer where he oversaw the analytics team and provided program operations data analytics. As of 2016, Mr. Holzer has served as Consumer Direct Care Network's Chief Financial Officer. In this role he oversees fiscal analysis and data as well as managing Consumer Direct Care Network's analytics, legal, and facilities departments. He concurrently earned bachelor's degrees in business administration and computer science from the University of Montana. Mr. Holzer is certified as both a public accountant and a management accountant.

Education and Certifications

B.S. Business Administration, University of Montana | 1987
B.S. Computer Science – Business Systems | 1987
Certified Public Accountant, State of Montana and State of Tennessee
Certified Management Accountant

Current Position

Chief Financial Officer | Consumer Direct Care Network | 2016-present

- Increases efficiency while analyzing future needs and developing business models for Consumer Direct Care Network
- Performs program fiscal analysis and data support to evaluate programmatic changes and trends
- Oversees the analytics, legal, facilities, and provides supporting data and analysis required to ensure programs continue to operate efficiently
- Oversees banking, cash management, and financial reporting for the enterprise

Employment History

Chief Analytics Officer | Consumer Direct Care Network | 2013-2016

- Oversaw the analytics team and provided supporting data and analysis required to ensure efficient program operations
- Performed program fiscal analysis and data support
- Improved efficiency and analyzed future needs to develop business models for Consumer Direct

Systems Director | Consumer Direct Care Network | 2003-2013

- Oversaw and managed accounting, payroll, information systems, billing, accounts receivable, and data entry departments
- Led efforts to improve process flow and systems automation across the company

Controller | St. Patrick Hospital | 1996-2001

- Managed accounting of general ledger, accounts payable, accounts receivable, payroll, purchasing and medical records
- Responsible for financial statement preparation, annual audit, governmental reporting, budgeting and accounts payable
- Implemented MEDITECH information system (client server)
- Direct involvement with the general ledger, fixed asset, accounts payable, payroll, billing and accounts receivable system modules
- Improved processes of all system modules and the financial reporting systems

Financial Analyst | St. Patrick Hospital | 1994-1996

- Effectively reduced labor time of preparing financial statements
- Developed cost analysis model for hospital procedures
- Automated statistical record keeping

Assist. Accounting Manager | Alexander & Alexander of Texas | 1990-1994

- Analyzed client profitability and assisted Accounting Manager in rolling financial forecasting
- Designed a forecast/income tracking system that reduced the time managers spent projecting their rolling forecast

Analytics | Electronic Data Systems | 1987-1990

- Improved organization accounting processes

State of Montana
Business Standards Division
Board of Public Accountants

This certificate verifies licensure as:
CPA LICENSE

PAC-CPAP-LIC-3642

Status: **Active**
Expires: **12/31/2023**

DARYL MICHAEL HOLZER CPA
5409 BONANZA PL
MISSOULA, MT 59808

Montana Department of
LABOR & INDUSTRY
RENEW OR VERIFY YOUR LICENSE AT:
https://ebiz.mt.gov/pol

Renew online at https://ebiz.mt.gov/pol by signing in with your username and password.
The renewal cycle for your board opens 60 days prior to the expiration date on your current license. Renew your license prior to your expiration date to avoid being charged a late fee(s).
Remember to maintain your online account information with a password, security question and a valid email address. You can update your account information by accessing the 'Account Management' link when logged in.

THE INSTITUTE OF CERTIFIED MANAGEMENT ACCOUNTANTS

of the

NSTITUTE OF MANAGEMENT ACCOUNTANTS

proclaims that

DARYL MICHAEL HOLZER

has earned the designation

CERTIFIED MANAGEMENT ACCOUNTANT

in recognition of demonstrated knowledge and competence in

Management Accounting

and confers herewith all the rights, privileges, and responsibilities

as prescribed by the Board of Regents.

SEPTEMBER 30, 1993

Leo M Horalle
PRESIDENT

John Pollan
CHAIRMAN, BOARD OF REGENTS

Gary M. Supa
SECRETARY

James Bullock
MANAGING DIRECTOR

INSTITUTE OF CERTIFIED MANAGEMENT ACCOUNTANTS · CMA · 1972 ·

Certificate Number 13458

16

The Montana University System

The Board of Regents of Higher Education by virtue of the authority vested in them and on the recommendation of the Faculty of

University of Montana

hereby confer upon

Daryl Michael Holzer

The Degree of

Bachelor of Science in Business Administration

with all the rights, privileges and honors, as well as the obligations and responsibilities appertaining

Given at Missoula, Montana, August 14, 1987.

THE GREAT SEAL OF THE MONTANA UNIVERSITY SYSTEM

James V. Koch
President

Dennis E. Lind
Chairman of the Board of Regents

Dean

Commissioner of Higher Education

The Montana University System

The Board of Regents of Higher Education by virtue of the authority vested in them and on the recommendation of the Faculty of

University of Montana

hereby confer upon

Daryl Michael Holzer

The Degree of

Bachelor of Science

with all the rights, privileges and honors, as well as the obligations and responsibilities appertaining

Given at Missoula, Montana, August 14, 1987.

GREAT SEAL OF THE MONTANA UNIVERSITY SYSTEM

James V. Koch
President

Dennis E. Lind
Chairman of the Board of Regents

James A. Flightner
Dean

Connie Bruner
Commissioner of Higher Education

18

Jim McInnis

Chief Administrative Officer

In 2021, Mr. McInnis joined Consumer Direct Care Network as Chief Administrative Officer (CAO). He has over 20 years of hands-on experience building and scaling healthcare organizations with a community focus. Before coming to Consumer Direct Care Network, Mr. McInnis developed and led teams who implemented consumer directed programs in over 25 states, serving over 120,000 consumers, managing a workforce of over 300,000 caregivers, and over $3 billion of Managed Care Organization and Medicaid funds. He is also a parent of a person with a disability and understands the impact of innovative homecare through his own personal experience. As the CAO, Mr. McInnis oversees Consumer Direct Care Network's accounting and payroll teams.

Education

MBA Master of Business Administration, Clark University | 2009
B.A. Political Science, Northeastern University | 1996
B.A. Law and Legal Studies, Northeastern University | 1996

Current Position

Chief Administrative Officer | Consumer Direct Care Network | 2021-present

- Oversees accounting, payroll and tax, teams
- Provides input in business and strategic planning
- Oversees resource allocation and budgeting
- Responsible for overall reporting and audit activities to ensure compliance with regulatory agencies
- Ensures accurate and appropriate processing policies and results

Employment History

Vice President | MedAcuity Software, LLC | 2020-2022

- Implemented multiple new management platforms and capabilities to scale business
- Led management team in execution of strategic and operating plans to promote innovation initiatives,
- Managed profit and loss (P&L) of organization

Chief Operating Officer | 4Winds Equity Advisors | 2019

- Managed due diligence and acquisition analysis
- Oversaw ASC 606 reviews
- Managed Board development
- Created strategic business plans in collaboration with management
- Built tactically compelling budgets for rapid growth

Chief Administrative Officer | Public Consulting Group | 2017-2019

- Led complex agreements with MCOs and state agencies/governments
- Oversaw three national product lines of +100k accounts, strategic enterprise initiatives and union workforce relations
- Negotiated pricing, SLAs, data security/SOC, CRs
- Directed account management, HR, audit and legal teams and provided updates to President and board of Directors

Chief Financial Officer | Public Consulting Group | 2007-2017

- Led complex agreements with MCOs and state agencies/governments
- Oversaw three national product lines of +100k accounts, strategic enterprise initiatives and union workforce relations
- Negotiated pricing, SLAs, data security/SOC, CRs
- Directed account management, HR, Audit & Legal

Director of Financial Services & Delivery | Public Consulting Group | 2005-2007

- Digitally transformed shared services and streamlined customer journeys
- Motivated and led teams to innovate and create capabilities and services for managed care and state/government customers
- Achieved business' first profitable quarter and led business development, generating +$8M annual growth

Manager, Finance & Program Delivery | Public Consulting Group | 2000-2005

- Led six client-facing teams across multiple states in fast growing national practice
- Led teams to design, test and deploy specialized ERP systems in government markets
- Led cross-functional teams across operations, PMO, and business development
- Launched new product line and led double digit sales growth for five years

Associate, Public Policy Research | Boston Municipal Research Bureau| 1996-2000

- Published original research and analysis on City of Boston's operating and capital budgets ($1.8B) and collaborated with public officials to improve program effectiveness and efficiency
- Researched findings frequently reported in newspapers and mass media

Associate, Investor Relations- Biotechnology & Pharmaceuticals| Feinstein Partners| 1994-1996

- Produced investor communications including press releases, company descriptions, and investor presentations
- Conducted research on venture capital private placements and presented findings via mass media
- Supported industry trade group

Clark University

Worcester, Massachusetts

Know all persons by these presents that

James A. McInnis

having complied with all conditions prerequisite thereto
is admitted to the degree of

Master of Business Administration

and is entitled to all the Honors, Rights and Privileges
appertaining to that degree.

Given this 17th day of May, 2009

For the Trustees

Chairman

Secretary

For the Faculty

President

Dean of the Graduate School of Management

Northeastern University

Boston, Massachusetts

College of Arts and Sciences

Upon recommendation of the President and Faculty and by authority of the Commonwealth of Massachusetts the Board of Trustees has conferred the degree of

Bachelor of Arts

Cum Laude

upon

James A. McInnis

with all the honors, privileges and responsibilities appertaining thereunto.

Signed and sealed at Boston, Massachusetts, this fifteenth day of June in the year one thousand nine hundred and ninety-six.

Robert P. Lawless

John A. Curry

Jack Nichols

Chief Information Officer

Mr. Nichols is an accomplished IT leader with more than two decades' experience managing teams across a broad spectrum of successful projects. He is adept at technical problem solving and troubleshooting in networking, server and software environments. Mr. Nichols is an expert at business process improvement and is able to build trust and buy-in from coworkers and clients. Mr. Nichols brings his wealth of experience and knowledge to improve Consumer Direct's systems and technology.

Education

MBA Essentials (12-week course), Continuing Education, University of Montana
B.S. Finance, and minor in Computer Science, Oregon State University 2004

Current Position

Chief Information Officer | Consumer Direct Care Network | 2019-present

- Sets objectives and strategies for the IT department
- Selection and implementation of technology to streamline internal operations and optimize strategic benefits
- Designs and customizes technological systems and platforms to improve customer experience
- Scope of operations include network infrastructure, data, video, voice, data center, operations, custom application development, application support and maintenance, and help desk support for over 700 employees

Employment History

IT Director | Consumer Direct Care Network | 2018-2019

- Oversaw IT core applications management and support of custom web portals, transaction processing systems, customer relationship management systems (Dynamics CRM), and various electronic visit verification platforms
- Administered IT support of enterprise services: financial processing platform (Dynamics SL), DocuWare, 1EDI, Esker, printers, and device lifecycle management
- Supervised IT vendor management of tier one and two software and hardware providers
- Handled license management and administration
- Monitored help desk and IT support
- Facilitated business continuity and disaster-recovery initiatives
- Served as HIPAA Security Officer
- Led IT initiatives for new services and platforms: SharePoint, Systems Center, web self-service, CRM improvements, call center platform improvements and cross-platform integrations
- Managed IT annual planning activities
- Directed design/deployment of infrastructure expansion and network growth

Project Manager | Corporate Technology Group | 2012-2017

- Managed IT projects for businesses across Montana for clients in insurance, retail, education, and other businesses
- Managed eight to 12 IT projects per year valued from $4k to $150k
- Projects included: Software development, routing, switching, servers, and data backup
- Collaborated with clients, engineers, and developers for successful outcomes
- Managed company's CRM solution (ConnectWise)

Principal and Owner | Vera-Tech LLC | 2007-2012

- Contracted to perform COO and CTO functions for IKS, Inc. and consulted with small businesses on IT projects
- Designed and managed the development of company's initial product with a budget of $300k
- Tested and procured kiosk hardware for placement in 20 locations in US and Canada
- Oversaw installation and data synchronization of units in the field
- Configured email, networks, and created small business websites for clients

Chief Information Officer | ALPS Inc. | 1999-2007

- Responsible for planning and executing all IT initiatives for $40M insurance company
- Worked with other executive team members to develop company strategy and goals to improve operational efficiencies
- Managed team of five IT professionals, two programmers, and an outsourced development vendor
- Managed IT budget of over $350k annually
- IT projects during eight years tenure contributed in company growth from $18M to $40M
- Project manager for custom insurance software development that included accounting, underwriting, claims, paperless filing and CRM modules
- Consulted with law firms and bar associations across the country on IT needs

Project Management Institute.

THIS IS TO CERTIFY THAT

Jack L. Nichols

HAS BEEN FORMALLY EVALUATED FOR DEMONSTRATED EXPERIENCE, KNOWLEDGE AND PERFORMANCE IN ACHIEVING AN ORGANIZATIONAL OBJECTIVE THROUGH DEFINING AND OVERSEEING PROJECTS AND RESOURCES AND IS HEREBY BESTOWED THE GLOBAL CREDENTIAL

Project Management Professional (PMP)®

IN TESTIMONY WHEREOF, WE HAVE SUBSCRIBED OUR SIGNATURES UNDER THE SEAL OF THE INSTITUTE

Jennifer Tharp | Chair, Board of Directors

PROJECT MANAGEMENT INSTITUTE CORPORATE SEAL 19 69 PENNSYLVANIA

Pierre Le Manh | President & CEO

PMP® Number: 1679659

PMP® Original Grant Date: 17 December 2013

PMP® Expiration Date: 17 December 2025

Oregon State University

To all to whom these letters may come, Greeting

The State Board of Higher Education, by virtue of the authority vested in it by law, and on recommendation of the Faculty Senate, has conferred on

Jack Lee Nichols

the degree of

Bachelor of Science

Business Administration

with all the rights, privileges, and honors thereto appertaining.

In testimony whereof we have subscribed our names and impressed the seal of Oregon State University on this diploma at Corvallis, Oregon, this third day of June, Nineteen Hundred and Eighty-Four.

William E. Davis
Chancellor of the Oregon University System

Robert Maddox
President of Oregon State University

Robert C. Ingalls
President of the Board

Mickey Ogg

Chief Development Officer – Implementation Executive

2023 marks Mr. Ogg's 16th year at Consumer Direct Care Network. He joined Consumer Direct shortly after obtaining his master's in business administration from the University of Montana. He started out developing business plans and implementing document management systems as a Special Projects Coordinator in 2007. As a result of his quick and thorough mastery of project implementation, he advanced to Quality Improvement Manager in 2009, to Chief Commercial Officer in 2014, and was most recently named Chief Development Officer overseeing procurements, business relationships, human resources, and government relations. Mr. Ogg has overseen implementation of our programs in Washington, Colorado, Washington D.C. and Virginia, and has successfully directed us through our first companywide rebranding initiative. He served as the Implementation Executive for Consumer Direct Care Network's largest program in Washington.

Education

M.B.A. University of Montana | 2007
B.A. History, University of Washington | 1999

Current Position

Chief Development Officer | Consumer Direct Care Network | 2018-present

- Acts as Implementation Executive of Consumer Direct Care Network Washington
- Acts as implementation executive supporting new contracts and business growth
- Oversees all business development, sales, marketing, human resources, government relations, and policy and legislative engagement strategy for over fourteen distinct Medicaid, Medicare, and Private Pay funded programs
- Oversees new business opportunity coordination, RFP development, and implementation of new programs nationwide

Employment History

Chief Commercial Officer | Consumer Direct Care Network | 2014-2018

- Oversaw internal quality assurance review for over 20 distinct state Medicaid, Medicare, and Private Pay funded programs
- Managed policy analysis, new business development, marketing, and community relations departments for all companies
- Oversaw new business opportunity coordination, RFP development, and implementation of new programs nationwide

Chief Compliance Officer | Consumer Direct Care Network| 2011-2014

- Managed the quality assurance team
- Worked closely with all 11 state directors and program managers in annual audits and ongoing regulatory compliance review

- Developed a comprehensive understanding of state regulations and program operations in multiple state environments

Quality Improvement Manager | Consumer Direct Care Network | 2009-2011

- Guided internal reviews and compliance efforts across multiple state programs
- Monitored existing policies, procedures, and state rules and regulations to ensure programmatic operations were compliant

Special Project Coordinator | Consumer Direct Care Network | 2007-2009

- Developed business plans and implemented a document management system

On the recommendation of the Faculty,

The University of Montana-Missoula

hereby confers upon

Mickey K. Ogg

The Degree of

Master of Business Administration

with all the rights, privileges and honors, as well as the obligations and responsibilities appertaining

Given at Missoula, Montana, July 27, 2007

George M. Dennison
President

Lynn Morrison Hamilton
Chair of the Board of Regents

Dean

Sheila M Stearns
Commissioner of Higher Education

By authority of the Board of Regents of

The Montana University System

The University of Washington

The Regents of the University on recommendation of the University Faculty and by virtue of the Authority vested in Them by Law have conferred upon

Mickey K. Ogg

the degree of

Bachelor of Arts

and have granted all the Rights, Privileges and Honors thereto pertaining
Given at Seattle, in the State of Washington, this eleventh Day of June, One Thousand Nine Hundred and Ninety-nine, in the One Hundred and thirty-ninth Year of the University.

President of the Board of Regents

UNIVERSITY OF WASHINGTON 1861

Richard L. McCormick
President of the University

Dean, College of Arts and Sciences

Senior Directors

Anthony Maricich

Quality Improvement Senior Director

As the Quality Improvement (QI) Senior Director, Mr. Maricich oversees the QI, Training, Quality Management, UTEX, Caregiver Entry, and FEA departments. In this role, he maintains interdepartmental relationships and works closely with program management nationwide for tailored problem-solving. His experience in this department has positioned him to efficiently and successfully perform process improvement tasks for new and existing contracts while ensuring that quality standards are defined and upheld.

Education

Certified Lean Six Sigma Black Belt Professional, Six Sigma Global Institute | 2022
B.A. Geography, University of Washington | 2014

Current Position

Quality Improvement Senior Director | Consumer Direct Care Network | 2021-present

- Oversees the Quality Improvement, Quality Management, Training, UTEX, FEA, and Caregiver Entry departments
- Identifies networkwide trends and assists with process improvement initiatives
- Oversees self-paced electronic enrollment packet builds
- Identifies technical improvements to Consumer Direct Care Network's systems that can streamline processes and improve data visibility
- Gathers outcome data on company performance measures
- Provides external review support
- Gathers and analyzes customer satisfaction data
- Works with local offices to identify trends and recommend solutions

Employment History

Quality Improvement Director | Consumer Direct Care Network | 2020-2021

- Oversaw the Quality Improvement, Training, UTEX, and Caregiver Entry departments
- Identified networkwide trends and assists with process improvement initiatives
- Oversaw self-paced electronic enrollment packet builds
- Identified technical improvements to Consumer Direct Care Network's systems that can streamline processes and improve data visibility
- Gathered outcome data on company performance measures
- Provided external review support
- Gathered and analyzed customer satisfaction data

Quality Improvement Manager | Consumer Direct Care Network | 2016-2020

- Oversaw the quality improvement department
- Conducted internal reviews
- Gathered outcome data on company performance measures
- Monitored State and Federal regulations
- Provided external review support
- Tracked and compiled fraud allegation reports
- Designed and revised company forms
- Gathered and analyzed customer satisfaction data
- Maintained electronic records system
- Led ongoing compliance training
- Worked with local offices to identify trends and recommend solutions

Quality Improvement Associate | Consumer Direct Care Network | 2015-2016

- Conducted internal reviews
- Monitored State and Federal regulations
- Provided external review support
- Gathered customer satisfaction data
- Maintained electronic records system
- Led ongoing compliance training
- Worked with local offices to identify trends and recommend solutions

SIX SIGMA GLOBAL INSTITUTE

THIS IS TO CERTIFY THAT

Anthony Maricich

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HAS BEEN FORMALLY EVALUATED AND MET THE REQUIREMENTS SET FORTH BY SIX SIGMA GLOBAL INSTITUTE TO BE AWARDED THE TITLE OF CERTIFIED LEAN SIX SIGMA BLACK BELT PROFESSIONAL.

SSGI

Zachary R. Shore | Managing Director | SSGI

April 10, 2022

www.SixSigmaGlobalInstitute.com

ID Number: 49538017

The University of Washington

The Regents of the University on recommendation of
the University Faculty and by virtue of the Authority
vested in them by Law have conferred upon

Anthony Micheal Maricich

the degree of

Bachelor of Arts

and have granted all the Rights, Privileges and Honors thereto pertaining
Given at Seattle, in the State of Washington,
this thirteenth Day of June, One Thousand and Fourteen,
in the One Hundred and fifty-fourth Year of the University.

Owen Smith
Chair of the Board of Regents

Robert C. Stacey
Dean, College of Arts and Sciences

Kari Vinopal

Senior Director

Ms. Vinopal has worked with Consumer Direct Care Network since 2008 and has been essential to successfully implementing and managing several of our programs nationwide. In her fifteen years at Consumer Direct, she has led the implementation of our F/EA and Supports Broker program in Washington DC, our implementation with the State of Colorado as the Operations and Training vendor supporting three FMS providers, was key to implementing our work in Virginia, and has played a significant role in coordinating systems and operations implementation in the State of Washington. Ms. Vinopal has a B.S. in social work and is a licensed social worker (LSW) in Minnesota. She has experience as a social worker in child protection and with program participants with intellectual disabilities. While in these roles, she developed individualized participant care plans and provided oversight and monitoring of the plans to ensure the needs of program participants and families were met. She has also completed the National Leadership Consortium on Developmental Disabilities at the University of Delaware.

Education

B.S., Social Work, University of Minnesota at Mankato | 1997

Current Position

Senior Director | Consumer Direct Care Network | 2017-present

- Ensure the business operates within the company's mission statement
- Work with department heads and executive team to get the best performance
- Review working practices to ascertain if it is successful and if not, devise an alternative
- Oversee system integration and standardization of business practices across Program Offices
- Ensure financial targets and other agreed targets are met in company
- Investigate customer satisfaction and reporting any issues
- Work with compliance department on any items that may occur
- Monitor the day-to-day delivery of the programs and services of the organization to maintain or improve quality
- Identify trends across program companies and establish a plan to address or expand if necessary
- Motivates employees, cultivates leadership, and organizes training
- Establish a positive, healthy, and safe work environment in accordance with all appropriate legislation and regulations
- Provides new business implementation assistance

Employment History

Operations Director | Consumer Direct Care Network | 2014-2017

- Supervised day to day operations for three companies in three states
- Supervised the regulatory environments in three states, including state agency directed changes to the FEA and Co-Employment self-directed programs in both states
- Oversaw the development of FEA and Co-Employment training materials and regulatory changes for self-directed services in Colorado and Wisconsin
- Responsible for oversight of the implementation of programmatic changes across program operations in Colorado, Washington DC, and Wisconsin

Program Manager | Consumer Direct Care Network Wisconsin | 2008-2014

- Worked to develop relationships with state staff and grow newly contracted self-directed programs from the ground up
- Completed face to face enrollments with new consumers
- Trained local Consumer Direct staff on enrollment, program policy and procedure, and providing excellent customer service
- Grew Consumer Direct Care Network Wisconsin program one client at a time through in-person contact and continued attention to detail regarding response to consumer concerns, staffing needs, programmatic changes, and the ever-growing complexity of the self-directed environment

Director, Consumer Directed Supports | Mains'l Services, Inc | 2007-2008

- Facilitated inter-department relationships to deliver timely customer service
- Implemented all program and organizational requirements
- Marketing team member assigned to develop and implement agency marketing strategies

CDCS Administrator | Cooperating Community Programs | 2002-2007

- Directed, wrote and successfully passed the State of Minnesota Fiscal Management Readiness Review and Recertification Review
- Human Resource Management for 400 employees, including personnel file maintenance, unemployment, workers' comp, orientation, discipline, policy and procedure

Executive Director, Community Service | Cooperating Community Programs | 2001-2002

- Built new service options for families with children with disabilities
- Communicated and networked with County and State of Minnesota personnel
- Provided program oversight in accordance with Minnesota licensing standards

Sports Program Manager | Special Olympics Minnesota | 2000-2001

- Managed and coordinated program operations of Northern Minnesota
- Supervised 3,000 volunteers, 2,000 athletes and 100 Special Olympics Teams
- Organized and administered 30 Special Olympics sporting events at regional level

Executive Director | LEEP | 1995-2000

- Created, planned, implemented and evaluated recreational programs for 650 program participants with disabilities

Board of Social Work

Name	Vinopal Kane, Kari Ann	Issued	Dec 2, 1997
Type	13466 - Licensed Social Worker	Last Renewed	Dec 1, 2021
Status	Active	Expiration	Nov 30, 2023

Public Actions

Date	Public Action	Action Type(s)	Statutory Citation(s)
No items to display			

This information is valid as of: Thursday, April 27, 2023 6:28:13 PM. The licensure data on this website is provided and controlled by the Minnesota Board of Social Work. Licensure information is updated as changes to status occur, is secure and considered primary source for verification of a Minnesota license.

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Mankato State University

Mankato State University

upon the recommendation of the faculty

has conferred upon

Kari Ann Vinopal

the degree of

Bachelor of Science

Given at Mankato, Minnesota, this eighteenth day of July, 1997.

President of the University

Leslie Mitchell

Senior Director

Ms. Mitchell is one of our Senior Directors, managing Consumer Direct Care Network's services in Arizona, New Mexico, Nevada, Texas, Virginia and Washington D.C. Ms. Mitchell joined Consumer Direct in 2014 as our State Director where she led operations in Arizona and Texas. As the State Director, she was responsible for oversight of budgets, key performance indicators and client satisfaction levels. She also implemented an Emergency Preparedness Program for Consumer Direct's Medicare Certified Home Health Agency. In addition, she drove strategic business objectives and implemented governing body directives, ensuring appropriate policy development for Consumer Dirct's programs. In this role, Ms. Mitchell has led post-acquisition transitions and start-ups in Arizona, Texas and Virginia. She has also managed projects of cross departmental system implementations and integrations, including implementations with multiple home health Electronic Visit Verification (EVV) vendors.

Education

SHRM Certified People Manager Qualification |2021
B.S. Biology, University of California Irvine |1995

Current Position

Senior Director | Consumer Direct Care Network | 2018-present

- Directs operations across multiple departments for operations located in Arizona, Nevada, New Mexico, Texas, Florida, Virginia and Washington DC
- Drive P&L management and financial forecast resulting in year over year increases in net income across all business
- Guides operations teams in Organization Health initiatives, which improve employee engagement and retention
- Led post-acquisition transitions and start-ups in Arizona, Texas and Virginia
- Manages cross department system implementations and integrations, including implementations with multiple Home Health Electronic Visit Verification vendors

Employment History

State Director | Consumer Direct Care Network | 2014-2017

- Directed recruiting, hiring and training of administrative staff, placing an emphasis on achieving high levels of customer service and employee engagement
- Managed fiscal budgeting process, including oversight of profit and loss statement, annual projections and fiscal trends
- Implemented governing body directives ensuring appropriate policies were developed
- Increased Medicare, Commercial Insurance and Private Pay admissions
- Successfully passed Medicare Survey with no deficiencies for services provided in 2017
- Implemented CMS approved Emergency Preparedness Program

- Monitored Score Card data weekly with a focus on key performance indicators for CMS Home Healthcare Consumer Assessment of Healthcare Providers and Systems (HHCAPHS)

Senior Account Manager | AccentCare Inc.,| 2008-2014

- Served in business development and operations role and maintained a $25M sales territory
- Managed and supported direct sales and operations staff
- Compiled and assessed monthly enrollment numbers, census data, and P&L statements
- Worked with C-level leaders at AHCCCS/AZ Medicaid Plans to ensure positive health outcomes for members
- Developed and implemented strategic plan by industry, customer, competitor and target market
- Secured 17 new contracts by researching, facilitating, and writing 23 RFP responses in AZ, TX, and WA
- Helped company rank in ten fastest-growing venture capital-backed startups in Southern California
- Generated 35% increase in clients over two years by introducing products such as health cards, consumer directed care, flu immunization campaign, and wound tracking log
- Board Member of Direct Care Workforce Steering Committee for Governor's Interagency Council on Long Term Care
- Chaired Marketing & Public Education Sub-Committee for Direct Care Workforce Initiative

Area Operations Manager| AccentCare Inc., | 2004-2008

- Led team of 150 employees in Phoenix and Tucson home care and home health markets
- Developed annual budgets
- Assessed P&L statements
- Managed multi-market sales team
- Tracked revenue, census and start-of-care data
- Ranked #2 in company for revenue and #3 in company for center contribution in 2006 and 2007
- Oversaw business in Phoenix and Tucson markets with $3.5M+ yearly revenues

Account Executive | AccentCare Inc., | 2003-2004

- Marketed services to hospitals, senior-living facilities, hospice, physicians, and fiduciaries in Bay Area
- Worked with Care Center Team to identify market opportunities and develop local sales plan
- Posted 100% of company start-of-care and revenue goals
- Positioned long-term success by forging excellent relations with key referral sources

Certificate of Achievement

SHRM – The Society for Human Resource Management – Hereby Certifies That:

Leslie Mitchell

Has achieved the SHRM People Manager Qualification.

By meeting the education, application and demonstrated competency and knowledge standards as established by SHRM.

Witness the signature of the duly authorized officer of SHRM:

JOHNNY C. TAYLOR, JR., SHRM-SCP
President and Chief Executive Officer, SHRM

SHRM
BETTER WORKPLACES
BETTER WORLD™

Date Completed:12/27/2021
SHRM Course Credits:16.50
SHRM Activity ID:30-ZGVV3

UNIVERSITY OF CALIFORNIA, IRVINE

BERKELEY • DAVIS • IRVINE • LOS ANGELES • MERCED • RIVERSIDE • SAN DIEGO • SAN FRANCISCO SANTA BARBARA • SANTA CRUZ

UNIVERSITY REGISTRAR

213 Aldrich Hall
Irvine, CA 92697-4975
Phone: (949) 824-6124
Fax: (949) 824-7896
http://www.reg.uci.edu

May 5, 2023

OFFICIAL VERIFICATION OF DEGREE

This is to certify that Leslie Ruth Girand was awarded the following degree(s):

Degree Type	Major	Date
Bachelor of Science	Biological Sciences	September 13, 1995

Our records indicate that the student's birth date is 04/26/73.
Student ID: 31370-316

Elizabeth Bennett
University Registrar

Maria Trujillo

Claims Director

Ms. Trujillo first joined Consumer Direct Care Network in 2014 as a Data Entry Associate. Over the past eight years, Ms. Trujillo has advanced within the company and now serves as Consumer Direct Care Network's Claims Director. In this position, she oversees claims processing, service authorization entry, timesheet entry and shift adjustments for companies in 15 states. As the Claims Director, Ms. Trujillo has played an important role in several of Consumer Direct Care Network's recent implementations. Her growth path within the company gives her unique insights of the procedures regarding Medicaid billing that will serve her well in this role.

Education

Teaching English as a Foreign Language Certificate, Costa Rica TEFL | 2013
B.A., History, University of Montana | 2013

Current Position

Claims Director | Consumer Direct Care Network | 2020-present

- Oversees claims processing, service authorization entry, timesheet entry, and shift adjustment teams for companies in 15 states
- Collaborated with executive team, senior directors, managers and other departments to achieve the biggest company implementations to date
- Analyzes claims data and develops reporting to provide key insights to executive team and board members, identifying trends, and implementing more efficient and compliant practices
- Worked closely with the development teams in designing and implementing new software for demographics, service authorizations, billing, payroll and more
- Played a key role in defining automation logic and procedures to increase efficiencies and scalability
- Responsible for over six million claims annually and overseeing a department of 90+ staff members
- Identifies trends and potential risks
- Provides training and feedback for staff
- Collaborates with staff across the country to manage projects and implementations

Employment History

Claims Manager | Consumer Direct Care Network | 2020

- Oversaw claims processing for companies in Arizona and Nevada
- Claims and service authorizations subject matter expert
- Managed the reconciliation of an electronic visit verification implementation in the Nevada company where billing was handled by an external vendor

Business Analyst | Consumer Direct Care Network| 2020

- Worked with IT, business users, and development teams on the creation of a new systems platform
- Coordinated discussions about system functionality and intended use
- Created supporting documentation and user stories for proposed system functionality, screens, and processes
- Used experience in service authorizations to create logic for service authorization automation

Authorizations Team Lead | Consumer Direct Care Network | 2017-2019

- Oversaw the processing of service authorizations and client demographics for multiple companies
- Collaborated with departments throughout the company to navigate new implementations and projects
- Ensured data integrity by utilizing and creating new reporting procedures to catch errors, maintain compliance, and report metrics
- Provided training and feedback for staff

Service Log Specialist | Consumer Direct Care Network | 2016-2017

- Created a new role and position for handling any adjustments to shifts already processed through business rules
- Performed all adjustments single-handedly for all states and payers
- Implemented new SOPs for shift adjustments to ensure accuracy, compliance, and eliminate risk
- Identified and reported trends to program operations and other departments to minimize potential billing issues

Data Entry Associate | Consumer Direct Care Network | 2014-2016

- Entered timesheet data into service log and ensuring accuracy as well as compliance with state and program policy
- Assisted with shift adjustments to correct payroll or billing issues
- Ran regular reports to identify errors and trends

On the recommendation of the Faculty,

University of Montana-Missoula

hereby confers upon

Maria Elena Trujillo

the degree of

Bachelor of Arts

History

University Scholar - Honors College with Honors

with all the rights, privileges and honors, as well as the obligations and responsibilities appertaining.

Given on May 18, 2013 in Missoula, Montana.

President

Dean

Chair of the Board of Regents

Commissioner of Higher Education

By authority of the Board of Regents of

The Montana University System

Steve Rosenbaum

Senior Director - Systems

Mr. Rosenbaum joined Consumer Direct Care Network nine years ago, bringing more than 15 years' experience in software design and business management. He initially managed then directed our billing and claims teams, and for the past four years has been the functional owner of Consumer Direct Care Network's cloud-based transaction processing application, U2. Mr. Rosenbaum has extensive expertise in developing robust time capture capabilities, creating new functionalities for claims processing, and integrating time tracking for payment through our Workday payroll systems.

Education

B.S. Computer Science and Business Administration, Concordia College | 1991

Current Position

Senior Director - Systems | Consumer Direct Management Solutions | 2019 - present

- Directs technology solution development initiatives from design through implementation and operations
- Engages appropriate customer, stakeholder, Consumer Direct internal, and third-party (vendor) resources to envision and deliver IT solutions
- Organizes internal staff and vendor resources to the optimal level to deliver cost-effective solutions
- Coordinate with Consumer Direct Care Network IT to ensure solutions adhere to Consumer Direct Care Network standards
- Oversees that state/federal requirements for IT solutions are met and that IT solutions adhere to the appropriate security, capacity and performance requirements

Employment History

Senior Director, Claims | Consumer Direct Management Solutions | 2015-2019

- Managed a cross functional team of 90-100 people
- Responsible for tracking, billing and claim reconciliation for all shifts processed
- Responsible for processing over five million shifts and over two million claims annually

Billing Manager | Consumer Direct Care Network | 2014-2015

- Managed a team of 25-30 people responsible for all accounts receivable and billing functions
- Responsible for the billing activities of all 20 companies across 14 states, and for processing payment of more than 100 different paying entities

Owner | Rosenbaum Remodeling | 2007-2014

- Worked with local customers on residential remodeling work
- Created updated and new kitchens, bathrooms, basements, cabinetry, and tile
- Worked with sub-contractors to provide a total solution

Director of Technology | Inland Northwest Space Alliance | 2005-2007

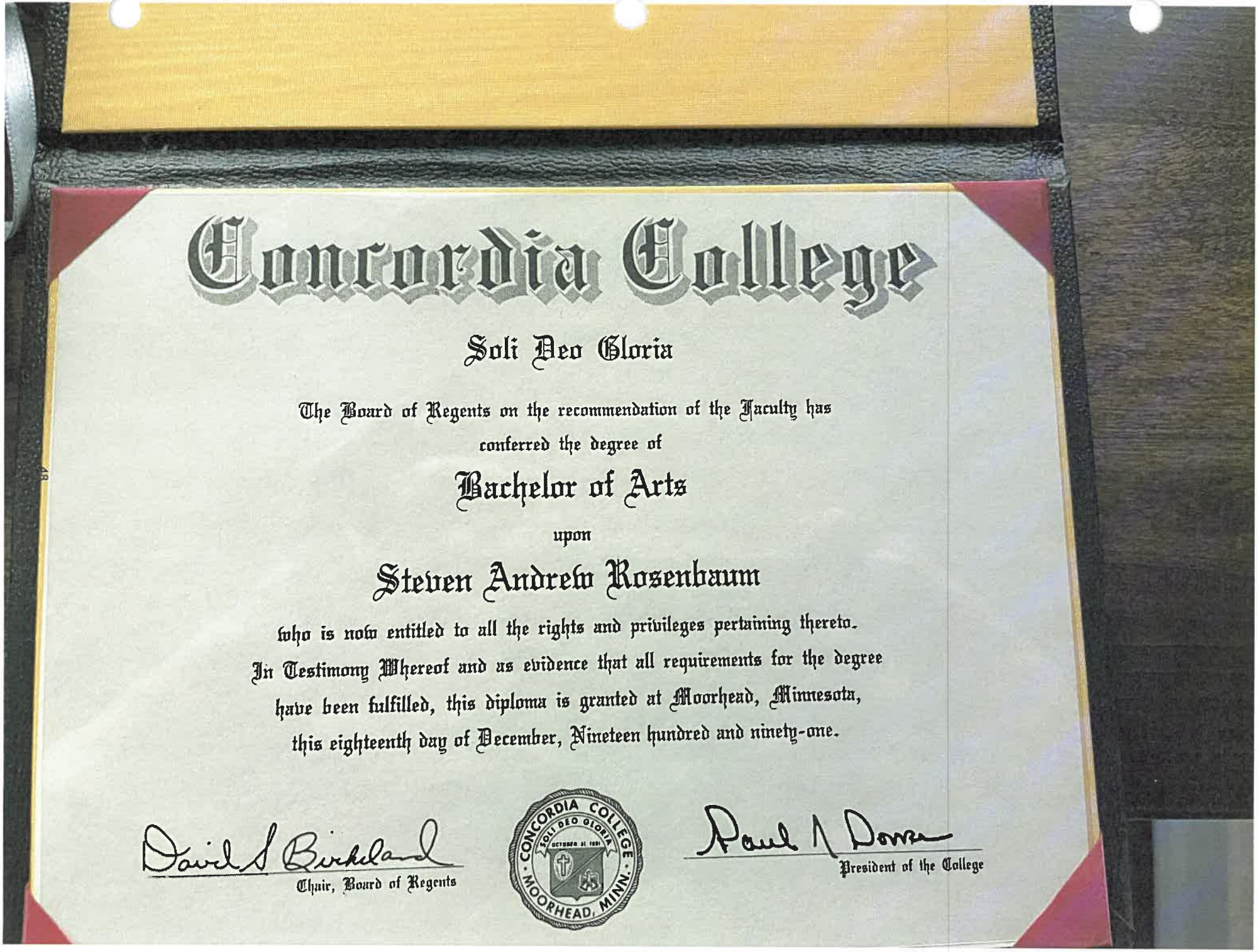
- Responsible for all aspects of technology throughout the company
- Managed technical partnership for remote sensing demonstration focused on emergency medicine (LifeGuard), which resulted in a biomedical startup company attempting to take the resulting product to market
- Led project to build and deploy a communications trailer allowing remote schools to communicate with scientists at NASA using a multi-media video conferencing system
- IT infrastructure and biometric badge-based security system management

Sr. Program Manager/ Principal Consultant/ Resource Manager | Microsoft | 2004-2005

- Responsible for business analysis and design for IT systems specific to Microsoft
- Lead analyst working with internal business leaders and external customers to design system changes to increase user experience and effectiveness
- Responsible for pipeline tracking and lead follow-up, sales quota and individual utilization
- Technical pre-sales, project management, staffing and mentoring for individual team members within the central region for Microsoft Business Solutions Consulting

Team Leader / Senior Consultant / Support | Great Plains Software | 1992-2001

- Customer facing roles in both Consulting and Technical support, helping to troubleshoot and determine requirements for successful customer system implementation
- Responsibilities included estimation and creation of custom components, individual participant and leader for custom programming solutions to complete the customer implementation



Concordia College

Soli Deo Gloria

The Board of Regents on the recommendation of the Faculty has conferred the degree of

Bachelor of Arts

upon

Steven Andrew Rosenbaum

who is now entitled to all the rights and privileges pertaining thereto.
In Testimony Whereof and as evidence that all requirements for the degree have been fulfilled, this diploma is granted at Moorhead, Minnesota, this eighteenth day of December, Nineteen hundred and ninety-one.

David S Burkland
Chair, Board of Regents

CONCORDIA COLLEGE · SOLI DEO GLORIA · OCTOBER 31 1891 · MOORHEAD, MINN.

Paul J Dovre
President of the College

Directors

Amanda Romero

Director of Payroll Services

Ms. Romero is a results-focused, developmental leader with a master's in accounting and 19 years of leadership experience among diverse companies. As the Director of Payroll Services, Ms. Romero manages a large team that processes payroll and other payments across all states where Consumer Direct provides services. In her previous roles, she created key performance indicators and improved net promoter score (surveys) by 20 points, increased productivity by 12% and increased accuracy by 11% in three months, retained clients with a 98% retention rate year after year, and a client succession rate of growth of 18%.

Education

Master of Accounting, University of Phoenix | 2013
B.S. Business, University of Phoenix | 2011
CPP Certified
PMP Certified

Current Position

Director of Payroll Services | Consumer Direct Care Network | 2022-present

- Applies leadership skills to manage, direct, monitor, counsel and evaluate supervisory staff to promote transparency, quality, and drive processes
- Directs and champions key performance metrics service level agreements, incentives, and staff development programs to drive day-to-day delivery of services
- Hires, trains, and manages payroll teams
- Identifies external supports to support recovery efforts and business continuity
- Demonstrates exemplary problem solving and delegated decision-making skills
- Primary advocate for the payroll domain to outside interest (sales, stakeholders, customers)
- Maintains confidentiality of client information and company practices
- Prepares and delivers regular progress reports/briefing to executive leadership

Employment History

Director of Client Service Operations | Tandem HR | 2019-2021

- Human Resources Professional Employer Organization experience including people management, benefits administration and workers compensation, compensation analysis, ERISA and ACA reporting compliance
- Oversaw Payroll, Payroll Tax, Benefit Administration, and Implementation Services

- Identified and developed process improvement to enhance client service experience and provided structure processes that encompass payroll, benefit administration and implementation
- Identified areas of opportunities to create and improve KPI's to meet/exceed goals
- Improved Net Promoter Score in departments by 20 points in three months
- Collaborated with executive-level leadership in the development of performance goals and long-term operational plans
- Maximized efficiency and productivity through extensive process analysis and interdepartmental collaboration
- Increased productivity by 12% in three months by reducing implementation timeline
- M & A transition and implementation of acquired clients/employees
- Implementation of CRM and HRIS systems

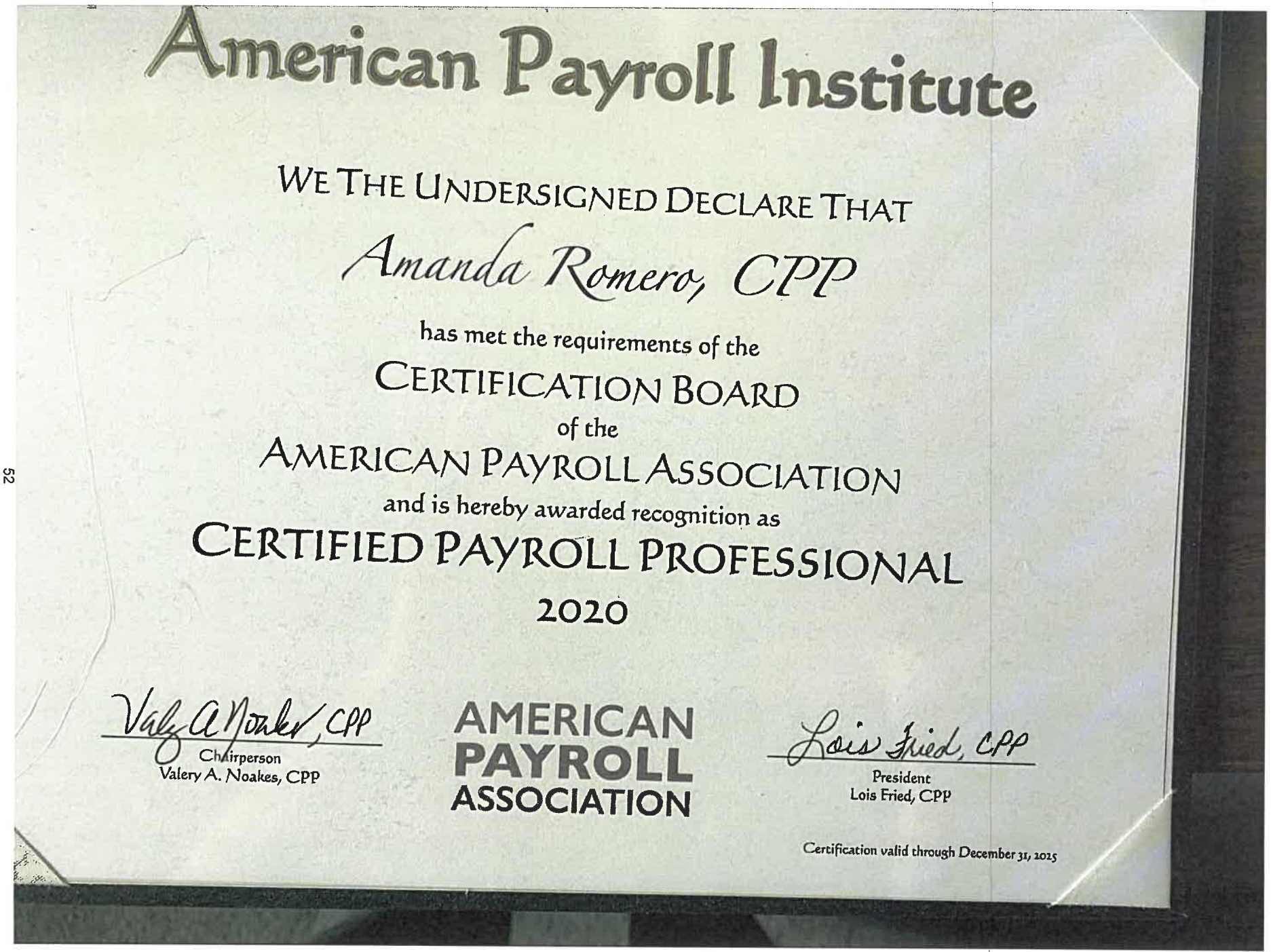
Manager, Implementation & Payroll Services | Tandem HR | 2019 - 2021

- Partnered with Business Development Consultants and prospects to provide a cohesive understanding of services
- Maintained comprehensive understanding of payroll tax laws including changes due to the American Relief Plan, FFCRA and CARES Act of 2020
- Creation and implementation of continuity plan with proven success providing the ability to pay employees timely during system outage
- Development and training of Team Leads, Payroll Specialist, and Payroll Tax Specialists
- Oversaw accurate, and timely input of payroll for 18,000 employees with over 200 clients including new hires, terminations, leave of absences, PTO, garnishments, and payment frequency of weekly, biweekly, semi-monthly and monthly payroll
- Collaborated with internal departments including Accounting, Benefits, Workers Compensation, HR and Implementation to maintain compliance and knowledge of changes in all areas of the organization
- Maintained system capabilities, researched new system implementations and upgrades
- Managed and processed W2, tax filings for quarter-end and year-end

Relationship Manager | Paychex, Inc. | 2014 - 2019

- Developed and maintained positive relationship with high revenue enterprise clients
- Responsible for retaining clients and client succession (98% retention year after year, continuous client growth of 18%
- Facilitated the management and strategic service for clients
- Analyzed data to identify present and future performance gaps and trends
- Identified process improvements needs
- Planned, coordinated and implemented client activities and strategic programs
- Partnered with internal partners (payroll, benefits, HR, Workers Comp, 401k,) to ensure client satisfaction and education on products
- Maintained knowledge of industries, relevant systems and company offerings, as well as changes in federal, state, and local wage tax law and policies
- Led a team of nine individuals cross functionality teams (Payroll, HR, Benefits) –

- Coached/trained direct reports to achieve and exceed performance goals, client satisfaction and overall development
- Point of contact for escalated matters to resolve client concerns



American Payroll Institute

WE THE UNDERSIGNED DECLARE THAT

Amanda Romero, CPP

has met the requirements of the

CERTIFICATION BOARD

of the

AMERICAN PAYROLL ASSOCIATION

and is hereby awarded recognition as

CERTIFIED PAYROLL PROFESSIONAL

2020

Valy A Noakes, CPP

Chairperson
Valery A. Noakes, CPP

AMERICAN PAYROLL ASSOCIATION

Lois Fried, CPP

President
Lois Fried, CPP

Certification valid through December 31, 2025

simplilearn

Certificate of Achievement

Congratulations!

Amanda M Romero

You have successfully completed our training program on

PMP® Certification Training

53

st Mar 2021

rtificate code : 2477537

Krishna Kumar
CEO

University of Phoenix

Upon the recommendation of the Faculty,
University of Phoenix does hereby confer upon

Amanda M Romero

the degree of

Master of Science in Accountancy

with all the rights, honors and privileges thereunto appertaining.

In witness whereof, the seal of the University and the signatures as authorized by the Board of Directors, University of Phoenix, are hereunto affixed, this thirtieth day of November, in the year two thousand thirteen.

Jenulee Lewis Ergel
Chairman, Board of Directors

Chairman Emeritus

UNIVERSITY OF PHOENIX

President

University of Phoenix

Upon the recommendation of the Faculty,
University of Phoenix does hereby confer upon

Amanda M Rodriguez

the degree of

Bachelor of Science in Business

with all the rights, honors and privileges thereunto appertaining.

In witness whereof, the seal of the University and the signatures as authorized by the Board of Directors, University of Phoenix, are hereunto affixed, this thirtieth day of September, in the year two thousand eleven.

UNIVERSITY OF PHOENIX

Chairman, Board of Directors

President

Coco Ballew

Development Director

Ms. Ballew has been facilitating implementations and programs across a range of non-profit and community-based agencies for more than 25 years. As the Development Director, Ms. Ballew has played a significant role in communications development, office procurement, and program implementations. She supports our implementation and operation teams to ensure successful implementations and new business development. Ms. Ballew manages Consumer Direct Care Network's Marketing and Communications team and oversees responses to requests for proposals. She brings her team's graphic design, communications, writing, and editing skills as resources to implementations and business development.

Education

Continuing Education, University of Montana, School of Business Administration | 2007-2008
Museum Studies, American University and Smithsonian American Art Museum, Publications and Curatorial offices | 1988
B.A. History, New Mexico State University | 1987

Current Position

Development Director | Consumer Direct Care Network | 2018-present

- Expand Consumer Direct's national footprint by identifying state opportunities for growth in self-directed in-home care
- Respond to RFPs with accuracy and timeliness
- Manage inter-disciplinary team of communication professionals to support Consumer Direct's program offices and the people they serve
- Provide implementation support for new programs

Employment History

Development Manager | Consumer Direct Care Network | 2013-2018

- Identify and respond to new business opportunities by surveying current national market for self-directed in-home personal care
- Manage team for responses to request for proposals across the nation
- Provide implementation support for new programs until operational
- Collaborate with intra-office teams to expand the company's national presence

Executive Director | Children's Museum Missoula: Putting Families First | 2008-2013

- Managed annual budget for the Missoula Children's Museum and Parenting Programs
- Facilitated program development, staff management, corporate and individual donations, and grant writing
- Built capacity for expansion of staff and programming

Public Relations Director | El Paso Museum of Art | 2001-2004

- Promoted exhibitions and programs through media development, direct mail, public service announcements and website management
- Co-managed development and museum programs staff
- Supervised museum volunteers

Editor/Columnist | El Paso Times | 1994-2001

- Community News Editor and staff features writer
- Wrote feature stories, covered arts and civic events and authored weekly column on topics of community interest

By the authority of the Board of Regents of the

New Mexico State University

and upon recommendation of the Faculty

Margaret Constance Morse

has been admitted to the degree of

Bachelor of Arts

History

and is entitled to all rights and honors thereto appertaining.
Witness the Seal of the University and the signatures of its Officers
this month of May, 1987, at Las Cruces, New Mexico.

Chair of the Regents

Vice-Chair of the Regents

Secretary / Treasurer of the Regents

President of the University

Member of the Regents

Member of the Regents

Dean, College of Arts and Sciences

Halina Kisiel

Director of Payroll Process Integration

Ms. Kisiel is a financial operation professional with a passion for leading organizational and system improvements. She has proven leadership skills and is extremely successful in partnering with business owners and product development engineers to customize payroll and financial systems for efficiencies and constantly changing business needs. As the Director of Payroll Process integration, she provides the vision and strategic position of payroll and payroll tax systems within the Consumer Direct network of companies.

Education

Master of Science in Civil Engineering and Applied Mathematics, Polytechnic Institute| 1980

Current Position

Director of Payroll Process Integration | Consumer Direct Care Network | 2022-present

- Develops design and functional specifications and assists in post implementation support and system enhancements
- Develops business process integration plans, coordinates status calls, facilitates daily updates and meetings with assigned teams
- Recommends technical directions, proposes technology investments, and advises business leaders on strategic issues
- Champions project management principles to reveal the interaction and relationship of the business operations and operating systems
- Support Operations Teams during critical project phases

Employment History

Senior Payroll Tax Analyst SME | John Hancock/Manulife | 2021-2022

- Transmitted payroll files to ADP, reconciled and submitted wire for payroll funding
- Reconciled Benefits, 401K, Mutual Funds, Deferred Comp etc.
- Evaluated payroll processes and created SOP documents for payroll processes
- Evaluated reconciliation for Payroll G/L posting and accrual
- Reconciled ADP tax payments, garnishment payments and invoices
- Guided system customization of tax payroll controls set up, and tax reporting
- Reconciled W-2 reports against 941 tax filing and payrolls YTD taxable wages and reportable deductions
- Monitored and updated tax exemptions for Visa holders

Senior Accounting Manager | State Street Bank Corp. | 2020 - 2021

- Led Brazil Payroll conversion and established in-house processes
- Managed Brazil payroll for six months to validate and document new processes

- Developed payroll processing manuals and train staff on the newly implemented Brazilian Payroll processes
- Worked with the NGA HR on the issue resolutions
- Worked on the Workday report customization for the Global Payroll
- Performed Business System Analysis during system conversion to Workday

Senior Project Manager/Business Systems Analyst | IonOptix LLC | 2019

- Client orders fulfilment with the installation of the hardware, software and licenses on the computers for the sold systems
- Processed sales orders, purchasing, inventory, and international shipments to our European, Japanese, Korean and Chinese clients
- Proposed and implemented changes, created workflows and documented all processes in the company SOP manuals

Payroll Tax Analyst | Akamai Technologies | 2019

- Evaluated and recommended solution to tax issues related to acquisitions

Senior Product Manager | PCG Public Partnerships | 2013 - 2018

- Coordinated and supervised work with program management, and development teams
- Led JAD sessions for client-business-IT engagements
- Ensured quality of final product through the entire system development life cycle (SDLC)
- Worked on improvement of the internal Medicaid Billing System
- Knowledgeable of ICD-10 Codes, FIPS Codes for home care claims, 837/835 file formats
- Supported basic level report and application template development using SQL/SSRS

Director of Transaction Compliance | PCG Public Partnerships | 2011 - 2013

- Ensured the system/product development is supported by well-defined business requirements and guidance from the SMEs
- Technical Manager for resolution of financial issues during system development
- Reviewed G/L accounts setup in new programs and ensure all financial transactions are accounted for in Balance Sheets and P&L Statements
- Expert on the IRS regulations, including those applicable to Employers acting as Vendor Fiscal/Employer Agent, Government, F/EA and Agency of Choice
- Served as an Advisor on tax compliance during RFP responses
- Led Internal Audits on existence and execution of internal controls in all business areas

Financial Operations Manager | PCG Public Partnerships | 2005 - 2011

- Established Payroll, Tax, Registration, Consumer's Budget management, and Accounting teams for the organization serving clients as a Vendor F/EA
- Managed multi-state payroll and accounts payable operation including tax filing processes (941, 940, state and local tax withholding and SUI returns), and Year-End Closing (W-2s, W-3, 1099) for over 150K customers across 26 states
- Implemented and documented internal controls for SAS 70 audits
- Led internal audit and SOX testing to ensure key controls are effective

Jimmy Udall

Quality Improvement Director

Mr. Udall is an analytic and collaborative leader with 17 years of experience in healthcare management and consulting. He is skilled in process improvement, quality, management, and project management. Mr. Udall currently oversees Consumer Direct's Training, Quality Improvement and System Liaison departments. He works collaboratively with program offices to ensure quality care and improve operational efficiencies. He reports to Mr. Maricich, Quality Improvement Senior Director.

Education

M.B.A. Health Leadership, Western Governors University | 2019-2021
Bachelor of Science, Business Administration, Minor in Political Science, University of Montana | 1997-2001

Current Position

Quality Improvement Director | Consumer Direct Care Network | 2022-present

- Oversees Training, Quality Improvement, and System Liaison Departments
- Work collaboratively with program offices to ensure quality care and improve operational efficiencies

Employment History

Manager of Outpatient Services and Multispecialty Clinics | Livingston Healthcare | 2019-2022

- Oversaw all aspects of 25+ provider clinic and outreach clinics including budget, staffing model, policies and procedures, compliance, and growth
- Grew revenue and profitability by 20% in two years, dramatic improvement in NRC patient satisfaction scores
- Improved work culture and created new staffing model which led to change from high turnover to best retention in the organization

Process Improvement and Practice Manager | Livingston Healthcare | 2016-2019

- Developed key quality metrics for Outpatient Services
- Negotiated and drafted provider contracts based on nation-wide productivity standards
- Grew clinic productivity by analyzing and improving provider schedules
- Added and smoothly onboarded numerous services lines and providers

Project Manager for Facility Transition | Livingston Healthcare | 2015-2016

- Oversaw all aspects of move into new $35 million facility
- Managed the logistics of the patient and departmental move for a 300+ person organization while consolidating ten plus buildings into one with no downtime

Consultant/Coach | Lean Healthcare West | 2002-2015

- Managed numerous transformation and process improvement projects at large hospitals throughout the US
- Analyzed workflows, trained process improvement principles to internal consulting teams, developed training modules for thousands of staff
- Trained teams and developed strategies for process improvement teams throughout numerous large health systems including Mayo Clinic, Ascension, and Intermountain Healthcare
- Spoke at healthcare conferences and published numerous articles highlighting new research and results in the process improvement field
- Managed large projects like transitions to new facilities or new IT systems with minimal downtime

Western Governors University

The Board of Trustees of Western Governors University,
upon the recommendation of the faculty, has conferred upon

Jimmy Udall

the degree of

Master of Business Administration
Healthcare Management

With all the rights, honors, and privileges thereto appertaining.
In witness whereof, the seal of the University and the signatures as authorized by
the Board of Trustees, Western Governors University, are hereunto affixed,
this thirteenth day of May, in the year two thousand and twenty-one.

Scott D. Pulsipher
PRESIDENT

WESTERN GOVERNORS UNIVERSITY
WGU
wgu.edu

Charles W. Sorenson
CHAIRMAN, BOARD OF TRUSTEES

Josh Lachina

IT Director and Information Security Officer

Mr. Lachina has more than 20 years of progressive IT experience in multiple business sectors including publicly traded financial and large hospital/HIPAA environments. He has worked for Consumer Direct Care Network since 2019. He has headed many areas of support such as applications, infrastructure, networking and user experience as well as multiple areas of security. He is highly certified and experienced in implementing IT Service Management (ITSM) structures and processes with a focus on effective and efficient process building and improvements. Mr. Lachina uses his wide-ranging experience to identify and advance initiatives to further improve our systems and infrastructure.

Education

A.A.S. Microcomputer Technology, Butler College| 2001

Current Position

Director of Consumer Direct Holdings, Inc. and CEO | Consumer Direct Care Network | 2019-present

- Leads IT security initiatives and improvements including all audit and assessment requirements, business continuity and disaster recovery plans for the organization
- Oversees multiple IT teams including Application Support, Network, Infrastructure, Help Desk, Workday Support, Security, Infrastructure Architecture, Systems Engineering and Administration
- Leads IT initiatives and projects for new services, applications, infrastructure and platforms
- Implements ITSM structures and governance including aligning technology with business strategies and goals
- Oversees licensing and vendor management for IT areas

Employment History

IT Manager | Community Medical Center | 2010-2019

- Oversaw all IT Operations including support, applications, infrastructure, networking and clinical technical operations
- Technical lead for all project management including clinical facility builds and reconfigurations, adding technical and clinical systems, Electronic Medical Records (EMR) deployments
- Implement ITSM structures and governance including aligning technology with business strategies and goals
- Oversaw seven figure annual budget cost reduction while improving efficiency and adding services

- Lead merger and acquisition technical changes as the company grew from one hospital to 89 hospitals

AVP/IT Manager | Glacier Bancorp, Inc. | 2004-2010

- Oversaw multiple tiers of IT support teams including front line support, applications, systems and infrastructure
- Implemented ITSM structures and governance with primary responsibilities of Incident, Problem, Change and Configuration management
- Increased first line resolution rates by more than 50% while also improving customer service satisfaction
- Led support teams through successful transitions while the company grew ten-fold
- Led support teams through new building and acquisition transitions for nearly 100 sites

Network Administrator | F&H Insulation, Inc. | 2001-2003

- Managed and administered all IT aspects including servers, applications, cabling, network and infrastructure
- Built an inventory management and tracking application and database from scratch that improved efficiency and captured cost savings
- Oversaw all user and system management for multistate operations
- Implemented new telephone platform and company website

PeopleCert®
All talents, certified.

AXELOS
GLOBAL BEST PRACTICE

This is to certify that

JOSHUA CATON LACHINA

Has achieved the

ITIL® 4 Managing Professional Transition Certificate

Effective from **13 Dec 2019**

Expiry date **N/A**

Certificate number **GR676001253JL**

Candidate number **9980048890237119**

APM GROUP

Loyalist

CERTIFICATION SERVICES

This is to certify that

JOSH C. LACHINA

has successfully demonstrated knowledge to meet the requirements of the

ITIL Practitioner's Certificate in
COMBINED SERVICE DESK, INCIDENT AND PROBLEM MANAGEMENT EXAMINATION

February 17, 2008

Julia Chapelle
Director, Loyalist Certification Services

Loyalist

CERTIFICATION SERVICES

CERTIFICATE

This is to certify that

JOSH LACHINA

has successfully demonstrated knowledge to meet the requirements of the

ITIL® VERSION 3 FOUNDATION BRIDGE EXAMINATION

ITIL®

AXELOS
GLOBAL BEST PRACTICE

ITIL
PRINCE2
MSP
M_o_R
P3M3
P3O
MoP
MoV

This is to certify that

JOSH LACHINA

Has achieved the

ITIL® Intermediate Certificate in Release Control and Validation

Effective from
17 Oct 2014

Registration number
9980048890237119

Certificate number
GR759015859JL

AXELOS
GLOBAL BEST PRACTICE

ITIL
PRINCE2
MSP
M_o_R
P3M3
P3O
MoP
MoV

This is to certify that

JOSH LACHINA

Has achieved the

ITIL® Intermediate Certificate in Operational Support and Analysis

Effective from
08 Aug 2014

Registration number
9980048890237119

Certificate number
GR757016258JL

AXELOS
GLOBAL BEST PRACTICE

This is to certify that

JOSH LACHINA

Has achieved the

ITIL® Intermediate Certificate in IT Planning, Protection and Optimization

Effective from
17 Jul 2015

Registration number
9980048890237119

PEOPLECERT

AXELOS
GLOBAL BEST PRACTICE

This is to certify that

JOSH LACHINA

Has achieved the

ITIL® Intermediate Certificate in IT Service Offerings and Agreements

Effective from **23 Jun 2016**

Expiry date **N/A**

Certificate number **GR756017359JL**

Candidate number **9980048890237119**

Certificate ITIL

Foundation Certificate in IT Service Management

presented to

Josh C. Lachina

44739

July 7, 2005

I.P. van Nieuwstadt
managing director

ecognition of Personal Achievement

Josh Lachina

is awarded the professional certification of

HDI Support Center Manager

September 1, 2009

HDI CERTIFIED

Richard Joslin
Executive Director, HDI Certification and Training

Kelly Czarnik

Compliance Director

Ms. Czarnik brings more than ten years of business experience to her role as Compliance Director. She has a proven track record of regulation compliance and exceptional quality assurance management. Ms. Czarnik is highly competent in process improvement, corporate training, business writing, and processes and standards used to achieve program compliance. She serves as the company's oversight in meeting healthcare regulatory standards. She has been a part of the successful launch of ten Consumer Direct Care Network companies over the last nine years. She oversees, monitors and coordinates the implementation and maintenance of Consumer Direct's Compliance Program. Ms. Czarnik reports to Mr. Bledsoe, Chief Executive Officer/President and the Governing Board Oversight Committee.

Education

M.B.A. University of Montana | 2020
B.S. Business Administration, University of the Pacific | 2007

Current Position

Compliance Director | Consumer Direct Care Network | 2018-present

- Oversees and monitors the implementation and ongoing operation of the Compliance Program
- Revises the Compliance Program as necessary to meet the needs of Consumer Direct and comply with relevant laws, regulations, and program requirements
- Identifies areas of compliance vulnerability and risk; develops/implements corrective action plans for resolution of problematic issues
- Reports compliance information to CEO, Compliance Committee, and Governing Board Oversight Committee
- Develops and coordinates programs to educate and train Consumer Direct personnel concerning the Compliance Program and the requirements of relevant laws, regulations, and programs
- Coordinates with the Human Resources and other personnel to ensure appropriate background checks are performed on all staff
- Ensures that processes are in place to prevent Consumer Direct from employing, contracting with, granting privileges to, or billing services rendered by entities excluded from government health programs
- Assists with auditing and monitoring activities
- Independently investigates and acts on matters related to compliance
- Coordinates the creation, review, and implementation of policies and procedures resulting from new laws and regulations
- Oversees record maintenance and ensures processes are in place to document compliance efforts

Employment History

Quality Improvement Director| Consumer Direct Care Network | 2013-2018

- Oversaw the Quality Improvement department
- Conducted internal reviews and audits of programs
- Gathered outcome data on company performance measures
- Developed company program rules
- Monitored State and Federal regulations
- Provided external review support
- Managed fraud prevention program and hotline
- Designed and revised company forms
- Gathered and analyzed customer satisfaction data
- Maintained electronic records system
- Led ongoing compliance training
- Oversaw the Document Review department
- Maintained document management software
- Reviewed documents from state program offices for completeness and accuracy
- Worked with local offices to identify trends and recommend solutions

On the recommendation of the Faculty,

University of Montana-Missoula

hereby confers upon

Kelly Czarnik

the degree of

Master of Business Administration

with all the rights, privileges and honors, as well as the obligations and responsibilities appertaining.

Given on May 8, 2020 in Missoula, Montana.

President

Dean

Chair of the Board of Regents

Commissioner of Higher Education

By authority of the Board of Regents of

The Montana University System

University of the Pacific

Upon the recommendation of the Faculty of the

Eberhardt School of Business

and by virtue of the Authority vested in the Board of Regents
does hereby confer upon

Kelly Czarnik

who has honorably fulfilled all the requirements
prescribed by the University
the degree of

Bachelor of Science in Business Administration

Given at Stockton, in the State of California, on the sixteenth day of May, in the year of our Lord two thousand and seven and of the University the one hundred fifty-sixth.

Chair of the Board of Regents

President of the University

Dean

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Pamala Schneider

Tax Director

Ms. Schneider is a success-driven and analytical professional, offering a wide range of experience in accounting, general financial operations, payroll, auditing, and tax. She is a self-motivated, complex problem solver, who is dependable, reliable, flexible, organized, caring, determined and adept at being able to "see around the corners." She excels in anticipating issues and implementing opportunities for improvement. She can train, delegate, appreciate and empower individuals to succeed. Ms. Schneider is an accomplished leader whose reputation is known for accurate financials and tax returns that are compliant with relevant laws. She is a proficient payroll expert with over 20 years of payroll experience of processing payroll, taxes, administering retirement plans, reconciling benefits, and filing payroll reports.

Education

B.S. Degree in Business Administration, Eastern Montana College | 1986
A.A Degree and Clerk/Typist Certificate, Dawson Community College | 1984

Current Position

Senior Auditor, Assistant Controller | Consumer Direct Care Network | 2006-present

- Manages a Payroll Tax Team comprised of 15 members
- Collaborated with state agencies on how to improve payroll filing processes
- Created a payroll tax instruction manual to train employees
- Prepares and reviews quarterly payroll reports
- Contacts the IRS and the state government agencies regarding FEA and payroll matters
- Creates & maintains general ledger accounts and subaccounts
- Develops consistent work papers and W-3 reconciliations to ensure accurate financial statements
- Prepares financial statements, generates cost reports and prepares franchise tax returns
- Creates elimination entries and consolidated monthly financial statements
- Prepares and reviews support documentation for financial auditors and tax accountant for Consumer Direct companies
- Works with tax accountant regarding all corporate tax issues, converting accrual basis financials to cash basis financials
- Works with independent auditors and assists with IRS audits
- Assisted with Solomon conversion to WorkDay, created new chart of accounts
- Proficient in Solomon, WorkDay, QuickBooks, Microsoft Office
- Created chart of accounts for 16 interrelated companies for software conversion from QuickBooks to Solomon
- Succeeded in launching and implementing Solomon
- Performs bank reconciliations along with expense reports review and processing

- Performs account research and analysis on balance sheet accounts, revenue and expense accounts for Consumer Direct companies
- Prepares and analyzes financial statements and generated cost reports
- Reviews 1099 vendor expenses and issued 1099s at year end
- Coordinates the FEA program regarding employer registration with federal and state governmental agencies

Employment History

Accountant & Financial Advisor |Office of Accountability | 2000 - present

- Performs general accounting services with QuickBooks Pro including payroll, accounts payable, accounts receivable, credit card reconciliation, bank reconciliation
- Prepares and analyzes financial statements
- Assists clients in all areas of financial planning, from debt management to business growth to investment opportunities to retirement issues
- Strategic tax planning
- Prepares individual and corporation tax returns
- Assists clients during audits with the IRS, Department of Revenue, Department of Labor & State Fund

State of Montana

Board of Public Accountants

BY VIRTUE OF THE AUTHORITY VESTED IN IT BY LAW
DOES HEREBY GRANT TO

Pamala Kay Fried Schneider

THIS CERTIFICATE AS CERTIFIED PUBLIC ACCOUNTANT

In Accordance With Title 37, Chapter 50, of the Montana Code Annotated,

Certified Public Accountant

Given under the Seal of the State Board of Public Accountants of the State of Montana

This January 13, 1988 Certificate No. 2588

Karen M. Fowler
Chairman, State Board of Public Accountants of the State of Montana

Secretary, State Board of Public Accountants of the State of Montana

82

Sarah Buszmann

Project Management Director

Ms. Buszmann has diverse experience managing projects in both the media and healthcare industries. Her extensive media management and communications experience gives her valuable perspective in overseeing projects at Consumer Direct Care Network. She has over 14 years of experience of managing projects in the media world and has managed projects in the health industry for the past two years. Ms. Buszmann's educational and work background gives her unique understanding of how communication and leadership plays an important role in the project management process.

Education

Master of Science in Management and Leadership, Western Governors University | 2015 – 2016
Bachelor of Science in Journalism, Northwestern University | 2003 – 2007

Current Position

Project Management Director | Consumer Direct Care Network | 2022-present

- Manages a portfolio of projects based on company need
- Tailors project management strategy based on project size and complexity
- Manages projects for software development, new contracts, new business processes and more
- Communicates project status, goals, timelines, changes and risks
- Collaborates with teams across 15 states in achieve project development goals

Employment History

Practice Manager, Project Manager | Community Medical Center | 2020-2022

- Stepped into healthcare at the start of the COVID-19 pandemic managing three walk-in COVID testing sites
- Led clinics during their busiest months on record while also setting historic rates for staff retention
- Identified key performance indicators and established performance goals
- Created charge reconciliation procedures, recapturing nearly $100,000 in missed charges and ensuring financial stability

Montana Content Manager | Cowles Media | 2006 - 2020

- Managed a statewide news team of nearly 50 people across three television stations and four bureaus
- Project manager for statewide coverage of important events including election night, presidential visits and breaking news coverage
- Coordinated top stories balancing up to 50 pieces of daily content for newscasts, websites and social delivery

- Identified stories for extended in-depth coverage and coordinated execution of special reports with promotion
- Identified key metrics to determine coverage success

Founding News Director | ABC FOX Montana | 2012 - 2014

- Recruited and coached an award-winning team in first year as a News Director
- Project Manager for the launch of six daily HD newscasts in two years
- Anchored, produced and reported while managing a news team
- Launched and maintained the fastest growing social media news channels in Montana

Anchor, Producer, Reporter | KULR – 8 News, Billings | 2006 - 2012

- Managed weekend team of staff
- Produced and anchored two daily evening newscasts
- Gained extensive experience in live reporting and storytelling

Co-Youth Director | American Lutheran Church | 2010 - 2012

- Managed team of volunteers to provide Sunday School, youth group and kids' club activities for a group of 50-100 children ages three to seventeen

Head Kids' Counselor | C Lazy U Ranch | 2003 - 2006

- Created outdoor programming for up to 50 kids ages zero to seventeen
- Scheduled, trained and managed six counselors

Project Management Institute

THIS IS TO CERTIFY THAT

Sarah P. Buszmann

HAS BEEN FORMALLY EVALUATED FOR DEMONSTRATED EXPERIENCE, KNOWLEDGE AND PERFORMANCE IN ACHIEVING AN ORGANIZATIONAL OBJECTIVE THROUGH DEFINING AND OVERSEEING PROJECTS AND RESOURCES AND IS HEREBY BESTOWED THE GLOBAL CREDENTIAL

Project Management Professional (PMP)®

IN TESTIMONY WHEREOF, WE HAVE SUBSCRIBED OUR SIGNATURES UNDER THE SEAL OF THE INSTITUTE

Jennifer Tharp | Chair, Board of Directors

PROJECT MANAGEMENT INSTITUTE CORPORATE SEAL 19 69 PENNSYLVANIA

Pierre Le Manh | President & CEO

PMP® Number: 3359108

PMP® Original Grant Date: 07 October 2022

PMP® Expiration Date: 07 October 2025

Western Governors University

The Board of Trustees of Western Governors University, upon the recommendation of the faculty, has conferred upon

Sarah P. Bussmann

the degree of

Master of Science

Management and Leadership

With all the rights, honors, and privileges thereunto appertaining. In witness whereof, the seal of the University and the signatures as authorized by the Board of Trustees, Western Governors University, are hereunto affixed, this seventh day of March, in the year two thousand and sixteen.

Robert W. Mendenhall
President

WESTERN GOVERNORS UNIVERSITY
WGU
www.wgu.edu

Governor Jim Geringer
State of Wyoming, 1995-2003
Chairman, Board of Trustees

Northwestern University

ON RECOMMENDATION OF THE FACULTY OF THE

MEDILL SCHOOL OF JOURNALISM

NORTHWESTERN UNIVERSITY HAS CONFERRED THE DEGREE OF

BACHELOR OF SCIENCE IN JOURNALISM

UPON

SARAH PAGE GRAVLEE

WHO HAS HONORABLY FULFILLED ALL THE REQUIREMENTS PRESCRIBED BY THE UNIVERSITY FOR THAT DEGREE

DONE AT EVANSTON ILLINOIS THIS FIFTEENTH DAY OF JUNE IN THE YEAR TWO THOUSAND AND SEVEN A.D.

CHAIRMAN OF THE BOARD OF TRUSTEES

SECRETARY OF THE BOARD OF TRUSTEES

NORTHWESTERN UNIVERSITY · QUAECUNQUE SUNT VERA · 1851 ·

PRESIDENT OF THE UNIVERSITY

DEAN

Sarah Herbert

Regional Director – East

Ms. Herbert joined Consumer Direct Care Network in 2019 as the State Director for our programs in Virginia. Prior to joining Consumer Direct Care Network, Ms. Herbert served as a Vendor Oversight Compliance Manager for Virginia Premier Health Plan. Ms. Herbert has more than a decade of experience in health care compliance and has worked in a variety of roles tracking metrics and meeting contract and program requirements. She now serves in the role of Regional Director for Consumer Direct Care Network where she directs daily operations of Consumer Direct Care Network's east coast territories, including Virginia, Washington DC and Florida. She has extensive experience working for companies that provide services to the elderly and individuals with intellectual/developmental disabilities.

Education

Master's in business administration in Healthcare Administration, Columbia Southern University | 2015
Bachelor's degree in business administration, Columbia Southern University | 2013

Current Position

Regional Director | Consumer Direct Care Network | 2020-present

- Directs daily operations to support company strategic anchors and thematic goals
- Collects and analyzes regional score cards, dashboards, and key performance indicators
- Ensures compliance to standard operating procedures and policies
- Conducts business in accordance with state, federal, MCO and contract requirements
- Collaborates with regional stakeholders regarding delivery of services and operations
- Leads and monitors deliverables and ensures timely completion of projects

Employment History

CDVA State Director | Consumer Direct Care Network | 2019-2020

- Developed comprehensive understanding of the operations, processes and procedures in compliance with state contracts
- Applied regulatory requirements and directed organizational strategy
- Engaged departments at company headquarters to ensure adequate support services were in place for programs operating in Virginia
- Led team of managers/supervisors to oversee successful completion of office processes
- Recruited, hired, trained, and managed Consumer Direct staff in Virginia

Delegation (Vendor) Oversight Compliance Manager | Virginia Premier Health Plan| 2016-2019

- Developed and implemented strategic partnerships with community organizations
- Developed and enforced performance metrics

- Managed, coached and supervised multidisciplinary team of audit, outreach and project management staff
- Engaged departmental operations to identify vendor related needs
- Performed analysis of data to evaluate the environment and determine risks, trends, and outliers

Corporate Compliance Officer | Rehab Management | 2014-2016

- Responsible for corporate compliance activities including annual risk assessments, compliance incident reporting, and corrective action planning
- Provided annual compliance training and education to over 400 employees
- Developed and implemented ISO 9000 work instructions and quality management standards
- Developed internal tracking for audit activities and prepared departmental budget analysis and established and executed financial goals
- Monitored and reported on regional operations and performance of regional teams
- Served as HIPAA Security Officer with ownership of annual HIPAA Risk Assessment

Healthcare Data Analyst | New Health Analytics | 2013

- Supported management staff of hospitals and nursing homes to identify performance metrics and quality improvement initiatives
- Worked with healthcare clients to determine project needs and establish project plans
- Queried and aggregated data as determined by project plan
- Prepared preliminary data analysis and acquired and organized report data using in-house client report templates

Compliance Auditor/Site Surveyor | United Network for Organ Sharing | 2008-2013

- Conducted record reviews and audits to ensure accuracy and compliance with regulations
- Created extensive reports based on analysis of compliance with regulations
- Authored work instructions and Standard Operating Procedures as well as assisted members in constructing these documents
- Developed and executed quality metrics for performance evaluation
- Performed strategic analysis of compliance data and generated project plans
- Analyzed complex medical issues, conducted basic investigations and wrote thorough reports according to quality assurance processes
- Maintained a working knowledge of the principles and technical methodology of auditing, utilization review, interviewing, quality assurance, and patient safety

Columbia Southern University

By Authority of the Board of Trustees and on recommendation of the Faculty hereby confers upon

Sarah Herbert

the degree

Master of Business Administration

Health Care Management

With all rights, privileges and honors thereunto appertaining. In Testimony Whereof, we have affixed our signatures and the Seal of the University.

Given at Orange Beach, Alabama,

this fifteenth day of December, two thousand fifteen.

COLUMBIA SOUTHERN UNIVERSITY

Robert Mayer, Jr.
President

Torney E. Daniel
Chairman of the Board of Trustees

Columbia Southern University

By Authority of the Board of Trustees and on recommendation
of the Faculty hereby confers upon

Sarah Herbert

the degree

Bachelor of Science in Business Administration

Summa Cum Laude

With all rights, privileges and honors thereunto appertaining.
In Testimony Whereof, we have affixed our signatures and
the Seal of the University
this thirtieth day of August, two thousand thirteen.

Robert Mayer, Jr
President

COLUMBIA SOUTHERN UNIVERSITY

Tommy E. Bamford
Chairman of the Board of Trustees

Sean Niccolucci

Director of Analytics

Mr. Niccolucci started with Consumer Direct Care Network in 2013 as an Analytics Specialist. Over the years Mr. Niccolucci has advanced in his roles and responsibilities. Today he leads two separate teams, one focused on Financial Planning and Analysis (FP&A) and the other focused on Business Intelligence. The FP&A team operates as data-driven financial analysts supporting Consumer Direct Care Network with analysis of current business, changes to current business, and new business opportunities. The Business Intelligence team supports Consumer Direct Care Network with production of operational reporting through Power BI and SSRS platforms, as well as ad-hoc financial and operational recon work.

Education

Arizona State University W.P. Carey School of Business, Bachelor of Science, Finance | 2013

Current Position

Director of Analytics | Consumer Direct Care Network | 2021-present

- Leads team of Financial and Business Analysts, directing production of all company financial analysis, operational reporting, company and executive dashboards
- Builds dynamic financial models using SQL data mining, Power BI, Excel
- Identifies, tracks, and presents relevant KPIs for various service lines
- Architects MS Azure data warehouse to enhance various analysis projects
- Advises company executives and directors on financial and operational opportunity

Employment History

Analytics Manager | Consumer Direct Care Network | 2018-2021

- Developed and managed 60-month rolling forecast for each Consumer Direct Care Network company
- Developed forecasting strategy for balance sheet and cash flow, in addition to income statement forecast
- Self-Implemented Adaptive Insights (now Workday Adaptive Planning) to accomplish and streamline all FP&A goals
- Implemented statistics process to track and analyze operational metrics
- Led and assisted in architecture and implementation of multiple software deployments – Finance, HCM, Payroll, Billing, Reporting functional areas.
- Oversaw analysis of all new business proposals; developed plug and play financial model

Analytics Supervisor | Consumer Direct Care Network | 2016-2018

- Produced monthly statistical and financial analysis for company executives and directors
- Assumed responsibility of all company operational reporting due to demonstrated expertise of company systems and operations

Analytics Specialist | Consumer Direct Care Network | 2013-2016

- Monitored and analyzed financial performance for all current Consumer Direct service contracts and reported findings to company executives
- Supported implementation of FP&A tool
- Maintained corporate insurance lines including analysis and renewal

Arizona State University

The Arizona Board of Regents
by virtue of the authority vested in it by law and
on recommendation of the University Faculty does hereby confer on

Sean Michael Niccolucci

who has satisfactorily completed the Studies prescribed therefor
the Degree of

Bachelor of Science
Finance
in the
W. P. Carey School of Business
with all the Rights, Privileges and Honors thereunto appertaining
this ninth day of May, two thousand and thirteen.

Jan Brewer
Governor of Arizona

Richard E. Myers
Chair of the Board

ARIZONA STATE UNIVERSITY · 1885 ·

Michael Crow
President of the University

Arizona State University.

Sue Sands

HR Director

Ms. Sands has been in the Human Resources profession for more than 20 years in the healthcare, real estate, supply chain, and manufacturing industries. Ms. Sands brings a team of HR professionals in the areas of HR compliance, safety, recruiting, employee relations, and benefits, who will support West Virginia Resource Consultants and other staff throughout their employment. Ms. Sands leads the Employee Experience Committee, ensuring all employees work in a welcoming, diverse, and supporting workplace.

Education

Master's Degree in Organization and Management with a specialty in Human Resources Management, Summa Cum Laude, Capella University | 2005
Bachelor of Science Degree in Management, Summa Cum Laude, Baker University | 2003

Current Position

Human Resources Director | Consumer Direct Care Network | 2020-present

- Responsible for the oversite of HR Department to include HR Compliance and Records, Compensation, Safety, Benefits, Recruiting, and Employee Relations
- Plans, leads, develops, and implements policies, processes, training, initiatives, and surveys to support HR compliance and strategy needs
- Functions as a strategic business advisor to the executive/senior management of each business unit regarding key organizational and management issues
- Conducts research and analysis of organizational trends including review of reports and metrics from the organization's human resource information system
- Maintains knowledge of trends, best practices, regulatory changes, and new technologies in human resources, talent management, and employment law
- Supports over 200 leaders across the U.S.

Employment History

Senior Human Resources Manager | DB Schenker | 2015-2020

- Managed all aspects of human resources, supporting corporate staff and site management with payroll, benefits, compensation, performance evaluations, coaching/counseling, talent management, employee relations, investigations, compliance, etc.
- Oversaw HR functions for 600+ employees and 100+ temp associates in five sites (Customers: Spirit Aerosystems, Proctor & Gamble, Triumph Aerostructures)
- Supervised three full-time, exempt HR Reps., plus Senior Recruiter, Safety Manager and Training Supervisor, and remotely support HR functions for NC and KC site
- Supported site general managers and regional directors with KPIs, processes, staffing needs, and leadership development

- Onboarded 400+ employees from previous contractor in 3-month period during transition in 2015
- Maintained staffing at 90% or above with internal and external recruiting efforts
- Served on several corporate HR project teams to include global job code restructure, US staffing agency procurement/analysis, US team leader for employee engagement initiative and US HR focal for new HRIS system
- Reported to Chief US HR Officer
- Regularly traveled to sites around US for various corporate trainings and projects

Director of Human Resources | Rivercross Hospice LLC | 2011-2015

- Directed all human resources functions for six locations in Kansas and Oklahoma, including payroll, benefits, employee relations, unemployment reduction, talent acquisition, on-boarding, retention, leadership development, conflict resolution, safety, and employee engagement
- Member of corporate leadership team, composed of four directors, providing advice regarding the impact of business decisions on human resources
- Ensured alignment of human resources goals with corporate objectives
- Managed compensation and staffing based on patient census and financials
- Supported and promoted a team-oriented environment through employee relations and leadership training
- Maintained a current knowledge of federal and state employment laws and human resources best practices
- Advanced technical skills including MS Office, HRIS and payroll systems
- Acted as IT administrator in the absence of an IT director

Human Resources Manager | Vermillion, Inc | 2004-2010

- Served on the senior management team and reported to the CFO
- Performed all aspects of payroll for 135 employees, from timesheet review to tax payments and returns, using HR module of ERP
- Oversaw all benefits from enrollment to termination
- Other duties: Employee relations, harassment and discrimination investigations, affirmative action plan, EEO reporting, performance reviews, job descriptions, record retention, company events, travel arrangements, and charitable fund-raising
- Supervised one part-time HR Assistant who performs administrative HR tasks
- Supported operation in Mexico with time management and system operations

Baker University

By the authority of the Board of Trustees,
the President of the University, and upon the recommendation of the faculty,

Susan M. Humbolt

has successfully completed the course of study
leading to the degree of

Bachelor of Science in Management

Summa Cum Laude

and said degree is conferred with all rights, honors and privileges appertaining thereto.
In testimony whereof we have subscribed our signatures
and affixed the seal of the University located in Baldwin City, Kansas, this
thirteenth day of May, in the year two thousand and three.

Patricia N Long

President

BAKER UNIVERSITY · 1858 · PRIMUM VIR ESTO · MENTE MANU ANIMO

Peggy A. Harris

Vice President and Dean of the School of Education

Chair of Board of Trustees

Senior Professional in Human Resources® (SPHR®) Certification

ISSUED TO

Susan Sands

Issued on: 01 SEP 2020 | Expires on: 31 AUG 2023 | Issued by: HR Certification Institute
Verify: https://www.youracclaim.com/go/8ap8aRwK

Capella University

By its authority and upon recommendation of
the faculty, the Board of Directors hereby confers upon

Susan M. Humbolt

the degree of

Master of Science

in Organization and Management

with a specialization in

Human Resource Management

with all rights, honors, privileges and responsibilities thereunto appertaining.
Given this thirtieth day of June, two thousand five.

Chair of the Board

CAPELLA UNIVERSITY
C U
PETERE SAPIENTIAM

President

66

SHRM SENIOR CERTIFIED PROFESSIONAL

The Society for Human Resource Management (SHRM)
Hereby Certifies That

Susan M. Sands

ACHIEVED THE SHRM SENIOR CERTIFIED PROFESSIONAL

SHRM-SCP®

By meeting the experience, education, and demonstrated HR Competency and Knowledge requirements as established by SHRM.

Witness the signature of the duly authorized officer of SHRM:
Attest:

Johnny C. Taylor, Jr.
President and Chief Executive Officer

SHRM®
BETTER WORKPLACES
BETTER WORLD™

CERTIFIED SINCE: 18 June 2020

This certificate alone does not guarantee current certification status.
Visit the SHRM Certified Directory at http://bit.ly/2HPCgev to verify certification status.

Yadira Holmes

Government Relations Director

Ms. Holmes is an experienced Government Relations Director who is knowledgeable of legislation, media affairs, marketing, communications, community engagement, business development and advocacy. She represents Consumer Direct Care Network in two national stakeholder groups that advocate for in-home services and Participant-direction. She plays an important role in engaging key stakeholders and understanding policy and legislation. She supports Consumer Direct Care Network by providing her policy analysis expertise and working with our state teams to advocate on issues that impact the people we serve.

Education

Master of Professional Studies in Political Management, George Washington University | 2012
Bachelor of Science in Political Science, Florida State University |2003

Current Position

Government Relations Director | Consumer Direct Care Network | 2018-present

- Identifies, monitors and advocates on key issues, opportunities, and threats across multiple states
- Provides expertise and political analysis on government policies and related trends
- Works with Consumer Direct Care Network state teams to advocate to federal and state stakeholders on issues of importance
- Advises senior management on public policy issues and supports management with corresponding plan of actions
- Instituted a new legislative tracking service and trained team members on tracking process, tools, and reporting
- Represents the company on two national stakeholder groups – ANCOR and Applied Self-Direction
- Recipient of the national *2020 ANCOR Rising Star in Advocacy Award* for federal advocacy

Employment History

Marketing and Community Relations Director | Central Florida Health Care| 2017-2018

- Built advocacy campaigns via digital, print and media platforms including ratio and tv advertisement, billboards, social ads, web, and print publications
- Pitched media stories to local and state media outlets
- Gained coverage in local, regional and national publications
- Served as on-record company spokesperson
- Responsible for planning and management of 400-person annual employee event

- Worked closely with the National Association of Community Health Centers to advocate for continued funding of Community Health Centers

Owner/Managing Partner | Source Public Affairs Consulting| 2014-2018

- Founded full-service international public affairs and communications firm offering federal, state, and local government relations, strategic communications, and event planning
- Managed several consultants and freelancers
- Served as a campaign advisor to a local county commission race
- Provided strategic oversight of initiatives policy positions, communication tools and events for the Winter Haven Economic Development Council
- Engaged by Polk State College to oversee communication activities of Public Affairs and Communications Office

Public Affairs Director (Contract) | Coca-Cola Beverages Florida| 2015-2016

- Served as liaison to state and federal government officials
- Planned stakeholder events and tours
- Directed advocacy campaign
- Oversaw strategic media planning and press outreach
- Directed all corporate communications including presentations, employee newsletters, blogs and social media
- Responsible for all internal and external communications and corporate marketing including creation of social channels and content, internal television communication channels, employee events, and leadership meetings

Government, Community & Media Affairs Director | Lakeland Regional Health| 2012-2014

- Coordinated *Community Health Needs Assessment* bringing together community and non-profit stakeholders to work on issues of health disparities and community health engagement
- Managed all press communications including press releases and public service messaging as media liaison
- Represented health system on various boards and committees including Chambers of Commerce, Economic Development Councils and community health groups

The George Washington University

Washington, District of Columbia

To all persons who read these letters, Greeting:

Be it known that the President, Faculty, and Trustees,
by virtue of the authority granted by The United States of America,
have conferred upon

Yadira Pulido Holmes

the degree of

Master of Professional Studies

Political Management

together with all the honors, rights, privileges, and responsibilities
thereunto appertaining.

In witness whereof, *we have hereunto affixed the seal of the University,*
and subscribed our names, in Washington, in the District of Columbia,
this twentieth day of May, two thousand and twelve.

THE GEORGE WASHINGTON UNIVERSITY · 1821 · DEUS NOBIS FIDUCIA

Dean of the College of Professional Studies

President of the University

The Florida State University

College of Social Sciences

has conferred upon

Yadira Pulido

the degree of

Bachelor of Science

in Political Science

with all the rights, honors and privileges thereunto appertaining.
Witness the Seal of the University and the signatures
of its duly authorized officers thereunto affixed.

Given at Tallahassee, Florida, this thirteenth day of December,
in the year two thousand and three.

Governor of the State of Florida

Chairman, the Florida State University
Board of Trustees

Chancellor, State University System

President of the University

Dean

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Managers

Brian Engler

Training Manager

Mr. Engler is an experienced and driven training manager and leader with a demonstrated history of working in B2B and B2C sales and marketing industries. Mr. Engler is skilled in written and oral communication, data analysis, sales coaching and performance management, leadership, curriculum development and implementation, and TopGrading hiring practices. As the Training Manager at Consumer Direct Care Network, Mr. Engler oversees development of company-wide trainings to both internal staff and the people we serve.

Education

M.A. English, Montana State University | 2011 – 2013
B.S. English and Communications, Black Hills State University | 2006 – 2010

Current Position

Training Manager | Consumer Direct Care Network | 2020-present

- Built a training program, including implementing the organization's first learning management system (LMS), creating an automated new employee orientation and compliance training, and introducing world-class eLearnings
- Grew online learning from scratch, driving engagement from 0 to over 5000 completions per month, while increasing engagement from <100 to over 2000 completions in a year
- Implemented the onboarding workflow for 45,000+ Individual Providers in Washington through the Workday LMS, including building our own onboarding track and executing state-specific eLearnings

Employment History

Training Manager/Sales Coach| PFL.com | 2014-2020

- Drove strategy and results as a member of the primary leadership team for the eCommerce division
- Led up to 14 direct reports using Situational Leadership II methodology, regular 1:1's, and metrics-focused check-in sheets
- Developed onboarding and training resources from scratch to grow the company from 150 – 400 full-time employees over two years

Customer Advocate| printingforless.com| 2013 - 2014

- Excelled in sales, creating an inquiry to customer conversion rate of over 30% and creating and maintaining a $4.2 million revenue base
- Became a subject matter expert on all internal processes and the Lean Continuous Improvement Program

Montana State University

Bozeman Montana

The Board of Regents of Higher Education by virtue of the authority vested in them
and on the recommendation of the Faculty
Hereby confer upon

Brian Edward Engler

The Degree of

Master of Arts in English

With all the rights, privileges and honors as well as the obligations and responsibilities appertaining

May 3, 2013

President of Montana State University

Bonnie B. Ashley
Secretary of the Faculty and Registrar

Angela M. McLean
Chairperson of the Board of Regents

Commissioner of Higher Education

Black Hills State University

Spearfish, South Dakota

The Regents of Education for the Commonwealth of South Dakota, on recommendation of the Faculty and by virtue of the authority in them vested, have conferred on

Brian E. Engler

the degree of

Bachelor of Science

With all the rights, honors, and privileges appertaining thereto.
In testimony of this we have set our signatures and caused to be affixed the seal of the College, this seventh day of May, two thousand and ten.

Kay Schallenkamp
President

April M. Meeker
Registrar

Terry Badour
President of Regents of Education

James O. Hansen
Secretary of Board

Holly Stephens

Legal Manager & Privacy Officer

Ms. Stephens has been providing legal services in the private sector for 11 years and has specialized in privacy for the past four years. She supports program leadership with legal and privacy related matters, including contracting, disclosure reporting, and training. She reports to Mr. Holzer, Chief Financial Officer.

Education

J.D., Suffolk University Law School | 2003 - 2006
B.A. Human Psychology, University of Illinois | 1992-1997

Current Position

Legal Manager & Privacy Officer | Consumer Direct Care Network | 2018-present

- Acted as Privacy Officer designee from 2018 through March 2022. Promoted to Privacy Officer in March 2022
- Oversees and manages legal team, including business licensing, state Medicaid enrollments for affiliates, information requests and subpoenas
- Manages Privacy Program
- Advises management and members of the workforce on privacy related issues, and all legal issues
- Conducts investigation of privacy incidents and ensures timely reporting to government regulatory agencies and clients as well as appropriate disciplinary action and corrective action plans
- Plans and implements responses to large privacy breaches including regulatory response
- Interfaces with outside counsel, regulatory bodies, and law enforcement regarding privacy breaches
- Interfaces with outside counsel regarding corporate and employment matters
- Provides consultation to leadership, management, and workforce to ensure processes and procedures comply with privacy regulations
- Serves on Corporate Compliance Committee
- Reviews, modifies, drafts, and negotiates contracts with payors and vendors
- Responds to wage claims and other state agency claims
- Represents the company at wage claim hearings
- Forms, dissolves, and maintains relevant registrations for affiliate companies
- Develops and monitor Business Associate Agreements to ensure compliance with HIPAA

Employment History

Legal Analyst | Consumer Direct Care Network | 2016-2018

- Worked with Privacy and Compliance Officers

- Led multiple research/coordination projects to assist Officers in meeting company privacy and compliance goals

Legal Assistant | Consumer Direct Care Network | 2013-2016

- Handled contracts, licenses, registrations, provider applications, HIPAA compliance, company formations and general legal and risk matters as needed

Associate | Edwards Wildman Palmer LLP| 2006-2013

- Associate in employment litigation practice throughout the United States (clients include Fortune 500 Companies)
- Worked closely with local counsel and in-house client attorneys on employment litigation matters throughout the United States (including claims brought under the ADA, ADEA, FMLA, FLSA, Title VII, ERISA, EEO, state and federal wrongful discharge laws)
- Researched and drafted memoranda in response to discrete state and federal employment law questions
- Investigated factual allegations, interviewed witnesses, and gathered information in preparation for discovery and litigation
- Drafted answers to complaints filed in state and federal court by current and former employees of clients
- Drafted discovery requests and responses for state and federal employment litigation matters
- Researched and drafted correspondence and motions regarding discovery disputes
- Coordinated and assisted with preparation for witness depositions
- Researched and drafted dispositive motions regarding a variety of employment issues including discrimination and wrongful discharge claims
- Coordinated and assisted with defense of ERISA cases from filing through dispositive motion practice
- Provided quarterly reports for clients detailing the status of open matters as well as a risk assessment

Universitas Suffolkiensis

Omnibus Ad Quos Hae Litterae Pervenerint Salutem

Praeses et Curatores Universitatis Suffolkiensis Professoribus Consentientibus

Holly M. Stephens

Ad Gradum

Iuris Doctor

hoc est admissorum ejus omnia jura honores privilegia praerogativas ad hunc gradum pertinentia tradiderunt.

Quorum in rei testimonium nos litteris hisce Universitatis sigillo munitis nominibus nostra auctoritate notis consuetisque subscripsimus.

Datum Bostoniae XXI *Die Maii Anno Domini* MMVI

Marisa Kelly
Praeses Universitatis

Praeses

Frederick Lawrence
Praefectus Curatorum

ID #4d[illegible]15-[illegible]7-447[illegible]d05-c992cc924c2b

Certified in Healthcare Privacy Compliance

CHPC™

Holly Stephens

has successfully completed all requirements to hold the designation Certified in Healthcare Privacy Compliance (CHPC®), as set forth by the Compliance Certification Board (CCB)®

Awarded on August 01, 2021

Active through July 31, 2023

Debbie Troklus

Debbie Troklus, CCEP-F, CCEP-I, CHC-F, CHPC, CHRC
CCB President

CCB COMPLIANCE CERTIFICATION BOARD

Attachment 1

FEDERAL FUNDS ADDENDUM

2 C.F.R. §§ 200.317 – 200.327

Purpose: This addendum is intended to modify the solicitation in an attempt to make the contract compliant with the requirements of 2 C.F.R. §§ 200.317 through 200.327 relating to the expenditure of certain federal funds. This solicitation will allow the State to obtain one or more contracts that satisfy standard state procurement, state federal funds procurement, and county/local federal funds procurement requirements.

Instructions: Vendors who are willing to extend their contract to procurements with federal funds and the requirements that go along with doing so, should sign the attached document identified as: "REQUIRED CONTRACT PROVISIONS FOR NON-FEDERAL ENTITY CONTRACTS UNDER FEDERAL AWARDS (2 C.F.R. § 200.317)"

Should the awarded vendor be unwilling to extend the contract to federal funds procurement, the State reserves the right to award additional contracts to vendors that can and are willing to meet federal funds procurement requirements.

Changes to Specifications: Vendors should consider this solicitation as containing two separate solicitations, one for state level procurement and one for county/local procurement.

State Level: In the first solicitation, bid responses will be evaluated with applicable preferences identified in sections 15, 15A, and 16 of the "Instructions to Vendors Submitting Bids" to establish a contract for both standard state procurements and state federal funds procurements.

County Level: In the second solicitation, bid responses will be evaluated with applicable preferences identified in Sections 15, 15A, and 16 of the "Instructions to Vendors Submitting Bids" omitted to establish a contract for County/Local federal funds procurement.

Award: If the two evaluations result in the same vendor being identified as the winning bidder, the two solicitations will be combined into a single contract award. If the evaluations result in a different bidder being identified as the winning bidder, multiple contracts may be awarded. The State reserves the right to award to multiple different entities should it be required to satisfy standard state procurement, state federal funds procurement, and county/local federal funds procurement requirements.

State Government Use Caution: State agencies planning to utilize this contract for procurements subject to the above identified federal regulations should first consult with the federal agency providing the applicable funding to ensure the contract is complaint.

County/Local Government Use Caution: County and Local government entities planning to utilize this contract for procurements subject to the above identified federal regulation should first consult with the federal agency providing the applicable funding to ensure the contract is complaint. For purposes of County/Local government use, the solicitation resulting in this contract was conducted in accordance with the procurement laws, rules, and procedures governing the West Virginia Department of Administration, Purchasing Division, except that vendor preference has been omitted for County/Local use purposes and the contract terms contained in the document entitled "REQUIRED CONTRACT PROVISIONS FOR NON-FEDERAL ENTITY CONTRACTS UNDER FEDERAL AWARDS (2 C.F.R. § 200.317)" have been added.

FEDERAL FUNDS ADDENDUM

REQUIRED CONTRACT PROVISIONS FOR NON-FEDERAL ENTITY CONTRACTS UNDER FEDERAL AWARDS (2 C.F.R. § 200.317):

The State of West Virginia Department of Administration, Purchasing Division, and the Vendor awarded this Contract intend that this Contract be compliant with the requirements of the Procurement Standards contained in the Uniform Administrative Requirements, Cost Principles, and Audit Requirements found in 2 C.F.R. § 200.317, et seq. for procurements conducted by a Non-Federal Entity. Accordingly, the Parties agree that the following provisions are included in the Contract.

1. **MINORITY BUSINESSES, WOMEN'S BUSINESS ENTERPRISES, AND LABOR SURPLUS AREA FIRMS:** (2 C.F.R. § 200.321)

    a. The State confirms that it has taken all necessary affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms are used when possible. Those affirmative steps include:

        (1) Placing qualified small and minority businesses and women's business enterprises on solicitation lists;
        (2) Assuring that small and minority businesses, and women's business enterprises are solicited whenever they are potential sources;
        (3) Dividing total requirements, when economically feasible, into smaller tasks or quantities to permit maximum participation by small and minority businesses, and women's business enterprises;
        (4) Establishing delivery schedules, where the requirement permits, which encourage participation by small and minority businesses, and women's business enterprises;
        (5) Using the services and assistance, as appropriate, of such organizations as the Small Business Administration and the Minority Business Development Agency of the Department of Commerce; and
        (6) Requiring the prime contractor, if subcontracts are to be let, to take the affirmative steps listed in paragraphs (1) through (5) above.

    b. Vendor confirms that if it utilizes subcontractors, it will take the same affirmative steps to assure that minority businesses, women's business enterprises, and labor surplus area firms are used when possible.

2. **DOMESTIC PREFERENCES:** (2 C.F.R. § 200.322)

    a. The State confirms that as appropriate and to the extent consistent with law, it has, to the greatest extent practicable under a Federal award, provided a preference for the purchase, acquisition, or use of goods, products, or materials produced in the United

States (including but not limited to iron, aluminum, steel, cement, and other manufactured products).

b. Vendor confirms that will include the requirements of this Section 2. Domestic Preference in all subawards including all contracts and purchase orders for work or products under this award.

c. Definitions: For purposes of this section:

(1) "Produced in the United States" means, for iron and steel products, that all manufacturing processes, from the initial melting stage through the application of coatings, occurred in the United States.
(2) "Manufactured products" means items and construction materials composed in whole or in part of non-ferrous metals such as aluminum; plastics and polymer-based products such as polyvinyl chloride pipe; aggregates such as concrete; glass, including optical fiber; and lumber.

3. **BREACH OF CONTRACT REMEDIES AND PENALTIES:**
(2 C.F.R. § 200.327 and Appendix II)

(a) The provisions of West Virginia Code of State Rules § 148-1-5 provide for breach of contract remedies, and penalties. A copy of that rule is attached hereto as Exhibit A and expressly incorporated herein by reference.

4. **TERMINATION FOR CAUSE AND CONVENIENCE:**
(2 C.F.R. § 200.327 and Appendix II)

(a) The provisions of West Virginia Code of State Rules § 148-1-5 govern Contract termination. A copy of that rule is attached hereto as Exhibit A and expressly incorporated herein by reference.

5. **EQUAL EMPLOYMENT OPPORTUNITY:**
(2 C.F.R. § 200.327 and Appendix II)

Except as otherwise provided under 41 CFR Part 60, and if this contract meets the definition of "federally assisted construction contract" in 41 CFR Part 60–1.3, this contract includes the equal opportunity clause provided under 41 CFR 60–1.4(b), in accordance with Executive Order 11246, "Equal Employment Opportunity" (30 FR 12319, 12935, 3 CFR Part, 1964–1965 Comp., p. 339), as amended by Executive Order 11375, "Amending Executive Order 11246 Relating to Equal Employment Opportunity," and implementing regulations at 41 CFR part 60, "Office of Federal Contract Compliance Programs, Equal Employment Opportunity, Department of Labor."

6. **DAVIS-BACON WAGE RATES:**
(2 C.F.R. § 200.327 and Appendix II)

Vendor agrees that if this Contract includes construction, all construction work in excess of $2,000 will be completed and paid for in compliance with the Davis–Bacon Act (40 U.S.C. 3141–3144, and 3146–3148) as supplemented by Department of Labor regulations (29 CFR Part 5, "Labor Standards Provisions Applicable to Contracts Covering Federally Financed and Assisted Construction"). In accordance with the statute, contractors must:

(a) pay wages to laborers and mechanics at a rate not less than the prevailing wages specified in a wage determination made by the Secretary of Labor.
(b) pay wages not less than once a week.

A copy of the current prevailing wage determination issued by the Department of Labor is attached hereto as Exhibit B. The decision to award a contract or subcontract is conditioned upon the acceptance of the wage determination. The State will report all suspected or reported violations to the Federal awarding agency.

7. **ANTI-KICKBACK ACT:**
(2 C.F.R. § 200.327 and Appendix II)

Vendor agrees that it will comply with the Copeland Anti-KickBack Act (40 U.S.C. 3145), as supplemented by Department of Labor regulations (29 CFR Part 3, "Contractors and Subcontractors on Public Building or Public Work Financed in Whole or in Part by Loans or Grants from the United States"). Accordingly, Vendor, Subcontractors, and anyone performing under this contract are prohibited from inducing, by any means, any person employed in the construction, completion, or repair of public work, to give up any part of the compensation to which he or she is otherwise entitled. The State must report all suspected or reported violations to the Federal awarding agency.

8. **CONTRACT WORK HOURS AND SAFETY STANDARDS ACT**
(2 C.F.R. § 200.327 and Appendix II)

Where applicable, and only for contracts awarded by the State in excess of $100,000 that involve the employment of mechanics or laborers, Vendor agrees to comply with 40 U.S.C. 3702 and 3704, as supplemented by Department of Labor regulations (29 CFR Part 5). Under 40 U.S.C. 3702 of the Act, Vendor is required to compute the wages of every mechanic and laborer on the basis of a standard work week of 40 hours. Work in excess of the standard work week is permissible provided that the worker is compensated at a rate of not less than one and a half times the basic rate of pay for all hours worked in excess of 40 hours in the work week. The requirements of 40 U.S.C. 3704 are applicable to construction work and provide that no laborer or mechanic must be required to work in surroundings or under working conditions which are unsanitary, hazardous or dangerous. These requirements do not apply to the purchases of supplies or materials or articles ordinarily available on the open market, or contracts for transportation or transmission of intelligence.

9. **RIGHTS TO INVENTIONS MADE UNDER A CONTRACT OR AGREEMENT.**
(2 C.F.R. § 200.327 and Appendix II)

If the Federal award meets the definition of "funding agreement" under 37 CFR § 401.2 (a) and the recipient or subrecipient wishes to enter into a contract with a small business firm or nonprofit organization regarding the substitution of parties, assignment or performance of experimental, developmental, or research work under that "funding agreement," the recipient or subrecipient must comply with the requirements of 37 CFR Part 401, "Rights to Inventions Made by Nonprofit Organizations and Small Business Firms Under Government Grants, Contracts and Cooperative Agreements," and any implementing regulations issued by the awarding agency.

10. **CLEAN AIR ACT**
(2 C.F.R. § 200.327 and Appendix II)

Vendor agrees that if this contract exceeds $150,000, Vendor is to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).

11. **DEBARMENT AND SUSPENSION**
(2 C.F.R. § 200.327 and Appendix II)

The State will not award to any vendor that is listed on the governmentwide exclusions in the System for Award Management (SAM), in accordance with the OMB guidelines at 2 CFR 180 that implement Executive Orders 12549 (3 CFR part 1986 Comp., p. 189) and 12689 (3 CFR part 1989 Comp., p. 235), "Debarment and Suspension." SAM Exclusions contains the names of parties debarred, suspended, or otherwise excluded by agencies, as well as parties declared ineligible under statutory or regulatory authority other than Executive Order 12549.

12. **BYRD ANTI–LOBBYING AMENDMENT**
(2 C.F.R. § 200.327 and Appendix II)

Vendors that apply or bid for an award exceeding $100,000 must file the required certification. Each tier certifies to the tier above that it will not and has not used Federal appropriated funds to pay any person or organization for influencing or attempting to influence an officer or employee of any agency, a member of Congress, officer or employee of Congress, or an employee of a member of Congress in connection with obtaining any Federal contract, grant or any other award covered by 31 U.S.C. 1352. Each tier must also disclose any lobbying with non–Federal funds that takes place in connection with obtaining any Federal award. Such disclosures are forwarded from tier to tier up to the non–Federal award.

13. **PROCUREMENT OF RECOVERED MATERIALS**
(2 C.F.R. § 200.327 and Appendix II; 2 C.F.R. § 200.323)

Vendor agrees that it and the State must comply with section 6002 of the Solid Waste Disposal Act, as amended by the Resource Conservation and Recovery Act. The requirements of Section 6002 include procuring only items designated in guidelines of the

Environmental Protection Agency (EPA) at 40 CFR part 247 that contain the highest percentage of recovered materials practicable, consistent with maintaining a satisfactory level of competition, where the purchase price of the item exceeds $10,000 or the value of the quantity acquired during the preceding fiscal year exceeded $10,000; procuring solid waste management services in a manner that maximizes energy and resource recovery; and establishing an affirmative procurement program for procurement of recovered materials identified in the EPA guidelines.

14. **PROHIBITION ON CERTAIN TELECOMMUNICATIONS AND VIDEO SURVEILLANCE SERVICES OR EQUIPMENT.**
(2 C.F.R. § 200.327 and Appendix II; 2 CFR § 200.216)

Vendor and State agree that both are prohibited from obligating or expending funds under this Contract to:

(1) Procure or obtain;
(2) Extend or renew a contract to procure or obtain; or
(3) Enter into a contract (or extend or renew a contract) to procure or obtain equipment, services, or systems that uses covered telecommunications equipment or services as a substantial or essential component of any system, or as critical technology as part of any system. As described in Public Law 115–232, section 889, covered telecommunications equipment is telecommunications equipment produced by Huawei Technologies Company or ZTE Corporation (or any subsidiary or affiliate of such entities).

(i) For the purpose of public safety, security of government facilities, physical security surveillance of critical infrastructure, and other national security purposes, video surveillance and telecommunications equipment produced by Hytera Communications Corporation, Hangzhou Hikvision Digital Technology Company, or Dahua Technology Company (or any subsidiary or affiliate of such entities).
(ii) Telecommunications or video surveillance services provided by such entities or using such equipment.
(iii) Telecommunications or video surveillance equipment or services produced or provided by an entity that the Secretary of Defense, in consultation with the Director of the National Intelligence or the Director of the Federal Bureau of Investigation, reasonably believes to be an entity owned or controlled by, or otherwise connected to, the government of a covered foreign country.

In implementing the prohibition under Public Law 115–232, section 889, subsection (f), paragraph (1), heads of executive agencies administering loan, grant, or subsidy programs shall prioritize available funding and technical support to assist affected businesses, institutions and organizations as is reasonably necessary for those affected entities to transition from covered communications equipment and services, to procure replacement equipment and services, and to ensure that communications service to users and customers is sustained.

State of West Virginia

By: _____

Printed Name: _____

Title: _____

Date: _____

Vendor Name: Consumer Direct Care Network West Virginia, LLC

By: _____

Printed Name: Ben Bledsoe

Title: President/CEO

Date: 6/5/23

EXHIBIT A To:
REQUIRED CONTRACT PROVISIONS FOR NON-FEDERAL ENTITY CONTRACTS UNDER FEDERAL AWARDS (2 C.F.R. § 200.317):

W. Va. CSR § 148-1-5

West Virginia Code of State Rules
Title 148. Department of Administration
Legislative Rule (Ser. 1)
Series 1. Purchasing

W. Va. Code St. R. § 148-1-5

§ 148-1-5. Remedies.

Currentness

5.1. The Director may require that the spending unit attempt to resolve any issues that it may have with the vendor prior to pursuing a remedy contained herein. The spending unit must document any resolution efforts and provide copies of those documents to the Purchasing Division.

5.2. Contract Cancellation.

5.2.1. Cancellation. The Director may cancel a purchase or contract immediately under any one of the following conditions including, but not limited to:

5.2.1.a. The vendor agrees to the cancellation;

5.2.1.b. The vendor has obtained the contract by fraud, collusion, conspiracy, or is in conflict with any statutory or constitutional provision of the State of West Virginia;

5.2.1.c. Failure to honor any contractual term or condition or to honor standard commercial practices;

5.2.1.d. The existence of an organizational conflict of interest is identified;

5.2.1.e. Funds are not appropriated or an appropriation is discontinued by the legislature for the acquisition;

5.2.1.f. Violation of any federal, state, or local law, regulation, or ordinance, and

5.2.1.g. The contract was awarded in error.

5.2.2. The Director may cancel a purchase or contract for any reason or no reason, upon providing the vendor with 30 days' notice of the cancellation.

5.2.3. Opportunity to Cure. In the event that a vendor fails to honor any contractual term or condition, or violates any provision of federal, state, or local law, regulation, or ordinance, the Director may request that the vendor remedy the contract breach or legal violation within a time frame the Director determines to be appropriate. If the vendor fails to remedy the contract breach or legal violation or the Director determines, at his or her sole discretion, that such a request is unlikely to yield a satisfactory result, then he or she may cancel immediately without providing the vendor an opportunity to perform a remedy.

5.2.4. Re-Award. The Director may award the cancelled contract to the next lowest responsible bidder (or next highest scoring bidder if best value procurement) without a subsequent solicitation if the following conditions are met:

5.2.4.a. The next lowest responsible bidder (or next highest scoring bidder if best value procurement) is able to perform at the price contained in its original bid submission, and

5.2.4.b. The contract is an open-end contract, a one-time purchase contract, or a contract for work which has not yet commenced.

Award to the next lowest responsible bidder (or next highest scoring bidder if best value procurement) will not be an option if the vendor's failure has in any way increased or significantly changed the scope of the original contract. The vendor failing to honor contractual and legal obligations is responsible for any increase in cost the state incurs as a result of the re-award.

5.3. Non-Responsible. If the Director believes that a vendor may be non-responsible, the Director may request that a vendor or spending unit provide evidence that the vendor either does or does not have the capability to fully perform the contract requirements, and the integrity and reliability necessary to assure good faith performance. If the Director determines that the vendor is non-responsible, the Director shall reject that vendor's bid and shall not award the contract to that vendor. A determination of non-responsibility must be evaluated on a case-by-case basis and can only be made after the vendor in question has submitted a bid. A determination of non-responsibility will only extend to the contract for which the vendor has submitted a bid and does not operate as a bar against submitting future bids.

5.4. Suspension.

5.4.1. The Director may suspend, for a period not to exceed 1 year, the right of a vendor to bid on procurements issued by the Purchasing Division or any state spending unit under its authority if:

5.4.1.a. The vendor has submitted a bid and then requested that its bid be withdrawn after bids have been publicly opened.

5.4.1.b. The vendor has exhibited poor performance in fulfilling his or her contractual obligations to the State. Poor performance includes, but is not limited to any of the following: violations of law, regulation, or ordinance; failure to deliver timely; failure to deliver quantities ordered; poor performance reports; or failure to deliver commodities, services, or printing at the quality level required by the contract.

5.4.1.c. The vendor has breached a contract issued by the Purchasing Division or any state spending unit under its authority and refuses to remedy that breach.

5.4.1.d. The vendor's actions have given rise to one or more of the grounds for debarment listed in W. Va. Code § 5A-3-33d.

5.4.2. Vendor suspension for the reasons listed in section 5.4 above shall occur as follows:

5.4.2.a. Upon a determination by the Director that a suspension is warranted, the Director will serve a notice of suspension to the vendor.

5.4.2.b. A notice of suspension must inform the vendor:

5.4.2.b.1. Of the grounds for the suspension;

5.4.2.b.2. Of the duration of the suspension;

5.4.2.b.3. Of the right to request a hearing contesting the suspension;

5.4.2.b.4. That a request for a hearing must be served on the Director no later than 5 working days of the vendor's receipt of the notice of suspension;

5.4.2.b.5. That the vendor's failure to request a hearing no later than 5 working days of the receipt of the notice of suspension will be deemed a waiver of the right to a hearing and result in the automatic enforcement of the suspension without further notice or an opportunity to respond; and

5.4.2.b.6. That a request for a hearing must include an explanation of why the vendor believes the Director's asserted grounds for suspension do not apply and why the vendor should not be suspended.

5.4.2.c. A vendor's failure to serve a request for hearing on the Director no later than 5 working days of the vendor's receipt of the notice of suspension will be deemed a waiver of the right to a hearing and may result in the automatic enforcement of the suspension without further notice or an opportunity to respond.

5.4.2.d. A vendor who files a timely request for hearing but nevertheless fails to provide an explanation of why the asserted grounds for suspension are inapplicable or should not result in a suspension, may result in a denial of the vendor's hearing request.

5.4.2.e. Within 5 working days of receiving the vendor's request for a hearing, the Director will serve on the vendor a notice of hearing that includes the date, time and place of the hearing.

5.4.2.f. The hearing will be recorded and an official record prepared. Within 10 working days of the conclusion of the hearing, the Director will issue and serve on the vendor, a written decision either confirming or reversing the suspension.

5.4.3. A vendor may appeal a decision of the Director to the Secretary of the Department of Administration. The appeal must be in writing and served on the Secretary no later than 5 working days of receipt of the Director's decision.

5.4.4. The Secretary, or his or her designee, will schedule an appeal hearing and serve on the vendor, a notice of hearing that includes the date, time and place of the hearing. The appeal hearing will be recorded and an official record prepared. Within 10 working days of the conclusion of the appeal hearing, the Secretary will issue and serve on the vendor a written decision either confirming or reversing the suspension.

5.4.5. Any notice or service related to suspension actions or proceedings must be provided by certified mail, return receipt requested.

5.5. Vendor Debarment. The Director may debar a vendor on the basis of one or more of the grounds for debarment contained in W. Va. Code § 5A-3-33d or if the vendor has been declared ineligible to participate in procurement related activities under federal laws and regulation.

5.5.1. Debarment proceedings shall be conducted in accordance with W. Va. Code § 5A-3-33e and these rules. A vendor that has received notice of the proposed debarment by certified mail, return receipt requested, must respond to the proposed debarment within 30 working days after receipt of notice or the debarment will be instituted without further notice. A vendor is deemed to have received notice, notwithstanding the vendor's failure to accept the certified mail, if the letter is addressed to the vendor at its last known address. After considering the matter and reaching a decision, the Director shall notify the vendor of his or her decision by certified mail, return receipt requested.

5.5.2. Any vendor, other than a vendor prohibited from participating in federal procurement, undergoing debarment proceedings is permitted to continue participating in the state's procurement process until a final debarment decision has been reached. Any contract that a debarred vendor obtains prior to a final debarment decision shall remain in effect for the current term, but may not be extended or renewed. Notwithstanding the foregoing, the Director may cancel a contract held by a debarred vendor if the Director determines, in his or her sole discretion, that doing so is in the best interest of the State. A vendor prohibited from participating in federal procurement will not be permitted to participate in the state's procurement process during debarment proceedings.

5.5.3. If the Director's final debarment decision is that debarment is warranted and notice of the final debarment decision is mailed, the Purchasing Division shall reject any bid submitted by the debarred vendor, including any bid submitted prior to the final debarment decision if that bid has not yet been accepted and a contract consummated.

5.5.4. Pursuant to W.Va. Code § 5A-3-33e(e), the length of the debarment period will be specified in the debarment decision and will be for a period of time that the Director finds necessary and proper to protect the public from an irresponsible vendor.

5.5.5. List of Debarred Vendors. The Director shall maintain and publicly post a list of debarred vendors on the Purchasing Division's website.

5.5.6. Related Party Debarment. The Director may pursue debarment of a related party at the

same time that debarment of the original vendor is proceeding or at any time thereafter that the Director determines a related party debarment is warranted. Any entity that fails to provide the Director with full, complete, and accurate information requested by the Director to determine related party status will be presumed to be a related party subject to debarment.

5.6. Damages.

5.6.1. A vendor who fails to perform as required under a contract shall be liable for actual damages and costs incurred by the state.

5.6.2. If any commodities delivered under a contract have been used or consumed by a spending unit and on testing the commodities are found not to comply with specifications, no payment may be approved by the Spending Unit for the merchandise until the amount of actual damages incurred has been determined.

5.6.3. The Spending Unit shall seek to collect damages by following the procedures established by the Office of the Attorney General for the collection of delinquent obligations.

Credits

History: Filed 4-1-19, eff. 4-1-19; Filed 4-16-21, eff. 5-1-21.

Current through register dated May 7, 2021. Some sections may be more current. See credits for details.
W. Va. C.S.R. § 148-1-5, WV ADC § 148-1-5

End of Document

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EXHIBIT B To:
REQUIRED CONTRACT PROVISIONS FOR NON-FEDERAL ENTITY CONTRACTS UNDER FEDERAL AWARDS (2 C.F.R. § 200.317):

Prevailing Wage Determination

[✓] – Not Applicable Because Contract Not for Construction

[ ] – Federal Prevailing Wage Determination on Next Page

WV STATE GOVERNMENT

HIPAA BUSINESS ASSOCIATE ADDENDUM

This Health Insurance Portability and Accountability Act of 1996 (hereafter, HIPAA) Business Associate Addendum ("Addendum") is made a part of the Agreement ("Agreement") by and between the State of West Virginia ("Agency"), and Business Associate ("Associate"), and is effective as of the date of execution of the Addendum.

The Associate performs certain services on behalf of or for the Agency pursuant to the underlying Agreement that requires the exchange of information including protected health information protected by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), as amended by the American Recovery and Reinvestment Act of 2009 (Pub. L. No. 111-5) (the "HITECH Act"), any associated regulations and the federal regulations published at 45 CFR parts 160 and 164 (sometimes collectively referred to as "HIPAA"). The Agency is a "Covered Entity" as that term is defined in HIPAA, and the parties to the underlying Agreement are entering into this Addendum to establish the responsibilities of both parties regarding HIPAA-covered information and to bring the underlying Agreement into compliance with HIPAA.

Whereas it is desirable, in order to further the continued efficient operations of Agency to disclose to its Associate certain information which may contain confidential individually identifiable health information (hereafter, Protected Health Information or PHI); and

Whereas, it is the desire of both parties that the confidentiality of the PHI disclosed hereunder be maintained and treated in accordance with all applicable laws relating to confidentiality, including the Privacy and Security Rules, the HITECH Act and its associated regulations, and the parties do agree to at all times treat the PHI and interpret this Addendum consistent with that desire.

NOW THEREFORE: the parties agree that in consideration of the mutual promises herein, in the Agreement, and of the exchange of PHI hereunder that:

1. **Definitions.** Terms used, but not otherwise defined, in this Addendum shall have the same meaning as those terms in the Privacy, Security, Breach Notification, and Enforcement Rules at 45 CFR Part 160 and Part 164.

    a. **Agency Procurement Officer** shall mean the appropriate Agency individual listed at: http://www.state.wv.us/admin/purchase/vrc/agencyli.html.

    b. **Agent** shall mean those person(s) who are agent(s) of the Business Associate, in accordance with the Federal common law of agency, as referenced in 45 CFR § 160.402(c).

    c. **Breach** shall mean the acquisition, access, use or disclosure of protected health information which compromises the security or privacy of such information, except as excluded in the definition of Breach in 45 CFR § 164.402.

    d. **Business Associate** shall have the meaning given to such term in 45 CFR § 160.103.

    e. **HITECH Act** shall mean the Health Information Technology for Economic and Clinical Health Act. Public Law No. 111-05. 111th Congress (2009).

f. **Privacy Rule** means the Standards for Privacy of Individually Identifiable Health Information found at 45 CFR Parts 160 and 164.

g. **Protected Health Information or PHI** shall have the meaning given to such term in 45 CFR § 160.103, limited to the information created or received by Associate from or on behalf of Agency.

h. **Security Incident** means any known successful or unsuccessful attempt by an authorized or unauthorized individual to inappropriately use, disclose, modify, access, or destroy any information or interference with system operations in an information system.

i. **Security Rule** means the Security Standards for the Protection of Electronic Protected Health Information found at 45 CFR Parts 160 and 164.

j. **Subcontractor** means a person to whom a business associate delegates a function, activity, or service, other than in the capacity of a member of the workforce of such business associate.

2. **Permitted Uses and Disclosures.**

a. **PHI Described.** This means PHI created, received, maintained or transmitted on behalf of the Agency by the Associate. This PHI is governed by this Addendum and is limited to the minimum necessary, to complete the tasks or to provide the services associated with the terms of the original Agreement, and is described in Appendix A.

b. **Purposes.** Except as otherwise limited in this Addendum, Associate may use or disclose the PHI on behalf of, or to provide services to, Agency for the purposes necessary to complete the tasks, or provide the services, associated with, and required by the terms of the original Agreement, or as required by law, if such use or disclosure of the PHI would not violate the Privacy or Security Rules or applicable state law if done by Agency or Associate, or violate the minimum necessary and related Privacy and Security policies and procedures of the Agency. The Associate is directly liable under HIPAA for impermissible uses and disclosures of the PHI it handles on behalf of Agency.

c. **Further Uses and Disclosures**. Except as otherwise limited in this Addendum, the Associate may disclose PHI to third parties for the purpose of its own proper management and administration, or as required by law, provided that (i) the disclosure is required by law, or (ii) the Associate has obtained from the third party reasonable assurances that the PHI will be held confidentially and used or further disclosed only as required by law or for the purpose for which it was disclosed to the third party by the Associate; and, (iii) an agreement to notify the Associate and Agency of any instances of which it (the third party) is aware in which the confidentiality of the information has been breached. To the extent practical, the information should be in a limited data set or the minimum necessary information pursuant to 45 CFR § 164.502, or take other measures as necessary to satisfy the Agency's obligations under 45 CFR § 164.502.

3. **Obligations of Associate.**

a. **Stated Purposes Only.** The PHI may not be used by the Associate for any purpose other than as stated in this Addendum or as required or permitted by law.

b. **Limited Disclosure.** The PHI is confidential and will not be disclosed by the Associate other than as stated in this Addendum or as required or permitted by law. Associate is prohibited from directly or indirectly receiving any remuneration in exchange for an individual's PHI unless Agency gives written approval and the individual provides a valid authorization. Associate will refrain from marketing activities that would violate HIPAA, including specifically Section 13406 of the HITECH Act. Associate will report to Agency any use or disclosure of the PHI, including any Security Incident not provided for by this Agreement of which it becomes aware.

c. **Safeguards.** The Associate will use appropriate safeguards, and comply with Subpart C of 45 CFR Part 164 with respect to electronic protected health information, to prevent use or disclosure of the PHI, except as provided for in this Addendum. This shall include, but not be limited to:

i. Limitation of the groups of its workforce and agents, to whom the PHI is disclosed to those reasonably required to accomplish the purposes stated in this Addendum, and the use and disclosure of the minimum PHI necessary or a Limited Data Set;

ii. Appropriate notification and training of its workforce and agents in order to protect the PHI from unauthorized use and disclosure;

iii. Maintenance of a comprehensive, reasonable and appropriate written PHI privacy and security program that includes administrative, technical and physical safeguards appropriate to the size, nature, scope and complexity of the Associate's operations, in compliance with the Security Rule;

iv. In accordance with 45 CFR §§ 164.502(e)(1)(ii) and 164.308(b)(2), if applicable, ensure that any subcontractors that create, receive, maintain, or transmit protected health information on behalf of the business associate agree to the same restrictions, conditions, and requirements that apply to the business associate with respect to such information.

d. **Compliance With Law.** The Associate will not use or disclose the PHI in a manner in violation of existing law and specifically not in violation of laws relating to confidentiality of PHI, including but not limited to, the Privacy and Security Rules.

e. **Mitigation.** Associate agrees to mitigate, to the extent practicable, any harmful effect that is known to Associate of a use or disclosure of the PHI by Associate in violation of the requirements of this Addendum, and report its mitigation activity back to the Agency.

f. **Support of Individual Rights.**

i. **Access to PHI.** Associate shall make the PHI maintained by Associate or its agents or subcontractors in Designated Record Sets available to Agency for inspection and copying, and in electronic format, if requested, within ten (10) days of a request by Agency to enable Agency to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 CFR § 164.524 and consistent with Section 13405 of the HITECH Act.

ii. **Amendment of PHI.** Within ten (10) days of receipt of a request from Agency for an amendment of the PHI or a record about an individual contained in a Designated Record Set, Associate or its agents or subcontractors shall make such PHI available to Agency for amendment and incorporate any such amendment to enable Agency to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 CFR § 164.526.

iii. **Accounting Rights.** Within ten (10) days of notice of a request for an accounting of disclosures of the PHI, Associate and its agents or subcontractors shall make available to Agency the documentation required to provide an accounting of disclosures to enable Agency to fulfill its obligations under the Privacy Rule, including, but not limited to, 45 CFR §164.528 and consistent with Section 13405 of the HITECH Act. Associate agrees to document disclosures of the PHI and information related to such disclosures as would be required for Agency to respond to a request by an individual for an accounting of disclosures of PHI in accordance with 45 CFR § 164.528. This should include a process that allows for an accounting to be collected and maintained by Associate and its agents or subcontractors for at least six (6) years from the date of disclosure, or longer if required by state law. At a minimum, such documentation shall include:

- the date of disclosure;
- the name of the entity or person who received the PHI, and if known, the address of the entity or person;
- a brief description of the PHI disclosed; and
- a brief statement of purposes of the disclosure that reasonably informs the individual of the basis for the disclosure, or a copy of the individual's authorization, or a copy of the written request for disclosure.

iv. **Request for Restriction.** Under the direction of the Agency, abide by any individual's request to restrict the disclosure of PHI, consistent with the requirements of Section 13405 of the HITECH Act and 45 CFR § 164.522, when the Agency determines to do so (except as required by law) and if the disclosure is to a health plan for payment or health care operations and it pertains to a health care item or service for which the health care provider was paid in full "out-of-pocket."

v. **Immediate Discontinuance of Use or Disclosure.** The Associate will immediately discontinue use or disclosure of Agency PHI pertaining to any individual when so requested by Agency. This includes, but is not limited to, cases in which an individual has withdrawn or modified an authorization to use or disclose PHI.

g. **Retention of PHI.** Notwithstanding section 4.a. of this Addendum, Associate and its subcontractors or agents shall retain all PHI pursuant to state and federal law and shall continue to maintain the PHI required under Section 3.f. of this Addendum for a period of six (6) years after termination of the Agreement, or longer if required under state law.

h. **Agent's, Subcontractor's Compliance.** The Associate shall notify the Agency of all subcontracts and agreements relating to the Agreement, where the subcontractor or agent receives PHI as described in section 2.a. of this Addendum. Such notification shall occur within 30 (thirty) calendar days of the execution of the subcontract and shall be delivered to the Agency Procurement Officer. The Associate will ensure that any of its subcontractors, to whom it provides any of the PHI it receives hereunder, or to whom it provides any PHI which the Associate creates or receives on behalf of the Agency, agree to the restrictions and conditions which apply to the Associate hereunder. The Agency may request copies of downstream subcontracts and agreements to determine whether all restrictions, terms and conditions have been flowed down. Failure to ensure that downstream contracts, subcontracts and agreements contain the required restrictions, terms and conditions may result in termination of the Agreement.

j. **Federal and Agency Access.** The Associate shall make its internal practices, books, and records relating to the use and disclosure of PHI, as well as the PHI, received from, or created or received by the Associate on behalf of the Agency available to the U.S. Secretary of Health and Human Services consistent with 45 CFR § 164.504. The Associate shall also make these records available to Agency, or Agency's contractor, for periodic audit of Associate's compliance with the Privacy and Security Rules. Upon Agency's request, the Associate shall provide proof of compliance with HIPAA and HITECH data privacy/protection guidelines, certification of a secure network and other assurance relative to compliance with the Privacy and Security Rules. This section shall also apply to Associate's subcontractors, if any.

k. **Security.** The Associate shall take all steps necessary to ensure the continuous security of all PHI and data systems containing PHI. In addition, compliance with 74 FR 19006 Guidance Specifying the Technologies and Methodologies That Render PHI Unusable, Unreadable, or Indecipherable to Unauthorized Individuals for Purposes of the Breach Notification Requirements under Section 13402 of Title XIII is required, to the extent practicable. If Associate chooses not to adopt such methodologies as defined in 74 FR 19006 to secure the PHI governed by this Addendum, it must submit such written rationale, including its Security Risk Analysis, to the Agency Procurement Officer for review prior to the execution of the Addendum. This review may take up to ten (10) days.

l. **Notification of Breach.** During the term of this Addendum, the Associate shall notify the Agency and, unless otherwise directed by the Agency in writing, the WV Office of Technology immediately by e-mail or web form upon the discovery of any Breach of unsecured PHI; or within 24 hours by e-mail or web form of any suspected Security Incident, intrusion or unauthorized use or disclosure of PHI in violation of this Agreement and this Addendum, or potential loss of confidential data affecting this Agreement. Notification shall be provided to the Agency Procurement Officer at www.state.wv.us/admin/purchase/vrc/agencyli.htm and,

unless otherwise directed by the Agency in writing, the Office of Technology at incident@wv.gov or https://apps.wv.gov/ot/ir/Default.aspx.

The Associate shall immediately investigate such Security Incident, Breach, or unauthorized use or disclosure of PHI or confidential data. Within 72 hours of the discovery, the Associate shall notify the Agency Procurement Officer, and, unless otherwise directed by the Agency in writing, the Office of Technology of: (a) Date of discovery; (b) What data elements were involved and the extent of the data involved in the Breach; (c) A description of the unauthorized persons known or reasonably believed to have improperly used or disclosed PHI or confidential data; (d) A description of where the PHI or confidential data is believed to have been improperly transmitted, sent, or utilized; (e) A description of the probable causes of the improper use or disclosure; and (f) Whether any federal or state laws requiring individual notifications of Breaches are triggered.

Agency will coordinate with Associate to determine additional specific actions that will be required of the Associate for mitigation of the Breach, which may include notification to the individual or other authorities.

All associated costs shall be borne by the Associate. This may include, but not be limited to costs associated with notifying affected individuals.

If the Associate enters into a subcontract relating to the Agreement where the subcontractor or agent receives PHI as described in section 2.a. of this Addendum, all such subcontracts or downstream agreements shall contain the same incident notification requirements as contained herein, with reporting directly to the Agency Procurement Officer. Failure to include such requirement in any subcontract or agreement may result in the Agency's termination of the Agreement.

m. **Assistance in Litigation or Administrative Proceedings.** The Associate shall make itself and any subcontractors, workforce or agents assisting Associate in the performance of its obligations under this Agreement, available to the Agency at no cost to the Agency to testify as witnesses, or otherwise, in the event of litigation or administrative proceedings being commenced against the Agency, its officers or employees based upon claimed violations of HIPAA, the HIPAA regulations or other laws relating to security and privacy, which involves inaction or actions by the Associate, except where Associate or its subcontractor, workforce or agent is a named as an adverse party.

4. **Addendum Administration.**

a. **Term.** This Addendum shall terminate on termination of the underlying Agreement or on the date the Agency terminates for cause as authorized in paragraph (c) of this Section, whichever is sooner.

b. **Duties at Termination.** Upon any termination of the underlying Agreement, the Associate shall return or destroy, at the Agency's option, all PHI received from, or created or received by the Associate on behalf of the Agency that the Associate still maintains in any form and retain no copies of such PHI or, if such return or destruction is not feasible, the Associate shall extend the protections of this Addendum to the PHI and limit further uses and disclosures to the purposes that make the return or destruction of the PHI infeasible. This shall also apply to all agents and subcontractors of Associate. The duty of the Associate and its agents

and subcontractors to assist the Agency with any HIPAA required accounting of disclosures survives the termination of the underlying Agreement.

c. **Termination for Cause.** Associate authorizes termination of this Agreement by Agency, if Agency determines Associate has violated a material term of the Agreement. Agency may, at its sole discretion, allow Associate a reasonable period of time to cure the material breach before termination.

d. **Judicial or Administrative Proceedings.** The Agency may terminate this Agreement if the Associate is found guilty of a criminal violation of HIPAA. The Agency may terminate this Agreement if a finding or stipulation that the Associate has violated any standard or requirement of HIPAA/HITECH, or other security or privacy laws is made in any administrative or civil proceeding in which the Associate is a party or has been joined. Associate shall be subject to prosecution by the Department of Justice for violations of HIPAA/HITECH and shall be responsible for any and all costs associated with prosecution.

e. **Survival.** The respective rights and obligations of Associate under this Addendum shall survive the termination of the underlying Agreement.

5. **General Provisions/Ownership of PHI.**

a. **Retention of Ownership.** Ownership of the PHI resides with the Agency and is to be returned on demand or destroyed at the Agency's option, at any time, and subject to the restrictions found within section 4.b. above.

b. **Secondary PHI.** Any data or PHI generated from the PHI disclosed hereunder which would permit identification of an individual must be held confidential and is also the property of Agency.

c. **Electronic Transmission.** Except as permitted by law or this Addendum, the PHI or any data generated from the PHI which would permit identification of an individual must not be transmitted to another party by electronic or other means for additional uses or disclosures not authorized by this Addendum or to another contractor, or allied agency, or affiliate without prior written approval of Agency.

d. **No Sales.** Reports or data containing the PHI may not be sold without Agency's or the affected individual's written consent.

e. **No Third-Party Beneficiaries.** Nothing express or implied in this Addendum is intended to confer, nor shall anything herein confer, upon any person other than Agency, Associate and their respective successors or assigns, any rights, remedies, obligations or liabilities whatsoever.

f. **Interpretation.** The provisions of this Addendum shall prevail over any provisions in the Agreement that may conflict or appear inconsistent with any provisions in this Addendum. The interpretation of this Addendum shall be made under the laws of the state of West Virginia.

g. **Amendment.** The parties agree that to the extent necessary to comply with applicable law they will agree to further amend this Addendum.

h. **Additional Terms and Conditions.** Additional discretionary terms may be included in the release order or change order process.

AGREED:

Name of Agency:_____

Signature:_____

Title:_____

Date:_____

Name of Associate: Consumer Direct Care Network West Virginia, LLC

Signature:

Title: President/CEO

Date: 6/5/23

Form - WVBAA-012004
Amended 06.26.2013

APPROVED AS TO FORM THIS 26th
DAY Of June 20 23
Patrick Morrisey
Attorney General
BY

Appendix A

(To be completed by the Agency's Procurement Officer prior to the execution of the Addendum, and shall be made a part of the Addendum. PHI not identified prior to execution of the Addendum may only be added by amending Appendix A and the Addendum, via Change Order.)

Name of Associate: _____

Name of Agency: DHHR/BMS

Describe the PHI (do not include any actual PHI). If not applicable, please indicate the same.

Member & Provider profiles & demographics.