PART IA – TECHNICAL PROPOSAL

The following technical proposal does not include cost and/or pricing information. Please see 8.4 Part II – Cost Proposal for cost and/or pricing information.

Section I – Title Page

Part IA – Technical Proposal	
RFP Title:	Self-Directed Financial Management Services
RFP:	3459
Vendor Name:	Consumer Direct Services for Nevada, LLC, DBA Consumer Direct Care Network Nevada
Address:	1005 Terminal Way, Suite 294 Reno, NV 89502-2179
Opening Date:	9/7/2017 as per Amendment 2 to RFP 3459
Opening Time:	2:00 PM

Section II – Table of Contents

Below is an accurate and updated table of contents for Part IA-Technical Proposal.

PART IA – TECHNICAL PROPOSAL 1
Section I – Title Page 1
Section II – Table of Contents 2
Section III – Vendor Information Sheet 3
Section IV – State Documents 5
Section V – Scope of Work 12
Section VI– Company Background and References 56
Section VII – Attachment F – Proposed Staff Resume 66
Section VIII – Other Informational Material 82
Appendix A: Sample Policy and Procedure Manual 84

Section III – Vendor Information Sheet

The following vendor information sheet is signed by President/CEO, Ben Bledsoe, who is authorized to bind Consumer Direct Care Network Nevada.

VENDOR INFORMATION SHEET FOR RFP 3459

Vendor Shall:

A) Provide all requested information in the space provided next to each numbered question. The information provided in Sections V1 through V6 shall be used for development of the contract;

B) Type or print responses; and

C) Include this Vendor Information Sheet in Section III of the Technical Proposal.

V1	Company Name	***Consumer Direct Services for Nevada, LLC, DBA Consumer Direct Care Network Nevada***

V2	Street Address	***1005 Terminal Way, Suite 294***

V3	City, State, ZIP	***Reno, NV 89502***

V4	Telephone Number		
	Area Code: ***(406)***	Number: ***532-2001***	Extension:

V5	Facsimile Number		
	Area Code: (***775)***	Number: ***786-0717***	Extension:

V6	Toll Free Number		
	Area Code: ***(877)***	Number: ***786-4999***	Extension:

V7	***Contact Person for Questions / Contract Negotiations, including address if different than above***
	Name: ***Ben Bledsoe***
	Title: **President/CEO**
	Address: ***100 Consumer Direct Way, Missoula, MT 59808***
	Email Address: ***BenB@consumerdirectcare.com***

V8	Telephone Number for Contact Person		
	Area Code: ***(406)***	Number: ***532-2001***	Extension:

V9	Facsimile Number for Contact Person

	Area Code: ***(406)***	Number: ***532-8573***	Extension:

V10	***Name of Individual Authorized to Bind the Organization***	
	Name: ***Ben Bledsoe***	Title: ***President/CEO***

V11	Signature ***(Individual shall be legally authorized to bind the vendor per NRS 333.337)***	
	Signature:	Date: 09/05/17

Section IV – State Documents

State documents A-F are included in this section.

A. RFP Signature Page(s)

The signature pages from RFP 3459 Amendment 1, Amendment 2, and Amendment 3 are signed by President/CEO, Ben Bledsoe, who is authorized to bind Consumer Direct Care Network Nevada.

Amendment 1 Signature Page

Task	Date/Time
Deadline for submitting questions	7/18/17 @ 12:00 PM
Answers posted to website	On or about 8/11/17
Deadline for submittal of Reference Questionnaires	No later than 4:30 PM on 9/6/17
Deadline for submission and opening of proposals	No later than 2:00 PM on **9/7/17**
Evaluation period (approximate time frame)	9/8 ~ 9/19
Selection of vendor	On or about 9/19/17
Anticipated BOE approval	12/12/17
Contract start date (contingent upon BOE approval)	4/1/18

ALL ELSE REMAINS THE SAME FOR RFP 3459.

Vendor must sign and return this amendment with proposal submitted.

Vendor Name: Consumer Direct Care Network Nevada

Authorized Signature:

Title: President/CEO Date: 09/05/17

This document must be submitted in the "State Documents" section of vendors' technical proposal.

Amendment 2 Signature Page

Contractor for payment after delivery of services. Once paid, the Contractor invoices the State.

91. 2.4 Who is responsible for the cost of Criminal Background Checks (CBC)?

Background checks are paid from the participant's budget as a one-time purchase.

92. 5.2.3: Can you tell us a bit more about the procurement card that is sometimes issued and how this is used / billed?

Not applicable to this RFP.

93. 2.4 Is transport a separate service that providers can submit time for and is it included as a unique service in the participant budget?

No, it is not a service that providers can submit time for through the State-funded Self-Directed program.

ALL ELSE REMAINS THE SAME FOR RFP 3459.

Vendor must sign and return this amendment with proposal submitted.

Vendor Name: Consumer Direct Care Network Nevada

Authorized Signature:

Title: President/CEO Date: 09/05/17

This document must be submitted in the "State Documents" section of vendors' technical proposal.

Amendment 3 Signature Page

RFP Opening date:

RFP 3459 Amendment 2 stated the wrong opening date. The new Opening Date & Time is as follows:

SEPTEMBER 7, 2017 @ 2:00 p.m. PST.

ALL ELSE REMAINS THE SAME FOR RFP 3459.

Vendor must sign and return this amendment with proposal submitted.

Vendor Name: Consumer Direct Care Network Nevada

Authorized Signature:

Title: President/CEO Date: 09/06/17

This document must be submitted in the "State Documents" section of vendors' technical proposal.

B. Attachment A – Confidentiality and Certification of Indemnification

Confidentiality and Certification of Indemnification signed by an individual authorized to bind the organization.

ATTACHMENT A – CONFIDENTIALITY AND CERTIFICATION OF INDEMNIFICATION

Submitted proposals, which are marked "confidential" in their entirety, or those in which a significant portion of the submitted proposal is marked "confidential" **shall not** be accepted by the State of Nevada. Pursuant to NRS 333.333, only specific parts of the proposal may be labeled a "trade secret" as defined in NRS 600A.030(5). All proposals are confidential until the contract is awarded; at which time, both successful and unsuccessful vendors' technical and cost proposals become public information.

In accordance with the submittal instructions of this RFP, vendors are requested to submit confidential information in separate files marked "**Part IB Confidential Technical**" and "**Part III Confidential Financial**".

The State shall not be responsible for any information contained within the proposal. If vendors do not comply with the labeling and packing requirements, proposals shall be released as submitted. In the event a governing board acts as the final authority, there may be public discussion regarding the submitted proposals that shall be in an open meeting format, the proposals shall remain confidential.

By signing below, I understand it is my responsibility as the vendor to act in protection of the labeled information and agree to defend and indemnify the State of Nevada for honoring such designation. I duly realize failure to so act shall constitute a complete waiver and all submitted information shall become public information; additionally, failure to label any information that is released by the State shall constitute a complete waiver of any and all claims for damages caused by the release of the information.

This proposal contains Confidential Information, Trade Secrets and/or Proprietary information.

Please initial the appropriate response in the boxes below and provide the justification for confidential status.

Part IB – Confidential Technical Information			
YES		NO	***X***
Justification for Confidential Status			

Part III – Confidential Financial Information			
YES	***X***	NO	
Justification for Confidential Status			
Please see Part III – Confidential Financial Information, Section II – Financial Information and Documentation for 3.1.11.1 through 3.1.11.3 responses.			

Consumer Direct Care Network Nevada
Company Name

Signature
Ben Bledsoe
Print Name

09/05/17
Date

This document shall be submitted in Section IV of vendor's technical proposal

C. Attachment B – Vendor Certifications

President/CEO, Ben Bledsoe, who is authorized to bind Consumer Direct Care Network Nevada, has signed the below form.

ATTACHMENT B – VENDOR CERTIFICATIONS

Vendor agrees and shall comply with the following:

(1) Any and all prices that may be charged under the terms of the contract do not and shall not violate any existing federal, State or municipal laws or regulations concerning discrimination and/or price fixing. The vendor agrees to indemnify, exonerate and hold the State harmless from liability for any such violation now and throughout the term of the contract.

(2) All proposed capabilities can be demonstrated by the vendor.

(3) The price(s) and amount of this proposal have been arrived at independently and without consultation, communication, agreement or disclosure with or to any other contractor, vendor or potential vendor.

(4) All proposal terms, including prices, shall remain in effect for a minimum of 180 days after the proposal due date. In the case of the awarded vendor, all proposal terms, including prices, shall remain in effect throughout the contract negotiation process.

(5) No attempt has been made at any time to induce any firm or person to refrain from proposing or to submit a proposal higher than this proposal, or to submit any intentionally high or noncompetitive proposal. All proposals shall be made in good faith and without collusion.

(6) All conditions and provisions of this RFP are deemed to be accepted by the vendor and incorporated by reference in the proposal, except such conditions and provisions that the vendor expressly excludes in the proposal. Any exclusion shall be in writing and included in the proposal at the time of submission.

(7) Each vendor shall disclose any existing or potential conflict of interest relative to the performance of the contractual services resulting from this RFP. Any such relationship that might be perceived or represented as a conflict shall be disclosed. By submitting a proposal in response to this RFP, vendors affirm that they have not given, nor intend to give at any time hereafter, any economic opportunity, future employment, gift, loan, gratuity, special discount, trip, favor, or service to a public servant or any employee or representative of same, in connection with this procurement. Any attempt to intentionally or unintentionally conceal or obfuscate a conflict of interest shall automatically result in the disqualification of a vendor's proposal. An award shall not be made where a conflict of interest exists. The State shall determine whether a conflict of interest exists and whether it may reflect negatively on the State's selection of a vendor. The State reserves the right to disqualify any vendor on the grounds of actual or apparent conflict of interest.

(8) All employees assigned to the project are authorized to work in this country.

(9) The company has a written equal opportunity policy that does not discriminate in employment practices with regard to race, color, national origin, physical condition, creed, religion, age, sex, marital status, sexual orientation, developmental disability or handicap.

(10) The company has a written policy regarding compliance for maintaining a drug-free workplace.

(11) Vendor understands and acknowledges that the representations within their proposal are material and important, and shall be relied on by the State in evaluation of the proposal. Any vendor misrepresentations shall be treated as fraudulent concealment from the State of the true facts relating to the proposal.

(12) Vendor shall certify that any and all subcontractors comply with Sections 7, 8, 9, and 10, above.

(13) The proposal shall be signed by the individual(s) legally authorized to bind the vendor per NRS 333.337.

Consumer Direct Care Network Nevada
Vendor Company Name

Vendor Signature

Ben Bledsoe 09/05/17
Print Name Date

This document shall be submitted in Section IV of vendor's technical proposal

D. Attachment H – Certification Regarding Lobbying

signed by an individual authorized to bind the organization.

ATTACHMENT H – CERTIFICATION REGARDING LOBBYING

Certification for Contracts, Grants, Loans, and Cooperative Agreements

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or shall be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federally appropriated funds have been paid or shall be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, "Disclosure of Lobbying Activities," in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all sub awards at all tiers (including subcontracts, sub grants, and contracts under grants, loans, and cooperative agreements) and that all sub recipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by section 1352, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than $10,000 and not more than $100,000 for each such failure.

By: _____ 09/05/17

Signature of Official Authorized to Sign Application — Date

For: **Consumer Direct Care Network Nevada**

Vendor Name

Proposal to Provide Self-Directed FMS Services Per RFP 3459

Project Title

This document shall be submitted in Section IV of vendor's technical proposal

E. Vendor Licensing Agreements and/or Hardware and Software Maintenance Agreements

Copies of any vendor licensing agreements and/or hardware and software maintenance agreements.

No vendor licensing agreements and/or hardware and software maintenance agreements are required for this scope of work.

F. Applicable Certifications and/or Licenses

Copies of applicable certifications and/or licenses. Please note Consumer Direct Services now does business as Consumer Direct Care Network Nevada.

Intermediary Service Organization (ISO) Certification

Effective Date : 01/01/2017
Expiration Date : 12/31/2017

State of Nevada
Department of Health and Human Services
Division of Public and Behavioral Health

License Number
7870-PCO-6

This Is To Certify That

CONSUMER DIRECT PERSONAL CARE AND BETTER @ HOME

1005 TERMINAL WAY STE 294
RENO, NV 89502

Is hereby licensed as a(n)
PERSONAL CARE AGENCY THAT IS ALSO ISO CERTIFIED

as provided for in Chapters 439 and 449 of the Nevada Revised Statutes and the Nevada Administrative Code and the standards, rules and regulations adopted by the Board of Health.

Certification

EVA MEDINA / Administrator

CONSUMER DIRECT SERVICES FOR NEVADA LLC

Cody Phinney, MPH / Administrator

Section V – Scope of Work

Vendors shall place their written response(s) to Section 2, Scope of Work in bold/italics immediately following the applicable RFP question, statement and/or section.

2. SCOPE OF WORK

Each submitted proposal must include documentation that the following mandatory requirements, qualifications and responsibilities will be met. The documentation must include a description of the specific design of each responsibility and requirement.

2.1.1 The successful vendor for the role of Financial Management Services must prepare and maintain a comprehensive FMS Policies and Procedures Manual which reflects all tasks performed by the FMS and required by ADSD. It will include a description of the internal controls that will be used to monitor the FMS performance of its tasks. It will also demonstrate a high level of participant choice and autonomy and afford the highest level of participant directed activities related to the support services to participants by the FMS. The FMS will update the manual on a periodic basis as needed. It is also recommended that the manual be developed in an automated/read only format so that FMS staff can readily access it.

Consumer Direct Nevada will prepare and maintain a comprehensive FMS Policies and Procedures Manual reflective of all tasks that we perform as FMS and those required by ADSD. We have served Nevadans as a Personal Care Services (PCS) provider since 2003. Consumer Direct Nevada is part of the Consumer Direct family of companies which works across the US providing Financial Management Services (FMS). Consumer Direct is accustomed to developing and employing detailed policy and procedure manuals outlining procedures for enrolling and obtaining FEINs for participants, hiring workers, tax filing procedures, workers' compensation procedures, and ongoing payroll procedures. To illustrate some of the policies and procedures we have in place governing our FMS programs, we are including a copy of our current policies and procedures manual for Consumer Direct Care Network Idaho as Appendix A: Sample Policy and Procedure Manual. In Idaho, we provide services under the fiscal employer agent model which aligns closely with the requirements and scope for this RFP. We will adapt the policies and procedures stated in the Idaho manual to meet Nevada's specific requirements.

Current program delivery by Consumer Direct for the state department of Health Care Finance and Policy, ADSD, and health plans is inclusive of Nevada's labor, tax, wage, Medicaid, and employment law. Upon award of contract, we will incorporate Nevada regulations into existing FMS procedures. The adapted manual for FMS will be submitted to ADSD during the Offeror's Readiness Review period for ADSD's review and approval. We commit to providing an FMS procedures manual to ADSD annually, and will look to ADSD for review and approval of updates to the manual as federal or state policies change.

We employ policy and legal analysts who work to support all programs from contract execution to program implementation, and ongoing

through research and guidance. We have reviewed all documents noted in this section of the RFP, per the requirements of this proposal and we anticipate there will be no issue with fully integrating the principles and policies outlined in each of the documents noted. We fully embrace and implement the philosophies of Person-Centered Planning and, through our work, will continue to empower Nevada's elders, adults and children with disabilities to maximize the choice and control they have in their lives and futures. Our policy and training material reflects Person-Centered Planning practices by supporting families and workers in focusing on the participants wants and needs.

Consumer Direct personnel key to the project will be responsible for reviewing, understanding, and employing materials listed in this section of the RFP in addition to policy and procedure manuals, and federal labor, tax, and Medicaid regulatory standards. Processes currently in place for monitoring and operationalizing regulatory changes are detailed in the following, and will also apply to self-directed FMS services.

Policy staff in both our Government Relations department, our Human Resources department, and our Payroll department are responsible for reviewing NV legislative and statutory changes to labor, tax, employment, or ADSD and HCFP program rules. Once changes to any of the above mentioned regulations , or to state agency approved HCBS Waiver applications become evident, policy staff work with our local Consumer Direct Care Network Nevada (CDCN NV) program, Quality Improvement (QI), and operations teams to incorporate manual or legal changes into updated versions of FMS program related documents. Our QI team monitors the local NV office against the most updated requirements as part of their annual audit.

2.1.2 The successful vendor will describe the physical environment in which the FMS will perform the requirement of this RFP. This would include, but not be limited to:

2.1.2.1 The location of the office(s) where the work will be done and records kept;

Consumer Direct has offices in Reno and Las Vegas. Our office ours are 8am to 5pm, Monday through Friday, except holidays. Both offices are handicapped accessible and are directly accessible via local bus routes. Consumer Direct employees travel to areas as needed to support participants statewide in all programs.

Office	***Reno***	***Las Vegas***
Building	***Executive Plaza***	***Park Sahara Office Center***
Address	***1005 Terminal Way, Ste. 294***	***1830 East Sahara Ave., Ste. 113***
City, Zip	***Reno, NV 89502-2179***	***Las Vegas, NV 89104-3747***

Toll-free phone	***877-786-4999***	***866-894-4435***
Toll-free fax	***877-786-4998***	***866-686-4435***
Phone	***775-786-4999***	***702-894-4435***
Fax	***775-786-0717***	***702-792-4435***

2.1.2.2 Adequacy of space available to store current and archived files in a confidential and secure manner; and

Our Nevada offices are well equipped to store current and archived files in a confidential and secure manner. Our offices and all equipment therein fully supports the delivery of FMS at all times including security of data, employees, files, and software and systems for all participants, their families or representatives, and veterans.

Consumer Direct is committed to safeguarding the privacy of health information in both electronic and paper formats. All participant, worker, and other related vendor or provider files for current HCFP, ADSD, and health plan contracts are maintained in an accurate, secure, and confidential manner and for the required period of time as mandated by Federal law and longer should any state agency or health plan partner deem an extended timeframe to be appropriate. Procedures are in place to prevent HIPAA security breaches for any data maintained electronically. In the event of an inadvertent security breach, processes are in place to report, document, and recover from the breach. Information is stored on multiple secure servers in different geographical locations to protect the information in the event of a disaster. Information is secure yet easily accessible by authorized personnel in the event of an inquiry or audit.

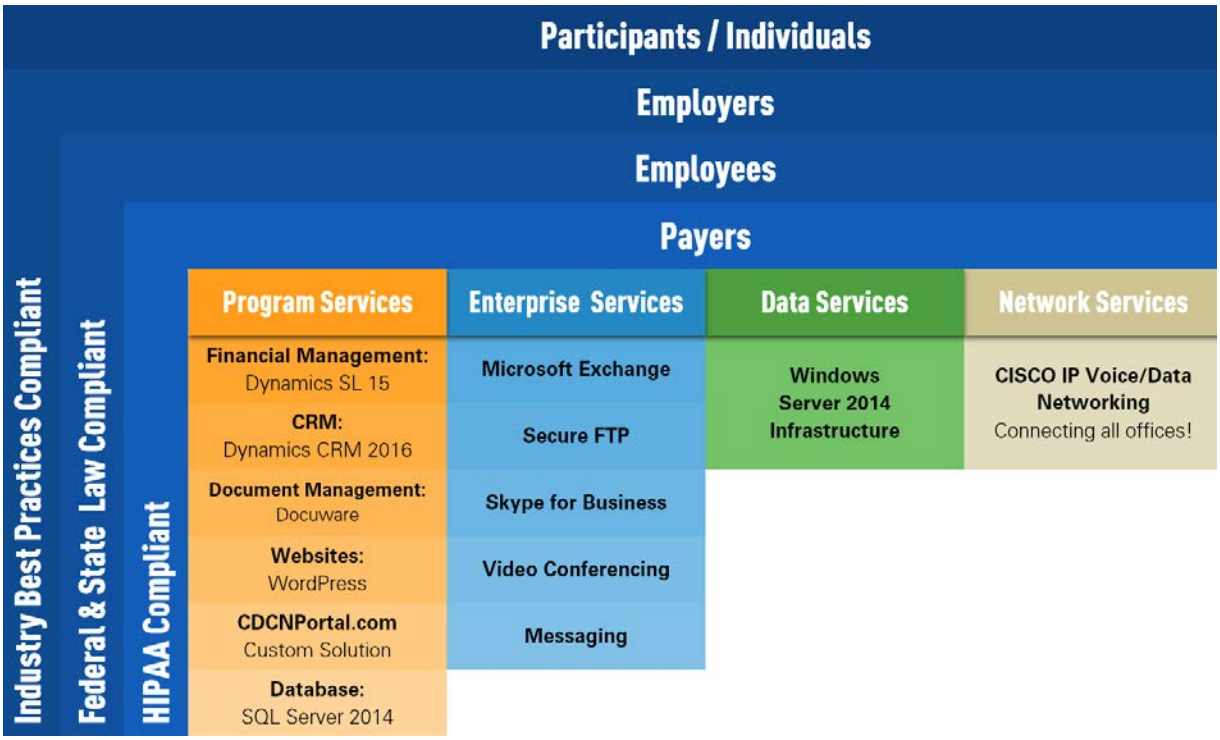
2.1.2.3 A description of the informational system, software, equipment and other technologies that will affect the contract and/or this procurement.

All Consumer Direct information technology assets (hardware and software) are conventional and contemporary in nature, widely available, and built and operated in accordance with industry best practices. Our commercial-off-the-shelf software and custom applications are designed to be compatible with other systems, whether those are legacy systems relying on older technology or cutting-edge systems built on the newest platforms. Our hardware platforms are refreshed continually to provide the services that are current and standard in the industry.

Consumer Direct employs various program, data, and network services to ensure continuous and smooth information flow and seamless service delivery for participants, their workers, and vendors or providers. The figure below highlights these systems and how they will work cohesively to fulfill and exceed ADSD's expectations for network

connectivity, information storage and transfer, and network functionality.

Consumer Direct delivers information technology services that meet and exceed all of the requirements in the RFP. Our information systems are hosted in two redundant and high-availability data centers: a Tier-3 data center in Lynnwood, Washington and a data center in Missoula, Montana. The data centers are connected to operating offices and remote workers via secure and encrypted data networks to provide voice, video and data services, access to backend financial systems, payroll systems, and custom business information processing services. The entire Consumer Direct information systems environment operates on a state-of-the-art Cisco network infrastructure with Dell enterprise-class hardware.



2.1.3 Although it is not required that the successful vendor be headquartered in the State of Nevada, it is required that they have in-state contact with applicable agencies. Vendor cannot provide Fiscal Employer Services to a child for whom it also provides a direct service funded by ADSD.

Consumer Direct Nevada has two offices in the state, one in Reno and one in Las Vegas. Office hours are 8am to 5pm, Monday through Friday, except holidays. Both offices are handicapped accessible and are directly accessible via local bus routes. Consumer Direct employees are available as needed to meet with agency representatives.

We understand and agree that we will not provide Fiscal Employer Services to children with whom we also provide a direct service funded by ADSD.

2.1.4 The successful vendor will present a Quality Management Plan that ensures all responsibilities in this RFP are accomplished within required time periods and according to best practice for participant-directed payroll and tax management services and other tasks required in this RFP. This plan should be periodically reviewed to evaluate effectiveness in meeting responsibilities. The Quality Management Plan should contain clarified, defined goals and standards for each service or responsibility.

The following table outlines the Quality Management Plan Consumer Direct will employ to meet and exceed the Responsibilities as set by ADSD. We have reviewed all Responsibilities and we acknowledge the corresponding remedial actions and reporting frequencies that apply in the event we do not meet any of these standards. Within each Responsibility we note the various ways we will meet all timelines and deliverables included in this section.

Responsibility and Reporting Frequency	***Measure and Validation Method***	***Consumer Direct's Solution to Meeting this Responsibility***
1. Enrollment of participants within 15 business days from receipt of completed and correct participant Packet. ***Reported on monthly.***	***Participant Packet receipt date to completion of enrollment date***	***-High quality training during the participant enrollment means higher Packet 'success' rate and faster completion rates*** ***-Local NV staff work closely with participant to get documents in order and complete packet*** ***-High attention to detail from our authorization and FEA team when Packet is initially submitted*** ***-Packets time stamped for receipt only after completed fully by participant*** ***-Once time stamped for acceptance, participant is entered into our system and notification that participant is enrolled sent within3-5 business days*** ***-participant fully enrolled and ready for payment to workers in 10 business days from completion of Packet*** ***-User friendly, self-explanatory Packet materials***
2. Enrollment of workers within 21 business days from receipt of completed and correct employment packet, summary reported monthly.	***Comparison of completed employment packet date, to include criminal clearances, from worker enrollment completed verification***	***-High quality, customer service, online materials available*** ***-Caregiver entry team priority to enter participant Packets within 3-5 business days of receipt*** ***-Clear Packet instruction and follow up with both participant and worker*** ***-Direct and expeditious assistance to the worker to complete hire process after Packet has been received*** ***-High attention to detail from our caregiver entry teams when Packet is initially submitted to us, and each time following*** ***-Well-developed policies and procedures for Packet-entry and timelines***

		-User friendly, self-explanatory new hire materials, online trainings available
3. Submission of denied claims report (2 months from initial denial), monthly.	***Analysis of denied claims report.***	***-We verify claims information against referral information, auth information, PCP information, participant and employment packet information. Creates higher accuracy of initial claims submissions.*** ***-Claims control enables verification against several sources to ensure accurate information on submittals.*** ***-Time entered is audited for compliance with authorized hours and services prior to acceptance*** ***-Claims are generated directly out of our accounting system which is fed directly by our CRM and online portal*** ***-Time entered in the web portal is not allowable for hours or services outside of authorization – meaning claims will have a lower denial rate.*** ***-Time entered via paper timesheets are audited upon submission for compliance with authorized PCP, and Optical Character Recognition catches additional errors outside of allowable program business rules after the manual audit and the paper timesheet is submitted into our document management system.***
4. Payments to workers to be made on or before the Friday following the prior 2 week period, monthly report submitted to ADSD.	***Analysis of monthly report submitted to ADSD***	***-Process payroll from timesheets signed and submitted by employees and approved by employers.*** ***-Ensure payments to works are made on or before the Friday following the prior 2 week period.*** ***-Required monthly reports will be submitted to ADSD.***

2.1.5 The FMS shall meet with the representative from ADSD and ADSD regional representatives immediately after the awarding of the contract. At this meeting all aspects of program startup and operation shall be discussed and reviewed including initial training in the waiver-related ADSD procedures, budget guidelines and cost standards. ADSD will establish with the awarded vendor(s) a regular set of meetings and/or telephone conferences at least quarterly or more often as needed to assess the progress of the contract.

Key personnel will be available to meet with ADSD immediately upon award of contract, quarterly thereafter, and more frequently upon request or as determined for the continued success of both the self-directed and VD-HCBS programs. Consumer Direct would be happy to accommodate meeting space, conference lines, and other equipment necessary to facilitate clear and timely communication.

2.2 RESPONSIBILITIES

The Financial Management Service is responsible for the following:

2.2.1 Federal and State Approval to be a Financial Management Service.

Consumer Direct is appropriately licensed by the Department of Taxation in accordance with NRS §360.780. Please see our Nevada State Business License***.***

Business Entity Information			
Status:	**Active**	File Date:	**10/28/2002**
Type:	**Domestic Limited-Liability Company**	Entity Number:	**LLC13298-2002**
Qualifying State:	**NV**	List of Officers Due:	**10/31/2018**
Managed By:	**Managers**	Expiration Date:	**12/28/2502**
Foreign Name:		On Admin Hold:	**No**
NV Business ID:	**NV20021134616**	Business License Exp:	**10/31/2018**

Registered Agent Information			
Name:	**BUSINESS FILINGS INCORPORATED**	Address 1:	**701 S CARSON ST STE 200**
Address 2:		City:	**CARSON CITY**
State:	**NV**	Zip Code:	**89701**
Phone:		Fax:	
Mailing Address 1:		Mailing Address 2:	
Mailing City:		Mailing State:	**NV**
Mailing Zip Code:			
Agent Type:	**Commercial Registered Agent - Other**		
Jurisdiction:	**DELAWARE**	Status:	**Active**

Officers			☐ Include Inactive Officers
Manager - BEN BLEDSOE			
Address 1:	**100 CONSUMER DIRECT WAY**	Address 2:	
City:	**MISSOULA**	State:	**MT**
Zip Code:	**59808-5037**	Country:	
Status:	**Active**	Email:	
Manager - EVA MEDINA			
Address 1:	**1005 TERMINAL WAY, SUITE 294**	Address 2:	
City:	**RENO**	State:	**NV**
Zip Code:	**89502**	Country:	
Status:	**Active**	Email:	

2.2.2 Demonstrate it has a separate Federal employer identification number (FEIN) specifically to file Internal Revenue Service (IRS) Form 2678 and selected tax forms on individuals' behalves.

Consumer Direct will obtain IRS Form 2678, Employer/Payer Appointment of Agent, during the enrollment and will and use a Fiscal Vendor Agent FEIN for the sole purpose of filing IRS Form 2678, other federal employment tax forms, and making federal payments on individuals' behalves. Consumer Direct will then submit a 2678 to receive approval to act on behalf of those participants transferring to

us. We will obtain IRS Form SS-4, Application for Employer Identification Number for all new participants. During the transition, we will work closely with the incumbent FMS to transfer all relevant information regarding participant FEINs and related tax information as efficiently as possible to provide participants and workers with a seamless transition.

2.2.3 Must have an enrollment packet that contains information about the agent's services and operations, Federal and State forms the individual must complete, sign and return to the agent to use agent services (e.g., IRS Form SS-4, 2678, 8821), examples of expenditure reports and information to explain these reports, and other applicable consent and agreement forms. The required enrollment packet will include ADSD forms and information (employee application, fact sheets, provider qualifications, individual provider, applicable Individual Support Procedures and other information ADSD deems necessary).

Upon award of contract, our payroll team will collaborate with ADSD staff to determine ADSD requirements for the enrollment packet. Enrollment packet will include all necessary state and federal forms for the participant to become an employer of his/her workers. Included in these packets will be the specific forms required for FMS operations including information regarding workers' compensation, unemployment, power of attorney, or any other business-related forms that might be required on behalf of participants.

Payroll staff dedicated to operations in Nevada will research and incorporate all Nevada-specific forms into the participant enrollment and tax filing process on behalf of participants who will operate under these programs as their own employers. Such forms and research are a necessity for each FMS program we operate and our staff are familiar with the requirements specific to FMS and VD-HCBS.

Nevada-specific labor and wage documents, as well as any others related to operating as a sole employer in the state, will be incorporated into the participant enrollment packet and will be filed as appropriate on behalf of each participant, along with other federal tax and business-related forms and notifications. A process for incorporation of all NV-specific documents will be detailed to the satisfaction of ADSD during the startup phase and ongoing throughout the course of the contract period should state or federal regulatory requirements change.

2.2.4 Will have a system to distribute and explain the enrollment packet, and collect, review, process, and maintain required forms.

Enrollment packets are distributed prior to or during enrollment meetings. Enrollment materials are available online for participants and employees to access on-demand, or will be distributed by paper copy in the event participants are unable to access online materials.

We commit to enrolling participants within fifteen (15) business days of receiving the completed enrollment packet from the participant, and to contacting participants and providing their enrollment packets within three (3) days of receipt of a referral. To provide a framework for our enrollment timelines as an FMS provider, in Idaho, we enroll 98% of

participants within 2 days (48 hours). Our average enrollment time is 27.36 hours, or just over one (1) day. For ADSD, we commit to enrolling participants with completed employer packets and other relevant information within the timeline specified by ADSD.

We recognize that it is in the interest of our role as the FMS provider, as well as in the best interest of the participants and ADSD, to have constant access to user-friendly documents so that participants and workers find it easier to gain information about the program requirements. In each of the programs that we operate, we can draw on the expertise of our operations and administrative staff to monitor our materials for compliance with various auditory and visual learning styles. Our informative materials are available online and are designed to individualize the learning process so that each trainee gets the most out of his/her experience in self-direction. We also have years of experience in testing enrollment and program materials for clear communication to participants of all backgrounds.

2.2.5 Will have policies and procedures for preparing, distributing, collecting, and processing information contained in the individual enrollment packet.

We will establish policies and procedures to prepare, distribute, collect and process information contained in the enrollment packet. Enrollment packets are scanned into our secure electronic files. Document data staff ensure all fields are complete and all necessary forms are collected and are complete.

Policies and procedures will document how our staff are available to assist with completion of enrollment forms and related materials, and to support participants both during the enrollment process and throughout the duration of service. Our policies and procedures clearly lay out how, during enrollment, participants can submit their completed packets to us. We work directly with the participant or their representative to resolve any outstanding issues and to obtain completed, accurate enrollment information as efficiently as possible.

Our standard for documentation accessibility is to maintain all program forms and notifications on our state-specific websites, available for access by participants and workers at any time. For an illustration of current participant and worker forms for Nevada's personal care services, please visit ConsumerDirectNV.com/resources/forms/.

2.2.6 Will have internal controls to monitor the preparation, distribution, collection, and processing of information contained in the individual enrollment packet.

Quality Improvement (QI) is responsible for enrollment packet internal controls and ongoing documentation. A dedicated team identifies and incorporates into the packets all applicable requirements from the Nevada Administrative Code, Nevada Statute, contracts, and this RFP that are applicable to the FMS service and ADSD's VD-HCBS and state-funded programs. The QI team also works with other Consumer Direct departments such as FEA, Claims, and Payroll to guarantee that respective files meet all company, state, and federal requirements.

Leveraging the process above, QI will review distribution and processing systems to monitor and ensure that all goals are met. We

will continue to monitor ADSD's VD-HCBS Waiver and self-directed program requirements to maintain employment packet compliance with the most up to date regulatory requirements.

2.2.7 Will have a system for obtaining an FEIN for each individual it represents and for maintaining copies of the IRS FEIN notification letter and the filed Form SS-4, request for FEIN.

We will obtain and submit IRS Form SS-4, Application for Employer Identification Number, on behalf of each participant. All documents relevant to participant proprietorship will be maintained in each participant's electronic files for reference.

2.2.8 Will have a system for retiring individuals' FEINs when they are no longer employers.

Upon notification of disenrollment Consumer Direct will end the authorization, and begin the process of terminating the agent relationship. This includes revocation of Form 2678, Employer/Payer Appointment of Agent and Form 8821, Tax Information Authorization. Copies of the notification of disenrollment, Form 2678, Form 8821 revocations, and the related IRS Notice of Agent Revocation (IRS LTR 4228C) are filed and stored in the individual's electronic file.

2.2.9 Will have a system for preparing and submitting a signed IRS FORM 2678: Appointment of Agent Form and request for Approval Letter to IRS for each individual it represents. Copies will be maintained in each individual's file.

Signed 2678 Appointment of Agent Form and request for Approval Letters to IRS forms are processed, scanned, filed and stored in the individual's electronic file.

2.2.10 Is required to have written authorization from the IRS to be the agent for each individual.

Consumer Direct will receive written agent authorization from the IRS to be the agent for each participant we represent through the receipt of an IRS LTR 1997C, Notice of Appointment, for each participant. We will maintain a copy of the IRS LTR 1997C, Notice of Appointment and related correspondence in the participant's secure electronic file.

2.2.11 Will complete and file the appropriate State forms to be recognized by the State unemployment and income tax agencies to be a fiscal agent for ADSD individuals.

A Nevada Employer Unemployment Compensation Account Identification Number for State Unemployment Purposes for each participant will be obtained via the Nevada Department of Labor and Industry. As with other documents, we will maintain these completed forms in the participant's electronic file.

2.2.12 Will have written policies and procedures for obtaining a FEIN, maintaining the FEIN notification letter and the filed form SS-4, retiring individual's FEIN, for submitting IRS FORM 2678, and Request to Be the Agent letter.

Consumer Direct has policies and procedures in place for receiving the FEINs and other pertinent account information for currently enrolled

participants. Consumer Direct will obtain IRS Form 2678, Employer/Payer Appointment of Agent, during the enrollment and will and use a Fiscal Vendor Agent FEIN for the sole purpose of filing IRS Form 2678, other federal employment tax forms, and making federal payments on individuals' behalf. Consumer Direct will then submit a 2678 to receive approval to act on behalf of those participants transferring to us. We will obtain IRS Form SS-4, Application for Employer Identification Number for all new participants. During the transition, we will work closely with the incumbent FMS to transfer all relevant information regarding participant FEINs and related tax information as efficiently as possible to provide participants and workers with a seamless transition.

Consumer Direct will submit IRS Form 2678 and SS-4 for each individual to obtain an FEIN and establish Consumer Direct as the individual's agent for filing payroll reports. A copy of Form 2678 and Form SS-4 are maintained in each participant's electronic document management file. When the IRS Notification of Fiscal/Employer Agency Approval and the IRS Letter CP 575, IRS EIN Verification Letter are received by Consumer Direct, both are scanned and maintained in the participant's electronic file.

Consumer Direct will receive written agent authorization from the IRS to be the agent for each participant/representative-employer we represent through the receipt of an IRS LTR 1997C, Notice of Appointment, for each participant/representative-employer. We will maintain a copy of the IRS LTR 1997C, Notice of Appointment and related correspondence in the participant's secure electronic file.

2.2.13 Will have internal controls to monitor the FEIN process, monitor IRS Form 2678, request for approval and revocation process in accordance with IRS requirements, to monitor that it has received approval to be agent for all individuals it represents, and maintains all relevant documents.

Consumer Direct's policies and procedures includes assurance of internal controls to monitor the FEIN and IRS processes. The steps we follow to ensure this include that if Consumer Direct has enrolled an individual as an employer, and then we no longer represent that individual as their F/EA for payroll services, we revoke IRS Form 2678 by filing Form 2678 with the IRS to revoke the Appointment of Agent. Upon completion of filing, Consumer Direct staff scan and maintain the form to the individual's electronic document management file with any other resulting documentation.

2.2.14 Will have a system in place to file a signed IRS Form 8821, Tax Information Authorization with the IRS for each individual it represents in order to communicate with the IRS on the individual's behalf regarding FUTA issues and to maintain copies of the Form in each individual's file, and a system in place to revoke the IRS Form 8821 for each individual when the agent no longer represents the individual and to maintain the relevant documentation in each individual's file.

Consumer Direct will file IRS Form 8821, Tax Information Authorization, to receive an employer previously assigned an FEIN if we are unable to

receive Form SS-4. Form 8821 is obtained in exceptional situations where a prior EIN is unobtainable by other authorized means. Form 8821 is scanned into the participant's electronic file. We will renew each participant/representative-employer's IRS Form 8821 on a periodic basis as per Form instructions. We will maintain copies of renewed IRS Forms 8821 in the participant/representative-employer's file.

Consumer Direct responds quickly and efficiently to notification of disenrollment. Consumer Direct has efficiently terminated 630 participants in the current calendar year using the same procedures required under ADSD's VD-HCBS Waiver and self-directed programs. Upon notification of disenrollment via a HIPAA ANSI 834 FILE, Consumer Direct will end the authorization, and begin the process of terminating the agent relationship. Relationship termination includes revocation of Form 2678, Employer/Payer Appointment of Agent and Form 8821, Tax Information Authorization. Copies of the notification of disenrollment, Form 2678, Form 8821 revocations, and the related IRS Notice of Agent Revocation (IRS LTR 4228C) are filed and stored in the participant's electronic file.

In addition to revocation of established IRS relationships, Consumer Direct will revoke all Powers of Attorney in place with the NV Department of Taxation to include Form NUCS 4556 for Power of Attorney. Additionally, based on procedures outlined by the NV Department of Business and Industry, Consumer Direct will revoke its third-party agent (TPA) designation. Copies of all revocations and official responses will be filed and stored in the participant's electronic file.

Consumer Direct revokes Form 8821 for all individuals who terminate services with us, and we maintain the form until revocation is necessary. Staff then mail the form to the IRS and when returned, staff scan confirmation of the revocation from the IRS into the participant's electronic file.

2.2.15 Will have written policies and procedures for submitting initial IRS Form 8821 to the IRS and for maintaining copies of the Form in each individual's file and policies and procedures for revoking the IRS Form 8821 when the agent no longer represents the individual and for maintaining the relevant documentation in each individual's file.

We have policies in place to revoke forms when a participant transfers to another FMS, leaves self-directed services, or passes away. Relationship termination includes revocation of Form 2678, Employer/Payer Appointment of Agent and Form 8821, Tax Information Authorization. Copies of the notification of disenrollment, Form 2678, Form 8821 revocations, and the related IRS Notice of Agent Revocation (IRS LTR 4228C) are filed and stored in the participant's electronic file.

2.2.16 Will have internal controls documented and in place to monitor the process for obtaining, renewing, and revoking IRS Form 8821 and maintaining the relevant documentation in each individual's file.

Consumer Direct maintains internal controls outlined in our policies and procedures manual. Steps to achieve successful processing of IRS Form 8821 include monitoring the need for this form.

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 EIN is unobtainable by other authorized means. Form 8821 is scanned into the individual's electronic file. We will renew each participant/representative-employer's IRS Form 8821 on a periodic basis as per Form instructions. We will maintain copies of renewed IRS Forms 8821 in the participant/representative-employer's file.

2.3 MANAGEMENT OF ADSD INDIVIDUAL BUDGET FUNDS

The Financial Management Service to provide the following:

2.3.1 A system to receive, document, file, and maintain each ADSD authorized individual's budget.

We will receive PCP authorizations for each participant and incorporate authorized services, units, hourly wages of workers, and other relevant service information into our Customer Relationship Management (CRM) system, our accounting systems, and our web portal. Limits for services and goods will be in accordance with PCP service authorizations. Copies of the PCP, to include the budget plan, will be available to the participant at any time upon request, since these documents are stored within the participant's electronic file.

2.3.2 A system in place to receive and disburse individuals' State budget funds and track budget funds received, disbursed and any remaining balances for each individual budget and in the aggregate.

Consumer Direct utilizes a custom software accounting and information system that will be employed to receive funds for participant HCBS Waiver accounts, to be distributed to vendors, providers, and workers for the provision of waiver services. Our procedures for maintenance and distribution of funds are compliant with Generally Accepted Accounting Principles (GAAP) and we have systems in place to monitor and implement federal or Commonwealth policy changes that impact how we track or manage participant funds.

2.3.3 A system to monitor expenditures and will alert individual and support broker/service coordinators of any variance in expenditures including over-expenditures. The FMS will also get regional authorization for any expenditure over the authorized budget amount.

Our CDCNportal.com allows for real-time viewing and monitoring of participant budgets, made available according to security and privacy specifications. Should we be awarded a contract, we will establish designated user contacts for our portal which enable viewing and monitoring of up-to-date utilization and expenditure information for participants, payroll information for workers, and vendor payment information. The portal is linked directly to our internal accounting and billing systems and is updated according to payroll for workers against the participant's budget. In addition to our online portal, the Consumer

Direct 'back office' suite sustains the business operations and controls, and manages every service delivery transaction from time entry through to claim payment. It also provides the platform for accurately paying workers on their specific pay cycle.

Consumer Direct will monitor budget utilization on a regular basis, alerting participants of any budget concerns by phone, email, and/or the web portal. Our personnel are available to support participants and ADSD staff with any questions or to assist with necessary adjustments. We also acknowledge that regional authorization will need to be obtained for any expenditure over the authorized budget amount.

2.3.4 Will process all non-labor related invoices, including payment to vendors as specified (according to the Authorized Budget) by the individuals and/or their representatives, if applicable.

Consumer Direct is accustomed to paying vendors for the provision of a variety of services for participants enrolled in participant-directed programs. In accordance with applicable waiver specifications, we will adjust our procedures for paying for goods and services specified by ADSD and the Waiver applications, to include assistive technology, supplies, transportation, respite, and other services authorized in the participant's PCP.

2.3.5 The FMS assumes all liability for overpayment of any individual budget, unless prior authorization is obtained from the ADSD.

Consumer Direct acknowledges that we assume all liability for overpayment of any individual budget unless prior authorization is obtained from the ADSD.

2.3.6 Have policies and procedures for receiving and disbursing individuals' State budget funds and tracking individuals' budget funds received, disbursed, and any remaining balances for each individual and in the aggregate.

Existing policies and procedures will be modified to ensure that we establish and maintain documentation for tracking budgeted funds, verifying accuracy of timesheets, ensuring payroll accuracy, and monitoring billing. See Appendix A: Sample Policy and Procedure Manual for example policies and procedures.

2.3.7 Have internal controls in place to monitor the receipt and disbursement of budget funds and any remaining balances for each individual.

The financial system processes time entry, whether input electronically or via paper timesheets, by applying a series of business rules to the transaction. All time entry and expense transactions are evaluated to ensure: participant 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; and, services are within existing limits or caps. Consumer Direct processes services based on unit rates, hourly rates, encounter rates, or per-diem rates. Our CDCNportal.com and financial safeguards prevent duplication of time entered and duplication of payroll for any single hour worked.

2.3.8 A system to verify that the service/support/product billed for is in the approved budget prior to making payment.

Consumer Direct safeguards Medicaid funds and has several systems in place to review for appropriate time submission. Whenever possible, we advocate for the submission of time electronically via our online portal at CDCNportal.com. The CDCN secure portal provides a user-friendly interface to an effective, efficient system in which we manage funds for both employees and participants. Hours worked are tracked against the participant's authorized budget. CDCNportal.com safeguards against hours worked that fall outside of any participant's approved budget by tracking hours entered in real time. Provider payroll is posted against the participant's remaining service or budget amounts, preventing entry for hours worked or services delivered that are not approved.

Consumer Direct has a system in place to receive, process, and pay all non-labor related invoices including payment to vendors as specified in the participant's PCP. Invoices submitted to the office are scanned and recorded in our document management system. 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.

2.4 PAYROLL PROCESS

Prior to employment, FMS as applicable and required, will assist individuals or families with securing Criminal History Background Checks (CHBC), employer-employee agreements provided by the ADSD, obtaining worker compensation insurance for the direct service and support employees, and obtaining license and vehicle safety checks for employees who provide transportation.

The Financial Management Service will provide the following:

2.4.1 A system to produce employment packets for individuals' employees which contain all the required forms, information, applications, and agreements and consent documents needed to enroll individuals as individuals' employees (e.g., employment application, IRS Form W-4, IRS Notice 797).

Prior to hire by a participant employer, potential workers must complete a comprehensive employment packet. Packets will be submitted for approval by ADSD and will be updated to accommodate any changes in HCBS program policy, labor policy, or state or federal regulations.

Our payroll team works diligently within each new program we operate to locate specific forms required for FMS 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 participants. As part of the transition, our payroll staff will research and incorporate all NV-specific forms into the participant enrollment and tax filing process. This includes, but is not limited to:

Employee Data Form
W-4 - Employee Withholding Allowance Certificate
I-9 - Employment Eligibility Form

Wage Memo – Pay Selection Agreement
Direct Deposit Authorization Form (and written exception request, if needed)
Employment Agreement
Safety Program Training Materials
Post Hire Health Questionnaire
Fraud Prevention Training Materials
Confidentiality Training Materials
Fingerprint Background Cards
Authorization to Release Information for Background Check
E-Timesheet Instructions
Paper Timesheets
Sample Timesheets with Instructions for Completion.
Payroll Calendar
Information about IRS Form W-5 (Earned Income Credit)
Employee Handbook
Status Change Form
IRS Notice 797 Form

2.4.2 A system to collect, process, and maintain the required human resources documentation from individuals and workers in order to process payroll for workers.

Required human resources documentation is collected in participant and worker enrollment packets. Participant enrollment packets are pre-populated with accurate participant information based on the authorized PCP or budget information we obtain from our partners in service delivery. Upon referral of a participant, Coordinators or Administrative staff will enter the participant's pertinent information into our CRM system and use this information to pre-fill the participant enrollment packet. The pre-filling of the forms helps to improve the accuracy of the forms and the efficiency of the form portion of the enrollment orientation.

Once the participant receives the pre-populated packets, our knowledgeable staff are available to participants to help them fill out paperwork correctly and completely.

Participant and worker enrollment packets will be discussed in detail during orientation, and participants/workers will receive ample information to guide them to online trainings and resources should they require such after the orientation has concluded. Ongoing throughout the enrollment process, our local staff and Customer Service Center are available to help participants and workers fill in their packets correctly. All documentation will be stored in the participant or worker's electronic file.

2.4.3 A system to obtain an IRS Form W-4 from each worker it processes payroll for and will maintain a copy of the form in the worker's file.

Each potential worker must complete a comprehensive employment packet that includes all relevant DHS, FBI, and Child Abuse Registry criminal background check forms and noticing, I-9 Employment Eligibility Form, the worker application, IRS Form W-4, NV New Hire Reporting Form, the worker Rate Sheet, Timesheets and timesheet

instructions, the Pay Selection Option form, the Notice of Availability of Direct Deposit information, and the Qualified Worker Employment Enrollment Checklist. Packets will be submitted for approval by ADSD and will be updated to accommodate any changes in HCBS program policy, labor policy, or state or federal regulations. All documentation will be stored in the participant or worker's electronic file.

2.4.4 A system to obtain an IRS Form W-5 from each eligible worker it processes advanced Earned Income Credit (EIC) for and will maintain a copy of the form in each worker's file.

Each potential worker must complete a comprehensive employment packet that includes all relevant income tax forms including the IRS Form W-5 for the advanced Earned Income Credit (EIC). All documentation will be stored in the participant or worker's electronic file.

2.4.5 A system to verify workers' citizenship and alien status by collecting and maintaining completed Bureau of Citizenship and Immigration Service (BCIS) Form I-9 for every worker it processes payroll for and will maintain a copy of the form in each worker's file.

We provide individual/employers with a copy of the Form I-9. The employment packet includes extensive but easy-to-follow instructions for completing the I-9. The worker is required to present original, unexpired documents to verify their identity and authorization to work in the U.S.

Copies of all forms included in the employment packet will be maintained in worker electronic files and updated in the event the worker requires a new form or any changes to their employment information for any reason.

2.4.6 A system to pay workers in compliance with Federal and State Department of Labor wage and hour rules.

Consumer Direct's Payroll team verifies that the worker's hourly wages are in compliance with federal and state wage and hour rules. At all times we follow wage and hour laws through use of our time entry and accounting systems, which enables us to enter business rules for each locality in which we have workers, to guarantee that wages and limits on hours are in line with wage law. Business rules prevent workers or participants from entering wages or time worked outside of labor and local program rules. Labor laws specific to each state and region where we work are incorporated into our employer and employment packets, and updated when regulations change.

As one example of approaches to making sure our wage and payroll laws are updated, we are a member of the American Payroll Association, which keeps payroll offices apprised of any regulator labor, tax, or wage changes that might affect our operations. We also refer to the Federal Department of Labor (DOL) and the Internal Revenue Service (IRS), in addition to, of course, NV Department of Business and Industry regulatory changes.

2.4.7 Will distribute, collect and process all workers' biweekly timesheets.

Time submitted through the portal or via paperwork is processed through our OCR software and will be verified against program specific business rules for accuracy and compliance with Medicaid and state regulations. When timesheet issues are identified, the Customer Service Center contacts the participant and workers to ensure the issues are resolved timely so the timesheet can be submitted for payment. Copies of timesheets are maintained in electronic filing system. Consumer Direct will work with ADSD to ensure that our process for timesheet audit and reviews meet the expectations of ADSD. NV Department of Business and Industry regulations will be incorporated into the entire time capture process for all workers and locally-based Consumer Direct employees. Copies of all payroll-related documents will be maintained in worker files.

We understand the fundamental importance of ensuring that workers are paid accurately and on time. We run off-cycle payroll whether we are at fault or the worker or participant is at fault for not receiving or completing a timesheet accurately or timely. If this occurs on the participant's or worker's end with any frequency, we work to retrain the participant and worker so the guidelines for correctly submitting an approved timesheet are clear.

Our Quality Improvement department is responsible for coordinating the production, approval, and dissemination of timesheets and the timesheet processes within worker employment packets and ongoing should workers require assistance. Instructions are included on the timesheet for ease of completion, and local Nevada staff, as well as our Customer Service Center, will be available should the worker require assistance in completing or submitting the timesheet. Identification of what's included are included in this proposal as part of Appendix A: Sample Policy and Procedure Manual.

2.4.8 Will process all judgments, garnishments, tax levies or any related holds on an employee's funds as may be required by local, state or federal laws.

Consumer Direct will withhold and pay all judgments, garnishments, tax levies, or other related holds on employee's pay required by Federal or State requirements. Amounts are withheld and processed every pay period through accounts payable. Copies of all related documents are filed and stored in the worker's electronic file.

2.4.9 A system to track and report on new hires per agreed upon reporting procedures with the ADSD.

Our Payroll department will report newly hired workers within twenty (20) days of hire, and copies of new hire reporting will be maintained in workers' files.

2.4.10 A system for withholding and filing IRS Forms 941 Federal Insurance Contributions Act (FICA – Medicare and Social Security taxes and federal income tax withholding) quarterly in the aggregate with its separate FEIN for all individuals it represents and will maintain a copy of each IRS Form 941 filed in the FMS' files.

Consumer Direct computes, withholds, files, and tracks Federal income tax withholding, Medicare and Social Security Taxes (FICA) for

participants and their employees. 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 participant. 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.

2.4.11 A system for paying FICA and Federal income tax withholding in the aggregate for all individuals it represents using the FMS' separate FEIN and for maintaining relevant documentation in the FMS' files.

We will deposit FIT, FICA, and FUTA withholdings on behalf of participants in the aggregate using our separate FEIN obtained by CDCN NV. We will maintain copies of all filings in participant electronic files.

2.4.12 A system for withholding and filing an IRS Form 940 for each individual it represents using the individual's FEIN annually in an accurate and timely manner and maintaining the relevant documentation in the FMS' files.

Consumer Direct computes, withholds if required, and files Form 940, Employer's Annual Federal Unemployment (FUTA) Report and the IRS form 940 Schedule R annually, in the aggregate, using the assigned FEIN as the F/EA for the participant. FUTA is deposited quarterly (or can be weekly if withheld) using the F/EA 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 payroll files.

2.4.13 A system for paying FUTA for each individual per IRS depositing rules and for maintaining the relevant documentation in the FMS' files.

FUTA is deposited quarterly unless the participant/worker relationship is exempt. Consumer Direct will include an Employee Relationship Disclosure Form in the Employment Packets with a signature acknowledging that the relationship is exempt from paying into FICA and/or FUTA and SUTA as applicable.The Form will then be recorded in the payroll system for the participant/employee and will be maintained in the worker's electronic file.

2.4.14 A system to manage federal Advanced EIC for each eligible worker in an accurate and timely manner and to maintain the relevant documentation in the FMS' files.

Advance EIC payments are made to employees who give completed and signed Form W-5.

2.4.15 A system for obtaining the appropriate State employer registration numbers for income and unemployment tax filing and payment purposes for all individuals' it represents and maintaining the relevant documentation in the FMS's files.

We will obtain a an Employer Account Number and Modified Business Tax (MBT) Account Number for employee authorization as a Zenefits Payroll third-party administrator (TPA) through the Department of

Employment, Training, and Rehabilitation's Employer Self Service (ESS) portal. Zenefits Payroll allows deposit and filing of NV unemployment taxes. Copies of documentation related to Zenefits will be maintained in participant files.

2.4.16 A system for withholding and filing State income tax (SIT) for all workers per State requirements and for maintaining the relevant documentation in the FMS' files, if applicable.

We compute and withhold state income tax for every state in which we work. As an established personal care provider in NV, Consumer Direct is already familiar with withholding SIT in appropriate amounts from worker payroll.

2.4.17 A system for paying SIT withholding for each worker per State payment schedule and for maintaining the relevant documentation in the FMS' files, if applicable.

SIT will be deposited via Zenefits and tax rates will be determined for both residents and nonresidents of Nevada. Deposits will be at a rate determined by the Nevada Department of Taxation. Quarterly reconciliations of SIT withholding will be conducted for each participant, to include on behalf of participants with zero wages, and annual reconciliations with accompanying individual wage statements for each participant will be filed.

2.4.18 A system for withholding and filing State unemployment insurance tax individually for each individual it represents using the individual's FEIN and /or his or her State employer registration number per State requirements and for maintaining the relevant documentation in the FMS' files.

We will deposit FIT, FICA, and FUTA withholdings on behalf of participants in the aggregate using our separate FEIN obtained by CDCN NV. We will maintain copies of all filings in participant electronic files.

We will obtain an Employer Account Number and Modified Business Tax (MBT) Account Number for employee authorization as a Zenefits Payroll third-party administrator (TPA) through the Department of Employment, Training, and Rehabilitation's Employer Self Service (ESS) portal. Zenefits Payroll allows deposit and filing of NV unemployment taxes. Copies of documentation related to Zenefits will be maintained in participant files.

2.4.19 A system for paying State unemployment taxes for each individual-employer per State payment schedule and for maintaining the relevant documentation in the FMS' files.

We receive authorization from the NV Department of Business and Industry to file state unemployment taxes electronically through the Nevada Unemployment Compensation Management System (UCMS). We determine at the enrollment and hire stage whether workers are exempt from any SUTA requirements, to include domestic worker and live-in exemptions, and maintain evidence of such exemption in the worker and participant's files. We compute, withhold and file SUTA on behalf of participants using the UCMS system and maintain wage

reports per calendar year as required by this proposal for each participant. All SUTA insurance deposits are documented and maintained on file and wage reports will be kept per participant on file for each calendar year, broken out by worker.

2.4.20 A system in place to pay individuals' workers within the time period required by the State Department of Labor (DOL).

Consumer Direct follows all IRS and DOL regulations as they apply to self-directed care. Our employment packets include a relationship disclosure form to capture any potential live-in or domestic exemptions. Possible exemptions include IRS 2014-7, DOL Live-In and Companionship exemptions, as well as Social Security relationship exemptions. Forms for these regulations are included in all packets provided to the participant for their respective workers.

2.4.21 A system for processing workers' direct deposits.

Direct deposit is offered to all workers for whom we process payroll via our Pay Selection Form. We encourage some form of direct deposit so that workers receive their paycheck without delay and on time. Workers can also opt to receive their pay on a pay card which, like direct deposit, allows for immediate access to pay on the date of payroll. This can be useful for a worker who doesn't have a checking account, and doesn't want to wait for a paper check to arrive through the United States Postal Service. However, a paper check is also offered for those who prefer it. Copies of direct deposit elections are kept in worker electronic files.

2.4.22 Will have written policies and procedures to address all payroll systems identified above and any other payroll system the agent uses.

The information about our payroll systems is incorporated into our policies and procedures for maintaining participant files and documents related to being an employer, tax information, PCP and budget information, contact information, and any Federal and State Department of Taxation forms. Our filing system includes barcoded forms for accurate electronic filing, which allows us to ease the filing process. This same document management and filing system will be employed for participant files under ADSD's VD-HCBS Waiver and self-directed programs.

2.4.23 Will have internal controls designed to ensure that all payroll procedures are operated and managed as described in the policies and procedures.

Consumer Direct has specific procedures for the handling of documents, including internal controls for segregation of duties by experts in each of the designated service areas where these forms will be used. Consumer Direct monitors participant information to ensure it is accurately filed and properly maintained. All appropriate information will be entered and filed by designated staff in the quality improvement, claims, and payroll departments where procedures are in place to ensure that all forms are processed to completion.

Forms are barcoded for accurate filing in participant's files and are stored on multiple secure servers. Consumer Direct maintains a

sophisticated system guided by elaborate procedures and monitoring to ensure that participant information is up-to-date, accurate, and consistently maintained. Appropriate documents will be filed and maintained in our electronic systems. All information related to FMS services is subject to the same security and monitoring procedures. There are numerous internal controls to ensure compliance with procedures and accurate filing of information in each of the areas of expertise. We also maintain an electronic monitoring system to ensure that all information related to vendor or small unlicensed provider services are accurately filed and properly maintained.

All files will be maintained in an accurate, secure, and confidential manner and for the required period of time as mandated by applicable Federal and ADSD rules and regulations. Additionally, procedures are in place to prevent HIPAA security breaches. In the event of an inadvertent security breach, processes are in place to report, document, and recover from the breach. Information is stored on multiple secured servers in different geographical locations to protect the information in the event of a disaster. Information is secure yet easily accessible by authorized personnel in the event of an inquiry or audit.

2.5 END OF YEAR FEDERAL TAX PROCESS.

The Financial Management Service will provide the following:

2.5.1 A system for refunding over collected FICA to applicable individual-employers and support service workers and for maintaining the relevant documentation in the FMS' records.

Consumer Direct computes, withholds, files, and tracks Federal income tax withholding, Medicare and Social Security Taxes (FICA) for participants and their employees. Consumer Direct will run a report at year end to determine all workers who did not reach the established FICA threshold. All workers under the threshold will be refunded the FICA taxes paid in at year end. The FICA taxes refunded will not be reflected on the annual W-2. Form 941X will be filed the following fiscal year to recoup the FICA taxes refunded. FICA deposit documentation on behalf of all participants is maintained in our electronic files.

2.5.2 A system for preparing and distributing IRS Forms W-2 for individuals' workers per IRS instructions for agents and electronic/magnetic filing when processing 250 or more IRS Forms W-2 and maintaining the relevant documentation in the FMS' files.

Consumer Direct prepares and issue IRS Form W-2 annually on behalf of individual participants. W-2 statements will, in accordance with IRS instructions, include relevant payroll and federal and state taxes for the prior year. Our policies and procedures for all of our programs in which we operate as a FMS detail the timelines regarding when workers can expect to receive their W-2 forms. Income reported on W-2 forms reflects the worker's gross payroll 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 workers and administrative staff receive their W-2 information by the required IRS deadline.

New hire procedures for workers includes confirmation of Social Security numbers and vendors' FEINs as appropriate through SSA's Business Services Online system, which also enables us to check that the SSN matches the name and date of birth filled in by the worker. All new hire reporting documentation will be maintained in the worker's electronic files. SSNs are verified upon initial hire and quarterly thereafter, along with basic demographic information such as date of birth and full legal name.

2.5.3 A system to prepare and distribute IRS Forms W-3 in the aggregate for all individuals the agent represents per IRS instructions and maintaining the relevant documentation in the FMS' files.

A W-3 transmittal will be filed along with each participant's W-2s, in the aggregate, on an annual basis in accordance with IRS and Social Security Administration regulations.

2.5.4 Written policies and procedures for preparing and distributing and meeting all federal tax reporting requirements.

Consumer Direct will include an Employee Relationship Disclosure Form in the employment packets with a signature acknowledging that the relationship is exempt from paying into FICA and/or FUTA and SUTA as applicable. The Form will then be recorded in the payroll system for the participant/employee and will be maintained in the worker's electronic file.

Consumer Direct follows all IRS and DOL regulations as they apply to self-directed care. Our employment packets include a relationship disclosure form to capture any potential live-in or domestic exemptions. Possible exemptions include IRS 2014-7, DOL Live-In and Companionship exemptions, as well as Social Security relationship exemptions. Forms for these regulations are included in all packets provided to the participant for their respective DCWs. Consumer Direct has a form available for workers to sign "under penalties of perjury" as required by the IRS to indicate that they are exempt from income taxes per IRS Notice 2014-7. We discontinue withholding and follow IRS procedure for reporting zero wages in Box 1 on W-2 forms. Procedures are also in place to resume withholding if the worker's exempt status changes. The Form is maintained in the participant's electronic file. We will incorporate into our policies and procedures for worker employment enrollments the requirement to confirm any exemptions under the Nevada Unemployment Compensation Law.

2.5.5 Internal controls to monitor the federal end of year tax process.

2.6 REPORTS

2.6.1 The awarded vendor must produce a variety of reports which include:

2.6.1.1 Monthly expenditure reports for self-directed budgets;

Consumer Direct assigns a unique identifier for each participant and employee in the program and provides electronic budget reports to families, case managers, and ADSD through the web portal. These are available, as needed, and can be run at any time. Consumer Direct provides the ability to download spending reports to common file formats such as Excel, Word, CSV, TIFF Image, and PDF. Secure logins are created for any individual (family, case worker, employee, ADSD) requiring access. Appropriate permissions are assigned based on the role of the individual.

Consumer Direct provides Spending Detail and Spending Summary reports. The Company can customize these reports, as required, with the ability to set budget targets, track expenses, roll-over surpluses and debits, and project the rate of spending for the balance of the fiscal year.

Consumer Direct provides the ability to track budget spending based on the budget amount and budget period. Consumer Direct provides a Spending Summary Report that displays a graphical representation of the time elapsed in a budget period and amount of spending by budget category. The case manager, family or ADSD can log in and run a report for current budget data.

2.6.1.2 Quarterly expenditure reports for all individual budgets;

Consumer Direct provides expenditure reports for each individual and can do so monthly and quarterly. We offer the ability to download reports to common file formats such as Excel, Word, CSV, TIFF Image, and PDF. Secure logins are created for any individual (family, case worker, employee, ADSD) requiring access. Quarterly reports can be modified to meet the precise needs of the ADSD. Appropriate permissions are assigned based on the role of the individual.

2.6.1.3 Annual reconciliation reports for each individual budget;

Consumer Direct provides Spending Detail and Spending Summary reports. The Company can customize these reports, as required, with the ability to set budget targets, track expenses, roll-over surpluses and debits, and project the rate of spending for the balance of the fiscal year. However, Consumer Direct would like the opportunity to discuss ADSD's need for breakdown of monthly budget targets and expenses as well as the rules for rolling-over monthly surpluses and debits before committing to a report design.

Consumer Direct provides the ability to track budget spending based on the budget amount and budget period. Consumer Direct provides a Spending Summary Report that displays a graphical representation of the time elapsed in a budget period and amount of spending by budget category. The case manager, family or ADSD can log in and run a report for the current pay period.

Participant Number	Program Coordinator	Current Suta Rate
Phone	External CM	

DC Department of Health Care F - DC Dpt of Health Care Fin CDMS - FEA

	Start	End	%Time Elapsed	% Budget Used	% Difference
Auth Period	8/4/2016	6/30/2017	58.48%	68.96%	10.48%

%Elapsed %Remaining 41.52 0 20 40 60 80 100

Service	Type	Budget	Used YTD	In Process	Remaining	
T1019 U1 X1 Sick Time	Dollars	$1,112.60	$18.07	$0.00	$1,094.53	98.38
T1019 X1 Personal Care Assistance	Dollars	$104,927.01	$63,221.12	$9,888.65	$31,817.24	30.32
Totals	Dollars	$106,039.61	$63,239.19	$9,888.65	$32,911.77	31.04

2.6.1.4 Aggregate reconciliation report for the respective regional center; and

Consumer Direct meets diverse agency reporting needs for all of its agency partners. Available customized reports include regionally specific aggregate reconciliation reports. Below is an example of Consumer Direct Care Network Idaho's agency specific aggregate reconciliation report.

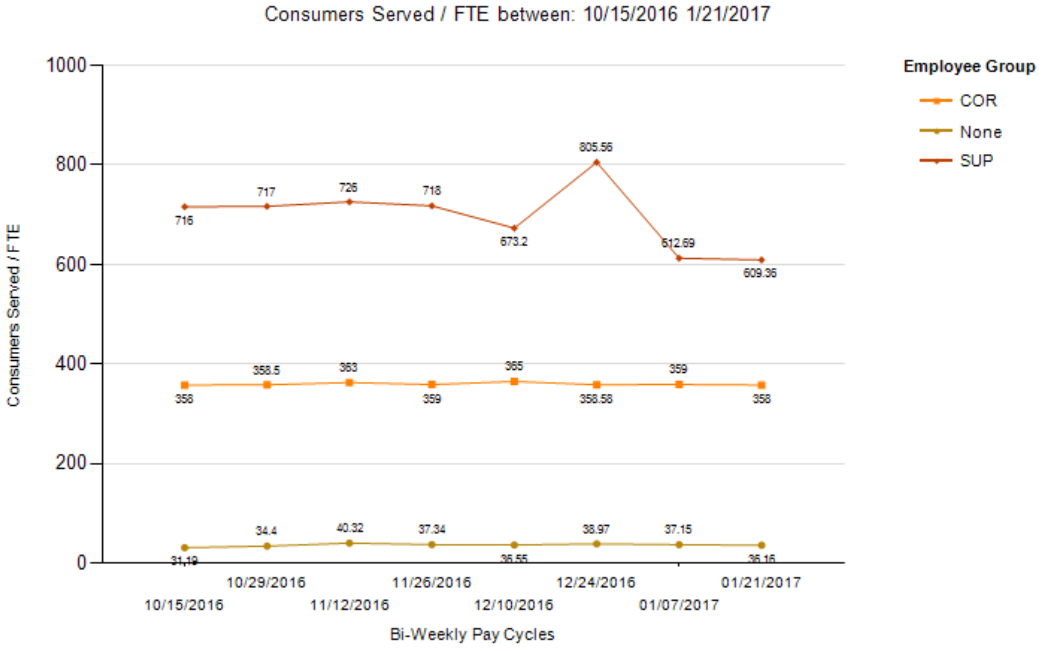
FEA Data					Reconciliation Data		Discrepancie
Participant	*Initial Submission*	*Late-Time Adjustments*	*Total Payments*	*FEA Molina Report*	*COGNOS $$$*	*COGNOS and Molina Difference*	*Medicaid Calc Difference*
[redacted]	$11,138.00	$2,273.50	$ 13,411.50	$13,411.51	$ -	$ (13,411.51)	$ (13,411.50)
[redacted]	$1,791.19	$3,126.72	$ 4,917.91	$4,917.91	$ -	$ (4,917.91)	$ (4,917.91)
[redacted]	$3,665.11	$450.48	$ 4,115.59	$4,115.62	$ -	$ (4,115.62)	$ (4,115.59)
[redacted]	$4,019.14	$449.02	$ 4,468.16	$4,468.17	$ -	$ (4,468.17)	$ (4,468.16)
[redacted]	$7,784.33	$1,051.39	$ 8,835.72	$8,835.72	$ -	$ (8,835.72)	$ (8,835.72)
[redacted]	$2,124.73	$177.74	$ 2,302.47	$2,302.47	$ -	$ (2,302.47)	$ (2,302.47)
[redacted]	$2,024.97	$0.00	$ 2,024.97	$2,024.97	$ -	$ (2,024.97)	$ (2,024.97)
[redacted]	$11,060.90	$0.00	$ 11,060.90	$11,060.90	$ -	$ (11,060.90)	$ (11,060.90)
[redacted]	$15,528.73	$2,714.02	$ 18,242.75	$18,242.75	$ -	$ (18,242.75)	$ (18,242.75)
[redacted]	$10,986.38	$1,500.03	$ 12,486.41	$12,486.43	$ -	$ (12,486.43)	$ (12,486.41)
[redacted]	$6,739.30	$624.20	$ 7,363.50	$7,363.50	$ -	$ (7,363.50)	$ (7,363.50)
[redacted]	$5,204.91	$20.56	$ 5,225.47	$5,225.47	$ -	$ (5,225.47)	$ (5,225.47)
[redacted]	$12,790.92	$1,347.96	$ 14,138.88	$14,138.88	$ -	$ (14,138.88)	$ (14,138.88)
[redacted]	$2,317.76	$0.00	$ 2,317.76	$2,317.76	$ -	$ (2,317.76)	$ (2,317.76)
[redacted]	$3,620.71	$553.95	$ 4,174.66	$4,174.64	$ -	$ (4,174.64)	$ (4,174.66)
[redacted]	$3,557.78	$491.77	$ 4,049.55	$4,049.55	$ -	$ (4,049.55)	$ (4,049.55)

2.6.1.5 Demographic reports such as number of employees hired for a given period. These reports will be in an agreed upon format and sent to designated person(s) at each agency.

Our Admits and Discharges report addresses ADSD hiring demographic reporting need by tracking program growth and attrition by reviewing the report's extensive details on new admits and discharges for given time period.

Carrier	Provider	Program	Location	Territory				
X	X	X			Admits	Admit Units	Discharges	Discharg Units
			WDC	GEN	1.00		0.00	0.00
		Total			**1.00**		**0.00**	**0.00**
DHCF	DCDHCF	FEA			Admits	Admit Units	Discharges	Discharg Units
			WDC	GEN	12.00	0.00	0.00	0.00
		Total			**12.00**	**0.00**	**0.00**	**0.00**
DHCF	DHCFCDMS	FEA			Admits	Admit Units	Discharges	Discharg Units
			WDC	GEN	11.00	0.00	0.00	0.00
		Total			**11.00**	**0.00**	**0.00**	**0.00**
		Grand Total			**24.00**	**0.00**	**0.00**	**0.00**
Coordinator	**Carrier ID**	**Program**	**Location**	**Region**	**Admit Units**	**Dischg Units**	**Admits**	**Dischg**
X	DHCF	FEA	WDC	GEN	0	0	7	0
X	DHCF	FEA	WDC	GEN	0	0	4	0
X	DHCF	FEA	WDC	GEN	0	0	6	0
X			WDC	GEN		0	1	0
X	DHCF	FEA	WDC	GEN	0	0	6	0
Details begin on the next page				**Grand Totals**	**0**	**0**	**24**	**0**

The customized reports we offer include employees hired for a given period. We can also chart the staffing ratio of employers to ensure that staffing is adequately to server employers' needs.



2.6.1.6 Expenditure reports

A. Name and ADSD#;

B. Amount of individual's monthly support funds for the current month by budgeted line item;

C. All expenditures for the month by line item, including vendor name;

D. Line item summary of budgeted amount, expenditures and balance;

E. Budget summary for all line items with budgeted amount, expenditures, and balance; and

F. Total amount of budget remaining in the individual's account (managed by awarded vendor(s)) for the current period and year to date.

Our Spending Summary report (See 2.6.1.1 above.) and Vendor Payment reports address 2.6.1.6 A.-F. requirements. Payment information is correlated to vendor so that ADSD will be able to thoroughly track employer and vendor spending. All reports can be modified to meet the precise needs of the ADSD.

Vendor Payment Report All Vendors

ACCEBEHA	x		1276 River St, Ste 100 , Boise, ID 83702			20-1773062	1/25/2017	4	$1,864.31
Check Nbr	**Check Date**	**Chk Amt**	**Doc Type**	**Clear Amt**					
040563	1/25/2017	$204.00	VO	$0.00					
Acct	**Batch Nbr**	**Ref Nbr**	**Inv Date**	**Tran Type**	**Tran Amt**	**Descr**	**Per Post**		
52460	005860	042746	1/16/2017	VO	$204.00	ACCEBEHA - 1070662 - 3289074	201701		
040488	1/18/2017	$621.81	VO	$0.00					
Acct	**Batch Nbr**	**Ref Nbr**	**Inv Date**	**Tran Type**	**Tran Amt**	**Descr**	**Per Post**		
52460	005845	042650	1/10/2017	VO	$497.25	ACCEBEHA - 1070662 - 3285786	201701		
52460	005845	042651	1/6/2017	VO	$124.56	ACCEBEHA - 1112586 - 3285849	201701		
040415	1/11/2017	$525.00	VO	$0.00					
Acct	**Batch Nbr**	**Ref Nbr**	**Inv Date**	**Tran Type**	**Tran Amt**	**Descr**	**Per Post**		
52460	005838	042507	1/2/2017	VO	$518.50	ACCEBEHA - 1070662 - 3258175	201701		
52460	005838	042508	1/2/2017	VO	$6.50	ACCEBEHA - 1070662 - 3258176	201701		
040357	1/4/2017	$513.50	VO	$0.00					
Acct	**Batch Nbr**	**Ref Nbr**	**Inv Date**	**Tran Type**	**Tran Amt**	**Descr**	**Per Post**		
52460	005824	042403	12/26/2016	VO	$493.00	ACCEBEHA - 1070662 - 3255113	201701		
52460	005824	042404	12/26/2016	VO	$20.50	ACCEBEHA - 1070662 - 3255114	201701		

2.6.1.7 Annual Expenditure reports

A. Line item summary of budgeted amount, expenditures and balance;

B. Budget summary for all line items with budgeted amount, expenditures, and balance; and

C. Total amount of budget remaining in the individual's account (managed by awarded vendor(s)) for the current period and year to date.

Our Spending Detail Report addresses A.-C. above by analyzing what payers and/or vendors are using by tracking how much the employer spends per service date with relevant tax information. All reports can be modified to meet the precise needs of the ADSD.

X
Spending Detail: 1/1/2017 12:00:00 AM - 1/31/2017 12:00:00 AM

Employee	Service Code	Service Date	Pay Period	Pay Date	Pay Units	Pay Rate	Pay Total	FICA 6.2%	FUTA 0.6%	MED 1.45%	SUTA 2.7%	WC 1.81%	Payroll Costs	ADMN Fee	Total Spent	Estimate
x	T1019 X1	1/1/2017	12/25/2016-1/7/2017	1/20/2017	16	$13.85	$292.83	$18.16	$1.24	$4.24	$7.90	$5.30	$36.84	$0.00	$330.25	
x	T1019 X1	1/2/2017	12/25/2016-1/7/2017	1/20/2017	16	$13.85	$292.83	$18.16	$1.24	$4.24	$7.90	$5.30	$36.84	$0.00	$330.25	
x	T1019 X1	1/3/2017	12/25/2016-1/7/2017	1/20/2017	16	$13.85	$292.83	$18.16	$1.24	$4.24	$7.90	$5.30	$36.84	$0.00	$330.25	
x	T1019 X1	1/4/2017	12/25/2016-1/7/2017	1/20/2017	16	$13.85	$292.83	$18.16	$1.24	$4.24	$7.90	$5.30	$36.84	$0.00	$330.25	
x	T1019 X1	1/5/2017	12/25/2016-1/7/2017	1/20/2017	16	$13.85	$292.83	$18.16	$1.24	$4.24	$7.90	$5.30	$36.84	$0.00	$330.25	

2.6.1.8 Reconciliation Reports

Report of all consumers for each region by funding account with authorized budget amount, all expenditures for the budget period, and remaining balances.

Our Spending Detail report (See 2.6.1.7 above.) addresses authorized budget amount, all expenditures for the budget period, and remaining balances. All reports can be modified to meet the precise needs of the ADSD.

2.6.1.9 Demographic Reports

A. Number of people who self-direct their services by region;

B. Number of employees hired directly by individuals and families;

C. Workers compensation costs and claims; and

Workmans Comp Rates

-

Emp ID	Emp Name	Pay Grp ID	Earn Ded ID	Exmpt	Fxd Pct Rate
[redacted]	[redacted]	FIELD	WC8742	0	0
[redacted]	[redacted]	FIELD	WC8810	0	0
[redacted]	[redacted]	FIELD	WC8835	0	3.45
[redacted]	[redacted]	FIELD	WC8835	0	3.45

D. Other reports required by ADSD.

2.7 INFORMATION TECHNOLOGY

2.7.1 The transfer of information between the vendor and the ADSD will be in a format determined by the ADSD. The awarded vendor must have, at a minimum, an IBM compatible PC that will support the software needed to produce the reports prescribed by the Department with a secure internet connection.

Consumer Direct meets diverse agency reporting needs for all of its agency partners. Our reports are made available online to participants and state agency partners 24 hours a day, 7 days a week online through

CDCNPortal.com. Reports are also deliverable in paper and electronic formats and are transmittable by secure FTP, CDCNportal.com, email, electronic portable media, and standard mail. Reports are customizable according to ADSD's specifications, made available in real-time or as archived data dependent on ADSD's preferences.

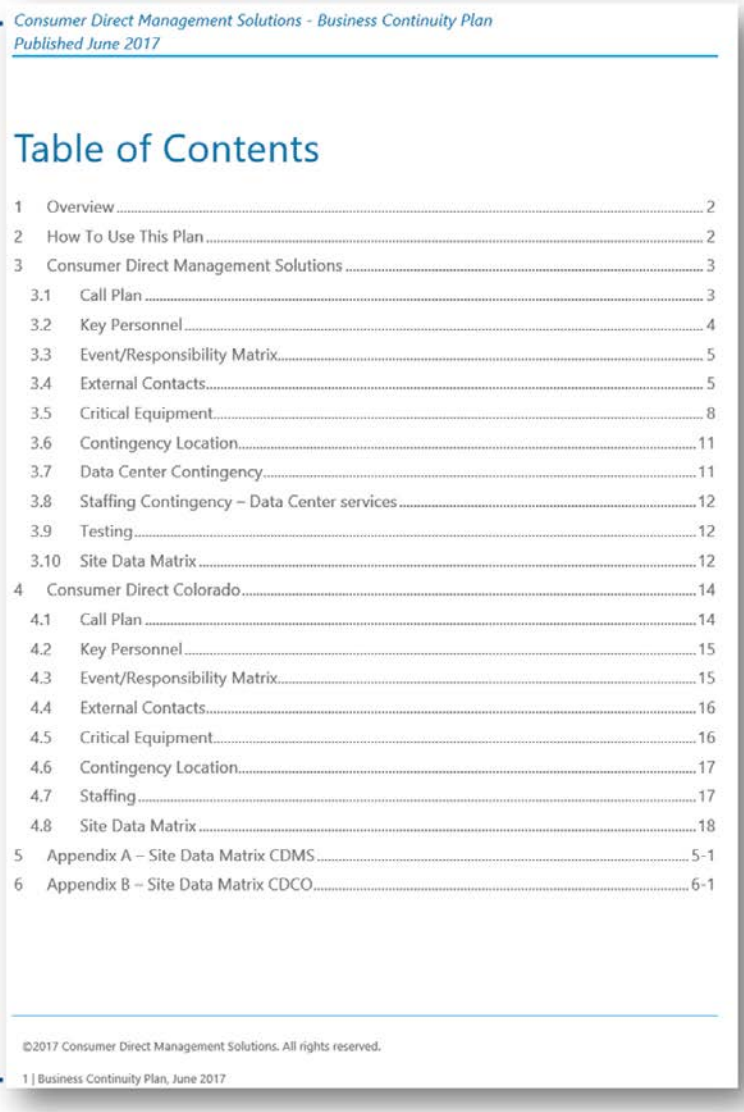
2.7.2 The awarded vendor is required to have a Disaster Recovery Plan for restoring software and master files and hardware backup if management information systems are disabled and for continuation of client payroll and invoice payment services.

Consumer Direct creates and maintains a comprehensive disaster recovery plan (DR Plan) for all electronic records and files to prevent loss of information and interruptions in the use of information processing systems. DR Plans are prepared for all operating entities in the Consumer Direct Care Network, the headquarters facility, and all operating office locations. The separate plan documents complement each other, share the same format, and in total form an all-inclusive approach for effectively handling a variety of disasters and ensuring continuity of service delivery.

DR Plans are prepared compliant with agency requirements and in the format depicted above. In the above Figure 1, our Colorado DR Plan table of contents is shown. Every plan addresses three levels of disaster situations: interruptions of 24-hours or less, interruptions of three-days or less, and interruptions of more than three-days. Actions to restore services are different in each situation, and those distinctions are expressed in the DR Plan. Operations staff are trained on methods for handling disaster situations on a regular basis.

Our documented and regularly-tested Business Continuity Plan ensures continuity of operations and recovery of hardcopy and electronic records. Business Continuity Plans are established separately for the corporate headquarters and each of the operating offices across all Consumer Direct companies. The plans address the specific recovery protocols and methods, by location, and by business function, and also the necessary procedures based on the severity of an incident (brief outage, multi-day outage, extended outage). Consumer Direct maintains a resilient information processing capability by operating redundant data centers, servicing internet traffic across multiple carriers, and by minimizing the amount of data stored on non-redundant platforms. The methods of delivering 'high availability' follow industry standards and best practices.

Table of Contents from the Consumer Direct Colorado Business Continuity Plan



Consumer Direct Management Solutions - Business Continuity Plan
Published June 2017

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2.8 CUSTOMER SERVICE SYSTEM

The awarded vendor must comply with the following:

2.8.1 FMS will have a customer service mechanism to respond to calls from individuals and their representatives, vendors and workers regarding issues such as withholdings and the net payments, lost or late checks, reports and other documentation received from the awarded vendor, or other questions regarding their services or payment of labor and non-labor related expenses.

We employ various levels of email, fax, network, and phone capabilities across all of our companies for our participants and their workers to be sure to get ahold of us when they need assistance. This will be no different for our operations in Nevada, where we can confirm the same strategies for continuity of customer service will be utilized to provide seamless service in the event of a network error or other type of event impacting the health, welfare, or capacity of our employees at any level.

2.8.2 Establish a statewide toll free number for individuals, their representatives and their workers to contact the awarded vendor or make other reasonable accommodations for clients out of the awarded vendors' local calling area. A representative of the awarded vendor should be available between the hours of 8:00 am and 4:30 pm PST Monday through Friday. When the representative is unavailable, the awarded vendor should maintain a voice messaging capacity.

Our Consumer Direct Nevada staff are available to answer calls 8:00 am – 5 pm PST Monday through Friday, thereby exceeding the availability expectation. Consumer Direct Nevada is supported by our Customer Service Center during business hours to provide even greater, more rapid access to participants and workers to request guidance or resolve issues.

2.8.3 Calls should be returned within one (1) working day from the time the message is recorded or letter of inquiry is received.

Our companywide policy is to return phone calls within one (1) business day. Our toll free number enables callers to leave a message 24/7, to be returned within one (1) business day.

2.8.4 Must operate a fax machine twenty-four (24) hours each day and have a secure internet/e-mail communication.

Consumer Direct will provide ADSD, participants, workers, and vendors with the option of reaching us through a toll free phone, toll free fax number or by email. We maintain a dedicated 24/7 high speed fax line.

Consumer Direct staff will each be assigned an email address ending in CDCN web portal, to be made available to all relevant parties for use for communications relevant to the ADSD programs. Consumer Direct also makes a general email address available for communication that is monitored frequently throughout each business day. Our ZixCorp Email Encryption platform encrypts any email voluntarily and all emails containing electronic protected health information (ePHI) automatically.

2.8.5 Must be able to communicate effectively with individuals who have a variety of disabilities.

Consumer Direct provides language assistance at no cost when requested, and may include both interpretation and translation and American (ASL) and International (IS) sign languages. Upon award of contract, Consumer Direct will establish a TTY (or TDD) system for communication with participants or representatives who are hearing or speech impaired. Consumer Direct employs bilingual staff and we intend use a locally-based Small Diverse Business for translation and interpretation services and a telephone interpretation service. Our Customer Service Center employs both English and Spanish speakers. For the occasions when a participant or provider needs interpretation to a language other than English or Spanish, including American Sign Language, we provide interpretation services through TeleInterpreters. Additionally, our website can be translated into hundreds of languages using the Google Translate feature. We provide written materials in

large print and Braille upon request in a timely manner in order to expedite participant enrollment.

2.8.6 Must demonstrate the ability to develop orientation and skill training programs for participants and/or their representative(s).

Consumer Direct has provided training to participants and/or their representative(s), and case managers concerning enrollment and ongoing support to minimize family confusion and processing errors. The initial enrollment training for a participant has been conducted by case managers. With the addition of the web portal tools, Consumer Direct feels there is a need to train case managers and participants in order to ensure their comfort level in using the tools.

Participants and/or their representative(s) will receive intensive training on the use of the web portal tools, prior to the start of the program. Participants will be scheduled for training sessions to orient them to the web portal shortly after the contract has been awarded. Participants will be scheduled for training after receipt of a completed Enrollment and Employment/New Hire packet. Consumer Direct recommends the participant and their employees be trained together at a reasonably accessible location of their choosing.

Everyone who participates in the face-to-face training will receive a user guide to remind them of the steps to using the web portal. Technical support from Consumer Direct can be accessed via the Company's toll-free phone numbers or email after the face-to-face training has been completed.

In addition to the training of new participants and their employees, Consumer Direct will need to train participants and employees already in the program on how to use these new tools. The Company recommends scheduling group trainings for the families and their employees to attend in the Elko, Las Vegas, and Reno areas. Ongoing training is available on a regular basis through newsletters, self-study materials and web-based presentations.

Consumer Direct staff will issue Usernames when the enrollment materials have been completed and submitted to the office for processing. Once the family and employees have participated in the face-to-face Web portal training, they can register online and create their passwords.

2.8.7 Any updates on tax and labor laws or other written reports or materials provided to individuals must be available in alternative format if requested (e.g., large print, use of telecommunication devices for the hearing and speech impaired). The awarded vendor must have, at a minimum the capacity to access translation services and interpreter services when necessary.

Consumer Direct provides language assistance at no cost when requested, and may include both interpretation and translation and American (ASL) and International (IS) sign languages. Upon award of contract, Consumer Direct will establish a TTY (or TDD) system for communication with participants or representatives who are hearing or speech impaired. Consumer Direct employs bilingual staff and we intend use a locally-based Small Diverse Business for translation and

interpretation services and a telephone interpretation service. Our Customer Service Center employs both English and Spanish speakers. For the occasions when a participant or provider needs interpretation to a language other than English or Spanish, including American Sign Language, we provide interpretation services through TeleInterpreters. Additionally, our website can be translated into hundreds of languages using the Google Translate feature. We provide written materials in large print and Braille upon request in a timely manner in order to expedite participant enrollment.

2.8.8 Be culturally sensitive in all business practices in order to communicate effectively with a diverse population of individuals, and its policies and procedures must reflect the philosophy of self-direction.

Consumer Direct takes a localized, culturally sensitive, person-centered approach to providing FMS and information and assistance training. We employ a culturally diverse group of people who receive training in Person Centered philosophy. Our commitment to Person Centered services is evident. Our Chief Operating Officer is proficient in all aspects of Person Centered Planning, training, and techniques, and has been training others in Person Centered Planning since 1995. For each new program we implement, we develop policies and procedures to emphasize the application of the philosophy of participant direction and being culturally sensitive in all business practices in order to communicate effectively with a diverse population of participants of all ages and with a variety of needs, disabilities and chronic conditions. Program staff in each state are hired locally to ensure a good cultural fit, and to ensure that the program staff is knowledgeable about community supports.

2.8.9 Communicate directly with the individual on some level, regardless of any particular disability the individual may have. In the event an individual chooses a representative to assist with budget management, the Division will notify the individual in a timely manner of the name of the individual's representative and other pertinent information.

Consumer Direct understands and will comply with the requirement to communicate with the individual regardless of the individual's disability. We will work with the individual and ADSD regarding a representative assisting with budget management.

2.8.10 Shall not disclose or otherwise inform family members, friends or other members of the individual's support network without prior written notification and approval from the individual/representative.

Our staff is trained on the Health Insurance Portability and Accountability Act (HIPAA) and will not disclose the individual's information to family members, friends or other members of the individual's support network without prior written notification and approval from the individual or his/her representative.

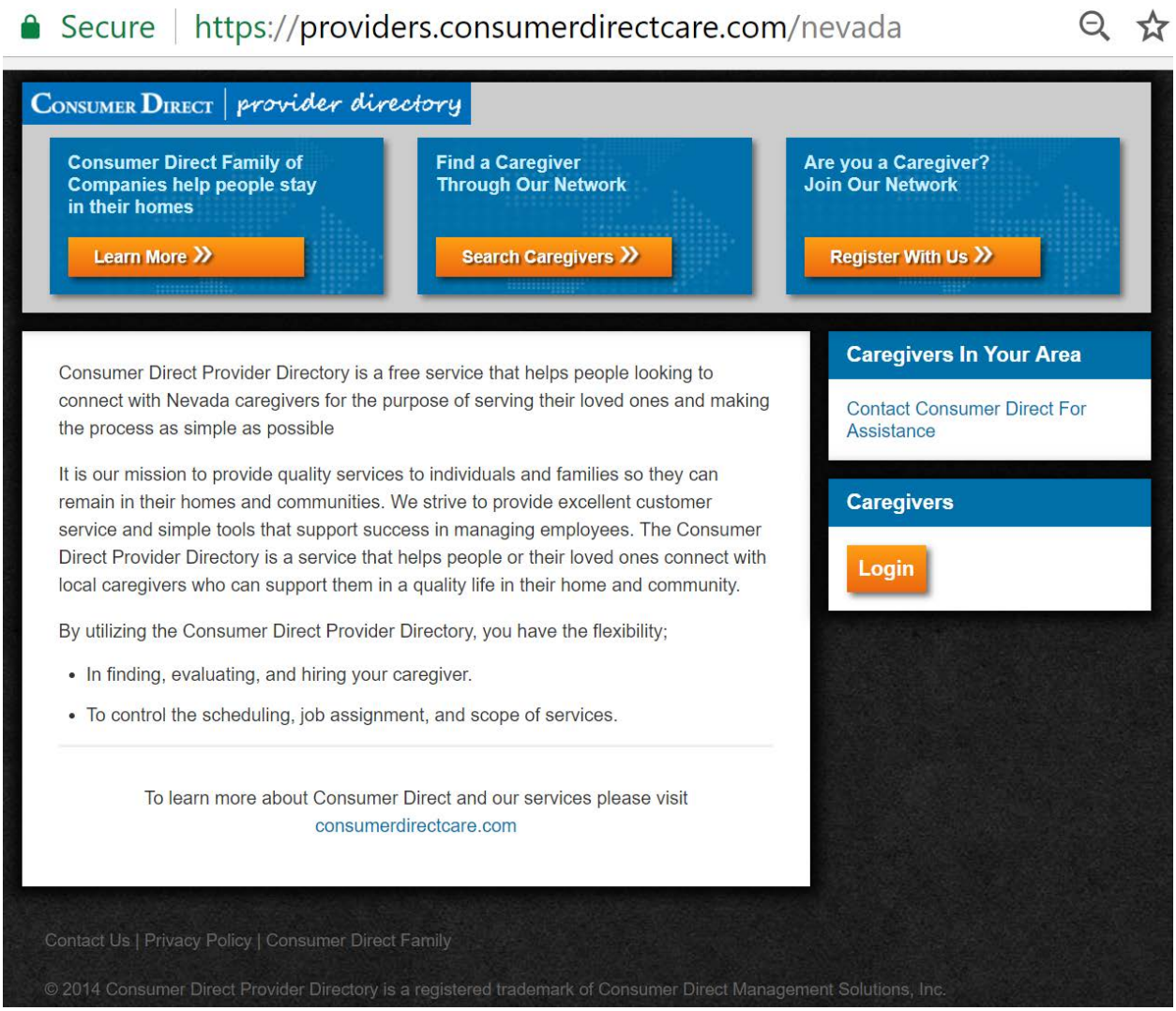
2.8.11 Be willing to participate on ADSD-sponsored committees or work groups to maintain ongoing effectiveness, which includes billing and reporting, business

practices, Workers Compensation, and recruitment and employment related topics.

Consumer Direct staff in Nevada and through the US regularly participate in state- or agency-sponsored committees and work groups to achieve a variety of goals. We look forward to working with ADSD on such committees or work groups.

2.8.12 Keep a registry of qualified employees who agree to be on the registry for referral to other individuals seeking employees in their geographic area of interest.

Consumer Direct Care Network Nevada currently has an online Provider Directory available through our website, https://providers.consumerdirectcare.com/nevada. The provider directory is an available resource for the county, clients, and employees to search for potential employees in their geographic area. The below screenshot provides a visual of the Provider Directory website.



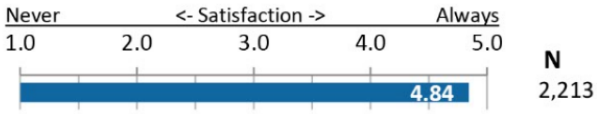
2.8.13 Develop policies and procedures that emphasize the application of the philosophy of participant directed services and being culturally sensitive in all business practices in order to communicate effectively with a diverse population of participants of all ages and with a variety of needs, disabilities and chronic conditions.

The philosophy of self-direction is so essential to our policies and procedures that it is the first item we cover in our manual. Please see Appendix A, pages 5-8, for our sample policies and procedures manual for the directives we provide to staff for person regarding the philosophy of self-direction and cultural awareness.

In process of building our state programs, we developed a method and expertise in accommodating participant needs regardless of diagnosis. In programs where individual financial, payroll, and training needs vary greatly, our care delivery responds to each participant's needs so that they can successfully remain in their homes. We are accustomed to providing quality services in small and large communities with stable or growing enrollment numbers. Almost all state agencies, managed care organizations, and non-governmental organizations that we collaborate with and serve vary in community types and in number of participants. Our business model factors in additional staffing and administrative resources to accommodate rural and urban communities so that we can be a reliable FMS to all participants and providers regardless of remoteness, size, or variations in community culture. Our ability to thrive in communities across the nation is attributable to our combination of local program personnel, centralized Customer Service Center support, and unique infrastructure designed to keep all participant and worker profiles intact and prevent gaps in payroll.

To further illustrate how we are respectful to all participants regardless of their cultural background, below is a snapshot from the cultural sensitivity portion of our Customer Satisfaction Surveys:

6. Does Consumer Direct respect your culture, spiritual beliefs, ethnicity, and sexual preferences?



Expanded results from this Customer Satisfaction Survey are included below in response to question 2.12.2.

2.8.14 Provide periodic information and training to families as changes occur in procedures, reporting or systems.

Ongoing training and updates are available on a regular basis through newsletters, self-study materials and web-based presentations.

2.9 ADDITIONAL RESPONSIBILITIES

The awarded vendor will keep abreast of all laws and regulations relevant to the responsibilities it has undertaken with regard to the required Federal and State filings and the activities related to being a Fiscal Intermediary.

We employ policy and legal analysts who work to support all programs from contract execution to program implementation, and ongoing through research and guidance.

Policy staff in both our Government Relations department and our Payroll department will be responsible for reviewing NV legislative and statutory changes to labor, tax, employment, or ADSD program rules. Once changes to any of the above mentioned documents, or to ADSD's approved HCBS Waiver applications become evident, policy staff will work with our local CDCN NV program and operations teams to incorporate manual or legal changes into updated versions of FMS program related documents. Our Quality Improvement team will then monitor the local NV office against the most updated requirements as part of their annual audit.

Our Chief Financial Officer, Daryl Holzer, monitors and manages company-wide financial performance and operations. He is assisted by the Controller, Wendy Stuker. Both of these accounting professionals are certified public accountants, and Daryl is also a certified management accountant. Together they are responsible for establishing policies, processes, and procedures to ensure Consumer Direct's accounting standards are regularly updated with any federal and state laws that affect payroll tax filing and distribution of public dollars. As leaders of our accounting and payroll departments, they subscribe to a myriad of publications and daily notifications that report on the frequently changing regulatory landscape of federal departments including the IRS, CMS and the DOL, as well as State of Nevada departments that impact payroll tax withholdings and labor laws.

2.10 AUDIT REQUIREMENTS

2.10.1 FMS' are subject to audit by the Aging and Disability Services Division, agents of the DHHS, and the State of Nevada's Auditors of Public Accounts. Records must be made available in Nevada for the audit.

We understand and will comply with this requirement.

2.10.2 Vendors must submit a cost report in year one (1) of the contract, if requested by the ADSD.

We understand and will comply with this requirement, if requested.

2.11 RECORDS

2.11.1 The FMS must maintain other such records and information required by ADSD including but not limited to:

2.11.1.1 Copies of phone logs;

The Customer Service Center and program office staff log calls using the same CRM system to ensure seamless communication between all staff. If the caller's inquiry can be answered by Contact Center staff, the call is logged in the CRM and no further communication with the participant or worker is required. Electronic copies of phone logs are maintained securely.

2.11.1.2 Summaries of complaints with resolution noted;

Call wait times and call resolution times, commonly referred to as "handle times," are effective measurements of customer service quality. We include both call wait times and call resolution times as various modes through which issues are resolved through our Contact Center. Handle time refers to the time it takes Contact Center staff to either fully resolve an issue or escalate the issue to the supervisory level to ensure it is resolved. While handle time is included as a measurement of quality, the main objective for participant/worker contact with the Contact Center is to find a resolution for the caller, rather than rush the caller off the phone. Therefore, we include handle time as a relevant statistic with the caveat that our customer service is accessible, effective, and courteous, and that Contact Center staff are trained to fully resolve or instigate next steps for resolution while on the phone with the caller. Electronic copies of complaints with resolution are maintained securely.

2.11.1.3 Verification of individuals' payment of FICA, FUTA/SUTA; and

All individuals' payment of FICA, FUTA/SUTA are verified, tracked, logged and maintained securely by electronic copy.

2.11.1.4 Federal (if requested) and State income tax and wages in compliance with Federal and State DOL rules and in the form and manner prescribed by state agency staff.

All tax and wages in compliance with Federal and State DOL rules and forms are verified, tracked, and logged and in accordance with federal and state requirements. Copies are maintained securely by electronic copy.

2.11.2 ADSD individuals and workers' records must be available for immediate review by the Aging and Disability Services Division or designated State agency. Records must be made available in Nevada within seven (7) days when requested by the ADSD.

Individuals and workers' records are available for immediate review by ADSD. Records will made available in Nevada within seven (7) days when requested by the ADSD.

2.12 VETERAN DIRECTED HOME & COMMUNITY BASED SERVICES

The financial Management Services vendor must adhere to the following:

2.12.1 Pass a FMS Readiness Review conducted by the national technical assistance team at National Resource Center for Participant Directed Services.

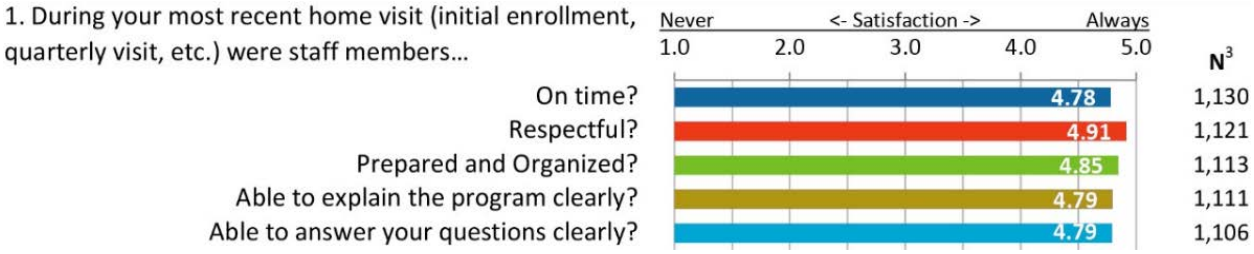
We are accustomed to working closely with state partners in the readiness review process when implementing new programs. We look forward to working with ADSD to achieve all objectives and timelines to the satisfaction of this procurement, both at the time of contract execution and ongoing throughout the term of the Grant Agreement. We commit to having sufficient staff devoted to the readiness review process, to include staff from our Executive, Operations, Quality Improvement, Policy, Development, Billing and Claims, Payroll and any other departments deemed necessary for program implementation. We will adjust staff numbers and scope according to the preference of ADSD.

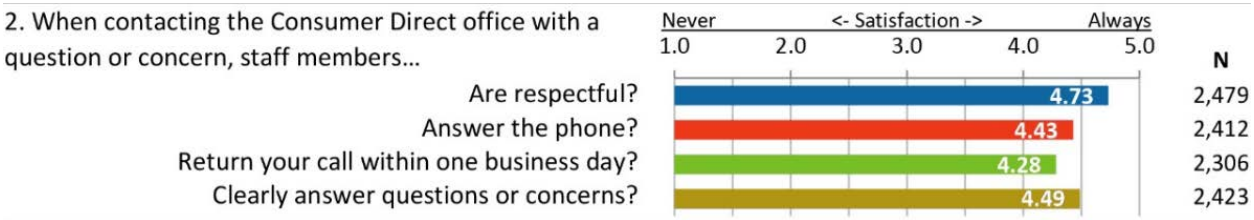
2.12.2 Have a system in place to solicit annual feedback from Participants regarding FMS services performed on their behalf.

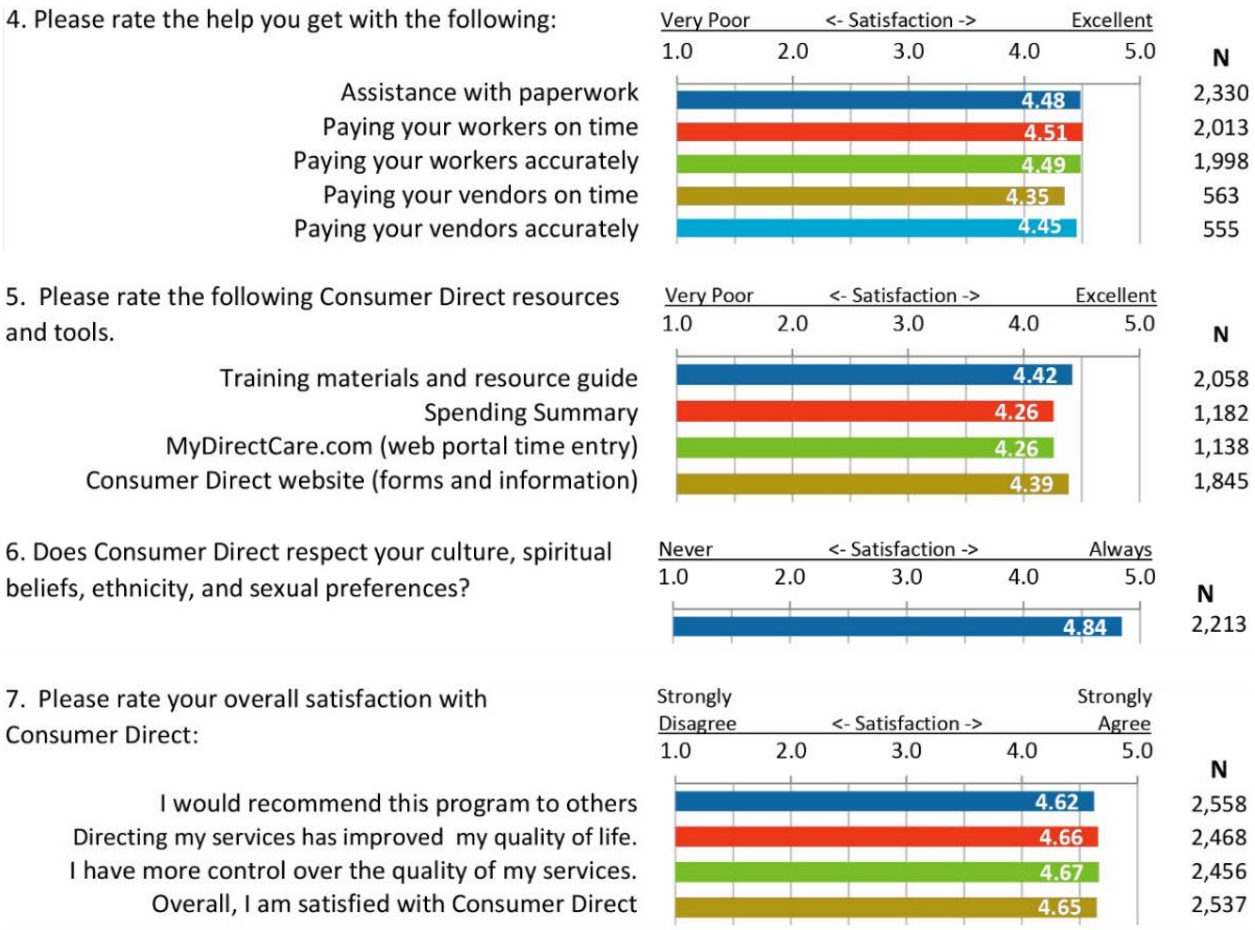
Consumer Direct administers an annual satisfaction survey for each state. Survey response data is compiled into a summary report. The surveys provide invaluable data and feedback regarding areas of high performance and areas we can improve to meet the expectations of our stakeholders and partners. Consumer Direct looks forward to providing a summary of the report to ADSD within thirty (30) calendar days of the published return date.

Survey feedback is sought to help us make continued improvements to our service delivery based on actual client and worker experience. We believe surveys are fundamental to helping us deem how helpful we are to those we serve. We will look to ADSD for approval of our Satisfaction Survey tool prior to dissemination, and issue the surveys on a timeline approved by ADSD. Below, we share our most recent annual satisfaction survey results, aggregated across our family of companies.

Service recipients were asked through mail survey to rate services provided by Consumer Direct on a scale of 1-5, with 5 being best or most satisfied and 1 being worst or least satisfied.







Overall Satisfaction Rating (weighted average all questions): **4.59**

A total of 10,448 surveys were mailed to Medicaid service recipients in nine states asking them to rate the services provided by Consumer Direct. Results based on 2,626 returned surveys or 25.13% of the survey population. Primary service models included Agency with Choice, Fiscal Employer Agent, and Support Broker. Idaho, Florida, Nevada, and Wisconsin surveys conducted August through December of 2015. Alaska, Arizona, New Mexico, Montana, and Texas surveys conducted January through May of 2016. Weighted average. Numeric 5-point Likert rating scale. N = number of responses.

2.12.3 Have a system for responding to complaints about FMS Participant services.

We track all complaints or grievances submitted via our CDCN portal, our website, over the phone, in writing, or in person, via our CRM system. The complaint is logged into CRM, the Quality Improvement department is notified, and the Coordinator determines who needs to be involved to begin discussion of resolution. Our goal is to resolve the complaint as soon as possible. If no resolution is reached within five (5) business days, the Enrollment Services Manager provides the complainant with both verbal and written notification that the complaint was received and gives an estimated date of resolution. The Project

Manager or Enrollment Services Manager, with support from our operations staff, will then work with staff and other department heads to reach resolution and notifies the complainant of the outcome within ten (10) business days. If the complainant is not satisfied with the resolution, he or she can request that the complaint is reviewed by the operations director or the Quality Improvement department. If requested to review the complaint, the operations director or Quality Improvement team will provide resolution within ten (10) additional business days. All communication regarding complaints is tracked and logged in our CRM system, and the complaint resolution is logged and tracked by the Quality Improvement department.

2.13 END OF CONTRACT DELIVERABLES

Tasks to be completed by the vendor upon termination of the contract include, but are not limited to, the following:

2.13.1 File Nevada Department of Employment, Training and Rehabilitation (DETR) Form NUCS 4072, Employer's Quarterly Contribution Wage Report and pay all State unemployment insurance taxes due through the end of the contract period using the appropriate forms for each applicable program participant-employer and their workers, including zero filings. See NV Unemployment Compensation Program (DETR) Employer Handbook. https://uitax.nvdetr.org/crppdf/Employer_Handbook.pdf

Should our contract terminate, we will file Nevada Department of Employment, Training and Rehabilitation (DETR) Form NUCS 4072, Employer's Quarterly Contribution Wage Report and pay all State unemployment insurance taxes due through the end of the contract period using the appropriate forms for each applicable program participant-employer and their workers, including zero filings.

2.13.2 File and pay all federal income tax withholding due through the end of the contract reporting period. This would include the filing of the IRS Form 941, Employer's Quarterly Federal Tax Return, and the Schedule R, Allocation Schedule for Aggregate Form 941 Filers, and Schedule B (Form 941) as applicable, for the first two (2) tax quarters in the contract period for each applicable program participant-employer and their workers.

Should our contract terminate, we will file and pay all federal income tax withholding due through the end of the contract reporting period. This would include the filing of the IRS Form 941, Employer's Quarterly Federal Tax Return, and the Schedule R, Allocation Schedule for Aggregate Form 941 Filers, and Schedule B (Form 941) as applicable, for the first two (2) tax quarters in the contract period for each applicable program participant-employer and their workers.

2.13.3 File and pay all Federal Social Security and Medicare taxes (FICA) due through the end of the contract period. This would include the filing of the IRS Form 941, Employer's Quarterly Federal Tax Return, and the Schedule R, Allocation Schedule for Aggregate Form 941 Filers, and Schedule B (Form 941) as applicable, for the first two (2) quarters in the contract period for each applicable program participant-employer and their workers.

Should our contract terminate, we will file and pay all Federal Social Security and Medicare taxes (FICA) due through the end of the contract period. This would include the filing of the IRS Form 941, Employer's Quarterly Federal Tax Return, and the Schedule R, Allocation Schedule for Aggregate Form 941 Filers, and Schedule B (Form 941) as applicable, for the first two (2) quarters in the contract period for each applicable program participant-employer and their workers

2.13.4 Issue IRS Forms W-2, Wage and Tax Statements to workers for the appropriate tax year.

Should our contract terminate, we will Issue IRS Forms W-2, Wage and Tax Statements to workers for the appropriate tax year.

2.13.5 Determine which program participant-employer and workers are eligible for a FICA refund for the period preceding the contract termination date.

Should our contract terminate, we will determine which program participant-employer and workers are eligible for a FICA refund for the period preceding the contract termination date

2.13.6 Maintain all State unemployment insurance tax filings and payments and other relevant documents for the required period of time in each program participant's archived file.

Should our contract terminate, we will maintain all State unemployment insurance tax filings and payments and other relevant documents for the required period of time in each program participant's archived file.

2.13.7 DETR requires that each employer keep true and accurate work records for each worker. The records must be kept for at least four (4) years and must show:

2.13.7.1 The beginning and ending date of each payroll period;

2.13.7.2 The total wages payable for the payroll period and the date paid;

2.13.7.3 The date the worker was hired;

2.13.7.4 The date the worker was separated from employment;

2.13.7.5 The dates the employee worked; and

2.13.7.6 The State or States in which the services were performed.

Separate entries must be made to record money wages, the cash value of other remuneration, and special payments such as bonuses, prizes, or gifts (DETR Employer Handbook, p. 29).

Should our contract terminate, we will keep employers' true and accurate records for at least four (4) years that meet all 2.13.7.1 through 2.13.7.6 requirements. The records will reflect that money wages were recorded separately.

2.13.8 Maintain all Federal tax filings, payments, and other relevant documents for the required time period in each program participant-employer's archived file.

Should our contract terminate, we will maintain all federal tax filings, payments, and other relevant documents for the required time period in each program participant-employer's archived file least four (4) years after the date that the tax becomes due or is paid.

IRS requires that all employment tax records be kept at least four (4) years after the date that the tax becomes due or is paid, whichever is later. The records should be kept longer if they are the subject of an IRS review (IRS website).

Once all required Federal and State filings, payments and reporting are completed by the vendor(s), the vendor(s) must perform the following tasks:

2.13.8.1 Revoke the IRS Form 2678, Employer/Payer Appointment of Agent with each applicable program participant-employer

Records will show that all required federal and state filings, payments, and reporting were completed and that IRS Form 2678, Employer/Payer Appointment of Agent was revoked with each applicable program participant-employer.

2.13.8.2 Receive the IRS Notice of Agent Revocation for each program participant-employer for which it revokes an IRS Form 2678.

Records will show that all required federal and state filings, payments, and reporting were completed and that IRS Notice of Agent Revocation for each program participant-employer for which it revokes an IRS Form 2678 were received.

2.13.8.3 Maintain copies of revoked IRS Form 2678, Employer/Payer Appointment of Agent, and the IRS Notice of Agent Revocation and related documentation in each program participant-employer's archived file for the required time period.

Records will show that all required federal and state filings, payments, and reporting were completed and that copies of revoked IRS Form 2678, Employer/Payer Appointment of Agent, and the IRS Notice of Agent Revocation and related documentation in each program participant-employer's archived file for the required time period were maintained.

2.13.8.4 Revoke the IRS Form 8821, Tax Information Authorization.

Records will show that all required federal and state filings, payments, and reporting were completed and that IRS Form 8821, Tax Information Authorizations were revoked.

2.13.8.5 Maintain copies of revoked IRS Form 8821, Tax Information Authorization and related documentation in each program participant-employer's archived file for the required time period.

Records will show that all required federal and state filings, payments, and reporting were completed and that copies of revoked IRS Form 8821, Tax Information Authorization and related documentation in each program participant-employer's archived file for the required time period were maintained.

2.13.8.6 Retire the program participant-employer's Federal employer identification number with the IRS.

Records will show that all required federal and state filings, payments, and reporting were completed and that program participant-employer's Federal employer identification number with the IRS were maintained.

2.13.8.7 Maintain copies of the FEIN retirement letter to the IRS and any other related correspondence in each program participant-employer's archived file for the required time period.

Records will show that all required federal and state filings, payments, and reporting were completed and that copies of the FEIN retirement letter to the IRS and any other related correspondence in each program participant- employer's archived file for the required time period were maintained.

2.13.8.8 Revoke the program participant-employer's DETR Power of Attorney (Form NUCS 4556). Vendor should consult the DETR Employer Handbook and contact ADSD to determine how this should be done.

Records will show that all required federal and state filings, payments, and reporting were completed and that program participant-employer's DETR Power of Attorney (Form NUCS 4556) were revoked per statute requirements.

Note: Nevada Unemployment Compensation Law prohibits disclosure of employer information to any other person or the general public. Therefore, in order to discuss a business with a designated agent (or for your agent to be able to access your online account), ADSD must have on file a current and complete Power of Attorney (Form NUCS 4556) or an approved substitute form.

2.13.8.9 Maintain copies of the revocation of the state unemployment compensation Power of Attorney (Form NUCS 4556) in each program participant-employer's archived file for the required time period.

Records will show that all required federal and state filings, payments, and reporting were completed and that copies of the revocation of the state unemployment compensation Power of Attorney (Form NUCS 4556) in each program participant-employer's archived file for the required time period were maintained.

2.13.8.10 Retire the program participant-employer's NV DETR employer account number for State unemployment insurance tax purposes per DETR requirements. Vendor(s) should consult the DETR

Employer Handbook and contact ADSD to discuss how this should be done.

Records will show that all required federal and state filings, payments, and reporting were completed and that program participant-employer's NV DETR employer account number for State unemployment insurance tax purposes were retired per DETR requirements.

2.13.8.11 Maintain copies of the documentation related to retiring the program participant-employer's NV DETR employer account number in the person's archived file for the required time period.

Records will show that all required federal and state filings, payments, and reporting were completed and that copies of the documentation related to retiring the program participant-employer's NV DETR employer account number in the person's archived file for the required time period were maintained.

2.13.8.12 Vendor is responsible for responding to any inquiries raised by IRS or NV DETR related to the tax years the vendor acts as the employer agent for program participant-employers enrolled in the State Funded Self-Directed services program and anyone who used the vendor as the FMS agent. This time period probably will cover four (4) years after the date all Federal and State taxes were filed and paid.

Records will show that all required federal and state filings, payments, and reporting were completed and that we responsibly responded to any inquiries raised by IRS or NV DETR related to the tax years the vendor acts as the employer agent for program participant-employers enrolled in the State Funded Self-Directed services program and anyone who used the vendor as the FMS agent.

2.13.8.13 Assist with the transition process as applicable, to include:

A. Transfer of all records and files to new FMS in a timely manner;

As a collaborative FMS provider, we are all too aware of the necessity for collaboration to continue in the interest of continuity of service delivery for participants and continuity in payroll for workers, vendors, and other providers. Being that the ultimate goal is to provide reliable and professional services for state partners, participants, and their workers, we have every interest in participating in a transitioning to another FMS vendor, or the state, in a dedicated and professional manner. We fully commit to working with any other partner to guarantee that payroll goes uninterrupted and that participants receive uninterrupted service.

B. Communication with the new FMS to assure timely services with service recipients; and

A seamless transition cannot occur without open communication and transfer of all relevant program information. We will provide the state or the new FMS all documentation and records within the timeline specified in the RFP, in a workable format. We will comply with all deliverables, staffing levels timelines, and management of service delivery throughout the transition period.

C. Notification to service recipients regarding FMS changes, to include information regarding pertinent and applicable changes and contact information.

Throughout the transition period, we will work closely with all partners to transition gradually where possible to avoid any interruption in service or payroll. We will notify service recipients regarding FMS changes, including information regarding pertinent and applicable changes and contact information.

Section VI– Company Background and References

Vendors shall place their written response(s) to Section 3, Company Background and References in bold/italics immediately following the applicable RFP question, statement and/or section. This section shall also include the requested information in Section 3.2, Subcontractor Information, if applicable. This section limited to five pages.

3. COMPANY BACKGROUND AND REFERENCES

3.1 VENDOR INFORMATION

3.1.1 Vendors shall provide a company profile in the table format below.

Question	Response
Company name:	***Consumer Direct Care Network Nevada, LLC (Consumer Direct)***
Ownership (sole proprietor, partnership, etc.):	***Limited Liability Company***
State of incorporation:	***Nevada***
Date of incorporation:	***October 28, 2002***
# of years in business:	***14***
List of top officers:	***Ben Bledsoe, President/CEO; Beth Peterson, Chief Operating Officer; Mickey Ogg, Chief Commercial Officer; Jeff Harriott, Chief Information Officer, and; Daryl Holzer, Chief Financial Officer;***
Location of company headquarters, to include City and State:	***Missoula, Montana***

Location(s) of the office that shall provide the services described in this RFP:	***Our program manager is based in our Reno office. Other Nevada-based staff may also be assigned to work outlined in this RFP.***
Number of employees locally with the expertise to support the requirements identified in this RFP:	***Seven***
Number of employees nationally with the expertise to support the requirements in this RFP:	***In addition to our local Nevada staff, our Chief Operating Officer, four other members of the Executive Team, and three Operations directors have the expertise to support the requirements of this RFP.***
Location(s) from which employees shall be assigned for this project:	***Reno and Las Vegas***

3.1.2 A Nevada-based business may apply for a five percent (5%) preference on its proposal. This preference may apply if a business has its principal place of business within Nevada. This preference cannot be combined with any other preference, granted for the award of a contract using federal funds, or granted for the award of a contract procured on a multi-state basis. To claim this preference a business must submit a letter with its proposal showing that it qualifies for the preference.

Consumer Direct Care Network Nevada is part of the Consumer Direct Care Network. The Care Network is headquartered in Montana; Consumer Direct Nevada represents our Nevada-based operations. We received our Nevada business license in 2002, and began serving individuals in 2003. We maintain two offices in the state, one in Reno and one in Las Vegas. We employ seven staff who are based both in our brick-and-mortar locations, and throughout the state to serve more rural parts of Nevada.

Our program manager, Eva Medina, based in the Reno office, is authorized to make essential decisions regarding our services in Nevada.

3.1.3 Please be advised, pursuant to NRS 80.010, a corporation organized pursuant to the laws of another state shall register with the State of Nevada, Secretary of State's Office as a foreign corporation before a contract can be executed between the State of Nevada and the awarded vendor, unless specifically exempted by NRS 80.015.

Consumer Direct Services for Nevada, LLC, does business as Consumer Direct Care Network Nevada. Our license number is NV20021134616.

3.1.4 The selected vendor, prior to doing business in the State of Nevada, shall be appropriately licensed by the State of Nevada, Secretary of State's Office pursuant to NRS76. Information regarding the Nevada Business License can be located at http://nvsos.gov.

Question	Response
Nevada Business License Number:	**NV20021134616**
Legal Entity Name:	**Consumer Direct Services For Nevada, LLC**

Is "Legal Entity Name" the same name as vendor is doing business as?

Yes		No	**X**

If "No", provide explanation.

Consumer Direct Services for Nevada, LLC, does business as Consumer Direct Care Network Nevada

3.1.5 Has the vendor ever been engaged under contract by any State of Nevada agency?

Yes	**X**	No	

If "Yes", complete the following table for each State agency for whom the work was performed. Table can be duplicated for each contract being identified.

Question	Response
Name of State agency:	***Department of Health and Welfare, Intermediary Service Organization (ISO)***
State agency contact name:	***Adrienne Navarro, MS*** ***Social Services Program Specialist III*** ***Nevada Department of Health and Human Services*** ***Division of Health Care Financing and Policy | LTSS*** ***T: 775-684-7576*** ***E: adrienne.navarro@dhcfp.nv.gov***
Dates when services were performed:	***2004 to current***
Type of duties performed:	***Self-directed personal care services are provided to participants with disabilities and the elderly***
Total dollar value of the contract:	***Since 2010, total dollar value of the contract is $40.8m.***

Question	Response
Name of State agency:	***Department of Health and Welfare, Attendant Care for Physically***

	Disabled Waiver (PD Waiver, formerly WIN)
State agency contact name:	***Jill Berntson*** ***ADSD Deputy Administrator*** ***3416 Goni Road # D132*** ***Carson City, NV 89706*** ***T: 775-687-0534***
Dates when services were performed:	***2003 to current***
Type of duties performed:	***The PD Waiver within Nevada Medicaid is an enhanced level of Medicaid services to people with physical disabilities.***
Total dollar value of the contract:	***Since 2010, total dollar value is $7.3m.***

Question	**Response**
Name of State agency:	***Rebuilding All Goals Efficiently (RAGE)***
State agency contact name:	***Reggie Bennett*** ***6375 W. Charleston Blvd*** ***Las Vegs, NV 89416***
Dates when services were performed:	***2007-2010***
Type of duties performed:	***Fiscal Services are provided to children with Autism and their families.***
Total dollar value of the contract:	***From 2007 to 2010, total dollar value of the contract was $1.8m.***

Question	**Response**
Name of State agency:	***Nevada Division of Mental Health and Developmental Services***
State agency contact name:	***Marcia Bennet*** ***1665 Old Hot Springs Road, Suite 157*** ***Carson City, NV 89706*** ***775-687-5162 x 238*** ***mbennett@rrc.nv.gov***
Dates when services were performed:	***2010-2012***
Type of duties performed:	***Rural Regional Center, Support Broker Provider Agency (SBPO) for Nevada Self-Directed Waiver Services.***
Total dollar value of the contract:	***Since 2010, total dollar value is $51,000.***

3.1.6 Are you now or have you been within the last two (2) years an employee of the State of Nevada, or any of its agencies, departments, or divisions?

Yes		No	***X***

If "Yes", please explain when the employee is planning to render services, while on annual leave, compensatory time, or on their own time?

If you employ (a) any person who is a current employee of an agency of the State of Nevada, or (b) any person who has been an employee of an agency of the State of Nevada within the past two (2) years, and if such person shall be performing or producing the services which you shall be contracted to provide under this contract, you shall disclose the identity of each such person in your response to this RFP, and specify the services that each person shall be expected to perform.

3.1.7 Disclosure of any significant prior or ongoing contract failures, contract breaches, civil or criminal litigation in which the vendor has been alleged to be liable or held liable in a matter involving a contract with the State of Nevada or any other governmental entity. Any pending claim or litigation occurring within the past six (6) years which may adversely affect the vendor's ability to perform or fulfill its obligations if a contract is awarded as a result of this RFP shall also be disclosed.

Consumer Direct has no significant prior, pending, or ongoing contract failures, contract breaches, civil or criminal litigation in which it has been alleged to be liable or held liable in a matter involving a contract with the State of Nevada or any other governmental entity.

Does any of the above apply to your company?

Yes		No	***X***

If "Yes", please provide the following information. Table can be duplicated for each issue being identified.

Question	**Response**
Date of alleged contract failure or breach:	
Parties involved:	
Description of the contract failure, contract breach, or litigation, including the products or services involved:	
Amount in controversy:	
Resolution or current status of the dispute:	

If the matter has resulted in a court case:	Court	Case Number
Status of the litigation:		

3.1.8 Vendors shall review and provide if awarded a contract the insurance requirements as specified in Attachment D, Insurance Schedule for RFP 3459

Consumer Direct looks forward to providing all insurance requirements as specified in Attachment D, if awarded.

3.1.9 Company background/history and why vendor is qualified to provide the services described in this RFP. Limit response to no more than five (5) pages.

Consumer Direct is a particularly good fit for participant-directed services in Nevada because of our extensive success transitioning programs, our experience serving participants across various categories of developmental and intellectual disabilities, our presence in both rural and urban communities, and our shared determination to fully integrate I/DD individuals into their communities by empowering them with the services and supports they need to enjoy full, self-determined lives.

We have experience transitioning FMS services of size and scope similar to ADSD's VD-HCBS Waiver and self-directed program services, both as the incumbent vendor and as the outgoing vendor, in Idaho and Missouri. We have experience transitioning FMS services in a number of other programs which vary in size and scope. Finally, we have in depth familiarity of helping a state Medicaid agency to shift from the use of one (1) FMS vendor to three (3) FMS vendors in Colorado, where we continue to operate as the training and operations vendor for ongoing participant elections to switch FMS vendors, or to begin self-directing their own services. In Colorado, we collaborate closely with the FMS vendors to understand their service operations in depth, which helps us prepare participants for switching their FMS and for choosing an FMS that is a good fit. Our experience in supporting and directly engaging in FMS transitions means we have the capability of remaining impartial in helping FMS participants choose their services, and that we are intimately familiar with potential challenges to transitioning FMS vendors in a way that is seamless for participants.

We are accustomed to providing quality FMS services in small and large communities with stable or growing enrollment numbers. Almost all state agencies, managed care organizations, and non-governmental organizations that we collaborate with and serve vary in community types and in number of participants. Our business model factors in additional staffing and administrative resources to accommodate rural and urban communities so that we can be a reliable FMS to all participants and providers regardless of remoteness, size, or variations in community culture. Our ability to thrive in communities across the nation is attributable to our combination of local program personnel, centralized Customer Service Center support, and unique infrastructure designed to

keep all participant and worker profiles intact and prevent gaps in payroll. Our FEA specific experience and the diverse community types including children with autism and with DD. We have the privilege of serving are summarized below.

State	Alaska	Arizona	Colorado	Dist. of Columbia	Florida	Idaho	Michigan	Minnesota	Missouri	Montana	Nevada	New Mexico	Texas	Wisconsin
Providing Services Since	2001	2004	2015	2016	2013	2008	2016	2011	2011	1990	2003	2003	2010	2008
Population Served														
Older Adults	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓
Adults with Disabilities	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Intellectual/Developmental Disabilities	✓	✓			✓	✓	✓		✓	✓	✓	✓	✓	✓
Medically Fragile	✓	✓			✓				✓	✓	✓	✓	✓	✓
Traumatic/Acquired Brain Injury	✓	✓	✓		✓	✓			✓	✓	✓	✓	✓	✓
HIV/AIDS	✓	✓								✓	✓	✓	✓	✓
Veterans	✓	✓								✓	✓	✓	✓	
Adult and/or Children's Mental Health	✓		✓		✓		✓			✓	✓		✓	
Autism	✓					✓			✓	✓			✓	✓
Children with Disabilities/LTC									✓	✓		✓	✓	✓

3.1.10 Provide a brief description of the length of time vendor has been providing services described in this RFP to the public and/or private sector.

We started as a small provider over 27 years ago, and have grown our business gradually through our ability to work as a collaborative and innovative partner with state agencies. We now have the pleasure of working with individuals with intellectual and developmental disabilities in 11 of 13 states and District of Columbia we serve: Alaska, Arizona, Florida, Idaho, Michigan, Missouri, Montana, Nevada, New Mexico, Texas, and Wisconsin. Overall, we provide care for over 16,000 Medicaid beneficiaries across the country.

We have expansive knowledge and understanding of various Medicaid programs, gained through our experience providing support in a variety of models: agency-based (traditional) direct care, nursing, training/enrollment, and financial management services. Our experience in various states speaks to our quality of service and ability to partner with ADSD to problem-solve and ensure participants and workers are satisfied with what we offer.

The following chart provides a snapshot of the various populations we serve in each of our states.

State	Alaska	Arizona	Colorado	Dist. of Columbia	Florida	Idaho	Michigan	Minnesota	Missouri	Montana	Nevada	New Mexico	Texas	Wisconsin
Providing Services Since	2001	2004	2015	2016	2013	2008	2016	2016	2011	1990	2003	2003	2010	2008
Services Provided														
Goods & Services Purchasing				✓		✓				✓			✓	✓
Financial Management Services	✓	✓			✓	✓	✓		✓	✓	✓	✓	✓	✓
Fiscal/Employer Agent	✓	✓		✓	✓	✓	✓		✓			✓	✓	✓
Agency with Choice/Co-Employment	✓	✓								✓	✓			
Support Broker/Consulting/Training	✓	✓	✓	✓	✓		✓			✓	✓	✓	✓	✓
Private Pay	✓	✓					✓		✓	✓	✓			✓
Nursing &/or Medicare		✓								✓				
Traditional Agency		✓								✓				
Certifying Consultant								✓						
Budget Planning & Assistance			✓	✓						✓		✓	✓	✓
Case Management/Care Coordination										✓				
Face to Face Enrollment	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓		✓
Background Checks	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓
Case Manager Training		✓	✓		✓									
Self-Direction Training	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓
Materials Development	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓
E-Learning			✓											
Workers' Compensation	✓	✓		✓	✓		✓		✓	✓	✓	✓	✓	✓
Fraud Prevention Training	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓
Customized Reporting	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Web Portal		✓		✓	✓	✓	✓		✓				✓	✓

Nationwide, Consumer Direct maintains approximately 140 Home and Community Based Services (HCBS) contracts with over 65 clients consisting of government, state, and county agencies, and managed care organizations. In executing these contracts, we process over 330,000 paychecks annually totaling more than $200 million in payroll, and 6 million employee shifts.

3.1.11 Financial information and documentation to be included in accordance with Section 8.5, Part III – Confidential Financial Information.

Please see Part III – Confidential Financial Information, Section II – Financial Information and Documentation for 3.1.11.1 through 3.1.11.3 responses.

3.1.11.1 Dun and Bradstreet Number
3.1.11.2 Federal Tax Identification Number
3.1.11.3 The last two (2) years and current year interim:

A. Profit and Loss Statement
B. Balance Statement

3.2 SUBCONTRACTOR INFORMATION

Subcontractors are defined as a third party, not directly employed by the contractor, who shall provide services identified in this RFP. This does not include third parties who provide support or incidental services to the contractor.

3.2.1 Does this proposal include the use of subcontractors?

Yes		No	***X***

If "Yes", vendor shall:

3.2.1.1 Identify specific subcontractors and the specific requirements of this RFP for which each proposed subcontractor shall perform services.

3.2.1.2 If any tasks are to be completed by subcontractor(s), vendors shall:

A. Describe how the work of any subcontractor(s) shall be supervised, channels of communication shall be maintained and compliance with contract terms assured; and

B. Describe your previous experience with subcontractor(s).

3.2.1.3 Provide the same information for any proposed subcontractors as requested in Section 3.1, Vendor Information.

3.2.1.4 Vendor shall not allow any subcontractor to commence work until all insurance required of the subcontractor is provided to the vendor.

3.2.1.5 Vendor shall notify the using agency of the intended use of any subcontractors not identified within their original proposal and provide the information originally requested in the RFP in Section 3.2, Subcontractor Information. The vendor shall receive agency approval prior to subcontractor commencing work.

3.3 BUSINESS REFERENCES

3.3.1 Vendors shall provide a minimum of three (3) business references from similar projects performed for private and/or public sector clients within the last three (3) years.

3.3.2 Vendors shall submit Attachment E, Reference Questionnaire to their business references.

3.3.3 It is the vendor's responsibility to ensure that completed forms are received by the Purchasing Division on or before the deadline as specified in Section 7, RFP Timeline for inclusion in the evaluation process. Reference Questionnaires not

received, or not complete, may adversely affect the vendor's score in the evaluation process.

3.3.4 The State reserves the right to contact and verify any and all references listed regarding the quality and degree of satisfaction for such performance.

In compliance with 3.3.1-4, Consumer Direct has confirmed that our three references have submitted Attachment E, Reference Questionnaire, to the state within the allotted timeline. We understand that any of these references may be contacted.

4. VENDOR STAFF RESUMES

A resume shall be completed for each proposed key personnel responsible for performance under any contract resulting from this RFP per ***Attachment F, Proposed Staff Resume.***

Section VII – Attachment F – Proposed Staff Resume

A. Section 3.4- Vendor Staff Resumes

Janilee Macleod: Proposed Staff Resume

A resume must be completed for all proposed prime contractor staff and proposed subcontractor staff.

Company Name Submitting Proposal:	Consumer Direct Care Network Nevada

Check the appropriate box if the proposed individual is prime contractor staff or subcontractor staff.			
Contractor:	X	**Subcontractor:**	

The following information requested pertains to the individual being proposed for this project.			
Name:	Janilee Macleod	**Key Personnel: (Yes/No)**	Yes
Individual's Title	State Director		
# of Years in Classification:	*1*	**# of Years with Firm:**	*5*

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE
Information should include a brief summary of the proposed individual's professional experience.

Consumer Direct Care Network Idaho & Nevada | State Director | 2016 - Present
Consumer Direct Care Network Idaho | Program Manager | 2013 - 2016
Consumer Direct Care Network Montana | Financial Manager & Office Coordinator | 2012 - 2013
Consumer Direct Care Network | Risk Management Assistant | Dec. 2011 - 2012
Music Teacher | 2008 - 2011

RELEVANT EXPERIENCE
Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

Consumer Direct Care Network Idaho | Meridian, ID
Program Manager | 2013 - 2016
· Responsible for providing Fiscal/Employer Agent services to 1600 clients statewide.
· Monitor day to day operations.
· Manage a team of 7 employees - in office and remotely.
· Setting and achieving operational goals based on KPIs.
· Analyze and evaluate processes and procedures updating as necessary.
· Review financial statements and data

EDUCATION
Information required should include: institution name, city, state, degree and/or Achievement and date completed/received.

University of Idaho - Moscow, ID
Bachelor of Music in Vocal/Instrumental Music Education - 2008

CERTIFICATIONS
Information required should include: type of certification and date completed/received.

Medicare SHIP Counselor - 2012
MBTI Step I & Step II Practitioner - 2017

REFERENCES
A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

References are available upon request.

Eva Medina: Proposed Staff Resume

A resume must be completed for all proposed prime contractor staff and proposed subcontractor staff.

Company Name Submitting Proposal:	Consumer Direct Care Network Nevada

Check the appropriate box if the proposed individual is prime contractor staff or subcontractor staff.			
Contractor:	X	**Subcontractor:**	

The following information requested pertains to the individual being proposed for this project.			
Name:	Eva Medina	**Key Personnel: (Yes/No)**	Yes
Individual's Title	Program Manager		
# of Years in Classification:	*1.5*	**# of Years with Firm:**	*11*

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE
Information should include a brief summary of the proposed individual's professional experience.

Consumer Direct Care Network Nevada
- Program Manager - 11/2015 to present
- Northern NV Regional Coordinator - 12/2014 to 11/2015
- Reno Office Supervisor - 7/2013 to 11/2014
- Program Coordinator/Lead Program Coordinator - 10/2005 to 11/2014

RELEVANT EXPERIENCE
Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

Consumer Direct Care Network Nevada
Program Manager 11/15 to present

- Responsible for maintaining the day-to-day operations and general office affairs
- Maintaining continuous service quality and monitoring compliance with regulations, and improving the economic standing of the program
- Communicate and collaborate with appropriate state and/or contracting agencies as necessary

Northern Nevada Regional Coordinator 12/1/14 to 11/8/15

- Participating in the program and State of Nevada Medicaid regulatory reviews to ensure compliance will all requirements
- Assisting with the hiring process for admin staff and mentor and train new team members

- Assisting PM with material development for consumers and caregivers

EDUCATION
Information required should include: institution name, city, state, degree and/or Achievement and date completed/received.

Morrison College, Reno NV
Business Office Functions
Certificate of Completion 1996

CERTIFICATIONS
Information required should include: type of certification and date completed/received.

BLS CPR/First Aid Instructor Certification
October 2015

REFERENCES
A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

References are available upon request.

Ben Bledsoe | President and Chief Executive Officer (CEO)

A resume must be completed for all proposed prime contractor staff and proposed subcontractor staff.

Company Name Submitting Proposal:	Consumer Direct Care Network Nevada

Check the appropriate box if the proposed individual is prime contractor staff or subcontractor staff.			
Contractor:	X	**Subcontractor:**	

The following information requested pertains to the individual being proposed for this project.			
Name:	Ben Bledsoe	**Key Personnel: (Yes/No)**	Yes
Individual's Title	President and Chief Executive Officer		
# of Years in Classification:	*5*	**# of Years with Firm:**	*13*

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE
Information should include a brief summary of the proposed individual's professional experience.

Ben developed his expertise in home and community-based services through education, experience, and hard work. After obtaining his bachelor's from the University of Virginia, Ben 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 as a caregiver in 2004, Ben quickly applied his compassion for people and interest in business efficiencies to roles across the company including human resources and program management. Five years after being named CEO, Ben remains committed to ensuring all individuals have choice and control over the lives they lead.

Having worked his way up from an entry-level caregiver to president and CEO of Consumer Direct, Ben has a comprehensive understanding of service provision that is rare in today's healthcare industry. In 2006, Ben served as manager of Consumer Direct Care Network's program in Arizona, then returned to Consumer Direct's Missoula headquarters in 2009 to be vice president and eventually president and CEO. Ben's international, executive, and practical field experience has helped Consumer Direct thrive as today's self-direction services industry leader.

RELEVANT EXPERIENCE
Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

- President/CEO |Consumer Direct Management Solutions | 2012-Present
    - Directs vision and goals for national family of home-based care companies
    - Responsible for finances and operations of nineteen (19) companies in thirteen (13) states with cumulative annual revenues of more than $225 million
    - 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 large and small scale events
    - Makes and approves policy, personnel, investment, and strategic decisions
    - Supervises team of high-level executives
    - Reports to owners and board of advisors
- Vice President | Consumer Direct Management Solutions | 2009-2012
    - Managed quality assurance measures for twelve (12) affiliated companies
    - Responsible for operations of nine (9) 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
    - Oversee special projects
- Program Manager | Consumer Direct Personal Care | 2006-2009
    - Developed self-directed models of personal care in Pima, Santa Cruz, and Maricopa Counties
    - Initiated FMS services for several counties
    - Communicated and collaborated with local and state program officials
    - Assisted in securing contracts around the State
    - 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

    - Extensive knowledge of Medicaid's Personal Care programs
- HR Associate | Nightingale Nursing and Caregiving | 2004-2006
    - Trained in hands-on personal care of over 50 developmentally, physically, mentally, and emotionally disabled client.
    - Conducted company orientation for all 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
    - Skilled at general office equipment and computer use

EDUCATION
Information required should include: institution name, city, state, degree and/or Achievement and date completed/received.

- M.S. Health Administration, Kennedy Western University | 2006
- B.A. Sociology, University of Virginia | 1999

CERTIFICATIONS
Information required should include: type of certification and date completed/received.

N/A

REFERENCES
A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

References are available upon request.

Beth Peterson | Chief Operating Officer (COO)

A resume must be completed for all proposed prime contractor staff and proposed subcontractor staff.

Company Name Submitting Proposal:	Consumer Direct Care Network Nevada

Check the appropriate box if the proposed individual is prime contractor staff or subcontractor staff.			
Contractor:	X	**Subcontractor:**	

The following information requested pertains to the individual being proposed for this project.			
Name:	Beth Peterson	**Key Personnel: (Yes/No)**	Yes
Individual's Title	Chief Operating Officer		
# of Years in Classification:	4	**# of Years with Firm:**	7

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE
Information should include a brief summary of the proposed individual's professional experience.

Beth joined Consumer Direct 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 14 states and across 20 service companies. She began her career working to improve the care of individuals with a developmental disability. She has more than 15 years' experience managing financial management and supports broker services. She is a certified trainer for person-centered planning. Her FMS experience includes management of service delivery, billing, accounts payable, and payroll. Beth received her bachelor's in psychology from College of St. Benedict and advanced studies from St. Catherine University.

RELEVANT EXPERIENCE
Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

Consumer Direct Management Solutions | 2013-present| Chief Operating Officer

- Oversee program operations of companies providing services in 13 states
- Develop and implement policies and procedures
- Service development and implementation
- Customer Service & relations
- Training and development of person centered planning techniques and philosophies

Consumer Direct Management Solutions | Regional Director

- Supervised program operations of companies providing services in four states
- Service development and implementation to diversify funding
- Develop and implement policies and procedures
- Customer Service & relations
- Training and development of person centered planning techniques and philosophies

Consumer Direct Management Solutions | Program Manager

- 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 as well as system efficiencies Customer Service & relations

Partners in Community Supports | 2005-2010 | Director of Services – Fiscal Management Agency

- Supervised all business operations of organization with annual revenue exceeding $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

Dakota Communities Inc. | 1991-2005 |Support Services Supervisor-Developmental Disabilities

- 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 con

EDUCATION
Information required should include: institution name, city, state, degree and/or Achievement and date completed/received.

- Bachelor of Science, College of St. Benedict | 1987-1991
- Post-Baccalaureate Education, St. Catherine University | 1993-1994

CERTIFICATIONS
Information required should include: type of certification and date completed/received.

N/A

REFERENCES
A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

References are available upon request.

Daryl Holzer | Chief Financial Officer (CFO)

A resume must be completed for all proposed prime contractor staff and proposed subcontractor staff.

Company Name Submitting Proposal:	Consumer Direct Care Network Nevada

Check the appropriate box if the proposed individual is prime contractor staff or subcontractor staff.			
Contractor:	X	**Subcontractor:**	

The following information requested pertains to the individual being proposed for this project.			
Name:	Daryl Holzer	**Key Personnel: (Yes/No)**	Yes
Individual's Title	Chief Financial Officer		
# of Years in Classification:	4	**# of Years with Firm:**	14

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE
Information should include a brief summary of the proposed individual's professional experience.

Daryl joined Consumer Direct in 2003 as a systems director and devoted himself to improving 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, then in 2016 was named Chief Financial Officer. Prior to joining Consumer Direct, Daryl worked as a controller of St. Patrick Hospital in Missoula for seven years, and as an accounting manager for Alexander & Alexander of Texas for five years. Daryl concurrently earned a bachelor's degree in business administration and a bachelor of science in computer science from the University of Montana. Daryl is certified as both a public accountant and a management accountant.

RELEVANT EXPERIENCE
Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

Consumer Direct Management Solutions | 2003-present |Chief Financial Officer (formerly Chief Analytics Officer)

- Works to increase efficiency and develop and analyze future needs and business models for Consumer Direct.
- Serves as a companywide resource regarding program fiscal analysis and data support to show programmatic changes and trends. Daryl and his Analytics team serve as a foundational support system for the operations of Consumer Direct nationwide.
- Oversees the analytics team and provides any supporting data or analysis required to ensure programs continues to operate efficiently.

Alexander & Alexander of Texas | Analytics | 1993-1998

- Analyzed client profitability and worked with account manager to determine rolling financial forecast.
- Designed a Forecast/Income Tracking System, reducing time required by each manager to project their rolling forecast.

Electronic Data Systems | Analytics | 1985-1993

- Improved Accounting Processes

Texas Oil & Gas | Accountant| 1983-1985

- Improved Accounting Processes

EDUCATION
Information required should include: institution name, city, state, degree and/or Achievement and date completed/received.

Bachelor of Science, Business Administration, University of Montana

CERTIFICATIONS
Information required should include: type of certification and date completed/received.

Certified Public Accountant, State of Montana

REFERENCES
A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

References are available upon request.

Jeff Harriott | Chief Information Officer (CIO)

A resume must be completed for all proposed prime contractor staff and proposed subcontractor staff.

Company Name Submitting Proposal:	Consumer Direct Care Network Nevada

Check the appropriate box if the proposed individual is prime contractor staff or subcontractor staff.			
Contractor:	X	**Subcontractor:**	

The following information requested pertains to the individual being proposed for this project.			
Name:	Jeff Harriott	**Key Personnel: (Yes/No)**	Yes
Individual's Title	Chief Information Officer		
# of Years in Classification:	5	**# of Years with Firm:**	5

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE
Information should include a brief summary of the proposed individual's professional experience.

Jeff joined Consumer Direct in 2012 as IT director. He came to us with 30 years of IT consulting, service delivery, and management experience. Prior to joining us, Jeff was a senior manager at Microsoft's consulting services organization. In that role, Jeff led major technology initiatives for Microsoft's enterprise customers across the U.S. Jeff'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. Jeff 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), Certified Technology Specialist (MCTS), and Certified Professional (MCP). Jeff also holds a Project Management Professional (PMP) certification from the Project Management Institute.

RELEVANT EXPERIENCE
Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

Consumer Direct Management Solutions | Chief Information Officer | November 2012-present

- Lead and manage information technology operations for the Consumer Direct family of companies.
- Scope of operations covers network infrastructure for data, video and voice, data center operations, custom application development, application support and maintenance, help desk support for over 500 employees.
- Strategic planning for technology services across the enterprise.

Miller Creek Partners | Principal and CIO | April –November 2012

- Led and managed a start-up consulting group focused on services to design and implement cloud-based business management information solutions.
- Managed entire project lifecycle and customer experience for mid-market companies moving ERP, CRM, and e-commerce computing services to the cloud.

Microsoft Corporation | Principal Project Manager | September 2001- April 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.
- Led major projects for Costco, Target, Western Union, Russell Investments, Benefit Cosmetics, and Boeing Employees Credit Union.

IBM Corporation | Principal | August 1999-August 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.
- Sold and led major development projects for Paccar, California Casualty Management Company, and Seattle FilmWorks.

Excell Data Corporation | Managing Consultant | December 1996-August 1999

- Responsible for account development, account management and service delivery in a strategic planning and infrastructure development practice for a regional Microsoft Solution Provider.
- Sold and led major Windows and Exchange projects for US WEST, AT&T Wireless, Frank Russell Company, and Boeing Employees Credit Union in a practice with 30 consultants and $8 million per year revenue.

Swedish Medical Services |Chief Information Officer | April 1994-August 1995

- For a start-up administrative services organization, I directed implementation of a new data center, including all planning, design, product procurement, system testing, and implementation.
- Directed implementation of system services across fourteen remote sites.

EDUCATION
Information required should include: institution name, city, state, degree and/or Achievement and date completed/received.

- M.B.A., Arizona State University, 1979
- B.S. in Business Administration, University of Montana, 1978

CERTIFICATIONS
Information required should include: type of certification and date completed/received.

His professional certifications include Microsoft Certified Systems Engineer (MCSE), Certified Technology Specialist (MCTS), and Certified Professional (MCP).

REFERENCES
A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

References are available upon request.

Mickey Ogg| Chief Commercial Officer (CCO)

A resume must be completed for all proposed prime contractor staff and proposed subcontractor staff.

Company Name Submitting Proposal:	Consumer Direct Care Network Nevada

Check the appropriate box if the proposed individual is prime contractor staff or subcontractor staff.			
Contractor:	X	**Subcontractor:**	

The following information requested pertains to the individual being proposed for this project.			
Name:	Mickey Ogg	**Key Personnel: (Yes/No)**	Yes
Individual's Title	Chief Commercial Officer		
# of Years in Classification:	3	**# of Years with Firm:**	10

BRIEF SUMMARY OF PROFESSIONAL EXPERIENCE
Information should include a brief summary of the proposed individual's professional experience.

2017 marks Mickey Ogg's 10th year at Consumer Direct Care Network. He joined Consumer Direct shortly after obtaining his master's in business administration from the University of Montana. Mickey started out developing business plans and implementing document management systems as a special projects coordinator in 2007. As a result of Mickey's quick and thorough mastery of project implementation, he advanced to Quality Improvement Manager in 2009 and to Chief Commercial Officer in 2014. Since becoming CCO, Mickey has overseen implementation of our Colorado, Michigan, and Washington D.C. programs, and has successfully directed us through our first companywide rebranding initiative.

RELEVANT EXPERIENCE
Information required should include: timeframe, company name, company location, position title held during the term of the contract/project and details of contract/project.

Chief Commercial Officer | Consumer Direct Management Solutions |2014-present

- Oversees internal quality assurance reviews for over twenty (20) distinct state Medicaid, Medicare, and Private Pay funded programs.
- Manages the policy analysis, new business development, marketing, and community relations departments for all companies.
- Oversees new business opportunity coordination, RFP development, and implementation of new programs nationwide.

Chief Compliance Officer | Consumer Direct Management Solutions | 2011-2014

- Managed the quality assurance team.
- Worked closely with all eleven 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 Management Solutions | 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 Projects Coordinator | Consumer Direct Management Solutions|2007-2009

- Developed business plans and implemented a document management system.

Legal Researcher | Ogg Law Offices & McCann Law Firm | 2001-2007

EDUCATION
Information required should include: institution name, city, state, degree and/or Achievement and date completed/received.

- Master of Business Administration, University of Montana, 2007
- Bachelor of Arts, History, University of Washington, 1999

CERTIFICATIONS
Information required should include: type of certification and date completed/received.

REFERENCES
A minimum of three (3) references are required, including name, title, organization, phone number, fax number and email address.

References are available upon request.

B. Subcontractor Resumes (N/A)

This section shall also include any subcontractor proposed staff resumes, if applicable.

No subcontractors will be engaged for this contract.

Section VIII – Other Informational Material

Vendors shall include any other applicable reference material in this section clearly cross referenced with the proposal.

Executive Summary

Thank you for the opportunity to respond to Aging and Disability Services Division's RFP to provide self-directed financial management services (FMS) to eligible families/guardians of children enrollees in Nevada.

Consumer Direct Care Network Nevada (Consumer Direct) has been providing services since 2003. Since our early years serving only a few dozen participants, we have grown with Nevada's programs and now serve almost 500 across several contracts. We are proud of our collaboration with Aging and Disability Services Division (ADSD) and managed care organizations (MCO) to assist participants with their Agency with Choice (AwC) roles. We successfully assisted hundreds of participants in Nevada's Attendant Care for Physically Disabled Waiver (PD Waiver, formerly WIN) and Attendant Care for Frail and Elderly Waiver (FE Waiver, formerly CHIP) services. From our local offices in Reno and Las Vegas, Consumer Direct program and field coordinators provide personalized service throughout the entire state.

Consumer Direct is uniquely qualified to be the FMS provider for ADSD. We have experience in several states transitioning large numbers of participants and workers quickly and efficiently. We are the only statewide provider in Nevada and we have a strong track record of successful customer service, education to facilitate FMS program success, and accurate payment facilitation. Our local staff has the knowledge and resources to consistently support participants, their employees, and case managers. Our commitment to responsiveness and professionalism has made Consumer Direct Care Network the largest, most experienced, and qualified provider of FMS services in Nevada.

Nationally, we have been supporting older adults and individuals with long-term disabilities for 27 years. Our financial management services are founded on the philosophy and benefits of self-direction. We believe that a higher degree of choice and control increases satisfaction and success for people with physical and developmental disabilities, older adults, and others who receive long-term services and supports in their homes and communities.

Our deeply-held belief in the value of self-determination drives us to provide each MCO and state partner with exceptional, local customer service, accurate and timely deliverables, a rewarding relationship, and our national expertise. We look forward to bringing our knowledge of Nevada's geographically and ethnically diverse population to ADSD's FMS services. Our statewide coordinators provide support with localized knowledge of a member's community so we can be responsive to their needs.

Success in self-directed programs starts with a responsive, informative enrollment experience. Our focus on supporting members through the enrollment and training process has consistently increased participation in programs, decreased complaints to the MCO or state, developed positive relationships with case managers, and improved members' quality of life.

Consumer Direct's history of maintaining positive, collaborative relationships in 13 states and the District of Columbia demonstrates our commitment to exceeding contract and program requirements. We are proud of the connections we've cultivated with participants, representatives, case managers, supports brokers, and workers. Connections that have grown because we make it a priority to gain insights from all the stakeholders we work with across the country – managed care organizations and state personnel, participants (16,000), and workers (25,000).

Consumer Direct is an excellent partner to ensure that FMS services are delivered in a reliable and professional manner to ADSD's State Funded Self-Directed services program enrollees in Nevada. Our team sets a high bar for financial management services across the nation, as demonstrated by consistent program growth in the areas where we work. Our commitment to self-determination and respect for our partners enables us to align our goals, messaging, and deliverables through cordial, effective coordination.

We invite you to visit our website, and in particular, to view a message about our motivation for the work we do – to be a positive part in the lives of the people we work with, and afford them the choice and control they desire. You can find us at www.consumerdirectcare.com/brand.

We appreciate the opportunity to provide services for ADSD's FMS program. We are uniquely positioned and experienced to provide the highest quality financial management and supports broker services to your self-directing participants and their employees. We look forward to the opportunity to build an effective, innovative, and collaborative partnership with you, and to providing the highest caliber program experience to your FMS participants.

With best regards,

Ben Bledsoe
President/CEO

Appendix A: Sample Policy and Procedure Manual

Consumer Direct Care Network Idaho Fiscal Employer Agent Policies and Procedures

FISCAL EMPLOYER AGENT

POLICIES AND PROCEDURES

IDAHO CONSUMER DIRECT PERSONAL CARE, LLC.
(CONSUMER DIRECT or CDID)

March 2016

Please Note:

This Policy and Procedure Manual is for Idaho Consumer Direct Personal Care, LLC doing business in Idaho as Idaho Consumer Direct.

Where the terms "Participant" or "Individual" are used, it refers to program participants and includes the participant's legal guardian, if applicable.

This manual is updated minimally once a year by the Program Manager. Staff and Participants are notified in writing of a change in policy or procedure as applicable. The manual is available electronically.

Revision Date: March 14, 2016

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I. CUSTOMER SERVICE

Philosophy of Self-Direction and Self-Determination

POLICY: Consumer Direct incorporates the philosophies of Self-Direction and Self-Determination into service delivery.

PROCEDURE:

1. Consumer Direct staff are trained to Self-Direction and Self-Determination at hire. A module on the philosophy is part of the Self Directed Competency Based Training all employees receive.

2. The Training Checklist is kept with HR in the personnel file of all employees.

3. Consumer Direct promotes the following philosophy:

Self-directed services, developed in response to advocacy groups for people with disabilities and the elderly, provide people receiving services more choice, control, and independence. People with disabilities and the elderly make decisions about the services and supports they receive, assume risk, and accept responsibility for the outcome of their health care. With this model, the individual is more satisfied with services, improves the quality of his or her life, and stays in their home and community.

Providing more choice and control over the services received promotes self-determination. The individual is living the life he or she wants and is fully responsible for the choices made.

<u>The participant is responsible for:</u>

- Recruiting, interviewing, and hiring their employee(s)
- Training their employee to their individual needs
- Deciding what tasks the employee should perform
- Scheduling
- Managing employees
- Authorizing payment for employees
- Dismissal of an employee
- Selecting other services and supports as needed (e.g., Meals on Wheels)
- Designing Emergency and Back-up Plans with emergency numbers, contacts, and people who they will use to provide services when their normally scheduled employee or other supports are unavailable
- Reporting changes in health and living status
- Reporting satisfaction with services
- The outcome of their decisions regarding their care

The Agency is responsible for:

- Fiscal Management Activities (payroll, taxes, billing)
- Orienting and training of recipient to self-direction and agency policy and procedures
- Providing employee/employer forms to participant
- Reporting abuse, neglect, exploitation, and Medicaid Fraud
- Following all Federal and State Medicaid rules and regulations
- Providing monthly expenditure summaries

Customer Service System

POLICY: Consumer Direct will provide a customer service system to respond to all inquiries from Participants, workers, agencies, and vendors.

PROCEDURE:

1. Upon hire, the Operations Director/Program Manager will provide new staff with training regarding customer service, with an emphasis on self-direction. The Program Manager provides the new employee with Consumer Direct's training modules related to customer service and self-direction. This information is reviewed with the new employee, and the employee completes the quizzes related to customer service and self-direction that are included at the end of the training modules.

2. Idaho Consumer Direct (CDID) ensures that CDID personnel are available during regular business hours, 8:00 AM to 5:00 PM Time, Mountain Time, Monday through Friday, excluding weekends and state holidays.

   The local Idaho office is open during the business hours listed above and is staffed during these hours. Staff schedule staggered lunches and breaks to ensure that the office is open across business hours. If a staff person is out of the office to complete enrollments, attend meetings, or accomplish other necessary activities, other staff remain in the office to respond to phone calls, emails, faxes, and individuals who come into the office.

3. Provision of translation and interpreter services (i.e., American Sign Language and services for persons with limited English proficiency).

   Consumer Direct utilizes the following procedures to provide translation and interpreter services:

   a. Consumer Direct employs multiple methods to provide language assistance for participants. Language assistance is made available to participants upon request to complete specific activities (e.g., enrollment) or understand specific information (e.g.,

how to complete time sheets). Written materials are provided in alternative formats upon request.

b. Consumer Direct assures the competence of language assistance services by using local or telephone interpretation services or local translation services whose staff are professionally trained and accredited with verifiable language and/or interpreting credentials.
c. When Consumer Direct uses bilingual staff to provide language assistance when they are proficient in the language of the participant, experienced in cross-cultural communication and the dynamics of serving as an interpreter, and whenever possible, have completed additional training regarding interpretation.
d. Consumer Direct offers information regarding staff acting as an interpreter such as: Sevilla Matir, J and Willis, D, "Using Bilingual Staff Members as Interpreters", Family Practice Management, Vol. 11 (7), July/August 2004 and "Guidelines for Working with Medical Interpreters,"aarticle available through The Provider's Guide to Quality and Culture, http://erc.msh.org.
e. If needed, Consumer Direct hires an interpreter locally to provide language assistance for participants (e.g., for participants who use American Sign Language and for persons with Limited English Proficiency).
f. The participant may choose to use a family member or friend to interpret. If the participant prefers to use a family member or friend for interpretation, CDID staff members will use this person only if it will not compromise the participant's rights, access to information, effectiveness of information exchange, or the participant's right to confidentiality.

4. Provide prompt and consistent response to verbal and written communication.

   a. All voice mail messages responded to within one (1) business day. If a staff person is out of the office for a length of time, his/her phone message reflects the length of time he/she will be gone and instructs the caller about what to do if immediate assistance is needed.
   b. All written and electronic correspondence responded to within five (5) business days. If a staff person is out of the office for a length of time, an automated response is set on their email.

5. Consumer Direct has established and maintains a toll free customer service line for use by participants, employees, agencies, and vendors during regular business hours of 8:00 am to 5:00 pm Monday through Friday, excluding state and federal holidays. In addition, Consumer Direct's phone system allows individuals to contact specific staff directly and to leave voice mail after hours on a 24/7 basis.

   Local Phone: (208) 898-0470
   Toll Free: (888) 898-0470

Consumer Direct implements the following procedures related to the operation of the toll free customer service line:

a. Calls on the local and 800 line are answered by staff as they come in.
b. Messages left of the local or toll free line are automatically sent to the general email inbox and forwarded to the appropriate staff member.
c. All calls and messages received on the general line will be forwarded to the appropriate staff member.
d. Appropriate staff will contact the callers who left a voice mail message, if caller requests a return call, within one business day.
e. All inbound and outbound calls to participants, employees, agencies, and vendors will be documented.
f. In addition to returning calls, staff will identify any action steps that may be required by each call and, when necessary, will route the call to the appropriate person.
g. Staff will document all action steps that are taken in association with the appropriate participant or employee record.

Consumer Direct also maintains local and toll-free fax lines.

Local Fax: (208) 898-0417
Toll Free Fax: (888) 898-0417

6. Consumer Direct provides FEA materials and information regarding FEA processes and procedures and online at: www.ConsumerDirectID.com

7. All Consumer Direct staff have a company email address. Email is viewed as a written form of communication and are responded to within five (5) business days. Staff are trained in the company's email procedures at hire and are expected to adhere to the email etiquette guidelines.

INTERNAL CONTROL: Program Manager responsible for making sure the office is staffed during business hours. Program Manager/Operations Director reviews written documentation and monitors staff schedules on a random basis.

II. COMPLAINT RESOLUTION AND TRACKING SYSTEM

Internal Complaint Resolution

POLICY: Consumer Direct will identify, document, and resolve all applicable complaints regarding Consumer Direct services, systems, procedures, or administrative decisions.

PROCEDURE:

1. Information for Participants regarding the complaint process is provided in the Employer Manual.

2. When feedback from consumers, caregivers, state agencies, contractors, case managers, etc. is received, staff will determine if the feedback meets Consumer Direct's definition of a complaint.

3. A complaint is defined as a verbal or written expression of dissatisfaction about fiscal employer agent services and must meet at least one of the following criteria:
    a. The issue is something within Consumer Direct's reasonable control. (e.g. enrollment procedures, handling of payment issues, web portal concerns, etc.) AND the issue needed to be escalated from a Program Coordinator to a Regional Coordinator, Supervisor, or Program Manager/Director for resolution.
        i. Examples of issues that are not in Consumer Direct's reasonable control are customer service hours, budget amounts, delayed pay due to incorrect information or weather, etc. These would not be considered a complaint.
    b. The person giving the feedback explicitly states, "I want to file a complaint."
    c. The person completes and submits a Feedback Form.

4. If the feedback meets the definition of a complaint, then the Program Coordinator will log the complaint using Consumer Direct's Customer Relationship Management (CRM) software. The Program Manager will be advised that a complaint was received.

5. Program Manager will generate and post the Complaint Log to the SFTP site within 24 hrs

6. Program Manager will investigate and resolve the Complaint in a timely manner. The PM's investigation will involve:
    a. Compilation and review of all pertinent facts
    b. Contacting the complainant(s) to discuss the situation and gain further insight
    c. Conduct a Root Cause Analysis to determine the fundamental cause of the complaint, consulting with the Operations Director and others as deemed necessary
    d. Determination of an effective resolution to the immediate problem/concern
    e. Development of a Corrective Action as appropriate
    f. Communicate the Resolution and Corrective Action (if appropriate) to the complainant

g. Document all review, analysis, data, and communications activity and materials
h. Close Complaint Feedback in Sugar

7. Program Manager will update the Complaint Log to reflect the resolved complaint and post to the SFTP site.

8. Program Manager will include the Complaint in the next Quarterly Evaluation.
   a. Program Manager will evaluate all complaints received in a quarter to determine if any systemic issues are apparent and generate Corrective Actions as appropriate.
   b. Program Manager will post the Quarterly Evaluation to the SFTP site by the 10th of the month following the end of the quarter.

9. Program Manager will coordinate and implement any corrective actions determined from analysis of any single complaint or quarterly complaint review.

1. The Quality Improvement Manager (QIM) is notified of the complaint for review and analysis.

INTERNAL CONTROL: All data and analysis stored electronically. Program Manager will routinely monitor that complaints are documented and appropriately resolved. The Quality Improvement Department will review complaint data during internal reviews.

III. PERSONAL AND CONFIDENTIAL INFORMATION

Maintaining Participant and Employee Files in a Confidential and Secure Manner (e.g., HIPAA Compliant When Required)

POLICY: Consumer Direct has established and maintains participant and employee files for the employer in a confidential and secure manner (e.g., HIPAA compliant when required). All paper files, electronic data transmissions, and electronic data are subject to this requirement.

PROCEDURE:

1. Follow existing Consumer Direct office procedures established in compliance with the Data Privacy Act and HIPAA standards. (See HIPAA attachments: *Consumer Direct Data Privacy Statement* and *Notice of Privacy Practices*).
2. Upon initial hire, all Consumer Direct staff receive training on Health Information Privacy and Confidentiality and Data Privacy - HIPAA Procedures. This training is verified by Supervisors and signed documentation is in all staff files.
3. All staff are trained on the proper storage and disposal of sensitive documents and this is reinforced by supervisors as needed.
4. All files are electronic files and are maintained on encrypted, password protected systems with access granted on a need-to-know basis. Consumer Direct employees are assigned a unique username and password at hire and are required to change their password regularly.
5. Access to electronic files is granted with “permissions” approved by the IT Department.
6. Information is only released to authorized personnel with proper identification, i.e. social security number, tax ID number, and when required, a Release of Information form.
7. Consumer Direct retains information for a minimum of five years. This includes all documentation about the individual and their work and/or services received.
8. Consumer Direct stores archived paper files in locked, temperature controlled storage and with Consumer Direct Management Solutions. Electronic documents are archived.
9. When records are disposed, a staff person and witness record the name of the individual, the date and method of disposal on the Record Disposal Log.
10. Violations of HIPAA are recorded on a Disclosure Log and reviewed monthly by the HIPAA Compliance Officer.

INTERNAL CONTROL: Supervisors verify training received by employees and signed documentation is in all employee files. Administrative staff audit all Consumer Direct employee files. The Quality Improvement Manager or their designee completes additional review of these files and conducts an annual internal program review to ensure that materials are kept confidential.

Health Insurance Portability and Accountability Act (HIPAA)

POLICY: Consumer Direct complies fully with all federal and state security protection laws and regulations. Protection of electronic Protected Health Information (ePHI) is of paramount importance to this organization. Violations of any of these provisions will result in severe disciplinary action, potentially including termination of employment and possible referral for criminal prosecution.

PROCEDURE:

Effective Date: *This policy is in effect as of April 20, 2005*
Expiration Date: *This policy remains in effect until superseded or cancelled*
Security Official: *Greer Woody, Executive Director*

The following information is: a) Reviewed with Consumer Direct employees at hire; b) Provided for employees in a HIPPA Training Handbook; c) Addressed in a quiz that all Consumer Direct employees must pass at time of hire; d) Consistently reviewed at staff meetings; and e) Reviewed with Participants at enrollment. Violations of HIPAA are recorded on a Disclosure Log and reviewed monthly by the HIPAA Compliance Officer.

1. Assigning Privacy and Security Responsibilities

It is the policy of Consumer Direct that specific individuals within our workforce are assigned the responsibility of implementing and maintaining the HIPAA Privacy and Security Rule's requirements. Furthermore, it is the policy of Consumer Direct that these individuals will be provided sufficient resources and authority to fulfill their responsibilities.

2. Risk Analysis

It is the policy of Consumer Direct that a risk analysis has been completed and is periodically updated to assess potential risks and vulnerabilities to the confidentiality, integrity, and availability of ePHI. It is the policy of Consumer Direct that the risk analysis includes a review of the critical nature of ePHI and related applications or business processes with a subsequent ranking or prioritization (criticality analysis).

3. Risk Management

It is the policy of Consumer Direct that security measures are in place and maintained sufficient to reduce risks and vulnerabilities to a reasonably appropriate level to:

1) Ensure the confidentiality, integrity, and availability of all ePHI that this organization creates, receives, maintains, or transmits
2) Protect against any reasonably anticipated threats or hazards to the security or integrity of ePHI
3) Protect against any reasonably anticipated uses or disclosures of ePHI that are not permitted by HIPAA or applicable state law

4) Ensures that all members of the workforce are aware of these requirements and comply with them

4. Sanctions
It is the policy of Consumer Direct that sanctions will be applied to workforce members who fail to comply with the security policies and procedures.

5. Information System Activity Review
It is the policy of Consumer Direct that information system activity records are regularly reviewed, including security incident tracking reports.

6. Supervision
It is the policy of Consumer Direct that an authorized, knowledgeable person must supervise maintenance personnel whenever work is being done on a system that contains or processes ePHI. It is also the policy of this organization that access authorization for maintenance personnel must be set appropriately for the jobs assigned to each.

7. Personnel Clearance
It is the policy of Consumer Direct that personnel be cleared before access to ePHI is allowed.

8. Training and Awareness
It is the policy of Consumer Direct that all employees and contractors receive training in security awareness and in the security procedures to be followed during the performance of their duties. It is the policy of Consumer Direct that periodic reminders and training will be provided to the workforce.

9. Protection from Malicious Software
It is the policy of Consumer Direct that it will implement and maintain procedures for detecting, reporting, and guarding against malicious software. It is the policy of Consumer Direct that all members of the workforce will be periodically reminded and trained regarding this policy.

10. Login Monitoring
It is the policy of Consumer Direct that login attempts and discrepancies will be monitored to the extent practicable.

11. Password Management
It is the policy of Consumer Direct that a written procedure will be followed to create and assign passwords, which will include safeguarding of passwords.

12. Security Incident Policy
It is the policy of Consumer Direct that all Security Incidents (suspected or actual) will be documented in writing. It is the policy of Consumer Direct that these incidents will be promptly investigated and harmful effects or violations will be mitigated to the extent practicable. All responses and follow up actions will be documented.

13. Contingency Plans

It is the policy of Consumer Direct that a contingency plan is in place and maintained. The contingency plan includes procedures for data backup, disaster recovery, including restoration of data, and emergency mode operations. It is the policy of this organization that the contingency plan includes a procedure to allow facility access in support of restoration of lost data and to support emergency mode operations in the event of an emergency. It is the policy of this organization that access control will include procedures for emergency access to ePHI.

14. Testing

It is the policy of Consumer Direct that all security controls and measures in place be periodically tested to ensure proper functioning. It is also the policy of this organization that all procedures adopted to protect the confidentiality, integrity, and availability of information and information services be tested to ensure that important security considerations have not been overlooked. It is also the policy of this organization that contingency plans be implemented and followed to maintain readiness in the event of a contingency.

15. Evaluation

It is the policy of Consumer Direct that a periodic technical and non-technical evaluation will be conducted to audit the effectiveness of the security controls and measures in place in consideration of environmental or operational changes.

16. Audit

It is the policy of Consumer Direct that audit controls are in place to record and examine the activity of all information systems that contain or use ePHI. This organization will maintain procedures to protect ePHI from improper alteration or destruction and to routinely authenticate that ePHI retains its integrity (including but not limited to version control and read only privileges).

17. Authentication

It is the policy of Consumer Direct that all information system users be authenticated before access to information processing resources is allowed. Specifically, each user must have his or her own system account and passwords must never be shared.

18. Authorization and Termination

It is the policy of Consumer Direct that authority to access ePHI be granted or supervision be provided to users who will work with ePHI. When these users no longer require their access or are terminated, all authorization will cease including the revocation and deletion of passwords, user IDs, and system privileges.

19. Access to Protected Health Information

It is the policy of Consumer Direct that all access control mechanisms must be configured to allow access only to the information and information processing functions needed by each employee or contractor to perform their assigned duties. It is also the policy of this organization that proper

procedures must be followed whenever access to health information is authorized, established, or modified and that records of access authorizations must be maintained. Access will be granted and maintained to the extent possible at a system level, role or job function (and application software) level, and workstation or device level. It is the policy of this organization that access control will include unique user IDs to identify and track user identity. It is the policy of this organization that access controls will include automatic log offs for unattended computer sessions.

20. Device and Media Access Control

It is the policy of Consumer Direct that reusable media, such as tapes, zip disks or diskettes, flash drives, or hardware that contains ePHI must be securely erased or otherwise destroyed before being discarded to prevent unauthorized access to ePHI. This policy extends to media that will be re-used by another party. It is the policy of this organization to safeguard the receipt and removal of all hardware and media containing ePHI.

21. Physical Access Control

It is the policy of Consumer Direct that areas limit physical access to electronic information systems (including diagnostic equipment that maintains ePHI) to those properly authorized. It is also the policy of this organization that appropriate safeguards are in place to protect these systems and the ePHI they contain from tampering, theft, or destruction. It is the policy of this organization to review and supervise any repairs or modifications to the facility that could compromise security.

22. Workstation Use Guidelines

It is the policy of Consumer Direct that workstations be positioned in such a manner as to avoid accidental, unauthorized exposure of health information. It is the policy of this organization that displays be locked when unattended. It is the policy of this organization that access to workstations be restricted to authorized users. This workstation policy extends to desktop computers, laptop computers, PDA's, electronic diagnostic equipment, and all storage media connected or stored in the immediate environment.

23. Secure Data Transmission

It is the policy of Consumer Direct that data communications that contain ePHI must be encrypted or transmitted using a secure transmission protocol if they traverse public networks such as the Internet. It is also the policy of this organization that all data transmission methods must incorporate data integrity and authentication controls.

24. Configuration Management

It is the policy of this Consumer Direct that proper procedures be followed for the installation or removal of all hardware devices or software programs. It is also the policy of this organization that the hardware/software inventory must be kept current and that the configuration must be documented in sufficient detail to be rebuilt in the case of an emergency.

25. Business Associates

It is the policy of Consumer Direct that business associates must be contractually bound to protect ePHI as required in applicable federal regulations. It is also the policy of this organization 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. It is the policy of this organization that any business associate agreement that cannot be terminated, and has not corrected
the violation will be reported to the Secretary of the Department of Health and Human Services.

26. Document Retention, Availability, and Currency

It is the policy of Consumer Direct that these policies and all related procedures be retained for six years from the date of its creation or the date when it was last in effect, whichever is later. It is also the policy of this organization to make this documentation available to those persons responsible for implementing the related procedures and that this documentation and policy will be kept current in response to relevant environmental or operational changes or changes in law.

Added 6/2010: Red Flag Rule -

If staff are not familiar with a caller wanting to discuss protected information, they will ask the caller to reveal identifying information (e.g. birth date, address, etc).

If a disclosure occurs, it is recorded on the Disclosure Log and reported to the HIPAA Compliance Officer. The officer and Program Manager decide if the disclosure should be reported to the Customer. If so, the notification is recorded in the Participant's file.

IV. OBTAINING FEDERAL AND STATE APPROVAL TO BE A FEA

Applying for and Obtaining an FEIN for Consumer Direct to Operate as a Fiscal Employer Agent (FEA)

POLICY: Consumer Direct maintains a separate Federal Employer Identification Number (FEIN) for the sole purpose of filing and paying federal employment taxes for Participants.

PROCEDURE:

1. The Accounting Analyst (AA) will complete Form SS-4.
2. The AA will submit the Form SS-4 to the IRS via fax or electronically.
3. The AA will obtain the EIN from the IRS via telephone or electronically.
4. The IRS will send a notification letter regarding the EIN.
5. The AA will copy, scan and file all relevant documentation into CDMS software (e.g., copy of the IRS Notice of FEIN).
6. The AA will notify the state Program Manager and Vice President of the number once obtained.

Note: This is a one-time task.

INTERNAL CONTROL: Printed copies of the FEIN number

V. PROCESSING FEA PROGRAM ENROLLMENT DOCUMENTS

Processing New Employer and Employee Enrollment Forms

POLICY: Employer and Employee Enrollment Forms will be processed within two days of receipt of a complete packet at the CDID office

PROCEDURE:

Employer Forms

1. All State, Federal, and Programmatic employer enrollment forms are reviewed for completeness by the Program Coordinator following the New Participant Checklist.
2. Once a complete set of documents has been obtained and verified, the participant is assigned a Consumer Direct ID number and the documentation package is scanned into DocuWare for subsequent processing by the Authorization Department and the FEA Department.
3. All State and Federal employer forms are processed in accordance with the CDMS FEA Manual. Please refer to this manual for detailed processing information.

Employee Forms

1. All New Employee documents are reviewed for completeness by the Program Specialist following the New Employee Checklist.
2. Once a complete set of documents has been obtained, audited, and the electronic record in Sugar has been created, the employee packet is scanned to DocuWare for subsequent processing by the Caregiver Entry Department. This process occurs in one (1) business day from the receipt of a complete packet.
3. The Caregiver Entry Department enters data from the forms (i.e., wages, tax status, etc.) into the CDMS computerized accounting/information and payroll system.
4. Entry of the information from the employee forms into the CDMS computerized accounting/information system occurs within one (1) business days of the completed forms being received by CDMS.
5. Electronic copies of the employee forms and Employment Agreement are retained in the employee's file in DocuWare.
6. CDID encourages the participant to keep copies of the forms in their Employee Records Folder and will provide copies if needed.

Note: The electronic file in DocuWare is considered the active record. Hard copy forms are not kept in the local office. When a hard copy is received, it is scanned to our general email and given back to the person dropping off. Hard copies received in the mail follow the same procedure but are immediately achieved for off-site storage rather than giving back to the person that dropped them off.

INTERNAL CONTROL: Proficiency Tracker shows that all forms are complete.

Enrollment Meeting

POLICY: Consumer Direct will conduct face-to-face enrollment meetings to orient participants to the program so that they understand the roles and responsibilities of participation in consumer-directed services and the policies and procedures of Consumer Direct.

PROCEDURE:

1. Consumer Direct conducts a face-to-face enrollment/orientation, called a Guide Training, with the Participants. The Guide Training is scheduled once referral information is obtained from the Medicaid Care Manager or Case Coordinator and is typically conducted in coordination with the required Medicaid training. The purpose of the Guide Training is to orient the participant to their self-directed program, review Consumer Direct processes and forms, and complete all required State, Federal, Program, and Company forms. A standard presentation is used during the Guide Training to ensure that all necessary materials are covered.

2. The following tasks are covered at the Guide Training:
   a. What is a Fiscal Employer Agent
   b. Review, sign, and date the Participant Enrollment Packet
   c. Vendor Payments
   d. Employee Packet
   e. Where to find forms
   f. Where to get the Employer Manual
   g. Fraud Prevention
   h. Timesheets and payroll schedule
   i. Budget Reports
   j. Contact Information
   k. Feedback
   l. Consumer Direct contact information

3. An electronic copy of the Employer Manual can be found online at www.ConsumerDirectID.com. Hard copies are provided upon request. The Employer Manual contains the following:

   Employer Packet
   a. Description of the packet, its organization, and a brief description of the forms
   b. New Participant Checklist
   c. Participant Data Form
   d. Fiscal Employer Agent Service Agreement
   e. Monthly Reports Preference Form – Selection of monthly report format
   f. IRS Form SS-4: Application for Employer Identification Number (EIN)
   g. IRS Form 2678: Employer/Payer Appointment of Agent – Authorizes Consumer Direct to withhold taxes from employee checks and deposit those taxes with the IRS

h. IRS Form 56: Notice Concerning Fiduciary Relationship – This Form only needs to be completed if the participant has a guardian representing them [Adult Packet Only]
i. IBR-1: Idaho Business Registration Form – This is used to secure Idaho unemployment and withholding numbers (on behalf of the participant)
j. EFO00104: Idaho Tax Commission Power of Attorney – Gives Consumer Direct permission to speak to and receive information from the Idaho Tax Commission regarding State withholding and unemployment taxes.

Note: In addition to the blank forms, the Employer Packet includes completed examples and a shadow box version of each form with instructions for how to complete the forms.

Note: CDID receives a "Pre-Enrollment Data Form" and pre-populates the actual program enrollment documents prior to conducting the Guide Training. This is done to ensure the information is complete, correct, and to facilitate acceptance of the forms by the IRS and the State of Idaho. The pre-populated documents include items b through j in the list above. The blank copies in the Employer Packet are strictly for reference by the participant and family.

Employee Packet

a. Description of the packet, its organization, and a brief description of the forms
b. New Employee Checklist
c. Employee Data Form – Demographics sheet
d. I-9 Employment Eligibility Form – with example
e. W-4 Employee Withholding Allowance Certificate
f. Pay Selection Form – Selection of Direct Deposit, etc.
g. Description of the Focus PayCard
h. Employment Relationship Disclosure
i. Medicaid – Community Support Worker Agreement
j. Participant – Community Support Worker Employment Agreement
k. Criminal History Check Waivers

Support Broker Packet

a. Forms b – h of employee packet
b. Medicaid – Support Broker Agreement
c. Participant – Support Broker Employment Agreement

Paying for You Supports

a. Description of the packet, its organization, and a brief description of the forms
b. Instructions for Paper Time Sheets
c. Paper Time Sheets
d. Request for Vendor Payment form
e. Instructions for Mileage Reimbursement
f. Paper Mileage Reimbursement forms

d. Status Change Form
e. Employee Termination Form
f. Feedback Form
g. Examples of Paper Timesheets and instructions for completion
h. Payroll Calendar

Agencies & Independent Contractors

g. Description of the packet, its organization, and a brief description of the forms
h. Instructions for Hiring an Agency
i. Instructions for Independent Contractor
j. Participant – Agency / Community Support Worker Employment Agreement
k. Participant – Independent Contractor Work Agreement
l. Criminal History Check Waivers
m. W-9: Request for Taxpayer Identification Number and Certification
n. IRS Guidance Regarding the Employee vs. Independent Contractor Designation

Additional Information & Forms

a. Pay calendar
b. Web portal instructions
c. Notice of Privacy Practices
d. Contact information
e. Feedback form - QI and customer service response form
f. Employee Termination Form
g. Service codes
h. Secure email instructions
i. Wages and Cost to You – This provides a quick reference to the fully loaded cost of an employee's base wage.

In addition to the information and forms in the Employer Manual, the following items are provided at the Guide Training:

- A copy of the brochure describing the FEA program
- Fraud brochures – for the participant and their employees
- Notice of HIPAA Privacy Practices
- Printout of PowerPoint presentation
- CDID business card
- CDID pen

Note: All of the information and forms for the Employer Manual are available on the CDID shared Y: drive.

Note: Forms can be found are online at www.ConsumerDirectID.com

Note: Following completion of the Guide Training, the FEA Enrollment Packet is scanned as a PDF file and stored on CDIDs shared Y: drive until all required enrollment documents have been acquired or for 8 months, whichever occurs first. Signatures on Enrollment Packets are only valid for 8 months for IRS purposes. After 8 months, the signed enrollment packet file is deleted and a note is made in Sugar. A new enrollment packet will have to be completed if the participant decides to use self-directed services. The original hard copy document is archived for storage.

INTERNAL CONTROL: Completed enrollment packets

Auditing Checklists

PROCEDURE:

1. Auditing Checklists are used by CDID staff to review every New Participant Packet, New Employee Packet, New Support Broker Packet, or FDS to Adult SD Transition Packet. Use of the checklists ensures that all packets and initial setup procedures are complete prior to being queued for processing.

2. The Program Coordinator or Program Specialist initials and dates each item once reviewed and determined to be complete

3. The checklist is scanned into DocuWare as part of the Participant or Employee's file

INTERNAL CONTROL: Completed checklist in electronic file during internal review

Participant Data Form

POLICY: The processing of FEA enrollment forms will be closely tracked

PROCEDURE:

1. The Participant Data Form is partially completed when the pre-populated enrollment packet is generated. Following the Guide Training, other sections of the checklist are completed. Once the approved SSP has been received and it is determined that there is a complete New Participant packet, the Participant Data Form is completed by the Program Coordinator.

2. The new Participant's electronic and hard copy records are reviewed for completeness by the Program Coordinator using a New Participant Checklist. Once the records are determined to be complete and all initial setup activities have been accomplished, the record is "Released" into Solomon, Consumer Direct's ERP system, generating a system ID. The entire New Participant

packet, including the Participant Data Form, approved spending plan, guardianship documents, CFH documents, etc. is scanned into DocuWare for processing, along with the completed New Participant Checklist.

3. The FEA Coordinator takes all information from the Participant's forms, which are located in the Client Cabinet in DocuWare, and fills out the home office checklists. Information missing from the Participant's packet can be requested from the Program Coordinator who initialed the Participant Data Form and completed the New Participant Checklist.
    - If the FEA Coordinator determines that there are required forms(s) or information missing, an email is sent to the Program Coordinator who initialed the Participant Data Form requesting the missing form(s) or information. A note is placed on one of the electronic forms in DocuWare from the Participant's packet using the Text Annotation Tool (Thumb Tack Icon). The FEA Status field for the annotated form should read 'Remote Office'.

4. The FEA Coordinator then reviews all documents that are included in the Participant's packet in DocuWare, completes and files them with the various agencies as appropriate. If any information is incorrect or requires manual adjustments, the document is electronically adjusted to correct the mistake and fill in the correct information. Both the adjusted and original documents are retained.

INTERNAL CONTROL: Completed Participant Data Form and Home Office Checklists in DocuWare

Legal Guardianship

POLICY: Consumer Direct reviews and copies court appointed legal guardianship papers for all individuals identifying themselves as such for a Participant wanting to self-direct his/her care.

PROCEDURE:

1. If an individual represents themselves as a legal guardian for a Participant, the Program Coordinator requests to review and copy the Legal Guardianship papers.

2. Guardianship papers must be copied and filed in the Participant's file per IRS regulation.

3. If the Legal Guardian cannot produce Court Appointed Legal Guardianship papers, the Participant must sign all Federal and State Tax forms.

Note: A Power of Attorney (POA) does not substitute for a court appointed guardianship. In the case of a POA without guardianship, the Participant must sign all Federal and State forms.

INTERNAL CONTROL: A copy of the Legal Guardianship papers is in DocuWare along with a completed Form 56 if the guardianship was in place when the enrollment documents were signed

PLEASE REFER TO THE CDMS PROCEDURES FOR DETAILS ON THE SYSTEMATIC PROCESSES FOR FILING FEDERAL AND STATE FORMS AND PROCESSING PAYROLL

FEDERAL FORMS

Registering Employer for Federal Employer Identification Number (FEIN) – SS-4: Application for Employer Identification Number

POLICY: Consumer Direct (CD) registers employer for a Federal Employer Identification Number (FEIN), as soon as employer has wages paid, in accordance with Internal Revenue Service (IRS) regulations, guidelines, and procedures.

PROCEDURE:

1. Prior to attending the Guide Training, the Participant completes and submits a Data Form to Consumer Direct. This form includes all information necessary to properly complete the enrollment packet, including information on any previously assigned EIN. The Program Coordinator pre-populates the enrollment packet, which is then signed during the face-to-face Guide Training. If there is a previously assigned EIN, the EIN will be populated into the appropriate fields of the SS-4.

2. If there is not a previously assigned EIN, the Participant/Guardian signs and dates Form SS-4 as part of the enrollment paperwork processed during the Guide Training.

3. The Program Coordinator reviews Form SS-4 to ensure that the signature on the form matches the Participant's name or the Guardian's name if they are completing the enrollment forms on behalf of the Participant.

4. The accurate Form SS-4 is scanned to DocuWare along with the other enrollment documents.

5. Prepare any and all documentation required to register employer for a FEIN in compliance with IRS regulations, guidelines and procedures.
    a. Type set Form SS-4 if applicable
    b. Go to https://sa2.www4.irs.gov/modiein/individual/index.jsp
    c. Click Begin Application
    d. Check Sole Proprietor and then click Continue
    e. Check Household Employer and then click Continue
    f. Click Continue
    g. Fill in requested information per Form SS-4 and click Continue
        i. If IRS's system states Social Security Number (SSN) and Name do not match in their system, print Issue Page
            a) Email Local Office (LO) request for SSN/Name and Other Name(s) verification
            b) Update EIN Status to 'Errors-See Notes' and enter note in 'Notes/Attachments' in Microsoft Dynamics SL
            c) Initial and date appropriate section (Form SS-4: Application for Employer Identification Number) and write issue on Home Office Checklist (state specific)
            d) Upon receipt of correct SSN/Name (possibly copy of Social Security Card (SSC)), correct SS-4 and begin online FEIN application again
            e) Save LO email on FEA Y drive @ Y:\\MHS\Accounting\FEA\(state specific) Correspondence\Emails as *Correspondence – Employer Name* (if applicable) – *(P) Participant Name**
            f) Scan Issue Page into participant's electronic file (DocuWare) as *SS-4 Rejection Letter*

        ii. If IRS's system provides a Reference Number, print Reference Number Page
            a) Email LO request for SSN/Name & Other Name(s), previously assigned FEIN, and/or prior Fiscal Vendor Agent (state specific) verification
            b) Update EIN Status to 'Errors-See Notes' and enter note in 'Notes/Attachments' in Microsoft Dynamics SL
            c) Initial and date appropriate section (Form SS-4: Application for Employer Identification Number) and write issue on Home Office Checklist (state specific)
            d) Upon receipt of correct SSN/Name (possibly copy of SSC), correct SS-4 and begin online FEIN application again
            e) Save LO email on FEA Y drive @ Y:\\MHS\Accounting\FEA\(state specific) Correspondence\Emails as *Correspondence – Employer Name* (if applicable) – *(P) Participant Name*

iii. Upon receipt of previously assigned FEIN, enter FEIN in EIN field (received from LO), update Status field to 'Complete, and enter note in 'Notes/Attachments' in Microsoft Dynamics SL
   a) If received through LO email, save on FEA Y drive @ Y:\\MHS\Accounting\FEA\(state specific) Correspondence\Emails as *Correspondence – Employer Name* (if applicable) – *(P) Participant Name*
   b) If received by IRS Confirmation in LO email, print and scan into DocuWare as *EIN Confirmation Ltr*
   c) Initial and date appropriate section (Form SS-4: Application for Employer Identification Number) and Prior FEIN) on Home Office Checklist (state specific)

iv. Upon knowledge of previously assigned FEIN but number is unknown, save LO email on FEA Y drive @ Y:\\MHS\Accounting\FEA\(state specific) Correspondence\Emails as *Correspondence – Employer Name* (if applicable) – *(P) Participant Name*
   a) Fax Form SS-4 to IRS
   b) Initial and date appropriate section (Form SS-4: Application for Employer Identification Number) on Home Office Checklist (state specific)
   c) Enter FEIN in EIN field (received from IRS fax), update Status field to 'Complete', and enter note in 'Notes/Attachments' in Microsoft Dynamics SL

v. Scan IRS fax into DocuWare as *EIN Fax Confirmation*
   a) Enter FEIN in EIN field (received from Ltr 4288C – *EIN Confirmation Letter*), update Status field to 'Complete' and enter note in 'Notes/Attachments' in Microsoft Dynamics SL

vi. Scan Ltr-4288C – *EIN Confirmation Letter* into DocuWare as *EIN Confirmation Ltr*
   a) Initial and date appropriate section (Prior EIN) on Home Office Checklist (state specific)

vii. Upon knowledge of prior Fiscal Vendor Agent, save LO email on FEA Y drive @ Y:\\MHS\Accounting\FEA\(state specific) Correspondence\Emails as *Correspondence – Employer Name* (if applicable) – *(P) Participant Name*
   a) Initial and date appropriate section (Form SS-4: Application for Employer Identification Number) on Home Office Checklist (state specific)
   b) Contact prior Fiscal Vendor Agent to receive previously assigned FEIN

c) Enter FEIN in EIN field (received from prior Fiscal Vendor Agent), update Status field to 'Complete', and enter note in 'Notes/Attachments' in Microsoft Dynamics SL
d) Initial and date appropriate section (Prior EIN) on Home Office Checklist (state specific)

viii. Scan Reference Number Page into DocuWare as *SS-4 Rejection Letter*

6. Check I am a third party applying for an EIN on behalf of this household employer and click Continue

7. Check Yes and then click Continue

8. Check Yes, I agree to, and am in compliance with, the above statements. and click Continue

9. Fill in requested information per information found on type-set Form SS-4 (if applicable)

10. Review Summary Page

11. Print Summary Page and then click Continue

12. Print EIN Confirmation Page

13. Enter FEIN in EIN field (received from EIN Confirmation Page) in Microsoft Dynamics SL and update Status field to 'Complete'

14. Click Continue

15. Click Continue

16. Initial and date appropriate section (Form SS-4: Application for Employer Identification Number) on Home Office Checklist (state specific)

17. Upon receipt of *CP 575*, change FEA Status of SS-4 to 'Final' in participant electronic file (DocuWare)

18. Scan Notice CP 575 into participant's electronic file (DocuWare) as *EIN Confirmation Ltr*

INTERNAL CONTROL: FEA Coordinator registers employer for a FEIN, scans all corresponding information into DocuWare, and follows through with all future IRS requirements and correspondence.

FEIN Reporting Requirement Removal

POLICY: When the Participant is discharged/terminated, Consumer Direct requests removal of employer Federal Employer Identification Number (FEIN) reporting requirements, after FEIN final filing has been filed, in accordance with Internal Revenue Service (IRS) regulations, guidelines, and procedures.

PROCEDURE:

1. When the Program Coordinator receives information from the Participant or his/her Care Manager/Case Coordinator that a Participant has withdrawn or been discharged (terminated) from the Self-Direction Program, the Program Coordinator will complete a Participant Termination Form along with termination forms for all current employees.

2. The Program Coordinator will scan the Participant and Employee Termination Forms to DocuWare:
   a) The Participant Termination Form will be processed by the FEA Coordinator
   b) The Employee Termination Forms will be processed by Caregiver Entry

3. Ensure FEIN final filing has been filed with IRS

4. Prepare any and all documentation required to remove employer FEIN reporting requirements in compliance with IRS regulations, guidelines and procedures.
   a) Complete *'EIN Reporting Requirement Removal Letter'* found on FEA Y drive @ Y:\\MHS\Accounting\FEA\Termination Forms\(state specific) Templates
   b) Save *'EIN Reporting Requirement Removal Letter'* on FEA Y drive @ Y:\\ MHS\Accounting\FEA\Termination Forms\(state specific) Templates\Letters Submitted as *'EIN Reporting Requirement Removal Letter – Employer Name* (if applicable) – *(P) Participant Name'*
   c) Print and fax *'EIN Reporting Requirement Removal Letter'* to IRS
   d) Initial and date appropriate section (EIN Reporting Requirement Removal Letter) on Termination Checklist (state specific)
   e) Update EIN Status to 'RRR' in account management system (Microsoft Dynamics SL)
   f) Scan *'EIN Reporting Requirement Removal Letter'* into participant's electronic file (DocuWare) as *'FEIN Report Rmv Letter'*
   g) Scan fax confirmation into DocuWare as *'FEIN Report Rmv Fax Confirmation'*

INTERNAL CONTROL: FEA Coordinator requests removal of employer FEIN reporting requirements, scans all corresponding information into DocuWare, and follows through with all future IRS requirements and correspondence.

Employer/Payer Appointment of Agent – Form 2678 – Internal Revenue Service (IRS)

POLICY: For each Participant to establish Consumer Direct as the Participant's agent for filing payroll reports on their behalf, Consumer Direct (CD) files Form 2678, upon receipt of FEIN, in accordance with IRS regulations, guidelines, and procedures.

PROCEDURE:

1. Prior to attending the Guide Training, the Participant completes and submits a Data Form to Consumer Direct. This form includes all information necessary to properly complete the enrollment packet. The Program Coordinator pre-populates the enrollment packet which is then signed during the face-to-face Guide Training.

2. The Participant/Guardian signs and dates Form 2678 during the Guide Training as part of enrollment paperwork.

3. The Program Coordinator reviews the 2678 to ensure that the Participant has completed the form according to directions (per standard).

4. If the 2678 is completed correctly, it is scanned into DocuWare as part of the complete New Participant Enrollment Packet.

5. Prepare any and all documentation required to file Form 2678 in compliance with IRS regulations, guidelines, and procedures.
    a) Type-set (if applicable) and print Form 2678
    b) Mail completed Form 2678 to IRS
    c) Initial and date appropriate section (Form 2678: Employer/Payer Appointment of Agent) on Home Office Checklist (state specific)
    d) Scan 2nd page of Form 2678 into participant's electronic file (DocuWare) as *2678 Signature Page*
    e) Scan Ltr 1997C into DocuWare as *Ltr 1997C-2678 Conf Letter*

INTERNAL CONTROL: FEA Coordinator provides Form 2678 to IRS, scans all corresponding information into DocuWare, and follows through with all future IRS requirements and correspondence.

Employer/Payer Appointment of Agent – Revoking Form 2678 – Internal Revenue Service (IRS)

POLICY: Consumer Direct (CD) revokes Form 2678, after FEIN reporting removal request filed, in accordance with IRS regulations, guidelines, and procedures.

PROCEDURE:

1. When the Program Coordinator receives information from the Participant or his/her Care Manager/Case Coordinator that a Participant has withdrawn or been discharged (terminated) from the Self-Direction Program, the Program Coordinator will complete a Participant Termination Form.

2. The Program Coordinator will scan the Participant Termination Form to DocuWare where it will be processed by the FEA Coordinator.

3. Prepare any and all documentation required to revoke Form 2678 in compliance with IRS regulations, guidelines, and procedures.
    a) Complete *'Form 2678 Revocation'* found on FEA Y drive @ Y:\\MHS\Accounting\FEA\Termination Forms\(state specific) Templates
    b) Save *'Form 2678 Revocation'* on FEA Y drive @ Y:\\MHS\Accounting\FEA\Termination Forms\(state specific) Templates\Forms Submitted as *'Form 2678 Revocation – Employer Name* (if applicable) – *(P) Participant Name*
    c) Mail completed *'Form 2678 Revocation'* to IRS
    d) Initial and date appropriate section (2678 Revocation: Employer/Payer Appointment of Agent) on Termination Checklist (state specific)
    e) Scan *'Form 2678 Revocation'* into participant's electronic file (DocuWare) as *'2678 Revocation'*
    f) Scan *LTR 4288C – 2678 Revocation Confirmation Letter* into DocuWare as *'2678 Revocation Conf Letter'*

INTERNAL CONTROL: FEA Coordinator provides revoked Form 2678 to IRS, scans all corresponding information into DocuWare, and follows through with all future IRS requirements and correspondence.

OPTIONAL OR RARELY USED FEDERAL FORMS

Notice Concerning Fiduciary Relationship – Form 56 – Internal Revenue Service (IRS)

POLICY: Form 56 is completed for all Participants who have legal guardians at the time of enrollment. Consumer Direct (CD) notifies IRS of fiduciary relationship in accordance with IRS regulations, guidelines, and procedures (only necessary if fiduciary signs tax paperwork on behalf of employer & state specific).

PROCEDURE:

1. Form 56 is included in the Enrollment Packet. It is only applicable if a guardianship is involved.
2. The Program Coordinator obtains a copy of the court appointed guardianship papers.
3. The guardianship papers are scanned into the Participant's electronic file along with the completed Form 56.
4. If the guardian does not have court appointed documents, Participant must sign all Federal and State forms.
5. The Program Coordinator will scan Form 56 to DocuWare where it will be processed by the FEA Coordinator
6. Prepare any and all documentation required to file Form 56 in compliance with IRS regulations, guidelines, and procedures.
    a) Type-set (if applicable) and print Form 56
    b) Mail Form 56 with court-appointed guardianship paperwork to IRS
    c) Initial and date appropriate section (Form 56: Notice Concerning Fiduciary Relationship or Notes (state specific))

INTERNAL CONTROL: FEA Coordinator provides Form 56 to IRS, scans all corresponding information into DocuWare, and follows through with all future IRS requirements and correspondence.

Power of Attorney and Declaration of Representative – Form 2848 – Internal Revenue Service (IRS)

POLICY: Consumer Direct (CD) submits Form 2848 to receive employer previously assigned Federal Employer Identification Number (FEIN) when unable to receive from submitted Form SS-4 and/or Form 8821 in accordance with IRS regulations, guidelines, and procedures.

PROCEDURE:

1. Prepare any and all documentation required to submit Form 2848 in compliance with IRS regulations, guidelines, and procedures
    a. Initial and date appropriate section (Form SS-4: Application for Employer Identification Number or Notes) on Home Office Checklist (state specific)
    b. Generate Form 2848 found @ IRS website and email to Local Office (LO) Program Coordinator (PC) for employer signature
    c. Upon receipt of signed Form 2848 by email, provide to CD Authorized Representative for signature
    d. CD Authorized Representative calls IRS to received previously assigned FEIN
    e. Enter previously assigned FEIN in EIN field (received from submitted Form 2848) and update Status field to 'Complete' in account management system (Microsoft Dynamics SL)
    f. Initial and date appropriate section (Prior EIN) on Home Office Checklist (state specific)
    g. Scan Form 2848 into participant's electronic file (DocuWare) as *Form 2848* and *2848 Signature Page*

INTERNAL CONTROL: FEA Coordinator ensure Form 2848 is complete before Authorized Representative submits to IRS, enters previously assigned FEIN into Microsoft Dynamics SL, scans all corresponding information into DocuWare, and follows through with all future IRS requirements and correspondence.

Power of Attorney and Declaration of Representative – Revoking Form 2848 – Internal Revenue Service (IRS)

POLICY: Consumer Direct (CD) revokes Form 2848, if previously submitted, in accordance with IRS regulations, guidelines, and procedures.

PROCEDURE:

1. Prepare any and all documentation required to revoke Form 2848 in compliance with IRS regulations, guidelines, and procedures (no need to revoke if expired).
    a. Print Form 2848 found in participant's electronic file (DocuWare)
    b. Write 'REMOVAL' above Form 2848 title
    c. Provide *'Form 2848 Revocation'* to Authorized Representative(s) for signature by 'REMOVAL' language
    d. Mail completed *'Form 2848 Revocation'* to IRS
    e. Initial and date appropriate section (2848 Revocation: Power of Attorney and Declaration of Representative) on Termination Checklist (state specific)
    f. Scan *'Form 2848 Revocation'* into DocuWare as *'2848 Revocation'*

INTERNAL CONTROL: FEA Coordinator provides revoked Form 2848 to IRS, scans all corresponding information into DocuWare, and follows with all future IRS requirements and correspondence.

Tax Information Authorization – Form 8821 – Internal Revenue Service (IRS)

POLICY: Consumer Direct (CD) submits Form 8821 to receive employer previously assigned Federal Employer Identification Number (FEIN) when unable to receive from Form SS-4 in compliance with IRS regulations, guidelines, and procedures.

PROCEDURE:

1. Prepare any and all documentation required to submit Form 8821 in compliance with IRS regulations, guidelines, and procedures.
    a. Send email request to Local Office (LO) Program Coordinator (PC) for employer signature on Form 8821
    b. Initial and date appropriate section (Form SS-4: Application for Employer Identification Number or Notes) on Home Office Checklist (state specific)
    c. Upon receipt of Form 8821 in DW (scanned by Local Office (LO)), type-set (if applicable) and call IRS to receive previously assigned FEIN
    d. Enter previously assigned FEIN in EIN field (received from submitted Form 8821) and update Status field to 'Complete' in account management system (Microsoft Dynamics SL)
    e. Initial and date appropriate section (Prior EIN) on Home Office Checklist

INTERNAL CONTROL: FEA Coordinator ensures Form 8821 is complete before submitted to IRS, enters previously assigned FEIN into Microsoft Dynamics SL, scans all corresponding information into DocuWare, and follows through with all future IRS requirements and correspondence.

Tax Information Authorization – Revoking Form 8821 – Internal Revenue Service (IRS)

POLICY: Consumer Direct (CD) revokes Form 8821, if previously submitted, in accordance with IRS regulations, guidelines, and procedures.

PROCEDURE:

1. Prepare any and all documentation required to revoke Form 8821 in compliance with IRS regulations, guidelines, and procedures.
    a. Print Form 8821 found in participant's electronic file (DocuWare)
    b. Stamp 'REVOKE' above Form 8821 title
    c. Sign and write current date by 'REVOKE' stamp
    d. Mail completed *'Form 8821 Revocation'* to IRS
    e. Initial and date appropriate section (8821 Revocation: Tax Information Authorization) on Termination Checklist (state specific)
    f. Scan *'Form 8821 Revocation'* into DocuWare as *'8821 Revocation'*

INTERNAL CONTROL: FEA Coordinator provides revoked Form 8821 to IRS, scans all corresponding information into DocuWare, and follows through with all future IRS requirements and correspondence.

Change of Address or Responsible Party – Business – Form 8822(B) – Internal Revenue Service (IRS)

POLICY: Consumer Direct (CD) files Form 8822(B), when necessary, in accordance with IRS regulations, guidelines, and procedures.

PROCEDURE:

1. Prepare any and all documentation required to file Form 8822(B) in compliance with IRS regulations, guidelines, and procedures.
    a. Enrollment: When requesting employer previously assigned Federal Employer Identification Number (FEIN) by Form SS-4, Form 2848, or Form 8821 submittals and employer mailing address wasn't updated to CD's by IRS agent processing Form submittals.
        i. Send email request to Local Office (LO) Program Coordinator (PC) for employer signature on Form 8822-B
        ii. Upon receipt of Form 8822-B in participant's electronic file (DocuWare – scanned by LO), type-set if needed and print
        iii. Mail Form 8822-B to IRS
        iv. Initial and date appropriate section (Notes) on Home Office Checklist (state specific)
    b. Termination: Update employer address for employer's where Form 8822 was previously scanned into DocuWare
        i. Type-set and print Form 8822
        ii. Mail Form 8822 to IRS
        iii. Initial and date appropriate section (8822: Change of Address) on Termination Checklist (state specific)

Documents will be transferred from FEA Y drive to participant's electronic file (DocuWare)

IDAHO STATE FORMS

Registering Employer for Idaho (ID) State Income Tax Account (SIT) - Form IBR-1: Idaho Business Registration

POLICY: Consumer Direct (CD) registers employer for an ID SIT (WH) account, as soon as employer has wages paid, in accordance with ID State Tax Commission (ISTC) regulations, guidelines, and procedures to get a State Withholding account and State Unemployment Insurance account.

PROCEDURE:

1. Prepare any and all documentation required to register employer for a SIT account in compliance with ISTC regulations, guidelines, and procedures.
    a. Type-set (if applicable) Form IBR-1
    b. Go to https://labor.idaho.gov/ibrs/ibr.aspx
    c. Click I am ready to apply for permits and accounts.
    d. Click I have the required information and am ready to proceed.
    e. Click Create a new account in *Begin New Registration Application or Update Accounts:* box
    f. Create Username (employer's first name initial & last name) and Password (FEA2014*employer's initials)
    g. Fill in requested information per Form IBR-1
    h. Save online registration confirmation on FEA Y drive @ Y:\MHS\Accounting\FEA\Idaho Correspondence\Idaho Online Reg Conf Pages as *IBR reg conf (Employer Name if applicable) (P) Participant Name**
    i. Remove 'PENDING' from W/H # field, update Status field to 'Applied For', and enter WH filing frequency (Reporting Frequency tab) in account management system (Microsoft Dynamics)
    j. Initial and date appropriate section (Form IBR-1: Idaho Business Registration) on 'ID Home Office Checklist'
    k. Enter WH account in State W/H # field (received from *IBR State Withholding Confirmation*) and update Status to 'Complete' in Microsoft Dynamics SL
    l. Initial and date appropriate section (Form IBR-1: Idaho Business Registration) on 'ID Home Office Checklist'
    m. Scan *IBR State Withholding Confirmation* directly to Tax Reporting Specialist's email
    n. Scan *IBR State Withholding Confirmation* into participant's electronic file (DocuWare) as *IBR State Withholding Confirmation*

INTERNAL CONTROL: FEA Coordinator registers employer for an ID SIT account, provides Tax Reporting Specialist SIT account upon receipt, scans all corresponding information into DocuWare, and follows through with all future ISTC requirements and correspondence.

Retiring Idaho (ID) State Income Tax (SIT) Account

POLICY: Consumer Direct (CD) retires employer's ID SIT (WH) account, after SIT final filing has been filed, in accordance with ID State Tax Commission (ISTC) regulations, guidelines, and procedures.

PROCEDURE:

1. Ensure SIT final filing has been filed with ISTC
2. Prepare any and all documentation required to retire employer's SIT account in compliance with ISTC regulations, guidelines, and procedures.
    a. Go to http://tax.idaho.gov/i-1095.cfm
    b. Check Cancel my withholding permit/account and enter taxdept email address
    c. Fill in requested employer information per information found in account management system (Microsoft Dynamics SL)
    d. Print Business Taxpayer Self-Service page and then click Enter
    e. Print Idaho State Tax Commission Business Taxpayer Self-Service page
    f. Initial and date appropriate section (Withholding Account Inactivation) on 'ID Termination Checklist'
    g. Update Status to 'Closed Inactivity' in Microsoft Dynamics SL
    h. Scan Business Taxpayer Self-Service page into participant's electronic file (DocuWare) as '*Withholding Account Termination*'
    i. Scan Idaho State Tax Commission Business Taxpayer Self-Service page into DocuWare as *'Withholding Account Term Conf'*

INTERNAL CONTROL: FEA Coordinator ensures Tax Reporting Specialist has filed final filing, retires employer's ID SIT account, scans all corresponding information into DocuWare, and follows through with all future ISTC requirements and correspondence.

Power of Attorney (POA) – Form EFO00104 – Idaho State Tax Commission (ISTC)

POLICY: Consumer Direct (CD) files Form EFO00104, upon receipt of SIT (WH) account, in accordance with ISTC regulations, guidelines, and procedures to give CD permission to act as the Participant's POA for their Withholding and Unemployment Insurance accounts.

PROCEDURE:

1. Prepare any and all documentation required to file Form EFO00104 in compliance with ISTC regulations, guidelines, and procedures.
    a. Type-set (if applicable) and print Form EFO00104 to temp folder on FEA Y drive
    b. Fax Form EFO00104 to ISTC
    c. Initial and date appropriate section (Form EFO00104: Idaho Tax Commission – Power of Attorney) on 'ID Home Office Checklist'

    d. Save fax confirmation on FEA Y drive @ Y:\MHS\Accounting\FEA\Idaho Correspondence\Email\ISTC\WH EFO Fax Conf as *WH POA Fax Conf – (Employer Name, if applicable – (P) Participant Name)*

INTERNAL CONTROL: FEA Coordinator provides POA to ISTC, scans all corresponding information into DocuWare, and follows through with all future ISTC requirements and correspondence.

Power of Attorney (POA) – Revoking Form EFO00104 – Idaho State Tax Commission (ISTC)

POLICY: Consumer Direct (CD) revokes Form EFO00104, after SIT (WH) account has been retired, in accordance with ISTC regulations, guidelines, and procedures.

PROCEDURE:

1. Prepare any and all documentation required to revoke Form EFO00104 in compliance with ISTC regulations, guidelines, and procedures.
    a. Print Form EFO00104 found in participant's electronic file (DocuWare)
    b. Stamp 'REVOKE' above Form EFO00104 title
    c. Sign, write current date and title by 'REVOKE' stamp
    d. Save completed *'Form EFO00104 Revocation'* to temp FEA folder and tax to ISTC
    e. Initial and date appropriate section (Form EFO00104 Revocation:) on 'ID Termination Checklist'
    f. Scan '*Form EFO00104 Revocation*' into participant's electronic file (DocuWare) as *'WH POA Revocation'*
    g. Scan fax confirmation into DocuWare as *'WH POA Revocation Fax Conf'*

INTERNAL CONTROL: FEA Coordinator provides revoked POA to ISTC, scans all corresponding information into DocuWare, and follows through with all future ISTC requirements and correspondence.

Registering Employer for Idaho (ID) State Unemployment Tax Act (SUTA) Account – Form IBR-1: Idaho Business Registration

POLICY: Consumer Direct (CD) registers employer for an ID SUTA (UI) account, as soon as employer has reached liability requirements, in accordance with ID's Department of Labor (DOL) regulations, guidelines, and procedures.

PROCEDURE:

1. Prepare any and all documentation required to register employer for a SUTA account in compliance with ID DOL regulations, guidelines, and procedures.
    a. Form IBR-1 & online registration are dual applications/registrations (ID Home Office checklist previously initialed and dated for WH registration)
        - Remove 'PENDING' from SUTA # field, update Status field to 'Applied For', enter Liability Date (beginning date 1st quarter (QR) liability reached), and enter SUTA filing frequency (Reporting Frequency tab) in account management system (Microsoft Dynamics SL) if liable
        - Update Status field to 'Not Subj Yet < $1000' if not yet liable
    b. Enter UI account in SUTA # field (received from *IBR SUTA Confirmation Ltr*) and leave Status as is
    c. Initial and date appropriate section (Form IBR-1: Idaho Business Registration) on 'ID Home Office Checklist'
    d. Scan *IBR SUTA Confirmation Ltr* directly to Tax Reporting Specialist email for notification of received UI account
    e. Verify employer liability, notify DOL of non-liable employers, and update Microsoft Dynamics SL a week or two before end of each quarter
    f. Scan *IBR SUTA Confirmation Ltr* into participant's electronic file (DocuWare) as *IBR SUTA Confirmation Ltr*

INTERNAL CONTROL: FEA Coordinator registers employer for an ID SUTA account, provides Tax Reporting Specialist SUTA account upon receipt, scans all corresponding information into DocuWare, and follows through with all future ID DOL requirements and correspondence.

Retiring Idaho (ID) State Unemployment Tax Act (SUTA) Account

POLICY: Consumer Direct (CD) retires employer's ID SUTA (UI) account, after SUTA final filing has been filed, in accordance with ID's Department of Labor (DOL) regulations, guidelines, and procedures.

PROCEDURE:

1. Ensure SUTA final filing has been filed with DOL
2. Prepare any and all documentation required to retire employer's SUTA account in compliance with ID DOL regulations, guidelines, and procedures
    a. Complete *'IDCLD – UI Inactivation Letter'* found on FEA Y drive @ Y:\MHS\Accounting\FEA\Termination Forms\ID Termination Templates
    b. Save *'IDCLD – UI Inactivation Letter'* on FEA Y drive @ Y:\MHS\Accounting\FEA\Termination Forms\ID Termination Templates\Letters Submitted as *'IDDOL – UI Inactivation Letter – (Employer Name, if applicable)(P) (Participant Name)*
    c. Print and save completed *'IDDOL – UI Inactivation Letter'* to temp FEA folder
    d. Fax *'IDDOL – UI Inactivation Letter'* to DOL
    e. Update Status to 'Closed Inactivity' in account management system (Microsoft Dynamics SL)
    f. Initial and date appropriate section (Unemployment Account Inactivation letter) on 'ID Termination Checklist'
    g. Scan *'IDDOL – UI Inactivation Letter'* into participant's electronic file (DocuWare) as *'UI Account Termination'*

INTERNAL CONTROL: FEA Coordinator ensures Tax Reporting Specialist has filed final filing, retires employer's ID SUTA account, scans all corresponding information into DocuWare, and follows through with all future ID DOL requirements and correspondence.

Power of Attorney (POA) – Form EFO00104 – Idaho Department of Labor (IDDOL)

POLICY: Consumer Direct (CD) files Form EFO00104, after SUTA (UI) account receipt and employer liability, in accordance with IDDOL regulations, guidelines, and procedures.

PROCEDURE:

1. Prepare any and all documentation required to file Form EFO00104 in compliance with IDDOL regulations, guidelines, and procedures.
    a. Type-set (if applicable) and print Form EFO00104 to temp folder on FEA Y drive
    b. Fax Form EFO00104 to IDDOL
    c. Initial and date appropriate section (Form EFO00104: Idaho Tax Commission – Power of Attorney) on 'ID Home Office Checklist'
    d. Scan fax confirmation into participant's electronic file (DocuWare) as *UI POA Fax Conf*

INTERNAL CONTROL: FEA Coordinator provides POA to IDDOL, scans all corresponding information into DocuWare, and follows through with all future IDDOL requirements and correspondence.

Power of Attorney (POA) – Revoking Form EFO00104 – Idaho Department of Labor (IDDOL)

POLICY: Consumer Direct (CD) revokes Form EFO00104, after SUTA (UI) account has been retired, in accordance with IDDOL regulations, guidelines, and procedures.

PROCEDURE:

1. Prepare any and all documentation required to revoke Form EFO00104 in compliance with IDDOL regulations, guidelines, and procedures.
    a. Print Form EFO00104 found in participant's electronic file (DocuWare)
    b. Stamp 'REVOKE' above Form EFO00104 title
    c. Sign, write current date and title by 'REVOKE' stamp
    d. Save completed *'Form EFO00104 Revocation'* to temp FEA folder and fax to IDDOL
    e. Initial and date appropriate section (Form EFO00104 Revocation:) on 'ID Termination Checklist'
    f. Scan '*Form EFO00104 Revocation*' into participant's electronic file (DocuWare) as *'UI POA Revocation'*
    g. Scan fax confirmation into DocuWare as *'UI POA Revocation Fax Conf'*

INTERNAL CONTROL: FEA Coordinator provides revoked POA to IDDOL, scans all corresponding information into DocuWare, and follows through with all future IDDOL requirements and correspondence.

Documents will be transferred from FEA Y drive to participant's electronic file (DocuWare)

VI. GENERAL FEA TASKS

Criminal History Background Check (CHC)

POLICY: Either a successful Idaho Criminal History Unit background check or an appropriately executed CHC Waiver must be on file with Consumer Direct for all employees of any FEA program participant

PROCEDURE:

When a Participant is hiring a new Employee, there is a mandatory requirement to perform a Criminal History Check (CHC) unless the Participant and their Support Broker has signed a CHC Waiver for the Community Support Worker (Employee). Consumer Direct has a contractual requirement to verify that any potential employee selected by a Participant in either the adult or children's FEA program has either a satisfactory CHC or a valid waiver on file. Any potential employee with a failed CHC and no waiver cannot receive payment under the Idaho FEA program.

Participant and Applicant Responsibilities

1. The Participant will instruct the Employee (Applicant) to contact the Idaho Department of Health and Welfare (DHW), Criminal History Unit, register, and set up an appointment. The applicant should reference agency identification number 1710. This will register the applicant, their application status, and their CHC results under the Idaho Self Direction Program.
2. Under the Idaho FEA program rules, the cost of the CHC is born by the applicant at the time their fingerprints and identification information are taken by the DHW.

Consumer Direct Responsibilities

1. Upon receipt of a New Employee Packet requiring a successful CHC report, the CHC report should be pulled. The results should be available approximately two(2) weeks following the applicant's meeting with the DHW.
2. Go to the Criminal History Unit's web site: www.chu.dhw.idaho.gov
3. Log On to the site:
   - 3.1. Enter the User Name (assigned by the Idaho Medicaid program)
   - 3.2. Enter the Password (assigned by the Idaho Medicaid program)
   - 3.3. Log On as Employer
4. From the home screen you can search by first name, last name, or SSN of applicant.
5. Double click the applicant's name when it appears.
6. Click the Print Clearance Letter Button.
   - 6.1. Print the CHC report as a PDF file
   - 6.2. Barcode and place a copy of the form to be scanned with the New Employee Packet
7. Procedure for notifying Participant/Employer of a satisfactory CHC

7.1. Consumer Direct notifies the Participant immediately by email (or US mail if necessary) that the Applicant has received a satisfactory CHC and their Employee Enrollment can be completed.

8. Procedure for notifying Participant/Employer of failure of Applicant to pass CHC
   8.1. Consumer Direct notifies the Participant and Support Broker immediately by email (or US mail if necessary) that the Applicant has not passed the CHC or has not had a CHC performed and their Employee Enrollment cannot be completed.
      8.1.1. Participant has the option to sign a CHC Waiver or a Waiver of Failed Criminal History Check to complete the enrollment process.
   8.2. Consumer Direct will not complete enrollment of the Applicant unless a signed CHC Waiver is received or a satisfactory CHC has been completed.
9. Document the results of the CHC in the Consumer Direct systems and file the documentation in the Applicant's file.

INTERNAL CONTROL: Either a successful CHC Notification or a completed and signed CHC Waiver is in the employee's files

Office of Inspector General (OIG) Check

POLICY: Evaluate each prospective employee for any exclusion that would prevent them from being employed through the Idaho FEA program, such as: Convictions for program-related fraud and patient abuse, licensing board actions, and default on Health Education Assistance Loans.

PROCEDURE:

1. CDID staff goes to the website for the OIG search (http://exclusions.oig.hhs.gov/) and enters the prospective employee's last name and then first name. If they have indicated a maiden name or "other" name on the I-9 form, click on "Search for Multiple Individuals" and enter their maiden name or other names in the appropriate boxes. Click Search
2. The search results will appear. For a person with no exclusions, the screen will read: "No results were found for last name, first name and the date."
   a. Print the screen, barcode, and place in the employee's file to be processed
3. If the name matches one in the OIG system, the website will request the employee's social security number as a secondary verification of a match.
   a. If exclusions ARE found:
      i. Print the screen
      ii. Notify the employee and Participant that, at this time, this person is not eligible for employment.
   b. If the social security number is NOT found to be a match:
      i. Print the screen, barcode, and scan with the New Employee Packet

ii. Enter the OIG review date in the CHC portion of the contact software

4. An initial OIG check will be performed at the time of hire
5. The OIG report will be checked electronically on a monthly basis for all active employees.

INTERNAL CONTROL: OIG check in personnel file dated prior to initial processing by Consumer Direct

Idaho State Medicaid Exclusion List Check

POLICY: Consumer Direct will screen each prospective employee for exclusion from participation in Medicaid funded health care programs due to inclusion on the Idaho Medicaid Provider Exclusion List

PROCEDURE:

WEB LOCATION: Idaho Department of Health and Welfare http://healthandwelfare.idaho.gov/Providers/MedicaidProviders/tabid/214/default.aspx

1. Go to the website for the Idaho Department of Health and Welfare.
2. Go to the Provider Exclusion List section part way down the page. Open this report by clicking on the hyperlink.
3. Search the list of excluded providers for the name of the potential employee, including any other names as listed on the I-9 form
4. If the potential employee DOES NOT appear on the exclusion list:
    a. Complete the ***Medicaid Exclusion List Verification*** form, checking the box indicating that the potential employee WAS NOT included on the exclusion list
    b. Record the revision date of the Medicaid Exclusion List on the form
    c. Record the date and the Exclusion List was checked on the form Record the date checked in the Criminal History section in Sugar
    d. Include the Medicaid Exclusion List Verification form to be scanned with the New Employee Packet
5. If the potential employee DOES appear on the exclusion list:
    a. Complete the ***Medicaid Exclusion List Verification*** form, checking the box indicating that the potential employee WAS included on the exclusion list
    b. Record the revision date of the exclusion list on the form
    c. Record the date and the Exclusion List was checked on the form
    d. Notify participant and support broker that at this time, the prospective employee is not eligible for employment under a Medicaid funded program. The participant is to be notified immediately by telephone, email or in writing via US mail.

e. In the case of a failed exclusion list check, there will not be a DocuWare file created for the individual. In this case, make a note in Sugar under the participant and employee record and include the completed Medicaid Exclusion List Verification with the note.

Note: A report must be generated for Idaho Medicaid following each payroll run depicting those Participants and their employees that have had background checks waived, those that have required the background checks, any reference numbers for the background checks, OIG check date, and Medicaid Exclusion List check date.

INTERNAL CONTROL: Printed Verification in DocuWare

Certified Family Home (CFH) Certifications

POLICY: Consumer Direct will retain CFH certificates on file for all participants residing in home that is not their own (such as their parent or guardian's home) and the homeowner is being paid to provide supports in the home

PROCEDURE:

A Certified Family Home certification is required by the State when a participant resides in a home that is not their own (such as their parent or guardian's home) and the homeowner is being paid to provide supports in the home.

1. Consumer Direct will include the CFH certificate is on file with the participant's records if the certificate is received with the participant's approved Support and Spending Plan.
2. Without the CFH certification the homeowner can only receive compensation for services conducted outside of the home. Employment agreements are only active for the duration of the plan year. If the certificate is not received with the annual plan the employee will not be able to bill for services in the home until a new agreement and certificate is submitted.

INTERNAL CONTROL: CFH certificate is on file in DocuWare, employee agreements are active for the duration of the current plan.

Monitoring Service Delivery

POLICY: All health and safety concerns related to the Participant are reported to the Care Manager or Case Coordinator and to protective services as appropriate

PROCEDURE:

1. Consumer Direct staff will immediately report any concerns about the health and safety of a Participant including:
    - Allegations of abuse, neglect, and/or exploitation
    - Health, safety, and welfare
    - Non-delivery or extended breaks in service
    - Noncompliance with employer responsibilities

2. The call, action steps, and resolution will be documented in Sugar.
3. If Consumer Direct suspects that a Participant is being harmed or a danger to self or others, the concern will be reported to protective services.

INTERNAL CONTROL: Sugar documentation

Documentation of Services Delivered

POLICY: Consumer Direct documents all contact related to Participant service delivery in Sugar and maintains time sheets in accordance with Federal and State law

PROCEDURE:

1. All contact with the Participant is documented in Sugar
2. The majority of time and mileage submitted for payment is entered online by the employee and approved by the Participant using Consumer Direct's Web Portal: www.MyDirectCare.com
3. For any Participant utilizing paper time/mileage sheets, the Participant or employee emails, faxes, mails, or drops off the time sheets on the due date identified on the payroll calendar. Any time sheets received after midnight on the due date are considered late. Time sheets are reviewed by the administrative staff for:
    - Participant and Employee ID numbers
    - Participant and Employee signatures and dates
    - Legibility
    - Valid in/out times or mileage
    - Valid service codes

- Service Dates
- Use of the correct form

4. Paper time/mileage sheets are scanned and entered into DocuWare. The time sheet is kept electronically for five years.
5. The time/mileage sheet is read by Optical Character Recognition software and entered into the payroll system.
    a. If there are errors on the timesheet such as missing am/pm, end time before start time, overlapping time, or service codes the employee is not authorized to use, payment for those entries is held and the Program Coordinator contacts the participant and/or support broker. The employee will be paid when resolution is achieved.
6. All communication with the participant or their employees is documented in Sugar. Follow-up with the participant may occur based on the nature of the conversation.
7. Any corrections to documentation will be conducted by:
    - Make one line through the error
    - Initial and date the correction
      Or
    - Submit a new form

See payroll processes below for more detail.

INTERNAL CONTROL: Electronic records found in Service Log and copies of Time/Mileage Sheets in DocuWare.

Training Administrative Staff (includes Program Coordinator, Program Specialist, Office Coordinator, and Program Manager)

POLICY: All administrative staff are trained for the positions they are hired into so they are fully prepared to perform the required tasks of the job

PROCEDURE:

1. All staff must complete the Consumer Direct self-directed training curriculum within six months of hire. The majority of the curriculum is completed within three months. The curriculum is comprised of separate topic modules.
2. Once a module is complete it is noted on the Program Coordinator or Administrative Checklist. The supervisor tracks the completion of the modules. Any questions the new employee has about the training materials are discussed with the supervisor.
3. The tests for federal and state training are scanned to InfoHR and filed in their personnel file.
4. The completed checklist is scanned to InfoHR

5. Additionally, staff participate in ongoing training activities during regular staff meetings as well as conferences, classes, and in-services as appropriate. All training is documented in the personnel file retained by HR.

INTERNAL CONTROL: Training records retained in Human Resources

VII. PAYMENT PROCESS

Collecting Employee Time

POLICY: Idaho Consumer Direct collects employee time on a bi-weekly basis to ensure that payroll is processed accurately and consistently

PROCEDURE:

The payroll schedule is issued to the Participant at enrollment and the Employee upon hire. Current payroll schedules can be found on the Consumer Direct website at www.consumerdirectID.com.

1. **Online Entries via Web Portal: www.MyDirectCare.com**
    a. The majority of all time and mileage records are entered online using the MyDirectCare (MDC) website.
    b. All employees and Participants have their own unique credentials on MDC.
    c. An employee enters their time and mileage records into MDC on a schedule determined with their employer, typically on a weekly or bi-weekly basis.
    d. Once the employee's time has been entered, the Participant can log into the MDC site, review their employee's entries, and approve their time/mileage for payment.
    e. The MDC site eliminates the use of unauthorized service codes, incorrect or illegible time entries, and overlapping time issues. Thus, once the time/mileage has been approved, it is automatically queued for processing with the next regular payroll.
    f. All online time must be entered and approved by Wednesday at midnight on the week marked on the payroll calendar for timesheet submittal in order to be included with the current payroll cycle. Time or mileage approved after that time will be queued for the next regular payroll cycle.
2. **Paper Time and Mileage Sheets**
    a. For those Participants who elect to utilize paper time and mileage sheets, the employee records hours worked on a Consumer Direct approved time sheet. Mileage is recorded on an approved mileage sheet.
    b. The Participant and employee sign and date the time and mileage sheets indicating that the hours the employee has worked and the miles claimed are accurate. The Participant's signature and date authorizes payment.
    c. Consumer Direct collects all time/mileage sheets from employees per the published payroll schedule via email, fax, mail, or submission at the CDID office.
    d. The time sheet is date stamped upon receipt. All time and mileage sheets must be received by midnight on Monday of timesheet week or they are considered late and are not guaranteed to be included with the current payroll cycle.
    e. The time/mileage sheet is reviewed by office staff to ensure:
        i. It contains the Participant's signature and date
        ii. The employee has signed and dated

iii. Entries are legible, complete, and all service codes are valid
iv. The signature dates are after the last date of service recorded

f. If the time/mileage sheet is inaccurate, the Participant is contacted to clarify. If the Participant verbally provides necessary information and permission for correction, the CDID staff person makes minor correction(s) and notes the contact on the time/mileage sheet. If necessary, the sheet is returned to the Participant who makes corrections and resubmits the time/mileage sheet.
g. After time and mileage sheets have been reviewed by the local office, they are scanned to DocuWare for processing and retention.
h. The time/mileage sheet undergoes a detailed review by Data Entry while creating the service log entries. If the information is correct, all the time is entered and queued for payment. If there are errors, the correct records are entered, the incorrect records are marked, and the timesheet is sent to Remote Office for review and correction by local CDID staff following the procedure outlined in item f above.
i. Participants and employees are informed at enrollment, on the time sheets, and periodically with newsletters and payroll reminders that errors on time sheets may result in late pay.

INTERNAL CONTROL: 1. All service entries are reviewed, corrected, and paid if possible. 2. Documentation in the electronic records that the Participant has been contacted regarding errors

Preparing Employee's Payroll Checks and Payroll Statement

POLICY: Consumer Direct will accurately, consistently, and reliably prepare employee's payroll checks and payroll statements (check stub)

PROCEDURE:

1. Caregiver Entry and the Payroll Coordinator have previously entered payroll information about each employee into the system, based on forms completed in the enrollment packet (e.g. W-4)
2. Service Log entries are created via the Web Portal or by Data Entry processing paper time/mileage sheets. All appropriate Service Log entries are released to Payroll for processing and payment
3. Data Entry runs Prebill to verify the validity of all Service Log entries.
    a. If there are any problems such as missing rates, overlapping time, or authorization issues, those errors will be corrected with the assistance of the appropriate departments as needed.

4. Payroll Coordinator runs a "Zero Pay" report indicating if there are missing units, rates of pay, or authorization issues
    a. If there is missing data, Payroll contacts Data Entry to make corrections
5. Payroll Coordinator processes assigned benefits and payroll deductions
6. Payroll Coordinator verifies that rate of pay multiplied by the hours worked per each pay period is equal to the gross pay by spot checking a random sample during review of the check preview report
7. Payroll Coordinator prepares payroll checks and issues them to employees, either by direct deposit, paper check, or pay card, and also issues payroll statements to each employee.
8. The payroll statement includes:
    - Name of employee/community support worker
    - Average hourly rate of pay
    - Total hours worked
    - Gross pay
    - A list of all deductions (taxes, insurance, garnishments, and other)
    - Net pay
    - Pay period ending date

INTERNAL CONTROL: 1. Transfer Edit Report (all service log entries) will be run prior to preparing the actual payroll to ensure payroll is correct and the computerized accounting/information system is programmed accurately;
2. Review of the check preview for any unusual transactions

Verifying Employee's Hourly Wage For Regular Pay

POLICY: Consumer Direct verifies that employees' hourly wage is in compliance with program requirements

PROCEDURE:

1. The Consumer Direct Payroll Department reviews mailed materials received from various taxing authorities and reviews all Federal Department of Labor, State Department of Labor, and any other applicable web sites for changes to the federal and state wage and hour rules on at least a semi-annual basis.
2. The Participant completes the Community Support Worker Agreement with his/her employee at hire and with the participant's annual plan. This form is included in the Employee Packet and on the Consumer Direct website.
3. Program Coordinator or Program Specialist reviews the proposed wages from the Participant – Community Support Worker Employment Agreement and compares them against "Reasonable and Customary" rates. Any rates of $15/hr or more require justification for the

enhanced rate and should be included on the Participant's support and spending plan. If needed, wages are verified with the Care Manager/Case Coordinator prior to processing. For the children's program, all rates are verified against the Support and Spending plan. If the rate is not approved on the plan then a corrected wage agreement or plan is needed.

4. Program Coordinator scans the Employment Agreement into DocuWare.
5. Caregiver Entry enters data from the Agreement into the computerized accounting/information system, including entering rates of pay for different services on Employment Agreement.
6. Caregiver Entry notifies the Program Coordinator of any questions related to wages for different services on the Employment Agreement.
7. The Program Coordinator communicates questions to the Participant/employer to clarify wages and services.
8. As necessary, the Program Coordinator obtains a corrected or revised Agreement to ensure that each employee's wage is accurate.
9. The corrected or revised Agreement is scanned into the DocuWare.
10. Caregiver Entry enters revised service codes and related pay rates into the computerized accounting/information system.

INTERNAL CONTROL: The Payroll/FEA Manager randomly reviews a percentage of the employees' pay rates against their Employment Agreement to ensure the pay rate is correct as part of the check preview process

Compute and Deposit State Unemployment Taxes (SUTA) Quarterly for Each Individual Employee of Participant

POLICY: Consumer Direct accurately, consistently, and reliably computes, files, and deposits State Unemployment Taxes for employees of each individual Participant in accordance with Idaho regulations

PROCEDURE:

1. At least semi-annually, review the Idaho Department of Labor website for updates to the rules and regulations for state unemployment and disability insurance taxes.
2. Payroll Coordinator enters rates into the computerized accounting/information system which calculates state unemployment taxes for each Participant based on the amount of wages paid to each employee per quarter.
3. Payroll Coordinator reports unemployment taxes individually for each Participant, but taxes are deposited in the aggregate per state requirements.
4. State unemployment taxes are paid either electronically or manually by the end of the month following quarter end.

5. Confirmation is furnished to the Payroll/FEA Manager and becomes part of the quarterly tax file as support documentation.

INTERNAL CONTROL: 1) All quarterly filings are reviewed by the Payroll/FEA Manager prior to filing; 2) SUTA deposit reflected on report generated by computerized accounting/information system

Computing, Withholding, Filing, and Depositing Quarterly Federal Income Tax for Employees in the Aggregate Using IRS Form 941 and Schedules B and R

POLICY: Consumer Direct accurately, consistently, and reliably computes, withholds, files, and deposits federal income tax for employees on at least a quarterly basis

PROCEDURE:

1. Consumer Direct's computerized accounting/information system computes and withholds federal income tax for employees based upon their earnings, exempt status, and allowances claimed on their W-4
2. The Payroll Coordinator completes Form 941 with Schedules B and R to file payroll taxes (reporting amount of federal income tax withheld and both employee and employer shares of Social Security and Medicare taxes for the reporting period).
3. The Payroll Coordinator deposits federal income tax withholdings via EFTPS with each payroll according to the appropriate schedule listed in Circular E Publication 15.
4. Form 941 with Schedules B and R is signed by a Corporate Officer before filing.
5. Form 941 with Schedules B and R is filed by the Payroll Coordinator on a quarterly basis by the end of the month after quarter end. (See Form 941 and instructions)
6. Confirmation of the deposit is furnished to the Payroll/FEA Manager and becomes part of the quarterly tax file as support documentation.

INTERNAL CONTROL: 1) All quarterly filings are reviewed by the Payroll/FEA Manager prior to filing; 2) Payroll/FEA Manager reviews the tax deposit checklist to ensure deposits were made according to schedule; 3) Withholding payments are reflected on a report generated by the computerized accounting/information system

Filing Social Security and Medicare (FICA) Taxes Quarterly in the Aggregate Using IRS Form 941 and Schedules B and R

POLICY: Consumer Direct files Social Security and Medicare taxes quarterly in the aggregate using the IRS Form 94 and Schedules B and R under the Employer Agent's separate FEIN in accordance with IRS Rev. Proc. 70-6 for employees

PROCEDURE:

1. Consumer Direct maintains a system that computes and withholds Social Security and Medicare taxes for employees and employers.
2. Consumer Direct maintains a payroll system that identifies each Participant's FEIN and can file in the aggregate using Consumer Direct's separate FEIN.
3. Each pay period, the Payroll Coordinator deposits Social Security and Medicare withholding according to the appropriate schedule listed in Circular E Publication 15.
4. The Payroll Coordinator files IRS Form 941 and Schedules B and R quarterly by the end of the month after quarter end. (See Form 941 and instructions)
5. Form 941 and Schedules B and R is signed by a corporate officer before filing.
6. A copy of Form 941, Schedule R, and Schedule B is placed in the quarterly report file.

INTERNAL CONTROL: 1) All quarterly filings are reviewed by the Payroll/FEA Manager prior to filing; 2) Payroll/FEA Manager reviews the tax deposit checklist to ensure deposits are made according to schedule; 3) Payment of FICA taxes is reflected on a report generated by the computerized accounting/information system

Relationship Disclosure Form

POLICY: Consumer Direct maintains a system to ensure that FICA (Social Security and Medicare), FUTA, and SUTA are not withheld or paid for family members who are paid employees and who are exempt from paying into FICA, FUTA, and SUTA in compliance with IRS rules (FICA and FUTA per IRS Publication 15 and SUTA per Publication 926: *Household Employer's Tax Guide*)

PROCEDURE:

1. At least semi-annually, the Payroll/FEA Manager reviews the IRS and Idaho State Tax Commission website, mailed materials from taxing authorities, and electronic communications for updates to the rules and regulations for state unemployment and disability insurance taxes.
2. At the time of hire, the employee completes the Participant – Employee Relationship Disclosure Form contained in the New Employee Packet.
3. The ERD form is scanned into DocuWare with the employee's initial documentation by the Program Specialist.
4. Caregiver Entry staff enter the exemption into the payroll system as indicated by the employee on the ERD form.

5. CDMS' computerized accounting/information system is programmed to identify exempt employees. No deductions are withheld from the pay for any employee so identified in the system.

INTERNAL CONTROL: Reviewed by Payroll/FEA Manager during Quarterly Report filing

Notification to Participants and Employees About Late Payment

POLICY: Consumer Direct notifies Participants and employees if payments will be generated or distributed late

PROCEDURE:

1. Consumer Direct processes all approved time sheets, mileage sheets, and vendor payment request forms as outlined in relevant procedures.
2. All payments will be documented in the computerized accounting/information system that accurately tracks the status of payments.
3. The Payroll Coordinator will research any payroll inquiry and work with the Program Coordinator and Data Entry to resolve any problems.
4. Payment errors, including pay checks and vendor payments, that are Consumer Direct's error will be corrected and manually paid immediately. Notification will be given verbally to the employee and Participant regarding when the payment has been made. Payments will be distributed to individuals using the payment method reflected on their Payroll Selection Form.
5. Payment errors, including time and vendor payments, that are the employee's or Participant's error will be paid during the next scheduled payroll cycle. If late time sheets are a frequent problem, a Corrective Action Plan may be warranted.
6. If errors exist that will delay payment, the Program Coordinator contacts the Participant and employee as soon as the delay in payment is identified. This contact is recorded electronically and associated with the Participant's or employee's records.
7. Consumer Direct scans all documents into the electronic files

INTERNAL CONTROL: Report generated by the computerized accounting/information system of active employees who will not be paid. Payroll inquiries tracked through Sugar.

Lost, Stolen, or Improperly Issued Checks or Improperly Cashed Checks

POLICY: Consumer Direct will re-issue lost, stolen, or improperly issued checks at no expense to the Participant or the Department. Consumer Direct tracks and logs occurrences of improperly cashed or issued checks and shall stop payment on checks when necessary

PROCEDURE:

1. Consumer Direct processes all approved time sheets, mileage sheets, and vendor payment request forms as outlined in relevant procedures.
2. All payments will be documented in a computerized accounting/information system that accurately tracks the status of payments.
3. The Payroll Coordinator/Accounts Payable Clerk will research any payroll inquiry or vendor payment inquiry related to lost, stolen, or improperly issued checks and work with the Program Coordinator and Data Entry to resolve any problems. Any contact with a participant/employee related to these issues is recorded in Sugar.
4. Lost, stolen or improperly issued checks will be reissued within 14 calendar days of when the error occurred, provided Consumer Direct is aware of the situation within that timeframe.
5. If the error is Consumer Direct's, a special payroll is run. Consumer Direct will re-issue lost, stolen, or improperly issued checks at no expense to the Participant.
6. The Payroll Coordinator/Accounts Payable Clerk will stop payment on checks when necessary.
7. Consumer Direct scans all documents related to lost, stolen, or improperly issued checks or improperly cashed checks into the electronic files (DocuWare or Sugar).
8. Checks will be logged on a spreadsheet when it is discovered a check was improperly issued, reissued, or cashed.
    a. Original check information, check issue, action steps and reissued check information is tracked

INTERNAL CONTROL: Report generated by the computerized accounting/information system of lost, stolen, or improperly issued checks or improperly cashed checks.

Processing All Judgments, Garnishments, Tax Levies, or Any Related Holds on Participant-Employed Support Service Worker's Pay

POLICY: Consumer Direct processes all judgments, garnishments, tax levies, or any related holds on Participant-employed support service workers' pay as may be required by local, state, and/or federal laws.

PROCEDURE:

1. Payroll Assistant logs all judgments, garnishments, and tax levies
2. Payroll Coordinator reviews the garnishments, tax levies, or any related holds; enters data into the employee's electronic payroll file and withholds payment as proscribed.
3. Accounts Payable remits payments timely to the appropriate agency in accordance with the garnishments, tax levies, or any related holds.
4. Payroll Coordinator enters change in computerized accounting/information system to reflect that garnishments are not paid when writs are expired.

INTERNAL CONTROL: General Ledger verifies that the amount withheld from the employee's pay was paid to the appropriate agency. Variance report reflects change in pay and Payroll/FEA Manager confirms garnishment or lack thereof

Processing Vendor Payment Requests

POLICY: Consumer Direct will process vendor payment requests submitted by the program Participants

PROCEDURE:

1. All Vendor Payment Requests (VPR) are date stamped upon receipt at the Consumer Direct office.
2. The Program Coordinator reviews the request for payment form to ensure that it has been completed correctly. A voided receipt, unpaid invoice, or hard quote must also be attached.
3. The Program Coordinator reviews the request, specifically verifying the following:
   a. Participant Name and ID are on the VPR form
   b. Vendor Name and Address are on the VPR form
   c. W-9 is On File or Attached
      i. A W-9 is required for any vendor providing a service, and for any vendor that is not incorporated (i.e. "Inc" or "Corp" designation)
   d. Item/Service is Authorized on the Support and Spending Plan (SSP)
   e. Service Code on VPR Matches the Authorized Service Code on the SSP
   f. VPR Amount is Approved on the SSP
      i. Single purchase amount does not exceed the authorized amount
      ii. Total purchases of item/service do not exceed the authorized amount or total units
   g. Funds are Available in the Remaining Budget
4. If there are any problems with the Request or documentation, the Program Coordinator

will contact the Participant by email and/or phone to correct the problem

5. If the Request is determined to be complete, correct, and there are sufficient funds remaining in the budget category, it will be scanned into DocuWare for processing by the CDMS Data Entry and Accounts Payable departments.
6. The week of payroll, as soon as the payroll processing is complete, Data Entry will enter all the Vendor Payment Requests that have been scanned or corrected and are ready to be processed.
7. Once entry is complete, Data Entry will notify Accounts Payable to pull all the Vendor Payments on the Tuesday of payroll week.
8. Vendor Payment checks will be placed in the mail on or before Thursday of the week they are processed.
9. Consumer Direct issues a check made out to the Vendor, Agency, or Independent contractor. Vendor checks are mailed to the Participant. Agency and Independent Contractor checks are mailed directly to the Agency or I/C unless Consumer Direct has been specifically requested to send the check to the Participant.
    a. An Agency or Independent Contractor agreement with the Participant must be submitted or on file for the checks to be mailed directly to the provider. In the absence of an Agency or I/C agreement, the provider is considered a vendor and the checks are mailed to the Participant for distribution.
10. A copy of the processed VPR is maintained as an electronic file in DocuWare.
11. Only expenses specifically approved on the Participant's Support and Spending Plan will be paid.
12. Per Idaho Code restrictions, Consumer Direct will not reimburse the Participant for any expenses. All Vendor Payment Requests must be prior to payment for the goods or services.

INTERNAL CONTROL: 1. When Accounts Payable prints a check, the check number and issue date are recorded on the VPR form in DocuWare. 2. Report in the computerized accounting/information system documenting all vendor payments on behalf of a Participant

Reporting all New Employee Hires to the State

POLICY: Consumer Direct reports all new hires as required by the State. Per direction from Idaho Medicaid, Consumer Direct reports all newly hired employees to the Idaho Department of Health and Welfare on a monthly basis. The Department then transmits the information to the Idaho Department of Labor.

PROCEDURE:

1. New employee completes a W-4 at the time of hire.

2. The new employee's paperwork, including the W-4, is submitted to Consumer Direct.
3. Program Specialist reviews the new hire packet, then scans the completed paperwork, including the W-4, into the CDMS computerized accounting/information system.
4. Caregiver Entry enters the W-4 into the computerized accounting/information system.
5. A report is generated each month identifying all new hires based on which individuals had employment start dates during the previous two month period, but have not yet been reported.

Note: The two month period is monitored to account for individuals who started working, but did not submit their paperwork to Consumer Direct in a timely manner.

INTERNAL CONTROL: 1. Computerized accounting/information system generates report of new hires. 2. A CDID staff member audits the new hire list which is then posted to the SFTP site by the 10th of the month

Paying Employees by Direct Deposit

POLICY: Consumer Direct offers direct deposit to all employees

PROCEDURE:

1. The employee completes a Direct Deposit Form, included in New Employee Packets, and provides a voided check or a document from their bank indicating the routing and account numbers.
2. The Program Coordinator or Program Specialist reviews the Direct Deposit Form to make certain it is completed correctly and completely.
3. If the form is completed correctly, the Program Coordinator or Program Specialist scans the Direct Deposit Form to DocuWare.
4. If there is missing information or an error on the Direct Deposit Form, the CDID staff member contacts the employee to obtain the missing or corrected information.
5. Caregiver Entry staff enter the employee's bank routing and account numbers into the computerized accounting/information system as part of the employee's electronic record.
6. The Payroll Coordinator will verify the employee's bank account information by submitting the bank routing and account information to his/her bank as a pre-note with the next regular payroll run.
7. Payroll receives a report from the bank indicating the status of the pre-note:
    a. If the pre-note was successful, the employee's electronic record in the CDMS system is marked to indicate the account information has been successfully pre-noted and direct deposit is authorized.
    b. If there is any problem with the pre-note information uploaded to the bank, the Payroll Coordinator will either correct the problem or contact CDID for assistance. The Program Coordinator will then contact the employee to verify and correct the

information, the corrected document(s) will then be scanned to DocuWare for processing and pre-noting, starting with step 5 above.

8. The employee will receive a paper check until their bank account is successfully pre-noted.
9. Once successfully pre-noted, the Payroll Department will disburse employee pay through direct deposit until cancelled by the employee.
10. If problems are encountered with direct deposit, e.g. bank is sold, routing numbers change, account is closed, etc., a paper check is sent to the employee until direct deposit has been reestablished.

INTERNAL CONTROL: A file for direct deposit is created and uploaded to the federal ACH system. Once uploaded, the totals are verified against the internal ACH report by the Payroll Coordinator and a Direct Deposit Bank Report is printed from the bank website. A senior financial staff member reviews and releases the ACH batch at the bank website. The Payroll Coordinator verifies that each ACH batch has been released. Payroll/FEA Manager monitors the process.

Maintaining Information in Payroll Records and Internal Service Log

POLICY: Consumer Direct maintains a system that accurately contains information in payroll records for a minimum of five (5) years as required by the state.

PROCEDURE:

1. Employee payroll information that is retained includes:
    - Name and address
    - Occupation
    - Date of hire
    - Social security number
    - Rate of pay
    - Bank information
    - Employer of record
    - Tax filing status
    - Amount paid each pay period
    - Deductions (taxes, insurance, etc.)
    - Beginning and ending hours worked each day (Service Log)
    - Termination date

2. All relevant hard copy documentation, including, but not limited to, employment paperwork, time sheets, and vendor payments is scanned into DocuWare and associated with the Participant's and/or Employee's electronic records, as appropriate.
3. Files are audited annually for all relevant documentation.
4. Records are retained for a minimum of five years after the employee terminates employment.

INTERNAL CONTROL: Payroll Coordinator maintains information in the payroll records. Information is verified by the Payroll/FEA Manager

VIII. END OF YEAR PROCESSING

Preparing Annual IRS Form W-2: Wage and Tax Statement for Employees

POLICY: Consumer Direct prepares, files, and distributes IRS Forms W-2: *Wage and Tax Statement* for employees in accordance with IRS instructions and regulations for agents. Consumer Direct files electronically in the aggregate.

PROCEDURE:

1. Payroll Coordinator summarizes quarterly payroll reports to ensure the total amounts from the quarterly reports equals the annual W-2's generated.
2. W-2s are printed annually for each employee
3. W-2's for all employees are mailed each year by date designated by the IRS.
4. Payroll/FEA Manager files the necessary electronic information (W-2s) with the State of Idaho by February 28th.

INTERNAL CONTROL: Annually Payroll Coordinator prepares a spreadsheet to reconcile the W-2's to the quarterly reports. The Payroll/FEA Manager reviews the spreadsheet prior to W-2's being printed.

Preparing Annual IRS Form W-3: Transmittal of Wage and Tax Statements

POLICY: Consumer Direct prepares and files IRS Form W-3: *Transmittal of Wage and Tax Statements* for Participants in accordance with IRS instructions and regulations for agents. Consumer Direct files electronically in the aggregate.

PROCEDURE:

1. Payroll Coordinator summarizes the annual W-2's
2. Payroll Coordinator prepares Form W-3, including related W-2s, for each Participant
3. Payroll follows procedures outlined in Circular E to prepare and file Form W-3
4. Payroll files the necessary electronic information (W-3) with the Social Security Administration by February 28th.

INTERNAL CONTROL: Annually Payroll Coordinator prepares a spreadsheet to reconcile the W-2's to the quarterly reports/Forms 941. The Payroll/FEA Manager reviews the spread sheet. A copy of the W-3 and spreadsheet are provided to the General Ledger Accountant for reconciliation to financial statements.

Filing Federal Unemployment Insurance (Form 940)

POLICY: Consumer Direct accurately, consistently, and reliably computes, deposits, and files federal unemployment insurance taxes (FUTA) in the aggregate on a quarterly basis under Consumer Direct's FEA FEIN. IRS Form 940 and Schedule R: *Employer's Annual Federal Unemployment (FUTA) Tax Return* are filled annually in accordance with IRS regulations related to FEA responsibilities.

PROCEDURE:

1. Consumer Direct's computerized accounting/information system computes federal unemployment insurance taxes (FUTA) for community support workers with each payroll.
2. On an annual basis, the Payroll Coordinator produces an aggregate report showing wages paid for the year and FUTA due under the FEA program.
3. The Payroll Coordinator completes form 940 by January 31st each year (See Form 940 and instructions).
4. A corporate officer signs the form before filing.
5. Federal unemployment insurance taxes (FUTA) due are deposited upon completion of the annual Form 940 and Schedule R. Deposits are computed and made quarterly as necessary based on the appropriate limits.
6. A hard copy of the IRS Form 940 and Schedule R is filed in the "Aggregate File" for future reference.
7. Any payment remitted requires approval from the Payroll/FEA Manager.
8. Confirmation of the deposit is furnished to the Payroll Lead Coordinator and becomes part of the quarterly tax file as support documentation.

INTERNAL CONTROL: 1) All documents are reviewed by the Payroll/FEA Manager prior to filing; 2) Payroll/FEA Manager reviews the tax deposit checklist to ensure deposits are made according to schedule; 3) Withholding payments are reflected on a report generated by the computerized accounting/information system.

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 will file an amendment with Form 941X as necessary.
3. Payroll scans and files all relevant documentation in the company's electronic records system.

INTERNAL CONTROL: 1) Schedules/reports are reviewed by the Payroll/FEA Manager prior to payments being disbursed. 2) Summary schedules are prepared by Payroll/FEA Manager and are reviewed by the Accounting Department. 3) Form 941X matches the summary schedules

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 files.

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 agreed back to the form 941X filed with the Internal Revenue Service by Payroll.

IX. PARTICIPANT SURVEY

Participant Satisfaction Survey

POLICY: Consumer Direct will complete an annual Participant satisfaction survey

PROCEDURE:

1. Once annually, Consumer Direct will distribute a Participant Satisfaction Survey. The Satisfaction Survey will gather information about the Participant's satisfaction regarding his/her experience with, the information from, and assistance provided by Consumer Direct.
2. The Survey will contain questions regarding Participant's satisfaction; type of assistance and support received; usefulness of assistance and materials; and suggestions for changes to the process and materials.
3. Information from responses to the Participant Satisfaction Survey are compiled, analyzed, and summarized by the CDMS Quality Improvement Department.
4. The results are submitted to the Executive Management Team and the Consumer Direct Advisory Council for review. Strengths and areas of concern are addressed.
5. Alternate methods are provided for Participants to respond to surveys if they choose to respond by methods other than by mail. These alternate methods include, but are not limited to, telephone interview and use of technology such as online surveys.
6. In addition, Participants whose primary language is other than English will be offered alternate methods to provide information regarding their satisfaction with Consumer Direct and FEA services. Where 10% of the population speaks another language as their primary language, Consumer Direct translates materials into the alternate language. For example, the satisfaction survey has been translated into Spanish. For Participants speaking other languages, Consumer Direct uses interpreters available through TeleInterpreters, a company that provides on-demand language services for 170 different languages, or a local interpreter to gather responses to the satisfaction survey verbally.
7. If the data indicates that concerns exist, the Consumer Direct Compliance Director works with the Operations Director and Program Manager to develop a corrective action plan to address concerns. As this plan is implemented, data collection, analysis, and review continue to assess the effectiveness of the corrective action steps.
8. A Summary Report and scans of the actual surveys are posted to the SFTP site on or before December 15th per the requirements of Idaho code.

INTERNAL CONTROL: Consumer Direct's Compliance Director obtains copies of the satisfaction surveys and the data compilation, analysis, and summary. A product review of the report by the Compliance Director documents completion of the report.

X. REPORTS AND DOCUMENTS

Required Payroll, Monthly, and Quarterly Reports

POLICY: CDID will issue all reports required or committed to under Idaho code, Provider Contract, or Medicaid request. Participants will be issued a monthly Spending Summary report and a Detailed Spending report via mail or online (www.MyDirectCare.com) to track spending

PROCEDURE:

The following reports will be generated and issued as indicated:

1. **Account Summary Statements** – This report provides an overview of each participant's budget and includes the budgeted amount, amount spent fiscal year to date, remaining amount, and the amount currently pending. This information is broken down by service type and is displayed both graphically and numerically. The report is automatically generated by program and region (i.e. 14 reports total).
   - Payroll Reports:
     - Method: Posted to SFTP site
     - Frequency: Bi-weekly following each payroll
   - Monthly Reports:
     - Method: Sent via USPS to participants as requested
     - Frequency: Monthly by the 10th of the month
2. **Detailed Spending Reports** – This report provides a detailed breakdown of each participant's spending activities during the period reviewed. The report is subtotaled by employee or vendor and shows each individual service log entry. The report is automatically generated by program and region (i.e. 14 reports total).
   - Payroll Reports:
     - Method: Posted to SFTP site
     - Frequency: Bi-weekly following each payroll
   - Monthly Reports:
     - Method: Sent via USPS to participants as requested
     - Frequency: Monthly by the 10th of the month
3. **Demographic Reports** – This report provides general client demographics along with current employee counts for each participant. The report is automatically generated by program (i.e. 2 reports total).
   - Method: Posted to SFTP site
   - Frequency:
     - Bi-weekly following each payroll
     - Monthly by the 10th of the month

4. **Medicaid Billing Report** – This report provides details on all the items processed by Consumer Direct, billed thru the Molina system, and paid by Idaho Department of Health and Welfare during the reporting period, broken out by Participant. The Finance Unit of Idaho Medicaid compares this report to their records of program expenditures and forms the basis for ongoing and quarterly reconciliation between DHW and Consumer Direct. A single report is automatically generated combining the adult and children's programs.
    - Payroll Reports:
        - Method: Posted to SFTP Site
        - Frequency: Bi-weekly following each Payroll
    - Monthly Reports:
        - Method: Posted to SFTP Site
        - Frequency: Monthly by the 10th of the month
    - Quarterly Reports:
        - Method: Posted to SFTP Site
        - Frequency: Quarterly by the 10th of the month following quarter's end
5. **Report for Waiver 372 – CMS Expense Report** – This report captures all of the year to date expenditures associated with the particular program per Consumer Direct's records. The Finance Unit of Idaho Medicaid compares this report to their chart of program expenditures and it is then forwarded to CMS for proper reimbursement. The report is automatically generated by program (i.e. 2 reports total).
    - Payroll Reports:
        - Method: Posted to SFTP Site
        - Frequency: Bi-weekly following each Payroll
    - Monthly Reports:
        - Method: Posted to SFTP Site
        - Frequency: Monthly by the 10th of the month
6. **Criminal History Check Report** – This report provides a breakdown, by participant, indicating which employees the participant has waived the background check on, which employees passed or failed the background check, the criminal history reference number, the date the background check was submitted, the date the Medicaid Exclusion List was reviewed, and the date the OIG report was checked. A single report is generated which combines the adult and children's FEA programs.
    - Method: Posted to SFTP site
    - Frequency: Bi-weekly following each payroll
7. **Quality Management Analysis Report** – This report provides a quality management analysis review of the CDID operations. The review is manually conducted by the Program Manager or their designee and the report is automatically generated based upon the review information.
    - Method: Posted to SFTP site
    - Frequency: Quarterly by the 25th of the month following the quarter
8. **Quarterly Financial Statements** – This report includes the quarterly Balance Sheet and Income Statement for CDID. The report is generated by the CDMS financial group and reviewed by the Chief Financial Officer prior to release as an unaudited draft version.
    - Method: Secure email to the Medicaid Financial Unit, Sr. Financial Specialist

- Frequency: Quarterly by the 25th of the month

9. **Complaint Log** – This document is an electronic log of complaints and resolutions as required by Idaho code. The report is manually generated by the Program Manager whenever a complaint is received or the status of a complaint investigation has changed.
   - Method: Posted to SFTP site
   - Frequency: Within 24 hrs of receiving a new complaint or any status change on an existing complaint
10. **Complaint Report** – Per Idaho code, CDID is required to "receive, respond to, and track complaints from any source". This report provides the details and resolution of a complaint received by CDID.
    - Method: Posted to SFTP site
    - Frequency: Upon resolution of any complaint
11. **Complaint and Resolution Summary Report** – This report is an analysis of complaints received on a quarterly basis to evaluate the quality of service to participants and identify any corrective actions and/or program improvements needed and implemented. This report is generated manually by the Program Manager and covers all FEA programs.
    - Method: Posted to SFTP Site
    - Frequency: Quarterly by the 10th of the month following the end of quarter
12. **New Hire Report** – Consumer Direct reports all FEA program new hires as required by the State. The Idaho Department of Labor has requested that Idaho Medicaid report new hires on a monthly basis. This report is generated manually and covers all FEA programs.
    - Method: Posted to SFTP Site
    - Frequency: Monthly by the 10th of the month
13. **Customer Satisfaction Survey** – Per Idaho code, CDID is required to conduct an annual Participant Satisfaction Survey and provide a report on the results to Idaho Medicaid. This report involves several deliverables and a coordinated effort between the QI group and CDID.
    - Approval of Survey:
      - Method: Submitted to Idaho Medicaid via email
      - Frequency: Annually on or before September 9th
    - Conduct Survey:
      - Method:
        - Distributed via USPS
        - Responses via USPS, Online Survey, or Telephone
      - Frequency: Distributed annually starting October 1st
    - Reporting of Survey Results:
      - Method: Posted to SFTP site
      - Frequency: Annually on or before December 15th

INTERNAL CONTROL: All reports generated and posted in a timely manner

XI. QUALITY ASSURANCE

Quality Management Plan for Consumer Direct

POLICY: Consumer Direct operates in full compliance with federal and state standards and the organization's policy and procedure documents

PROCEDURE:

Consumer Direct's Quality Management Plan has several components: A) Expected Standards/Outcomes and Measures for Consumer Direct; B) Policies and Procedures Addressing These Standards/Outcomes; C) Quality Monitoring Strategies; D) Data Analysis and Use; and E) Implementation of Quality Improvement Strategies. Each of these components is described more fully below.

A) Expected Standards/Outcomes and Measures

The Expected Standards/Outcomes for Consumer Direct reflect the services (tasks and activities) that Consumer Direct will complete with Participants and employees. Each expected standard/outcome contains a performance criteria. These standards/outcomes are contained in the table below. Documentation necessary to determine achievement of the performance criterion for each standard/outcome is also outlined in the table.

1. Manage Phone, Fax, Computer Link: Manage toll free telephone line and fax and computer link to answer questions or discuss problems related to financial activities.
   Required Level of Expectation**:** 95% of queries responded to within two(2) business days

2. Assistance to Participants: Provide clear, accurate, and timely information and assistance to Participants.
   Required Level of Expectation: 90% positive Participant responses on questions on satisfaction survey (scored 4 or higher)

3. Access to Phone, Fax, Email, Web: Maintain toll free telephone number, fax number, email, and web site access.
   Required Level of Expectation: 90% positive responses on questions on satisfaction survey and less than 2% customer complaint

4. Fiscal Support & Consultation: Provide Participants with fiscal support and consultation.
   Required Level of Expectation: 95% of calls responded to within one(1) business day and five(5) business days for written correspondence

5. Complaint/Resolution Tracking: Maintain a register of complaints of Participants, employees, and other stakeholders, with corrective action implemented within one(1) day of the complaint.
   Required Level of Expectation: 95% responded to within one(1) business day

6. Participant Enrollment Packets**:** Prepare and distribute enrollment packets to Participants.
   Required Level of Expectation: 100% received as documented by signatures on enrollment paperwork

7. Employment Packets: Prepare and distribute employment packets for Participants to complete with each employee hired.
   Required Level of Expectation: 100% received as documented by signatures on employee paperwork

8. Enrollment: Each Participant will receive a face-to-face visit (typically via group Guide Training)
   Required Level of Expectation: 100% of Guide Trainings will be scheduled within two(2) days of the call.

9. Federal & State Forms Submitted: Prepare and submit **all** required federal and state forms for all Participants and Participant's employees.
   Required Level of Expectation: 100% submitted without errors

10. Mandatory Reporting, Withholding, and Payment: Perform all mandatory reporting, withholding, and payment actions according to the compliance requirements of the state or federal agencies.
    Required Level of Expectation: 100% submitted within thirty(30) days of quarter end

11. Payroll Checks: Issue payroll checks within the two week payroll cycle, after receipt of completed, approved time
    Required Level of Expectation: Less than 2% errors per quarter, given approved time submitted within payroll cycle

12. Distribution of Payments: Distribute payments to Participant's employees in accordance with Participant's Support and Spending Plan
    Required Level of Expectation: 99% accuracy

13. Satisfaction Surveys: Distribute a satisfaction survey annually to each active Participant who has received Fiscal Employer Agent services from Consumer Direct within the past year

Required Level of Expectation: Distributed to number greater than or equal to 95% of individuals served annually as documented by a mailing list

B) Program Policies and Procedures Addressing These Standards/Outcomes

Program policies and procedures necessary to accomplish the outcomes/standards for Consumer Direct as illustrated in the previous table are contained in the Consumer Direct FEA Policies and Procedures manual and the Idaho Practice Manual. These manuals outline specific procedures for the tasks and activities that are completed to achieve the outcomes/performance standards. See the respective manuals for more details about these procedures.

C) Quality Monitoring Strategies

The process by which the expected outcomes and performance standards will be monitored is described below. Monitoring strategies include the methods that will be used to collect data/information about different parts of the Consumer Direct program. This data includes:

- Indicators of program performance related to the outcomes/standards
- Information about Participant complaints and resolutions
- Information about Consumer Direct quality improvement activities

Program performance includes information regarding achievement of expected outcomes/standards in services delivered with Participants and employees such as Support Brokers and Community Support Workers. Procedures for monitoring Consumer Direct's accomplishment of expected standards/outcomes include the following:

- Consumer Direct staff and CDMS staff complete tasks and track related data using the computerized accounting/information system and related databases (e.g. Sugar) in accordance with procedures described elsewhere in this manual.
- Data is tabulated, analyzed, and summarized monthly and quarterly by CDMS and Consumer Direct staff for performance standards # 1, and 3 - 12.
- Participant satisfaction data (performance standards # 2 and 13) is tabulated, analyzed, and summarized annually by CDMS staff.
    - If the data indicate that concerns exist, the Consumer Direct Quality Management Director works with the Operations Director and Program Manager to develop a corrective action plan to address concerns.
    - As the corrective plan is implemented, data collection, analysis, and review continue to assess the effectiveness of the corrective action steps and Consumer Direct's performance related to specific standards.

Consumer Direct monitors any complaints very closely and uses the complaint process as a means to improve performance and customer service. Consumer Direct collects information from individuals who call, write, or email with a complaint. The quality management procedure includes:

1. Complaint information is collected and documented in Sugar as a Complaint Feedback.
   a. All complaints are documented and posted to the SFTP site within 24 hrs
   b. Complaints are investigated and addressed as quickly as possible
   c. The resolved complaint and the updated Complaint Log are posted to the SFTP site in a timely manner.
2. A Complaint Resolution and Summary report is generated by the Program Manager on a quarterly basis. This report is also reviewed by the Operations Director. The Complaint Resolution and Summary report is posted to the SFTP site by the 10th of the month following the end of a calendar quarter.

Consumer Direct maintains an ongoing process of Internal monitoring/program reviews which involves:

1) Review of Participant electronic files/records
2) Review of employee electronic files/records
3) Review of processes and procedures by which Consumer Direct accomplishes FEA services.
4) Specific procedures include:
   a) Consumer Direct will complete a file/record review of 20% of randomly sampled active Participant and employee files each quarter.
   b) As Participant and employee files are reviewed, they are eliminated from the total list of Participants so each review examines different files/records.
   c) The review is conducted by CDID staff, designated by the Program Manager.
   d) The file review is a review of all of the documents and tasks that are required to be part of the file in order to demonstrate delivery services with Participants.
   e) If the review indicates that concerns exist, the Quality Management Committee will work with the Program Manager to develop a corrective action plan.

D) <u>Data Analysis and Use</u>

Data described in (3) will be aggregated across Participants in the program. Descriptive statistics will be calculated to examine frequencies, durations, percentages, and averages. Trend analysis will be completed with specific data sets, depending on the evaluation question. In addition, comparison of actual performance with benchmarks (performance criterion for standards) will be completed. The Quality Management Committee reviews this data and recommends adjustments to policies or corrective actions as appropriate.

E) Implementation of Quality Improvement Strategies

For each activity outlined above, a specific individual(s) is identified who is responsible for accomplishing that particular activity, as well as the timeline within which the activity will be completed. Progress in implementation (comparing activities planned and completed for the period) will be reviewed by the Operations Director monthly. Following this review, quality improvement activities will be implemented as needed. If review and analysis indicates that performance standards and/or planned activities have not been accomplished as planned, appropriate corrective action steps will be implemented by the Operations Director and Program Manager. If necessary, reallocation of resources will occur or activities will be modified. Quarterly, the Operations Director will review the implementation of the quality improvement activities with the Chief Operating Officer and Consumer Direct's Executive Management Team.

XII. DISASTER RECOVERY PLAN

Disaster Recovery Plan

POLICY: Consumer Direct maintains a Disaster-Recovery Plan to mitigate the impacts and damage to computing assets and computing capabilities resulting from natural disaster, theft, or physical plant damage, in order to sustain business operations.

PROCEDURE:

1. The plan covers:
   a. Listings for key contacts, suppliers, equipment, and materials
   b. Providing a Recovery Flow Sheet outlining and tracking steps from initial response and damage assessment to restored system and data testing
   c. Reviewing, testing, and updating (annually or as deemed necessary)

2. Hardware and software will be enterprise and be under current support agreements.

3. Data center location(s) will be equipped adequately to support business continuity through reasonable adverse conditions. Currently, we have a data center we manage in Missoula, MT, and we have a secure location in a COLO facility in Lynnwood, WA. Both sites require 2 fact authentication to gain access.

4. Hardware and software will be configured following best practices for the healthcare purposes.

5. Data will be backed up frequently and regularly. Backup schedule for dynamic data will be more frequent; backups are monitored for general size and growth and tested at least twice a month for validity by restoring a file. Backup system(s) are configured to send alerts to ensure timely response to backup issues. Off-site backups will occur in either the Missoula, MT data center or the Lynnwood, WA data center.

6. Firmware and software updates and security patches will be reviewed and installed as deemed necessary.

7. Network and computer security will require a minimum of distinct user login and password. User accounts will be monitored and managed. Network devices will be monitored and managed.

8. Critical systems existing both in the data centers and in remote sites will have power backup via UPS. Data Center locations will have a minimum of UPS and generator backup.

INTERNAL CONTROL: Planned annual testing of plan documented by IT department

XIII. TRANSFER FROM ONE FEA TO ANOTHER

Transfer from One FEA to Another

POLICY: Consumer Direct will be in full compliance with Federal, State, and program regulations when transferring a Participant form Consumer Direct to another FEA

PROCEDURE:

When notified of a transfer to another FEA, the Program Coordinator negotiates a transfer date. All transfers will occur at the end of a fiscal period. Once an acceptable transfer date is determined, Consumer Direct will:

1. Account, in writing on a Transfer of Accounts Form, the funds allocated in the Participant's budget and:

    a. Bill Molina for funds in the individual budget that Consumer Direct must bill on behalf of the employer;
    b. Make payments within the required time frame;
    c. Submit billing adjustments for prior claims and payments from Molina that will not be paid or deposited by the FEA for accrued funds for deposits, withholdings, and employer and employee contributions, and a pending payment that will transfer to the receiving FEA.

2. The amount of funds remaining will be recorded on the Transfer of Accounts Form and sent to the Participant and Care Manager/Case Coordinator. Date sent is recorded in the contact notes.

3. The form is scanned to DocuWare.

4. The Program Coordinator sends a Status Change Form to the FEA Coordinator that starts the transfer of agent. The FEA Coordinator uses the Transfer Checklist as a guide to track the process. The checklist is held as a paper copy until complete and then scanned into DocuWare.

5. The appropriate departments transfer all employer-related and employer-agent related information and reports applicable to the budget, payroll, accrual amounts, and payables. This is tracked on the CDMS FEA Transfer Checklist. Once complete, it is scanned into DocuWare.

6. A final Monthly Summary will accompany the Transfer of Accounts Form sent to the Participant and Care Manager/Case Coordinator.

When Consumer Direct receives transfers:

1. The Program Coordinator will set up an enrollment meeting. A start date is identified with the Participant and Care Manager/Case Coordinator.

2. All Federal and State forms will be completed according to the specific procedures above and include information requested on the Transfer Checklist.

3. The Program Coordinator will validate the budget with the previous FEA. A Transfer of Accounts Form is completed and scanned to Data Entry.

Internal Control: Scanned Transfer Checklist in participant file cabinet

APPENDICES

NOTICE OF PRIVACY PRACTICES

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW THIS NOTICE CAREFULLY.

We understand the importance of privacy and are committed to maintaining the confidentiality of your medical information. We make a record of the medical care we provide and may receive such records from others. We use these records to provide or enable other health care providers to provide quality medical care, to obtain payment for services provided to you as allowed by your health plan and to enable us to meet our professional and legal obligations to operate this Company properly. We are required by law to maintain the privacy of protected health information, to provide individuals with notice of our legal duties and privacy practices with respect to protected health information, and to notify affected individuals following a breach of unsecured protected health information. This Notice describes how we may use and disclose your medical information. It also describes your rights and our legal obligations with respect to your medical information. If you have any questions about this Notice, please contact our Privacy Officer listed below.

Privacy Officer:
Daryl Holzer
(406) 532-1900; (888) 532-1907

Effective Date:
April 1, 2003; Revised March 26, 2013; Updated February 25, 2015

1. Below is a description, including at least one (1) example, of the types of uses and disclosures that this Company is permitted to make for each of the following purposes: treatment, payment and health care operations.

   Disclosures to other health care providers, including, for example, to patients' attending physicians. Submission of claims and supporting documentation including, for example, to organizations responsible to pay for services provided by this Company. Disclosures to conduct the operations of this Company, including, for example, sharing information to supervisors of those who provide care to patients.

2. Below is a description of each of the other purposes for which this Company is permitted or required to use or disclose protected health information without an individual's written consent or authorization.

   To patients, incident to another permitted use or disclosure, by agreement, to the Secretary of the U.S. Department of Health and Human Services, as required by law, for public health activities, information about victims of abuse, neglect or domestic violence, health oversight activities, for judicial and administrative proceedings, for law enforcement proceedings, about decedents, for cadaveric organ, eye or tissue donation, for research purposes, to avert a serious threat to health or safety, for specific government functions, to business associates of this Company, to personal representatives, deidentified

information, to workforce members who are victims of crimes, to workers' compensation programs, for involvement in the individual's care and for notification purposes, with the individual present, for limited uses and disclosures when the individual is not present, and for disaster relief purposes.

3. Other uses and disclosures, such as disclosure of psychotherapy notes, use of protected health information for marketing activities and the sale of protected health information, will be made only with the individual's written authorization and the individual may revoke such authorization.

4. The Company may contact the individual to schedule visits and for other coordination of care activities.

5. The individual has the right to request further restrictions on certain uses and disclosures of protected health information, but this Company is not required to agree to any requested restriction(s), except disclosures must be restricted to health plans if the disclosure is for the purpose of carrying out payment or health care operations and is not otherwise required by law and the protected health information pertains solely to a health care item or service for which the individual or person other than the health plan, on behalf of the individual, has paid this Company in full.

6. The individual has the right to receive confidential communications of protected health information, the right to inspect and copy protected health information, the right to amend protected health information, the right to receive an accounting of disclosures of protected health information and the right to obtain a paper copy of this Notice from the Company upon request.

7. This Company is required by law to maintain the privacy of protected health information and to provide individuals with notice of its legal duties and privacy practices with respect to protected health information and to notify affected individuals following a breach of unsecured protected health information.

8. This Company is required to abide by the terms of this Notice currently in effect.

9. This Company reserves the right to change the terms of its Notice and to make the new notice provisions effective for all protected health information that it maintains. Individuals may obtain a revised copy of this Notice upon request.

10. Individuals may complain to this Company and to the Secretary of the U.S. Department of Health and Human Services if they believe their privacy rights have been violated. Complaints should be directed to Daryl Holzer, Privacy Officer, at this Company at the following telephone numbers (406) 532-1900 or (888) 532-1907. Individuals will not be retaliated against for filing a complaint.

PHONE: (208) 898-0470
280 E CORPORATE DRIVE, SUITE 210
MERIDIAN, ID 83642-2953

HIPAA PRIVACY POLICY STATEMENT

Purpose: *The following privacy policy is adopted to ensure that Idaho Consumer Direct Personal Care, LLC ("Consumer Direct"), complies fully with all federal and state privacy protection laws and regulations. Protection of patient privacy is of paramount importance to Consumer Direct. 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 October 1, 2008; revised March 26, 2013*

Expiration Date: *This policy remains in effect until superseded or cancelled.*

Privacy Official ***Mickey Ogg****; Compliance Officer; (888) 532-1907*

Policy Approved: **Signature on file** **March 26, 2013**
Ben Bledsoe, President/CEO **Date**

I. **Uses and Disclosures of Protected Health Information.** Protected health information is individually-identifiable health information transmitted by electronic media, maintained in any electronic media, or transmitted or maintained in any other form or medium. PHI does not include employment records maintained by Consumer Direct in its capacity as an employer.

A. *Permitted use and disclosures*. Consumer Direct will use or disclose protected health information as follows:

1. To the individual

2. For treatment, payment, or health care operations

3. Consistent with a valid authorization, agreement, or as otherwise permitted by HIPAA

4. In connection with incidental uses and disclosures that occur as a by-product of a use or disclosure otherwise permitted, but only to the extent that Consumer Direct has applied reasonable safeguards and implemented the minimum necessary standard, where necessary

B. *Required disclosures of protected health information*. Consumer Direct is required to disclose protected health information as follows:

1. To an individual, when required by applicable provisions of HIPAA

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2. When required by the Secretary of the U.S. Department of Health and Human Services (the "Secretary") to investigate or determine the covered entity's compliance with HIPAA privacy requirements

C. *Disclosure of minimum necessary information*. When using or disclosing protected health information or when requesting protected health information from another entity, Consumer Direct will make reasonable efforts to limit disclosure of protected health information to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request. Provided,
however, that disclosure of the minimum necessary information does not apply to:

1. Disclosure to or requests by a health care provider for treatment

2. Uses or disclosures to the individual as permitted, required, or authorized by applicable requirements

3. Disclosures made to the Secretary

4. Disclosures required by law

5. Disclosures required for compliance with HIPAA requirements

D. *Use and disclosures of protected health information subject to an agreed-upon restriction*. Consumer Direct will not use or disclose protected health information covered by any restriction to which Consumer Direct and individual agree is in violation of such restriction.

E. *Uses and disclosures of de-identified protected health information*. Consumer Direct may disclose de-identified health information or information necessary to create de-identified information to business associates for such purpose. Business associates are not members of Consumer Direct's workforce and engage in functions involving the use or disclosure of individually identifiable health information.

F. *Disclosures to business associates*. Consumer Direct may disclose protected health information to business associates and may allow business associates to create or receive protected health information on its behalf if Consumer Direct obtains satisfactory assurance that the business associate will appropriately safeguard the information. Such satisfactory assurances must be documented in the form of a written contract or other written agreement or arrangement with business associates that meet applicable requirements. If Consumer Direct knows of a pattern of activity or practice of a business associate that

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constitutes material breach or violation of the business associate's obligation under the
contract or other arrangement, Consumer Direct will take reasonable steps to cure

the breach or end the violation. If such steps are unsuccessful, Consumer Direct may terminate the contract or arrangement or, if termination is not feasible, report the problem to the Secretary.

G. *Deceased individuals*. If under applicable law an executor, administrator, or other person has authority to act on behalf of a deceased individual or of the individual's estate, Consumer Direct will treat such person as a personal representative with respect to protected health information relevant to such personal representation.

H. *Personal representatives*. Consumer Direct will treat personal representatives as individuals. Persons authorized to act on behalf of an individual who is an adult or an emancipated minor in making decisions related to health care are personal representatives, with respect to protected health information relevant to such personal representation. If a parent, guardian, or other person acting *in loco parentis* has authority to act on behalf of an individual who is an un-emancipated minor in making decisions related to health care, Consumer Direct will treat such person as a personal representative unless:

1. The minor consents to such health care services

2. The minor may lawfully obtain such health care services without the consent of a parent, guardian, or other person acting *in loco parentis*

3. A court or another person authorized by law consents to such health care services; or a parent, guardian, or other person acting *in loco parentis* assents to an agreement of confidentiality between Consumer Direct and the minor, with respect to such health care services

Consumer Direct may, however, elect not to treat a person as the personal representative of an individual if:

1. Consumer Direct has a reasonable belief that the individual has been or may be subjected to domestic violence, abuse, or neglect by such person; or

2. Treating such person as the personal representative could endanger the individual, and Consumer Direct in the exercise of professional judgment decides that it is not in the best interest of the individual to treat the person as the individual's personal representative

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I. *Use and disclosures consistent with notice*. Consumer Direct will not use or disclose protected health information in a manner that is inconsistent with the attached notice.

J. *Disclosures by staff members who are victims of a crime*. Staff members who are victims of criminal acts may disclose protected health information to law enforcement officials so long as the protected health information disclosed is about the suspected perpetrator of the criminal act and the protected health information disclosed is limited, consistent with applicable requirements.

II. **Uses or disclosures to carry out treatment, payment, or health care operations.**

A. Consumer Direct may use or disclose PHI for:

1. Its own treatment, payment, or health care operations

2. The treatment or payment activities of any health care provider

3. The health care operations of the entity that receives the information either has or had a relationship with the individual who is the subject of the information, the protected health information pertains to such relationship, and the disclosure is:

a. For "health care operations," including quality assessment and improvement activities, population-based activities relating to improving health and reducing health care costs, case management and care coordination, conducting training programs and accreditation, licensing or

b. Credentialing activities or for the purpose of health care fraud and abuse detection or compliance

B. *Authorization for uses and disclosures*. Consumer Direct will obtain a valid authorization for uses and disclosures of protected health information, unless the use or disclosure is required or otherwise permitted by HIPAA. When Consumer Direct receives a valid authorization, use or disclosure will be consistent with such authorization. Specific authorization will be required to disclosure of psychotherapy notes, except use by the originator for treatment; in training
programs in which students, trainees, or practitioners in mental health learn under supervision to practice or improve their skills in group, joint, family, or individual counseling; use by Consumer Direct to defend a legal action or other proceeding brought by the individual; or for oversight of the originator of psychotherapy
notes consistent with applicable requirements.

1. Valid authorizations must include the following:

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a. A description of the information to be used or disclosed

b. The identification of the persons or classes of persons authorized to make the use or disclosure of the PHI

c. The identification of the persons or class of persons to whom the covered entity is authorized to make the use or disclosure

d. A description of each purpose of the use or

disclosure e. An expiration date or event

f. The individual's signature and date

g. If signed by a personal representative, a description of his/her authority to act for the individual

h. A statement that the individual may revoke the authorization in writing

i. A statement that treatment, payment, enrollment, or eligibility for benefits may not be conditioned on obtaining the authorization or a statement about the consequences of refusing to sign the authorization

j. A statement about the potential for the protected health information to be re-disclosed by the recipient

C. *Uses and disclosures requiring an opportunity for the individual to agree or to object*. Consumer Direct may use or disclose protected health information without the written authorization of the individual, provided that the individual is informed in advance, orally, or in writing of the use or disclosure and has the opportunity to agree to, or prohibit or restrict the disclosure in accordance with applicable requirements. Such permitted uses and disclosures, absent objection, include:

Use of the individual's name, location, and condition described in general terms that do not communicate specific medical information about the individual and the individual's religious affiliation; to maintain a directory of individuals receiving services from Consumer Direct. Such directory information may be disclosed to clergy or to other persons who ask for the individual by name. If the individual is unable to object to this use and disclosure due to emergency circumstances, the information may, nonetheless, be disclosed if consistent with a prior expressed preference

of the individual, if any, that is known to Consumer Direct and in the individual's best interest in the exercise of professional judgment.

Consumer Direct will inform the individual and provide an opportunity to object to uses or disclosures for directory purposes when it becomes practicable to do so.

D. *Uses and disclosures for involvement in the individual's care and notification purposes*. Consumer Direct may disclose to a family member, other relative, or a close personal friend of the individual; or any other person identified by the individual; protected health information directly relevant to such person's involvement with the individual's care or payment related to the individual's health care. Consumer Direct may also disclose protected health information to notify or assist in the notification of a family member, a personal representative of the individual, or another person responsible for the care of the individual of the individual's location, general condition, or death.

E. *Uses and disclosures with the individual present*. If the individual is present for, or otherwise available prior to, a permitted use or disclosure and has the capacity to make health care decisions, Consumer Direct may use or disclose the protected health information if it obtains the individual's agreement, provides the individual with an opportunity to object to the disclosure, and the individual does not object to the disclosure.

F. *Limited uses and disclosures when the individual is not present*. If the individual is not present for, or the opportunity to agree or object to the use of disclosure cannot practicably be provided because of the individual's incapacity or an emergency circumstance, Consumer Direct may, in the exercise of professional judgment, determine whether the disclosure is in the best interests of the individual and, if so, disclose only the protected health information that is directly relevant to the person's involvement with the individual's health care. Consumer Direct may use professional judgment and its experience with common practice to make reasonable inferences of the individual's best interest in allowing a person to act on behalf of the individual to pick up filled prescriptions, medical supplies, x- rays, or other similar forms of protected health information.

G. *Use and disclosure for disaster relief purposes*. Consumer Direct may use or disclose protected health information to a public or private entity authorized by law or by its charter to assist in disaster relief efforts. The above requirements are applicable to the extent that, in the exercise of professional judgment, they do not interfere with the ability to respond to emergency circumstances.

H. If the individual is deceased, Consumer Direct may disclose protected health information to family members or other persons involved in the individual’s care or payment for health care prior to the individual’s death protected health

information of the individual that is relevant to such person's involvement unless inconsistent with prior expressed preferences of the individual.

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III. **Uses and disclosures for which an authorization, or opportunity to agree or object is not required.** Consumer Direct will use or disclose protected health information without the written authorization of the individual or the opportunity for the individual to agree or object by informing the individual orally or seeking the oral agreement of the individual, when required, under the following circumstances:

A. Uses and disclosures required by law

B. Uses and disclosures for public health activities

C. Disclosures about victims of abuse, neglect, or domestic violence

D. Uses and disclosure for health oversight activities

E. Disclosures for judicial and administrative proceedings

F. Disclosures for law enforcement purposes

G. Uses and disclosures about decedents

H. Uses and disclosures for cadaveric organ, eye, or tissue donation purposes

I. Uses and disclosures for research purposes

J. Uses and disclosures to avert a serious threat to health or safety

K. Use and disclosures for specialized government functions

L. Disclosures for workers' compensation

IV. **Other requirements related to uses and disclosures of protected health information.**

A. *De-identification of protected health information*. Health information that does not identify an individual, and with respect to which there is no reasonable basis to believe that the information can be used to identify an individual, is not individually identifiable health information and may be disclosed.

B. Consumer Direct will establish policies and procedures that establish persons or classes of persons, as appropriate, in its workforce who need access to protected health information to carry out their duties, the category or categories of protected health information to which access is needed, and any conditions appropriate to such access, consistent with the principle that staff will have access to minimally necessary information only.

C. When requesting protected health information from others, Consumer Direct will limit any requests to those that are reasonably necessary to accomplish the purpose for which the request is made. For requests that are made on a routine basis, Consumer Direct will develop and implement policies and procedures that limit the protected health information requested to the amount reasonably necessary to accomplish the purpose for which the request is made. Consumer Direct will not use, disclose, or request the entire medical record, except when the entire medical record is specifically justified as the amount that is reasonably necessary to accomplish the purpose of the use, disclosure, or request.

D. Consumer Direct will use and disclose protected health information for marketing purposes consistent with authorization to use or disclose PHI for marketing purposes. If the marketing involves any direct or indirect remuneration to Consumer Direct from a third party, the authorization will include a statement to this effect. "Marketing" means to make a communication about a product or service that encourages the recipients of the communication to purchase or use the product or service. Marketing, however, does not include promotional gifts of nominal value or face-to-face communication encounters between Consumer Direct and an individual. In addition, marketing does not include communications to individuals about:

1. The participating providers and health plans in a network, the services offered by a provider, or the benefits covered by a health plan;

2. The individual's treatment; or

3. Case management or care coordination for that individual; or directions or recommendations for alternative treatments, therapies, health care providers, or settings of care to that individual.

E. Consumer Direct will use and disclose protected health information for fundraising purposes consistent with applicable requirements.

F. Consumer Direct will not sell protected health information without authorization and unless if complies with all applicable requirements.

G. Consumer Direct may use of disclose protected health information to a Business Associate or institution related foundation for the purpose of raising funds for its own benefit, including demographic information, dates of service, treating physician, outcome information and health insurance status consistent with in Consumer Direct’s Notice of Privacy Practices.

H. Prior to disclosure consistent with this policy and procedure, Consumer Direct will verify the identity of a person requesting protected health information and the

authority of any such person to have access to protected health information, if the identity or authority of such person is not already known to Consumer Direct. Consumer Direct will also obtain any documentation, statement, or representation, whether oral or written, from the person requesting the protected health information when such documentation, statement, or representation is a condition of disclosure consistent with this policy and procedure.

V. **Notice of privacy practices.** An individual, except for an inmate of a correctional institution, has a right to adequate notice of the uses and disclosures of protected health information that may be made by this organization, and of the individual's rights and Consumer Direct's legal duties with respect to protected health information. The Notice of privacy practices that will be provided to individuals who receive services from this organization is attached to this policy and procedure. Consumer Direct will promptly revise and distribute its Notice whenever there is a material change to the uses or disclosures, the individual's rights, Consumer Direct's legal duties, or other privacy practices stated in the Notice. Except as required by law, a material change to any term of the Notice may not be implemented prior to the effective date of the Notice in which such material change is reflected. If Consumer Direct has a direct treatment relationship with an individual, a copy of this Notice must be provided no later than the date of the first service delivery, including service delivered electronically. Consumer Direct will
obtain written acknowledgement of receipt of this Notice. If an individual refuses to sign or otherwise fails to provide an acknowledgement, Consumer Direct will document its good faith efforts to obtain the acknowledgement and the reason why the acknowledgement was not obtained. The Notice must also be posted on the premises of Consumer Direct. Consumer Direct will document compliance with the notice requirements by retaining copies of Notices provided, acknowledgements, and documentation of good faith efforts to obtain such acknowledgements.

VI. **Right of an individual to request restriction of uses and disclosures.** Individuals are permitted to request that Consumer Direct further restrict the uses or disclosures of protected health information to carry out treatment, payment, or health care operations. Consumer Direct is not required to agree to such requested restrictions unless the protected health information pertains solely to health care items or services for which individuals have paid Consumer Direct in full. Restrictions to which Consumer Direct agrees must be documented. Agreements for further restrictions, however, may be terminated under applicable circumstances.

VII. **Confidential communications requirements.** Consumer Direct will permit individuals to receive communications of protected health information from Consumer Direct by reasonable alternative means or at alternative locations, but only if the individual clearly states that disclosure could endanger the individual and the request is in writing.

Consumer Direct may condition such reasonable accommodations of individuals' requests on information as to how payment will be handled, and specification of an alternative address or other method of contact. Consumer Direct will not require an explanation of the basis for such requests as a condition of providing communications on the above bases.

VIII. **Access to protected health information.** Individuals have the right to access, inspect, and obtain copies of protected health information about the individual for as long as the information is maintained in a designated record set, except for psychotherapy notes and information compiled in reasonable anticipation of or for use in a civil, criminal, or administrative action or proceeding in the form and format requested by individuals. Protected health information will be sent to other persons designated by individuals at their requests. Consumer Direct may deny individuals access without providing the individual an opportunity for review under applicable circumstances. Access may be denied with a right of review of the grounds of the denial when:

A. A licensed health care professional has determined, in the exercise of professional judgment, that the access requested is likely to endanger the life or physical safety of the individual or another person

B. The information makes reference to another person and access may cause substantial harm to that person

C. Information requested by a personal representative is likely to cause substantial harm to the individual

Denials of access requiring review must be examined by a reviewing official, i.e. a licensed health care professional who is designated by Consumer Direct to review the denial and who did not participate in the original decision to deny access. Requests for access must be in writing and Consumer Direct will inform patients of this requirement. Consumer Direct will act on a request for access no later than thirty (30) days after receipt of a request or within sixty (60) days when information requested is not maintained on site. Consumer Direct may take an additional thirty (30) days to respond to requests for access if Consumer Direct provides individuals with written statements of the reasons for the delay and the date by which Consumer Direct will complete its action on the request within the initial thirty (30) day period. Consumer Direct will charge a reasonable, cost-based fee in order to supply copies of information, including the cost of
supplies and labor of copying, postage, and preparation of a summary in lieu of supplying the information.

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IX. **Denials of access to protected health information.** Denials of requests must be in writing and must include:

A. The basis of the denial

B. An explanation of the individual's right to review of the denial, if applicable

C. A description of how the individual may complain to Consumer Direct or the Secretary

D. The name, title, and telephone number of the contact person or office at Consumer Direct

E. Where to direct the individual's request if the information is not maintained by Consumer Direct

Denials must be promptly referred for review, as described, within a reasonable period of time. Individuals will receive written notice of the determinations of reviewing officials.

X. **Right to amend.** An individual has the right to ask Consumer Direct, in writing, to amend protected health information for as long as the protected health information is maintained in a designated record set. Consumer Direct will inform individuals in advance of the requirement that such requests must be in writing and must include a reason to support the requested amendment. Consumer Direct will deny such requests if:

A. The information was not created by Consumer Direct, unless the individual provides a reasonable basis to believe that the originator is no longer available to act on the requested amendment

B. The information is not part of the designated record set

C. The information would not be available for inspection under applicable requirements

D. The information is accurate and complete

Requests for amendment must be maintained in the individual's designated record set. They must be acted upon within thirty (30) days, except that Consumer Direct may extend the time for such action by no more than thirty (30) days if the individual is provided with a written explanation of the reasons for the delay and the date by which

Consumer Direct will complete its action on the request within the initial thirty (30) day period. Denials of requests for amendments must be in writing and must include:

A. The basis for the denial

B. A statement that the individual has the right to submit a written statement disagreeing with the denial and how the individual may file such a statement

C. A statement that the individual has the right to submit a request that the request for amendment be included with any future disclosures

D. A description of how the individual may file a complaint with Consumer Direct, including the name or title and telephone number of the contact person or office designated, as described above

Consumer Direct will permit the individual to submit a written statement disagreeing with the denial within time limits established by Consumer Direct. Statements submitted by individuals will be included with future disclosures of the information. Consumer Direct may, at its discretion, prepare a written rebuttal to the individual's statement of disagreement. If Consumer Direct accepts the requested amendment, in whole or in part, it must make the amendment, inform the individual, and inform others who have received the protected health information. Consumer Direct will document the titles of persons or offices responsible for receiving and processing requests for amendments by individuals and retain the documentation, as indicated below.

XI. **Accounting and disclosures of protected health information.**

A. *Right to an accounting of disclosures of protected health information*. Individuals have the right to receive a written accounting of disclosures of protected health information made by Consumer Direct in the six (6) years; or such shorter time period, at the request of the individual; prior to the date on which the accounting is requested consistent with applicable exceptions, including disclosures made consistent with an authorization and incidental disclosures.

The written accounting shall include:

1 The date of the disclosure

2. The name of the entity or person who received the protected health information

3. The address of the person who received the protected health information, if known

4. A brief description of the protected health information disclosed

5. A brief statement of the purpose of the disclosure that reasonably informs the individual of the basis for the disclosure or, in lieu of such statement, a copy of the individual's written authorization or a copy of a written request for disclosure

Accountings must be provided within sixty (60) days of receipt of a request, except that Consumer Direct may extend the time period for providing the accounting by thirty (30) days, so long as Consumer Direct provides the individual with a written statement of the reasons for the delay and the date by which the covered entity will provide the accounting within the initial thirty (30) day time period. Consumer Direct will charge a reasonable, cost-based fee for each request for an accounting after the first request within a twelve (12) month
period. Consumer Direct will notify individuals in advance of the fee and provide the individual with an opportunity to withdraw or modify the request in order to avoid or reduce the fee. Consumer Direct will retain copies of written accountings provided to individuals. Consumer Direct will document the titles of the persons or offices responsible for receiving and processing requests for an accounting by individuals.

XII. **Notification of Breaches**.

A. Definitions.

1. Breach means the acquisition, access, use, or disclosure of protected health information in a manner not permitted by this Policy that compromises the security or privacy of protected health information. Breach does *not* include the following:

   a. Any intentional acquisition, access, or use of protected health information by a workforce member or person acting under the authority of a covered entity or a business associate, if such acquisition, access, or use was made in good faith and within the scope of authority and does not result in further use or disclosure in a manner not permitted by this Policy.

   b. Any inadvertent disclosure by a person who is authorized to access protected health information at a covered entity or business associate to another person authorized to access protected health information at the same covered entity or business associate or organized health care arrangement in which the covered entity participates and the information received as a

result of such disclosure is not further used or disclosed in a manner not
permitted by this Policy.

c. A disclosure of protected health information in which a covered entity or business associate has a good faith belief that an unauthorized person to whom the disclosure was made would not reasonably have been able to retain such information.

1. Compromises the security or privacy of protected health information. A use or disclosure of protected health information that does not include identifiers, date of birth, and zip code does not compromise the security or privacy of protected health information.

2. Unsecured protected health information means protected health information that is not rendered unusable, unreadable, or indecipherable to unauthorized individuals through the use of a technology or methodology specified by the Secretary in guidance that appears on the HHS website.

B. Notification to individuals.

1. Consumer Direct will, following discovery or a breach of unsecured protected health information, notify each individual whose unsecured protected health information has been or is reasonably believed by the Provider to have been accessed, acquired, used, or disclosed as a result of such breach.

2. A breach shall be treated as discovered on the first day on which such breach is known to Consumer Direct or, by exercising reasonable diligence, would have been known to Consumer Direct. Consumer Direct shall be deemed to have knowledge of a breach if such breach is known, or by exercising reasonable diligence would have been known, to any person, other than the person committing the breach, who is a workforce member or agent of Consumer Direct.

3. Consumer Direct shall give notice to individuals without unreasonable delay and in no case later than sixty (60) calendar days after discovery of a breach.

4. Notification shall be written in plain language and shall include, to the extent possible:

a. A brief description of what happened, including the date of the breach and the date of discovery of the breach, if known.

b. A description of the types of unsecured protected health information that were involved in the breach, such as whether full name, social security number, date of birth, home address, account

number, diagnosis, disability code, or other types of information were involved.

c. Any steps individuals should take to protect themselves from potential harm resulting from the breach.

d. A brief description of what Consumer Direct is doing to investigate the breach, to mitigate harm to individuals, and to protect against any further breaches.

e. Contact procedures for individuals to ask questions or learn additional information that shall include a toll-free telephone number, an e-mail address, Web site, or postal address.

5. Notification shall be provided in the following form:

a. Written notice – Written notification by first-class mail to the individual at the last known address of the individual or, if the individual agrees to electronic notice and such agreement has not been withdrawn, by electronic mail. If Consumer Direct knows that the individual is deceased and has the address of the next of kin or personal representative, Consumer Direct will give notice to either the next of kin or personal representative of the individual. Notification may be provided in one or more mailings as information is available.

b. Substitute notice – If there is insufficient or out-of-date contact information that precludes written notification to individuals, a substitute form of notice reasonably calculated to reach individuals shall be provided. Substitute notice will not be provided when there is insufficient or out-of-date contact information that precludes written notification to next of kin or personal representatives.

(1) If there is insufficient or out-of-date contact information for fewer than ten (10) individuals, then such substitute notice may be provided by an alternative form of written notice,
by telephone, or other means.

(2) If there is insufficient or out-of-date contact information for ten (10) or more individuals, then such substitute notice shall:

(a) Be in the form of either a conspicuous posting for a period of ninety (90) days on the home page of Consumer Direct website or conspicuous notice in major print or broadcast media in geographic areas where the individuals affected by the breach likely reside.

(b) Include a toll-free phone number that remains active for at least ninety (90) days that individuals can use to obtain information about whether an individual's unsecured protected health information may be included in the breach.

c. Urgent notice – In any case deemed by Consumer Direct to require urgency because of possible imminent misuse of unsecured protected health information, Consumer Direct may provide information to individuals by telephone or other means, as appropriate, in addition to notice provided consistent with this Policy.

C. Notification to the media.

1. If a breach of unsecured protected health information involves more than five hundred (500) individuals in a state or jurisdiction, Consumer Direct shall, following discovery of the breach, notify prominent media outlets serving the state or jurisdiction.

2. Consumer Direct will provide notice without unreasonable delay and in no case later than sixty (60) calendar days after discovery of a breach.

3. The notification shall meet the requirements of Paragraph B.4.

above. D. Notification to the Secretary.

1. If breaches involve five hundred (500) or more individuals, Consumer Direct will notify the Secretary contemporaneously with notice to individuals in the manner specified on the HHS Web site.

2. If breaches involve fewer than five hundred (500) individuals, Consumer Direct will maintain a log or other documentation of such breaches. Consumer Direct will notify the Secretary of such breaches within sixty (60) calendar days of the end of the calendar year in which the breaches occurred in the manner specified on the HHS website.

E. Notification by business associates.

1. Business associates of Consumer Direct are required to notify Consumer Direct of all breaches of unsecured protected health information within sixty (60) calendar days of discovery.

2. Business associates shall include, to the extent possible, identification of each individual whose protected health information has been breached in notifications to Consumer Direct.

3. Business associates shall provide Consumer Direct with information that Consumer Direct is required to provide to individuals when notification is given to Consumer Direct or promptly thereafter as information becomes available.

F. Law enforcement delay.

1. If a law enforcement official states to Consumer Direct or business associate that a notification, notice, or posting required under this subpart would impede a criminal investigation or cause damage to national security, Consumer Direct or business associate shall:

a. If the statement is in writing and specifies the time for which a delay is required, delay such notification, notice, or posting for the time period specified by the official; or

b. If the statement is made orally, document the statement, including the identity of the official making the statement, and delay the notification, notice, or posting temporarily for no longer than thirty (30) days from the date of the oral statement, unless a written statement is submitted during that time.

XIII. **Administrative requirements.**

A. *Personnel designations*. Consumer Direct will designate a privacy official who is responsible for the development and implementation of the policies and procedures of Consumer Direct.

B. *Training*. Consumer Direct will train all members of its workforce on these policies and procedures and will train all new employees within a reasonable time period after the person joins Consumer Direct's workforce. Consumer Direct will also provide training when there are material changes in these policies

and procedures. Consumer Direct will maintain documentation of training activities.

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C. *Safeguards*. Consumer Direct will establish and maintain appropriate administrative, technical, and physical safeguards to protect the privacy of protected health information.

1. Complaints to Consumer Direct. Consumer Direct will establish and maintain a process for individuals to lodge complaints concerning these policies and procedures. Such complaints will be documented.

2. Sanctions. Consumer Direct will discipline members of its workforce for violations of these policies and procedures, consistent with Consumer Direct's policy on progressive discipline.

3. Mitigation. Consumer Direct will mitigate, to the extent practicable, any harmful effect that is known to Consumer Direct of a use or disclosure of protected health information in violation of these policies and procedures or applicable requirements.

4. Refraining from intimidating or retaliatory acts. Consumer Direct will not intimidate, threaten, coerce, discriminate against, or take other retaliatory action against individuals and others in relation to compliance with
HIPAA privacy requirements.

5. Waiver of rights. Consumer Direct will not require individuals to waive their rights under these policies and procedures.

6. Policies and procedures. Consumer Direct will maintain these policies and procedures consistent with applicable requirements

7. Documentation. Consumer Direct will maintain copies of all required written communications in order to demonstrate compliance with applicable standards.

8. Retention. Consumer Direct will retain required documentation for a period of six (6) years from the date of its creation or the date when it last was in effect, whichever is later.

9. Submission of compliance reports. Compliance reports will be submitted to the Secretary as required.

10. Cooperation with complaint investigations and compliance reviews.

Consumer Direct will cooperate with the Secretary if an investigation or compliance review of these policies and procedures and Consumer Direct's practices is undertaken.

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11. Access to information. Access by the Secretary will be permitted during normal business hours to facilities, books, records, accounts, and other sources of information, including protected health information, that are pertinent to ascertaining compliance with HIPAA privacy requirements. If the Secretary determines that exigent circumstances exist, Consumer Direct will permit access by the Secretary at any time and without notice.

12. Information in the exclusive possession of others. If information required to be furnished in order to comply with the privacy requirements of HIPAA is in the exclusive possession of others who refuse to provide the information, Consumer Direct will certify that this is the case. The certification will include a description of efforts made to obtain the information.