

Response to Case Management,  
Information and Payrolling System (CMIPS)  
Electronic Visit Verification (EVV)  
for the California Health and Human  
Services Agency, Office of Systems  
Integration

RFI #32236  
Due Date: December 6, 2017

Submitted by:  
Conduent State & Local Solutions, Inc.  
12410 Milestone Center Drive  
Germantown, MD 20876



**Vishnu Nanan**  
*Vice President*  
Conduent State & Local Solutions,  
Inc.

12410 Milestone Center Drive  
5th Floor  
Germantown, MD 20876

Vishnu.Nanan@conduent.com  
Tel: 410.540.8563

December 6, 2017

Albert De León  
Acquisitions & Contracting Services  
California Health and Human Services Agency, Office of Systems Integration  
2495 Natomas Park Drive, Suite 515  
Sacramento, California 95833

RE: RFI # 32236 Case Management, Information and Payrolling System (CMIPS) Electronic Visit Verification (EVV)

Dear Mr. De León:

Conduent State & Local Solutions, Inc. is pleased to submit our response for the RFI # 32236 Case Management, Information and Payrolling System (CMIPS) Electronic Visit Verification.

At Conduent, we touch millions of lives every day – on highways and in hospitals, at the courthouse and the corner store, over the phone and on the Web. By working with us, government agencies transform the way they serve citizens and communities, now and in the future. Conduent is the world's largest provider of diversified business process services, with approximately more than 90,000 employees. Conduent State & Local Solutions, Inc. partners with government agencies to deliver innovative, mission critical public services. We serve more than 1,700 government entities across all 50 states, the District of Columbia, Puerto Rico, and other U.S. territories.

The core of our technical approach is the implementation of our proprietary “next generation” homecare platform built around the managed care service model, incorporating electronic visit verification (EVV), advanced scheduling, billing, and gross payroll. What we can offer to California is our passionate, technical management team with extensive industry experience and subject matter experts that pioneered the EVV industry and are passionate about building mass-customized solutions for the post-acute care market. What makes our solution unique among software vendors in the home care industry, is that our approach is *next generation*. This means we develop functionality for today that can grow and evolve to meet the needs of California

tomorrow as well. Having an adaptable and extensible solution also allows you to respond to changes required by Medicaid, while minimizing the cost and effort required to make changes.

### **Conduent's Unique Value**

Unlike other contractors, we remain exclusively dedicated to government programs, and EVV is a core Conduent offering. In 1996, we entered the government benefit disbursement space with our first EBT program and have since continued to expand our services in that area. In addition, we have been continuously providing Adult Care and Childcare EVV Services solutions to meet the needs of State government agencies for almost 18 years, providing a sound basis for our expertise, best practices, and highly effective processes for serving citizens in need.

With nearly 3,000 employees located throughout the State, Conduent's California presence is considerable. Clients include many city and county governments for which the company manages information technology services, and programs in such industries as parking and photo radar enforcement, transportation, education and healthcare. We also manage the state's EBT operation, MMIS system and child support State Disbursement Unit, some of the largest statewide government operations.

We thank you for the opportunity to share our experience in support of the California Electronic Visit Verification exploration of solutions that may be used to meet the requirements as defined in the 21st Century Cures Act for use of an Electronic Visit Verification system by personal care service and home health care workers.

The point of contact for all matters related to this proposal is Bob Tisone, Vice President for Conduent State & Local Solutions, Inc. Should you have any questions or need further information, please reach out to Bob Tisone per the contact information provided below.

Bob Tisone, Vice President  
[bob.tisone@conduent.com](mailto:bob.tisone@conduent.com)  
Telephone: 636-675-2498

Sincerely,



Vishnu Nanan

## RFI Response

### 1. Describe how your company delivers this type of electronic verification solution or service in similar Medicare and Medicaid settings, or other similar health care settings for consumer directed personal care and/or home care service delivery. Include a description of the population characteristics of individuals currently served by your system(s) and include the number of members.

Conduent is the world's largest provider of diversified business process services, with approximately \$6.4 billion in 2016 revenue and more than 90,000 employees. Conduent State & Local Solutions, Inc., a subsidiary of Conduent, is committed to developing our partnerships with government agencies to deliver innovative, mission critical public services. We serve more than 1,700 government entities across all 50 states, the District of Columbia, Puerto Rico, and other U.S. territories.

Conduent remains dedicated to Human and Health service programs with Electronic Visit Verification (EVV) being a core of our offerings. Our company presents “best in class” for overall experience, people and organizational size to meet set timetables and exceed program expectations. This is achieved by effective management in the function areas of planning, organizing, staffing and leading our staff.

A direct benefit of Conduent being a large and diverse organization is that our customers receive services that provide the economies of scale, financial stability, and personalized services. We customize our solutions to our client's exact needs as we have the required resources in both expertise (people) and in services (software, hardware) allowing Conduent the ability to deliver very large and complex solutions to you in a way no other company can. In order to minimize confusion on the status of the project, Conduent is committed to ensure the transparency of management actions and project results are well communicated.

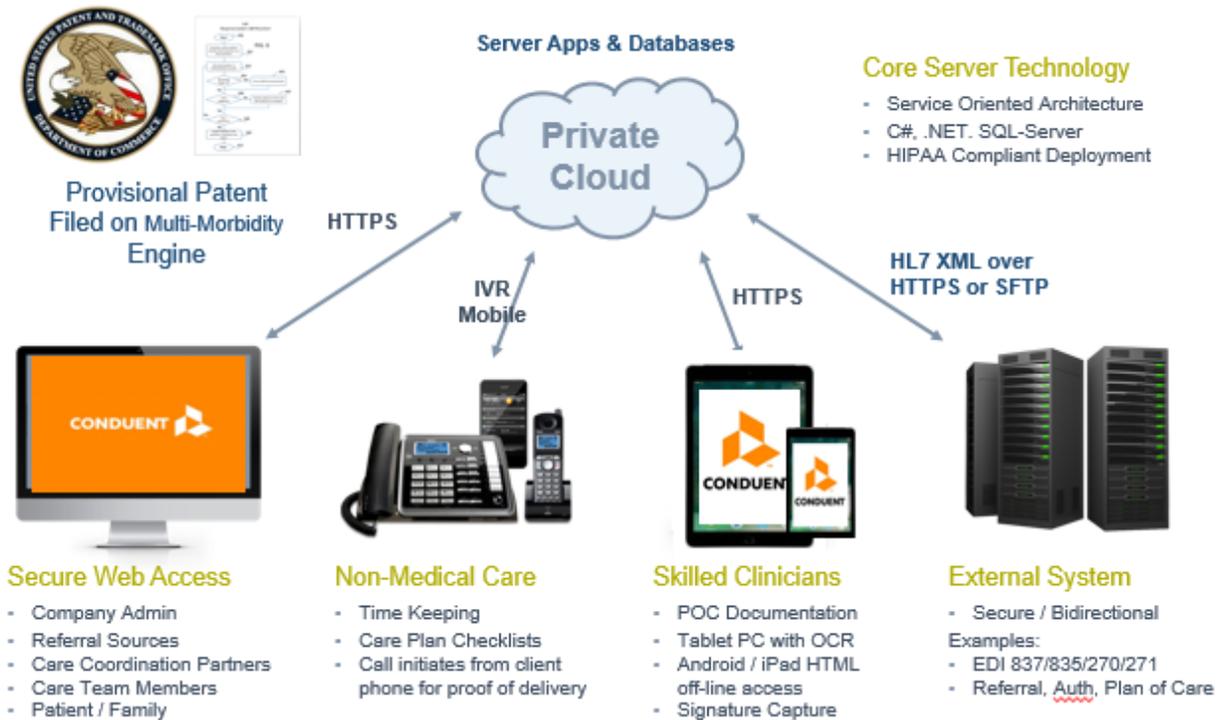
Conduent has the experienced team to provide all of the resources necessary from start to finish ensuring a perfect delivery of this EVV system. We draw on our internal group of resources first, and then will pull from an extended network any resources that may be needed in a short or long term engagement. Conduent has the size and strength to provide the design, management, and deployment of this EVV project. All of our extensive resources are at your disposal.

#### Conduent Solution Meets CA Needs:

- Conduent's outstanding credentials in MMIS support and claims process
- Integration of Business Process Management and Business Activity Management Tools
- Supports Interoperability and Integration
- Exceeds State Enterprise Level Requirements
- End to End Solution satisfies requirements for traceability in process and tools

**2. Provide a detailed description of the EVV System: a. Functionality of the system including the devices, methods of data collection, technology and infrastructure requirements for both individuals receiving services (Recipients) and service providers (Providers), (e.g., land-line telephones, cell phones, in-home fixed device, tablet, internet, GPS).**

The Conduent Electronic Visit Verification (EVV) system is a comprehensive set of applications that combine data collection at the point-of-care, a central data repository to store information, and a cloud-based portal providing the appropriate level of access to the State, Agency Providers and recipients/ family members. These components are melded together into an open systems design where the data can flow freely between the Conduent components and other applications/systems to allow the seamless integration of other State systems.



**2.a. Functionality of the system including the devices, methods of data collection, technology and infrastructure requirements for both individuals receiving services (Recipients) and service providers (Providers), (e.g., land-line telephones, cell phones, in-home fixed device, tablet, internet, GPS).**

The Conduent EVV system is a configurable application that collects and verifies visit information from the point-of-care (recipient’s home) using a variety of methods. Each method used provides real-time data and virtually bullet-proof validation to verify that authorized services are provided to the recipient as required by the 21<sup>st</sup> Century Cures Act.

The following is an example of some of the information collected by the Conduent EVV system:

- Identification of the provider
- Location of the service
- Type of service being provided
- Identification of the recipient
- Time of arrival
- Time of departure
- List of care items to be performed (Care Plan)

Each method will collect the same information and store this transactional data in the Conduent Claims Management Information System's clearing house data store. The information collected is normalized and checked for errors, and then stored. This data can then be retrieved through the Conduent Claims Management Information System's Portal application where it can be edited or reported on by the authorized State administration user community.

The following methods can be used by the Conduent EVV point-of-care data collection system:

- Traditional Interactive Voice Response (IVR) that uses the recipient's home land line
- Mobile Devices with enabled GPS service such as mobile phones and tablets
- In-Home fixed devices where a real-time one-time password is displayed

We can also support other methods such as in-home internet devices, kiosks, or personal computers. These methods can sometimes be expensive to deploy and support and may present challenges with data integrity and reliability.

## Interactive Voice Response

Conduent provides a robust, user friendly and reliable method to collect EVV information using the recipient's home telephone. The provider calls a toll-free telephone number when arriving and departing, and is then prompted through a series of questions so that we can collect the required information. In the list below, Conduent provides how the IVR collects the required EVV information:

- **Location of service:** The location is obtained from the telephone company through a service called Automatic Number Identification (ANI). This provides the IVR system with the telephone number and address from where the call originated, namely the recipient's home. This is the same service that E-911 providers use. It is digital and can't be spoofed.
- **Identification of the provider:** The provider/caregiver is asked for their ID and password. This information is verified by the IVR from information in the Conduent database/clearing house.
- **Type of service being provided:** The provider is then asked for what type of service they are providing for this specific visit. Again, the IVR will compare this information with the

schedule record in the database to validate that this visit is indeed what was scheduled. Once this information is validated, the caregiver can optionally enter their mileage and/or listen to the care plan.

- **Time of Arrival / Time of Departure:** The arrival and the departure telephone calls provide a time stamp from the telephone company that validates the exact arrival and departure times for EVV purposes. These times can be optionally or administratively changed, but these visits are flagged as exceptions for EVV purposes.
- **List of care items to be performed (Care Plan):** On departure, the provider again authenticates themselves, and is then asked to document each task in the care plan with its disposition. They can then optionally enter any errand miles they provided during the course of this visit, and then hang up.

Should there be a requirement to have the system provide a higher level of provider authentication, instead of a password, the system can provide biometric voice identification where we can ask them to speak a phrase and compare this to one previously recorded baseline. The result of this comparison will then authenticate that provider. This same method of voice authentication can be used for the recipient should you elect to have the recipient verify that the visit was done and the care plan properly documented. With paper time sheets, we understand the need for a recipient signature and can provide this capability, but the EVV information collected is electronically verified and shouldn't require any additional verification.

## Mobile Devices

An alternative to using the recipient's home telephone (IVR) is to use the provider's GPS enabled cell phone or tablet device. The system providers an application that uses the internet service of the mobile device to communicate to the Conduent database via web-services.

- **Location of service:** The location is collected by comparing the current GPS location of the device to the known GPS coordinates of the recipient.
- **Identification of the provider:** The application running on the mobile device will collect the ID and password of the provider, authenticating them for this specific visit.
- **Type of service being provided:** The application on the device will display the list of pre-authorized services for selection by the care provider. The provider can then optionally review the care plan on their device both prior to and during their visit.
- **Time of Arrival / Time of Departure:** The current time of the transaction for both the arrival and departure is collected and inserted into the visit record.
- **List of care items to be performed (Care Plan):** On departure, the provider can document each care task in the care plan with its disposition. A time stamp of the end of the visit is sent when the provider closes the visit on their device.

Conduent does support a store-and-forward method when there is no data service available or the GPS cannot be gathered. This information is sent to us when service becomes available or is restored.

As with the IVR method, Conduent can use voice authentication to validate the provider as a more robust method of authentication. The case for using this method is to prevent collusion between the recipient and the provider by ensuring that the provider is indeed the one entering the information in the mobile device.

For recipient validation of the visit information, we can enable the mobile application to allow for a recipient signature on the mobile device, use voice authentication, or some other acceptable biometric method such as finger print reading or facial recognition. Each one of these methods can complicate the visit by requiring some interaction with the recipient that may be problematic due to a disability or illness. We can support each and any of these methods should the State determine that it is needed.

### **In-Home Fixed Devices**

An In-Home Fixed Device is a technology initiated in banks and brokerage organizations to authenticate the user gaining access to their account information. These devices are generically called one-time-password (OTP) devices because they display a unique numeric password, usually every 60 seconds. The Conduent homecare group has integrated these devices into our practice because they allow for another layer of authentication. About the size of a thumb-drive, these devices are designed to be secured in the recipient's home in a manner where they cannot be removed, usually with a zip-tie. Each device will display a unique password, and is associated with each recipient's record in the EVV database. These devices can be used in association with both the IVR and the Mobile method described above to authenticate the provider, or optionally, the recipient.

During the course of the IVR call or the mobile app session, the provider is prompted to push the button on the fixed in-home device and enter the digits displayed. This entry is used by EVV to validate this user. This method is popular where there is no home phone and the provider wants to use a mobile phone or a non-recipient phone of some kind. Since the location cannot be established from the ANI from the phone, this one-time-password device **provides adequate authentication for EVV purposes.** There is an administrative overhead of maintaining a database to associate each OTP unique number with a recipient or provider.

In summary, Conduent can provide EVV services that are easy to use and that comply with the 21<sup>st</sup> Century Cures Act. Each of our methods is virtually fraud-proof and is designed to be easy to use and intuitive. Because of our blended approach, you can use the method that best fits the needs of both the recipient and the provider. The result is that you have a point-of-care data collection solution that can satisfy virtually any Medicaid home visit for personal and health care needs.

**2.b. Describe how your EVV solution could meet challenges inherent to California. Include challenges specific to the large volume of Recipients and Providers and how to address the fact that approximately half of IHSS and WPCS Providers are family members and/or live in the household with the Recipient.**

The Conduent EVV system resides in a hosted environment. This cloud-based system allows for the deployment of resources to address the large volume of transactions that California will have. Our cloud services can grow in a dynamic manner to support these volumes including the IVR system for the telephony transactions, web-services for the mobile device transactions, and the actual database to house all of the data necessary to the EVV system.

Because of the large number of individual providers, attention to detail must be made to ensure compliance with the basic rules of an EVV system. Living with the beneficiary can pose a reporting challenge where there could be possible collusion between the beneficiary and the individual provider. In these cases, we can deploy a form of biometric check(see response to 2.c. below) to authenticate that the provider is the one actually doing the reporting. Additional training may also be required for this group of providers and may have to be deployed in many different forms and many languages.

Conduent's EVV cloud and web based solution is inherently scalable and can handle any range of defined and approved transactions, so the large volume of Recipients and Providers will not be an issue. Because our solution is hosted on mobile devices, it is easy to authenticate and track all participants' locations and activities. The Administrative application of our EVV is a web-based application. It provides our clients the tools to add/modify/track employees, patients and care plans in real time. When the caregiver provides a service, it is tracked with fingerprint technology that ensures the all participants provide acknowledgement and secure validation. That being said, no system can completely eliminate fraud. So if a provider and client chose to lie, we may not catch that in all cases. We do however have metrics that will identify service time and travel norms and alert that State or County Case Manager when there are deviations. Our home-based services, which provide maximum benefit to providers, recipients, and payers, mitigate fraud and abuse to maximize service effectiveness.

**2.c. Security features of the system that confirms the identity of both the Providers and Recipients and how that data is kept secure.**

For our IVR solution, identification is confirmed using credentials that would have been provided to the Provider (User ID / Password). This solution uses the Automatic Number Identification (ANI), a method that identifies that the call is coming from the recipient's home phone, to confirm the recipient name.

For our mobile solution there are more options that can be used to confirm the identity of Providers and Recipients.

- Fingerprint identification (mobile device)
- Biometric Voice identification

- Facial Recognition
- A one-time-password device can be used by both IVR and mobile devices to identify the recipient.

All data is stored securely in our HIPAA compliant data center with access restricted only to appropriate administrative staff.

#### **2.d. Data collection, including information identified in this RFI Section 5 Proposed Environment.**

Conduent is proposing a blended solution of Telephony-based Interactive Voice Response (IVR) that collects point-of-care from the recipient's home telephone and a Mobile application that allows caregivers to use their own tablet or cell phone to collect this same information.

In each method, the data needed for compliance with the 21<sup>st</sup> Century Cures Act is collected in a real-time manner and stored in the Conduent Data Warehouse (CDW) and becomes immediately available to State administrative workers through the Conduent Claims Management Information System's portal application. This portal application can be accessed from any browser-based computer, from any location within the State of California. This portal application can accommodate State of CA workers, AAA representatives, MCOs, provider organizations, Consumer Directed providers, recipients, and their families.

Information collected at the recipient's point-of-care includes:

- Location of the Caregiver at the time of the visit
- Exact Arrival-time and Departure-time
- Type of Service for this visit
- Identity of the Caregiver
- Identity of the Recipient
- Travel-Time (optional)
- Errand Miles (optional)
- Plan-of-care Documentation (optional)

This information collected cannot be changed by the caregiver without an exception being created. Visits with exceptions don't qualify as EVV Certified visits. A small number of exceptions are allowable because of circumstances, but they should not be considered the norm and they should be tracked.



## **2.f. Features that conform to the concept of being minimally burdensome.**

The Conduent EVV system is very flexible. It is built on administrative tables that can turn on/off different features, down to the individual user level. We designed to system to allow the fast and efficient entry of data for both arrival and departure. The more logical and streamlined the system, the less burdensome it is for the end user. For the IVR, we keep the questions short and succinct, yet allow the user to repeat the question multiple times.

We support multiple languages for both the IVR and the mobile application. The exception is where the language is not character based (like Mandarin) and standard phones or tablets cannot display the special characters.

In the Conduent Portal application, we have a comprehensive context-base help capability that allows users to access the on-line help files based on where they are in the application.

Each user has a unique profile that not only identifies their demographic information, but has settings for language and other user preferences. This way, a user is always identified as a Spanish speaker if that setting is indicated in their profile. This way, we don't need 5 different 800 numbers, one for each language we support.

The system also tracks each keystroke and captures incomplete calls so that over time we can identify any bottle necks or problem areas. With this in place, our applications evolve over time to become easier to use and more efficient operationally.

## **2.g. Features of the system that conform to the Americans with Disabilities Act (ADA) and address needs of special populations of Providers and Recipients, such as developmental disabilities and visual/hearing disabled.**

The system supports the needs of those with disabilities and as such the ADA. Conduent systems are documented using the Voluntary Product Accessibility Template (VPAT®) 2.0 template, and includes criteria from WCAG 2.0 and EN 301 549, as well as the Revised Section 508 Standards and Section 255 guidelines.

## **2.h. Features of the system that address the needs of special populations that cannot be near electronic devices.**

For populations that cannot be near electronic devices Conduent supports complete paper-based reporting.

## **2.i. Features of the system that address the provision of EVV in rural areas where technology infrastructure may be limited or unavailable.**

In rural areas where users may experience a lack of cellular service, limited internet access and speed, etc., Conduent's system design incorporates the ability to handle EVV in multiple data

collection modalities that are able to capture visit data without access to the internet or cellular service at the point of care.

Conduent offers telephony-based EVV wherein the user clocks-in and clocks-out of visits using the recipient's registered home or cell phone. This method does not require internet or other technologies outside of the telephone.

If field users are using Conduent's mobile application, they can download their schedules and recipient information prior to leaving their home or office, and then do not need to have internet service the rest of the day. When the user returns to a service area their device (smartphone, laptop or tablet) will automatically synchronize with the Conduent servers and transmit collected data to the office.

Conduent offers fixed objects (FOBs) that can be mounted in the recipient's home with a plastic "zip tie" affixed to a door knob or drawer handle. The FOBs are one-time password devices that are registered to the recipient. When the button on the FOB is pushed, it displays a number that is an encrypted date/time/machine code. Users push the button on the FOB when they arrive and leave the visit and record the displayed number for each clock-in and clock-out. The user can then call in the FOB numbers within twelve hours using any telephone and Conduent will record the visit as though it was called in using telephony.

#### **2.j. Additional features the system offers outside of EVV.**

In addition to EVV as described, Conduent offers biometric voice verification (BVV), an extremely secure method of verifying that users are actually with the recipients when they clock-in and clock-out. Conduent's BVV system can verify the user (caregiver) and the recipient or patient by analyzing voice prints against known voice samples. The BVV system is secure enough to be used for verbal passwords and cannot be fooled with recorded voice.

#### **2.k. Service level metrics including system availability and system capacity.**

Conduent measures system performance using a dashboard. This dashboard application looks at portal response time, data communications response time, number of users, number of IVR users, response time on the various web-service applications, and a variety of database performance metrics such as seek times. These tools are used to measure the system performance real-time, as well as identifying possible bottlenecks that are or could affect performance. All changes made for enhancement or for normal maintenance/support are first measured for the impact on the system prior to turning them on in the production system. There are alarms and alerts if certain metrics exceed a measured threshold.

#### **2.l. Contingency plans for system outages or unavailability.**

Conduent systems are fully backed up with and incremental backups performed throughout the day and a full backup done each evening.

Conduent system design utilizes hot swappable processors and disk drives, along with load balancing across a local server farm to handle a potential server failure.

In the event of a catastrophic data center failure, Conduent maintains a hot, alternate data center that can be used for failover. The backup data center is located more than 100 miles from the primary data center decreasing the likelihood that both centers could be impacted from the same catastrophic event.

Conduent is fully cloud-based, so that agency users are protected against local disasters, floods, fire and terrorism since no data is ever stored locally at the agency. In the event of a local disaster or agency event, as soon as the agency can obtain internet access they can fully resume operations without the fear of losing any data.

**2.m. Flexibility of the system to implement changes and how quickly changes can be made. Describe how the system has built in flexibility such as the ability to meet business needs or make changes through simple configuration set up and/or configuration changes.**

By understanding that system design has to serve the changing needs, Conduent's system is designed to meet each customer's needs. Through the use of confidential and proprietary processes, algorithms and designs, our system can facilitate fast and easy configurability.

Conduent systems are rules driven, with the capacity to support a wide variety of different rules at diverse levels. This includes rules for:

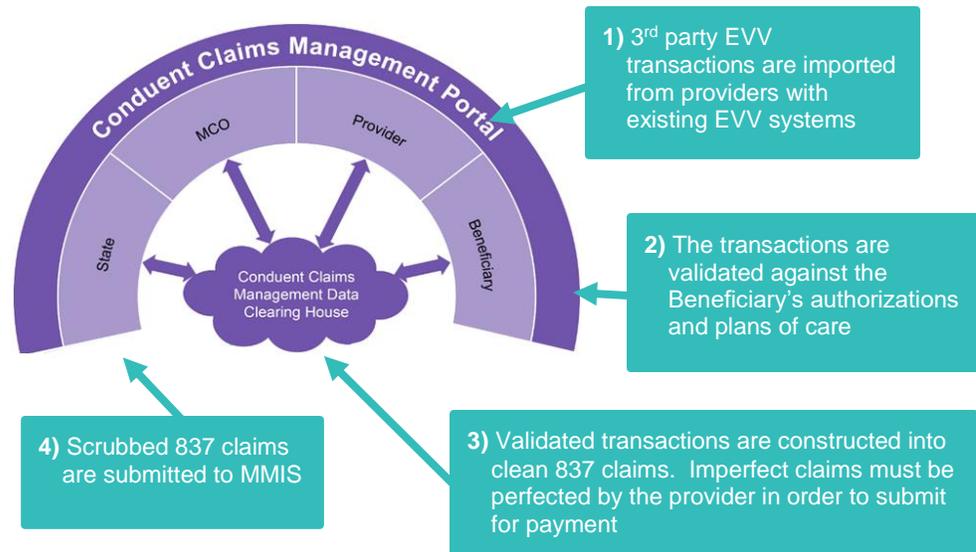
- Visit Types
- Visit Categories
- Pre-Billing Claims Audits
- Billing and Claims Construction
- Eligibility Management
- Authorization Management
- Care Plan Services Management
- Care Plan Compliance
- Scheduling
- Payroll

Most system changes can be made using simple configuration tools. Conduent works with our customers so that additional frameworks can be managed. These framework settings range from the user interface, what menu items, tabs and functions appear to the users, to the development of complex role-based security profiles.

Conduent systems are built using the Microsoft .NET framework and components are built as free-standing objects. This ability to “unplug” an object, make changes to it and “plug it back in” to the system makes significant changes easier to complete and with a much lower risk of the changes impacting the core system.

## 2.n. Types of analytics and reporting provided.

Numerous standard and custom reports and reporting are available in addition to a robust data warehouse. To support next generation analytics, Conduent offers the Conduent Claims Management Data Clearinghouse. Not only is the data repository able to meet the needs of the State today, it is scalable and flexible enough to meet your future needs. The data warehouse, based on the latest SQL Data Warehouse framework, is at the forefront of this modern evolution.



The Conduent Claims Management Data Clearinghouse is a cloud-based Enterprise-level data warehouse that leverages the concept of massively parallel processing to quickly run complex queries across vast quantities of data.

You will be provisioned your own database. Powered by SQL Server. Clustered column store indexes—Offers high data compression and even greater query performance. Native integration—SSRS, SSAS, Tableau, Qlik, and Stream Analytic, etc.

## 2.o. Typical account set up time and check in/out time for Providers and Recipients.

Accounts can be setup in bulk or individually within four days. Briefly, the process for new accounts is as follows:

1. DAY 1: Complete the registration form (online or paper).
2. DAY 2-3: Conduent:
  - a. Provisions the necessary telecommunications lines for telephony.
  - b. Sets up the FOB registration numbering.
  - c. Sets up the mobile application.
  - d. Provisions the system on the server farm.

- e. Sets up the user profiles.
  - f. Schedules user training.
3. DAY 4: Users follow Conduent's self-service training system with full live and online support. Upon completion of the training, users are tested. Users that pass testing receive Conduent System Certification.

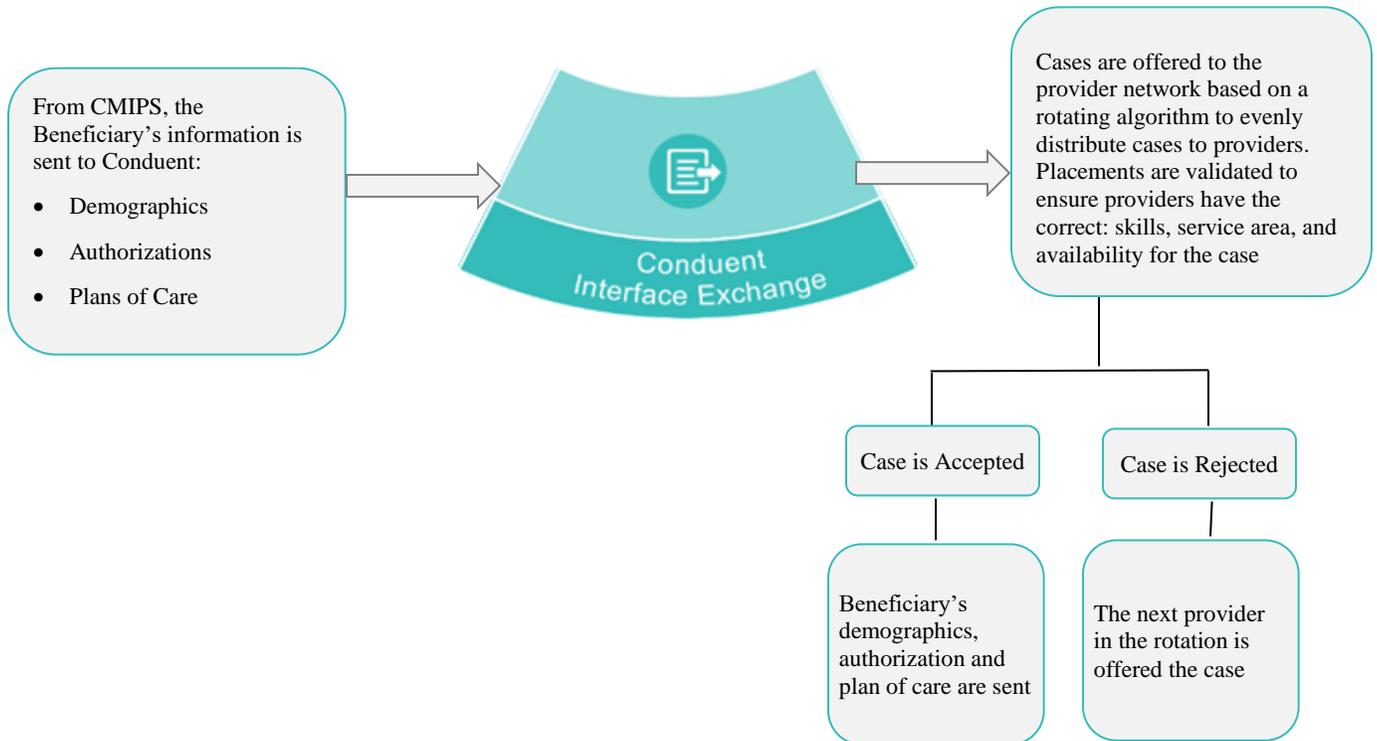
While new accounts can be brought on and made active within four days, it is far more likely that the process will require 2-3 weeks, as it is fully dependent upon the user and their ability to free up their time to learn the system and start using it.

**3. Describe if/how the system groups or categorizes tasks to simplify system operation, tracking, Provider and Recipient use, etc.**

Conduent conveniently groups tasks into separate objects that can be configured for each relevant party. For example, the regulatory authority or authorized contractor maintains all back-end configurations for service delivery, eligibility and authorization management, care plan compliance and billing. They determine the claims audit processes, procedures and rules and billing amounts. These configurations and settings are easily managed by the systems administrators.

**4. Describe the system's capability to interface with other systems, for eligibility, timekeeping, payroll or data collection purposes.**

Interoperability is critical in any large-scale enterprise system. The ability to work with data and information from other systems is inherent in the Conduent system. From simple import/export to automated web services and API's, the Conduent system is designed on the fundamental principle of being flexible and able to work in open system environments.



**5. Describe your experience with implementing EVV systems including high-level timelines for implementation and training for all user populations. Describe implementation challenges and lessons-learned. Describe how to overcome implementation challenges. Distinguish implementation(s) for government entities versus private entities. If implemented for state entities, please identify which states and provide contact information.**

We have implemented several solutions in the Health and Human Services Industry for Government agencies in the US and abroad. The first and most important aspect of undertaking any project is for all stakeholders to understand the goal of implementing a system that will successfully meet the requirements of the state and the clients they serve. A thorough, well thought out work plan and schedule, developed in concert with all stakeholders, is essential to a successful start of any implementation project. We recommend walkthroughs of the work plan and approval of the plan within the first three weeks of the project start.

A well planned Implementation Phase will ensure a seamless transition from the existing systems to the new EVV Solution. Vendors must have the breadth of resources, experience and capabilities to deal with complex issues that often arise during large system implementation. Early establishment of the communication plan and a RACI (Responsible, Accountable, Consulted, and Informed) Chart contribute to a smoother implementation.

Government entities have proven to have their own specific challenges during an implementation like timeframes are often short due to delays in starting or political pressure to meet dates. There will always be things out side of our ability to control that may impact the schedule. These need to be identified early as risks and mitigated. Issues must be documented, communicated upon discovery, tracked and assigned an owner for resolution.

Our experience in the development and implementation of our State and Local projects has provided Conduent with a thorough understanding of the complexity in implementing an EVV system that meets the State's specific business rules. We understand the impact that the implementation has on the State constituents including Agency staff, providers, and recipients—through experience our competitors cannot match. Our implementation approach is to plan first, communicate extensively with stakeholders, and implement the system, never forgetting the impact on those the State serves.

At the heart of our implementation planning is our comprehensive project timeline (Project Work Plan). The duration of the project timeline will often vary and depends on the complexity of the design, the size, quality and complexity of the data, the complexity and stability of any existing application used for or supporting the program. The following are primary phases of the project, as reflected in the timeline that would be developed for the state:

- Project Start Date
- Design Phase
- Development Phase
- Implementations Phase
- Operations Phase Start Date

This timeline details the step-by-step tasks involved in the planning and execution of the implementation. Our timeline includes the following:

- Implementation actions
- Responsible parties
- Critical paths (consecutive tasks leading to a milestone)
- Milestone deliverables
- Task dependencies
- Task durations

The combination of these components into our timeline drives each phase of the schedule and supports the timely delivery of an accurate, dependable guide for the State.

With a strong history of efficient and successful implementations and partnership with the State of California we can successfully transition to the new innovative EVV Solution. The contractor will oversee each and every phase of your implementation. These phases are:

- Design Phase:
  - Discovery
  - Scope definition
  - Business rules discovery/definition
  - Architecture design
  - EVV design
- Development Phase:
  - Configure solution to meet state requirements
  - Customize solution to meet state unique requirement not met by configuration
  - Unit test
- Prototyping and Testing Phase:
  - Training of Administrative people on Management Portal
  - Selecting pilot set of providers
  - Train State trainers
  - Train pilot group of providers on Management Portal
  - Train provider caregivers on EVV system
  - Resolve any issues as appropriate, refine design
- Roll out/Production Phase
  - Train and roll out to remaining providers
  - Select pilot group of CDS providers
  - Train CDS providers on portal and EVV
  - Pilot test CDS
  - Train and roll out remaining CDS Providers
- Ongoing Maintenance and New Architecture Changes:
  - Plan for any necessary MMIS changes
  - Test new MMIS changes

For our implementation of the Maryland Long Term Support and Services EVV project, we developed a thoroughly detailed work plan with well-defined milestones, regular status updates, and well defined deliverables within the aggressive 90 day timeframe established by the RFP.

Agreement on the project plan took considerably longer than the time provided for in the draft plan. This occurred as a result of the complexity of the organization support and lack of information on the duration of activities related to database activities.

A challenge we encountered was the timeframe for procuring the infrastructure to support the application, especially given the short transition period. Leveraging our corporate contacts at the Original Equipment Manufacturers we were able to expedite the delivery of the necessary hardware.

Another challenge was the lack of accurate information about the existing database (size and functionality) and the probable timeframes that would be required to transfer the data from one platform to the new host. This resulted in the troubleshooting and analysis that took considerably longer than would have been necessary had the information being readily available.

## **Lessons Learned**

At the onset all stakeholders should identify any barriers hindering them from fulfilling their expected role on the project, especially any external vendors that require additional resources in order to complete their assigned tasks document in the project plan.

Early agreement and approval of the work plan by the state must be a priority. This is most efficiently accomplished with in person planning session where the project plan is reviewed, elaborated upon and updated. Availability of existing application and data subject matter experts is essential to determining the quality and duration of data cleansing and transfer/conversion.

## **State Contact Information**

Maryland Department of Health  
Jane Holman  
Policy & Compliance  
Medicaid Office of Health Services  
Maryland Department of Health  
201 West Preston Street | Baltimore, MD 21201  
410.767.1294

## **Overcoming Implementation Challenges**

Despite best efforts, there are often unknowns encountered during implementations that only a committed and experienced team, partnered with the state subject matter experts will be able to resolve effectively. The best method of overcoming implementation challenges is to foster the partnership with all stakeholders bringing all experience and resources into focus on resolving the issue at hand. Having a well experienced team with the backing of corporate assets that represent a broad and deep experience of technology, EVV and Medicaid processing and business processes goes a long way to help mitigate the risks and issues that arise during implementation.





- **Access to technology.** Where access to technology is limited or non-existent (such as very rural areas), Conduent maintains a two-pronged strategy: 1) where caregivers can start their day from a location with internet access, they are able to download and hold a full day's worth of schedules and assignments and work the day offline; 2) when no access at all is available, Conduent supports telephony for clock-in and clock-out using the clients' telephones, and the use of paper timesheets signed or endorsed by the recipient or their authorized representative.

Once these barriers have been managed, Conduent will employ the following to manage implementation challenges inherent to California such as the change management for a large and vulnerable population:

- Live regional, cultural-based educational events
- Multi-cultural educational materials
- Multi-media training materials in different languages

In all cases Conduent will utilize staff representative of specific populations (for example, Conduent will ensure Filipino staff develop the cultural aspects of materials designed for that population). This is to ensure no cultural mores are violated and no unintentional slights made to any representative community or population.

Thorough planning and partnership with the State is absolutely necessary to the long-term acceptance a success of the EVV project.

#### **7. Discuss strategies you have employed to garner customer satisfaction and include any satisfaction survey data, if available.**

There are many areas that determine customer satisfaction. These areas include the many different users groups which include the State regulatory/administrative group, the AAA community, the MCOs, the Providers, the CDC Providers, the individual caregivers, and the recipient. However, the primary objective of the system is to enhance the quality of care for each and every recipient. When designing the system, all stakeholders should ask the questions: (1) does the recipient oppose the caregiver using their home telephone to arrive and depart. (2) Does the recipient feel that the care they are receiving is enhanced by the EVV system?

In order to have a successful EVV system, the caregivers must buy into the benefits of the EVV system. They should not feel that "big brother" is watching. This group must understand that the EVV system can eliminate their paperwork, allow them to spend more time with the recipient, and protect them from any questions that may arise about when they arrived/departed, or where they were at 2:00 on Thursday afternoon. The Conduent EVV system can also provide additional benefits such as the ability to review the care plan or to see their schedule for future visits. The primary benefit is the elimination of the paper timesheets and all of the administrative hassle that is associated with this process.

The Agency providers must see this EVV system as a benefit rather than another layer of work that complicates their operational processes. Conduent's open architecture allows these providers to integrate their current EMR and its processes to the Conduent EVV system. This integration will exchange the schedules to the EVV system so that dual entries are not needed. Our solution will also integrate with the providers existing EVV system by importing the visit data and applying it into the EVV system. The benefit to their workers is that there is only one EVV system that they have to interact with, the same one they use for non-Medicaid visits. These workers don't have to remember 2 numbers to call the visit in, or even worse, call twice. The benefit to the agency is that they only have to train their workers on one system and they will continue to work in an operationally consistent environment.

The portal users must find the Conduent EVV solution intuitive and easy to use. They must be able to add, change, or report on data in a way that is easy and not cumbersome. The portal's permissions will allow these users to have visibility to their data, and just their data. Their work environment should be set and they should arrive into the portal at a location where they do most of their work.

Conduent can also employ some of our own technology to collect customer satisfaction information. We have an Interactive Voice Response (IVR) system that can initiate outbound calls to recipients, caregivers, providers, or state regulatory portal users to participate in surveys. This process can be done on a periodic basis such as quarterly, bi-annually, or annually. We can also provide an inbound survey on the IVR or into a portal application to collect similar information or helpful comments.

Conduent has developed extensive customer satisfaction measure and control systems to ensure we meet and exceed customer expectations. Specific activities include:

- Regularly scheduled customer meetings
- Customer representation on all project design committees
- Customer (user) acceptance testing (UAT) for all new features and functions
- Outbound survey instruments (email, mail, web and IVR)
- End user outreach:
  - Email, web and IVR surveys
  - Regularly scheduled open meeting events
  - Customer service center:
    - accessible via phone, email, web and text
    - multiple language support

## **8. Describe the response to your EVV from a wide range of Recipients and Providers with a wide range of disabilities including blind and deaf and/or low literacy levels.**

The Conduent EVV system is designed for ease-of-use and engineered to be as bullet-proof and as intuitive as possible.

The Interactive Voice Response (IVR) system is designed to allow users to quickly and succinctly navigate through the menu set. We support type-ahead so that those users that know what the next prompt is don't have to wait and can breeze straight through. Others must listen to each prompt. We can also force all users to listen to a prompt by turning off the type-ahead capability to ensure they hear the entire prompt. Each question also has attributes such as a range of numbers, or low and high limits on numbers. Remember, since it is using touch-tone digits, all answers are numeric in nature. All prompts take numeric answers, so the system is very easy to navigate. Should a user get confused, they can always revert to the last prompt or back up any number of levels by entering a special character such as a '\*' or '#'.

Deaf users may use their special TTD telephones, or use a mobile device such as a tablet or smart-phone. Blind users can use the IVR and interact with its key pad.

Conduent can work with the State to develop and distribute a card or other type of take-along allowing the caregiver to have a guide to assist them in the field.

Most EVV use is done by direct care service providers and very little participation from the care recipient is required, so the issue of disabilities and EVV is minimal. However, there are specific tasks that must be managed by the recipient and while these vary greatly program to program, they can present certain challenges that Conduent has worked hard to mitigate.

- **Physical Limitations.** These can pose significant challenges depending on the type and degree of the disability. Where possible, recipients can review service records on a computer screen and use a mouse or alternate device to indicate any discrepancies. Where indicated, Conduent can implement verbal approvals of services using biometric voice verification to assure compliant EVV.
- **Auditory/Deaf Impairments.** These disabilities have very little impact on the recipients' ability to manage their EVV system. Reports can be viewed online, printed and disputed all without the need for telephone discussion or additional personal interactions.
- **Visual Impairments.** These pose a unique challenge in that services cannot be reviewed, approved or confirmed using traditional methods. Visually impaired users can utilize 3<sup>rd</sup> party tools such as Braille displays to review and approve EVV shift data.
- **Low Literacy Levels.** Low literacy is addressed in the design of the user interface for recipients and caregivers. System and Mobile Application user screens have been specifically designed to enhance visual recognition and require only a minimum level of education and/or cognition.

## 9. Discuss ongoing maintenance of EVV systems.

The ongoing maintenance is divided into multiple categories:

- Defect Maintenance
- Enhancements

- User change requests
- Integration changes/additions
- System changes
- New functionality

The California Medicaid environment is constantly changing. Conduent's EVV must also be able to change to meet the challenges of this evolving environment. As new technology, new systems, and new regulations are added, EVV must accommodate these changes in a way that is seamless to the end users and the regulatory State users.

The open architecture of EVV is designed for change. At the heart of our system is the Conduent Data Warehouse (CDW). Information can come from many different systems, in many different formats, is filtered and normalized, then stored. This provides Portal users of one view of the data, regardless of where it was generated. As the State needs new MMIS systems, or a provider wants to integrate a new Electronic Medical Records (EMR) system, the end result should be that the data in the CDW looks the same.

This allows Conduent to exchange application modules more efficiently within our application set because the data presentation is the same. This also makes changing and testing individual modules, because these small changes usually don't affect the entire enterprise.

As mentioned in item 6 above, all changes and enhancements must be thoroughly planned and tested prior to going live. The partnership between the State IT department and the Conduent is very important is scoping out, testing, and implementing these changes.

#### **10. Describe if/how the EVV solution can leverage the current IHSS Portal with the ETS feature and the pros and cons of doing so.**

The Conduent EVV system is built with an open architecture. With this architecture, we hope to maximize any investment in other technologies or applications. With the EVV system collecting the exact Time & Attendance data directly from the point-of-care, the need for the IHSS Portal ETS would be redundant. We can, however, continue to allow Providers the ability to review and edit their daily visits that Conduent EVV has collected. The State will need to review the policy requiring Recipient approval of the time sheets, as they are today with ETS. Because of the Electronic capture of the arrival-time and departure-time, there is no longer the need for this verification process. As with the Providers using ETS today, we can still allow Recipients to view, and approve their visits (if you still feel you must require this process), using ETS. Conduent's system will feed the databases of CMIPS with all visit data in a timely, if not real-time, manner.

The Conduent Portal application was designed to provide the complete view of all authorizations, requests for service, scheduling that service, collection of the visit data, and claims processing. Being designed as a single, all-in-one view of the entire process from inception to payment, we are confident that much of what is in IHSS is also in the Conduent

portal. When we are in the discovery process, we collectively can look at both solutions and determine what works the best for the State of California.

### **11. Describe how an EVV solution can be effectively implemented for both the Individual Provider and Agency Provider employment models.**

The Conduent EVV solution is predicated on an open model concept. Individual providers can be added to the system through the Conduent portal. Once in, they will have access to their own demographics record to change addresses, phone numbers, payroll information, etc. A State administrator can also make these changes on their behalf. They would get paid through CMIPS, as they are today.

The Agency provider come is two types:

- Small Provider Agency with no EMR or scheduling system
- Large Provider Agency With existing scheduling system

The small provider agency can use the Conduent Portal to manually add caregivers and their schedules into the system. Their time will be collected from the Conduent EVV system either through the IVR or the Mobile app. These caregivers will get paid by their agency as they are today.

A large Provider Agency has 2 options:

1. They can use the Conduent Portal as described above for the small Agency provider
2. They can integrate their Electronic Medical Record system into EVV where they can exchange caregiver demographics and schedules.

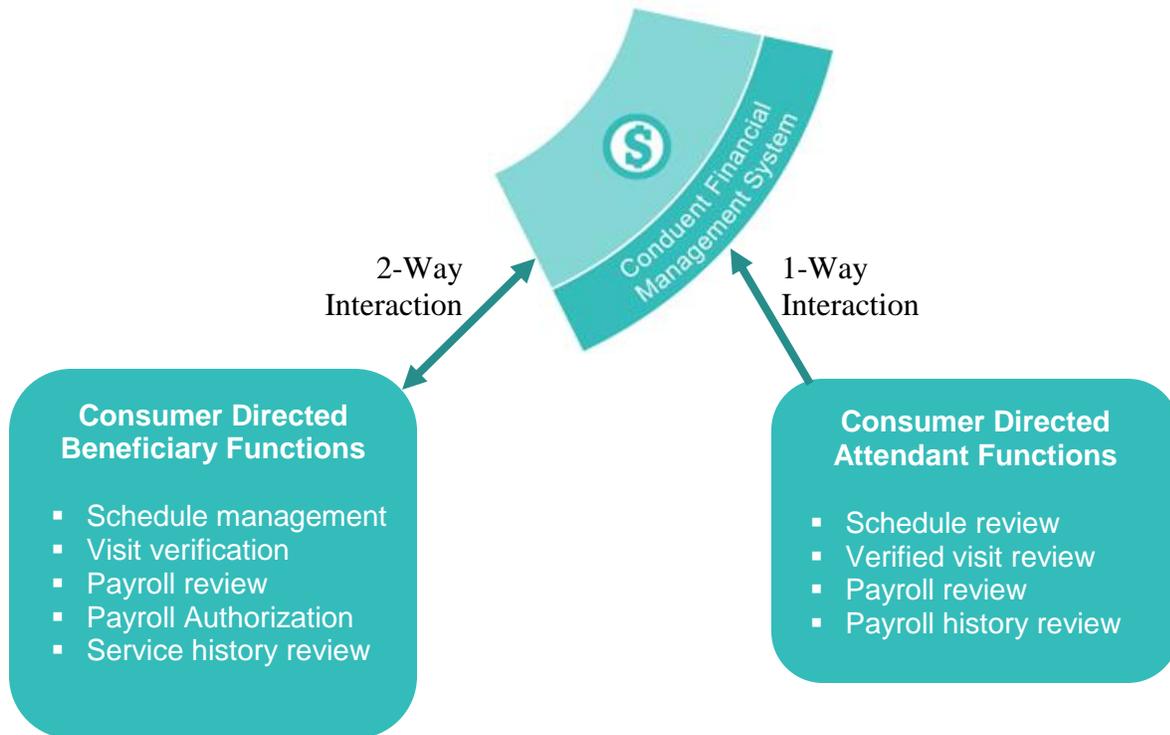
Now they also have some options on how they collect the point-of-care information:

1. They can use the Conduent EVV IVR or Mobile app to collect the visit information
2. If they have an EVV system in place, they can continue to use that system, and send to Conduent the completed visit information from that system.

The caregiver would get paid directly by their agency as they are today.

An individual provider basically works directly for the beneficiary but is paid by the State. In order to track their compliance and payroll time, these individual providers must interact with the system to schedule their visits and to review their payroll information. These individual providers must keep their demographics up to date such as their contact information. The payroll system of CMIPS actually pays these individuals directly, but Conduent supplies CMIPS with the actual time collected over the payroll period.

There is also an oversight function that allows supervisory capabilities of these individual providers. Where they can review schedules and visit information.



**12. Describe your business model (e.g., Software as a Service, Commercial Off-the-Shelf, Modified Off-the-Shelf, custom built, transactional).**

The Conduent EVV solution is based on the Software as a Service (SaaS) model. This is beneficial to California because it allows ease of access to administrative users as long as they have an internet browser. Under the covers, we do use many industry standard components for capabilities such as database, IVR, mobile, and data exchange.

**13. Describe the costs and fee structure of EVV solution(s) for customers with requirements comparable to the IHSS, WPCS, and other HCBS Waiver programs. Differentiate between Individual Provider and Agency Provider employment models. Identify both one-time and on-going costs. Describe how the cost model would scale up to accommodate the large number of IHSS and WPCS Providers.**

The Conduent EVV system is an open systems design that can accommodate many different environments depending on the State of California's needs and wishes. This open structure must also bring an openness to our pricing model.

Some of the models will incorporate some, if not all of the following components:

- Implementation fees
- Training fees
- Transactional fees
- Integration services

- On-going cloud support
- Software support

Beyond the implementation and integration services, the simplest model is to charge either by the visit/claim, or by the number of active recipients. This model is a usage-based model that builds all other costs into these transaction fees. As your usage goes up, so do the transaction fees.

We can do a combination of seat licenses for state regulatory users, provider and MCO seats, as well as Consumer Directed provider seats in combination with the transactional fees. As we come together and better define the final configuration, we can come to a very competitive fee structure.

**14. Describe how the EVV solution for personal care service that must be implemented in 2019 could be expanded to accommodate the 21st Century Cures Act home health care service EVV requirement by January 1, 2023.**

The solution that we are proposing for the Personal Care Services segment will be the very same solution that will be used for the Home Health Care Services segment scheduled for 2023. There will be a new set of recipients and providers, new care plans, but the primary solution will be the same. The Private Care Services segment does not require care plan documentation as it does in Home Health Care, but to deploy an EVV system with just Time and Attendance would defeat many of the benefits of an EVV system.

With the added number of visits/claims, recipients, and providers needed for Home Health Services, Conduent will add capacity to our cloud solution to accommodate

**15. Describe the different means of communication (e.g., notifications) the system is capable of producing such as letters, e-mail, text, and phone in multiple language formats for visually and hearing disabled including large font, braille, and audio text.**

The Conduent EVV system is very open and based on industry standard software components. A key benefit of this open design is that it allows Conduent the ability to exchange information with virtually any source. We can export virtually any piece of data into any system or format as is required. Conduent also has a division that specializes in print and mail services for state governments. We can offer these same services to California to add to an already comprehensive and integrated overall solution.

**16. Describe how your system is kept current and how it keeps up with technology changes.**

The Conduent EVV system is predicated on a modern design and tool-set. Each of these components are designed to stand on their own, yet can be changed out without a major overhaul. We combine these tools with state-of-the-art cloud hosting services that allows additional or new resources to be added easily.