Applied Self-Direction EVV Vendor Questions and Answers

Questions to Ask Electronic Visit Verification Vendors:
Sandata Technologies Reponses

As states continue to plan for the January 2019 implementation of electronic visit verification (EVV), one common implementation approach is the "open vendor" or "hybrid" model. This approach offers the option to use a state-designated system at minimal direct expense to the provider, or for the provider to purchase and maintain their own EVV system that would meet state criteria.

Selecting an EVV vendor is a critical business decision with significant impact on Financial Management Services (FMS) operations. In addition, the "wrong" system could threaten the continued success of self-direction programs, as well as negatively impact participants and their workers. The following questions are offered as a starting point for your research into an EVV system that will meet the unique needs of self-direction programs.

In the following document, each question is thoroughly answered and provided for your ease. To provide additional context for our responses, we have inserted a brief summary of our Self-Direction solution that we currently deliver. We welcome further questions and dialogue.

Sandata Self-Direction Solution Summary

The 21st Century Cures Act includes a requirement for EVV in all Medicaid Personal Care Services ("PCS") programs to be implemented by January 1, 2019. The EVV system must collect the following data points:

- Type of Service;
- Individual receiving the services;
- Date of the services;
- Location of the service delivery;
- Individual providing the service;
- Time the service begins and ends.

In the <u>CMS August 2017 EVV presentation</u>, CMS emphasized that PCS services in Self-Direct programs are included in the Cures EVV mandate, and should include the following key considerations:

- Accommodate PCS service delivery locations with limited or no internet access;
- Avoid rigid scheduling rules as self-directed services often do not require schedules and are known for accommodating last minute changes based on participant needs;
- Allow participants to schedule their services between the participant and the worker;
- Accommodate services at multiple approved locations for each participant; and
- Allow for multiple service delivery locations in a single visit.

The Sandata Self-Directed solution meets all of the requirements identified by CMS.

Sandata has been providing <u>statewide</u> EVV services for self-directed care programs since January 2014 when we deployed our statewide EVV program for the Illinois Department of Human Services, and we have supported agencies delivering services to the self-directed population for the last 10 years. We understand the challenges in deploying EVV for consumer direct programs, and will bring our experience and lessons learned to the each client engagement.

Our consumer directed time capture program today in Illinois serves:

- *22,000 recipients*
- *40,000 providers*
- *200 state employees*

Each year we verify over 7,000,000 visits. Each payroll cycle we generate timesheets for over 40,000 direct care providers representing $21 million dollars a month in payroll.

Our EVV offering helps empower each participant to have control over their long term care delivery while automating existing manual efforts such as timesheet creation. Our solution allows the participant or their authorized representative to view and approve the electronic timesheet prior to payment.

Our Santrax Self-Directed Care offering is specifically designed for the unique aspects of a self-directed care delivery model. While the technology leverages the same infrastructure and support as is deployed for traditional homecare, the solution is specifically tailored to meet the needs of mobile participants (consumers) who receive care anywhere in the community.

With our Self-Directed Care offering, schedules are NOT required and although the "location" of the start and end of a shift are captured, we recommend that the location coordinates are not used for anything other than compliance with the Cures mandate.

All of the Santrax solutions (portals and applications) are ADA Section 508 compliant and include:
- Text equivalents for images, audio, and other forms of multimedia;
- Time-based media including audio, video and captioning for hard of hearing populations where applicable;
- Content that can be presented in different ways to accommodate meaningful sequence;
- Distinguishable content through use of color, context or markup, and audio control to make it easier for users to see and hear content;
- Keyboard accessible functionality;
- Enough/extended time for users to read and use content;
- Easy navigation to find content;

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Page **2** of **20**

- Content that is readable and understandable;
- Predictability in how web pages appear and operate;
- Input assistance to help users avoid and correct mistakes; and
- Compatibility with assistive technologies such as Jaws Readers, etc.

The Self-Directed Care Solution supports all data exchanges using standard Sandata data specifications, such as:

- Participants File;
- Employee File;
- Employee/ participants crosswalk file;
- Export of Visit Data to Fiscal Intermediaries; and
- Export of Approved Visits for payroll.

Santrax Self-Directed Care includes all of the following components:

- **Electronic Visit Verification** – point of care technologies to record Cures Act required EVV data elements as well as visit tasks completed;
- **Employee/ Caregiver Portal** – web portal for individual workers to view and edit their visits and view their electronic timesheets;
- **Participant Portal** – web portal for participants or their authorized representative to view, edit and approve visits and electronic timesheets;
- **Fiscal Management Portal** – web portal for the Fiscal Agent, if applicable. Fiscal Intermediaries will be able to edit and approve visits for individual participants (if needed), and receive exports of visit data and time worked to support current program service verification and payroll, and program reporting and oversight;
- **Jurisdictional View** – web portal for Payer oversight and reporting of EVV data; and
- **Business Intelligence** –business intelligence dashboards for advanced data insights for program management.

ELECTRONIC VISIT VERIFICATION™

Our Santrax Self-Directed Care offering includes telephonic and mobile visit verification to record visits with the following capabilities:

1. Santrax® Mobile Visit Verification ("MVV")

- **Latest version of our MVV application with enhanced ADA compliance** available for iOS and Android. Please note that Sandata generally proposes a 'Bring Your Own Device' ("BYOD") mobile program where the worker downloads the Sandata application on their own device and uses their data plan or Wi-Fi for visit verification transmission.

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Page **3** of **20**

- Santrax MVV collects all of the required Cures EVV data. Note for the Self-Directed Care program schedules are generally not required, but can be supported if desired. The worker records the service provided as shown in Figure 1.
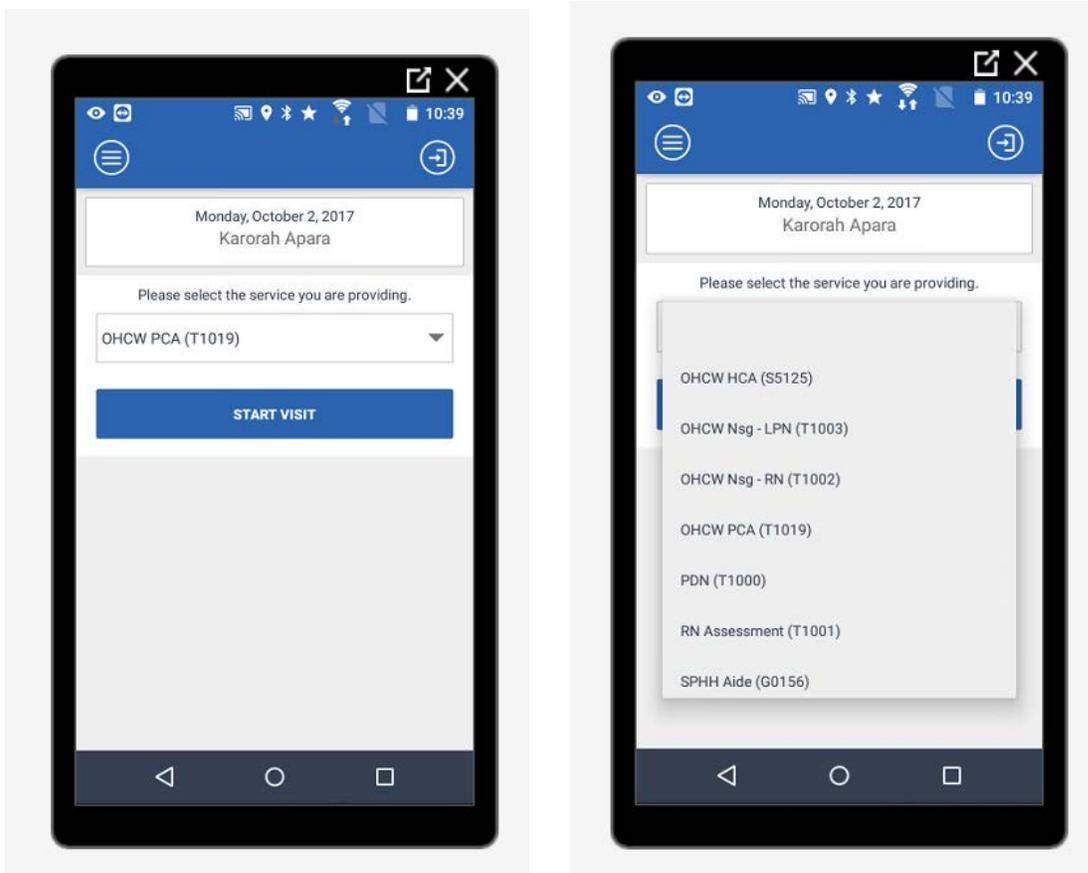

Figure 1. With MVV, workers can select the appropriate service from a customized drop down list.

- **Addition of Participant Verification and Participant Signature (or Voice Recording)** – Allows participants or their authorized representatives to approve visits at the point of care. Approval is recorded via signature on the mobile application or via voice recording. See Figure 2. The approval is captured on the corresponding worker and participant portal.

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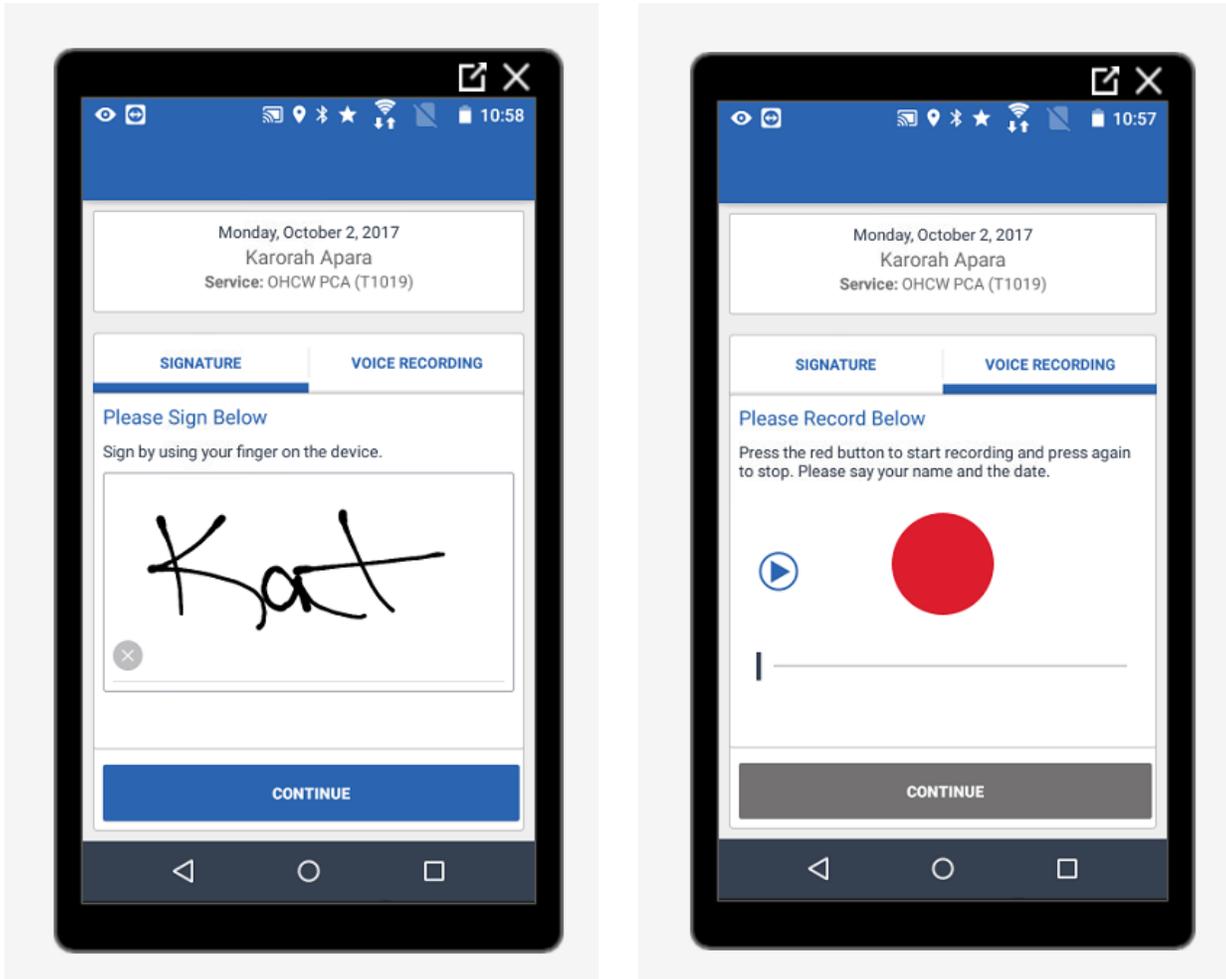www.sandata.com

Page **4** of **20**

Figure 2. MVV allows for the capture of a participant signature, approving the visit at the point of care. Physical signature and voice recording options are available.

2) Telephonic Visit Verification™ (TVV™)

- **Addition of participants Verification and participants Voice Recording** – participants or their authorized representative can approve the visit via voice recording.

- *(Optional)* **Addition of worker Speaker Verificatio**n (Biometric) Speaker Verification uses industry leading biometric voice recognition technology to ensure the right worker is providing service to the participant. Speaker Verification is a simple and reliable process that enhances the verification process. Workers are enrolled in the Speaker Verification system by recording a simple password phrase, which is stored as their voiceprint.

Then, each time the worker calls into the EVV system to record the start and end of a visit, they are prompted to repeat the pass phrase. This is compared with their enrolled voiceprint as well as recent verifications, and a score is returned to the EVV application. Those visits in which the score for the final recording does not exceed the set threshold are flagged as exceptions in the system and require further review before they will be able to be submitted as valid claims. (See Figure 3.)
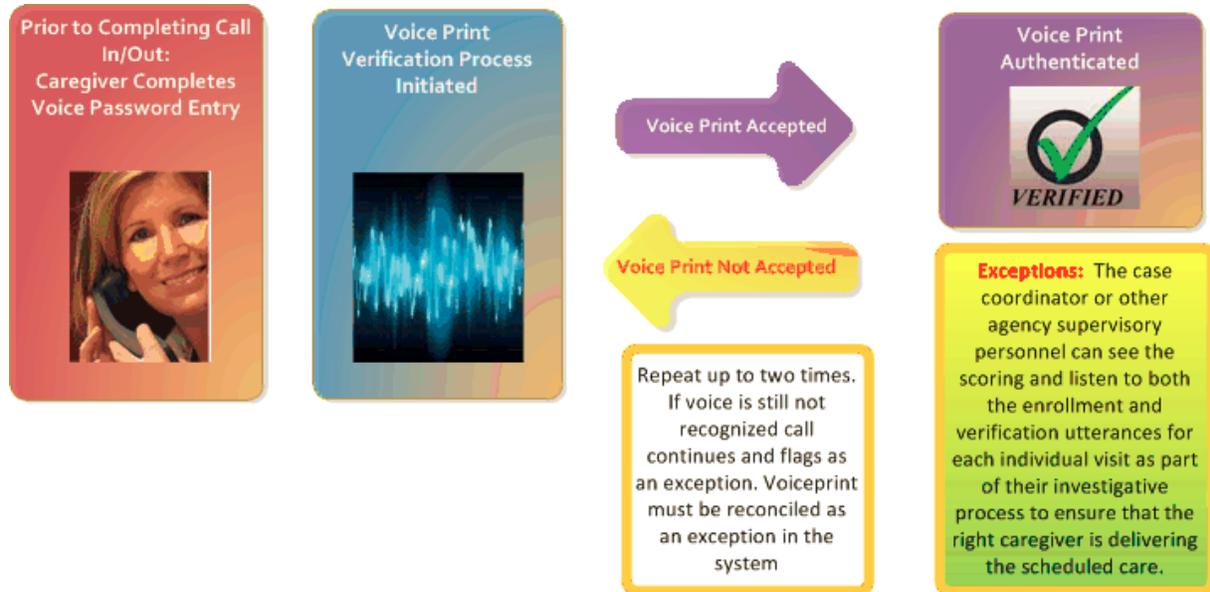

Figure 3. Speaker Verification offers an additional method of worker verification.

3) Fixed Visit Verification™ (FVV™)

- *(Optional)* **Addition of worker Speaker Verificatio**n (Biometric) for the call when the worker records the FVV readings.

SANTRAX® EMPLOYEE/CAREGIVER PORTAL

Sandata's ADA compliant Santrax Caregiver Portal is an easy to use web based tool that helps worker manage their EVV records and electronic timesheets. Workers log in to view and edit visit records in accordance with program defined business rules. The portal automatically creates a full audit trail of any edits to information. Workers can run reports, print timesheets, etc. as needed. The Santrax Caregiver Portal helps providers keep track of time worked, and shows real time status of visits that are approved or pending approval. See Figure 4.

Client Name	Employee Name	Service	Visit Date	Call In	Call Out	Call Hours	Adjusted In	Adjusted Out	Adjusted Hours	Bill Hours	Visit Status	Do Not Bill	Actions
Alterations, Evelyn	Abercrombie, Rose	G0156	08/22/2017	1:57 PM	2:57 PM	01:00				01:00	Verified	☐	✎
Alterations, Evelyn	Abercrombie, Rose	G0300	08/22/2017	12:34 PM	12:38 PM	00:04				00:04	Verified	☐	✎
Alterations, Evelyn ●	000-05-6312 ●	●	08/22/2017	11:35 AM	●					[---]	Incomplete	☐	✎
Alterations, Evelyn	Abercrombie, Rose	G0300	08/22/2017	11:04 AM	11:13 AM	00:09				00:09	Verified	☐	✎
Alterations, Evelyn	Abercrombie, Rose	G0300	08/22/2017		11:40 AM		10:00 AM		01:40	**01:40**	Verified	☐	✎

Figure 4. Through the Santrax Caregiver Portal, workers can view visits, and easily make any needed corrections.

SANTRAX® PARTICIPANT PORTAL

The Santrax Participant Portal is an ADA Section 508 compliant web portal for participants or their authorized representatives to view, make corrections (if needed), and approve worker visit information as shown in Figure 5. As noted earlier, approval may already be captured on the portal from the participant signature and/or voice recording at the end of the visit. The portal automates the approval process, ensuring that the only services submitted for payroll are those services that have been properly approved by the participant. The portal automatically creates a full audit trail of any participant edits to the visit information. The portal includes standard reports such as current or historical timesheets.

Visits

Client ALTERATIONS, EVELYN (3104⁵ ▾)   Employee ABERCROMBIE, ROSE (11104⁵ ▾)   Payor ABC Health Plan ▾

Pay Period 12/01/15-12/15/15 ▾

≡ Visits   **+ Add Visit**   **≡ Filter**

Date	Service	In	Out	Hours	Status	Actions	☐
Dec 01, 2015	Certified Nursing Assistant	10:25	11:27	1.03	Approvable	✎ ✖	☐
Dec 01, 2015	Personal Assistant	13:55	15:00	1.08	Approvable	✎ ✖	☐
Dec 01, 2015	Registered Nurse	15:55		0	Incomplete	✎ ✖	☐

Figure 5. Using the Santrax Participant Portal, participants can review, edit, and approve visits.

FISCAL MANAGEMENT PORTAL

Santrax Fiscal Management portal capabilities are similar to our Santrax Caregiver Portal, but it allows a Fiscal Agent to view and edit data across the entire program population. In our experience across multiple states, we know that some participants are unable or unwilling to use the electronic signature/voice verification or the portal to review and approve visits. The Santrax Fiscal Management Portal allows the Fiscal Agent to view, make edits to visit data, and approve visits on behalf of the participant. Only verified and approved visits are available for payroll export. The Fiscal Management Portal includes roles based access with a distinct set of privileges assigned to each user.

The Fiscal Management portal includes standard reports to support EVV program management, as well as enhanced Business Intelligence as described below. Fiscal Intermediaries will be able to proactively monitor any outstanding visit and/or timesheet issues that need to be addressed prior to payroll export, such as identifying visits that are not approved, visits exceptions that have not been resolved, etc. and they will have new tools to ensure quality oversight of care delivery.

SANTRAX JURISDICTIONAL VIEW

Sandata can establish separate jurisdictional views for multiple payers to monitor self-directed activity. The Jurisdictional View ("JV") over the self-directed program integrates powerful provider management tools and reports to give payers near-real time insight into the delivery of all services as shown in Figure 6.
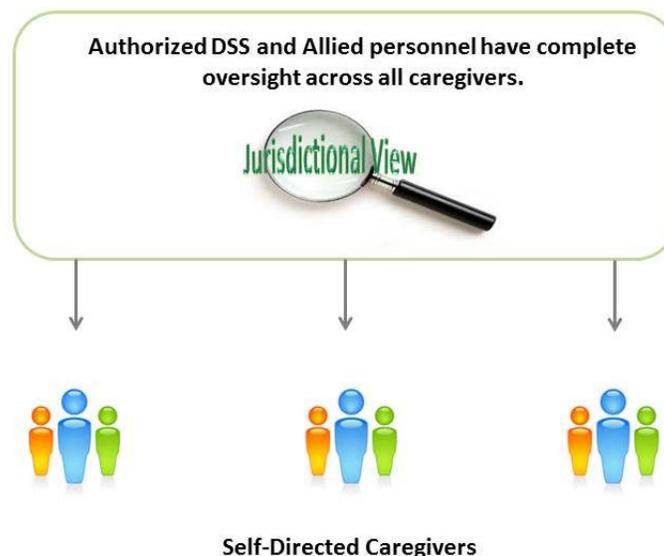

Figure 6. Approved payers will have oversight over all self-directed service delivery.

BUSINESS INTELLIGENCE

Sandata can also provide enhanced analytical capabilities for the payers of Self-Directed programs. Our Santrax Business Intelligence ("Santrax BI") tool offers additional analytics using standard pre-configured visualizations as shown in Figure 7. With Santrax BI, payer and Fiscal Intermediaries will have the ability to monitor key quality metrics, analyze the statistical performance, and support proactive management of the workers; including benchmarking, provider score carding, etc.

Sandata's powerful business intelligence tool takes the guesswork out of analyzing data by presenting it in easy-to-read visualizations such as maps, charts and graphs. Each 'out of the box' visualization can be drilled into for additional data, and all data can be exported to Excel for further analysis.

Figure 7. Santrax BI provides modern graphics, rich reporting and self-guided ad hoc reporting capabilities.

In summary, the Sandata solution for self-direction programs is comprehensive and designed to meet the needs of each constituent so that care can be delivered in an efficient, unencumbered manner, and participants are given over the care they receive, and workers are paid appropriately and efficiently.

Following are the questions originally posed, and Sandata's responses to those specific questions. We welcome further questions and dialogue.

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Page **9** of **20**

Experience with Self-Direction

In which states do you currently serve Self-Directed programs?

Sandata currently operates statewide EVV programs that serve the self-direction population in the following states:

- Illinois: 22,000 participants
- Ohio: 3,500 participants (implementation) and 6,000 individual providers
- Connecticut: 3,000+ participants (implementation)

In addition, as a national provider of EVV solutions for Providers of care, our technology is used by agencies across the country who are serving the self-directed population. For example;

- In New York, the largest Consumer Directed Personal Assistance Program (CDPAS) agencies utilize the Sandata EVV solutions, serving over 5,000 participants across the state.

What Self-Directed programs currently use your EVV system?

- Illinois Department of Human Services
- Ohio Department of Medicaid
- Connecticut Department of Social Services
- New York Consumer Directed Personal Assistance Program

How long have you been operating in each state?

For over 40 years, Sandata has delivered technology solutions to the home care industry, producing solutions for Agencies, Workers, Recipients, and Payers. We have delivered EVV solutions to the homecare industry for over 24 years, initially launching our EVV solution in 1994. We now support more than 3,500 agencies and we are verifying over 175 million transactions each year. Our statewide EVV solution has been deployed for the self-directed population in IL for over 5 years, supporting approximately 27,000 participants. Our statewide EVV solution has been deployed in CT for approximately 2 years, and we are now implementing the self-directed population this year. Our deployment of EVV solutions for agencies in NY has been deployed for over 24 years and we have supplied EVV solutions to the CDPAS agencies for over 10 years.

Internet Access

How does your EVV solution address the issue of limited internet access?

Through 24-years of experience delivering EVV solutions, we have learned that there is no single technology that will work in every situation or environment. We have learned that *flexibility* is paramount to the successful use of EVV technology. Therefore, we provide **3** different technology solutions that can be used to capture information at the point of care: Mobile Visit Verification, Telephonic Visit Verification, and Fixed Visit Verification.

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Our fundamental operating principles are:
- Our technology solutions must provide flexibility for both the participant and the worker
- Should never impede or hinder the delivery of care anywhere in the community, and
- Must protect the privacy rights of each participant and worker.

Our EVV solutions are designed with these principles in mind. In situations where limited or no internet connection is available, we accomplish these goals with the following:
- Our Mobile solution works in a disconnected mode, which means that the data is captured without internet connectivity, and then transmits the data at a later time when an internet connection is available. With this feature, workers can focus on providing care, instead of finding a signal! Also, our MVV solution was designed to accommodate the mobility and flexibility of participant, and can be easily used anywhere in the community.
- Our Telephonic solution does not require internet connection, and can operate from landline or cellular phones. Our TVV solution can be used by participants and workers anywhere in the community.
- Our Fixed Visit Verification solution does not require internet connectivity, landline, or cellular connectivity. This solution can also be used anywhere in the community, providing participants and workers the ultimate flexibility.

Is internet access necessary for your system's basic functionality?

Internet access or connectivity is NOT required for any of the three methods we provide for EVV. We provide multiple modalities for EVV data capture, we support data capture anywhere in the community, and we do not require an internet connection at the point of care.

If no internet access is available, what is the alternative?

Our Mobile solution works in a disconnected mode, which means that the data is captured without internet connectivity, and then transmits the data at a later time when an internet connection is available. With this feature, workers can focus on providing care, instead of finding a signal! Our Telephonic solution does not require internet connection, and can operate from landline or cellular phones. Our Fixed Visit Verification solution does not require internet connectivity, landline, or cellular connectivity.

Can data can be captured electronically at the time of service delivery and transferred to the central system when access is available?

Yes. We have two EVV modalities that facilitate this functionality (Mobile Visit Verification and Fixed Visit Verification), thus providing the maximum flexibility for participants and workers in the home and the community.

Are landlines the primary means for logging in and logging out of the system?

We fundamentally believe that multiple technology solutions must be supported in order to give the required flexibility to the Participants, Workers, and Agencies. Historically, landlines have been the primary modality that was used prior to the widespread adoption of smartphone technology. More recently, we are seeing rapid adoption of smartphone technology for EVV, but we maintain that multiple modalities are required to support the flexibility and mobility of the self-directed population.

If a landline is not available, do you provide an alternative device?

In cases where a landline is not available, we offer three options to capture the required information at the point of care. Mobile Visit Verification through the use of a free smartphone application. The application allows the worker to log-in to the application and then start, or end the visit. Telephonic Visit Verification, using a participant's phone to dial a toll free phone number to register the start and end of the visit. Fixed Visit Verification, which is accomplished using a device that generates random codes that are specific to the date and time, and associated with a specific participant.

What other ways do you address the issue of limited internet access?

In addition to the three modalities discussed above, we also provide a web-based portal that allows the workers to adjust, append, or correct visit information. This web-based portal can also be used by the participant to approve, adjust, override, and provide comments on the visits recorded by the EVV system. There is a complete audit trail of all changes made through the web-based portal, and the functionality allowed by the portal is determined and controlled by the payer.

Scheduling

Are set schedules required for your system to function?

Schedules are not required for any of the EVV modalities supplied by Sandata. We believe that the technology should adapt to the workflow of the participants and the workers, while supporting the program requirements established by the payer. The technology does not limit the workflow required by those receiving care.

Are schedules required to be entered by a system administrator?

Schedules can be enabled or disabled based on the program definition and rules. If schedules are enabled, they can be entered and maintained by participants, or they can be managed by administrators. The Sandata solution supports multiple models regarding schedule management.

Can the participant or representative enter weekly set schedules?

Yes, using the Sandata solution, participants can use the web-based portal to enter daily, weekly, or monthly set or repeating schedules.

Can the participant or representative easily make changes to the schedule when needed? If so, is another level of review required for approval?

Yes, using the Sandata web-based portal, the participant can easily manage their schedules, and optionally, also manage their spend-down and overall budget. Any approval constraints are defined by the program and can be enabled or disabled.

Can workers or participants adjust shift start or end times to correct errors? If no, how are errors corrected so that the worker is paid on time?

Yes, participants and workers can adjust times to correct errors or discrepancies using the Sandata web-based portal. Based on the program rules, Reason-Codes are used to rationalize the changes that are made.

What happens when a login or logout time does not fall within the set schedule?

If schedules are enabled within the program, the Sandata solution supports a configurable tolerance window that would allow check-ins/check-outs to link to the expected schedule within the configurable window of time. The tolerance window is generally established by the program payer. Additionally, if a check-in or check-out happens outside the configured tolerance window, the transactions will be logged as "unscheduled" and will require a manual acceptance or denial by an administrator.

Location of Service Provision

How does your EVV solution capture the location where services are delivered when they are not provided at the participant's home?

The Sandata EVV solution work's the same, whether in the home or in the community. The location coordinates (latitude and longitude) are captured at both the start and end of each visit.

If GPS is used, how often is the location recorded?

For most programs, the ONLY time location coordinates are captured is when the worker starts the visit, and when the worker stops the visit. The Sandata solution is not configured to capture location data other than those two events (start and end of the visit). Some statewide EVV programs are requiring intermittent location data-captures to ensure the worker remains with the participant during the length of the visit. In those programs, the EVV solution will capture location coordinates on pre-defined intervals that are defined by the program. Sandata does not recommend this approach for multiple reasons.

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Page **13** of **20**

Does the GPS device continuously track the location of the worker and participant?

No, the Sandata solution does not continuously track the participant or the worker. The use of "bread crumbs", which is the technology used by applications that do track devices, are not used by the Sandata solution. For most programs, the ONLY time location coordinates are captured is when the worker starts the visit, and when the worker ends the visit. The Sandata solution is not configured to capture location data other than those two events (start and end of the visit). Some statewide EVV programs are requiring intermittent location data captures to ensure the worker remains with the participant during the length of the visit. In those programs, the EVV solution will capture location coordinates on pre-defined intervals that are defined by the program. Sandata does not recommend this approach for multiple reasons.

What are the "geofencing" capabilities of your system?

The Sandata solution can flexibly be configured for any reasonable tolerance for geofencing.

What is the alternative to a GPS device if the participant has concerns about their personal safety if their location is tracked?

Sandata provides three different modalities to accomplish EVV data collection. If the Mobile application that leverages GPS technology is not used, there are two additional modalities that can be used. Telephonic Visit Verification: The use of a landline or mobile phone to call a toll-free number to signal the start and the end of the visit. Fixed Visit Verification: The use of a disconnected device to generate a 6-digit code that can be called in a later time.

User-friendly Experience

How do features of your EVV solution support a user-friendly experience?

- Simple to use, requiring minimal or no formal training
- Simple to download and quickly get started
- In-application help and support
- Workers can create their own username and password
- Participants create their own username and password
- Any on-screen text can be customized for languages other than English
- Tasks can be accomplished with a minimum number of clicks or taps
- Text entry is minimized
- ADA Section 508 compliant system
- Capture of tasks and health-risk assessments (optional)
- Supports scheduled and non-scheduled visits
- Schedules are provided for workers (where appropriate)
- Participant phone number included
- Turn by turn, and mass-transportation directions within the application

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Page **14** of **20**

Do workers create their own password and username?

Yes, they can manage their own passwords and usernames.

Do participants create their own password and username?

Yes

Are passwords and usernames generated by the system?

Yes, initial usernames and passwords are created by the system and then participants and workers can manage their usernames and passwords.

Is the user interface based on common mobile device conventions?

Yes. The solution is ADA 508 compatible and works with commonly available assistive tools.

Can the device(s) used to enter be easily modified for individuals with limited motor skills?

Yes. The solution is ADA 508 compatible and works with commonly available assistive tools. Unlike other vendors, Sandata has an independent third party validate our compliance with the ADA requirements.

Can on-screen text can be customized for languages other than English? If not, how will you accommodate workers and participants with limited English skills?

Yes, in addition to English, the application is available in the following languages. Arabic, Bengali, French, Fulani, Mandarin, Nepali, Somali, Serbian, Spanish, Swahili, Vietnamese, Russian

Can required tasks can be accomplished with a minimum number of clicks or taps?

Yes. Tasks are presented to the worker, and a single "radio button" is selected per task.

Does the interface limit text entry?

Text entry is configurable. It can be enabled or disabled based on program rules.

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Page **15** of **20**

Training

What is your overall strategy for training participants, workers, and provider agencies to use your EVV solution?

Sandata fundamentally believes that multiple modalities are required for efficient and effective training. We typically combine in-person classroom, one-on-one, webinar, video, and Learning Management System courses to accomplish training for our solution. Our training department is adept at tailoring an overall training plan based on the size, scale, and geographic location of the target audiences, and typically recommend a blend of these modalities. We have experience with multiple processes for training as well. We have "train-the-trainer" programs, as well as end-user training programs.

How is the initial introduction to your EVV solution accomplished?

Sandata has developed a formal Outreach program that we recommend to all of our clients. The Outreach program consists of a series of communications, newsletters, online events, and in-person orientation meetings for all stakeholders of the program. We have found that a combination of communications that occur frequently and with geographic dispersement is the best way to reach the maximum number of users of the system. The Sandata program includes an online website where questions can be posted and answered, and where all material is catalogued and stored for future reference. We realize that the introduction of new technology can be challenging, and have implemented Change Management principles within our Outreach program to help ease the introduction into existing workflow.

Are the provider agencies expected to train the participants and workers?

Depending on the program rules and expectations, Sandata can support this model through a formal Train-the-Trainer model, but can also provide direct training for participants and workers.

Do you provide written training materials that can be accessed online?

Yes, the training materials can be provided in written form and are always available online.

Are materials available in alternative formats and languages other than English?

Yes, the Sandata training materials can be provided in alternative formats and languages that align with the constituents and their requirements.

Do you have web-based training videos?

Yes, Sandata deploys a series of courses that are available online with our Learning Management Solution. These courses are accompanied with competency scoring at the end of each course to ensure comprehension and absorption.

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Page **16** of **20**

Do you offer webinar-based training that can be archived for viewing at a later date?

Yes, the Sandata training webinars are recorded and provided online for use at a later date.

Is online help with chat available 24/7?

Sandata provides online help for our mobile solution.

What hours would customer service representatives be available to take phone calls?

Sandata customer support for technical and maintenance issues is available Monday through Friday 8:00am - 8:00pm Eastern Time, with extended support available 24/7 for urgent system issues.

Approving Hours Worked

How does the participant review and approve each shift in EVV solution?

Using the Sandata Participant Portal, the participants can view, edit, and approve each shift. The portal also gives the participant visibility of their available funds (if allowed by the program) and therefore assists with the management of their approved care.   The Sandata Participant Portal is an ADA 508 compliant solution that has been certified to work with all commonly available assistive technologies.

How does the participant approve the start time as the worker begins each shift?

Generally the participants do not approve the start time of each visit. Instead, the participants are only required to approve the "visit" which includes both the start and end times of the visit.

How does the participant approve the end time as the worker ends each shift?

Generally the participants utilize the Sandata Participant Portal to manage the approval of all their visits, approving both start and end times for each visit. This can be done at any interval that is convenient to the participant, but we recommend at least weekly to ensure prompt payment for their workers.

How does the participant verify the total hours worked each day?

Using the Sandata Participant Portal, the participants manage the administration of all their visits by various workers.

Can the worker or the participant retroactively adjust the shift start of end times?

The Sandata Solution allows both the worker and the participant to make adjustments to prior visit information. The business rules of the program define the specific capabilities that are enabled for the worker and the participant, but in general, changes to prior visits will require the entry of a program-defined Reason Code.

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Page **17** of **20**

What is the process for correcting errors after the hours have been submitted for processing?

The process for adjusting visit information after a visit has been verified by the participant is defined by each program.

Devices Used to Capture Time

Can workers or participants use their own mobile devices with your EVV solution?

Yes, Sandata supports the Bring Your Own Device (BYOD) model where the worker utilizes their own smartphone or tablet.

Can workers or participants use their own computers or tablets with your EVV solution?

Yes, the Sandata Application can be accessed from any compatible computer that meets the minimum published specifications.

Do you provide devices that can accompany a worker or participant beyond the home with your EVV solution?

Yes, Sandata also supports a Consumer-Centric device model. In this model, the device is associated with the participant and the smartphone or tablet can be utilized anywhere in the community to capture the EVV data at the start and end of the visit.

Sandata has the ability to source mobile devices that are required for a specific program, and is happy to devise a plan that meets the needs of the program.

Does your solution require the use of a device installed at a physical location?

No, the Sandata Solution does not require that a device be physically installed at a specific location. The Sandata solution for EVV facilitates EVV data capture anywhere in the community.

Does your solution offer the use of a device installed at a physical location as an option?

Yes, Sandata can provide a Fixed Visit Verification device that is associated with a specific participant, and is typically utilized in the home. However, the same device can be used in the community as well, as long as the participant maintains control of the device.

Do you provide repair and replacement of devices?

Yes, Sandata can provide complete support and replacement of devices that we provide.

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Page **18** of **20**

Data Privacy and HIPAA Requirements

How does your EVV solution address security issues?

Sandata's risk assessment process helps identify and manage risks that could affect the ability to provide reliable services to our customers. This process includes the completion of an annual third party risk assessment. We contract with an independent third party to conduct a thorough and fair assessment and evaluate the suitability of the design and operating effectiveness of Sandata's security controls. Each year, Sandata completes a SSAE 18 Type 2 security assessment from a third-party evaluator. Through this external review process, a thorough, complete and successful evaluation of Sandata's application security, infrastructure security, physical and data center security and data protection policies serve as evidence of our ability to maintain security, privacy and confidentiality of customer data.

Our solutions are guided by, built, delivered and managed based on industry best practices and framework standards including National Institute of Standards and Technology (NIST), Federal Information Processing Standards (FIPS), Health Insurance Portability and Accountability Act (HIPAA) and HITRUST. We model our solutions with these standards in mind. Additionally, all reports and export files created by Sandata are transmitted to customers under protection of Transport Layer Security ("TLS").

We operate a highly-secured network. Access into the Sandata environments must traverse firewalls. Firewall logs are checked during the weekly network review by Sandata personnel and a review of findings are documented on the weekly checklist. The Security Policy team and Sandata's technical partners conduct a formal review of firewall policies on a quarterly basis. We apply application and database security measures across our data centers. Access to information and application system functions is restricted in accordance with our Security Policy.

Sandata uses third party external vulnerability scanning and monitoring for detection of external attacks. We employ a third party to establish and ensure all network access, maintain logs of all attempts to access networks and receive notification of any unusual activity on Sandata's network. Threat management and breaches are immediately escalated to the Security team. Regular tests of office security integrity are conducted. Sandata's outside IT support provider is directed to periodically attempt unauthorized access to Sandata's server and reports the results to the Security officer. A third-party auditor conducts scans on a semi-annual basis and results are reviewed to identify corrective actions and a timeline for remediation, if needed.

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Page **19** of **20**

Finally, Sandata's Information Technology team performs both penetration tests and application vulnerability assessments against our environment routinely throughout the year. Additionally, we engage a third party to conduct the same testing independently

How does your EVV solution safeguard the privacy of workers?

Ensuring the security and confidentiality of our customer's data is the number one priority at Sandata. As such, Sandata has built a business platform to meet the enterprise security, compliance and privacy requirements of our customers in the highly regulated Healthcare industry. Sandata has established an enterprise-wide Information Security Policy based, in part, on the comprehensive guidelines and objectives defined within the Health Insurance Portability and Accountability Act (HIPAA), including the relevant HITECH amendments, as well as the NIST SP 800 series framework which it references.

How does your EVV solution safeguard the privacy of participants?

To protect the delivery of sensitive EVV-related data across the public internet, Sandata encrypts all data transmissions. Access to the application is done only via the use of a secure internet browser with 256-bit encryption. All automated transfers are encrypted to ensure that all Personal Health Information is protected in accordance with internal security policies. All data interfaces into and out of Sandata systems use data encryption standards that meet our customers' requirements. All standard protocols are supported such as HTTPS, SSH, and SFTP. All client data is treated as Protected Health Information ("PHI") and protected as such.

In addition to all standard security measures noted above, Sandata also employs multiple levels of security for information collected and/or stored on devices such as smart phones. These include secured authentication utilizing strong passwords; all communications occur over secure communications channels; the mobile visit verification application detects jailbreak and/or rooting and disables the application; the mobile visit verification application is encrypted; and any data temporarily on the device is also encrypted.

Aggregator System

Do you offer an aggregator system?

Yes, the Sandata Aggregator solution was the industry's first statewide solution for an Open EVV implementation.

Can your EVV solution be used with an aggregator system?

Yes, the Sandata solution can deliver data to a 3rd party Aggregator solution.

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Page **20** of **20**