



Proposal Response

**State of Nebraska Department of Health and
Human Services**

**Response to Electronic Visit Verification Request for
Proposal #6113 Z1**

October 7, 2019

(954) 719-0004
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TELLUS*eVV*
ELECTRONIC VISIT VERIFICATION



TELLUS

ORIGINAL



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Office: (954) 719-0004

October 7, 2019

Ms. Julie Schiltz & Ms. Annette Walton
State of Nebraska Purchasing Bureau
1526 K Street, Suite 130
Lincoln, NE 68508
Phone: (402) 471-6500

Subject: RFP #6113Z1 Electronic Visit Verification Solution Response

Dear Julie and Annette:

Tellus is pleased to respond to the State of Nebraska Department of Health and Human Services (DHHS) Request for Proposal issued by the State Purchasing Bureau. Tellus embraces DHHS's mission of "Helping people live better lives" and is a leading U.S. provider of mobile Electronic Visit Verification (EVV) and claims processing technology designed especially for the Home Health, Long-Term Services and Supports (LTSS) and Long-Term Care (LTC) markets. Tellus is solely focused on delivering best-in-class EVV solutions. We're proud to be the provider of choice for a variety of payers and agencies. Our comprehensive, cloud-based solutions work to simplify, streamline and accurately verify care tasks delivered to eligible recipients at the point of care, aggregate data from disparate sources, process service data and generate claims that comply with the 21st Century Cures Act as well as defined policies and procedures. This enables health care providers and caregivers to focus their efforts on what matters most — improved patient care with better outcomes, operational efficiency and, ultimately, cost reduction.

The Tellus eVV Mobile App, eVV Administrator Console and eVV Claims Console solutions are fully integrated, intuitive and user friendly. Plus, our Data Aggregation and Business Rules engine allow seamless integration and automatic analysis of data, making the Tellus eVV platform safe, simple and cost-effective for payers and agencies to deploy and caregivers to adopt. With Tellus, caregivers also have the convenience of using just one mobile device and app to verify scheduled visits on behalf of multiple agencies and payers.

At Tellus, our mission is to develop long-term, trusted relationships with our clients through demonstrated performance and high-quality service delivery combined with a sincere desire to "do the right thing" for our clients and their participants each and every time. We take a balanced, holistic approach to solving business challenges, recognizing that each solution must combine aspects of strategy, process optimization, people and technology product innovation.

The Tellus eVV solution is a modern, innovative platform designed to operate within the regulatory environment while continuing to promote the health, independence and

community-living goals of individuals receiving services. The solution is compliant with a wide range of security and health information policies and protocols, including, but not limited to HIPAA, FIPS, NIST cryptographic standards, FedRAMP, ISO 9001, HITECH, PCI DSS, as well as SOC 1, 2, and 3.

Enclosed you will find our response to the Request for Proposal. Based on our experience and expertise with EVV, we believe Tellus is the right solution to meet the guiding principles and technological objectives of the State of Nebraska, as evidenced by the information submitted in our response.

For questions regarding our submission, contact:

Lia Sweeney
Chief Strategy Officer
4Tellus LLC
800 Fairway Drive, #360
Deerfield Beach, FL 33441
Phone: (954) 719-0004, ext. 2002
Email: lia.sweeney@4tellus.com

We look forward to advancing the conversation regarding EVV and welcome the opportunity to discuss our solution in more detail with you.

Sincerely,



Lia Sweeney
Chief Strategy Officer

Request For Proposal For Contractual Services Form

BIDDER MUST COMPLETE THE FOLLOWING

By signing this Request for Proposal for Contractual Services form, the bidder guarantees compliance with the procedures stated in this Request for Proposal, and agrees to the terms and conditions unless otherwise indicated in writing and certifies that bidder maintains a drug free work place.

Per Nebraska's Transparency in Government Procurement Act, Neb. Rev Stat § 73-603 DAS is required to collect statistical information regarding the number of contracts awarded to Nebraska Contractors. This information is for statistical purposes only and will not be considered for contract award purposes.

_____ NEBRASKA CONTRACTOR AFFIDAVIT: Bidder hereby attests that bidder is a Nebraska Contractor. "Nebraska Contractor" shall mean any bidder who has maintained a bona fide place of business and at least one employee within this state for at least the six (6) months immediately preceding the posting date of this RFP.

_____ I hereby certify that I am a Resident disabled veteran or business located in a designated enterprise zone in accordance with Neb. Rev. Stat. § 73-107 and wish to have preference, if applicable, considered in the award of this contract.

_____ I hereby certify that I am a blind person licensed by the Commission for the Blind & Visually Impaired in accordance with Neb. Rev. Stat. §71-8611 and wish to have preference considered in the award of this contract.

FORM MUST BE SIGNED USING AN INDELIBLE METHOD (NOT ELECTRONICALLY)

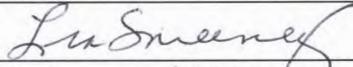
FIRM:	4Tellus LLC
COMPLETE ADDRESS:	800 Fairway Drive #360, Deerfield Beach, FL 33441
TELEPHONE NUMBER:	954-719-0004
FAX NUMBER:	
DATE:	October 4, 2019
SIGNATURE:	
TYPED NAME & TITLE OF SIGNER:	Lia Sweeney, Chief Strategy Officer

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Attestations

I. Terms & Conditions

Bidders should complete Sections II through VI as part of their proposal. Bidder is expected to read the Terms and Conditions and should initial either accept, reject, or reject and provide alternative language for each clause. The bidder should also provide an explanation of why the bidder rejected the clause or rejected the clause and provided alternate language. By signing the RFP, bidder is agreeing to be legally bound by all the accepted terms and conditions, and any proposed alternative terms and conditions submitted with the proposal. The State reserves the right to negotiate rejected or proposed alternative language. If the State and bidder fail to agree on the final Terms and Conditions, the State reserves the right to reject the proposal. The State of Nebraska is soliciting proposals in response to this RFP. The State of Nebraska reserves the right to reject proposals that attempt to substitute the bidder's commercial contracts and/or documents for this RFP.

The bidders should submit with their proposal any license, user agreement, service level agreement, or similar documents that the bidder wants incorporated in the contract. The State will not consider incorporation of any document not submitted with the bidder's proposal as the document will not have been included in the evaluation process. These documents shall be subject to negotiation and will be incorporated as addendums if agreed to by the Parties.

If a conflict or ambiguity arises after the Addendum to Contract Award have been negotiated and agreed to, the Addendum to Contract Award shall be interpreted as follows:

1. If only one Party has a particular clause then that clause shall control;
2. If both Parties have a similar clause, but the clauses do not conflict, the clauses shall be read together;
3. If both Parties have a similar clause, but the clauses conflict, the State's clause shall control.

A. GENERAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The contract resulting from this RFP shall incorporate the following documents:

1. Request for Proposal and Attachments;
2. Amendments to the RFP;
3. Questions and Answers;
4. Contractor's proposal (RFP and properly submitted documents);
5. The executed Contract and Addendum One to Contract, if applicable; and,
6. Amendments/Addendums to the Contract.

These documents constitute the entirety of the contract.

Unless otherwise specifically stated in a future contract amendment, in case of any conflict between the incorporated documents, the documents shall govern in the following order of preference with number one (1) receiving preference over all other documents and with each lower numbered document having preference over any higher numbered document: 1) Amendment to the executed Contract with the most recent dated amendment having the highest priority, 2) executed Contract and any attached Addenda, 3) Amendments to RFP and any Questions and Answers, 4) the original RFP document and any Addenda, and 5) the Contractor's submitted Proposal.

Any ambiguity or conflict in the contract discovered after its execution, not otherwise addressed herein, shall be resolved in accordance with the rules of contract interpretation as established in the State of Nebraska.

B. NOTIFICATION



Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Contractor and State shall identify the contract manager who shall serve as the point of contact for the executed contract.

C. GOVERNING LAW (Statutory)

Notwithstanding any other provision of this contract, or any amendment or addendum(s) entered into contemporaneously or at a later time, the parties understand and agree that, (1) the State of Nebraska is a sovereign state and its authority to contract is therefore subject to limitation by the State's Constitution, statutes, common law, and regulation; (2) this contract will be interpreted and enforced under the laws of the State of Nebraska; (3) any action to enforce the provisions of this agreement must be brought in the State of Nebraska per state law; (4) the person signing this contract on behalf of the State of Nebraska does not have the authority to waive the State's sovereign immunity, statutes, common law, or regulations; (5) the indemnity, limitation of liability, remedy, and other similar provisions of the final contract, if any, are entered into subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity; and, (6) all terms and conditions of the final contract, including but not limited to the clauses concerning third party use, licenses, warranties, limitations of liability, governing law and venue, usage verification, indemnity, liability, remedy or other similar provisions of the final contract are entered into specifically subject to the State's Constitution, statutes, common law, regulations, and sovereign immunity.

The Parties must comply with all applicable local, State and Federal laws, ordinances, rules, orders, and regulations.

D. BEGINNING OF WORK

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The bidder shall not commence any billable work until a valid contract has been fully executed by the State and the successful Contractor. The Contractor will be notified in writing when work may begin.

E. CHANGE ORDERS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The State and the Contractor, upon the written agreement, may make changes to the contract within the general scope of the RFP. Changes may involve specifications, the quantity of work, or such other items as the State may find necessary or desirable. Corrections of any deliverable, service, or work required pursuant to the contract shall not be deemed a change. The Contractor may not claim forfeiture of the contract by reasons of such changes.

The Contractor shall prepare a written description of the work required due to the change and an itemized cost sheet for the change. Changes in work and the amount of compensation to be paid to the Contractor shall be determined in accordance with applicable unit prices if any, a pro-rated value, or through negotiations. The

State shall not incur a price increase for changes that should have been included in

the Contractor's proposal, were foreseeable, or result from difficulties with or failure of the Contractor's proposal or performance.

No change shall be implemented by the Contractor until approved by the State, and the Contract is amended to reflect the change and associated costs, if any. If there is a dispute regarding the cost, but both parties agree that immediate implementation is necessary, the change may be implemented, and cost negotiations may continue with both Parties retaining all remedies under the contract and law.

F. NOTICE OF POTENTIAL CONTRACTOR BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

If Contractor breaches the contract or anticipates breaching the contract, the Contractor shall immediately give written notice to the State. The notice shall explain the breach or potential breach, a proposed cure, and may include a request for a waiver of the breach if so desired. The State may, in its discretion, temporarily or permanently waive the breach. By granting a waiver, the State does not forfeit any rights or remedies to which the State is entitled by law or equity, or pursuant to the provisions of the contract. Failure to give immediate notice, however, may be grounds for denial of any request for a waiver of a breach.

G. BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Either Party may terminate the contract, in whole or in part, if the other Party breaches its duty to perform its obligations under the contract in a timely and proper manner. Termination requires written notice of default and a thirty (30) calendar day (or longer at the non-breaching Party's discretion considering the gravity and nature of the default) cure period. Said notice shall be delivered by Certified Mail, Return Receipt Requested, or in person with proof of delivery. Allowing time to cure a failure or breach of contract does not waive the right to immediately terminate the contract for the same or different contract breach which may occur at a different time. In case of default of the Contractor, the State may contract the service from other sources and hold the Contractor responsible for any excess cost occasioned thereby.

The State's failure to make payment shall not be a breach, and the Contractor shall retain all available statutory remedies and protections.

H. NON-WAIVER OF BREACH

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The acceptance of late performance with or without objection or reservation by a Party shall not waive any rights of the Party nor constitute a waiver of the requirement of timely performance of any obligations remaining to be performed.



I. SEVERABILITY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

If any term or condition of the contract is declared by a court of competent jurisdiction to be illegal or in conflict with any law, the validity of the remaining terms and conditions shall not be affected, and the rights and obligations of the parties shall be construed and enforced as if the contract did not contain the provision held to be invalid or illegal.

J. INDEMNIFICATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

1. GENERAL

The Contractor agrees to defend, indemnify, and hold harmless the State and its employees, volunteers, agents, and its elected and appointed officials ("the indemnified parties") from and against any and all third party claims, liens, demands, damages, liability, actions, causes of action, losses, judgments, costs, and expenses of every nature, including investigation costs and expenses, settlement costs, and attorney fees and expenses ("the claims"), sustained or asserted against the State for personal injury, death, or property loss or damage, arising out of, resulting from, or attributable to the willful misconduct, negligence, error, or omission of the Contractor, its employees, Subcontractors, consultants, representatives, and agents, resulting from this contract, except to the extent such contractor liability is attenuated by any action of the State which directly and proximately contributed to the claims.

2. INTELLECTUAL PROPERTY

The Contractor agrees it will, at its sole cost and expense, defend, indemnify, and hold harmless the indemnified parties from and against any and all claims, to the extent such claims arise out of, result from, or are attributable to, the actual or alleged infringement or misappropriation of any patent, copyright, trade secret, trademark, or confidential information of any third party by the Contractor or its employees, subcontractors, consultants, representatives, and agents; provided, however, the State gives the Contractor prompt notice in writing of the claim. The Contractor may not settle any infringement claim that will affect the State's use of the Licensed Software without the State's prior written consent, which consent may be withheld for any reason.

If a judgment or settlement is obtained or reasonably anticipated against the State's use of any intellectual property for which the Contractor has indemnified the State, the Contractor shall, at the Contractor's sole cost and expense, promptly modify the item or items which were determined to be infringing, acquire a license or licenses on the State's behalf to provide the necessary rights to the State to eliminate the infringement, or provide the State with a non-infringing substitute that provides the State the same functionality. At the State's election, the actual or anticipated judgment may be treated as a breach of warranty by the Contractor, and the State may receive the remedies provided under this RFP.

3. PERSONNEL

The Contractor shall, at its expense, indemnify and hold harmless the indemnified parties from and against any claim with respect to withholding taxes, worker's compensation, employee benefits, or any other claim, demand, liability, damage, or loss of any nature relating to any of the personnel, including subcontractor's and their employees, provided by the Contractor.

4. SELF-INSURANCE



The State of Nebraska is self-insured for any loss and purchases excess insurance coverage pursuant to Neb. Rev. Stat. § 81-8,239.01 (Reissue 2008). If there is a presumed loss under the provisions of this agreement, Contractor may file a claim with the Office of Risk Management pursuant to Neb. Rev. Stat. §§ 81-8,829 – 81-8,306 for review by the State Claims Board. The State retains all rights and immunities under the State Miscellaneous (Section 81-8,294), Tort (Section 81-8,209), and Contract Claim Acts (Section 81-8,302), as outlined in Neb. Rev. Stat. § 81-8,209 et seq. and under any other provisions of law and accepts liability under this agreement to the extent provided by law.

5. The Parties acknowledge that Attorney General for the State of Nebraska is required by statute to represent the legal interests of the State, and that any provision of this indemnity clause is subject to the statutory authority of the Attorney General.

K. ATTORNEY'S FEES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

In the event of any litigation, appeal, or other legal action to enforce any provision of the contract, the Parties agree to pay all expenses of such action, as permitted by law and if order by the court, including attorney's fees and costs, if the other Party prevails.

L. PERFORMANCE GUARANTEES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Performance Guarantees are detailed in Attachment B – Performance Guarantees.

Contractor must collaborate with DHHS on an ongoing basis to adjust service levels as programs and services mature within the scope of the contract. DHHS shall have the right to modify, add or delete Performance Standards throughout the term of the contract should DHHS determine it is in its best interest to do so. Any changes or additions to performance standards will be made in good faith following acceptable industry standards, and will include the input of the Contractor so as to establish standards that are reasonably achievable.

All changes to the Performance Standards and/or Guarantees shall become an official part of the contract and shall continue throughout the term of the contract.

Failure to meet the minimum Performance Standards as specified may result in the assessment of damages as per the then-current Performance Guarantees' defined damages. Contractor will be notified in writing when liquidated damages are applied. In the event a Performance Standard is not met, the Contractor will have the opportunity to defend or respond to the insufficiency. DHHS shall have the right to waive damages if it determines that there were extenuating factors beyond the control of the Contractor that hindered the performance of services. In these instances, DHHS shall have the final determination of performance acceptability.

Should any compensation be owed to DHHS due to the assessment of damages, Contractor shall follow the direction of DHHS regarding the required compensation process.

REMEDIES FOR UNACCEPTABLE PERFORMANCE: Compliance with all provisions, service criteria, and standards for acceptable performance in this contract shall be determined at sole discretion of DHHS. In addition to other remedies identified herein, one or more of the following remedies may be imposed for failure to comply with the service performance-based standards described herein:

1. Contractor shall be required to submit and implement a reasonably acceptable corrective action plan.

2. Payment may be withheld or reduced pending satisfactory implementation of the plan per section IV.E.
3. The Contract may be terminated per section II.S.

The remedies listed above are in addition to all others specifically set forth herein, or any other remedies available at law or equity.

M. ASSIGNMENT, SALE, OR MERGER

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Either Party may assign the contract upon mutual written agreement of the other Party. Such agreement shall not be unreasonably withheld.

The Contractor retains the right to enter into a sale, merger, acquisition, internal reorganization, or similar transaction involving Contractor's business. Contractor agrees to cooperate with the State in executing amendments to the contract to allow for the transaction. If a third party or entity is involved in the transaction, the Contractor will remain responsible for performance of the contract until such time as the person or entity involved in the transaction agrees in writing to be contractually bound by this contract and perform all obligations of the contract.

N. CONTRACTING WITH OTHER NEBRASKA POLITICAL SUB-DIVISIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The Contractor may, but shall not be required to, allow agencies, as defined in Neb. Rev. Stat. §81-145, to use this contract. The terms and conditions, including price, of the contract may not be amended. The State shall not be contractually obligated or liable for any contract entered into pursuant to this clause. A listing of Nebraska political subdivisions may be found at the website of the Nebraska Auditor of Public Accounts.

O. FORCE MAJEURE

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Neither Party shall be liable for any costs or damages, or for default resulting from its inability to perform any of its obligations under the contract due to a natural or manmade event outside the control and not the fault of the affected Party ("Force Majeure Event"). The Party so affected shall immediately make a written request for relief to the other Party and shall have the burden of proof to justify the request. The other Party may grant the relief requested; relief may not be unreasonably withheld. Labor disputes with the impacted Party's own employees will not be considered a Force Majeure Event.

P. CONFIDENTIALITY



Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

All materials and information provided by the Parties or acquired by a Party on behalf of the other Party shall be regarded as confidential information. All materials and information provided or acquired shall be handled in accordance with federal and state law, and ethical standards. Should said confidentiality be breached by a Party, the Party shall notify the other Party immediately of said breach and take immediate corrective action.

It is incumbent upon the Parties to inform their officers and employees of the penalties for improper disclosure imposed by the Privacy Act of 1974, 5 U.S.C. 552a. Specifically, 5 U.S.C. 552a (i)(1), which is made applicable by 5 U.S.C. 552a (m)(1), provides that any officer or employee, who by virtue of his/her employment or official position has possession of or access to agency records which contain individually identifiable information, the disclosure of which is prohibited by the Privacy Act or regulations established thereunder, and who knowing that disclosure of the specific material is prohibited, willfully discloses the material in any manner to any person or agency not entitled to receive it, shall be guilty of a misdemeanor and fined not more than \$5,000.

Q. OFFICE OF PUBLIC COUNSEL (Statutory)

If it provides, under the terms of this contract and on behalf of the State of Nebraska, health and human services to individuals; service delivery; service coordination; or case management, Contractor shall submit to the jurisdiction of the Office of Public Counsel, pursuant to Neb. Rev. Stat. §§ 81-8,240 et seq. This section shall survive the termination of this contract.

R. LONG-TERM CARE OMBUDSMAN (Statutory)

Contractor must comply with the Long-Term Care Ombudsman Act, Neb. Rev. Stat. §§ 81-2237 et seq. This section shall survive the termination of this contract.

S. EARLY TERMINATION

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The contract may be terminated as follows:

1. The State and the Contractor, by mutual written agreement, may terminate the contract at any time.
2. The State, in its sole discretion, may terminate the contract for any reason upon thirty (30) calendar day's written notice to the Contractor. Such termination shall not relieve the Contractor of warranty or other service obligations incurred under the terms of the contract. In the event of termination the Contractor shall be entitled to payment, determined on a pro rate basis, for products or services satisfactorily performed or provided.
3. The State may terminate the contract immediately for the following reasons:
 - a. if directed to do so by statute;
 - b. Contractor has made an assignment for the benefit of creditors, has admitted in writing its inability to pay debts as they mature, or has ceased operating in the normal course of business;
 - c. a trustee or receiver of the Contractor or of any substantial part of the Contractor's assets has been appointed by a court;
 - d. fraud, misappropriation, embezzlement, malfeasance, misfeasance, or illegal conduct pertaining to performance under the contract by its Contractor, its employees, officers, directors, or shareholders;
 - e. an involuntary proceeding has been commenced by any Party against the Contractor under any one of the chapters of



- f. Title 11 of the United States Code and (i) the proceeding has been pending for at least sixty (60) calendar days; or (ii) the Contractor has consented, either expressly or by operation of law, to the entry of an order for relief; or (iii) the Contractor has been decreed or adjudged a debtor; a voluntary petition has been filed by the Contractor under any of the chapters of Title 11 of the United States Code;
- g. Contractor intentionally discloses confidential information;
- h. Contractor has or announces it will discontinue support of the deliverable; and,
- i. In the event funding is no longer available.

T. CONTRACT CLOSEOUT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Contractor will provide, six (6) months prior to the end of the base contract period or any extension thereof, an Agency-approved Turnover Plan covering the possible turnover of contract requirements to DHHS, its designee, or a successor vendor. The Turnover Plan must be a comprehensive document detailing the proposed schedule, activities, and resource requirements associated with the turnover tasks. Bidder must describe their experience in transition activities of a similar EVV project.

DHHS reserves the right to have Contractor submit an additional updated Turnover Plan one (1) month prior to the end of the base contract or any extension thereof. The plan must describe Contractor's approach and schedule for transfer of activities and operational support information. The information must be supplied on media specified by and according to the schedule approved by DHHS. All items in this section must be covered and reflect appropriate timing. The timing and data requirements are illustrative only and do not limit or restrict DHHS's ability to require additional information from the selected Contractor or modify the turnover schedule as necessary.

Contractor must have a process for updating and managing the Turnover Plan, and delivering to DHHS, no later than three (3) working days before the expiration of the contract, copies of all relevant non-proprietary data, all documentation, including but not limited to the following:

1. Copies of working papers, including procedures, programs, and schedules;
2. Status of current projects;
3. Copies of correspondence (internal and external);
4. Listings of third-party software used by the contractor(s), including availability of the software for transfer or purchase by Medicaid or successor vendor(s);
5. Description of functional business process flows;
6. Operational and system information concerning sub-Contractors;
7. Documentation of ongoing outstanding issues;
8. Other documentation necessary to support contract operations; and
9. Other pertinent information necessary to take over and operate the project or to assume the operational activities successfully.
10. This information **shall** be provided to DHHS in paper form, or in electronic form via email, secure file transfer or electronic means as directed by DHHS.

Three (3) months prior to the end of the contract or any extension thereof, Contractor must begin training DHHS staff, or its designated agent, in the operation of non-proprietary systems and business processes. Such training must be completed at least two (2) months prior to the end of the contract or any extension thereof. DHHS may, at its discretion, modify this timing.

Two (2) months prior to the end of the contract or any extension thereof, Contractor must appoint, with DHHS approval, a manager to coordinate and supervise all turnover activities.

Contractor must provide to DHHS one (1) month prior to the scheduled end of the contract, a Turnover Results Report documenting the completion and results of each part of the Turnover Plan. The outline and format of the Turnover Results Report must be approved in advance by DHHS. Turnover will not be considered complete until this document is approved by DHHS. Contractor must not reduce operational staffing levels during the turnover without the prior written approval of DHHS.



All EVV data gathered from this contract and EVV contracts with DHHS-contracted entities is considered property of DHHS. Proprietary software programs will not be required to be delivered to DHHS pursuant to these Turnover Requirements. Contractor's solution must retain all data, documentation and associated media related to this contract to meet DHHS retention requirements throughout the life of the Contract and return all data to DHHS upon termination for any reason.

All provider and stakeholder training materials developed for this project become the property of Nebraska DHHS and will be transitioned per the Turnover Plan.

Upon contract closeout for any reason the Contractor shall within thirty (30) days, unless stated otherwise herein:

1. Transfer all completed or partially completed deliverables to the State;
2. Transfer ownership and title to all completed or partially completed deliverables to DHHS;
3. Return to DHHS all information and data, unless the Contractor is permitted to keep the information or data by contract or rule of law. Contractor may retain one copy of any information or data as required to comply with applicable work product documentation standards or as are automatically retained in the course of Contractor's routine back up procedures;
4. Cooperate with any successor Contractor, person or entity in the assumption of any or all of the obligations of this contract;
5. Cooperate with any successor Contractor, person or entity with the transfer of information or data related to this contract;
6. Return or vacate any State owned real or personal property; and,
7. Return all data in a mutually acceptable format and manner.

Nothing in this Section should be construed to require the Contractor to surrender intellectual property, real or personal property, or information or data owned by the Contractor for which DHHS has no legal claim.

U. RECORDS RETENTION

1. Contractor must maintain all pertinent financial and accounting records and evidence pertaining to the contract in accordance with generally accepted principles of accounting and as specified by the State of Nebraska Law. Upon request, access shall be granted to these records to any State or Federal Government entities or any of their duly authorized representatives.
2. Upon request, financial and accounting records shall be made available to the State of Nebraska's designee(s) at any time during the contract period and any extension thereof, and for ten (10) years from expiration date and final payment on the contract or extension thereof.
3. Other sections of this bid solicitation may contain additional requirements regarding record retention.

II. CONTRACTOR DUTIES

A. INDEPENDENT CONTRACTOR / OBLIGATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

It is agreed that the Contractor is an independent contractor and that nothing contained herein is intended or should be construed as creating or establishing a relationship of employment, agency, or a partnership.

The Contractor is solely responsible for fulfilling the contract. The Contractor or the Contractor's representative shall be the sole point of contact regarding all contractual matters.

The Contractor shall secure, at its own expense, all personnel required to perform the services under the contract. The personnel the Contractor uses to fulfill the contract shall have no contractual or other legal relationship with the State; they shall not be considered employees of the State and shall not be entitled to any compensation, rights or benefits from the State, including but not limited to, tenure rights, medical and hospital care, sick and vacation leave, severance pay, or retirement benefits.

By-name personnel commitments made in the Contractor's proposal shall not be changed without the prior written approval of the State. Replacement of these personnel, if approved by the State, shall be with personnel of equal or greater ability and qualifications.

All personnel assigned by the Contractor to the contract shall be employees of the Contractor or a subcontractor, and shall be fully qualified to perform the work required herein. Personnel employed by the Contractor or a subcontractor to fulfill the terms of the contract shall remain under the sole direction and control of the Contractor or the subcontractor respectively.

With respect to its employees, the Contractor agrees to be solely responsible for the following:

1. Any and all pay, benefits, and employment taxes and/or other payroll withholding;
2. Any and all vehicles used by the Contractor's employees, including all insurance required by State law;
3. Damages incurred by Contractor's employees within the scope of their duties under the contract;
4. Maintaining Workers' Compensation and health insurance that complies with State and Federal law and submitting any reports on such insurance to the extent required by governing law; and
5. Determining the hours to be worked and the duties to be performed by the Contractor's employees; and
6. All claims on behalf of any person arising out of employment or alleged employment (including without limit claims of discrimination alleged against the Contractor, its officers, agents, or subcontractors or subcontractor's employees).

If the Contractor intends to utilize any subcontractor, the subcontractor's level of effort, tasks, and time allocation should be clearly defined in the bidder's proposal. The Contractor shall agree that it will not utilize any subcontractors not specifically included in its proposal in the performance of the contract without the prior written authorization of the State.

The State reserves the right to require the Contractor to reassign or remove from the project any Contractor or subcontractor employee.

Contractor shall insure that the terms and conditions contained in any contract with a subcontractor does not conflict with the terms and conditions of this contract.

The Contractor shall include a similar provision, for the protection of the State, in the contract with any subcontractor engaged to perform work on this contract.

B. EMPLOYEE WORK ELIGIBILITY STATUS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The Contractor is required and hereby agrees to use a federal immigration verification system to determine the work eligibility status of employees physically performing services within the State of Nebraska. A federal immigration verification system means the electronic verification of the work authorization program authorized by the Illegal Immigration Reform and Immigrant Responsibility Act of 1996, 8 U.S.C. 1324a, known as the E-Verify Program, or an equivalent federal program designated by the United States Department of Homeland Security or other federal agency authorized to verify the work eligibility status of an employee.

If the Contractor is an individual or sole proprietorship, the following applies:

1. The Contractor must complete the United States Citizenship Attestation Form, available on the Department of Administrative Services website at <http://das.nebraska.gov/materiel/purchasing.html>
The completed United States Attestation Form should be submitted with the RFP response.
2. If the Contractor indicates on such attestation form that he or she is a qualified alien, the Contractor agrees to provide the US Citizenship and Immigration Services documentation required to verify the Contractor's lawful presence in the United States using the Systematic Alien Verification for Entitlements (SAVE) Program.
3. The Contractor understands and agrees that lawful presence in the United States is required and the Contractor may be disqualified or the contract terminated if such lawful presence cannot be verified as required by Neb. Rev. Stat. §4-108.

C. COMPLIANCE WITH CIVIL RIGHTS LAWS AND EQUAL OPPORTUNITY EMPLOYMENT / NONDISCRIMINATION (Statutory)

The Contractor shall comply with all applicable local, State, and Federal statutes and regulations regarding civil rights laws and equal opportunity employment. The Nebraska Fair Employment Practice Act prohibits Contractors of the State of Nebraska, and their subcontractors, from discriminating against any employee or applicant for employment, with respect to hire, tenure, terms, conditions, compensation, or privileges of employment because of race, color, religion, sex, disability, marital status, or national origin (Neb. Rev. Stat. §48-1101 to 48-1125). The Contractor guarantees compliance with the Nebraska Fair Employment Practice Act, and breach of this provision shall be regarded as a material breach of contract. The Contractor shall insert a similar provision in all subcontracts for services to be covered by any contract resulting from this RFP.

D. COOPERATION WITH OTHER CONTRACTORS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Contractor may be required to work with or in close proximity to other contractors or individuals that may be working on same or different projects. The Contractor shall agree to cooperate with such other contractors or individuals, and shall not commit or permit any act which may interfere with the performance of work by any other contractor or individual. Contractor is not required to compromise Contractor's intellectual property or proprietary information unless expressly required to do so by this contract.



E. PERMITS, REGULATIONS, LAWS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The contract price shall include the cost of all royalties, licenses, permits, and approvals, whether arising from patents, trademarks, copyrights or otherwise, that are in any way involved in the contract. The Contractor shall obtain and pay for all royalties, licenses, and permits, and approvals necessary for the execution of the contract. The Contractor must guarantee that it has the full legal right to the materials, supplies, equipment, software, and other items used to execute this contract.

F. OWNERSHIP OF INFORMATION AND DATA / DELIVERABLES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The State shall have the unlimited right to publish, duplicate, use, and disclose all information and data developed or obtained by the Contractor on behalf of the State pursuant to this contract.

The State shall own and hold exclusive title to any deliverable developed as a result of this contract. Contractor shall have no ownership interest or title, and shall not patent, license, or copyright, duplicate, transfer, sell, or exchange, the design, specifications, concept, or deliverable.

G. INSURANCE REQUIREMENTS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The Contractor shall throughout the term of the contract maintain insurance as specified herein and provide the State a current Certificate of Insurance/Acord Form (COI) verifying the coverage. The Contractor shall not commence work on the contract until the insurance is in place. If Contractor subcontracts any portion of the contract the Contractor must, throughout the term of the contract, either:

1. Provide equivalent insurance for each subcontractor and provide a COI verifying the coverage for the subcontractor;
2. Require each subcontractor to have equivalent insurance and provide written notice to the State that the Contractor has verified that each subcontractor has the required coverage; or,
3. Provide the State with copies of each subcontractor’s Certificate of Insurance evidencing the required coverage.

The Contractor shall not allow any subcontractor to commence work until the subcontractor has equivalent insurance. The failure of the State to require a COI, or the failure of the Contractor to provide a COI or require subcontractor insurance shall not limit, relieve, or decrease the liability of the Contractor hereunder.

In the event that any policy written on a claims-made basis terminates or is canceled during the term of the contract or within six (6) years of termination or expiration of the contract, the Contractor shall obtain an extended discovery or reporting period, or a new insurance policy, providing coverage required by this contract for the term of the contract and six (6) years following termination or expiration of the contract.

If by the terms of any insurance a mandatory deductible is required, or if the Contractor elects to increase the mandatory deductible amount, the Contractor shall be responsible for payment of the amount of the deductible in the event of a paid claim.

Notwithstanding any other clause in this contract, the State may recover up to the liability limits of the insurance policies required herein.

1. **WORKERS' COMPENSATION INSURANCE**

The Contractor shall take out and maintain during the life of this contract the statutory Workers' Compensation and Employer's Liability Insurance for all of the contractors' employees to be engaged in work on the project under this contract and, in case any such work is sublet, the Contractor shall require the subcontractor similarly to provide Worker's Compensation and Employer's Liability Insurance for all of the subcontractor's employees to be engaged in such work. This policy shall be written to meet the statutory requirements for the state in which the work is to be performed, including Occupational Disease. **The policy shall include a waiver of subrogation in favor of the State. The COI shall contain the mandatory COI subrogation waiver language found hereinafter.** The amounts of such insurance shall not be less than the limits stated hereinafter. For employees working in the State of Nebraska, the policy must be written by an entity authorized by the State of Nebraska Department of Insurance to write Workers' Compensation and Employer's Liability Insurance for Nebraska employees.

2. **COMMERCIAL GENERAL LIABILITY INSURANCE AND COMMERCIAL AUTOMOBILE LIABILITY INSURANCE**

The Contractor shall take out and maintain during the life of this contract such Commercial General Liability Insurance and Commercial Automobile Liability Insurance as shall protect Contractor and any subcontractor performing work covered by this contract from claims for damages for bodily injury, including death, as well as from claims for property damage, which may arise from operations under this contract, whether such operation be by the Contractor or by any Subcontractor or by anyone directly or indirectly employed by either of them, and the amounts of such insurance shall not be less than limits stated hereinafter.

The Commercial General Liability Insurance shall be written on an **occurrence basis**, and provide Premises/Operations, Products/Completed Operations, Independent Contractors, Personal Injury, and Contractual Liability coverage. **The policy shall include the State, and others as required by the contract documents, as Additional Insured(s). This policy shall be primary, and any insurance or self-insurance carried by the State shall be considered secondary and non-contributory. The COI shall contain the mandatory COI liability waiver language found hereinafter.** The Commercial Automobile Liability Insurance shall be written to cover all Owned, Non-owned, and Hired vehicles.

REQUIRED INSURANCE COVERAGE		
COMMERCIAL GENERAL LIABILITY		
General Aggregate		\$2,000,000
Products/Completed Operations Aggregate		\$2,000,000
Personal/Advertising Injury		\$1,000,000 per occurrence
Bodily Injury/Property Damage		\$1,000,000 per occurrence
Medical Payments		\$10,000 any one person
Damage to Rented Premises (Fire)		\$300,000 each occurrence
Contractual		Included
Independent Contractors		Included
If higher limits are required, the Umbrella/Excess Liability limits are allowed to satisfy the higher limit.		
WORKER'S COMPENSATION		
Employers Liability Limits		\$500K/\$500K/\$500K
Statutory Limits- All States		Statutory - State of Nebraska
Voluntary Compensation		Statutory
COMMERCIAL AUTOMOBILE LIABILITY		
Bodily Injury/Property Damage		\$1,000,000 combined single limit
Include All Owned, Hired & Non-Owned Automobile liability		Included
Motor Carrier Act Endorsement		Where Applicable
UMBRELLA/EXCESS LIABILITY		
Over Primary Insurance		\$5,000,000 per occurrence
COMMERCIAL CRIME		
Crime/Employee Dishonesty Including 3rd Party Fidelity		\$1,000,000
CYBER LIABILITY		
Breach of Privacy, Security Breach, Denial of Service, Remediation, Fines and Penalties		\$10,000,000
MANDATORY COI SUBROGATION WAIVER LANGUAGE		
"Workers' Compensation policy shall include a waiver of subrogation in favor of the State of Nebraska."		
MANDATORY COI LIABILITY WAIVER LANGUAGE		
"Commercial General Liability & Commercial Automobile Liability policies shall name the State of Nebraska as an Additional Insured and the policies shall be primary and any insurance or self-insurance carried by the State shall be considered secondary and non-contributory as additionally insured."		

If the mandatory COI subrogation waiver language or mandatory COI liability waiver language on the COI states that the waiver is subject to, condition upon, or otherwise limit by the insurance policy, a copy of the relevant sections of the policy must be submitted with the COI so the State can review the limitations imposed by the insurance policy.

3. EVIDENCE OF COVERAGE

The Contractor shall furnish the Contract Manager, with a certificate of insurance coverage complying with the above requirements prior to beginning work at:

Department of Health and Human Services
 Division of Medicaid and Long-Term Care
 Attn: Delivery Services
 301 Centennial Mall, South
 P.O. Box 95026
 Lincoln, NE. 68509-5026

These certificates or the cover sheet shall reference the RFP number, and the certificates shall include the name of the company, policy numbers, effective dates, dates of expiration, and amounts and types of coverage afforded. If the State is damaged by the failure of the Contractor to maintain such insurance, then the Contractor shall be responsible for all reasonable costs properly attributable thereto.

Reasonable notice of cancellation of any required insurance policy must be submitted to the contract manager as listed above when issued and a new coverage binder shall be submitted immediately to ensure no break in coverage.

4. DEVIATIONS

The insurance requirements are subject to limited negotiation. Negotiation typically includes, but is not necessarily limited to, the correct type of coverage, necessity for Workers' Compensation, and the type of automobile coverage carried by the Contractor.

H. ANTITRUST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The Contractor hereby assigns to the State any and all claims for overcharges as to goods and/or services provided in connection with this contract resulting from antitrust violations which arise under antitrust laws of the United States and the antitrust laws of the State.

I. CONFLICT OF INTEREST

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

By submitting a proposal, bidder certifies that there does not now exist a relationship between the bidder and any person or entity which is or gives the appearance of a conflict of interest related to this RFP or project.

The bidder certifies that it shall not take any action or acquire any interest, either directly or indirectly, which will conflict in any manner or degree with the performance of its services hereunder or which creates an actual or an appearance of conflict of interest.

The bidder certifies that it will not knowingly employ any individual known by bidder to have a conflict of interest.

The Parties shall not knowingly, for a period of two years after execution of the contract, recruit or employ any employee or agent of the other Party who has worked on the RFP or project, or who had any influence on decisions affecting the RFP or project.

J. STATE PROPERTY

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The Contractor shall be responsible for the proper care and custody of any State-owned property which is furnished for the Contractor's use during the performance of the contract. The Contractor shall reimburse the State for any loss or damage of such property; normal wear and tear is expected.

K. SITE RULES AND REGULATIONS



Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The Contractor shall use its best efforts to ensure that its employees, agents, and Subcontractors comply with site rules and regulations while on State premises. If the Contractor must perform on-site work outside of the daily operational hours set forth by the State, it must make arrangements with the State to ensure access to the facility and the equipment has been arranged. No additional payment will be made by the State on the basis of lack of access, unless the State fails to provide access as agreed to in writing between the State and the Contractor.

L. ADVERTISING

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The Contractor agrees not to refer to the contract award in advertising in such a manner as to state or imply that the company or its services are endorsed or preferred by the State. Any publicity releases pertaining to the project shall not be issued without prior written approval from the State.

M. NEBRASKA TECHNOLOGY ACCESS STANDARDS (Statutory)

Contractor shall review the Nebraska Technology Access Standards, found at <http://nitc.nebraska.gov/standards/2-201.html> and ensure that products and/or services provided under the contract are in compliance or will comply with the applicable standards to the greatest degree possible. In the event such standards change during the Contractor's performance, the State may create an amendment to the contract to request the contract comply with the changed standard at a cost mutually acceptable to the parties.

N. DISASTER RECOVERY/BACK UP PLAN

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The Contractor shall have a disaster recovery and back-up plan, of which a copy should be provided upon request to the State, which includes, but is not limited to equipment, personnel, facilities, and transportation, in order to continue services as specified under the specifications in the contract in the event of a disaster. Also, please see the Business Continuity and Disaster Recovery Requirements as noted in Attachment A – RTM.

O. DRUG POLICY



Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Contractor certifies it maintains a drug free work place environment to ensure worker safety and workplace integrity. Contractor agrees to provide a copy of its drug free workplace policy at any time upon request by the State.

III. PAYMENT

A. PROHIBITION AGAINST ADVANCE PAYMENT (Statutory)

Payments shall not be made until contractual deliverable(s) are received and accepted by the State.

B. TAXES (Statutory)

The State is not required to pay taxes and assumes no such liability as a result of this solicitation. Any property tax payable on the Contractor's equipment which may be installed in a State-owned facility is the responsibility of the Contractor.

C. INVOICES

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Invoices for payments must be submitted by the Contractor to the agency requesting the services with a full report of the number of all participants who received services during the month and full calculations for invoiced amount, to support payment. Invoices should be submitted to: DHHS EVV Vendor Management, 301 Centennial Mall, NSOB5, Lincoln, NE, 68509. The terms and conditions included in the Contractor's invoice shall be deemed to be solely for the convenience of the parties. No terms or conditions of any such invoice shall be binding upon the State, and no action by the State, including without limitation the payment of any such invoice in whole or in part, shall be construed as binding or estopping the State with respect to any such term or condition, unless the invoice term or condition has been previously agreed to by the State as an amendment to the contract.

D. INSPECTION AND APPROVAL

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

Final inspection and approval of all work required under the contract shall be performed by the designated State officials.

The State and/or its authorized representatives shall have the right to enter any premises where the Contractor or Subcontractor duties under the contract are being performed, and to inspect, monitor or otherwise evaluate the work being performed. All inspections and evaluations shall be at reasonable times and in a manner that will not unreasonably delay work.

E. PAYMENT

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

State will render payment to Contractor when the terms and conditions of the contract and specifications have been satisfactorily completed on the part of the Contractor as solely determined by the State. (Neb. Rev. Stat. Section 73-506(1)) Payment will be made by the responsible agency in compliance with the



State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2401 through 81-2408). The State may require the Contractor to accept payment by electronic means such as ACH deposit. In no event shall the State be responsible or liable to pay for any services provided by the Contractor prior to the Effective Date of the contract, and the Contractor hereby waives any claim or cause of action for any such services.

F. LATE PAYMENT (Statutory)

The Contractor may charge the responsible agency interest for late payment in compliance with the State of Nebraska Prompt Payment Act (See Neb. Rev. Stat. §81-2401 through 81-2408).

G. SUBJECT TO FUNDING / FUNDING OUT CLAUSE FOR LOSS OF APPROPRIATIONS

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The State's obligation to pay amounts due on the contract for any fiscal years following the current fiscal year is contingent upon legislative appropriation of funds. Should said funds not be appropriated, the State may terminate the contract with respect to those payments for the fiscal year(s) for which such funds are not appropriated. The State will give the Contractor written notice thirty (30) calendar days prior to the effective date of termination. All obligations of the State to make payments after the termination date will cease. The Contractor shall be entitled to receive just and equitable compensation for any authorized work which has been satisfactorily completed as of the termination date. In no event shall the Contractor be paid for a loss of anticipated profit.

H. RIGHT TO AUDIT (First Paragraph is Statutory)

Accept (Initial)	Reject (Initial)	Reject & Provide Alternative within RFP Response (Initial)	NOTES/COMMENTS:
LS			

The State shall have the right to audit the Contractor's performance of this contract upon a 30 days' written notice. Contractor shall utilize generally accepted accounting principles, and shall maintain the accounting records, and other records and information relevant to the contract (Information) to enable the State to audit the contract. The State may audit and the Contractor shall maintain, the Information during the term of the contract and for a period of five (5) years after the completion of this contract or until all issues or litigation are resolved, whichever is later. The Contractor shall make the Information available to the State at Contractor's place of business or a location acceptable to both Parties during normal business hours. If this is not practical or the Contractor so elects, the Contractor may provide electronic or paper copies of the Information. The State reserves the right to examine, make copies of, and take notes on any Information relevant to this contract, regardless of the form or the Information, how it is stored, or who possesses the Information. Under no circumstance will the Contractor be required to create or maintain documents not kept in the ordinary course of contractor's business operations, nor will contractor be required to disclose any information, including but not limited to product cost data, which is confidential or proprietary to contractor.

The Parties shall pay their own costs of the audit unless the audit finds a previously undisclosed overpayment by the State. If a previously undisclosed overpayment exceeds one-half (0.5%) of one percent of the total contract billings, or if fraud, material misrepresentations, or non-performance is discovered on the part of the Contractor, the Contractor shall reimburse the State for the total costs of the audit. Overpayments and audit costs owed to the State shall be paid within ninety (90) days of written notice of the claim. The Contractor agrees to correct any material weaknesses or condition found as a result of the audit.

IV. PAYMENT

Form A Bidder Contact Sheet Request for Proposal Number 6113 Z1

Form A should be completed and submitted with each response to this RFP. This is intended to provide the State with information on the bidder's name and address, and the specific person(s) who are responsible for preparation of the bidder's response.

Preparation of Response Contact Information	
Bidder Name:	4Tellus, LLC, dba Tellus
Bidder Address:	800 Fairway Drive, Suite 360 Deerfield Beach, FL 33441
Contact Person & Title:	Lia Sweeney, CFO & EVP Strategic Innovation
E-mail Address:	Lia.sweeney@4tellus.com
Telephone Number (Office):	(954) 719-0004 extension 2002
Telephone Number (Cellular):	
Fax Number:	

Each bidder should also designate a specific contact person who will be responsible for responding to the State if any clarifications of the bidder's response should become necessary. This will also be the person who the State contacts to set up a presentation/demonstration, if required.

Communication with the State Contact Information	
Bidder Name:	4Tellus, LLC , dba Tellus
Bidder Address:	800 Fairway Drive, Suite 360 Deerfield Beach, FL 33441
Contact Person & Title:	Lia Sweeney
E-mail Address:	Lia.sweeney@4tellus.com
Telephone Number (Office):	(954) 719-0004, extension 2002
Telephone Number (Cellular):	
Fax Number:	

Corporate
Overview &
Tech Proposal

V. PROPOSAL AND TECH PROPOSAL

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V. Proposal Instructions

A. Proposal Submission

1. Request For Proposal For Contractual Services Form

BIDDER MUST COMPLETE THE FOLLOWING

By signing this Request for Proposal for Contractual Services form, the bidder guarantees compliance with the procedures stated in this Request for Proposal, and agrees to the terms and conditions unless otherwise indicated in writing and certifies that bidder maintains a drug free work place.

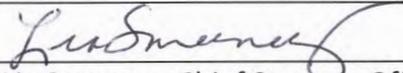
Per Nebraska's Transparency in Government Procurement Act, Neb. Rev Stat § 73-603 DAS is required to collect statistical information regarding the number of contracts awarded to Nebraska Contractors. This information is for statistical purposes only and will not be considered for contract award purposes.

____ NEBRASKA CONTRACTOR AFFIDAVIT: Bidder hereby attests that bidder is a Nebraska Contractor. "Nebraska Contractor" shall mean any bidder who has maintained a bona fide place of business and at least one employee within this state for at least the six (6) months immediately preceding the posting date of this RFP.

____ I hereby certify that I am a Resident disabled veteran or business located in a designated enterprise zone in accordance with Neb. Rev. Stat. § 73-107 and wish to have preference, if applicable, considered in the award of this contract.

____ I hereby certify that I am a blind person licensed by the Commission for the Blind & Visually Impaired in accordance with Neb. Rev. Stat. §71-8611 and wish to have preference considered in the award of this contract.

FORM MUST BE SIGNED USING AN INDELIBLE METHOD (NOT ELECTRONICALLY)

FIRM:	4Tellus LLC
COMPLETE ADDRESS:	800 Fairway Drive #360, Deerfield Beach, FL 33441
TELEPHONE NUMBER:	954-719-0004
FAX NUMBER:	
DATE:	October 4, 2019
SIGNATURE:	
TYPED NAME & TITLE OF SIGNER:	Lia Sweeney, Chief Strategy Officer

2. Corporate Overview

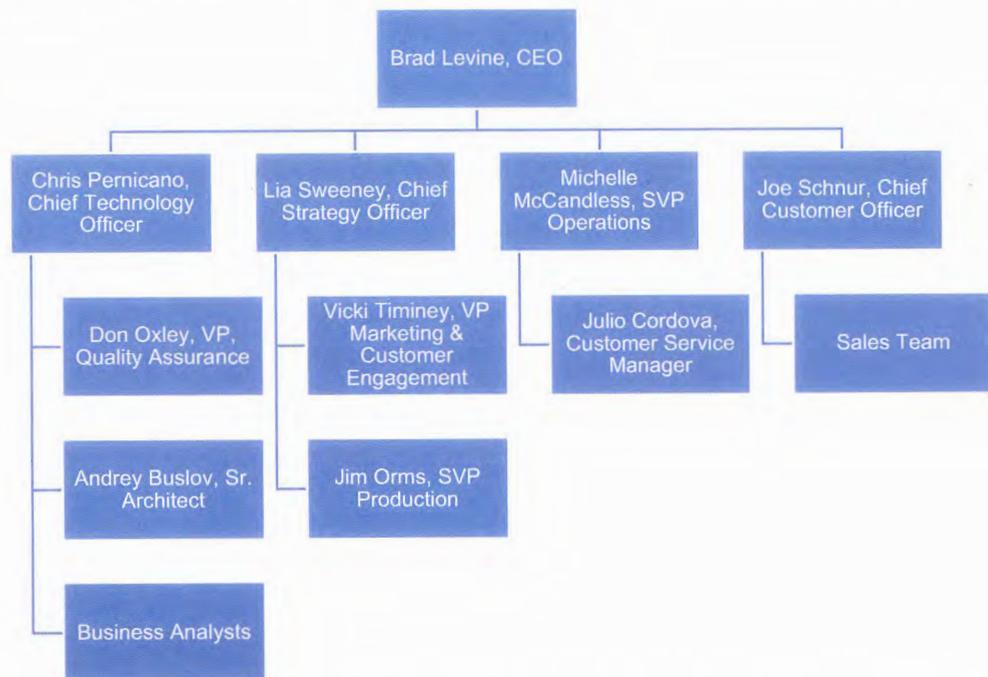
A. Bidder Identification & Information

4Tellus LLC (Tellus) is a privately held company that was converted to a limited liability company registered in the State of Delaware in April of 2019. The company was originally formed as Tellus, Inc. in April of 2013 as a Florida corporation and converted to Tellus, LLC a Florida limited liability company in February of 2014. Company headquarters are located in Deerfield Beach, FL. The original co-founders of Tellus, Bradley Levine and Lia Sweeney are actively engaged in the day to day management of Tellus as Chief Executive Officer and Chief Strategy Officer (respectively) and retain a significant ownership interest.

Shareholders owning five percent or more of the organization are:

Bradley Levine, Boca Raton, FL
Lia Sweeney, Boca Raton, FL
Carroll Capital Tellus Investment, LLC, Greenwich, Connecticut

Tellus currently employs over fifty US-based full-time employees responsible for all implementation and production-based activities. Core product development efforts are supported by offshore development resources.



Tellus is a leading U.S. provider of mobile EVV and claims processing technology designed especially for the personal, home health, long-term



care and behavioral analysis markets. It is the only EVV solution provider in the country to be in full production across a state with mobile technology as the primary method of EVV data capture. Our comprehensive, cloud-based solutions work to simplify, streamline and accurately verify care tasks delivered to eligible members, process service data and generate claims right at the point of care. This enables health care providers to focus their efforts on what matters most — improved patient care with better outcomes, operational efficiency and, ultimately, cost reduction.

Tellus' mission is to develop long-term, trusted relationships with clients through demonstrated performance and high-quality service delivery combined with a sincere desire to “do the right thing” for our clients and their members. We take a balanced, holistic approach to solving business challenges, recognizing that each solution must combine aspects of strategy, process optimization, people and technology product innovation.

Tellus was founded in 2013 for the purpose of identifying and building hosted health care technology solutions. In 2016, Tellus acquired the assets of a mature long-term care management platform operating in Miami/Dade County for more than 15 years. Tellus' founding members identified simultaneous shifts in the health care industry away from fee-for-service toward value-based care and away from traditional hospital and clinical care toward alternative methods of care delivery, particularly home and community-based care that allows individuals to retain the highest level of independence possible. These shifts presented a unique opportunity to develop innovative solutions to aid those transitions. Tellus began developing the Tellus eVV solution pilot program in 2016 working together with a large provider agency in Miami/Dade County to help them gain visibility into care delivery and improve operational efficiencies. During development, the Cures Act was enacted.

The 21st Century Cures Act encourages innovation for a number of highly visible health care initiatives funded, in part, by savings from the use of EVV technology anticipated as a result of reductions in fraud, waste and abuse. The Tellus eVV solution is a modern, innovative platform designed to operate within the regulatory environment while continuing to promote the health, independence and community-living goals of individuals receiving services.

B. Financial Statements

4Tellus, LLC, (Tellus), is a privately held company founded in 2013 with the purpose of identifying and building hosted health care technology solutions. In 2016, Tellus acquired the assets of Go! Health Systems, most significantly, a mature Long-Term Care Management platform



operating in Miami/Dade County for over fifteen (15) years. Tellus currently employs over fifty US-based full time employees.

In 2017, the State of Florida Agency for Health Care Administration selected Tellus technology to replace its underperforming and aging EVV program. Tellus worked closely with the State to implement a solution that not only complied with the 21st Century Cures Act but delivered benefits and value well beyond those requirements. As a result of the successful implementation and execution, Tellus was selected to also provide EVV technology for the State of Florida AHCA's Behavior Analysis program — a program not mandated by the Cures Act to use EVV — and is currently in implementation with an expected go-live date in the first quarter of 2020.

Tellus is a SaaS-based, health care technology company. Our GPS-enabled EVV solution has been in production since 2016 and has supported statewide Medicaid programs since 2017. Tellus' current client base includes four state Medicaid supported programs, ten managed care programs and thousands of providers.



October 2, 2019

State of Nebraska
State Purchasing Bureau
1526 K Street, Suite 130
Lincoln, NE 68508

Re: Tellus LLC
Business Advantage Checking Account – Ending in 7870

Dear Julie Schiltz or Annette Walton:

Our client, Tellus LLC, (the "Client"), has asked me to provide you with this confidential verification of relationship with Bank of America, N.A. (the "Bank") in connection with your request.

Tellus LLC established the above referenced checking account on August 18, 2017. As of the date of this letter, both Bradley Levine and Lia Sweeney are the authorized signers on this account. Further, the address of record for this account is 800 Fairway Drive, Suite 360, Deerfield Beach, FL 33441. This account is current and handled as agreed.

A copy of this letter is being sent to our Client. If you have any additional questions, please do not hesitate to contact me at 480.624.0376.

Sincerely,



Michele Elliott
Senior Vice President and Private Client Manager

cc: Tellus LLC

This verification is being delivered to you with the approval of our Client. Please note that the information set forth in this letter is subject to change without notice, and is provided in strict confidence to you for your own use only, without any responsibility, guarantee, commitment or liability on the part of the Bank, its affiliates or any of its or its affiliates' directors, officers or employees. In no event will the Bank be liable for any special, indirect, exemplary or consequential damages, including but not limited to lost profits. To the extent that Client holds any amounts referenced above in joint accounts, the Bank and its affiliates make no representation as to the legal rights of Client with respect to the joint accounts in the event of death, divorce or otherwise. The Bank cannot provide any credit ratings or opinions of the creditworthiness of the Client or any of its/his/her affiliates, and the above information does not constitute an opinion of the Bank of the Client's ability to successfully perform its obligations under any agreement it may enter into with you, the Bank or any other entity. Finally, the Bank undertakes no responsibility to update the information set forth in this letter.

Bank of America Private Bank is a division of Bank of America, N.A., and other subsidiaries of Bank of America Corporation.
Bank of America, N.A., Member FDIC.
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Tellus is not aware of any judgments, pending or expected litigation or other real or potential financial reversals that may materially affect the viability or stability of the organization.

C. Change of Ownership

Tellus does not anticipate any change in ownership or control of the company during the twelve (12) months following the proposal due date.

D. Office Location

Tellus is located at 800 Fairway Drive, Suite 360, Deerfield Beach, FL 33441

E. Relationships with the State

Tellus has had no prior relationships with the State of Nebraska.

F. Bidders Employee Relations to State

Tellus does not have any employees/party members that have had relationships with the State of Nebraska.

G. Contract Performance

Tellus has not had a contract terminated for any reason at any Federal, State or Governmental agency/entity and/or Managed Care Organization, for default during the past five (5) years.

H. Summary of Bidders Corporate Experience

Tellus has been selected as the EVV vendor for state Medicaid programs and Managed Care Organizations contracted by state Medicaid agencies. The primary method of EVV for all of the programs we support is a GPS-enabled smart phone application downloaded from commercially available app stores onto caregiver owned devices. The following references are shared as examples of projects currently in production using our EVV technology. Tellus is the provider of EVV technology and support services for all of the projects referenced.

Contact Name & Title: Toby Philpot, AHCA Chief of Staff
Business Name: Florida Agency for Health Care Administration
Address: 2727 Mahan Drive, Tallahassee, FL 32308
Email: Toby.philpot@ahca.myflorida.com
Phone # / Fax #: (850) 412-3600 / N/A
Prime Contractor or Subcontractor: Yes
Scheduled Completion Date & Planned Budget:
Actual Completion Date & Actual Budget:
Years Associated & Type of Work Performed: Two Years Tellus was selected as the technology vendor to provide an EVV system for Home Health Services for the State of Florida, and the system is in production. Tellus provides data collection at the point of care, administrator and payer consoles, data integration and aggregation, business rules, claims pre-adjudication and reporting and analytics. Tellus designed, developed and supports the EVV solution. This is a statewide program. AHCA also selected Tellus to provide EVV for its Behavior Analysis program, and the system will be in production beginning August 1, 2019.

Contact Name & Title: Lori Hairston, Director Health Services
Business Name: UnitedHealthcare
Address: 3100 SW 145 th Ave., Suite 200, Miramar, FL 33027
Email: Lori_hairston@uhc.com
Phone # / Fax #: (954) 364-0726 / N/A
Prime Contractor or Subcontractor: Prime Contractor
Scheduled Completion Date & Planned Budget:
Actual Completion Date & Actual Budget:
Years Associated & Type of Work Performed: 1.5 Years Tellus is the primary vendor implementing the EVV platform for UnitedHealthcare Florida AHCA Medicaid Managed Care insurance payer. The general purpose of the platform is to provide electronic proof that a direct caregiver is at the proper location during the correct timeframe to render the prescribed care to the recipient.

Contact Name & Title: Debra Wingo, Director of Long Term Care
Business Name: Aetna
Address:
Email: WingoD@aetna.com
Phone # / Fax #: (561) 342-1740
Prime Contractor or Subcontractor: Prime Contractor
Scheduled Completion Date & Planned Budget:

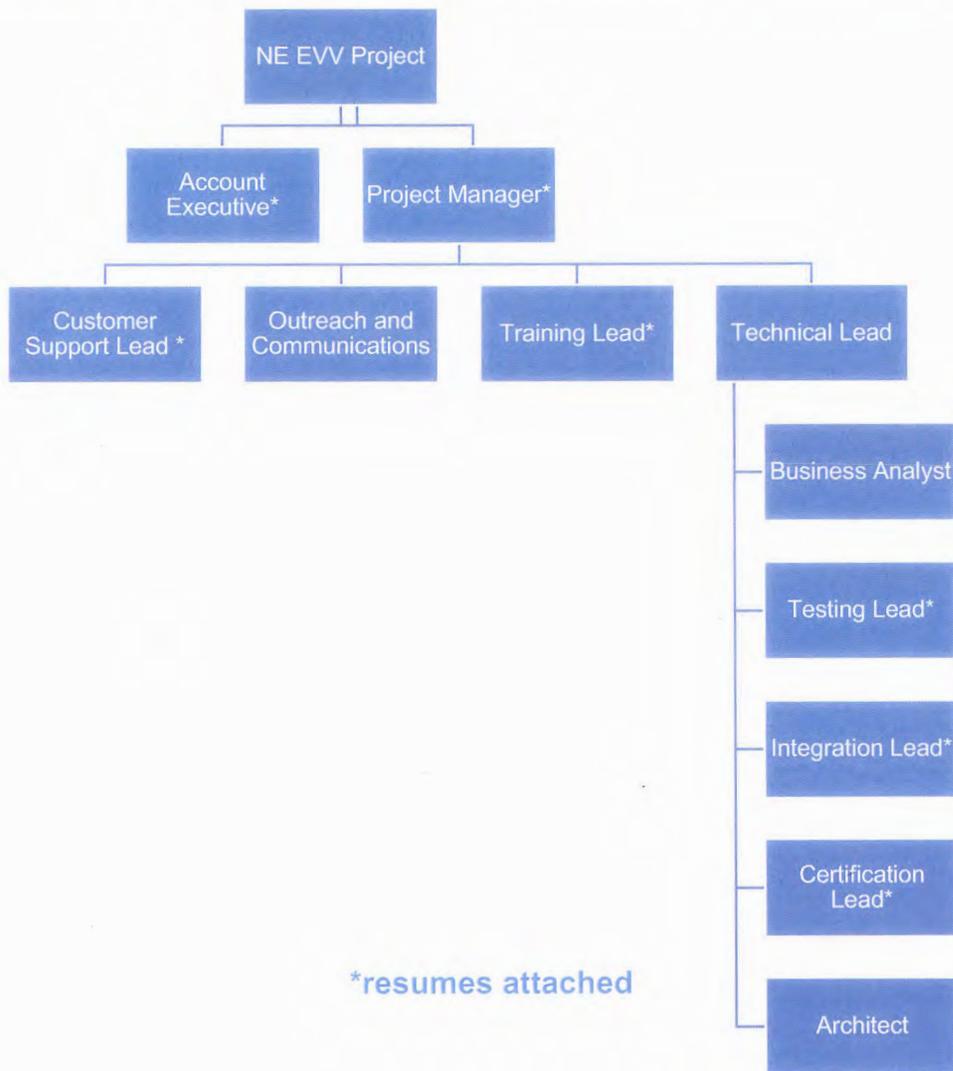


Actual Completion Date & Actual Budget:

Years Associated & Type of Work Performed: 1.5 Years

Tellus is the primary vendor implementing the EVV platform for Aetna, a Florida AHCA Medicaid Managed Care insurance payer. The general purpose of the platform is to provide electronic proof that a direct caregiver is at the proper location during the correct timeframe to render the prescribed care to the recipient.

I. Summary of Bidders Proposed Personnel/Management Approach



Role	Key Personnel	Full Time / Part Time
Account Executive	Lia Sweeney	Part Time
Project Manager	Irlande Germain	Full Time
Testing Lead	Don Oxley	Part Time
Integration Lead	Jim (James) Ormgs	Part Time
Certification Lead	Chris Pernicano	Part Time
Training Lead	Michelle McCandless	Part Time
Customer Support Lead	Julio Cordova	Part Time
Business Analyst	TBD	Full Time
Technical Lead	TBD	Part Time
Outreach & Communications	TBD	Part Time

LIA SWEENEY, CPA CHIEF STRATEGY OFFICER, TELLUS

EXPERTISE

- Operations
- Financial Modeling
- Budgeting
- Accounting
- Project Management
- Systems Implementation

EDUCATION

M.S., Management Information Systems — Nova Southeastern University

M.S., Accounting (*Specialization in Taxation, Coopers & Lybrand Scholarship for Graduate Study*) — University of Florida

B.S., Accounting — University of Florida

CERTIFICATIONS

Certified Public Account, FL License #AC0022243 (Sat for exam May 1990)

CONTACT

Email • lia.sweeney@4tellus.com
Phone • (561) 900-4047

EXECUTIVE PROFILE

An accomplished Operations & Finance Executive with diverse functional and industry experience including technology, financial services, health care and publishing. Adept at balancing creativity and innovation to develop and implement solutions that achieve critical business objectives. Results driven, with well-developed conceptual and analytical abilities. Committed to achieving project deadlines while minimizing costs through the effective use of resources.

EXPERIENCE

2014 — Present, CFO & EVP Strategic Innovation, Tellus

Growing company offering software products to healthcare providers and development services employing mix of onshore and offshore resources

Chief Operating & Financial Officer

- Responsible for day-to-day functions related to operations and finance including budgeting, accounting, financial reporting, project management, analyzing business requirements, cash management and office management.
- Research, synthesize and present business and product opportunities to constituents.
- Manage and gather business requirements for software development products and projects including web applications, mobile applications and backend integration.
- Develop and implement policies and procedures related to resources, financial reporting and onboarding employees.

2010 — 2013, Independent Contractor, Boca Raton, FL

- Various projects including financial modeling, budgeting, income tax preparation and business brokerage. Research, synthesize and present business and product opportunities to constituents.

2008 — 2010, Chief Financial Officer, Iron Bridge Tools, Inc.

Consumer products company generating approximately \$70M in annual revenue importing & wholesaling hand tools.

- Reported to owner. Areas reporting to this position included financial reporting, accounts payable, accounts receivable, payroll and cash management.
- Led system conversion of financial software resulting in accurate and timely financial reporting.
- Implemented financial controls improving record keeping and accountability.
- Managed external audits and preparation of income tax returns.
- Liaisoned with banking and lender representatives.
- Evaluated prospective purchase of manufacturing facility and determined it did not meet corporate objectives.

LIA SWEENEY, CPA

CHIEF STRATEGY OFFICER, TELLUS

EXPERIENCE

2007 — 2008, Consultant, Cross Country Healthcare, Inc.

- Hired as a consultant to assist in preparation of federal and state income tax returns resulting in offer of permanent employment.

2005 — 2006, Fiduciary Associate, Wachovia Trust

- Hired as part of a pilot program to assist a Fiduciary Sales Officer. Responsible for internally marketing trust services and developing a customer base to be transitioned to trust officers for servicing.
- Exceeded company expectations by developing a referral network resulting in face-to-face prospect meetings, several months ahead of schedule.
- Exceeded company expectations by expanding client base, representing millions of dollars in additional assets.

2003 — 2004, Chief Financial Officer, Nurse-On-Call of South Florida, Inc.

Home healthcare company generating approximately \$4M in annual revenue. Hired by new owner who took control of this financially troubled company in 2003 to turnaround and expand the business.

- Reported to owner. Areas reporting to this position included financial reporting, billing, payroll, accounts payable, taxation, monitoring cash flow, budgeting and licensing.
- Prepared and submitted IRS Offer in Compromise resulting in hundreds of thousands of dollars in tax savings.
- Led system conversion of financial software, fully meeting implementation objectives.
- Documented processes to improve consistency and understanding that increased efficiency by 20%.
- Identified a case of fraudulent activity resulting in recovery of funds.

2001 — 2003, Managing Member, Mahoney Cohen Family Office Services

South Florida startup affiliated with a top 40 accounting firm operatin in Manhattan.

- Responsibilities included opening office, managing operations, identification and implementation of software solutions, budgeting, financial reporting and marketing. Advised parent company it would be necessary to offer general accounting and tax or investment services to succeed, they purchased an accounting firm in Miami and have been successful in building the family office revenue base to approximately \$1M annually.
- Office was up and running, under budget within several weeks, ahead of schedule.
- Developed expansive third-party referral network and best in class database, which was key to establishing broad client base.

1996 — 2001, Sun-Sentinel Company

South Florida publishing company with revenues exceeding \$400M annually, owned by Tribune Company.

Controller

- Reported to CFO. Responsible for staff of 25 overseeing general accounting, financial reporting, accounts payable, cashiering and payroll. Also responsible for expense budgets totaling \$14M and balance sheet budget with reported assets in excess of \$165M.
- Business unit liaison responsible for successful roll-out of financial systems including Peoplesoft, Extensity and Purchasing Cards, reducing operational redundancy and increasing efficiency.
- Represented company in sales tax audit, resulting in approximately \$100K in savings.
- Responsible for integrated financial reporting of acquired company, resulting in identification of overstatement of \$400K in accounts receivable.

Circulation Administration & Planning Manager (1997-1999)

- Managed staff of ten with responsibility for all financial aspects of this \$40M operational division including financial and statistical reporting, budgeting, ad hoc analysis and accounts receivable. Liaison with Audit Bureau of Circulation to support circulation statistical reporting.
- Developed models to accurately capture, compile and report circulation statistics, which enabled more accurate circulation planning and elimination of excess copies.

Project Accountant (1996-1997)

- Worked with Chicago Service center to resolve reconciliation issues related to \$25M accounts receivable balance. Project was successfully complete with full reconciliation of the account.



TELLUS

TELLUS CV Response to Request for Proposal #6113 Z1 32

IRLANDE GERMAIN, PMP

PROJECT MANAGER, TELLUS

SKILLS

- Agile (Scrum) Methodology
- Software Development Life Cycle
- Atlassian Confluence Proficiency
- Infragistics Prototyping
- Accuracy & Detail Orientated
- Atlassian JIRA Proficiency
- Interpersonal Skills
- Strategic Planning
- Restructuring

EDUCATION

2004, Indiana University —
Bachelor of General Studies

CERTIFICATIONS

Project Management Professional
ITIL Foundations
COMPTIA Network +
COMPTIAA+

Technical Skills

Modeling Tools: Infragistics,
Microsoft Visio

Utilities: Microsoft Office Suite
(Project, Excel, PowerPoint)

CONTACT

Email • irlandegermain@gmail.com
Phone • (317) 719-0004



SUMMARY

Accomplished and integrity-driven software development Project Management Professional who has been recognized as a leader with strengths in reengineering business processes, defining continuous improvement processes, building consensus and providing solutions for integral parts of administration. Verifiable track record of managing projects while always delivering on time, and exceeding expectations. Strong interpersonal skills, highly adept at facilitating discussions, being proactive and having strong attention to detail.

SELECTED HIGHLIGHTS

- Cross-functionally collaborated between all levels of management and departments to increase productivity by over 50%
- Self-starter with the ability to work well and provide crisis management in fast-paced environments
- Experience in corporate operations, project success and client relationship-building programs with a proven track record of achieving results by leading and motivating multiple teams.
- Proven track record in planning and executing projects among cross-functional, high-matrix organizations.
- Effectively manage multiple priorities, and performs under pressure in a fast-paced, rapidly changing environment. Skilled in project organization and management, problem resolution and data documentation.
- Performed all phases of requirement management, including gathering, analyzing, detailing and tracking requirements.
- Advanced communicator with all levels of personnel, clients, technical team, and executive managers.
- Excellent interpersonal skills, hard work and dedication have built up a reputation for being positive in decision making, straightforward and honest in communicating while being flexible in problem solving.

EXPERIENCE

2018 — Present, Project Manager, Tellus

- Gather requirements using project management/business analysis methodologies including but not limited to interviews, requirement workshops, use cases, workflow analysis, document analysis, etc.
- Develop detailed project plans, project timelines, reports, and project status sheets, that are managed and disseminated throughout the project life cycle.
- Manage stakeholder and management expectations throughout the project management lifecycle.
- Ensure high level of compliance to HIPPA guidelines and protection of PHI data.
- Defines IT project scope, goals and deliverables that support business goals in collaboration with senior management and stakeholders
- Champion grooming, iteration planning, organizing and motivating teams to achieve a higher level of performance through value-driven practices.
- Works closely with marketing team to build business case proposals and other go-to-market documents and communications.
- Able to perform the System Development Life Cycle (SDLC) using the Agile Scrum Methodology phases from project initiation through project closure.

IRLANDE GERMAIN, PMP

PROJECT MANAGER, TELLUS

EXPERIENCE

2017 — Present, Senior Project Manager, PAYBOX Corp.

- Planned, scheduled, tracked and managed software development project timelines, milestones and deliverables
- Develop detailed project plans and associated communications documents
- Work with internal teams to develop and validate schedules and project plans and gain customer sign-off
- Identify and manage project dependencies and critical path
- Delegate tasks and responsibilities to appropriate resources
- Maintain master project documentation, project status reports and facilitate project status meetings.
- Regularly reviewing project scope, costs, performance and business benefits to keep the project on track
- Facilitate communication between functional groups
- Proactively manage changes in project scope, identify potential risks, and devise contingency plans
- Ensure the Scope Change Management Process is followed. Ensure all changes are identified, validated and estimated
- Communicate impact of changes
- Ensure the Issues Management Process is followed
- Train cross functional team members on new processes and procedures and tools
- Set and continually manage project expectations with team members and stakeholders
- Identify and resolve issues and conflicts within the project team.
- Assist sales teams with demonstration of software
- Assist with on-site training and development of training materials

2013 — 2017, Project Manager II, Homes Media Solutions

- Detailed requirements writing, prototyping, outlining project scope, developing project charter, completing gap analysis and responsible for creating release plans.
- Contribute to the technical assessment, scope definition, project planning, analysis, design, implementation, & testing of large projects.
- Conducting both internal and external meetings and documenting meeting agendas, notes, and action items.
- Strong verbal and written communication demonstrated through effectively managing project updates, changes, and risks to stakeholders.
- Main point of contact for enterprise customers and vendors.
- Leading and supporting multiple teams of 10-15 through grooming, planning and execution of project scope.
- Managing and escalating defects within backlog during steady state.
- Consistently exceeding expectations by ensuring projects are on time, on budget, compliant to standards, and meet business needs.
- Creating detailed build notices outlining deliverables and project highlights.
- Facilitating daily scrum meetings and agile board with cross functional team members.
- Work with stakeholders to lead in the analysis, development and standardization of processes and procedures to optimize successful delivery of project.
- Navigating problems which arise during the project to senior management when necessary and providing resolutions.

2011 — 2013, Project Manager, Finish Line, Inc.

- Transitioned to assistant project manager role on \$15M WAN Project, after developing strategic techniques for resolving project issues.
- Provide project management for projects including, but not limited to new and remodel store construction, new hardware integrations, and software upgrades.
- Review AutoCAD drawings to verify all electrical and CAT5 cabling are correctly depicted for all new and remodel locations.
- Contribute to project plans, implementation plans, test plans, and functional requirements ensuring all projects are completed on time and under budget
- Increase productivity by developing manuals, runbooks, department guides for both the network team and end users
- Interface between architect teams, construction teams, engineer teams, and support teams, and internal customers
- Worked under minimum supervision to understand business processes/requirements, analyze business problems, and translate them into specific system requirements to find technology/automation solutions that are cost effective and meet business needs.



IRLANDE GERMAIN, PMP

PROJECT MANAGER, TELLUS

EXPERIENCE

2011 — 2013, Project Manager, Finish Line, Inc.

- Utilized strong problem solving and creative/critical thinking skills to understand business needs.
- Recommended changes in development, maintenance, and system standards to senior management and key stakeholders; Developed system implementation plans and created business/technical artifacts for archive.
- Consistently exceeded expectations ensuring projects were on time, on budget, compliant to standards, & meet business needs; Contributed to the technical assessment, scope definition, project planning, analysis, design, implementation, & testing of large projects.

2010 — 2011, NOC Technician, Finish Line, Inc.

- Main point of contact for monitoring, maintenance and test and turn up of network infrastructure initiatives for all Finish Line locations.
- Provides Tier II support for Network Operations Center
- Works with Telecommunication vendors for moves, adds and changes as well as network outages for dispatches and troubleshooting
- Provides daily SLA violation for monitoring software
- Daily track and reporting of network equipment, circuit and store information
- Performs hardware testing and reconditioning on equipment that has been returned from field

2005 — 2010, Shareholder Service Account Representative, American Funds Service Company

- Developed training programs for new employees and developed the skills existing employees to further the organizations success
- Project manager for the development of new internal/external company forms which greatly improved client/customer service
- Increased client involvement and loyalty by offering shareholders and brokers additional training with website navigation
- Responsible for setting up new accounts, and performing maintenance on existing accounts
- Handled numerous client issues and consistently exceeded expectations

DONALD R. OXLEY JR.

VICE PRESIDENT, QUALITY ASSURANCE, TELLUS

TECHNICAL SKILLS

- **Testing:** Jira, TFS, Rally, ApTest Manager, Quality Center
- **Defect Management:** Jira, BugZilla, TFS, Tracker, Rational ClearQuest
- **Automation:** QTP/UFT, Test Complete, LoadRunner, Selenium, Performance Center, iTest SoapUI, Postman, Jenkins, Maven
- **Other Tools:** SoapUI, Postman, Jenkins, Maven
- **Requirements:** Jira, Rally, TFS, DOORS
- **Operating Systems:** Windows, Windows Server, Redhat, Linux
- **Office Tools:** Excel, PowerPoint, Word, Project, Publisher, Outlook, Gmail, Slack, Teams, WebEx

EDUCATION

M.B., Business Administration, — Nova Southeastern

B.S., Management (with Distinction) — Nova Southeastern

A.S., Electronics Technology — Hillsborough Community College

CONTACT

Email • don@oxleyteam.com

Phone • (954) 494-8516

Social • linkedin.com/in/donoxleyjr



EXECUTIVE PROFILE

Results-oriented senior leader in numerous development life cycles, including Agile, DevOps, and Waterfall. Accomplished in managing complex projects across multiple geographical locations, reducing cycle times, increasing testing coverage, and enhancing test processes. Effectively integrate and utilize automation and test management tools. Adept at optimizing resource capacity to meet business objectives. Broad experience in strategic planning, budget analysis, instituting key performance measurements, and risk analysis.

CORE STRENGTHS

Leadership • Testing Techniques • Test Methodologies • Problem Solving • Risk Assessment • Continuous Improvement • Talent Development & Utilization • Contingency Planning • Agile • DevOps • Waterfall

EXPERIENCE

2018 — Present, Vice President of Quality Assurance, Tellus

Small privately held startup company providing state of the art Electronic Visit Verification (eVV) for home health care.

Built a QA organization from the ground up with resources in multiple geographical locations (US and off-shore). Manage the day-to-day Test Engineering, Business Analyst, and SCM teams in delivering mobile and cloud-based applications.

- Hired full stack Test Engineers capable of full range of black-box and white-box testing including UI, web services, databases, integration, system, performance and more.
- Managed team to develop automation framework and test automation for Regression Testing using Selenium with Java and Appium Studio for Mobile application.
- Established continuous improvement program to identify, analyze, and implement changes to process, tools, and methodologies to streamline delivery of new features to production faster and with higher quality.
- Implemented Agile / SAFe methodology, estimation methods, and established a repeatable cadence in production deliveries.
- Developed KPI metrics to identify trends, gauge progress, and correct issues rapidly.

2013 — 2018, Director of Global Software QA Test, Vertiv Co. (formerly Emerson Network Power)

Large global technology company that specializes in infrastructure management solutions for data centers and power distribution systems.

Directed team of 80+ test engineering professionals in multiple geographical locations (US and off-shore) working multiple testing disciplines, including Embedded, Functional, Tellus eVV Response to Request for Proposal #6113 Z1 36

DONALD R. OXLEY JR.

VICE PRESIDENT, QUALITY ASSURANCE, TELLUS

EXPERIENCE

2013 — 2018, Director of Global Software QA Test, Vertiv Co. (formerly Emerson Network Power) *continued*

System, and Performance Testing of Enterprise and Mobile applications using Agile / SAFe and Waterfall methodologies. Managed simultaneous software, hardware, and firmware projects. Mentored and coached managers and test engineers through one-on-one meetings and training sessions. Focused on improving productivity through training on advanced testing techniques, standardizing test data, and implementing test automation.

- Implemented continuous improvement program to enhance testing practices which led to robust test planning and test case design, increased testing coverage, focused test automation and test results reporting.
- Introduced Risk-Based Testing methods resulting in prioritized test execution, that is, executing the most critical tests early in the testing cycle and finding critical defects faster and decreased cycle times by eliminating nonessential test cases.
- Composed a standardized testing process document to align all Vertiv test organizations in utilizing common best practices, methodologies, and tools; removed impediments and streamlined the process.
- Assembled an automation team and created automation strategy to construct a new framework making automation design faster and maintenance less laborious.
- Drove strategic efforts to reduce testing cycle times and increase testing coverage by eliminating test case redundancies and identifying test case gaps to assure a high level of quality.
- Created and tracked project level KPIs measuring on-time delivery, customer reported defects, and percent of automation. KPI data was utilized in the Continuous Improvement program.
- Produced a comprehensive real time testing Dashboard used to identify testing progress and defect tracking.

2011 — 2013, Director of SW Quality and Releases, Cross Match Technologies

Medium-sized privately held company providing state of the art biometric solutions and devices.

Introduced an efficient level of structure and quality improvements to testing and release management. Managed test teams residing in the US and Germany involved in both manual and automated testing. Trained incoming test engineers on Agile / Scrum methodologies and testing techniques. Cultivated positive working environment and built team synergy between development and testing engineers.

- Streamlined software release process to deliver release packages more quickly into production by eliminating redundancies, unnecessary steps, and breaches in the process that allowed delivery of untested applications.
- Managed migration from Team Foundation Server 2008 to Team Foundation Server 2010 which introduced the Implementation of TFS Test Manager for test case management and automation.
- Developed automation strategy and implemented test automation using Team Foundation Server 2010 resulting in an increase in automation by 20%.

2009 — 2011, Director of Product Verification & Test, Sezmi Corporation

Privately help startup company providing a new IPTV broadcast media service.

Directed the day-to-day testing resources and activities across geographical locations and built strong System Validation Test team and Integration Test team with emphasis on teamwork and successful collaboration. Developed individuals into high performing contributors by fostering a positive and cohesive working environment that resulted in creating a high level of morale and empowerment among team members.

- Managed QA Test, Staging, and Production environments culminating in smooth migration of software from QA to Production. Environment builds and version control were built by Maven; continuous integration and deployment was performed using Jenkins.
- Improved defect detection rate by over 400% by introducing new testing techniques, utilizing a modular test design and removing redundancies.
- Created QA Testing Process establishing the guidelines for functional and system level testing, and the release criteria used for all projects thus providing release expectations for all stakeholders.



DONALD R. OXLEY JR.
VICE PRESIDENT, QUALITY ASSURANCE, TELLUS

ADDITIONAL RELATED EXPERIENCE

Donald R. Oxley, JR. P.A., Self-Employed Quality Assurance Consultant

Tellabs (Formally Advanced Fibre Communications), Manager of Quality Assurance

Racal-Datacom, Inc., Manager of System Test

AT&T Paradyne (Formerly Paradyne Corporation), Sr. Test Engineer

PROFESSIONAL TRAINING

Testing:

- Systematic Software Testing
- Mastering Test Design
- Advanced Testing Techniques
- SW Reliability Measurement: Intro & Practical Application

Management & Project Management:

- Integrated Project Management
- MAP (Management Action Program) Training

JAMES (JIM) ORMS

SVP, DEVELOPMENT & INTEGRATIONS, TELLUS

SKILLS

- Software Development
- Project Management
- Vendor/ Partner Management
- Systems Integration
- Technical/ Customer Support
- Electronic Medical Records
- Leadership/ Team Building
- Technology Planning
- Technology Deployment
- Process Improvement
- Application Design
- Business Development

EDUCATION

1999, University of Louisville —
Bachelor's in Finance

AWARDS

- 2013 — Kentucky Certified Nursing Assistant,
- 2011 — Honorary Kentucky Colonel
- 2010 — Valedictorian of Signature CEO School
- 2009 — Bank Technology News Innovation Award
- 2008 — K2 New Technology Award
- 2005 — Regional Winner for Entrepreneur of the Year from Ernst and Young
- 2004 — Regional Winner for Entrepreneur of the Year from Ernst and Young
- 2003 — TEPR Award for Top Document Management Program
- 2002 — Acheived Predictive Index Certification

SUMMARY

Technology leader with twenty years of CIO / CTO experience with software companies, physician offices, long-term care centers and home health agencies. Experienced with multiple Electronic Medical Record solutions in various healthcare settings. Collaborative leader who works closely with operations and executive management to organize priorities, deliver solutions and bring an entrepreneurial approach to support company goals.

EXPERIENCE

2019 — Present, SVP Development & Integrations, Tellus

Lead software development and production for a comprehensive EVV solution to help our clients use mobile technology to manage the caregiver and patient interaction Ensure comprehensive compliance, security and control platforms for EVV and system integrations.

Manage all areas of Integration Development

- Manage development team for all system integration
- Lead offshore development team for core software solutions
- Manage 3rd-party sytem integrations

2017 — 2018, Chief Information/Technology Officer, Almost Family, Inc.

Acquired by LHC Group in a Merger in 2017. Almost Family, Inc., together with its subsidiaries, provided home healthcare services in the United States. The company operates through three segments and has approximately 330 branch locations in 26 states.

Managed all areas of Information Technology and Services including networking and infrastructure, desktop support services, telecom, security and technical support. Led the design of an EVV solution. Also led the development team in an internal system conversion from Informix character based system to .Net platform.

- Managed merger processes with LHC group.
- Led development of internal software for billing and office management system.
- Managed the integration of new HRMS solution with multiple backend systems.
- Redesigned reporting model for company Key Indicators to move from Informix to MS SQL.

2010 — 2017, Chief Information/Technology Officer, Signature Healthcare Services

Signature HealthCare is a long-term health care and rehabilitation company with 118 locations in 10 states and over 17,000 employees. They are the 7th largest provider of long-term care in the country.

As CIO, I was responsible for all areas of Technology including working with senior leadership to ensure technology aligned with company strategic goals. I worked with our innovation center and related companies to introduce and support new solutions for multiple business lines. As CTO, I directed the development and analyst teams to create internal solutions for compliance, clinical and legal departments. We also created an internal long-term care EMR solution.
Tellus EVV Response to Request for Proposal #6113 Z1



JAMES (JIM) ORMS

SVP, DEVELOPMENT & INTEGRATIONS, TELLUS

EXPERIENCE

2010 — 2017, Chief Information/Technology Officer, Signature Healthcare Services (*continued*)

- Vendor Selection and contract negotiations for technology solutions.
- IT Strategic Direction including 3rd party affiliated companies
- Consolidating multiple IT systems and processes into Enterprise platform reducing expense while creating efficiencies.
- Managed all software development teams internally and externally. Led development of internal software for billing and office management system.
- Supported 80% growth of company over 3 years while staying highest ranked department in company.
- Managed outside customers that were on the Conexus platform.

2007 — 2010, President & Cofounder, Conexus, LLC

Acquired by Signature Healthcare. Conexus, LLC developed, marketed and supported software and accompanying solutions that offered increased visibility and decreased costs for clients. Conexus provided unique, integrated solutions, which monitored documents, sign-offs and processes for completion, or lack thereof, across an organization on a real-time basis.

Co-founded company and managed development team to create a software product from concept to delivery. Created systems to implement and support software including delivery, documentation, setup and support. Helped create mission and vision for company as well as ongoing product management and business development. Helped create multiple channels of distribution for software increasing sales opportunities.

- Managed team of developers and created award winning compliance software in both Client / Server and web based environments.
- Successfully raised capital for organization from Angel Investors and State of Kentucky.
- Oversight of marketing efforts including website, public relations and ad agency management.
- Identify, negotiate and manage partnerships and referral agreements.
- Helped facilitate acquisition by SHC.
- to MS SQL.

2003 — 2007, VP Development & Technical Operations, Allscripts Healthcare

Allscripts (NASDAQ: MDRX) is a leader in healthcare information technology solutions that advance clinical, financial and operational results. Allscripts is one of the largest public companies focused exclusively on healthcare information technology globally. As of December 31, 2016, they had approximately 7,600 employees worldwide.

As VP of development I led the team for enhancing the current product offering that had been integrated to the Allscripts EMR. Responsibilities also included integrating our technology into other product lines internal to Allscripts as well as new platform acquisitions.

As VP of Technical Operations I oversaw the support areas of multiple product lines and introduced new systems and process to improve customer support throughout the company.

- Delivered new products and modules to current customers decreasing outstanding development backlog by 50% within 3 months.
- Participated in user conferences by presenting classes, moderating forums and roundtables.
- Participated in industry conferences including expert panels.
- Implemented new helpdesk models and process to reduce customer ticket backlog by 30% across the organization.
- Worked with senior team to add customer service as one of the key principles of the company.



JAMES (JIM) ORMS

SVP, DEVELOPMENT & INTEGRATIONS, TELLUS

EXPERIENCE

1999 — 2003, Chief Information Officer/ VP Technical Operations, Advanced Imaging Concepts

Acquired by Allscripts. Advanced Imaging Concepts provided document-imaging, scanning and management software for health care providers such as physician groups and hospitals. The company developed Impact.MD, a computerized patient-records platform that served as electronic file for patient information that integrated to multiple EMR platforms.

Created and implemented systems and process for installation of industry leading medical record solution. Managed team that completed integrations to multiple billing, practice management, electronic medical record software and lab systems. Led team of trainers who developed user guides, training materials and documentation for all product lines. Managed support team for Level 1 and 2 support. Managed employment screening and hiring for organization via use of Predictive Index. Managed all network and hardware support personnel. Identified, negotiated and managed strategic technical partnerships.

- Successfully created implementation processes, built call center, and set-up helpdesk to accommodate four consecutive years of 100% sales growth while maintaining quality.
- Achieved highest customer satisfaction ratings in industry from third party reviews.
- Achieved recognition as top imaging solution in Healthcare by third party reviewer.
- Successfully helped build vision and strategies for company that resulted in acquisition by a public company.



CHRIS PERNICANO

CHIEF TECHNOLOGY OFFICER, TELLUS

EDUCATION

1990 — 1993
University of Florida — MBA

1990 — 1993
University of Florida — MS
Engineering

1989 — 1994
University of Florida — BS
Mechanical Engineering

ACTIVITIES

Pernicano lives in Fort Lauderdale with his wife Kristin and young twins Navy and Jax. The twins are the family's full-time activity.

CONTACT

Address • 2590 NE 43rd St. | Ft. Lauderdale, FL | 3308

Email • chris@perni.net

Phone • (954) 816-6372

Social • [linkedin.com/in/chrispernicano](https://www.linkedin.com/in/chrispernicano)



SUMMARY

Pernicano has deep executive experience in all aspects of small- and medium- company with a focus on the conceptualization, creation and market rollout of large-scale cloud-based Software as a Service (SaaS) solutions in the fintech and healthcare industry spaces.

EXPERIENCE

2017 — Present, Chief Technology Officer, Tellus

Managed all aspects of technology operations. Managed offshore development in Vietnam, Russia, and India. Designed, developed, and released a large-scale production solution for the control of Medicaid fraud, waste, and abuse.

2014 — 2017, SVP Strategic Relationships, FPS Group, LLC

Managed strategic partner and strategic client relationships. Instrumental in the design, development, and production rollout of a large-scale SaaS recordkeeping solution in the fixed-income space.

2000 — 2013, Co-Founder & President, Blue Frog Solutions, Inc. | Founder/ SVP Solution Strategies/SVP Sales, Aplifi, Inc.

Conceptualized, designed, developed a SaaS Annuity Order Entry and Compliance solution. Founded the company and grew it to a \$40M valuation before selling to a strategic investor.

1996 — 2000, Co-Founder & Chief Technology Officer, Capital Internet Group (CIG)

CIG developed a high-fidelity solution for the web-based presentation of mutual fund statements. During this time, Managed technology operations and solution development.

MICHELLE MCCANDLESS

SENIOR VICE PRESIDENT, OPERATIONS, TELLUS

CERTIFICATIONS

- **Six Sigma Green Belt** Certified, 2013
- **Six Sigma Yellow Belt** Certified, 2012
- **ASQ Certified Manager of Quality/Operational Excellence (CMQ/OE)**, 2012
- **Certified Fraud Examiner (CFE)**, 2012
- **Master's Certificate in Project Management** (The George Washington University)
- **Information Technology Management Program Certificate** (Georgia Tech)

EDUCATION

M.B., Business Administration, Management & Marketing — Mercer University

B.A., Psychology — University of Washington

CONTACT

Email • michelle.mccandless@4tellus.com

Phone • (954) 951-2960

LinkedIn • linkedin.com/in/michellemccandless



EXECUTIVE PROFILE

Senior Operations Professional with progressive industry experience in both healthcare and financial services (B2B and B2C). Solid track record in maximizing value of corporate product offerings by improving systems to elevate responsiveness and quality. Particular strengths in product support model creation, contact centers (both in-sourced & outsourced), optimizing customer experience, implementing meaningful metrics systems, risk management and IT integrations. Solid transition leader with experience in restructuring, turnaround and start-ups. Well regarded for ability to attract, develop and retain talent.

CORE COMPETENCIES

Operational Efficiencies • Development of Human Capital • Strategic Planning • Capital Budgets/ Programs • Change Management & Transitions • Business Development • Relationship Management • System Implementation • Contact Center Management • Process/Procedure Improvement • Risk Management • Program Management • SaaS Regulatory Compliance • Voice of the Customer • Cross-Functional Teams • Social Media • Servant Leader

EXPERIENCE

2019 — Present, SVP, Operations, Tellus

Tellus is a leading provider of electronic visit verification and mobile health solutions

Manage key corporate functions including claims processing, security and infrastructure, customer success (contact center management) and training to design, implement and maintain operational processes and controls for electronic visit verification processes within the Medicaid (direct and managed-care) ecosystem. Provide strategic operational oversight to effectively grow this start-up organization. Responsible for improving operational efficiencies and ensuring (state) contract compliance.

2016 — 2018, SVP, Operations, Sunshine Health/Centene

Sunshine Health is a Florida Medicaid and specialty health plan and a wholly-owned subsidiary of Centene Corporation, a diversified, multi-national healthcare enterprise that provides a portfolio of services to government-sponsored healthcare programs.

Oversee all health plan operations (physical and behavioral) including contact center (member and provider), claims and dispute resolution, provider data management, credentialing, configuration, enrollment/eligibility, analytical reporting, and program management and implementation (700 employees). Responsible for improving operational efficiencies and ensuring (state) contract compliance.

- Played key role in expansion of Sunshine's business (physical and behavioral health) during state Medicaid/Specialty Plan re-procurement process.
- Introduced Operational Performance Improvement Group and Process Improvement Team structures for accountability and visibility for KPIs.

MICHELLE MCCANDLESS

SENIOR VICE PRESIDENT, OPERATIONS, TELLUS

EXPERIENCE

2014 — 2016, Vice President, Provider Process & Services, Humana

Humana Inc is committed to helping millions of medical and specialty members achieve their best health. A successful history in care delivery and health plan administration is helping to create a new kind of integrated care with the power to improve health and well-being and lower costs.

Operational and strategic oversight for a team of 550 onshore/2000+ offshore focused on medical claims processing and provider claim issue resolution for health care providers (hospitals, independent physicians and groups). Leadership of 100% outsourced provider contact centers supporting all lines of business supported by Humana. Direct leadership of centralized vendor management team, which managed additional offshore work for credentialing, provider data management and enrollment functions.

- Reduced from 3 to 2 third party call centers that reduced overhead and improved quality by 7% in 2015
- Redesigned Provider support structure (broad organization redesign) to improve Provider simplicity in Humana interactions.

2008 — 2014, FISERV

Fiserv Card Services has delivered EFT (electronic funds transfer) services since 1976, combining experience with state-of-the-art technology to become an industry leader. Fiserv specializes in ATM, network, and card services, offering clients customized EFT processing for their business needs.

Vice President, Service Excellence (2011 — 2014)

Determine and lead all service excellence initiatives (quality, provider experience/net promoter) through Card Services (1000 associates) with team of 5 direct reports. Created a Quality Center of Excellence which determined organizational strategy for improved quality/client experience focus. Created process improvement plans for key departments and lead client experience team to measure and improve voice of the client/voice of the customer feedback. Created metrics communicated to highest levels of corporate leadership. Recruited by senior management to then Lead Client Communications Team (3500 clients), Internal/External Training and Documentation Teams, Productivity Tools Team and Shared Services/Process Improvement Teams.

Director Risk Operations (2008 — 2011)

Created new Risk Office consulting services team, managing to \$64M revenue stream within initial three years of product offering. Oversight of the risk management program for the Card Services organization. Developed and implemented systems, policies, risk management best practices and procedures for the identification, collection, analysis and delivery of risk information. Optimized strong relationship and communication skills to ensure proper client interaction in managing fraud issues (ie-articulating event, mitigating liability, ongoing revenue preservation). Familiar with all aspects of payment processing for issuing financial institutions.

1989 — 2008, Equifax Information Services, LLC.

A global information solutions leader, Equifax leverages one of the largest sources of consumer and commercial data to create customized insights that enrich the performance of business.

Assistant Vice President, Enabling Technologies (2001 — 2008)

Led 50+ person teams (project managers, business analysts, QA, developers) remotely and in-house, creating and delivering financial services decisioning and loan origination systems (SaaS) for strategic clients. Implemented efficiency improvements, drove cost savings, generated new revenue streams, and reduced new client on-boarding time.

Senior Director, Business Solutions (2000 — 2001)

Led team of professionals designing and implementing custom decision (software) solutions to financial services, government, telecommunications and health care industries. Supervised project plan creation, administration of current/future resources, reporting actionable statistics on assets and project delivery metrics.



MICHELLE MCCANDLESS

SENIOR VICE PRESIDENT, OPERATIONS, TELLUS |

EXPERIENCE

1989 — 2008, Equifax Information Services, LLC. *(continued)*

Director, Sales Support, Automated Delivery Systems (1996 — 2000)

Established connectivity with Equifax customers through vendor, mediating with the customers' telecommunications group and/or outsourced provider to install technical interfaces designed to deliver products/services to clients. Developed communication system to advise management and sales team on production service issues. Designed and implemented system-to-system interface published for customers on semi-annual basis.

- Constructed third-party vendor strategies for top 50 vendors, including all facets of Equifax Vendor Conference and optimization of channel development strategy

1995 — 1996, Senior Analyst, Test Verification, Equifax Information Services

1991 — 1995, Training Manager, Equifax Information Service Center, Equifax Information Services

JULIO A. CORDOVA

CUSTOMER SUCCESS MANAGER, TELLUS

SKILLS

- Advanced in MS Office Suite
- CRM Software (Salesforce, NetSuite, Five9)
- QuickBooks
- WFM Software (NICE, Ring Central, IEX TotalView)
- Call Quality Software (Calabrio, OFiniti, Digium)
- IVR Software (Digium, Ring Central)
- Bi-Lingual — English & Spanish (Speak, Read & Write)

SKILLS

2017 — 2019, Miami Dade College — Bachelor's in Business Administration (*In progress*)

2018 — 2019, Florida International University — Lean Six Sigma Green Belt (*In progress*)

CONTACT

Email • julio.cordova@4tellus.com
Phone • (954) 719-0004



SUMMARY

- Over ten years of experience as a General Management and Director in Customer Service, Sales and Training departments of several organizations.
- Over ten years of experience in the health care industry, including Medicare and Medicaid.
- Extensive experience in E-Commerce and Retail.
- As leader of training and customer care departments, took key role in improving training material and customer experience through the following tactics: mentoring, directing, supervising overall functions and staff of training and customer service operations, handling top-notch professional support services, providing personal interaction, and resolving varied client inquires and complex issues.
- Over the past five years, served in the role of Director and General Manager rebuilding two companies' call centers from the ground up.

EXPERIENCE

2018 — Present, Customer Success Manager, Tellus

- Manages and directs all aspects of service center operations and customer needs to meet established standards.
- Supervises and coordinates activities of employees providing telephone customer support services.
- Provides, monitors and maintains a twenty-four (24) hours-a-day, seven (7) days-per-week (24/7) toll-free customer service telephone system.
- Creates and maps department workflow processes to support company and customer goals.
- Creates and analyzes sales and service metrics and revises workforce management, training, or operations as needed to meet production and QA goals.
- Develops and implements service and sales strategies to maximize sales and retention levels. Works with senior management and executives to establish unit goals and budgets, with full accountability for variance measurement and execution on a monthly, quarterly and annual basis.

2015 — 2018, Call Center Director & GM, Universal Environmental

- Created and Monitored KPI's (key performance indicators)
- Workforce Management (Planned and forecasted to ensure staffing needs are met)
- Ran daily, weekly and monthly reports. (KPI's, Sales, Quality, WFM and Marketing Report)
- Analyzed Reports and Data to ensure the Call Center was running optimally.
- Team Development and Coaching (Setting Achievable and Clear Goals)
- Created and Maintained Policies and Procedures to ensure quality and efficiency.
- Project Management Leader
Tellus eVV Response to Request for Proposal #6113 Z1 46

JULIO A. CORDOVA

CUSTOMER SUCCESS MANAGER, TELLUS

SKILLS

- Advanced in MS Office Suite
- CRM Software (Salesforce, NetSuite, Five9)
- QuickBooks
- WFM Software (NICE, Ring Central, IEX TotalView)
- Call Quality Software (Calabrio, OFiniti, Digium)
- IVR Software (Digium, Ring Central)
- Bi-Lingual — English & Spanish (Speak, Read & Write)

SKILLS

2017 — 2019, Miami Dade College — Bachelors in Business Administration (*In progress*)

2018 — 2019, Florida International University — Lean Six Sigma Green Belt (*In progress*)

CONTACT

Email • julio.cordova@4tellus.com
Phone • (954) 719-0004

EXPERIENCE

2014 — 2014, Call Center Director, BEL USA LLC.

- Created and Monitored KPI's (key performance indicators)
- Workforce Management (Planned and forecasted to ensure staffing needs are met)
- Ran daily, weekly and monthly reports. (KPI's, Sales, Quality, WFM and Marketing Report)
- Analyzed Reports and Data to ensure the Call Center is running optimally.
- Team Development and Coaching (Setting Achievable and Clear Goals)
- Created and Maintained Policies and Procedures to ensure quality and efficiency.

2010 — 2013, Call Center Manager, HomeService USA

- Consulted Departmental Heads to Discuss Strategies to Maximize Performance
- Reviewed Operational Records & Reports to Project Sales & Determine Profitability
- Created the Training Materials
- Trained all New Employees
- Provided Ongoing Coaching & Support through: Training, Quality Monitoring, Disciplinary Actions, and Performance Evaluations

2007 — 2010, Call Center Manager (Medicaid & Medicare Department), United Health Group

- Managed & Trained over 250 Agents (Subordinate Supervisors & Team Leads)
- Developed & Coached Teams of Associates and Insurance Agents
- Ensured Licensing & Compliance Requirements were met and maintained.
- Participated in Leadership, Operations, Sales & Marketing Training.
- Conducted and Led Multiple Seminars

2004 — 2007, Provider Relations Team Lead, Humana

- Supervised a team of agents and dealt with all escalated calls from members
- Reached out to Medicare recipients to inform them of the CarePlus Medicare Advantage Plan
- Made appointments with members to further discuss the plan with Benefit Consultants



K. Subcontractors

Tellus does not intend to subcontract any part of the performance of the services offered under this contract.

3. Technical Approach

a. Understanding the Project Requirements

Tellus reviewed and fully understands the requirements of the project as stated in the RFP, RTM and all additional attachments.

b. Proposed Design, configuration and development approach

i. EVV Philosophy

Tellus advocates the open vendor, or hybrid, EVV model because choice fosters competition, which, ultimately, is better for payers, providers and recipients because it results in higher quality software and better customer support. With an open EVV architecture, industry best practices are the standard by which applications are evaluated and measured.

Current industry best practices dictate that software application functionality be modularized and easy to integrate with applications built by other vendors. This offers payers and providers the ability to choose the best combination of tools to support their programs and goals. The critical component that ensures an open model system results in a comprehensive solution at the payer level is the ability to aggregate multitudes of data from disparate sources. If data from all vendor solutions is pulled into a single database, the payer achieves the benefit of allowing providers to choose how to capture EVV data while facilitating the production of meaningful analytics and reporting. Comprehensive data analysis and reporting provides payers with the information they need to:

- Measure patient outcomes
- Improve operational efficiencies
- Benchmark providers
- Benchmark direct caregivers
- Reduce fraud, waste and abuse

The open EVV model provides the best of both worlds: provider choice combined with the real-time, transparent data to ensure improved patient outcomes and payer program integrity. Tellus eVV is a modern, robust EVV technology supporting all the features, functions and capabilities the State is seeking.

ii. Global Positioning System (GPS) Data Capture

The primary method Tellus EVV uses to verify care rendered by personal care aides is Global Positioning System (GPS) services enabled on mobile devices. GPS coordinates are captured both at check in and check out.

Our mobile software applications are written in native Android and iOS and are able to capture GPS coordinates using satellite even if the mobile device is offline, meaning the caregiver is not connected to Wi-Fi and/or cellular service.

As long as the direct caregiver opens the EVV app on their mobile device while they have access to Wi-Fi or cellular service, their schedule will sync to the mobile device. All service data can be captured and cached whether or not the caregiver has network connectivity. When the caregiver regains Wi-Fi or cellular service, all activity captured while the mobile device was in offline mode will automatically synchronize to the EVV database.

This feature provides the ability to capture electronically verified visit information even for recipients who reside in residences with limited wireless network connectivity. GPS trilateration is used to capture coordinates even when Wi-Fi and cellular service is not available.

To ensure more than ninety percent (90%) of all personal care service claims are verified using GPS EVV confirmation, Tellus recommends DHHS require providers to capture GPS coordinates at the time services are rendered. If coordinates are not captured, or if rendered services take place outside of the defined geofence for the scheduled visit, providers should be required to enter a reason code prior to submitting the claim for adjudication.

Reason codes will be compared across providers to analyze aberrant behavior, which will be reported to the State as potential instances of fraud, waste or abuse.

iii. Manual Overrides

Permission-based roles defined during the business requirements gathering phase of the engagement determine which users have the ability to perform manual overrides. Administrators may be given permission to enter visit start and end times in the web portal on behalf of the caregiver. They also may be required to enter reason codes to

explain why data cannot be captured remotely and/or why rendered service data may not agree with scheduled information.

All manual overrides of data captured on mobile devices are monitored using an audit log that records the user who made the change and the date and time the change was made.

Depending on program-defined rules, a beneficiary record may contain more than one address. Beneficiary details can be loaded into the EVV database in several ways:

- Source system upload: payer electronically transmits information in real time or in the form of a batch file
- Administrator upload: provider uploads data in the form of a pre-defined Excel file
- Administrator entry: provider manually enters data

The address of record loaded from the source system or entered by the administrator is always retained as the primary beneficiary address. Additional addresses can be added and scheduled, as required. If services are delivered at an address that is different than the scheduled address, the administrator may be required to enter a reason code to explain the deviation.

Visits can be started and/or ended by Provider Administrators, as required. If clock in/clock out data is entered by the Administrator in the web dashboard instead of captured using our mobile app, business rules can flag the entry as a deviation from expected activity so the State can be made aware of deviations from expected behavior in the form of alerts or reports.

iv. Audit Logs

All data entered into the EVV application or modified after entry is tracked in an audit log that continually runs in the background of both the web-based and mobile applications. The audit log captures:

- Effective date
- End date
- Date when last changed
- Who made last change
- Short description
- Long description

v. Alternative Electronic Verification Methods

The ability to enable alternative EVV methods to supplement GPS verified services is a configuration setting for Tellus EVV. Configurations can be enabled at the payer and/or program level. The following alternative EVV methods are available and can be enabled at the request of the State:

- Telephonic Integrated Voice Response (IVR) technology
- Fixed object devices
- Manual entry by provider administrators via data entry or delayed upload

vi. EVV Claims Console & Claims Submission

Virtually all electronically captured data is synched to the EVV database in real time. The only exception is data captured when mobile devices are in offline mode. Data captured in offline mode is synched automatically when the direct caregiver is back in range of WiFi or cellular services. All data resident on the mobile device is encrypted at rest and in transit.

Real-time data transmission and synchronization means claims can be reviewed within minutes of the visit being completed. Claims submissions in the form of 837 files will be scheduled to occur at the frequency defined by the State.

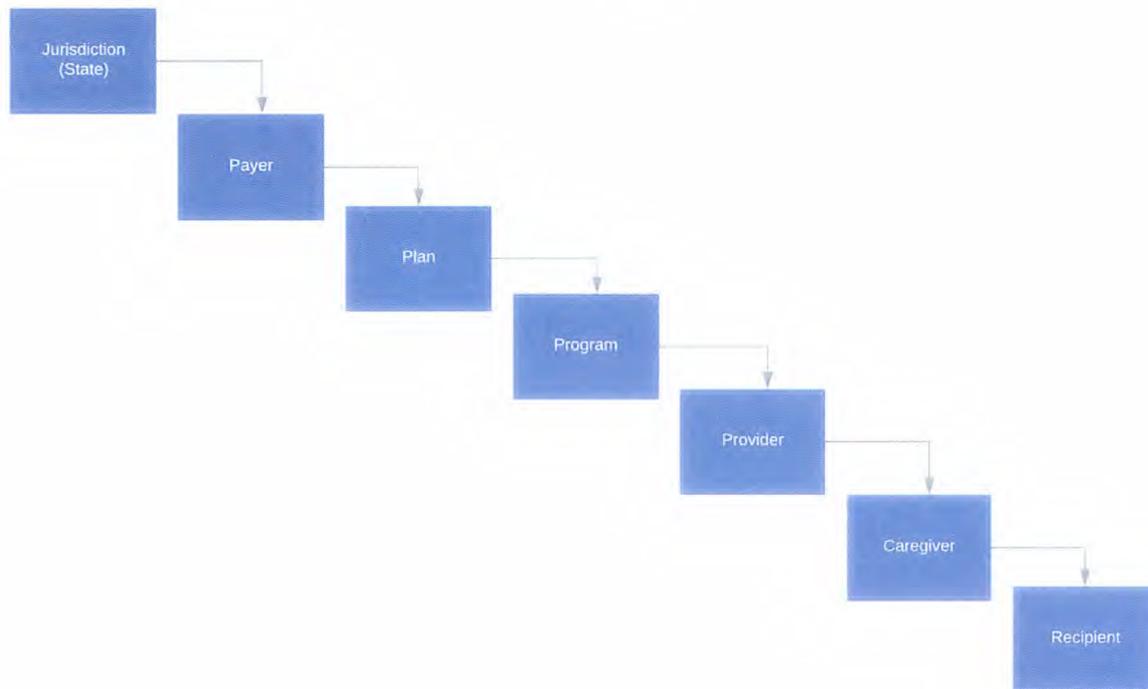
For example, if the State requires an 837 to be created and submitted to MMIS at midnight each day, all claims “submitted” by the provider by 11:50 PM on August 22, 2019, will be included in the 837 file created as part of our claims processing functionality on August 22, 2019. The provider can release claims for submission up to the time the 837 file is created, including claims related to services completed on August 22. Any claims released by the provider between 11:51 PM on August 22 and 11:50 PM on August 23 will be submitted to MMIS in the 837 file created and transmitted August 23, 2019.

vii. Business Intelligence Rules Engine

Business rules reside in our business rules engine and are called real time over a secure network to support data processing requirements.

viii. Program Level Requirements

Data is categorized using the hierarchy depicted below:



For the State, this means prior authorizations will be categorized by program, so if recipient Jane Doe receives personal care services under multiple programs: State Plan, EPD Waiver and IDD Waiver, the prior authorization for each program will be categorized by that program and only the Provider for that specific program will be aware of that prior authorization.

For example, if Jane Doe receives services under the State Plan by Caring Angels and services under the EPD Waiver by Helping Hands, the prior authorization issued by the State Plan will be available for Caring Angels to deliver services under the State Plan but Helping Hands will not know that this prior authorization was issued. Segregating data by program provides the ability to create user-based roles and permissions that protect private health information by allowing only users who need access to specific information view it. User-based roles and permissions are set for both viewing and modifying data.

ix. [Parameters: Geofencing](#)

Segregating business rules from application-based code means the State has the flexibility to implement rules that make sense for their constituents. An example of this is geofencing where the State might establish virtual perimeters or boundaries around a residence. This could be useful in enabling residences known to have limited wireless

network connectivity to submit EVV data at greater distances away from the scheduled location via integrated GPS-enabled technology. The State may conclude that for recipients in County A, a geofence of 500 feet is appropriate while in County B, a geofence of 1 mile makes more sense.

Another way Tellus EVV supports the capacity to capture GPS coordinates when there is limited wireless network connectivity is by enabling mobile devices to capture GPS coordinates even when they are in an offline mode using GPS trilateration. GPS coordinates automatically sync to the database when the caregiver re-establishes connectivity.

x. Direct Caregiver Data Capture

Tellus eVV prevents provider abuse and inappropriate billing by collecting beneficiary and direct service worker information electronically at the beginning and end of services by capturing the following information at the start of the visit:

- GPS coordinates
- Time the visit is started

At the end of the visit, the following information is captured

- GPS coordinates
- Time the visit is ended
- Services rendered
- Recipient signature
- Caregiver notes

Audit logs capture each login and logout of the system as well as data entered and edited by users and the date and time the data was modified.

Caregivers are permitted to login and out of the application for each visit even if there are multiple visits in one day.

Tasks can be associated with services and assigned at the time of scheduling.

Once a caregiver is scheduled to provide services to a recipient, the caregiver accesses their schedule on a mobile device using private login credentials to access the mobile app and either a personal identification number or a biometric indicator to access the device (depending upon the hardware capability).

The schedule specifies the recipient, date, start time, duration, location and services to be rendered, including tasks if specific tasks are assigned at the time the schedule is created.

The direct service worker checks off the tasks completed on the mobile device.

Visits can be scheduled at any address on the beneficiary record including community-based settings and temporary addresses. Regardless of the address where the visit is scheduled, GPS coordinates are captured when the visit is started. Depending upon the business rules defined by the State, one of three things can occur if the GPS coordinates captured are not within the established geofence of the scheduled visit:

1. The GPS location can be checked against all of the addresses on the recipient record to see if any of them are within the established geofence
2. The visit can be prevented from starting
3. The visit can be permitted to occur, and the GPS coordinates can be captured. A reason code must be added to the visit record before the claim can be processed

xi. Application Response Time

The average page response time for our EVV technical solution is one-one hundredth (.001) of a second; therefore, maintaining a response time (to call-in transactions) of less than three (3) seconds for user-submitted data for ninety-eight percent (98%) of the transactions is achievable.

xii. Telephony-Based Claims Submission

As an alternative to GPS confirmed rendered services, Tellus offers telephony-based EVV. Biometric interactive voice verification is used to detect direct service worker identity with at least ninety-nine percent (99%) accuracy. The following process has been implemented to capture and enforce biometric interactive voice verification combining Twilio IVR functionality with VoicelT biometric voice verification technology:

1. Enrollment – this is the process of creating a voice print. The user is asked to repeat a phrase multiple times, and the recording of these utterances is compared to future authentication attempts.
2. Authentication – This is the comparison of the user's phrase to recorded enrollment. These algorithms are tunable. Rules dictate

how strict or loose the implementation matching algorithm is enforced. Authentication is accomplished via REST API or a .wav file.

3. Users – User is created using their phone number. Login credentials are mailed to the user. If the user doesn't exist, it is created through the enrollment process. If the user does exist, they speak their phrase for comparative purposes.

Required accuracy level is defined on the VoicelT platform and can be set to 99%. The higher the accuracy rate is set, the lower the potential for false positives and the higher the potential for false negatives.

xiii. Alerts

Using our modular business intelligence rules engine, rules triggering alerts can be written to notify users when specific events occur at the payer and/or program level. In addition, rules can be related to specific fields so any data element captured can serve as a reference point for a rule.

For example, if DHHS determines it is important to flag specific recipients in the IDD program as "High Risk," that field will be added to the recipient record. The default entry will be set to blank, so if the provider does not check the "High Risk" box, the IDD program recipient is not considered "High Risk." The "High Risk" flag can be hidden for State Plan recipients if none of the recipients in that program are "High Risk."

Business Rule Example for Alerts for a specific program:

CONDITION	RECIPIENT IS NOT HIGH RISK	RECIPIENT IS HIGH RISK
Visit is Scheduled for 12:00 PM		
At 12:01 PM Direct Caregiver did not check-in	No Activity	Provider Administrator is notified with a pop up on the Web Console the Caregiver is late
At 12:15 PM	No Activity	Provider Administrator and Recipient Emergency Contact are notified via SMS text the Caregiver is Late
At 12:30 PM	Provider Administrator is notified with a pop up on	Provider Administrator is notified via IVR, Recipient Emergency

	the Web Console the Caregiver is late	Contact and Case Manager are notified via SMS Caregiver is late
At 12:45 PM	No Activity	Provider Administrator, Recipient Emergency Contact and Case Manager are notified via IVR the Caregiver is late
At 1:00 PM	Provider Administrator and Recipient Emergency Contact are notified via SMS text the Caregiver is late	Emergency Services are contacted

The example above assumes no action is taken at each alert level. If either of the following events occur, the escalation will be discontinued:

Provider Administrator modifies the scheduled visit on the web console; for example, a substitute Caregiver is dispatched. All changes are documented with an audit trail.

Provider Administrator starts the visit on the web console. All entries are documented with an audit trail.

Direct Caregiver starts the visit on the mobile device.

All data entries and edits including the user making the change, the date and time of the change and the information changed is captured in an application audit log. If the State chooses to enforce the entry of reason codes to explain edits, those rules can be applied using our business intelligence rules engine.

Rules can also be added to monitor and prevent changes for specific users. If, for example, a particular user is starting a high percentage of visits on the web console, the application can prevent them from starting/ending visits in the web console. Alternatively, the application can allow changes to be made and report high percentages of changes by a specific user in the form of alerts and/or reports to the Case or Program Manager.

xiv. FEATURE & FUNCTIONS

Role-Based Access Controls

Access to components of the application and the ability to view and write to specific fields is controlled by secure, private login credentials as well as by role-based permissions. User roles are defined during the business requirements gathering phase of the project. Examples of roles are:

Module Access	User Role	View Data	Enter/Modify Data
Mobile App	Direct Caregiver	Yes for Scheduled Visits	Yes for Scheduled Visits
Mobile App	All Other User Roles	No	No
Provider Administration	Provider Administrator	Yes	Yes
Provider Administration	All Other User Roles	No	No
Provider Scheduling	Provider Scheduler	Yes	Yes
Provider Scheduling	Provider Administrator	Yes	Yes
Provider Scheduling	All Other User Roles	No	No
Claims Processing	Provider Claims Processor	Yes	Yes
Claims Processing	Provider Administrator	Yes	Yes
Claims Processing	All Other User Roles	No	No
Provider Reporting	Provider Administrator	Yes	Yes
Provider Reporting	Provider Scheduler	Yes, Visit Reports	No
Provider Reporting	Provider Claims Processor	Yes, All Reports	No
Provider Reporting	Case Manager	Yes, All Reports for Assigned Recipients	No
Provider Reporting	Program Manager	Yes, All Reports for Assigned Programs	No
Provider Reporting	Payer Administrator	Yes, All Reports for Assigned Programs	No

These examples are not exhaustive; they are simply a representation of potential roles that can be defined.

In summary, access can be granted at the Module level. The ability to view data can be restricted at the field level so a Provider Scheduler may be able to view some components of the Recipient record like:

name, phone number, address and services to be rendered. However, Medicaid ID can be hidden from view.

In addition, the ability to Enter/Modify data can be restricted by role. As an example, the Recipient Address of record can only be changed by a Payer data feed, but alternative addresses can be added by the Provider Administrator and the Scheduler.

Another example is associating tasks with service codes. If the State authorizes providers to add and edit tasks, the Provider Administrator may be given permission to add tasks to service codes. If the State wants tasks defined at the program level, the Provider Administrator will not be given permission to add tasks to service codes. That privilege will be retained by the Program Manager.

Tellus EVV is multi-tiered with access defined by user roles. Providers can only see data related to their Agency. Payers can view data for all the Providers in their network

EVV Consoles

The Agency Provider Console and the Payer Console are web-based consoles that provide easy, at-a-glance views into operations with the ability to drill down for greater detail.

High level operating information in addition to alerts and messages are easily accessible upon logging into the application. Navigational access to all other components of the web-based application are accessible by clicking the menu icon in the top left corner of the screen.



EVV Mobile

Electronically verifying services rendered in real time is at the core of the Cures Act and a primary vehicle to ensure reduction of fraud, waste and abuse. Our mobile application is written in native Android and iOS and designed to provide a friendly experience for the caregiver and the recipient. How is the app designed to be friendly?

Native app language provides maximum flexibility

Commercially downloadable via App stores familiar to virtually everyone

Appealing user interface

- Readable fonts
- Consistent colors
- Large buttons

Limited number of steps to accomplish the goal

Real-time web console interface accessible through any standard web browser

Offline functionality if no Wi-Fi/Cellular service is available, which automatically syncs when service is restored

Schedules loaded and cached on device remotely when the app is opened

Schedule changes pushed to caregivers in real time

Scheduled address pushed to the device and can be any address attached to the recipient record

GPS coordinates automatically captured at start and end of visit

Date and time automatically captured at start and end of visit

Services and tasks completed checked off in real time

Recipient signature confirming rendered services were provided captured in real time

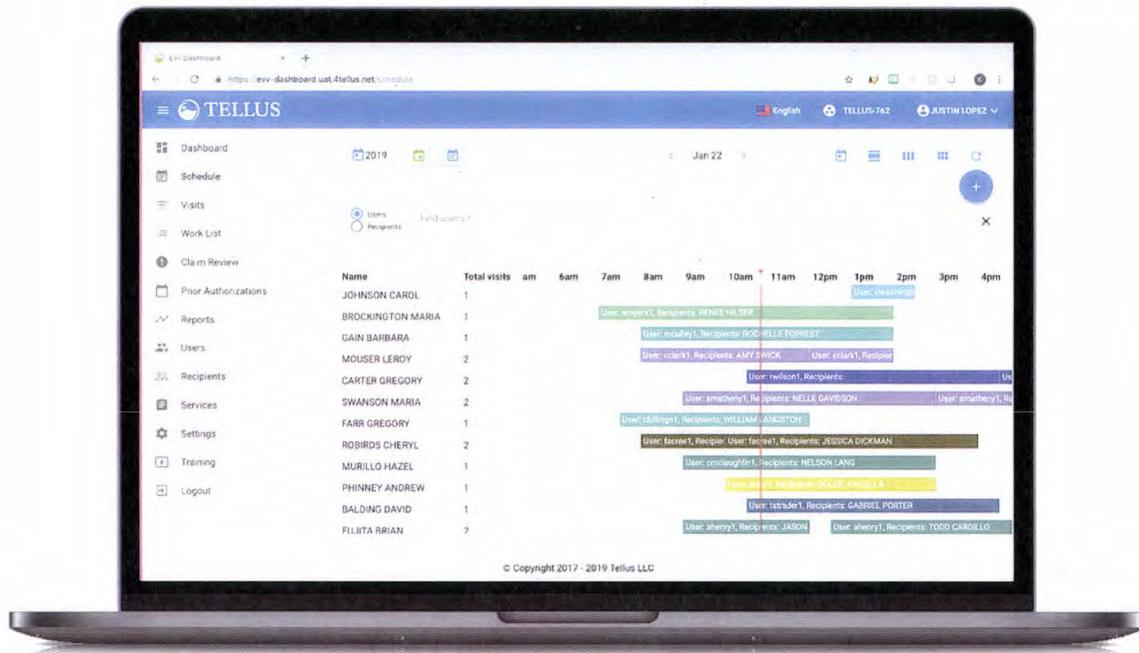
Notes can be entered for real-time availability to authorized users

Alternative data capture methods available: telephony, fixed object device

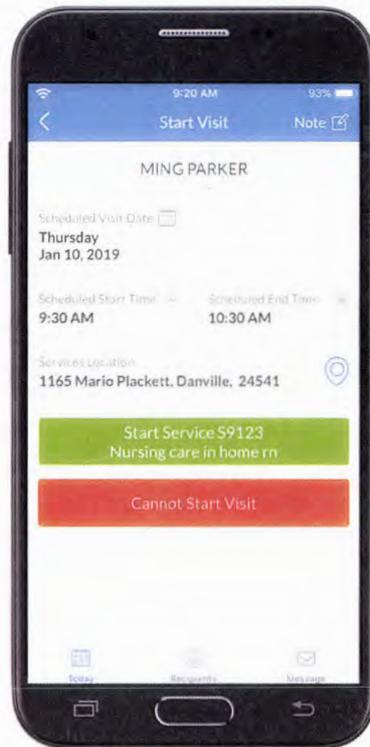
A direct caregiver can only log into one visit at a time. If a provider attempts to manually start a visit on the dashboard for a direct caregiver while the individual is logged into another visit, the administrator will be notified that the visit cannot be started because the caregiver is currently providing services. If necessary, the administrator can manually end the visit that the caregiver is currently logged into and then begin the visit the caregiver should be logged into. This scenario should be extremely rare and only occur if the caregiver loses or damages their mobile device while rendering services.

Real-Time Visibility

Data entered online and captured on mobile devices is visible real time to all users who have permission to access the information. Access is multi-tiered, so a Case Manager will be able to see all of the data related to all of their recipients across the provider network by accessing a web-based portal. The landing page provides real-time data related to scheduled visits, completed visits, late visits, etc. The data can be drilled into for more specific details. Role-based permissions will be defined during the business requirements gathering phase of the engagement.



Data is captured real time on mobile devices by direct caregivers at the location the services are being rendered:



Remote data syncs with our AWS cloud-hosted database in real time. When a visit is started, the start location and time are viewable on the web console. When the visit is completed, the end location, time, services, tasks rendered and recipient signature are viewable on the web console.

Integrated System

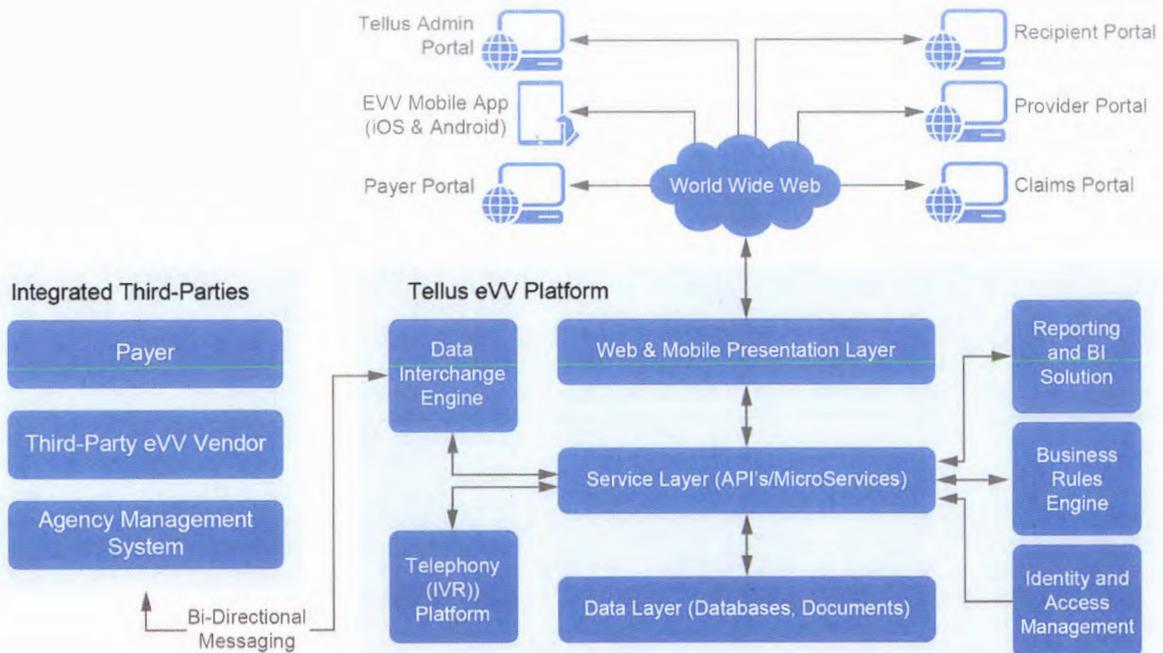
Tellus eVV is a fully integrated system including scheduling, authorization monitoring, visit verification and billing.

The high-level use case for system operation is as follows, the numbering below matches the numbering in the diagram below:

1. Payer (State, Managed Care Organization) makes Provider, Recipient, Caregiver (optional), and PA information available to the Tellus Aggregation Engine. Aggregation Engine makes applicable information available to the EVV and Claims solutions. Data is imported as frequently as payer makes it available up to

real time; most payers prefer to make daily upload files available via SFTP.

2. Agency Management System may optionally transmit visit scheduling and/or user (caregiver) information to the Tellus Aggregation Engine. Agency also has the option to enter this information via the EVV Agency Dashboard.
3. Third-Party EVV vendor may transmit completed visit information to the Tellus Aggregation Engine. Providers can use Tellus Mobile EVV or any other EVV vendor to electronically confirm visits rendered at the point of service.
4. Provider (Home Care Agency) uses EVV Provider Console for administration and to schedule, manage, and monitor caregiver visits.
5. Caregiver takes EVV Mobile App into the field. EVV Mobile provides caregiver with all necessary information to locate and complete care, and geo- and time-tracks each visit.
6. As visits are completed, the visit details are automatically made available to the Claims Engine for verification and matching to scheduled visits and PAs.
7. EVV Provider uses Claims Processor to remediate claims issues identified by the Claims Processing Engine.
8. Verified claims are returned to the payer for adjudication.
9. Payer Administrator monitors performance and possible cases of fraud, waste, and abuse via the EVV Payer Console.



21st Century Cures Act (Cures Act) Compliance

Tellus is fully compliant with the Cures Act mandate capturing the following data points for Medicaid personal and home health care services requiring an in-home visit by a provider. Capturing this data helps improve transparency and deter fraud, waste and abuse:

- Individual receiving service
- Individual providing service
- Type of service rendered
- Date of service
- Start and End time of service
- Location of service

Tellus EVV captures each of these data points electronically. Recipient, provider and prior authorization data is electronically transferred from the payer to Tellus. The prior authorization links the recipient to the agency authorized to render services. The recipient address of record is captured if transmitted by the payer in the recipient feed. If the State chooses to allow providers to schedule visits at locations other than the address of record, the provider will be able to add additional addresses to the recipient record in Tellus EVV. The provider may schedule services at any of the addresses on the recipient record including community-based settings and temporary addresses.

The provider agency assigns a direct caregiver to render services to their recipient by accessing a secure web portal using private credentials. Tasks can be associated with services and assigned at the time of scheduling.

Once the caregiver is scheduled to provide services to a recipient, the caregiver accesses their schedule on a mobile device using private login credentials to access the mobile app and either a personal identification number or a biometric indicator to access the device (depending upon the hardware capability). The schedule specifies the recipient, date, start time, end time, location and services to be rendered, including tasks if specific tasks are assigned at the time the schedule is created.

When the caregiver arrives at the location where the recipient is scheduled to receive services, the caregiver starts the visit. At the start of the visit, the date, time and location are electronically captured.

After services are rendered the caregiver ends the visit. At the end of the visit, the date, time and location are electronically captured.

The recipient will sign the screen on the mobile device capturing the visit information to confirm receipt of services.

There is not a limit on the number of visits a recipient can receive on a given day. The validity of services rendered is determined by comparing the schedule, electronic data captured when services are rendered and the prior authorization issued by the payer.

All data entered into or modified after entry is subject to an audit log that continually runs in the background of both the web portal and mobile apps. The audit log captures:

- Effective date
- End date
- Date when last changed
- Who made last change
- Short description
- Long description

Tellus is committed to ensuring our SaaS-based EVV technology remains compliant with all current and future Federal guidelines. Updated releases will be made available to the State at no additional charge

EVV Claim Filing Services

Virtually all electronically captured data is synched to the EVV database in real time. The only exception is data captured when mobile devices are in offline mode. Data captured in offline mode is synched automatically when the direct caregiver is back in range of WiFi or cellular services. All data resident on the device and in transit is encrypted.

Data is captured and stored in the database according to program requirements, examples include:

- Rounding delivery time (duration) in accordance with program requirements
- Geofencing distance
- Late visit definition
- Missed visit definition
- Services rendered by procedure code
- Services rendered, number allowed per visit
- Service code modifiers
- Tasks documentation requirements
- Recipient confirmation of services rendered requirements

Notes requirements

A claim reflects a service delivered by a direct service worker to a single beneficiary with the following information defined:

- Individual receiving service
- Individual providing service
- Type of service rendered
- Date of service
- Start and End time of service
- Location of service

When delivered service data is written to the database, typically in real time, the following data points will be compared:

- Scheduled visit (date, time, recipient, direct caregiver, services scheduled, location)
- Delivered visit (date, time, recipient, direct caregiver, services provided, location, service units)
- Prior authorization (recipient, direct caregiver, services approved, service units remaining)

The State will define business intelligence rules for the matching logic during the requirements gathering phase of the engagement. Business rules can be written at the payer, program, provider and recipient levels allowing maximum flexibility to ensure quality patient outcomes, operational efficiencies and reductions in fraud, waste and abuse.

Business rules are run against delivered visit data in real time as the EVV database is updated. If the delivered visit criteria matches the scheduled visit criteria, the prior authorization will be compared to the delivered visit data collected by EVV. If there is any discrepancy between delivered visit criteria, scheduled visit criteria or prior authorization, the transaction will remain in an "Unmatched-On Hold" status for the provider administrator to remediate. Scheduled and/or ad-hoc reports are available to review claims that are in an "Unmatched-On Hold" status by reason code. Examples of reason codes are:

- Late visit
- GPS mismatch
- No prior authorization
- Prior authorization mismatch

Unmatched-On Hold criteria, representing unbilled encounters, will be defined during the business requirements gathering phase of the

engagement and can be customized by program as required by the DHHS.

If delivered visit, scheduled visit and prior authorization criteria are all in sync, the transaction will achieve the status of "Matched-On Hold." Provider administrators can release matched claims at their discretion. Once a transaction is released by the administrator it will be submitted to the payer for adjudication of the claim. Typically, claim transactions are batched and transferred to payers in the form of standard 837 EDI files on a daily basis. Claims can be submitted on any schedule requested by the payer and can even be transmitted as they are released by the provider if desired. The 837 EDI file map will be customized to comply with the DHHS claims processing edit including the following:

Companion Guide specifications

Specific examples:

- Direct caregiver cannot provide services to multiple beneficiaries at the same time
- Direct caregiver cannot bill more than sixteen (16) hours per day
- Overlapping service rules
- Multiple procedure codes, modifiers and rates
- Service limits
- Retroactive prior authorization changes

Conversely, because prior authorizations are populated in the form of a data feed transmitted by the payer, the ability to determine if authorized service are not being provided is available. Reports summarizing authorized and unscheduled services as well as authorized, scheduled and not rendered services are available on a scheduled and/or ad-hoc basis.

Reports

Tellus delivers robust reporting and analytics capabilities. In addition to standard reports, Tellus can customize reports based on customer requirements and formatting preferences. Reports can be scheduled to run periodically as well as on an on-demand, ad-hoc basis. They can also be exported in a variety of formats to support data analysis and to supplement presentations. Access to reports and reporting tools is granted based on user role permissions.

Our standard list of reports includes:

	Fraud Detection	Aberrant Billing	Service Delivery	Logistics
Activities across providers	✓	✓	✓	✓
Claims by date				✓
Claims edited	✓	✓	✓	
Claims exceptions by reason code	✓	✓	✓	✓
Claims on hold	✓	✓		✓
Claims resubmitted	✓	✓	✓	
Claims submitted, denied	✓	✓	✓	
Claims submitted, paid				✓
Claims voided	✓	✓	✓	
Direct care giver schedule				✓
Prior Authorization, no scheduled visits			✓	
Provider ID does not equal authorized provider ID	✓	✓	✓	
Recipient address change	✓		✓	✓
Recipient list				✓
Visits delivered, deviate from prior authorization		✓	✓	
Visits delivered, start address does not equal end address	✓	✓		✓
Visits late			✓	✓
Visits overlapping services	✓	✓	✓	✓
Visits scheduled	✓	✓	✓	✓
Visits scheduled address does not equal delivery address	✓	✓		✓
Visits scheduled, conflicting prior authorizations	✓	✓	✓	✓
Visits scheduled, no prior authorization		✓	✓	
Visits scheduled, not completed (missed)	✓	✓	✓	✓
Visits supported by third party EVV	✓	✓	✓	✓
Visits unable to complete	✓	✓	✓	

Web-Based, Real-Time Consoles

Tellus eVV utilizes a modern, open source reporting tool to define web dashboards viewable on the EVV Console. “Cards” are created that can be mixed and matched dynamically to customize the look and feel for the individual user of the dashboard based on user login credentials similar to the way users customize applications to launch when they start their computer. Example dashboards are provided below:

Scheduled — Reports can be scheduled to run on a periodic basis and cached on the reports page for access by authorized users at any time.

Ad-Hoc — Ad-hoc reports can be created by users by accessing built-in, drill-down features accessible through the dashboard as well as by modifying filters on pre-defined reports.

Exports — All scheduled and ad-hoc reports can be exported in various formats including: pdf, csv and excel.

Data Retention — All data capture by Tellus EVV will be retained for at least ten (10) years. Raw data elements will be transferred to DHHS in the format and frequency requested.

Raw data based on DHHS definitions can be formatted to .xml and delivered in batch mode and scheduled for delivery via SFTP as required.

c. Technical Considerations

i. Interoperability

Tellus uses Mirth Connect, an open source, cross-platform, bi-directional healthcare integration engine providing maximum flexibility to integrate with health information exchanges, public health agencies, human service programs and other community organizations as required. All non-proprietary data relevant to DHHS can be scheduled for delivery to DHHS using the following tools and file formats:

Bi-directional interfaces can be built using the following interchange protocols:

- TCP/MLLP
- Database (MySQL, PostgreSQL, Oracle, Microsoft SQL Server, ODBC)
- File (local file system and network shares)
- PDF and RTF documents
- JMS
- FTP/SFTP
- HTTP/Web Services
- SMTP
- SOAP (over HTTPS)
- DICOM
- JavaScript

The open architecture also allows for the easy addition of custom and legacy interfaces.

Typical messaging standards supported by the Tellus data interchange solution include:

ANSI X.12 Electronic Data Interchange (EDI) including **834, 837I & 837P**

HL7 (Health Level Seven) version 2 messages

CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)

CSV (comma-separated variable)

DICOM

XML

JSON

NCPDP

RAW

JavaScript Batch

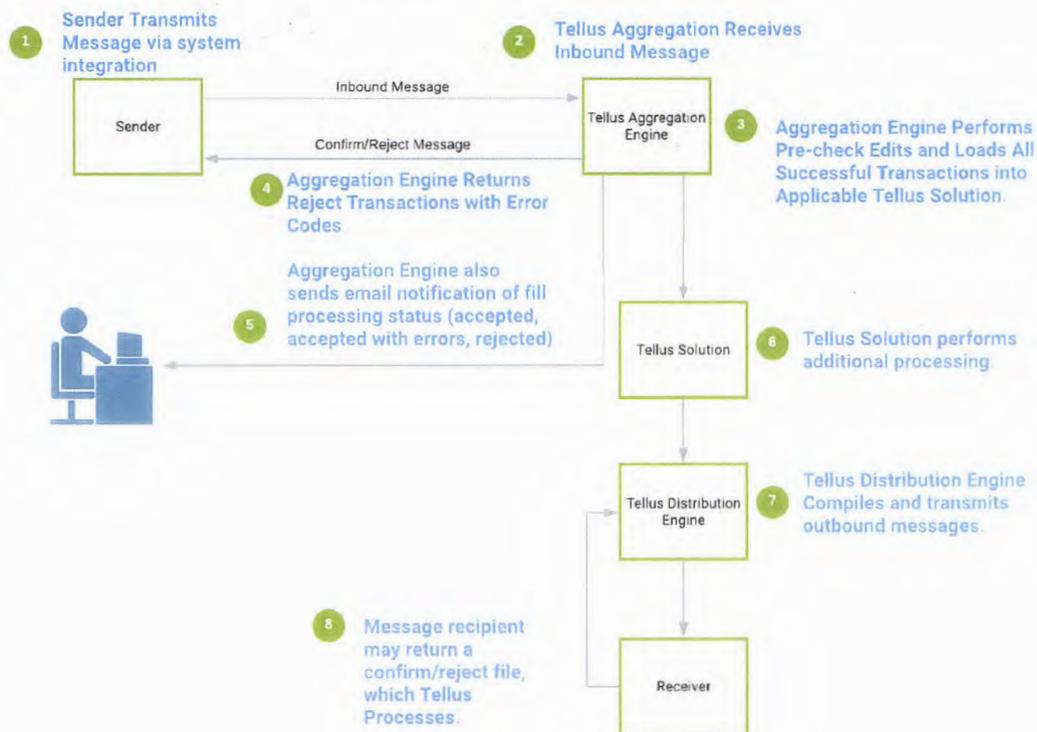
Additional Data Types are support via API Libraries

Tellus uses Amazon Web Services (AWS) EC2 instances with Amazon Elastic Block Store (EBS) storage to take advantage of AWS features such as Auto Scaling for instances. EBS allows Tellus to deploy encrypted volumes, (meeting FIPS 140-2 standards), provision multiple block devices readily with varying sizes and throughput and create snapshots for backups.

Mirth Connect also requires a database backend that must be secure, highly available, and scalable. To meet these needs with a HIPAA, compliant AWS service, Tellus makes use of the ORACLE MySQL relational database.

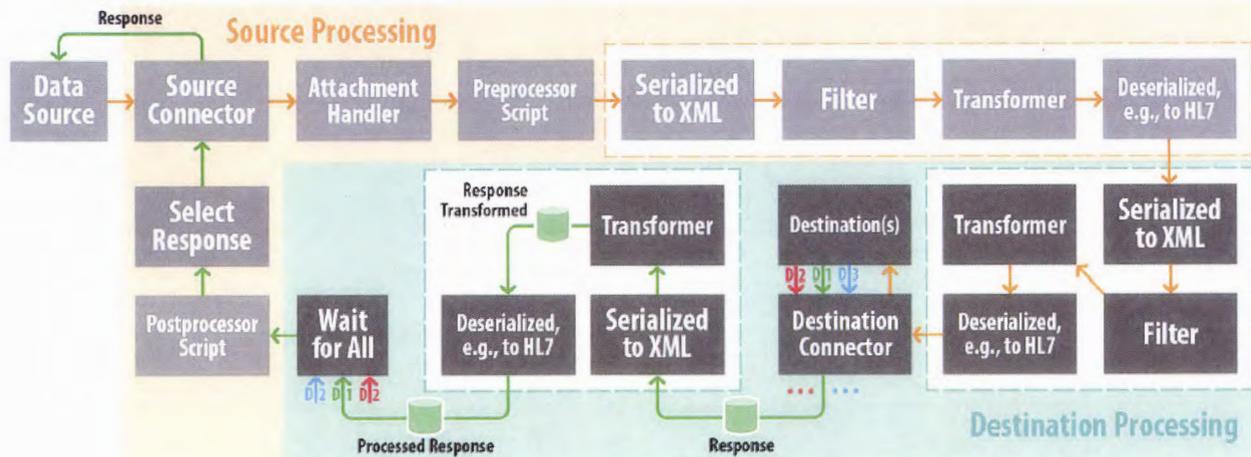
Data interchange may be in asynchronous batch mode or synchronous transactional mode. The general sequence of events is the same for synchronous or asynchronous, with the difference being in the timing of the response messages.

The following diagram provides an overview of the Tellus-standard approach. The numbered call outs provide the sequencing overview.



The sequence begins with the data submitter sending Tellus an inbound message (XML, flat file, web services request, etc.) via an integrated channel. As noted above, Tellus supports any commonly used integration method and has a high degree of flexibility regarding file layout, transport protocol, and security protocol. Tellus will run a preliminary edit on the message layout and content and will inbound process any valid records. Tellus will then return a confirm/reject message using the same transport protocol as the submission and will also send an alert email to the sender. If Tellus later outbound processes and transmits a message to our client/partner, then the same process is expected in reverse.

A message, or row within a source file, enters Mirth Connect as a raw inbound message and is received by the Source Connector, which can then be evaluated, filtered and/or transformed before being sent to the Destination Connector. The raw inbound message can be passed through multiple destination connectors where it can be influenced by filters and transformers before final processing and being sent to a destination.



The Dashboard allows for monitoring interface activity in real time. Interface errors can be reviewed, corrected and reprocessed in real time as well.

Prod Server 1 - Mirth Connect Administrator - (3.6.0.8231)

Start	Name	Rev	Last Deployed	Received	Filtered	Queued	Sent	Errored	Connection
Started	[Default Group]	--	--	63	0	0	61	2	--
Started	Create and Write PDF	0	2017-04-11 10:25	24	0	0	24	0	Idle
Started	LLP Inbound 2239L	1	2017-04-11 10:25	1	0	0	0	1	Idle
Started	Mirth Results Sender PROO	0	2017-04-11 10:25	33	0	0	33	0	Idle
Started	Move HL7 Segments Single Line	0	2017-04-11 10:25	4	0	0	3	1	Idle
Started	Repeated Segs and Fields Retention	0	2017-04-11 10:25	1	0	0	1	0	Idle
Started	Alert Processor	--	--	8	0	0	8	0	--
Started	Create Salesforce Ticket	0	2017-04-11 10:25	0	0	0	0	0	Idle
Started	Notification Receiver - ADTs	ADTs Alerts	0	2017-04-11 10:25	8	0	0	8	Idle
Started	Notification Receiver - RADs	RADs Alerts	0	2017-04-11 10:25	0	0	0	0	Idle
Started	Notification Receiver - Reprocess	Alerts	0	2017-04-11 10:25	0	0	0	0	Idle
Started	Notification Receiver - TRNs	Alerts	0	2017-04-11 10:25	0	0	0	0	Idle
Started	Audition Health	--	--	253	51	42	272	23	--
Started	Audition Health - ADT - 6674	ADT Inbound	0	2017-04-11 10:25	50	0	42	76	Idle
Started	Source	--	--	50	0	0	0	8	Idle
Started	Destination 1	--	--	42	0	42	0	0	Idle
Started	Destination 2	--	--	42	0	42	0	0	Idle
Started	Destination 3	--	--	42	0	0	34	8	Idle
Started	Audition Health - LAB - 6675	Inbound LAB	0	2017-04-11 10:25	44	0	0	44	Idle
Started	Audition Health - RAD - 6699	Inbound RAD	0	2017-04-11 10:25	55	0	0	48	Idle
Started	Audition Health - TRN - 6699	Inbound TRN	0	2017-04-11 10:25	53	51	0	53	Idle
Started	Audition Health - TRN - 7005	Inbound TRN	0	2017-04-11 10:25	51	0	0	51	Idle
Started	Calif Perth	--	--	188	0	0	188	0	--
Started	Calif Perth - ADT - 6634	ADT Inbound	0	2017-04-11 10:25	47	0	0	47	Idle
Started	Calif Perth - LAB - 6635	Inbound LAB	0	2017-04-11 10:25	47	0	0	47	Idle
Started	Calif Perth - RAD - 6636	Inbound RAD	0	2017-04-11 10:25	44	0	0	44	Idle
Started	Calif Perth - TRN - 6637	Inbound TRN	0	2017-04-11 10:25	50	0	0	50	Idle
Started	Mirth Results	--	--	145	0	0	145	0	--

Filter: Enter channel log or name 9 Groups, 35 Deployed Channels

Timestamp	Channel	Connector Info	Event	Info
2017-04-11 10:42:24.127	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Idle	0.0.0.0:0.0:0.52467 -> 127.0.0.1:10124
2017-04-11 10:42:24.127	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Disconnected	0.0.0.0:0.0:0.52467 -> 127.0.0.1:10124
2017-04-11 10:42:24.127	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Sending	127.0.0.1:52467 -> 127.0.0.1:10124
2017-04-11 10:42:24.127	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Connected	127.0.0.1:52467 -> 127.0.0.1:10124
2017-04-11 10:42:24.126	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Connecting	Trying to connect on 127.0.0.1:10124...
2017-04-11 10:42:16.262	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Idle	0.0.0.0:0.0:0.52458 -> 127.0.0.1:10124
2017-04-11 10:42:16.262	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Disconnected	0.0.0.0:0.0:0.52458 -> 127.0.0.1:10124
2017-04-11 10:42:16.262	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Sending	127.0.0.1:52458 -> 127.0.0.1:10124
2017-04-11 10:42:16.262	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Connected	127.0.0.1:52458 -> 127.0.0.1:10124
2017-04-11 10:42:16.261	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Connecting	Trying to connect on 127.0.0.1:10124...
2017-04-11 10:42:14.785	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Idle	0.0.0.0:0.0:0.52444 -> 127.0.0.1:10124
2017-04-11 10:42:14.785	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Disconnected	0.0.0.0:0.0:0.52444 -> 127.0.0.1:10124
2017-04-11 10:42:14.785	Audition Health - ADT - 6674	Destination: TCP Sender - Destination 3	Sending	127.0.0.1:52444 -> 127.0.0.1:10124

Log Size: 250

Connected to: Prod Server 1 | https://localhost:8442 | 10:46 AM PDT (UTC -7)

Tellus publishes a complete set of specifications for all Tellus proprietary messages.

Security

Tellus IT security is comprised of an interlocking wall of infrastructure, defensive technology, monitoring technology, training, process, and procedures. Tellus will self-certify for HITRUST (including HITECH and GovRamp) in 2019.

The Tellus EVV web application and API deliver information through both public and private interfaces. Data security is managed through various protocols and user authentication and authorization. Secure Sockets Layer (SSL) encryption is the standard for communications over the Internet. When configured to use SSL, the application enforces secure communications in all private areas of the website by disallowing non-secure HTTP requests and redirecting the browser to the secure protocol.

Database security begins with hardened, redundant Amazon Government Cloud (AWS) database servers. AWS is a top-tier, SAS 70 Type II certified datacenter. The database and application are configured in separate tiers of the physical systems, with strict firewall rules partitioning the servers.

AWS Identity and Access Management (IAM) policies are used to assign permissions that determine who is allowed to manage database resources. Security groups control what application server instances are allowed to connect to the database.

Tellus ensures data security encryption of all information while in transmission and while at rest on electronic media storage devices. Required data is encrypted consistent with Federal Information Processing Standards (FIPS), and NIST cryptographic standards. In RDS Databases:

Encryption algorithm used is AES 256 Encryption

Encryption algorithm used for one-way hashing is SHA256

For the application tier, low-level bindings on all its native queries are used to minimize the possibility of attacks such as SQL injection. For additional security, stored procedures are used to retrieve data and Object Relational Mapping is used to minimize the need for hand coding SQL statements that could be vulnerable to exploits.

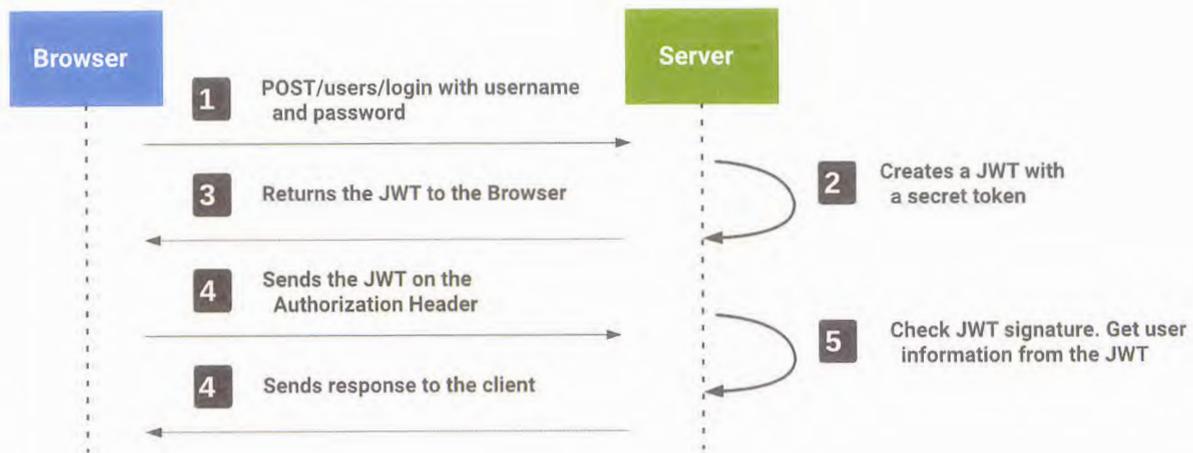
All PHI data is encrypted in transmission and at rest when stored in a database or filesystem. We use Transparent Data Encryption (TDE) and adhere to HIPAA compliance.

The process of retrieving visit verifications in compliance with HIPAA standards requires all communications (application <--> database, mobile app > server) to happen over a secure HTTPS connection. We ensure that PHI information is encrypted when transmitted and encrypted at rest by using SSL/TLS and database encryption. Our hosting provider has achieved a number of certifications including, but not limited to, SOC 1,2,3, FedRAMP, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>)

Role-based account permissions are used to provide native user authentication based on account name, username and a user-supplied password. User password is stored in the database and hashed using one-way BCrypt hashing mechanism that makes it impossible to decrypt and extremely resistant to brute-force search attacks

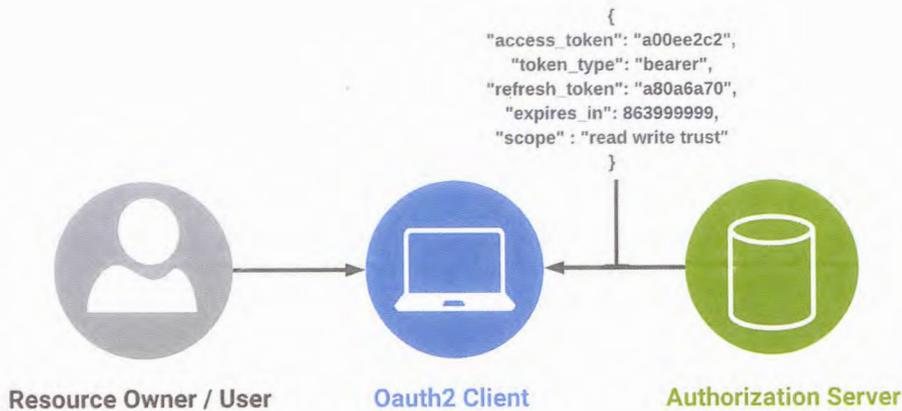
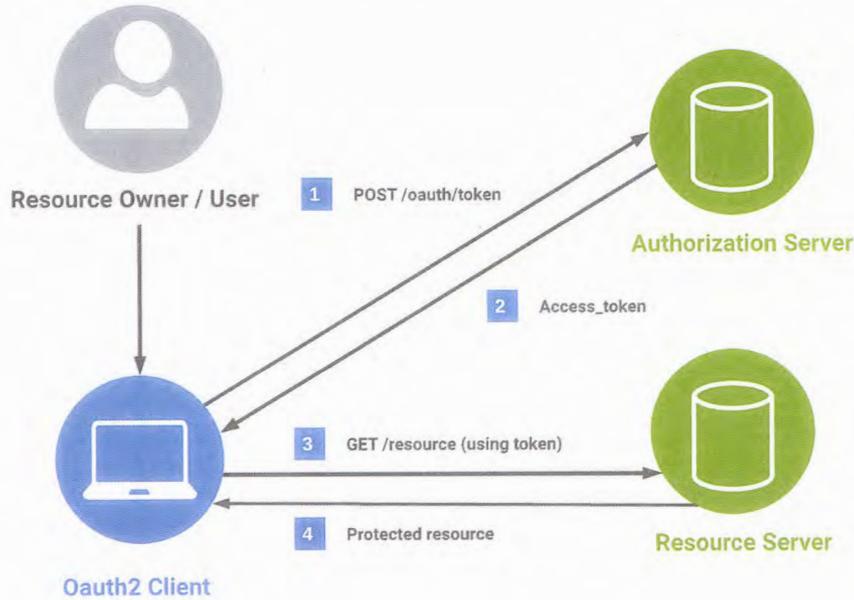
Industry standard OAuth2 protocols are used for authentication. Every application's access to backend processes via REST API requires an authentication token to be passed with each API call.

JSON Web tokens (JWT) are used for API Authentication. JWT is an open standard (RFC 7519) that defines a compact and self-contained way to securely transmit information between parties as a JSON object. This information can be verified and trusted because it is digitally signed. JWTs are signed using a secret JWT token sent to the API via standard HTTP Authorization header. Token payload contains user information restricting API access to certain endpoints.



To further control user access, JWT tokens are configured to expire after a specified period of time based on application rules. For example, tokens requested by the EVV mobile application expire in less time than

EVV Console tokens. To facilitate user ability to stay logged into the application, Tellus utilizes standard OAuth2 Refresh Tokens. Refresh Token expiration is configured based on client specifications.



Open Web Application Security Project (OWASP) standards are baseline for Tellus EVV Mobile app. OWASP is an organization supporting open standards, policies and processes promoting application security. OWASP collaborated with the European Network and Information Security Agency (ENISA) to build a set of controls for mobile applications. They jointly published the “Smartphone Secure Development Guideline” and recommend the following principles:

ID & Protect Sensitive Data on the Mobile Device

Protect Authentication Credentials
Protect Data in Transit
Strong User Authentication, Authorization & Session Management
Secure Backend Services & Server
Secure Third-Party Integration
Collect Consent for Collection & Use of User Data
Protect Paid-for Resources & Services
Secure Distributions & Provisioning of Mobile Applications
Avoid/Safely Use Runtime Code Interpreters

Each principle is thoroughly documented outlining risks and methods for mitigating those risks. Tellus EVV mobile developers and testers strive to ensure our apps comply with OWASP standards.

As an alternative to GPS confirmed rendered services, Tellus offers telephony-based EVV. Biometric interactive voice verification is used to detect direct service worker identity with at least ninety-nine percent (99%) accuracy. The following process has been implemented to capture and enforce biometric interactive voice verification combining Twilio IVR functionality with VoicelT biometric voice verification technology:

1. Enrollment – this is the process of creating a voice print. The user is asked to repeat a phrase multiple times, and the recording of these utterances is compared to future authentication attempts.
2. Authentication – This is the comparison of the user's phrase to recorded enrollment. These algorithms are tunable. Rules dictate how strict or loose the implementation matching algorithm is enforced. Authentication is accomplished via REST API or a .wav file.
3. Users – User is created using their phone number. Login credentials are mailed to the user. If the user doesn't exist, it is created through the enrollment process. If the user does exist, they speak their phrase for comparative purposes.

Required accuracy level is defined on the VoicelT platform and can be set to 99%. The higher the accuracy rate is set, the lower the potential for false positives and the higher the potential for false negatives.

System Documentation

Tellus EVV is a SaaS-based application that is highly customizable by payer and program in the form of configurations, business rules, user roles and permissions, parameters, consoles, reporting and integrations. During the business requirements gathering phase of the project,

business analysts will work with State program personnel to define the customized criteria for the DHHS's implementation.

Tellus has developed questionnaires to facilitate this process. An example questionnaire, detailing some of the information required for each program is:

USE CASE	RULE OR CONFIGURATION	STATUS	CONFIGURATION
Pre-visit data: Recipients, Providers, Prior Authorizations	Deliver Method Required, (Manual or Source System Data Interchange)	Existing: Manual Entry & Standard APIs by program	If Source System Data Interchange, Source System, Delivery Method and Data Specifications Required.
Tellus Provision Provider	Password Requirements (Length)	Existing: Varies by Payor	
Tellus Provision Provider	Password Requirements (Complexity)	Existing: Varies by Payor	
Tellus Provision Provider	Password Requirements (Expiration)	Existing: Varies by Payor	
Tellus Provision Provider	Enable Provider	Existing: Varies by Payor	
Provider Admin Pre-Visit Activities	Allow Documents	Existing: Configurable by program	Enable/Disable ability to share documents with Caregiver
Provider Admin Pre-Visit Activities	Recipient Data Capture	Existing: Configurable by program	Review data dictionary to confirm all required fields are captured, if no, define additional fields and associated rules
Provider Admin Pre-Visit Activities	Allow Edit primary address	Existing: Configurable by program	Enable/Disable
Provider Admin Pre-Visit Activities	Allow additional service addresses	Existing: Configurable by program	Enable/Disable multiple service delivery addresses
Provider Admin Pre-Visit Activities	Designate individual recipients as high risk	Existing: Configurable by program	Enable/Disable high risk indicator; required or optional field
Provider Admin Pre-Visit Activities	Diagnosis Code	Existing: Program defined list	Enable/Disable required field on Recipient Record and/or Visit Schedule.

			Provide a list of Diagnosis Codes authorized under program.
Provider Admin Pre-Visit Activities	Services Task Listing	Existing: Program defined task list	Enable/Disable ability for providers to customize task list. Provide list of Service Codes authorized under program.
Provider Admin Pre-Visit Activities	Allow Visit Scheduling	Existing: Program defined	Enable/Disable ability for providers to create and edit schedules
Provider Admin Pre-Visit Activities	Allow Multiple Services	Existing: Program defined	Enable/Disable ability to schedule more than one service per visit
Provider Admin Pre-Visit Activities	Allow Visit Scheduling Without PA	Existing: Program defined	Enable/Disable ability to schedule a visit without a valid PA in the EVV database
Provider Admin Provision Caregivers	Password Requirements	Existing: Payor defined	See password requirements above
Provider Admin Provision Caregivers	Required Fields	Existing: Payor defined	Review data dictionary to confirm all required fields are captured, if no, define additional fields and associated rules
Provider Admin Provision Caregivers	Direct Caregiver ID	Existing: Payor defined	Enable/Disable: Required field
Provider Admin Provision Caregivers	Direct Caregiver Type	Existing: Payor defined	Enable/Disable: Required field
Caregiver Perform Visit	Enforce GPS parameter to start visit	Existing: Configurable by program	Enable/Disable: Enforce GPS start location
Caregiver Perform Visit	Enforce GPS Address Verification	Existing: Configurable by program	Define Rule: Match delivery address to scheduled address or to all addresses on recipient record
Caregiver Perform Visit	Allowed GPS Radius	Existing: Configurable by program	Parameter: Geo-fence radius in feet/miles
Caregiver Perform Visit	Visit Early-Late Start Limit	Existing: Configurable by program and/or recipient status	Define Rule: Early/Late if delivered start time is not within X minutes/hours of scheduled start

Caregiver Perform Visit	Visit Duration	Existing: Configurable by service code	Define Rule: Round delivered visit time upward/downward based on actual duration
Caregiver Perform Visit	Allow Notes	Existing: Configurable by program	Enable/Disable: Notes
Caregiver Perform Visit	Overlapping Visits	Existing: Configurable by program	Enable/Disable: Schedule more than one recipient for a caregiver at the same time
Caregiver Perform Visit	Overlapping Visits	Existing: Configurable by program	Enable/Disable: Schedule more than one caregiver for a recipient at the same time
Tellus Claims Matching	Claims Submission	Existing: Configurable by program	Enable/Disable: Automatic submission of "Matched" claims based on matching criteria specified below
Tellus Claims Matching	Visit Authorization Number Matches PA Authorization Number (Error Code = No Authorization)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Visit Service Code Matches PA Authorization Number (Error Code = No Authorization)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Visit Recipient Matches PA Authorization Number (Error Code = No Authorization)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Visit Authorization Number Matches PA Authorization Number (Error Code = No Authorization)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Diagnosis Code is populated on Visit (Error Code = Invalid Diagnosis Code)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider

			input to re-run matching algorithm
Tellus Claims Matching	Visit Date falls within PA Service Period (Error Code = Date Unauthorized)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Visit Service Units Exceeds Units Available on PA (Error Code = Auth. Exceeded)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Visit Start Time Varies from Scheduled Start Time (Error Code = Visit Started Late)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Visit start/end GPS Coordinates Populated (Error Code = GPS Value Not Entered)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Service Started and Ended in Two Different Locations (Error Code = GPS Position Conflict)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Service Started at Location that is Different Than Scheduled (Error Code = GPS Position Conflict)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Visit Duration Too Short (Error Code = Visit Duration Less Than x)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Visit Missing Start Date/Time (Error Code = Visit Missed)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm

Tellus Claims Matching	Visit Missing End Date/Time (Error Code = Visit not Ended)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm
Tellus Claims Matching	Edit rules	Existing: Configurable by program	Enable/Disable by field: Which fields can provider edit: units, start time, end time, diagnosis code, caregiver, location
Tellus Claims Matching	Edit Rules	Existing: Configurable by program	Enable/Disable: Reason code required
Tellus Claims Matching	Reason Codes	Existing: Configurable by program	Review list of existing reason codes (below): add/edit/delete
Tellus Claims Submission	Claim Calculation	Existing: Configured by Service Code	Provide rate and calculation parameter by service code, ie: units/increments/visits
Tellus Claims Submission	Claim Calculation	Existing: Configured by Service Code	Provide an modification rules to standard rates and indicator for modified rates, ie: "modifier" added to service code
Tellus Claims Submission	Submitter ID to transmit in the 837P file	Existing: Configurable by program	Enable/Disable: EVV validated claims submission
Tellus Claims Submission	Claim transaction types: transmit in the 837P file	Existing: Configurable by program	Review list of existing transaction types (below): add/edit/delete
Claim Adjudication Report	Payor transmits 835 or similar file to Submitter transmitting 837P	Existing: Configurable by program	Enable/Disable: Provider to view status of claims in EVV Console

Claim Transaction Types: 837P Submission

TRANSACTION	DESCRIPTION
New Claim	New claim, never submitted before.
Adjustment	Adjustment to a claim that was previously submitted.
Adjustment to Adjustment	Adjustment to a claim that was previously adjusted.
Void	Void/cancel a claim that was previously submitted.
New Claim After Void	Submit a new claim after a previous submission of the claim was voided.

Tellus Claims Matching: Reason Codes



ERROR CODE	REASON CODE	REASON DESCRIPTION	NOTES
No Authorization			
			The only recovery is for a matching PA to arrive.
Invalid Diagnosis Code			
	999	Other	Provider admin must enter valid reason code.
Date Unauthorized			
			The only recovery is for a matching PA to arrive.
Auth. Exceeded			
			The only recovery is for a matching PA to arrive.
Visit Started Late			
	130	Disaster or Emergency	Provider admin must enter valid reason code.
	310	Malfunctioning Mobile Application	
	999	Other	
GPS Value Not Entered			
	310	Malfunctioning Mobile Application	
	999	Other	
GPS Position Conflict			
	105	Services Provided Outside the Home – Supported by Service Plan	
	310	Malfunctioning Mobile Application	
	800	GPS Coordinates Not Matched	
	999	Other	
Visit Duration Less Than x			
	130	Disaster or Emergency	
	999	Other	
Visit Missed			
	110	Fill-in for Regular Attendant or Assigned Staff	
	115	Individual/Member Agreed or Requested Attendant or Assigned Staff Not Work Schedule	
	121	Attendant or Assigned Staff - No Call and No Show (NEW)	
	130	Disaster or Emergency	

	310	Malfunctioning Mobile Application	
	999	Other	
Visit not Ended			
	130	Disaster or Emergency	
	310	Malfunctioning Mobile Application	
	999	Other	
Adjustments			
	700	Downward Adjustment to Billed Hours	
	701	Upward Adjustment to Billed Hours	
	999	Other	

In addition to program rules, the following information will be required at either the State or program level:

- User Roles
- Role-based permissions
- System interfaces
- Interface criteria
 - Mapping
 - Rules
 - Schedule
 - Format
 - Transmission protocols

Information gathered during this phase of the engagement will be used to create the Functional Requirements Document, which will be presented to the State for review and approval.

The Functional Requirements Document will serve as the foundation for the Detailed System Design Document, which will describe how our EVV solution addresses the State's requirements.

Upon completion of the design and development of the application, we will deliver a User Acceptance Testing (UAT) / Testing, Validation and Operational Readiness (TV&OR) Plan to describe how the application was tested and to demonstrate it meets the functional requirements and is ready for implementation.

Testing will adhere to industry best practices, such as PMI PMBOK standards for software verification and validation.

Modularity

Tellus EVV is comprised of five major proprietary components or modules. The modules operate together as a fully integrated enterprise EVV solution, individually incorporating components from other software vendors or on a stand-alone basis as required. The primary modules are:

MODULE	PRIMARY FUNCTION
EVV Console	Web-based console displaying real-time, dashboard-style overview of important metrics as well as the navigational menu for all other web-based user accessible components of the application including: administrative settings and functions, scheduling, claims processing, reports.
EVV Mobile	Android and iOS native applications downloaded to user devices using commercial app stores, (with the ability to deploy using enterprise management software for company-owned devices), used by direct caregivers to remotely access their schedule and electronically confirm rendered services real-time.
EVV Claims Console	Web-based provider level pre-adjudication review of rendered services compared to payer authorized services. All transactions are queued for review and must be in a "matched" status before releasing to payer for adjudication.
Business Intelligence Rules Engine	Business rules are initially defined by the payer during the requirements gathering phase of the engagement and set up the EVV rules engine module. Rules are separate from the code base making them configurable and changeable without development resources at the payer, program, provider and recipient level. Rules can be written around any field for a single or combination of user rules making our rules engine extremely robust and flexible.
Data Aggregation	Data is imported from third parties including payers, providers and third-party EVV vendors to assemble a complete data set for comprehensive data export, analytics and reporting purposes. Imports can be scheduled at any desired frequency up to real time.

The SaaS-based modules outlined above are the backbone of Tellus EVV. However, our service-oriented architecture provides the ability for each jurisdiction to uniquely configure the components as required taking into consideration all Medicaid enterprise components. Tellus EVV modules can be implemented coupled or uncoupled meaning they can each operate independently and integrated with applications built by other vendors. For example, any data captured in Tellus EVV can be share with:

MMIS
Enterprise service bus



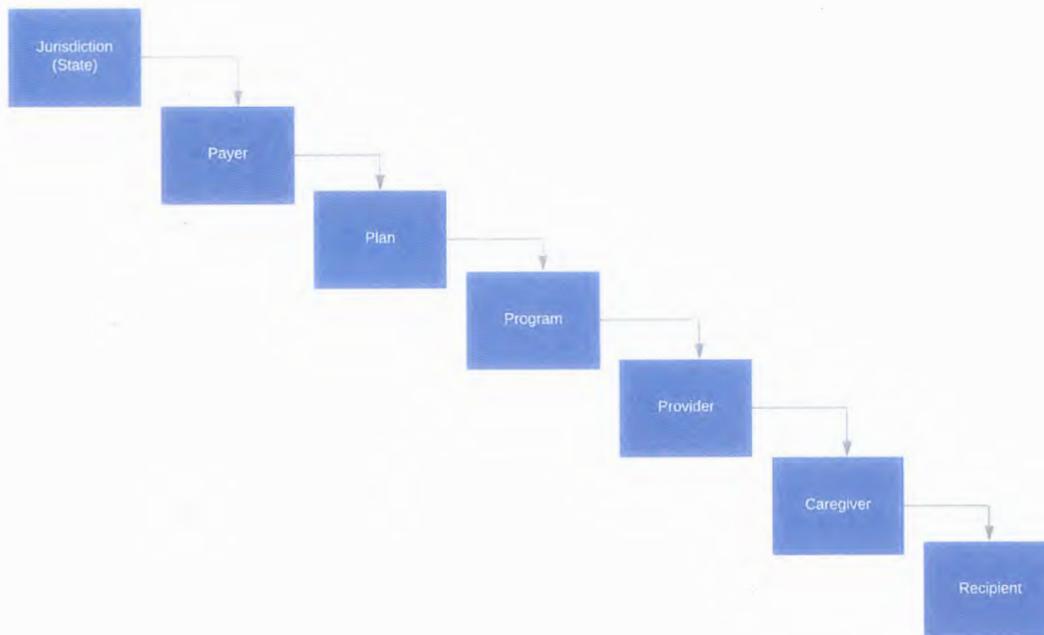
Data warehouses
Other legacy systems

Data sharing can be real-time or provided based on a schedule in batch mode.

Business rules, user roles and integrations developed during the business requirements gathering phase of the engagement are customized to the deployment. These components of the implementation will be proprietary to the DHHS.

Program Level Requirements

Data is categorized using the hierarchy depicted below:



This classification system enables the State to configure the EVV application at the program level. Program rules, services, policies and procedures and reimbursement rates can be defined at the program/provider level. Business rules can also be written based on these categories as well as at the field level. Because our business rules engine is a module independent of the software code base, rules can be changed during the term of the contract without the use of development resources providing maximum flexibility.

User-based permissions, combined with flexible rules, allow the ability to customize user privileges by program. That means a provider can be

granted the right to enter service tasks on one program by personnel type and not be given that access for another program.

Service task lists can vary and be customized based on program needs and rules. A configurable option is to allow direct caregivers to enter notes and/or alerts using their mobile device to effectively and efficiently communicate beneficiary status to provider administrators and/or case managers.

Participant Directed Services (PDS)

Tellus understands the State requires coordination with their Fiscal/Employer Agent Financial Management Services-Support Broker Entity, "Services My Way," to support the PDS service delivery model. Tellus has worked with consumer-directed organizations and fiscal intermediaries to develop a user model to support PDS.

This model supports the unique employer/employee relationship between the Participant and Caregiver or Personal Assistant facilitated by a fiscal intermediary. Tellus will work with Services My Way to define their requirements during the business requirements gathering phase of the engagement. Shifts can be started even without a schedule if program rules allow.

Our standard consumer directed model centers around data collection and approval for shifts whether scheduled or unscheduled. Either party (the Participant or the Caregiver) is able to initiate a visit with the time record approval automatically requested through an automated workflow mechanism. In the example below, the employer's authorized representative starts the visit and selects the employee providing services for the current shift from the drop-down list of all employees approved to provide services for this participant:

Timesheet

Participant Name: Jane Doe Employee Name: Patti Smith
 Authorized Representative: Joe Doe
 Date: 04/24/2018 Service Code: S9121 Task Completed: Bathing, Meal Preparation, Non Medical Transport
 Date: 04/25/2018 Service Code: S9122 Task Completed: Meal Preparation
 Date: 04/27/2018 Service Code: S9122 Task Completed: Bathing, Meal Preparation, Cleaning, Non Medical Transport

Did the Participant have an overnight stay in a hospital, nursing home or mental health facility during this pay period?
 Yes No

I certify, that this is an accurate record of the services I have provided.
 Authorized Representative: [Signature] Date: 04/30/2018

Admit Date: 04/26/2018 Discharge Date: 04/26/2018

I certify, that this is an accurate record of the services this employee has provided.
 Employee Signature: [Signature] Date: 04/30/2018

The services to be provided during the visit are selected, and the time the visit begins is selected.

Timesheet

Participant Name: Jane Doe Employee Name: Patti Smith
 Authorized Representative: Joe Doe
 Date: 04/24/2018 Service Code: S9121 Task Completed: Bathing, Meal Preparation, Non Medical Transport
 Date: 04/25/2018 Service Code: S9122 Task Completed: Meal Preparation
 Date: 04/27/2018 Service Code: S9122 Task Completed: Bathing, Meal Preparation, Cleaning, Non Medical Transport

3:30 AM
 [Clock interface showing 3:30 AM selected]

Did the Participant have an overnight stay in a hospital, nursing home or mental health facility during this pay period?
 Yes No

I certify, that this is an accurate record of the services I have provided.
 Authorized Representative: [Signature] Date: 04/30/2018

Admit Date: 04/26/2018 Discharge Date: 04/26/2018

I certify, that this is an accurate record of the services this employee has provided.
 Employee Signature: [Signature] Date: 04/30/2018



Both the Employer/Authorized Representative and the Employee sign off on the visit record.

Provider, recipient and service authorization files can be loaded into the EVV database. Pay rates can vary by direct service workers and be entered, uploaded or transmitted to Tellus by Services My Way.

Beneficiaries can be associated with more than one program and more than one caregiver. Business rules can be defined and applied to completed visits to pre-adjudicate claims checking for the following types of edits:

- Direct caregiver cannot provide services to multiple beneficiaries at the same time
- Direct caregiver cannot bill more than sixteen (16) hours per day
- Overlapping service rules
- Multiple procedure codes, modifiers and rates
- Service limits by frequency
- Retroactive prior authorization changes
- Modification of schedules

Our business rules engine is flexible and can be configured and maintained without development resources. EVV rules can be changed as program policies and rules change. Issues identified can be communicated to case management agencies in the form of alerts and/or reports.

Conversely, because prior authorizations are populated in the form of a data feed transmitted by the payer, the ability to determine if authorized service are not being provided is available. Reports summarizing authorized and unscheduled services as well as authorized, scheduled and not rendered services are available on a scheduled and/or ad-hoc basis.

Business Rules Engine

Tellus EVV Business Intelligence Rules Engine is a modular, highly configurable component of our EVV solution. Business rules are initially defined by the payer during the requirements gathering phase of the engagement and written in the EVV rules engine module at the payer/program/provider and even recipient levels. Rules are separate from the code base making them configurable and changeable without development resources. Rules can be written around any field for a single or combination of user rules making our rules engine extremely robust with the ability to support advanced data analytics and reporting.

Backup Processes

Adhering to the highest standards of information security and data integrity over time is the main driver of our approach to hosting and system backup processes. Redundancy is the key strategy employed to build a fault tolerant system and robust disaster recovery methods and procedures. Our solution is compliant with the recommendations of NIST 800-53.

The EVV platform is hosted on Amazon Web Services (AWS) Government Cloud and runs on 15 AWS data centers located in the continental US. AWS datacenters are distributed in geographic regions which include clusters of datacenters called Availability Zones. Every region is geographically isolated in terms of power and water supply, and each zone is similarly served by independent networks.

Redundantly storing information in different datacenters in multiple regions, availability zones, and datacenters greatly reduces downtime, as the nearest available node is activated as a backup.

Each AWS datacenter is protected by four distinct layers of security:

Perimeter Layer- Datacenters are physically enclosed by gates protected by security guards and intrusion detection technology

Infrastructure Layer- Energy generators, fire suppression equipment, and ordinary and extraordinary maintenance systems protect the integrity of the data stored in the datacenter

Data Layer- Access to server rooms is restricted, tightly regulated by authorization processes and constantly monitored

Environmental Layer- The locations where AWS datacenters are built are screened for seismic activity and extreme weather, to minimize the risk of structural damage caused by natural occurrences

In case of failure of the primary node, Amazon RDS performs an automatic failover to the standby without the need for manual administrative intervention. Within minutes a new instance of the server is launched in a different AWS availability zone or region. Downtime is cut to minutes instead of hours. Using various AWS regions and different physical data centers ensures the system is highly available and fault tolerant.

All backups and recovery of databases for all cases, including disaster and system failure, are hosted in at least two different availability zones (geographically different data centers). Database instances are kept in sync real-time. Backups are scheduled and occur at regular intervals. They are then encrypted and stored in multiple locations providing 99.9% durability.

Additionally, we achieve high levels of fault tolerance for our applications by using AWS Elastic Load Balancing to automatically route traffic across multiple instances and multiple Availability Zones (physical data centers). Elastic Load Balancing ensures only healthy Amazon application server instances receive traffic by detecting unhealthy instances and rerouting to healthy servers. If additional computing capacity is required, we have systems in place to scale the application and database service layers to ensure SLAs are met.

We also use Amazon Relational Database Service (RDS) to host our database server. Amazon RDS runs on the same highly reliable infrastructure previously discussed. Amazon RDS synchronously replicates the data to a standby instance in a different Availability Zone (different datacenter). RDS features we use to enhance reliability for critical production databases include: automated backups, database snapshots, and automatic host replacement in case of primary database crash. Database backup snapshots are taken at regular intervals and sent to AWS S3 encrypted storage.

Disaster Recovery Plan

Within one-hundred and twenty (120) days of contract, we will provide a comprehensive disaster recovery (DR) document as it relates to this project.

The DR Plan will include the following components:

DEFINITION OF DISASTER	TRIGGERING EVENTS
Teams & Responsibilities	DR Lead, Network, Applications, Communications
Infrastructure	AWS Security, Data Security, Network Monitoring, Application Access, Wi-Fi/Cellular Service Disruption
Operational Considerations	Plan Location, Physical Access, Transportation, Relocation, Operational Disruption, Affected Areas, Redundant/Parallel Systems, Customer Support
Communications Implications	Clients, Vendors, Employees Damage Assessment, Standby Activations
Testing & Maintenance	Maintenance, Testing

The DR Plan is updated at least annually or any time a major system update or upgrade is performed. The Disaster Recovery Lead will be responsible for updating the entire document and permitted to request information and updates from other employees and departments within the organization to complete this task.

The DR Plan limits service interruptions to a period of 24 hours. However, because our systems are fully utilizing scalability, disaster recovery, high availability and monitoring features of AWS, we do not anticipate that recovery time will be anywhere close to 24 hours.

Our systems reside in Amazon Web Services. We utilize AWS disaster recovery, failover and elasticity capabilities. We do not maintain our own hardware or physical data centers instead running our system in 15 AWS data centers in VA, OH and CA. Utilizing various AWS regions and different physical data centers within same region ensures that the system is highly available and fault tolerant.

The server environment is virtualized. This allows for portability in case the disaster affects the datacenter when the application server is running. Within minutes, a new instance of the same server will be launched in a different datacenter in a different AWS availability zone or region. As a result, downtime is cut to minutes instead of hours.

Using AWS, we achieve higher levels of fault tolerance for our applications by using Elastic Load Balancing to automatically route traffic across multiple instances and multiple Availability Zones (physical data centers). Elastic Load Balancing ensures that only healthy Amazon application server instances receive traffic by detecting unhealthy instances and rerouting traffic across the remaining healthy instances. If additional computing capacity is required, we have a system in place that will scale the application and database server layer to provide the level of service according to SLA.

The database is a critical component of the system. We use Amazon RDS (Relational Database Service) to host our database server. Amazon RDS runs on the same highly reliable infrastructure used by other Amazon Web Services. In production, we provision Multi-AZ DB Instances.

Amazon RDS synchronously replicates the data to a standby instance in a different Availability Zone (different datacenter). In case of failure of the primary node, Amazon RDS performs an automatic failover to the standby without the need for manual administrative intervention. When a failover is performed, there is a very short period during which the primary node is not accessible. We utilize many Amazon RDS features that enhance reliability for critical production databases, including automated backups, database snapshots, and automatic host replacement in case of primary database crash. In addition to synchronous replication, database backup snapshots are taken at regular intervals and sent to AWS S3 encrypted storage.

The comprehensive DR Plan will be provided to the Agency when it's modified, or at least annually, as a PDF file. At the Agency's request, in accordance to the best interests of the Agency, the DR Plan will be updated at no additional cost.

The DR Plan will be tested annually or after major infrastructure or system changes to ensure completeness and effectiveness of the existing Disaster Recovery Plan. Results of the DR Plan testing will be submitted to the Agency as soon as the test is complete - and at least annually.

Data Management Strategy

Meaningful information begins with standard, quality data. Quality data is accurate and consistent for reliability and comparability. Tellus employs the following principles to collect quality data:

Data Authenticity: data is captured and validated at the source

Data Integrity: all data entries and modifications are monitored using an audit log

Non-repudiation: data is authenticated at the source with secure login credentials

Data security is critical. All data is encrypted both at rest and in transit. Data is made available only to the individuals who need access to that information by employing role-based permissions. Data is always available to users who have permission to access it.

Below we list the defined data dictionaries and standard file formats for each of the following categories of integrations. Tellus is a founding member of the National Electronic Visit Verification Association (NEVVA), an organization dedicated to defining and sharing data and formatting standards for EVV transactions.

This page specifies the file layouts for a Tellus standard integration, and all mapping/processing software associated with these integrations are the intellectual property of Tellus, LLC. Tellus can accept files that do not meet standard file formats as required based on project specifications.

MESSAGE	DESCRIPTION
Type Code List	Unified type code listing used for all other messages.

Provider	Used by Payers (State Medicaid, MCO, etc.) to submit Home Care Agency information to the EVV solution.
Recipient	Used by Payers (State Medicaid, MCO, etc.) to submit Recipient (Patient) information to the EVV solution.
Prior Authorization	Used by Payers (State Medicaid, MCO, etc.) to submit Prior Authorizations (PA's) to the EVV solution.
User	Used by Payers (State Medicaid, MCO, etc.) to submit user information (Caregivers, Case Managers, Admins) to the EVV solution.
Schedule	Used by Providers via an Agency Management System to submit scheduling information to the EVV solution.
Payer	Used to import Payers (MCO's, State Medicaid Programs, Private Insurance Companies, etc.) into the Tellus EVV solution

Hardware & Software Requirements

Our approach is to provide the EVV platform as an AWS Government Cloud hosted solution. This greatly facilitates rapid system deployment for DHHS and provides access to all stakeholders to required functionality through free, widely used web browsing software. Tellus certifies support for the EVV Console (browser-based), Claims Portal (browser-based), and EVV App (mobile device app) on the following browsers and phone/PC operating systems.

DESCRIPTION	CAPABILITY
Supported PC Operating Systems	Windows OS (32 or 64 bit) Version 7 or higher Mac OS Version X (10) or higher
Supported Mobile Operating Systems (visit verified through geolocation, requires Internet Access/FOB)	iOS Version 8 or higher Android Version Lollipop (5.0) or higher

DESCRIPTION	CAPABILITY
Supported PC & Mac Browsers	Microsoft Internet Explorer Version 11 or higher Microsoft Edge Version 16 or higher Google Chrome Version 4 or higher Apple Safari Version 10 (Mac)/4 (Windows) or higher Mozilla Firefox Version 57 or higher
Supported Mobile Browsers:	<ul style="list-style-type: none"> Google Chrome Version 4 or higher on Android
Mobile Device Requirements	Operating System: Android or iOS (see above) Bluetooth required: No GPS required: Yes Voice support required: No Min memory of phone: 25 MB Min storage of phone: 50 MB
IVR Technology Adopted	Visit verified through landline by using Automatic Number Identification (ANI)
Data Exchange Methodologies	Mirth Connect is our healthcare information exchange data interchange platform REST application programming interface (API) and JavaScript Object Notation (JSON) for data transport API endpoints are secured with transport-level HTTPS encryption with message-level encryption; PGP also available Standard APIs and custom APIs as necessary for any third party integrating with our solution ANSI X12 EDI exchanges including 835 and 837 formats
Standard ASCII file formats (portal documents storage and sharing)	PDF Excel Text
Standard file format (data coming from third party EVV Systems):	Final file formats are defined with the DCH during needs analysis

Software System Updates

During the IQC process, a policy related to software system updates will be defined and communicated to the project team. As a rule, our EVV application is updated on a quarterly basis with release notes shared with clients in advance to make them aware of enhancements and provide access to training materials if necessary.

If required due to changes in Federally-mandated or National Standards compliance requirements (including but not limited to CMS, HIPAA, MITA) or technical issues, the applications may be updated off cycle. All changes will be monitored through the documented change control process and communicated to constituents in a timely manner.

d. Detailed Project Work Plan

Nebraska Tellus Implementation

ID	Task Mode	Task Name	Duration	Start	Finish	Resource Names
1		Sample Project Plan	158 days?	Wed 10/2/19	Fri 5/8/20	
2		Project Start	1 day?	Wed 10/2/19	Wed 10/2/19	
3		Contract/Scope	15 days	Thu 10/3/19	Wed 10/23/19	
4		Determine Project Scope	15 days	Thu 10/3/19	Wed 10/23/19	Project Manager, Management
5		Gather Functional Requirements	15 days	Thu 10/3/19	Wed 10/23/19	Business Analyst
6		Gather Technical Requirements	15 days	Thu 10/3/19	Wed 10/23/19	Technical Analyst
7		Analysis/Hardware and Software Requirements	5 days	Thu 10/24/19	Wed 10/30/19	Systems Architect
8		Design Phase	7 days	Thu 10/31/19	Fri 11/8/19	Design Team
9		Creation of the Project Management Plan	7 days	Thu 10/31/19	Fri 11/8/19	
10		Work Breakdown Structure	1 day	Thu 10/31/19	Thu 10/31/19	Project Manager
11		Communications Plan	1 day	Fri 11/1/19	Fri 11/1/19	Project Manager
12		Change Management Plan	1 day	Mon 11/4/19	Mon 11/4/19	Project Manager
13		Staffing Management Plan	1 day	Tue 11/5/19	Tue 11/5/19	Project Manager
14		Risk Management Plan	1 day	Wed 11/6/19	Wed 11/6/19	Project Manager
15		Issue Management Plan	1 day	Thu 11/7/19	Thu 11/7/19	Project Manager
16		Quality Management Plan	1 day	Fri 11/8/19	Fri 11/8/19	Project Manager
17		Detailed Project Work Plan/Schedule	1 day	Thu 10/31/19	Thu 10/31/19	Project Manager
18		Project Kickoff Meeting and Presentation	1 day	Thu 10/31/19	Thu 10/31/19	Project Manager
19		Project Deliverable and Acceptance Process	1 day	Thu 10/31/19	Thu 10/31/19	Project Manager
20		Design and Configuration Deliverables	1 day	Thu 10/31/19	Thu 10/31/19	Business Analyst
21		Design Milestone Complete	0 days	Fri 11/8/19	Fri 11/8/19	
22		Development Phase	115 days?	Mon 11/11/19	Fri 4/17/20	
23		Implementation Plan Creation with Detailed "Go Live" Plan	1 day?	Mon 11/11/19	Mon 11/11/19	Management
24		Design and Implementation Deliverable Work Products	2 days?	Mon 11/11/19	Tue 11/12/19	
25		Updated Configuration and Design Documents	1 day?	Mon 11/11/19	Mon 11/11/19	Business Analyst
26		User Manuals	1 day?	Tue 11/12/19	Tue 11/12/19	Business Analyst
27		Completion of System and Artifact Deliverables including RTM	1 day?	Wed 11/13/19	Wed 11/13/19	Business Analyst
28		Completion of Artifact and Milestones Walkthrough	1 day?	Thu 11/14/19	Thu 11/14/19	Business Analyst
29		Delivery of Production Ready system and solution	1 day?	Fri 11/15/19	Fri 11/15/19	
30		Review Functional Specifications	30 days	Mon 11/11/19	Fri 12/20/19	Agile (SCRUM) Team
31		Development (Build/Coding) Starts	30 days	Mon 11/11/19	Fri 12/20/19	Agile (SCRUM) Team
32		Develop Technical Documentation	30 days	Mon 11/11/19	Fri 12/20/19	Agile (SCRUM) Team
33		Develop/Deliver Code	85 days	Mon 12/23/19	Fri 4/17/20	Agile (SCRUM) Team

Nebraska Tellus Implementation

ID	Task Mode	Task Name	Duration	Start	Finish	Resource Names
34		Sprint 1 (2 weeks)	30 days	Mon 12/23/19	Fri 1/31/20	Agile (SCRUM) Team
35		Requirements/ Backlog (Epics, Stories)	30 days	Mon 12/23/19	Fri 1/31/20	Agile (SCRUM) Team
36		Design Solutions	30 days	Mon 12/23/19	Fri 1/31/20	Agile (SCRUM) Team
37		Develop Code	30 days	Mon 12/23/19	Fri 1/31/20	Agile (SCRUM) Team
38		QA/ Test/ Demo Solution	30 days	Mon 12/23/19	Fri 1/31/20	Agile (SCRUM) Team
39		Deliver Code	30 days	Mon 12/23/19	Fri 1/31/20	Agile (SCRUM) Team
40		Sprint 2 (2 weeks)	30 days	Mon 2/3/20	Fri 3/13/20	Agile (SCRUM) Team
41		Requirements/ Backlog (Epics, Stories)	30 days	Mon 2/3/20	Fri 3/13/20	Agile (SCRUM) Team
42		Design Solutions	30 days	Mon 2/3/20	Fri 3/13/20	Agile (SCRUM) Team
43		Develop Code	30 days	Mon 2/3/20	Fri 3/13/20	Agile (SCRUM) Team
44		QA/ Test/ Demo Solution	30 days	Mon 2/3/20	Fri 3/13/20	Agile (SCRUM) Team
45		Deliver Code	30 days	Mon 2/3/20	Fri 3/13/20	Agile (SCRUM) Team
46		Quality Assurance (QA)	10 days	Mon 3/16/20	Fri 3/27/20	
47		Develop Unit Test Plans using Product Specifications	10 days	Mon 3/16/20	Fri 3/27/20	QA Manager
48		Develop UAT Plans using Product Specifications	10 days	Mon 3/16/20	Fri 3/27/20	QA Manger
49		Develop Intergration Test Plans using Prod. Specs	10 days	Mon 3/16/20	Fri 3/27/20	QA Manger
50		Unit Testing	10 days	Mon 3/16/20	Fri 3/27/20	QA Manger
51		Integration Testing	10 days	Mon 3/16/20	Fri 3/27/20	QA Manger
52		System and User Acceptance Testing (UAT)	10 days	Mon 3/16/20	Fri 3/27/20	
53		Identify Test Group	10 days	Mon 3/16/20	Fri 3/27/20	Management
54		Install/Deploy Software	10 days	Mon 3/16/20	Fri 3/27/20	Management
55		Conduct Testing	10 days	Mon 3/16/20	Fri 3/27/20	Management
56		Evaluate Testing Results	10 days	Mon 3/16/20	Fri 3/27/20	Management
57		Address Modifications	10 days	Mon 3/16/20	Fri 3/27/20	Management
58		UAT Approval	10 days	Mon 3/16/20	Fri 3/27/20	Management
59		User Training	15 days	Mon 3/30/20	Fri 4/17/20	
60		Develop Training Specifications	10 days	Mon 3/30/20	Fri 4/10/20	Training Team
61		Develop Training Materials	10 days	Mon 3/30/20	Fri 4/10/20	Training Team
62		Provide User Training	5 days	Mon 4/13/20	Fri 4/17/20	Training Team
63		Completion of all Required R2 Artifacts	1 day	Mon 3/30/20	Mon 3/30/20	Management
64		Successful completion and acceptance of System Security Plan	1 day	Mon 3/30/20	Mon 3/30/20	Management
65		Review and Acceptance of all agreed upon pre-production activities and artifacts required for "Go Live" approval	1 day	Mon 3/30/20	Mon 3/30/20	Management
66		Development Milestone Complete	0 days	Mon 3/30/20	Mon 3/30/20	



Nebraska Tellus Implementation

ID	Task Mode	Task Name	Duration	Start	Finish	Resource Names
67		Production Phase	12 days	Mon 4/13/20	Tue 4/28/20	
68		Pilot/Pre-Production	5 days	Mon 4/13/20	Fri 4/17/20	
69		Identify Pilot Group	5 days	Mon 4/13/20	Fri 4/17/20	Deployment Team
70		Develop Software Delivery Mechanism	5 days	Mon 4/13/20	Fri 4/17/20	Deployment Team
71		Install/Deploy Software	5 days	Mon 4/13/20	Fri 4/17/20	Deployment Team
72		Obtain User Feedback	5 days	Mon 4/13/20	Fri 4/17/20	Deployment Team
73		Evaluate Testing Information	5 days	Mon 4/13/20	Fri 4/17/20	Deployment Team
74		Pilot Complete	5 days	Mon 4/13/20	Fri 4/17/20	Deployment Team
75		Deployment/Implementation	7 days	Mon 4/20/20	Tue 4/28/20	
76		Determine Final Deployment Strategy	5 days	Mon 4/20/20	Fri 4/24/20	Deployment Team
77		Determine Deployment Methodology	5 days	Mon 4/20/20	Fri 4/24/20	Deployment Team
78		Secure Deployment Resources	5 days	Mon 4/20/20	Fri 4/24/20	Deployment Team
79		Train Support Staff	5 days	Mon 4/20/20	Fri 4/24/20	Deployment Team
80		Deploy Software (Go Live)	5 days	Mon 4/20/20	Fri 4/24/20	
81		Post Implementation Review	5 days	Mon 4/20/20	Fri 4/24/20	
82		Document Lessons Learned	5 days	Mon 4/20/20	Fri 4/24/20	Project Manager
83		Post Implementation Review Complete	5 days	Mon 4/20/20	Fri 4/24/20	Project Manager
84		Transition to Support Staff	1 day	Mon 4/27/20	Mon 4/27/20	Management
85		Successful completion and acceptance from CMS of all required R2 artifacts	1 day	Tue 4/28/20	Tue 4/28/20	Management
86		Production Complete Milestone	0 days	Tue 4/28/20	Tue 4/28/20	
87		R3 Phase	157 days	Wed 10/2/19	Thu 5/7/20	
88		Completion of all agreed post-production functionality	5 days	Wed 4/29/20	Tue 5/5/20	
89		Completion and acceptance from CMS of all required R3 functionality and artifacts	2 days	Wed 5/6/20	Thu 5/7/20	
90		R3 Milestone Completion	0 days	Wed 10/2/19	Wed 10/2/19	
91		Project Closing	2 days	Wed 5/6/20	Thu 5/7/20	
92		PMO Admin	2 days	Wed 5/6/20	Thu 5/7/20	
93		Dismiss Team Members	1 day	Wed 5/6/20	Wed 5/6/20	Project Manager
94		Project End	2 days	Wed 5/6/20	Thu 5/7/20	Project Manager

e. Deliverables and due dates

The anticipated deliverables coinciding with project milestones needed to comply with the EVV System solicitation will include the deliverables listed below. Additional milestones may be required after the initial phase analysis of work with intermediate deliverables that are needed in the project plan to abide by the project dates.

PROJECT MILESTONE	DELIVERABLES
Design Milestone	Project Management Plan Detailed Project Work Plan Project Kickoff Meeting & Presentation Project Deliverable & Acceptance Process Design & Configuration Deliverables
Development Milestone	Implementation Plan Design & Implementation Work Products System and Artifact Deliverables Artifact & Milestone Walkthroughs Production Ready System & Solutions System & UAT Testing User Training

	R2 Artifacts System Security Plan Pre-production Activities & Artifacts
Production Milestone	Go-Live Activities Production EVV Solution Customer Support Functional Transition to Account Management CMS Approval of R2 Artifacts
R3 Milestone	Post-Production Functionality CMS Acceptance of R3 Artifacts
Operational Activities	EVV Visit Verification Services Management Oversight Functions Reporting & Dashboards Customer Support Adhere to Service Level Agreements Status Reporting Training Development & Delivery Documentation & Maintenance of Enhancements Security, Privacy & Audit Activities

The project management plan, as well as the procedures documentation, will outline an effective change control method for the review, revision, and approval of planning documents, testing processes, and other project deliverables. We recommend a change control board (CCB) be created to provide feedback on identified changes, to review and approve modifications. The CCB should be formed early in the project and shall include Agency and Vendor stakeholders.

Contractor roles and responsibilities of proposed contractors will be defined in a role responsibility assignment matrix which will be included in the project management plan, as a component of human resource management.

We will require the assistance of the State as it relates to the approval of the implementation plan. This would include timely and detailed feedback on the draft implementation plan.

Additional assistance required from the Agency may be requested during the regular established meetings and/or communication methods to ensure timely response and/or approval of the stated assistance request. Our experience is that timely assistance is very beneficial during the initiating and planning phases of the project.

A communication plan shall be created to identify the best communication methods between the Vendor and the State and its identified stakeholders. The plan shall include proper expectations regarding the receipt and acknowledgement of information and requests

and necessary dates, so as to engage both parties and outline the proper expectations. A mix of mediums shall be used, such as information repository, emails, and phone calls. Meetings to gather information, contractor statuses, issues, risks, and project statuses will be scheduled appropriately throughout the different phases of the project to ensure that communication is flowing between all project stakeholders. Meetings will have the overall goals of identifying risks, providing issue resolution alternatives, and capture project work effort and provide forecasting effort needed to stay on plan.

Attachment

A

VI Attachment A | Requirements Traceability Matrix

Attachment A Electronic Visit Verification Requirements Traceability Matrix (RTM)

The Requirements Traceability Matrix (RTM) is used to document and track the project's solution requirements from the proposal through to testing to verify that each requirement has been completely fulfilled. The Contractor will be responsible for maintaining the set of Baseline Solution Requirements directly related to the configuration of the EVV System. Additions, modifications, and deletions to these requirements will be added and modified throughout the project so it is imperative that a current version of the matrix be maintained at all times.

Bidders to provide an initial RTM as part of its proposal. The Bidder should follow the instructions below. The Bidder must respond to requirements exactly as they are provided in this RFP. The Bidder should indicate how it will achieve full compliance (i.e., requirement fulfilled 100%).

Bidders are required to provide a response, using the appropriate codes provided in the tables below, for each requirement listed in the Functional Requirements Response Matrix below.

Ability Code	Condition	Description
S	Standard Function	The Solution fully satisfies the requirement as stated. Describe how the requirement is satisfied by the Solution.
W	Workflow or System Configuration Required	Current functionality of the Solution exists in the Solution and can be modified by a system administrator to meet this requirement. Describe how the requirement will be satisfied.
M	Modification Required	The Solution requires a modification to existing functionality to meet this requirement which requires a source code modification. The Solution will be modified to satisfy the requirements as stated or in a different format. Describe the modifications. Include an estimate of its impact or severity if not compliant, and the steps necessary to close the gap and achieve full compliance with the requirements. For system and/or product features that will support the requirement and close the gap, provide an estimated date when the capability will be available as part of the Bidder's baseline capability.
F	Planned for Future Release	This functionality is planned for a future release. Describe how the requirement will be satisfied by the Solution and when the release will be available.
C	Custom Design and Development	The Solution requires new functionality to meet this requirement which requires a source code addition. Describe the feature and its value. If the custom design and development requires 1000 or more hours, provide an assessment of the requirement gap, including an estimate of its impact or severity if not compliant, and the steps necessary to close the gap and achieve full compliance. For system and/or product features that will support the requirement and close the gap, provide an estimated date when the capability will be available as part of the Bidder's baseline capability.
N	Cannot Meet Requirement	The Solution will not satisfy the requirement. Provide an assessment of the requirement gap, including an estimate of its impact or severity if not compliant, and the steps necessary to close the gap and achieve full compliance. For system and/or product features that will support the requirement and close the gap, provide an estimated date when the capability will be available as part of the Bidder's baseline capability.
O	Other Software	If the requirement is to be satisfied through the use of a separate software package(s), identify those package(s) and describe how the functionality is integrated into the base system

Bidder's Response:

G.1 General Solution Requirements:

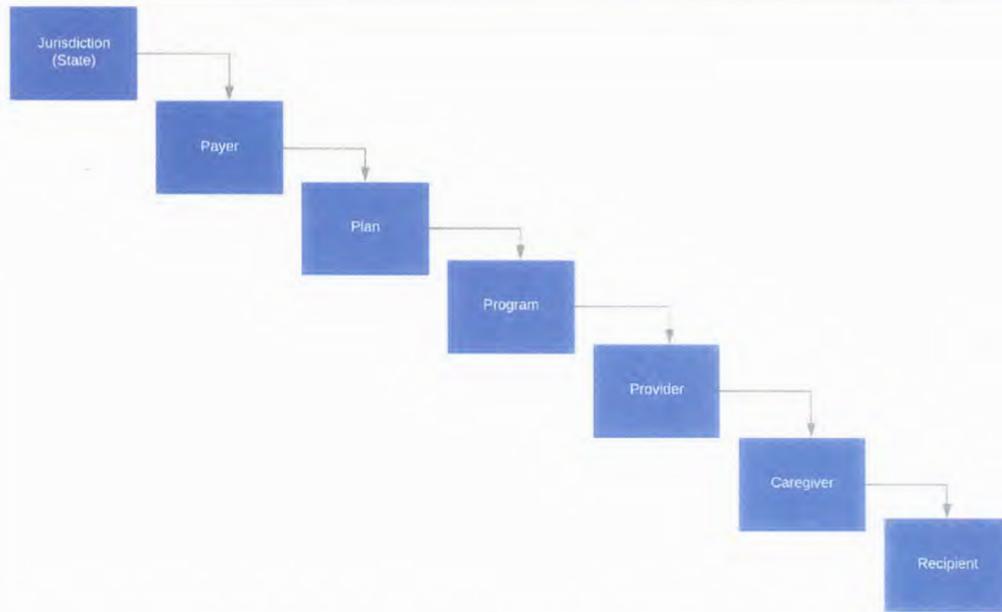
Describe how the bidder's solution will provide a Solution - including the business, information, and capabilities and functionality necessary for a full state implementation. This will also include training and support, documentation and implementation, operation, and maintenance activities. Solution should take advantage of open standards to support interoperability, real-time bi-directional exchange of data where feasible, efficient maintenance and upgrades, and interface with the heterogeneous technology environment of home care provider organizations. Solution to be flexible to meet the needs of multiple programs and services, which may change over time due to state or federal regulatory or policy changes, or the additional of additional programs.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
1	GS.1	Solution must be configurable to meet multiple programs and services, and flexible for subsequent addition of services and/or programs which may have different policies, procedures, business rules and benefit packages. Must be done in a manner that distinguishes services, eligibility groups and responsible payors as programs, waivers and services are subject to change throughout the contract.	Describe how the solution is configurable to serve multiple programs or services which have different policies, procedures, business rules and benefit packages (i.e., State Plan, specific HCBS waivers, etc.). Describe how this will be done in a manner that distinguishes services, eligibility groups, and responsible payors (Medicaid fee-for-service, Medicaid Managed Care organization, or other DHHS-contracted entity).	N/A	W	

Bidder's Response:

Tellus eVV is a Commercial-Off-The-Shelf (COTS) Software-as-a-Service (SaaS)-application that is configurable to meet your specific requirements thanks to our powerful business rules engine. Our methodology favors configuration over customization to accelerate implementation time, streamline testing and simplify change management. Configuration settings, variable parameters and business rules that are separate from our code base provide the ability to deploy a highly flexible and adaptable solution for any environment very quickly. In addition, rules can be changed during the contract term if and when waiver programs and or services are modified.

Business rules are generally defined by payer. However, they can be created at any level, using the following hierarchy:



This classification system enables the State of Nebraska to configure the EVV application at the program level. Program rules, services, policies and procedures and reimbursement rates can all be defined at the program/provider level. Business rules can also be written based on these categories as well as at the field level. Because our business rules engine is a module independent of the software code base, rules can be changed during the term of the contract without the use of development resources, providing maximum flexibility.

Service task lists can vary and be customized based on program needs and rules. A configurable option is to allow caregivers to enter notes and/or alerts using their mobile device to effectively and efficiently communicate recipient status to provider administrators and/or case managers. Another option is making some service codes open to rendering care to multiple members at the same time while others do not allow that option.

In summary, Tellus eVV is highly flexible and adaptable to the different business rules, policies and processes for each of the State's programs.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
2	GS.2	Solution must support a phased approach to deploying the solution for specific programs, services or provider-delivered EVV data.	Describe how the solution can support a phased approach to deploying the solution for specific programs, services or provider-delivered EVV data.	N/A	S	

Bidder's Response:

Tellus can support a phased approach to deploying the solution in any manner the State selects. Tellus eVV is comprised of five major modules (EVV Administrator and Payer Consoles, EVV Mobile App, EVV Claims Console, Business Intelligence Rules Engine and the Data Aggregation Engine). The modules operate together as a fully integrated enterprise EVV solution, individually incorporating components from other software vendors or on a stand-alone basis as required:



The SaaS-based modules outlined above are the backbone of Tellus eVV. However, our service-oriented architecture provides the ability for each jurisdiction to uniquely configure the components as required taking into consideration all Medicaid enterprise components. Tellus eVV modules can be implemented coupled or uncoupled, meaning they can each operate independently as well as integrated with applications built by other vendors.

In addition to the ability to select the solution modules to incorporate, we also recommend a Soft Launch, which is an excellent way to mitigate risk in the rollout process. In a Soft Launch, constituents work together to ensure the system is designed to perform as required end to end. A cross-section of selected users including payers, providers, administrators, participants, and caregivers are trained and go live in production prior to the full rollout. The EVV solution is used at the point-of-care, and data is processed through the system. Caregivers who participate in this test process will continue to record visits as they normally do, so that those results can be compared to the automated results. The phased approach can also focus on specific service codes with others implemented at a later date.

Once transactions begin to flow through the system, data is checked for accuracy and expected results. This process involves all participants, ensuring that the EVV system is receiving and accepting the visit data; and that all external interfaces are functioning according to specification. Anticipated versus actual results are documented and provided to the State of Nebraska to certify the system is ready for rollout.

Another benefit of the Soft Launch is that adjustments can be made in the training programs if something seems difficult or unintuitive. Adjustments to the portal and the reporting system can also be made once the results are analyzed. Reporting “dashboards” can also be enhanced during this phase to monitor any specific issues that were encountered. The live data flowing through the various integration programs is also a good test of the bi-directional data exchange processes.

Once the Soft Launch has satisfied all parties that the system is operating as designed and expected, the project teams decide on the next steps, usually including a scheduled rollout to other users. This process allows the training of an extended, but still limited, group of users and providers. This type of controlled process is designed to minimize risk versus a system-wide launch: fewer users are affected should there be an issue, and changes or modifications can be done quickly with less impact. Again, results are analyzed and changes to the operation and training are incorporated. Rollout scheduling is also specifically designed to take into consideration lessons learned during the Soft Launch stage as well any adaptations based on calendars and availability of stakeholders.

Once all feedback has been received and acted on, the system is ready for launch. With the lessons learned by all parties, the remaining users should experience a smooth and positive start to their EVV program.

During all phases of the implementation, all necessary artifacts required for mandatory go-live readiness are collected and stored.

A detailed project plan based on the implementation approach will be created and mutually agreed upon by the State of Nebraska and Tellus. A communication plan will also be created to identify the best communication methods between Tellus and the State of Nebraska and any other identified stakeholders. The plan will include expectations regarding the receipt and acknowledgement of information and requests and necessary dates, to engage both parties and outline the proper expectations. A mix of mediums will be used, such as an information repository, emails, and phone calls. Meetings to gather information, contractor statuses, issues, risks, and project statuses will be scheduled appropriately throughout the different phases of the project to ensure that communication is flowing between all project stakeholders. Meetings will have the overall goals of identifying risks, providing issue resolution alternatives, capturing project work effort and forecasting effort needed to stay on plan.

Tellus is prepared to work with the State of Nebraska to implement EVV in the way that best meets the needs of the State and its constituents.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
3	GS.3	Solution should allow Nebraska to take full advantage of national best practices and technological advances in: <ol style="list-style-type: none"> EVV systems; Uses of EVV data; Functionality; Mobile technology; 	Describe how the solution allows Nebraska to take full advantage of national best practices and technological advances in EVV systems, uses of EVV data, functionality, mobile technology and interoperability. Provide a functional and	N/A	S	

	e) Interoperability.	technical road map of the solution if available.			
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Bidder's Response:

While Tellus eVV is built to operate in open, closed and hybrid models, Tellus advocates for the open model because choice fosters competition, which, in turn, leads to innovation. Current industry best practices dictate that software functionality be modularized and easy-to-integrate with applications built by other vendors. This offers payers and providers the ability to choose the best combination of tools to support their programs and goals. The critical component ensuring an open model results in a comprehensive solution at the payer level is aggregation of data from disparate sources. If data from all vendor solutions is collected and normalized in a single database, the payer achieves the benefit of allowing provider choice without compromising meaningful analytics and reporting. Comprehensive data analysis and reporting provides payers with the information they need to:

- Measure patient outcomes.
- Improve operational efficiencies.
- Benchmark providers.
- Benchmark caregivers.
- Reduce fraud, waste and abuse.

The open EVV model provides the best of both worlds: provider choice combined with real-time, transparent data to ensure improved patient outcomes and payer program integrity.

Tellus eVV is a fully integrated system including scheduling, authorization monitoring, visit verification and billing/claims. The open/hybrid EVV model allows us to use standard open Application Program Interfaces (APIs) that promotes interoperability across the Medicaid ecosystem integrating with care management applications, third-party EVV vendors and MMIS. If APIs are not available for a specific application, Tellus supports data extracts/exports that can be manipulated and uploaded to other applications.

Tellus eVV is comprised of five major proprietary components or modules. The modules operate together as a fully integrated enterprise EVV solution, individually incorporating components from other software vendors or on a stand-alone basis as required. The primary modules are:

MODULE	PRIMARY FUNCTION
EVV Console	Web-based consoles for payers and provider agencies that display real-time, dashboard-style overviews of important metrics as well as the navigational menu for all other web-based user accessible components of the application including administrative settings and functions, scheduling, claims processing, reports.
EVV Mobile	Android and iOS native applications downloaded to user devices via commercial app stores. Used by caregivers to remotely access schedules and electronically confirm rendered services real-time.
EVV Claims Console	Web-based provider level pre-adjudication review of rendered services compared to payer authorized services. All transactions are queued for review and must be in a "matched" status before releasing to payer for adjudication.
Business Intelligence Rules Engine	Business rules are defined by the payer during the requirements gathering phase of the engagement and set up in the EVV rules engine module. Rules are separate from the code base so they're configurable and changeable without development resources. Rules can be written around any field for a single or combination of user rules making the rules engine robust and flexible.
Data Aggregation	Data is imported from third parties including payers, providers and third-party EVV vendors to assemble a complete data set for comprehensive data export, analytics and reporting purposes. Imports can be scheduled at any desired frequency up to real time.

Tellus is the founding member of the National Electronic Visit Verification Association (NEVVA), a non-profit organization created to establish standards and best practices for EVV. We are committed to exercising a leadership role in the EVV community and will continue to work closely with the association, payers, providers and vendors to support the development and implementation of industry best practices.

As EVV evolves new best practices will be identified and implemented into our solution set. Federally mandated changes will be implemented for all payers using Tellus EVV. Other best practices will be deployed using business rules and configuration settings providing our clients with the option to implement specific features, functions and rules when they are made available and anytime thereafter.

Tellus eVV is a modern, robust EVV technology solution supporting all the features, functions and capabilities the State of Nebraska is seeking.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
4	GS.4	The solution should accommodate customer preferences for communications by email, text, mobile devices, or phones.	Describe how solution provides customer preferences for communications for all communication forms listed in the requirement.	S&C.BRC.5	S	

Bidder's Response:

When multiple contact methods exist in the user profile, Tellus eVV allows customers to select the communication method that works best for them. The application requires, at minimum, a unique email address or phone number for a user account to be set up. The default setting is email communication unless the user's profile only includes phone number, in which case the default setting is text. Once the account is set up, users can adjust their communication preferences in their profile settings within the application.

Tellus' ability to deliver communications initially via email, text, mobile device, or phones is predicated on the data provided by the State of Nebraska, MCOs or third-party vendors. Our experience has been that data provided initially can be inaccurate, incomplete, duplicated or outdated, requiring outreach to obtain and correct missing or incorrect contact information.

For security purposes as well as required notification of certain activities and events, our system requires each user to have at least one unique contact method. If two or more users have the same phone number, for example the provider agency's phone number, they must have a unique email address, and that method of communication becomes the default and cannot be updated unless a unique phone number is also added to the account. This practice ensures the security of PHI data.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
5	GS.5	The solution should automate business processes and implement a series of automation processes to load data on a regular basis from different data sources.	Describe how solution uses a mix of manual and automated business processes. Provide functional and technical road map of the solution if available.	TA.BPM.4	S	

Bidder's Response:

Data transfers and aggregation are a core competency of Tellus. In fact, we have dedicated integration teams specifically assigned to data sharing and integration. We use industry-leading, cross-platform, bi-directional, health care integration engines for data interchange.

The purpose of data sharing is to consolidate data from various sources into one system of record in the most efficient manner possible to save time and minimize redundant processes. Sharing data with other systems means data is transmitted or exported from one software application and shared by import into another application. As it relates to EVV, we import data from multiple systems to store data in a common database. Some of this information is foundational to set up the system; for example, the MMIS will send provider, recipient and prior authorization data to import into the EVV database. MCOs will also send provider, recipient and prior authorization data to import into the EVV database. The data is normalized as part of the import process. Visit data collected from our solution as well as other EVV systems is imported into the data aggregation database and transmitted in real-time transactional or in batch mode.

Tellus provides standard integration documentation to trading partners and also has the ability to customize mapping from trading partners who are unable to meet our standard protocols. As an example our standard rendered service integration specifications can be found at this link:
<https://tellusolutions.atlassian.net/wiki/spaces/EVV/pages/182124545/Rendered+Services+File+Specifications>

When foundational information is loaded, providers will have the information they need to schedule visits for participants.

The Tellus eVV platform is built on a service-oriented architecture (SOA) and is open database connectivity (ODBC) compliant making the application extremely flexible and agile while allowing for bi-directional exchange of information with virtually any other open architecture application, including Financial Management Systems, Agency Management Systems, third-party EVV and other software systems.

The Data Aggregator is a powerful tool enabling seamless collection and normalization of data from various sources into a common database. Regardless of origination, the data is put into a common format, so it is consistent with the database layout and, ultimately, exposed to the consoles and other applications.

Business Rules formulated by program and payer administrators are run against transaction data to determine the validity of delivered services. Transactions in the form of visits, regardless of the original source, that violate the rules associated with a specific program or payer can be remediated by the provider in the Claims Console, and the transactions will be reevaluated. Those visits with violations are flagged and show up in the exception reports and the Claims Console's dashboard.

Approved transactions are promoted to the Claims Processing tool for pre-adjudication. Pre-adjudication applies a set of data scrubbing algorithms to properly format information based on claims adjudication standards provided by payers, improving the percentage of successfully processed paid claims. Any denied claims can be reviewed, adjusted and resubmitted or voided by administrators at the provider agency.

Bi-directional interfaces can be built using the following interchange protocols:

- TCP/MLLP
- Database (MySQL, PostgreSQL, Oracle, Microsoft SQL Server, ODBC)
- File (local file system and network shares)
- PDF and RTF documents
- JMS
- FTP/SFTP
- HTTP/Web Services
- SMTP
- SOAP (over HTTPS)
- DICOM
- JavaScript
- The open architecture also allows for the easy addition of custom and legacy interfaces.

Typical messaging standards supported by the Tellus data interchange solution include:

- ANSI X.12 Electronic Data Interchange (EDI) including **837, 835 and 278**
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW
- JavaScript Batch
- Additional Data Types are support via API Libraries

The flexible open architecture also allows custom and legacy interfaces to be easily added to support data sharing with systems that are not able to share information in one of the protocols not native to the platform. When APIs don't exist, imports and exports are available in standard file formats,

Our standard data sharing tool allows data to be shared employing many standards and protocols including near real-time data sharing for both individual and batch transactions. Our business intelligence rules engine applies rules to visits and claims data for tracking service utilization and comparing it to prior authorization data. This data is available to those who have permission to view it in the web-based consoles.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
6	GS.6	The solution should accept the national provider identifier in all standard electronic transactions mandated under HIPAA.	Describe how the solution accepts the national provider identifier in all standard electronic transactions mandated under HIPAA.	IA.DS.14	S	

Bidder's Response:

Tellus accepts National Provider Identifiers (NPI) as optional fields in our standard data dictionary for both providers and caregivers and prefers those unique identifiers be included as part of the data capture and retention requirements for projects.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
7	GS.7	The solution should provide member and provider access to services via browser, voice response solution, or mobile device, and manual submissions.	Describe how solution provides member and provider access to services via browser, voice response, or mobile device, and manual submissions.	TA.CS.14	W	

Bidder's Response:

Tellus eVV allows access to services via a variety of methods. Methods to access services include:

- A GPS-enabled mobile app that caregivers can download from a commercial app store on their own personal device or a device provided by the DHHS. Provider access to the mobile application is standard. Members do not have access to the mobile application in our standard configuration; however, this access can be configured as required.
- Manual entry through the web console by authorized users; manual entries are identified as such in the audit log. Provider access to the browser-based console and member access for those who select the Consumer Directed service delivery option are standard features. Browser access for members selecting the traditional service delivery model can be accommodated with configuration settings.
- Telephonic Integrated Voice Response (IVR) verification using the Member's landline. Toll-free numbers are provided for caregivers to Clock-In/Clock-Out. If a caregiver calls in from a telephone number that is different than the Member's landline, the mismatch is recorded and reported. Provider and member access to IVR functionality are configurable options.
- Fixed Object Devices (FOB) or Small Alternative Devices (SAD) for participants who live in rural areas and who do not have access to reliable cellular, Wi-Fi, landline or GPS services. This option can be permitted and configured at the payer, provider and member level.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
8	GS.8	The solution should fully comply with section 508 accessibility. www.section508.gov	Describe how the solution fully complies with Section 508 accessibility requirements.	TA.CS.18	S	

Bidder's Response:

The Tellus eVV solution is fully compliant with Section 508 of the Rehabilitation Act, Americans with Disabilities Act (ADA). In addition, the solution is supported by a thorough and accessible training program designed to meet the needs of the individual user including those with disabilities. Accommodations for disabled individuals adhere to all State and Federal laws, rules, regulations and guidelines. Training sessions and related materials will be made available in both English and Spanish. Our customer service department also offers assistance to those with hearing or speech disabilities and gives callers the option to speak to a representative in English or Spanish.

G.2 Electronic Visit Verification Requirements

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
9	EVV.1	Solution must use a primary method that will be used to collect visit verification data as well as alternatives depending on the participant, location and caregiver. Each method must ensure accurate data collection of visit verification data elements.	Describe the primary method that will be used to collect visit verification data. Explain how the solution will ensure accurate data collection of visit verification data elements. Be specific about the technology and how the solution will meet the requirements for data collection.	N/A	S	

Bidder's Response:

Our proposed solution allows for the use of multiple methods to collect visit data at the point-of-care. This blended approach provides the highest degree of flexibility for the caregivers and accessibility for the recipients.

Current collection methods include:

- GPS-enabled mobile devices that verify the location of the provider at the time and location of clocking in and clocking out are the preferred and primary method for visit verification. Tellus native mobile apps are able to capture this information even if devices are offline.
- Interactive Voice Response technology when a landline is available for rural areas where Wi-Fi or cellular connectivity is limited or non-existent and GPS location identification is unreliable.
- In-home Fixed Objects (FOBs) or Small Alternative Devices (SAD) in those rare cases where neither mobile access or a landline are available. This method is typically supported with administrative assistance

The primary method for collecting visit information will be mobile GPS-enabled smart devices that are either personal, 'bring your own device (BYOD)', or company-owned device models. Our mobile apps are written in native Android and iOS and can be downloaded from commercial app stores. GPS coordinates are captured using satellite trilateration technology even if the mobile device is offline, meaning the caregiver is not connected to Wi-Fi or cellular service.

As long as the caregiver opens the EVV app on their mobile device while they have access to Wi-Fi or cellular service, their schedule will sync to the mobile device. All service data can be captured and cached whether or not the caregiver has network connectivity. All data is encrypted at rest and in transit. When the caregiver regains Wi-Fi or cellular service, all activity captured while the mobile device was in offline mode is automatically synced to the EVV database.

This feature provides the ability to capture electronically verified visit information even for recipients who live in areas with limited wireless network connectivity. GPS trilateration is used to capture coordinates even when Wi-Fi and cellular service is unavailable.

The Tellus eVV platform is extendable and customizable using configuration settings, parameters and a business rules engine. It is designed to evolve as the regulatory environment and/or business requirements change, and it is intuitive and easy to use for all system users to manage, monitor and administer care.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
10	EVV.2	Solution should provide capability for providers to submit the necessary	Describe the alternate method that will be used to collect visit	PE.P11.27	S	

		verification information via alternate methods, should the primary mode of submission be out of service. (For example, if a handheld device is not working properly, the provider is able to phone in the visit information or submit it via a website portal.)	verification should the primary mode of submission be out of service or not viable in that location. Be specific about the technology and how the technology will meet the requirements to ensure accurate data collection.			
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Bidder's Response:

The Tellus eVV solution includes alternative methods for capturing visit data if the primary method is unavailable. Alternative methods include:

- Telephonic Integrated Voice Response (IVR) verification using the participant's landline. Toll-free numbers are provided for caregivers to Clock-In/Clock-Out. If a caregiver calls in from a telephone number that is different than the participant's landline, the mismatch is recorded and reported. IVR is probably the most familiar method of EVV and may be more comfortable for caregivers who do not have compliant mobile devices or who are uncomfortable with technology.
- Fixed Object Devices (FOBs) or (Small Alternative Devices) for participants who live in rural areas and who do not have access to reliable cellular, Wi-Fi, landline or GPS services.
- Manual entry through the web console by authorized users; manual entries are identified as such in the audit log.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
11	EVV.3	The solution should have the capability to require providers to attest to the presence of hard copy documentation for any manual visit verification.	Describe how the solution can require providers to attest to the presence of hard copy documentation for any manual visit verification or manual updates.	PE.PI1.26	W	

Bidder's Response:

Tellus eVV is configurable to allow an alert to be created to require the provider to attest to the presence of hard copy documentation for any manual visit verification. This can be captured and stamped in the audit log.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
12	EVV.4	The solution should verify visit components within program requirements when the caregiver initiates the visit verification. Each visit initiated through the EVV module will be captured, whether or not the visit is verified.	Describe how the solution has the ability to verify components within the program requirements when the caregiver initiates the visit verification, whether it is verified or not.	PE.PI1.25	W	

Bidder's Response:

When the caregiver arrives at the location where the participant is scheduled to receive services, the caregiver starts the visit. At the start of the visit, the date, time and location are electronically captured. After services are rendered the caregiver ends the visit, and the date, time and location are electronically captured. The participant, or their guardian, will then sign the screen on the mobile device capturing the visit information to confirm receipt of services.

Caregivers can also be provided the option to start unscheduled visits. Once a caregiver has been associated with a participant by an administrator, they can capture rendered service time and location even in the absence of a schedule.

When a visit is started, the status of the visit is displayed on both the mobile application and through the web browser as "in progress." At the end of the visit, additional data points are collected, and the visit status is changed to "completed". At that time, payer-defined business rules compare the scheduled visit details to rendered visit details and authorized visit details.

Business rules determine a visit's compliance with program requirements. The business rules are defined during the requirements gathering phase of the engagement. The Tellus eVV solution allows visits to be scheduled and completed even if a prior authorization is not in the system. The default settings err on the side of supporting quality care delivery. As a result, rather than preventing activity from occurring, rules are built to warn administrators and caregivers if they are violating a rule or program requirement based on the parameters for the payer. All visit activity is captured. Payer rules determine if a claim is eligible for submission based on data automatically captured at the time the services are performed or if additional explanations or documentation is required prior to the submission of the claim to the payer for adjudication.

Once all criteria is met, the claim is released and submitted to the payer in a standard EDI transmission.

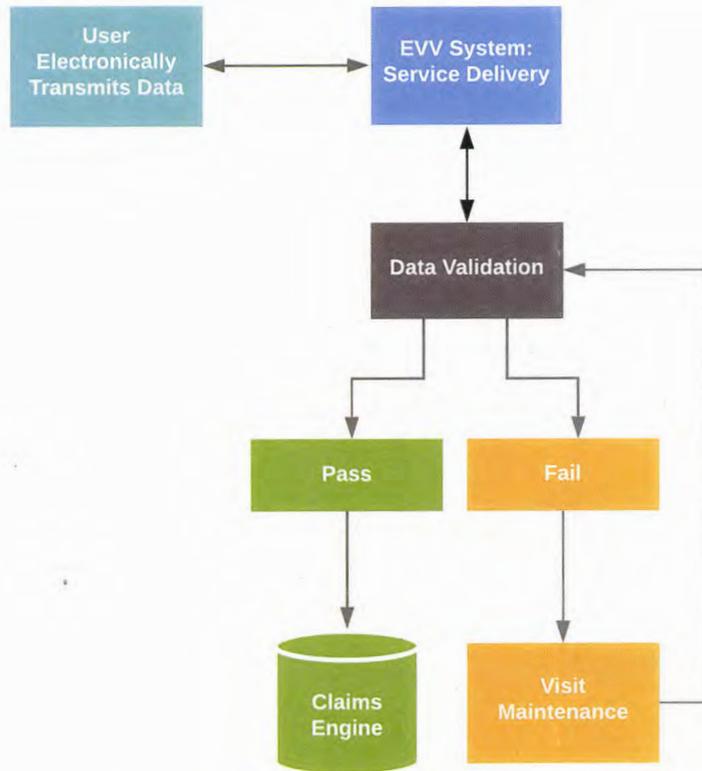
Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID		Gap Description and Recommendation for Closure
13	EVV.5	Solution must allow multiple caregivers and/or agencies to provide services to a client/participant on the same day, either at the same time or at different times of that day.	Describe how the solution will allow multiple caregivers and/or agencies to provide services to a client/participant on the same day, either at the same time or at different times of that day. Describe how any concurrent services will be evaluated for billing purposes.	N/A	S	

Bidder's Response:

Our EVV solution currently accommodates the ability for multiple caregivers and/or agencies to deliver services on the same day at the same, or at different times, to the same participant.

Matching rules determine which transactions are eligible to be submitted and which will be flagged for remediation. Matching rules automatically validate transactions where a participant is eligible, and the delivered services are the same as the scheduled services and within defined service authorization parameters. If a participant/program does not require scheduled services, matching rules automatically validate where a participant is eligible, and the delivered services are within defined service authorization parameters. For delivered service data to automatically validate when matched against a qualified service authorization, the following parameters must be consistent and valid: provider, service code, provider/service code combination, modifier. Matching rules can be defined at both the program and service code level.

The diagram that follows illustrates how service delivery is verified.



Unmatched transactions require remediation prior to processing. Users will be permitted to modify some fields but typically cannot change the actual service delivery date, actual service delivery clock-in time or actual service delivery clock-out time.

Concurrent services cannot be captured using Tellus eVV if the application is used as designed. However, if a caregiver is logged into more than one visit at the same time, that information is captured in an overlapping visit report and can be implemented as a business rule to be flagged as an unmatched visit.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
14	EVV.6	Solution must allow a caregiver and/or agency to record visits to multiple clients/participants on the same day.	Describe how the solution will allow a caregiver and/or agency to record visits to multiple clients/participants on the same day.	N/A	S	

Bidder's Response:

The Tellus eVV solution allows administrators to schedule, and caregivers to complete, visits for multiple participants on the same day. Schedules are typically set up through the browser by an agency administrator. The administrator selects the participant, the caregiver, the service that will be rendered, the location, time and duration of the visit. The schedule is immediately accessible to the caregiver via the mobile application. Each visit is started and ended by the caregiver.

Multiple participants can also be scheduled to receive services in the same visit. For example, if a married couple are both eligible to receive services, the administrator can schedule both participants and their services for the same visit. The caregiver will see both participants and the services to be delivered on their schedule on the mobile app. The caregiver will then simply start and end services as they are delivered for each participant on the mobile app.

Caregivers also have the ability to capture time and location for services that are rendered without being scheduled.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
15	EVV.7	Solution must allow for multiple service delivery locations to be included within a single visit.	Describe how the solution allows for multiple service delivery locations to be included within a single visit.	N/A	S	

Bidder's Response:

Multiple service delivery locations can be scheduled in a single visit with Tellus eVV. The participant address of record is captured in the system when transmitted by the payer in the participant feed. The provider agency can add addresses to the participant record in the Tellus eVV Administrator Console. Services can be scheduled at any address on the participant record including community-based settings and temporary addresses. If multiple locations are required for a single visit, the provider agency administrator will designate the service address for each part of the visit when creating the schedule. The caregiver will see the scheduled addresses on the mobile app. As long as the actual service delivery address matches the scheduled service delivery address and other required data points align with pre-adjudication rules, the visit will be a matched claim ready for submission.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
16	EVV.8	Solution must allow a caregiver and/or agency to provide services to a group of members in a single visit.	Describe how the solution will allow a caregiver and/or agency to provide services to a group of members in a single visit.	N/A	S	

Bidder's Response:

Our EVV solution supports caregivers and/or agencies providing services to a group of participants during a single visit, consistent with State guidelines. Tellus eVV captures the rendered service information. Like other types of visits, pre-adjudication rules run against that data based on information provided at the payer and program level to determine whether or not the collected data meets claims submission criteria. If it does, it will be a matched claim, and the provider agency can submit the visit for claims adjudication. If it does not, the provider must remediate the visit and provide, at minimum, a reason code for the manual modification before submitting the visit for claims adjudication. All changes to visit data and explanations are retained in an audit log and can be reviewed and reported.

One example of the way group services are currently managed is:



If a caregiver is required to render services to a group, all the participants will be scheduled on the same record with a group modifier associated with the service code. If the number of participants changes and all of the participants who were scheduled for the session are not present, the rendered service record will be changed by the administrator in the worklist to exclude the absent participant prior to submitting the claim.

This logic can be modified as required to fit the specific group service scenario for the DHHS' participants and caregivers and implemented at the program level as a business rule.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
17	EVV.9	Solution must allow a visit to span calendar days.	Describe how the solution will allow a visit to span calendar days.	N/A	S	

Bidder's Response:

Overnight visits are supported by Tellus eVV, and the caregiver is not required to clock-in or clock-out more than one time each. Tellus eVV captures the rendered service data. Like other types of visits, pre-adjudication rules run against the data based on information provided at the payer and program level to determine whether or not the collected data meets claims submission criteria. If it does, it will be a matched claim, and the provider agency can submit the visit for claims adjudication. If it does not, the provider must remediate the visit and provide, at minimum, a reason code for the manual modification before submitting the visit for claims adjudication. All changes to visit data and explanations are retained in an audit log and can be reviewed and reported.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
18	EVV.10	Solution must accommodate self-directed and non-self-directed options.	Describe how the solution will accommodate self-directed and non-self-directed options.	N/A	S	

Bidder's Response:

Our current solution accommodates both self-directed and non-self-directed options.

The traditional agency service model is the most prevalent way Tellus eVV is implemented in standard practice, which is the scenario the solution was originally designed to accommodate. However, as the self-directed market has been made aware of the EVV mandate, it has become a vocal opposition primarily due to privacy concerns.

We are working with multiple Fiscal Employer Agents to extend and enhance our EVV application to better support the specific needs of self-directed programs and their constituents. That means in addition to being able to capture visit details for participants relying on the self-directed service model, our EVV will support value-added features and functions such as:

- An employer portal
- Responsible party and delegated party support
- An employee/caregiver portal
- Relationship management between employer/employee
- Timesheet management workflow

- Employee/caregiver unscheduled visit support
- A fiscal employer agent portal

We recognize the needs of self-directed consumers are different than participants who receive care in traditional models and are dedicated to supporting an EVV model that supports those needs. We will work with you and your fiscal employer agents to define and build interfaces to share all required EVV data.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
19	EVV.11	Solution must assign a single, unique identifier to each EVV visit regardless of the number of activities/tasks associated with a visit.	Describe how the solution will assign a single, unique identifier to each EVV visit regardless of the number of activities/tasks associated with a visit.	N/A	S	

Bidder's Response:

Each visit is automatically assigned a single unique identifier in the EVV database regardless of the number of services, activities and tasks associated with the visit

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
20	EVV.12	Solution must allow participants or their personal representatives access to a web portal to verify visits. Solution must provide alternative options available for those who cannot access the web portal to verify visits.	Describe how the solution will allow participants or their personal representatives access to a web portal to verify visits. Describe alternative options available in solution for those who cannot access the web portal to verify visits.	N/A	S	

Bidder's Response:

The solution includes a participant portal allowing participants or their designated representative to enter and modify preferences. Visits can also be scheduled and verified through the web portal.

Participant Name: Jane Doe
Employee Name: Patti Smith
Authorized Representative: Joe Doe

Date	Service Code	Task Completed
04/24/2018	S9121	Bathing Meal Preparation Non Medical Transport
04/25/2018	S9122	Meal Preparation
04/27/2018	S9122	Bathing Meal Preparation Cleaning Non Medical Transport

Did the Participant have an overnight stay in a hospital, nursing home or mental health facility during this pay period?
 Yes No

I certify, that this is an accurate record of the services I have provided
 Authorized Representative: *[Signature]* Date: **04/30/2018**

I certify, that this is an accurate record of the services this employee has provided
 Employee Signature: *[Signature]* Date: **04/30/2018**

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Scheduling by authorized provider administrators or by participants and their authorized representatives, through our participant portal, can be accomplished through the Scheduling Module. Scheduling is flexible and operates much like commercially available web-based scheduling tools. Users can schedule one visit at a time or recurring visits such as every Monday, Wednesday, and Friday for the next two months. It is easy to modify and cancel scheduled visits.

Visits are confirmed with a functionality that renders timesheets for approval by the participant/personal representative and the caregiver prior to submission to the fiduciary associate for payment.

Alternatives can be provided for participants who are unable to access a web browser. Potential alternatives include mobile device, IVR and paper timesheets supported by SAD technology.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
21	EVV.13	Solution must provide for manual visit verification functionality in instances where the electronic verification is not made.	Describe how the solution provides for manual visit verification functionality in	N/A	S	

		Solution must be configurable to define and limit the circumstances when a manual verification can be made.	instances where the electronic verification is not made. Describe how the solution can be configurable to define and limit the circumstances when a manual verification can be made.			
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Bidder's Response:

Our solution allows manual visit verification and can distinguish if visits were validated electronically at the time of service delivery, or if they were validated manually. Permission-based roles determine which users can perform manual overrides. Only certain fields within the visit record are editable, and all modifications must include, at minimum, a reason for the manual entry. Our solution is configurable to define and limit the circumstances when a manual verification can be made. Configuration requirements for this will be gathered during the requirements gathering phase of the engagement.

All manual data entry and overrides of data captured on mobile devices are monitored using an automatically generated audit log that appends information to the original record including the user who made the change and the date and time the change was made. Additionally, role-based permissions can be defined and modified as required.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
22	EVV.14	Solution must require authorized users to enter a reason for each modification or manual entry of verification data.	Describe how the solution requires authorized users to enter a reason for each modification or manual entry of verification data.	N/A	S	

Bidder's Response:

Permission-based roles defined during the business requirements phase of the project will determine which users can perform manual entry or overrides. Administrators may be given permission to enter visit start and end times in the web portal on behalf of the caregivers. Manually entered data or overrides require, at minimum, a reason code to explain why data couldn't be captured electronically or why rendered service data may not agree with scheduled information. Documents can be uploaded to the EVV application and appended to the participant record, if necessary.

All noncompliant transactions, as defined by the business rules for the implementation, require a reason code or manual verification to be appended to the electronically captured information. Audit logs are automatically generated, appending information to the original record including the user who made the change and the date and time the change was made. Role-based permissions can be modified as required.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
23	EVV.15	Solution must allow authorized users the ability to modify verification data understanding that manual verification parameters may vary between programs and services.	Solution must allow authorized users the ability to modify verification data understanding that manual verification parameters may vary between programs and services.	N/A	S	

Bidder's Response:

Permission-based roles defined during the business requirements gathering phase of the engagement determine which users are permitted to perform manual overrides. Administrators may be given permission to enter visit start and end times, or edit other electronically captured data fields, in the web portal on behalf of the caregiver. Manual overrides require, at minimum, a reason code to explain why data couldn't be captured remotely or why rendered service data may not agree with scheduled information

Users do not have to memorize program and service rules. Program rules are enforced by including them in our business intelligence rules engine. Business rules automatically run against transaction data and flag noncompliant transactions as unmatched. Unmatched transactions provide an explanation of the reason for the unmatched status and must be remediate before they can be submitted as a claim. All manual overrides of data captured electronically are monitored using an audit log that records the user who made the change and the date and time the change was made.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
24	EVV.16	Solution must allow authorized users to enter approved service locations to be associated to each participant for verification purposes.	Describe how the solution allows authorized users to enter approved service locations to be associated to each participant for verification purposes.	N/A	S	

Bidder's Response:

The address of record is loaded from the source system or entered by the administrator and is always retained as the primary participant address. Authorized users can add additional addresses that can be scheduled, as required, in the Tellus eVV Administrator Console. If services are delivered at an address that is different than the scheduled address, the matching logic will flag the visit as unmatched, and the administrator must remediate the record and enter a reason code to explain the deviation.

The Tellus eVV solution supports variable locations including:

- Services in a location other than the participant's residence, whether it is a routine location or an occasional location:
 - These alternative addresses can be added to the participant record for administrator convenience to manage scheduling and location confirmation. The primary address captured on the participant record is the address transmitted by the payer. The provider cannot over-write that address but can add additional service addresses to the participant record.
 - If it is a unique address that will not be reused, EVV will capture the location at clock-in or clock-out. Since the address is non-compliant, the administrator will have to add a reason code and possibly edit or comment on the record prior to submitting the claim related to the service.
- The solution supports GPS location verification only at the beginning and ending of each visit. There is no ongoing monitoring of a participant's or caregiver's location throughout the visit.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
25	EVV.17	Solution must compare all EVV transactions requiring a service authorization against the corresponding service authorizations to ensure the EVV transaction complies with the constraints of the authorization.	Describe how the solution compares all EVV transactions requiring a service authorization against the corresponding service authorizations to ensure the EVV	N/A	S	



			transaction complies with the constraints of the authorization.			
<p>Bidder's Response:</p> <p>Matching rules automatically validate transactions where a participant is eligible, and the delivered services are the same as the scheduled services and within defined service authorization parameters. For delivered service data to automatically validate when matched against a qualified service authorization, the following parameters must be consistent and valid: service code, modifier (varies by payer, some do not send modifiers to EVV but allow providers to enter them as necessary), completed visit must be in the authorized date range, remaining units must be available.</p> <p>If there is a discrepancy between the delivered services and authorized services, the matching logic will flag the visit as unmatched, and the provider agency administrator will have to review, remediate and add a reason code for the manual edit. All edits are tracked and recorded in an audit log.</p>						

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
26	EVV.18	Solution must ensure that each approved service location includes, at a minimum, the street address, city, state, zip code, begin date, and end date.	Describe how the solution ensures that each approved service location includes, at a minimum, the street address, city, state, zip code, begin date, and end date.	N/A	S	
<p>Bidder's Response:</p> <p>Service location address fields are a configurable option. Data validation rules can be applied to require street address, city, state, zip code, begin date and end date for service delivery locations, and be set as mandatory fields for service delivery location addresses in the recipient record for the primary address loaded from the payer data feed as well as any secondary service addresses added by the provider.</p>						

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
27	EVV.19	Solution must verify location of services delivered. Solution must allow locations where there are multiple participants in the same geo-fence, such as apartment buildings, or identify the location of service in rural areas where the mailbox address (and GPS location) and the residence itself may be some distance apart.	Describe how solution verifies location, regardless of location type. If the solution utilizes GPS, describe how the solution includes the ability to determine caregiver is at the approved participant's location at the time the service is occurring. Describe the size of the 'geo-fence' and how the Solution deals with locations where there are multiple participants within the same geo-fence, such as apartment buildings, or identify the location of service in rural	N/A	S	

			areas where the mailbox address (and GPS location) and the residence itself may be some distance apart. If proposing a solution with GPS, describe how the solution addresses spoofing applications.			
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Bidder's Response:

The primary method of visit confirmation for Tellus is GPS. To support GPS confirmation, geofencing allows for establishing virtual perimeters or boundaries around a physical address. This is useful in enabling residences in rural areas or those known to have limited wireless network connectivity to submit EVV data at greater distances away from the scheduled location via integrated GPS-enabled technology. For example, for participants in County A, a geofence of 500 feet may be appropriate while in County B, a geofence of 1 mile makes more sense. Or, for those in apartment complexes or long-term care facilities, a geofence can be defined for as little distance away as a few feet. Geofence parameters are a configurable option. Requirements for the business rules associated with geofencing will be determined during the requirements gathering phase. Tellus does not limit the number of participants that can be associated with a physical address, the address of record is accepted from the system of record and can only be changed when the address is changed in the system of record and passed through the data feed. If it is important to identify participants at the same address reports can be run for review and audit purposes.

Visits can be scheduled at any address on the participant record including community-based settings and temporary addresses. Regardless of the address where the visit is scheduled, GPS coordinates are captured when the visit is started. Depending upon the business rules defined by the DHHS, one of three things can occur if the GPS coordinates captured are not within the established geofence of the scheduled visit:

1. The GPS location can be checked against all of the addresses on the recipient record to see if any of them are within the established geofence.
2. The visit can be prevented from starting.
3. The visit can be permitted to occur, and the GPS coordinates can be captured. A reason code must be added to the visit record before the claim can be processed.

Tellus eVV addresses spoofing applications in the following ways:

- If a device is jailbreak/rooted or mock location enabled (Android only), our app ignores the GPS location.
- If internet service is available, EVV doublechecks to ensure the app doesn't substitute a false GPS location through the following checks.
 - If the device is using Wi-Fi:
 - Tellus eVV gets GPS of Wi-Fi hotspot and compares it to the one reported by GPS on the device.
 - Discrepancies will be reported and result in an unmatched status for the visit.
 - If the device is using a cellular network:
 - Tellus eVV gets the IP address, then uses this IP address to get location.
 - The verification method will be IP address and result in an unmatched status for the visit.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
28	EVV.20	Solution must capture, track and verify data with respect to personal care services or home health services, including: 1. Type of service performed; 2. Individual receiving the service; 3. Date(s) of service;	Describe how solution will capture all the data elements necessary to verify a visit, including all elements listed.	PE.PI1.22	S	



		4. Location of service delivery; 5. Individual providing the service; and 6. Time the service begins and ends.			
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Bidder's Response:

Tellus is fully compliant with the 21st Century Cures Act mandate capturing the following data points for Medicaid personal and home health care services. Capturing this data helps improve transparency and deter fraud, waste and abuse:

1. Type of service performed,
2. Individual receiving the service,
3. Date(s) of service,
4. Location of service delivery,
5. Individual providing the service, and
6. Time the service begins and ends.

Once the caregiver is scheduled to provide services to a participant, the caregiver accesses their schedule on the mobile app using private login credentials and either a personal identification number or a biometric indicator (depending upon the hardware capability). The schedule is typically entered by an administrator at an agency and specifies the participant, date, start time, end time, location and services to be rendered, including tasks if specific tasks are assigned at the time the schedule is created.

When the caregiver arrives at the location where the participant is scheduled to receive services, the caregiver starts the visit. At the start of the visit, the date, time and location are electronically captured. After services are performed the caregiver ends the visit, and the date, time and location are electronically captured. The participant and caregiver will then sign the screen on the mobile device capturing the visit information to confirm receipt and delivery of services.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
29	EVV.21	Solution must allow for services to be provided in locations (e.g., place of employment, family member's home) other than the participant's primary residence, by program and service.	Describe how solution allows for services to be provided in locations (e.g., place of employment, family member's home) other than the participant's primary residence, by program and service.	N/A	S	

Bidder's Response:

The address of record is loaded from the source system or entered by the administrator and is always retained as the primary participant address. Additional addresses can be added and scheduled, as required, in the Tellus eVV Administrator Console. If services are delivered at an address that is different than the scheduled address, the matching logic will flag the visit as unmatched, and the administrator must remediate the record and enter a reason code to explain the deviation.

The Tellus eVV solution supports variable locations including:

- Services in a location other than the participant's residence, whether it is a routine location or an occasional location:
 - These alternative addresses can be added to the participant record for administrator convenience to manage scheduling and location confirmation. The primary address captured on the participant record is the address transmitted by the payer. The provider cannot over-write that address but can add additional service addresses to the participant record.
 - If it is a unique address that will not be reused, EVV will capture the location at clock-in or clock-out. Since the address is non-compliant, the administrator will have to add a reason code and possibly edit or comment on the record prior to submitting the claim related to the service.

- The solution supports GPS location verification only at the beginning and ending of each visit. There is no ongoing monitoring of a participant's or caregiver's location throughout the visit.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
30	EVV.22	Solution must allow for visits which begin and end at different locations.	Describe how solution shall allow for visits which begin and end at different locations.	N/A	S	

Bidder's Response:

The Tellus eVV solution allows for visits to begin and end at different locations. When the provider agency administrator schedules the visit, they will select the start and end location from the list of available addresses in the participant record. If an address does not already exist in the participant record, the administrator can add it. When the caregiver begins the visit, the actual start location GPS coordinates will be captured. When the caregiver ends the visit, the actual end location GPS coordinates will be captured. The actual start and end locations will be compared to the scheduled start and end locations using matching logic. If there is any discrepancy, the provider agency administrator must review, remediate and add a reason code for the discrepancy prior to releasing the claim for payment. All edits to electronically verified data are flagged, recorded and tracked in an audit log and available for reporting.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
31	EVV.23	Solution must have the ability to capture additional data elements as needed by DHHS to support ongoing program service changes.	Describe how solution has the ability to capture additional data elements as needed by DHHS to support ongoing program service changes.	N/A	S	

Bidder's Response:

Program rules, data elements, services, reimbursement rates, policies and procedures can be defined at the program/provider level. Required data elements and business rules will be reviewed with the DHHS during the business requirements phase of the engagement and will be written to enforce program rules. Due to quality of care considerations rules are often written to warn users of potentially non-compliant schedules or behaviors. Because our business rules engine is a module independent of the software code base, rules can be changed during the term of the contract without the use of development resources providing maximum flexibility.

Our Service-Oriented Architecture (SOA) includes a modular business intelligence rules engine that makes it easy to construct, modify and remove rules. Since business rules are not hard coded into the application, development resources are not required to change rules. We maintain an electronic Business Rules Catalog that can be accessed by the DHHS. Standard rule definitions and rules are available; however, rules can be configured at the Jurisdiction (State), Payer, Program, Provider and Participant levels as requested to ensure quality patient care and program integrity. As rules are changed, user and training documentation is updated. If substantial changes are made users will be notified by an outreach campaign.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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32	EVV.24	Solution must be able to flag a visit for review when any data elements recorded at the visit do not match the corresponding elements in the authorization.	Describe how solution flags a visit for review when any data elements recorded at the visit do not match the corresponding elements in the authorization.	N/A	S	
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Bidder's Response:

Business Rules formulated by program and payer administrators are run against transaction data to determine the validity of delivered services. For example, the service authorization is compared to the service delivered, as recorded at the point of care. Transactions in the form of visits, regardless of the original source, that violate the rules associated with a specific program or payer are flagged and can be remediated by the provider in the Claims Console, and the transactions will be reevaluated by the matching algorithms. Those visits with violations are flagged and show up in the exception reports and the Claims Console's dashboard.

With the Tellus eVV solution, data is imported from multiple systems and stored in a common database. Some of this information is foundational to set up the system; for example, the MMIS will send provider, participant and prior authorization data to import into the EVV database. MCOs will also send provider, recipient and prior authorization data to import into the EVV database. The data is normalized as part of the import process. Visit data collected from our solution as well as other EVV systems is imported into the data aggregation database and transmitted in real-time transactional or in batch mode.

When foundational information is loaded, provider agency administrators will have the information they need to schedule visits for recipients.

Approved transactions are promoted to the Claims Processing tool for pre-adjudication. Pre-adjudication applies a set of data scrubbing algorithms to properly format information based on claims adjudication standards provided by payers, improving the percentage of successfully processed paid claims. Any denied claims can be reviewed, adjusted and resubmitted or voided by providers.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
33	EVV.25	Solution must be able to flag a visit for review when any required verification elements are missing or if the recorded service location is not on a participant's list of approved locations.	Describe how the solution flags a visit for review when any required verification elements are missing or if the recorded service location is not on a participant's list of approved locations.	N/A	S	

Bidder's Response:

The DHHS will define business intelligence rules for the matching logic during the requirements gathering phase of the engagement. Business rules can be written at the payer, program, provider and recipient levels allowing maximum flexibility to ensure quality patient outcomes, operational efficiencies and reductions in fraud, waste and abuse.

Business rules are run against delivered visit data in real time as the EVV database is updated. If the delivered visit criteria match the scheduled visit criteria and the prior authorization criteria, the visit moves into a "Matched-On Hold" status for the biller to release for payment at their discretion. If there is any discrepancy between delivered visit criteria, scheduled visit criteria or prior authorization, such as missing elements or the recorded service location is not an approved location, the transaction will be flagged and will remain in an "Unmatched-On Hold" status for the provider administrator to remediate and provide a reason code. Scheduled and/or ad-hoc reports are available to review claims that are in an "Unmatched-On Hold" status by reason code. Examples of reason codes are:

- Late visit
- GPS mismatch
- No prior authorization
- Prior authorization mismatch

Unmatched-On Hold criteria, representing unbilled encounters, will be defined during the business requirements gathering phase of the engagement and can be customized by program as required by the DHHS.

Once a transaction is released by the administrator it will be submitted to the payer for adjudication of the claim. Typically, claim transactions are batched and transferred to payers in the form of standard 837 EDI files on a daily basis. Claims can be submitted on any schedule requested by the payer and can even be transmitted as they are released by the provider if desired. The 837 EDI file map will be customized to comply with the DHHS' claims processing requirements.

Because prior authorizations are populated in the form of a data feed transmitted by the payer, the ability to determine if authorized services are not being provided is available. Reports summarizing authorized and unscheduled services as well as authorized, scheduled and not rendered services are available on a scheduled and/or ad-hoc basis.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
34	EVV.26	Solution must include the ability to collect and store a list of approved service locations to be associated to each member for verification purposes. Solution must ensure previous approved locations are retained when updated locations are added.	Describe how solution includes the ability to collect and store a list of approved service locations to be associated to each member for verification purposes. Describe how previous approved locations are retained when updated locations are added.	N/A	S	

Bidder's Response:

The address of record is loaded from the source system or entered by the administrator and is always retained as the primary participant address. If the address of record is changed in the source system, the new address will overwrite the old address when the participant data feed is imported. Changes will be noted in the application audit log.

Additional addresses can be added and scheduled, as required, in the Tellus eVV Administrator Console. If services are delivered at an address that is different than the scheduled address, the matching logic will flag the visit as unmatched, and the administrator must remediate the record and enter a reason code to explain the deviation.

The Tellus eVV solution supports variable locations including:

- Services in a location other than the participant's residence, whether it is a routine location or an occasional location:
 - These alternative addresses can be added to the participant record for administrator convenience to manage scheduling and location confirmation. The primary address captured on the participant record is the address transmitted by the payer. The provider cannot over-write that address but can add additional service addresses to the participant record.
 - If it is a unique address that will not be reused, EVV will capture the location at clock-in or clock-out. Since the address is non-compliant, the administrator will have to add a reason code and possibly edit or comment on the record prior to submitting the claim related to the service.
- The solution supports GPS location verification only at the beginning and ending of each visit. There is no ongoing monitoring of a participant's or caregiver's location throughout the visit.

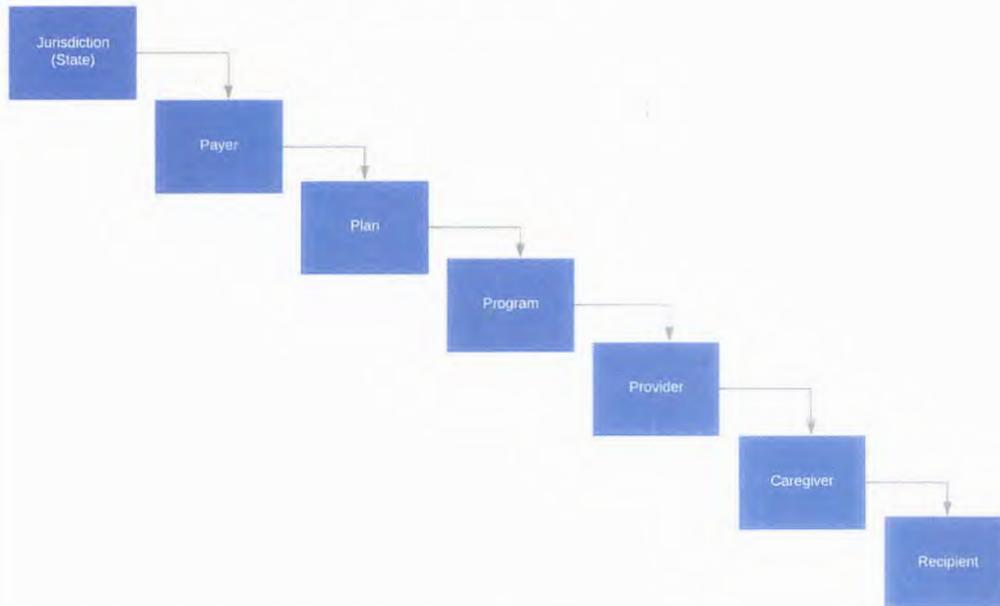
Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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35	EVV.27	Solution should identify participant services received for those enrolled in selected programs.	Describe how solution identifies participant services received for those enrolled in selected programs.	CM.PI1.1	S	
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Bidder's Response:

Data is categorized to associate participants with programs and associated service codes and business rules. This means a participant cannot be scheduled for a service that is not permitted under the program they are eligible to receive services under. In addition, even if the service code is valid for the program, if the participant has not been issued a service authorization to receive those services, the scheduling administrator will be warned they are scheduling a visit without a valid service authorization at the time the visit is being scheduled.

The following diagram depicts the way data is organized.



This means prior authorizations can be categorized by program, so if recipient Jane Doe receives personal care services under multiple programs – State Plan, EPD Waiver and IDD Waiver – the prior authorization for each program will be categorized by that program and only the Provider for that specific program will be aware of that prior authorization.

For example, if Jane Doe receives services under the State Plan by Caring Angels and services under the EPD Waiver by Helping Hands, the prior authorization issued by the State Plan will be available for Caring Angels to deliver services under the State Plan but Helping Hands will not know that this prior authorization was issued. Segregating data by program provides the ability to create user-based roles and permissions that protect private health information by allowing only users who need access to specific information view it. User-based roles and permissions are set for both viewing and modifying data.

Reports can be generated at any level with drill-down capability for more detail. A report can be generated that identifies participant services received for those enrolled in selected programs.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
36	EVV.28	Solution should provide authorized users the ability to bypass/override the location verification edit during verification review, and must have a way to log this activity in the system.	Describe how solution provides authorized users the ability to bypass/override the location verification edit during verification review, and how that is logged in the solution.	N/A	S	

Bidder's Response:

Access to components of the application and the ability to view and write to specific fields is controlled by secure, private login credentials as well as by role-based permissions. Permission-based roles are defined during the business requirements gathering phase of the engagement and determine which users have the ability to perform manual overrides. Administrators are authorized users who may be granted permission to enter visit start and end locations in the Administrator Console on behalf of the direct care provider. They also may be required to enter reason codes to explain why data cannot be captured remotely and/or why rendered service data may not agree with scheduled information.

All manual overrides of data that was electronically captured on mobile devices are monitored using an audit log that records the user who made the change and the date and time the change was made.

Visits can be started and/or ended in the Administrator Console by provider agency administrators, as required. If clock in/clock out data is entered by the Administrator in the Administrator Console instead of captured using our mobile app, business rules can flag the entry as a deviation from expected activity so the State of Nebraska can be made aware of deviations from expected behavior in the form of alerts or reports.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
37	EVV.29	Solution must provide the ability for unscheduled visits to be flagged for review/validation when appropriate.	Describe how solution provides unscheduled visits to be flagged for review/validation when appropriate.	N/A	S	

Bidder's Response:

Visit verification exception procedures are established using Tellus eVV's flexible business intelligence rules engine, and unscheduled visits are allowed and managed by creating an exception that is flagged for review according to the DHHS' policies.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
38	EVV.30	Solution must provide flexible and configurable HIPAA compliant alerts of pending, late, and missed visits by program and/or service where client/participant impact determines the alert levels and notifications.	Describe how solution provides flexible and configurable HIPAA compliant alerts of pending, late, and missed visits by program and/or service where client/participant impact	N/A	S	

			determines the alert levels and notifications.			
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Bidder's Response:

Using our modular business intelligence rules engine, rules triggering HIPAA-compliant alerts can be written to notify users when specific events occur such as pending, late and missed visits by program and/or service where client/participant impact determines the alert levels and notifications. In addition, rules can be related to specific fields so any data element captured can serve as a reference point for a rule.

For example, if the DHHS determines it is important to flag specific participants in any program as "High Risk," that field will be added to the participant record. The default entry will be set to blank, so if the provider agency does not check the "High Risk" box, the program participant is not considered "High Risk." The "High Risk" flag can also be hidden for State Plan participants if none of the participants in that program are "High Risk." Business rules can be written to trigger alerts at shorter intervals for participants considered "High Risk."

Business Rule Example for Alerts for a specific program:

CONDITION	PARTICIPANT IS NOT HIGH RISK	PARTICIPANT IS HIGH RISK
Visit is Scheduled for 12:00 PM		
At 12:01 PM Direct Caregiver did not check-in	No Activity	Provider Administrator is notified with a pop-up on the Administrator Console the Caregiver is late
At 12:15 PM	No Activity	Provider Administrator and Recipient Emergency Contact are notified via SMS text the Caregiver is Late
At 12:10 PM	Provider Administrator is notified with a pop-up on the Administrator Console the Caregiver is late	Provider Administrator is notified via automated call, Recipient Emergency Contact and Case Manager are notified via SMS Caregiver is late
At 12:45 PM	No Activity	Provider Administrator, Recipient Emergency Contact and Case Manager are notified via automated call the Caregiver is late
At 1:00 PM	Provider Administrator and Recipient Emergency Contact are notified via SMS text the Caregiver is late	Emergency Services are contacted

The example above assumes no action is taken at each alert level. If either of the following events occur, the escalation will be discontinued:

- Provider Agency Administrator modifies the scheduled visit on the web console; for example, a substitute Caregiver is dispatched. All changes are documented with an audit trail.
- Provider Agency Administrator starts the visit on the web console. All entries are documented with an audit trail.
- Caregiver starts the visit on the mobile device.

Visit status is available in the Administrator Console in real-time when the Tellus eVV Mobile App is part of the solution set. Visit status is available in the Administrator Console from third-party EVV vendors as soon as it is transmitted to Tellus.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
39	EVV.31	Solution must provide the ability for authorized users to configure tolerance levels (e.g., 10 minutes past the scheduled start time) that define when a visit is	Describe how solution provides the ability for authorized users to configure tolerance levels (e.g., 10 minutes past the scheduled start time) that define when a visit	N/A	S	

	recorded as 'missed' or 'late' depending on the program and/or service.	is recorded as 'missed' or 'late' depending on the program and/or service.			
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Bidder's Response:

Using our modular business intelligence rules engine, rules triggering HIPAA-compliant alerts can be written to notify users when specific events occur such as pending, late and missed visits by program and/or service where client/participant impact determines the alert levels and notifications. In addition, rules can be related to specific fields so any data element captured can serve as a reference point for a rule.

For example, if the DHHS determines it is important to flag specific participants in any program as "High Risk," that field will be added to the participant record. The default entry will be set to blank, so if the provider agency does not check the "High Risk" box, the program participant is not considered "High Risk." The "High Risk" flag can also be hidden for State Plan participants if none of the participants in that program are "High Risk." Business rules can be written to trigger alerts at shorter intervals for participants considered "High Risk."

Business Rule Example for Alerts for a specific program:

CONDITION	PARTICIPANT IS NOT HIGH RISK	PARTICIPANT IS HIGH RISK
Visit is Scheduled for 12:00 PM		
At 12:01 PM Direct Caregiver did not check-in	No Activity	Provider Administrator is notified with a pop-up on the Administrator Console the Caregiver is late
At 12:15 PM	No Activity	Provider Administrator and Recipient Emergency Contact are notified via SMS text the Caregiver is Late
At 12:30 PM	Provider Administrator is notified with a pop-up on the Administrator Console the Caregiver is late	Provider Administrator is notified via automated call, Recipient Emergency Contact and Case Manager are notified via SMS Caregiver is late
At 12:45 PM	No Activity	Provider Administrator, Recipient Emergency Contact and Case Manager are notified via automated call the Caregiver is late
At 1:00 PM	Provider Administrator and Recipient Emergency Contact are notified via SMS text the Caregiver is late	Emergency Services are contacted

The example above assumes no action is taken at each alert level. If either of the following events occur, the escalation will be discontinued:

- Provider Agency Administrator modifies the scheduled visit on the web console; for example, a substitute Caregiver is dispatched. All changes are documented with an audit trail.
- Provider Agency Administrator starts the visit on the web console. All entries are documented with an audit trail.
- Caregiver starts the visit on the mobile device.

Visit status is available in the Administrator Console in real-time when the Tellus eVV Mobile App is part of the solution set. Visit status is available in the Administrator Console from third-party EVV vendors as soon as it is transmitted to Tellus.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
40	EVV.32	If solution utilizes a mobile application, it should enable use of GPS-enabled mobile smartphones and tablets using the Android or Apple iOS mobile operating	Describe how solution enables use of GPS-enabled mobile smartphones and tablets using the Android or Apple iOS mobile	N/A	S	



	<p>systems, running versions that are compatible at a minimum with the current and two previous versions of the mobile operating system, with stable, real-time app-based access to the EVV system to properly verify and document visits and access other visit or scheduling related system features.</p> <p>a) Providers and individual caregivers must have the choice of using smartphones or tablets and either mobile operating system, with mobile app provided to providers at no charge.</p> <p>b) Cost of devices and cellular data service is the responsibility of the provider organization or individual provider.</p>	<p>operating systems, running versions that are compatible at a minimum with the current and two previous versions of the mobile operating system, with stable, real-time app-based access to the EVV system to properly verify and document visits and access other visit or scheduling related system features. Describe how providers and individual caregivers have the choice of using smartphones or tablets and either mobile operating system, with mobile app provided to providers at no charge.</p>			
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Bidder's Response:

Tellus recommends one of the two most economical methods of EVV deployment for the DHHS:

1. Caregiver-owned Mobile Smart Device, aka, Bring Your Own Device (BYOD), Mobile GPS-Enabled EVV Model, or
2. Company-Owned Device GPS-Enabled EVV Model

Our mobile software applications are written in native Android and iOS and capture GPS coordinates using satellite even if the mobile device is offline, meaning the caregiver is not connected to Wi-Fi or cellular service. Mobile apps for both Android and Apple platforms are easily accessible and downloadable from commercially available app stores at no charge to providers or other users.

Tellus certifies support for the EVV Console (browser-based), Claims Console (browser-based) and EVV Mobile App (mobile device app) on the following:

DESCRIPTION	CAPABILITY
Supported PC Operating Systems	<ul style="list-style-type: none"> • Windows OS (32 or 64 bit) Version 7 or higher • Mac OS Version X (10) or higher
Supported Mobile Operating Systems (visit verified through geolocation)	<ul style="list-style-type: none"> • iOS Version 8 or higher • Android Version Lollipop (5.0) or higher
Supported PC & Mac Browsers	<ul style="list-style-type: none"> • Microsoft Internet Explorer Version 11 or higher • Microsoft Edge Version 16 or higher • Google Chrome Version 4 or higher • Apple Safari Version 10 (Mac)/4 (Windows) or higher • Mozilla Firefox Version 57 or higher

- Supported Mobile Browsers:
- Google Chrome Version 4 or higher on Android
 - Apple Safari Version 4 or higher on iOS
- Mobile Device Requirements
- Operating System: Android or iOS (see above)
 - Bluetooth required: No
 - GPS required: Yes
 - Voice support required: No
 - Min memory of phone: 25 MB
 - Min storage of phone: 50 MB

Tellus has developed partnerships with two commercial, cellular network companies and can leverage those relationships to assist provider agencies with procuring cost-efficient devices and rate plans to enable a company-owned device solution for the caregiver workforce.

If the participant and their caregiver do not have access to a smart device, or if a participant and their caregiver live in rural areas and do not have access to reliable cellular, Wi-Fi or GPS services. The DHHS may consider issuing a Small Alternative or FOB device; however, these options are a more expensive alternative. This use case should be extremely rare. The hardware, distribution and maintenance costs associated with these alternatives can be quoted on request.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
41	EVV.33	Solution should support use of mobile, GPS-enabled, app-based technology for visit verification and documentation, and otherwise minimize the need for the use of landlines or separate, in-home devices for the EVV function except as necessary given remote and or unusual terrain.	Describe how solution supports use of mobile, GPS-enabled, app-based technology for visit verification and documentation, and otherwise minimizes the need for the use of landlines or separate, in-home devices for the EVV function except as necessary given remote and or unusual terrain.	N/A	S	

Bidder's Response:

Mobile GPS-enabled smart devices are the primary method for visit verification for Tellus eVV. Our solution can be accommodated using either personal, bring your own device (BYOD) or company-owned device models. Our mobile apps are written in native Android and iOS and can be downloaded from commercial app stores and used on any device compatible with the minimum requirements that represent the vast majority of smart devices currently in circulation.

Data usage for visit verification activities are minimal, roughly 300 kb per visit.

Tellus recommends an EVV solution approach that primarily uses mobile device technology coupled with GPS to verify the location of the caregiver at the point of clock-in and clock out. GPS technology is able to capture location coordinates even when the mobile device is in offline mode, meaning it is not connected to cellular or Wi-Fi service. For extremely rare cases of rural areas where connectivity really is limited or non-existent and location capture via GPS is unreliable, we recommend the use of IVR technology as a backup. In those even rarer cases where mobile and landline are not available, Tellus believes technology such as an FOB device (a device that provides a unique number generated for clock-in and clock out purposes) can provide EVV certification for the offline visits. The use of the FOB provides further redundancy since the device allows the provider to verify the location and the visit time for the services performed. This allows EVV certification for visits in extremely remote rural areas.



Benefits of this point-of-care approach include:

- It provides universal access for caregivers.
- Internet access is not required at the time of service.
- Offline access is supported by the mobile device solution.
- IVR or a FOB can accommodate EVV compliance when necessary.
- Expensive, redundant equipment is not required.

Mobile smart device technology coupled with the bring your own device (BYOD) data collection option is the most economical method to deploy EVV. Many participants, providers and caregivers prefer the bring your own device option because it does not require managing a “work” or “Medicaid” device in addition to a “personal” device.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
42	EVV.34	Solution should be minimally burdensome for providers to learn and use, while meeting state objectives for EVV use.	Describe how the solution is minimally burdensome for providers to learn and use, while meeting state objectives for EVV use.	CPM	S	

Bidder's Response:

Electronically verifying services rendered in real time is at the core of the Cures Act and a primary vehicle to ensure reduction of fraud, waste and abuse. Our mobile application is written in native Android and iOS and designed to provide a friendly, minimally burdensome experience for the caregiver and the participant. Steps to electronically verify visits can be accomplished in a matter of seconds. User friendly features include:

- Native app language for maximum usability and flexibility
- Commercially downloadable via common App stores familiar to virtually everyone
- Appealing user interface
 - Readable fonts
 - Consistent colors
 - Large buttons
 - Limited number of steps to accomplish the goal
- Offline functionality if no Wi-Fi/Cellular service is available, which automatically syncs when service is restored
- Schedules loaded and cached on device remotely when the app is opened
- Schedule changes pushed to caregivers in real time
- Scheduled address pushed to the device and can be any address attached to the recipient record
- GPS coordinates automatically captured at start and end of visit
- Date and time automatically captured at start and end of visit
- Services and tasks completed and checked off in real time
- Participant signature confirming rendered services were provided captured in real time
- Notes can be entered for real-time availability to authorized users

Our business rules are built with the default settings to err on the side of supporting quality care delivery. As a result, rather than preventing activity from occurring, rules are built to warn administrators and caregivers if they are violating a rule or program requirement based on the parameters for the payer. Care always comes first.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
43	EVV.35	Solution must provide for a consistent rules-based billing and scheduling software platform across all service providers. Only claims where the service has been verified and the services are within Medicaid limit rules must be sent to the Payer's payment system.	Describe how solution will provide for a consistent rules-based billing and scheduling software platform across all service providers. Only claims where the service has been verified and the services are within Medicaid limit rules are to be sent to the Payer.	N/A	S	

Bidder's Response:

Tellus eVV offers a consistent, rules-based billing and scheduling software platform across all service providers. Virtually all electronically captured data is synched to the EVV database in real time. The only exception is data captured when mobile devices are in offline mode. Data captured in offline mode is synched automatically when the caregiver is back in range of Wi-Fi or cellular services. All data resident on the device and in transit is encrypted.

Data is captured and stored in the database according to program requirements and business rules are run against the requirements. Examples include:

- Rounding delivery time (duration) in accordance with program requirements
- Geofencing distance boundaries
- Late visit definition
- Missed visit definition
- Services rendered by procedure code
- Services rendered, number allowed per visit
- Service code modifiers
- Tasks documentation requirements
- Recipient confirmation of services rendered requirements
- Notes requirements

A claim reflects a service delivered by a caregiver to a single participant with the following information defined:

- Individual receiving service
- Individual providing service
- Type of service rendered
- Date of service
- Start and End time of service
- Location of service

When delivered service data is written to the database, typically in real time, the following data points will be compared:

- Scheduled visit (date, time, participant, caregiver, services scheduled, location)
- Delivered visit (date, time, participant, caregiver, services provided, location, service units)
- Prior authorization (participant, caregiver, services approved, service units remaining)

The DHHS will define business intelligence rules for the matching logic during the requirements gathering phase of the engagement. Business rules can be written at the payer, program, provider and recipient levels allowing maximum flexibility to ensure quality patient outcomes, operational efficiencies and reductions in fraud, waste and abuse.

Business rules are run against delivered visit data in real time as the EVV database is updated. If the delivered visit criteria match the scheduled visit criteria and the prior authorization criteria, the visit moves into a “Matched-On Hold” status for the biller to release for payment at their discretion. If there is any discrepancy between delivered visit criteria, scheduled visit criteria or prior authorization, the transaction will be flagged and will remain in an “Unmatched-On Hold” status for the provider administrator to remediate and provide a reason code. Scheduled and/or ad-hoc reports are available to review claims that are in an “Unmatched-On Hold” status by reason code. Examples of reason codes are:

- Late visit
- GPS mismatch
- No prior authorization
- Prior authorization mismatch
- Unmatched-On Hold criteria, representing unbilled encounters, will be defined during the business requirements gathering phase of the engagement and can be customized by program as required by the DHHS.

If delivered visit, scheduled visit and prior authorization criteria are all in sync, the transaction will achieve the status of “Matched-On Hold.” Provider administrators can release matched claims at their discretion. Once a transaction is released by the administrator, it will be submitted to the payer for adjudication of the claim. Typically, claim transactions are batched and transferred to payers in the form of standard 837 EDI files on a daily basis. Claims can be submitted on any schedule requested by the payer and can even be transmitted as they are released by the provider if desired. The 837 EDI file map will be customized to comply with the DHHS’ claims processing requirements. This process ensures only claims where the service has been verified and the services are within Medicaid limit rules are sent to the Payer’s payment system.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
44	EVV.36	Solution should be capable of supporting the following business rules/procedures: a) Allow for only certain providers to enter service tasks based on program needs and rules. b) Certain programs may require service tasks to be entered in the EVV system for only certain provider types, whereas others may require providers to document service tasks through the current paper process or other alternative processes.	Describe how solution is capable of supporting the business rules / procedures noted, based on provider types, services and program needs and rules.	N/A	S	

Bidder’s Response:

Business rules are initially defined by the payer during the requirements gathering phase of the engagement and set up in the EVV rules engine module. Rules are separate from the code base making them configurable and changeable without development resources at the payer, program, provider and recipient level. Rules can be written around any field for a single or combination of user rules making our rules engine extremely robust and flexible. Permissions determine what users can and can’t do in the system. If the DHHS allows only certain providers to enter service tasks based on program needs and rules, the permissions will be established to accommodate that requirement.

We use a business intelligence rules engine to support data analysis and manipulation. Because all rules are defined and written outside of our code base, it is easy to add, remove, or modify the way data elements are managed. For example, during the implementation, Tellus will work with the DHHS and program subject matter experts to identify the rules and configurations appropriate for each program. The rules that must be defined at the program level will be reviewed with the program leads assigned to the EVV project as subject matter experts.

Program rules can be written to require electronic verification of service tasks for certain provider types and not for other combinations of service tasks and provider types.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
45	EVV.37	Solution must provide for unique user identifications for individuals who work for more than one entity. Contractor must have the ability to manage how those identifications are requested, assigned, and maintained.	Describe how solution provides for unique user identifications. Describe in detail how solution utilizes unique user identifications, and master user identifications if one individual is assigned multiple unique user identifications; and how those identifications are requested, assigned, and maintained.	N/A	S	

Bidder's Response:

Tellus understands caregivers may work with more than one agency and that agencies may employ administrators and claims analysts who support more than one location. Users are set up in the application using a unique username. In addition, each username must be associated with a unique mobile telephone number and/or email address. Each user must have a unique phone number or email address because login credentials are password protected, and passwords can be changed and communicated through SMS messaging or email communications. Unique contact information is required to protect PHI. PHI is accessed when a user has access to scheduled visit information that is associated with a specific username.

Once a user is set up in the application, they can be invited to be associated with more than one agency. If a user works for Agency A, either the user or the agency can set up their username and contact information. If the user also works with Agency B, they simply have to give Agency B their username, and Agency B can invite the user as a caregiver or administrator for their agency as well.

As a caregiver using a mobile device, the user will be able to see their scheduled visits for both Agency A and Agency B. However, Agency A and Agency B will not be able to see each other's data.

As an administrator accessing Tellus eVV through a web browser, the user will be able to transfer from Agency A to Agency B and vice versa by selecting from the "Provider" drop-down menu at the top of the screen without logging out of the application. The Provider the user is currently working in will be displayed at all times.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
46	EVV.38	Providers may have more than one user identifier, based on NPI, Medicaid ID, etc. Solution should manage each individual identifier and master provider ID within solution.	Describe how each individual provider identifier and master provider ID are assigned and managed within the solution.	N/A	S	

Bidder's Response:

Users are uniquely identified in Tellus eVV by username and a unique form of contact information either mobile phone or email address. Additional identifiers can be recorded and managed on the user record.

During the business requirements gathering phase of the engagement, Tellus will work with the State of Nebraska to define User Roles and Permissions. At a minimum, each Account Profile User will require one User Administrator (Admin). Onboarding will begin when the User Administrator Account Profile contact information is entered into the EVV System. Tellus will provide Login Credentials to the User Administrator. The User Administrator will be required to provide the following information to set up the User Account Profile:

- National Provider Identifier (NPI) or Atypical Provider Identifier (API)
- Taxpayer Identification Number (TIN)
- HHSC Fee-For-Service Contract Number (when applicable)
- Taxonomy
- Legal Name
- Doing Business As (DBA) Name
- Address (Street, City, State, Zip+4)
- Texas Provider Identifier (TPI) (when applicable)

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
47	EVV.39	Solution should utilize a flexible business rules engine to allow for customization and modification when program or service changes occur.	Describe how solution utilizes a flexible business rules engine to allow for customization and modification when program or service changes occur. Describe which modifications can be made by DHHS staff and which will be made by the Contractor.	N/A	S	

Bidder's Response:

The Tellus eVV Business Intelligence Rules Engine is a modular, highly configurable component of our EVV solution. Business rules are initially defined by the payer during the requirements gathering phase of the engagement and written in the EVV rules engine module at the payer/program/provider and even recipient levels. Rules are separate from the code base making them configurable and changeable without development resources. Rules can be written around any field for a single or combination of user rules making our rules engine extremely robust with the ability to support advanced data analytics and reporting.

The Business Rules Engine is a tool used by the Tellus team; however, configuration settings associated with rules can be changed by the payer or providers. For example, if the standard payer geofence is set at 1 mile but a provider wants to manage their staff to a more stringent criteria, they can change the parameter to ½ mile on their settings dashboard.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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48	EVV.40	Solution should have the capability for manual overrides to be entered by authorized system users.	Describe how solution has the capability for manual overrides to be entered by authorized system users.	N/A	S	
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Bidder's Response:

Permission-based roles defined during the business requirements gathering phase of the project will determine which users can perform manual overrides. Administrators may be given permission to enter visit start and end times in the web portal on behalf of the caregivers. They also may be required to enter reason codes to explain why data cannot be captured remotely or why rendered service data may not agree with scheduled information. Documents can be uploaded to the EVV application and appended to the participant record.

All manual data entry and overrides of data that was captured on mobile devices are monitored using an automatically generated audit log that appends information to the original record including the user who made the change and the date and time the change was made. Role-based permissions can be modified as required.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
49	EVV.41	Solution should provide real time jurisdictional views for DHHS and other state agencies: ie., allow viewing, dashboards and reporting for specific programs, agencies, geographical locations, etc.	Describe how solution will provide real time jurisdictional views for DHHS and other state agencies.	N/A	S	

Bidder's Response:

The Tellus eVV solution includes ad-hoc reporting, standard off-the-shelf reports, and a configurable visual dashboard to view information related to specific programs, agencies, geographical locations, etc. Reports are accessible through the Payer Console and adhere to role-based permissions. DHHS administrators can have the full jurisdictional view, allowing them to review all providers in their system and the entire claims process from inception to payment.

Within the Tellus end-to-end solution, data for reporting is available in real-time. Data collected via the aggregation engine is available when it is received by the Tellus Aggregation Engine. Ad-hoc reports allow the State to query based on the name of the Health Care Provider, date of service, name of participant, dates of service with schedule or other modifications/overrides, unbilled encounters, and claims overlap. MCO administrators can view this same information for the providers in their network.

An example of a Payer Console follows:



Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
50	EVV.42	Solution should notify a provider if required EVV data is incomplete or invalid. Solution must have consistent methods for handling incomplete or invalid data.	Describe how solution notifies a provider if required EVV data is incomplete or invalid and describe how the solution handles that data.	N/A	S	

Bidder's Response:

At the heart of the Tellus eVV solution is a powerful business rules engine that offers great flexibility and ease of use in defining internal parameters for flags or alerts, along with timing of notifications, related to, for example, incomplete or invalid data, location discrepancies, etc. Alerts can be tailored to the specific needs of the DHHS to send notifications and escalations to select users when specific contingencies occur (e.g. a discrepancy in the start of the visit from the scheduled time, geographic anomalies in the visit beginning or end location, excessive duration of a visit, incomplete or invalid data, etc.) in real time.

The alerts are displayed on the dashboard or mobile app but can also be sent via email or SMS text.

Incomplete or invalid data will result in the claim being put in an "Unmatched On-Hold" status when the matching logic runs. This will require the Administrator to review and remediate the claim and add a reason code before releasing the claim to the payer for payment. All manual edits and overrides are automatically recorded in an audit log.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
51	EVV.43	Solution should have the capability to turn the scheduling functionality on or off at DHHS option without impacting other EVV system functionality. Ability to turn scheduling on or off must be at agreed level of granularity, i.e., program, service, recipient, provider, etc., for which the scheduling applies.	Describe how, at DHHS option, solution's scheduling functionality can be turned on or turned off without negatively impacting other EVV system functionality, and at what level of granularity (program, service, recipient, provider, etc.) the scheduling option applies.	N/A	S	

Bidder's Response:

Tellus eVV is highly configurable and parameterized. Many of the features and functionality of the system can be turned on and off based on the DHHS' needs including scheduling. These configurations are possible at any level of granularity, including payer, plan, program provider, caregiver, participant and other field levels. Configurations like these do not negatively impact EVV system functionality. For example, if the DHHS wants to turn scheduling off for a particular service, they can do so without affecting scheduling for all other services.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
52	EVV.44	Solution should have the ability to prevent any individual from electronic sign-in for work shift, or otherwise attempting to electronically verify and document a service, under the following conditions: a) The individual does not have a current, in-force employment relationship, or an executed, up-to-date contract, with the properly licensed and certified Medicaid provider organization providing and billing for the service; b) The individual is not authorized by the Medicaid certified and billing provider to enter information in the EVV system on behalf of that provider; c) DHHS has excluded the individual from using the EVV system due to non-compliance with EVV-related requirements, misuse or abuse of the EVV system, or a pattern of incomplete or inaccurate attempts to verify or document a service; d) The individual provider, the billing provider business organization, or the type of service is not approved for that	Describe how solution prevents any individual from electronic sign-in for work shift, or otherwise attempting to electronically verify and document a service, under the following conditions: a) The individual does not have a current, in-force employment relationship, or an executed, up-to-date contract, with the properly licensed and certified Medicaid provider organization providing and billing for the service; b) The individual is not authorized by the Medicaid certified and billing provider to enter information in the EVV system on behalf of that provider; c) DHHS has excluded the individual from using the EVV system due to non-compliance with EVV-related requirements, misuse or abuse of the EVV system, or a pattern of incomplete	N/A	S	

	beneficiary, based on prevailing prior authorizations and service plans approved for the beneficiary; or e) The individual provider is not physically present at the beneficiary's location.	or inaccurate attempts to verify or document a service; d) The individual provider, the billing provider business organization, or the type of service is not approved for that beneficiary, based on prevailing prior authorizations and service plans approved for the beneficiary; or e) The individual provider is not physically present at the beneficiary's location.			
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Bidder's Response:

We authenticate and authorize users of the EVV solution based on the principle of least privilege, which we enforce through role-based permissions and secure, private login credentials. System security assigns unique roles to specific users, limiting access to applications and data. Role-based permissions can be modified or revoked at any time. The ability to designate role-based access controls to restrict and/or grant user access to certain functions and/or information is a valuable configuration feature for data security and integrity. The administrator and payer Consoles provide all the functions that an administrator, payer, consumer-directed participant, or provider needs to establish roles and set or revoke permissions.

Our powerful business intelligence rules engine controls what is and is not allowed according to the requirements defined by the DHHS. If the DHHS wants to prevent the scenarios indicated above as a requirement, business rules will be set up accordingly. For example, if the DHHS wants to prevent an individual provider from clocking in if they are not physically present at the beneficiary's location, a business rule can be set up to prevent clock in outside the geofence parameters. Geofence parameters can be set to any distance the DHHS determines is reasonable.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
53	EVV.45	Solution should support fraud and abuse investigations.	Describe how the solution supports fraud and abuse investigations.	PE.PI2.13	S	

Bidder's Response:

EVV supports fraud and abuse investigations by collecting, reporting and storing information near real time at the location visits are started, rendered and completed. Deviations from expectations can be identified when a visit is in progress and using reporting tools that support data mining to identify aberrant behavior.

All system activity is tracked and recorded in an audit log with reporting capabilities (e.g. security, level, locale, IP address, user ID, before and after changes). The Tellus solution employs an audit process that logs and stores all data entries, modifications, deletions and any other action performed. All application API calls are logged and searchable. Tellus stores record creation, modification date, User Id who created or modified the record and the application that was used to modify it (Console, Mobile, etc.). This can be tracked in the audit log database, but it can also be configured to send required notifications via email or SMS. The Tellus solution includes parameters for data storage and retention that can be customized per client preference.

To support fraud and abuse investigations Tellus, the payer or the provider can run reports looking for instances of aberrant behavior. For example, a provider may run a missed visits by caregiver report and sort it based on percent of missed visits high to low. The caregivers at the top of the list can be investigated to determine if the participants they care for are receiving the proper level of care.

A payer may run a report by provider for reason code "visit started outside of geofence" and sort high to low based on percent of total visits with that reason code. If Agency A uses that reason code for five percent of their visits and that is deemed high, the payer can drill into the details to see which visits were assigned that reason code. The payer will be able to see the caregiver, participant, location, etc., for those visits and can then decide how to continue investigating why that provider uses that reason code so often. It could be a specific caregiver routinely starts their visits prior to arriving at the visit location. It could be the address for a particular participant does not resolve correctly with GPS.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
54	EVV.46	Solution should support retrieval and presentation of data associated with geographic indicators such as by state, by county, by zip code, by peer group, or other geographical indicators specified by DHHS.	Describe how solution supports retrieval and presentation of data associated with geographic indicators such as by state, by county, by zip code, by peer group, or other geographical indicators specified by DHHS.	N/A	S	

Bidder's Response:

Tellus eVV includes sophisticated reporting capabilities with the ability to filter, drill down and visualize based on any criteria, including by state, county, zip code, peer group or other geographical indicators specified by the DHHS. Each report can make use of canned data selection criteria, or the report can be driven by a set of customized filters that allow for dynamic report generation by the user. Reports can be run on a user-defined schedule, driven by events or executed on-demand as needed. They can also be rendered in a number of formats including on-screen visual layouts, Excel, csv, and PDF, among others. These reports and dashboards can be displayed visually in graphs, diagrams, charts, and standard layouts. Users can print or export these reports, along with their query results.

Numerous standard reports are available in addition to a robust data warehouse. Our standard set of reports is built in Jaspersoft, a modern, modular, open source reporting tool. Reports are highlighted in customizable web dashboards and displayed in "cards" that are visually appealing and easy to interpret at-a-glance.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
55	EVV.47	Solution should accommodate service authorizations across multiple programs, service types, and funding sources.	Describe how solution accommodates service authorizations across multiple programs, service types, and funding sources.	N/A	S	

Bidder's Response:

Service authorizations can be categorized by program, service type and funding sources, so if participant Jane Doe receives personal care services under multiple programs – State Plan, EPD Waiver and IDD Waiver – the prior authorization for each program will be categorized by that program and only the Provider for that specific program will be aware of that service authorization.

For example, if participant Jane Doe receives services under the State Plan by Caring Angels and services under the EPD Waiver by Helping Hands, the prior authorization issued by the State Plan will be available for Caring Angels to deliver services under the State Plan but Helping Hands will not know that this prior authorization was issued. Segregating data by program provides the ability to create user-based roles and permissions that protect private health information by allowing only users who need access to specific information to view it. User-based roles and permissions are set for both viewing and modifying data.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
56	EVV.48	Solution should provide systems-based edits and audits to ensure correct and complete formatting of data submitted to solution by provider organizations, individual providers, approved alternative EVV systems, or other DHHS-approved parties; and complete verification and documentation of each visit.	Describe how solution provides systems-based edits and audits to ensure correct and complete formatting of data submitted to the solution by provider organizations, individual providers, approved alternative EVV systems, or other DHHS-approved parties; and complete verification and documentation of each visit.	N/A	S	

Bidder's Response:

All Tellus eVV data entries are monitored and appended with an audit trail. This includes both data that is entered and data that is edited. All original and edited entries are retained in the database. The audit trail always includes the following data elements:

- EVV visit transaction data elements
- User profile
- User credentials

The following data elements are retained in the audit trail, if applicable:

- Caregiver profile
- Individual/participant profile
- Prior Authorization/Service Authorization data
- Service schedule

Our matching logic immediately flags visits that have discrepancies in scheduled versus actual visit data. At minimum, these visits require entry of a reason code explaining the discrepancy. The provider agency can't release the claim until it is remediated. Should there ever be a question of why a specific visit was paid, the complete audit history can be reviewed by the State, MCO or Provider. This prevents fraud and allows for better operational control/oversight.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
57	EVV.49	Solution should improve oversight of provider performance, beneficiary access, care coordination and transitions, and program expenditures and utilization.	Describe how the solution will improve oversight of provider performance, beneficiary access, care coordination and transitions, and program expenditures and utilization.	N/A	S	

Bidder's Response:

The Tellus eVV Payer and Provider Administrator Consoles allow near real-time visibility and transparency into provider performance, participant access, care coordination and transitions, and program expenditures and utilization. Dashboards within the Consoles give at-a-glance views into key performance indicators and reporting features enable querying and filtering based on any criteria to allow greater control and oversight on performance measures important to each functional area.

When we design the system for the providers, our focus is on how we can make their business operations better and more efficient. This is done through allowing them oversight of their caregivers and providing the administrative tools to assist them with payments. Managing the caregivers will allow assurance that they are adhering to the schedule, delivering the care authorized and providing EVV-compliant documentation, reducing delays and rework.

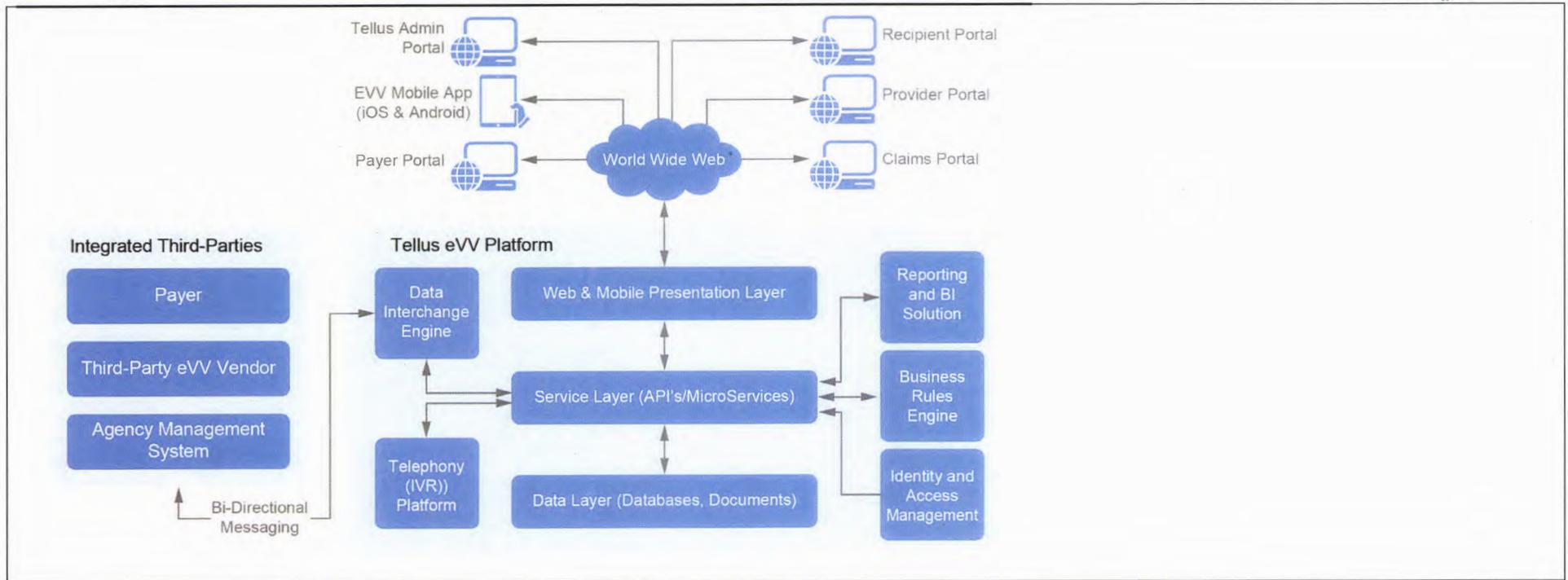
Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
58	EVV.50	Solution should ensure compliance with approved service plans and prior authorizations and monitor the receipt, timeliness and completeness of authorized Medicaid home-based services.	Describe how solution ensures compliance with approved service plans and prior authorizations and monitors the receipt, timeliness and completeness of authorized Medicaid home-based services.	N/A	S	

Bidder's Response:

The Tellus eVV solution can be used to ensure compliance with approved service plans and prior authorizations and monitor the receipt, timeliness and completeness of authorized Medicaid home-based services. Daily high-level workflow of the solution is:

1. Payer (State, Managed Care Organization) makes Provider, Recipient, Caregiver (optional) and PA information available to the Tellus Aggregation Engine. The Aggregation Engine makes applicable information available to the EVV system and Claims solutions. Data is imported as frequently as the payer makes it available up to real time; most payers prefer to make daily upload files available via SFTP.
2. Agency Management System may optionally transmit visit scheduling and/or user (caregiver) information to the Tellus Aggregation Engine. Agency also has the option to enter this information via the Tellus eVV Administrator Console.
3. Third-Party EVV vendors may transmit completed visit information to the Tellus Aggregation Engine. Providers can use the Tellus eVV Mobile App or any other EVV vendor to electronically confirm visits rendered at the point of service.
4. Provider (Home Care Agency) uses the Tellus eVV Administrator Console for administration and to schedule, manage and monitor caregiver visits.
5. Caregivers use the Tellus eVV Mobile App in the field. The Tellus eVV Mobile App provides caregivers with all necessary information to locate and complete care, and geo- and time-tracks each visit.
6. As visits are completed, the visit details are automatically made available to the Claims Console for verification and matching to scheduled visits and PAs.
7. Matching algorithms run in the background every ten minutes comparing: scheduled services, rendered services, prior authorizations.
8. Provider Administrators review claims and take action. Claims statuses and related actions are:
 - a. "Matched-On Hold" – Review and "Submit"
 - b. "Unmatched-On Hold" – Review, Remediate, Matching Algorithm Runs again and either promotes to "Matched-On Hold" or retains "Unmatched-On Hold" status.
9. "Submitted" claims are transmitted to MMIS or MCO daily for adjudication.
10. Claim Resolution file is transmitted to Tellus weekly, Tellus stamps "Submitted" claims as "Paid" or "Denied."
11. Provider and Payer reports available on the EVV Console.

Our high-level system architecture is depicted as follows:



Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
59	EVV.51	Solution should enable each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support all types of provider organizations, individual caregivers, and employment with individual caregivers.	Describe in detail how solution enables each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit.	N/A	S	

Bidder's Response:

Data entered online using the web-based Administrator Console and captured on mobile devices is visible real time to all users who have permission to access the information. Access is multi-tiered, so a Case Manager will be able to see all of the data related to all of their participants across the provider network by accessing the web-based console. The home page provides real-time data related to scheduled visits, completed visits, late visits, etc. The data can be drilled into for more specific details. Role-based permissions will be defined during the business requirements gathering phase of the engagement.

Remote data syncs with our AWS cloud-hosted database in real time. When a visit is started, the start location and time are viewable in real time on the Tellus eVV Administrator Console. When the visit is completed, the end location, time, services, care tasks delivered as well as participant and caregiver signature are viewable in real-time on the Tellus eVV Administrator Console. Updates or modifications to schedules or other data impacting caregivers is available real-time on the mobile app as long as they are connected to



Wi-Fi or cellular service. If they are in offline mode, they can continue to complete visits, and the data will sync bi-directionally as soon as they are back in range of Wi-Fi or cellular service.

Integration and Data Aggregation is a core competency of Tellus. Our solution is capable of integrating with third-party software systems, consuming data in a variety of formats from multiple different sources. Tellus takes data integrity very seriously to ensure compliance with the 21st Century Cures Act as well as payer and provider-specific policies and procedures. As such, Tellus requires third-party vendors to adhere to a minimum set of standards that represent best practices. Data from third-party software vendors is normalized as part of the import process. Regardless of the origination, the data is put into a common format and record layout so it is consistent with the database layout and, ultimately, exposed to business rules as well as the Consoles or other application for visibility into care delivery. Data from third-party software systems is visible in the Administrator Console as soon as it is received from the third-party.

The Tellus eVV solution is designed to support all types of provider organizations, individual caregivers and employment with individual caregivers. Daily high-level workflow of the solution is:

1. Payer (State, Managed Care Organization) makes Provider, Recipient, Caregiver (optional) and PA information available to the Tellus Aggregation Engine. The Aggregation Engine makes applicable information available to the EVV system and Claims solutions. Data is imported as frequently as the payer makes it available up to real time; most payers prefer to make daily upload files available via SFTP.
2. Agency Management System may optionally transmit visit scheduling and/or user (caregiver) information to the Tellus Aggregation Engine. Agency also has the option to enter this information via the Tellus eVV Administrator Console.
3. Third-Party EVV vendors may transmit completed visit information to the Tellus Aggregation Engine. Providers can use the Tellus eVV Mobile App or any other EVV vendor to electronically confirm visits rendered at the point of service.
4. Provider (Home Care Agency) uses the Tellus eVV Administrator Console for administration and to schedule, manage and monitor caregiver visits.
5. Caregivers use the Tellus eVV Mobile App in the field. The Tellus eVV Mobile App provides caregivers with all necessary information to locate and complete care, and geo- and time-tracks each visit.
6. As visits are completed, the visit details are automatically made available to the Claims Console for verification and matching to scheduled visits and PAs.
7. Matching algorithms run in the background every ten minutes comparing: scheduled services, rendered services, prior authorizations.
8. Provider Administrators review claims and take action. Claims statuses and related actions are:
 - a. "Matched-On Hold" – Review and "Submit"
 - b. "Unmatched-On Hold" – Review, Remediate, Matching Algorithm Runs again and either promotes to "Matched-On Hold" or retains "Unmatched-On Hold" status.
9. "Submitted" claims are transmitted to MMIS or MCO daily for adjudication.
10. Claim Resolution file is transmitted to Tellus weekly, Tellus stamps "Submitted" claims as "Paid" or "Denied."
11. Provider and Payer reports available on the EVV Console.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
60	EVV.52	Solution should enable each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support add or delete user access for individual (employed) caregivers, add or update information on users (such as individual identification numbers, photos, name changes,	Describe in detail how solution enables each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) use with the capabilities for add or delete user access for individual (employed) caregivers, add or update information on users (such as individual identification	N/A	S	

	professional credentials), and restrict or suspend user access.	numbers, photos, name changes, professional credentials), and restrict or suspend user access.			
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Bidder's Response:

Tellus eVV provides real-time access to and use of the solution and EVV data that is entered or captured within the system and is also fully capable of data integration and aggregation with third-party systems.

Access to components of the application and the ability to view and write to specific fields, including adding, deleting or modifying user information, is controlled by secure, private login credentials as well as by role-based permissions. User roles and permissions are defined during the business requirements gathering phase of the project.

Generally, Administrators have the ability to add, delete and update user access and profile data for employees of their agency within the Users section of the Administrator Console. The Administrator has the ability to set up and disable users near real time using functionality. Individual caregivers also have the ability to manage and update their own user profile within the Profile section of the mobile app.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
61	EVV.53	Solution should enable each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support: scheduling of individual service providers, timesheet creation, and real-time availability of individual caregiver schedules with notification of changes.	Describe in detail how solution enables each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support scheduling of individual service providers, timesheet creation, and real-time availability of individual caregiver schedules with notification of changes.	N/A	S	

Bidder's Response:

Tellus is fully compliant with the Cures Act mandate capturing the following data points for Medicaid personal and home health care services requiring an in-home visit by a caregiver. Capturing this data helps improve transparency and deter fraud, waste and abuse:

- Individual receiving service
- Individual providing service
- Type of service rendered
- Date of service
- Start and End time of service
- Location of service

Tellus eVV captures each of these data points electronically. Participant, provider and prior authorization data is electronically transferred from the payer to Tellus. The prior authorization links the participant to the agency authorized to render services. The participant address of record is captured if transmitted by the payer in the participant feed. If



the DHHS chooses to allow provider agencies to schedule visits at locations other than the address of record, the provider administrator will be able to add additional addresses to the participant record in Tellus eVV. The provider administrator may schedule services at any of the addresses on the participant record including community-based settings and temporary addresses.

The provider agency assigns a caregiver to render services to their participant by accessing a secure web portal using private credentials. Tasks can be associated with services and assigned at the time of scheduling.

Schedules are loaded and cached on devices remotely when the app is opened. Schedule changes are pushed to caregivers in real time. Scheduled addresses are pushed to the device and can be any address attached to the participant record.

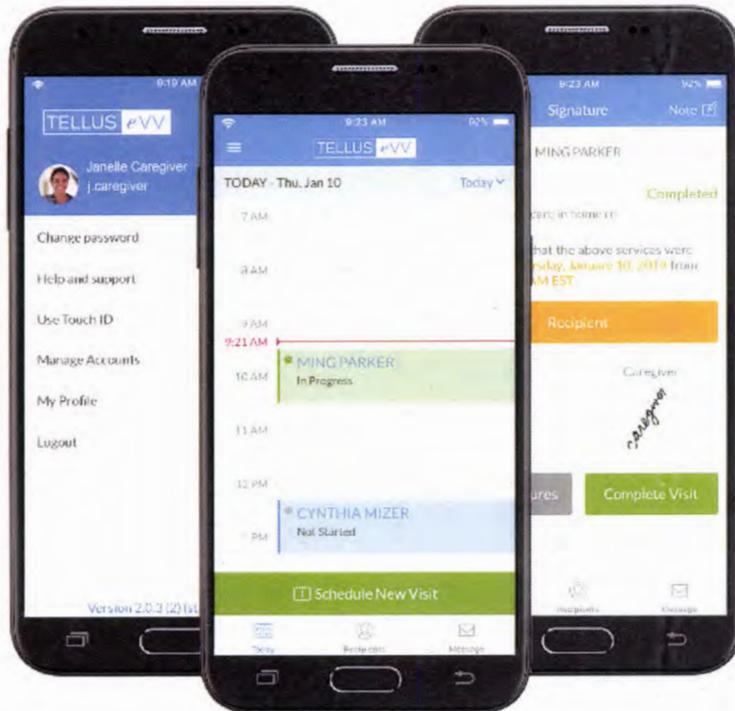
Once the caregiver is scheduled to provide services to a participant the caregiver accesses their schedule on a mobile device using private login credentials to access the mobile app and either a personal identification number or a biometric indicator to access the device (depending on the hardware capability). The schedule specifies the participant, date, start time, end time, location and services to be rendered, including tasks if specific tasks are assigned at the time the schedule is created.

When the caregiver arrives at the location where the participant is scheduled to receive services, the caregiver starts the visit. At the start of the visit, the date, time and location are electronically captured.

After services are rendered the caregiver ends the visit. At the end of the visit, the date, time and location are electronically captured.

The participant will sign the screen on the mobile device capturing the visit information to confirm receipt of services.

The following shows some of the features of the mobile app:



There is not a limit on the number of visits a participant can receive on a given day. The validity of services rendered is determined by comparing the schedule, electronic data captured when services are rendered, and the prior authorization issued by the payer.

All data entered into or modified after entry is subject to an audit log that continually runs in the background of both the web portal and mobile apps. The audit log captures:

- Effective date
- End date
- Date when last changed
- Who made last change
- Short description
- Long description

Tellus is committed to ensuring our SaaS-based EVV technology remains compliant with all current and future Federal guidelines. Updated releases will be made available to the DHHS at no additional charge

One of the many benefits of EVV is caregiver clock-in and clock-out activity is automatically and electronically captured as part of the process. Clock-in and clock out data is valuable for payroll processing. We developed reporting capabilities to share that data in the form of timesheets that can be printed and exported. Export data formats include PDF and Excel. Excel files can be manipulated and transformed to CSV files that can be uploaded into many payroll systems. In addition, we can create a payroll data export based on specifications for payroll systems such as ADP and Sage among others. Payroll data can be shared in a variety of protocols and standards.

Tellus eVV provides real-time access to and use of the solution and EVV data that is entered or captured within the system and is also fully capable of data integration and aggregation with third-party systems.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
62	EVV.54	Solution should enable each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support different types of visits and workflows, including unscheduled visits.	Describe in detail how solution enables each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support different types of visits and workflows, including unscheduled visits.	N/A	S	

Bidder's Response:

The Tellus eVV solution supports different types of visits and workflows including unscheduled visits. The solution provides the ability for participants who have selected to self-direct their services to manage their own care. The participant will be able to login to the Tellus eVV Console to view the number of authorized units used and the number of authorized units remaining. If there are no authorized units remaining to apply to the visit, the participant will be alerted that they are scheduling a visit without an authorization. Current functionality allows the participant to schedule an unauthorized visit, but this is a configurable rule that can be changed.

Tellus is a SaaS-based solution available 24 x 7 using standard mobile devices and web-based browsers. Both the mobile app and web tool can be accessed anytime with a valid username and password.



Logging into the mobile application, a caregiver can see all of their upcoming scheduled visits and can review previously completed visits. Caregivers can only view information related to their scheduled and completed visits.

Administrators at provider agencies can view all of the activity they are authorized to access based on the permissions associated with their user role. This includes scheduled visits, visits in progress, completed visits, work lists, submitted claims and the adjudication of claims. When a completed visit meets the requirements of the payer and is eligible to be submitted, the Administrator can release the claim. Once released, the claim is transmitted to the payer. Once the claim is adjudicated the results are imported into EVV. All data transmissions between Tellus and the payer are EDI compliant.

Tellus eVV provides real-time access to and use of the solution and EVV data that is entered or captured within the system and is also fully capable of data integration and aggregation with third-party systems. The Tellus eVV solution supports different types of visits and workflows including unscheduled visits. The solution provides the ability for participants who have selected to self-direct their services to manage their own care. The participant will be able to login to the Tellus eVV Console to view the number of authorized units used and the number of authorized units remaining. If there are no authorized units remaining to apply to the visit, the participant will be alerted that they are scheduling a visit without an authorization. Current functionality allows the participant to schedule an unauthorized visit, but this is a configurable rule that can be changed.

Alternatively, the caregiver can schedule and start a visit on the fly directly from the Tellus eVV mobile application on their mobile device. If this occurs, the claim will reflect a delivered visit. The participant will approve the claim, and if there is a prior authorization available, the claim will be submitted for adjudication to the System of Record. The ability to schedule visits on the fly on the mobile app is a configurable option that can be turned on or off, depending on requirements.

Reports can be generated to view the number of visits scheduled on the fly on the mobile app.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
63	EVV.55	Solution should enable each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support complete visit documentation, including tasks completed, notes, and assessments.	Describe in detail how solution enables each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support complete visit documentation, including tasks completed, notes, and assessments.	N/A	S	

Bidder's Response:

Tellus eVV provides real-time access to and use of the solution and EVV data that is entered or captured within the system and is also fully capable of data integration and aggregation with third-party systems. The Tellus eVV solution supports complete visit documentation, including tasks completed, notes, and assessments. The caregiver will be provided with a secure user ID and password and can only access information related to participants that the administrator associates to that specific caregiver. For example, a caregiver must be linked to a participant through a schedule or the participant profile before accessing any participant data.

The following data is captured using the mobile app:

- Participant
- Caregiver
- Date of service
- Services rendered
- Tasks completed

- Clock-in time
- Clock-out time
- GPS coordinates at clock-in
- GPS coordinates at clock-out
- Caregiver signature
- Participant or designated representative signature
- Notes from the visit and assessments

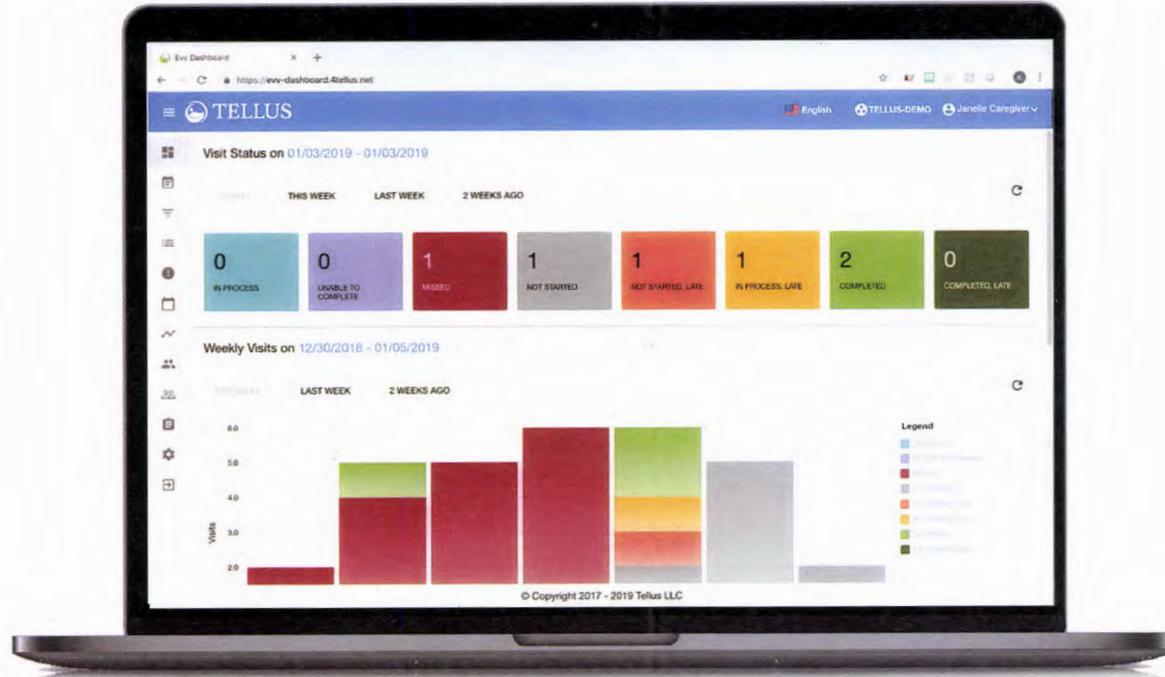
Data will be captured and stored in near real-time. At that point, provider administrators can see the current status of a visit through the web-based Administrator Console. The information will also be available for reporting purposes to providers and payers.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
64	EVV.56	Solution should enable each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support alerts when scheduled visits are not performed, completed, or verified.	Describe in detail how solution enables each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support alerts when scheduled visits are not performed, completed, or verified.	N/A	S	

Bidder's Response:

Tellus eVV provides real-time access to and use of the solution and EVV data that is entered or captured within the system and is also fully capable of data integration and aggregation with third-party systems. The Tellus eVV solution supports alerts when scheduled visits are not performed, completed or verified.

Administrators can see at-a-glance the status of visits on the home screen of the Administrator Console as depicted:



Administrators can predetermine a set distance for how close caregivers need to be to initiate the visit. Upon arrival, the caregiver checks in and upon completion, checks out. This displays in real-time on the Administrator Console, so the provider agency knows right away if a visit is not started on time. The timer tracks how long individual tasks take. For any missed or late visits, the platform alerts the agency immediately within 15 minutes of a caregiver being late. Alerts are configurable and can be set to any interval required. Upon completion of services, the caregiver collects a digital signature from the participant which is documented and instantly sent to the back office for the automated claims process to begin. Our EVV solution meets all industry standards allowing providers to discover cost savings while increasing field staff productivity.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
65	EVV.57	Solution should enable each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange capabilities to support provider compliance with use of Nebraska’s solution.	Describe in detail how solution enables each provider of Medicaid home-based services with real-time access to and use of the solution and the EVV data they (or their employees) submit, with electronic data interchange	N/A	S	

			capabilities to support provider compliance with use of Nebraska's solution.			
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Bidder's Response:

Tellus eVV provides real-time access to and use of the solution and EVV data that is entered or captured within the system and is also fully capable of data integration and aggregation with third-party systems. The Tellus solution is an ideal solution for the State of Nebraska because our robust business rules engine ensures provider compliance with the 21st Century Cures Act as well as the State of Nebraska's policies, procedures and requirements. As a leader in EVV, Tellus offers the State a best-in-class solution that's designed from the ground up using industry standards and best practices. To ensure data integrity, we established a set of minimum requirements for integration.

Data transfers and aggregation are a core competency of Tellus. In fact, we have dedicated integration teams specifically assigned to data sharing and integration. We use industry-leading, cross-platform, bi-directional, health care integration engines for data interchange.

The purpose of data sharing is to consolidate data from various sources into one system of record in the most efficient manner possible to save time and minimize redundant processes. Sharing data with other systems means data is transmitted or exported from one software application and shared by import into another application. As it relates to EVV, we import data from multiple systems to store data in a common database. Some of this information is foundational to set up the system; for example, the MMIS will send provider, recipient and prior authorization data to import into the EVV database. MCOs will also send provider, recipient and prior authorization data to import into the EVV database. The data is normalized as part of the import process. Visit data collected from our solution as well as other EVV systems is imported into the data aggregation database and transmitted in real-time transactional or batch mode.

When foundational information is loaded, providers will have the information they need to schedule visits for recipients.

The Tellus eVV platform is built on a service-oriented architecture (SOA) and is open database connectivity (ODBC) compliant making the application extremely flexible and agile while allowing for bi-directional exchange of information with virtually any other open architecture application, including Financial Management Systems, Agency Management Systems, third-party EVV and other software systems.

The Data Aggregator is a powerful tool enabling seamless collection and normalization of data from various sources into a common database. Regardless of origination, the data is put into a common format and record layout so it is consistent with the database layout and, ultimately, exposed to the consoles and other applications.

Business Rules formulated by program and payer administrators are run against transaction data to determine the validity of delivered services. Transactions in the form of visits, regardless of the original source, that violate the rules associated with a specific program or payer can be remediated by the provider in the Claims Console, and the transactions will be reevaluated. Those visits with violations are flagged and show up in the exception reports and the Claims Console's dashboard.

Approved transactions are promoted to the Claims Processing tool for pre-adjudication. Pre-adjudication applies a set of data scrubbing algorithms to properly format information based on claims adjudication standards provided by payers, improving the percentage of successfully processed paid claims. Any denied claims can be reviewed, adjusted and resubmitted or voided by providers.

Bi-directional interfaces can be built using the following interchange protocols:

- TCP/MLLP
- Database (MySQL, PostgreSQL, Oracle, Microsoft SQL Server, ODBC)
- File (local file system and network shares)
- PDF and RTF documents
- JMS
- FTP/SFTP
- HTTP/Web Services
- SMTP
- SOAP (over HTTPS)
- DICOM

- JavaScript
- The open architecture also allows for the easy addition of custom and legacy interfaces.

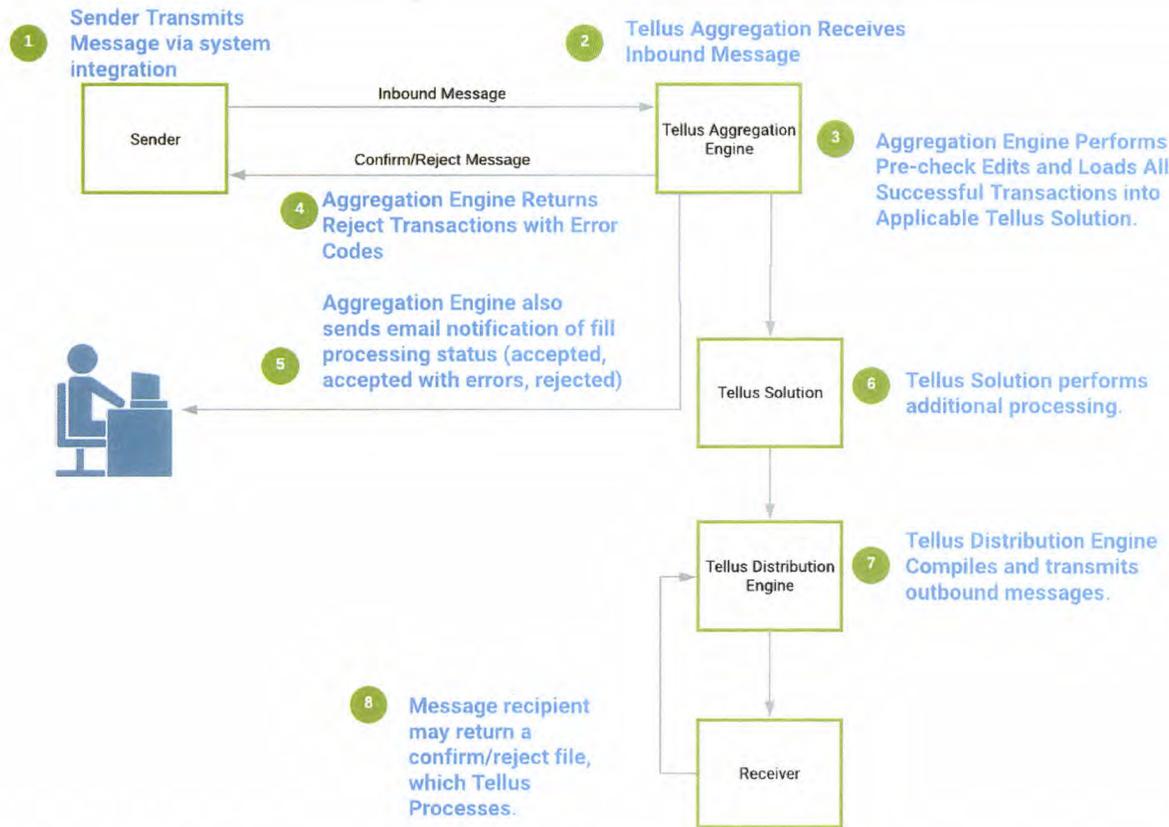
Typical messaging standards supported by the Tellus data interchange solution include:

- ANSI X.12 Electronic Data Interchange (EDI) including **837, 835 and 278**
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW
- JavaScript Batch
- Additional Data Types are support via API Libraries

The flexible open architecture also allows custom and legacy interfaces to be easily added to support data sharing with systems that are not able to share information in one of the protocols not native to the platform.

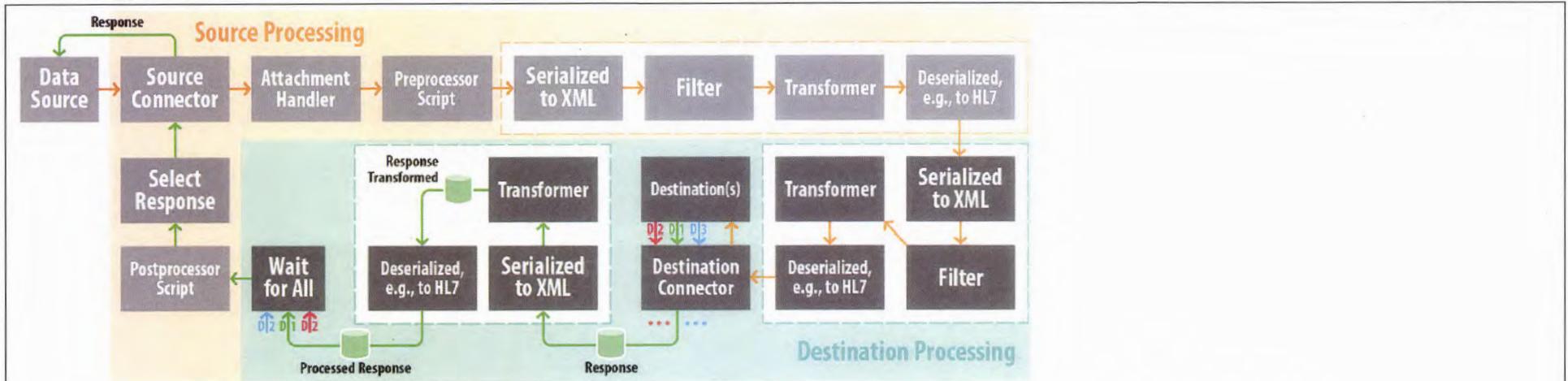
Our standard data sharing tool allows data to be shared employing many standards and protocols including near real-time data sharing for both individual and batch transactions. Our business intelligence rules engine applies rules to visits and claims data for tracking service utilization and comparing it to prior authorization data. This data is available to those who have permission to view it in the web-based consoles.

The following diagram provides an overview of the Tellus-standard approach. The numbered call outs provide the sequencing overview.



The sequence begins with the data submitter sending Tellus an inbound message (XML, flat file, web services request, etc.) via an integrated channel. As noted above, Tellus supports any commonly used integration method and has a high degree of flexibility regarding file layout, transport protocol, and security protocol. Tellus will run a preliminary edit on the message layout and content and will inbound process any valid records. Tellus will then return a confirm/reject message using the same transport protocol as the submission and will also send an alert email to the sender. If Tellus later outbound processes and transmits a message to our client/partner, then the same process is expected in reverse.

A message, or row within a source file, enters NextGen Connect (formerly Mirth Connect) as a raw inbound message and is received by the Source Connector, which can then be evaluated, filtered and/or transformed before being sent to the Destination Connector. The raw inbound message can be passed through multiple destination connectors where it can be influenced by filters and transformers before final processing and being sent to a destination.



The Dashboard allows for monitoring interface activity in real time. Interface errors can be reviewed, corrected and reprocessed in real time as well.

Tellus publishes a complete set of specifications for all Tellus proprietary messages.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
66	EVV.58	Solution should be capable of capturing, storing, and utilizing multiple Nebraska-specific generated provider identification numbers utilized for atypical and typical providers.	Describe how solution is capable of capturing, storing, and utilizing multiple Nebraska-specific generated provider identification numbers utilized for atypical and typical providers.	N/A	S	

Bidder's Response:

Identification information specific to the State of Nebraska will be defined during the requirements gathering phase. If our existing data dictionary does not capture a required field, our database will be extended to capture the required information.

Tellus has experience with typical and atypical providers and can accommodate differences in data and rules for each category.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
67	EVV.59	The solution should use a medical code set for coding diseases, signs and symptoms, abnormal findings, and external causes of injuries/diseases, as stipulated in 45 CFR Part 162.1002.	Describe how solution uses the currently HHS-mandated code sets and edits data during entry.	S&C.IC.2	S	

Bidder's Response:

Tellus uses type code lists to make defined data sets for specific fields available to users. Healthcare Common Procedure Coding System (HCPC) codes is one of the type code lists stipulated in 45 CFR Part 162.1002 and available in our application.

G.3 Aggregator Requirements

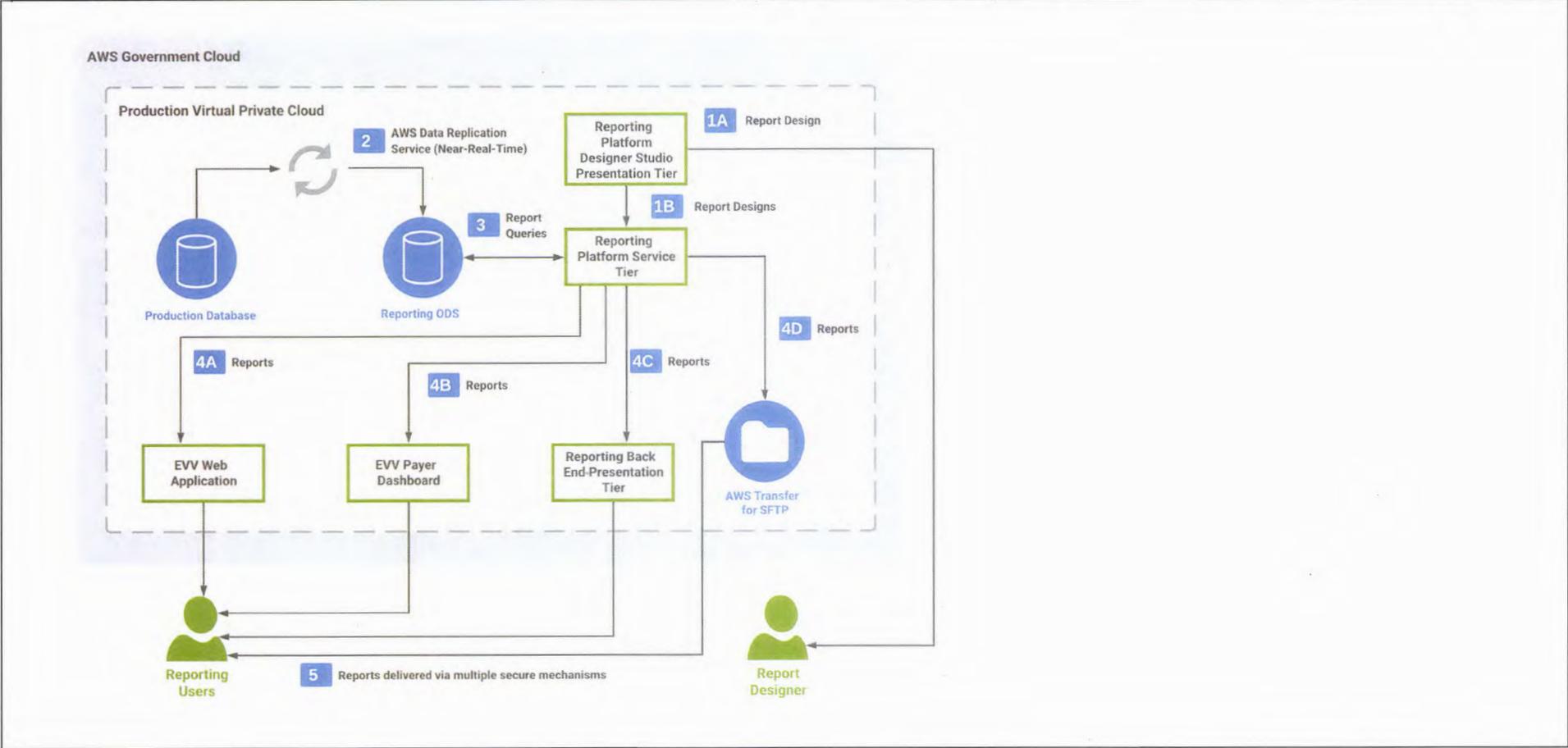
In order to ensure comprehensive EVV data management and reporting, all data captured by the state solution should be combined with data consolidated from any provider agency solutions. In this open vendor model, the state Solution will provide aggregator functions to ensure the appropriate consolidation, processing and tracking of all Services covered within the DHHS programs. To meet the requirement for system use, providers must either (1) use the state-contracted solution resulting from this RFP or (2) at the provider's own expense and sole responsibility, use an alternative system that meets the requirements defined by DHHS. Any such certified alternative system must transmit all data to the state-contracted solution on a secure, seamless, real-time basis consistent with DHHS-approved specifications. DHHS is also open to alternative solutions and Contractor suggestions that have proven successful in other implementations.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
68	AG.1	DHHS is implementing an open vendor EVV solution that must aggregate data from its own system, as well as data from individual providers' systems, to be submitted in a format approved by DHHS. The Contractor must use this aggregated data to conduct all appropriate EVV editing and reporting operations. DHHS is open to alternative solutions that have proven successful in other implementations.	Describe how solution's aggregator function works, and how it uses this aggregated data to conduct all appropriate EVV editing and reporting operations. Provide a description of how the state Solution will receive the aggregated data, and how the solution will handle and manage that data. Describe any alternative solutions that have proven successful in other implementations.	N/A	S	

Bidder's Response:

Our comprehensive solution includes a central aggregator of your EVV data. We provide an easy-to-use capability for uploading data from other EVV systems. Data aggregation is vital for managing the provision of the DHHS and the State's programs. Aggregated EVV data can help make certain that participants are receiving quality care as outlined in their plans of care. It can also be used to support program integrity oversight. For those health care providers already using other EVV solutions, the Tellus data aggregation capability ingests visit data from other solutions to align with your criteria. This supports the consolidation of the EVV data to provide an end-to-end view of your EVV programs. Providers or MCOs can share data real time or in batch mode through the Tellus eVV Data Aggregation Solution. Data can be transmitted via SFTP or by leveraging web services in the form of APIs from their application to send the required data. This aggregated data will then be available to the DHHS for Cures Act reporting and compliance. Integration with your MMIS and MCO is accomplished through a common integration layer that uses industry standard transaction formats to exchange information. The system will indicate if the information was uploaded or if the data was captured from the EVV mobile tool. By consolidating the data in the system, the State will be able to capture trends across MCOs, providers, and caregivers.

Our solution provides two reporting capabilities through the data aggregator and the data collection components. The data aggregator provides the DHHS an overall and holistic view into the provision of services to their participants. The data aggregation reports allow the DHHS to monitor the overall performance of the providers servicing the participants. The EVV data collection component provides the DHHS and the providers and participants detail views into the timeliness and type of services. The EVV data collection component of our solution is architected for optimal performance with the reporting platform running against an operational data store (ODS) that is synchronized in near real-time with the production database. Report data is always encrypted in flight and at rest to the point of delivery to the reporting user's desktop. The figure that follows illustrates the flow of data in the EVV data collection component. The data aggregator is designed so that queries and reports do not degrade the performance of the aggregator functionality. Access to data aggregator reports is restricted to authorized users, based on the user profile.



Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
69	AG.2	Solution should support the providers using this aggregator function, including at a minimum: interface support, training, customer support, communication of changes or enhancements.	Describe how solution supports the providers within this aggregator function, including at a minimum: interface support, training, customer support, communication of changes or enhancements.	N/A	S	

Bidder's Response:

Tellus supports providers in a variety of ways:



- **Aggregator Support:** Providers who have invested in EVV and Agency Management solutions can continue to use those software solutions and still meet State of Nebraska requirements by requesting their technology vendors integrate with the Tellus eVV aggregator. Data can seamlessly be shared bi-directionally to eliminate redundancy and improve accuracy.
- **Training:** Training will be developed specifically for providers, tailored to their learning outcomes. Training is provided through a number of modalities, including on-site, instructor-led classroom training, one-on-one instructor-led sessions, telephone support, webinars and job aids that are available through a training portal. We recommend a train-the-trainer approach to allow providers the flexibility to re-train or train new hires.
- **Customer Support:** Tellus operates a Customer Service, complaint resolution and tracking system that identifies and tracks provider and recipient complaints and requests. The help desk is located in our offices in Boca Raton, Florida, where customer service calls, complaints and requests are taken by individuals supported by an interactive voice response system, computers, headsets and software to facilitate call distribution and data collection. The help desk is accessible 24/7 via a U.S.-based, tollfree telephone number, which connects customer to our English and Spanish speaking staff. We are able to assist those with hearing or speech impairment using TTY services. Service Desk Representative calls are monitored by our Customer Support Manager to ensure quality of service. If required, calls can be recorded and shared with the DHHS upon request.
- **Outreach and Communication:** Outreach and communication are core components to educate and motivate constituents to successfully adopt any new program or program change. During the implementation of the program, there will be misunderstanding, confusion and fear. Tellus understands the importance of meeting constituents where they are to help them understand why the program is important, alleviate fears and help them understand the activities and associated timelines they will be expected to adhere to. Encouraging providers and third-party vendors is key because procrastination becomes the enemy as implementation timelines approach. Post-implementation, Tellus will inform the DHHS at least thirty (30) days in advance of any scheduled maintenance. The following information will be communicated in advance for approval: specific system functionality impacted by the maintenance, or modification/enhancement, planned implementation date, downtime required, system unavailability, start and end time, communication plan to notify users and stakeholders, a contingency plan in the event of implementation issues.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
70	AG.3	Solution should be able to notify the provider if provider EVV solution visit data is incomplete or invalid when received.	Describe how solution notifies a provider if required EVV solution visit data is incomplete or invalid and how the aggregator function handles that data.	N/A	S	

Bidder's Response:

Either the provider or their technology vendor will transmit data to the Tellus eVV aggregator in the form of a file or API. Data that meets requirements will be imported into the database. Data that does not meet the requirements will be rejected. Any rejected data will be accompanied by a response file that informs the submitter of the reason the data is rejected. For example, if the NPI number is a numeric field and the submitter attempts to transfer a record with an alpha-numeric NPI number, that record will be rejected with a message the NPI number is invalid.

Valid records will be imported into the database and matching rules automatically check transactions against the application business rules. Business rules included things like whether a participant is eligible, and the delivered services are the same as the scheduled services and within defined service authorization parameters. If a participant/program does not require scheduled services, matching rules will automatically validate where a participant is eligible, and the delivered services are within defined service authorization parameters. For delivered service data to automatically validate when matched against a qualified service authorization, the following parameters must be consistent and valid: provider, service code, provider/service code combination, modifier.

Late visits will be flagged, and remediation rules will be applied prior to processing.

Invalid transactions will require remediation by the User prior to processing. Transactions will be permitted to be modified for sixty (60) calendar days from the date of service. A User must request and receive payer approval to make changes to visits after that period has expired.

Users will be permitted to modify some fields and prevented from modifying other fields. Per current requirements, Users cannot change:



- Actual Service delivery date
- Actual Service delivery clock-in time
- Actual Service delivery clock-out time

All data entry and edit into the application is tracked by an audit log. At a minimum, the audit log will capture the following information for all changes to delivered service data elements:

- Data elements changed
- Name of the user making the changes
- Date the changes were made
- Reason Code(s)
- Visit maintenance date

Once delivered service data is modified, matching rules will attempt to validate the visit. If the transaction data meets the rules and the User confirms the transaction, the data will be transmitted to the Data Aggregator.

All data, EVV captured and edited will be retained in the EVV system.

Data validation features ensure only valid data elements will be accepted for entry in each field. If allowed, more than one valid entry can be added in a field. Data validation criteria and tables can be modified during the Contract Period. Free text fields will be provided as required for supplemental information.

Integration between the EVV System and the Data Aggregator will be facilitated using NextGen Connect (formerly Mirth Connect) and can occur as frequently as near real time. All required data will be transferred from EVV to the Data Aggregator in the formats defined by the DHHS. Data transmitted from the Data Aggregator to EVV will update the EVV database and be available for Users in near real time. Data can be displayed in the form of alerts, through standard interaction through the user interface and/or in the form of reports.

If Users are notified of data entry errors, they can correct and resubmit transactions at their convenience.

File format errors transmitted by the Data Aggregator to the EVV system will be corrected and resubmitted.

Tellus will work with the DHHS to develop reconciliation processes and procedures to ensure the EVV System database is synchronized with the Data Aggregator on at least a monthly basis.

Req.#	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
71	AG.4	Solution should ensure that the data aggregator function can calculate total daily and weekly hours worked by caregivers. The data aggregator should be capable of aggregating hours across programs, providers, and members receiving services.	N/A	S	

Bidder's Response:

All information captured in Tellus eVV is combined with data received from third parties through the Tellus Data Aggregator. This combined data set is the foundation for claims submission, analysis and reporting. The hours worked by a caregiver will be combined based on the business rules associated with the program. Data can be reviewed at the transaction level as well as combined across programs, providers and participants.

This includes total hours worked by a caregiver. For example, if a business rule states that a participant can only receive eight hours of care during a day and a caregiver submits ten hours of care, the visit will be flagged and cannot be submitted until the record is adjusted to meet the program rules.

Providers can run payroll reports by caregiver on a daily or weekly basis. The application will capture actual hours worked which may be different than billable hours for claims submission purposes.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
72	AG.5	Solution must calculate visit time logged for each visit, and follow any rounding rules used as agreed with DHHS. Solution must be configurable depending on program and service requirements.	Describe how solution calculates visit time logged for each visit, including any rounding rules used. Describe how solution can be configured depending on program and service requirements.	N/A	S	

Bidder's Response:

Tellus eVV is configurable with business rules forming the foundation for program rules and service requirements. If a service code is billable in fifteen-minute increments and the State of Nebraska wants the application to round up to the next unit if eight minutes are worked and down to the lower unit if less than eight minutes are captured, and the caregiver time is captured at 10 minutes, the application will calculate the visit at 1 unit. Rules can be configured based on the combination of payer and service code. Some service codes may be at the visit level so whether the caregiver clocks in at fifteen minutes or two hours, the number of units associated with the visit will be one. Service code and rounding rules will be defined during the business requirements gather phase of the engagement and deployed at the implementation of the program.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
73	AG.6	Solution should interface in near real time with other qualified EVV systems utilized by other entities, such as providers.	Describe how solution will interface in near real time with other qualified EVV systems utilized by other entities, such as providers.	N/A	S	

Bidder's Response:

Integration between the EVV System and the Data Aggregator will be facilitated using NextGen Connect (formerly Mirth Connect) and can occur as frequently as near real time. All required data will be transferred from EVV to the Data Aggregator in the formats defined by the DHHS. Data transmitted from the Data Aggregator to EVV will update the EVV database and be available for Users in near real time. Data can be displayed in the form of alerts, through standard interaction through the user interface and/or in the form of reports

G.4 Privacy & Security Requirements:

The privacy of participant and provider data is critical to providing a safe, secure, confidential relationship between DHHS and its participants, partners and providers. The Solution must provide appropriate controls and capabilities within the system to ensure that the application meets security requirements and all data is secure, accurate and contained as required below.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
74	PS.1	Solution must provide capabilities and safeguards to ensure the security and integrity of all data, functions and access across all users. Solution must provide systems capabilities and safeguards to ensure the security and integrity of the EVV program, use of the solution, EVV system website and mobile apps, and the EVV data received from providers, including: a) The prevention of EVV system use, service verification, or EVV data access by provider organizations, individual providers, or others without proper authorization and credentials; b) Electronic documentation and audit trails for all logins, system uses, errors, alerts, and changes to data, including corrections by billing providers.	Describe how solution provides systems capabilities and safeguards to ensure the security and integrity of the EVV program, use of the solution, EVV system website and mobile apps, and the EVV data received from providers, including: a) The prevention of EVV system use, service verification, or EVV data access by provider organizations, individual providers, or others without proper authorization and credentials; b) Electronic documentation and audit trails for all logins, system uses, errors, alerts, and changes to data, including corrections by billing providers.	N/A	S	

Bidder's Response:

EVV security:

Access to the EVV solution is tightly controlled using secure login identification and device access controls. System security is integrated into the system's basic design. We have a number of standard security features to make sure that only authorized users can access the system and its data, including user authentication through IDs and passwords, functional access controls, multiple firewalls, and different virus protection products. Data transmitted between external systems and our servers is protected by authentication and encryption, while secure file transfer protocols (SFTP) are always used for data file transmissions

Audit trails: All Tellus eVV data entries are monitored and appended with an audit trail that tracks the change made, individual who made the change, date and time stamp. This includes both data that is entered and data that is edited. All original and edited entries are retained in the database. The audit trail always includes the following data elements: EVV visit transaction data elements, user profile, and user credentials. The following data elements are retained in the audit trail, if applicable: caregiver profile, participant profile, prior authorization/service authorization data, service schedule.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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75	PS.2	<p>Solution must meet and contractor must document compliance with NIST SP 800-53 Rev. 4 and SP 800-53A Rev. 4 (moderate) security and privacy standards through the completion of a System Security Plan (SSP) per Attachment D prior to Go-Live. Contractor must provide a Plan of Action and Milestones (POA&M) for any items not fully compliant.</p> <p>Compliance is subject to a qualified independent security controls assessment prior to solution implementation.</p> <p>Security and privacy control requirements may be met by confirmed attestation of compliance (e.g., FedRAMP, SOC 2).</p> <p>The Contractor will be responsible for engaging a qualified independent security controls assessment contractor. DHHS shall approve the selection of the security assessment contractor.</p>	Describe how solution will meet the guidelines.	N/A	S	
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Bidder's Response:

Adhering to the highest standards of information security and data integrity over time is the main driver of our approach to hosting and system backup processes. Redundancy is the key strategy employed to build a fault-tolerant system and robust disaster recovery methods and procedures. Our solution is compliant with the recommendations of NIST 800-53 Rev. 4 and SP 800 53A Rev. 4. Tellus will complete a System Security Plan prior to Go-Live.

The process of retrieving visit verifications in compliance with HIPAA standards requires all communications (application ↔ database ↔ mobile app ↔ server) to happen over a secure HTTPS connection. We ensure that PHI information is encrypted when transmitted and encrypted at rest by using SSL/TLS and database encryption. Our hosting provider has achieved a number of certifications including, but not limited to, SOC 1,2,3, FedRAMP, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>).

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
76	PS.3	Solution must comply with the DHHS Information Security Policy	Describe how solution complies with the DHHS Information Security Policy.	N/A	S	

Bidder's Response:

Tellus will ensure compliance with the DHHS Information Security Policy.

In general, Tellus IT security is comprised of an interlocking wall of infrastructure, defensive technology, monitoring technology, training, processes and procedures. Tellus has self-certified for HITRUST (including HITECH and GovRamp).



The Tellus eVV web application and APIs deliver information through both public and private interfaces. Data security is managed through various protocols and user authentication and authorization. Secure Sockets Layer (SSL) encryption is the standard for communications over the Internet. When configured to use SSL, the application enforces secure communications in all private areas of the website by disallowing non-secure HTTP requests and redirecting the browser to the secure protocol.

Database security begins with hardened, redundant Amazon Government Cloud (AWS) database servers. AWS is a top-tier, SAS 70 Type II certified datacenter. The database and application are configured in separate tiers of the physical systems, with strict firewall rules partitioning the servers. For the greatest level of security, Tellus eVV uses the Amazon Web Services Government Cloud and runs on fifteen (15) AWS datacenters located in the continental U.S. AWS datacenters are distributed in geographic regions which include clusters of datacenters called Availability Zones. Every region is geographically isolated in terms of power and water supply, and each zone is similarly served by independent networks. Redundantly storing information in different datacenters in multiple regions, availability zones, and datacenters greatly reduces downtime, as the nearest availability zone is activated as a backup when necessary.

Each AWS datacenter is protected by four distinct layers of security safeguarding both data and equipment. A layering approach to security helps ensure that failure of one element in the system doesn't create vulnerability in the whole system:

- **Perimeter Layer.** Datacenters are physically enclosed by gates protected by security guards and intrusion detection technology.
- **Infrastructure Layer.** Energy generators, fire suppression equipment, and ordinary and extraordinary maintenance systems protect the integrity of the data stored in the datacenter.
- **Data Layer.** Access to server rooms is restricted, tightly regulated by authorization processes and constantly monitored.
- **Environmental Layer.** The locations where AWS datacenters are built are screened for seismic activity and extreme weather, to minimize the risk of structural damage caused by natural occurrences.

AWS Identity and Access Management (IAM) policies are used to assign permissions that determine who is allowed to manage database resources. Security groups control what application server instances are allowed to connect to the database.

Tellus ensures data security, including but not limited to, encryption of all ePHI, PII and FTI that is confidential under state or federal law, while it's in transmission and while it's resident on electronic media storage devices. Required data is encrypted at rest and will be consistent with Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards.

Tellus encrypts in-flight (being transmitted to/from/between Tellus systems) data using transport and/or message level encryption. In flight standards include:

- TLS: 2, TLSv1.1 and SSLv2Hello
- Key Agreement Protocol: Ephemeral Diffie-Hellman Key with a size of 2048.
- Cipher Suites: Ability to use up to 43 different Cipher Suites (Examples: TLS_RSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_ECDSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_RSA_WITH_AES_256_GCM_SHA384, TLS_DHE_RSA_WITH_AES_256_GCM_SHA384).

Data at rest (stored in databases, file structures, object storage, etc.) is encrypted using Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards including:

- Encryption algorithm used is AES 256 Encryption
- Encryption algorithm used for one-way hashing is SHA256

For the application tier, low-level bindings on all its native queries are used to minimize the possibility of attacks such as SQL injection. For additional security, stored procedures are used to retrieve data and Object Relational Mapping is used to minimize the need for hand coding SQL statements that could be vulnerable to exploits.

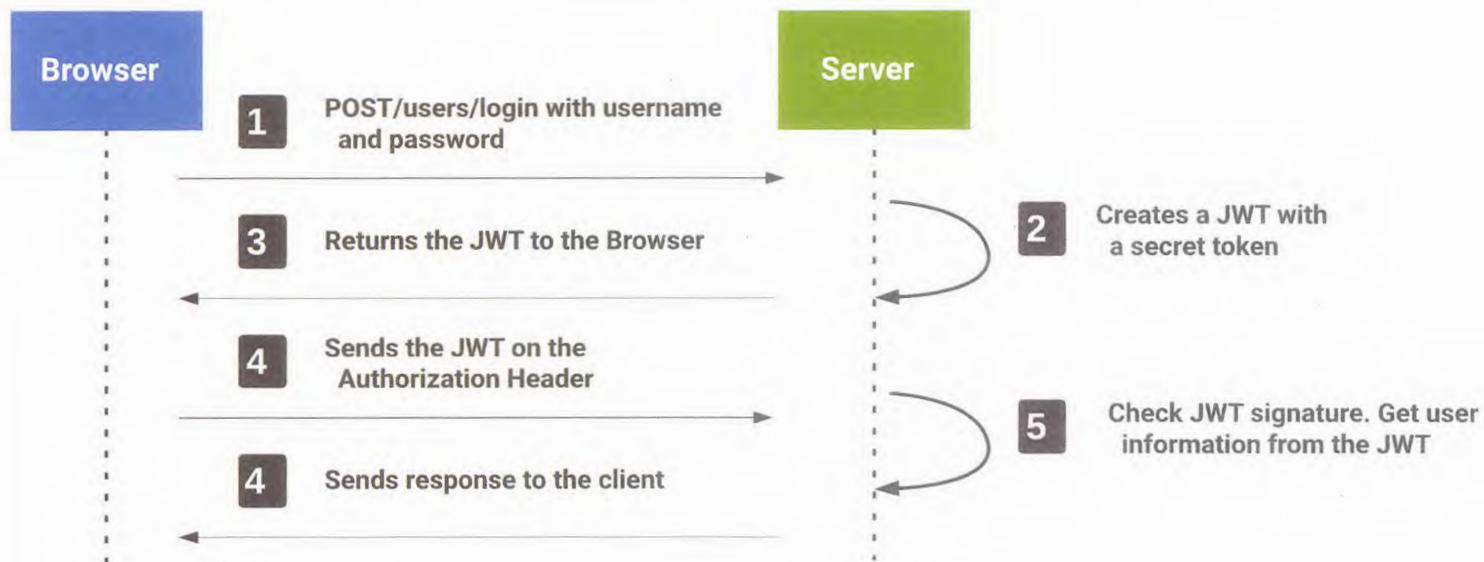
All ePHI data is encrypted in transmission and at rest when stored in a database or filesystem. We use Transparent Data Encryption (TDE) and adhere to HIPAA compliance.

The process of retrieving visit verifications in compliance with HIPAA standards requires all communications (application ↔ database ↔ mobile app ↔ server) to happen over a secure HTTPS connection. We ensure that ePHI information is encrypted when transmitted and encrypted at rest by using SSL/TLS and database encryption. Our hosting provider has achieved a number of certifications including, but not limited to, SOC 1,2,3, FedRAMP, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>)

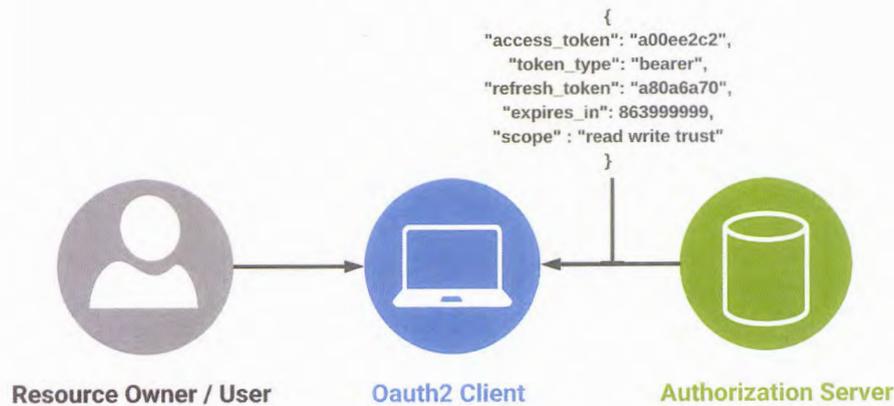
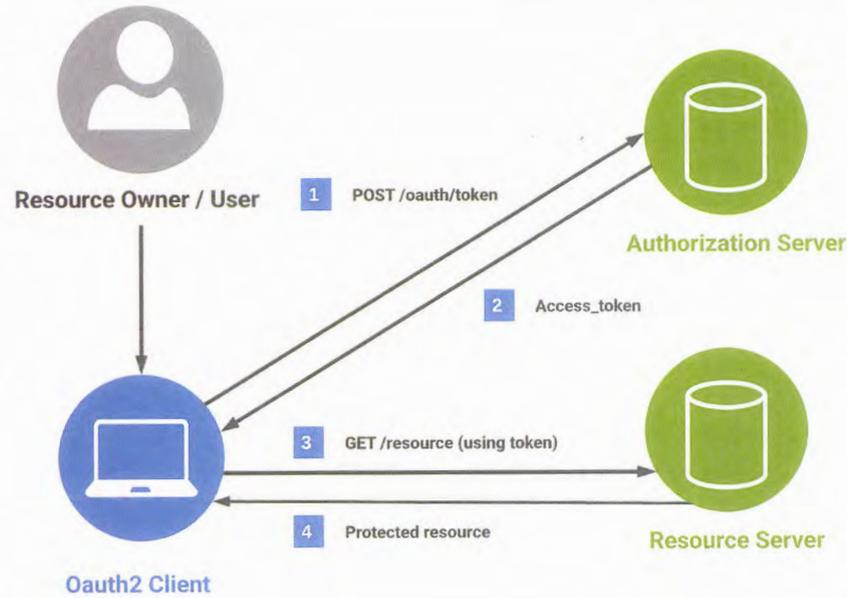
Role-based account permissions are used to provide native user authentication based on account name, username and a user-supplied password. User password is stored in the database and hashed using one-way BCrypt hashing mechanism that makes it impossible to decrypt and extremely resistant to brute-force search attacks

Industry standard OAuth2 protocols are used for authentication. Every application's access to backend processes via REST API requires an authentication token to be passed with each API call.

JSON Web tokens (JWT) are used for API Authentication. JWT is an open standard (RFC 7519) that defines a compact and self-contained way to securely transmit information between parties as a JSON object. This information can be verified and trusted because it is digitally signed. JWTs are signed using a secret JWT token sent to the API via standard HTTP Authorization header. Token payload contains user information restricting API access to certain endpoints.



To further control user access, JWT tokens are configured to expire after a specified period of time based on application rules. For example, tokens requested by the EVV mobile application expire in less time than EVV Console tokens. To facilitate user ability to stay logged into the application, Tellus utilizes standard OAuth2 Refresh Tokens. Refresh Token expiration is configured based on client specifications.



Open Web Application Security Project (OWASP) standards are baseline for the Tellus eV Mobile App. OWASP is an organization supporting open standards, policies and processes promoting application security. OWASP collaborated with the European Network and Information Security Agency (ENISA) to build a set of controls for mobile applications. They jointly published the "Smartphone Secure Development Guideline" and recommend the following principles:

- ID & Protect Sensitive Data on the Mobile Device
- Protect Authentication Credentials
- Protect Data in Transit
- Strong User Authentication, Authorization & Session Management
- Secure Backend Services & Server
- Secure Third-Party Integration
- Collect Consent for Collection & Use of User Data
- Protect Paid-for Resources & Services
- Secure Distributions & Provisioning of Mobile Applications
- Avoid/Safely Use Runtime Code Interpreters

Each principle is thoroughly documented outlining risks and methods for mitigating those risks. Tellus eVV mobile developers and testers strive to ensure our apps comply with OWASP standards.

As an alternative to GPS confirmed rendered services, Tellus offers telephony-based EVV. Biometric interactive voice verification is used to detect direct service worker identity with at least ninety-nine percent (99%) accuracy. The following process has been implemented to capture and enforce biometric interactive voice verification combining Twilio IVR functionality with VoicelT biometric voice verification technology:

1. **Enrollment** – this is the process of creating a voice print. The user is asked to repeat a phrase multiple times, and the recording of these utterances is compared to future authentication attempts.
2. **Authentication** – This is the comparison of the user’s phrase to recorded enrollment. These algorithms are tunable. Rules dictate how strict or loose the implementation matching algorithm is enforced. Authentication is accomplished via REST API or a .wav file.
3. **Users** – User is created using their phone number. Login credentials are mailed to the user. If the user doesn’t exist, it is created through the enrollment process. If the user does exist, they speak their phrase for comparative purposes.

Required accuracy level is defined on the VoicelT platform and can be set to 99%. The higher the accuracy rate is set, the lower the potential for false positives and the higher the potential for false negatives.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
77	PS.4	Solution must provide for role-based access controls in a multi-tiered environment that allows DHHS and support coordinators and providers to create user roles and assign access to user roles for accessing system functions or viewing of appropriate levels of data. For instance, support coordination agencies serve recipients across multiple provider agencies and must be able to access information across provider agencies, but only for those individuals that the support coordination agency serves. Roles must be flexible, allow for modifications and must be configured by appropriate levels of management.	Describe how solution will provide for role-based access controls in a multi-tiered environment that allows DHHS and support coordinators to create user roles and assign access to user roles for viewing of appropriate levels of data. For instance, support coordination agencies serve recipients across multiple provider agencies and must be able to access information across provider agencies, but only for those individuals that the support coordination agency serves.	N/A	S	

			Describe how the roles are flexible, allow for modifications and can be configured by appropriate levels of management.			
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Bidder's Response:

Tellus will work with the DHHS to develop User Roles and Permissions that will dictate the access a User has to EVV data and functionality ensuring Users are able to perform their role but restricting access to sensitive data to only those users who require it. Each User will be provided with a unique login ID and password. The password must be changed the first time the User logs in to the EVV application. Examples of possible user role/profile combinations are shown in the table that follows

The User Admin has the ability to set up and disable Users near real time using functionality accessible via the Tellus eVV Web Console. Tellus eVV fully complies with HIPAA and HITECH standards.

Module Access	User Role	View Data	Enter/Modify Data
Mobile App	Direct Caregiver	Yes for Scheduled Visits	Yes for Scheduled Visits
Mobile App	All Other User Roles	No	No
Provider Administration	Provider Administrator	Yes	Yes
Provider Administration	All Other User Roles	No	No
Provider Scheduling	Provider Scheduler	Yes	Yes
Provider Scheduling	Provider Administrator	Yes	Yes
Provider Scheduling	All Other User Roles	No	No
Claims Processing	Provider Claims Processor	Yes	Yes
Claims Processing	Provider Administrator	Yes	Yes
Claims Processing	All Other User Roles	No	No
Provider Reporting	Provider Administrator	Yes	Yes
Provider Reporting	Provider Scheduler	Yes, Visit Reports	No
Provider Reporting	Provider Claims Processor	Yes, All Reports	No
Provider Reporting	Case Manager	Yes, All Reports for Assigned Recipients	No
Provider Reporting	Program Manager	Yes, All Reports for Assigned Programs	No
Provider Reporting	Payer Administrator	Yes, All Reports for Assigned Programs	No

These examples are not exhaustive; they are simply a representation of potential roles that can be defined.

In summary, access can be granted at the Module level. The ability to view data can be restricted at the field level so a Provider Scheduler may be able to view some components of the participant record like name, phone number, address and services to be rendered. However, Medicaid ID can be hidden from view.

In addition, the ability to Enter/Modify data can be restricted by role. As an example, the participant address of record can only be changed by a Payer data feed, but alternative addresses can be added by the Provider Administrator and the Scheduler.

Another example is associating tasks with service codes. If the DHHS authorizes providers to add and edit tasks, the Provider Administrator may be given permission to add tasks to service codes. If the DHHS wants tasks defined at the program level, the Provider Administrator will not be given permission to add tasks to service codes. That privilege will be retained by the Program Manager.

Tellus eVV is multi-tiered with access defined by user roles. Providers can only see data related to their Agency. Payers can view data for all the Providers in their network.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
78	PS.5	Solution must provide secure handling and storage of all data, including all sensitive participant and provider information in accordance with Health Insurance Portability and Accountability Act (HIPAA) requirements, including the Health Information Technology for Economic and Clinical Health (HITECH) Act amendments and NIST SP 800-53.	Describe how solution provides for secure handling and storage of all data, including all sensitive participant and provider information in accordance with Health Insurance Portability and Accountability Act (HIPAA) requirements, including the Health Information Technology for Economic and Clinical Health (HITECH) Act amendments.	N/A	S	

Bidder's Response:

Tellus ensures data security encryption of all information while in transmission and while at rest on electronic media storage devices. Required data is encrypted consistent with Federal Information Processing Standards (FIPS) and NIST cryptographic standards.

In RDS Databases the encryption algorithm used is AES 256 Encryption; the encryption algorithm used for one-way hashing is SHA256.

For the application tier, low-level bindings on all its native queries are used to minimize the possibility of attacks such as SQL injection. For additional security, stored procedures are used to retrieve data and Object Relational Mapping is used to minimize the need for hand coding SQL statements that could be vulnerable to exploits.

All ePHI data is encrypted in transmission and at rest when stored in a database or filesystem. We use Transparent Data Encryption (TDE) and adhere to HIPAA and HITECH compliance.

The process of retrieving visit verifications in compliance with HIPAA standards requires all communications (application ↔ database ↔ mobile app ↔ server) to happen over a secure HTTPS connection. We ensure that ePHI data is encrypted when transmitted and encrypted at rest by using SSL/TLS and database encryption. Our hosting provider, Amazon Web Services, has achieved a number of certifications including, but not limited to, SOC 1,2,3, FedRAMP, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>).

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
79	PS.6	Solution must monitor for all real or potential security incidents and privacy breaches. Notification must be received within 24 hours of identification, with expected impacts (known at the time) and remediation approach to be coordinated with DHHS.	Describe how solution provides monitoring and notification. Describe how notification will be delivered within 24 hours of identification, with expected impacts (known at the time) and remediation approach to be coordinated with DHHS.	N/A	S	

Bidder's Response:

The DHHS will be notified immediately if Tellus becomes aware of any security breach and any unauthorized transmission or loss of any or all of the data collected or created for or provided by the DHHS. Tellus will immediately contain the breach to the extent possible and notify DHHS staff of the type of breach (e.g., loss of a laptop, unauthorized system access). We will work in accordance to your policies and requirements on identifying the manner in which the data was compromised, the type of data that was compromised, the names of affected customers or employees, and whether any person acted purposefully to cause a data security breach. In the event a breach is discovered, it will be included in our Security Incident Reporting. Within 24 hours from the occurrence of a security incident Tellus will communicate type of incident, impact and actions taken. This report will include system usage anomalies, the ID of the users involved and historical usage data.

Tellus employs traffic and network monitoring software as well AWS CloudWatch to monitor the network and provide optimum application performance. We utilize intrusion detection and DDOS mitigation software, maintain authentication and audit logs. Multi-Factor authentication, whenever possible, is used to restrict access to systems.

We use antivirus, anti-spyware and anti-rootkit software to prevent viruses and spyware from affecting system performance. Antivirus and anti-spyware software are automatically updated daily to provide the best level of protection from new viruses. Tellus ensures data security, including, but not limited to, encryption of all information that is confidential under state or Federal law, while in transmission and while resident on electronic media storage devices. Required data will be encrypted at rest and will be consistent with Federal Information Processing Standards (FIPS), and/or the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards.

Tellus currently holds an A rating with Security Scorecard and is committed to maintaining that top-tier rating.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
80	PS.7	Solution must have the capability to detect, prevent and reduce the potential likelihood or impact of fraudulent use of the EVV system.	Describe how solution has the capability to detect and prevent fraudulent use of the EVV system.	N/A	S	

Bidder's Response:

Tellus undergoes annual penetration testing and external audits by an independent third party at our major data centers to review performance against identified control objectives and will provide the DHHS with SOC1 reports for administrative services. We will work with the DHHS to remediate any identified vulnerabilities in a mutually agreed upon timeframe. Patching and corrections related to security vulnerabilities of a critical nature will occur within three (3) business days and those of a major nature within ten (10) business days.

Tellus' Security Operations Center (SOC) personnel monitor NIDS sensors 24/7 for security incidents. Tellus' SOC personnel provide Level 1 and 2 supports on security incidents and Security Engineering personnel provide Level 3 support for serious incidents. Tellus leverages Cisco as well as Open Source SNORT and McAfee in our IDS monitoring and reporting solution.

For monitoring emerging information security threats and vulnerabilities, Tellus has established and formally documented Incident Response/Crisis Management (IR/CM) policies and procedures. The Incident and Crisis Response Center (ICRC) tracks, documents, and reports security incidents to higher level Tellus officials, and addresses accidental or unauthorized disclosure, modification, or destruction of ePHI or confidential information by technical or non-technical workers (support, janitorial, maintenance, and or vendors), operations staff (IT, managers, etc.), criminal acts, natural disasters, and/or labor strikes.

The system identifies users by assigning unique user IDs, and the system can only be accessed through mandatory password standards (in terms of length, character requirements, scheduled resets and other policies set by the DHHS). Automatic logout is performed after a set period of inactivity, which can be configured per your requirements, for all types of access to the system.

User accounts are typically disabled after 5 unsuccessful attempts. Users and system administrators will not be able to have a shared account, so administrator functions are never assigned to basic user accounts. We look forward to supporting you in establishing procedures for role attribution and training.

For our EVV solution, identification on data collection devices is confirmed using credentials that would have been provided to the Provider (User ID / Password). The FOB/SAD solution uses the Automatic Number Identification (ANI), a method that identifies that the call is coming from the participant’s home phone, to confirm the participant’s name.

For our mobile solution there are more options that can be incorporated into the application to confirm the identity of caregivers and participants (available options are dependent upon hardware compatibility).

- Fingerprint identification (mobile device)
- Biometric Voice identification (optional, not included in this proposal offering)
- Facial Recognition (optional, not included in this proposal offering)
- 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.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
81	PS.8	Solution must have the ability to monitor, track and report any modifications to the EVV system data. Solution must have the ability to track and report modifications to the EVV system data input elements after the direct service worker has checked in or out for services, including the name of the provider staff making the changes and the reason for changes.	Describe how solution has the ability to track and report modifications to the EVV system data input elements after the direct service worker has checked in or out for services, including the name of the provider staff making the changes and the reason for changes.	N/A	S	

Bidder's Response:

Transactions that do not pass the matching logic established in the business rules will require remediation by the User prior to processing. Transactions will be permitted to be modified for sixty (60) calendar days from the data of service. A User must request and receive payer approval to make changes to visits after that period has expired.

Users will be permitted to modify some fields and prevented from modifying other fields. Per current requirements, Users cannot change:

- Actual Service delivery date
- Actual Service delivery clock-in time
- Actual Service delivery clock-out time

All data entry and edit into the application is tracked by an audit log. At a minimum, the audit log will capture the following information for all changes to delivered service data elements:

- Data elements changed
- Name of the user making the changes
- Date the changes were made
- Reason Code(s)
- Visit maintenance date

Once delivered service data is modified, matching rules will attempt to re-validate the visit. If the transaction data meets the rules and the User confirms the transaction, the data will achieve "Matched On-Hold" status and is ready to be released.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
82	PS.9	Solution must have the capability to limit providers' authority to modify service entries or input manual service entries based on program rules which may vary between programs. This must include limiting the number or percentage of manual service entries a provider is allowed to enter.	Describe how solution has the capability to limit providers' authority to modify service entries or input manual service entries based on program rules which may vary between programs. This includes limiting the number or percentage of manual service entries a provider is allowed to enter.	N/A	S	

Bidder's Response:

Business rules determine the limitations on authority as well as number or percentage of manual service entries a provider is allowed to enter. If the DHHS wants to restrict this based on program, the business rules will be established to do so. Business rules will be defined during the requirements gathering phase of the engagement.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
83	PS.10	Solution must allow for multi-factor authentication compatible with NIST SP 800-53 guidance for all or specific categories of users as determined by DHHS.	Describe how solution provides multi-factor authentication method of access control for all users as determined by DHHS.	N/A	S	

Bidder's Response:

Role-based account permissions are used to provide native user authentication based on account name, username and a user-supplied password. User password is stored in the database and hashed using one-way BCrypt hashing mechanism that makes it impossible to decrypt and extremely resistant to brute force search attacks. Multi-factor authentication compatible with NIST SP 800-53 guidance for all specific categories of users is available if determined necessary by the DHHS.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
84	PS.11	Solution must provide for secure storage and complete, full-time online accessibility of all EVV data through	Describe how solution provides for Secure storage and complete, full-time online accessibility of all EVV data	N/A	S	

	<p>defined security roles. This must include, but is not limited to the following:</p> <ul style="list-style-type: none"> a. DHHS: Division of Medicaid and Long-Term Care Services; Division of Developmental Disabilities; DHHS Financial Services: Financial and Program Analysis; and Information Systems and Technology (IS&T); b. The Medicaid fiscal agent (FA and AWC) and any other state Medicaid Contractor(s) designated by DHHS; c. Attorney General's Office: Medicaid Fraud and Patient Abuse Unit; d. All support coordination agencies, case managers, and care coordinators designated by DHHS; and e. Medicaid enrolled providers of EVV mandatory services solely with respect to the specific service types and visits for which they are billing, the individual beneficiaries they are serving, and consistent with the applicable approved prior authorizations and service plans. 	<p>through defined security roles. This includes but is not limited to the entities identified in a-e.</p>			
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Bidder's Response:

The Tellus eVV solution uses Amazon Relational Database Service (RDS) to host our database server. Amazon RDS runs on the same highly reliable, secure infrastructure previously discussed. Amazon RDS synchronously replicates the data to a standby instance in a different Availability Zone (different datacenter). RDS provides the virtual database service component of the infrastructure. RDS is preferable over traditional database hosting options due to built-in automation of standard database operations, including automated backups, auto DB snapshots, read-replica capability, and multi-AZ deployment and fail-over functionality. Database backup snapshots are taken at regular intervals and sent to AWS S3 encrypted storage.

- In production we provision Multi-AZ DB Instances. If the primary node fails, Amazon RDS performs an automatic failover to the standby node without manual intervention. When a failover is performed, there is a very short period, (typically minutes), during which the primary node is not accessible.
- MySQL is the standard, recommended configuration for RDS. Note that RDS is not explicitly FedRAMP certified, but supports full end-to-end encryption, including both encryption-at-rest and encryption-in-transit.

Full-time online accessibility to the secure database can be granted to the defined security roles.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
85	PS.12	Solution must limit access to only the authorized group of stakeholders.	Describe how solution limits access to only the authorized individual stakeholders.	TA.BI.9	S	

Bidder's Response:

All data is stored securely in our HIPAA compliant-data center with access restricted to only authorized stakeholders. Tellus eVV allows authorized users to design, save and share configurable dashboards and reports. Our Reporting and Business Intelligence tools are designed to meet your requirements and deliver key performance indicators that enable sound decision-making. A visual dashboard can be configured to display key indicators of value to the user.

As a result of the high level of configurability of Tellus eVV, custom reports can be developed in accordance with the DHHS' requirements.

In addition, our reporting features are designed to narrow in on key indicators known to be potential markers for fraud, waste and abuse.

The State will have the ability to view data for all providers, whereas individual providers are limited to viewing only their own data.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
86	PS.13	Solution must protect electronic protected health information (ePHI), personally identifiable information (PII), and federal tax information (FTI) from improper alteration or destruction, including authentication mechanisms to corroborate that ePHI, PII, and FTI has not been altered or destroyed in an unauthorized manner.	Describe how solution protects electronic protected health information (ePHI), personally identifiable information (PII), and federal tax information (FTI) from improper alteration or destruction, including authentication mechanisms to corroborate that ePHI, PII, and FTI has not been altered or destroyed in an unauthorized manner.	TA.SP.10	S	

Bidder's Response:

Tellus is required to adhere to applicable federal and state policies and standards, so we understand the need to comply with the requirements and standards specified by the DHHS. Our solutions comply with federal requirements, such as HIPAA and the Affordable Care Act (ACA), and align with Medicaid Information Technology Architecture (MITA) 3.0 and the Centers for Medicare & Medicaid Services (CMS) Seven Conditions and Standards. Additionally, our solutions comply with information security regulatory and control standards, such as Federal Information Security Management Act of 2002 (FISMA), HIPAA, CMS MARS-E, IRS 1075, and client security policies, as well as Tellus security policies. Tellus is thoroughly versed in protecting PII, ePHI, FTI and other sensitive information. All Tellus employees must take annual refresher training in protecting PII, ePHI and other sensitive client information.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
87	PS.14	Solution must verify that a person or entity seeking access to electronic protected health information (ePHI), PII or FTI is the one claimed.	Describe how solution verifies that a person or entity seeking access to electronic protected health information (ePHI), PII or FTI is the one claimed.	TA.SP.11	S	

Bidder's Response:

The ability to designate role-based access controls to restrict and/or grant user access to certain functions and/or information is a valuable configuration feature for data security and integrity. Tellus eVV includes robust access controls with the ability to view and/or edit specific fields of information controlled by both role-based permissions and secure, private login credentials. The administrator and payer Consoles provide all the functions that an administrator, payer, consumer-directed participant, or provider needs to establish roles and set permissions.

Users access the system with valid login credentials, a login ID, and password. Participant data cannot be accessed without secure login credentials and the creation of a schedule linking a participant to a caregiver. The schedule must be created by an administrative user associated with a provider or fiscal intermediary.

Therefore, the criteria to create multiple layers of authentication will include:

- User must be created with secure login credentials providing a unique cell phone or email address
- User must be associated with a member by an administrator associated with a provider or fiscal intermediary
- User must log in to mobile app to start and end visit

Caregivers access the mobile app on their device using their private login credentials and either a personal identification number or a biometric indicator, like a fingerprint, depending on the capability of the hardware. A digital signature for both the caregiver and the participant is captured at the end of each visit to verify services were delivered. The signatures are stored in the visit record.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
88	PS.15	Solution must follow regulations that govern the safeguarding of information about applicants and beneficiaries. The following is the minimal set of information that must be safeguarded (1) Names, addresses and phone numbers; (2) Medical services provided; (3) Social and economic conditions or circumstances; (4) Agency evaluation of personal information; (5) Medical data, including diagnosis and past history of disease or disability; (6) Any information received for verifying income eligibility and amount of medical assistance payments. Income information received from the Social Security Administration (SSA) or the Internal Revenue Service must be safeguarded according to the requirements of DHHS that furnished the data; and	Describe how solution follows regulations that govern the safeguarding of information about applicants and beneficiaries as listed in the requirement, including all safeguard procedures and compensating controls according to the HIPAA Security Rule. Describe the System Security Plan to be delivered prior to implementation, and if a draft is available provide the draft plan.	TA.SP.15	S	

	(7) Any information received in connection with the identification of legally liable third-party resources.				
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Bidder's Response:

Tellus is fully HIPAA-compliant and ensures data security encryption of all information while in transmission and while at rest on electronic media storage devices. Required data is encrypted consistent with Federal Information Processing Standards (FIPS) and NIST cryptographic standards.

In RDS Databases:

- Encryption algorithm used is AES 256 Encryption
- Encryption algorithm used for one-way hashing is SHA256

For the application tier, low-level bindings on all its native queries are used to minimize the possibility of attacks such as SQL injection. For additional security, stored procedures are used to retrieve data, and Object Relational Mapping is used to minimize the need for hand coding SQL statements that could be vulnerable to exploits.

All ePHI data is encrypted in transmission and at rest when stored in a database or filesystem. We use Transparent Data Encryption (TDE) and adhere to HIPAA compliance.

The process of retrieving visit verifications in compliance with HIPAA standards requires all communications (application ↔ database ↔ mobile app ↔ server) to happen over a secure HTTPS connection. We ensure that ePHI data is encrypted when transmitted and encrypted at rest by using SSL/TLS and database encryption. Our hosting provider has achieved a number of certifications including, but not limited to, SOC 1,2,3, FedRAMP, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>)

Role-based account permissions are used to provide native user authentication based on account name, username and a user-supplied password. User password is stored in the database and hashed using one-way BCrypt hashing mechanism that makes it impossible to decrypt and extremely resistant to brute force search attacks

Industry standard OAuth2 protocols are used for authentication. Every application's access to backend processes via REST API requires an authentication token to be passed with each API call.

JSON Web tokens (JWT) are used for API Authentication. JWT is an open standard (RFC 7519) that defines a compact and self-contained way to securely transmit information between parties as a JSON object. This information can be verified and trusted because it is digitally signed. JWTs are signed using a secret JWT token sent to the API via standard HTTP Authorization header. Token payload contains user information restricting API access to certain endpoints.

To further control user access, JWT tokens are configured to expire after a specified period of time based on application rules. For example, tokens requested by the EVV mobile application expire in less time than Tellus EVV Web Console tokens. To facilitate user ability to stay logged into the application, Tellus utilizes standard OAuth2 Refresh Tokens. Refresh Token expiration is configured based on client specifications.

Open Web Application Security Project (OWASP) standards are baseline for the Tellus eVV Mobile app. OWASP is an organization supporting open standards, policies and processes promoting application security. OWASP collaborated with the European Network and Information Security Agency (ENISA) to build a set of controls for mobile applications. They jointly published the "Smartphone Secure Development Guideline" and recommend the following principles:

- ID & Protect Sensitive Data on the Mobile Device
- Protect Authentication Credentials
- Protect Data in Transit
- Strong User Authentication, Authorization & Session Management
- Secure Backend Services & Server
- Secure Third-Party Integration
- Collect Consent for Collection & Use of User Data
- Protect Paid-for Resources & Services
- Secure Distributions & Provisioning of Mobile Applications

- Avoid/Safely Use Runtime Code Interpreters

Each principle is thoroughly documented, outlining risks and methods for mitigating those risks. Tellus eVV mobile developers and testers strive to ensure our apps comply with OWASP standards.

A detailed System Security Plan will be delivered to the State of Nebraska prior to implementation.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
89	PS.16	<p>Solution must comply with provisions for Administrative Simplification under the HIPAA of 1996 to ensure the confidentiality, integrity, and availability of ePHI, PII and FTI in transit and at rest, including: HIPPA Privacy Rule</p> <ul style="list-style-type: none"> • Provide safeguards as described in the October 22, 1998 State Medicaid Director letter, Collaborations for Data Sharing between State Medicaid and Health Agencies; • Performs regular audits; and • Supports incident monitoring and reporting. 	<p>Describe how solution complies with provisions for Administrative Simplification under the HIPAA of 1996 to ensure the confidentiality, integrity and availability of ePHI, PII and FTI in transit and at rest, including all safeguards as described in the October 22, 1998 state Medicaid Director letter, Collaborations for Data Sharing between State Medicaid and Health Agencies. Describe regular audits performed. Describe how solution supports incident monitoring and reporting.</p>	TA.SP.18	S	

Bidder's Response:

Tellus ensures data security encryption of all information while in transmission and while at rest on electronic media storage devices. Required data is encrypted consistent with Federal Information Processing Standards (FIPS) and NIST cryptographic standards.

In RDS Databases:

- Encryption algorithm used is AES 256 Encryption
- Encryption algorithm used for one-way hashing is SHA256

For the application tier, low-level bindings on all its native queries are used to minimize the possibility of attacks such as SQL injection. For additional security, stored procedures are used to retrieve data and Object Relational Mapping is used to minimize the need for hand coding SQL statements that could be vulnerable to exploits.

All ePHI, PII and FTI data is encrypted in transmission and at rest when stored in a database or filesystem. We use Transparent Data Encryption (TDE) and adhere to HIPAA compliance.

The process of retrieving visit verifications in compliance with HIPAA standards requires all communications (application ↔ database ↔ mobile app ↔ server) to happen over a secure HTTPS connection. We ensure that ePHI data is encrypted when transmitted and encrypted at rest by using SSL/TLS and database encryption. Our hosting provider has achieved a number of certifications including, but not limited to, SOC 1,2,3, FedRAMP, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>).



In accordance with guidelines issued by the Office of the National Coordinator for Health Information Technology (ONC) and the HHS Office for Civil Rights (OCR) Tellus has completed a HIPAA Security Risk Assessment to establish and periodically review internal policies and procedures emphasizing their compliance with HIPAA provisions addressing privacy, security and breach notification.

All employees are required to complete HIPAA training as part of the new hire onboarding process and annually thereafter. Employees with access to ePHI are required to undergo a Level II background check as part of the new hire onboarding process. Educational lunch and learns are conducted to ensure our staff understands the importance of vigilant compliance with policies and procedures. To be effective, policies and procedures must be adhered to in practice, and that requires both knowledge and diligence.

Our incident monitoring policy defines examples of potential security incidents and how those incidents will be documented and reported. Each type of incident defines the specific information to be captured and formally documented. Reports are shared internally as well as with affected clients, business associates and other parties. Specifically, who the report should be shared with, and when, depends upon the incident. Some incidents may require a review of policies and procedures and maybe even a corrective action plan.

Unique ID	1505.11a1Organizational.13				
Response Status	Complete				
Level	1	Type	Organizational		
Related HITRUST CSF Control	11.a Reporting Information Security Events				
Scope	In Scope	Applicability	Applicable		
HITRUST CSF Requirement Statement	A formal security incident response program has been established to respond, report (without fear of repercussion), escalate and treat breaches and reported security events or incidents. Organization-wide standards are specified for the time required for system administrators and other personnel to report anomalous events to the incident handling team, the mechanisms for such reporting, and the kind of information that should be included in the incident notification. This reporting includes notifying internal and external stakeholders, the appropriate community Computer Emergency Response Team, and law enforcement agencies in accordance with all legal or regulatory requirements for involving such organizations in computer incidents.				
Your Maturity Assessment	Policy 5. Fully Compliant (100%)	Process 5. Fully Compliant (100%)	Implemented 5. Fully Compliant (100%)	Measured 5. Fully Compliant (100%)	Managed 5. Fully Compliant (100%)
Maturity Rating (Score)	5+ (100.00)				
Residual Risk Rating	Very High				
CAP Status	CSF Compliant				
Comments	Jira A2TCS-207, Michael B. Morell, CISSP#431307				

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
90	PS.17	Solution must verify identity of all users, and deny access to invalid users. For example: <ul style="list-style-type: none"> Requires unique sign-on credentials (ID and password) 	Describe how solution verifies identity of all users, and denies access to invalid users.	TA.SP.22	S	

	<ul style="list-style-type: none"> Requires authentication of the receiving entity prior to a system-initiated session, such as transmitting responses to eligibility inquiries. 				
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Bidder's Response:

Access to the Tellus eVV solution is tightly controlled using secure login identification credentials and device access controls. System security is integrated into the system's basic design. We have a number of standard security features to make sure that only authorized users can access the system and its data, including user authentication through IDs and passwords, functional access controls, multiple firewalls, and different virus protection products. Data transmitted between external systems and our servers are protected by authentication and encryption, while secure file transfer protocols (SFTP) are always used for data file transmissions.

Tellus has implemented secure log in procedures that include a warning notice, limit to the number of unsuccessful attempts and enforces a delay of 30 minutes without specific authorization from an administrator, records the number of unsuccessful and successful attempts, and does not display the password when being entered. Tellus also ensures that redundant user IDs are not issued to other users and that all users are uniquely identified and authenticated for both local and remote access to information systems.

Unique ID	11102.01p1Organizational.1				
Response Status	Complete				
Level	1	Type	System		
Related HITRUST CSF Control	01.p Secure Log-on Procedures				
Scope	In Scope	Applicability	Applicable		
HITRUST CSF Requirement Statement	The organization has implemented secure log-on procedures that include a warning notice, limits the number of unsuccessful attempts to six and enforces a delay of 30 minutes without specific authorization from an administrator, records the number of unsuccessful and successful attempts, and does not display the password when being entered.				
Your Maturity Assessment	Policy	Process	Implemented	Measured	Managed
	5. Fully Compliant (100%)	5. Fully Compliant (100%)	5. Fully Compliant (100%)	5. Fully Compliant (100%)	5. Fully Compliant (100%)
Maturity Rating (Score)	5+ (100.00)				
Residual Risk Rating	Very High				
CAP Status	CSF Compliant				
Comments	Jira A2TCS-207, Michael B. Morell, CISSP#431307				

Unique ID	11109.01q1Organizational.57				
Response Status	Complete				
Level	1	Type	System		
Related HITRUST CSF Control	01.q User Identification and Authentication				
Scope	In Scope	Applicability	Applicable		
HITRUST CSF Requirement Statement	The organization ensures that redundant user IDs are not issued to other users and that all users are uniquely identified and authenticated for both local and remote access to information systems.				
Your Maturity Assessment	Policy	Process	Implemented	Measured	Managed
	5. Fully Compliant (100%)	5. Fully Compliant (100%)	5. Fully Compliant (100%)	5. Fully Compliant (100%)	5. Fully Compliant (100%)
Maturity Rating (Score)	5+ (100.00)				
Residual Risk Rating	Very High				
CAP Status	CSF Compliant				
Comments	Jira A2TCS-207, Michael B. Morell, CISSP#431307				

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
91	PS.18	Solution must enforce password policies for length, character requirements, and updates.	Describe how solution enforces password policies for length, character requirements and updates.	TA.SP.24	S	

Bidder's Response:

Tellus eVV is highly customizable by payer and program in the form of configurations, business rules, user roles and permissions, parameters, consoles, reporting and integrations. During the business requirements gathering phase of the project, business analysts will work with DHHS program personnel to define the customized criteria for the implementation.

Tellus has developed questionnaires to facilitate this process. Password criteria is among the configurations and includes requirements for password length, characters, updates and expiration.

Tellus has implemented the following policies to ensure login rules, credentials and passwords comply with HIPAA security standards.

Unique ID	11103.01p2Organizational.12				
Response Status	Complete				
Level	2	Type	System		
Related HITRUST CSF Control	01.p Secure Log-on Procedures				
Scope	In Scope	Applicability	Applicable		
HITRUST CSF Requirement Statement	The logon procedure for the OS should minimize the opportunity for unauthorized access by disclosing the minimum amount of information about the system, limiting the number of unsuccessful logon attempts to three and enforcing the disconnect of the data link connections, sending an alarm to the system console, setting the number of password retries commensurate with the minimum length of the password and value of the information protected, limiting the maximum and minimum time allowed for the logon procedure, not transmitting passwords in clear text over the network, not displaying system or application identifiers until the logon process is successfully completed, not providing help messages during the procedure, validating the logon information only on completion of all input data, and not indicating which part of the logon was incorrect if an error condition arises.				
Your Maturity Assessment	Policy 5. Fully Compliant (100%)	Process 5. Fully Compliant (100%)	Implemented 5. Fully Compliant (100%)	Measured 5. Fully Compliant (100%)	Managed 5. Fully Compliant (100%)
Maturity Rating (Score)	5+ (100.00)				
Residual Risk Rating	Very High				
CAP Status	CSF Compliant				
Comments	Jira A2TCS-207, Michael B. Morell, CISSP#431307				

Unique ID	1111.01b2System.1				
Response Status	Complete				
Level	2	Type	System		
Related HITRUST CSF Control	01.b User Registration				
Scope	In Scope	Applicability	Applicable		
HITRUST CSF Requirement Statement	Group, shared or generic accounts and passwords (e.g., for first-time log-on) are not used.				
Your Maturity Assessment	Policy 5. Fully Compliant (100%)	Process 5. Fully Compliant (100%)	Implemented 5. Fully Compliant (100%)	Measured 5. Fully Compliant (100%)	Managed 5. Fully Compliant (100%)
Maturity Rating (Score)	5+ (100.00)				
Residual Risk Rating	Very High				
CAP Status	CSF Compliant				
Comments	Jira A2TCS-207, Michael B. Morell, CISSP#431307				



Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
92	PS.19	Solution must support a user security profile that controls user access rights to data categories and system functions.	Describe how solution supports a user security profile that controls user access rights to data categories and system functions.	TA.SP.25	S	

Bidder's Response:

Access to components of the application and the ability to view and write to specific fields is controlled by secure, private login credentials as well as by role-based permissions. User roles are defined during the business requirements gathering phase of the project.

Access can be granted at the Module level. The ability to view data can be restricted at the field level so a Provider Agency Scheduler may be able to view some components of the participant record like name, phone number, address and services to be rendered. However, Medicaid ID can be hidden from view.

In addition, the ability to Enter/Modify data can be restricted by role. As an example, the participant address of record can only be changed by a Payer data feed, but alternative addresses can be added by the Provider Administrator and the Scheduler.

Another example is associating tasks with service codes. If the DHHS authorizes providers to add and edit tasks, the Provider Administrator may be given permission to add tasks to service codes. If the DHHS wants tasks defined at the program level, the Provider Administrator will not be given permission to add tasks to service codes. That privilege will be retained by the Program Manager.

Tellus eVV is multi-tiered with access defined by user roles. Provider Agencies can only see data related to their Agency. Caregiver can only see data related to participants they serve. Payers can view data for all the Providers in their network.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
93	PS.20	Solution should permit supervisors or other designated officials to set and modify user security access profile.	Describe how solution permits supervisors or other designated officials to set and modify user security access profiles.	TA.SP.26	S	

Bidder's Response:

The Provider Administrator has the ability to set up and disable users near real time using functionality accessible via the Tellus eVV Web Console. Tellus uses role-based permissions to ensure only individuals who need access to protected information can access it. Users with administrative access can change the role of other application users to change their security access profile. If an Administrator at an agency decides they want to take care of participants instead of working in the office, another Administrator will remove the Administrator role from that user profile and add the Caregiver role. From that point forward, the Caregiver will only have access to information associated with participants they take care of.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure

94	PS.21	Solution must include procedures for accessing necessary electronic Protected Health Information (ePHI), and PII in the event of an emergency; and continue protection of ePHI and PII during emergency operations.	Describe how solution includes procedures for accessing necessary electronic Protected Health Information (ePHI) and PII in the event of an emergency. Describe procedures and compensations to ensure continued protection of ePHI and PII during emergency operations. This may include Disaster Recovery and Business Continuity plans which provide these protections.	TA.SP.27	S	
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Bidder's Response:

Tellus will provide a Disaster Recovery and Business Continuity plan prior to implementation. The Plan will contain procedures for data backup, restoration, and emergency mode operations in the event of hardware or software failures, human error, natural disaster or other unforeseeable emergencies.

The document is intended to provide guidance in the following areas:

- Maintaining effective communications during a crisis situation
- Ensuring the safety and welfare of employees, contractors and Tellus partners in the event of an emergency
- Eliminating, or at least minimizing the risk of, service disruptions to critical business functions caused by natural, technological or human error problems
- Quickly resuming critical operations in the event of an emergency using preset procedures that assure rapid and accurate recovery
- Identifying vital information and educating staff in the recovery of processes needed for long-term business continuity
- Identifying business continuity risks and proposed remediation processes to prevent or minimize long-term business impacts

Ensuring business continuity and ongoing communication with all the involved parties is the focus of our approach, from the moment a problem is first detected. Recovery objectives, restoration priorities and metrics are supported by the redundant failover systems provided by AWS which ensure the real-time activation of an alternate site for all storage, processing and communication functions of the EVV system. Teams with responsibility for recovering operations, managing the recovery process, notifying staff on necessary actions to be taken, evaluating the primary AWS cloud for damage and restoring the site to normal operations are all identified in the document.

The Disaster Recovery Plan document also outlines the existing and proposed disaster recovery processes and procedures for AWS specifically as they apply to your EVV deployment, along with the recovery mechanisms, staff, resources, alternate operations sites, alternate communications, and escalation procedures to accommodate anticipated scenarios that could disrupt or impair normal operations. Hardware and software configurations for AWS are identified for recovery requirements, along with risk mitigation procedures. Alternate AWS sites are identified should it be necessary to relocate operations in the recovery AWS site.

The document describes system recovery and reconstitution tasks, along with the testing and training exercises which are performed annually to ensure that the necessary technical and human resources are in place and ready to provide full system restoration (without deterioration of the initial security safeguards, or functionality) within a 24-hour time frame.

The Disaster Recovery Plan also evaluates the types of service interruptions which may impact the operations of the system, and the actions necessary to respond to these events. The primary goal is to restore access to the system for all users, while business continuity procedures are activated to stabilize normal operations and minimize the impact of natural and unplanned catastrophic events.

Incident Management procedures are included to support the understanding of the risks and threats of non-technical interruptions (e.g., bomb threats, terrorism, workplace violence, fire, flood, general weather-related incidents).

Checklists are provided to assist recovery teams in the execution of each of the phases of declaration of a disaster, relocation of operations, restoration of the primary site, and finally, returning to the primary location.

The basic assumptions upon which the Disaster Recovery Plan is predicated are:

- It addresses the “worst case” scenario, an event or circumstance that renders an AWS facility totally unusable for an undetermined amount of time
- Sufficient number of staff is available to carry out the required recovery steps
- Short-term outages, those of limited duration, are addressed and resolved using documented local operating procedures
- Recovery planning and formulation of an appropriate recovery strategy must be predicated upon a realistic assessment of risk and a cost-effective means of mitigating the worst-case type of risk
- The plan does not cover normal data backup procedures. Policies and procedures governing backups are developed and maintained by AWS based on the configuration. Documentation on backups can be obtained and reviewed upon written request

The Contingency Plan supports the Disaster Recovery Plan in the definition of procedures which apply when an unplanned event or problem renders some or all of the business functions of the EVV system temporarily unavailable. Its main purpose is to guarantee business continuity by identifying key roles and responsibilities, providing the necessary contact information, and established time frames for restoration objectives.

We look forward to working with the DHHS on a detailed Contingency Plan for the EVV system. The Contingency Plan is the direct result of our risk assessment and mitigation process: we are committed to adopting a proactive approach by classifying possible contingencies as risks and ranking them on the basis of both severity and likelihood of occurrence.

Mitigation and Contingency Action Plans are established based on the criteria and priorities resulting from this risk assessment process. The Project Manager is responsible for oversight of the execution of mitigation and contingency action plans for all identified risks. If a risk becomes a problem, it is communicated to all the stakeholders and the documented Contingency Plan is executed.

In regards to contingency plans related to hosting, Tellus’ systems reside in Amazon Web Services (AWS) and utilize AWS disaster recovery, failover and elasticity capabilities. The system runs in fifteen AWS datacenters in VA, OH and CA. Using various AWS regions and different physical datacenters within the same region ensures that the system is highly available and fault-tolerant.

The server environment is virtualized, which allows for portability in case the disaster affects the datacenter when the application server is running. Within minutes, a new instance of the same server is launched in a different datacenter in a different AWS availability zone or region. As a result, downtime is cut to minutes instead of hours.

By using AWS Elastic Load Balancing, Tellus achieves higher levels of efficiency to automatically route traffic across multiple instances and multiple Availability Zones (physical datacenters). Elastic Load Balancing ensures that only healthy Amazon application server instances receive traffic by detecting unhealthy instances and rerouting traffic across the remaining healthy instances. If additional computing capacity is required, systems are in place that will scale the application and database server layer to provide the required level of service.

A sample Disaster Recovery Plan is attached as Attachment A.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
95	PS.22	Solution should support the SMA (the covered entity) in its responsibility for: (i) Standard security management processes by implementing policies and procedures to prevent, detect, contain, and correct security violations.	Describe solution’s standard security management processes, including all items noted in the requirements.	TA.SP.3	S	

	<p>(ii) Implementation specifications, which are all required of the contractor:</p> <p>(A) Risk analysis: Conduct an accurate and thorough assessment of the potential risks, threats, and vulnerabilities to the confidentiality, integrity, and availability of electronic protected health information (ePHI), personally identifiable information (PII) and federal tax information (FTI) managed, stored and processed on behalf of the covered entity.</p> <p>(B) Risk management: Implement security measures sufficient to reduce risks, threats, and vulnerabilities to a reasonable and appropriate level to comply with § 164.306(a) (CFR 45.164.306).</p> <p>(C) Sanction policy: Apply appropriate sanctions against workforce members who fail to comply with the security policies and procedures of the covered entity.</p> <p>(D) Information system activity review: Implement procedures to regularly review records of information system activity, such as audit logs, access reports, and security incident tracking reports.</p>				
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Bidder's Response:

The Tellus solution will support the SMA in the responsibilities outlined in the requirement.

Tellus employs a comprehensive set of standard security management processes, procedures and policies to prevent, detect, contain and correct security violations. Tellus undergoes annual testing to identify risks, including but not limited to, penetration testing and external audits by an independent third party at our major data centers to review performance against identified control objectives and will provide the DHHS with SOC1 reports for administrative services. We will work with the DHHS to remediate any identified vulnerabilities in a mutually agreed upon timeframe. Patching and corrections related to security vulnerabilities of a critical nature will occur within three (3) business days and those of a major nature within ten (10) business days.

Tellus' Security Operations Center (SOC) personnel monitor NIDS sensors 24/7 for security incidents. Tellus' SOC personnel provide Level 1 and 2 supports on security incidents and Security Engineering personnel provide Level 3 support for serious incidents. Tellus uses Cisco as well as Open Source SNORT and McAfee in our IDS monitoring and reporting solution.

For monitoring emerging information security threats and vulnerabilities, Tellus has established and formally documented Incident Response/Crisis Management (IR/CM) policies and procedures. The Incident and Crisis Response Center (ICRC) tracks, documents, and reports security incidents to higher level Tellus officials, and addresses accidental or unauthorized disclosure, modification, or destruction of ePHI or confidential information by technical or non-technical workers (support, janitorial, maintenance, and or vendors), operations staff (IT, managers, etc.), criminal acts, natural disasters, and/or labor strikes. Appropriate sanctions will be applied when workforce members fail to comply with the security policies and procedures of the covered entity.

To mitigate security threats, including breaches, Tellus routinely monitors emerging information in the industry, system performance, and operations. Additionally, we are committed to providing training, manuals, procedures, and support to all stakeholders on how to prevent and report possible security incidents. These communication activities include security warning banners compliant with state, federal and other applicable standards. Our staff undergoes annual HIPAA and security training, which will be shared with the DHHS.

All data is always encrypted, at rest and in transit. We use LDAP protocols for authentication and authorization, with workflow mechanisms identifying and authenticating role-based permissions allowing users to access or edit information. The system identifies users by assigning unique user IDs, and the system can only be accessed through mandatory password standards (in terms of length, character requirements, scheduled resets and other policies set by the DHHS). Automatic logout is performed after a set period of inactivity, which can be configured per your requirements, for all types of access to the system.

User accounts are typically disabled after 5 unsuccessful attempts, but this is a configurable option. Users and system administrators will not be able to have a shared account, so administrator functions are never assigned to basic user accounts.

For our EVV solution, identification on data collection devices 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 incorporated into the application to confirm the identity of Providers and Recipients (available options are dependent upon hardware compatibility).

- Fingerprint identification (mobile device)
- Biometric Voice identification (optional, not included in this proposal offering)
- Facial Recognition (optional, not included in this proposal offering)
- 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.

Tellus has procedures in place to regularly review records of information system activity, including but not limited to, audit logs, access reports and security incident tracking reports.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
96	PS.23	Solution should alert appropriate staff authorities of potential violations of privacy safeguards, such as inappropriate access to confidential information.	Describe solution’s capabilities for alerting appropriate staff authorities of potential violations of privacy safeguards, including inappropriate access to confidential information.	TA.SP.30	S	

Bidder’s Response:

In the event we determine that access to Customer Data has been breached or potentially breached, Tellus shall immediately contain the breach to the extent possible and notify the DHHS staff of the type of breach (e.g., loss of a laptop, unauthorized system access, etc.). We will work in accordance with your policies and requirements on identifying the manner in which the data was compromised, the type of data that was compromised, the names of affected customers or employees, and whether any person acted purposefully to cause a data security breach. In the event a breach is discovered, it will be included in our Security Incident Reporting. As soon as practicably possible after the occurrence of a security incident, Tellus will communicate type of incident, impact and actions taken. This report will include system usage anomalies, the ID of the users involved and historical usage data.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
97	PS.24	Solution should provide "right of access" and "request for access" to individuals to protect ePHI, and PII in a timely manner, per agreed turnaround times, that allows it to be included in responses to inquiries and report requests.	Describe solution's process capabilities for providing 'right of access' and 'request for access' to individuals to protect ePHI, and PII in a manner that allows it to be included in responses to inquiries and report requests. Note timeframes required to provide information.	TA.SP.31	S	
<p>Bidder's Response:</p> <p>Tellus only allows access to ePHI and PII to state agencies, payers, claims clearinghouses, providers and fiscal intermediaries who are business associates contracted to receive the information required in the service continuum. Tellus does not share protected information outside of contractual relationships. Access to data is restricted based on login credentials and role-based permissions and monitored by logging and auditing tools that identify a user's activities within the application.</p>						

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
98	PS.25	Solution should contain verification mechanisms that are capable of authenticating authority (as well as identity) for the use or disclosure requested. For example: <ul style="list-style-type: none"> • Denies general practitioner inquiry for recipient eligibility for mental health services • Permits inquiries on claim status only for claims submitted by the inquiring provider. 	Describe solution's verification mechanisms that are capable of authenticating authority (as well as identity) for the use or disclosure requested.	TA.SP.32	S	
<p>Bidder's Response:</p> <p>Tellus eVV is a SaaS-based application that is highly customizable and configurable by payer and program in the form of configurations, business rules, user roles and permissions, parameters, consoles, reporting and integrations. During the business requirements gathering phase of the project, business analysts will work with State program personnel to define the customized criteria for DHHS' implementation.</p> <p>Permissions to access, view, edit or disclose information can be established at the payer, program, plan, recipient or field levels. Both scenarios outlined are supported by our solution.</p>						

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure

99	PS.26	Solution must support encryption and decryption of stored ePHI, PII, and FTI or an equivalent alternative protection mechanism.	Describe solution's capabilities for supporting encryption and decryption of stored ePHI, PII and FTI or an equivalent alternative protection mechanism.	TA.SP.33	S	
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Bidder's Response:

The Tellus eVV Solution meets the State security standards for transmission of personal information as outlined in the RFP. Tellus ensures data security, including but not limited to, encryption of all ePHI, PII and FTI that is confidential under state or federal law, while it's in transmission and while it's resident on electronic media storage devices. Required data is encrypted at rest and will be consistent with Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards.

Tellus encrypts in-flight (being transmitted to/from/between Tellus systems) data using transport and/or message level encryption. In flight standards include:

- TLS: 2, TLSv1.1 and SSLv2Hello
- Key Agreement Protocol: Ephemeral Diffie-Hellman Key with a size of 2048.
- Cipher Suites: Ability to use up to 43 different Cipher Suites (Examples: TLS_RSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_ECDSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_RSA_WITH_AES_256_GCM_SHA384, TLS_DHE_RSA_WITH_AES_256_GCM_SHA384).

Data at rest (stored in databases, file structures, object storage, etc.) is encrypted using Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards including:

- Encryption algorithm used is AES 256 Encryption
- Encryption algorithm used for one-way hashing is SHA256

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
100	PS.27	Solution must support encryption of ePHI, PII and FTI that is being transmitted, as appropriate.	Describe solution's capability to support encryption of ePHI, PII and FTI that is being transmitted.	TA.SP.34	S	

Bidder's Response:

The Tellus eVV Solution meets the State security standards for transmission of personal information as outlined in the RFP. Tellus ensures data security, including but not limited to, encryption of all ePHI, PII and FTI that is confidential under state or federal law, while it's in transmission and while it's resident on electronic media storage devices. Required data is encrypted at rest and will be consistent with Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards.

Tellus encrypts in-flight (being transmitted to/from/between Tellus systems) data using transport and/or message level encryption. In flight standards include:

- TLS: 2, TLSv1.1 and SSLv2Hello
- Key Agreement Protocol: Ephemeral Diffie-Hellman Key with a size of 2048.
- Cipher Suites: Ability to use up to 43 different Cipher Suites (Examples: TLS_RSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_ECDSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_RSA_WITH_AES_256_GCM_SHA384, TLS_DHE_RSA_WITH_AES_256_GCM_SHA384).

Data at rest (stored in databases, file structures, object storage, etc.) is encrypted using Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards including:

- Encryption algorithm used is AES 256 Encryption
- Encryption algorithm used for one-way hashing is SHA256

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
101	PS.28	Solution should support integrity controls to guarantee that transmitted ePHI, PII, and FTI are not improperly modified without detection (e.g. provide secure claims transmission).	Describe solution's capability to support integrity controls to guarantee that transmitted ePHI, PII and FTI are not improperly modified without detection.	TA.SP.35	S	

Bidder's Response:

The Tellus EVV web-based application, mobile application and APIs deliver information through both public and private interfaces. Data security is managed through various protocols and user authentication and authorization. Secure Sockets Layer (SSL) encryption is the standard for communications over the Internet. When configured to use SSL, the application enforces secure communications in all private areas of the website by disallowing non-secure HTTP requests and redirecting the browser to the secure protocol. Database security begins with hardened, redundant Amazon Government Cloud (AWS) database servers. AWS is a top-tier, SAS 70 Type II certified datacenter. The database and application are configured in separate tiers of the physical systems, with strict firewall rules partitioning the servers.

AWS Identity and Access Management (IAM) policies are used to assign permissions that determine who is allowed to manage database resources. Security groups control what application server instances are allowed to connect to the database.

Tellus ensures data security encryption of all information while in transmission and while at rest on electronic media storage devices. Required data is encrypted consistent with Federal Information Processing Standards (FIPS) the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards..

Tellus encrypts in-flight (being transmitted to/from/between Tellus systems) data using transport and/or message level encryption. In flight standards include:

- TLS: 2, TLSv1.1 and SSLv2Hello
- Key Agreement Protocol: Ephemeral Diffie-Hellman Key with a size of 2048.
- Cipher Suites: Ability to use up to 43 different Cipher Suites (Examples: TLS_RSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_ECDSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_RSA_WITH_AES_256_GCM_SHA384, TLS_DHE_RSA_WITH_AES_256_GCM_SHA384).

Data at rest (stored in databases, file structures, object storage, etc.) is encrypted using Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards including:

- Encryption algorithm used is AES 256 Encryption
- Encryption algorithm used for one-way hashing is SHA256

For the application tier, low-level bindings on all its native queries are used to minimize the possibility of attacks such as SQL injection: For additional security, stored procedures are used to retrieve data and Object Relational Mapping is used to minimize the need for hand coding SQL statements that could be vulnerable to exploits.

All ePHI, PII and FTI data is encrypted in transmission and at rest when stored in a database or filesystem. We use Transparent Data Encryption (TDE) and adhere to HIPAA compliance.

The process of retrieving visit verifications in compliance with HIPAA standards requires all communications (application ↔ database ↔ mobile app ↔ server) to happen over a secure HTTPS connection. We ensure that ePHI, PII and FTI is encrypted when transmitted and encrypted at rest by using SSL/TLS and database encryption. Our hosting provider has achieved a number of certifications including, but not limited to, SOC 1,2,3, FedRAMP, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>)

Role-based account permissions are used to provide native user authentication based on account name, username and a user-supplied password. User password is stored in the database and hashed using one-way BCrypt hashing mechanism that makes it impossible to decrypt and extremely resistant to brute-force search attacks

Industry standard OAuth2 protocols are used for authentication. Every application's access to backend processes via REST API requires an authentication token to be passed with each API call.

JSON Web tokens (JWT) are used for API Authentication. JWT is an open standard (RFC 7519) that defines a compact and self-contained way to securely transmit information between parties as a JSON object. This information can be verified and trusted because it is digitally signed. JWTs are signed using a secret JWT token sent to the API via standard HTTP Authorization header. Token payload contains user information restricting API access to certain endpoints.

To further control user access, JWT tokens are configured to expire after a specified period of time based on application rules. For example, tokens requested by the EVV mobile application expire in less time than EVV Console tokens. To facilitate user ability to stay logged into the application, Tellus uses standard OAuth2 Refresh Tokens. Refresh Token expiration is configured based on client specifications.

Open Web Application Security Project (OWASP) standards are baseline for Tellus eVV Mobile app. OWASP is an organization supporting open standards, policies and processes promoting application security. OWASP collaborated with the European Network and Information Security Agency (ENISA) to build a set of controls for mobile applications. They jointly published the "Smartphone Secure Development Guideline" and recommend the following principles:

- ID & Protect Sensitive Data on the Mobile Device
- Protect Authentication Credentials
- Protect Data in Transit
- Strong User Authentication, Authorization & Session Management
- Secure Backend Services & Server
- Secure Third-Party Integration
- Collect Consent for Collection & Use of User Data
- Protect Paid-for Resources & Services
- Secure Distributions & Provisioning of Mobile Applications
- Avoid/Safely Use Runtime Code Interpreters

Each principle is thoroughly documented outlining risks and methods for mitigating those risks. Tellus eVV mobile developers and testers strive to ensure our apps comply with OWASP standards.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
102	PS.29	Solution should provide data integrity of ePHI, PII and FTI by preventing and detecting improper alteration or destruction (e.g. double keying, message authentication, digital signature, check sums etc.).	Describe solution's capability to provide data integrity of ePHI, PII and FTI by preventing and detecting improper alteration or destruction.	TA.SP.36	S	

Bidder's Response:

Tellus ensures that the design and implementation of applications takes into account the risks noted in the requirement as well as of processing failures that may lead to a loss of integrity. Tellus takes steps to minimize risk by employing appropriate data integrity controls. Data integrity controls address:

1. The use of add, modify and delete functions to implement changes to data
2. Procedures to prevent programs running in the wrong order or running after failure of prior processing.
3. The use of appropriate programs to recover from failures to ensure the correct processing of data.
4. Protection against attacks using buffer overruns/overflows.
5. A checklist for validation checking is prepared, activities documented, and the results kept secure. The checks to be incorporated include the following and can be manual:
 - a. Session or batch controls, to reconcile data file balances after transaction updates.
 - b. Balancing controls, to check opening balances against previous closing balances, namely: Run-to-run controls, file update totals, program-to-program controls, validation of system-generated input data.
 - c. Checks on the integrity, authenticity or any other security feature of data or software downloaded, or uploaded, between central and remote computers.
 - d. Hash totals of records and files.
 - e. Checks to ensure that application programs are run at the correct time.

Checks to ensure that programs are run in the correct order and terminate in case of failure, and that further processing is halted until the problem is resolved; and creating an automated log of the activities involved in the processing.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
103	PS.30	Solution must provide the capability that all system activity can be traced to a specific user or entity.	Describe solution's capability for all system activity to be traced to a specific user or entity.	TA.SP.37	S	

Bidder's Response:

All data entered and modified in the solution will be logged by user along with the date and time the entry was made. Reporting based on audit log activity is supported. We can identify user activity including access to specific member data. The EVV system tracks access and activity by user login ID which is easily associated with username. The date, time, device IP address and actions performed are all captured.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
104	PS.31	Solution should identify and respond to suspected or known security and privacy incidents; mitigate any harmful effects of security and privacy incidents that are known to the covered entity or business associate; and document security incidents and their outcomes. (Such as exceed maximum number of logon attempts.)	Describe how solution identifies and responds to suspected or known security and privacy incidents; mitigates any harmful effects of security and privacy incidents that are known to the covered entity or business associate; and document security incidents and their outcomes.	TA.SP.38	S	

Bidder's Response:

We take our obligation to protect sensitive information very seriously and design all aspects of the EVV system to include the necessary safeguards to make sure sensitive information is not put at risk. Tellus has not experienced a breach or not met security/privacy requirements. Our processes and procedures comply with HIPAA and HITECH regulations for Administrative, Physical, Technical Safeguards and Breach Notification.

The DHHS will be notified immediately if the Tellus becomes aware of any security breach or any unauthorized transmission or loss of any or all of the data collected or created for, or provided by, the DHHS.

AWS Cloudwatch is used to monitor network traffic, bandwidth utilization and identify bottlenecks that impede performance. Monitoring and auto-scaling systems provide the information required to diagnose system performance issues, errors and backlogs. Monitoring includes but is not limited to CPU, memory utilization, network and disk utilization. For the database server, we also monitor read/write latency, number of sessions, and session performance. Our engineers get immediate notifications regarding all system issues. If they cannot be resolved immediately, notifications will be forwarded to the DHHS and/or Providers as required based on service level agreements.

We use intrusion detection and DDOS mitigation software and maintain authentication and audit logs. Multi-Factor authentication is used whenever possible to restrict access to systems. Antivirus, anti-spyware and anti-rootkit software is used to prevent viruses and spyware from affecting system performance. Antivirus and anti-spyware software is automatically updated daily to provide the best level of protection from new viruses.

Data security, including, but not limited to, encryption of all information that is confidential under Federal law, while in transmission and while resident on electronic media storage devices. Required data is encrypted at rest consistent with Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards.

We currently have an A rating with Security Scorecard and committed to maintain top-tier rating.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
105	PS.32	Solution must log system activity and enable analysts to examine system activity in accordance with audit policies and procedures (error diagnosis, and performance management) adopted by DHHS.	Describe solution's capability for logging system activity and enabling analysts to examine system activity in accordance with audit policies and procedures adopted by DHHS.	TA.SP.39	S	

Bidder's Response:

All system activity in the solution is logged by user along with the date and time the entry was made. Reporting based on audit log activity is supported. We can identify user activity including access to specific member data. The EVV system tracks access and activity by user login ID which is easily associated with username. The date, time, device IP address and actions performed are all captured.

We can accommodate the DHHS' audit policies and procedures related to error diagnosis and performance management.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
106	PS.33	Solution must support procedures for guarding, monitoring, and detecting malicious software (e.g. viruses, worms, malicious code, etc.).	Describe solution's ability to support procedures for guarding, monitoring, and detecting malicious software.	TA.SP.41	S	

Bidder's Response:

We have a number of standard security features to make sure that only authorized users can access the system and its data, including user authentication through IDs and passwords, functional access controls, multiple firewalls, and different virus protection products. Data transmitted between external systems and our servers are protected by authentication and encryption, while secure file transfer protocols (SFTP) are always used for data file transmissions.

Different antivirus, anti-spyware and anti-rootkit software is used to prevent viruses and spyware from affecting system performance. Antivirus and anti-spyware software is automatically updated daily to provide the best level of protection from new viruses.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
107	PS.34	Solution should have the capability to provide provision of access to an authorized user or request.	Describe solution's ability to have provide provision or access to an authorized user or request.	TA.SP.42	S	

Bidder's Response:

We authenticate and authorize users of the EVV solution based on the principle of least privilege, which we enforce by role-based access control (RBAC). System security assigns unique roles to specific users, limiting access to applications and data. Our security approach provides user access for data aggregation reports and leverages the solution's extensive security infrastructure to strictly enforce authorization and RBAC permissions. We use role membership to control:

- The user interfaces
- The reports, menu items, and information a user can see
- The actions a user can perform

We enable the ability to establish super users who will have the authority to create and manage other user roles and permissions. Typically, payers send us provider agency information via a data feed. Provider agency Administrators are provisioned based on request. Each provider agency must have at least one Administrator user, who will then provision additional users of the system.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
108	PS.35	Solution should contain indicators that can be set to restrict distribution of ePHI, PII and FTI in situations where it would normally be distributed.	Describe solution's ability to contain indicators that can be set to restrict distribution of ePHI, PII and FTI in situations where it would normally be distributed.	TA.SP.43	S	

Bidder's Response:

Tellus eVV is a configurable, scalable and extensible COTS-based EVV solution for Nebraska. As such, our solution is already designed and developed, but will be customized through configuration to meet Nebraska-specific requirements. We will configure, implement, operate, and maintain the system in compliance with HIPAA requirements. Security and privacy will be very important from the signing of the contract through system closeout and turnover. We understand the importance of enforcing ePHI, PII and FTI restrictions. A key foundation of our approach to your EVV solution is our experience delivering large-scale systems based on HIPAA, National Institute of Standards and Technology (NIST), and State security guidelines. As a health care technology company, we have privacy and security programs that support compliance with various federal

and state privacy regulations. These regulations include HIPAA privacy rules and the applicable privacy controls under MARS-E as well as related State privacy requirements. We apply controls based on jurisdictional prudence. For example, if a client standard or regulation is more stringent, then it takes precedence in our planning.

Our business rules engine is fully capable of restricting distribution of ePHI, PII and FTI in situations where it would normally be distributed. Requirements for business rules will be established during the requirements gathering phase of the engagement.

We bring added protection through the experience of our team. While privacy, security, and confidentiality are supported by best practices, they rely on implementation by individuals who must know, understand, and comply with those regulations and best practices. We require every employee and contractor to successfully pass on first hire, and annually thereafter, HIPAA centered Privacy and Security Training. Our proposed solution complies with HIPAA standards. Our cloud-based EVV solution is hosted through a web services environment that is the most secure hosted network solution available. Access to the EVV solution is tightly controlled using secure login identification and device access controls. System security is integrated into the system's basic design. We have a number of standard security features to make sure that only authorized users can access the system and its data, including user authentication through IDs and passwords, functional access controls, multiple firewalls, and different virus protection products. Data transmitted between external systems and our servers are protected by authentication and encryption, while secure file transfer protocols (SFTP) are always used for data file transmissions.

We do not use or disclose health information for any reason other than that mandated within the client requirements or otherwise required as a matter of law. We understand the significance of signing and adhering to the policies, protocols, and procedures outlined in the DHHS Business Associate Agreement (BAA). BAAs will be signed by both parties, so data is adequately secured according to Nebraska policies and standards. This agreement/contract will be in force prior to testing or production implementation of a business associate data exchange.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
109	PS.36	Solution should track disclosures of ePHI, PII and FTI; and provide authorized users access to and reports on the disclosures.	Describe solution's ability to track disclosures of ePHI, PII and FTI; and to provide authorized users access to and reports on the disclosures.	TA.SP.44	S	

Bidder's Response:

All system activity in the solution is logged by user along with the date and time the entry was made. Reporting based on audit log activity is supported. We can identify user activity including disclosure of ePHI, PII and FTI and provide authorized users access to and reports on the disclosures. The EVV system tracks access and activity by user login ID which is easily associated with username. The date, time, device IP address and actions performed are all captured.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
110	PS.37	Solution must have standard Access Control specifications including, but not limited to: (i) Assigning a unique name and/or number for identifying and tracking user identity. (ii) Establishing and implementing, as needed, emergency access procedures for obtaining necessary electronic	Describe solution's capability for standard Access Control specifications, including all identified items i through iv.	TA.SP.5	S	

		protected health information (ePHI), PII, and FTI during an emergency. (iii) Implementing electronic procedures that terminate an electronic session after a predetermined time of inactivity. (iv) Implementing a mechanism to encrypt and decrypt electronic protected health information (ePHI), PII, and FTI.				
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Bidder's Response:

We authenticate and authorize users of the EVV solution based on the principle of least privilege, which we enforce by role-based access control (RBAC). System security assigns unique usernames and roles to specific users, limiting access to applications and data. Our security approach provides user access for data aggregation reports and leverages the solution's extensive security infrastructure to strictly enforce authorization and RBAC permissions. We use role membership to control:

- The user interfaces
- The reports, menu items, and information a user can see
- The actions a user can perform

We enable the ability to establish super users who will have the authority to create and manage other user roles and permissions.

We will establish and implement, as needed, emergency access procedures for obtaining necessary electronic protected health information (ePHI), PII and FTI during an emergency.

We also have controls in place to terminate an electronic session after a predetermined time of inactivity, which can be configured to the DHHS' requirements, for all types of access to the system. User accounts are typically disabled after 5 unsuccessful attempts. Users and system administrators are not allowed to have shared accounts, so administrator functions are never assigned to basic user accounts.

All data is encrypted in transit and at rest. Encryption/decryption mechanisms follow best practices and standards.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
111	PS.38	Roles and responsibilities of individuals should be separated through assigned information access authorization as necessary to prevent malevolent activity.	Describe solution's capability for separating roles and responsibilities of individuals through assigned information access authorization as necessary to prevent malevolent activity.	TA.SP.50	S	

Bidder's Response:

During the business requirements gathering phase of the engagement, Tellus will work with the DHHS to define User Roles and Permissions. Roles and Permissions determine what information can be viewed or edited in the system. At a minimum, each Account Profile User will require one User Administrator (Admin). Onboarding will begin when the User Administrator Account Profile contact information is entered into the EVV System. Tellus will provide Login Credentials to the User Administrator. The User Administrator will be required to provide the following information to set up the User Account Profile:



- National Provider Identifier (NPI) or Atypical Provider Identifier (API)
- Taxpayer Identification Number (TIN)
- Contract Number (when applicable)
- Taxonomy
- Legal Name
- Doing Business As (DBA) Name
- Address (Street, City, State, Zip+4)

User Administrator will be validated real time using the data provided in the payer data feed housed in the Data Aggregator. If any of the data elements entered by the User Administrator do not match, the User Administrator will be notified, and the User Profile will be incomplete. The User Account will not be available for any EVV System functionality until the User Profile is complete with all entered data fields matching the data residing in the Data Aggregator.

Once the User Profile is complete, the User Admin will be able to add other Users to the User Account Profile. User Roles available to be assigned to each user added will be defined during the business requirements gathering phase of the engagement, examples include:

- Scheduler
- Claims Processor
- Designated Representative
- Caregiver

Anyone set up as an Administrator will have the ability to update and add User Profile data. Some data residing in the Data Aggregator will auto-populate the payer data feed. User Administrators will not have the ability to overwrite data originating from the Data Aggregator.

Mobile App Users can be associated with multiple provider agencies.

Administrators can associate Medicaid participants with their User Account Profile. The EVV System will create one Participant Profile for each Medicaid Participant. At a minimum, the EVV System will capture and retain the following information for each Participant:

- Medicaid Identification Number
- Legal Name (First, Last, MI)
- Date of Birth
- Medicaid Eligibility start date
- Medicaid Eligibility end date
- Managed Care Eligibility start date
- Managed Care Eligibility end date
- Payer - Managed Care Plan
- Address (Street, City, State, Zip+4)
- Landline Home Phone Number

The role of Payer Administrator will be defined and provided to users with appropriate security access to perform the following functions:

- Add/Update User Records
- Add/Update Prior Authorization Records
- Add/Update Participant Records

The Tellus eVV solution separates roles and responsibilities so only authorized users have permission to perform certain functions.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
112	PS.39	User account access authorization should follow the concept of least privilege; allowing users access to only the information that is necessary to accomplish assigned tasks in accordance with business functions.	Describe solution's ability to manage user account access authorization following the concept of least privilege – allowing users access to only the information that is necessary to accomplish assigned tasks in accordance with their business functions.	TA.SP.51	S	

Bidder's Response:

Tellus will work with the DHHS to develop User Roles and Permissions that will dictate the access a User has to EVV data and functionality ensuring Users are able to perform their role but restricting access to sensitive data to only those users who require it. We authenticate and authorize users of the EVV solution based on the principle of least privilege, which we enforce by role-based access control (RBAC). System security assigns unique roles to specific users, limiting access to applications and data. Our security approach provides user access for data aggregation reports and leverages the solution's extensive security infrastructure to strictly enforce authorization and RBAC permissions. We use role membership to control:

- The user interfaces
- The reports, menu items, and information a user can see
- The actions a user can perform

We enable the ability to establish super users who will have the authority to create and manage other user roles and permissions. The table that follows shows some typical roles and their permissions:

Module Access	User Role	View Data	Enter/Modify Data
Mobile App	Direct Caregiver	Yes for Scheduled Visits	Yes for Scheduled Visits
Mobile App	All Other User Roles	No	No
Provider Administration	Provider Administrator	Yes	Yes
Provider Administration	All Other User Roles	No	No
Provider Scheduling	Provider Scheduler	Yes	Yes
Provider Scheduling	Provider Administrator	Yes	Yes
Provider Scheduling	All Other User Roles	No	No
Claims Processing	Provider Claims Processor	Yes	Yes
Claims Processing	Provider Administrator	Yes	Yes
Claims Processing	All Other User Roles	No	No
Provider Reporting	Provider Administrator	Yes	Yes
Provider Reporting	Provider Scheduler	Yes, Visit Reports	No
Provider Reporting	Provider Claims Processor	Yes, All Reports	No
Provider Reporting	Case Manager	Yes, All Reports for Assigned Recipients	No
Provider Reporting	Program Manager	Yes, All Reports for Assigned Programs	No
Provider Reporting	Payer Administrator	Yes, All Reports for Assigned Programs	No

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
113	PS.40	Accounts should be disabled after 3 consecutive invalid login attempts.	Describe solution's process for disabling the account access after 3 consecutive invalid login attempts.	TA.SP.52	S	

Bidder's Response:

Disabling account access after 3 consecutive invalid login attempts is a configurable option that will be defined during the requirements gathering phase of the engagement. If the DHHS wants account disabled after 3 consecutive invalid login attempts, this is easily configured in the business rules engine.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
114	PS.41	User account access should be reviewed on a quarterly basis at a minimum. User accounts should be appropriately disabled as roles and responsibilities change.	Describe solution's process for reviewing user account access quarterly, and disabling accounts as user roles and responsibilities change.	TA.SP.53	S	

Bidder's Response:

Tellus' user registration and de-registration process, at minimum:

- Communicates relevant policies to users and requires acknowledgement (e.g., signed or captured electronically),
- Checks authorization and minimum level of access necessary prior to granting access,
- Ensures access is appropriate to the business and/or clinical needs (consistent with sensitivity/risk and does not violate segregation of duties requirements),
- Addresses termination and transfer,
- Ensures default accounts are removed and/or renamed,
- Removes or blocks critical access rights of user who have changed roles or jobs, and
- Automatically removes or disables inactive accounts.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
115	PS.42	After a State defined period of inactivity, the system should initiate a session lock; the session lock should remain in place until the user reestablishes access using established identification and authentication procedures.	Describe solution's ability to initiate a session lock after a state defined period of inactivity, and ensuring the session lock stays in place until the user reestablishes access using established identification and authentication procedures.	TA.SP.54	S	

Bidder's Response:

Users are logged out of the application after a predefined period of inactivity, based on the State's policies and procedures. Default settings require time-out of the session after 15 minutes of inactivity and close-out of the network sessions after 30 minutes of inactivity. Users are required to reestablish authenticated access once the session has been paused or closed. These intervals are configurable and will be determined in collaboration with the State during the requirements gathering phase of the engagement.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
116	PS.43	Solution should enforce physical access authorizations for all physical access points (including designated entry/exit points) to the facility where the information system resides (excluding those areas within the facility officially designated as publicly accessible).	Describe how solution enforces physical access authorizations for all physical access points to the facility where the solution resides.	TA.SP.56	S	

Bidder's Response:

Tellus systems reside in Amazon Web Services (AWS) Government Cloud and utilize AWS disaster recovery, failover and elasticity capabilities. The system runs in fifteen AWS datacenters in VA, OH and CA. Using various AWS regions and different physical datacenters within the same region ensures that the system is highly available and fault-tolerant. The choice of AWS Government Cloud provides multiple safeguards and advantages

AWS provides physical data center access only to approved employees. All employees who need data center access must first apply for access and provide a valid business justification. These requests are granted based on the principle of least privilege, where requests must specify to which layer of the data center the individual needs access, and are time-bound. Requests are reviewed and approved by authorized personnel, and access is revoked after the requested time expires. Once granted admittance, individuals are restricted to areas specified in their permissions.

Third-party access is requested by approved AWS employees, who must apply for third-party access and provide a valid business justification. These requests are granted based on the principle of least privilege, where requests must specify to which layer of the data center the individual needs access, and are time-bound. These requests are approved by authorized personnel, and access is revoked after request time expires. Once granted admittance, individuals are restricted to areas specified in their permissions. Anyone granted visitor badge access must present identification when arriving on site and are signed in and escorted by authorized staff.

Physical access to data centers in the AWS Government Cloud is restricted to employees who have been validated as being U.S. citizens.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
117	PS.44	Solution should maintain a current list of personnel with authorized access to the space where required (e.g. review and approval of access list and authorization credentials at least once every 180 days, removes personnel from the access list that no longer require access).	Describe solution's process for maintaining a current list of personnel with authorized access to the space where solution resides and the process for maintaining the list.	TA.SP.57	S	

Bidder's Response:

Because the datacenter is virtual, there is no "physical access list" to maintain. We do maintain a list of personnel who have "virtual access." This is part of our quarterly access rights review.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
118	PS.45	Physical access to information system distribution and transmission lines must be controlled within the facility to prevent unauthorized access.	Describe solution's ability to control physical access to information system distribution and transmission lines within the facility to prevent unauthorized access.	TA.SP.58	S	

Bidder's Response:

The EVV platform is hosted on Amazon Web Services (AWS) Government Cloud and runs on 15 AWS datacenters located in the continental US. AWS datacenters are distributed in geographic regions which include clusters of datacenters called Availability Zones. Every region is geographically isolated in terms of power and water supply, and each zone is similarly served by independent networks.

Redundantly storing information in different datacenters in multiple regions, availability zones, and datacenters greatly reduces downtime, as the nearest available node is activated as a backup. Each AWS datacenter is protected by four distinct layers of security:

- **Perimeter Layer** — Datacenters are physically enclosed by gates protected by security guards and intrusion detection technology
- **Infrastructure Layer** — Energy generators, fire suppression equipment, and ordinary and extraordinary maintenance systems protect the integrity of the data stored in the datacenter
- **Data Layer** — Access to server rooms is restricted, tightly regulated by authorization processes and constantly monitored
- **Environmental Layer** — The locations where AWS datacenters are built are screened for seismic activity and extreme weather, to minimize the risk of structural damage caused by natural occurrences

AWS provides physical data center access only to approved employees. All employees who need data center access must first apply for access and provide a valid business justification. These requests are granted based on the principle of least privilege, where requests must specify to which layer of the data center the individual needs access, and are time-bound. Requests are reviewed and approved by authorized personnel, and access is revoked after the requested time expires. Once granted admittance, individuals are restricted to areas specified in their permissions.

Third-party access is requested by approved AWS employees, who must apply for third-party access and provide a valid business justification. These requests are granted based on the principle of least privilege, where requests must specify to which layer of the data center the individual needs access, and are time-bound. These requests are approved by authorized personnel, and access is revoked after request time expires. Once granted admittance, individuals are restricted to areas specified in their permissions. Anyone granted visitor badge access must present identification when arriving on site and are signed in and escorted by authorized staff.

Physical access to data centers in the AWS Government Cloud is restricted to employees who have been validated as being U.S. citizens.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure

119	PS.46	Solution must guard against unauthorized access to electronic protected health information (ePHI), PII, or FTI that is being transmitted over an electronic communications network.	Describe solution's capabilities for guarding against unauthorized access to ePHI, PII or FTI that is being transmitted over an electronic communications network.	TA.SP.6	S	
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Bidder's Response:

The process of retrieving visit verifications in compliance with HIPAA standards requires all communications (application ↔ database ↔ mobile app ↔ server) to occur over a secure HTTPS connection. We make sure ePHI, PII and FTI data is encrypted when transmitted and at rest using SSL/TLS and database encryption. Our hosting provider has achieved a number of certifications including, but not limited to, SOC 1,2,3, FedRAMP, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>)

Access to all system components that store sensitive or protected information are tightly controlled using role-based and permission-based access controls. Data is always encrypted in transmission and at rest.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
120	PS.47	Solution should implement policies and procedures that govern the receipt and removal of hardware and electronic media that contain electronic protected health information (ePHI), PII or FTI).	Describe solution's policies and procedures that govern the receipt and removal of hardware and electronic media that contain ePHI, PII or FTI, and the process for maintaining policies and procedures.	TA.SP.7	S	

Bidder's Response:

Tellus maintains Standard Operating Procedures that govern Access Control Procedures for the receipt and removal of hardware and electronic media that contain ePHI, PII or FTI. These procedures are reviewed and updated, at minimum, on an annual basis or as necessary based on business needs.

The purpose of the Standard Operating Procedure related to Access Control Procedures is to give guidance on how to request access, grant job function access, grant temporary elevation of rights, review of, and the revocation of rights.

The scope of this policy includes the following areas:

1. User Access Request
2. Critical Access review, approval, rejection
3. Temporary Elevation of rights
4. Revocation of rights
5. Third Party Vendor and Service Provider This policy applies to all Tellus employees, contractors, sub-contractors, consultants, temporary and other workers, and all third-party service personnel who access the Company network.

This Standard Operating Procedure demonstrates a clear commitment to maintaining and enforcing Confidentiality, Integrity, and Availability of ePHI, PII, FTI and Non-Public Personal Information.

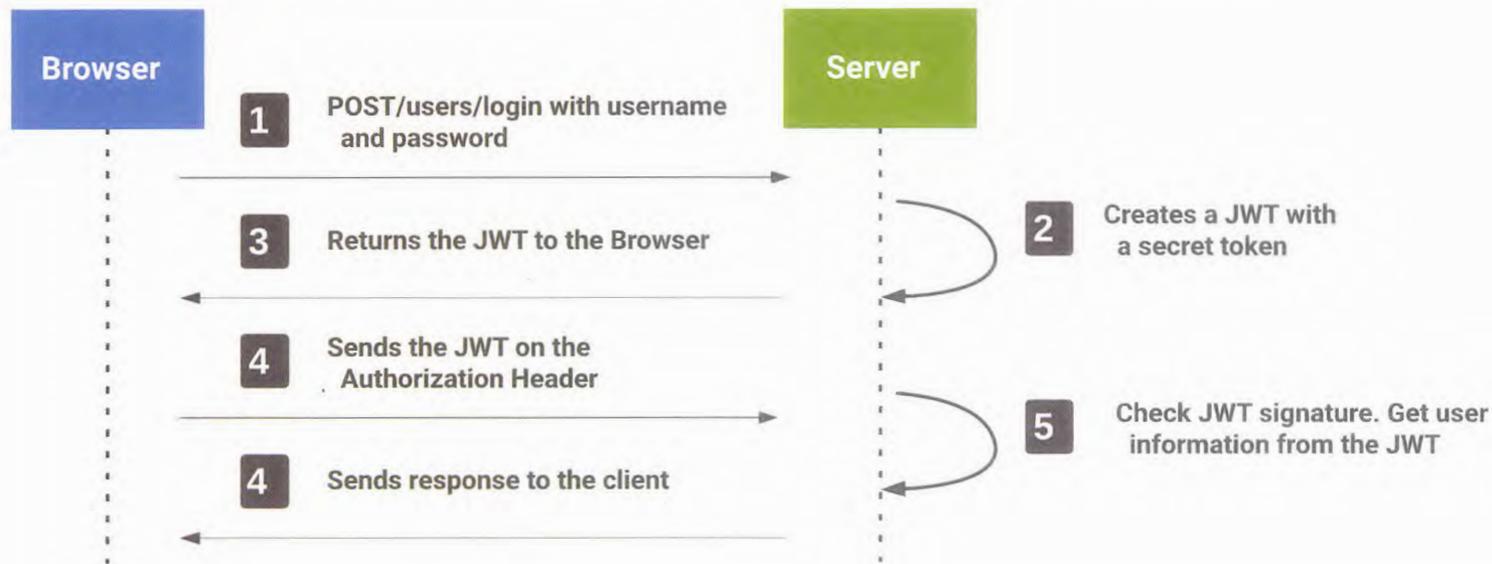
Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
121	PS.48	Solution must enforce a sufficient level of authentication / identification against fraudulent transmission and imitative communications deceptions by validating the transmission, message, station or individual.	Describe solution's capability to enforce a sufficient level of authentication / identification against fraudulent transmission and imitative communications deceptions by validating the transmission, message, station or individual.	TA.SP.70	S	

Bidder's Response:

Role-based account permissions are used to provide native user authentication based on account name, username and a user-supplied password. User password is stored in the database and hashed using one-way BCrypt hashing mechanism that makes it impossible to decrypt and extremely resistant to brute-force attacks.

Industry standard OAuth2 protocols are used for authentication. Every application's access to backend processes via REST API requires an authentication token to be passed with each API call.

JSON Web tokens (JWT) are used for API Authentication. JWT is an open standard (RFC 7519) that defines a compact and self-contained way to securely transmit information between parties as a JSON object. This information can be verified and trusted because it is digitally signed. JWTs are signed using a secret JWT token sent to the API via standard HTTP Authorization header. Token payload contains user information restricting API access to certain endpoints.



To further control user access, JWT tokens are configured to expire after a specified period of time based on application rules. For example, tokens requested by the EVV mobile application expire in less time than Tellus eVV Web Console tokens. To facilitate user ability to stay logged into the application, Tellus uses standard OAuth2 Refresh Tokens. Refresh Token expiration is configured based on client specifications.



Open Web Application Security Project (OWASP) standards are baseline for Tellus eVV Mobile app. OWASP is an organization supporting open standards, policies and processes promoting application security. OWASP collaborated with the European Network and Information Security Agency (ENISA) to build a set of controls for mobile applications. They jointly published the “Smartphone Secure Development Guideline” and recommend the following principles:

- ID & Protect Sensitive Data on the Mobile Device
- Protect Authentication Credentials
- Protect Data in Transit
- Strong User Authentication, Authorization & Session Management
- Secure Backend Services & Server
- Secure Third-Party Integration
- Collect Consent for Collection & Use of User Data
- Protect Paid-for Resources & Services
- Secure Distributions & Provisioning of Mobile Applications
- Avoid/Safely Use Runtime Code Interpreters

Each principle is thoroughly documented, outlining risks and methods for mitigating those risks. Tellus eVV mobile developers and testers strive to ensure our apps comply with OWASP standards

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
122	PS.49	Sensitive data in transit that requires confidentiality protection must be encrypted following industry-standards when traversing entity boundaries. For data in transit where the only concern is	Describe solution’s ability to encrypt sensitive data in transit that require confidentiality protection, following industry-	TA.SP.72	S	

	the protection of integrity, hashing techniques and message authentication codes can be used instead of encryption.	standards when traversing entity boundaries.			
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Bidder's Response:

The Tellus eVV Solution meets the State security standards for transmission of personal information as outlined in the RFP. Tellus ensures data security, including but not limited to, encryption of all ePHI, PII and FTI that is confidential under state or federal law, while it's in transmission and while it's resident on electronic media storage devices. Required data is encrypted at rest and will be consistent with Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards.

Tellus encrypts in-flight (being transmitted to/from/between Tellus systems) data using transport and/or message level encryption. In flight standards include:

- TLS: 2,TLSv1.1 and SSLv2Hello
- Key Agreement Protocol: Ephemeral Diffie-Hellman Key with a size of 2048.
- Cipher Suites: Ability to use up to 43 different Cipher Suites (Examples: TLS_RSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_ECDSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_RSA_WITH_AES_256_GCM_SHA384, TLS_DHE_RSA_WITH_AES_256_GCM_SHA384).

Data at rest (stored in databases, file structures, object storage, etc.) is encrypted using Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards including:

- Encryption algorithm used is AES 256 Encryption
- Encryption algorithm used for one-way hashing is SHA256

For the application tier, low-level bindings on all its native queries are used to minimize the possibility of attacks such as SQL injection. For additional security, stored procedures are used to retrieve data and Object Relational Mapping is used to minimize the need for hand coding SQL statements that could be vulnerable to exploits.

User passwords are stored in the database and hashed using one-way BCrypt hashing mechanism that makes it impossible to decrypt and extremely resistant to brute-force attacks. All sensitive data is encrypted in transmission and at rest when stored in a database or filesystem. We use Transparent Data Encryption (TDE) and adhere to HIPAA compliance.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
123	PS.50	Solution must use only FIPS Pub 140-2-approved (or higher) encryption algorithms.	Describe solution's process for using FIPS Pub 140-2 approved (or higher) encryption algorithms.	TA.SP.74	S	

Bidder's Response:

The Tellus eVV Solution meets the State security standards for transmission of personal information as outlined in the RFP. Tellus ensures data security, including but not limited to, encryption of all ePHI, PII and FTI that is confidential under state or federal law, while it's in transmission and while it's resident on electronic media storage devices. Required data is encrypted at rest and will be consistent with Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards.

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- Key Agreement Protocol: Ephemeral Diffie-Hellman Key with a size of 2048.



- Cipher Suites: Ability to use up to 43 different Cipher Suites (Examples: TLS_RSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_ECDSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_RSA_WITH_AES_256_GCM_SHA384, TLS_DHE_RSA_WITH_AES_256_GCM_SHA384).

Data at rest (stored in databases, file structures, object storage, etc.) is encrypted using Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards including:

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Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
124	PS.51	Solution must employ malicious code protection mechanisms at IT system information system entry and exit points and at workstations, servers, or mobile computing devices on the network to detect and eradicate malicious code.	Describe solution's capability to employ malicious code protection mechanisms at IT system information system entry and exit points and at workstations, servers, or mobile computing devices on the network to detect and eradicate malicious code.	TA.SP.75	S	

Bidder's Response:

To protect Tellus' Assets from mobile and malicious code, the following shall be enacted:

1. All Desktop, Laptop and file servers shall have anti-virus (AV) installed.
 - a. AV scanning will be real time.
 - b. AV scanning will be performed during system boot
 - c. AV definitions will be updated at a minimum daily.
 - d. AV will scan all inserted devices (CD-ROMs, USB drives)
 - e. AV will scan access to all websites and will restrict access to any mobile code that is malicious. Mobile code examples are:
 - i. JavaScript
 - ii. Java
 - iii. ActiveX
 - iv. PDF
 - v. PostScript
 - vi. Shockwave
 - vii. Flash
2. Malicious code protection mechanisms shall be centrally managed.
3. Malicious code is blocked and quarantined, and an alert is sent to administrators in response to malicious code detection.
4. For systems considered to be not commonly affected by malicious software, the organization shall perform periodic assessments to identify and evaluate evolving malware threats in order to confirm whether such systems continue to not require anti-virus software. Systems that fall into this category are:

- a. Database Servers
 - b. Web Servers
 - i. Web servers that are publicly facing should have mitigating scanning such as a Layer 7 inspection device upstream that can detect for malicious code injection.
 - ii. As part of the software code deployed on a web server, it shall check for input validation and code injection attempts. Any input validation and code injection attempts will send an alert to the appropriate security staff for inspection.
 - c. Application Layer servers
5. The e-mail system shall have in place Anti-Spam mechanisms.
6. The Company shall implement anti-spam technologies to verify where email claiming to be from Tellus may originate from, such as:
- a. Sender Policy Framework (SPF)
 - b. SenderID
 - c. DKIM
 - d. Domain Keys

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
125	PS.52	Solution must update malicious code protection mechanisms (including signature definitions) whenever new releases are available in accordance with IT system configuration management policy and procedures.	Describe solution's process for updating malicious code protection mechanisms (including signature definitions) whenever new releases are available in accordance with IT system configuration management policy and procedures.	TA.SP.76	S	

Bidder's Response:

Tools to detect and protect against malicious code are updated daily, and especially whenever new releases are available in accordance with our IT system configuration management policy and procedures.

We employ many levels of malicious code protection mechanisms:

1. End Point protection for end users and servers: hourly updates
2. Firewall IPS/IDS and Malware scanning: near real time database updates
3. Automatic source code scanning prior to compile and deployment
4. Utilization of White and Blacklists to authorize/deny programs that can be run: in real time
5. Automated tracking of software installation, uninstallation or upgrade, as well as version and by whom: near real time.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
126	PS.53	Solution must implement and maintain reasonable and appropriate administrative, technical, and physical safeguards for protecting ePHI, PII and	Describe solution's capabilities for implementing and maintaining reasonable and appropriate administrative, technical, and	TA.SP.77	S	

	FTI in accordance with the HIPAA Security Rule on a control by control basis as defined by the NIST Cybersecurity Framework and NIST SP 800-53.	physical safeguards for protecting ePHI, PII and FTI in accordance with the HIPAA Security Rule on a control by control basis as defined by the NIST Cybersecurity Framework and NIST SP 800-53.			
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Bidder's Response:

Tellus will provide a System Security Plan to the State of Nebraska for approval. This plan will include a system risk assessment and will be reviewed annually and updated as needed.

Tellus has self-certified for HITRUST (including HITECH and GovRamp), and we are committed to achieving and maintaining the highest standards of information security and data integrity. This is the main driver of our approach to hosting and system backup processes. Redundancy is the key strategy employed to build a fault-tolerant system and robust disaster recovery methods and procedures. Our solution is compliant with the recommendations of NIST Cybersecurity Framework SP 800-53.

The EVV platform is hosted on Amazon Web Services (AWS) Government Cloud and runs on fifteen (15) AWS data centers located in the continental U.S. AWS datacenters are distributed in geographic regions which include clusters of datacenters called Availability Zones. Every region is geographically isolated in terms of power and water supply, and each zone is similarly served by independent networks. Redundantly storing information in different datacenters in multiple regions, Availability Zones, and datacenters greatly reduces downtime, as the nearest available node is activated as a backup.

Each AWS datacenter is protected by four distinct layers of security safeguarding both data and equipment. A layering approach to security helps ensure that failure of one element in the system doesn't create vulnerability in the whole system:

- **Perimeter Layer** — Datacenters are physically enclosed by gates protected by security guards and intrusion detection technology.
- **Infrastructure Layer** — Energy generators, fire suppression equipment, and ordinary and extraordinary maintenance systems protect the integrity of the data stored in the datacenter.
- **Data Layer** — Access to server rooms is restricted, tightly regulated by authorization processes and constantly monitored.
- **Environmental Layer** — The locations where AWS datacenters are built are screened for seismic activity and extreme weather, to minimize the risk of structural damage caused by natural occurrences.

We also use Amazon Relational Database Service (RDS) to host our database server. Amazon RDS runs on the same highly reliable infrastructure previously discussed. Amazon RDS synchronously replicates the data to a standby instance in a different Availability Zone (different datacenter). RDS features we use to enhance reliability for critical production databases include automated backups, database snapshots, and automatic host replacement in case of primary database crash. Database backup snapshots are taken at regular intervals and sent to AWS S3 encrypted storage.

In case of failure of the primary node, Amazon RDS performs an automatic failover to the standby without the need for manual administrative intervention. Within minutes, a new instance of the server is launched in a different AWS Availability Zone or region. Downtime is cut to minutes instead of hours. Using various AWS regions and different physical data centers ensures the system is highly available and fault tolerant.

All backups and recovery of databases for all cases, including disaster and system failure, are hosted in at least two different Availability Zones (geographically different data centers). Database instances are kept in sync real-time. Backups are scheduled and occur at regular intervals. They are then encrypted and stored in multiple locations providing 99.9% durability.

Additionally, we achieve high levels of fault tolerance for our applications by using AWS Elastic Load Balancing to automatically route traffic across multiple instances and multiple Availability Zones (physical data centers). Elastic Load Balancing ensures only healthy Amazon application server instances receive traffic by detecting unhealthy instances and rerouting to healthy servers. If additional computing capacity is required, we have systems in place to automatically scale the application and database service layers to ensure SLAs are met.

We take our obligation to protect sensitive information very seriously and design all aspects of the EVV system to include the necessary safeguards to make sure sensitive information is not put at risk. Data is encrypted and protected both in transit (TLS/SSL) and optionally at rest (database level encryption). Additionally, all data and actions

occurring in Tellus eVV are tracked in an audit trail to support security requirements. Tellus follows the OWASP best practices and has been successfully security tested for vulnerabilities (e.g., XSS, XSRF, SQL Injection) using multiple tool sets. We have been handling and managing programs on behalf of states where confidentiality, privacy, and security of personal and financial information are essential to successful operations and administration. Our deep understanding of the character and nature of programs like these has enabled us to build strong human processes and powerful technology for managing and administering programs safely and securely. We designed our internal system and data security procedures to ensure confidentiality of data and to protect against computer viruses and other security threats, such as hackers. We evolve and constantly improve our processes and systems by monitoring industry trends and best practices and by applying new knowledge and tools to stay current in dealing with potential threats.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
127	PS.54	Solution should support audit controls for hardware, software, and/or procedural mechanisms that record and examine activity in information systems that contain or use ePHI.	Describe solution's ability to support audit controls for hardware, software, and/or procedural mechanisms that record and examine activity in information systems that contain or use ePHI.	TA.SP.9	S	

Bidder's Response:

We use multiple audit controls based on the source of the monitored system.

Using technical controls, we have in place mechanisms that automatically records access to systems and is reportable. Technical controls are also used to maintain software installations and versions.

Using administrative controls, we have multiple detailed policies and standard operating procedures that define the exact procedures that must be taken to access protected information. These policies and SOPs are reviewed each year as part of our risk management program, which includes a mandatory attendance of the Yearly Security Awareness Training Course.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
128	PS.55	Contractor must provide a hosting environment for all solution components that has a Federal Risk and Authorization Management Program (FedRAMP) Certification, FedRAMP Risk Assessment that indicates compliance, has a documented NIST 800-53 Rev 4 at a "moderate" system risk assessment designation, or is Statement on Standards for Attestation Engagements (SSAE-16) SOC 1 Type 2 and SOC 2 Type 2 compliant.	Describe the solution's hosting environment and how it meets identified standards.	N/A	S	

Bidder's Response:

Tellus eVV is a configurable, Commercial-off-the-Shelf (COTS) based solution provided through a Software-as-a-Service (SaaS) model. For the greatest level of security, we use Amazon Web Services Government Cloud to host our solution. Our hosting provider has achieved a number of certifications including, but not limited to, SOC 1,2,3, FedRAMP, SSAE-16, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>)

G.5 Reporting Requirements:

DHHS must meet all federal reporting requirements, as well as those imposed by Nebraska regulations and policies. In addition, Program Integrity efforts will depend heavily on reporting capabilities from the EVV visit and claim data. Describe in the specific requirements below how Bidder's Solution provides these capabilities.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
129	RR.1	Solution reporting module should provide reports in a variety of formats (hard copy, PDF, excel, csv, etc.).	Describe how the solution reporting module will make reports available in a variety of formats (hard copy, PDF, excel, csv, etc.).	N/A	S	
<p>Bidder's Response:</p> <p>Tellus eVV includes a full-featured reporting and business intelligence platform with powerful reporting capabilities that can improve productivity, streamline workflow, improve care delivery, and enable many more operational improvements. It includes a library that allows users to select from a wide variety of standard reports. It also offers an easy-to-use report builder for ad-hoc reporting. Reports can be run on-demand or configured to run on a regular schedule. These reports can be generated in a number of on-demand formats, including printed, PDF, Excel Spreadsheet, XML, and CSV files. Data is not skewed by headers. Reports can be delivered by on-screen dashboard display, download, email, or FTP.</p> <p>Online dashboards are a great way to glean a lot of information quickly. High level visually appealing charts and graphs provide context with the ability to drill into intermediate and then transaction level details that can be exported for enhanced analytics and/or inclusion in presentations.</p>						

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
130	RR.2	<p>Solution should make a complete set of data related to visits submitted for verifications, including but is not limited to the following elements, available for reporting:</p> <ol style="list-style-type: none"> 1. Individual receiving services 2. Direct care worker 3. Provider 4. Location of visit 5. Date of visit 6. Start time of visit 7. End time of visit 8. Services delivered (e.g., respite, chore, personal assistance services) 9. Manual or electronic verification 10. Missed visits 11. Late visits 	<p>Describe how the solution will make a complete set of data related to visits submitted for verifications, including but is not limited to the following elements, available for reporting:</p> <ol style="list-style-type: none"> 1. Individual receiving services 2. Direct care worker 3. Provider 4. Location of visit 5. Date of visit 6. Start time of visit 7. End time of visit 8. Services delivered (e.g., respite, chore, personal assistance services) 9. Manual or electronic verification 10. Missed visits 11. Late visits 	N/A	S	

		12. Independent verification by individual receiving services 13. Payer (like an MCO) 14. System which captured the visit data	12. Independent verification by individual receiving services 13. Payer (like an MCO) 14. System which captured the visit data. Provide a complete list of data elements available for purposes of reporting.			
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Bidder's Response:

All data that is captured and evaluated in the application can be made available for reporting. All of the following information is either provided to Tellus to store in our databases, captured in either the mobile or web-based application or evaluated against business rules and labeled accordingly:

1. **Individual receiving services:** Participant list is provided by payer
2. **Caregiver:** Care workers are either provided by payer, added by provider administrators or self-registered and associated with a provider by the provider administrator
3. **Provider:** Either provided by payer, self-registered, onboarded or a combination of the three
4. **Location of visit:** Scheduled by provider administrator and/or captured on the mobile app at the time of the visit
5. **Date of visit:** Scheduled by provider administrator and/or captured on the mobile app at the time of the visit
6. **Start time of visit:** Scheduled by provider administrator and/or captured on the mobile app at the time of the visit
7. **End time of visit:** Scheduled by provider administrator and/or captured on the mobile app at the time of the visit
8. **Services delivered (e.g., respite, chore, personal assistance services):** Scheduled by provider administrator and/or captured on the mobile app at the time of the visit
9. **Manual or electronic verification:** Captured on the mobile app or by alternative method
10. **Missed visits:** Defined based on business rules and labeled in application
11. **Late visits:** Defined based on business rules and labeled in application
12. **Independent verification by individual receiving services:** Captured on mobile app or by alternative method
13. **Payer (like an MCO):** Payers typically provide program eligible participants, prior authorizations and providers

Matching rules automatically validate transactions where a participant is eligible, and the delivered services are the same as the scheduled services and within defined service authorization parameters. If a participant/program does not require scheduled services, matching rules will automatically validate where a participant is eligible, and the delivered services are within defined service authorization parameters. For delivered service data to automatically validate when matched against a qualified service authorization, the following parameters must be consistent and valid: provider, service code, provider/service code combination, modifier.

Late visits will be flagged, and remediation rules will be applied prior to processing.

Missed visits are captured as long as scheduled visits are shared with Tellus eVV.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
131	RR.3	The final library of standard reports will be developed under direction of DHHS. DHHS will have final decisions regarding report capabilities, frequencies, access and output methods.	Provide a listing and examples of the default standard library of reports available.	N/A	S	

Bidder's Response:

Tellus looks forward to working with the DHHS to define and create the library of standard reports. Reports can be configured over the life of the contract so that key performance indicators align with trends as well as changing needs and requirements. The EVV platform has a broad array of standard reports already configured and built-in, which are important to the success of your EVV system. Examples of standard reports include, but are not limited to:

- **Activities across providers:** This report is used to analyze member behavior to detect fraud or aberrant billing behavior or improve service delivery and logistics.
- **Claims by date:** This report analyzes claims data from a chronological standpoint. One of the uses of this report is the evaluation of peak times and dates.
- **Claims edited:** This report shows which claims were changed at some point during their lifecycle, allowing analysts to spot possible anomalies in service delivery, billing, logistics, and possibly fraud.
- **Claims exception by reason code:** This report allows analysts to focus on specific exceptions, rank reasons, and discover patterns. This feature allows the design of improved service delivery and logistics workflows, while supporting fraud detection.
- **Claims on hold:** This report shows which claims are currently awaiting resolution. Generating this report allows analysts to detect in advance possible fraud or aberrations in billing.
- **Claims resubmitted:** This report provides a visualization of which claims were entered more than once in the system. This report supports the detection of duplicated data and the identification of possible causes.
- **Claims submitted, denied:** This report allows analysts to visualize which claims have been denied and spot trends in the data, leading to the possible identification of fraudulent accounts or service delivery anomalies.
- **Claims submitted, paid:** This report shows all the claims with received payments, supporting accounting and logistics operations.
- **Claims voided:** This report visualizes claims created and then voided, allowing analysts to monitor trends and detect fraud or anomalies in service delivery and billing.
- **Caregiver schedule:** This report is of fundamental importance in supporting daily operations and logistics. It enables the visualization of a caregiver's schedule for workload management.
- **Prior authorization, no scheduled visits:** This report identifies patients who are authorized but are not receiving care, enabling corrective actions.
- **Provided ID does not equal authorized provider ID:** This report responds to a specific search for discrepancies, which could be caused by fraud or corrupted data. Visualizing this allows the identification of accounts where this conflicting information is occurring.
- **Member address change:** This report quickly visualizes accounts in which service delivery anomalies could occur because of unsynchronized data.
- **Member list:** This report shows the full list of authorized accounts. This view is useful for logistics and QA analysis.
- **Visits delivered, deviate from prior authorization:** This report compares the list of authorized visits with the list of visits delivered, allowing analysts to detect discrepancies and take corrective measures and actions.
- **Visits delivered, start address does not equal end address:** This report allows service delivery anomalies and fraud to be spotted by visualizing the list of address related inconsistencies in visit data. This report also allows the correction of member information where a change of address is needed.
- **Visits late:** This report shows visits flagged with a discrepancy in the starting time of the visit. It allows analysts to monitor caregiver performance based on timely arrival at the visit site.
- **Visits overlapping services:** This report allows the visualization of scheduling conflicts and improves logistics and service delivery.
- **Visits scheduled:** This report displays a list of upcoming visits, allowing daily monitoring of activities and trends.
- **Visits scheduled address does not equal delivery address:** This report compares the addresses of record for participants with the addresses of scheduled visits, visualizing discrepancies that could be caused by fraud or address changes.
- **Visits scheduled, conflicting prior authorizations:** This report checks scheduled visits with delivery authorizations, detecting situations where there is a conflict between visit and authorization.
- **Visits scheduled, no prior authorization:** This report checks scheduled visits with delivery authorizations, visualizing visits which have no authorization in the system.
- **Visits scheduled, not completed (missed):** This report detects and analyzes service delivery issues to visualize visits that were not delivered or logged in the system.
- **Visits supported by third-party EVV:** This report allows analysts to view which visits are not being directly managed internally, if the EVV system is not unique and centralized.
- **Visit unable to complete:** This report allows the visualization of visits in which attendants reported issues and delivery was not completed. Analysts can use this report to detect patterns caused by fraud or service delivery issues. If the State requires additional reports outside of the standard reports, we will work with you to estimate the level of effort to create these reports. We will present the estimate to the State through the Change Control process.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
132	RR.4	Contractor should use a standard methodology for generating reports. Contractor's solution should provide ad hoc reporting functionality. Ad hoc reporting functionality will utilize "point and click" technology.	Describe the methodology for generating reports. Describe how bidder's solution will provide ad hoc reporting functionality, and how solution will utilize "point and click" technology.	N/A	S	

Bidder's Response:

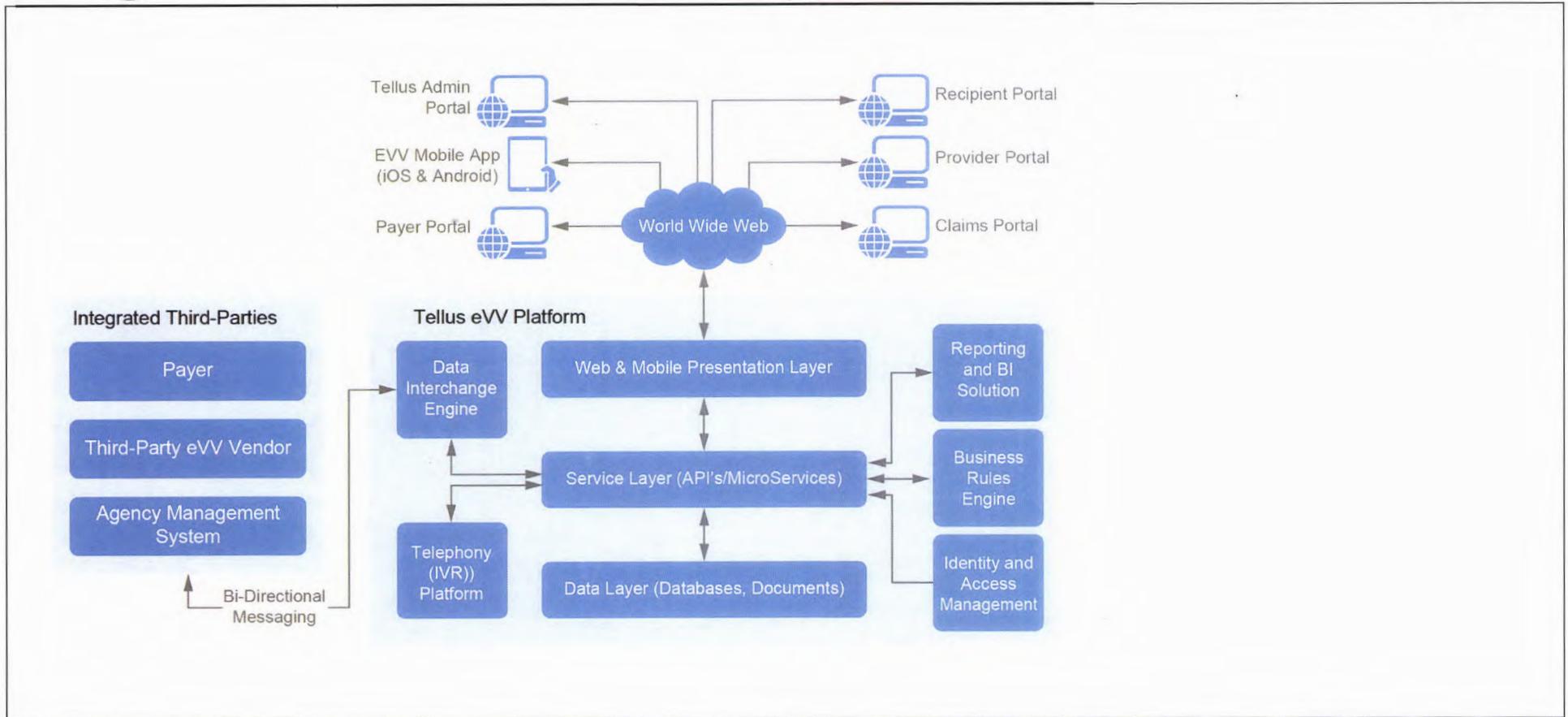
Tellus eVV offers reporting capabilities that combine data collected through our mobile application with data collected from other applications that's aggregated for more robust reporting and data analytics

Data aggregation provides the DHHS with a holistic overview of services to all participants without disrupting provider operations for those who have already successfully implemented EVV.

The EVV data collected using our GPS-enabled mobile app is architected for optimal performance with the reporting platform running against an operational data store (ODS) that is synchronized in near real-time with the production database. Customizable, visually appealing graphical dashboards are combined with drill-down functionality that enables users to manipulate and understand data and respond quickly. Drill-down functionality includes reporting by payer, case manager, caregiver, billing provider, and participant as well as FFS Medicaid, MCO purchasing model, and across payers. It employs a point-and-click user interface, so it requires minimal technical skill to run reports, so there is no need to hire a specialized resource.

Reports can be run on a schedule or an ad-hoc basis. Ad-hoc reports are customizable with the ability to enter settings for date ranges and options to filter output for a specific group to include in the report. For more sophisticated users, ad-hoc reports can be built by selecting any data field from the database schema and applying various filters and formats. Building ad-hoc reports is a skill that can be achieved by a technical business analyst as opposed to a developer. In addition, Tellus continues to build out report templates with each implementation. Report templates are made available to all clients of our web-based EVV platform.

A diagram of our high level architecture follows:



Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
133	RR.5	Contractor must provide a report of verified visits that will be available to billing providers on an agreed cadence.	Provide an example of the report(s) of verified visits that will be available to billing providers.	N/A	S	

Bidder's Response:

Billing providers can view verified visits at any time in the Tellus eVV Claims Console. In addition to detailed reports that can be run on verified visits either ad-hoc or on a pre-defined cadence, the provider administrator can see key elements in one visit detail screen as demonstrated in the following:

Visit x

Status: Completed C Caregiver: [Redacted] Recipient(s): [Redacted] Service Code(s): SS150	Scheduled Start Time: Oct 3, 2019, 10:00:00 AM Actual Start Time: Oct 3, 2019, 10:59:03 AM Start Verification Type: GPS Verification Method Start Location Variance (Miles): 4 Scheduled Start Address: 3651 FAU Boulevard, Boca Raton, Florida, 33431 Scheduled Start Address Type: -
Scheduled End Time: Oct 3, 2019, 11:00:00 AM Actual End Time: Oct 3, 2019, 11:00:07 AM End Verification Type: GPS Verification Method End Location Variance (Miles): 4 Scheduled End Address: 3651 FAU Boulevard, Boca Raton, Florida, 33431 Scheduled End Address Type: -	Unable to complete reason: - Notes: - Recipient Phone Numbers: (561) 982-0020 Signer: RECIPIENT Unable to sign reason: -




Caregiver Signature: [Redacted] (caregiver signature graphic)	Recipient Signature: [Redacted] (recipient signature graphic)
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As visits are completed, the visit details are automatically made available to the Claims Console for verification and matching to scheduled visits and PAs. Matching algorithms run in the background every ten minutes comparing: scheduled services, rendered services, prior authorizations and business rules.

Provider Administrators review claims in the Work List and take action. Claims statuses and related actions are:

- “Matched-On Hold,”** meaning all data elements align as they should, and the claim is ready to review and “Submit”
- “Unmatched-On Hold,”** meaning there are discrepancies between the data elements, and the visit needs review and remediation prior to submission. Any discrepancies require, at minimum, a reason for manual remediation. The matching algorithm then runs again after remediation and either promotes to “Matched-On Hold” or retains “Unmatched-On Hold” status.

Verified claims are sent to the payer for adjudication. The Payer/Health Plan Administrator returns the Claim Resolution file to Tellus weekly, Tellus stamps “Submitted” claims as “Paid” or “Denied.” The Payer/Health Plan has the ability to monitor performance to identify potential cases of fraud, waste and abuse via the Tellus eVV Payer Console.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
134	RR.6	Solution must provide a report of visits not verified that will be available to billing providers.	Provide an example of the report of visits not verified that will be available to billing providers.	N/A	S	
Bidder's Response:						

Billing providers can view visits not verified at any time in the Tellus eVV Claims Console. As visits are completed, the visit details are automatically made available to the Claims Console for verification and matching to scheduled visits and PAs. Matching algorithms run in the background every ten minutes comparing: scheduled services, rendered services, prior authorizations and business rules.

Provider Administrators review claims in the Work List and take action. Claims statuses and related actions are:

- “Matched-On Hold,” meaning all data elements align as they should, and the claim is ready to review and “Submit”
- “Unmatched-On Hold,” meaning there are discrepancies between the data elements, and the visit needs review and remediation prior to submission.

Visits that are not verified require, at minimum, a reason for manual remediation of any discrepancies. The matching algorithm then runs again after remediation and either promotes to “Matched-On Hold” or retains “Unmatched-On Hold” status. If promoted to “Matched-On Hold,” the claim is now a verified visit and is ready for review and submission.

Verified claims are sent to the payer for adjudication. The Payer/Health Plan Administrator returns the Claim Resolution file to Tellus weekly, Tellus stamps “Submitted” claims as “Paid” or “Denied” in the Claim Review. The Payer/Health Plan has the ability to monitor performance to identify potential cases of fraud, waste and abuse via the Tellus eVV Payer Console.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
135	RR.7	Solution should be able to create a report of all daily transactions by type.	Describe how DHHS will be able to access a report of all daily transactions by type, and provide an example of the report.	N/A	S	

Bidder's Response:

The Payer/Health Plan has the ability to monitor performance on any key metrics via the Tellus eVV Payer Console. The dashboard provides an at-a-glance, snapshot view of performance against key indicators.

The platform also provides tools giving the DHHS the ability to run any reports on scheduled intervals or in real time on an as needed basis. If our standard reports and ad-hoc reporting tools are unable to meet the needs of the DHHS, we will build customized reports within required time frames. Our business intelligence algorithms are designed to identify potential instances of fraud, waste and abuse. Alerts can be built to notify the agency of potential FWA on a schedule or as identified, including supporting documentation.

A sample Payer Console dashboard is depicted as follows:



Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
136	RR.8	Solution's reporting system shall be configurable so that standard reports can be changed easily over the life of the contract.	Describe how the reporting system shall be configurable so that standard reports can be changed easily over the life of the contract.	N/A	S	

Bidder's Response:

Tellus delivers robust reporting and analytics capabilities. In addition to standard reports, Tellus can customize reports based on customer requirements and formatting preferences. Reports can be scheduled to run periodically as well as on an on-demand, ad-hoc basis. They can also be exported in a variety of formats to support data analysis and to supplement presentations. Access to reports and reporting tools is granted based on user role permissions

Intuitive ad-hoc reporting tools allow users to access near real-time data without impacting system performance or speed. Reports can also be generated on a schedule and delivered to designated users on a pre-defined periodic basis. We use Jaspersoft tools that are easy to use so reports can be created by any non-technical staff members, thereby, reducing time, labor and development costs while giving authorized users the power to access information when and how they need it.

Jaspersoft tools make it easy to:

- Change source files and/or select fields



- Access an interactive toolbar with a layout band
- Determine the view type of the report
- Determine mode menu
- Filter the data

Reports can be configured over the life of the contract so that key performance indicators align with trends as well as changing needs and requirements.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
137	RR.9	Solution must provide for role-based access to reporting functionality and data rights. For example, providers must have access to reports for services they have provided and case managers will have access to reports for individuals for whom they manage care. (Not all users can access all reports.)	Describe how users will have role-based access to reporting functionality and data rights.	N/A	S	

Bidder's Response:

Data entered online and captured remotely is visible in real time to all users who have permission to access the information. Access is multi-tiered, so a payer will be able to see all of the data related to all of their program participants across the provider network by accessing the Tellus eVV Payer Web Console. The dashboard provides near real-time data related to scheduled visits, completed visits, late visits, etc. The data can be drilled into for more specific details.

Access to information from the reporting dashboard is role-based and authorization based. This allows each user profile to be individually configured with the needed authorizations, tailoring roles to the specific needs of each professional figure. These configurable elements can be changed by administrators at any given moment, directly from the platform's interface. Additionally, this multi-level approach for access to data (roles and authorizations) provides an extra level of security and privacy for the information stored in the system.

Examples of information levels that are typically configured on the basis of roles and specific authorizations are:

- Consumer-Directed Service Employer
- Fiscal Management Services Administrator
- Agency Provider
- Payer

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
138	RR.10	Solution should allow authorized users to design, save and share configurable dashboards and reports.	Describe how solution shall allow authorized users to design, save and share configurable dashboards and reports.	N/A	S	

Bidder's Response:

Tellus eVV utilizes a modern, open source reporting tool to define web dashboards viewable on the Tellus eVV Web Consoles. "Cards" are created that can be mixed and matched dynamically to customize the look and feel for the individual user of the dashboard based on user login credentials similar to the way users customize applications to launch when they start their computer.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
139	RR.11	Solution should provide the flexibility to vary time periods for reporting purposes and to produce reports on daily, monthly, quarterly basis, or other frequency specified by the State.	Describe how solution shall provide the flexibility to vary time periods for reporting purposes and to produce reports on daily, monthly, quarterly basis, or other frequency specified by the State.	PE.PI2.16	S	

Bidder's Response:

Reports can be run on-demand or configured to run as event-driven or on a regular or varied schedule, including during non-business hours. These reports can be generated in a number of on demand formats, including but not limited to, PDF, Excel Spreadsheet, XML, and CSV files. Reports can be set to be generated on daily, monthly, quarterly, or any other frequency defined by the State. Finally, they can be delivered by on-screen display, export/download, email, or FTP.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
140	RR.12	Solution should support reporting roles to include access such that DHHS can designate individuals to review, analyze and report all data across payers, providers, direct care workers, and individuals receiving services.	Describe how reporting roles include user access so that DHHS can designate individuals to review, analyze and report all data across payers, providers, direct care workers, and individuals receiving services.	N/A	S	

Bidder's Response:

Data is available for retrieval, view, export, or print for any user who is authorized to access it. Access to information from the reporting dashboard is role-based and authorization-based. This allows each user profile to be individually configured with the needed authorizations, tailoring roles to the specific needs of each user. These configurable elements can be changed by administrators at any given moment, directly from the platform's interface. Additionally, this multi-level approach for access to data (roles and authorizations) provides an extra level of security and privacy for the information stored in the system. Authorized users can perform queries based on the criteria that meet their needs

Our proposed solution offers permission and role-based dashboard reporting for every required user type. We will work in collaboration with you to configure dashboards for each user type, so they meet the needs of you and the user type. The dashboard view improves program oversight by enabling users to have a comprehensive view into operational information that is relevant to their user type. When users log in, they see the dashboard that provides information relevant to their roles. Dashboards provide easy, at-a-glance views of key information with the ability to drill down for greater detail.

Our robust reporting and business intelligence solution makes it easy for the DHHS to designate individuals to review, analyze and report all data across payers, providers, caregivers and participants.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
141	RR.13	Solution must have reporting functionality which will include tools to facilitate the presentation of data in meaningful ways, including tables, graphs and maps.	Describe how the reporting functionality will include tools to facilitate the presentation of data in meaningful ways, including tables, graphs and maps. Provide a complete list of tools that will be included in the solution to facilitate the presentation of data.	N/A	S	

Bidder's Response:

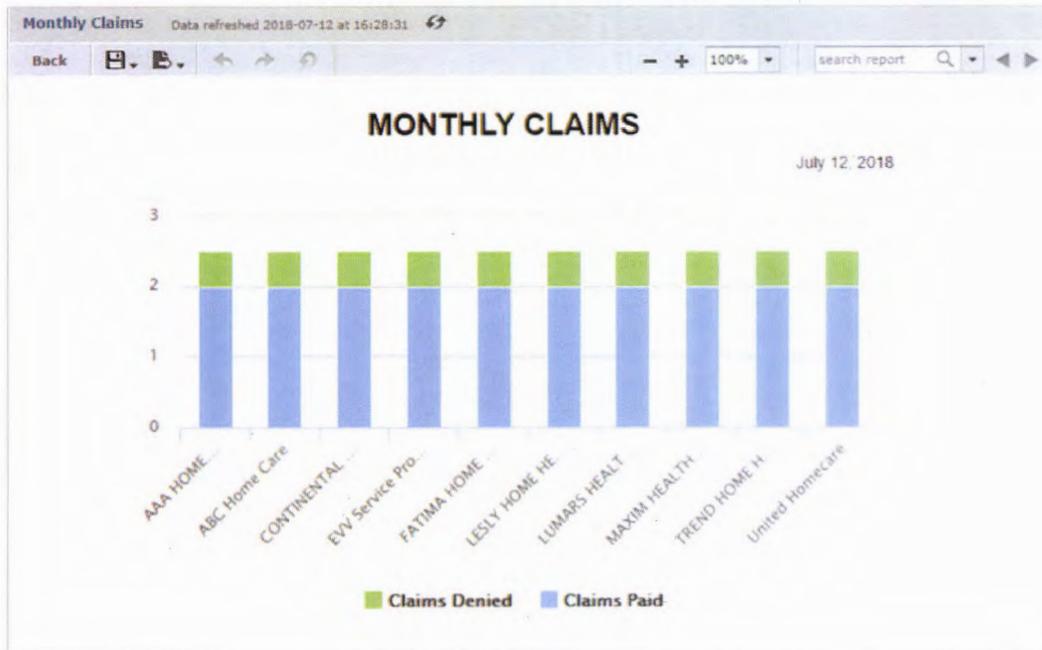
Intuitive ad-hoc reporting tools allow users to access near real-time data without impacting system performance or speed. Reports can also be generated on a schedule and delivered to designated users on a pre-defined periodic basis. We use Jaspersoft tools that are easy to use so reports can be created by any non-technical staff members, thereby, reducing time, labor and development costs while giving authorized users the power to access information when and how they need it.

Jaspersoft tools make it easy to:

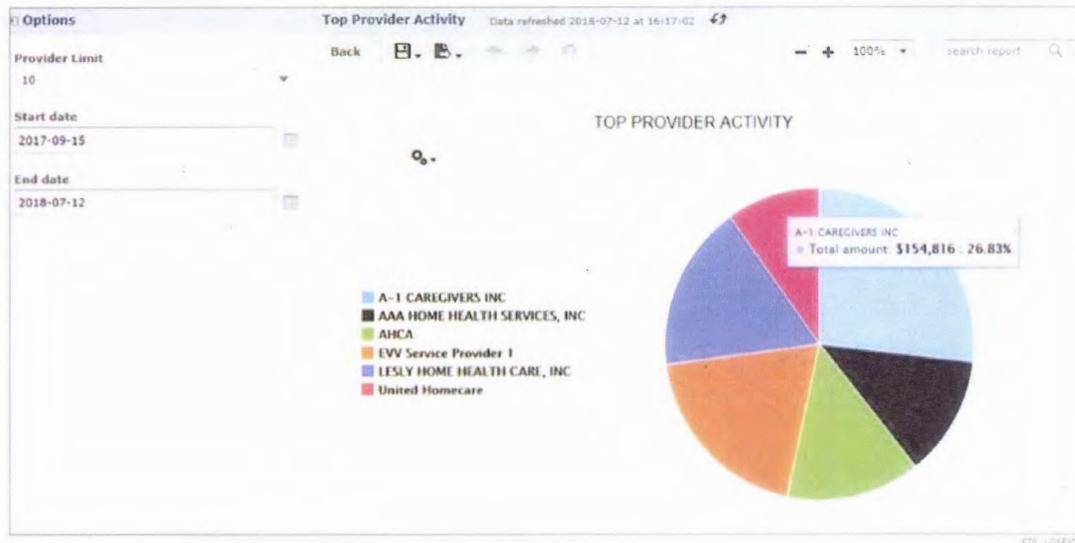
- Change source files and/or select fields
- Access an interactive toolbar with a layout band
- Determine the view type of the report, which can be a variety of visual layouts to facilitate the presentation of data including, but not limited to, bar charts, tables, pie charts, line charts and maps, as follows:
- Determine mode menu
- Filter the data

Ad-hoc reporting workflow is illustrated below.

- Bar chart



- Pie chart



Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
142	RR.14	Solution should collect and store data needed to produce reports consistent with data collection plan to assess quality and appropriateness of care furnished to participants of the waiver program.	Describe solution's capability to collect and store data needed to produce reports consistent with the data collection plan to assess quality and appropriateness of care furnished to participants of the waiver program.	TA.BI.10	S	

Bidder's Response:

Meaningful information begins with standard, quality data. Quality data is accurate and consistent for reliability and comparability. Tellus employs the following principles to collect quality data:

- **Data Authenticity:** data is captured and validated at the source
- **Data Integrity:** all data entries and modifications are monitored using an audit log
- **Non-repudiation:** data is authenticated at the source with secure login credentials

Data security is critical. All data is encrypted both at rest and in transit. Data is made available only to the individuals who need access to that information by employing role-based permissions. Data is always available to users who have permission to access it.

The Tellus eVV platform is built on a service-oriented architecture (SOA) and is open database connectivity (ODBC) compliant making the application extremely flexible and agile while allowing for bi-directional exchange of information with virtually any other open architecture application, including Financial Management Systems, Agency Management Systems, third-party EVV and other software systems.

The Data Aggregator is a powerful tool enabling seamless collection and normalization of data from various sources into a common database. Regardless of origination, the data is put into a common format and record layout so it is consistent with the database layout and, ultimately, exposed to the consoles and other applications for reporting.

Tellus eVV include a robust reporting business intelligence rules engine that makes it easy to construct, modify and remove rules. Since business rules are not hard coded into the application, development resources are not required to change rules. We maintain an electronic Business Rules Catalog that can be accessed by the State. Standard rule definitions and rules are available; however, rules can be configured at the Payer, Program, Provider and Recipient levels as requested to ensure quality patient care and program integrity. As rules are changed, user and training documentation is updated. If substantial changes are made users will be notified by an outreach campaign.

The data aggregator and business intelligence features provide the DHHS an overall and holistic view into the provision of services to their participants. Consolidating data in a single source through the data aggregator allows the DHHS to monitor the overall performance of the providers servicing the participants along with assess quality and appropriateness of care furnished to participants of the waiver program. The EVV data collection component provides the DHHS and the providers and participants detail views into the timeliness and type of services. The EVV data collection component of our solution is architected for optimal performance with the reporting platform running against an operational data store (ODS) that is synchronized in near real-time with the production database.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
143	RR.15	Solution should provide reports that allow users to drill down from summarized data to detailed data.	Describe solution's ability to provide reports that allow users to	TA.BI.5	S	

drill down from summarized data to detailed data.

Bidder's Response:

Customizable, visually appealing graphical dashboards are combined with drill-down reporting functionality that enables users to manipulate and understand data and respond quickly. With our solution, the user can design and execute queries using any criteria or dynamic filters they choose, including wild card searches. This means the user can determine the exact content of the report. So, whether they want to search by date range, member, direct care worker, service or any other criteria, they can run an ad-hoc report that meets their needs. Drill-down functionality includes reporting by payer, case manager, caregiver, billing provider, and participant as well as FFS Medicaid, MCO purchasing model, and across payers. It employs a point-and-click user interface, so it requires minimal technical skill to run reports, so there is no need to hire a specialized resource.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
144	RR.16	Solution should support retrieval and presentation of data associated with geographic indicators such as state, county, and zip code.	Describe solution's ability to support retrieval and presentation of data associated with geographic indicators such as state, county and zip code.	TA.FR.1	S	

Bidder's Response:

With our solution, the user can design and execute queries using any criteria or dynamic filters they choose. This means the user can determine the exact content of the report. So, whether they want to search by geographic indicators such as state, county and zip code, they can run an ad-hoc report that meets their needs. Drill-down functionality includes reporting by payer, case manager, caregiver, billing provider, and participant as well as FFS Medicaid, MCO purchasing model, and across payers. It employs a point-and-click user interface, so it requires minimal technical skill to run reports, so there is no need to hire a specialized resource.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
145	RR.17	Solution should support federal reporting requirements when these requirements are met through the decision support services (DSS).	Describe how solution supports federal reporting requirements.	TA.FR.2	S	

Bidder's Response:

Tellus is fully compliant with the 21st Century Cures Act mandate capturing the following data points for Medicaid personal and home health care services. Capturing this data helps improve transparency and deter fraud, waste and abuse:

1. Type of service performed,
2. Individual receiving the service,
3. Date(s) of service,
4. Location of service delivery,
5. Individual providing the service, and
6. Time the service begins and ends.

Once the caregiver is scheduled to provide services to a participant, the caregiver accesses their schedule on the mobile app using private login credentials and either a personal identification number or a biometric indicator (depending upon the hardware capability). The schedule specifies the participant, date, start time, end time, location and services to be rendered, including tasks if specific tasks are assigned at the time the schedule is created.

When the caregiver arrives at the location where the participant is scheduled to receive services, the caregiver starts the visit. At the start of the visit, the date, time and location are electronically captured. After services are performed the caregiver ends the visit, and the date, time and location are electronically captured. The participant and caregiver will then sign the screen on the mobile device capturing the visit information to confirm receipt and delivery of services.

Tellus eVV provides State and Federal reporting with auditable confirmation of the data entered by the provider and approved by the individual. All manual edits to electronically captured data points are recorded in an audit log that tracks the change made, the individual who made the change, the date the change was made and the time the change was made.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
146	RR.18	Solution should support a variety of formats and output options (e.g. Word, Excel, html, Access database, GUI formats).	Describe how solution supports a variety of formats and output options.	TA.FR.4	S	

Bidder's Response:

With our solution, the user can design and execute queries using any criteria or dynamic filters they choose, including wild card searches. This means the user can determine the exact content of the report. So, whether they want to search by date range, participant, caregiver, service or any other criteria, they can run an ad-hoc report that meets their needs. We also offer a library of standard reports.

Reports are available in a variety of formats, including but not limited to, PDF, Excel, CSV, and HTML. Reports can be delivered by on-screen display, download, email, or FTP. Data is always encrypted at rest and in transit to the point of delivery to the user.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
147	RR.19	Solution should support simple queries and pre-formatted reports that are easy to access, follow a user-friendly protocol, and produce responses immediately.	Describe how solution supports simple queries and pre-formatted reports that are easy to access, follow a user-friendly protocol, and produce responses immediately.	TA.FR.6	S	

Bidder's Response:

We offer a library of standard reports that can be accessed at any time or scheduled to run at any pre-defined interval. With our solution, the user can design and execute queries using any criteria or dynamic filters they choose. This means the user can determine the exact content of the report. So, whether they want to search by date range, participant, caregiver, service or any other criteria, they can run an ad-hoc report that meet their needs.

Customizable, visually appealing graphical dashboards are combined with drill-down functionality that enables users to manipulate and understand data and respond quickly. Drill-down functionality includes reporting by payer, case manager, caregiver, billing provider, and participant as well as FFS Medicaid, MCO purchasing model, and across payers. It employs a point-and-click user interface, so it requires minimal technical skill to run reports, so there is no need to hire a specialized resource.

Tellus uses an operational data store (ODS) or “datamart” for real-time query and ad-hoc reporting using either Jaspersoft, Tellus’ user-friendly business intelligence (BI) platform or the client’s BI platform (example: Crystal Reports).

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
148	RR.20	Solution should provide ad hoc reporting capability that presents summarized information on key factors (e.g. number of enrollees, total dollars paid) to executive staff upon request.	Describe how solution provides ad hoc reporting capabilities that present summarized information on key factors to executive staff upon request.	TA.FR.7	S	

Bidder’s Response:

Tellus provides each payer and provider agency with a customizable web-based dashboard that displays a number of business intelligence “cards” or graphics to display key information at a glance. These can be customized to fit the needs of the individual user so if executive staff wants to see summarized information, such as number of enrollees, total dollars paid, etc., those cards are simply added to the dashboard. The user can click to drill down into any card to see more detailed graphics and the source data. Additional cards can be added at client request.

An example Payer Console dashboard is depicted as follows:



Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
149	RR.21	Solution should generate performance measures for specific business processes using predefined and ad hoc reporting methods.	Describe how solution generates performance measures for specific business processes using predefined and ad hoc reporting methods.	TA.PM.8	S	

Bidder's Response:

With our solution, the user can design and execute queries using any criteria or dynamic filters they choose. This means the user can determine the exact content of the report. So, whether they want to search by date range, participant, caregiver, service or any other criteria, they can run an ad-hoc report that meets their needs.

Reports can be configured over the life of the contract so that key performance indicators align with trends as well as changing needs and requirements. The EVV platform has a broad array of standard reports already configured and built-in, which are important to the success of your EVV system. Examples of standard reports include:

- **Activities across providers:** This report is used to analyze member behavior to detect fraud or aberrant billing behavior or improve service delivery and logistics.
- **Claims by date:** This report analyzes claims data from a chronological standpoint. One of the uses of this report is the evaluation of peak times and dates.
- **Claims edited:** This report shows which claims were changed at some point during their lifecycle, allowing analysts to spot possible anomalies in service delivery, billing, logistics, and possibly fraud.
- **Claims exception by reason code:** This report allows analysts to focus on specific exceptions, rank reasons, and discover patterns. This feature allows the design of improved service delivery and logistics workflows, while supporting fraud detection.
- **Claims on hold:** This report shows which claims are currently awaiting resolution. Generating this report allows analysts to detect in advance possible fraud or aberrations in billing.
- **Claims resubmitted:** This report provides a visualization of which claims were entered more than once in the system. This report supports the detection of duplicated data and the identification of possible causes.
- **Claims submitted, denied:** This report allows analysts to visualize which claims have been denied and spot trends in the data, leading to the possible identification of fraudulent accounts or service delivery anomalies.
- **Claims submitted, paid:** This report shows all the claims with received payments, supporting accounting and logistics operations.
- **Claims voided:** This report visualizes claims created and then voided, allowing analysts to monitor trends and detect fraud or anomalies in service delivery and billing.
- **Caregiver schedule:** This report is of fundamental importance in supporting daily operations and logistics. It enables the visualization of a caregiver's schedule for workload management.
- **Prior authorization, no scheduled visits:** This report identifies patients who are authorized but are not receiving care, enabling corrective actions.
- **Provided ID does not equal authorized provider ID:** This report responds to a specific search for discrepancies, which could be caused by fraud or corrupted data. Visualizing this allows the identification of accounts where this conflicting information is occurring.
- **Member address change:** This report quickly visualizes accounts in which service delivery anomalies could occur because of unsynchronized data.
- **Member list:** This report shows the full list of authorized accounts. This view is useful for logistics and QA analysis.
- **Visits delivered, deviate from prior authorization:** This report compares the list of authorized visits with the list of visits delivered, allowing analysts to detect discrepancies and take corrective measures and actions.
- **Visits delivered, start address does not equal end address:** This report allows service delivery anomalies and fraud to be spotted by visualizing the list of address related inconsistencies in visit data. This report also allows the correction of member information where a change of address is needed.
- **Visits late:** This report shows visits flagged with a discrepancy in the starting time of the visit. It allows analysts to monitor caregiver performance based on timely arrival at the visit site.
- **Visits overlapping services:** This report allows the visualization of scheduling conflicts and improves logistics and service delivery.

- **Visits scheduled:** This report displays a list of upcoming visits, allowing daily monitoring of activities and trends.
- **Visits scheduled address does not equal delivery address:** This report compares the addresses of record for participants with the addresses of scheduled visits, visualizing discrepancies that could be caused by fraud or address changes.
- **Visits scheduled, conflicting prior authorizations:** This report checks scheduled visits with delivery authorizations, detecting situations where there is a conflict between visit and authorization.
- **Visits scheduled, no prior authorization:** This report checks scheduled visits with delivery authorizations, visualizing visits which have no authorization in the system.
- **Visits scheduled, not completed (missed):** This report detects and analyzes service delivery issues to visualize visits that were not delivered or logged in the system.
- **Visits supported by third-party EVV:** This report allows analysts to view which visits are not being directly managed internally, if the EVV system is not unique and centralized.
- **Visit unable to complete:** This report allows the visualization of visits in which attendants reported issues and delivery was not completed. Analysts can use this report to detect patterns caused by fraud or service delivery issues

If the State requires additional reports outside of the standard reports, we will work with you to estimate the level of effort to create these reports. We will present the estimate to the State through the Change Control process.

G.6 Technical Requirements:

Solution must be scalable, maintainable and supportable throughout the life of the contract to meet the needs of DHHS.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
150	TEC.1	Solution must have the capacity and scalability for future expansion to support additional populations or services. Additional services or programs may be added or removed from the EVV implementation at the sole discretion of DHHS. This may be related to state and federal regulations changes, budget appropriations, court proceedings and other factors. Solution must support implementation of Home Health services prior to January 1, 2023. Solution must maintain adequate capacity and scalability to add other DHHS or other Nebraska agency services as needed.	Describe how solution has the capacity for future expansion to support additional populations or services.	N/A	S	

Bidder's Response:

We utilize AWS (Amazon Web Services) cloud services for all SaaS based applications. We use AWS EC2 (Elastic Compute Cloud). Amazon EC2 enables us to increase or decrease capacity within minutes, not hours or days. It is possible to commission one, hundreds, or even thousands of server instances simultaneously. The application can automatically scale itself up and down depending on its needs.

Using Amazon RDS allows us to scale the database's compute and storage resources within minutes, often with no downtime. We are able to launch one or more Read Replicas to offload read traffic from primary database instance.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
151	TEC.2	Solution must have the capacity for ongoing growth to meet DHHS needs, including but not limited to: <ol style="list-style-type: none"> recording, storing and exchange of all data, including direct service worker and recipient service data; with at least six (6) years of data active in all actions and dashboards; and For at least ten (10) rolling years' data for reporting. 	Describe in detail the description of capability available to meet each requirement.	N/A	S	

Bidder's Response:

Tellus eVV is hosted on AWS Government Cloud and has the capacity to support ongoing growth to meet the DHHS' needs. We utilize AWS EC2 (Elastic Compute Cloud). Amazon EC2 enables us to increase or decrease capacity within minutes, not hours or days. It is possible to commission one, hundreds, or even thousands of server instances simultaneously. The application can automatically scale itself up and down depending on its needs. This includes:

- Increasing data storage capacity,
- Retaining data that will accumulate over six (6) years,
- The ability to report on data for at least ten (10) rolling years.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
152	TEC.3	Solution must be configurable to support multiple programs or services which have different policies, procedures and business rules, all of which are subject to change during the contract.	Explain how solution will be scalable and configurable to add new functional features and support more users and service types in the future without affecting the underlying system architecture or system performance.	PE.PI1.23	W	

Bidder's Response:

Tellus eVV is a SaaS-based application that is highly customizable by program in the form of configurations, business rules, user roles and permissions, parameters, consoles, reporting and integrations — all without affecting the underlying system architecture or system performance. During the business requirements gathering phase of the project, business analysts will work with DHHS program personnel to define the customized criteria for implementation. Business rules are managed using a rules engine that is managed outside of the standard code base providing the flexibility to change rules and configurations during the term of the contract.

Tellus has developed questionnaires to facilitate this process. The following extract demonstrates examples of configurable options by program:

Caregiver Perform Visit	Overlapping Visits	Existing: Configurable by program	Enable/Disable: Schedule more than one recipient for a caregiver at the same time
Caregiver Perform Visit	Overlapping Visits	Existing: Configurable by program	Enable/Disable: Schedule more than one caregiver for a recipient at the same time
Tellus Claims Matching	Claims Submission	Existing: Configurable by program	Enable/Disable: Automatic submission of "Matched" claims based on matching criteria specified below
Tellus Claims Matching	Visit Authorization Number Matches PA Authorization Number (Error Code = No Authorization)	Existing: Configurable by program	Enable/Disable: If no match, claim in "Unmatched: On-hold" status requiring provider input to re-run matching algorithm

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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153	TEC.4	<p>Solution must have a comprehensive audit trail:</p> <ul style="list-style-type: none"> a) Solution must provide an audit trail or log which identifies all access to PHI. b) Audit trail or log used to identify access to protected health information must be retained for a minimum of ten (10) years. 	<p>Describe in detail the audit trail, including all field level data retained, to track all changes to business rules. Describe how solution provides an audit trail or log to identify accesses to PHI for a minimum of ten (10) years. Include in the description the data elements that are retained to document the access.</p>	N/A	S	
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Bidder's Response:

Tellus eVV monitors application activity using a comprehensive audit trail. All data entered or modified can be traced back to the source of entry whether a data feed or a user:

The audit trail for all data entries and edits include the user making the change, the date and time of the change and the information changed in the application audit log. If the State chooses to enforce the entry of reason codes to explain edits, those rules can be applied using our business intelligence rules engine.

All data capture by Tellus eVV will be retained for at least ten (10) years. Raw data elements will be transferred to DHHS in the format and frequency requested.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
154	TEC.5	<p>Solution should be browser agnostic and must be maintained, updated and supported with a cadenced and planned schedule. NE DHHS currently uses Internet Explorer as the browser standard. For provider and client facing systems, the State of Nebraska requires that the systems support the industry standard browsers such as Chrome, Firefox, Safari as well as Internet Explorer. Solution should support the current versions of these browsers with minimum backward compatibility for two older browser versions. Solution roadmap should include plans to maintain compatibility with future browser versions.</p>	<p>Describe how solution provides full compatibility with selected browsers at current versions with backward compatibility for two older browser versions. Provide list of browsers supported, current versions supported and update / maintenance process.</p>	TA.CS.6	S	

Bidder's Response:

Our EVV solution currently supports the following operating systems and web browsers.

DESCRIPTION	CAPABILITY
Supported PC Operating Systems	<ul style="list-style-type: none"> • Windows OS (32 or 64 bit) Version 7 or higher • Mac OS Version X (10) or higher
Supported Mobile Operating Systems (visit verified through geolocation, requires Internet Access/FOB)	<ul style="list-style-type: none"> • iOS Version 8 or higher • Android Version Lollipop (5.0) or higher
Supported PC & Mac Browsers	<ul style="list-style-type: none"> • Microsoft Internet Explorer Version 11 or higher • Microsoft Edge Version 16 or higher • Google Chrome Version 4 or higher • Apple Safari Version 10 (Mac)/4 (Windows) or higher • Mozilla Firefox Version 57 or higher
Supported Mobile Browsers:	<ul style="list-style-type: none"> • Google Chrome Version 4 or higher on Android
Mobile Device Requirements	<ul style="list-style-type: none"> • Operating System: Android or iOS (see above) • Bluetooth required: No • GPS required: Yes • Voice support required: No • Min memory of phone: 25 MB • Min storage of phone: 50 MB
IVR Technology Adopted	<ul style="list-style-type: none"> • Visit verified through landline by using Automatic Number Identification (ANI)
Data Exchange Methodologies	<ul style="list-style-type: none"> • NextGen Connect (formerly Mirth Connect) is our healthcare information exchange data interchange platform • REST application programming interface (API) and JavaScript Object Notation (JSON) for data transport • API endpoints are secured with transport-level HTTPS encryption with message-level encryption; PGP also available • Standard APIs and custom APIs as necessary for any third party integrating with our solution • ANSI X12 EDI exchanges including 835 and 837 formats
Standard ASCII file formats (portal documents storage and sharing)	<ul style="list-style-type: none"> • PDF • Excel • Text
Standard file format (data coming from third party EVV Systems):	Final file formats are defined with the DHHS during needs analysis

Compatibility standards required for this engagement will be defined during the requirements gathering phase. Software modifications can be made if additional support is required.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
155	TEC.6	Solution must include license and use of all software required to perform EVV capabilities and oversight.	Describe how licenses shall be provided as required by DHHS to allow users access to perform all necessary business functions.	N/A	S	

Bidder's Response:

Tellus eVV is a SaaS solution. Our cost proposal includes all fees associated with operating the application. Our software is compatible with commercially available operating systems and browsers.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
156	TEC.7	Unless otherwise mutually agreed to in writing, Contractor must maintain any and all hardware and software products required to support the solution at the most current to -2 version, including patches, fixes, upgrades, and releases for all software, firmware and operating systems. Any security patches must be maintained at most current level after thorough testing.	Describe method of maintaining all hardware and software patches, fixes, upgrades, and releases for all software, firmware and operating systems utilized by solution.	N/A	S	

Bidder's Response:

Application fixes will be identified in our quality assurance activities and remediated during our regular sprint cycles. If the DHHS requests a fix that is time sensitive, the request is documented in the form of a change order. A change order will capture the details of the request and will be reviewed and signed by the DHHS. Change orders may or may not have a cost associated with them. The delivery date for the change is estimated. Enhancements will be scheduled in our product roadmap and released on a quarterly basis. If an enhancement is time sensitive, it will be scheduled into our sprint cycles and released off cycle. Off cycle enhancements will be documented as a change order and will adhere to the change management process.

Standard releases and updates are scheduled on a quarterly basis; however, we will operate on a bi-weekly sprint schedule so fixes and enhancements will be accommodated more frequently if necessary. If production level fixes are required, they will be developed and deployed as a hotfix. This will only occur in rare, extreme circumstances.

We will work with the DHHS to incorporate input into the prioritization of new features and enhancements for the EVV solution.

New releases will be deployed as configuration options for existing clients. Features and functions for upcoming releases will be communicated at least one month in advance of the release data and existing users will be educated about the options available as a result of the enhancements or modifications. They can adopt those changes by changing applicable business intelligence rules and configuration settings.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
157	TEC.8	Solution should provide an environment where components can be added or replaced quickly and non-disruptively.	Describe how solution shall provide an environment where components can be added or replaced quickly and non-disruptively.	N/A	S	

Bidder's Response:

Tellus employs a modular service-oriented architecture promoting loosely coupled services over a secure network. Business rules are maintained in a modularized rules engine that integrates seamlessly, in real time, with other components of the application while making them easy to configure, maintain and modify. Business rules are cataloged for ease of access and ability to review.

Tellus eVV is comprised of five (5) major modules, or components, that operate together or individually. The modules work seamlessly together in a runtime environment employing loosely coupled services. Real-time rendered service data is available for claims pre-adjudication and 837 submission to MMIS on the day services are completed. Payer adjudication data can be imported to EVV and made available to providers as soon as the payer transmits the information to Tellus. Tellus can accept standard 835 or proprietary data formats.

Tellus supports the open/hybrid EVV model and publishes standard open Application Program Interfaces (APIs) that promotes interoperability across the Medicaid ecosystem integrating with care management applications, third-party EVV vendors and MMIS.

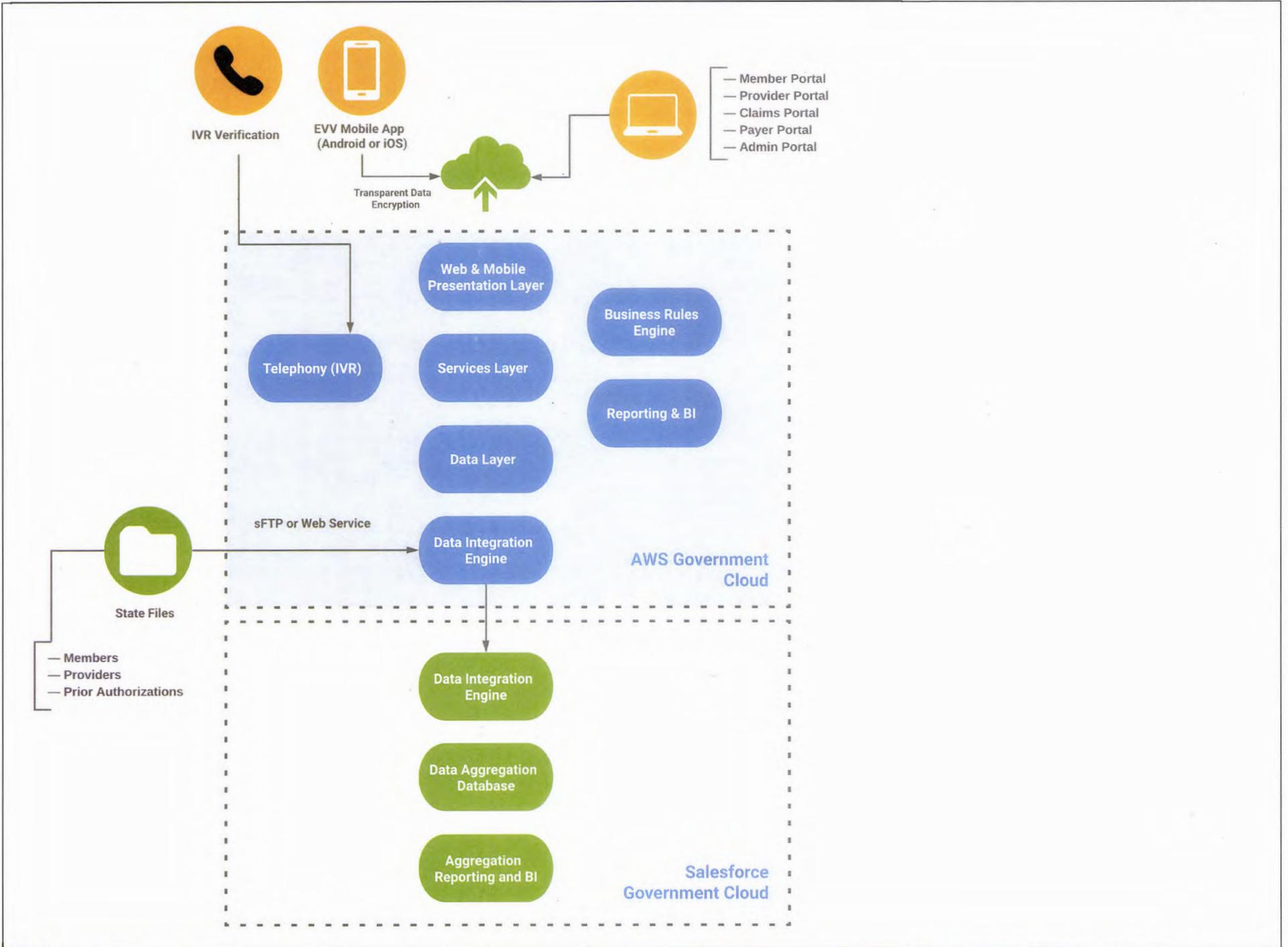
Tellus uses NextGen Connect (formerly Mirth Connect), an open source, cross-platform, bi-directional healthcare integration engine providing maximum flexibility to integrate with health information exchanges, public health agencies, human service programs and other community organizations as required.

This combination of modularity, service-oriented architecture and bi-directional open standard APIs supports an environment where components can be added or replaced quickly and non-disruptively.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
158	TEC.9	Solution should provide an architecture that has clearly defined service endpoints.	Provide a description of architecture and any architectural drawings.	N/A	S	

Bidder's Response:

Our application architecture has clearly defined endpoints. Please see the architectural drawing below:



Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
159	TEC.10	Solution must ensure all hardware, software, and communication components installed for use by state staff are compatible with the State's currently supported versions of the Microsoft Operating System, Microsoft Office Suite and Internet Explorer; and current technologies for data interchange.	Describe how the solution shall ensure all hardware, software, and communication components installed for use by state staff are compatible with the state's currently supported versions of the Microsoft Operating System, Microsoft Office Suite and Internet Explorer; and current technologies for data interchange.	N/A	S	

Bidder's Response:

In order to provide our clients with a broad range of solutions, our application is supported using open standards and commercially available software and hardware. No proprietary licenses or equipment are required to access or use our EVV application.

Our EVV solution is a SaaS-based application supporting multiple clients with one code base. All changes to the application for individual clients will be supported through changes to configurations, integrations and business rules. We can share configurations, integrations, and rules implemented by other clients with the approval of those clients or anonymously as options. Tellus currently certifies support for the EVV Console (browser-based), Claims Portal (browser-based), and EVV App (mobile device app) on the following browsers and phone/PC operating systems:

DESCRIPTION	CAPABILITY
Supported PC Operating Systems	<ul style="list-style-type: none"> Windows OS (32 or 64 bit) Version 7 or higher Mac OS Version X (10) or higher
Supported Mobile Operating Systems (visit verified through geolocation, requires Internet Access/FOB)	<ul style="list-style-type: none"> iOS Version 8 or higher Android Version Lollipop (5.0) or higher
Supported PC & Mac Browsers	<ul style="list-style-type: none"> Microsoft Internet Explorer Version 11 or higher Microsoft Edge Version 16 or higher Google Chrome Version 4 or higher Apple Safari Version 10 (Mac)/4 (Windows) or higher Mozilla Firefox Version 57 or higher
Supported Mobile Browsers:	<ul style="list-style-type: none"> Google Chrome Version 4 or higher on Android
Mobile Device Requirements	<ul style="list-style-type: none"> Operating System: Android or iOS (see above) Bluetooth required: No GPS required: Yes Voice support required: No Min memory of phone: 25 MB

		<ul style="list-style-type: none"> • Min storage of phone: 50 MB
	IVR Technology Adopted	<ul style="list-style-type: none"> • Visit verified through landline by using Automatic Number Identification (ANI)
	Data Exchange Methodologies	<ul style="list-style-type: none"> • NextGen Connect (formerly Mirth Connect) is our healthcare information exchange data interchange platform • REST application programming interface (API) and JavaScript Object Notation (JSON) for data transport • API endpoints are secured with transport-level HTTPS encryption with message-level encryption; PGP also available • Standard APIs and custom APIs as necessary for any third party integrating with our solution • ANSI X12 EDI exchanges including 835 and 837 formats
	Standard ASCII file formats (portal documents storage and sharing)	<ul style="list-style-type: none"> • PDF • Excel • Text
	Standard file format (data coming from third party EVV Systems):	Final file formats are defined with the DHHS during needs analysis

If the DHHS requires expanding our compatibility profile, that request can be accommodated.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
160	TEC.11	Solution should provide context sensitive help (situational clarification and support associated with process specific steps), to support user activities (e.g. maintenance activities).	Describe how solution shall provide context sensitive help (situational clarification and support associated with process specific steps), to support user activities (e.g. maintenance activities).	N/A	S	

Bidder's Response:

We will create and publish online documentation and Demo Videos outlining the functionality of the EVV System. The online training and support portal will include user guides that document process flows using screenshots and step-by-step instructions, Frequently Asked Questions (FAQs), video tutorials, recorded training sessions and access to support resources.

We recommend a train-the-trainer approach to allow providers the flexibility to re-train or train new hires. These remote trainers may be referred to as training liaisons or training coordinators. Each provider Manager or training liaison will be responsible to ensure their staff receive the training and have signed affidavits to this effect.

As new features or capabilities are added to the EVV application, training materials will be updated to reflect the changes. The outreach plan will include a method of advising training liaisons or coordinators of the content changes and will outline the process for updating any hardcopy training materials in the field.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
161	TEC.12	Contractor shall provide the solution's technical, functional, and performance documents as required by the IV&V Contractor.	Describe solution's process for maintaining and providing solution's technical, functional and performance documents as required by the IV&V Contractor.	N/A	S	

Bidder's Response:

We will create and maintain a set of standard technical application documents for the system. Our maintenance and operations policies are the starting point for the critical and standard documents framework. Critical documents will include an overview document, interfaces and operating controls, known error and workarounds, maintenance tasks and frequency, and business process flow for business functions. Standard documents will include non-production and production environment details, database architecture, system access, component context and interaction diagram, user screens and batch jobs details.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
162	TEC.13	Solution must support multiple web services standards, including web services, specifications, and adapters (e.g., ODBC, Web Service (WSDL, WS-*, SOAP, REST, UDDI, ODATA), JSON-WDP, MS SQL, SQL Server, Oracle, FTPS, SFTP, HTTPS, MSMQ).	Describe which web services standards the solution shall support: web services, specifications, and adapters (e.g., ODBC, Web Service (WSDL, WS-*, SOAP, REST, UDDI, ODATA), JSON-WDP, MS SQL, SQL Server, Oracle, FTPS, SFTP, HTTPS, MSMQ).	N/A	S	

Bidder's Response:

Our proposed solution complies with HIPAA standards. Our cloud-based EVV solution is hosted through a web services environment, which is the most secure hosted network solution available. Access to the EVV solution is tightly controlled using secure login identification and device access controls. System security is integrated into the system's basic design. We have a number of standard security features to make sure that only authorized users can access the system and its data, including user authentication through IDs and passwords, functional access controls, multiple firewalls, and different virus protection products. Data transmitted between external systems and our servers are protected by authentication and encryption, while secure file transfer protocols (SFTP) are always used for data file transmissions.

Industry standard OAuth2 protocols are used for authentication. Every application's access to backend processes via REST API requires an authentication token to be passed with each API call.

JSON Web tokens (JWT) are used for API Authentication. JWT is an open standard (RFC 7519) that defines a compact and self-contained way to securely transmit information between parties as a JSON object. This information can be verified and trusted because it is digitally signed. JWTs are signed using a secret JWT token sent to the API via standard HTTP Authorization header. Token payload contains user information restricting API access to certain endpoints.

Tellus uses NextGen Connect (formerly Mirth Connect), an open source, cross-platform, bi-directional healthcare integration engine providing maximum flexibility to integrate with health information exchanges, public health agencies, human service programs and other community organizations as required. All non-proprietary data relevant to DHCF can be scheduled for delivery to DHHF using the following tools and file formats:

Bi-directional interfaces can be built using the following interchange protocols:

- TCP/MLLP
- Database (MySQL, PostgreSQL, Oracle, Microsoft SQL Server, ODBC)
- File (local file system and network shares)
- PDF and RTF documents
- JMS
- FTP/SFTP
- HTTP/Web Services
- SMTP
- SOAP (over HTTPS)
- DICOM
- JavaScript

The open architecture also allows for the easy addition of custom and legacy interfaces.

Typical messaging standards supported by the Tellus data interchange solution include:

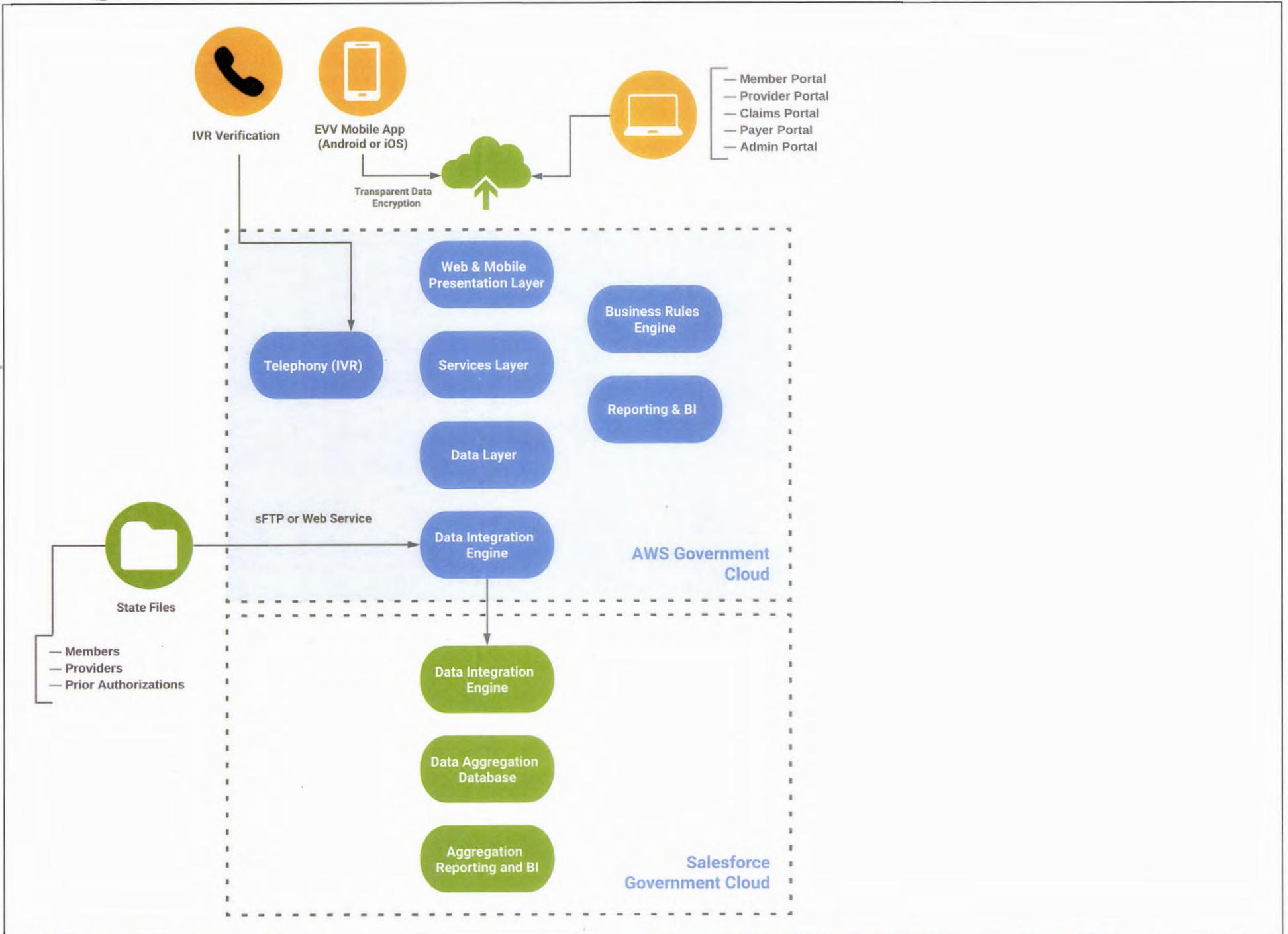
- ANSI X.12 Electronic Data Interchange (EDI) including 834, 837I & 837P
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW
- JavaScript Batch
- Additional Data Types are support via API Libraries

Tellus uses Amazon Web Services (AWS) EC2 instances with Amazon Elastic Block Store (EBS) storage to take advantage of AWS features such as Auto Scaling for instances. EBS allows Tellus to deploy encrypted volumes, (meeting FIPS 140-2 standards), provision multiple block devices readily with varying sizes and throughput and create snapshots for backups.

NextGen Connect also requires a database backend that must be secure, highly available, and scalable. To meet these needs with a HIPAA, compliant AWS service, Tellus makes use of the ORACLE MySQL relational database.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
163	TEC.14	Solution should use technology-neutral interfaces that localize and minimize	Describe solution's technology-neutral interfaces that localize and minimize impact of new	TA.CM.4	S	

		impact of new technology insertion or replacement.	technology insertion or replacement.			
<p>Bidder's Response:</p> <p>Our solution will interface with the DHHS and other external solutions through well-documented, technology-neutral and secure interfaces. Below is a schematic of the integration points and security methodologies for each interface.</p>						



Our solution places a premium on securing data exchanged between internal and external systems. We constantly evaluate and upgrade our data exchange security protocols to incorporate the most secure and cost-effective methodologies. We will manage data interchange of member, provider, prior authorization, and claims information through one of two ways:

- A secure file transfer process using public key infrastructure (PKI) data encryption methodology
- A secure web service interface that expressly authorizes specific system processes to interchange data over isolated and secured ports. Data interchange of verified visits between the EVV platform and the Data Aggregation Platform is through a PGP-encrypted secure file transfer protocol (SFTP) method. Browser access to the EVV platform portals is through an HTTPS/TLS (Transport Layer Security) secured connection. Users must be authorized to access the portals and authenticated before portal access is granted.

Mobile users upload encrypted EVV data to the EVV platform server, and the local data on the mobile device is secured using Transparent Data Encryption functionality. Tellus will submit the technical documentation, including a final architectural diagram for each system environment, data dictionary, and high-level process flow diagram prior to contract signature. We will also negotiate the exact time frame for this delivery with the DHHS prior to contract signature. The DHHS will review and approve any architectural changes, relative to interface points with the DHHS and external data sources before we implement them. We will implement integration point architecture changes in the lower environments first, and then promote them to upper environments after completing formal system integration testing (SIT) and user acceptance testing (UAT) and receiving the DHHS approval.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
164	TEC.15	Solution should develop data models (conceptual, logical and physical) that include mapping of information exchange with external organizations.	Describe solution's ability to develop data models that include mapping of information exchange with external organizations.	TA.DAM.3	S	

Bidder's Response:

Meaningful information begins with standard, quality data. Quality data is accurate and consistent for reliability and comparability. Tellus employs the following principles to collect quality data:

- **Data Authenticity:** data is captured and validated at the source
- **Data Integrity:** all data entries and modifications are monitored using an audit log
- **Non-repudiation:** data is authenticated at the source with secure login credentials

Data security is critical. All data is encrypted both at rest and in transit. Data is made available only to the individuals who need access to that information by employing role-based permissions. Data is always available to users who have permission to access it.

Below we list the defined data dictionaries and standard file formats for each of the following categories of integrations. Tellus is a founding member of the National Electronic Visit Verification Association (NEVVA), an organization dedicated to defining and sharing data and formatting standards for EVV transactions. This specifies the file layouts for a Tellus standard integration, and all mapping/processing software. Tellus can accept files that do not meet standard file formats as required based on project specifications

Message	Description
Type Code List	Unified type code listing used for all other messages.
Provider	Used by Payers (State Medicaid, MCO, etc.) to submit Home Care Agency information to the EVV solution.
Recipient	Used by Payers (State Medicaid, MCO, etc.) to submit Recipient (Patient) information to the EVV solution.

Prior Authorization	Used by Payers (State Medicaid, MCO, etc.) to submit Prior Authorizations (PA's) to the EVV solution.
User	Used by Payers (State Medicaid, MCO, etc.) to submit user information (Caregivers, Case Managers, Admins) to the EVV solution.
Schedule	Used by Providers via an Agency Management System to submit scheduling information to the EVV solution.
Payer	Used to import Payers (MCO's State Medicaid Programs, Private Insurance Companies, etc.) into the Tellus eVV Solution

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
165	TEC.16	Solution should apply single source of information methodologies.	Describe solution's ability to apply single source of information methodologies.	TA.DAM.7	S	

Bidder's Response:

Tellus applies single source of information methodologies to improve efficiencies by reducing required maintenance, enhancing traceability and increasing consistency. This is accomplished by storing system information in as few places as possible, preferably — one place. Once stored it can be rendered in multiple ways for different audiences in the form of views.

One example of single sourcing is writing business rules in our business rules engine outside of the standard code base. The rule is then referenced as required throughout the code as required for application processing.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
166	TEC.17	Solution should use standardized business rules definitions that reside in a separate application or rules engine.	Describe solution's ability to use standardized business rules definitions that reside in a separate application or rules engine.	TA.DM.1	S	

Bidder's Response:

Business rules defined at the implementation phase of the project will dictate who can verify visits and the related conditions that will apply. Rules are easy to add, configure, and change.

Tellus eVV Business Intelligence Rules Engine is a modular, highly configurable component of our EVV solution. Business rules are initially defined by the payer during the requirements gathering phase of the engagement and written in the EVV rules engine module at the payer/program/provider and even recipient levels. Rules are separate from the code base making them configurable and changeable without development resources. Rules can be written around any field for a single or combination of user rules making our rules engine extremely robust with the ability to support advanced data analytics and reporting.

Our EVV solution is a SaaS-based application supporting multiple clients with one code base. All changes to the application for individual clients will be supported through changes to configurations and business rules. We can share configurations and rules implemented by other clients with the approval of those clients or anonymously as options. Participant satisfaction mechanisms potentially in the form of surveys are part of our product roadmap and can be supported by the application.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
167	TEC.18	Solution should use a rules editor that maintains the current version of standardized business rules definitions in a language that business people can interpret and transforms them into machine language to automate them.	Describe solution's ability to use a rules editor that maintains the current version of standardized business rules definitions in a language that businesspeople can interpret and transforms them into machine language to automate them.	TA.DM.2	S	

Bidder's Response:

Tellus uses an open source business rules engine that is comprised of a rules editor that captures rules in language businesspeople can interpret and transforms those rules into machine language that our standard code base calls to perform when applicable. Rules are summarized in an overview format so they can be easily catalogued by type with a short description that includes a reference to the sections of the application the rule is used. The overview also tracks version history and comments so the reason for rule changes can be captured for reference purposes.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
168	TEC.19	Authorized user(s) must have access to user activity history and other management functions, including but is not limited to log-on approvals/ disapprovals and log search and playback.	Describe solution's ability for authorized users to have access to user activity history and other management functions, including but not limited to log-on approvals / disapprovals and log search and playback.	TA.LG.1	W	

Bidder's Response:

User roles and permissions determine the components of the application a user can access. User roles can be restricted to access specific components of the system. They also determine what a user can do in those components, for example read only, read/write, modify, approve, etc.

Specified user roles can be permitted to access user activity history of other users including logon approvals and disapprovals, log searches and playbacks.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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169	TEC.20	Contractor should provide a current product roadmap which provides details regarding planned updates, timing of product versions/releases, end of support (EOS) and end of life (EOL) for current and past versions. Roadmap should contain information regarding third-party products that the solution utilizes. Product roadmap should be updated quarterly.	Describe solution's product roadmap, release schedule, planned roadmap enhancements, any plans for end of support or end of life, and other product version/release information.	S&C.LC.11	S	
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Bidder's Response:

Tellus uses a product roadmap to prioritize current and future development activities. New releases and updates are released on a quarterly basis and the product roadmap is updated on the same quarterly cycle. New releases will introduce configuration options for existing clients and will not impact current features and functions. Release notes for upcoming features, functions and business rule options will be communicated at least one month in advance of the release date and existing users will be educated about the options available as a result of the enhancements or modifications. They can adopt those changes by selecting to access a new module, or by employing applicable business intelligence rules and configuration settings.

Our solution will support State and federally mandated requirements through the entire support phase. When notice of a mandatory regulatory change is received, we will work with you to determine the timing and business requirements for the application of system changes to support state and federal mandates.

At this time there are no anticipated end-of-support or end-of-life updates planned. As technology evolves, there may be changes to supported operating systems, browsers and third-party products that are no longer operationally viable. Those changes will be communicated at least twelve months in advance and are not anticipated to significantly affect clients because we will make those choices based on technical feasibility and obsolescence.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
170	TEC.21	Solution should use regionally standardized business rule definitions in both human and machine-readable formats.	Describe how solution uses regionally standardized business rule definitions in both human and machine-readable formats.	S&C.MS.10	S	

Bidder's Response:

Tellus uses an open source business rules engine that is comprised of a rules editor that captures rules in language businesspeople can interpret and transforms those rules into machine language our standard code base calls to perform when applicable. Rules are summarized in an overview format so they can be easily catalogued by type with a short description that includes a reference to the sections of the application the rule is used. The overview also tracks version history and comments so the reason for rule changes can be captured for reference purposes.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
171	TEC.22	Solution should define and utilize system modules that can be interchanged without major system design.	Describe how solution defines and utilizes system modules that can be interchanged without major system redesign.	S&C.MS.14	S	

Bidder's Response:

Our Service-Oriented Architecture (SOA) includes a modular business intelligence rules engine that makes it easy to construct, modify and remove rules. Since business rules are not hard coded into the application, development resources are not required to change rules.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
172	TEC.23	Solution should use an intrastate rules engine separate from core programming with established interstate standardized business rules definitions.	Describe how solution uses an intrastate rules engine separate from core programming with established interstate standardized rules definitions.	S&C.MS.16	S	

Bidder's Response:

We use a business intelligence rules engine to support data analysis and manipulation. Because all rules are defined and written outside of our code base, it is easy to add, remove, or modify the way data elements are managed. For example, during the implementation, we will work with the DHHS and program subject matter experts to identify the rules and configurations appropriate for each program.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
173	TEC.24	All system design documents should utilize a widely supported modeling language (e.g., UML, BPMN).	Describe system design document modeling language which solution uses. DHHS utilizes Sparx Systems Enterprise Architect (EA) for modeling artifacts. Model artifacts shall be importable to the Sparx EA tool.	S&C.MS.18	S	

Bidder's Response:

Tellus system design documentation is written in UML. UML is an industry standard modeling language. Model artifacts can be exported and imported into most enterprise architect tools.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
174	TEC.25	Modularity must be verified through extensive testing that demonstrates compliance with chosen interface standards and specifications.	Describe how testing will verify modularity using extensive testing that demonstrates compliance with	S&C.MS.4	S	

chosen interface standards and specifications.

Bidder's Response:

Tellus uses NextGen Connect (Mirth Connect), an open source, cross-platform, bi-directional healthcare integration engine providing maximum flexibility to integrate with health information exchanges, public health agencies, human service programs and other community organizations as required.

Data interchange may be in asynchronous batch mode or synchronous transactional mode. The general sequence of events is the same for synchronous or asynchronous, with the difference being in the timing of the response messages.

All file transmissions and imports will be built and tested using NextGen Connect including: EDI 834, EDI 837I, EDI 837P, EDI 278 and proprietary files. NextGen Connect also supports real-time data exchange. EVV system interface testing will be documented and tested in our User Acceptance Testing (UAT) / Testing, Validation and Operational Readiness (TV&OR) Plan.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
175	TEC.26	Solution should leverage reliable messaging, including guaranteed message delivery (without duplicates) and support for non-deliverable messages.	Describe solution's message capabilities, including guaranteed message delivery and support for non-deliverable messages.	TA.SOA.2	S	

Bidder's Response:

Data interchange may be in asynchronous batch mode or synchronous transactional mode. The general sequence of events is the same for synchronous or asynchronous, with the difference being in the timing of the response messages.

The sequence begins with the data submitter sending Tellus an inbound message (XML, flat file, web services request, etc.) via an integrated channel. As noted above, Tellus supports any commonly used integration method and has a high degree of flexibility regarding file layout, transport protocol, and security protocol. Tellus will run a preliminary edit on the message layout and content and will inbound process any valid records. Tellus will then return a confirm/reject message using the same transport protocol as the submission and will also send an alert email to the sender. If Tellus later outbound processes and transmits a message to our client/partner, then the same process is expected in reverse.

A message, or row within a source file, enters NextGen Connect (formerly Mirth Connect) as a raw inbound message and is received by the Source Connector, which can then be evaluated, filtered and/or transformed before being sent to the Destination Connector. The raw inbound message can be passed through multiple destination connectors where it can be influenced by filters and transformers before final processing and being sent to a destination.

The Dashboard allows for monitoring interface activity in real time. Interface errors can be reviewed, corrected and reprocessed in real time as well.

Tellus publishes a complete set of specifications for all Tellus proprietary messages.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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176	TEC.27	Contractor must develop and deliver a Conceptual Data Model that depicts the business area high-level data and general relationships for intrastate exchange.	Describe solution's conceptual data model and how it depicts the business area high-level data and general relationships for intrastate exchange.	IA.CDM.1	S	
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Bidder's Response:

Tellus maintains a conceptual data model that is used across our EVV platform. Our data dictionary is central to our data management plan. The data model and data dictionary are the foundation for our integration specifications and support all inbound and outbound data extraction, transformation and loading activities.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
177	TEC.28	The system data models (conceptual, logical, and physical) delivered and developed by the contractor should identify relationships between key entities in the enterprise.	Describe solution's system data models which are delivered and developed by contractor and how contractor will identify relationships between key entities in the enterprise.	IA.CDM.2	S	

Bidder's Response:

Tellus' conceptual, logical and physical data models underpin our data sharing specifications and integrations. During the business requirements phase of the project, Tellus will work with the DHHS to understand project and program requirements and how those details will be mapped into our EVV data models. If there are details required that are not currently captured in our existing model, the model will be extended to accommodate the required data elements.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
178	TEC.29	Solution should utilize an intrastate metadata repository that defines the data entities, attributes, data models, and relationships sufficiently to convey the overall meaning and use of data and information.	Describe how solution will provide metadata information that defines the data entities, attributes, data models, and relationships sufficiently to convey the overall meaning and use of the data and information. Solution shall provide meta data information in industry standard export formats.	IA.DMS.2	S	

Bidder's Response:

Tellus eVv documentation includes conceptual, logical and technical data models, entity relationship diagrams, data dictionaries and integration specification documents. This documentation is interrelated with data dictionaries and integration specification documents providing metadata to define data models and data relationships.

Tellus uses NextGen Connect (formerly Mirth Connect), an open source, cross-platform, bi-directional healthcare integration engine providing maximum integration flexibility. Typical messaging standards supported by the Tellus data interchange solution include:

- ANSI X.12 Electronic Data Interchange (EDI) including 834, 837I & 837P
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW
- JavaScript Batch
- Additional Data Types are support via API Libraries

Tellus will work with the DHHS to identify your preferred data export format.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
179	TEC.30	Solution should define and utilize statewide standard data definitions, data semantics, and harmonization strategies.	Describe how solution defines and utilizes statewide standard data definitions, data semantics, and harmonization strategies.	IA.DMS.4	S	

Bidder's Response:

Standard data definitions, semantics and harmonization for the State of Nebraska will be a subset of the strategies Tellus employs for our platform-wide data strategy. Tellus will work with the DHHS to understand internally defined data elements and map them to the appropriate data elements within the EVV data structure. Like data elements across statewide systems will be identified and harmonized during that process.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
180	TEC.31	Solution should support consumption of data in multiple formats from many sources, such as vital statistics, MCO encounter data, benefit manager encounter data (pharmacy, dental, mental health), waiver program data, and census bureau.	Describe how solution supports consumption of data in multiple formats from many sources.	IA.DS.11	S	

Bidder's Response:

Data transfers and aggregation are among our core competencies. In fact, we have dedicated configuration teams specifically assigned to data sharing and integration. We use industry-leading, cross-platform, bidirectional, health care integration engines for data interchange. The purpose of data sharing is to consolidate data from various sources into one system of record in the most efficient manner possible to save time and minimize redundant processes. Sharing data with other systems means data is exported from one software application and shared by importing it into another application. As it relates to EVV, we import data from multiple systems to store data in a common database. Some of this information is foundational to set up the system; for example, the payer will send provider, participant, and prior authorization data to import into the EVV database. MCOs will

also send provider, participant, and prior authorization data to import into the EVV database. The data is normalized as part of the import process. Visit data collected from our solution as well as other EVV systems is imported into the data aggregation database.

File format will be defined during business requirements analysis. The EVV system allows health care information to be shared natively in a variety of protocols including:

- TCP/MLLP
- Database (MySQL, PostgreSQL, Oracle, Microsoft SQL Server, ODBC)
- File (local file system and network shares)
- PDF and RTF documents
- JMS
- FTP/SFTP
- HTTP/Web Services
- SMTP
- SOAP (over HTTPS)
- DICOM
- JavaScript

The flexible open architecture also allows custom and legacy interfaces to be easily added to support data sharing with systems that are not able to share information in one of the protocols not native to the platform.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
181	TEC.32	Solution's user interface or associated interfaces should provide text titles for frames to facilitate frame identification and navigation.	Describe how solution's user interface or associated interfaces provide text titles for frames to facilitate frame identification and navigation.	TA.CS.10	S	

Bidder's Response:

The Tellus eVV user interface provides both icons and text titles to identify frames. The following menu is present on all screens and can be minimized to display only icons. The frame the user is currently working in is highlighted in the menu. In the screenshot below, the user is working on the dashboard which is why the "Dashboard" icon and text title is highlighted:



-  Dashboard
-  Schedule
-  Visits
-  Work List
-  Claim Review
-  Prior Authorizations
-  Reports
-  Users
-  Recipients
-  Provider
-  Settings
-  Training
-  Logout

This frame identification convention is used throughout our web-based EVV solution set.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
182	TEC.33	Solution's transactions must execute in a reasonable amount of time.	Describe solution's transaction execution time, and how execution time is monitored and reported.	TA.PM.5	S	

Bidder's Response:

The average page response time for our EVV technical solution is one-one-hundredth (.001) of a second; therefore, maintaining a response time (to call-in transactions) of less than three (3) seconds for user-submitted data for ninety-eight percent (98%) of the transactions is achievable.

Historical system performance supports our ability to maintain a response time (to call-in transactions) that is less than three (3) seconds for user submitted data for ninety-eight percent (98%) of the transactions



AWS CloudWatch is used to monitor network traffic, bandwidth utilization and identify bottlenecks that impede performance. Monitoring and auto-scaling systems provide the information required to diagnose system performance issues, errors and backlogs. Monitoring includes, but is not limited to, CPU, memory utilization, network and disk utilization. For the database server we also monitor read/write latency, number of sessions, and session performance. Our engineers get immediate notifications regarding all system issues. If they cannot be resolved immediately, notifications will be forwarded to the DHHS and/or Providers as required based on service level agreements.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
183	TEC.34	Solution should collect information in predefined formats.	Describe how solution will collect information in predefined formats, and identify formats used.	TA.PM.6	S	

Bidder's Response:

Tellus eVV has the ability to import data for integration purposes utilizing a variety of formats. Our data integration documents specify predefined standard formats; however, we are also able to map proprietary data files as required. Tellus is able to support the following industry standard data formats including:

- ANSI X.12 Electronic Data Interchange (EDI) including 834, 837I & 837P
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW
- JavaScript Batch
- Additional Data Types are support via API Libraries

Examples of standard data integration specifications are published at the following location:

<https://tellusolutions.atlassian.net/wiki/spaces/EVV/pages/182124545/Rendered+Services+File+Specifications>

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
184	TEC.35	Solution must provide the ability to record and monitor the performance and utilization of resources within the overall system.	Describe how solution provides the ability to record and monitor the performance and utilization of resources within the overall system.	TA.PM.7	S	

Bidder's Response:

Tellus eVV collects and evaluates all the data necessary to evaluate the operation and performance of the EVV program to monitor and improve operations, transparency and accountability. AWS Cloudwatch is used to monitor network traffic, bandwidth utilization and identify bottlenecks that impede performance. Monitoring and auto-scaling systems provide the information required to diagnose system performance issues, errors and backlogs. Monitoring includes, but is not limited to, CPU, memory utilization, network and disk

utilization. For the database server we also monitor read/write latency, number of sessions, and session performance. Our engineers get immediate notifications regarding all system issues. If they cannot be resolved immediately, notifications will be forwarded to the DHHS and/or Providers as required based on service level agreements.

Our AWS infrastructure is configured with robust System Performance Measuring and Monitoring tools supporting 99.9% uptime. In case of failure of the primary node, Amazon RDS performs an automatic failover to the standby without the need for manual administrative intervention. Within minutes, a new instance of the server is launched in a different AWS Availability Zone or region. Downtime is cut to minutes instead of hours. Using various AWS regions and different physical data centers ensures the system is highly available and fault tolerant.

All backups and recovery of databases for all cases, including disaster and system failure, are hosted in at least two different Availability Zones (geographically different data centers). Database instances are kept in sync real-time. Backups are scheduled and occur at regular intervals. They are then encrypted and stored in multiple locations providing 99.9% durability.

Additionally, we achieve high levels of fault tolerance for our applications by using AWS Elastic Load Balancing to automatically route traffic across multiple instances and multiple Availability Zones (physical data centers). Elastic Load Balancing ensures only healthy Amazon application server instances receive traffic by detecting unhealthy instances and rerouting to healthy servers. If additional computing capacity is required, we have systems in place to automatically scale the application and database service layers to ensure SLAs are met.

We also use Amazon Relational Database Service (RDS) to host our database server. Amazon RDS runs on the same highly reliable infrastructure previously discussed. Amazon RDS synchronously replicates the data to a standby instance in a different Availability Zone (different datacenter). RDS features we use to enhance reliability for critical production databases include: automated backups, database snapshots, and automatic host replacement in case of primary database crash. Database backup snapshots are taken at regular intervals and sent to AWS S3 encrypted storage.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
185	TEC.36	The Department prefers cloud-based hosting for the solution. The delivery of the solution/services should be seamless with the hosting solution providing the flexibility to integrate other solutions for security and regulatory purposes in the future and be cost-effective and scalable. Solution must provide production, UAT and training environments. Solution must provide visibility into capabilities of development and SIT environments, and must provide access to SIT environment to support interface testing prior to UAT. Solution must provide ongoing access to a UAT environment for integration and solution testing during the operations phase to support approved changes via the approved change management process.	Describe solution's approach to hosting and how delivery of the solution will be seamless. Describe how hosting solution provides the flexibility to integrate other solutions for security and regulatory purposes in the future and be cost-effective and scalable. Also show how solution meets State and Federal regulations, security and performance requirements. Describe the production, UAT and training environments.	N/A	S	

Bidder's Response:

Our EVV solution is in production supporting Medicaid-funded programs. It is a configurable, extensible, COTS-based solution hosted in the cloud. All components of the application are accessible using commercially prevalent hardware, operating systems and web browsers. Our modular components are easily integrated with other applications using industry standard communication and data formats.

Our solution will support State and federally mandated requirements through the entire support phase. When notice of a mandatory regulatory change is received, we will work with you to determine the timing, due dates, and any associated additional costs for the application of system changes to support the requirements

As a best practice all variable parameters will be externalized and stored in the configuration server. The system will allow for different sets of parameters for production, UAT, QA and development environments. Application will load all parameters from the configuration server at startup.

We will establish UAT and training environments in the same secure enclaves as the production environment. Both environments will be subject to the same security and access controls as the production environment. The design and size of UAT environment will also mirror the production environment. Production data will be copied over to the UAT environment periodically to refresh the UAT environment. The training environment, or "sandbox," and all lower environments will only contain de-identified data and will not contain production data. This sandbox environment resets to a clean state every 24 hours.

We do not recommend that production data be copied into lower environments because the security controls are not as stringent in these environments and the risk of PHI/PII exposure is significantly higher. We use commercial test data generation tools to routinely create test data that does not reflect any production non-public information. Masking of production data in the lower environments will therefore not be required.

G.7 Data Management Requirements:

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
186	DM.1	Solution must verify that all fields defined as numeric contain only numeric data.	Describe how solution verifies that all fields defined as numeric contain only numeric data.	TA.SP.1	S	
<p>Bidder's Response:</p> <p>We use multiple methodologies and coding to validate data depending on input method. Tellus eVV uses NextGen Connect (formerly Mirth Connect) as the underlying platform for data interchange. NextGen Connect is an open source, cross-platform, bi-directional, health care integration engine. NextGen Connect reads one inbound record of data at a time and has logic for each field as per our requirements in the data dictionary. If a data field is required to be a numeric value, then the code in NextGen Connect calls our numeric function validating it to be a numeric value. The function will reject the data field if it contains an alpha character or special character or anything except a numeric value.</p> <p>Furthermore, if the database field is a numeric data type, it is one of integer data types so that only numeric values will be inserted into the database field. If NextGen Connect tries to pass a non-integer value into those fields, it will fail on insert.</p>						

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
187	DM.2	Solution must verify that all fields defined as alphabetic contain only alphabetic data.	Describe how solution verifies that all fields defined as alphabetic contain only alphabetic data.	TA.SP.2	S	
<p>Bidder's Response:</p> <p>We use multiple methodologies and coding to validate data depending on input method. Tellus eVV uses NextGen Connect (formerly Mirth Connect) as the underlying platform for data interchange. NextGen Connect is an open source, cross-platform, bi-directional, health care integration engine. NextGen Connect reads one inbound record of data at a time and has logic for each field as per our requirements in the data dictionary. If a data field is required to be an alphabetic value, then the code in NextGen Connect calls our alphabetic function validating it to be an alphabetic value. The function will reject the data field if it contains anything except an alphabetic value.</p>						

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
188	DM.3	Solution must support data integrity through system controls for software program changes and promotion to production.	Describe how solution supports data integrity through system controls for software program changes and promotion to production.	TA.SP.23	S	
<p>Bidder's Response:</p> <p>Data Integrity Controls</p>						

Tellus ensures that the design and implementation of applications take into account the risks of processing failures that may lead to a loss of integrity. Tellus takes steps to minimize such risk by employing appropriate data integrity controls. Data integrity controls address:

1. The use of add, modify, and delete functions to implement changes to data
2. Procedures to prevent programs running in the wrong order or running after failure of prior processing.
3. The use of appropriate programs to recover from failures to ensure the correct processing of data.
4. Protection against attacks using buffer overruns/overflows.
5. A checklist for validation checking shall be prepared, activities documented, and the results shall be kept secure. The checks to be incorporated include the following and can be manual:
 - a. Session or batch controls, to reconcile data file balances after transaction updates
 - b. Balancing controls, to check opening balances against previous closing balances, namely.
 - c. Run-to-run controls file update totals program-to-program controls validation of system-generated input data.
 - d. Checks on the integrity, authenticity or any other security feature of data or software downloaded, or uploaded, between central and remote computers.
 - e. Hash totals of records and files.
 - f. Checks to ensure that application programs are run at the correct time.
 - g. Checks to ensure that programs are run in the correct order and terminate in case of a failure, and that further processing is halted until the problem is resolved; and creating an automated log of the activities involved in the processing.

Control of Operational Software

To minimize the risk of corruption to operational systems, the following procedures shall be implemented to control changes:

1. The updating of the operational software, applications, and program libraries shall only be performed by authorized administrators.
2. Operational systems shall only hold approved programs or executable code (i.e. no development code or compilers).
3. Vendor supplied software used in operational systems shall be maintained at a level supported by the supplier.
4. Tellus uses the latest version of Web browsers on operational systems to take advantage of the latest security functions in the application.

Source Code Control

Source Code Control Access to program source code (code written by programmers, which is compiled and linked to create executables) and associated items (such as designs, specifications, verification plans and validation plans) shall be strictly controlled, in order to prevent the introduction of unauthorized functionality and to avoid unintentional changes. Program source code shall be stored in a central location, specifically in program source libraries. The following requirements shall be implemented to control access to such program source libraries in order to reduce the potential for corruption of computer programs:

1. Program source libraries shall not be held in operational systems.
2. The program source code and the program source libraries shall be managed according to established procedures.
3. Access to program source libraries shall be strictly limited to that which is needed to perform a job function.
4. The updating of program source libraries and associated items, and the issuing of program sources to programmers shall only be performed after appropriate authorization has been received.
5. Program listings shall be held in a secure environment.
6. An audit log shall be maintained of all accesses to program source libraries. Maintenance and copying of program source libraries shall be subject to strict change control procedures.

Configurability through our robust business rules engine is the characteristic of our COTS product that enables easy adaptation to processing requirements without custom coding. Extensibility is the characteristic of COTS that accommodates custom configuration while preserving the integrity of the core software so that upgrades and new releases can be readily applied. Both configurability and extensibility are critical competencies of COTS in supporting your requirements. Without configurability and extensibility, a project becomes a traditional, custom one-of-a-kind system development effort instead of a configured service implementation.

The extensibility of our solution will allow the addition of new features or software components without modification to the core solution. This is an important feature when considering the dynamic nature of the health care industry.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
189	DM.4	Solution should have the capability to handle requests for amendment and support timely action of making amendments to ePHI, PII and FTI about the individual in a designated record set.	Describe how solution handles requests for amendment and supports timely action of making amendments to ePHI, PII and FTI about the individual in a designated record set.	TA.SP.45	S	

Bidder's Response:

Provider agencies may be allowed to amend recipient data, or they may not. This is a configurable option in the business rules engine. If enabled, provider agencies administrators, who have permission to do so, can easily update recipient data in the web-based Administrator Console. Some payers only allow amendments to data via the payer feed, in which case, the data will be updated when it is transmitted to Tellus eVV.

Another configurable option is to allow caregivers to enter notes and/or alerts using the mobile app to effectively and efficiently communicate participant status to provider administrators and vice versa with provider administrators adding notes in the web-based console for the caregiver to review on the mobile app.

G.8 Integration and Interoperability Requirements:

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
190	IIO.1	Contractor will be responsible for understanding the business processes to automate and document appropriate workflows, business rules, data flow and metadata within the solution and work collaboratively with the DHHS System Integration Team.	Describe how the Contractor shall be responsible for understanding the business processes to automate and document appropriate workflows, business rules, data flow and metadata within the solution and work collaboratively with the DHHS system integration team.	N/A	S	

Bidder's Response:

Tellus will work closely with the DHHS program representatives and the System Integration Team to understand program and business rules, user roles, business processes and integration workflow. Detailed documents including Business Requirements and Technical Specifications documents will be developed during the business requirements gathering phase of the engagement and are customized to the deployment based on information provided by the DHHS Team.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
191	IIO.2	Solution must support use of XML standard messaging format to ensure interoperability.	Describe how the solution will use XML standard messaging format to ensure interoperability.	TA.DC.9	S	

Bidder's Response:

Tellus uses NextGen Connect (formerly Mirth Connect), an open source, cross-platform, bi-directional healthcare integration engine providing maximum flexibility to integrate with health information exchanges, public health agencies, human service programs and other community organizations as required. All non-proprietary data relevant to the DHHS can be scheduled for delivery to the DHHS using various tools and file formats.

Typical messaging standards supported by the Tellus data interchange solution include:

- ANSI X.12 Electronic Data Interchange (EDI) including 834, 837I & 837P
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW

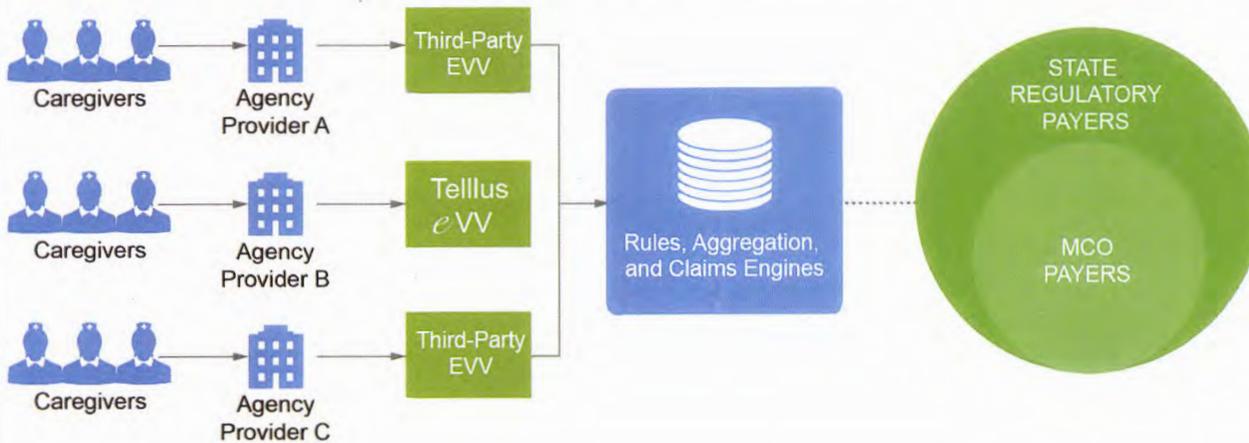
- JavaScript Batch
- Additional Data Types are support via API Libraries

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
192	IIO.3	Solution must provide for all service endpoints/APIs to be exposed to the DHHS Translator and be able to receive and submit messages through the Translator or other integration points as required.	Describe how solution provides for all service endpoints/APIs to be exposed to the DHHS Translator and are able to receive and submit messages through the Translator or other integration points as required.	N/A	S	

Bidder's Response:

The Open Vendor Model requires aggregating data from multiple sources across the Medicaid ecosystem including care management applications, front-end EVV systems and MMIS. To accomplish this, Tellus employs standard, open Application Protocol Interfaces (APIs). If APIs are not supported for a specific application, Tellus exchanges information in the form of data extract files that are shared on secure servers. One trading partner exports data from a source application and saves it in a pre-defined location on a secure server. The files are picked up by the other trading partner and loaded into other applications for a specific purpose.

The diagram below depicts the Tellus Data Aggregation process.



The Tellus eVV system delivers robust and powerful, bi-directional data interchange capabilities. Health care information can be exchanged with the DHHS Translator as well as any number of other sources. Examples include, but are not limited to:

- Health Information Exchange (HIE)
- Electronic Health Record systems (EHR)
- Practice Management Systems (PMS)
- Agency Management Systems (AMS)

- State Medicaid Management Information Systems (MMIS)
- Commercial Payer Systems
- Pharmacy Benefit Systems
- Other Source Systems

Messages typically require data transformation to ingest and process in other systems. Transformation data maps are often complex and asymmetric so a powerful extract-transform-load (ETL) platform is required.

Tellus eVV uses NextGen Connect (formerly Mirth Connect) as the underlying platform for data interchange. NextGen Connect is an open source, cross-platform, bi-directional, health care integration engine. Tellus operates NextGen Connect on the Amazon Web Services Government Cloud. Tellus is experienced in all industry-accepted data interchange protocols and standards.

Data interchange may be in asynchronous batch mode or synchronous transactional mode. The general sequence of events is the same for synchronous or asynchronous, with the difference being in the timing of imports, exports and response messages.

The sequence begins with the data submitter sending an inbound message (i.e., XML, flat file, web services request) through an integrated channel. As noted above, we support any commonly used integration method; however, we prescribe the file layouts, transport protocols, and security protocols that have been most successful for us. Alternate formats and protocols will be evaluated and mapped according to State specifications. We will run a preliminary edit on the message layout and content and inbound process all valid records. Once a file is processed a message is automatically generated to confirm acceptance of the file and/or detail reasons for rejected records using the same transport protocol as the submission. Outbound messages are processed and transmitted by reversing the process outlined for inbound messages.

A message, or row within a source file, enters the platform as a raw inbound message and is received by the Source Connector. The message is evaluated, filtered, and may be transformed before being sent to the Destination Connector. The raw inbound message may be passed through multiple destination connectors where it is influenced by filters and transformers before final processing and stored in the proper destination.

All interface activity is monitored so that interface errors can be reviewed, corrected and reprocessed in a timely manner.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
193	IIO.4	Contractor shall collaborate with all State enterprise contractors and solutions to accurately collect, process, and distribute applicable HIPAA EDI transactions.	Describe methods for collecting, processing and distributing applicable HIPAA EDI transactions.	N/A	S	

Bidder's Response:

Automated capabilities include interfacing with Medicaid Management Information System (MMIS) and other enterprise contractors and solutions via HIPAA-compliant, secure transmittal of EDI data in accordance with the time intervals. Transmission of EDI data can be scheduled as jobs that run daily or hourly.

We can exchange data with DHHS' MMIS as ANSI 5010, 837 CH, RP and 835 formats, in accordance with time intervals. The solution will interface with the MMIS to send and receive batch file transmissions from the MMIS to update the provider, recipient and claims service information on a consistent basis via EDI transmissions.

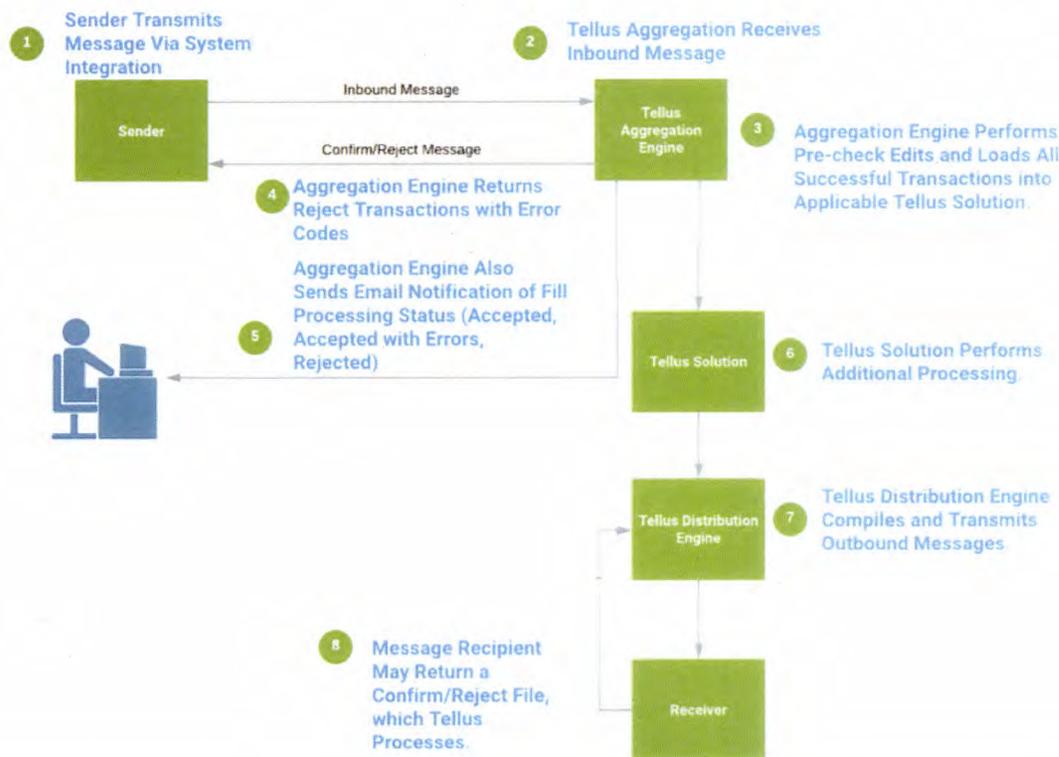
Tellus supports any commonly used integration method and has a high degree of flexibility regarding file layout, transport protocol, and security protocol. Tellus will run a preliminary edit on the message layout and content and will inbound process any valid records. Tellus will then return a confirm/reject message using the same transport protocol as the submission and will also send an alert email to the sender. If Tellus later outbound processes and transmits a message to our client/partner, then the same process is expected in reverse.



Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
194	IIO.5	Solution should have the ability to identify data or transaction errors in web services or batch file transactions and immediately notify the source system of the specific errors, where possible.	Describe how solution will have the ability to identify data or transaction errors in web services or batch file transactions and immediately notify the source system of the specific errors, where possible. Describe solution's method for error handling in data transfers.	N/A	S	

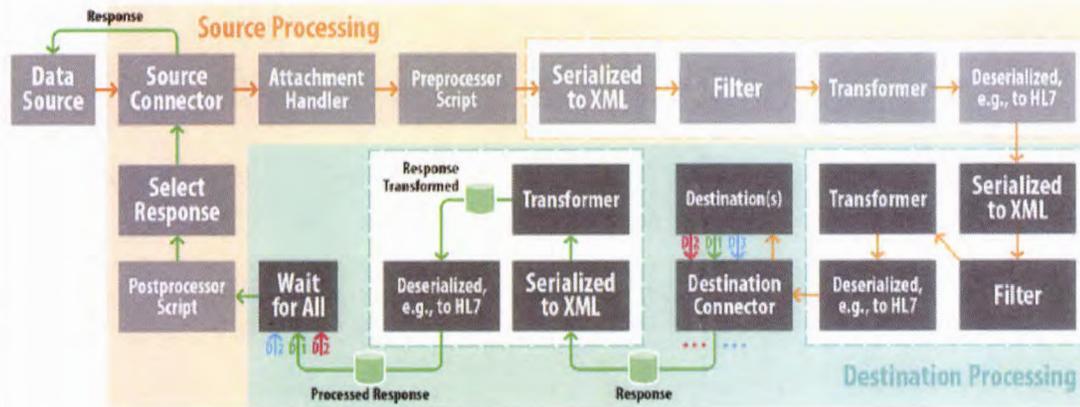
Bidder's Response:

The sequence begins with the data submitter sending Tellus an inbound message (XML, flat file, web services request, etc.) via an integrated channel.

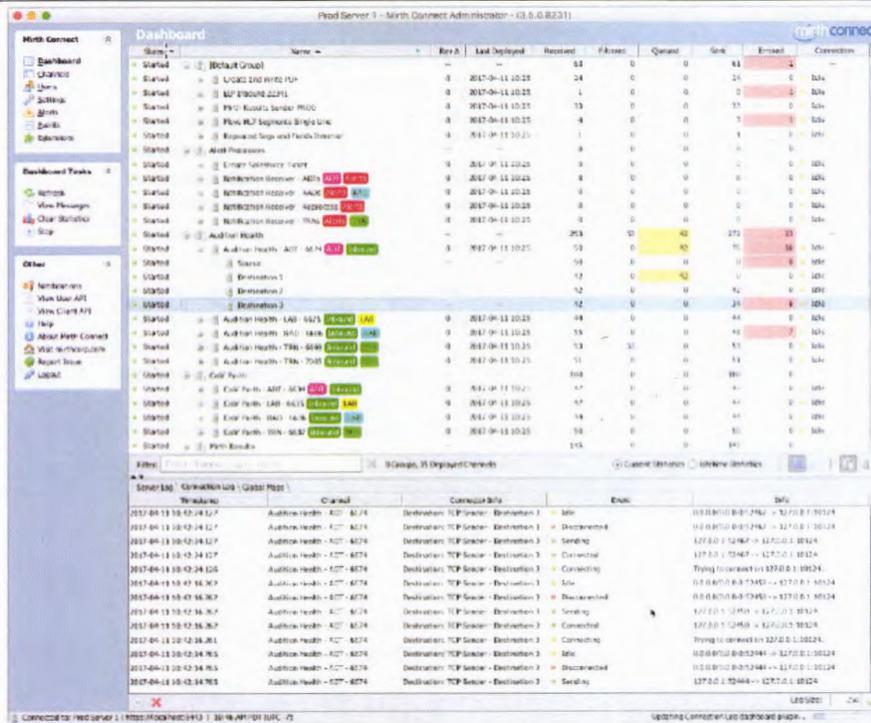


Tellus supports any commonly used integration method and has a high degree of flexibility regarding file layout, transport protocol, and security protocol. Tellus will run a preliminary edit on the message layout and content and will inbound process any valid records. Tellus will then return a confirm or reject message using the same transport protocol as the submission and will also send an alert email to the sender to notify them of the status of the file that was transmitted. If Tellus later outbound processes and transmits a message to our client/partner, then the same process is expected in reverse.

A message, or row within a source file, enters the NextGen Connect (formerly Mirth Connect) as a raw inbound message and is received by the Source Connector, which can then be evaluated, filtered and/or transformed before being sent to the Destination Connector. The raw inbound message can be passed through multiple destination connectors where it can be influenced by filters and transformers before final processing and being sent to a destination as show in the figure that follows.



The NextGen Connect Dashboard shown below allows for monitoring interface activity in real time. Interface errors can be reviewed, corrected and reprocessed in real time as well.



Tellus publishes a complete set of specifications for all Tellus proprietary messages.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
195	IIO.6	Solution must be capable of supporting multiple data exchange protocols.	Provide a list of protocols supported.	N/A	S	

Bidder's Response:

Bi-directional interfaces can be built using the following interchange protocols:

- TCP/MLLP
- Database (MySQL, PostgreSQL, Oracle, Microsoft SQL Server, ODBC)
- File (local file system and network shares)
- PDF and RTF documents
- JMS
- FTP/SFTP
- HTTP/Web Services
- SMTP
- SOAP (over HTTPS)



- ANSI X.12 Electronic Data Interchange (EDI) including 834, 837I & 837P
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW
- JavaScript Batch
- The open architecture also allows for the easy addition of custom and legacy interfaces.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
196	IIO.7	Solution must integrate with the existing and planned Nebraska DHHS systems. The Nebraska technology roadmap includes numerous in-process and upcoming system changes. Solution must maintain currency and integration points as DHHS Systems evolve.	Describe how the solution integrates with the Nebraska DHHS systems, and will continue to align and integrate with new systems as they evolve.	N/A	S	

Bidder's Response:

Tellus uses NextGen Connect (formerly Mirth Connect), an open source, cross-platform, bi-directional healthcare integration engine providing maximum flexibility to integrate with health information exchanges, public health agencies, human service programs and other community organizations as required.

Tellus supports the open/hybrid EVV model and publishes standard open Application Program Interfaces (APIs) that promotes interoperability across the Medicaid ecosystem integrating with care management applications, third-party EVV vendors and MMIS.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
197	IIO.8	Solution must securely transmit all raw data elements to DHHS and the Medicaid FMS agent in the DHHS-approved format and according to a DHHS-approved transmission schedule.	Describe how solution will securely transmit all raw data elements to DHHS and the Medicaid FMS agent in the DHHS-approved format and according to a DHHS-approved transmission schedule.	N/A	S	

Bidder's Response:

We are working with multiple Fiscal Employer Agents to extend our EVV application to better support the specific needs of consumer-directed programs and their constituents. That means in addition to being able to share visit details for participants relying on the self-directed service model, our EVV will support features and functions such as:

- Employer portal

- Responsible party and delegated party support
- Employee/Caregiver portal
- Relationship between employer/employee
- Timesheet management workflow
- Employee/Caregiver unscheduled visit support
- Fiscal employer agent portal

We recognize the needs of self-directed consumers are different than participants who receive care in traditional models and are dedicated to supporting an EVV model that supports those needs. We will work with you and your fiscal employer agents to define and build interfaces to share all required EVV data. EVV data can be shared in any of the protocols and standards described in this response.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
198	IIO.9	<p>Solution must interface with the DHHS system modules and HCBS providers to authorize payment of claims based on verified delivery of services and compliance with the rules and regulations associated with the service.</p> <p>a) Contractor will work with DHHS and their billing agents and providers to establish a means for sending customized electronic 837s (electronic claims) to the DHHS systems for adjudication.</p> <p>b) The system architecture must be flexible enough to add future desired populations, programs, and services, which have different policies and procedures.</p> <p>c) 837 file format must be customized to meet DHHS requirements.</p> <p>d) Solution must have the capability to consolidate and submit claims on a weekly basis.</p>	Describe how solution will interface with the DHHS system modules and HCBS providers to authorize payment of claims based on verified delivery of services and compliance with the rules and regulations associated with the service. Describe how standard and custom 837 files can be used for claims submission. Describe how the system architecture is flexible enough to add future desired populations, programs, and services, which have different policies and procedures. Describe how 837 file format will be customized to meet DHHS requirements.	N/A	S	

Bidder's Response:

Tellus eVV was built from the ground up to work with clients like the DHHS to define and develop an EVV application that meets their unique needs. While Tellus eVV is in production with core EVV functionality including data capture, rules management, data sharing, claims pre-adjudication, claims submission and reporting, each implementation is unique. Customization is possible even though the standard code base is unchanged due to our ability to write business rules outside of the standard code base and manage data extraction, translation and loading outside of the standard code base. Our reporting tool also resides outside the standard code base so our ability to write reports and provide the ability to run ad-hoc reports is another way we provide a unique implementation experience for each of our clients.

Virtually all electronically captured data is synched to the EVV database in real time. The only exception is data captured when mobile devices are in offline mode. Data captured in offline mode is synched automatically when the caregiver is back in range of Wi-Fi or cellular services. All data resident on the device and in transit is encrypted. Data received in the aggregator from third parties is available as soon as it is received.

Data is captured and stored in the database according to program requirements, examples include:

- Rounding delivery time (duration) in accordance with program requirements
- Geofencing distance
- Late visit definition
- Missed visit definition
- Services rendered by procedure code
- Services rendered, number allowed per visit
- Service code modifiers
- Tasks documentation requirements
- Recipient confirmation of services rendered requirements
- Notes requirements
- A claim reflects a service delivered by a direct service worker to a single beneficiary with the following information defined:
 - Individual receiving service
 - Individual providing service
 - Type of service rendered
 - Date of service
 - Start and End time of service
 - Location of service

When delivered service data is written to the database, typically in real time, the following data points will be compared:

- Scheduled visit (date, time, participant, caregiver, services scheduled, location)
- Delivered visit (date, time, participant, caregiver, services provided, location, service units)
- Prior authorization (participant, caregiver, services approved, service units remaining)

The DHHS will define business intelligence rules for the matching logic during the requirements gathering phase of the engagement. Business rules can be written at the payer, program, provider and recipient levels allowing maximum flexibility to ensure quality patient outcomes, operational efficiencies and reductions in fraud, waste and abuse.

Business rules are run against delivered visit data in real time as the EVV database is updated. If the delivered visit criteria match the scheduled visit criteria, the prior authorization will be compared to the delivered visit data collected by EVV. If there is any discrepancy between delivered visit criteria, scheduled visit criteria or prior authorization, the transaction will remain in an “Unmatched-On Hold” status for the provider administrator to remediate. Scheduled and/or ad-hoc reports are available to review claims that are in an “Unmatched-On Hold” status by reason code. Examples of reason codes are:

- Late visit
- GPS mismatch
- No prior authorization
- Prior authorization mismatch
- Unmatched-On Hold criteria, representing unbilled encounters, will be defined during the business requirements gathering phase of the engagement and can be customized by program as required by the DHHS.

If delivered visit, scheduled visit and prior authorization criteria are all in sync, the transaction will achieve the status of “Matched-On Hold.” Provider administrators can release matched claims at their discretion. Once a transaction is released by the administrator, it will be submitted to the payer for adjudication of the claim. Typically, claim transactions are batched and transferred to payers in the form of standard 837 EDI files on a customizable frequency. The 837 EDI file map will be customized to comply with the DHHS’ claims processing edit according to the following:

- Companion Guide specifications
- Specific examples:

- Caregiver cannot provide services to multiple beneficiaries at the same time
- Caregiver cannot bill more than sixteen (16) hours per day
- Overlapping service rules
- Multiple procedure codes, modifiers and rates
- Service limits
- Retroactive prior authorization changes

Data sharing and integration is a core competency for Tellus. Tellus has developed 837 file formats that are exported from our EVV application and transmitted to MMISs for claims adjudication and will work with the DHHS and their agents and providers to submit 837s compatible with the DHHS' processing standards. This will be accomplished by discovery meetings and/or use of a published Companion guide for the specific 837 format.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
199	IIO.10	DHHS will extract data exports from DHHS systems to send to the solution to enable EVV processing. These exports will include data for eligible recipients, eligible providers, service plan, and prior authorization details. Solution must use DHHS file formats where needed and may use proprietary or modified standard formats as appropriate.	Describe how solution will support the data exports from DHHS systems, including standard or customized files. Provide standard file formats used for data transfers.	N/A	W	

Bidder's Response:

Typically, data is exported from MMIS and provided to Tellus to import into our EVV application. Working with the DHHS' Data Integration Team, Tellus will be able to understand and comply with the DHHS' data extract requirements. Tellus has the ability to adapt to proprietary data file formats as required and natively supports a wide range of industry standard data sharing protocols and formats.

The solution will interface with the MMIS to send and receive batch file transmissions from the MMIS to update the provider, recipient and claims service information on a consistent basis via EDI transmissions. The web-based dashboard will provide real-time reporting of services, providers and users locations, and services performed. Users will be able to access it via web browsers (Chrome, Firefox, Safari and Internet Explorer). The web based EVV Management Portal will include a dashboard to view current services and visits, and a detailed map of the locations of current devices in the field. This will also include an administrative section to configure and deploy apps and devices and configure access control levels.

On the backend, the platform integrates with both billing and EDI modules where providers and administrators can assess, document, schedule, report, budget and bill support services. The EDI Module works in conjunction with third-party EDI software enabling agencies to exchange information between our platform and, if needed, an agency's EDI trading partners without having to input the data manually. This reduces errors in the exchange of business transactions, reduces labor costs, and improves response time. The portal can export service delivery encounter data via text file that providers can then import into their back-office business accounting software for all payroll and billing which greatly reduces paperwork.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist	Bidding Ability	Gap Description and Recommendation for Closure
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200	IIO.11	Solution should take advantage of best practices for Medicaid EVV systems and electronic data interchange with Medicaid Management Information Systems and eligibility and enrollment systems.	Describe how solution takes advantage of best practices for Medicaid EVV systems and electronic data interchange with Medicaid Management Information Systems and eligibility and enrollment systems.	ID N/A	Code S	
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Bidder's Response:

Current industry best practices dictate that software application functionality be modularized and easy to integrate with applications built by other vendors. This offers payers and providers the ability to choose the best combination of tools to support their programs and goals. The critical component that ensures an open model system results in a comprehensive solution at the payer level is the ability to aggregate multitudes of data from disparate sources. If data from all vendor solutions is pulled into a single database, the payer achieves the benefit of allowing providers to choose how to capture EVV data while facilitating the production of meaningful analytics and reporting. Comprehensive data analysis and reporting provides payers with the information they need to:

- Measure patient outcomes
- Improve operational efficiencies
- Benchmark providers
- Benchmark caregivers
- Reduce fraud, waste and abuse

Tellus eVV Product Roadmap goals include modifying the software as required to accommodate EVV industry best practices as well as remaining current with technical industry electronic data sharing protocols.

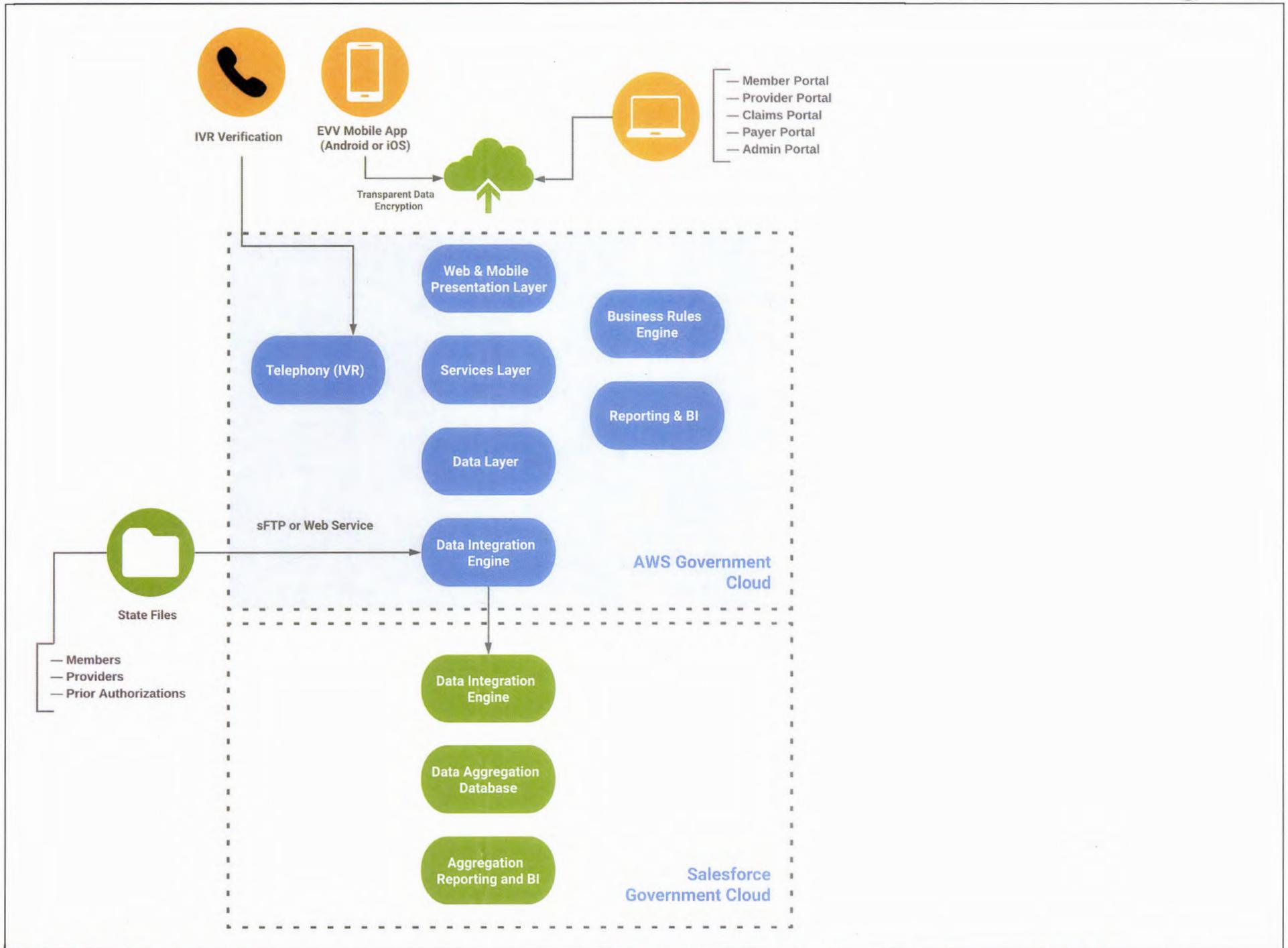
Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
201	IIO.12	Contractor must document all interfaces in an Interface Control Document (ICD) which will include data layout documentation, data mapping crosswalk, inbound/outbound capability and frequency of all interfaces. As new interfaces are required, ICDs for those will be created and shared with, and reviewed and approved by DHHS.	Describe how solution will document all interfaces in an Interface Control Document (ICD) which will include data layout documentation, data mapping crosswalk, inbound/outbound capability and frequency of all interfaces. Bidder will provide standard ICDs for existing interfaces with proposal. Describe how ICDs are maintained.	TA.SE.3	S	

Bidder's Response:

We will provide complete and accurate documentation for all components of our proposed solution, as well as complete user documentation so users and stakeholders understand the functionality of the solution. Since we are proposing a COTS based solution, the system document we provide for COTS components will be limited to the documentation allowed by the respective COTS vendor licensing agreements. For any custom developed functionality outside of the COTS products, we will provide the level of system documentation required by the DHHS.

Our solution will interface with the DHHS and other external solutions through well-documented and secure interfaces, which are illustrated on the following page.





Our solution places a premium on securing data exchanged between internal and external systems. We constantly evaluate and upgrade our data exchange security protocols to incorporate the most secure and cost-effective methodologies. We will manage data interchange of member, provider, prior authorization, and claims information through one of two ways:

- A secure file transfer process using public key infrastructure (PKI) data encryption methodology
- A secure web service interface that expressly authorizes specific system processes to interchange data over isolated and secured ports. Data interchange of verified visits between the EVV platform and the Data Aggregation Platform is through a PGP-encrypted secure file transfer protocol (SFTP) method. Browser access to the EVV platform portals is through an HTTPS/TLS (Transport Layer Security) secured connection. Users must be authorized to access the portals and authenticated before portal access is granted.

Mobile users upload encrypted EVV data to the EVV platform server, and the local data on the mobile device is secured using Transparent Data Encryption functionality. Tellus will submit the technical documentation, including a final architectural diagram for each system environment, data dictionary, and high-level process flow diagram prior to contract signature. We will also negotiate the exact time frame for this delivery with the DHHS prior to contract signature. The DHHS will review and approve any architectural changes, relative to interface points with the DHHS and external data sources before we implement them. We will implement integration point architecture changes in the lower environments first, and then promote them to upper environments after completing formal system integration testing (SIT) and user acceptance testing (UAT) and receiving the DHHS' approval.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
202	IIO.13	Contractor must design, develop and maintain interfaces. Each Application Program Interface (API) and component that will interface with the Systems Integration Services Integration Platform will be documented using a mutually agreed upon ICD template. This effort is performed in collaboration with other stakeholders in the State's healthcare programs enterprise.	Describe how contractor will design, develop and maintain interfaces, keep them current, and include new APIs and interfaces as developed.	N/A	W	

Bidder's Response:

Working with the DHHS' Data Integration Team, Tellus will document and comply with the DHHS data sharing requirements. Tellus has the ability to adapt to proprietary data file formats as required and natively supports a wide range of industry standard data sharing protocols and formats.

The solution will interface with the MMIS and other applications as required to support the EVV program. Files are shared bi-directionally either in batch file transmissions or on a transactional basis to update the provider, recipient and claims service information. Our web-based integration dashboard provides real-time updates related to data sharing activities. On the backend, the EVV platform integrates with modules where providers and administrators can assess, document, schedule, report, budget and bill support services.

Our goal is to develop application protocol interfaces (APIs) with the DHHS and other vendors who operate in the Nebraska Medicaid ecosystem to the payers and providers whether they select Tellus or a competing application as their EVV vendor by enabling a seamless integration between EVV and existing applications and workflows.

Tellus can accommodate real-time APIs and/or batch transfers. Tellus is currently integrated with the following types of vendors:

- Third-Party EVV
- Care Management

- MMIS
- Agency Management Systems

We are working on additional integrations with fiscal intermediaries and payroll systems. If APIs are not available for a specific application, Tellus supports data extracts/exports that can be manipulated and uploaded to other applications. Tellus also supports uploads of data to the Tellus eVV System to facilitate setting up administrators, caregivers and participants as users.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
203	IIO.14	Solution must be able to receive information in batch and individual transactions.	Describe how solution is able to receive information in batch and individual transactions.	PE.P11.24	S	

Bidder's Response:

Our standard data sharing tool allows data to be shared employing many standards and protocols including near real-time data sharing for both individual and batch transactions.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
204	IIO.15	Solution must be able to exchange and track service authorization information (e.g., flat file, X12 278) with multiple external sources and the Integration Platform.	Describe how solution shall be able to exchange and track service authorization information (e.g., flat file, X12 278) with multiple external sources and the Integration Platform.	N/A	S	

Bidder's Response:

We are currently working with multiple states, their MMIS systems, and other vendors, which involves receiving and managing their prior authorization data. We will modify data elements and behaviors necessary to manage the DHHS' prior authorization data. We can work with a wide range of formats, including those indicated in the requirement.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
205	IIO.16	Solution must have the ability to receive, store, and process provider and member data from the State's eligibility system, legacy MMIS, and Integration Platform, at a frequency and in a format determined by the State (e.g., daily).	Describe how solution shall have the ability to receive, store, and process provider and member data from the State's eligibility system, legacy MMIS, and Integration Platform, at a frequency and in a format determined by the State (e.g., daily).	N/A	S	

Bidder's Response:

Sharing data with other systems means data is exported from one software application and shared by importing it into another application. As it relates to EVV, we import data from multiple systems to store data in a common database. Some of this information is foundational to set up the system; for example, the DHHS will send provider, member, and prior authorization data to import into the EVV database. MCOs will also send provider, member, and prior authorization data to import into the EVV database. The data is normalized as part of the import process.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
206	IIO.17	Contractor must work collaboratively with DHHS and other Contractors as required by DHHS.	Describe experience working collaboratively with other clients and vendors on previous projects.	N/A	S	

Bidder's Response:

At Tellus, we pride ourselves on working collaboratively in the Medicaid ecosystem and hope to have the opportunity to work directly with the DHHS. Our current clients are comprised of payers, including states and managed care organizations, as well as providers, complementary vendors such as care management organizations, clearinghouses and other EVV vendors and even consumer-directed participants. Working with a variety of constituents gives us the ability to understand goals and concerns in a holistic way helping us offer perspectives for consideration when defining business rules and designing feature/function sets.

We understand the DHHS' goals and objectives for EVV are:

1. A solution that will aid in the identification and mitigation of fraud, waste and abuse.
2. A solution that accommodates and overcomes limited internet access in rural areas.
3. A configurable solution to permit future expansion and functionality.
4. A solution with an intuitive user interface to capture and submit visit data.

Tellus eVV meets all of these goals, but the value we bring to the table as it relates to the DHHS is that we have implemented EVV with different rules and configuration settings for clients so we can share pros and cons from different perspectives to help the DHHS Team implement the solution that is best for Nebraska.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
207	IIO.18	Solution must conduct information exchange (internally and externally) using MITA Framework, industry standards, and other nationally recognized standards.	Describe solution's capability in conducting information exchange using MITA Framework, industry standards and other nationally recognized standards.	TA.DAM.2	S	

Bidder's Response:

To make sure we achieve certification objectives, we follow the CMS Medicaid Enterprise Certification Life Cycle (MECL) release and updated checklists, which include greater alignment to MITA, the Seven Conditions and Standards, and recent federal legislation. In 2017, CMS updated the MECL and Required Artifacts to include an Operational Milestone Review (R2) before the operations go-live of the system, in addition to the traditional Certification Final Review (R3) at the end of the system stabilization period.

We align our efforts to ensure that the delivered solution conforms to MITA 3.0 standards and with all of the required checklists items for modular certification, such as:

- Business Area Checklist
- General Checklists:
 - Information Architecture Checklist
 - Access and Delivery Checklist
 - Integration and Utility Checklist
 - Intermediary and Interface Checklist
 - Standards and Conditions Checklist

Additionally, our technical and advisory teams are ready to support every phase of the certification process with the creation of the required documentation in the MECT V2.2, such as:

- Project Management Plan
- Schedule/Milestones & Burn-down Charts
- Risk Register/Exception Plan
- Test Plan
- Working MMIS module(s) and software
- Earned Value/Velocity Management Report
- Database Design and DED
- Data Conversion/Management Plan
- Contingency/Recovery Plan
- Test Reports/Validated Product Reports
- System Design Document (SDD)
- System Requirement Document
- Product Documentation (User and Training Manuals)
- HIPAA Statement

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
208	IIO.19	Solution should define and utilize information sharing and event notification standards to allow aggregated and integrated information.	Describe how solution defines and utilizes information sharing and event notification standards to allow aggregated and integrated information.	TA.LG.2	S	

Bidder's Response:

Tellus supports integration and coordination of data across the EVV platform with secure data sharing. Tellus automatically notifies trading partners with event notifications upon receipt of secure messages. If transmitted data meets the pre-defined and tested standards, the data will be ingested into Tellus eVV and an acceptance message will automatically be sent. If transmitted data does not meet the pre-defined and tested standards, the data will be rejected, and the trading partner will be automatically notified of the reject file or the subset of the rejected records and the reason the file or records were rejected.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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209	IIO.20	Solution architecture must preserve the ability to efficiently, effectively, and appropriately exchange data with other participants in the health and human services enterprise.	Describe how solution architecture preserves the ability to efficiently, effectively and appropriately exchange data with other participants in the health and human services enterprise.	S&C.IC.6	S	
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Bidder's Response:

The EDI Module works in conjunction with 3rd party EDI software enabling agencies to exchange information between our platform and, if needed, an agency's EDI trading partners without having to input the data manually. This reduces errors in the exchange of business transactions, reduces labor costs, and improves response time. The portal can export service delivery encounter data via text file which providers can then import into their back-office business accounting software for all payroll and billing which greatly reduces paperwork.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
210	IIO.21	Solution should use open standards between all key interfaces where feasible.	Describe how solution uses open standards between all key interfaces where feasible.	S&C.MS.2	S	

Bidder's Response:

Tellus uses NextGen Connect (formerly Mirth Connect), an open source, cross-platform, bi-directional healthcare integration engine providing maximum flexibility to integrate with health information exchanges, public health agencies, human service programs and other community organizations as required. NextGen Connect (formerly Mirth Connect) supports the following standard formats:

- ANSI X.12 Electronic Data Interchange (EDI) including 834, 837I & 837P
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW
- JavaScript

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
211	IIO.22	Solution should securely conduct electronic information exchange via an information hub when interfacing within DHHS and with intrastate agencies.	Describe how solution securely conducts electronic information exchange via an information hub when interfacing within DHHS and with intrastate agencies.	TA.DC.10	S	

Bidder's Response:

Tellus uses NextGen Connect (formerly Mirth Connect), an open source, cross-platform, bi-directional healthcare integration engine providing maximum flexibility to integrate with health information exchanges, public health agencies, human service programs and other community organizations as required. Mirth supports the following standard formats:

- ANSI X.12 Electronic Data Interchange (EDI) including 834, 837I & 837P
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW

Data can then be exchanged via:

- A secure file transfer process using public key infrastructure (PKI) data encryption methodology
- A secure web service interface that expressly authorizes specific system processes to interchange data over isolated and secured ports Data interchange of verified visits between the EVV platform and the Data Aggregation Platform is through a PGP-encrypted secure file transfer protocol (SFTP) method. Browser access to the EVV platform portals is through an HTTPS/TLS (Transport Layer Security) secured connection. Users must be authorized to access the portals and authenticated before portal access is granted.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
212	IIO.23	Solution should utilize a MITA-recommended ESB, automated arrangement, coordination, and management of system.	Describe how solution utilizes a MITA-recommended ESB, automated arrangement, coordination and management of systems.	TA.SOA.1	S	

Bidder's Response:

For those health care providers already using other EVV solutions, the Tellus data aggregation capability ingests visit data from other solutions to align with your criteria. This supports the consolidation of the EVV data to provide an end-to-end view of your EVV programs. Providers or MCOs can upload a CSV file through the Tellus eVV Data Aggregation Solution or configure with our API from their application to send the required data. This aggregated data will then be available to the DHHS for Cures Act reporting and compliance. Tellus' Enterprise Service Bus, (ESB), known as the Tellus Integration Layer, facilitates these transactions. It will also integrate with your MMIS and your MCOs through a common integration layer that uses industry standard transaction formats to exchange information.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
213	IIO.24	Solution should use RESTFUL and/or SOAP-based web services for seamless coordination and integration when	Describe how solution uses RESTFUL and/or SOAP-based web services for seamless	TA.SE.2	S	

	interfacing with the U.S. Department of Health & Human Services (HHS) applications, and intrastate agencies.	coordination and integration when interfacing with the US HHS applications and intrastate agencies.			
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Bidder's Response:

The EVV system allows health care information to be shared natively in a variety of protocols including:

- TCP/MLLP
- Database (MySQL, PostgreSQL, Oracle, Microsoft SQL Server, ODBC)
- File (local file system and network shares)
- PDF and RTF documents
- JMS
- FTP/SFTP
- HTTP/Web Services
- SMTP
- SOAP (over HTTPS)
- DICOM
- JavaScript

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
214	IIO.25	Contractor should conduct system coordination between intrastate agencies and external entities.	Describe how contractor will conduct system coordination between intrastate agencies and external entities.	TA.SOA.4	S	

Bidder's Response:

Business rules, user roles and integrations developed during the business requirements gathering phase of the engagement are customized to the deployment. Our team will work closely with agencies and entities to understand the business processes and automation requirements specific to your deployment. We will thoroughly document appropriate business rules, data flow, and metadata within the solution and work collaboratively and coordinate with the integration teams.

The EVV system allows health care information to be shared natively in a variety of protocols including:

- TCP/MLLP
- Database (MySQL, PostgreSQL, Oracle, Microsoft SQL Server, ODBC)
- File (local file system and network shares)
- PDF and RTF documents
- JMS
- FTP/SFTP
- HTTP/Web Services
- SMTP
- SOAP (over HTTPS)
- DICOM
- JavaScript

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Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
215	IIO.26	Solution must provide secure, HIPAA-compliant software and documentation for use by providers to submit electronic claims.	Describe how solution provides secure, HIPAA-compliant software and documentation for use by providers to submit electronic claims.	IA.DS.6	S	

Bidder's Response:

Tellus uses NextGen Connect (formerly Mirth Connect), an open source, cross-platform, bi-directional health care integration engine providing maximum flexibility to transmit electronic claims as scheduled to appropriate locations. NextGen Connect supports the following standard formats:

- ANSI X.12 Electronic Data Interchange (EDI) including 834, 837I & 837P
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW

Data can then be exchanged via:

- A secure file transfer process using public key infrastructure (PKI) data encryption methodology
- A secure web service interface that expressly authorizes specific system processes to interchange data over isolated and secured ports Data interchange of verified visits between the EVV platform and the Data Aggregation Platform is through a PGP-encrypted secure file transfer protocol (SFTP) method. Browser access to the EVV platform portals is through an HTTPS/TLS (Transport Layer Security) secured connection. Users must be authorized to access the portals and authenticated before portal access is granted.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
216	IIO.27	Solution should comply with the SMA's standardized structure and vocabulary data for automated electronic intrastate interchanges and interoperability.	Describe how solution will comply with the SMA's standardized structure and vocabulary data for automated electronic intrastate interchanges and interoperability.	IA.DS.9	S	

Bidder's Response:

Tellus uses Mirth Connect, an open source, cross-platform, highly configurable, bi-directional healthcare integration engine providing maximum flexibility to transmit electronic data as scheduled to appropriate locations. Mirth supports the following standard formats:

- ANSI X.12 Electronic Data Interchange (EDI) including 834, 837I & 837P
- HL7 (Health Level Seven) version 2 messages
- CDA (Clinical Data Architecture)/CDD (Continuity of Care Document)
- CSV (comma-separated variable)
- DICOM
- XML
- JSON
- NCPDP
- RAW

Data can then be exchanged via:

- A secure file transfer process using public key infrastructure (PKI) data encryption methodology
- A secure web service interface that expressly authorizes specific system processes to interchange data over isolated and secured ports Data interchange of verified visits between the EVV platform and the Data Aggregation Platform is through a PGP-encrypted secure file transfer protocol (SFTP) method. Browser access to the EVV platform portals is through an HTTPS/TLS (Transport Layer Security) secured connection. Users must be authorized to access the portals and authenticated before portal access is granted.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
217	IIO.28	Solution's Logical Data Model (LDM) should support identification of data classes, attributes, relationships, standards, and code sets for intrastate exchange.	Describe how solution's Logical Data Model supports identification of data classes, attributes, relationships, standards, and code sets for intrastate exchange.	IA.LDM.5	S	

Bidder's Response:

The Tellus eVV solution uses AWS Government Cloud Relational Database Services (RDS) with ORACLE MySQL databases for the storage or relational data. The data layer includes a Type Code object that is used for the management of code sets.

The data model is organized around business objects such as Users, Recipients, Visits, Providers, Payers, etc. and all access to the data layer is managed through microservices in the solutions service layer.

Tellus uses an ETL/data interchange engine for all data interchange with other parties, this engine is configured with industry standard channels such as EDI X.12 837P, 835, 834 and Tellus proprietary channels. Tellus publishes full specifications for all Tellus messages, including data dictionaries, sample files, XML schemas, and type code lists.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist	Bidding Ability	Gap Description and Recommendation for Closure
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				ID	Code	
218	IIO.29	Solution must support or regulate connections with other information systems (e.g. solution to outside of the SMA authorization boundary) through the use of Interconnection Security Agreements. Interconnection Security Agreements document the interface characteristics, security requirements, and the nature of the information communicated over the connection.	Describe how solution supports or regulates connections with other information systems through the use of Interconnection Security Agreements which document the interface characteristics, security requirements, and the nature of the information communicated over the connection.	TA.SP.55	S	

Bidder's Response:

Prior to establishing a data sharing relationship with a trading partner, Tellus vets the prospect and engages our contracting process. In addition to our standard contract and scope of work document, each trading partner must sign a Non-Disclosure Agreement and a Business Associate Agreement. Various components of the agreements address security compliance with HIPAA and HITECH guidelines. Privacy protection is of paramount importance both within our company and with the trading partners with whom we share protected information.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
219	IIO.30	To minimize the amount of data being transferred across the State's commodity internet connections to cloud provider data centers, the State of Nebraska has established point-to-point private network connections to Microsoft Azure and Amazon AWS. Describe how the proposed solution utilizes one of these connections, or something similar, to transfer data to/from the State's on-premise systems.	Describe how the proposed solution utilizes one of these connections, or something similar, to transfer data to/from the State's on premise systems.	N/A	S	

Bidder's Response:

All components of Tellus eVV are hosted on Amazon Web Services (AWS) Government Cloud including our integration engine. Tellus will work with the DHHS to establish the most secure data connectivity relationship possible. One of the reasons Tellus selected AWS Government Cloud is because of their commitment to infrastructure security.

G.9 Business Continuity and Disaster Recovery Requirements

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
220	BCDR.1	Contractor should develop operational procedures in coordination with other enterprise module contractors to restore system availability.	Describe how solution shall integrate with other DHHS modules to ensure continuity of service and notification of service impacts automatically.	N/A	S	

Bidder's Response:

Open source, hybrid applications are beneficial for many reasons but one of the challenges is coordination among trading partners if a component is not working as expected. It's important to recognize the goal is to support the client, not to place blame. No vendor is 100% successful all of the time, but when partners work together to constructively identify the root cause of a problem and to resolve it as quickly as possible, everyone benefits. Tellus is that kind of partner.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
221	BCDR.2	<p>Contractor shall establish and maintain an EVV System Disaster Recovery and Business Continuity Plan. The draft version of the EVV System Disaster Recovery and Business Continuity Plan shall:</p> <p>A. Be submitted with the proposal;</p> <p>B. Be reviewed and approved by DHHS within timeframes agreed in approved work plan.</p> <p>C. Be compliant with Federal Guidelines identifying every resource that requires backup and to what extent backup is required.</p> <p>The EVV System Disaster Recovery and Business Continuity Plan must, at a minimum, address the following elements:</p> <p>A. Establish the purpose and scope of the Disaster Recovery and Business Continuity Plan;</p> <p>B. Acknowledge and ensure compliance with applicable HIPAA and HITECH standards;</p>	<p>Provide a draft version of the EVV System Disaster Recovery and Business Continuity plan with proposal as noted. Plan should include RPO and RTO. The EVV System Disaster Recovery and Business Continuity Plan must, at a minimum, address the following elements:</p> <p>A. Establish the purpose and scope of the Disaster Recovery and Business Continuity Plan;</p> <p>B. Acknowledge and ensure compliance with applicable HIPAA and HITECH standards;</p> <p>C. Describe the approach and strategy to disaster recovery and business continuity;</p> <p>D. Describe recovery point performance specifications and RTO of no more than 48 hours;</p> <p>E. RPO is the maximum targeted period in which data might be lost from a disaster incident. The EVV</p>	N/A	S	

	<p>C. Describe the approach and strategy to disaster recovery and business continuity; D. Describe recovery point performance specifications and RTO of no more than 48 hours; E. RPO is the maximum targeted period in which data might be lost from a disaster incident. The EVV solution needs to ensure no more than 5 minutes' worth of data loss in case of a disaster. F. Establish roles and responsibilities for managing disaster recovery and business continuity; G. Identify risk areas; H. Describe protocols for managing disaster recovery and business continuity (during and after); I. Describe the approach to ongoing testing and validation of the EVV System Disaster Recovery and Business Continuity Plan; J. Describe the frequency of updates. At a minimum, the plan shall be updated annually, or as needed more frequently.</p>	<p>solution needs to ensure no more than 5 minutes' worth of data loss in case of a disaster.</p> <p>F. Establish roles and responsibilities for managing disaster recovery and business continuity; G. Identify risk areas; H. Describe protocols for managing disaster recovery and business continuity (during and after); I. Describe the approach to ongoing testing and validation of the EVV System Disaster Recovery and Business Continuity Plan; J. Describe the frequency of updates. At a minimum, the plan shall be updated annually, or as needed more frequently.</p>			
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Bidder's Response:

We have developed a Disaster Recovery and Business Continuity Plan to define, categorize, and manage a variety of potential unexpected events and threats. We engaged in the following activities to develop our Plan:

- Risk assessment
- Categorization of risks into scenario types and risk management groups
- Severity level analysis
- Business continuity planning
- Disaster recovery test scripts
- Annual test matrix
- Disaster recovery test log
- Disaster recovery test log errors

We review and train on the content of the plan with our staff and subcontractor teams, and test and update it annually. Data center personnel are thoroughly trained in backup and recovery procedures. We will review our Plan with you and update it as necessary during the EVV system implementation tasks. Our existing Plan may need revision to include continuous asynchronous database backups to accommodate a recovery point objective (RPO) of 5 minutes for our solution's EVV data aggregation component. This component is limited to the four-hour RPO of our hosting vendor. We believe our current backup processes exceed the standards outlined in this requirement and will minimize any associated risk from the longer RPO. However, we acknowledge that the DHHS may want to modify our existing backup strategy and stage the environments and activities required to perform a non-disruptive asynchronous database backup. Currently, we back up all EVV data daily and retain it for at least 30 days. Our existing Plan includes elements that correspond to the following specific situations described in the RFP:

- Electronic or telephonic failure
- Complete loss of use of our main site and any satellite offices, in and out of State

- Loss of primary computer system/records
- Communication between Tellus and the DHHS in the event of business disruption

These scenarios are addressed by the fact that all software, including telephonic support, is hosted on the cloud and can be accessed from any location using commercially available personal devices and standard web browsers. Employees simply need access to a hard-wired Internet connection or Wi-Fi to operate efficiently either in our offices or remotely. Personal cellular devices will be used to communicate verbally if cellular service is accessible, but Internet access is unavailable. In the event of a disaster or business interruption, the Disaster Recovery Team will reach out to the designated contacts at the DHHS by both email and telephone with the following information:

- Anticipated impact on service offerings
- Anticipated impact on delivery schedules
- Anticipated impact on security of client information
- Anticipated timelines

While our Disaster Recovery Team is reaching out to our clients, vendors, and other stakeholders, they will also focus on minimizing downtime. The team will do this by assessing any damage, testing application readiness and performance, and identifying alternatives for any functions not operating as required. Our Disaster Recovery Team will respond to client inquiries and maintain business continuity. If necessary, a core group of employees will be relocated to make certain disruption is minimized to the greatest extent possible.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
222	BCDR.3	Contractor shall provide backup and recovery processes in the event of a system malfunction or disaster situation in accordance with the DHHS-approved EVV System Disaster Recovery and Business Continuity Plan. Contractor's backup and recovery processes shall promote the ability to rebound, resume operations, and minimize service disruption to solution users and stakeholders. This must include offsite electronic and physical storage in the United States. In addition, Contractor must identify the software and data backup approach. It is the responsibility of the Contractor to insure continued connectivity and interface with the system.	Describe the backup and recovery processes in the event of a system malfunction or disaster situation in accordance with the DHHS-approved EVV System Disaster Recovery and Business Continuity Plan. Describe how the backup and recovery processes shall promote the ability to rebound, resume operations, and minimize service disruption to solution users and stakeholders. This includes offsite electronic and physical storage in the United States. In addition, identify the software and data backup approach.	N/A	S	

Bidder's Response:

We understand your concerns related to data backup and recovery processes. The Tellus solution for the State of Nebraska will be hosted on a public cloud infrastructure leveraging secure, cloud-based data centers.

Our hosting partners provide multiple layers of operational and physical security to maintain the integrity and safety of your data. Backup and recovery of databases for all cases, including disaster and system failure, is hosted in at least two geographically different data centers. Database instances are synchronized. Should one data center fail, the system seamlessly falls over to another data center without any interruption or data loss. Additionally, backups occur at regular intervals. Backups are encrypted and stored in multiple locations providing high availability. During EVV implementation activities, our project team will develop a mitigation plan for all identified risks with a chosen response strategy.

We will also develop a contingency plan in the event a risk cannot be averted. Mitigation and contingency plans will be developed related to backup and recovery processes at this time. Scenarios will include backup frequency and scope as well as reloads. During implementation, we will review the reasons we have enabled specific tools and configuration settings with the DHHS. We will discuss any questions or concerns so that all applicable scenarios are addressed and agreed upon. On an ongoing basis, we will review the backup and recovery process at least two times per year.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
223	BCDR.4	Contractor must provide redundancies built into the architecture of the solution to maintain continual operations.	Describe redundancies built into the architecture of the solution to maintain continual operations. Describe how solution is designed to meet 99.5% uptime service level.	N/A	S	

Bidder's Response:

Adhering to the highest standards of information security and data integrity over time is the main driver of our approach to hosting and system backup processes. Redundancy is the key strategy employed to build a fault tolerant system and robust disaster recovery methods and procedures. Our solution is compliant with the recommendations of NIST 800-53. The EVV platform is hosted on Amazon Web Services (AWS) Government Cloud and runs on 15 AWS data centers located in the continental U.S. AWS datacenters are distributed in geographic regions which include clusters of datacenters called Availability Zones. Every region is geographically isolated in terms of power and water supply, and each zone is similarly served by independent networks. Redundantly storing information in different datacenters in multiple regions, Availability Zones, and datacenters greatly reduces downtime, as the nearest available node is activated as a backup. Each AWS datacenter is protected by four distinct layers of security:

- **Perimeter Layer** — Datacenters are physically enclosed by gates protected by security guards and intrusion detection technology
- **Infrastructure Layer** — Energy generators, fire suppression equipment, and ordinary and extraordinary maintenance systems protect the integrity of the data stored in the datacenter
- **Data Layer** — Access to server rooms is restricted, tightly regulated by authorization processes and constantly monitored
- **Environmental Layer** — The locations where AWS datacenters are built are screened for seismic activity and extreme weather, to minimize the risk of structural damage caused by natural occurrences

In case of failure of the primary node, Amazon RDS performs an automatic failover to the standby without the need for manual administrative intervention. Within minutes a new instance of the server is launched in a different AWS Availability Zone or region. Downtime is cut to minutes instead of hours. Using various AWS regions and different physical data centers ensures the system is highly available and fault tolerant.

All backups and recovery of databases for all cases, including disaster and system failure, are hosted in at least two different availability zones (geographically different data centers). Database instances are kept in sync real-time. Backups are scheduled and occur at regular intervals. They are then encrypted and stored in multiple locations providing 99.9% durability.

Additionally, we achieve high levels of fault tolerance for our applications by using AWS Elastic Load Balancing to automatically route traffic across multiple instances and multiple Availability Zones (physical data centers). Elastic Load Balancing ensures only healthy Amazon application server instances receive traffic by detecting unhealthy instances and rerouting to healthy servers. If additional computing capacity is required, we have systems in place to scale the application and database service layers to ensure SLAs are met.

We also use Amazon Relational Database Service (RDS) to host our database server. Amazon RDS runs on the same highly reliable infrastructure previously discussed. Amazon RDS synchronously replicates the data to a standby instance in a different Availability Zone (different datacenter). RDS features we use to enhance reliability for critical production databases include automated backups, database snapshots, and automatic host replacement in case of primary database crash. Database backup snapshots are taken at regular intervals and sent to AWS S3 encrypted storage.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
224	BCDR.5	Contractor must develop and deliver a Business Continuity Plan (BCP) for the solution and the Contractor company that identifies essential missions and business functions and associated contingency requirements. These requirements include recovery objectives, restoration priorities, contingency roles, responsibilities and addresses maintaining essential business functions despite an information system disruption, compromise, or failure. This plan should be reviewed and updated on a yearly basis.	Describe essential missions and business functions and associated contingency requirements covered in the Business Continuity Plan. Include recovery objectives, restoration priorities, contingency roles, responsibilities, and address maintaining essential business functions despite an information system disruption, compromise or failure. Describe maintenance, review and update processes.	TA.SP.46	S	

Bidder's Response:

To ensure application functionality and 24/7 uptime, we adhere to the following service level and system problem plan:

- Application defects will begin with a diagnosis and classification of the reported issue within one (1) hour of Tellus being alerted or identified by Tellus
- Application defects identified as Severity 1, will begin the resolution process within four (4) hours of identification
- Application defects identified as Severity 2, will begin the resolution within one (1) business day and scheduled for emergency release
- Application defects identified as Severity 3, will begin resolution within five (5) business days and added to the next scheduled release

Service Level Agreement (SLA) definitions will be outlined during the contracting process, examples may include:

- **Application Defect** – A defect is defined as an error, flaw, failure or fault within the Tellus eVV application ecosystem.
- **Severity 1** – An application defect is deemed Severity 1 when the majority of services are not available for use by the end users. This includes internal users of the system.
- **Severity 2** – An application defect is deemed Severity 2 when a portion of services are not available for use by the end user or an intermittent failure is occurring with seemingly random sequences of events. This includes internal users of the system.
- **Severity 3** – An application defect is deemed Severity 3 when there is an isolated issue pertaining to an individual or small group of users that have impact on their ability to use the system. This includes internal users, items initially reported as defects but later classified as enhancements, and issues reported that are unable to be replicated by reasonable means. Severity 3 defects will be reported on regularly and reviewed for larger patterns. A group of Severity 3 defects may potentially escalate in severity classification if patterns are identified that indicate a larger problem.

All backups and recovery of databases for all cases, including disaster and system failure is hosted in at least two different Availability Zones (geographically different data centers). Database instances are kept in sync in real time. Should one datacenter fail, the system seamlessly falls over to another datacenter without any interruption or data loss. In addition, backups occur at the regular intervals. Backups are encrypted and stored in multiple locations providing 99.99999999% durability.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure

225	BCDR.6	Solution must include an alternate storage site, which includes (at a minimum) necessary agreements to permit the storage and recovery of system backup information and the resumption of system operations for business functions within the time period specified. Contractor must establish alternate telecommunications services including necessary agreements to permit the resumption of information system operations for essential business functions.	Describe solution's use of an alternate storage site, which includes necessary agreements to permit the storage and recovery of system backup information and the resumption of system operations for business functions within the time period specified. Describe how solution has established alternate telecommunications services including necessary agreements to permit the resumption of information system operations for essential business functions.	TA.SP.48	S	
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Bidder's Response:

The EVV platform is hosted on Amazon Web Services (AWS) Government Cloud and runs on 15 AWS datacenters located in the continental U.S. AWS datacenters are distributed in geographic regions that include clusters of datacenters called Availability Zones. Every region is geographically isolated in terms of power and water supply, and each zone is similarly served by independent networks. Redundantly storing information in different datacenters in multiple regions, Availability Zones and datacenters greatly reduces downtime, as the nearest available node is activated as a backup.

In case of failure of the primary node, Amazon RDS performs an automatic failover to the standby without the need for manual intervention. Within minutes, a new instance of the server is launched in a different AWS Availability Zone or region. Downtime is cut to minutes instead of hours. Using various AWS regions and different physical datacenters ensures the system is highly available and fault tolerant.

All backups and recovery of databases for all cases, including disaster and system failure, are hosted in at least two geographically different Availability Zones. Database instances are kept in sync real-time. Backups are scheduled and occur at regular intervals. They're then encrypted and stored in multiple locations providing 99.9% durability.

Additionally, we achieve high levels of fault tolerance for our applications by using AWS Elastic Load Balancing to automatically route traffic across multiple instances and multiple Availability Zones. Elastic Load Balancing ensures only healthy Amazon application server instances receive traffic by detecting unhealthy instances and rerouting to healthy servers. If additional computing capacity is required, we have systems in place to scale the application and database service layers to ensure SLAs are met.

We also use Amazon Relational Database Service (RDS) to host our database server. Amazon RDS runs on the same highly reliable infrastructure previously discussed. Amazon RDS synchronously replicates the data to a standby instance in a different Availability Zone. RDS features we use to enhance reliability for critical production databases include automated backups, database snapshots and automatic host replacement in the case of primary database crash. Database backup snapshots are taken at regular intervals and sent to AWS S3 encrypted storage.

In the rare chance the system is temporarily unavailable or inoperable, system administrators can manually start, end and edit visit data and submit claims for payment when the system is back online as long as they enter a reason for the manual entry.

In the case of a disaster that may affect system availability or business operations, we will provide a comprehensive Disaster Recovery and Business Continuity Plan (DR Plan). The DR Plan is updated at least annually or any time a major system update or upgrade is performed. The Disaster Recovery Lead will be responsible for updating the entire document and permitted to request information and updates from other employees and departments within the organization to complete this task.

The DR Plan limits service interruptions to a period of 24 hours. However, because our systems are fully utilizing scalability, disaster recovery, high availability and monitoring features of AWS, we do not anticipate that recovery time will be anywhere close to 24 hours.

The server environment is virtualized. This allows for portability in case the disaster affects the datacenter when the application server is running. Within minutes, a new instance of the same server will be launched in a different datacenter in a different AWS Availability Zone or region. As mentioned, this cuts downtime to minutes.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
226	BCDR.7	Solution must provide for the recovery and reconstitution of the information system to a known state after a disruption, compromise, or failure. Recovery of the information system after a failure or other contingency shall be done in a trusted, secure, and verifiable manner.	Describe how solution provides for the recovery and reconstitution of the information system to a known state after a disruption, compromise or failure. Describe how this is done in a trusted, secure and verifiable manner, and include anticipated RTOs.	TA.SP.49	S	

Bidder's Response:

We will provide a comprehensive disaster recovery (DR Plan) document as it relates to this project.

The DR Plan includes following components:

- Definition of the Disaster
- Teams and Responsibilities
 - DR Lead
 - Network team
 - Server team
 - Applications team
 - Communications team
- Data and backups
- Operational considerations
- Communications during disaster recovery
 - Communication with clients
 - Communication with vendors
 - Communication with employees
- Dealing with Disaster
- Assessment of Current and Prevention of Further Damages
 - Standby systems activation
 - Restoring functionality
 - Other steps required
- Plan Testing and Maintenance
 - Maintenance
 - Testing
 - Communication testing

The DR Plan is updated quarterly. The Disaster Recovery Lead will be responsible for updating the entire document and permitted to request information and updates from other employees and departments within the organization to complete this task. The DR Plan will be tested annually or after major infrastructure or system changes to ensure completeness and effectiveness.

The DR Plan limits service interruptions to a period of 24 hours. However, because our systems fully utilize scalability, disaster recovery, high availability and monitoring features of AWS, we do not anticipate that recovery time will be anywhere close to 24 hours.

Our systems reside in Amazon Web Services. We utilize AWS disaster recovery, failover and elasticity capabilities. We do not maintain our own hardware or physical datacenters instead running our system in 15 AWS datacenters in VA, OH and CA. Utilizing various AWS regions and different physical datacenters within same region ensures that system is highly available and fault tolerant.

The server environment is virtualized that allows for portability in case of the disaster affecting datacenter when application server is running. Within minutes a new instance of the same server will be launched in different datacenter in a different AWS availability zone or region. Downtime is cut to minutes instead of hours.

Using AWS, we achieve higher levels of fault tolerance for our applications by using Elastic Load Balancing to automatically route traffic across multiple instances and multiple Availability Zones (physical datacenters). Elastic Load Balancing ensures that only healthy Amazon application server instances receive traffic by detecting unhealthy instances and rerouting traffic across the remaining healthy instances. If additional computing capacity is required, we have systems in place that will scale the application and database server layer to provide the level of service according to SLAs.

The database is a critical component of the system. We use Amazon RDS (Relational Database Service) to host our database server. Amazon RDS runs on the same highly reliable infrastructure used by other Amazon Web Services. In production we provision Multi-AZ DB Instances.

Amazon RDS synchronously replicates the data to a standby instance in a different Availability Zone (different datacenter). In case of failure of the primary node, Amazon RDS performs an automatic failover to the standby without the need for manual administrative intervention. When a failover is performed, there is a very short period during which the primary node is not accessible. We utilize many Amazon RDS features that enhance reliability for critical production databases, including automated backups, database snapshots, and automatic host replacement in case of primary database crash. In addition to synchronous replication, database backup snapshots are taken at regular intervals and sent to AWS S3 encrypted storage.

The comprehensive DR Plan as it relates to the contract and specifically addresses systems and applications will be provided to the DHHS no later than 30 calendar days prior to the contract effective date

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
227	BCDR.8	A short-term uninterruptible power supply should be employed to facilitate an orderly shutdown of the information system in the event of a primary power source loss.	Describe how the facilities hosting the solution are designed to be resilient during a power source loss.	TA.SP.61	S	

Bidder's Response:

Our systems reside in Amazon Web Services. We utilize AWS disaster recovery, failover and elasticity capabilities. We do not maintain our own hardware or physical datacenters. Instead, we run our system in 15 AWS datacenters in VA, OH and CA. Using various AWS regions and different physical datacenters within same region ensures that system is highly available and fault tolerant.

The server environment is virtualized that allows for portability in case of the disaster affecting datacenter when the application server is running. Within minutes, a new instance of the same server will be launched in a different datacenter in a different AWS Availability Zone or region. Downtime is cut to minutes instead of hours.

Using AWS, we achieve higher levels of fault tolerance for our applications by using Elastic Load Balancing to automatically route traffic across multiple instances and multiple Availability Zones (physical datacenters). Elastic Load Balancing ensures that only healthy Amazon application server instances receive traffic by detecting unhealthy instances

and rerouting traffic across the remaining healthy instances. If additional computing capacity is required, we have systems in place that will scale application and database server layer to provide the level of service according to SLAs.

The database is a critical component of the system. We use Amazon RDS (Relational Database Service) to host our database server. Amazon RDS runs on the same highly reliable infrastructure used by other Amazon Web Services. In production we provision Multi-AZ DB Instances.

Amazon RDS synchronously replicates the data to a standby instance in a different Availability Zone (different datacenter). In case of failure of the primary node, Amazon RDS performs an automatic failover to the standby without the need for manual administrative intervention. When a failover is performed, there is a very short period during which the primary node is not accessible. We utilize many Amazon RDS features that enhance reliability for critical production databases, including automated backups, database snapshots, and automatic host replacement in case of primary database crash. In addition to synchronous replication, database backup snapshots are taken at the regular intervals and sent to AWS S3 encrypted storage.

G.10 Project Management and Implementation Requirements:

In any project of this magnitude, with stakeholders from so many different perspectives, quality project management skills and experience can make all the difference in quality. DHHS is focused on ensuring that the EVV project is structured in such a way to support a successful implementation. Bidder will describe below, how each facet of project management will be implemented and used.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
228	PMI.1	Contractor must utilize industry recognized project management approaches, such as PMI PMBOK in order to complete the scope of work. Contractor must follow an agreed project management lifecycle and implementation processes.	Describe how industry recognized project management approaches, such as PMI PMBOK, will be utilized in order to complete the scope of work. The description must specifically address the project management lifecycle and implementation processes.	N/A	S	
Bidder's Response:						
<p>We follow the Project Management Institute's best practices that are documented in the Project Management Body of Knowledge (PMBOK®) to develop our scope statement, estimates, and timelines. Our scope statement is grouped into 6 groups of activities: development, implementation, training, deployment, customer service, and project oversight. The phases required to complete the work will follow industry best practices for both project management (product initiation, planning, executing, monitoring and controlling, and closing) as well as software development best practices that include both standard software development lifecycle (SDLC) and Agile to support rapid development.</p>						

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
229	PMI.2	Contractor must develop and maintain a Project Management Plan (PMP). The PMP must be delivered to DHHS within 30 days of contract signing. Included in the PMP will be the following: 1. Communications Plan 2. Change Management Plan 3. Staffing Management Plan 4. Quality Management Plan 5. Risk Management Plan 6. Issue Management Plan 7. Work Breakdown Structure. The PMP plan must be reviewed and approved by DHHS staff, and any identified adjustments will be made prior to signoff.	Describe development and maintenance of Project Management Plan (PMP), including the following: 1. Communications Plan 2. Change Management Plan 3. Staffing Management Plan 4. Quality Management Plan 5. Risk Management Plan 6. Issue Management Plan 7. Work Breakdown Structure. Describe how the PMP will be continuously maintained and communicated to DHHS, including related documents, as the project progresses. Describe process for providing PMP to DHHS for review and approval.	N/A	S	

Bidder's Response:

1. **Communications Plan:** A communication plan shall be created to identify the best communication methods between Tellus and the DHHS and its stakeholders. The plan shall include defined expectations for receiving, and acknowledging information and requests, and necessary dates, so that both parties are engaged, and expectations are outlined. We shall use a mix of mediums, such as an information repository, emails, and phone calls. Meetings to gather information, contractor statuses, issues, risks, and project statuses will be scheduled appropriately throughout the different phases of the project to ensure that communication is flowing between all project stakeholders. Meetings will have the overall goals of identifying risks, providing issue resolution alternatives, and capturing project work effort and providing forecasting effort needed to stay on plan.
2. **Change Management Plan:** Changes will be documented in a Change Management Plan and closely monitored, especially in regard to their effect on the overall Project Work Plan. Well-defined best practices and proven project management processes support our teams in managing change requests and operations while keeping the scope of work well-documented and integrated with current work plans. This focus on monitoring and documentation ensures that all requirements are met, and activities are executed as planned. The project management plan and procedures documentation, will outline an effective change control method for the review, revision, and approval of planning documents, testing processes, and other project deliverables. We recommend that a change control board (CCB) comprising agency and vendor stakeholder be created early in the project to provide feedback on identified changes, and to review and approve modifications.
3. **Staffing Management Plan:** Staff for the project will include a contract manager, project manager, account manager, business analyst, system architect, agile/scrum team/dev ops, software QA, training/outreach manager and trainers/outreach/customer support personnel. FTEs will be determined during project scope development and a roles and responsibilities will be clearly defined. To ensure efficiency, speed, and redundancy, several of the roles outlined in the organizational chart have multiple staff members assigned, comprising the total number of full-time equivalents (FTEs) represented in the staffing matrix. For example, more than one team member will be assigned to the following roles designated in the core categories: Agile/Scrum Team/Dev Ops, Software Quality Assurance, and Trainers/Customer Support Representatives. Some of the other project roles may be staffed with shared resources. Tellus will establish an account management plan and ensure we have adequate staff in place to manage the overall effort. We will conduct regular reviews through our standard Internal Quality Control program to ensure that the DHHS is receiving all contracted services in the best manner possible.
4. **Quality Management Plan:** We will develop a quality management plan that aligns with the DHHS' quality management requirements. It will address both the quality of the project management process, such as schedule, budget, and project deliverables. A project deliverable matrix will be developed and will list the quality requirement for each deliverable, how it will be measured, and who will have responsibility for the quality of the deliverable.
5. **Risk Management Plan:** Risk identification will be an ongoing activity from start to completion of the contract. The risk management process begins with risk identification and assessment which support risk response plans, including risk monitoring and control strategies. Each risk is assessed in terms of probability and potential consequences. Mitigation strategies are defined during risk response planning, along with the criteria supporting an early detection of risk realization. This step is crucial to ensuring the rapid implementation of risk mitigation actions designed to minimize negative project impacts and remediate the issues. Our tested project management practices include in the risk monitoring and control activities not only the tracking of previously identified risks, triggers, response plans, and risk mitigation actions, but also the ongoing effort to identify new risks and manage changing risks to prevent reoccurrence of potential risks. Tellus also maintains a corporate level Risk Management team to provide oversight during all phases of the project.
6. **Issue Management Plan:** We will develop and provide an issue management plan to define activities and business rules to manage and control issues that arise during the project. This will define how issues will be identified and documented as well as how impacts will be determined and priorities established so issues can be resolved effectively and efficiently.
7. **Work Breakdown Structure:** the work breakdown structure includes contract/scope definitions and requirements gathering (approximately 3 weeks), analysis of hardware and software requirements (approximately 1 week, design (approximately 1 week), development (approximately 4 weeks), quality assurance (approximately 2 weeks), user acceptance testing (approximately 2 weeks), training (approximately 2 weeks), pilot/pre-production (approximately 1 week), deployment/implementation (approximately 1 week), and project closing (usually less than 1 week).

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
230	PMI.3	Contractor should utilize standard procedures and tools to track project items, decisions, issues, risks, defects, and resolutions.	Describe and provide examples of the procedures and tools that will track project items, decisions, issues, risks, defects, and resolutions.	N/A	S	

Bidder's Response:

We focus on rock solid delivery practices and the intentional creation of unparalleled client experiences. The project work plan will be developed by a PMP Certified Project Manager who will manage this project. The Project Manager will communicate Project Status to the DHHS on a weekly basis in an agreed upon format. The Project Manager will maintain a project timeline, a risk matrix, and a work breakdown structure for all key deliverables of the project.

We break down the scope into development activities, implementation activities, training activities, deployment activities, customer service activities, and project oversight activities. This set of groupings provides us with the capability to provide a top-down view on the entire project activities based on the tasks needed to comply with the milestones and deadlines in the implementation plan. The top-down is one of the tools and techniques promoted by the PMI's best project management practices documented in the PMBOK®.

The project timeline will incorporate the required milestones and work required to successfully abide by the delivery dates outlined by the DHHS on the Electronic Visit Verification (EVV) project. The draft implementation plan, containing the initial draft schedule, will be provided within thirty (30) days of contract execution.

The phases required to complete the work will follow industry best practices for project management and software development. Project management phases may include project initiation, planning, executing, monitoring and controlling, and closing.

The software development staff utilizes the Agile / SCRUM methodology for developing projects. Using two-week sprints, the team provides constant feedback to the Project Manager and other key stakeholders for the project, ensuring that issues are identified early on and mitigated appropriately. In keeping with Agile best practices, a daily standup (meeting) is held to communicate progress and identify any blocks to progress.

The anticipated deliverables coinciding with project milestones needed to comply with the EVV project will include the deliverables listed below. Additional milestones may be required after the initial phase analysis of work with intermediate deliverables that are needed in the project plan to abide by the project dates.

PROJECT DELIVERABLES

- Project Kick-Off
- Finalize Resources & Teams
- Provide Final Provider List, Policy & Procedure Manual, Functional Requirements Document
- Business Rule Definition/Design/Sign Off, Communications Plan, Quality Management Plan, Risk Management Plan, Disaster Recovery Plan
- Finalized Individual & Provider Outreach Materials
- Configuration & Software Development, System Configuration Model, Complete UAT/UAT Sign Off, System Testing Plan, Detailed System Design Document, Software System Updates Plan, Training Content & Materials
- Data Import & Export Decisions and Documentation Sign-Off, Stakeholder Feedback, Final EVV Training Materials
- Complete Setup of all Provider System EVV Databases, Complete Data Imports & Exports, UAT Testing, Validation & Operational Readiness
- Conduct Provider Training, Transition & Turnover Plan
- Refine System/Address Bugs
- EVV Program Go-Live
- Transition to Operations & Maintenance
- Training
- Reports

The project management plan, as well as the procedures documentation, will outline an effective change control method for the review, revision, and approval of planning documents, testing processes, and other project deliverables. We recommend a change control board (CCB) be created to provide feedback on identified changes, to review and approve modifications. The CCB should be formed early in the project and shall include the DHHS and Tellus stakeholders.

Contractor roles and responsibilities of proposed contractors will be defined in a role responsibility assignment matrix which will be included in the project management plan, as a component of human resource management.

We will require the assistance of the DHHS as it relates to the approval of the implementation plan. This would include timely and detailed feedback on the draft implementation plan.

Additional assistance required from the DHHS may be requested during the regular established meetings and/or communication methods to ensure timely response and/or approval of the stated assistance request. Our experience is that timely assistance is very beneficial during the initiating and planning phases of the project.

A communication plan shall be created to identify the best communication methods between Tellus and the DHHS and its identified stakeholders. The plan shall include proper expectations regarding the receipt and acknowledgement of information and requests and necessary dates, so as to engage both parties and outline the proper expectations. A mix of mediums shall be used, such as information repository, emails, and phone calls. Meetings to gather information, contractor statuses, issues, risks, and project statuses will be scheduled appropriately throughout the different phases of the project to ensure that communication is flowing between all project stakeholders. Meetings will have the overall goals of identifying risks, providing issue resolution alternatives, and capturing project work effort and providing forecasting effort needed to stay on plan.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
231	PMI.4	Contractor resources must participate in all levels of project governance as necessary, to include, but is not limited to: all monthly project steering committee meetings to discuss project activities, deliverables, milestones, risks, and issues; and all weekly operating committee meetings to discuss issues, risks, project progression, resource changes, and other areas related to the scope of work.	Describe how resources will participate in all levels of project governance as necessary, to include, but is not limited to: all monthly project steering committee meetings to discuss project activities, deliverables, milestones, risks, and issues; and all weekly operating committee meetings to discuss issues, risks, project progression, resource changes, and other areas related to the scope of work.	N/A	S	

Bidder's Response:

Our team will participate in all levels of project governance. We will provide regular updates related to key project tasks and milestones in the weekly project status reports. This helps confirm that you receive timely updates on the overall progress of the project and enables prompt awareness of any areas where potential schedule slippage may occur.

We will conduct weekly operating committee meetings to discuss issues, risks, project progression, resource changes, and other areas related to the scope of the project. We will review the project schedule with the DHHS project management team monthly or on an agreed-upon alternate cadence. Objectives of this project plan status meeting will include:

- Improving schedule predictability
- Reviewing and comparing the baseline schedule to the actual schedule
- Assessing whether milestones will likely be achieved or have been missed
- Discussing and understanding downstream impacts to changes or slippages
- Identifying new approaches to getting back on schedule, such as parallel work efforts, phased activities or releases
- Assessing any schedule risks for potential surprises or large changes

Our team is committed to the open and transparent communication and collaboration essential for project success.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
232	PMI.5	Contractor must participate in and capture notes from all necessary project meetings. Contractor shall be responsible for creation and dissemination of all project meeting agendas, minutes, and necessary documentation.	Describe how Contractor staff shall participate in and capture notes from all necessary project meetings, and will be responsible for creation and dissemination of all project meeting agendas, minutes, and necessary documentation.	N/A	S	

Bidder's Response:

Our Project Manager will schedule project meetings, distribute agendas in advance and facilitate the flow of all meetings. The Project Manager will also be responsible for disseminating meeting minutes and any additional documentation that flows from meetings as well as following up on any outstanding items resulting from meeting discussions.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
233	PMI.6	Contractor should facilitate a project initiation kickoff meeting with key stakeholders and create a kickoff meeting presentation targeted to specific audiences. The presentation shall be submitted to and approved by DHHS.	Describe the project initiation kickoff meeting with key stakeholders and create a kickoff meeting presentation targeted to specific audiences. Describe support required from DHHS to complete kickoff presentation.	N/A	S	

Bidder's Response:

At the beginning of the project, we will develop a shared understanding between the DHHS, Tellus, and project stakeholders on project expectations, deliverables, timelines, and processes. We will work with you to schedule a project kickoff meeting. We will prepare a kickoff meeting presentation to review the project timeline, our approach for configuring and implementing the solution, and any other topics you would like covered.

A detailed project plan will be created. The tasks in the project plan are integrated with one another. As a result, each task has a predecessor/successor relationship with those tasks on which each depends.

During the initial stages of the contract, we will review and adjust the project plan, as needed, based on the actual contract start date and any changes that contract negotiations require. We will conduct a walkthrough of the plan with the DHHS and submit the updated project plan for review. We can adjust the plan as needed based on the DHHS' feedback and resubmit it for review and approval. When the DHHS approves the plan, we will baseline it and place it under configuration management control. Any subsequent changes that require the plan to be re-baselined will require the approval of appropriate DHHS and Tellus management. This would include any changes that result in the change of an agreed-upon milestone date.

A viable schedule and project plan provide a step-by-step approach for accomplishing individual tasks. This includes integrating those tasks to define the critical path and key inter-relationships to verify overall project success. Our draft project schedule combines our long-term domain knowledge, detailed technical solution, and common-sense management approaches. The schedule will be a living document across the project life cycle. We will update the schedule as required to reflect any change driven by legislative dynamics, State requirements, technology evolution, or lessons learned applied to continuous process improvement. We use Microsoft Project, an industry-standard project

management tool, to develop and maintain the schedule and work plan. Using Microsoft Project, we will track the progress of the project, monitor and evaluate resource allocation, and produce schedule reports, including:

- Project schedule
- Milestone dates
- Deliverable dates
- Gantt chart

Additionally, we will produce ongoing reports using Microsoft Project to include in the overall status reports we will provide to the DHHS. This will help confirm that the DHHS and Tellus stay updated on the overall progress of the project and are notified promptly of any areas where project schedule slippage may occur.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
234	PMI.7	Contractor must provide all deliverables and/or documentation as identified in the project's work plan.	Describe how all deliverables and/or documentation as identified in the project's work plan will be created and reviewed within Contractor's team prior to submission to DHHS for review and approval.	N/A	S	

Bidder's Response:

We begin deliverable development by creating a template or tailoring an existing template from our template library. We review and agree upon deliverables and documentation internally and will then present for your review and confirm that the planned format and content meets your needs. After the DHHS approves the templates, we will begin developing the deliverables in the agreed-upon format for the completion and submission in the required project phase. We will develop a template for applicable project deliverables. Examples of deliverables we will develop a template for include the following:

- Requirement documents
- Detailed design documents
- Training plans
- Testing plans
- Status reports
- Issues tracking
- Executive meeting summaries

The DHHS and Tellus must agree on the deliverable review process for deliverable review and acceptance. We will work with the DHHS to review, update, and agree on the deliverable review process. This will help us develop a common understanding of the process and determine when a deliverable is approved and complete.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
235	PMI.8	Contractor must provide a deliverable review and acceptance process which will be approved by DHHS. The following will	Describe the deliverable review and acceptance process to be approved by DHHS. Note how	N/A	S	

	<p>need to be taken into account in the process:</p> <ol style="list-style-type: none"> 1. The size and complexity of the deliverables will be taken into account when determining the length of time available for review cycles. Collaboration with DHHS staff for review turnaround expectations is required. 2. Any change control processes will be taken into consideration. 3. Informal walkthroughs of draft deliverables will be considered. 4. Simultaneous review of numerous deliverables will not be permitted without approval. 	<p>items 1-4 will be considered and addressed.</p>			
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Bidder's Response:

We understand deliverable review takes your time and attention, and we have built an approval cycle that provides you with the time needed to carefully review the documents. Our process provides 10 days for the DHSS to complete an initial review. At the conclusion of that review, the DHSS will provide Tellus with written comments identifying any updates or revisions that need to take place. We will then have up to five business days to complete our revisions and submit an updated deliverable. With the second submission, the DHSS will have three business days to confirm the updates and provide final approval of the document. This is a 13-business-day review cycle for the DHSS to reach final approval.

Tellus will provide comprehensive identification and tracking of project deliverables as part of our standard processes and procedures. We will develop and submit required contract deliverables defined in the RFP, making sure we include tasks for each deliverable in the project schedule or work plan. We will manage contract deliverables from their creation through final acceptance by the DHHS. We will map the contract deliverables defined in the RFP to our deliverable tracking tool, which will support ongoing deliverable status reporting.

During deliverable development, we will perform quality reviews to make sure we meet quality standards and follow the agreed-upon deliverable template. When the draft deliverable is ready, we will publish it along with a meeting agenda before a scheduled walkthrough. During the meeting, we will walk through the draft in its entirety and gather your comments. The objective is to identify any issues during the walkthrough so we can address them before finalizing the document. This will enable us to verify that the DHHS is familiar and comfortable with the deliverable content before the formal submission.

We understand the deliverable review process requires time and attention, and your staff has other day-to-day responsibilities. To make the best use of their time, we have built a review and approval cycle to give your staff sufficient time for careful deliverable review. Our process will give the DHHS 10 days to complete an initial review. At the conclusion of that review, the DHHS will provide Tellus with written comments identifying any updates or revisions that need to occur. Tellus will have up to five business days to complete our revisions and submit an updated deliverable to you. With the second submission, the DHHS will have three business days to confirm the updates and provide final approval of the document. This process will give the DHHS a 13-business-day review cycle to reach final approval.

We acknowledge that you require a sequential deliverable submission approach. We also understand you may grant approval for a deliverable, reject portions of the deliverable, reject the complete deliverable, or ask us to apply specific revisions. If you do not approve a deliverable within two reviews, we will work with you to escalate issues and determine the dates for resubmission and review. Because we developed our deliverable process with a focus on open communication and frequent walkthroughs, we expect escalations of this type to be minimal. Tellus will work with the DHHS on the form of submission for each deliverable. We can provide each document deliverable to the DHHS' Project Director in hardcopy, soft copy, or both. We also acknowledge you may request a short extension to the deliverable review timeframe in writing until a specified date.

We understand review timeframes may be modified as needed for a specific deliverable (i.e. complex deliverables may require greater review time) but must not adversely affect the critical path in the baseline project plan. Either the DHHS or designated Tellus staff will make review timeframe modification requests in writing to the Project Director. These requests will be approved or rejected at the sole discretion of the Project Director.

Our project management practices include a formal process to track and deliver contract deliverables. We will track deliverables using a deliverable tracking tool that is integrated with our project SharePoint repository. The tool enables us to follow contract deliverables from contract execution to deliverable completion. We will use SharePoint to automate reporting on deliverable status while simplifying the reporting process.

We will use SharePoint to store contract deliverables securely and provide easy access for authorized project stakeholders. Our deliverables will conform to the standards and quality processes defined for the project. During deliverable development, we will perform quality reviews to confirm we are meeting our high-quality standards. These reviews will include comparing each deliverable against quality checklists and performing peer reviews for content where appropriate.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
236	PMI.9	Contractor must submit a monthly status report. The report must contain the following at a minimum: 1. Current project work plan and schedule with percentage completes for milestones. 2. Overall completion status. 3. All past due tasks or milestones and the plan(s) for completing them. 4. Planned tasks and activities for the next 30 days. 5. Identification of any staffing issues or changes. 6. Current status on all identified issues. 7. Current status on all identified risks. 8. Current status on testing and metrics. 9. Current status on any service level agreements.	Describe the process for creating a monthly status report to include all items 1-9, along with examples. Draft monthly status report to be submitted with response.	N/A	S	

Bidder's Response:

Tellus will report on project status as required by the RFP. We will provide regular updates related to key project tasks and milestones in the weekly project status reports. This helps confirm that you receive timely updates on the overall progress of the project and enables prompt awareness of any areas where potential schedule slippage may occur. The Tellus team will develop project dashboard reports to provide at-a-glance views of progress that reflect the project plan activities and project health. Tellus will review the project schedule with the DHSS' project management team monthly or on an agreed-upon alternate cadence. Objectives of this project plan status meeting will include:

- Improving schedule predictability
- Reviewing and compare the baseline schedule to the actual schedule
- Assessing whether milestones will likely be achieved or have been missed
- Discussing and understanding downstream impacts to changes or slippages
- Identifying new approaches to getting back on schedule, such as parallel work efforts, phased activities or releases
- Assessing any schedule risks for potential surprises or large changes

We will ensure the monthly project status reports include all of the items noted in the requirement.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
237	PMI.10	Bidder shall provide a draft Project Work Plan with project time frames. Contractor will develop and submit the detailed PWP in the first 30 days of the contract. DHHS will retain final approval of the PWP.	Bidder shall provide a draft Project Work Plan with projected time frames.	N/A	S	

Bidder's Response:

During the initial stages of the contract, we will review and adjust the project plan, as needed, based on the actual contract start date and any changes that contract negotiations require. We will conduct a walkthrough of the plan with the DHSS and submit the updated project plan for review. We can adjust the plan as needed based on the DHSS' comments and resubmit it for review and approval. When the DHSS approves the plan, we will baseline it and place it under configuration management control. Any subsequent changes that require the plan to be re-baselined will require the approval of appropriate DHSS and Tellus management. This would include any changes that result in the change of an agreed-upon milestone date. A viable schedule and project plan provide a step-by-step approach for accomplishing individual tasks. This includes integrating those tasks to define the critical path and key inter-relationships to verify overall project success. Our draft project schedule combines our long-term domain knowledge, detailed technical solution, and common-sense management approaches. The schedule will be a living document across the project lifecycle. We will update the schedule as required to reflect any change driven by legislative dynamics, State requirements, technology evolution, or lessons learned applied to continuous process improvement. We use Microsoft Project, an industry-standard project management tool, to develop and maintain the schedule and work plan. Using Microsoft Project, we will track the progress of the project, monitor and evaluate resource allocation, and produce schedule reports, including:

- Project schedule
- Milestone dates
- Deliverable dates
- Gantt chart

Additionally, we will produce ongoing reports using Microsoft Project to include in the overall status reports that we will provide to the DHSS. This will help confirm that the DHSS and Tellus stay updated on the overall progress of the project and are notified promptly of any areas where project schedule slippage may occur.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
238	PMI.11	Contractor shall develop and maintain a detailed Project Work Plan (PWP) and a Gantt Chart that is aligned with the scope of the work outlined in this RFP. The PWP should identify realistic person hours of effort for each task and identify planned completion dates for all deliverables and milestones. All documents must be provided in a DHHS approved format that is accessible and readable by State staff.	Provide a sample Project Work Plan showing activities and timeframes for a recent successful EVV implementation.	N/A	S	

Bidder's Response:

A sample Project Work Plan is attached as Attachment B.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
239	PMI.19	DHHS will provide access to SharePoint (electronic document repository) for project documents and deliverables. The Contractor, DHHS staff and other Contractors with the appropriate security level must upload/attach new or revised versions of documents. The repository must perform version control and allow users to view all prior versions.	Describe how Contractor will support consolidated project documentation and reporting within the SharePoint site.	N/A	S	

Bidder's Response:

The project manager will also be responsible for retention of all versions of the plan, including previous baselines. Project plan versions will be retained in the central controlled Microsoft SharePoint document repository throughout the project lifecycle.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
240	PMI.12	Contractor must keep the detailed project work plan updated weekly and available on DHHS SharePoint project site.	Bidder to describe how they will meet the requirement.	N/A	S	

Bidder's Response:

Our Project Manager updates the project work plan weekly and can accommodate the DHHS' requirement to post it on the SharePoint project site.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
241	PMI.13	Contractor will develop an implementation plan and communications plan which will be reviewed and approved by DHHS.	Provide a sample implementation plan and communications plan that may be utilized for this project.	N/A	S	

Bidder's Response:

Clear, open, and honest communication is the basis of our approach to service and project management. The Communication Plan supports effective and efficient communication. Our organized, open, and transparent approach will enable us to quickly grasp, respond to, and mitigate potential project issues. In the rapidly evolving environment, systems and organizations must align closely to provide timely, reliable support. To communicate accurate information to the correct entity, we must identify the stakeholders associated with the project.

We must identify and classify project stakeholders to understand their participation in the project and their information needs. Our approach to communication management is to maintain transparent communications across the project while understanding the information needs of each audience, or stakeholder group. The level of interaction with the

project will vary from stakeholder to stakeholder. Understanding differences in audience information needs enables our project team to develop targeted communication strategies and tactics.

The goal of our communication management approach is to establish structured and effective communications with all project stakeholders. To accomplish this goal, the Communication Plan will support the following key objectives:

- Provide accurate, appropriate, and consistent information on project status
- Provide relevant information to appropriate groups at the appropriate time
- Verify all stakeholders receive intended messages and consistent information

Fulfillment of these objectives will accomplish the following:

- Provide stakeholders with oversight responsibilities with the level of information they require
- Provide internal project team governance stakeholders with the level of information they require to coordinate and manage the project
- Facilitate stakeholder support and provide timely and accurate information that helps them prepare for their roles in project implementation and support. Key principles that guide our approach to project communications include the following:
 - Communications will be clear, consistent, and concise, with verbiage free of jargon that stakeholders may not understand
 - Communications may need to be delivered using different delivery methods to reach different stakeholder groups
 - Communications should provide the right information at the right time to the right audience
 - Communication management process will be periodically assessed and updated as needed

To facilitate project success, we will rely on formal and regular communications to provide information and updates that participants need for their roles. The project manager will deliver primary communication vehicles, such as the Weekly Project Status Report, to the DHHS during regularly scheduled review meetings. These weekly reports will keep project stakeholders informed on project progress, project health, items requiring their action, their responsibilities, project dependencies, and areas where the project is facing risks or challenges.

Reinforcing key messages is vital for effective communications. Selecting the right methods to deliver these messages in a timely manner creates a reliable network of communication to keep stakeholders informed.

We will use push and pull communications to engage stakeholders. Push methods deliver information to audiences while pull methods enable stakeholders to retrieve information from a central repository.

We use face-to-face, paper-based, and technology-based communication and feedback channels. Specific channels may be more appropriate for certain audiences and communication objectives than others. Tellus also uses a combination of informal and formal processes for communication. Informal processes can include face-to-face discussions, email exchanges, or telephone conversations. Formal communications include status meetings, status reports, communication storage, and project deliverables.

A sample implementation plan is attached as Attachment C.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
242	PMI.14	Contractor must provide all mutually agreed design and implementation deliverable work products to DHHS staff for approval before acceptance.	Describe how all mutually agreed design and implementation deliverable work products will be provided to DHHS staff for approval before acceptance.	N/A	S	

Bidder's Response:

Tellus uses secured email methods as well as cloud sites to share documents for approval. Specific methods will be defined with the DHHS at the beginning of the planning phase of the project. All comments will be tracked during the approval process to ensure they are captured and processed before acceptance of the documents. Final accepted documents will be generated as pdf files and signatures for approval can be tracked electronically or with inked signatures and scanned.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
243	PMI.15	Contractor shall coordinate deliverable and milestone walkthroughs and participate in other project walkthroughs (if relevant) as required by DHHS.	Provide a description of the deliverable and milestone walkthrough process and provide any samples of artifacts with response.	N/A	S	

Bidder's Response:

Tellus provides a disciplined solution delivery methodology and structure for managing project activities, assessing status, and communicating with you and your stakeholders. Our methodology includes detailed plans and materials that will support successful implementation. We will develop a detailed implementation plan for the events leading up to and including implementation. It will include a readiness checklist and a step-by-step schedule and decision points, including a go/no-go decision process and the responsible parties. The plan will also include the acceptance criteria for the formal approval from the DHHS of the implemented system, confirming that the solution meets the State's requirements and functions as planned. We will configure our pre-built solution to reflect the design of your program. This approach will reduce implementation risk and accelerate a timely and successful go-live. Our implementation will include the following elements.

- **Configuration:** We will document the DHHS' program requirements in the RTM and configure the system to match the RTM when we receive your approval. The RTM will be a living document and will reflect the current system configuration. It will be State property and will be available at contract turnover to reduce the operational risk of our solution not matching State benefit requirements. This will reduce the risk of transition to a future contractor.
- **Interfaces:** We understand the role of other contractors and how those roles will interoperate with our own to integrate our solution into your current environment. We will identify all State and module vendor systems where we are required to exchange data. We will use a proven integration layer to establish and maintain interfaces in collaboration with the State or other contractors.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
244	PMI.16	Contractor must provide a Test Management Plan, including testing activities for development, configuration, interface validation, and performance testing.	Describe the Test Management Plan, including testing activities for development, configuration, interface validation, and performance testing. Samples of previous Test Management Plans may be submitted.	N/A	S	

Bidder's Response:

Our project management approach includes testing at key checkpoints in the overall process to determine whether objectives are being met. Testing operations are planned, managed and executed in every phase of the project to cover unit, system, regression, parallel, integration, and user acceptance testing.

JIRA is one of the tools used for the tracking of operations and as the common repository of testing information, including testing artifacts such as test cases and test results. Each resource in the Testing team is provided with Read/Write access to add/modify test cases. During the Test Design phase, all test cases are written directly into JIRA. Any change to the test case is directly saved and logged.

Throughout testing, each tester directly accesses their respective assigned test cases and updates the status of each executed step. Any defect encountered is logged, linking to the particular test case/test step. During defect fix testing, defects are re-assigned back to the tester to verify the defect fix. The tester verifies the defect fix and updates the status directly in JIRA. Reports are routinely created by our testing team and project managers to provide updates on the status of test execution. For example, these reports may include a status report of test cases executed

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
245	PMI.17	Contractor shall be required to work collaboratively with DHHS and the DHHS Integration team to provide schedule information to be included in the overall integration plan. Elements necessary for the overall plan include, but is not limited to: start and end dates of major phases, key project milestones, integration points, cross module dependencies, and sufficient information to support the State DHHS reporting requirements.	Describe how Contractor has worked collaboratively with previously clients and their Integration teams to ensure alignment of technology and resources. Examples may be submitted.	N/A	S	

Bidder's Response:

Tellus has worked collaboratively with a large State agency to implement EVV for Medicaid Fee-for-Service. Thy system is in production, and the State recently engaged Tellus to rollout EVV for its Medicaid Behavior Analysis program. Our teams work closely with the Agency staff to establish start and end dates of major phases, key project milestones, integration points, cross-module dependencies and information to aid in reporting.

The Tellus Project Manager as well as the client's Project Manager have worked in conjunction to create a detailed plan to be followed with clear assignments of responsibilities. Frequent meetings, which could be daily or weekly were scheduled both with the business and the technical teams to review open issues and action items for the files that are being tested with. Once the testing phase has proven to be correct, all parties determine when to start the loading of files into production.

Issues are tracked per meeting, and as they are completed, they are documented as such and dropped from the agenda of the meeting.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
246	PMI.18	Contractor staff must work with the DHHS project management resources to ensure alignment of activities and resources.	Describe the processes that will be used to work with the DHHS project management resources to ensure alignment of activities and resources.	N/A	S	

Bidder's Response:

While Tellus is primarily an Agile development shop, we have the capability to manage your implementation as either an Agile or waterfall-style project. Our Project Manager will work closely with the DHHS' Project Manager to define clear tasks with resources assigned to each one of them. Weekly meetings can be held by both Project Managers to ensure alignment with all activities. Team meetings will be conducted to obtain status from the team members. Tellus Project Manager will update and provide a Status Report at the frequency agreed upon, to reflect what has been completed, what is being worked, what is expected in the following period, as well as Risks and Issues that need to be tracked.

Issues and Risks will also be tracked separately and managed until they are complete, or they are avoided. Risk Management will follow PMP standards to ensure all risks have been identified and managed appropriately.

Tellus strongly encourages and applies open and transparent communication, and we will ensure this is followed in all phases of the project.

G.11 Communication and Training Requirements:

DHHS has been identifying and deploying improvements to the programs provided as part of their overall operational and quality management process. Preliminary information has been shared with key stakeholders through the MLTC Long-Term Care Stakeholder meeting, with additional updates on the DHHS website. To properly prepare all stakeholders for this EVV implementation, comprehensive communication and training will be extremely important. This may be one of the biggest differentiators to success. Provide below the specific ways in which bidder can improve acceptance and quality through well planned and delivered communication and training.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
247	CAT.1	Contractor must provide a draft Solution Communication and Training Plan. A final detailed Solution Communication and Training Plan shall be developed, reviewed and approved by DHHS within 45 calendar days of the contract start date. The approved Solution Communication and Training Plan shall address the following topics for both communication and training activities: A. Approach and scope (including all audience groups); B. Training and outreach activity, schedule, duration, types (i.e., in person, online, pre-recorded, real time, interactive, etc.), locations, for various stakeholder groups (all providers, participants, etc.) by task; C. Assurances for providing timely, appropriate training and outreach activities for all stakeholders; D. Roles and responsibilities for all stakeholder types; E. Communication and training to support the initial implementation of solution; F. Post implementation training and outreach activities and frequency throughout the life of the contract; G. Training and outreach for newly approved and revalidating providers during the onboarding process; H. Languages that communication and training will be provided in and basis for verifying accuracy of all translations; and I. Identification of standardized and ad hoc communication and training materials.	Provide a draft Solution Communication and Training Plan addressing all items A-I.	N/A	S	
Bidder's Response:						

The objective of the Solution Communication and Training Plan is to socialize the change to all affected stakeholders, ensure that all provider agencies and caregivers are aware of the transition requirements and deadlines, to inform participants of the new process and establish expectations for use, and provide the tools and training necessary to empower all users to effectively use the technology. This Outreach Plan will identify the appropriate strategies, objectives and tactics required to achieve the desired outcomes during the implementation of the EVV project. The Outreach Plan will include information and a framework for how provider agencies, caregivers and participants, including those enrolled in consumer-directed services, will be contacted, the frequency of contact, media employed to contact, key messaging for each contact point and expected results of the contact.

The Tellus Training Program is designed to meet user needs. We have designed our program to comply with federal accessibility standards including the Americans with Disabilities Act and Section 508 of the Federal Rehabilitation Act. In addition, our training sessions and materials are offered in English as well as Spanish. Our EVV application can also be converted to a Spanish translation. Tellus is open to offering training materials and application translation in other languages as required by the DHHS. Training materials will be updated in conjunction with major system enhancements or modifications.

The final approved EVV Solution Communication and Training Plan will address the following topics:

- Approach and scope (including all audience groups);
- Training and outreach activity schedule, duration, medium (e.g., in person, online, prerecorded, real time, interactive, etc.), locations, for various stakeholder groups, (all provider agencies, caregivers, participants, etc.) by task;
- Assurances for providing timely, appropriate training and outreach activities for all stakeholders;
- Roles and responsibilities for all stakeholder types;
- Training and outreach to support the initial implementation of the EVV Solution;
- Post-implementation training and outreach activities and frequency throughout the life of the contract;
- Training and outreach for newly approved participants and revalidating caregivers during the onboarding process;
- Languages that training and outreach will be provided in and basis for verifying accuracy of all translations; and
- Identification of standardized and ad-hoc training and outreach materials.
- Points of Contact

Training will be developed for the DHHS as well as for the agency providers and caregivers. Learning outcomes for each of these groups are different due to the different features they will require within the EVV application. The training will be tailored for each group, as will the outreach communications and frequently asked questions (FAQs). At a minimum, core features including integration and implementation, information verification, data collection and reporting will be a part of mandatory training.

Training will be provided through a number of modalities including on-site instructor-led classroom sessions, one-on-one instructor-led sessions, telephonic support, webinars, and the development of job aids to be made available to users in hardcopy and through an online training and support center.

Training evaluations will be requested at the end of instructor-led sessions in order to assess the quality of the training content and the instructor. Modifications will be made to the program in accordance with this feedback.

As new features or capabilities are added to the EVV application, training materials will be updated to reflect the changes. The outreach plan will include a method of advising training liaisons or coordinators of the content changes and will outline the process for updating any hardcopy training materials in the field.

We recommend a train-the-trainer approach to allow providers the flexibility to re-train existing users or train new hires. These remote trainers may be referred to as training liaisons or training coordinators. Each provider Manager or training liaison will be responsible to ensure their staff receive the training and have signed affidavits to this effect.

We will work with the DHHS to finalize the outreach plan that meets their expectations regarding completeness and timeliness.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure

248	CAT.2	Contractor must collaborate with DHHS to finalize a training schedule that will be approved by DHHS.	Describe how Contractor will collaborate with DHHS to finalize a training schedule that will be managed and approved by DHHS.	N/A	S	
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Bidder's Response:

Complex projects require daily collaboration and communication among the project team. Tellus will work with the DHHS to develop a Solution Communication and Training Plan that meets the needs of all of the participating constituents.

Communication and Training will begin with basic concepts introducing constituents to EVV and the 21st Century Cures Act and evolve into more complex and prescriptive topics through the Project Implementation phase. Ongoing post-implementation Communication and Training will also be discussed and incorporated in the plan.

The final detailed Solution Communication and Training plan will be developed, reviewed and approved by the DHHS within forty-five calendar days of the contract start date.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
249	CAT.3	Solution must provide for development and implementation of technical and user training programs.	Describe how solution will provide for development and implementation of technical and user training programs.	PE.PI2.18	S	

Bidder's Response:

We will work closely with the State to develop and implement a training program that works for the State of Nebraska's constituents. Our training program is designed to meet the needs of the individual user groups:

Caregivers receive hands-on, step-by-step instruction on use of the mobile app and alternative verification methods. They also act as trainers, and we provide training on how to instruct and immediately support recipients during the sign-off phase.

Provider Agency Administrators receive in-depth training on the Administrator Console, the Claims Console and the Mobile App so they can assist employees and peers on use of the system and troubleshoot minor issues on site.

Individuals in Billing and Financial roles receive training related to use of the Claims Console and the reporting features available within it.

State Staff receive high level end-to-end system training as well as hands-on, step-by-step instruction for use of the State level Tellus eVV Console.

Managed Care Organizations users receive hands-on, step-by-step instruction for use of the MCO level Tellus eVV Console.

Participants are engaged through focus groups initially to gain understanding of outreach and training needs. Our outreach campaigns are designed to raise awareness and promote the benefits of the EVV system. Online training is provided to participants, particularly for consumer-directed members, to support them in navigating the system. Direct care providers act as supporting trainers in explaining the sign-off phase of the process to participants.

Consumer-Directed Services Employers are trained to use the Consumer-Directed Console and related timesheet functionality.

Fiscal Management Services Agency staff are trained to use the FMS portal as well as trained how to provide instruction and immediate support for Consumer-Directed Employers and their direct care providers.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
250	CAT.4	Contractor must provide Communication and Training Plan updates on the following basis: A. Prior to the scheduled pre- Solution Implementation training; B. Each time a Solution change or upgrade is implemented. The updated and DHHS approved plan shall be distributed to Solution users prior to the implementation of the system change or upgrade; and C. A complete review and update shall be performed on an annual basis within thirty (30) days of the start of each contract year. The annually updated, DHHS-approved plan shall be distributed or made available to all solution users.	Describe management of the ongoing Communication and Training Plan updates.	N/A	S	

Bidder's Response:

As new features, capabilities or business rules are changed or added to the EVV application, training materials will be updated to reflect the changes. If substantial changes are made, users will be notified by an outreach campaign. The outreach plan will include a method of advising training liaisons or coordinators of the content changes and will outline the process for updating any hardcopy training materials in the field.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
251	CAT.5	Contractor must perform updates to standardized training and communication materials. Updated materials shall be reviewed and approved by DHHS on the following basis: A. At a minimum, on an annual basis in accordance with the training and communication schedule; and B. A minimum of 10 business days prior to a scheduled training or communication event. C. All updates must include a version identifier and date updated notation.	Describe how updates to standardized training and communication materials are maintained as noted.	N/A	S	

Bidder's Response:

As material new features, capabilities or business rules are changed or added to the EVV application, training materials will be updated to reflect the changes and will be provided to the DHHS for review and approval in the required timeframes.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
252	CAT.6	Contractor must provide training to all users of the solution prior to the implementation of EVV and on an ongoing basis during operations in accordance with the DHHS-approved EVV Communication and Training Plan and Materials.	Describe how the training will be delivered to all users of the solution prior to the implementation of EVV and on an ongoing basis during operations in accordance with the DHHS-approved EVV Communication and Training Plan and Materials.	N/A	S	

Bidder's Response:

Training will be developed and/or tailored for the DHHS as well as for the agencies, providers and direct providers. Learning outcomes for each of these groups are different due to the different features they will require within the EVV application. The training will be tailored for each group, as will the frequently asked questions (FAQs). At a minimum, core features including integration and implementation, information verification, data collection and reporting will be a part of training.

Training can be provided through a number of modalities including on-site, instructor-led classroom sessions, one-on-one instructor-led sessions, telephonic support, webinars, and the development of job aids to be made available to users through the Tellus training portal. A unique training plan will be developed to reflect the unique Tellus eVV Solution that will be utilized within Nebraska.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
253	CAT.7	Contractor must provide train-the-trainer sessions for DHHS resources or designated DHHS resources and other staff responsible for training.	Describe train-the-trainer sessions for DHHS resources or designated DHHS resources and other staff responsible for training.	N/A	S	

Bidder's Response:

A train-the-trainer model enables an application Subject Matter Expert (SME) to disseminate his or her functional application knowledge to one or multiple application trainers. Once trained themselves, these trainers are then able to instruct additional user groups, support staff and other relevant stakeholders. The goal of the train-the-trainer approach is to prepare future trainers to present information effectively, respond to trainee/user questions and lead activities that reinforce application understanding. We deliver train-the-trainer training via live on-site or webcast training pre- and post-implementation.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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254	CAT.8	Contractor must develop and deliver in-person training in multiple geographic locations within the State of Nebraska as agreed with DHHS.	Describe the development and delivery of in-person training in multiple geographic locations within the State of Nebraska based on agreement with DHHS.	N/A	S	
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Bidder's Response:

Tellus is available to develop and deliver in-person training in multiple geographic locations within the State of Nebraska as agreed with the DHHS. Tellus has demonstrated the ability to deliver training in-person across geographic locations for previous programs and has an expertise in this area. Once the number of trainees is identified for each of the training modules, we will work with the DHHS to determine the best locations and frequency of these training sessions.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
255	CAT.9	Contractor must utilize a variety of delivery methods for training, including online self-paced training presentations, in-person classroom setting, written materials, webinars, and demonstrations.	Describe the variety of delivery methods for training, including online self-paced training presentations, in-person classroom setting, written materials, webinars, and demonstrations. Samples may be included.	N/A	S	

Bidder's Response:

Training will be provided through a number of modalities including on-site, instructor-led classroom sessions, one-on-one instructor-led sessions, telephonic support, webinars, and the development of job aids to be made available to users in hardcopy and through an online training center.

Our comprehensive outreach and training program offers a multi-modal approach to training delivery that includes the following mediums.

- **Live, face-to-face training:** During the initial implementation, we will schedule a series of regional face-to-face, hands-on training events at locations throughout the State in the months and weeks before go-live. These training events will include a variety of sessions covering topics designed to address the needs of State users, agency administrators, and caregivers. We will also deliver special training for participants and their designated representatives, particularly those who may be enrolled in the consumer-directed program.
- **Live, interactive, role-based webinars:** Trainers will walk attendees through step-by-step instruction based on their role. We encourage attendees to submit specific training or demonstration requests before the session to tailor live training to the audience's needs. We hold a question and answer session during the last 10 minutes of each session. If time does not allow for us to hear and answer all questions during the session, attendees can submit questions by email for individual response and follow-up.
- **Online training center:** Our web-based training and support center is easy to access and use. It offers a centralized location for training resources, including user guides, FAQs, recorded training sessions, and video tutorials. Users can also request additional support from our help desk through the center.
- **Sandbox:** Users have access to a sandbox environment where they can practice and test features, functions, and processes without affecting any live data.
- **Train-the-trainer:** We encourage the State and provider agencies to identify specific individuals to receive in-depth training and serve as subject matter experts (SMEs) at their locations. These individuals play an important role in helping onboard new users. They also serve as liaisons between our training staff and their location to make sure user needs are met in a timely manner.
- **Ongoing refresher courses and new feature training:** Ongoing training sessions are available for new users and those who need a refresher. Our training staff also provides outreach and training to coincide with the release of new features and functionality.
- **Printable reference materials:** Users can easily download or print the reference materials available through online training portal.

- **Simple user guides and tip sheets:** We provide user guides and tip sheets to system administrators, caregivers, participants, and families to support their effective use of the system.
- **Ongoing communications:** We provide regular, ongoing communications with users to communicate tips and tricks, upcoming release information, important dates, and other relevant information. This includes offline methods of communication like targeted mail or email campaigns to participants.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
256	CAT.10	Contractor's training materials must be offered in accessible formats consistent with requirements of the Americans with Disabilities Act.	Describe how the training materials being offered are in accessible formats consistent with requirements of the Americans with Disabilities Act.	N/A	S	

Bidder's Response:

The Tellus Training Program is designed to meet user needs. We have designed our program to comply with federal accessibility standards including the Americans with Disabilities Act and Section 508 of the Federal Rehabilitation Act. In addition, our training sessions and materials are offered in English as well as Spanish. Our EVV application can also be converted to a Spanish translation. Tellus is open to offering training materials and application translation in other languages as required by the DHHS. Training materials will be updated in conjunction with major system enhancements or modifications.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
257	CAT.11	Contractor must provide a training environment that is available to DHHS and must maintain and update the training environment with training data to use during user training.	Describe the training environment available to DHHS and how Contractor shall maintain and update the training environment with training data to use during user training.	N/A	S	

Bidder's Response:

We will establish UAT and training environments in the same secure enclaves as the production environment. Both environments will be subject to the same security and access controls as the production environment. The design and size of the UAT environment will also mirror the production environment and production data will be copied over to the UAT environment periodically to refresh the UAT environment; however, this will not be the case of the training environment. The training environment and all lower environments will only contain de-identified data and will not contain production data.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
258	CAT.12	Contractor must provide training for providers that use third-party solutions that includes, at a minimum: the correct process for integration, information	Describe the methods for providing training for providers that use third-party solutions including but not limited to the	N/A	S	

		verification, data collection and reporting, and data submission to the state EVV Aggregator system.	correct process for integration, information verification, data collection, reporting and data submission to the state EVV Aggregator system.			
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Bidder's Response:

Tellus will provide training for providers that use third-party solutions that includes, at a minimum: the correct process for integration, information verification, data collection and reporting, and data submission to the State EVV Aggregator system. This training information will be provided via the various modalities previously discussed, including in-person (if requested), webinar, recorded webinar and supplemented by user guides and/or other written documentation as required.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
259	CAT.13	Contractor must make training records available to be included in the data available for reporting.	Describe how training records will be included in the data available for reporting.	N/A	S	

Bidder's Response:

Our outreach and training program includes detailed recording and reporting of outreach and training activities. This includes the following information:

- Outreach campaigns sent with engagement results
- Name and agency of individuals trained
- Types of user
- Dates of training
- Modules and modality of training completed

We will provide reports to the State regularly or on request as required. Reports are also available in the State-level and MCO-level Payer Consoles with drill-down capability.

G.12 Operations Requirements:

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
260	OP.1	Contractor must identify, document and communicate to DHHS any sanctions, corrective action plans and/or unresolved audit findings identified during the life of the contract.	Describe the process that will be used to identify, document and communicate to DHHS any sanctions, corrective action plans, and/or unresolved audit findings identified across the install base during the life of the EVV contract.	N/A	S	

Bidder's Response:

All documentation, including recorded calls, relating to all the DHHS services will be retained for a minimum of seven (7) years following the date the EVV data is received by Tellus for verification of services provided, or until all audits, appeals, investigations, or court cases are completed.

Tellus will document any occurrence of recovery from disaster or continued functionality and report those occurrences to the DHHS with a corrective action plan.

Tellus will provide all supporting EVV documentation necessary for the DHHS and/or other Payers to conduct dispute resolution and appeals in a timely manner as defined by the DHHS.

All data and reports will be provided to the DHHS in a mutually agreed upon format in a mutually agreed upon timeframe, as requested by the DHHS.

Tellus will provide detailed incident resolution reports to the DHHS including root cause corrective action. Incident resolution reports will be provided within five (5) business days of resolution of the incident.

Customer Support activities will be monitored and reported to the DHHS in the form of a Monthly Performance Report including the following data points at a minimum:

- Call Center Metrics:
 - Number of calls received,
 - Number of calls answered,
 - Number of first call resolution,
 - Average speed t
 - answer/hold time,
 - Average talk time,
 - Call abandonment metrics,
 - Call blockage rate,
 - Number of afterhours calls,
 - Call reason code/resolution summary
- Email/Correspondence Metrics:
 - Number of emails received,
 - Number of emails responded to,
 - Email reason code summary,
 - Average time to respond

- System deficiency summary
- Issues/Complaints Metrics:
 - Number received,
 - Number closed,
 - Number still open,
 - Average time to close

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
261	OP.2	Contractor shall provide electronic notification, including detailed release notes, for version changes, patches, updates and fixes prior to being deployed to either the test or production environment.	Describe the process for notifications, release notes and updates for version changes, patches, updates and fixes prior to being deployed to either the test or production environment.	N/A	S	

Bidder's Response:

We provide regular, ongoing communications with clients and users to communicate tips and tricks, upcoming release information, important dates and other pertinent information. This includes offline means of communication, such as targeted mail campaigns to participants as well as an active social media effort.

We also work very closely with our product development and management team to make sure enhancements to features and functionality are communicated and trained in advance of release, particularly when major enhancements are made that affect the user interface or operational workflows.

New releases and updates should be released on a quarterly basis. New releases will introduce configuration options for existing clients. Features and functions for upcoming releases will be communicated at least one month in advance of the release data and existing users will be educated about the options available as a result of the enhancements or modifications. Clients can adopt those changes by changing applicable business intelligence rules and configuration settings.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
262	OP.3	Solution must perform advanced information monitoring and route system alerts and alarms to communities of interest when the system detects unusual conditions.	Describe how solution will perform advanced information monitoring and route system alerts and alarms to communities of interest when the system detects unusual conditions.	TA.DC.7	S	

Bidder's Response:

Tellus employs a variety of monitoring, tracking and alert tools on all of our systems. We have mechanisms in place to identify unusual conditions and notify pre-defined audiences, as necessary. If system communications require communication to constituents above and beyond notifications within the application, our Outreach and Communications Team work with the DHHS to draft, review, post and transmit the appropriate information to interested parties.

Req.#	ID	Contractor / Solution Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
263	OP.4	Solution must be capable of or support the production of a random sample of data that would be needed for audit purposes (e.g. providers, beneficiaries, claims, etc.) based on the state-established selection criteria.	Describe solution's capabilities for providing a random sample of data that can be used as needed for audit purposes, based on state-established selection criteria.	IA.DS.18	S	
<p>Bidder's Response:</p> <p>Tellus is available to provide a random sample of data that would be needed for audit purposes, based on the state-established selection criteria upon request and delivery within five (5) business days or an agreed-upon schedule.</p>						

G.13 Customer Support Requirements

Once implementation is complete, a key success factor from a stakeholder use perspective is quality support and responsiveness. With each item below, Bidder should provide thorough responses to show how bidder's experience in delivering consistent EVV services and support will assist DHHS in meeting stakeholder expectations.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
264	CSR.1	Contractor must establish and maintain a Solution Customer Support Plan that addresses all aspects of customer care services, including a help desk function. The draft version of the Solution Customer Support Plan shall: A. Be submitted with the proposal; B. Be submitted to DHHS for review and approval within thirty (30) calendar days of the contract effective date; C. Establish the purpose and scope of the Customer Support Plan; D. Describe the customer support services, including but not limited to help desk services; E. Establish roles and responsibilities for providing customer support functions; and F. Establish operational hours for the provision of customer support services.	Provide a draft version of the Solution Customer Support Plan which must include all required items C-F within draft plan.	N/A	S	

Bidder's Response:

A draft Solution Customer Support Plan specific to the State of Nebraska's EVV solution will be submitted within (30) calendar days of contract effective date. The purpose of the plan is to outline how Tellus will support the State of Nebraska's EVV solution to ensure the highest level of constituent satisfaction. The scope will cover the breadth of Tellus' support services and activities, complaint resolution processes, technical issue escalation and service levels.

Tellus operates a Customer Service help desk, complaint resolution and tracking system that identifies and tracks provider and recipient complaints and requests. The help desk is located in our offices in Boca Raton, Florida, where customer service calls, complaints and requests are taken by individuals supported by an interactive voice response system, computers, headsets and software to facilitate call distribution and data collection. Our primary goal is to ensure customer service satisfaction.

The help desk is accessed by a U.S.-based, toll-free telephone number that is operational 24/7. The number is connected to our help desk supported by English and Spanish speaking staff. Our trained customer service representatives are available during normal business hours defined as 8:00 a.m. to 5:00 p.m. Eastern, Monday through Friday, excluding national holidays. To accommodate the State of Nebraska's constituents, our standard live support hours will be adjusted to 8:00 a.m. to 6:00 p.m. Central time, 7 days a week, for the first (90) days of the Operations and Maintenance Phase, excluding national holidays. After (90) days, Tellus will provide live support 8:00 a.m. to 6:00 p.m. Central time for the duration of the contract. Tellus will return contact within fifteen (15) minutes of State contacting our on-call support number

During normal business hours, the customer service phone number is answered by an interactive voice response system giving callers the option to speak with a live person in either English or Spanish. All calls are logged into Zoho Service Desk for tracking purposes. We are able to assist those with hearing or speech impairment using TTY services.

Service Desk Representative calls are monitored by our Customer Support Manager to ensure quality of service. If required, calls can be recorded and shared with the DHHS upon request.

Current service level requirements enforce ninety percent (90%) of calls be answered in less than sixty (60) seconds with only ten percent (10%) requiring a message be left. Call blockage rates will be monitored at the trunk level to ensure they do not exceed two percent (2%). All calls received during normal business hours are returned within (4) business hours. That is to say a call received at 8:00 a.m., will be returned by 12:00 p.m. the same day, and a call received at 3:30 p.m. will be returned by 10:30 p.m. the next business day.

Outside of normal business hours, the interactive voice response system informs callers of the help desk hours of operation and provides them the option of leaving a message. Callers leaving messages are called back the next business day.

Tellus also maintains a Provider inquiry email account. All emails received during normal business hours are returned within the same business day. Emails received outside of normal business hours are returned the next business day. Most emails are returned in the form of a telephone call to the sender.

All inquiries and complaints are resolved as soon as possible but no later than ten (15) business days from initial receipt. Inquiries and complaints and the resulting resolution are tracked, and the following information is recorded in Zoho Service Desk:

- Initial complaint/inquiry
- Caller identification
- Date & time
- Message
- Steps taken to remediate
- Final resolution

Technical issues are escalated to Level 2 Support and reported to development and quality assurance resources using JIRA. JIRA tickets escalated by Customer Support staff are reviewed with Operations at least two (2) times per week until the issues are resolved in JIRA. If application changes are required because the application is not operating as intended, those changes are developed, tested and deployed to production. If users are requesting enhancements or modifications, the requests are reviewed with payer and program administrators in the form of change orders. Change orders require client approval prior to commencement of development.

If procedural changes are required as the result of any complaint, this information will be documented and provided to the DHHS as part of our monthly report. Any correspondence received will be addressed and shared with the DHHS as part of our monthly report. Procedural changes will be formally written, dated and communicated to all relevant parties.

See a sample Customer Support Plan attached as Attachment D.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
265	CSR.2	Contractor must provide a help desk function. The help desk shall provide: A. Technical support by phone and online, every calendar day, (7 days per week during the hours 8 a.m. to 6 p.m. CT) for all stakeholders for the first 90 days of the Operations and Maintenance Task in accordance with the DHHS-approved Solution Customer Support Plan. B. Technical support by phone and online in accordance with DHHS's regular	Describe help desk functions to be provided, including all requirements noted.	N/A	S	

		<p>business hours (8 a.m. to 6 p.m. CT) for the duration of the contract beginning on the 91st day of Operations and Maintenance task. Support shall be provided in accordance with the DHHS-approved Solution Customer Support Plan.</p> <p>C. Contractor shall provide on-call technical support for hours outside production support core business hours.</p> <p>a) Contractor will return contact within fifteen (15) minutes of state contact to Contractor on-call support number.</p> <p>b) Contractor will maintain active and continued resolution activity until problem is resolved for incidents designated severity 1, or the highest severity designation</p>				
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Bidder's Response:

Tellus is available to provide technical support as outlined in this requirement: 7 days a week, 8 a.m. to 6:00 p.m. Central during the first 90 days for all stakeholders and Monday through Friday 8:00 a.m. to 6:00 p.m. Central on the 91st day and ongoing. Technical support will be provided for a State contact after hours. A unique 800 number will be provided in order for our on-call staff to be contacted to return the call within 15 minutes and to begin the problem identification and resolution process.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
266	CSR.3	Contractor must establish and distribute an electronic DHHS-approved Solution User Manual. At a minimum, the user manual shall be updated and distributed annually to all solution users. The Solution User Manual shall be updated within thirty (30) days of implementation of changes if there are major system upgrades that occur more frequently than regularly scheduled annual updates.	Describe the process for developing and maintaining the required electronic user manual.	N/A	S	

Bidder's Response:

We regularly review training content and make updates generally quarterly or any time a major release involves functionality or user interface changes. The Tellus training materials, including appropriate slides, user guides, user manuals and other learning materials will be published on the appropriate website for downloading. Information will be updated within 30 days of implementation of changes in the event that there are major system upgrades that will likely occur more frequently than regularly scheduled annual updates.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist	Bidding Ability	Gap Description and Recommendation for Closure
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				ID	Code	
267	CSR.4	Contractor must provide a consistent method for receiving and answering questions from system users.	Describe how questions will be received and answered consistently once the system is operational.	N/A	S	

Bidder's Response:

The Tellus customer service team is available to answer questions via phone, email and through submission via our website. A ZohoDesk ticket is opened for each inquiry. This is our way to ensure questions and responses are documented at a high level. When trends of questions are recognized, additional training may be created, FAQs may be added to the website and/or outreach via an email campaign can occur to close any training gap or process clarification that is needed

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
268	CSR.5	Contractor must document inquiries and provide routine reports to DHHS regarding reasons for inquiries.	Describe the process for managing and reporting on inquiries.	N/A	S	

Bidder's Response:

Tellus will work with the DHHS to document inquiries as requested and to provide meaningful routine reports regarding the types of inquiries that Tellus is receiving. Typically, this information is provided on a standard monthly report, but if more timely inquiry reporting is required, we can accommodate your needs.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
269	CSR.6	Contractor must handle grievances in an organized, consistent manner.	Describe how grievances are handled in an organized, consistent manner. Describe grievance handling process, response times for initial grievance, escalation process, and any other handling of grievances.	N/A	S	

Bidder's Response:

Our solution includes reporting and tracking of defects and issue resolutions. All inquiries and complaints are resolved as soon as possible and in compliance with the Service Level Agreements required by the State. Inquiries and complaints and the resulting resolution are tracked, and the following information is recorded:

- Initial complaint/inquiry
- Caller identification
- Date and time
- Message
- Steps taken to remediate
- Final resolution

Technical issues are escalated to Level 2 Support and reported to development and quality assurance resources. Tickets escalated by customer support staff are continually reviewed with operations until the issues are resolved. If configuration changes are required because the application is not operating as intended, those changes are configured, tested, and deployed to production. If users are requesting enhancements or modifications, the requests are reviewed with the State in the form of change orders. Change orders require State approval prior to commencement of development. If procedural changes are required as the result of any complaint, this information will be documented and provided to the State as part of the weekly reporting. Any correspondence received will be addressed and shared with the State as part of our weekly report. Procedural changes will be formally written, dated, and communicated to all relevant parties.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
270	CSR.7	Contractor must document grievances and provide routine reports regarding the reasons for the grievances and the resolution of the grievances.	Describe the grievance and reporting process.	N/A	S	

Bidder's Response:

Our solution includes reporting and tracking of grievances. All grievances are resolved as soon as possible and in compliance with the Service Level Agreements required by the State. Grievances and the resulting resolution are tracked, and the following information is recorded:

- Initial complaint/inquiry
- Caller identification
- Date and time
- Message
- Steps taken to remediate
- Final resolution

Grievances that involve technical issues are escalated to Level 2 Support and reported to development and quality assurance resources. Tickets escalated by customer support staff are continually reviewed with operations until the issues are resolved. If system configuration changes are required because the application is not operating as intended, those changes are configured, tested, and deployed to production. If users are requesting enhancements or modifications, the requests are reviewed with the State in the form of change orders. Change orders require State approval prior to commencement of development. If procedural changes are required as the result of any grievance, this information will be documented and provided to the State as part of the routine reporting. Any correspondence received will be addressed and shared with the State as part of our routine reporting. Procedural changes will be formally written, dated, and communicated to all relevant parties.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
271	CSR.8	Solution must provide a callback option. For callers who select a callback option, Contractor must have their call returned within four (4) business hours.	Describe the callback solution and service level expectations.	N/A	S	

Bidder's Response:

During normal business hours, the customer service phone number is answered by an interactive voice response system giving callers the option to speak with a live person in either English or Spanish. The caller may opt to request a callback rather than wait for a customer service representative. In the event they request a callback, Tellus can

accommodate a service level agreement to make those callbacks within (4) business hours. That is to say that a call received at 9:00 a.m., will be called back by 1:00 p.m. the same business day, and a call received at 2:00 p.m. will be called back by 9:00 a.m. the next business day.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
272	CSR.9	Solution must provide organizations and individuals providing Medicaid home and community-based services with necessary, comprehensive, timely and accessible information, instructions and training, and technical support during implementation and operation of solution.	Describe how the solution provides organizations and individuals providing Medicaid home and community-based services with necessary, comprehensive, timely (as per the agreed project schedule) and accessible information, instructions and training, and technical support during implementation and operation of solution.	N/A	S	

Bidder's Response:

The Tellus Training Program is designed to meet user needs. We have designed our program to comply with federal accessibility standards including the Americans with Disabilities Act and Section 508 of the Federal Rehabilitation Act. In addition, our training sessions and materials are offered in English as well as Spanish. Our EVV application can also be converted to a Spanish translation. Tellus is open to offering training materials and application translation in other languages as required by the DHHS. Training materials will be updated in conjunction with major system enhancements or modifications.

Training will be provided through a number of modalities including on-site instructor-led classroom sessions, one-on-one instructor-led sessions, telephonic support, webinars, and the development of job aids to be made available to users in hard-copy and through a training portal.

Our comprehensive outreach and training program offers a multi-modal approach to training delivery that includes the following mediums.

- **Live, face-to-face training:** During the initial implementation, we will schedule a series of regional face-to-face, hands-on training events at locations throughout the State in the months and weeks before go-live. These training events will include a variety of sessions covering topics designed to address the needs of State users, agency administrators, and caregivers. We will also deliver special training for participants and their designated representatives, particularly those who may be enrolled in the consumer-directed program.
- **Live, interactive, role-based webinars:** Trainers will walk attendees through step-by-step instruction based on their role. We encourage attendees to submit specific training or demonstration requests before the session to tailor live training to the audience's needs. We hold a question and answer session during the last 10 minutes of each session. If time does not allow for us to hear and answer all questions during the session, attendees can submit questions by email for individual response and follow-up and/or posting of FAQs on the appropriate website/s.
- **Online training center:** Our web-based training and support center is easy to access and use. It offers a centralized location for training resources, including user guides, FAQs, recorded training sessions, and video tutorials. Users can also request additional support from our help desk through the training center and/or via contacting Tellus via email or phone.
- **Sandbox:** Users have access to a sandbox environment where they can practice and test features, functions, and processes without affecting any live data.
- **Train-the-trainer:** We encourage the State and provider agencies to identify specific individuals to receive in-depth training and serve as subject matter experts (SMEs) at their locations. These individuals play an important role in helping onboard new users. They also serve as liaisons between our training staff and their location to make sure user needs are met in a timely manner.
- **Ongoing refresher courses and new feature training:** Ongoing training sessions are available for new users and those who need a refresher. Our training staff also provides outreach and training to coincide with the release of new features and functionality.

- **Printable reference materials:** Users can easily download or print the reference materials available through the online training center.
- **Simple user guides and tip sheets:** We provide user guides and tip sheets to system administrators, caregivers, participants, and families to support their effective use of the system.
- **Ongoing communications:** We provide regular, ongoing communications with users to communicate tips and tricks, upcoming release information, important dates, and other relevant information. This includes offline methods of communication like targeted mail or email campaigns to participants.

Tellus is available to provide technical support: 7 days a week, 8 a.m. to 6 p.m. Central during the first 90 days for all stakeholders and Monday to Friday 8 a.m. to 6 p.m. Central on the 91st day and ongoing.

The Tellus customer service team is available to answer questions via phone, email and request submission through our website. A ZohoDesk ticket will be opened for each inquiry. That's how we ensure questions and responses are documented at a high level. When trends of questions are recognized, additional training may be created, FAQs may be added to the website and/or outreach via an email campaign can occur to close any training gap or process clarification that is needed.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
273	CSR.10	Contractor must provide Customer Support monthly reporting statistics and criteria, and associated reports are to be delivered on a monthly basis. Some of the criteria to be included, but is not limited to are: <ul style="list-style-type: none"> • Call Center Calls Received by Month • Calls Abandoned • Calls Answered • Average Handle Time • Calls Held • Average Hold Time • Calls Abandoned % • Call back statistics • Average Speed of Answer • Calls transferred to Voicemail • Callers who left Voicemail • Time to return Voicemail • Dropped Calls. 	Describe the Customer Support monthly reporting statistics and criteria, and include a mock-up of the report to be delivered on a monthly basis. Include all identified requirements in CSR.10. Sample should be submitted with proposal.	N/A	S	

Bidder's Response:

Tellus will provide detailed incident resolution reports to the State of Nebraska including root cause corrective action. Incident resolution reports will be provided within five (5) business days of resolution of the incident.

- Customer Support activities will be monitored and reported in the form of a Monthly Performance Report including the following data points at a minimum:
 - Call Center Metrics:
 - Number of calls received,
 - Number of calls answered,
 - Number of first call resolution,

- Average speed to answer/hold time,
- Average talk time,
- Call abandonment metrics,
- Call blockage rate,
- Number of afterhours calls,
- Call reason code/resolution summary
-
- Email/Correspondence Metrics:
 - Number of emails received,
 - Number of emails responded to,
 - Email reason code summary,
 - Average time to respond
 - System deficiency summary
- Issues/Complaints Metrics:
 - Number received,
 - Number closed,
 - Number still open,
 - Average time to close

G.14 Staffing and Resources Requirements:

Committed, experienced staff are key to a successful project. Describe the staff that will be utilized for this project, and how Bidder utilizes documented, consistent processes to ensure ongoing oversight of project and operational staff.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
274	SAR.01	<p>Contractor must have a process for performing background checks for U.S. citizens, non-U.S. citizens, and Green Card holders. Contractor must provide a Personnel Background Check Attestation (written documentation) of a favorable background check for personnel who might reasonably be expected to access sensitive and confidential member data contained in any system accessed during the course of the Contract. Contractor must have a documented set of processes and criteria used for background checks.</p> <p>The Department may request the removal of staff for disqualifying offenses.</p>	Describe the background check processes used, and criteria included. Describe the process for performing background checks for citizens, non-US citizens, and Green Card holders.	N/A	S	

Bidder's Response:

One of the standard steps in our recruiting and vetting process is a qualification verification and background check. We verify the approved applicant's qualifications and conduct a management interview to determine applicants' skills and if the skills match a specific job appropriately. If an applicant is successful during the interview, a group of peers conducts a rigorous technical interview to assess knowledge, skills, and abilities. The group prepares questions in advance, seeks to confirm technical or functional skills, and confirms the manner in which the individual will respond to challenging situations. We consider both technical and behavioral responses when we assess the candidate's ability to fit into our project team.

If we proceed with an offer, we conduct an independent, third-party background investigation that includes confirmation of employment, salary, educational history, and reference/financial/credit and criminal records checks. We do not schedule any candidates to work on a client contract until we complete the background investigation. Our Corporate Security Office maintains a database of new hires subjected to a pre-employment background investigation. This database is checked as part of the prescreening process for our employees scheduled to perform on a customer contract. Additionally, our background check policy requires all employees to complete an annual background check successfully. A consumer reporting agency performs this check and reports felony level offenses. We will make sure the qualification verification and background checks we perform for the project comply with your requirements. This policy reassures our customers that the staff members assigned to their projects pass both initial and ongoing background checks.

Any employee whose job function requires them to have the ability to retrieve production data, a mandatory Level 2 background and credit check will be conducted by Human Resources. Any employee who accesses ePHI or other sensitive data to perform their work functions will undergo a Level 2 background check. All employees work eligibility status will be checked against the national database, regardless of role. All employees must provide clear documentation stating their legal work status.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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275	SAR.03	Contractor will work with DHHS to develop an agreed to schedule for project manager to be onsite at DHHS for all key meetings, training and other activities as needed.	Describe Contractor's typical approach to onsite versus remote support, and how Contractor will work with DHHS to develop an agreed to schedule for project manager to be onsite at DHHS for all key meetings, training and other activities as needed.	N/A	S	
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Bidder's Response:

Tellus leadership is skilled and experienced managing off-site personnel. Approximately 25% of our employees work off-site one or more days a week. We are a health services company, but we are also a technology leader. Our workforce is collaborative and dynamic. The technology capabilities that will help us deliver a solution for the State of Nebraska and improve health outcomes for your Medicaid participants also helps us to productively manage off-site resources. Using off-site work enables us to increase our talent pool, engage the most qualified professionals, and provide best-value solutions for our client contracts. With effective management, we have found that off-site work does not negatively affect employee productivity. In fact, many of our most productive employees are off-site workers. To manage off-site project work, Tellus uses a combination of people, processes, and technology.

We will work with the DHHS to develop a mutually agreeable schedule for the project manager to work onsite at the DHHS as needed for all key meetings, training and other activities.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
276	SAR.04	Contractor's staff working remotely must be available to work in the State's primary project location at DHHS's request for functions necessary to support the scope of work (e.g., risk review meetings, root cause analysis sessions, integration planning, release planning, operational readiness reviews, UAT, implementation, and production deployment).	Describe how staff working remotely will be available to work in the State's primary project location at DHHS's request for functions necessary to support the scope of work (e.g., risk review meetings, root cause analysis sessions, integration planning, release planning, operational readiness reviews, UAT, implementation, and production deployment).	N/A	S	

Bidder's Response:

Tellus staff assigned to the project will be available to work in the State's primary project location for functions necessary to support the scope of work. We will work with the DHHS to establish a mutually agreeable schedule.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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277	SAR. 05	DHHS reserves the right to request the removal of any Contractor staff or sub-Contractor staff assigned to the project and the Contractor shall comply with any such request immediately.	Describe process Contractor will use if or when DHHS requests removal of contractor staff or subcontractor staff assigned to the project.	N/A	S	
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Bidder's Response:

If the State of Nebraska requests removal of contractor staff assigned to the project, Tellus will reassign staff to fulfill the responsibilities and ensure the project stays on track and on time. It may become necessary to backfill the position with another qualified candidate, in which case, Tellus will work to fill the position as soon as practically possible.

G.15 Turnover and Contract Closeout Requirements:

Upon ending the contract, Contractor shall work with DHHS and any other organizations designated by DHHS to ensure an orderly transition of services and responsibilities under the contract and to ensure the continuity of those services required. This includes, but is not limited to, supporting data conversion and knowledge transfer to Nebraska DHHS or any succeeding contractor.

All toll-free telephone numbers shall be transferable to Nebraska DHHS, or other entity designated by DHHS, upon the ending of the contract.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
278	TAT.1	Refer to Contractor requirements in Section II. T. Contract Closeout.	Provide a draft Turnover Plan of a similar EVV project. Describe bidder's experience in transition activities of a similar EVV project.	N/A	S	

Bidder's Response:

Upon contract execution, we will begin to develop a Transition & Turnover Plan to be put into action when our contract ends to seamlessly transition all records and data to a new vendor via a HIPAA-compliant process.

The plan will include a prospective calendar of events to meet with the new vendor or State of Nebraska representatives to develop a HIPAA-compliant agreement that identifies a designated point of contact for each entity, regularly scheduled meetings, a detailed list of data that will be shared, a mechanism and timeframe for transmitting records and data from our system, a mechanism and timeframe for transmitting documents produced under the resulting contract, and a clear description of the mutual needs and expectations of both entities.

Tellus encrypts in-flight (being transmitted to/from/between Tellus systems) data using transport and/or message level encryption. In flight standards include:

- TLS: 2, TLSv1.1 and SSLv2Hello
- Key Agreement Protocol: Ephemeral Diffie-Hellman Key with a size of 2048.
- Cipher Suites: Ability to use up to 43 different Cipher Suites (Examples: TLS_RSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_ECDSA_WITH_AES_256_GCM_SHA384, TLS_ECDH_RSA_WITH_AES_256_GCM_SHA384, TLS_DHE_RSA_WITH_AES_256_GCM_SHA384).

Data at rest (stored in databases, file structures, object storage, etc.) is encrypted using Federal Information Processing Standards (FIPS) and the National Institute of Standards and Technology (NIST) publications regarding cryptographic standards including:

- Encryption algorithm used is AES 256 Encryption
- Encryption algorithm used for one-way hashing is SHA256

The process of retrieving any records will happen over a secure HTTPS connection. We ensure that ePHI is encrypted when transmitted and encrypted at rest by using SSL/TLS and database encryption. Our hosting provider has achieved many certifications including but not limited to SOC 1,2,3, FedRAMP, ISO 9001, HITECH, PCI DSS: (<https://aws.amazon.com/compliance/>)

We will document the DHHS' program requirements in the RTM and configure the system to match the RTM when we receive your approval. The RTM will be a living document and will reflect the current system configuration. It will be State property and will be available at contract turnover to reduce the operational risk of our solution not matching State benefit requirements. This will reduce the risk of transition to a future contractor.

Some elements used in our past transition processes have included:

- List of technologies used to build the application
- Technical Architecture and specification documents
- Functional Specification Document
- Application Deployment Document
- Data Dictionary
- Database dump to setup test database
- Database Process Documentation and DB Schema
- Existing Application deployment network diagram on AWS (EX. Load Balancer, Web servers, Application servers, Database server, Backup DB for Disaster recovery, etc.)

There are potential risks and barriers when transferring large amounts of data, so we aim to mitigate all risks by clearly communicating and documenting specific needs, target destinations, formats and approved users involved in the transition process as well as employing industry standard security measures and methodologies.

G.16 Certification Support Requirements:

To ensure a comprehensive solution, and to best leverage federal FMAP, DHHS is very focused on ensuring that all certification criteria are satisfied fully. Describe their experience and capability in meeting all certification requirements, artifacts, tracking and collaboration throughout the project. Since full certification will not occur until at least six months post-implementation, many certification activities will continue beyond deployment through the initial operational months. Be specific and ensure Bidder's responses show how Bidder's experience and capability can differentiate Solution and certification achievement.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
279	CRT.1	Contractor shall develop a Certification Crosswalk that describes how the solution aligns with the CMS certification requirements and MECT milestones within 120 days of execution of the contract.	Describe the process by which the solution will be validated against the CMS certification checklists.	N/A	S	

Bidder's Response:

Upon execution of the contract, Tellus will begin immediately developing a Certification Crosswalk that describes how the solution aligns with the CMS certification requirements and MECT milestones. We will work closely with the State and its IV&V contractor to develop a project plan to accomplish this within 120 days of execution of the contract. The project plan may look as follows:

Tasks	Duration
Certification Crosswalks	120 days
Project Initiation: Artifacts Review(s) and Approvals	45 days
Develop a Certification Crosswalk that describes how the deliverables and other documentation align with federal certification requirements and MECT milestone reviews	10 days
Complete milestone updates of the CMS Certification Checklists as requested by the State	5 days
Validate the system against the CMS Certification Checklists	2 days
Provide staff resources to support MECT milestone review and certification activities including participating in planning activities, meetings and other activities as required by CMS	2 days
Assist the Agency in preparing certification artifacts, evidence and presentation materials	10 days
Participate and support as needed in CMS certifications of the other modules	5 days
Perform required remediation activities related to certification findings on a schedule to be approved by CMS and the State	5 days
Update system, user, and training documentation as necessary to support the certification process and to reflect changes that have been made to the solution during the certification process	10 days
Assist the Agency in preparing certification artifacts, evidence and presentation materials, e.g., Requirements/ user stories and/or use cases for functional and non-functional requirements, data, business, capacity/performance, security/privacy/HIPAA com	10 days
Participate and support as needed in CMS certifications of the other modules	5 days
Coordinate with the State to develop CMS Certification Checklist documentation for each MECT Checklist requirement	5 days
Populate the certification document repository, as each required item/artifact is completed and approved	5 days
Milestone: Project Initiation Milestone Review Complete, State Approval	1 day

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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280	CRT.2	Solution must be CMS certifiable through correct design, implementation, documentation, and support by Contractor.	Describe how solution will be CMS certifiable through correct design, implementation, documentation, and support by Contractor.	N/A	S	
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Bidder's Response:

Tellus will enter into a Business Associate Agreement (BAA) prior to initiating work with the DHHS and will provide all required documentation to support State initiatives to attain CMS certification of EVV.

To make sure we achieve certification objectives, we follow the CMS Medicaid Enterprise Certification Lifecycle (MECL) release and updated checklists, which include greater alignment to MITA, the Seven Conditions and Standards, and recent federal legislation. In 2017, CMS updated the MECL and Required Artifacts to include an Operational Milestone Review (R2) before the operations go-live of the system, in addition to the traditional Certification Final Review (R3) at the end of the system stabilization period.

We align our efforts to ensure that the delivered solution conforms to MITA 3.0 standards and with all of the required checklists items for modular certification, such as:

- Business Area Checklist
- General Checklists:
 - Information Architecture Checklist
 - Access and Delivery Checklist
 - Integration and Utility Checklist
 - Intermediary and Interface Checklist
 - Standards and Conditions Checklist

Additionally, our technical and advisory teams are ready to support every phase of the certification process with the creation of the required documentation in the MECT V2.2 Appendix B, such as:

- Project Management Plan
- Schedule/Milestones & Burn-down Charts
- Risk Register/Exception Plan
- Test Plan
- Working MMIS module(s) and software
- Earned Value/Velocity Management Report
- Database Design and DED
- Data Conversion/Management Plan
- Contingency/Recovery Plan
- Test Reports/Validated Product Reports
- System Design Document (SDD)
- System Requirement Document
- Product Documentation (User and Training Manuals)
- HIPAA Statement

Tellus is committed to developing CMS Certified solutions, and we look forward to working with the State of Nebraska and its IV&V contractor toward that goal.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
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281	CRT.3	Contractor must coordinate with DHHS in developing the necessary CMS certification checklist documentation and artifacts for each MECT checklist requirement.	Describe how Contractor will collaborate with DHHS to develop the necessary CMS certification checklist documentation and artifacts for each MECT checklist requirement, along with any MECT certification experience from past implementations.	N/A	S	
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Bidder's Response:

To make sure we achieve certification objectives, we follow the CMS MECL release and updated checklists, which include greater alignment to MITA, the Seven Conditions and Standards, and recent federal legislation. Tellus is committed to working with the State of Nebraska's project teams to prepare the required documentation for each phase of the certification process.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
282	CRT.4	Contractor must update system, user, and training documentation as necessary to support the certification process and to reflect changes that have been made to solution during the certification process.	Describe how Contractor will update system, user, and training documentation as necessary to support the certification process and to reflect changes that have been made to the solution during the certification process.	N/A	S	

Bidder's Response:

We are committed to delivering thorough and effective system, user and training materials, and we review and update materials and documentation on a regular, consistent basis. In addition, we work closely with our technology team to update and/or develop new training materials anytime a major release is scheduled. Should a certification requirement result in changes to the solution, particularly if they impact features, functionality or the user interface, we can establish an outreach campaign to inform and educate users of the upcoming changes. We also provide training sessions to make sure users are adequately informed, trained, and prepared for the release. All materials and documentation will be updated in accordance.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
283	CRT.5	Contractor shall participate as required by DHHS during milestone reviews and other certification meetings.	Describe how Contractor will provide staff resources as necessary to support MECT milestone reviews and activities. Describe how Contractor will participate as required by DHHS during milestone reviews and other certification meetings.	N/A	S	

Bidder's Response:

We will work cooperatively with the DHHS and the Independent Verification and Validation (IV & V) Contractor to achieve this certification. Tellus will support and provide all technical, functional, and performance documents as required by the DHHS' IV&V Contractor's activities associated with the contract, including in preparation and completion of Medicaid Enterprise Certification Lifecycle (MECL) milestone reviews with the Centers for Medicare and Medicaid Services (CMS). We will participate as needed during the federal CMS offsite and onsite certification review activities, allow and facilitate visits to our operational facilities, and respond to any additional questions related to the certification reviews by CMS and the IV&V contractor.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
284	CRT.6	Contractor must complete milestone updates to the CMS certification checklists as requested by DHHS. Contractor must assist DHHS in preparing certification artifacts, evidence, presentation materials and any other content as required by DHHS, IV&V, or CMS. Contractor must support DHHS and the IV&V's activities associated with solution throughout the CMS certification process.	Describe how Contractor will support creation, review and updates of all required certification artifacts, presentation materials and any other content required for the CMS certification process.	N/A	S	

Bidder's Response:

Tellus will complete milestone updates to the CMS certification checklists as requested by the DHHS and will assist in preparing required deliverables. We will work with the State to and the IV&V contractor to outline all deliverables and develop a project plan. The following table provides the DHHS with a summary of the timeline related to the CMS certification checklists within our Project Plan.

Tasks	Duration
CMS Certification Checklists	22 days
Prepare CMS Certification Checklists (all phases)	10 days
Prepare Deliverable Expectation Document (DED)	5 days
Deliver CMS Certification Checklists and DED to DHHS	1 day
DHHS Review Period	5 days

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
285	CRT.7	Contractor must populate a DHHS certification document repository, as each required item/artifact is completed and approved.	Describe how contractor will populate repository, as each required item/artifact is completed and approved.	N/A	S	

Bidder's Response:

Our project management practices include a formal process to track and deliver contract deliverables. We will track deliverables using a deliverable tracking tool that is integrated with our project SharePoint repository. The tool enables us to follow contract deliverables as each required item/artifact is completed and approved. We will use SharePoint to automate reporting on deliverable status while simplifying the reporting process.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
286	CRT.8	Contractor must provide the IV&V Contractor timely (based on agreed project schedule) and accurate project status when requested by DHHS or the IV&V Contractor.	Describe how Contractor will provide IV&V Contractor timely and accurate project status when requested by DHHS or the IV&V Contractor.	N/A	S	

Bidder's Response:

Clear and candid communications within and across all project stakeholders is vital for project success. This includes open communications between Tellus and the State's IV&V contractor. To guide our project communications, we will develop and deliver a Communication Plan to DHHS. The plan will provide an overall framework for managing and coordinating project communications. The Communication Plan addresses communicators, audiences, messages, communication channels, feedback mechanisms, and message timing, creating a mapping between them.

This framework will help us confirm we provide relevant, accurate, and consistent project information for all parties in a timely manner.

The Communication Plan will help us accomplish the following:

- Manage expectations for the project
- Verify the communication methods that will be used
- Confirm appropriate levels of coordination with internal and external project stakeholders
- Promote relevant, accurate, and consistent information disseminated through project meetings and written updates
- Help us understand, respond to, and mitigate potential project issues
- Optimize ongoing support for the project

Our Project Manager will be responsible for tracking project status on an ongoing basis and will respond to off-cycle requests for status updates as soon as reasonably possible. It's our goal to build strong, trusted relationships with our clients, and we are committed to clear and open communication throughout the lifecycle of the project.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
287	CRT.9	Contractor must utilize agreed testing methodologies, configuration and change control measures made to the solution throughout the certification and operational processes.	Describe how Contractor will utilize agreed testing methodologies, configuration and change control measures made to the solution throughout the certification and operational processes.	N/A	S	

Bidder's Response:

A viable timeline provides a blueprint to accomplish project tasks and milestones. Our timeline integrates those tasks and enables an understanding of the critical path and key interrelationships to promote overall project success. We have developed our project tasks, milestones, and timeline based on best practices and a realistic approach to provide you timely delivery of the best solution. Within our schedule, we have provided ample time to complete contract negotiations and CMS approval. We recognize the importance of thorough testing and have included iterative integration testing, and user acceptance testing. Our timeline also includes EVV pilot testing, to make sure your solution is of high quality and meets the requirements of the RFP.

Upon contract signing, we will conduct test planning with you to confirm a testing approach and our final testing strategy. The Test Plan will detail our testing policies and methodology. It will describe the relationships between the testing teams during each testing stage, including roles and responsibilities. The plan will describe how we manage defects, requirements, testing environments, acceptance criteria for each testing phase, and reporting. It will be consistent with the principles and methodology presented within the CMS Testing Framework. The framework establishes, defines, and organizes guidelines for testing new and existing CMS business applications and infrastructure before deployment to a production environment. The Test Plan will describe the process we will use to roll back the test environment for agreed-upon events, such as version upgrades or hotfixes. We will execute test stages to deliver a quality product and service. The stages take into consideration our use of a comprehensively tested COTs product with a focus on solution configuration and UAT. We incorporate these test stages early in the project and continue executing them throughout the project. This approach helps maximize product satisfaction at the beginning of operations. Our testing will include the following types of testing.

- **Unit testing:** Verifies that the smallest component in the iteration or sprint meets the requirement and meets data validation standards for reliability
- **Regression testing:** Verifies pre-existing functionality has not changed after new code updates or changes have been completed
- **System Integration testing:** Verifies the solution meets the functional requirements established and the solution subcomponents communicate effectively within the integrated solution
- **User acceptance testing (UAT):** Verifies user acceptance of the solution
- **Operational readiness testing:** Verifies the operational processes and procedures will support day-to-day business operations

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
288	CRT.10	Contractor should participate and provide support as needed in CMS certifications of any other associated modules.	Describe how contractor will support CMS certifications of associated modules.	N/A	S	

Bidder's Response:

We will work cooperatively with the DHHS and the Independent Verification and Validation (IV & V) Contractor to achieve this certification. Tellus will support and provide all technical, functional, and performance documents as required by the DHHS' IV&V Contractor's activities associated with the contract, including in preparation and completion of Medicaid Enterprise Certification Lifecycle (MECL) milestone reviews with the Centers for Medicare and Medicaid Services (CMS). We will participate as needed during the federal CMS offsite and onsite certification review activities, allow and facilitate visits to our operational facilities, and respond to any additional questions related to the certification reviews by CMS and the IV&V contractor.

Our project manager will collaborate with the IV&V contract project manager throughout the duration of the contract to respond to requests, concerns and issues and take appropriate action(s) as well as ensure all deliverables meet expectations and are delivered on time.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
289	CRT.11	Contractor must correct all required remediation activities related to	Describe how contractor will complete remediation activities	N/A	S	

		certification findings on a schedule to be approved by CMS and DHHS.	on a schedule to be approved by CMS and DHHS.			
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Bidder's Response:

We will assist Nebraska in certifying the EVV components with CMS as well as the integration of the EVV system into the current and future MMIS environment.

Tellus will develop a set of checklists that detail the items that need to be addressed for certification. A report will be developed and maintained for tracking each of these items against a milestone schedule. These reports will be reviewed quarterly or as needed.

As the process evolves and changes are made, documentation of all changes will be included to the CMS progress reports that are published. The CMS certification is not a single event, but rather a process of working toward a common goal from project inception and continuing through operational rollout and eventually final CMS certification. This is why everything from needs analysis, to training, testing, and rollout are integrated into the CMS certification process.

Tellus will map each certification task into our overall Project Plan and will submit to the State of Nebraska for approval. We will correct all required remediation activities related to certification finds on a schedule that is approved by CMS and DHHS.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
290	CRT.12	Contractor must meet the requirements of future regulations and guidance from CMS for EVV systems and EVV use to ensure that Nebraska fully qualifies for and receives enhanced ninety percent (90%) federal funding for design, development and implementation; enhanced federal match of seventy-five percent (75%) federal funding for operation, maintenance and customer support; and fifty percent (50%) federal match for administrative activities and education and outreach activities. The Contractor must provide DHHS with technical support and documentation as needed to support the state's request for the enhanced federal funding.	Describe how Contractor will meet the requirements of future regulations and guidance from CMS for EVV systems and EVV use to ensure that Nebraska fully qualifies for and receives enhanced ninety percent (90%) federal funding for design, development and implementation; enhanced federal match of seventy-five percent (75%) federal funding for operation, maintenance and customer support; and fifty percent (50%) federal match for administrative activities and education and outreach activities. Bidder commits to provide DHHS with technical support and documentation as needed to support the state's request for the enhanced federal funding.	N/A	S	

Bidder's Response:

We will work cooperatively with the DHHS and the Independent Verification and Validation (IV & V) Contractor to achieve this certification. We continuously monitor updates to federal and state guidelines, policies and regulations and will enhance our EVV product to meet all future requirements. CMS has indicated consideration of a transition to outcomes-based EVV Certification, which leverages outcomes statements, evaluation criteria and key performance indicators, in which case, Tellus' powerful business intelligence functionality will be perfectly positioned to ensure Nebraska fully qualifies and receives available funding.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
291	CRT.13	Solution must adhere to the CMS MITA framework, version 3.0 and later, as related to EVV systems, EVV data, use of common data standards, and efficient and reliable data interchange with the existing Nebraska and new Medicaid Systems, which is moving toward a modular system based on Service Oriented Architecture design principles and the MITA framework. For more information on MITA, visit https://www.medicaid.gov/medicaid/data-and-systems/mita/index.html	Describe how solution adheres to the CMS MITA framework, version 3.0 and later, as related to EVV systems, EVV data, use of common data standards, and efficient and reliable data interchange with the existing Nebraska and new Medicaid Systems, which is moving toward a modular system based on Service Oriented Architecture design principles and the MITA framework.	N/A	S	

Bidder's Response:

Tellus is offering a configurable, COTS-based solution provided through a SaaS model. The use of COTS and SaaS components is consistent with MITA guidelines. The guidelines encourage states to move toward standardized, services-oriented COTS products and away from traditional, monolithic, and customized solutions. COTS and SaaS components deliver the modularity and flexibility that CMS and the DHHS are seeking in the EVV system.

To make sure we achieve certification objectives, we follow the CMS Medicaid Enterprise Certification Lifecycle (MECL) release and updated checklists, which include greater alignment to MITA, the Seven Conditions and Standards, and recent federal legislation. In 2017, CMS updated the MECL and Required Artifacts to include an Operational Milestone Review (R2) before the operations go-live of the system, in addition to the traditional Certification Final Review (R3) at the end of the system stabilization period.

We align our efforts to ensure that the delivered solution conforms to MITA 3.0 and later standards and with all of the required checklists items for modular certification, such as:

- Business Area Checklist
- General Checklists:
 - Information Architecture Checklist
 - Access and Delivery Checklist
 - Integration and Utility Checklist
 - Intermediary and Interface Checklist
 - Standards and Conditions Checklist

Tellus will assist the State in documenting "As-Is" and "To-Be" environments of business, information and technical capabilities demonstrating an increasing MITA maturity level, complying with MITA 3.0. Tellus will also strive to identify and recommend opportunities to leverage the reuse of healthcare technologies within the DHHS and among states

Our Service Architecture (SOA) includes a modular business intelligence rules engine that makes it easy to construct, modify and remove rules. Since business rules are not hard coded into the application, development resources are not required to change rules. We maintain an electronic Business Rules Catalog that can be accessed by the State of Nebraska. Standard rule definitions and rules are available; however, rules can be configured at the Payer, Program, Provider and participant levels to ensure quality patient care and program integrity. As rules are changed, user and training documentation is updated. If substantial changes are made users will be notified by an outreach campaign.

Rules execute real time in a runtime environment. Business rules serve a variety of purposes supporting quality of care, efficient operations, edit checks, program requirements, claims processing and fraud, waste and abuse detection. If any instances of fraud, waste or abuse are detected, the State will be notified of the instance and provided with supporting documentation within five (5) business days.

Tellus utilizes best practices for system deployment, documentation and data retention. As such, we comply with the following practices:

- Reference material and data archives
- Comprehensive audit logs
- Rollback capability to previous versions employing Software Control Management
- Entity search capability
- Synchronous geographically diverse data centers
- Network performance monitoring, management and intrusion detection tools

We routinely monitor federal, district and state guidelines and subject our tools and processes to internal and external assessments to ensure we are actively engaged in continuous process improvement activities and in compliance with industry requirements and standards.

Req.#	ID	Contractor / Solution/Requirement	Instructions to Bidder	CMS Checklist ID	Bidding Ability Code	Gap Description and Recommendation for Closure
292	CRT.14	Contractor must provide solution's technical, functional, and performance documents as required by the IV&V Contractor.	Describe process used to create, track and provide evidence for all documents required by IV&V Contractor.	N/A	S	

Bidder's Response:

Tellus will support and provide all technical, functional, and performance documents as required by the DHHS' Independent Verification and Validation (IV&V) Contractor's activities associated with the contract, including in preparation and completion of Medicaid Enterprise Certification Lifecycle (MECL) milestone reviews with the Centers for Medicare and Medicaid Services (CMS). We will participate as needed during the federal CMS offsite and onsite certification review activities, allow and facilitate visits to our operational facilities, and respond to any additional questions related to the certification reviews by CMS and the IV&V contractor.

Our project manager will collaborate with the IV&V contract project manager throughout the duration of the contract to respond to requests, concerns and issues and take appropriate action(s) as well as ensure all deliverables meet expectations and are delivered on time.

Tellus will map each certification task into our overall Project Plan and will submit to the State of Nebraska for approval.

Attachment

B



TELLUS

State of Florida Agency for Health Care Administration Electronic Visit Verification Program for Behavior Analysis Services

Disaster Recovery & Business Continuity Plan

August 29, 2019

(954) 719-0004 (Main)
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TELLUS^{eVV}

ELECTRONIC VISIT VERIFICATION

Version History

Change No.	Date	Version	Name	Description
1	6/12/2019	1.0	Lia Sweeney	
2	6/23/2019	2.0	Lia Sweeney	Incorporate requested changes
3	8/29/2019	2.1	Vicki Timiney	Updated in response to Hurricane Dorian

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1 INTRODUCTION

This Disaster Recovery Plan and Business Continuity Program (DRP) captures, in a single repository, all the information that describes Tellus' ability to withstand a disaster as well as the processes that must be followed to achieve disaster recovery.

1.1 DEFINITION OF A DISASTER

A disaster can be caused by man or nature and results in the Tellus Team not being able to perform all, or some, of their regular roles and responsibilities for some time period. Disasters are defined as:

- One or more vital systems are non-functional
- The building is not available for an extended time period, but all systems within it are functional
- The building is available, but all systems are non-functional
- The building and all systems are non-functional
- Majority of leadership team are unavailable to lead daily operations
- Majority of operational team are unavailable to effect daily operations
- Majority users cannot access the EVV System

The following events can result in a disaster, requiring this Disaster Recovery document to be activated:

MAN MADE	NATURAL DISASTER	SYSTEMS
<ul style="list-style-type: none">• Fire• Pandemic• Terrorist Attack• Theft• War	<ul style="list-style-type: none">• Earthquake• Flash flood• Hurricanes• Sinkhole• TORNADOS	<ul style="list-style-type: none">• Equipment Failure• Internet Outage• Power Outage• Telephone Outage• Water System Outage

1.2 Purpose

The purpose of this DRP document is twofold: first to capture all the information relevant to the enterprise's ability to withstand a disaster, and second to document the steps that the enterprise will follow if a disaster occurs to continue operating.

Note that in the event of a disaster the first priority is to prevent the loss of life. Before any secondary measures are undertaken, Tellus will ensure that all employees, and any other individuals on the organization's premises, are safe and secure.

After all individuals have been brought to safety, the next goal will be to enact the steps outlined in this DRP to bring all the organization's groups and departments back to business-as-usual as quickly as possible. This includes:

- Preventing the loss of the organization's resources such as hardware, data and physical IT assets
- Minimizing information technology downtime
- Minimizing downtime related to Customer Service support
- Keeping the business running in the event of a disaster

This DRP document will also detail how this document is to be maintained and tested.

1.3 Scope

The DRP takes the following areas into consideration:

SYSTEMS	CUSTOMER SUPPORT
<ul style="list-style-type: none">• <i>Network Infrastructure</i>• <i>Servers Infrastructure</i>• <i>Data Storage and Backup Systems</i>• <i>Data Output Devices</i>• <i>End-user Computers</i>• <i>Organizational Software Systems</i>• <i>Database Systems</i>• <i>IT Documentation</i>	<ul style="list-style-type: none">• <i>Telephony System</i>• <i>Issue Tracking System</i>• <i>Email Communications</i>• <i>Operations Documentation</i>

2 DISASTER RECOVERY TEAMS & RESPONSIBILITIES

In the event of a disaster, different groups will be required to assist the Information Technology department in their effort to restore normal functionality to the employees of 4Tellus, LLC. The different groups and their responsibilities are as follows:

- *Disaster Recovery Lead(s)*
- *Disaster Management Team*
- *Facilities Team*
- *Network Team*
- *Server Team*
- *Applications Team*
- *Operations Team*
- *Management Team*
- *Communications Team*
- *Finance Team*

The lists of roles and responsibilities in this section have been created to reflect the likely tasks that team members will have to perform. Disaster Recovery Team members will be responsible for performing all the tasks below. In some disaster situations, Disaster Recovery Team members will be called upon to perform tasks not described in this section.

2.1 Disaster Recovery Lead

The Disaster Recovery Lead is responsible for making all decisions related to the Disaster Recovery efforts. This person's primary role will be to guide the disaster recovery process and all other individuals involved in the disaster recovery process will report to this person in the event that a disaster occurs at 4Tellus, LLC, regardless of their department and existing managers. All efforts will be made to ensure that this person be separate from the rest of the disaster management teams to keep his/her decisions unbiased; the Disaster Recovery Lead will not be a member of other Disaster Recovery groups in 4Tellus, LLC.

2.1.1 Role and Responsibilities

- Make the determination that a disaster has occurred and trigger the DRP and related processes
- Initiate the DR Call Tree
- Be the single point of contact for and oversee all the DR Teams
- Organize and chair regular meetings of the DR Team leads throughout the disaster
- Present to the Management Team on the state of the disaster and the decisions that need to be made
- Organize, supervise and manage all DRP test and author all DRP updates

2.1.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
<i>Brad Levine</i>	<i>Primary Disaster Lead</i>	██████████	██████████	██████████
<i>James Orms</i>	<i>Secondary Disaster Lead</i>	██████████	██████████	██████████

2.2 Disaster Management Team

The Disaster Management Team that will oversee the entire disaster recovery process. They will be the first team that will need to take action in the event of a disaster. This team will evaluate the disaster and will determine what steps need to be taken to get the organization back to business as usual.

2.2.1 Role & Responsibilities

- Set the DRP into motion after the Disaster Recovery Lead has declared a disaster
- Determine the magnitude and class of the disaster
- Determine what systems and processes have been affected by the disaster
- Communicate the disaster to the other disaster recovery teams
- Determine what first steps need to be taken by the disaster recovery teams
- Keep the disaster recovery teams on track with pre-determined expectations and goals
- Keep a record of money spent during the disaster recovery process
- Ensure that all decisions made abide by the DRP and policies set by 4Tellus, LLC
- Get the secondary site ready to restore business operations
- Ensure that the secondary site is fully functional and secure
- Create a detailed report of all the steps undertaken in the disaster recovery process
- Notify the relevant parties once the disaster is over and normal business functionality has been restored
- After Tellus is back to business as usual, this team will be required to summarize any and all costs and will provide a report to the Disaster Recovery Lead summarizing their activities during the disaster

2.2.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
<i>Brad Levine</i>	<i>CEO</i>	██████████	██████████	██████████
<i>James Orms</i>	<i>SVP Production</i>	██████████	██████████	██████████

2.3 Facilities Team

The Facilities Team will be responsible for all issues related to the physical facilities that house IT systems. They are the team that will be responsible for ensuring that the standby facilities are maintained appropriately and for assessing the damage to and overseeing the repairs to the primary location in the event of the primary location's destruction or damage.

2.3.1 Role & Responsibilities

- Ensure that the standby facility is maintained in working order
- Ensure that transportation is provided for all employees working out of the standby facility
- Ensure that hotels or other sleeping arrangements are available for all employees working out of the standby facility
- Ensure that sufficient food, drink, and other supplies are provided for all employees working out of the standby facility
- Assess, or participate in the assessment of, any physical damage to the primary facility
- Ensure that measures are taken to prevent further damage to the primary facility
- Work with insurance company in the event of damage, destruction or losses to any assets owned by 4Tellus, LLC
- Ensure that appropriate resources are provisioned to rebuild or repair the main facilities in the event that they are destroyed or damaged
- After Tellus is back to business as usual, this team will be required to summarize any and all costs and will provide a report to the Disaster Recovery Lead summarizing their activities during the disaster

2.3.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
Alexis Amendola	Director, Talent Acquisition	[REDACTED]	[REDACTED]	[REDACTED]
Michelle McCandless	SVP, Operations	[REDACTED]	[REDACTED]	[REDACTED]

2.4 Network Team

The Network Team will be responsible for assessing damage specific to any network infrastructure and for provisioning data and voice network connectivity including WAN, LAN, and any telephony connections internally within the enterprise as well as telephony and data connections with the outside world. They will be primarily responsible for providing baseline network functionality and may assist other IT DR Teams as required.

2.4.1 Role & Responsibilities

- In the event of a disaster that does not require migration to standby facilities, the team will determine which network services are not functioning at the primary facility
- If multiple network services are impacted, the team will prioritize the recovery of services in the manner and order that has the least business impact.
- If network services are provided by third parties, the team will communicate and coordinate with these third parties to ensure recovery of connectivity.
- In the event of a disaster that does require migration to standby facilities the team will ensure that all network services are brought online at the secondary facility
- Once critical systems have been provided with connectivity, employees will be provided with connectivity in the following order:
 - All members of the DR Teams
 - All C-level and Executive Staff
 - All IT employees
 - All remaining employees
- Install and implement any tools, hardware, software and systems required in the standby facility
- Install and implement any tools, hardware, software and systems required in the primary facility
- After Tellus is back to business as usual, this team will summarize any and all costs and will provide a report to the Disaster Recovery Lead summarizing their activities during the disaster

2.4.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
James Orms	SVP Production	[REDACTED]	[REDACTED]	[REDACTED]
Chris Pernicano	CTO	[REDACTED]	[REDACTED]	[REDACTED]

2.5 Server Team

The Server Team will be responsible for providing the physical server infrastructure required for the enterprise to run its IT operations and applications in the event of and during a disaster. They will be primarily responsible for providing baseline server functionality and may assist other IT DR Teams as required.

2.5.1 Role & Responsibilities

- In the event of a disaster that does not require migration to standby facilities, the team will determine which servers are not functioning at the primary facility
- If multiple servers are impacted, the team will prioritize the recovery of servers in the manner and order that has the least business impact. Recovery will include the following tasks:
 - Assess the damage to any servers
 - Restart and refresh servers if necessary
- Ensure that secondary servers located in standby facilities are kept up-to-date with system patches
- Ensure that secondary servers located in standby facilities are kept up-to-date with application patches
- Ensure that secondary servers located in standby facilities are kept up-to-date with data copies
- Ensure that the secondary servers located in the standby facility are backed up appropriately
- Ensure that all the servers in the standby facility abide by Tellus server policy
- Install and implement any tools, hardware, and systems required in the standby facility
- Install and implement any tools, hardware, and systems required in the primary facility
- After Tellus is back to business as usual, this team will summarize any and all costs and will provide a report to the Disaster Recovery Lead summarizing their activities during the disaster

2.5.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
<i>James Orms</i>	<i>SVP, Production</i>	██████████	██████████	██████████
<i>Chris Pernicano</i>	<i>CTO</i>	██████████	██████████	██████████

2.6 Applications Team

The Applications Team will be responsible for ensuring that all enterprise applications operates as required to meet business objectives in the event of and during a disaster. They will be primarily responsible for ensuring and validating appropriate application performance and may assist other IT DR Teams as required.

2.6.1 Role & Responsibilities

- In the event of a disaster that does not require migration to standby facilities, the team will determine which applications are not functioning at the primary facility
- If multiple applications are impacted, the team will prioritize the recovery of applications in the manner and order that has the least business impact. Recovery will include the following tasks:
 - Assess the impact to application processes
 - Restart applications as required
 - Patch, recode or rewrite applications as required
- Ensure that secondary servers located in standby facilities are kept up-to-date with application patches
- Ensure that secondary servers located in standby facilities are kept up-to-date with data copies
- Install and implement any tools, software and patches required in the standby facility
- Install and implement any tools, software and patches required in the primary facility
- After Tellus is back to business as usual, this team will summarize any and all costs and will provide a report to the Disaster Recovery Lead summarizing their activities during the disaster

2.6.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
Chris Pernicano	CTO	[REDACTED]	[REDACTED]	[REDACTED]
James Orms	SVP, Production	[REDACTED]	[REDACTED]	[REDACTED]

2.7 Operations Team

This team's primary goal will be to provide employees with the tools they need to perform their roles as quickly and efficiently as possible. They will need to provision all employees in the standby facility and those working from home with the tools that their specific role requires.

2.7.1 Role & Responsibilities

- Maintain lists of all essential supplies that will be required in the event of a disaster
- Ensure that these supplies are provisioned appropriately in the event of a disaster
- Ensure sufficient spare computers and laptops are on hand so that work is not significantly disrupted in a disaster
- Ensure that spare computers and laptops have the required software and patches
- Ensure sufficient computer and laptop-related supplies such as cables, wireless cards, laptop locks, mice, printers and docking stations are on hand so that work is not significantly disrupted in a disaster
- Ensure that all employees that require access to a computer/laptop and other related supplies are provisioned in an appropriate timeframe
- If insufficient computers/laptops or related supplies are not available, the team will prioritize distribution in the manner and order that has the least business impact
- This team will be required to maintain a log of where all the supplies and equipment were used
- After Tellus is back to business as usual, this team will be required to summarize any and all costs and will provide a report to the Disaster Recovery Lead summarizing their activities during the disaster

2.7.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
<i>Michelle McCandless</i>	<i>SVP Operations</i>	██████████	██████████	██████████
<i>Chris Pernicano</i>	<i>CTO</i>	██████████	██████████	██████████

2.8 Senior Management Team

The Senior Management Team will make any business decisions that are out of scope for the Disaster Recovery Lead. Decisions such as constructing a new data center, relocating the primary site etc. should be made by the Senior Management Team. The Disaster Recovery Lead will ultimately report to this team.

2.8.1 Role & Responsibilities

- Ensure that the Disaster Recovery Team Lead is held accountable for his/her role
- Assist the Disaster Recovery Team Lead in his/her role as required
- Make decisions that will impact the company. This can include decisions concerning:
 - Rebuilding of the primary facilities
 - Rebuilding of data centers
 - Significant hardware and software investments and upgrades
 - Other financial and business decisions

2.8.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
<i>Brad Levine</i>	<i>CEO</i>	██████████	██████████	██████████
<i>Lia Sweeney</i>	<i>CTO</i>	██████████	██████████	██████████

2.9 Communication Team

This will be the team responsible for all communication during a disaster. Specifically, they will communicate with employees, clients, vendors and suppliers, banks, and even the media if required.

2.9.1 Role & Responsibilities

- Communicate the occurrence of a disaster and the impact of that disaster to all employees
- Communicate the occurrence of a disaster and the impact of that disaster to authorities, as required
- Communicate the occurrence of a disaster and the impact of that disaster to all partners
- Communicate the occurrence of a disaster and the impact of that disaster to all clients
- Communicate the occurrence of a disaster and the impact of that disaster to all vendors
- Communicate the occurrence of a disaster and the impact of that disaster to media contacts, as required
- After Tellus is back to business as usual, this team will be required to summarize any and all costs and will provide a report to the Disaster Recovery Lead summarizing their activities during the disaster

2.9.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
<i>Vicki Timiney</i>	<i>VP Marketing/Communications</i>	██████████	██████████	██████████
<i>Michelle McCandless</i>	<i>SVP Operations</i>	██████████	██████████	██████████

2.10 Finance Team

This team will be responsible for ensuring that finances are dealt with in an appropriate and timely manner in the event of a disaster. The finance team will ensure that there is money available for necessary expenses that may result from a disaster as well as expenses from normal day-to-day business functions.

2.10.1 Role & Responsibilities

- Ensure there is sufficient cash on-hand or accessible to deal with small-scale expenses caused by the disaster. These can include paying for accommodations and food for DR team members, incremental bills, etc.
- Ensure there is sufficient credit available or accessible to deal with large-scale expenses caused by the disaster. These can include paying for new equipment, repairs for primary facilities, etc.
- Review and approve Disaster Teams' finances and spending
- Ensure that payroll occurs and that employees are paid as normal, where possible
- Communicate with creditor to arrange suspension of extensions to scheduled payments, as required
- Communicate with banking partners to obtain any materials such as checks, bank books etc. that may need to be replaced as a result of the disaster

2.10.2 Contact Information

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
<i>Lia Sweeney</i>	<i>CFO, Chief Strategy Officer</i>	██████████	██████████	██████████
<i>Brad Levine</i>	<i>CEO</i>	██████████	██████████	██████████

2.11 Other Organization Specific Teams

Elective

Specify additional teams as required in your organization.

Define the team's goals here.

2.11.1 Role & Responsibilities

- Marketing – Internal and Client Communications
- Customer Service – Continuity of Customer Support

2.11.2 Contact Information

Add or delete rows to reflect the size of the Other Organization DR Teams in your organization.

Name	Role/Title	Work Phone Number	Home Phone Number	Mobile Phone Number
Michelle McCandless	SVP Operations	[REDACTED]	[REDACTED]	[REDACTED]
Vicki Timiney	VP Marketing/Communications	[REDACTED]	[REDACTED]	[REDACTED]

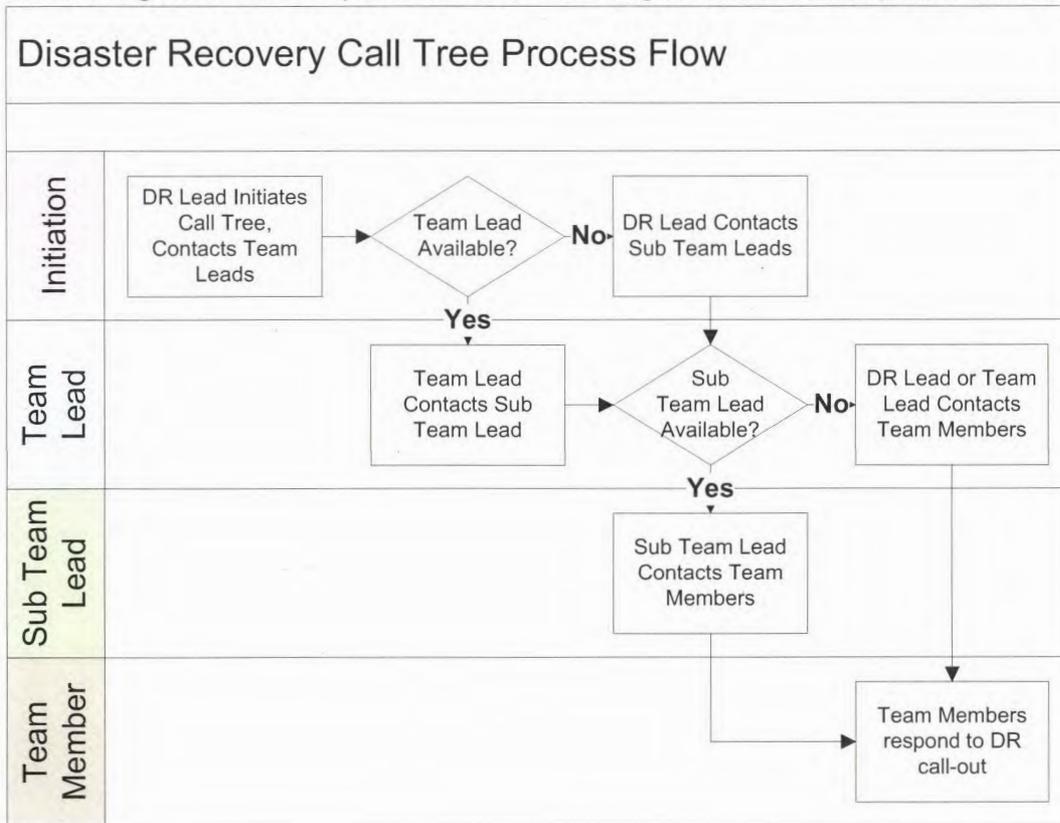
3 DISASTER RECOVERY CALL TREE

In a disaster recovery or business continuity emergency, time is of the essence so Tellus will make use of a Call Tree to ensure that appropriate individuals are contacted in a timely manner.

- The Disaster Recovery Team Lead calls all Level 1 Members (Blue cells)
- Level 1 members call all Level 2 team members over whom they are responsible (Green cells)
- Level 1 members call all Level 3 team members over whom they are directly responsible (Beige cells)
- Level 2 Members call all Level 3 team members over whom they are responsible (Beige cells)
- In the event a team member is unavailable, the initial caller assumes responsibility for subsequent calls (i.e. if a Level 2 team member is inaccessible, the Level 1 team member directly contacts Level 3 team members).

Contact	Office	Mobile	Home
DR Lead <i>Brad Levine</i>	██████████	██████████	██████████
DR Management Team Lead – Chris Pernicano	██████████	██████████	██████████
Facilities Team & Network Team - James Orms	██████████	██████████	██████████
Operations Team – Michelle McCandless	██████████	██████████	██████████
Communications Team Lead – Vicki Timiney	██████████	██████████	██████████
Finance Team Lead – Lia Sweeney	██████████	██████████	██████████

The following Disaster Recovery Call Tree Process Flow diagram clarifies the call process in the event of an emergency:



4 RECOVERY FACILITIES

In order to ensure that Tellus can withstand a significant outage caused by a disaster, it has provisioned separate dedicated standby facilities. This section of this document describes those facilities and includes operational information should those facilities have to be used.

4.1 Description of Recovery Facilities

Since Tellus EVV operates on Amazon Web Services Government cloud, facilities planning for data centers is managed by AWS. Tellus applications are backed up in different geographic zones with automatic failover to minimize the possibility of system downtime and loss of data.

In the event of an emergency with no warning, Tellus will initially go into a virtual mode and begin implementing the DR plan. When a disaster is declared, all employees will work from home. If employees are precluded from working locally due to infrastructure damage, a core group of employees will be relocated to Big Sky, Montana, where Tellus has access to multiple properties that can accommodate more than forty people for an extended period of time.

In the event of a known or potential impending disaster, Tellus will relocate core staff to Big Sky, Montana, where Tellus has access to multiple properties that can accommodate more than forty people for an extended period of time. If additional space is required, Tellus will procure hotel space in either Florida or Bozeman, Montana.

4.2 Operational Considerations

If employees are required to stay at the Standby Facility for extended periods of time and require hotel accommodations, they will be provided by 4Tellus, LLC. The Facilities Team will be responsible for determining which employees require hotel accommodations and ensuring sufficient rooms are made available.

If employees are required to stay at the Standby Facility for extended periods of time and require food, it will be provided by 4Tellus, LLC. The Facilities Team will be responsible for determining which employees require food and ensuring sufficient food is made available via groceries, restaurants or caterers as appropriate.

While in the Standby Facility, employees must work under appropriate sanitary and safe conditions. The Facilities team will be responsible for ensuring that this facility is kept in proper working order.

4.3 Data and Backups

Mandatory

This section explains where all the organization's data resides as well as where it is backed up. Use this information to locate and restore data in the event of a disaster.

4.3.1 Data in Order of Criticality

Please list all of the data in your organization in order of their criticality. Add or delete rows as needed to the table below.

Rank	Data	Data Type	Back-up Frequency	Backup Location(s)
1	All business data, including eVV operational data and business partner data.	Confidential PHI	Daily, with 30-day retention and Yearly, Monthly, Weekly, Daily GFS backup retention.	AWS S3

5 COMMUNICATING DURING A DISASTER

In the event of a disaster, Tellus will need to communicate with various parties to inform them of the effects on the business, surrounding areas and timelines. The Communications Team will be responsible for contacting all Tellus stakeholders.

5.1 Communicating with the Authorities

The Communications Team's first priority will be to ensure that the appropriate authorities have been notified of the disaster, providing the following information:

- The location of the disaster
- The nature of the disaster
- The magnitude of the disaster
- The impact of the disaster
- Assistance required in overcoming the disaster
- Anticipated timelines

5.1.1 Authorities Contacts

Add or delete rows to reflect the contacts your enterprise must contact.

AUTHORITIES	POINT OF CONTACT	PHONE NUMBER	E-MAIL
<i>Police Department</i>		<i>(954) 480-4300</i>	
<i>Fire Department</i>		<i>(954) 571-7570</i>	
<i>FEMA</i>		<i>(800) 621-3362</i>	

5.2 Communicating with Employees

The Communications Team's second priority will be to ensure that the entire company has been notified of the disaster. The best and/or most practical means of contacting all the employees will be used with preference on the following methods (in order):

- E-mail (via corporate e-mail where that system still functions)
- E-mail (via non-corporate or personal e-mail)
- Telephone to employee mobile phone number
- Telephone to employee home phone number

The employees will need to be informed of the following:

- Whether it is safe for them to come into the office
- Where they should go if they cannot come into the office
- Which services are still available to them
- Work expectations of them during the disaster

5.2.1 Employee Contacts

A current list of employees with personal email address, primary phone number and secondary phone number will be downloaded from Tellus' HR system at least 48 hours in advance of any known risk. In other cases, a hard copy monthly report will be generated and stored in a physical, locked file.

5.3 Communicating with Clients

After all of the organization’s employees have been informed of the disaster, the Communications Team will be responsible for informing clients of the disaster and the impact that it will have on the following:

- Anticipated impact on service offerings
- Anticipated impact on delivery schedules
- Anticipated impact on security of client information
- Anticipated timelines

Crucial clients will be made aware of the disaster situation first. Crucial clients will be emailed first then called after to ensure that the message has been delivered. All other clients will be contacted only after all crucial clients have been contacted.

5.3.1 Crucial Clients

COMPANY NAME	POINT OF CONTACT	PHONE NUMBER	E-MAIL
AHCA, State of Florida	[REDACTED]	[REDACTED]	[REDACTED]
AHCA, State of Florida	[REDACTED]	[REDACTED]	[REDACTED]
AHCA, State of Florida	[REDACTED]	[REDACTED]	[REDACTED]

5.3.2 Secondary Clients

COMPANY NAME	POINT OF CONTACT	PHONE NUMBER	E-MAIL
eQ Health Solutions	[REDACTED]	[REDACTED]	[REDACTED]
eQ Health Solutions	[REDACTED]	[REDACTED]	[REDACTED]

5.3.3 Tertiary Clients

HOME HEALTH SERVICE PROVIDERS	POINT OF CONTACT	PHONE NUMBER	E-MAIL
The full list of Home Health Service Providers that need to be contacted during a disaster, or lack of service, will change as providers are added to and removed from the Tellus EVV application. Tellus will notify all providers by email and restore Customer Service activities as quickly as possible.			

6 DEALING WITH A DISASTER

If a disaster occurs, the first priority is to ensure that all employees are safe and accounted for. After this, steps must be taken to mitigate any further damage to the facility and to reduce the impact of the disaster to the organization.

Regardless of the category that the disaster falls into, dealing with a disaster can be broken down into the following steps:

- 1) Disaster identification and declaration
- 2) DRP activation
- 3) Communicating the disaster
- 4) Assessment of current and prevention of further damage
- 5) Standby facility activation
- 6) Establish IT operations
- 7) Repair and rebuilding of primary facility

6.1 Disaster Identification and Declaration

Since it is almost impossible to predict when and how a disaster might occur, Tellus must be prepared to find out about disasters from a variety of possible avenues. These can include:

- First-hand observation
- System Alarms and Network Monitors
- Environmental and Security Alarms in the Primary Facility
- Security staff
- Facilities staff
- End users
- 3rd-Party Vendors
- Media reports

Once the Disaster Recovery Lead has determined that a disaster has occurred, they must officially declare that the company is in an official state of disaster. It is during this phase that the Disaster Recovery Lead must ensure that anyone who was in the primary facility at the time of the disaster has been accounted for and evacuated to safety according to the company's Evacuation Policy.

While employees are being brought to safety, the Disaster Recovery Lead will instruct the Communications Team to begin contacting the Authorities and all employees not at the impacted facility that a disaster has occurred.

6.2 DRP Activation

Once the Disaster Recovery Lead has formally declared that a disaster has occurred, they will initiate the activation of the DRP by triggering the Disaster Recovery Call Tree. The following information will be provided in the calls that the Disaster Recovery Lead makes and should be passed during subsequent calls:

- That a disaster has occurred
- The nature of the disaster (if known)
- The initial estimation of the magnitude of the disaster (if known)
- The initial estimation of the impact of the disaster (if known)
- The initial estimation of the expected duration of the disaster (if known)
- Actions that have been taken to this point
- Actions that are to be taken prior to the meeting of Disaster Recovery Team Leads
- Scheduled meeting place for the meeting of Disaster Recovery Team Leads
- Scheduled meeting time for the meeting of Disaster Recovery Team Leads
- Any other pertinent information

If the Disaster Recovery Lead is unavailable to trigger the Disaster Recovery Call Tree, that responsibility shall fall to the Disaster Management Team Lead

6.3 Communicating the Disaster

Refer to the “Communicating During a Disaster” section of this document.

6.4 Assessment of Current and Prevention of Further Damage

Before any employees can enter the primary facility after a disaster, appropriate authorities must first ensure that the premises are safe to enter.

The first team that will be allowed to examine the primary facilities once it has been deemed safe to do so will be the Facilities Team. Once the Facilities Team has completed an examination of the building and submitted its report to the Disaster Recovery Lead, the Disaster Management, Networks, Servers, and Operations Teams will be allowed to examine the building. All teams will be required to create an initial report on the damage and provide this to the Disaster Recovery Lead within 24 hours of the initial disaster.

During each team’s review of their relevant areas, they must assess any areas where further damage can be prevented and take the necessary means to protect Tellus assets. Any necessary repairs or preventative measures must be taken to protect the facilities; these costs must first be approved by the Disaster Recovery Team Lead.

6.5 Standby Facility Activation

The Standby Facility will be formally activated when the Disaster Recovery Lead determines that the nature of the disaster is such that the primary facility is no longer sufficiently functional or operational to sustain normal business operations.

Once this determination has been made, the Facilities Team will be commissioned to bring the Standby Facility to functional status after which the Disaster Recovery Lead will convene a meeting of the various Disaster Recovery Team Leads at the Standby Facility to assess next steps. These next steps will include:

- 1) Determination of impacted systems
- 2) Criticality ranking of impacted systems
- 3) Recovery measures required for high criticality systems
- 4) Assignment of responsibilities for high criticality systems
- 5) Schedule for recovery of high criticality systems
- 6) Recovery measures required for medium criticality systems
- 7) Assignment of responsibilities for medium criticality systems
- 8) Schedule for recovery of medium criticality systems
- 9) Recovery measures required for low criticality systems
- 10) Assignment of responsibilities for recovery of low criticality systems
- 11) Schedule for recovery of low criticality systems
- 12) Determination of facilities tasks outstanding/required at Standby Facility
- 13) Determination of operations tasks outstanding/required at Standby Facility
- 14) Determination of communications tasks outstanding/required at Standby Facility
- 15) Determination of facilities tasks outstanding/required at Primary Facility
- 16) Determination of other tasks outstanding/required at Primary Facility
- 17) Determination of further actions to be taken

During Standby Facility activation, the Facilities, Networks, Servers, Applications, and Operations teams will need to ensure that their responsibilities, as described in the “Disaster Recovery Teams and Responsibilities” section of this document, are carried out quickly and efficiently so as not to negatively impact the other teams.

6.6 Restoring IT Functionality

Refer to the “Restoring IT Functionality” section later in this document.

6.7 Repair & Rebuilding of Primary Facility

Before the enterprise can return operations to Primary Facilities, those facilities must be returned to an operable condition. The tasks required to achieve that will be variable depending on the magnitude and severity of the damage. Specific tasks will be determined and assigned only after the damage to Primary Facilities has been assessed.

7 RESTORING IT FUNCTIONALITY

Should a disaster actually occur and Tellus needs to exercise this plan, this section will be referred to frequently as it will contain all of the information that describes the manner in which Tellus information system will be recovered.

This section will contain all of the information needed for the organization to get back to its regular functionality after a disaster has occurred. It is important to include all Standard Operating Procedures documents, run-books, network diagrams, software format information etc. in this section.

7.1 Current System Architecture

All Tellus information systems are cloud-based. Returning to normal operations requires our Network Architect to confirm all services running Tellus technology are operational and functioning. All applications can be accessed from anywhere with Wi-Fi or cellular service using commercially available personal computers and web browsers.

7.2 IT Systems

Please list all of the IT Systems in your organization in order of their criticality. Next, list each system's components that will need to be brought back online in the event of a disaster. Add or delete rows as needed to the table below.

RANK	IT SYSTEM	SYSTEM COMPONENTS (IN ORDER OF IMPORTANCE)
1	Tellus eVV	Amazon Government Cloud Services
2	Tellus Internal Email	Microsoft Office 365
3	Tellus Customer Support Telephony Software	Ring Central
4	Tellus Telecommunications	Broadvoice VOIP
5	Tellus Customer Support Ticketing System	Zoho Desk
6	JIRA	Network and Technology bug fix ticketing system
7	Tellus Customer Email Campaigns	Zoho Campaigns
8		
9		

8 TESTING & MAINTENANCE

While efforts will be made initially to construct this DRP in as complete and accurate a manner as possible, it is essentially impossible to address all possible problems at any one time. Additionally, over time the Disaster Recovery needs of the enterprise will change. As a result of these two factors, this plan will need to be tested on a periodic basis to discover errors and omissions and will need to be maintained to address them.

8.1 Maintenance

The DRP will be updated annually, or any time a risk is identified or a major system update or upgrade is performed, whichever is more often. The Disaster Recovery Lead will be responsible for updating the entire document, and so is permitted to request information and updates from other employees and departments within the organization to complete this task.

Maintenance of the plan will include (but is not limited to) the following:

- 1) Ensuring that call trees are up to date
- 2) Ensuring that all team lists are up to date
- 3) Reviewing the plan to ensure that all the instructions are still relevant to the organization
- 4) Making any major changes and revisions in the plan to reflect organizational shifts, changes and goals
- 5) Ensuring that the plan meets any requirements specified in new laws
- 6) Other organizational specific maintenance goals

During the Maintenance periods, any changes to the Disaster Recovery Teams must be accounted for. If any member of a Disaster Recovery Team no longer works with the company, it is the responsibility of the Disaster Recovery Lead to appoint a new team member.

8.2 Testing

Tellus is committed to ensuring that this DRP is functional. The DRP should be tested annually (at the start of hurricane season) to ensure that it is still effective. Testing the plan will be carried out as follows:

PREFERRED METHOD	METHOD	DESCRIPTION
	Walkthroughs	Team members verbally go through the specific steps as documented in the plan to confirm effectiveness, identify gaps, bottlenecks or other weaknesses. This test provides the opportunity to review a plan with a larger subset of people, allowing the DRP project manager to draw upon a correspondingly increased pool of knowledge and experiences. Staff should be familiar with procedures, equipment, and offsite facilities (if required).
	Simulations	A disaster is simulated so normal operations will not be interrupted. Hardware, software, personnel, communications, procedures, supplies and forms, documentation, transportation, utilities, and alternate site processing should be thoroughly tested in a simulation test. However, validated checklists can provide a reasonable level of assurance for many of these scenarios. Analyze the output of the previous tests carefully before the proposed simulation to ensure the lessons learned during the previous phases of the cycle have been applied.
	Parallel Testing	A parallel test can be performed in conjunction with the checklist test or simulation test. Under this scenario, historical transactions, such as the prior business day's transactions

		are processed against preceding day's backup files at the contingency processing site or hot site. All reports produced at the alternate site for the current business date should agree with those reports produced at the alternate processing site.
	Full-Interruption Testing	A full-interruption test activates the total DRP. The test is likely to be costly and could disrupt normal operations, and therefore should be approached with caution. The importance of due diligence with respect to previous DRP phases cannot be overstated.

Any gaps in the DRP that are discovered during the testing phase will be addressed by the Disaster Recovery Lead as well as any resources that they will require.

8.3 Call Tree Testing

Call Trees are a major part of the DRP and Tellus requires that it is tested annually (at the start of hurricane season) to ensure that it is functional. Tests will be performed as follows:

- 1) Disaster Recovery Lead initiates call tree and gives the first round of employees called a code word.
- 2) The code word is passed from one caller to the next.
- 3) The next work day all Disaster Recovery Team members are asked for the code word.
- 4) Any issues with the call tree, contact information, etc., will then be addressed accordingly.

CODE WORD: EVV HAS FALLEN

1 APPENDIX

1.1 Definition of Terms

ACRONYM	DESCRIPTION
AHCA	Agency for Health Care Administration
API	Application Program Interface
AWS	Amazon Web Services
BA	Behavior Analysis
BAA	Business Associate Agreement
CRM	Customer Relationship Management System
CSR	Customer Service Representative
DRP	Disaster Recovery Plan
EC2	Elastic Compute Cloud
EVV	Electronic Visit Verification
FFS	Fee-for-Service
FIPS	Federal Information and Processing Standards
FMMIS	Florida Medicaid Management Information System
HH	Home Health Visits
HIPAA	Health Insurance Portability and Accountability Act (1996)
HITECH	Health Information Technology for Economic and Clinical Health Act (2009)
HR	Human Resources
IAM	Identity and Access Management
IQC	Internal Quality Control
IQP	Internal Quality Plan
ISM	Information Security Manager (Agency)
ISO	International Organization for Standardization
IVR	Integrated Voice Response
JIRA	Vendor Issue Tracking System for Software Code Management
MIS	Management Information System
MVC	Model View Controller
NIEM	National Information Exchange Model
NIST	National Institute for Standards and Technology
OWASP	Open Web Application Security Project
PA	Prior Authorization
PCS	Personal Care Services
PDN	Private Duty Nursing
PHI	Protected Health Information
PII	Personally Identifiable Information
PMO	Project Management Office
QA	Quality Assurance
QIO	Quality Improvement Organization
QMS	Quality Management System
RACI	Responsible, Accountable, Consult, Inform Matrix
Ringcentral	Cloud-Based Call Center Software Application

ACRONYM	DESCRIPTION
RDS	Relational Database Service
RSS	Rich Site Summary
SFTP	Secure File Transfer Protocol
SQL	Structured Query Language
SRC	Submission Requirement Component
SSL	Secure Sockets Layer
SSRS	SQL Server Report Services
TBD	To Be Determined
TLS	Transport Layer Security
U.S.	United States
U.S.C.	United States Code
VPC	Virtual Private Cloud
W3C	World Wide Web Consortium
WIP	Work in Progress
Zoho	Business Management Software, and Customer Relationship Management System

1.2 Related Documentation

Provide complete citation to all documents and meetings referenced or used in the preparation of this document.

DOCUMENT NAME	FILE TITLE
BCP-0000-07	Business Continuity Plan
BCP-0000-03	Continuity Planning
POL-0EXE-03	Risk Management Program Overview
BCP-0000-04	DR Test Script Groups

Attachment
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ID	Task Name	Duration	Start	Finish	3rd Quarter		4th Quarter		1st Quarter		2nd Quarter		3rd Quarter		4th Quarter					
					Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct
1	Anthem Project Plan	286 days	Wed 8/1/18	Wed 9/4/19																
2	Project Execution Phase	249 days	Wed 8/1/18	Mon 7/15/19																
3	Development	169 days	Wed 8/1/18	Mon 3/25/19																
4	System Configurations	110 days	Thu 8/2/18	Wed 1/2/19																
5	Anthem - SFTP Setup	0 days	Wed 1/2/19	Wed 1/2/19																
6	Tellus - File Channel Setup	62 days	Wed 8/1/18	Thu 10/25/18																
7	Integration Tasks	98 days	Thu 11/8/18	Mon 3/25/19																
8	Prior Authorization Message/File Inbound to Tellus - Sample File via SFTP	47 days	Fri 1/18/19	Mon 3/25/19																
9	Recipient Message/File Inbound to Tellus - Sample File via SFTP	98 days	Thu 11/8/18	Mon 3/25/19																
10	Provider Message/File Inbound to Tellus Sample File via SFTP	98 days	Thu 11/8/18	Mon 3/25/19																
11	Milestone: Full Integration	0 days	Mon 3/25/19	Mon 3/25/19																
12	Testing	46 days	Fri 3/8/19	Fri 5/10/19																
13	Deliver Test Plan to Anthem	1 day	Fri 3/8/19	Fri 3/8/19																
14	QA Testing	10 days	Mon 4/15/19	Fri 4/26/19																
15	QA Defect Remediation	9 days	Mon 4/1/19	Thu 4/11/19																
16	UAT Testing	10 days	Mon 4/29/19	Fri 5/10/19																
17	837P File Outbound from Tellus via SFTP	3 days	Mon 4/15/19	Wed 4/17/19																
18	Sample 999 Response File to Tellus	2 days	Thu 4/18/19	Fri 4/19/19																
19	Sample 277 Response File to Tellus	2 days	Thu 4/18/19	Fri 4/19/19																

Project: Simply Implementation
Date: Fri 4/19/19

Task		Inactive Summary		External Tasks	
Split		Manual Task		External Milestone	
Milestone		Duration-only		Deadline	
Summary		Manual Summary Rollup		Progress	
Project Summary		Manual Summary		Manual Progress	
Inactive Task		Start-only			
Inactive Milestone		Finish-only			

ID	Task Name	Duration	Start	Finish	3rd Quarter		4th Quarter		1st Quarter		2nd Quarter		3rd Quarter		4th Quarter			
					Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
20	835 File Inbound to Tellus via SFTP	2 days	Thu 4/18/19	Fri 4/19/19														
21	UAT Defect Remediation	9 days	Mon 4/15/19	Thu 4/25/19														
22	<i>Milestone: UAT Sign-off</i>	<i>0 days</i>	<i>Fri 4/26/19</i>	<i>Fri 4/26/19</i>														
23	Outreach Campaign	120 days	Tue 12/4/18	Mon 5/20/19														
24	Announcement Letter and FAQ Approval	8 days	Tue 12/4/18	Thu 12/13/18														
25	Distribution of Announcement Letter and FAQ Communication	1 day	Mon 1/7/19	Mon 1/7/19														
26	Update and Approval Process for all Subsequent Communications	31 days	Tue 12/4/18	Tue 1/15/19														
27	<i>Milestone: Distribution of Announcement Letter</i>	<i>0 days</i>	<i>Mon 1/7/19</i>	<i>Mon 1/7/19</i>														
28	<i>Milestone - All Subsequent Communications Approved</i>	<i>0 days</i>	<i>Tue 1/15/19</i>	<i>Tue 1/15/19</i>														
29	Pilot Communications	16 days	Mon 3/25/19	Mon 4/15/19														
30	What to Expect Communication	1 day	Mon 3/25/19	Mon 3/25/19														
31	Are You Ready Reminder Communication	1 day	Mon 4/8/19	Mon 4/8/19														
32	Training Is Open Communication	1 day	Mon 4/15/19	Mon 4/15/19														
33	Region 10 Communications	41 days	Mon 3/25/19	Mon 5/20/19														
34	What to Expect Communication	1 day	Mon 3/25/19	Mon 3/25/19														
35	Be Live on Time Communication	1 day	Mon 4/22/19	Mon 4/22/19														
36	Are You Ready Reminder Communication	1 day	Mon 5/6/19	Mon 5/6/19														
37	Training Is Open Communication	1 day	Mon 5/20/19	Mon 5/20/19														

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Date: Fri 4/19/19

Task		Inactive Summary		External Tasks	
Split		Manual Task		External Milestone	
Milestone		Duration-only		Deadline	
Summary		Manual Summary Rollup		Progress	
Project Summary		Manual Summary		Manual Progress	
Inactive Task		Start-only			
Inactive Milestone		Finish-only			

ID	Task Name	Duration	Start	Finish	3rd Quarter		4th Quarter		1st Quarter		2nd Quarter		3rd Quarter		4th				
					Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
38	Region 11 Communications	41 days	Mon 3/25/19	Mon 5/20/19															
39	What to Expect Communication	1 day	Mon 3/25/19	Mon 3/25/19															
40	Be Live on Time Communication	1 day	Mon 4/22/19	Mon 4/22/19															
41	Are You Ready Reminder Communication	1 day	Mon 5/6/19	Mon 5/6/19															
42	Training Is Open Communication	1 day	Mon 5/20/19	Mon 5/20/19															
43	Training	25 days	Mon 4/29/19	Fri 5/31/19															
44	Pilot Training	7 days	Mon 4/29/19	Tue 5/7/19															
45	Provider Administrator Training	7 days	Mon 4/29/19	Tue 5/7/19															
46	Caregiver Training	7 days	Mon 4/29/19	Tue 5/7/19															
47	Provider Claims Training	7 days	Mon 4/29/19	Tue 5/7/19															
48	Region 10 Training	9 days	Tue 5/21/19	Fri 5/31/19															
49	Provider Administrator Training	9 days	Tue 5/21/19	Fri 5/31/19															
50	Caregiver Training	9 days	Tue 5/21/19	Fri 5/31/19															
51	Provider Claims Training	9 days	Tue 5/21/19	Fri 5/31/19															
52	Region 11 Training	9 days	Tue 5/21/19	Fri 5/31/19															
53	Provider Administrator Training	9 days	Tue 5/21/19	Fri 5/31/19															
54	Caregiver Training	9 days	Tue 5/21/19	Fri 5/31/19															
55	Provider Claims Training	9 days	Tue 5/21/19	Fri 5/31/19															
56	Production	56 days	Mon 4/29/19	Mon 7/15/19															
57	Production Files Delivered to Tellus	1 day	Wed 5/15/19	Wed 5/15/19															
58	Load and Verify Production Files	2 days	Mon 4/29/19	Tue 4/30/19															
59	Smoke Test	2 days	Wed 5/1/19	Thu 5/2/19															

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Task		Inactive Summary		External Tasks	
Split		Manual Task		External Milestone	
Milestone		Duration-only		Deadline	
Summary		Manual Summary Rollup		Progress	
Project Summary		Manual Summary		Manual Progress	
Inactive Task		Start-only			
Inactive Milestone		Finish-only			

ID	Task Name	Duration	Start	Finish	3rd Quarter		4th Quarter		1st Quarter		2nd Quarter		3rd Quarter		4th			
					Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug
60	Production Environment Live	1 day	Fri 5/3/19	Fri 5/3/19														
61	<i>Milestone: Soft Launch (Pilot Provider Go-Live)</i>	1 day	Mon 6/3/19	Mon 6/3/19														
62	Remediate Production Defects Part 1	18 days	Wed 5/8/19	Fri 5/31/19														
63	<i>Deliverable: Defect Log</i>	0 days	Wed 5/15/19	Wed 5/15/19														
64	Full Production Rollout	46 days	Mon 5/13/19	Mon 7/15/19														
65	All Region 10 Production Files Due to Tellus	1 day	Mon 5/13/19	Mon 5/13/19														
66	Region 10 Go-Live	1 day	Mon 7/1/19	Mon 7/1/19														
67	All Region 11 Production Files Due to Tellus	1 day	Mon 5/13/19	Mon 5/13/19														
68	Region 11 Go-Live	1 day	Mon 7/15/19	Mon 7/15/19														
69	<i>Milestone: Rollout Completed</i>	0 days	Fri 6/21/19	Fri 6/21/19														
70	Monitoring and Controlling Phase	227 days	Thu 9/20/18	Fri 8/2/19														
71	Change Management Tasks	108 days	Thu 9/20/18	Mon 2/18/19														
72	Update Project Schedule	227 days	Thu 9/20/18	Fri 8/2/19														
73	Manage Defect Log	84 days	Wed 3/6/19	Mon 7/1/19														
74	Distribute Weekly Project Status Reports	117 days	Fri 1/18/19	Mon 7/1/19														
75	Conduct Weekly Status Meetings	203 days	Thu 9/20/18	Mon 7/1/19														
76	Project Closing Phase	1 day	Wed 9/4/19	Wed 9/4/19														
77	Closeout and Transition Meeting	1 day	Mon 7/29/19	Mon 7/29/19														

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Task		Inactive Summary		External Tasks	
Split		Manual Task		External Milestone	
Milestone		Duration-only		Deadline	
Summary		Manual Summary Rollup		Progress	
Project Summary		Manual Summary		Manual Progress	
Inactive Task		Start-only			
Inactive Milestone		Finish-only			

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TELLUS

Implementation Plan



Project

Print Date: October 4, 2019

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Acronyms

ACRONYM	DESCRIPTION
ABA	Assistant Behavior Analyst
AHCA	Agency for Health Care Administration
API	Application Program Interface
AWS	Amazon Web Services
BA	Behavior Analysis
BAA	Business Associate Agreement
CRM	Customer Relationship Management System
CSR	Customer Success Representative
EC2	Elastic Compute Cloud
EVV	Electronic Visit Verification
FMMIS	Florida Medicaid Management Information System
HIPAA	Health Insurance Portability and Accountability Act (1996)
HITECH	Health Information Technology for Economic and Clinical Health Act (2009)
HR	Human Resources
IAM	Identity and Access Management
IQC	Internal Quality Control
IQP	Internal Quality Plan
ISM	Information Security Manager (Agency)
ISO	International Organization for Standardization
IVR	Integrated Voice Response
JIRA	Vendor Issue Tracking System for Software Code Management
LA	Lead Analyst
MIS	Management Information System
MVC	Model View Controller
NIEM	National Information Exchange Model
NIST	National Institute for Standards and Technology
OWASP	Open Web Application Security Project
PA	Prior Authorization
PCS	Personal Care Services
PDN	Private Duty Nursing
PHI	Protected Health Information
PII	Personally Identifiable Information
PMO	Project Management Office
QA	Quality Assurance
QIO	Quality Improvement Organization
QMS	Quality Management System
RACI	Responsible, Accountable, Consult, Inform Matrix
RBT	Registered Behavior Technicians

ACRONYM	DESCRIPTION
RDS	Relational Database Service
RSS	Rich Site Summary
SFTP	Secure File Transfer Protocol
SQL	Structured Query Language
SRC	Submission Requirement Component
SSL	Secure Sockets Layer
SSRS	SQL Server Report Services
TBD	To Be Determined
TLS	Transport Layer Security
U.S.	United States
U.S.C.	United States Code
VPC	Virtual Private Cloud
W3C	World Wide Web Consortium
WIP	Work in Progress
Zoho	Business Management Software, and Customer Relationship Management System

Purpose

This Implementation Plan is a key document that outlines how the [REDACTED] Program requirements will be developed, tested, and implemented. The purpose of this plan is to provide a guide that all stakeholders can use to understand the project strategy, timeframes, and responsibilities needed to successfully complete the project. Any requested changes to this plan should be submitted through the project's change control process for review and approval prior to implementation.

The BA Program will provide the electronic visit verification of behavioral analysis services provided by Lead Analysts , Assistant Behavior Analysts and Registered Behavior Technicians

4Tellus, LLC, the Vendor, will develop customizations to the Tellus EVV (Electronic Visit Verification) System, as indicted in the [REDACTED] and subsequent contract amendment(s). The BA enhancements to the Electronic Visit Verification (EVV) product will be deployed to behavior health service providers in a pilot mode for Florida Medicaid Regions 9, 10, and 11. The implementation of the BA program includes the following functional components:

1. **Outreach Program** – The outreach program will utilize a variety of campaigns to target the different populations of behavior analysis service providers to support the adoption of the new EVV System. Post-implementation campaigns will provide additional learning opportunities and product improvements.
2. **Customer Service Center** – The Customer Service Representatives will document and track all incoming questions and issues, as well as provide direct assistance, support, and coaching to the EVV users.
3. **Education and Training Program** – The trainers will create training materials, provide instructor-led classes (e.g., live sessions and webinars), and web-based training to supplement coaching and direct assistance.
4. **EVV Administrator Console** - The EVV Administrator Console is the web-based application provider agencies and Lead Analysts will use to schedule, track, and monitor Lead Analysts, Assistant Behavior Analysts and Registered Behavior Technicians; and generate reports on the services they provide to recipients. The EVV Administrator Console will also be used to check-in and check-out Lead Analysts, Assistant Behavior Analysts and Registered Behavior Technicians working at the facilities.
5. **EVV Mobile Application** - Lead Analysts , Assistant Behavior Analysts and Registered Behavior Technicians will interact with the mobile application to get schedules and services they need to perform upon arriving at the

recipient's location or performing service at the BA facility. The application will be available in the Google Play and Apple App stores and will record an electronic record and verify the visits.

6. **EVV Claims Console** – The claims engine will automatically aggregate BA service provider billing information from the respective verified services and submit the claims file to the Agency's fiscal agent for payment. This system will flag claims that require further attention from the BA providers prior to submission.
7. **FMMIS Interface** – The claims portal will transmit claims information to the Agency via the Florida Medicaid Management Information System (FMMIS).
8. **eQHealth (eQ) Solutions Interface** – The eQ interface will provide the prior authorizations for recipient services to use in conjunction with the provider and recipient data that [REDACTED] will provide to populate the EVV System.
9. **QA/IQC Plan** – The quality assurance manager will work with each of the functional managers to define policies and operational procedures required to establish an internal quality control plan for the implementation and operations phase of the EVV System.

Description of Implementation

The implementation of the EVV Program is best classified into three major tactical areas.

- A. **The Technical Development** – Is comprised of the EVV Administrator Console (including the claims portal and reports portal), Mobile Application, and the network infrastructure.
- B. **The Educational, Training, and Outreach Campaigns** – An outreach program that provides registration information, and training options, to adopt the EVV system.
- C. **The Customer Service Center** – A center that serves as the face of the BA EVV system to the users, and helps answer questions, resolve issues, and coach users on the features of the EVV system.

Functional Requirements

The gathering of functional and technical requirements to complete designs and customizations of the EVV systems, and all reporting, as well as to estimate and define the time frames for the major tactical areas.

System Development

EVV system development and testing will occur in parallel with outreach activities. System development includes the implementation of the four environments that will

support all development, training, and operations of the EVV system. Developers will conduct unit testing for their components prior to integration. The training environment will be configured for end-user access, so the training team can use it to train a practice training and to perform the System Readiness Review before go-live.

Outreach

The initial outreach campaign will be implemented once the outreach plan is approved by [REDACTED]. The campaigns will provide EVV awareness and are focused on getting the BA providers to adopt the EVV system. Recognizing that there may be resistance, additional campaigns will target the population of non-adopters.

Educational Materials

Once the technical design is completed after the functional requirements sign off, the training team will generate additional educational materials, which will require [REDACTED] approval prior to use.

Customer Service

Concurrently, the Customer Service Center will be established, as it will need to be operational prior to the start of any outreach activities. These activities will include the phone and ticket tracking systems to support the Customer Service Representatives (CSRs). The CSRs will be pivotal as the first line of support for callers and start providing initial EVV system adoption information. It is anticipated that callers will contact the Vendor for adoption/transition information, training needs, EVV administrator console access, mobile application questions, possible technical issue/bug in the application, claims inquires and other requests. A knowledge base will be created for CSRs to query when they are interacting with callers. This knowledge base will be expanded as the project progresses and new user situations are encountered.

Internal Quality Control (IQC)

Throughout the development process, the quality control program will be responsible for implementing a change control process to safeguard program components, either technical or instructional, from changing without the appropriate approvals. Quality standards will help maintain constraints needed to ensure that what may seem like small changes, do not end up impacting other components in the system without the appropriate people knowing it.

System Readiness Review

As development activities conclude, and the go-live date approaches, the vendor will work with [REDACTED] to complete an EVV system readiness review. Upon successful completion, the system will be qualified as functional.

Key Stakeholders

The BA Project spans several organizations, and as such, it is important to understand the points of contact for the various aspects of this project. Table 1 provides the emergency phone contact information of all the key stakeholders of the project, should any urgent matter arise. The communications plan includes more detailed information for each project member, including email addresses, roles, phones, and assigned responsibilities for the major components in a RACI (responsible, accountable, consult, inform) format.

Table 1 EVV Key Stakeholders

NAME	ROLE	EMERGENCY NUMBER
Cathy Cross	AHCA Contract Manager	[REDACTED]
Beth Henry	AHCA Program Lead	[REDACTED]
AndraLica McCorvey-Reddick	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
Irlands Germain	Vendor Project Manager	[REDACTED]
Lia Sweeney	Vendor Contract Manager	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]

Major Tasks and their Implementation Strategy

The EVV Project has been divided into two phases (Implementation and Operations). To improve the accuracy of effort estimation and the assignment of resources, the implementation phase has been broken down into four workstreams (Project Management, EVV system Development, Transition and Readiness Reviews, and go-live). This type of breakdown is known as a Work Breakdown Structure (WBS), see *Figure 1*, and it serves as the backbone for scheduling and tracking the progress of all project deliverables.

The WBS has been vetted by the project’s key staff, the core team, and the project sponsors to ensure compliance with the project scope. Additionally, a RACI matrix has been created to map resources to their related activities in the project, see *Figure 2*. The RACI matrix shows all the high-level deliverables by workstream on the left, and the project resources working on these activities on the top row.

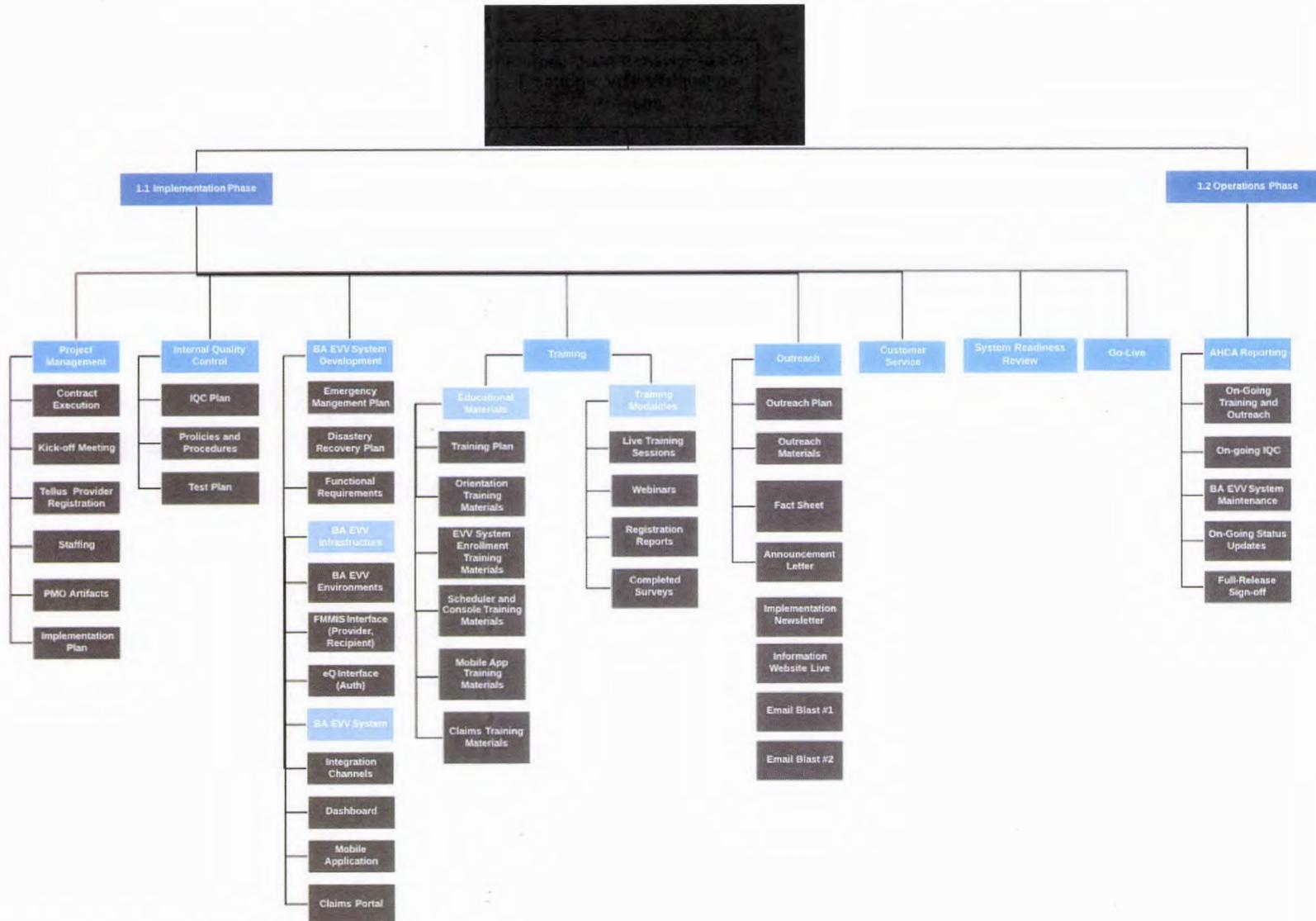


Figure 1 EVV Work Breakdown Structure (WBS)

No.	Stakeholder Role	Project Manager	IT Manager	QA Manager	Customer Service Manager	Marketing Manager	Account Manager	Training Manager	QA Engineers	Business Analyst	Integrations Developer	Engineer/Applications Developer	Claims Analysts	CSRs	Trainers
	Project Activity														
1	Project Management: Implementation														
2	Project Management	A,R	C	C	C	C	C								
3	QA/QC Program	R,C	C	A	C		I		I						
4	Policies and Procedures	R,C	A	C,I	C,I	I	I		I	I	I	I			
5	Project Status	A,R	C,I	C,I	C,I	C,I	I		I	I	I	I		I	I
6	Document Repository	C,R	A	I	I	I	I								
7	Disaster Recovery														
8	BA EVV System Development														
9	EVV Environments Set up														
10	DEV	C,I	A	I						I	R	R			
11	QA	C,I	A	R					R	I	R	R			
12	UAT/TRAINING	C,I	A	R	I	I	I		R	I	R	R	I		I
13	PROD	C,I	A	I	I	I	I			I	R	R	I	I	I
14	EVV System														
15	Functional Requirements	C,I	A	C,I	I	I	I		R	I		R		I	
16	EVV Dashboard	C,I	A	C,I	I	I	I		R	I		R		I	
17	Mobile Application	C,I	A	C,I	I	I	I		R	I		R		I	
18	Claims Portal	C,I	A	C,I	I	I	I		R	I		R		I	
19	System Testing														
20	Test Plan Delivery	C,I	I	A,R					I	I		I			
21	Test Plan Execution	C,I	I	A,R					R	I		I			
22	Defect Management	C,I	I	A,R					I	I		I			
23	Outreach														
24	Outreach Materials	C,I			I	A,R								I	
25	Initial Outreach	C,I			I	A,R									
26	Adopters Follow-Up	C,I			R	A	I								
27	Non-Adopters Follow-up	C,I				A,R	I								
28	Execution of Outreach Plan	C,I			I	A,R									
29	Customer Service Center														
30	Training														
31	Execution of Training Plan	C,I			I			A,R							R
32	Training Materials	C,I	C		I			A,R							R
33	Live Training	C,I			I			A,R							R
34	Web based Training	C,I			I			A,R							R
35	Training Support	C,I	C,I	C,I	R			A,R		C,I				R	R
36															
37	BA EVV Production Systems Readiness Activities	C,I	A,R				I								
38	Production Environment Verification	C,I	A,R				I								
39	Post Go-Live Issue/Defect Management	I	C	R	A,R		I				I	I			
40	SLA Reporting	R			A		I						C,I		
41	Customer Support Center				A,R		I							R	

Figure 2 EVV RACI Matrix

Phase 1: Implementation

Starts immediately after contract execution and runs until the go-live day. It includes all the project management activities, the development and testing for the major components of the EVV system, the outreach activities, the development of the educational materials and corresponding training, the implementation of the customer service center, and the associated activities related to implementing the QC plan.

A. Project Management

The project management workstream includes the staff ramp-up procedures, the QA/IQC planning activities, the creation of the policies and procedures, and all the project management office (PMO) activities required to successfully implement the project.

1. **Staffing** – The staffing activities will oversee the proper ramp-up of project resources, from job advertisement to onboarding procedures. As part of the onboarding procedures the following directives will be followed:
 - a. Provide HIPAA training to employees.
 - b. Ensure all employee computers are encrypted using Windows Bitlockers.
 - c. New hires go through an extensive background check (as required) that may include:
 - Level 2 equivalent background check
 - Social Security Name and Address Trace
 - Criminal Records – Federal and each county for past 7 years
 - Education Verification – Highest level completed
 - Nationwide Criminal Database (National Crime Record File)
 - d. Conduct background checks every five (5) years of employment.
 - e. Train employees to lock, or log out, to prevent any unauthorized access when leaving computers unattended.
2. **QA/IQC Program** - The goal of the IQC program is to assure conformity to all requirements, to continually improve all defined processes, and enhance Stakeholder satisfaction through the effective application of systems to monitor and control defined processes. The IQC plan will serve as the guide for each of the workstream managers to design and implement the effective systems of measure to control and support technical and service delivery processes, as well as the operational respective policies and procedures.
3. **Policies and Procedures** - The BA Project Team will develop policies and procedures that will give details on the execution, implementation, and operation of all the operational processes.
4. **PMO Artifacts** – The project manager (PM) will implement the Project Management Institute's best practices throughout the project life cycle. These practices will ensure the correct level of detail, monitoring, and process improvement activities.
 - a. **Planning:** The PM will lead the planning of all activities. Along with other managers, the PM will elicit business requirements to help plan and baseline the scope, baseline the schedule, and identify and track risks. Additionally, the PM will create artifacts, as required, generally provided by a project management office to help the team in their work (e.g., report templates). A

project schedule will be created in MS Project and will track the progress of day-to-day activities.

b. **Execution**: During the execution of the project plan, the PM will work with the workstream managers to ensure the plan is being carried out, provide support, and help remove obstacles. At times, the project manager may take on additional roles to support the teams, and to ensure the schedule is maintained.

c. **Monitoring**: The PM will lead weekly status meetings with the workstream managers to track progress, risks, and issues that need to be resolved. A weekly all-hands meeting will be held with the entire project staff, as another opportunity for the project team and the leadership team to communicate and exchange information. The PM and the Agency will schedule weekly status meetings, with additional forms of communication established (e.g., phone calls or emails), to discuss issues, needs, and requests that may not wait until the weekly status meeting. The PM expects that the Agency will provide the appropriate level of response to ensure no schedule slippage.

d. **Document controls**: Change controls will be implemented, and project documentation will be stored at the EVV Project SharePoint, with controlled access and permissions for the project team, as well as the approved Agency staff.

B. EVV Platforms/Networks

The EVV platform will include four environments, which will be customized for the [REDACTED] BA EVV system. The deployment strategy used is that available in the AWS (Amazon Web Services). The AWS capability is used to create disk snapshots and AMIs (Amazon Machine Images). Before promoting new software into a new environment, a full disk image will be created of the machine for back up. The machine will be updated, and if it were necessary to roll back the software, then the saved back up can be used to restore the machine to its previous state. Additional information on security, performance, and hardware specifications can be found in those respective sections within this document.

1. **EVV Environments** – The three environments are:
 - Development – The development instance is dedicated for code development and unit testing, and access is limited to the technical team.
 - QA/Training – The test instance will serve as the integration instance for the application, as well as the internal system readiness review, and the [REDACTED] system readiness review. Access in this instance will be limited to the technical team.
 - Production – The production instance will be the actual instance for access to all BA service providers. Access to this instance will be

managed by the customer service center and controlled by unique access rights for each BA service provider.

2. **FMMIS Interface** – The FMMIS interface will provide the data connection to receive provider and recipient information, as well as transmit the claims portal invoice file.
3. **eQ Interface** – The eQ interface will provide the data connection to receive recipient prior authorization information needed for the scheduling of services and in the adjudication of claims.
4. **Disaster Recovery** – The disaster recovery system is automatically available through the Amazon Web Services cloud. For web-based applications (API, EVV Administrator Console, and Claims Console) a Blue-Green deployment strategy is used. Blue-Green deployment is a technique that reduces downtime and risk by running two identical production environments called Blue and Green, see example below. At any time, only one of the environments is live, with the live environment serving all production traffic. In addition, risk is reduced when using the Blue-Green deployment strategy. If something unexpected happens with the new version on Green, an immediate roll back to the last version can be achieved by switching back to Blue.

Example: Blue-Green Deployment

If Blue is live and Green is idle, when a new version of the software is rolled out, deployment and the final stage of testing takes place in the environment that is not live; in this example, Green. Once the deployment is completed and tested in Green, the load balancer is changed so all incoming requests go to Green instead of Blue. Green becomes the live environment, and Blue becomes idle. This technique can eliminate downtime due to application deployment.

C. EVV System – IT Manager

1. **EVV Administrator Console** – The EVV Administrator Console, also known as the EVV Portal, is the main application screen administrators will use to add other administrators, Lead Analysts , Assistant Behavior Analysts and Registered Behavior Technicians , edit recipient information, and schedule visits.
2. **Mobile Application** – The mobile application will provide a secure method to track the services Lead Analysts , Assistant Behavior Analysts and Registered Behavior Technicians , provided to recipients. Using GPS technology, it will provide a means to access schedules, and the directions to the recipient's home.

3. **Claims Console** – The Claims Console, also known as the claims portal, will aggregate all the service data and process alongside the approved prior authorizations to create and submit claims. This feature provides an automated submission of claims to ██████'s fiscal agent.

D. Outreach

The outreach program will consist of several emails to inform, register, and support BA service providers. An informational website will be available as a single source of information regarding the implementation and ongoing support of the BA EVV program. The goal will be to introduce the EVV system and the vendor support services, including the customer service center and training. Additional email communications will provide additional information and registration support for the EVV system.

E. Training and Education

The objective of the training program is to ensure that all BA providers are equipped with the knowledge to use the EVV system. A training plan will identify the appropriate training strategies and activities required to achieve the desired learning outcomes. The training will also equip the providers with the ability to train additional staff on the use of the console and mobile application, and the Lead Analysts, Assistant Behavior Analysts and Registered Behavior Technicians, on the use of the mobile application.

1. Education Materials

Brochures, fact sheets, manuals, and videos will be generated to support training activities. The Vendor will have fourteen (14) calendar days to deliver any new ██████ requested educational training materials. The Vendor will strive to complete changes to existing educational materials within five (5) calendar days of the AHCA request. Once completed, the documents will be submitted to ██████ for approval before publishing. The material will become the base of all written educational material that is published to the BA service providers and will be transformed for use in the web-based training component.

2. Instructor-led Training

Training will be held for regions 9, 10, and 11 in accordance with the Training Plan. All modalities will follow the same curriculum, and attendants given the opportunity to provide feedback through an anonymous survey, so that the training team can improve the training process. It is anticipated that an instructor-led class could last up to three (3) hours. The sessions will be scheduled throughout the morning, afternoon, and evening (mobile application only).

Classroom presentations will include written materials as appropriate for the class format. The classes will be conducted in a facility that can provide the

appropriate classroom learning environment and is within a one-hour drive of most participants.

Webinars will follow the same format of classroom sessions. Participants will be able to dial in from their location, without having to travel. Presentations will include written materials as appropriate, which will be available and accessible through a link on the web portal. This webinar format allows participants to ask the trainer questions via a chat feature, thus still providing feedback to the participant during the training session and/or capturing questions and responses to improve the FAQs.

In all modalities, participants will be directed to the Customer Service Team for additional support (phone number and email address). The CSRs will coordinate with the trainers if additional instructor-led training is required in a region.

3. *Web-based Training*

The training portal will serve the 24/7 web-based training needs. It will be set up using learning modules, based on features and allows the use of several multimedia files. The site will also include a download area for approved training documentation and other supporting documents. Users will be able to register for training, take training at their own pace and re-take any training module. The system provides reporting statistics to track its use by the BA service providers.

F. Customer Service Center

Customer Service Representatives (CSRs) will operate the daily customer service center, answering questions and documenting any issues. The CSRs serve as the first line of support for providers when they have questions or have EVV system issues. The customer service center will be an integral part of providing help and support during the training and go-live transition, and afterwards during the operations phase. The Customer Service Team will set up the following tools required to operate the Customer Service Center, as well as test them prior to implementing the outreach campaigns:

1. *Call Center Telephone System – Ring Central*

The Ring Central system is a cloud-based system that supports a toll-free call in number for the providers when they have issues or questions. The system supports an interactive voice response process that guides users through a set of options to communicate in English, or Spanish, as well as other options. The system has after-hour voice mail capability. Reports can be generated to report call information to [REDACTED], as well as analyze and improve service to callers.

2. *Issue Tracking System – Zoho*

Zoho is a ticketing system that allows CSRs to document information related to a call. The ticket options will include various state options, e.g., open, closed, in-progress, to ensure each issue is resolved to the caller's satisfaction. This

system, combined with RingCentral (the phone/IVR system) provides metrics related to the duration of calls, hold times, and ticket status.

Phase 2: Transition and Readiness

The Transition Phase is the time frame starting after the first BA provider enrolls into the program and starts the training process. The transition phase includes registration, training activities, set up, and readiness reviews.

Phase 3: Operations

The Operations Phase starts on the go-live date. At this time, the impetus of the project management activities transitions from monitoring and controlling development work to monitoring the performance and effectiveness of the EVV system, the tracking and resolution of system issues and any customer complaints, the analysis of data, and the generation of regular reports for the Agency. This phase also commences the maintenance phase of the EVV systems and all its related infrastructure.

1. On-going Project Management: Project Manager

During this on-going phase, the Vendor will still meet with the Agency on the outlined schedule, until all targeted regions are covered. At that time, it is envisioned that the frequency of meetings will decrease.

The PM will work with appropriate Tellus leaders to initiate the submission of monthly, quarterly, and annual reports.

2. On-going Education, Training, and Outreach: Education/Customer Service Manager

During this on-going phase, the Training Team and Marketing Team will lead all the education, training, and outreach activities for the project. The leaders will work with the PM and IT managers to maintain the team informed on the progress of current activities, and any new campaigns that are deployed. The Training and Operations Teams will also be monitoring the customer support center, the health of the technical system, and the services provided to the callers.

3. On-going QA/IQC: QA Manager

During this on-going phase, the QA manager will monitor and audit the initial state of the technical system, and the services provided. This function will be transferred to an Education/Customer Service Leader at a predetermined time after go-live.

4. EVV System Maintenance: IT Manager

During this on-going phase, the IT manager will monitor, maintain, and lead the development of any defects or change requests for the EVV system. The IT

manager will analyze the reports to ensure performance and security are being met, and that the system is functionally stable for all the users.

Implementation Schedule

The full draft schedule is referenced in Appendix A: Sample EVV Project [Schedule](#).

Security

There are different components on the EVV Project that will require security requirements associated with HIPAA and the HITECH Act. Those systems are outlined below with their respective security specifications.

1. EVV System

EVV Software is hosted on AWS cloud. AWS has robust controls in place to maintain security and data protection in the cloud. The EVV system only uses AWS HIPAA compliant and eligible services.

Additional security information:

- The EVV system uses BCrypt algorithm to hash user password.
- The EVV system uses industry standard OAuth2 protocol for user authentication.
- The EVV system keeps track of record changes, who made the change and when.
- All communications between clients and server encrypted with SSL/TLS.
- All communications between application server and database encrypted with SSL/TLS.
- All data in the relational database encrypted at rest.
- The following certifications and attestations are available: ISO 9001, SOC1, SOC2, SOC3, ISO 27001, FedRAMP, HITECH, HIPPA.

2. Infrastructure Security

Networks firewalls built in Amazon VPC along with Security Groups provide use with fine-grained access control to network resources. All traffic is encrypted with TLS across all services.

3. Data Encryption

We use AWS built-in data encryption capabilities on S3 (file object storage), RDS (Relational database management service), EBS (disk storage).

4. Monitoring and Logging

The EVV system utilizes CloudWatch to send alert notifications when specific events occur or thresholds exceeded. Tellus utilizes Amazon CloudTrail to track cloud API activity.

5. Identify and access control

The EVV system uses Identify and Access Management to define individual user accounts and their permission across system resources.

6. Staffing requirements

- Ensure security of confidential recipient information and medical data.
- Train project staff on confidentiality policies and procedures to comply with all Federal and State laws (including HIPAA and HITECH Acts) governing confidentiality.
- Signed Business Associate Agreement.
- Perform background checks as required.

7. Office Location Security

The physical office suite security will use keys for controlled access to approved personnel after business hours. During business hours, employees will be able to ingress freely. The main building requires a special card to enter between 7:00 PM and 7:00 AM.

8. Customer Service Center Systems

The RingCentral and Zoho systems are both protected by a login/password combination assigned to each of the customer service representatives. Since they are web-based systems, the second security layer for data protection is the person's computer itself, controlled by timeouts.

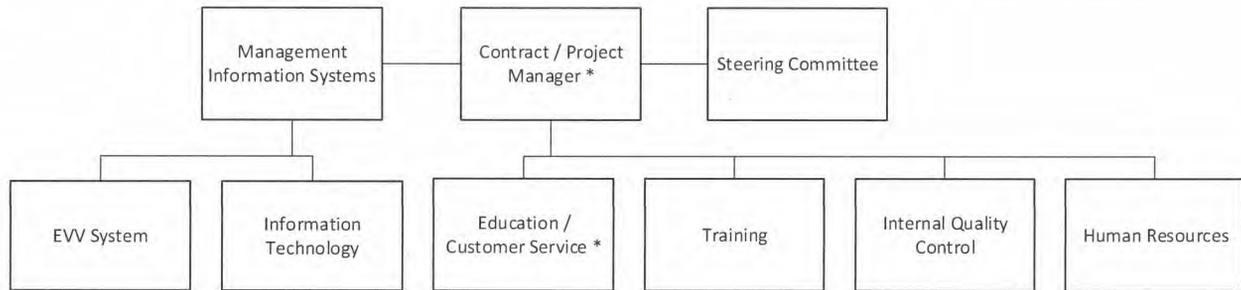
9. Training

The training development is completed on individual Bit-locked computers and the files stored on the secured project document SharePoint. Manuals and handouts will be converted to a secured PDF file that will be published in the document portal, and the web-based training portal. Standard video software will be used to produce media with video/audio but require no additional security. The web-based training site will have a secure individual login and will be monitored by an administrator.

Implementation Support

The human resources model at the start of the project will decrease personnel as the project transitions into the operations phase. As seen in *Figure 3*, The implementation phase will require resources to develop and customize the EVV system to the Agency's specification, develop educational material, perform outreach and train the BA

providers. Once these tasks are complete and the EVV system goes live, on-going support will require project management, customer service representatives, and different IT staff as needed to maintain, improve, and fix issues.



* Vendor Key Staff Position

Figure 3 EVV Organizational Chart

The Agency will play a significant supporting role during the project. They are not only the client, but they must provide clarifications to requirements questions during the development phase, and they must also provide approvals to the implementation plan, the outreach plan, the educational material, policies and procedures, and the internal quality program plan. The Agency’s response time to questions and approvals will be integral in ensuring that the project stays on schedule.

The final group of resources that will support the project’s effort will be the actual end users of the EVV system, the BA providers. There will be a strong correlation between the amount of support BA providers offer the EVV system deployment team and their success in adopting the EVV system and being successful. Because getting the support from the BA providers may be challenging, all the outreach campaigns and educational material will be written to provide a positive environment for change and adoption.

All the workstream managers will work with the project manager to ensure the established policies and procedures, schedules, and other workflows are followed, and to ensure communications through weekly meetings and report analysis. The managers will use the project tools to ensure that quality is monitored, corrected if needed, and improved when the opportunity arises. The team will document changes and improvements as part of their constant process improvement activities.

Listing of Hardware, Software, and Facilities

The EVV system and associated supporting components will require the tools listed below during the implementation and operational phases of the project.

1. EVV system, Platforms/Network, Educational Material Portal

Amazon Web Services

- Modern, robust, industry-leading technology infrastructure platform
- RDS
- Load Balancing, Autoscaling, VPC (Virtual Private Cloud)
- EC2 (Elastic Compute Cloud)
- IAM (Identity and Access Management)
- BAA, Compliance Reports
- CloudWatch
- 24/7 Uptime

JIRA

- Integrated Ticketing System
- Software Planning, Tracking, and Release Software

GIT

- Source Control and Deployment Delivery

2. Mobile Application

- Google Play Store
- Apple Play Store

3. Customer Service Center Systems

Zoho

- Customer Relationship Management System
- Integrated Ticketing System

RingCentral

- Call Center with Analytics

Performance Monitoring

The internal quality plan will include the tasks necessary to monitor the EVV systems and associated support structure and perform internal audits as required to ensure system integrity, preventing risks, and operational issues that could lead to down time, thus impacting service delivery to the recipients supported by the EVV system.

1. EVV Platforms/Networks and System

System performance will be monitored using AWS Cloudwatch. We are capturing a number of standard and custom metrics including but not limited to:

- **Application Servers:** CPU Utilization, Memory utilization, Disk I/O, Disk space, Network In/Out, System Availability, API requests (number of requests, frequency, etc.), API Response times.
- **Database:** CPU Utilization, Read/Write IOPs, Read/Write Throughput, Network In/Out Throughput, Number of Connections, Memory Utilization.
- **File/Object storage:** Number of Objects, Objects Size, Number of Requests (download, upload, delete, list requests), Request Errors.

2. Customer Service System

The only measurable objective during the development phase will be that the system is set up and running to handle and respond to both phone calls and emails by the start of the outreach campaigns, when users of the system can contact Tellus. The IQC plan will indicate the quality objectives and measurements during the transition and operations phase.

During the implementation phase, a mix of qualitative and quantitative monitoring information will be available. IQC can help the Customer Service Team set up monitoring and measurement tools and help with the analysis of information. The Customer Service Leader will share the results of the monitoring with the Project Manager.

During the operations phase, again a mix of qualitative and quantitative measurements are possible. In this phase the Customer Service leader will gather the data and both the Customer Service Leadership and the Project Manager will analyze the data and determine if actions are needed based on the results.

1. CSR's performance shall be monitored to assess if additional training is needed.
2. Incoming phone calls monitored to determine if Outreach programs are needed to address recurring questions or issues.
3. Internal audits (this needs more information).

3. Training

During the implementation phase, a quantitative feedback measurement will not be available. The primary feedback will be qualitative. The Training workstream needs to be able to develop the Scope, Purpose, and Process outline of training. Monitoring progress of the use of the EVV system will give a good indicator for monitoring the quality in this phase. The tracking result will be passed on to the Project Manager of both Training and IQC and [REDACTED].

During the Implementation phase, a mix of qualitative and quantitative measurements are possible. IQC will help set up the right measurement tools

and analysis of the data as necessary. Training will be responsible for gathering and analyzing the data.

1. Assess awareness of providers.
2. Assess provider training efforts and progress of training their staff.
3. Assess number of providers trained.
4. Analyze data gathered by customer service.

Implementation Requirements

The most important requirement for the BA EVV Program consists of the EVV system itself. These requirements are defined below.

1. Hardware/Software:

Below is a list of hardware/software and identification as to the need to create new, customized items already existing, or if 4Tellus, LLC., will be able to use as it currently exists:

- Development environment – Use existing.
- Test environment – Use existing.
- Production environment – Use existing.
- Training Environment – Use existing.
- EVV Claims Portal – Customize existing portal.
- FMMIS Interface – Use existing.
- EVV Administrator Console – Customize existing EVV application.
- EVV Database – Create new.
- EVV Mobile Application – Customize existing EVV application.

Create/develop new:

- Training Document Portal – Create new.
- Reports Portal – Use existing.

2. Personnel:

Available:

- Account Manager.
- Contract (Project) Manager.
- IT Manager.
- Network Engineer.

Hire new:

- Customer Service Leader.
- CSRs.
- Trainer.

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- Hire resources with skillsets in the following areas: Software QA, DB Administrator, Web development, Business Analyst, Report development, Mobile development.

3. *Facilities:*

- None – Utilize existing facilities.

4. *Other Capital Investments:*

- Web-based Training.
- Publish educational and training material - Licensed copy of Acrobat DC.

Post Implementation Verification

The success of the BA EVV systems deployment is dependent on several components, each with their own success criteria, as noted below. Some of the components functionality and successful deployment can, and will, be measured as they become operative, even before the go-live date. These components will include the outreach and training activities, the customer service support center, and the platform/networks operability. The Customer Service center will work with providers as they adopt the system and start scheduling Lead Analysts , Assistant Behavior Analysts (ABA) and Registered Behavior Technicians to validate the scheduling feature of the BA EVV system prior to the go-live date. Upon go-live, the CSRs, with support from the technical team, will validate that the mobile application is working as designed through direct communication with the Users of the EVV system. The volume of calls will serve as one indicator to any technical issues being experienced in the field. Additionally, follow-up to the providers will also help gather the success of the rollout of the BA EVV system.

Outreach and Training Activities

The customer support department will continue to reach out to BA service providers with follow-up questions and communication to monitor and track their progress in adopting the BA EVV system and any additional training needs.

The CSR team will often refer previously-trained callers to training information on the Tellus website (i.e., User Guides, Frequently Asked Questions and Answers, and recorded webinars). Regular live webinars and recorded webinars will be available to the BA community to receive training/retraining on their schedule. This availability of training information in various modalities will assist in ensuring a smooth transition to the new BA EVV system for the BA providers.

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EVV Project Implementation Plan Acceptance

Approved by:

Date: _____

Lia Sweeney
EVV Program Contract Manager,
4Tellus, LLC

Date: _____

[REDACTED]

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DOC Type Plan

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Appendix A: Sample EVV Project Schedule

DOC Name [Project Implementation Plan](#)

DOC Type Plan

Issue Date: 05/17/2019 Rev# 1.0

ID	Task Name	Duration	% Complete	Start	Finish	Predecessor	2019	2020	2021
							Qtr	Qtr	Qtr
24	Review - Outreach and Communications Plan	4 days	50%	Wed 5/15/19	Mon 5/20/19	23			
25	Revisions - Outreach and Communications Plan	5 days	0%	Tue 5/21/19	Mon 5/27/19	24			
26	Approval - Outreach and Communications Plan	3 days	0%	Tue 5/28/19	Thu 5/30/19	25			
27	IQC Plan	43 days	0%	Tue 5/14/19	Thu 7/11/19				
28	Draft - IQC Plan	19.6 days	0%	Tue 5/14/19	Mon 6/10/19				
29	Review - IQC Plan	7 days	0%	Fri 6/21/19	Mon 7/1/19	28			
30	Revisions - IQC Plan Revisions	5 days	0%	Tue 7/2/19	Mon 7/8/19	29			
31	Approval - IQC Plan	3 days	0%	Tue 7/9/19	Thu 7/11/19	30			
32	Emergency Management Plan	59 days	0%	Mon 6/3/19	Thu 8/22/19				
33	Draft - Emergency Management Plan	44 days	0%	Mon 6/3/19	Thu 8/1/19				
34	Review - Emergency Management Plan	7 days	0%	Fri 8/2/19	Mon 8/12/19	33			
35	Revisions - Emergency Management Revisions	5 days	0%	Tue 8/13/19	Mon 8/19/19	34			
36	Approval - Emergency Management	3 days	0%	Tue 8/20/19	Thu 8/22/19	35			
37	Operational Procedures Manual	62 days?	0%	Tue 5/14/19	Wed 8/7/19				
38	Draft - Operational Procedures Manual	42 days	0%	Tue 5/14/19	Wed 7/10/19				
39	Review - Operational Procedures Manual	10 days	0%	Thu 7/11/19	Wed 7/24/19	38			
40	Revisions - Operational Procedures Manual	5 days	0%	Thu 7/25/19	Wed 7/31/19	39			
41	Approval - Operational Procedures Manual	5 days	0%	Thu 8/1/19	Wed 8/7/19	40			
42	Disaster Recovery Plan	7 days	43%	Tue 5/14/19	Wed 5/22/19				
43	Draft - Disaster Recovery Plan	3 days	100%	Tue 5/14/19	Thu 5/16/19				
44	Review - Disaster Recovery Plan	1 day	0%	Fri 5/17/19	Fri 5/17/19				
45	Revisions - Disaster Recovery Plan	2 days	0%	Mon 5/20/19	Tue 5/21/19	44			
46	Approval - Disaster Recovery Plan	1 day	0%	Wed 5/22/19	Wed 5/22/19	45			

Task		Inactive Summary		External Tasks	
Split		Manual Task		External Milestone	
Milestone		Duration-only		Deadline	
Summary		Manual Summary Rollup		Progress	
Project Summary		Manual Summary		Manual Progress	
Inactive Task		Start-only			
Inactive Milestone		Finish-only			

ID	Task Name	Duration	% Comple	Start	Finish	Prede	2019 2020 2021											
							Qtr	Qtr	Qtr	Qtr	Qtr	Qtr	Qtr	Qtr	Qtr	Qtr	Qtr	Qtr
47	Project Execution Phase	150 days?	15%	Mon 3/4/19	Fri 9/27/19													
48	Development	119 days?	15%	Mon 3/4/19	Thu 8/15/19													
49	FMMIS FTP Connection	25 days	100%	Mon 3/4/19	Fri 4/5/19													
50		25 days	100%	Mon 3/4/19	Fri 4/5/19													
51	Build Internal Registration Process	13 days	25%	Mon 5/6/19	Wed 5/22/19													
52	Enhancement - Min/Max Recipients for Scheduling by Service Code Business Rule	31 days	10%	Fri 6/21/19	Fri 8/2/19													
53	Enhancement - Rendering Provider Role for Scheduling Business Rule	31 days	10%	Fri 6/21/19	Fri 8/2/19													
54	Enhancement - Rendering Provider ID Required by Service Code Business Rule	31 days	10%	Fri 6/21/19	Fri 8/2/19													
55	Enhancement - Can this Service Code be Scheduled with Other Service Codes Business Rule	31 days	10%	Fri 6/21/19	Fri 8/2/19													
56	Enhancement -Allowed Places of Service By Service Code Business Rule	31 days	10%	Fri 6/21/19	Fri 8/2/19													
57	Enhancement - Allowed Number of Days to Backdate a Scheduled Visit Business Rule	31 days	10%	Fri 6/21/19	Fri 8/2/19													
58	Enhancement - Date of Service Go-Live Date Business Rule	31 days	10%	Fri 6/21/19	Fri 8/2/19													
59	Enhancement - Rendering Provider Max Scheduled Hours Per Day	31 days	10%	Fri 6/21/19	Fri 8/2/19													
60	Enhancement - PA Available Units Business Rule	31 days	10%	Fri 6/21/19	Fri 8/2/19													
61	Enhancement - Provider Agency Entered Claim Amount	31 days	10%	Fri 6/21/19	Fri 8/2/19													
62	Enhancement - Recipient Document Upload Support	31 days	10%	Fri 6/21/19	Fri 8/2/19													
63	Enhancement - Integrated Registration	31 days	10%	Fri 6/21/19	Fri 8/2/19													

	Task		Inactive Summary		External Tasks	
	Split		Manual Task		External Milestone	
	Milestone		Duration-only		Deadline	
	Summary		Manual Summary Rollup		Progress	
	Project Summary		Manual Summary		Manual Progress	
	Inactive Task		Start-only			
	Inactive Milestone		Finish-only			

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Attachment
E



**Electronic Visit Verification (EVV)
for [REDACTED]**

Customer Service Support Plan

April 22, 2019

STRATEGIES

- Be available by telephone and or email to communicate as early and as often as possible to minimize surprises and establish expectations.
- Re-enforce the benefits of Tellus eVV technology to service providers in streamlining workflow, delivering greater visibility, enabling better staff management and delivering better care.
- Answer questions post-training to clarify and reinforce processes, procedures and tool usage to maximize effectiveness of Tellus eVV and to ensure timeliness of claims payment whenever possible
- Regularly capture feedback to enable ongoing improvements in the Tellus tools.

Customer Service and Support Plan

- A dedicated customer support toll free number will be operational for [REDACTED] constituents [REDACTED]
- Telephone support will be provided by live Client Success agents Monday-Friday from 7am CT to 7pm MT (8am ET – 9pm ET) with the exception of National Holidays beginning
- The live agents handle operational and technical inquiries to include system issue inquiries and are available in both English and Spanish.
- Average speed of answer for the dedicated customer support toll free number will average no more than 60 seconds.
- After hours (and as appropriate during the workday) callers will have the opportunity to leave a voice mail message for the Client Success Representatives (CSRs) that will be returned within one business day. Standard hours of operation are included in the automated system messaging and messages are available in both English and Spanish.
- Calls are recorded and call recordings can be made available upon request.
- Calls are monitored by trained leadership staff and quality assurance measurements are completed on a regular basis
- Tellus CSRs receive training on Health Insurance Portability and Accountability Act (HIPAA) compliance, confidentiality, privacy, security and the importance of promptly reporting an event or breach and of the consequences of failing to do so.
- First call resolution rate will be measured at the end of each telephone call when the Tellus CSR asks the following question to the caller: “Have I resolved your issue/s on this call today”? and documenting the response in the Zohoesk ticketing system.
- An Interactive voice response (IVR) system is utilized initially to manage telephone requests appropriately. During normal business hours, the customer service phone number is answered by an IVR system giving callers the option to speak with a live person in either English or Spanish.
 - Should the IVR system be unavailable at any time, calls will bypass the IVR and be offered to the available agents.

- Tellus operates a tracking system (Zohodesk) that identifies and documents all requests and complaints received by phone, email and correspondence through to resolution. A ticket number (identifier) will be provided to the caller on all initial email inquiries and as requested on telephone inquiries.
 - Should the Zohodesk system be unavailable for any reason, a manual contact tracking system will be utilized (CSS-7). This system will include a paper copy of the information typically included in a Zohodesk ticket. The call information will be documented in the paper system and calls will be tracked in an Excel spreadsheet (either online or manually, as needed). Once the Zohodesk ticketing system becomes available, the information captured in the paper system, including original call time, will be entered into the Zohodesk ticketing system for tracking through to resolution.

- A dedicated customer support email address will also be operational for [REDACTED] constituents 24X7: by 08/01/2019. Emails will be acknowledged within 8 hours of receipt and a ticket number (identifier) will be returned for tracking purposes. Most email inquiries will be resolved in the form of a returned telephone call to the sender to ensure thorough resolution and to minimize multiple emails between the two parties. Email resolution is expected within 2 business days from receipt of inquiry or complaint, subject to the inquiries and complaints resolution SLA.
- All inquiries and complaints are resolved as soon as possible, with a goal to resolve 95% within 10 business days and the remaining 5% within 15 business days.
- The Tellus Client Success Team will provide incident reports pertaining to issues that impact production, including system downtime or any issue that impacts timely and accurate delivery of EVV services. Incident notification will be provided within one hour of detection of the incident. Detailed incident resolution reports to include root cause corrective action will be provided within five (5) business days of resolution of any incident.
- Monthly reporting will be provided on the EVV Vendor Performance Management Key Components as required, include metrics on Call Center/Customer Service, Correspondence, Complaints, system performance metrics and other metrics as required.