

PROPOSAL TO PROVIDE

Indiana Pathways for Aging Member Support Services



PREPARED FOR:

Indiana
Department of
Administration
on behalf of
Family and
Social Services
Administration

**SUBMISSION
PART TWO:**

Redacted
Technical Proposal

RFP No.:

23-75072

DUE DATE:

May 16, 2023, 3:00 PM ET

Attachment F: Technical Proposal

1. Overview

- a. Give a brief overview of your proposal.
- b. Describe your company and proposed project staff's background and experience and how it will benefit the State in this Contract. Include the following information, at a minimum:
 - i. Programs you have initiated in other states in the past 5 years that can be replicable in Indiana to help the State meet its goals as identified in Attachment K, Scope of Work.
 - ii. Programs you intend to initiate that would be specific to Indiana as part of this Contract.
 - iii. Examples of how you have worked with other states in a collaborative manner to address changing program needs and priorities.
- c. Any instances in which you or any related holding company, parent company, subsidiary, or intermediary company have been subject to any of the conditions listed below during the past five (5) years for services that relate to those contemplated by this RFP. If any of the following conditions apply, please provide full details of each occurrence.
 - i. Contracts that were terminated for convenience, non-performance, non-allocation of funds, or any other reason for which termination occurred before the completion of the originally contracted term.
 - ii. Occurrences where the Respondent has either been subject to default or has received notice of default or failure to perform on a contract. Provide full details related to the default or notice of default including the other party's name, and contact information.
 - iii. Formal sanctions or complaints.
 - iv. Corrective actions.
 - v. Damages, penalties, or related assessments, or payment withholds not earned. Include the estimated value of each incident with the details of the occurrence.
 - vi. Known litigation, administrative or regulatory proceedings, or similar matters.
- d. Describe the experience of all subcontractors who will be participating in work related directly to the individuals being served.
- e. Describe your experience successfully navigating a period of transition with any state clients for similar work and how you would support FSSA to successfully implement the requirements of the Scope of Work during a period of broader reform and transition.

1.a Proposal Overview



Pathway to a Future State

The State of Indiana has engaged in a reform of Indiana's Managed Long-term Services and Supports (MLTSS) programs for older adults to provide better coordinated and more effective services and supports to help enable more people over the age of 60 and on Medicaid to age at home. From our similar reform efforts with other states, such as Pennsylvania, New York, and Texas, we understand the Pathways for Aging Member Support Services (MSS) will be a rapidly maturing program. The future state requires several different programs and entities to work together to support a consistent and positive member experience across the entire MLTSS landscape.

Throughout this proposal, we highlight key elements of our solution that are tailored to Indiana and demonstrate our pledge to your goals. These include our understanding and commitment to providing conflict-free and person-centered services and supports; smooth transitions for members into the program or among providers, settings, or coverage types; and timely access to services. Throughout our response, we use the following icons to emphasize our key components of our solution design:

**Supporting Members
Through Complex
Programs**

No one should
struggle
accessing critical
healthcare
services and

support alone. Our thorough understanding of the Indiana Pathways for Aging program, and the State's diverse culture, health, and member communication needs, is informed by over 21 years of benefit support service to Hoosiers. Our understanding starts with the experience our leadership team and project advisors bring to inform our processes and approach to meeting the Family and Social Services Administration's (FSSA) requirements.

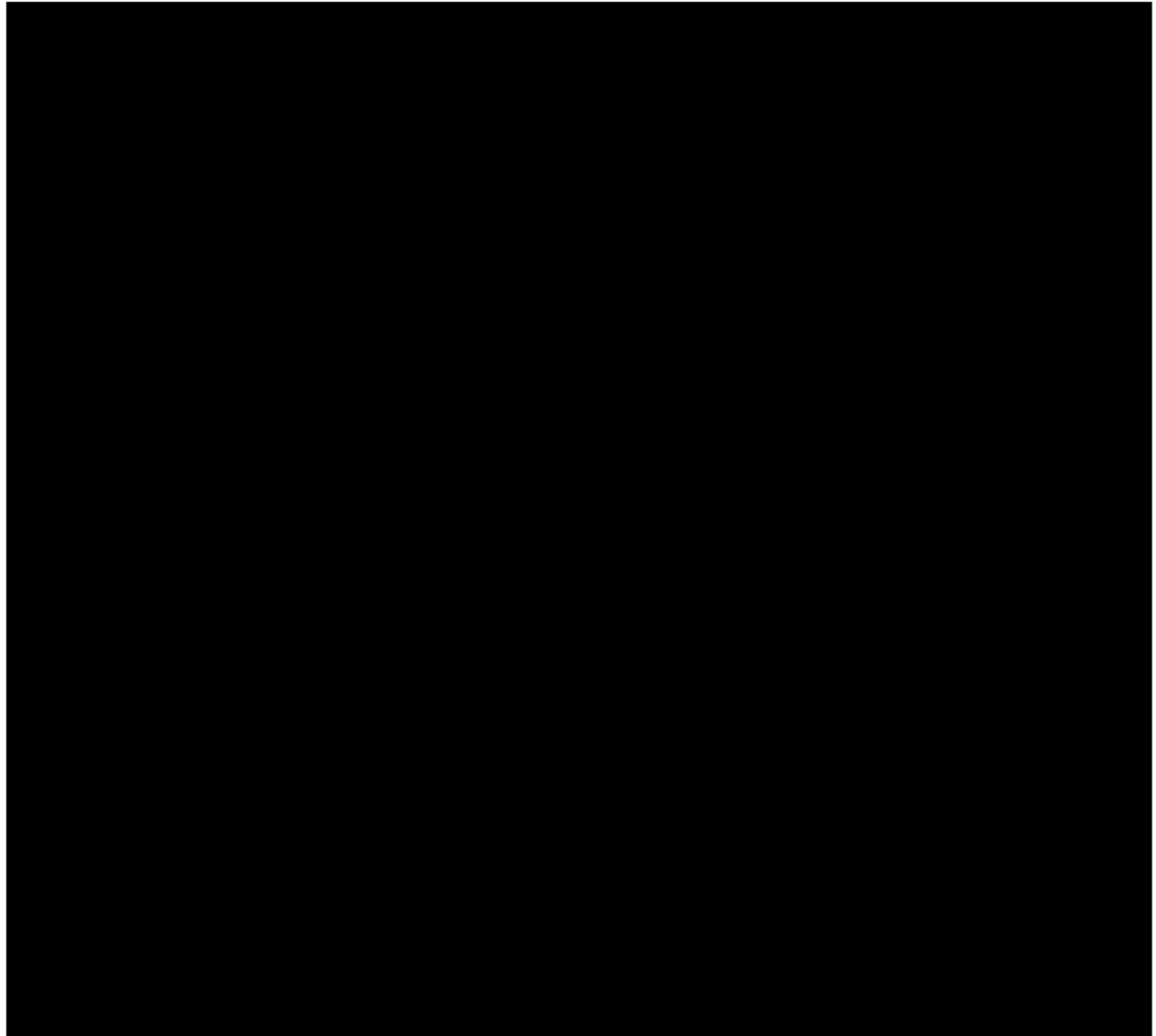
We will collaborate respectfully with each individual as they navigate complex MLTSS programs. We will deliver consistent, person-centered service that equips members with accurate, timely, and understandable information that:

- Empowers members and provides them with a confident understanding of the process and their role
- Coordinates messaging across all MLTSS-related entities to deliver consistent, easy-to follow messaging regardless of who the member reaches out to for support

**Streamlined
Collaboration Across
MLTSS Landscape**

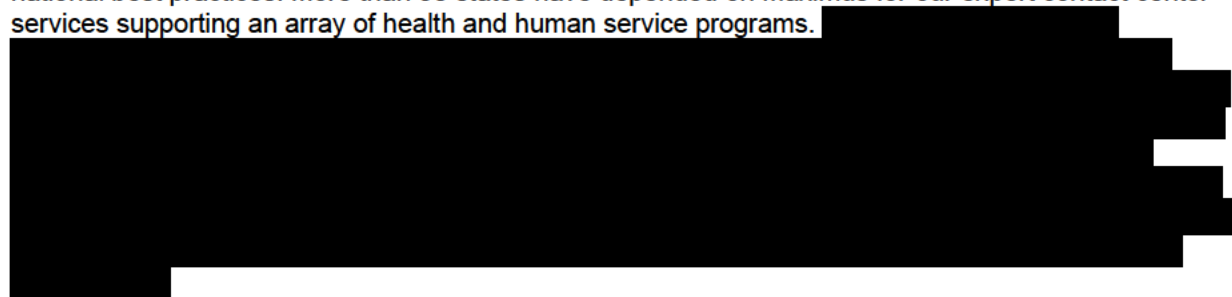
- [Redacted]
- [Redacted]

[Redacted]



1.b Company and Staff Background and Experience

We successfully provide conflict-free, person-centered support services across the country informed by national best practices. More than 30 states have depended on Maximus for our expert contact center services supporting an array of health and human service programs.



- [Redacted]
- [Redacted]

- [REDACTED]
- [REDACTED]
- [REDACTED]

At the heart of our solution is our dedicated project leadership team who, combined, bring more than 60 years of helpline and member support services expertise. Our team's cumulative history encompasses our nationwide and Indiana-specific experience and in-depth quality oversight and management. Together, we understand the State's needs and are poised to provide Member Support Services, delivering person-focused services, and supporting future program evolution. *Exhibit 1.b-1: A Strong and Committed Leadership Team – Experienced in Success* highlights our skilled leadership team. We describe our team in more detail in *Section 10: Staffing*.

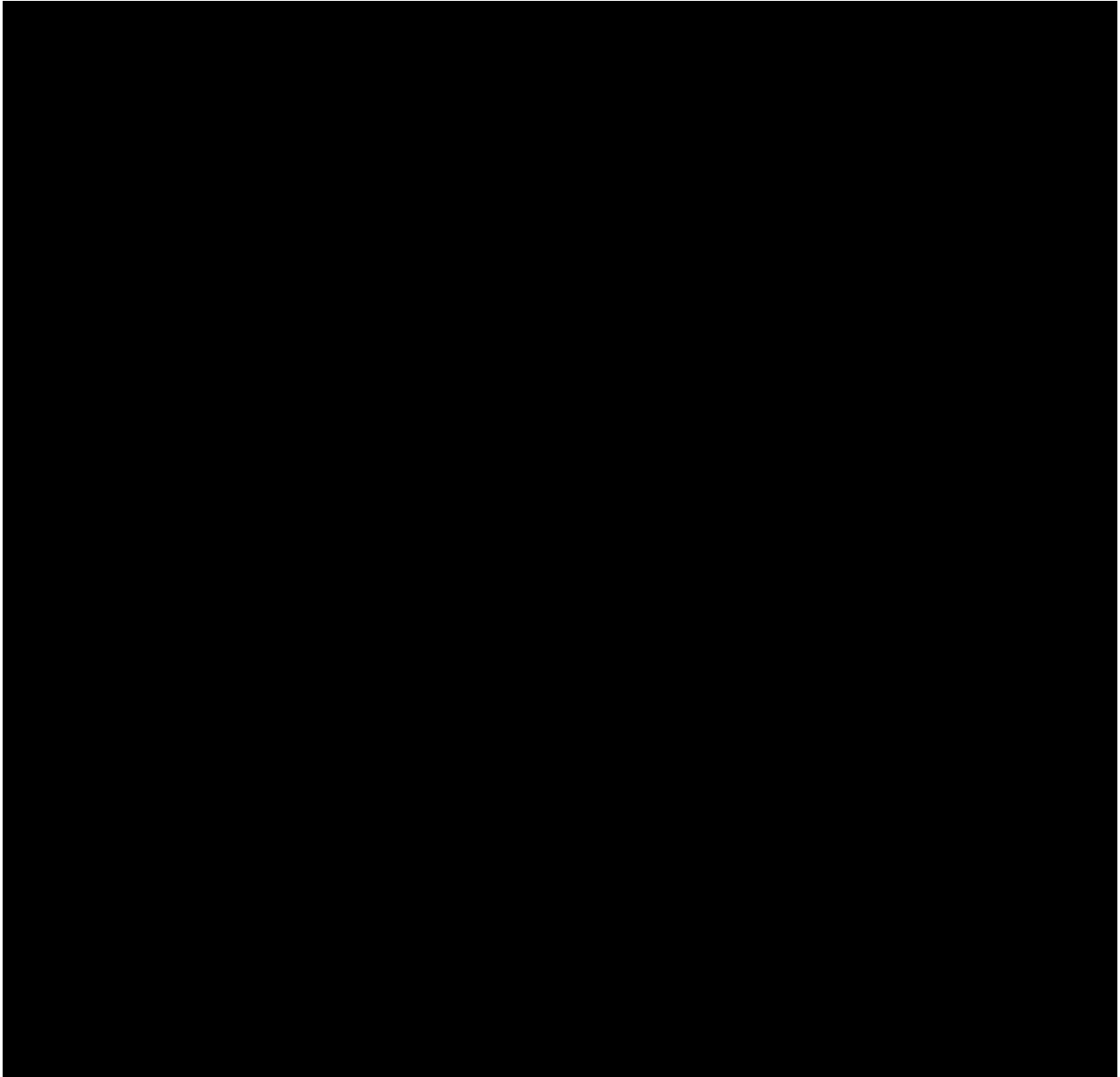


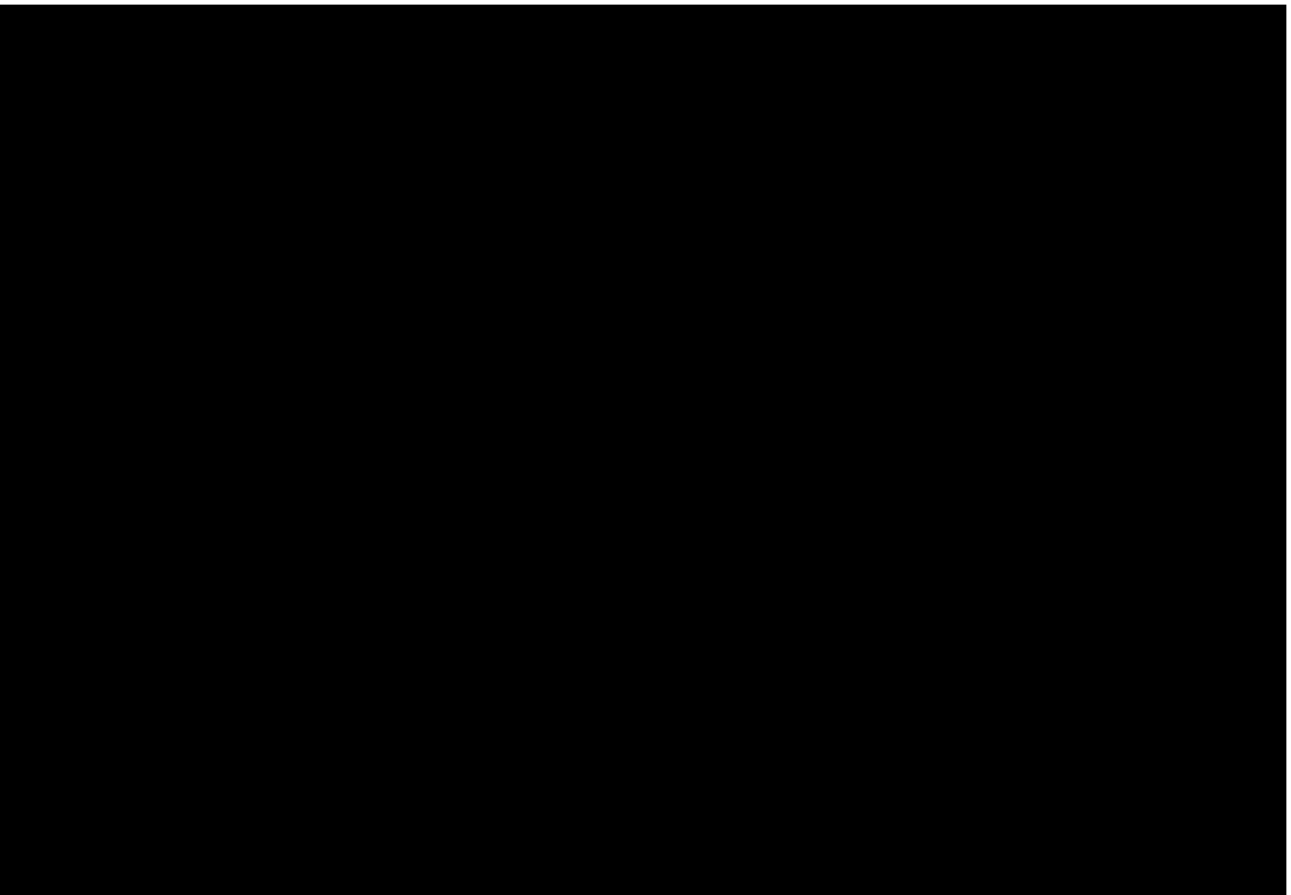
Exhibit 1.b-1: A Strong and Committed Leadership Team – Experienced in Success. *Our strong leadership team's hands-on experience working with MLTSS populations nationwide will instill a culture of service excellence throughout the organization.*



Many of our leaders, including those overseeing the Member Support Services project, excelled in their roles and were promoted from within Maximus, bringing the benefit of both historical knowledge and future-facing problem-solving. Our teams reflect the precise skills needed to foster excellence in helping members navigate the grievance and appeals process. Maximus has a deep bench of expert staff and specialty teams available to intensively engage during implementation. They will also re-engage throughout the life of the contract as needed. We offer FSSA a comprehensive staffing model that provides project-specific staff, supported by extensive corporate resources. In the following exhibits, we present an overview of our staffing structure and the composition of skills and expertise that that will support the services required by FSSA.

1.b.i Program Experience to Replicate and Meet Indiana's Goals

Indiana needs a single point of contact to help aging Hoosiers with complex care needs, multiple conditions, and/or physical disabilities navigate the new managed care continuum for LTSS. Our experience providing these services enables us to provide comprehensive Member Support Services. Our experience providing similar services across many states is shown below in *Exhibit 1.b.i-1: State Member Support Services and Helpline Experience Within the Past Five Years*.



[REDACTED]

[REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]

1.b.ii Programs We Intend to Initiate Specific to Indiana as Part of This Contract



Supporting Members Through Complex Programs

The transformation from LTSS to MLTSS can feel disruptive to stakeholders. Members experience a new pathway to access, choose, and receive the services they need. Providers experience new policies governing how they deliver services to members.

Our primary responsibility in delivering member support services is to provide those services in a well thought out, person-centered, and timely manner. Implementing and providing rapid access and easy-to-understand member support and education will require thoughtful collaboration with multiple entities playing a role in the new system of care. We are ready for that collaboration. We will create tools to teach and guide our staff to master their helpline responsibilities.

[REDACTED]

As with Indiana's earlier redesign of the LTSS preadmission processes, we will collaboratively help FSSA implement reliable mechanisms to help members navigate the MLTSS continuum of support.

1.b.iii Examples of How We Have Worked with Other States in a Collaborative Manner to Address Changing Program Needs and Priorities

FSSA requires a contractor who can collaborate with and support them during needed program changes. We have been that collaborative partner for Indiana and look forward to supporting you again with this additional scope. Below we detail examples of other state programs where we collaborated to address changing program needs.

[illegible]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]



1.c Contract Terminations, Defaults, Sanctions, Corrective Actions, Damages, or Litigation

For more than 40 years, Maximus has been solving the complex challenges of government programs. We take our partnerships and responsibility very seriously to deliver transformative technology services, digitally enabled customer experiences, and clinical health services that change lives. With that responsibility comes meeting — and often exceeding — contractual performance standards. Through our comprehensive performance management approach, we focus on assessing project health based on historical performance, current project data, and analytics to minimize contractual performance issues.

Until 2017, Maximus US Services, Inc. did not formally track or compile performance penalties on all contracts held across the company. The tracking effort was expanded in 2022. The material provided is based on the information collected since 2017 and represents our best efforts to compile as much information as possible relevant to the requirement. To the extent we discover additional information after the bid submission, we will supplement as necessary.

1.c.i Contract Terminations

In the past five years, Maximus has not had a contract that resulted in termination for services relating to those contemplated by Indiana's RFP.

1.c.ii Defaults or Failure to Perform

In the past five years, Maximus has not been subject to default, received a notice of default, nor failed to perform on a contract for services that relate to those contemplated by Indiana's RFP.

1.c.iii Formal Sanctions or Complaints

In the past five years, Maximus has not been the subject of formal sanctions or complaints for services that relate to those contemplated by Indiana's RFP.

1.c.iv Corrective Actions

We have details regarding occurrences of corrective action plans (CAP) we have incurred for services that relate to those contemplated by Indiana's RFP, within the past five years in *Appendix F.3: Corrective Action Plan and Penalty Details*.

1.c.v Damages, Penalties, or Related Assessments, or Payment Withholds Not Earned

We describe in *Appendix F.3: Corrective Action Plan and Penalty Details* instances for services that relate to those contemplated by Indiana's RFP within the last five years of damages, penalties, or related assessments, or payment withholds not earned. Details including the estimated value of each incident are provided.

1.c.vi Known Litigation, Administrative or Regulatory Proceedings, or Similar Matters

In the past five years, Maximus has not been party to litigation, administrative or regulatory proceedings, or similar, for services that relate to those contemplated by Indiana's RFP.

1.d Experience of Subcontractors

Through partnerships with well-qualified subcontractors, many of whom we partner with today, we will bring effective and efficient service to FSSA. We use the expertise and strategic contributions of each supplier to strengthen the quality of our service to FSSA and the Hoosiers it serves.

We understand the importance Indiana places on equal subcontracting opportunities being provided through its solicitations to minority, woman, and Indiana veteran business enterprises. Therefore, we identified qualified partners to meet FSSA's contract goals of 8% for Minority Business Enterprises (MBE), 11% for Woman's Business Enterprises (WBE), and 3% for Indiana Veteran-owned Small Businesses (IVOSB). All subcontractors we selected are MBE, WBE or IVOSB entities who can readily provide contract services in Indiana.

We will contract with the following staffing partners who will provide staff augmentation services:

- [REDACTED]
- [REDACTED]
- [REDACTED]

We will use the following subcontractor for printing and mailing services:

- [REDACTED]

We will be fully responsible for the efforts and performance of any subcontractor. We only select subcontractors who meet our rigorous quality standards, and we follow detailed corporate and project-level procedures to confirm their performance continues to meet our standards and yours throughout the life of the contract. Please refer to our proposal response in *Section 16: Subcontracting* for full details.

1.e Experience Navigating a Successful Transition

[REDACTED]

- [REDACTED]
- [REDACTED]

- [REDACTED]

[REDACTED]

- [REDACTED]

[REDACTED]

- [REDACTED]

- [REDACTED]

[REDACTED]

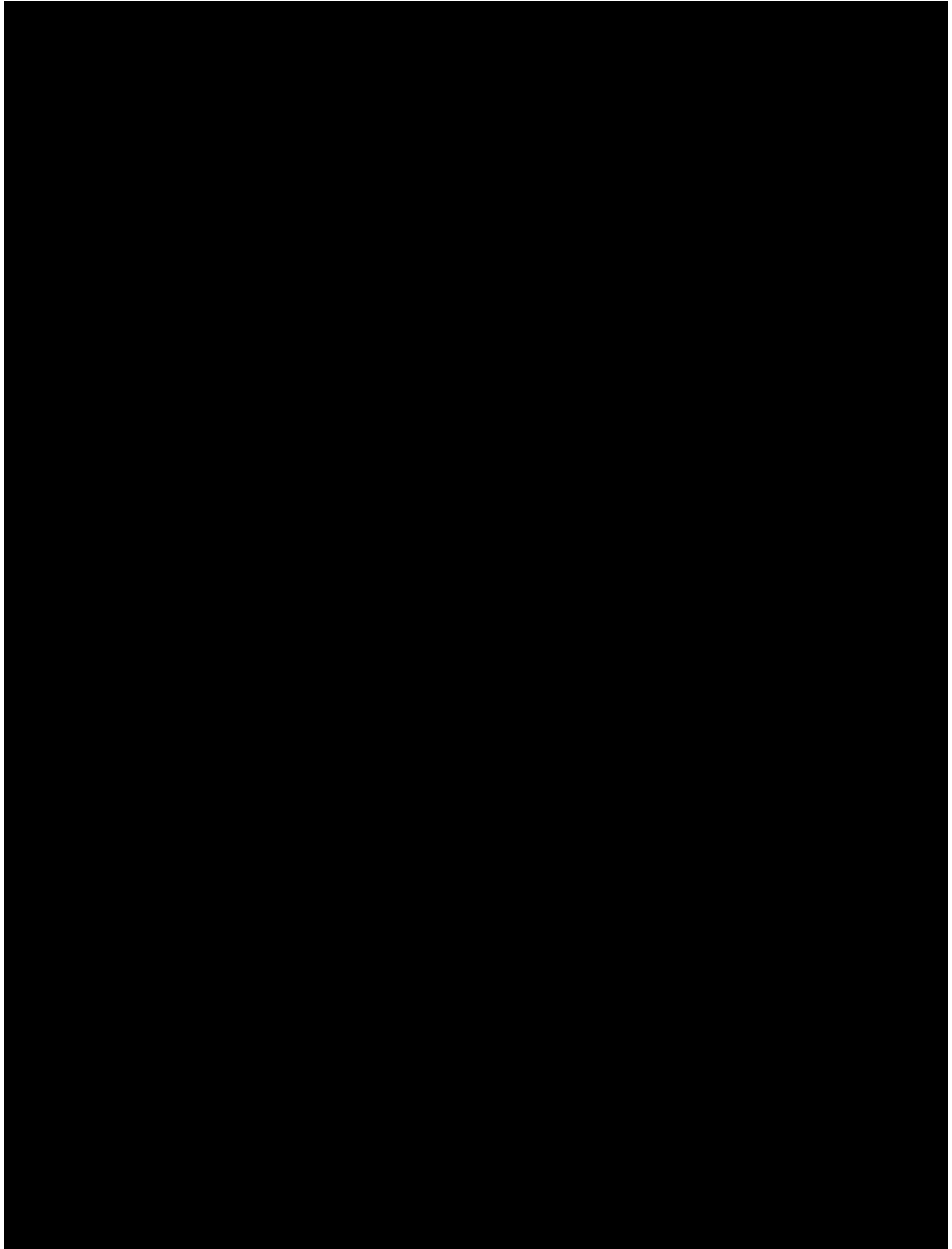
- [REDACTED]

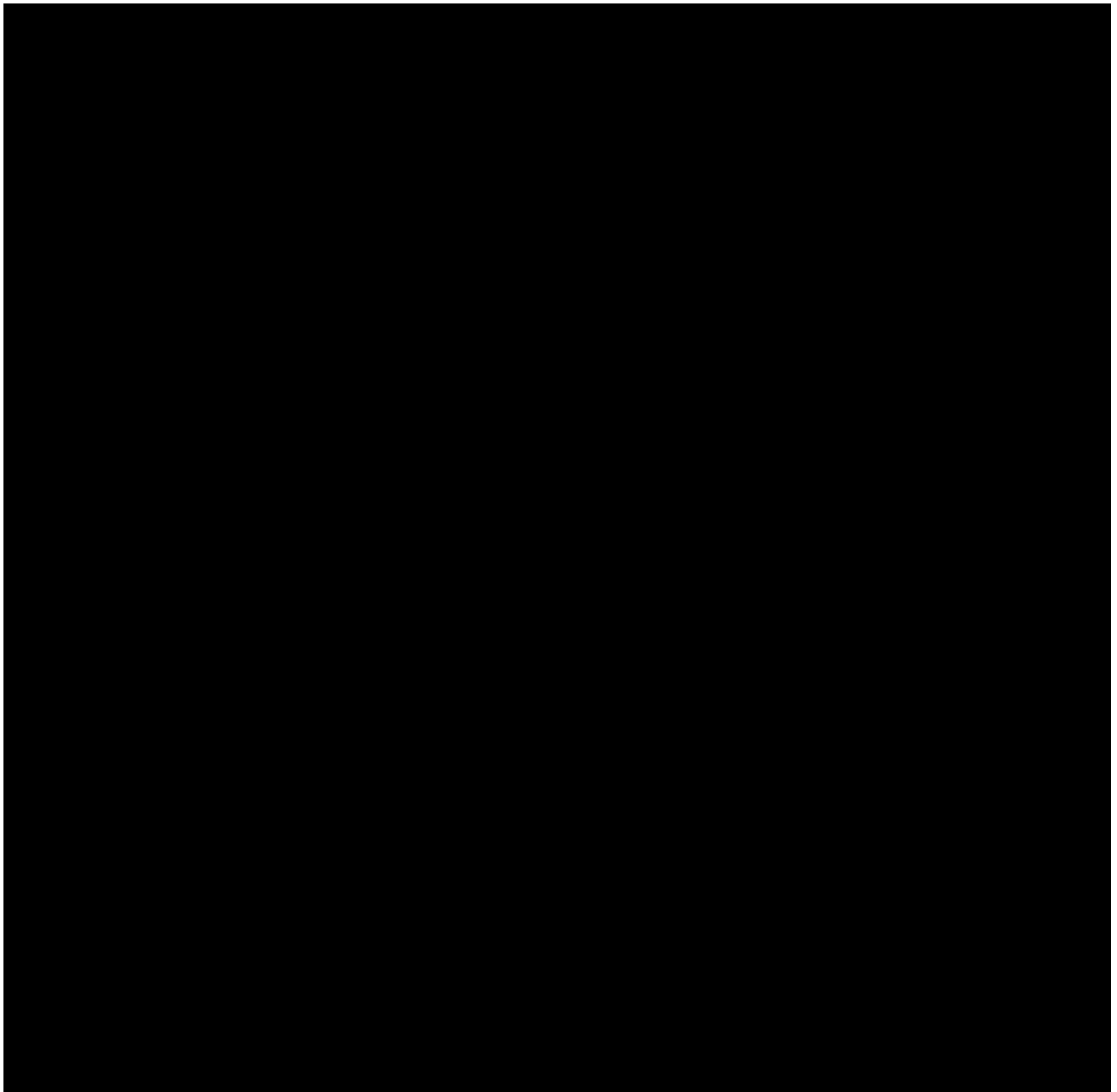
- [REDACTED]

- [REDACTED]

FSSA will benefit from our lessons learned navigating MLTSS transitions. *Exhibit 1.e-1* highlights programs relevant to the Indiana MLTSS transition. The table below provides details on the challenges or problems encountered with the transition and the steps taken to resolve the issues.

[REDACTED]





2. Background

Confirm your acceptance of the requirements in Section 1 as written, and please describe your approach to meeting all the requirements as defined in Section 1 of the Scope of Work. Specifically describe your approach to the following items:

- a. Beneficiary support services duties as defined in 42 CFR § 438.71
- b. Serving a population of adults over the age of 60 including those accessing long-term services and supports
- c. Meeting the State's defined timeline for readiness implementation

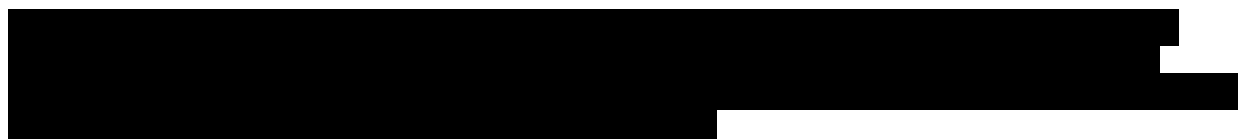
Maximus accept the requirements in RFP Attachment K, Section 1, Background, as written. We describe our approach to meeting all the requirements identified in Section 1 of the Scope of Work in our Technical Proposal's *Section 2: Background* below.

Through our 21 years of partnership with FSSA to connect Hoosiers to benefits and services they need, we will deliver conflict-free, person-centered service to Hoosiers navigating complex care environments.

2.a Beneficiary Support Services




**Streamlined
Collaboration Across
MLTSS Landscape**



A smooth transition to Pathways for Aging requires collaboration across Indiana state agencies, participants, participant advocates, MLTSS plans, and health care and long-term care providers. Maximus has a demonstrated history in developing and sustaining such collaborations, such as those projects through which nearly all of Indiana's Medicaid population is served.

We also understand the importance of making members aware of MLTSS and providing access through a variety of mediums, including digital and traditional mail outreach. Our solution includes development and management of an informational program website to assist members in the following ways:

- Provide an access point for complaints and concerns about their managed care enrollment, access to covered services, and other related matters
- Educate members about:
 - Managed long term care
 - Grievance and appeal rights under managed care
 - The State fair hearing process
 - Participant rights and responsibilities
 - Additional resources available to them, such as services provided by community based organizations (CBOs), if needed
- Help participants navigate the grievance and appeal process with their MLTSS plan, or an appeal of an adverse determination made by the managed care entity.
- Reach members and their authorized representatives in multiple ways including by telephone, internet, in-person, and via auxiliary aids and services, when requested.

Additionally, our project team has in-depth expertise in MLTSS and a strong working knowledge of the separate contractor roles with proven and effective project execution. 

2.b Population

FSSA can be confident we are prepared to successfully meet its RFP scope of work requirements given both Indiana-specific population size and unique characteristics without sacrificing timeliness or quality of service.

2.b.i Addressing Needs and Barriers of Aging and Disabled Individuals



Supporting Members Through Complex Programs

We specialize in helping states serve populations with the most complex needs. By assisting one out of every two Medicaid managed care beneficiaries across the United States, we routinely interact with individuals who are aging or are in need of long-term services and supports. To serve these individuals well, we train staff to tailor their

messaging to meet the individual's unique needs. Our person-centered approach to adapting our interactions to individual needs applies to the way we:

- Offer a variety of communication methods including phone, email, web, or in-person
- Interact with members who contact us in a manner that supports each person's cultural, linguistic, and disability-related needs and preferences
- Explain program requirements, present options, and support informed choices without bias
- Offer in-person services, when requested, at the member's convenience and preferred location
- Explain the member's right to submit a grievance or appeal an adverse decision concerning the benefits they receive, as well as facilitate warm handoffs and provide timely follow-up when needed

2.c Timeline

We are confident we will meet the State's timeline for readiness implementation as your Member Support Services (MSS) contractor. Please refer to our proposal response in *Section 13: Incoming and Outgoing Transition Activities* for more detail.

2.c.i Meet the State's Timelines for Readiness and Implementation



Streamlined
Collaboration Across
MLTSS Landscape

[Redacted text]

[Redacted text]

[Redacted text]

[Redacted text]

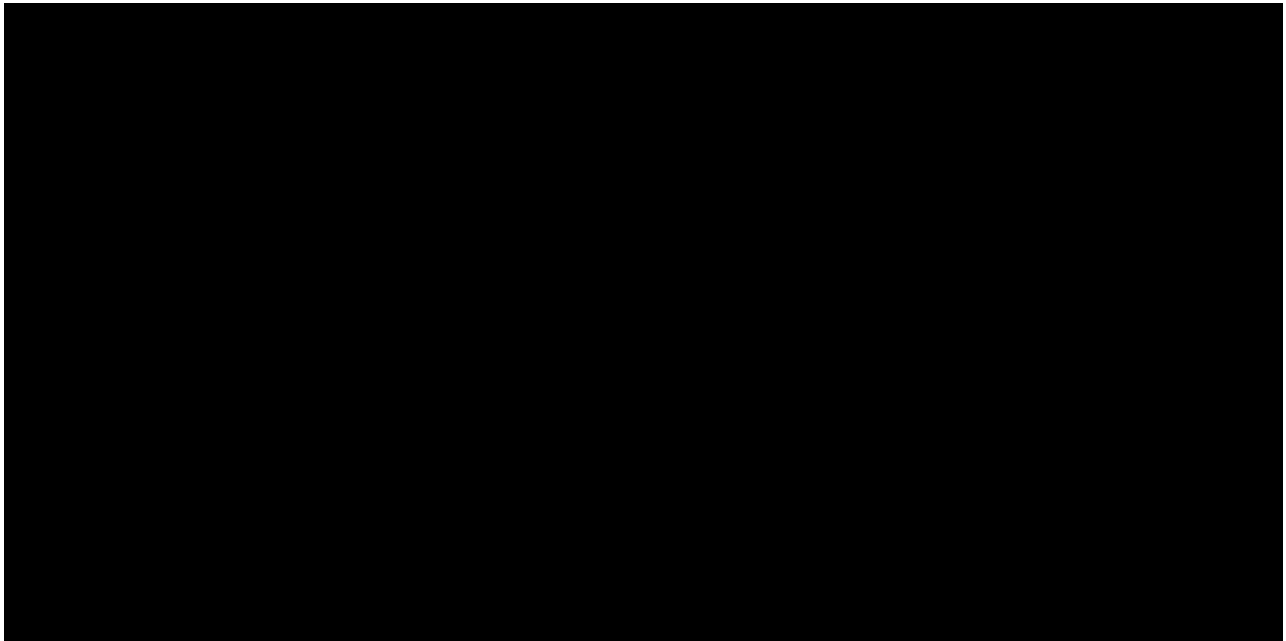
Our implementation team will conduct a series of meetings with State staff to:

- Finalize the implementation plan
- Coordinate the plan with the State's activities, needs, and objectives
- Verify the timeline for allocating resources
- Establish communication, meeting, and reporting protocols to facilitate a successful implementation

Maximus will be proactive with implementation planning to predict and responsively adjust to all State concerns, questions, and feedback.

[Redacted text]

[Redacted text]



We will complete requirements for gathering systems and operational development sufficient to begin engagement in comprehensive transition activities and readiness, such as material development and public/member messaging, in the first quarter of 2024. Please refer to our *Section 13: Incoming and Outgoing Transition Activities* for further detail.

3. General Responsibilities

Confirm your acceptance of the requirements in Section 2.1, and please describe your approach to meeting all the general requirements identified in the Section 2.1 of the Scope of Work. Specifically, describe your approach to:

- Advocating on behalf of a member according to the member's unique and expressed Issues, concerns, and/or needs
- Conducting analysis of complaints and Issues raised to the MSS Contractor related to MLTSS plans and aligned Duals-Special Needs Plans (D-SNPs)
- Identifying and reporting to State on systemic problems based on the Issues members are expressing
- Determining what baseline Medicare knowledge and awareness the MSS Contractor must have to be able to serve members, considering that a large percentage of future Pathways members will be duals

Maximus accepts the requirements in RFP Attachment K, Section 2.1, General Responsibilities, as written. We describe our approach to meeting all the requirements identified in Section 2.1 of the Scope of Work in our Technical Proposal's *Section 3: General Responsibilities* below.



Supporting Members Through Complex Programs

Members need to be heard and have their needs addressed thoroughly, at their request and direction. As a vendor with conflict-free status, we support members transparently and without bias. Each of our existing Indiana projects has its own scope of work, its own accountable leadership, and operates independently from our

other projects. Our vetted process means we remain conflict-free in the future.

Our proposed systems and operational workflows for Pathways for Aging MSS will enable us to analyze, identify, and report on participant complaints and potential systemic issues. And we bring distinct expertise with Medicare knowledge and awareness. In fact, we meet with the Centers for Medicare & Medicaid Services (CMS) on a quarterly basis to confirm our policies with our state clients are up to date.

3.a Member Advocacy

Member support needs to be person-centered, and member driven. It must involve the individual designees the member requests. Members have to be treated with respect and dignity. Members have a voice, and we communicate with them in their preferred method and setting. We will also advocate on the member's behalf by reaching out to other entities as appropriate.

[Redacted]

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

[Redacted]

3.b Analysis of Complaints and Issues

As your MSS contractor, we will analyze any complaints or issues raised by members related to MLTSS plans and aligned Duals-Special Needs Plans (D-SNPs). Whenever a member lets us know of an issue, we will fully perform our due diligence to reach a satisfactory resolution.

As your MSS contractor, we will use trend analysis to design and adapt our systems and processes to reduce future grievances and appeals. We discuss these reporting opportunities in the section below.

3.c Identifying and Reporting Systemic Problems

We will identify, analyze, and report to the State on any systemic problems based on concerns expressed by members on their health plan. These reports will include statistical and narrative information regarding the feedback received from members tracked through ConnectionPoint.

We provide an illustrative example of a report on member complaints in *Appendix F.2: Sample Performance Reports*. These data points enable us to quantify member complaints over time and investigate contributing factors.

We can produce this monthly report in aggregate, as well as for member issues by managed care entity (MCE) and by county. Through this data, we will improve our own processes and services and provide the State with transparency and insight into member experiences from across their health plans.



Spotlight

3.c.i Preventing Complaints Before They Happen

[REDACTED]

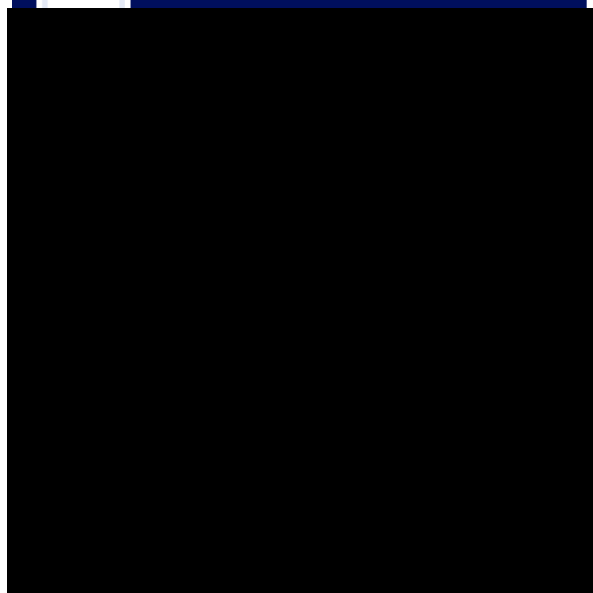
[REDACTED]

[REDACTED]

3.d Medicare Knowledge and Awareness

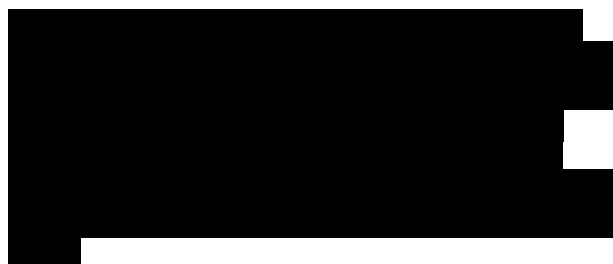


At-A-Glance



We are the only contractor that brings together all required qualifications and experience, including Medicare processes and systems, as well as a deep understanding of LTSS services.

Not only will our project staff have a baseline expectation of Medicare and dual eligibility knowledge, but they will also have complete awareness, training, and resources available to bolster our advocacy.



They will possess a Juris Doctorate degree from an accredited law school and have an active Indiana law license in good standing and bring professional expertise in Medicaid and long-term care law.

Our expert staff give us direct insight into the LTSS population. Our depth and breadth of knowledge is local to Indiana and the Hoosiers we serve. At the same time our knowledge pulls from the best practices gleaned from our staff performing in other states.

We will bring this operational excellence derived from our local and national experience to FSSA as we support and advocate for members through MSS.

4. Access Point for MCE Education & Member Issues

Confirm your acceptance of the requirements in Section 2.2 and please describe your approach to meeting all the requirements identified in the Section 2.2 of the Scope of Work. Please describe how your approach to MCE education and member Issues would address day-to-day Issues, as well as changing program needs and priorities. Make sure to address all components described in Section 2.2 of the Scope of Work, including but not limited to how you would approach the following:

- a. General Education and Understanding Managed Care
 - i. Collecting and providing relevant, current, and accurate information to assist members with navigating Issues with their MCE
- b. Rights and Responsibilities of Members
- c. Education and Support for Changing MLTSS Health Plans
- d. Member Issue Resolution
 - i. Education around grievance and appeals processes
 - ii. Maintaining consistency with the member's preferences and desired outcomes (person-centeredness)
- e. Member Issue Management
 - i. Issue management processes
 - ii. Proposed timelines for Issue assignment, handling, and resolution
 - iii. Issue reporting to the State
- f. Provider Access Support
- g. Care Coordination and Service Coordination Support
 - i. Outreach and coordination with care coordinators, service coordinators, MCEs, Medicare Advantage Organizations, and providers according to the member's preferences, with the member's informed consent and/or at the member's request as part of Issue resolution
- h. Plan Change and Disenrollment

Maximus accepts the requirements in RFP Attachment K Section 2.2, Access Point for MCE Education & Member Issues, as written. We describe our approach to meeting all the requirements in Section 2.2 of the Scope of Work in our Technical Proposal's *Section 4: Access Point for MCE Education and Member Issues below*.



4.a General Education and Understanding Managed Care



Supporting Members Through Complex Programs

We embrace our critical role to educate members on understanding and navigating their managed care. By providing appropriate education, we empower the member to take an active role in their decisions.


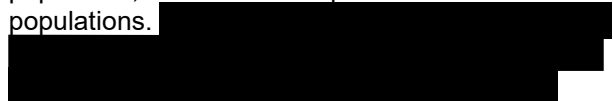
To provide relevant, current, and accurate information to members, we will work with community partners that support the LTSS population. Also, we will continue to build on the community relationships we

established through other Indiana programs including MCEs, AAAs, and statewide CBOs. We have the relationships across the State to reach out to these organizations if and when needed.

Throughout our statewide MSS program, we will provide members, or their designee(s) with:

- Information on all benefits, coverage and access rules and procedures. This includes information on the specific Medicare service delivery system, such as traditional Medicare, Medicare Advantage, and Special Needs Plans.
- Medicaid and managed care information, education, and referrals.
- A warm hand-off to the member's MCE when further plan information is needed. We will encourage positive interaction between the member and their MCE. If a member requests a follow up, we will note this action in ConnectionPoint and follow up to confirm the MCE met their needs.
- Other hand-offs and referrals, as detailed in RFP Section 4, when a member expresses needs or issues unrelated to their MCE.

Our staff will provide all required member support services because we understand the individuals served by this program, including the dual eligible population, have more complex needs than other populations.



[REDACTED]

[REDACTED]

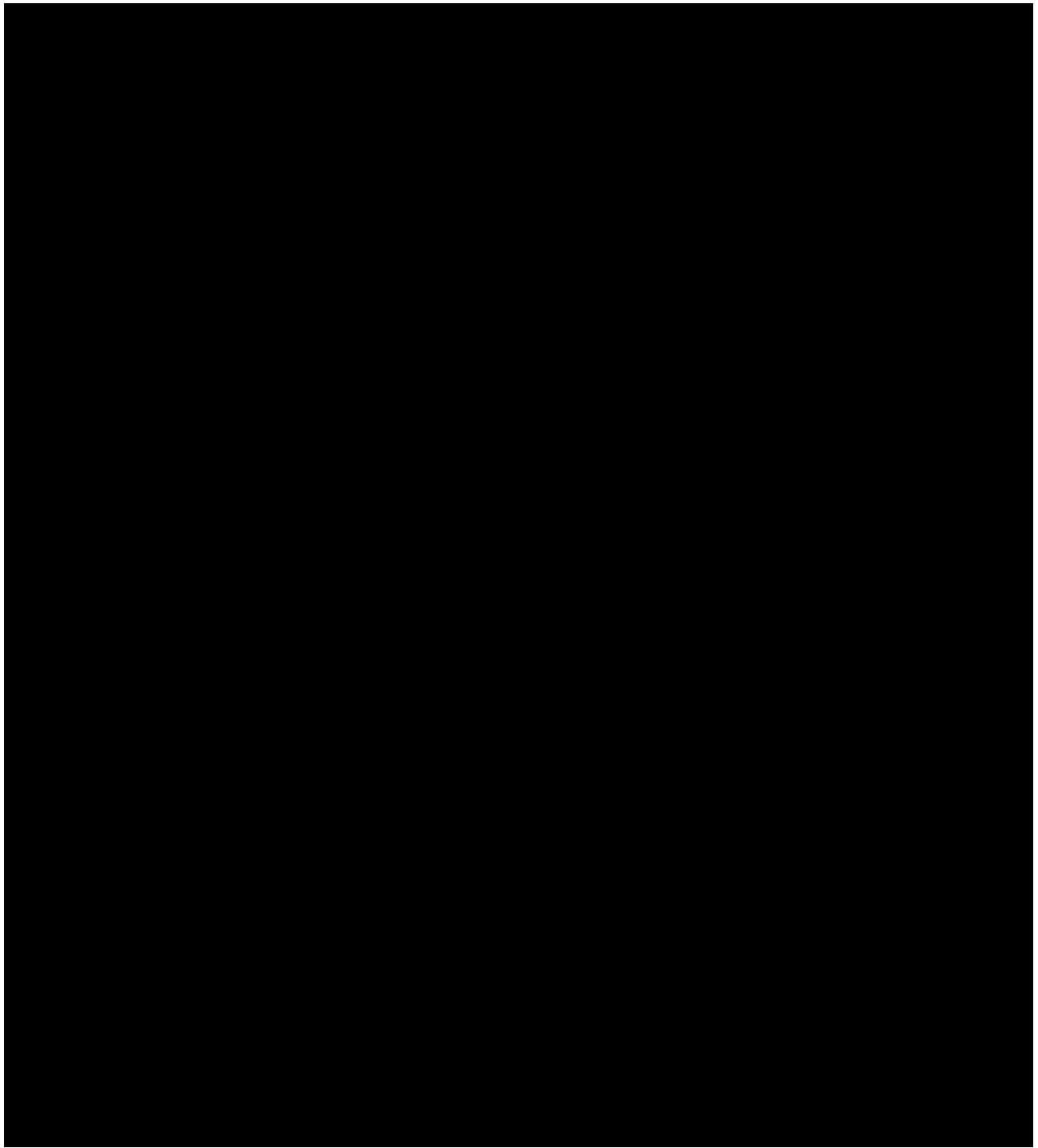
[REDACTED]

- [REDACTED]

- [REDACTED]



Supporting Members
Through Complex
Programs



4.b Rights and Responsibilities of Members

We will provide education and information on members' rights and responsibilities under managed care per 42 CFR § 438.100. We understand an enrollee of an MCO, PIHP, PAHP, PCCM, or PCCM entity has the right to:

- Receive information in accordance with § 438.10
- Be treated with respect and with due consideration for his or her dignity and privacy
- Receive information on available treatment options and alternatives, presented in a manner appropriate to the enrollee's condition and ability to understand (The information requirements for services that are not covered under the contract because of moral or religious objections are set forth in § 438.10(g)(2)(ii)(A) and (B).)
- Participate in decisions regarding his or her health care, including the right to refuse treatment
- Be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation, as specified in other Federal regulations on the use of restraints and seclusion
- If the privacy rule, as set forth in 45 CFR parts 160 and 164 subparts A and E, applies, request and receive a copy of his or her medical records, and request that they be amended or corrected, as specified in 45 CFR 164.524 and 164.526
- Exercise his or her rights, and that the exercise of those rights does not adversely affect the way the MCO, PIHP, PAHP, PCCM or PCCM entity and its network providers or the State agency treat the enrollee

In addition, an enrollee of an MCO, PIHP, or PAHP has the right to be furnished health care services in accordance with §§ 438.206 through 438.210.

4.c Education and Support for Changing MLTSS Health Plans

Through our extensive LTSS experience, we learned the crucial differences between educating members on their ability to change health plans, and providing Choice Counseling. FSSA can rest assured that our staff will have the training, resources available, and awareness to understand when and where to provide warm hand-offs for members, if needed.



At-A-Glance

Benefits to FSSA of our LTSS expertise:

- We can immediately fix any potential issues
- We will easily communicate change and trends to the State
- We provide fast access to our leadership team across programs to accomplish what's needed

4.d Member Issue Resolution



Supporting Members Through Complex Programs

Through our approach to MSS we have the people, established relationships, and processes in place to provide the access point to help members navigate any complaint, grievance, or appeal they may have following their managed care enrollment. This includes:

- Education on grievance and appeal rights under managed care, the state fair hearing process, rights and responsibilities, and additional resources outside of the managed care entity
- Assistance navigating the grievance and appeal process within the managed care entity (MCE)

We serve members as a resource as they navigate the complaint, grievance, and fair hearing processes. This includes referrals to legal representation and other supportive resources. We contact members and explain the complaint, grievance, and hearing process timeframes, as well as the reason for the appeal, potential ways to resolve the appeal, and the appeal process. In performing these educational processes, we maintain consistency with the member's preferences and desired outcomes. We confirm we will adhere to the RFP requirements regarding member issue resolution in RFP Section 2.2.4.

4.e Member Issue Management

In virtually all our customer service centers serving public health insurance programs across the country, we receive, document, and respond to member issues. We facilitate and foster communication among affected stakeholders throughout the process to reach the most equitable resolution. Our member issue management resolution process includes the following:

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

[Redacted]

[Redacted]

[Redacted]



Spotlight

[Redacted]

- [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
 - [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

[REDACTED]

Maximus always performs our due diligence on member complaints regarding our services. We will report separately to the State on member complaints about the MSS, and respond to the necessary parties within required time frames. Additionally, we will report to FSSA when issue resolution services and collaborative referral entities have been exhausted but the issue was not satisfactorily resolved. Please refer to our response to *Section 11: Monitoring and Reporting Requirements* for full detail.

4.f Provider Access Support

As FSSA's contractor for MSS, we will assist members and their designee with accessing Medicaid and Medicare benefits. When authorized, we will help the member overcome obstacles with access by conferring with their care or service coordinator.

Member advocacy efforts include warm hand-offs to the MCE or companion Dual Eligible Special Needs Plans (D-SNP), when applicable. We will help the member with provider issues including prior authorizations and medical referrals to specialists.

Access assistance efforts will also include policies and procedures in place to refer members to the MCEs, when requested, as well as help obtain provider directories and information to assist a member in accessing their preferred providers, and in gathering detailed information about the provider network.

4.g Care Coordination and Service Coordination Support



Streamlined Collaboration Across MLTSS Landscape

Member advocacy doesn't exist in a silo. Our approach to member advocacy is successful because we actively listen to members and stakeholder groups and address their needs. Through coordination with the member's stakeholder groups, we will provide outreach and bridge gaps in assistance according to the member's preferences,

with their consent, and/or at their request as part of issue resolution.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

4.h Plan Change and Disenrollment

As part of our educational services for MSS, we will provide information for members who want to disenroll from an MCE. We acknowledge that this is different from Choice Counseling, which is not part of this contractual responsibility. Choice Counseling is the role of the EB. Our staff will be fully trained on their specific role and the nuances of when to provide a warm handoff to the appropriate entity. We will provide the required educational information to members from RFP Section 2.2.8.

Through our approach, we provide advocacy for members through MSS. [REDACTED]

[REDACTED] Additionally, these tools help us to coordinate support across provider access, care, and service coordination, as well as plan changes and disenrollment.

5. Grievance and Appeals

Confirm your acceptance of the requirements in Section 2.2.3 and please describe your approach to meeting all the requirements identified in the Section 2.2.3 of the Scope of Work. Specifically describe:

- Your system and process for ~~supporting members in navigating the Grievance and Appeals process receiving and support the filing of grievances, and appeals~~, including how your system ensures all policy and processing requirements are met. Denote any steps or plans related to providing education to members who are also enrolled in an aligned D-SNP and have access to unified grievances and appeals processes.
- How you will align or create seamless processes for supporting members with ~~navigating~~ their grievances and/or appeals.

Maximus accepts the requirements in RFP Attachment K Section 2.3, Grievances and Appeals, as written. We describe our approach to meeting all the requirements identified in Section 2.3 of the Scope of Work in *Section 5: Grievance and Appeals* below.

Indiana Pathways for Aging's goal is to allow Medicaid enrollees, including those dually eligible for Medicare and Medicaid, over the age of 60 the choice to age safely at home by providing needed long-term services and supports. Maximus supports this goal and has assisted many states throughout the nation in implementing similar MLTSS programs. Moreover, we understand the important role that the MSS contractor will play in Pathways for Aging successfully achieving this objective.



Supporting Members Through Complex Programs

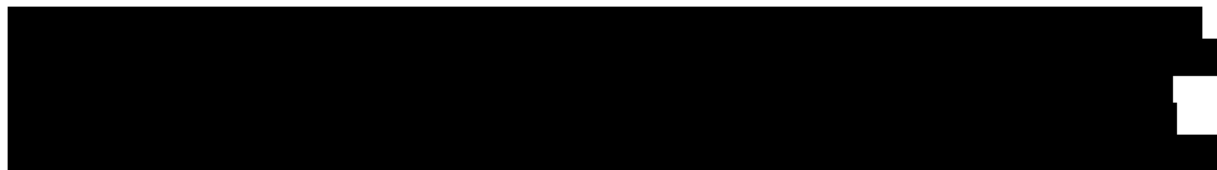
Members need support from staff who have a clear understanding of how processes differ between Medicare and Medicaid. We aim to reduce confusion between programs and processes, to provide members clear paths to meet their needs. We understand many older Hoosiers receive their medical services through Medicare and long-

term services and supports through Medicaid. Our goal is to increase coordination between these two programs. We will help members enrolled in both navigate the separate systems and rules required for each program. This will reduce confusion in the many processes members must follow, including grievances and appeals.

FSSA needs MSS to be supported by trained, skilled Member Support Specialists who understand requirements, and more importantly, the needs and rights of members in Pathways for Aging. We will train our staff on who is eligible for, and the benefits covered by, each program so that our feedback to members is clear and concise. This includes being knowledgeable of federal regulations and State requirements for Pathways for Aging. Our Member Support Specialists will have the knowledge to help members understand their rights to grieve and/or appeal when they disagree with a decision or action taken by their MLTSS plan.

5.a System and Process for Supporting Grievances and Appeals

MSS needs a streamlined system to assist members with their grievances and appeals according to policy and processing requirements. In virtually all our customer service centers serving public health programs, we educate members about their rights to grieve or appeal a decision that has been made by the State Medicaid agency or health plan. Across 19 state Medicaid programs, covering 49 million Medicaid and CHIP enrollees, Maximus supports states' fair hearing process by educating members about their fair hearing rights, process, and timeframes to request a fair hearing. Member Support Specialists will help members easily navigate the grievances and appeals processes, while considering their individual health plan.





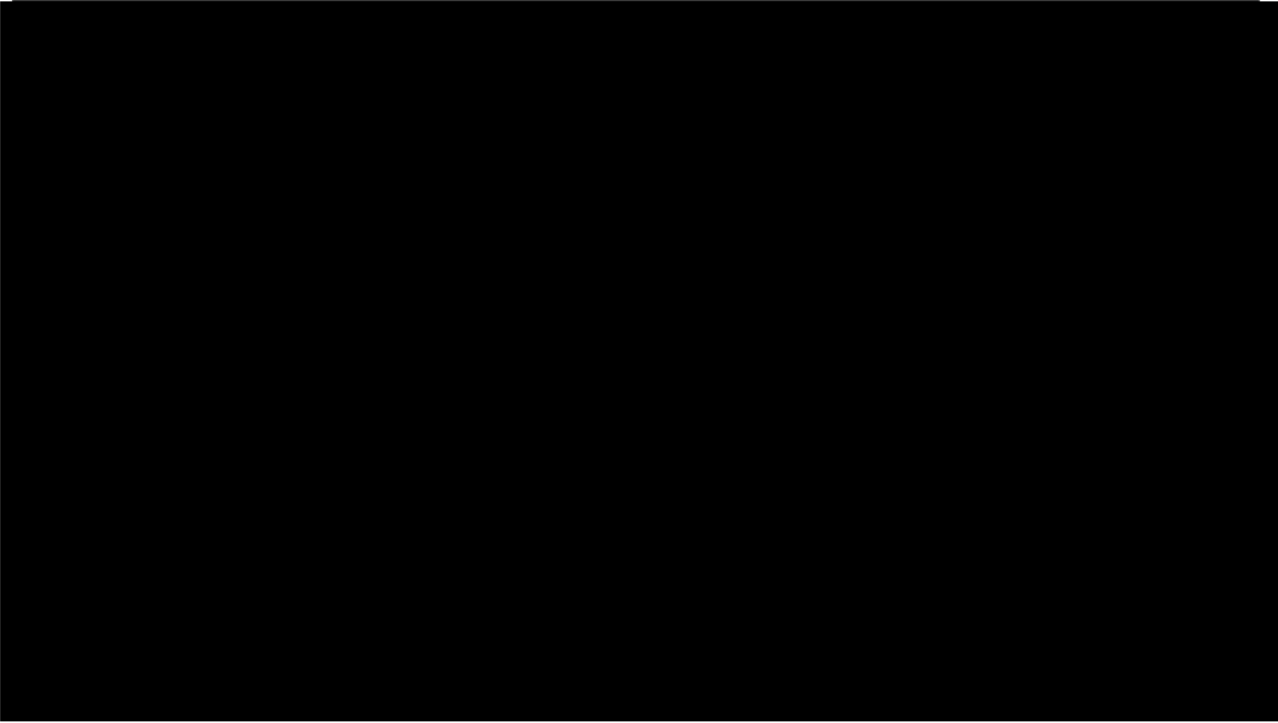
Supporting Members Through Complex Programs

Members will receive effective assistance from trained staff who understand federal and any Indiana-specific grievance and appeal policies and procedures. This includes understanding the differing processes for individuals who are eligible for Medicaid only, and the estimated 80% of Pathway enrollees who are dually eligible. This is

critical for those dual eligible members in Medicare and Medicaid because of age or disability and, therefore, eligible for the grievance and appeals process for aligned D-SNPs in accordance with 42 CFR §422.629-§422.634. Our person-centered interviewing techniques and scripts help staff identify and determine a member's support needs and choices available to them based on their Medicaid, Medicare, or dual eligible status.

Members will benefit from our multifaceted solution that guides members through a seamless, end-to-end grievances and appeals process. Our solution is built on providing MSS with:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]



In this section, we will discuss our system and process for receiving and supporting the filing of grievances and appeals. Then, we discuss aligning and creating a seamless process to navigate members through these complex processes.

[Redacted]

- [Redacted]

- [Redacted]

- [Redacted]

- [Redacted]

Should the member decide to file a grievance or appeal, we will explain each step that the member needs to follow to file with their specific MLTSS plan provider. This includes making the member aware of any applicable timeframes in which they must file and any documents they may need to submit with their grievance or appeal. We will provide the member with contact information for the MLTSS plan they are enrolled, and conduct a warm hand-off.

[REDACTED]

[REDACTED]



Supporting Members
Through Complex
Programs

[REDACTED]

5.b Aligning and Creating Seamless Processes

To provide members the best experience we will follow a grievance and appeals workflow that aligns with FSSA expectations and creates a seamless process using:

- [REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]

The grievance and appeals processes are complex, and members will feel empowered after speaking with our Member Support Specialists who will explain their rights in plain language and outline their options and next steps. Empowerment enables members to represent their interest confidently and feel that they are in charge of their pathway to a future state.

6. Communications and Helpline

Confirm your acceptance of the requirements in Section 3, and please describe your approach to meeting all the requirements identified in the Section 3 of the Scope of Work. Please describe how you plan to fulfill your Communications and Helpline responsibilities. Be sure to address all components described in Section 3 of the Scope of Work, including but not limited to:

- a. Methods of Interaction and In-person requirements
 - i. How you will specifically identify, support, and address the needs of the subset of the Pathways population who will request and/or require in-person assistance in addition to or instead of other forms of assistance; describe where and how in-person and in-home assistance will be offered
- b. Member Materials
- c. Helpline
 - i. How you will provide translation and interpreter services to non-English speakers who call the helpline during regular business hours
 - ii. Call recording
- d. Website

Maximus accepts the requirements in RFP Attachment K Section 3, Communications and Helpline, as written. We describe our approach to meeting all the requirements identified in Section 3 of the Scope of Work in our Technical Proposal's *Section 6: Communications and Helpline* below.

Hoosiers require effective and clear communication when discussing their needs and the services that may meet those needs. [REDACTED]



At-A-Glance

Our communications and helpline approach is person-centered and always geared to accurately informing members of the options based on their needs. [REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]



Supporting Members
Through Complex
Programs

In the following subsections, we discuss our approach to person-centered methods of interaction, including how our staff deliver in-person services. Specifically, we:

- Develop easy-to-understand member materials
- Maintain a culturally and linguistically competent helpline
- Providing an easily accessible website for members and their families, guardians, and representatives

6.a Methods of Interaction and In-person Requirements

Members, their families, and their legal representation need person-centered services delivered in an easy-to-understand manner. Members want to be clear on what options are available to them amidst the complexity of the MLTSS landscape. Our communication and outreach plan includes all forms of interaction to inform members of the latest policy and program information. We know how to deliver information that aligns with a member's communication needs and will interact with members via phone, email, in person, and auxiliary aids and services as requested.

Our communication and outreach plan details how we will provide in-person services to members at locations of their choosing. This includes meeting members in a facility available through our partnership with CBOs or in their home, as necessary. We will provide members with all communications options, including making them aware of in-person assistance in instances where other forms of assistance are insufficient to meet the need.

6.a.i Member Outreach

The Indiana Pathways for Aging Program requires member materials that take into consideration their members' aging lifestyles, individual health plan, and welfare situation. We will tailor member materials, and other outreach efforts, to align with the needs of the aging Hoosier MLTSS population. We will coordinate our MSS communications and outreach plan to give members and stakeholders the latest program and policy information. We will reach out to members or their designee and/or family members, legal guardians, informal caregivers, Supported Decision Makers, and/or Authorized Representatives. Outreach methods include phone, internet and email, in-person, and via auxiliary aids and services, when requested.

6.a.ii How We Will Identify, Support, and Address Requests for In-Person Assistance

Members who request in-person assistance will receive support from trained Member Support Specialists at their home or in a location in close proximity to their home if they prefer. Our Member Support Specialists are skilled and trained to identify and address the needs of the subset of the Pathways population who will request and/or require in-person assistance. This includes being knowledgeable about other forms of assistance we can provide.

[REDACTED]

■ [REDACTED]

■ [REDACTED]



Supporting Members
Through Complex
Programs

[REDACTED]

[REDACTED]

[REDACTED]

6.b Member Materials

Members will receive education and materials from our State-approved MSS outreach campaign that specifically addresses the needs of Hoosiers. Part of our outreach campaign uses tailored written materials/flyers, audio tapes, posters, ads, presentations, and other forms of communication to increase awareness of member services.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

It is important that member-facing communications be approved by Indiana prior to use, to align on messaging. We will seek State approval on all member-facing communications to meet the needs of our targeted audience.



Supporting Members
Through Complex
Programs

[REDACTED]

We will include MSS' contact information on all member-facing program materials. Our outreach and education approach will reflect the needs of members. We will seek State-approval for any materials we distribute and will not utilize or distribute modified materials prior to receipt of written approval from FSSA.

We will develop member materials that are:

- Worded at a fifth-grade reading level
- Written in plain language in English and Spanish, unless otherwise approved in writing by the State

- Clearly legible with a minimum font size of 12 point, unless otherwise approved in writing by FSSA
- Printed with our contact information, including telephone number, to allow members with limited English proficiency, limited ability to read, speak, write, or understand English, or members with disabilities to receive assistance

We will resubmit documents to FSSA for re-approval upon modification of approved materials. To keep messaging current, we will consider modifying, updating, removing, changing, or adding materials, as often as necessary. This includes updating helpline scripts, enrollment or disenrollment procedures, website content, education materials, outreach activities, presentations or other administrative or operational processes. We will incorporate feedback or broader changes to the Pathways for Aging Program to verify we have the latest policy and program information for members.

Members will receive a written copy of our materials, if requested. We will send requested written materials to the member within five business days of request, except as otherwise noted in the Scope of Work. We will inform members that information is available upon request in alternative formats and how to obtain them. We acknowledge that FSSA defines alternative formats as braille, large font letters, audiotope, prevalent languages, and verbal explanation of written materials.

Members who require braille as an alternative format for receiving member materials will receive materials in braille, as requested. [REDACTED]

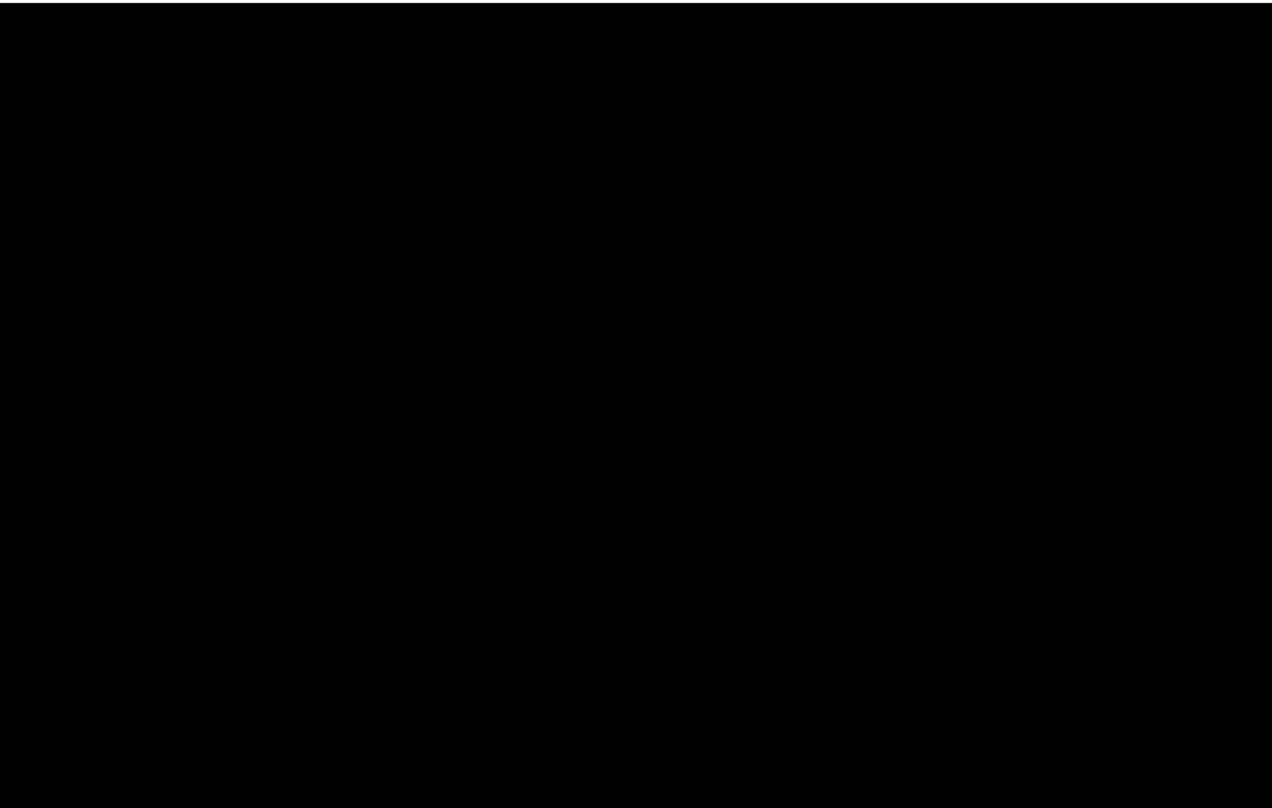
[REDACTED] As required in the RFP, we will mail the alternate version of the document in no more than seven business days from the date of the request.

6.c Helpline



By choosing Maximus, FSSA will receive a helpline operations contractor with unmatched experience in the industry having stood up and managed helplines for state and federal projects across the U.S., including:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

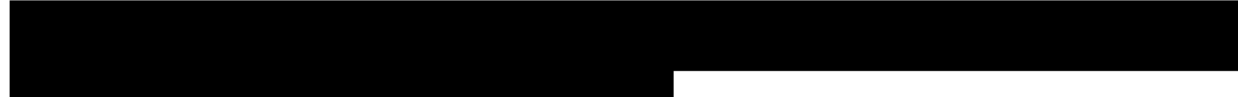
Maximus has been operating person-centered contact centers across the country for over two decades. Our expert staff and strategic integration of technology allows us to provide every individual who calls our Helpline with a single point of contact, offering a seamless experience and a high quality of care. Currently, we operate call centers in 37 states, as shown in *Exhibit 6.c-1: Call Center Experience*.



The success of our call centers is rooted in a robust contact center platform and skilled, highly trained Member Support Specialists.



- 
- 
- 
- 
- 



Delivering essential services in a friendly, timely, and sensitive manner is at the heart of every Maximus call center. Member Support Specialists will learn the skills and programmatic knowledge to help members with their options. Our culturally competent, person-centered approach and robust technology integration mean members will receive personal service and accurate information. Hoosiers will not experience complicated phone trees, an endless list of IVR options, long hold times, or escalations to supervisors.

For MLTSS Member Support Services, FSSA will have a smooth transition due to our extensive experience standing up member-serving projects. We will use the right people, technology, and processes to quickly start delivering successful member outcomes.

6.c.i Helpline Hours of Operations, Staff, and Voicemail

MSS will receive a trained staff to answer calls and meet the requirements set forth in Section K.3.3 Helpline. Maximus will establish and maintain an accessible, culturally, and linguistically competent helpline that will answer live calls Monday through Friday from 8 A.M to 8 P.M. Eastern Time, with voicemail services provided after hours.

We will make the helpline accessible through a statewide toll-free number, unique to MSS. It will provide information and assistance to members and their family members, legal guardians, informal caregivers, Supported Decision Makers, and/or Authorized Representatives (as applicable and/or determined by the member). Maximus will obtain a toll-free number within sixty days of award. We will verify the helpline has TTY access and is physically located in Indiana. Maximus will submit its helpline scripts to the State for review and approval during Implementation.

The member helpline may be closed on the following holidays:

- New Year's Day
- Martin Luther King, Jr. Day
- Memorial Day
- Independence Day (July 4th)
- Labor Day
- Thanksgiving
- Christmas

Maximus acknowledges that we may request additional days to be authorized for limited staff attendance, such as the day after Thanksgiving. We will submit these requests to FSSA at least 30 calendar days in advance of the date being requested for limited staff attendance. We understand that they must be approved by FSSA. Helpline closures, limited staffing, or early closures shall not burden a member's access to services.

Our helpline staff will treat members seeking MLTSS Member Support Services with dignity and respect to each member's right to privacy and confidentiality in compliance with HIPAA requirements. We will participate in the State's efforts to promote the delivery of services in a culturally competent manner to all members. We use our LanguageLine to assist members with limited English proficiency and diverse cultural and ethnic backgrounds, as set forth in this section and in alignment with our Equity and Cultural Competency Plan.

We will provide voicemail to members for after-hours inquiries. We will respond to the voicemail inquiries by the end of the next business day. We will also report to FSSA whenever the average turnaround time exceeds this benchmark.

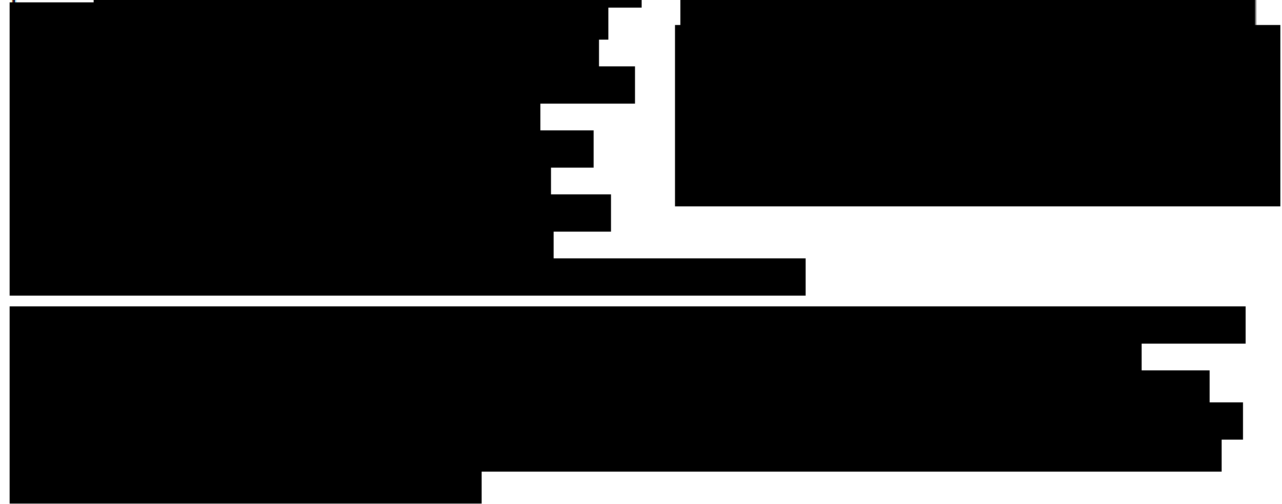
Members and their family members, legal guardians, informal caregivers, Supported Decision Makers, and/or Authorized Representatives (as applicable and/or determined by the member) can submit electronic requests via our email address. Members can directly request information, advice, referrals, and direct assistance through email.

FIRST-CALL RESOLUTION

Prompt and accurate assistance is our top call center priority. By maintaining high levels of first-call resolution, we drive a positive member experience and reduce the number of repeat calls. This makes it easier for callers to reach us quickly and reduces frustrations.

6.c.ii Interpreter Services

Members will receive services in the language they prefer.



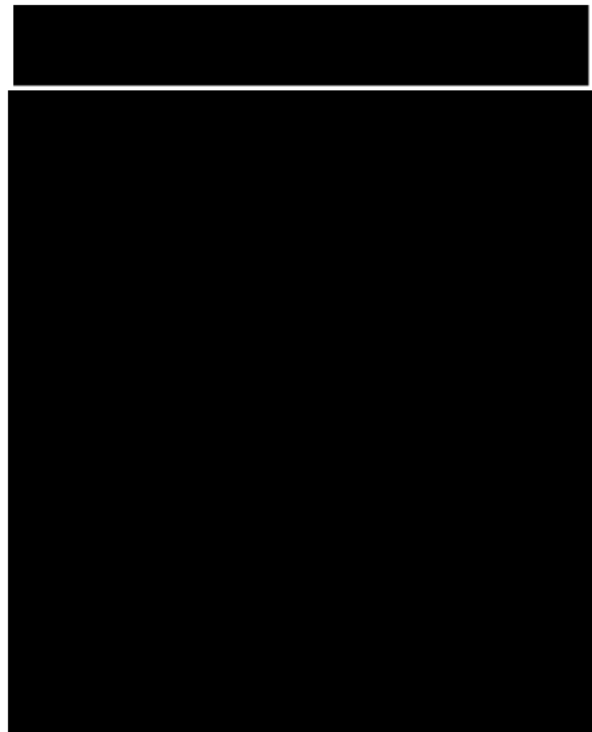
Members who are deaf or hearing impaired will receive help through Relay Indiana Telecommunications Device for the Deaf (TDD) service, when appropriate.

6.c.iii Helpline Disaster Recovery Plan

We describe our approach to business continuity and disaster recovery in *Section 12: Disaster Recovery*. Our proposed Draft Business Continuity and Disaster Recovery (BCDR) Plan for MSS is included in *Appendix E.5* of the Business Proposal.

In accordance with the requirements set forth in the RFP, Maximus agrees with the following statements:

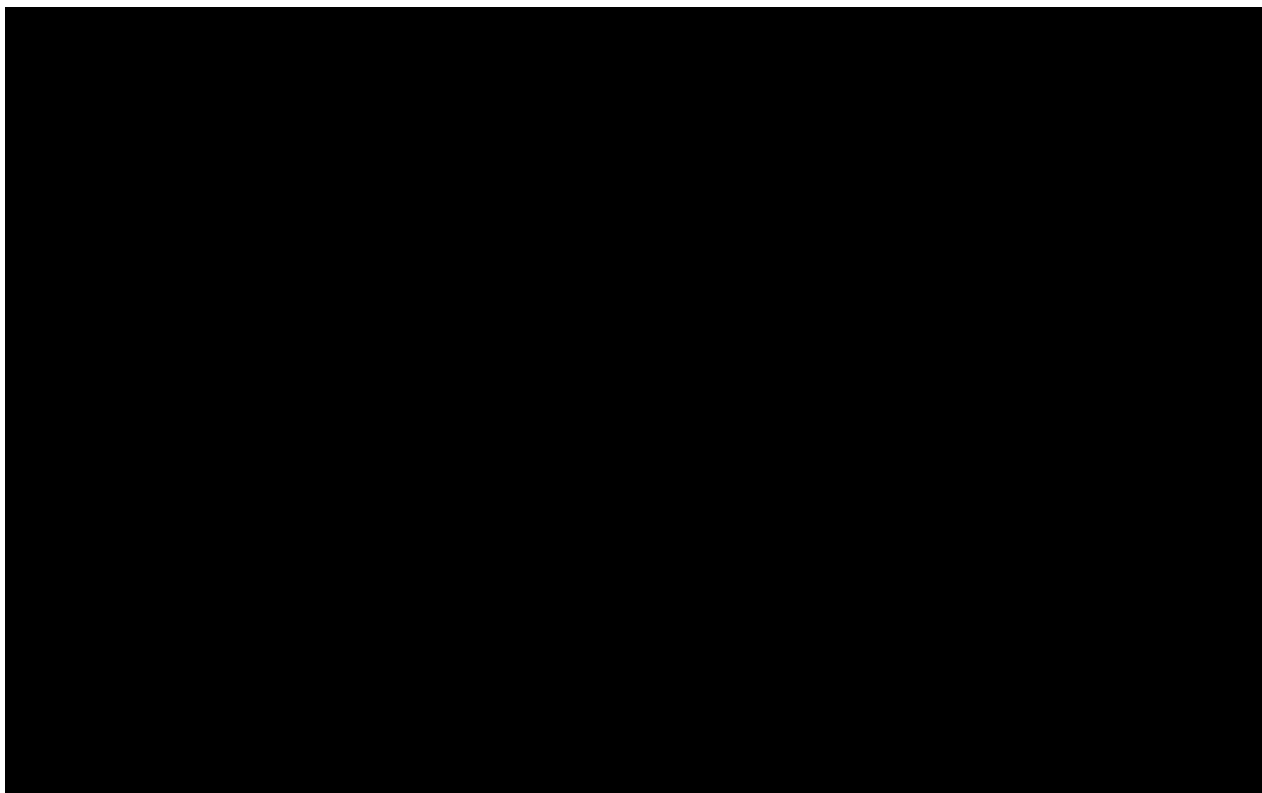
- If a power failure or outage during normal business hours lasts longer than 2 hours, or is expected to last longer than two hours, Maximus will use our established BCDR plan for MSS. Our BCDR plan for MLTSS Member Support Services will contain a clear process and plan to restore helpline functions within one business day. The plan will also include arrangements to transfer operations and Helpline functions to other location(s) to continue operations.
- Maximus will notify Indiana immediately upon discovery when its helpline telephone system is on battery power, is inoperative, is operating at a diminished capacity, or must be transferred to an alternate location. We will initiate our back-up procedure to continue to operate, if necessary.
- During implementation, Maximus will incorporate detailed helpline disaster recovery plans as part of our broader BCDR Plans as dictated by Section 9 of this scope.



- Maximus has an established contingency plan to transfer helpline operations to a remote work model. This includes providing all equipment and technology for helpline staff to work outside the physical location and policies for performing the work in such a scenario. We will submit the remote work model plan prior to Contract start. We will revisit and update the plan annually.

Indiana will benefit from a tested, detailed BCDR plan for MSS operations used in all our contact center and MLTSS projects across the U.S. We will tailor our standard BCDR plan template to meet the requirements of MSS while maintaining our established Microsoft Azure-based primary system business continuity controls.

FSSA can rely on Maximus to avoid disruptions to critical member services by using our proven BCDR plans to mitigate disruptions. As shown in *Exhibit 6.c.iii-1: Six-Phase Business Continuity and Disaster Recovery Life Cycle*, our business continuity strategy is embedded into our culture. We will continuously deliver critical services to members and the most vulnerable populations, including persons with disabilities.



For more information on our BCDR plan for the MSS, see *Section 12: Disaster Recovery* and *Appendix E.5: Draft Business Continuity and Disaster Recovery Plan*.

Example of Our Remote Work Model in Cases of Disaster or Power Outages

FSSA requires a reliable contractor with a clear plan to mitigate disruptions in services. Our BCDR plan for the MSS program will include processes to prepare for, mitigate, and recover from power outages, delays, or disruptions to the services members receive. In the event of a natural disaster or crisis, we can continue work without interruption.

Our BCDR plan will:

- Include a risk analysis of likelihood, impact, and vulnerabilities to assign a risk score and identity appropriate mitigation
- Prioritize critical processes using a Business Impact Analysis

- Identify critical internal resources, vendors, and suppliers
- Define the infrastructure elements and dependencies
- Provide procedures for preparing for, mitigating, and recovering from potential business disruptions
- Identify the assigned disaster recovery coordinator and associated recovery teams
- Explain the notification and escalation process
- Provide instructions for using the Emergency Information Line

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

BCDR Plan System Contingency

[REDACTED]

[REDACTED]

- [REDACTED]

[REDACTED]

[REDACTED]



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Policies for Performing Work Remotely

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

6.c.iv Call Recording

Reviews of call recordings are a critical component of delivering MSS and an enriching experience we provide to members. Having access to call recordings provides us, and FSSA, the ability to analyze MSS staff performance.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

■ [REDACTED]

■ [REDACTED]

- [REDACTED]
 - [REDACTED]
- [REDACTED]

Call Recording Retention

FSSA can rely on Maximus on meeting call recording requirements, as we replicate the same process in all our call centers. Maximus will retain recordings of all calls for five years after the member issue is resolved. Maximus will submit policies and procedures related to digital recording and storing calls to the State within 90 days of Contract commencement, and we will provide a random sampling of call recordings to the State upon request. We will provide the State with any recorded call within five calendar days of the request. We acknowledge and accept the State may request specific recorded calls based on information and reports provided by Maximus, member complaints against Maximus, and the results of the MSS Client Satisfaction Surveys.

[REDACTED]

[REDACTED]

[REDACTED]

6.d Website



Supporting Members
Through Complex
Programs

FSSA and members need a website that delivers the right information quickly to navigate through the complexity of their available options and programs.

[REDACTED]

[REDACTED]

- | | | |
|--------------|--------------|--------------|
| ■ [REDACTED] | ■ [REDACTED] | ■ [REDACTED] |
| ■ [REDACTED] | ■ [REDACTED] | ■ [REDACTED] |
| ■ [REDACTED] | ■ [REDACTED] | ■ [REDACTED] |
| ■ [REDACTED] | ■ [REDACTED] | |



Members will have an easy-to-navigate, accessible website to obtain information and submit electronic



We will develop the MSS website using language written at a fifth-grade reading level of understanding. We will write all information on the website in plain language, in English and Spanish. Maximus is committed to ongoing efforts to enhance member access. In accordance with Section 508 of the US Rehabilitation Act, we will verify the website is in a FSSA-approved format to confirm our compliance with existing accessibility guidelines.

The website will include verbiage that redirects website visitors to the helpline in the event the website is down. Maximus will develop contingency plans in the event of website failure, including notifying the state of the outage in eight hours or less. We will submit these contingency plans to the State for approval.

Members need the latest program and policy information to make informed decisions about their health and welfare. We will provide members the right information to navigate their own path using our staff, website, and member-facing materials. Our outreach and communications plan verifies we will convey the right messaging and the latest member and policy information, from all channels, including the MSS helpline, website, and from our skilled staff.

7. Coordination with Other Contractors

Confirm your acceptance of the requirements in Section 4, and please describe your approach to meeting all the requirements identified in the Section 4 of the Scope of Work. Describe your approach to coordinating with other contractors, including but not limited to:

- a. MCEs
- b. Medicare Advantage/D-SNP Plans
- c. Level of Care and Intake Vendor, Enrollment Broker
- d. Providers and Community Resources, including Community Resource Referrals and Warm Hand-Offs
- e. Other State Vendors & Programs
- f. Joint Outreach

Maximus accepts the requirements in RFP Attachment K Section 4, Coordination with Other Contractors, as written. We describe our approach to meeting all the requirements identified in Section 4 of the Scope of Work in our Technical Proposal's *Section 7: Coordination with Other Contractors* below.

Members will receive an enriched member experience from our Member Support Specialists trained to match other entities to services that align with member needs. We will develop, plan, and promote awareness of our community partners' services to meet the coordination requirements set forth by FSSA. Our Member Support Specialists will educate members and help coordinate member services to other entities.

FSSA will receive a communication and coordination plan to promote the awareness of its MSS program. We will submit our plan to the State for review and approval. We will evaluate and update our communication and coordination plan annually. FSSA and members will benefit from:

- A collaborative network with relationships with other entities to best serve members. Maximus is committed to being a good steward, to align needs of our partners, community stakeholders, and members to help build a better program.
- A streamlined process to connect individuals to other entities. Our staff will follow a strict procedure to provide warm hand-offs for members who need to connect to services provided by other entities outside MSS. Maximus also has immediate access to other project leadership within the MLTSS network to facilitate a seamless network of connected services.
- A strong outreach campaign and communications plan to promote our community partners' services. This includes coordinating and referring members to community-based organizations, nonprofits, and other local resources with whom we have established partnerships in Indiana.



**Streamlined
Collaboration Across
MLTSS Landscape**



**Supporting Members
Through Complex
Programs**

In this section, we discuss how Maximus will develop a communication and coordination plan to coordinate with community resource partners and other entities. This includes MCEs, Medicare Advantage/D-SNP Plans, the Level of Care and Intake Vendor, or the Enrollment Broker. We will also coordinate with providers, community

resources, and other state vendors and programs. We also discuss community resource referrals and warm hand-offs, as well as participating in joint outreach initiatives with other entities.

7.a MCEs

Maintaining consistent communications with MCEs is critical to align messaging and services. To provide a seamless member experience, our communications plan eliminates silos among various MLTSS services providers, community resources, and other entities, including MCEs.

All member- and stakeholder-facing communications and materials will have cohesive and consistent messaging. To achieve this prior to the contract start date, Maximus will meet with each MCE to obtain information to:

- Understand their grievance and appeals processes
- Establish a meeting schedule to discuss updates and other important information
- Create warm transfer procedures
- Provide the MCE an overview of our services and materials for member distribution

Our communications plan includes a process to maintain communications with each MCE throughout the life of the contract to support effective member issue resolution.

7.b Medicare Advantage/D-SNP Plans

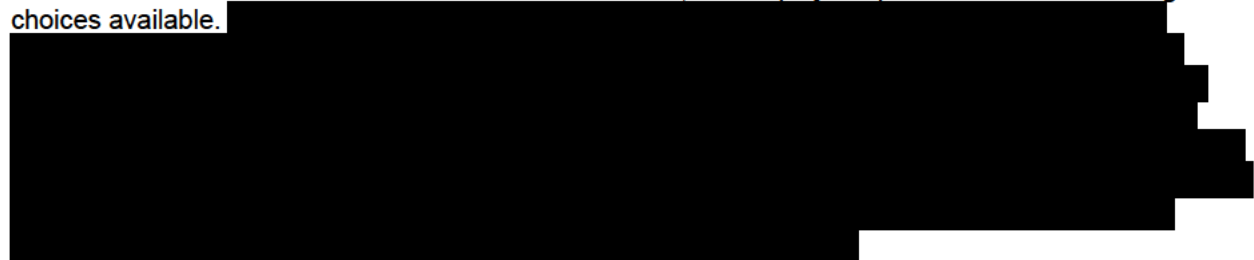
Roughly 80% of Indiana's Pathways for Aging population are dually eligible for both Medicare and Medicaid. The State has identified Medicare and Medicaid alignment and integration in Indiana Pathways for Aging as key drivers to remove barriers to care. This integration will also improve outcomes for dually eligible members. MSS will maintain sufficient ongoing Medicare staff knowledge and capacity to engage effectively across Medicare payers, Medicare service delivery systems, and meet FSSA's requirements. This includes traditional Medicare, Medicare Advantage, Special Needs Plans, and PACE. Our staff will engage with Medicare providers to resolve potential issues and promote full access to care and benefits for dual eligible members.

Members will receive help from our trained Member Support Specialists. We will maintain the ongoing capability to explain to members potential interactions, impacts, and differences arising out of a dual eligible member's Medicare and Medicaid coverage. In the absence of being able to provide appropriate Medicare knowledge, we will refer the member to the Indiana State Health Insurance Assistance Program (SHIP). We will track and report these referrals monthly in ConnectionPoint.

FSSA will benefit from our experience working in Medicare to engage effectively across Medicare payers since 1989. Our staff will also be trained on Medicare provider options to appropriately resolve potential issues and promote full access to care and benefits for dual eligible members.


7.c Level of Care and Intake Vendor, Enrollment Broker

For members seeking access to services such as Nursing Facility Level of Care (NFLOC) assessments and determinations from the Enrollment Services Vendor, we simplify the process of understanding the choices available.



7.d Providers and Community Resources, including Community Resource Referrals and Warm Hand-Offs

FSSA requires a MSS contractor that knows the local community resources available to members. This means having reliable relationships with these other entities to deliver seamless member services. Our presence in Indiana has allowed Maximus to establish local relationships using a collaborative referral system in our EB project.



Providers and Community Resources

Our Member Support Specialist will easily connect members with community resource referrals based on the member's needs. FSSA can rely on Maximus to work with Indiana agencies, as they are an extension of our existing partnerships in the State. To leverage the collective experience and expertise of Indiana's community advocacy and community support entities, FSSA will benefit from:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

Warm Hand-Offs

MSS staff will know which services are provided by the program, participating MCEs, the Maximus-supported EB program, and other entities who will assist members. We will train our staff on Indiana's AAAs/ADRCs, community mental health centers (CMHCs), CILs, and other community-based organizations. Maximus will use this knowledge to efficiently direct individuals to the appropriate source for assistance, regardless of where their search begins. Maximus will provide, whenever possible, a warm hand-off to these entities.

[REDACTED]

By choosing Maximus, FSSA will partner with a MLTSS contractor who already has provider and NF coordination experience with MCEs and NFs throughout the State. Maximus will help members regardless of their setting. If there is a provider such as a nursing facility involved in the member's care, Maximus will coordinate with them in order to help the member resolve an issue with the member's MCE.

7.e Other State Vendors & Programs

FSSA can rely on Maximus to build strong relationships with other State vendors. Specifically, we will partner with vendors who provide database system integration, encounter processing, enrollment and eligibility, and data analytics. This includes vendors engaged by FSSA to monitor, validate, or verify

Contractor performance. We bring to the MSS program our experience in Indiana, and across the U.S., cooperating with State vendors that are providing services to, or on behalf of, FSSA.

As detailed in Section 4.4.1 of the RFP, Maximus will also cooperate with the LTC Ombudsman and Adult Protective Services.

7.f Joint Outreach

Members and stakeholders alike will receive informational and educational materials accessible in the format consistent with FSSA's requirements. Bringing our experience providing outreach in our Indiana EB project, we understand how to work with multiple stakeholders and entities. We know how to communicate with them using the channels they most often prefer. For MLTSS, Maximus will make informational and educational materials available in electronic format and hard copy, upon request. We will make these formats available to the Enrollment Services Vendor, the EB program, the State, MCEs and their aligned D-SNPs, and other entities operating with the Indiana Medicaid program. Maximus will engage with stakeholders in coordinated efforts to create awareness of Member Support Services and support the needs of members.

We recognize joint outreach activities may vary in frequency, type, location, and method, including face-to-face, webinars, or other means. This is based on the needs of potential members and members during open enrollment, phased rollout and phase-in of crossover, and special populations. We already participate in co-led events with MCEs and other organizations in Indiana. We will seek to strengthen these partnerships for Pathways for Aging Member Support Services.

Maximus collaborates with all stakeholders to maintain consistent messaging for members. We are committed to collaborating on developing appropriate materials with all engaged stakeholders and align on messaging.



Streamlined Collaboration Across MLTSS Landscape

For the MSS program, FSSA will receive a robust coordination plan to streamline collaboration with other contractors and entities across the MLTSS landscape. Our plan will promote awareness of the MSS program and policy with community partners, and also establish member interaction expectations. This includes how to perform

effective warm hand-offs between other entities to best meet member needs. We will provide our proposed communication and coordination plan to the State for review and approval. We will also seek FSSA's annual evaluation and updates to the plan.

8. Technology Requirements

Confirm your acceptance of the requirements in Section 5, and please describe your approach to meeting all the requirements identified in the Section 5 of the Scope of Work. Specifically, describe your approach to:

- a. Developing and maintaining an information and case tracking database with the capability to document, track, and report on all Member Support Services Program contacts and complaints, by category, as detailed in Section 5 of the Scope of Work.

Maximus accepts the requirements in RFP Attachment K Section 5, Technology Requirements, as written. We describe our approach to meeting all the requirements identified in Section 5 of the Scope of Work in our Technical Proposal's *Section 8: Technology Requirements* below.

FSSA requires a vendor who can streamline healthcare support to manage performance and deliver services and outcomes that align with member needs.

[REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]



Supporting Members
Through Complex
Programs

[REDACTED]



Streamlined
Collaboration Across
MLTSS Landscape

[REDACTED]

[REDACTED]

[REDACTED]

8.a Case Tracking Database

For Pathways for Aging Member Support Services, FSSA requires a system of record that accurately captures member interactions and outcomes to identify service trends and inform future decision-making.

Even more important is maintaining a thorough record of a member's history to be able to consistently provide services that align with their needs without members having to restate their needs on every call.

[REDACTED]

[REDACTED]



Supporting Members
Through Complex
Programs

[REDACTED]

[REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]



At-A-Glance

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

“

[REDACTED]

”

[REDACTED]

[REDACTED]

Maximus will submit a case tracking database plan to the State within sixty (60) days of Contract Commencement for State review and approval. Maximus will record information on each member interaction inclusive of the following categories:

- General information required in Section 2.2.5 of the RFP
- Issues or complaints by:
 - Each managed care plan
 - Companion Medicare plans such as D-SNPs
 - Enrollment Services Vendor
 - Enrollment Broker
 - The Contractor itself
 - A state agency
 - Other FSSA contractors or community partners
- Any aspect of the Medicaid MCE Program, including:
 - Eligibility and level of care determinations
 - Benefits/access to benefits
 - Providers
 - Care and service coordination
 - Changing plans
 - Prior authorization and utilization management
 - Member materials and education
 - Cultural competency
 - Appeals and grievances
- Referrals to other entities including but not limited to:
 - Enrollment Broker
 - SHIP
 - APS
 - LTC Ombudsman

[REDACTED] understands that all data contained within the database is property of the State. We will turn data contained within the database over to the State in the State-determined format. We will provide this data at any point the State requests it, and at end-of-contract turnover.

Our database will be operational and fully able to support the requirements of this contract prior to the commencement of any member-facing duties at a time defined by FSSA. Maximus will also conduct any State-determined readiness activities. Additionally, Maximus will verify member enrollment using the State's MMIS.

[REDACTED]

9. Conflict of Interest

Confirm your acceptance of the requirements in Section 6, and please respond to all requirements detailed in Section 6 of the Scope of Work. Acknowledge your compliance with all requirements therein and describe how you will mitigate any conflicts should they arise in the future.

Maximus accepts the requirements in RFP Attachment K Section 6, Conflict of Interest, as written. We describe our approach to meeting all the requirements identified in Section 6 of the Scope of Work in our Technical Proposal's *Section 6: Conflict of Interest* below.

FSSA requires a partner for the MSS program who will remain entirely free of any perceived and actual conflicts of interest in all aspects of the scope of work. That partner is Maximus. Maintaining independence from conflicts of interest is a central Maximus tenet across a range of Medicare and Medicaid programs. We bring proven experience and internal controls to prevent conflicts of interest among our staff, independent contractors, and subcontractors. Despite many opportunities in the private sector, we have limited our business to contract exclusively with government agencies. Because we limit our practice, FSSA benefits from our clear, conflict-free status and sole focus on delivering reliable, accurate services.

Maximus is Indiana's right choice for a conflict-free partner for this role. As the nation's leading provider of high-quality, conflict-free MSS, we offer our unmatched reputation for delivering objective assistance to support FSSA's project goals and members based on the following key elements:

- Conflict-free policies, including partnering with conflict-free subcontractors and suppliers
- Conflict-free staff hiring, onboarding, and training
- Conflict-free assistance with member support and with grievances and appeals

Additionally, we have an established approach to mitigating any conflicts, should they arise. Based on our numerous Medicare and Medicaid contracts, we are statutorily precluded from having any contractual or financial relationships with any health plans, insurers, or other payors that could pose a potential or actual conflict with this program. We are not co-located with any Medicaid Managed Care plan, Medicare Advantage Organization, or any Medicare Advantage Special Needs Plan. Our policies prevent staff from entering any power-of-attorney, health care representative, guardianship, or other surrogate decision-making or financial relationship with members.

We review information regarding any conflicts of interest annually on a program-by-program basis and individually. Quarterly, a notification is sent to each supplier we work with, asking them to confirm they are still free of conflicts. Our assessor training provides staff the skills they need to consistently provide accurate, conflict-free, and unbiased Level of Care (LOC) and MSS.

We pride ourselves on our conflict-free structure at all levels of operations — from the individual team member level, to the project level, to the company level, limiting our contracts to government agencies, and carefully configuring our partnerships in ways that preserve the integrity of our conflict-free status.

10. Staffing

Confirm your acceptance of the requirements in Section 7, and please describe your approach to meeting all the requirements identified in the Section 7 of the Scope of Work. Specifically:

- a. Describe in detail your recruitment plan, staffing plan and expected staffing levels, making sure to include all required positions indicated in Section 7.1 Key Staff and Section 7.3 Other Staff Positions, and describe how this plan will enable you to fulfill all Contract requirements and deliver high quality, operationally efficient services.
- b. For Key Staff, provide resumes or if the position is unfilled, job descriptions, that include the responsibilities and qualifications of the position such as, but not limited to: education, professional credentials, work experience and membership in professional or community associations.
- c. Describe your plans to address and minimize staff turnover and processes to solicit staff feedback.
- d. Describe your process for ensuring all staff have the appropriate credentials, education, experience and orientation to fulfill the requirements of their position (including subcontractors' staff)
- e. Describe in detail your staff training plans (including subcontractors' staff) and ongoing policies and procedures for training all staff.

Maximus accepts the requirements in RFP Attachment Section 7, Staffing, as written. We describe our approach to meeting all the requirements identified in Section 7 of the Scope of Work in our Technical Proposal's *Section 10: Staffing* below.

FSSA's Pathways for Aging members will receive exceptional service and the State will meet its performance objectives with our proven staffing approach. Using our experience from similar projects, we developed a robust recruiting and staffing strategy for Indiana. Our recruiting strategy sources personnel with the appropriate education, credentials, skills, and experience to meet all requirements for Indiana's Pathways for Aging Member Support Services program. This model helps us attract and retain high performers. Additionally, our staffing structure includes expert corporate oversight, the right combination of key personnel and project staff, and access to extensive shared services resources for additional support.

We accept all requirements in Section 7 of the Scope of Work. Throughout this section, we describe how our staffing approach will fulfill the requirements of this Contract:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

10.a Recruitment and Staffing Plans

High quality recruitment and staffing drive high quality, operationally efficient services. To fulfill all Contract requirements and deliver high quality, operationally efficient services, we hire and retain the best possible staff. As we describe throughout this section, our staffing approach begins with careful

interviewing and assessment of candidates. [REDACTED]

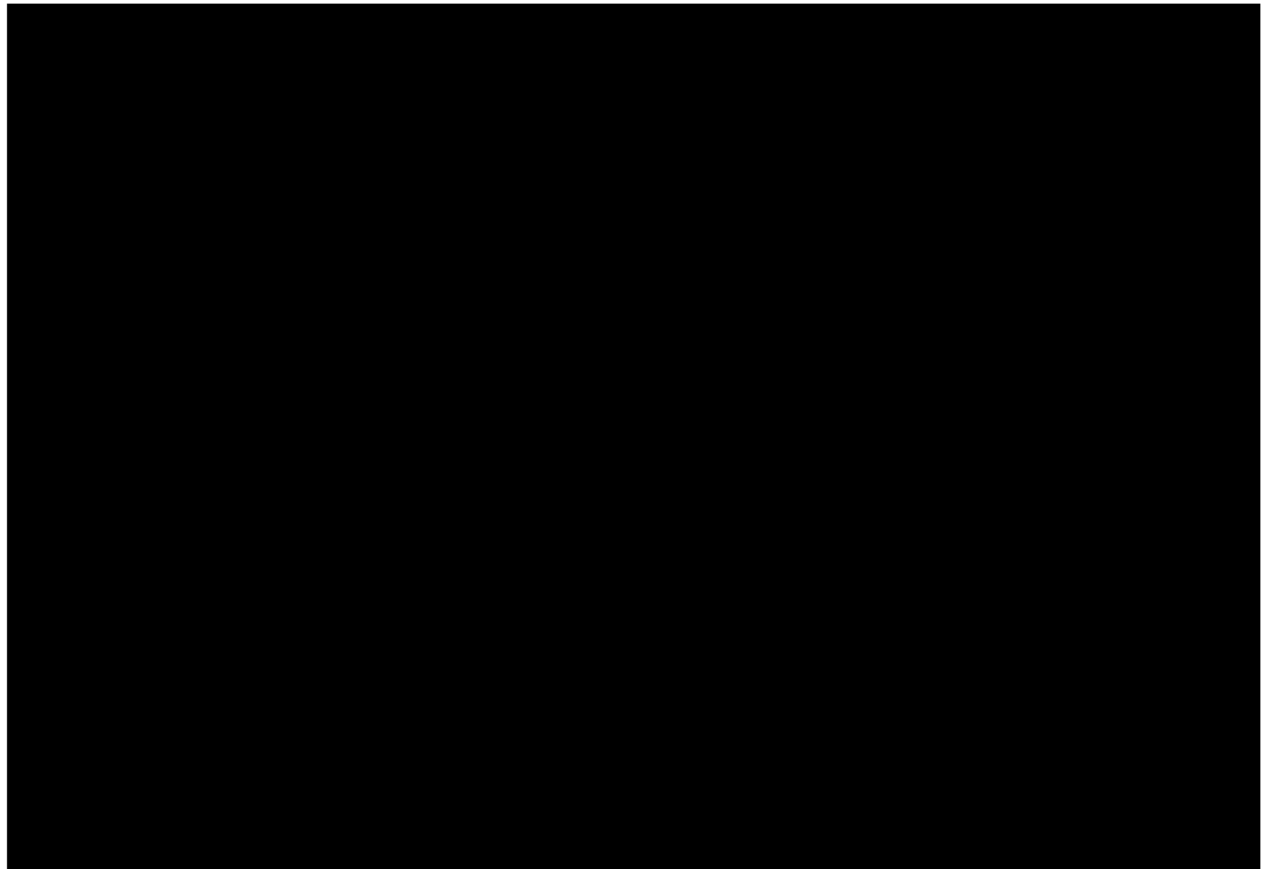
[REDACTED] After onboarding, we create a supportive workplace culture that promotes employee retention. Through our recruitment and staffing plan, we will meet project requirements, service level agreements, and performance standards.

Maximus' recruitment efforts to determine the staffing levels needed for the Pathways for Aging Member Support Services Contract started with a careful assessment of the skills and experience required for the scope of services and performance requirements. Our experience with long term services and support programs in other states guided our analysis. Additionally, we interviewed experienced staff and stakeholders who knew about Indiana's landscape and the specific assessments under MLTSS Member Support Services. Combined with the data FSSA gave in the RFP, this insight resulted in an understanding of the effort to fully support this program.

Our highly skilled project leaders guide our innovative recruitment, retention, and training approaches to select and retain qualified staff. [REDACTED]

At the beginning of the project and throughout the Contract term, together with daily data from our reporting and analytics tools, our business process modeling (BPM) methodology will facilitate an ongoing assessment of staff needs that aligns with actual conditions and performance standards. Our predictive analytics software allows us to input staffing assumptions based on historical trends and volumes, operational performance targets, and service level requirements and then forecast accurate staffing levels. This allows us to meet implementation timelines, maintain steady-state staffing levels during non-peak times, and respond to high volume demands caused by open enrollments and program changes.

Exhibit 10.a-1: Maximus Approach to Staffing shows key strengths of the approach we successfully use on many projects, including Indiana EB and Indiana PASRR. We will use the same approach to deliver operationally efficient services for FSSA that result in high-quality outcomes for its members.



Maximus completes a job description analysis of each position to assess the key skills, knowledge, and experience required to complete the job duties. Based on this analysis, we hire candidates with the right education, certifications, experience, understanding, and proficiency in role-specific skills. For every position, we screen key qualifications such as strong customer service, electronic document management experience with application processing systems, and basic computer usage skills. We also screen for key qualities, such as empathy, strong work ethic, and integrity.

We leverage labor market analytics to guide recruitment and compensation decisions to target potential hot spots. Our nationwide talent network allows Maximus to maintain a warm pipeline of qualified candidates. Our network includes corporate recruiters, our Minority Business Enterprise (MBE), Women's Business Enterprise (WBE), and Indiana Veteran-owned Small Business (IVOSB) staffing partners. Our integrated recruiting sourcing strategy identifies candidates through social media platforms and other networking opportunities, community open houses, referrals, job fairs, and college/technical school recruiting. We have a network of external recruiters and staffing firms available in Indiana. These resources will strengthen our recruitment efforts for targeted positions and help fill vacancies within 30 days.

10.b Key Staff Resumes

FSSA and Indiana Pathways for Aging program members will benefit from our key staff's existing knowledge and experience with the MLTSS landscape in Indiana. [REDACTED]

including:

- Sufficient support staff to confirm timely and accurate delivery of member support services, reports, and requests

- Quarterly turnover report of non-key staff
- Appropriate background checks for all Maximus personnel and for any personnel with access to sensitive information or facilities
- Removing or reassigning any staff upon written request from the State

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

10.c Addressing and Minimizing Staff Turnover

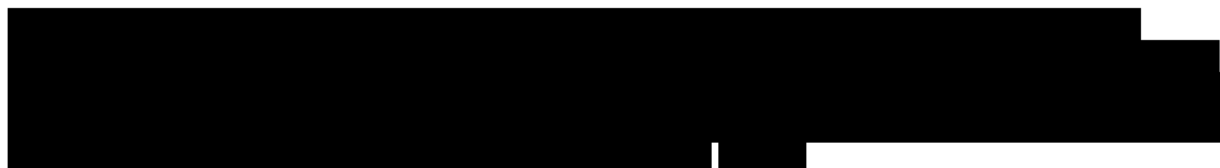
Employee retention is vital to the success of the project. A stable, experienced workforce improves customer service and satisfaction, benefiting our members. It also improves morale, increases productivity, and reduces the effect of turnover, benefiting FSSA and the project overall. Our retention and succession efforts promote career advancement and growth. Our employee investment demonstrates to our employees that we value them and their futures. We provide professional development opportunities, giving our staff a meaningful way to advance their careers. We also prepare

for when our employees advance their careers through succession planning. Our staffing and succession plan means that we minimize turnover and can readily fill vacancies, including those for key staff.

Minimizing Turnover

There is no substitute for experience, which makes employee retention vital to the success of the Pathways for Aging Member Support Services project. Beginning with high-performing staff in place is the first step in retaining a quality workforce. We will implement innovative methods to further develop and retain staff throughout the contract. By retaining our employees, we lower costs associated with training and maintain program knowledge among staff.

Maximus practices succession planning for management roles and manages a defined career ladder for our staff to advance to leads, supervisors, and eventually managers or support staff such as quality, training, or reporting. *Exhibit 10.a-1: Maximus Approach to Staffing*, earlier in this section, showed some of the tools and innovations we use to minimize staff turnover.



Filling Vacancies

We will work with our staffing vendors to maintain a pool of eligible candidates available to fulfill project functions and vacancies in a timely matter. To mitigate turnover rates, our contract-to-hire staff will enjoy the same opportunities for growth within our organization and have access to the tools and resources as our employees. We will use our sophisticated business process models and industry-leading forecasting and WFM tools to plan and always maintain staffing levels. Our WFM platform assists us in identifying workload needs and moving cross-trained staff between task work and phone queues to eliminate service disruptions to Hoosiers.

Fewer vacancies occur in an environment that enables a robust culture of retention. Maximus creates a welcoming culture that engenders loyalty and retains our most talented and knowledgeable staff members. Our methods include recognition, compensation, benefits, mentoring, coaching, health and wellbeing programs, DE&I employee resource groups, and professional development.

Vacancies burden the current staff and could lead to additional attrition, creating a damaging cycle that may impact some contractors' ability to fully staff this project. Maximus prevents this problem by providing pre-identified, backup staff members ready to assume acting roles with minimal disruption to service. Our succession plan means that we will readily meet all FSSA requirements regarding vacancies:

- Notifying FSSA in writing at least five days prior to an anticipated vacancy
- Notifying FSSA's Member Services Manager at least five days prior to a candidate filling a key staff role

Our key staff will be readily accessible to FSSA and its other program subcontractors via phone and email systems. As required, we will annually submit an updated organizational chart including email address and phone numbers for key staff.

10.d Staff Qualifications

10.d.i Hiring Policy

Maximus will draw resources from our extensive corporate recruiting organization. We offer a continuously refreshed pool of frontline staff and supervisory candidates and proven, current Maximus staff members who may wish to relocate or move to a position in Indiana.

Additionally, we work closely with staffing agency partners to identify qualified applicants from the social, linguistic, and cultural communities we serve. The staffing agencies Maximus works with are prepared with a qualified pool of candidates who are pre-screened for skill sets compatible with the skills and experience required. Our proven model is flexible, scalable, and predictable for meeting staffing level requirements over time.

Using projections from our staffing model, our Human Resources Team begins recruitment efforts for identified resource needs, with lead time to screen and select the necessary quantity of qualified employees in advance of our target start date. We leverage our local staffing partners who understand regional demographics and Indiana's unique culture. With help from these partners, we will build and maintain a database of pre-qualified candidates to bring on to the project according to staffing needs and forecasts.

Our interview, selection, and internal transfer process screens all candidates for Maximus standards for competency, skill level, mindful listening, and directive communication. We take a continuous approach to recruiting; advertising open positions internally and externally, both locally and nationally through job fairs, job blasts, job boards, and by working with local staffing agencies. Recruiters screen responding candidates to pre-qualify them, identifying those who are the right fit for each job role and who will help drive the Maximus quality approach.

10.d.ii Hiring Efforts

Maximus has designed our staffing solution to identify, hire, and retain new team members who can envision a career with us and are interested in assisting individuals and families to access vital Indiana programs and services. We focus on hiring Indiana residents, including candidates that match the profile and diversity of people we serve in Indiana.

We will hire Indiana residents who live, work, and represent their communities. To provide efficient services to clients, we recruit staff who meet our standards for performance and provide ongoing training, monitoring, and coaching on delivering excellent customer service. To recruit and retain knowledgeable staff we will use innovative tools such as the Real Job Preview.



10.d.iii Recruitment and Retention

Maximus and our staffing partners recruit staff who reflect the cultural, linguistic, and demographic characteristics of the populations we serve. They also seek candidates who demonstrate the necessary skills to provide success. These skills include:

- Ability to comprehend diverse and complex programs: We recruit individuals who can learn multiple complex programs and deliver high quality customer service.
- Knowledge of the communities they will be serving: We recruit locally, seeking candidates who have roots in the local community and reflect the diversity and languages of the population we serve.
- Excellent interpersonal and communication skills: We evaluate candidates to validate that they can communicate clearly and empathetically while serving Hoosiers.

To help recruit and retain high-achieving staff, Maximus offers tangible incentives for long-term employment and a sense of accomplishment among our employees that builds loyalty and personal commitment. This, in turn, produces high retention levels and overall project stability. Our incentives and retention efforts include:

- Wage and benefit packages that are attractive relative to the Indiana labor market and competitive with current position compensation
- A supportive project culture that encourages continuous learning and professional growth
- Promoting from within through well-defined career paths, including transitioning high-performing CSRs into higher-paying Member Support Specialist positions with more responsibilities
- Recognizing individual achievement through weekly team celebrations, individual rewards, or written commendations
- Comprehensive training through our Learning Management System (LMS) and Panviva, our Knowledge Management System (KMS)

Maximus sets a high but realistic bar for our staff members. We recognize that career development, retention, morale, and service excellence all depend on fostering a culture where our staff shares certain key values and attributes.

10.d.iv Candidate Screening

Maximus screening techniques identify candidates who will meet our quality approach to staffing. Our job description requirements include education and experience commensurate with the role. We also require experience with computer data entry and proficiency in Microsoft Word and Excel. Our screening prioritizes individuals with relevant backgrounds. Examples include customer service experience within health insurance or social services programs. We also look for appropriate language skills and the cultural competency to accommodate the needs of Indiana clients. Candidates who pass pre-employment screening will undergo background checks as required by company and contract standards.

Maximus EEO Statement

A committed and diverse workforce is our most valuable resource.

Maximus is an Affirmative Action/Equal Opportunity Employer.

We encourage women, people of color, individuals with a disability, veterans, and others who would enrich the diversity of Maximus to apply.

Maximus is an equal opportunity employer. We are passionately committed to equal employment opportunity as a matter of sound business policy, as well as corporate responsibility and compliance with the U.S (United States) (United States). Federal Government's Equal Opportunity Program, as established by law. It is the policy of Maximus to recruit, hire, train and promote persons in all segments

of its workforce without regard to race, color, gender, age, religion, religious beliefs, sex, sexual orientation, gender identity, national origin, physical or mental disability, U.S. veteran status, genetic information, marital status, creed, citizenship status, or any other status protected by law, except where gender is a bona fide occupational requirement.

10.e Staff Training Plan

Person-centered service is central to providing care that promotes high-quality health outcomes for FSSA's members. To support this end, Maximus customized training plans for our operations and member services support teams. Our tailored training enables us to confirm our staff approach the process through the lens of each member's needs. We will submit our training plan to FSSA for review and approval within 90 days of Contract commencement.

-

Maximus has developed and administered large-scale, state-of-the-art training programs for more than 24 years. Our nationwide projects include comprehensive training using a wide range of modalities, and we have partnered with several state agencies to support expanding training needs and changing policy requirements. Training modalities we use include classroom instruction, virtual instruction, large workshops, online self-paced training, and webinars. In addition, we provide state training, informational websites, and a LMS for many of these projects.

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

Maximus deploys a performance-based training approach that builds on adult learning principles by incorporating different types of active learning styles to keep trainees engaged. Additionally, by linking quality monitoring to ongoing development, we facilitate a continuous feedback loop between training and operational performance, identifying new training opportunities and resulting in consistent, high-quality services to Indiana's members.

Our trainings combine a variety of platforms and formats to accommodate a range of learning styles, incorporating operations-focused lessons on tools and processes so trainees can apply practical knowledge to the performance of their on-the-job duties.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

We leveraged our experience supporting similar contracts and our understanding of Indiana's Pathways for Aging Member Support Services requirements to develop our staffing plan. Our plan includes proven recruitment, retention, and training strategies that reduce turnover, optimize performance, and maintain adequate staffing levels. This will result in high quality, operationally efficient services for FSSA and positive outcomes for its members.

11. Monitoring and Reporting Requirements

Confirm your acceptance of the requirements in Section 8, and please describe your approach to meeting all the requirements identified in the Section 8 of the Scope of Work. Specifically, describe:

- Your plan to provide the reports described in the Scope of Work
- Provide sample performance reports if available. How you will identify trends in Issues, grievances, and appeals and their resolution in order to assist the State in its support of members and provide information needed for State oversight of the MLTSS plans
- Additional data/reports you are capable of providing that can help the State evaluate the success of the MLTSS program and any recurrent Issues
- Your internal operational structure that will support the compilation of your own performance data

Maximus accepts the requirements in RFP Attachment K Section 8, Monitoring and Reporting Requirements, as written. We describe our approach to meeting all the requirements identified in our Technical Proposal's *Section 11: Monitoring and Reporting Requirements* below.

Our reporting approach aligns with Indiana's commitment to transparency and quality by combining State system data and member support center data to provide near real-time visibility into contract performance, as well as access to meaningful, actionable information about trends impacting MSS. [REDACTED]

As a longstanding partner of FSSA, we are familiar with the interfacing requirements for sharing data with State systems. Our reporting solution works in conjunction with the State's existing operational environment to maximize efficiency for MSS.

Key strengths of our approach are shown in *Exhibit 11-1: Strengths in Reporting* are described in more detail in the following sections.

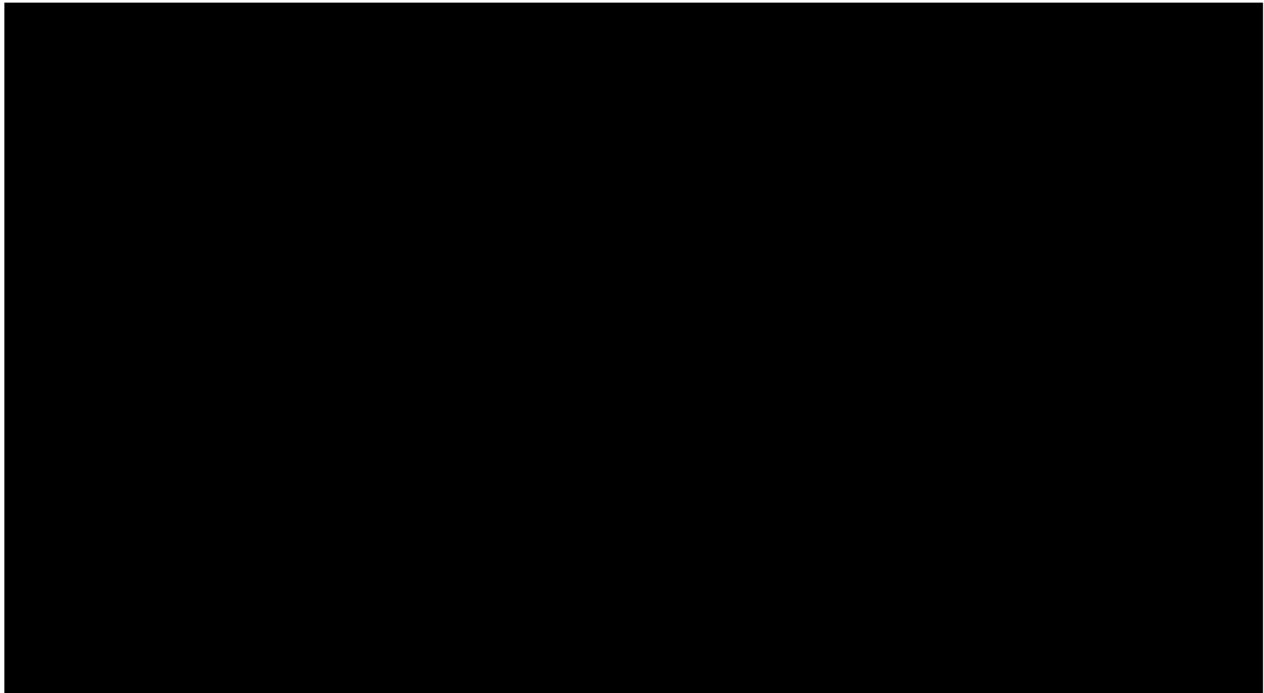


Spotlight

ON-DEMAND, ROBUST MONITORING AND REPORTING

FSSA can easily monitor our performance against key performance measures and service level agreements (SLAs) by leveraging our comprehensive reporting approach that includes:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]



- [Redacted bullet point]

- [Redacted bullet point]



Streamlined
Collaboration Across
MLTSS Landscape

[Redacted text block]

[Redacted text block]

- [Redacted bullet point]

- [Redacted bullet point]

- [Redacted bullet point]

- [Redacted bullet point]

- [Redacted bullet point]

■ [REDACTED]

Reporting Platform

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

11.a Reports

Maximus will submit a list, in writing, of designated staff developing and/or submitting required reporting to FSSA following the contract start date. In addition, our team will communicate with the State by contacting the assigned contract manager electronically, by mail, or telephone. Our data and reporting analyst will be responsible for managing all reports. If we use electronic communication, and security for

protected health information (PHI) or other information is needed, we will use proper email encryption. We will also maintain consistent communication through regular conference calls to address issues and modify services as needed.

Further, we agree to provide FSSA with any reports CMS requests. If FSSA requests information or reports and we cannot meet the stipulated timeline, we will notify FSSA immediately in writing and request approval for an extension. We will also collaborate with the State to develop a plan for prioritizing requests, so urgent requests get prioritized.

[REDACTED]

[REDACTED]

11.b Sample Performance Reports

Over 40 years of reporting, we have found that static outputs of data, while informative, do less than dynamic and customizable displays for achieving operational excellence.

We provide a sample performance report in *Appendix F.2: Sample Performance Reports*.

11.c Evaluating the Success of the MLTSS Program



Streamlined Collaboration Across MLTSS Landscape

Maximus can create customized reports by leveraging a wide variety of individual and/or group variables and metrics, including any data points not standardly programmed. Most variables can be included within our routine reports. For example, we can tailor reports to reflect workflow variables such as type of issue and turnaround

times by key individual or group, individual demographics, or submitter type. We can also customize formatting to meet FSSA's reporting preferences. In addition, we can generate additional reports to help FSSA evaluate the success of the program and fulfill reporting requirements. Examples of other reports we can produce include:

- [Redacted]
- [Redacted]
- [Redacted]
- [Redacted]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

11.d Internal Operational Structure and Performance Data

[REDACTED]



Supporting Members
Through Complex
Programs

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED] Our teams meet regularly to discuss findings and recommendations for improvement.

12. Disaster Recovery

Confirm your acceptance of the requirements in Sections 9-10, and please describe your approach to meeting all the requirements identified in the Section 9-10 of the Scope of Work. Describe your plan to maintain continuity of the services in the Scope of Work in the case of a disaster, database outage, or other contingency. Please respond to all components of Section 9. Business Contingency and Disaster Recovery Plans and Section 10. Database Outages, Breaches, and Disaster Recovery Notification.

Maximus accepts the requirements as written in RFP Attachment K Section 9, Business Contingency and Disaster Recovery Plans; and Section 10, Database Outages, Breaches, and Disaster Recovery Notification. We describe our approach to meeting all the requirements identified in Sections 9 and 10 of the Scope of Work in our Technical Proposal's *Section 12: Disaster Recovery* below.



Supporting Members Through Complex Programs

Maintaining continuous services in cases of disaster, database outage, or other contingency, is critical to meeting performance expectations. This is even more important to the members we help navigate the complex MLTSS landscape. For Pathways for Aging Member Support Services, we offer FSSA refined disaster recovery

plans to maintain continuity of the services. Our disaster recovery plans are informed based on best practices we learned supporting MLTSS and helpline projects across the U.S.

12.a Business Contingency and Disaster Recovery Plans



12.b Database Outages, Breaches, and Disaster Recovery Notification

FSSA will have a collaborative, transparent partner in Maximus as we are committed to delivering services while maintaining performance. We use established business continuity procedures in our projects. We know how to mitigate the impacts of database outages or breaches, and we can effectively navigate disaster recovery. Most recently, in 2022 in Florida, we navigated Hurricane Ian's impact to contact center operations in Tampa, Jacksonville, and Ft. Pierce. Given the remote nature of our staff in Florida, available staff were able to continue to deliver services so that Floridians did not lose their much needed benefits. Maximus Member Support Specialists will be hired across Indiana in order to provide a geographically dispersed staff to allow for quicker and more effective disaster recovery.

In the following subsections, we discuss how Maximus will comply with the requirements set forth in RFP Attachment K, Section 10. This includes providing FSSA timely notification about database outages. We also discuss how we will restore operations following a disaster. Finally, we detail our advanced notice of database upgrades and enhancements, and our HIPAA compliance.

12.b.i Notification of Database Outages

FSSA can rely on our communication and commitment to transparency to provide the State a plan-of-action to mitigate disruptions to MSS. Maximus will notify FSSA within two hours of discovery of a disaster or other disruptions in its normal business operations. We acknowledge we will be subject to corrective actions as set forth in Section 16 for failure to provide notification within two hours of discovery.

12.b.ii Restoring Operations Following a Disaster

In cases of disaster, MSS will quickly recover or see minimal disruption to services. Maximus will be responsible for executing all activities needed to recover and restore operation of information systems, data, and software. We acknowledge this may happen in an existing or alternate location under emergency conditions. We will recover operations within 24 hours of identifying an outage due to a disaster. Maximus understands that failure to restore operations may require the State to assign operational responsibilities to another Contractor. We also acknowledge the State is required to assume the operational responsibilities in emergency cases. Maximus will pay any costs the State incurs associated with our failure to restore operations following a disaster. This includes, but is not limited to, costs to accomplish the reassignment of operational duties.

12.b.iii Advanced Notice of Database Upgrades and Enhancements

FSSA will receive at least 90 days advance notice prior to the deployment of database upgrades and enhancements. Maximus will notify FSSA at least thirty calendar days prior to the installation or implementation of minor software and hardware changes. This includes upgrades, modifications, or replacements. We will notify FSSA at least ninety calendar days prior to the installation or implementation of major software or hardware changes, upgrades, modifications, or replacements. Maximus will comply with corrective actions as set forth in Section 16 for failure to provide advanced notice in the required timeframe. We understand we may be required to delay implementation of the planned upgrade, modification, or replacement.

12.b.iv Health Insurance Portability and Accountability Act (HIPAA) and Security Breaches

Maximus will notify FSSA within one business day upon discovery of a HIPAA, 42 CFR Part 2, or other security breaches. Maximus will comply with corrective actions as set forth in Section 16 for failure to provide advanced notice in the required timeframe. Maximus will pay any costs the State incurs as a result of the violation. FSSA is familiar with our documented process, in use today in our Indiana Eligibility project.



**Supporting Members
Through Complex
Programs**

Member services will incur minimal impacts or no disruptions to services in cases of emergency. Our business recovery and contingency plans have proven to resume services quickly and efficiently. Hoosiers can rely on a helpline to be available when they need us the most, to connect them to critical services and guide them through complex programs and policies that may impact their health.

13. Incoming and Outgoing Transition Activities

Confirm your acceptance of the requirements in Section 11, and please describe your approach to meeting all the requirements identified in the Section 11 of the Scope of Work. Specifically, describe:

- a. Your approach to implementation Activities, including but not limited to:
 - i. A plan for implementation activities demonstrating your understanding of the scope and complexity of the incoming implementation activities within the timeframe specified
 - ii. Methods for ensuring timely go-live
 - iii. Needs for new staff knowledge
 - iv. A comprehensive project management plan
- b. Your plan for completing all components of the required readiness review in a timely and effective manner
- c. Your approach to completing the duties outlined in Scope of Work Sections 11.3 Outgoing Transition Activities and 11.4 Transition Plan in the event of contract termination or expiration including a general end-of-contract transition plan.

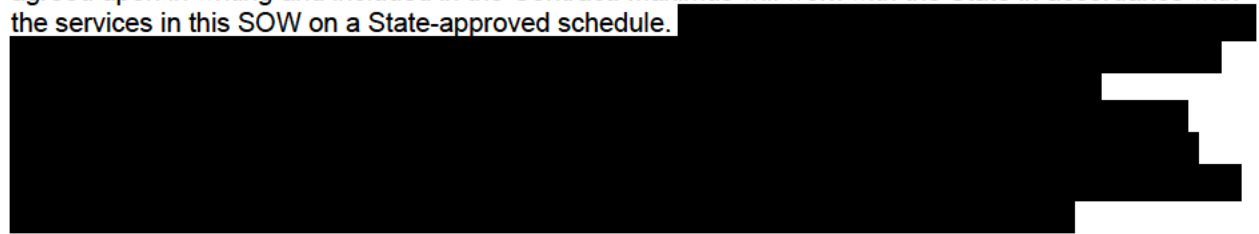
Maximus accepts the requirements in RFP Attachment K Section 11, Incoming & Outgoing Transition Activities, as written. We describe our approach to meeting all requirements identified in Section 11 of the Scope of Work in our Technical Proposal's *Section 13: Incoming and Outgoing Transition Activities* below.

FSSA requires a Pathways for Aging MSS Contractor with the experience to deliver a seamless, smooth transition in or out, without impact to operations or performance. During implementation and transition, our sharp focus remains on continuous, uninterrupted services to Hoosiers.

In the following subsections, we describe our approach to meeting the implementation and transition activities required by the RFP. We will collaborate with FSSA for feedback to approve implementation and transition activities before executing plans into operations.

13.a Implementation Activities

Maximus will be solely responsible for all costs related to incoming transition activities, unless otherwise agreed upon in writing and included in the Contract. Maximus will work with the State in accordance with the services in this SOW on a State-approved schedule.



13.a.i Plan for Implementation Activities



Streamlined Collaboration Across MLTSS Landscape

A timely and comprehensive implementation of the MSS program is critical to the ongoing health and wellness of Hoosiers served by Pathways for Aging. We carefully evaluate program requirements and the interdependency of implementation tasks when proposing our approach.


A critical tool for a successful implementation is our implementation plan. Throughout plan implementation, we document, track, and report on all actions so our team and FSSA can confirm deliverables are progressing as they should, and the project will be ready on time. We pair this stringent tracking with ongoing and open communication with the FSSA.

Maximus used the expected operations start date of July 1, 2024, to prepare our draft Implementation Plan, included in *Appendix E.6: Draft Implementation Plan* of our *Attachment E: Business Proposal*. Our

plan leverages our experience in similar implementations, as described earlier, and demonstrates our understanding of the scope and complexity of establishing a program like Indiana's Pathways for Aging Member Support Services. We will update this plan and submit a final version within 60 days of Contract Commencement. If we need to revise our implementation plan, we will seek revision requests in writing to the State for approval.

13.a.ii Methods for Ensuring Timely Go-Live

Our methods for a timely go-live include implementing the approach used in successful transitions and strengthening partnerships, resulting in stakeholder confidence and support.



Project Management Tools

We will use the following project management tools to establish and continue the needed project management rigor to help ensure a timely go-live:



Supporting Members
Through Complex
Programs

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

Successful Transitions

Our transition approach and methodology along with our tools described above will be used to support Indiana on the successful transition to its MSS project just as it has been used in projects of similar size and scope. *Exhibit 13.a.ii-2: Recent Relevant Implementations* provides examples of state projects that

highlight our ability to implement and transition large, complex projects of similar scope. These projects were all completed on time and often within condensed timeframes.

13.a.iii Needs for New Staff Knowledge

Maximus completes a job description analysis of each position to assess the key skill, knowledge and experience required to complete the job duties. Based on this analysis, we hire candidates with the right education, certifications, experience, understanding, and mastery of role-specific skills. Once hired, staff members go through extensive training on corporate- and role-specific topics.

Our team of MLTSS and call center subject matter experts (SMEs) will work with FSSA SMEs to develop and design training materials that are tailored to the MSS SOW. Our training will fill in any knowledge gaps and will focus on the skills and abilities our staff will require to successfully provide services on day one of the contract. We discuss onboarding and training activities in detail in *Section 10: Staffing*.

13.a.iv Implementation and Transition Project Management Approach

To fulfill the requirements specified in the RFP, we follow our proven project management approach that leverages structure and discipline, yet leaves room for flexibility to meet changes as the project evolves. The ultimate success is based on our transparency and the collaborative efforts of all participants, working under the philosophy of making strategic decisions that support the overall achievement of a successfully executed project completed on time, within budget, and at the highest level of quality.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]

- [REDACTED]

13.b Readiness Review



Streamlined Collaboration Across MLTSS Landscape

Our approach includes conducting an operational readiness review as required for this project, whether internally directed by our project transition team or by the State.

We will verify the preparedness of staff, business processes, data, integration points, telephone system, systems infrastructure, technology networks, governance, reporting, and communications. We use a readiness assessment checklist, along with the RFP requirements and proposal, to make our determination for readiness.

We will comply with the right reserved to the State to conduct on-site reviews of Maximus and our subcontractors, and the operational site, and database. Maximus and our subcontractors will comply and submit documentation that demonstrates our readiness to serve members. Our readiness review includes required documentation showing a fully staffed project, adequately trained staff, and our facilities ready to begin operations prior to the operational start date. We will execute readiness test cycles to include all data interfaces. The readiness assessment process will include all activities that must be completed successfully before the Go-Live Date, including all readiness review activities. We will provide all necessary documentation related to the readiness review and demonstrate contract readiness.

13.c Outgoing Transition Activities and Transition Plan

We will successfully support outgoing transition activities and deliver an effective transition plan.

13.c.i Outgoing Transition Activities

To minimize any disruption of services, we will provide assistance in the transition of operations to a successor Contractor or the State at the direction of FSSA. A successful transition requires a cooperative attitude, dedication to the people we serve, and a commitment to working as a collaborative partner with FSSA, the subsequent Contractor, and other stakeholders to facilitate open communication and efficient transition of all aspects of operations. If necessary, Maximus will provide a well-managed turnover that reduces the likelihood of service disruption to members and minimizes any potential adverse impacts to program operations and stakeholders.

We are dedicated to confirming all outgoing transition activities are smooth and transparent to FSSA and other stakeholders, and invisible to our State partners and members. We understand that the State will give us a 60-calendar day notification prior to the termination date of the Contract in the event FSSA desires to turnover MSS back to the State or a new contractor. Our turnover period will begin on the date provided in the notice and will continue until the State determines that we met our turnover duties and obligations, even if the date extends past our Contract end date.

We recognize the need to maintain staffing/performance levels until the end of the current Contract, up to 11:59 p.m. ET on the termination date of the Contract and implement staff incentive programs. We promote the retention of project staff through the contract term, and coordinate employment transfer opportunities with the successor contractor. Prior to reducing technical staffing levels, we will seek State approval. In addition, we will provide, upon the State's request, information about any deliverables that are pending as of 11:59 p.m. ET on the termination date, including, but not limited to, any outstanding reports, and the status of unresolved complaints.

13.c.ii Transition Plan

We will provide FSSA our Transition Plan within five business days of notice of termination of the Contract for your approval. As part of this plan, we will identify and provide the turnover components to deliver a smooth transition of activities and responsibilities to the succeeding contractor with the least amount of disruption possible. Our Transition Plan will include:

- Explanation of the planned steps to transition activities from Maximus to the incoming Contractor
- Explanation of the planned approach to coordination between the State, Maximus, and the incoming Contractor
- A description of staffing requirements for the outgoing transition and how the staff will support the outgoing transition of services, including a designated Transition Coordinator. At the time the State requests the Contractor initiate transition activity, this individual shall become a full time Transition Coordinator until termination of the Contract.
- Our skills and abilities that will enable a successful outgoing transition of services including past experience with other states transitioning out these services
- Process for data transfer, document management and other materials
- Transfer of member access phone numbers to the State
- Clear statement of staff activities and responsibilities and targeted completion dates
- Comprehensive resource guidance required by the State illustration operations for the SOW
- Extensive training for State Staff
- Replacement of any MSS staff working under the Contract who is judged by the State to be non-performing during the turnover and Contract closeout. The Contractor shall immediately remove the individual from providing services under the Contract upon State's request.

We are confident that our transition plan, if we need upon termination of contract, will provide an efficient transition.

14. Health Equity and Cultural Competency

Confirm your acceptance of the requirements in Section 12, and please describe your approach to meeting all the requirements identified in the Section 12 of the Scope of Work. Detail your Equity and Cultural Competency plan, keeping in alignment with the applicable Office of Minority Health's National Standards on Culturally and Linguistically Appropriate Services (CLAS) Standards.

Maximus accepts the requirements in RFP Attachment K Section 12, Health Equity and Cultural Competency, as written. We describe our approach to meeting all the requirements in Section 12 of the Statement of Work in our Technical Proposal's *Section 14: Health Equity and Cultural Competency* below.

Hoosiers deserve appropriate, professional, and sensitive attention during each interaction with the Pathways for Aging Member Support Services vendor. We promote health equity and cultural competency as a core value. Focusing on providing the supports people need, helps everyone. We will meet the requirements in Section 12 of the Scope of Work by prioritizing these values. Our Equity and Cultural Competency plan reflects our commitment to health equity and our alignment with National Standards for Culturally and Linguistically Appropriate Services (CLAS) standards.

Maximus enforces corporate and project policies to prevent barriers to service, including unconscious bias, on the part of all employees serving Hoosiers. We require our staff to follow strict quality standards and guidelines to prevent discrimination based on race, gender, ethnicity, language, culture, disability, creed, color, sexual orientation, and gender identity or expression while being aware of the unique needs of any specific group.

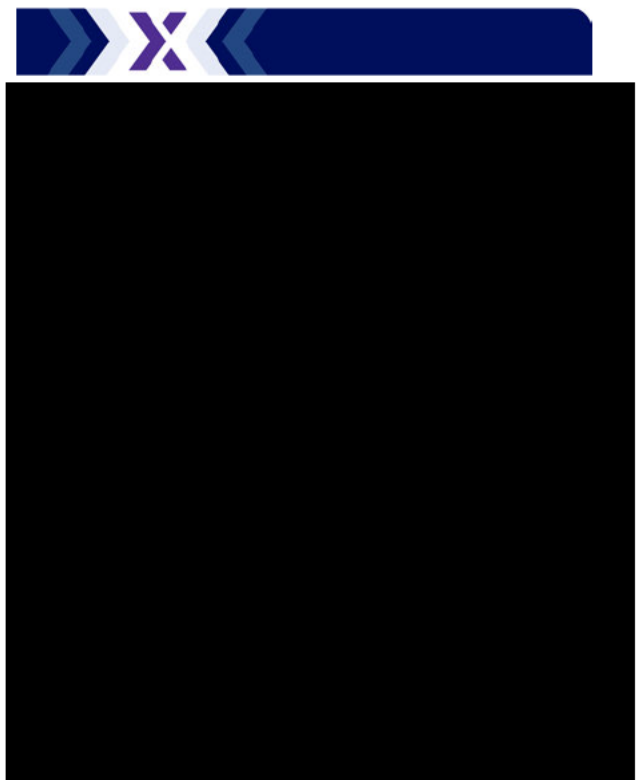
14.a Culturally Competent and Trauma-Informed Service Delivery



Supporting Members
Through Complex
Programs

We communicate with members using a culturally, linguistically, and disability sensitive approach to successfully serve to Hoosiers. This includes, but is not limited to, identifying and valuing differences between individuals and

understanding the impact of cultural differences on interpersonal dynamics. This includes some communities who may be more sensitive to providing personal information, and individuals may be sharing intimate details of their health they find embarrassing or difficult to discuss. We train, offer support, and facilitate the sharing of lessons learned between our staff.



[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

14.b Affirming Worth and Dignity through Person-Centered Services

We hold person-centeredness as critical to building positive, respectful working relationships with members. Being person-centered means treating each member with dignity and respect, focusing on the member's priorities.

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]

We engage and connect with members in a supportive and inclusive way by using preferred language and developed interviewing skills. This reflects our commitment to affirming the worth and dignity of each member who interacts with us.

14.c Equity and Cultural Competency Plan

Maximus commits to providing services to people of all cultures, races, ethnic backgrounds and national origins, geographies, sexual orientations, gender identities, abilities, and religions. We deliver services in a way that honors and respects the worth of the members and preserves their dignity. We promote health equity as a core value.

In alignment with the CLAS standards, Maximus will submit an Equity and Cultural Competency plan to FSSA. This plan will outline the steps our team will take to deliver MSS consistent with the goals of equity and cultural competency. These steps will foster person-centered services and supports, smooth transitions, and an increased access to services.

[REDACTED]

- [REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

When we choose subcontractors, we pay close attention to the subcontractor's transparency, integrity, and cultural competency. Our subcontractors will maintain accessible sites and provide accessible services. We will hold our subcontractors to the same high standards for cultural competency that we hold for ourselves.

Being culturally sensitive and responsive and providing services in a way that promotes health equity is a critical piece of the work we do. We understand achieving competence is not a once-and-done task. Rather, it is an ongoing effort that starts with acknowledging systematic inequities and actively working to promote access and reduce disparities.

15. Quality Assurance

Confirm your acceptance of the requirements in Section 13, and please describe your approach to meeting all the requirements identified in the Section 13 of the Scope of Work. Specifically, describe:

- a. Your approach to quality assurance under the parameters of the Scope of Work. Make sure to address all components of quality assurance, including but not limited to:
 - i. Quality Assurance and Quality Improvement
 - ii. Quality Management and Improvement Program
 - iii. Review of LTSS Program Data
- b. How you will meet the following quality goals throughout the execution of the Scope of Work:
 - i. Providing member support that is person-centered, member-driven, and involves family members, legal guardians, informal caregivers, Supported Decision Makers, and/or Authorized Representatives (as applicable and/or determined by the member).
 - ii. Ensuring smooth transitions for members who need to be referred to a different entity such as, but not limited to, an MCE, physician, or another entity
 - iii. Providing support for members in the appeals and grievances processes
- c. Describe your approach and methods for surveying client satisfaction and how you will analyze and address the findings.

Maximus accepts the requirements of RFP Attachment K Section 13, Quality Assurance, as written. We describe our approach to meeting all the requirements identified in Section 13 of the Scope of Work in our Technical Proposal's *Section 15: Quality Assurance* below.

FSSA and Hoosiers alike depend on the Pathways to Aging MSS vendor to demonstrate ongoing excellence and accountability. Accountability promotes quality outcomes for Hoosiers and the State by minimizing errors, inaccuracies, and inefficiencies. Maximus commits to promoting high quality services for Hoosiers.

We will meet all requirements in Section 13 of the SOW through our comprehensive Quality Management and Improvement Program (QMIP). The QMIP monitors and measures our performance on the contract, showing us what works and what needs improvement. Through the QMIP, we verify how our services demonstrate the excellence required to meet FSSA's program goals.

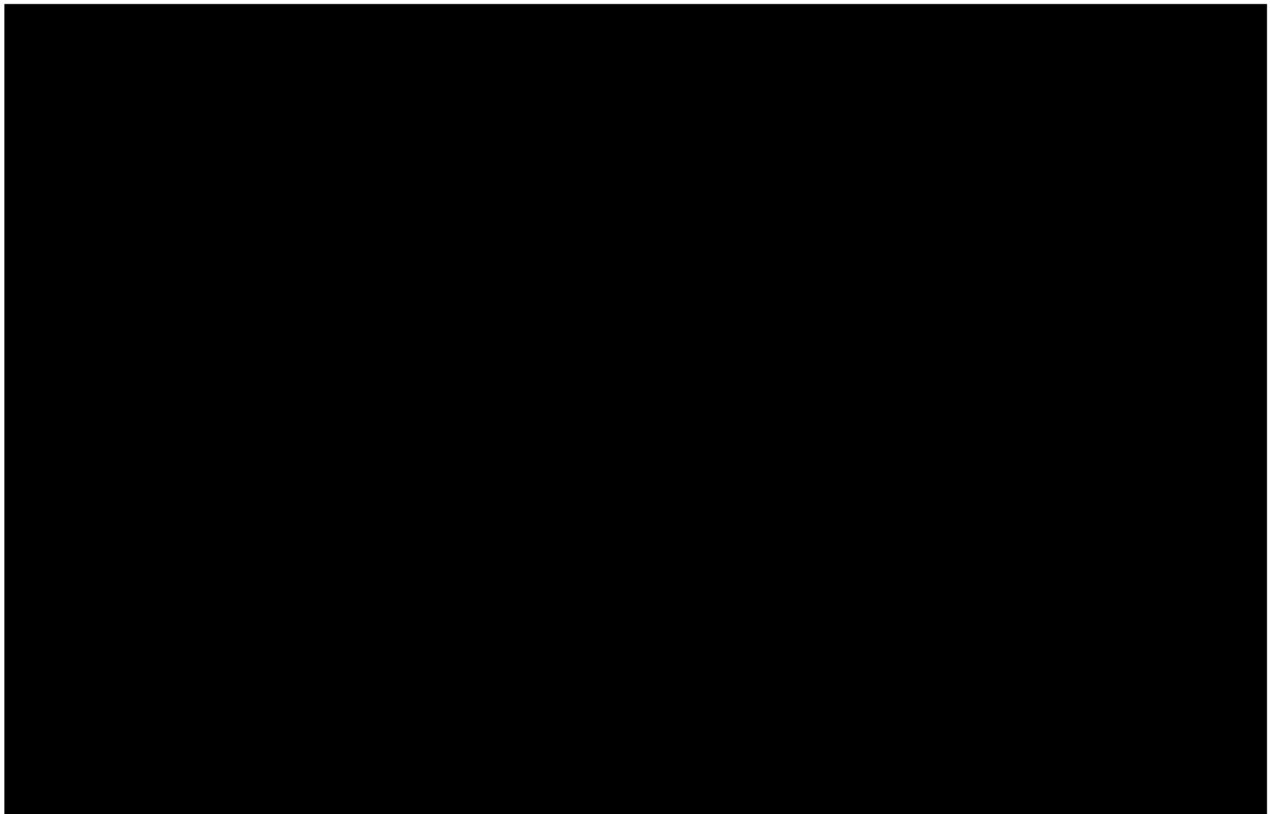
[REDACTED]

As we conduct Pathways for Aging MSS, we will implement intensive quality oversight and feedback loops. These feedback loops address and resolve any needed adjustment to our process or training. Our quality measures confirm regulatory and contractual requirements for timeliness, reliability, and integrity. This allows us to confirm that we perform MSS with distinction. We maintain our standards through rigorous recruitment standards, tailored quality control initiatives, frequent quality measurement, targeted feedback, and insightful data analytics.

15.a Approach to Quality Assurance Under Parameters of the Scope of Work

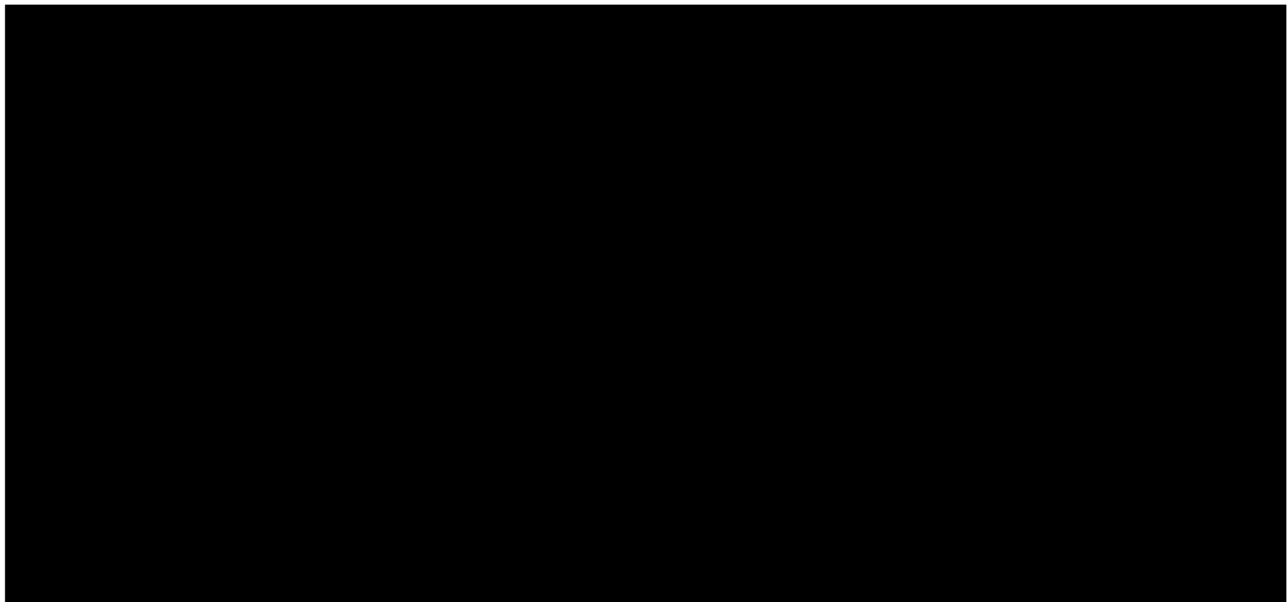
15.a.i Quality Assurance and Quality Improvement

Maximus will apply a comprehensive quality assurance and improvement model with end-to-end quality checkpoints, resulting in accurate outcomes. *Exhibit 15.a.i-1: Maximus Quality Assurance Model* shows an overview of our quality template.



15.a.i.1 Continuous Quality Assessment and Performance Improvement

Our quality oversight approach instills a culture of continuous improvement for MSS. We maintain a continuous feedback loop, from hiring and training, to quality oversight and reporting. Consistent and timely feedback of quality outcomes improves member support specialist performance and efficiency, leading to stronger customer service. *Exhibit 15.a.i-2: Continuous Feedback Loop* depicts our process.



Using the results from both external and our own internal audits, we:

- Identify trends in performance
- Develop and deploy interventions and remediations when performance can be improved
- Monitor subsequent quality data trajectory to analyze the impact of interventions to determine if additional or changed intervention is necessary
- Verify that approved policies and procedures for each operational area are being followed
- Develop process efficiencies leading to quality improvements

We use this information to improve staff performance and efficiency by updating training, procedures, and conducting staff coaching sessions. We believe this data tells a story about operations. If or when the data changes, we question potential factors to verify outcomes remain satisfactory to FSSA. Our overall approach provides continuous monitoring of overall quality and adherence to project standards, procedures, and policies.

15.a.ii Quality Management and Improvement Program

Our QMIP promotes accountability across all organizational levels by defining staff responsibilities and expectations related to key performance indicators. Key performance indicators will include service level agreements (SLAs) and other benchmarks as described in our proposal's *Section 18: Key Performance Measures and Contractor Performance*. It covers the policies and procedures for each operational area, and our process for conducting periodic internal reviews. It also defines the standard by which service delivery is observed and evaluated.

Through our robust QMIP, we track, identify trends, and report on quality and compliance. Our measurements extend across project staff, tasks, contract deliverables, and statewide data quality. We describe each aspect of our QA model, below:

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

15.a.iii Review of LTSS Program Data to Support Quality Management and Improvement

We understand the critical importance of capturing accurate, actionable data to support our members' access to care and quality of service. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

15.b Quality Goals



Supporting Members
Through Complex
Programs

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

15.b.i Ensuring Smooth Transitions for Members

As mentioned above, we audit our Member Support Specialists with random call sampling to confirm they provide warm handoffs to appropriate Indiana programs, services, and entities if applicable. Through our QA check sheet, we align the transition with training materials and capture key criteria as well as authorization and customer service requirements. Through scoring analysis, if we notice significant trends, our customer support supervisor hosts meeting to get quality scores back in alignment. We also have a critical alert tracking tool to highlight items needing immediate attention.

15.c Surveying Client Satisfaction

Evaluating the satisfaction of the individuals we serve is an important part of our person-centered approach. We use customer satisfaction surveys in many of our health services projects to gather valuable feedback from customers. To provide insight into member satisfaction, we will partner with FSSA to build a customer satisfaction survey of MSS. The survey will apply to all forms of member contact; from member calls, to emails, to in-person contact. We can combine these data points to report back to FSSA on our performance. Over time, we use survey data to make targeted improvements that lead to better outcomes across MSS.

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]

We will submit quarterly reports of our findings to FSSA. As required, we will submit these reports by the 15th of the month after the end of the quarter.

Many times, our surveys tell us what we are doing right. Hearing accolades allows us to understand what remains meaningful as we continue to make changes for continued growth.

Maximus will align with all three State quality goals. We can monitor, detect, and improve both global and granular measures of performance. Tracking data by staff, task, date, and by outcome leads to actionable insight for targeted improvements.

16. Subcontracting

Confirm your acceptance of the requirements in Section 14, and please describe your approach to meeting all the requirements identified in the Section 14 of the Scope of Work. For all areas in which subcontractors will be performing a portion of the work, clearly describe their roles and responsibilities, related qualifications and experience, and how you will maintain oversight of the subcontractors' activities. Additionally, please:

- Summarize your proposed subcontracts and plans to ensure that all subcontract agreements comply with the requirements set forth in Section 14.
- Describe the metrics used to evaluate prospective subcontractors' abilities to perform delegated activities prior to delegation.
- Describe the policies and procedures used for auditing and monitoring subcontractors' performance.
- Describe the enforcement policies and corrective action used for non-performance, including examples.
- Specify the quality goals and performance oversight activities that will be required of subcontractors providing direct services.

Maximus accepts the requirements in RFP Attachment K Section 14, Subcontracting, as written. We describe our approach to meeting all the requirements of Section 14 of the Scope of Work in our Technical Proposal's *Section 16: Subcontracting* below.



Streamlined Collaboration Across MLTSS Landscape

Experienced subcontractors are critical to delivering streamlined collaboration across the MLTSS landscape in Indiana. FSSA requires a Contractor who is knowledgeable about the community and local resources available to members. FSSA will benefit from our subcontractors who bring extensive experience to Pathways for

Aging MSS. They will provide local staff recruitment and the printing and mailing of State-approved materials.

FSSA can rely on our partners to make the same commitment that we have to quality and customer service to better serve members, FSSA and MSS stakeholders. Maximus built strong partnerships with companies that deliver accurate services and meet the requirements of our state clients. They bring their experience delivering high-quality services for other contracts in the Midwest, including Indiana.

We chose our subcontractors due to their commitment to meet and exceed project requirements and their knowledge of Indiana and its population. Due to our shared commitments, we have fostered productive and long-lasting business relationships. Maximus and our subcontractors are also committed to delivering services in the most efficient manner possible, while helping the project exceed target service level agreements (SLAs), reducing risk for FSSA.

[Redacted]

■ [Redacted]

■ [Redacted]

■ [Redacted]

[Redacted]

■ [Redacted]

■ [Redacted]

■ [Redacted]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

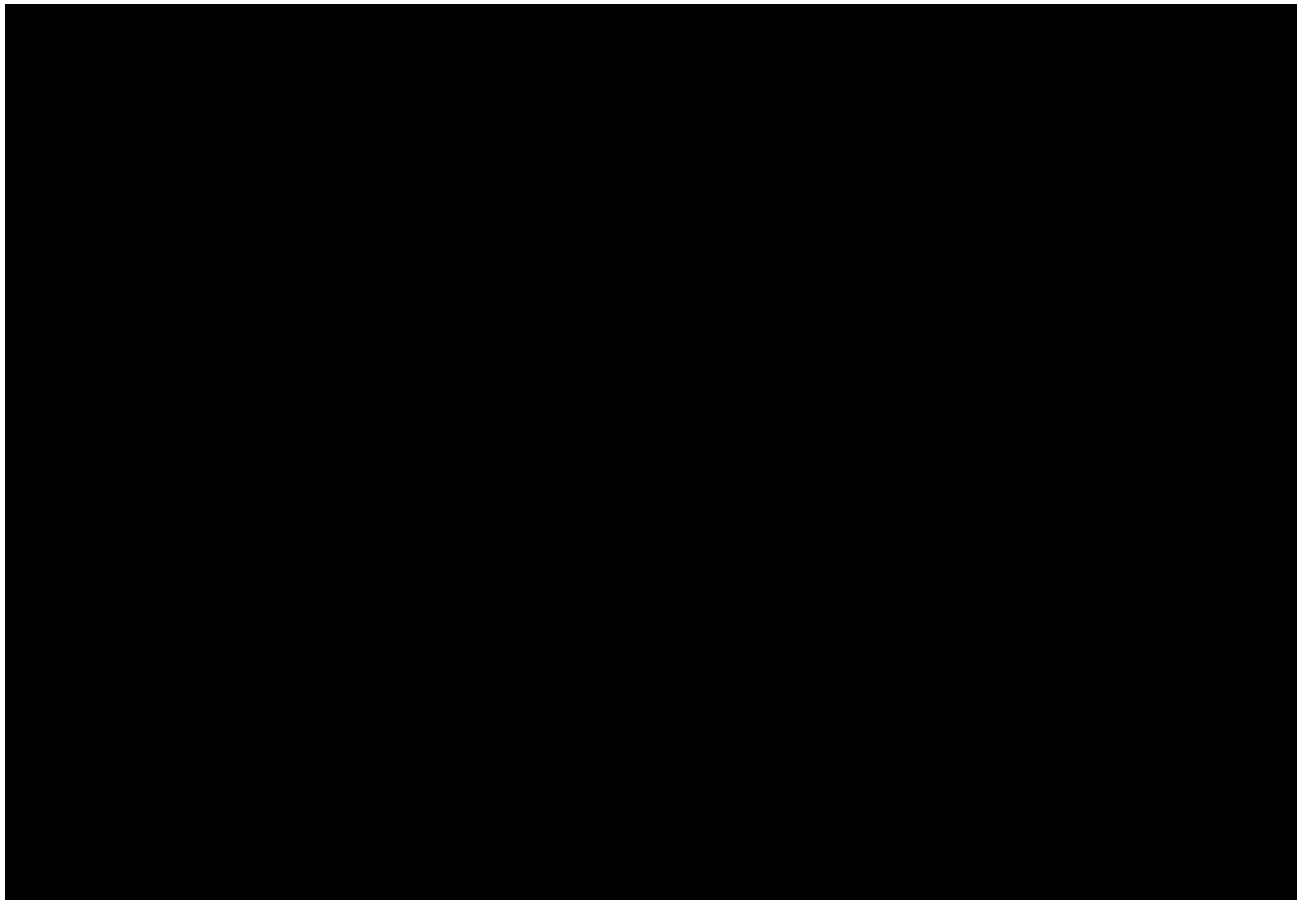
In the following subsections, we describe our partnerships with our longstanding Indiana partners. We discuss:

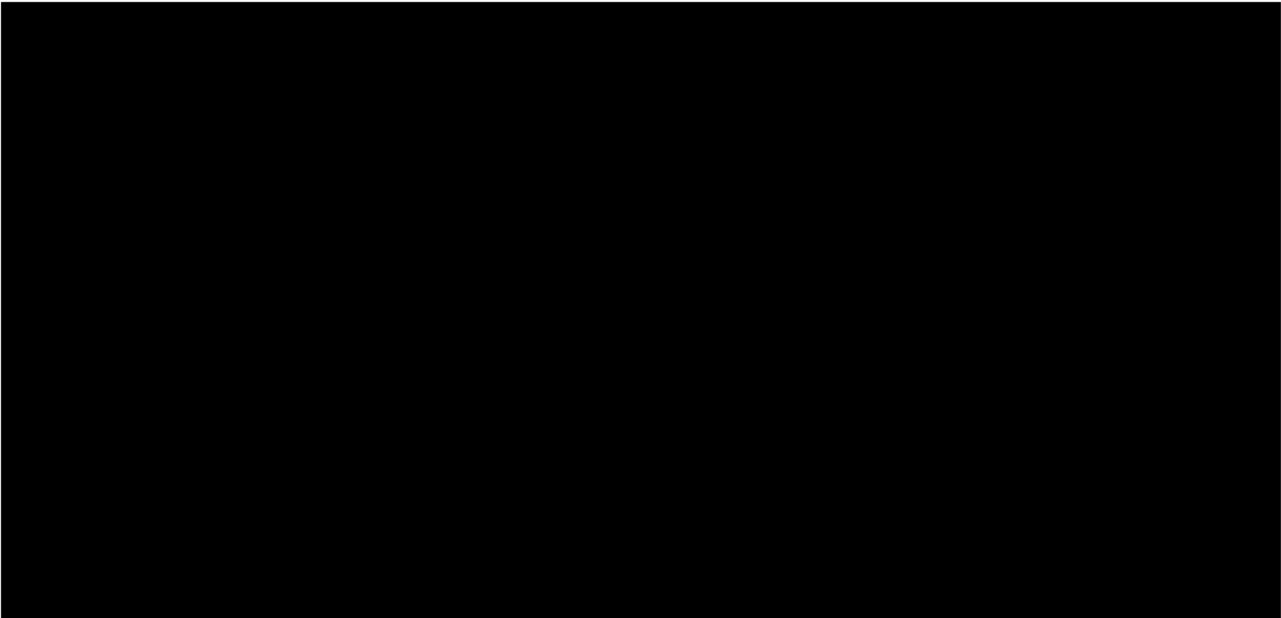
- Subcontractor agreements, how we evaluate their performance, and our routine auditing duties
- Policies and procedures for subcontractor non-performance
- Our quality goals and performance oversight activities to verify subcontractors adhere to their commitment to Maximus

16.a Subcontractor Agreements

Each of our proposed subcontractors bring demonstrated experience and successes delivering services for Indiana and similar projects across the U.S. Each embodies the Maximus values of quality and service as part of their own delivery models and demonstrates a high level of commitment to customer service. To recruit skilled member support specialists, we will contract with a local Minority Business Enterprise (MBE), a Women Business Enterprise (WBE), and an Indiana Veteran-Owned Small Business (IVOSB). We will also contract with a local WBE to complete print and mail fulfillment.

We chose MSS subcontractors based on our trust built with firms with whom we already have established working relationships. Our subcontractors support multiple programs for Maximus, and are shown in the table below in *Exhibit 16.a-1: Subcontractors*.

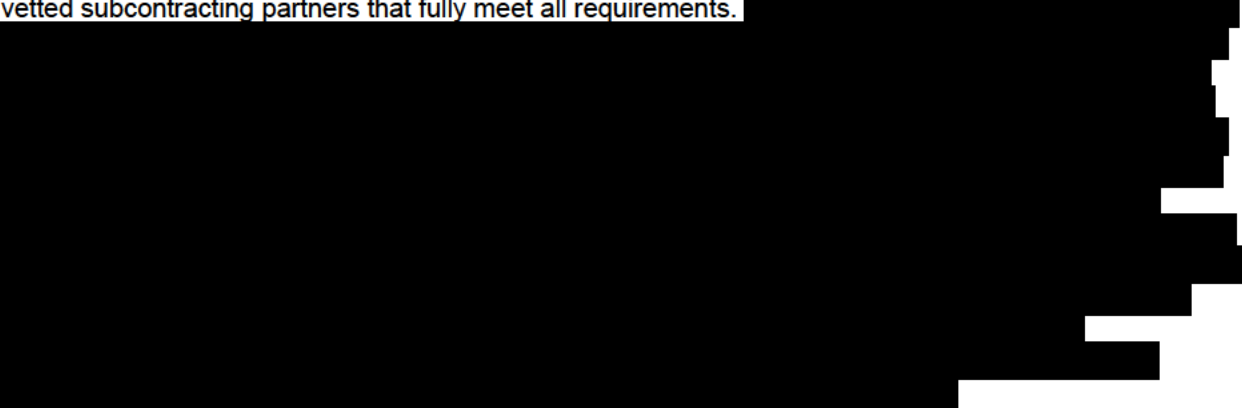




All subcontractor agreements Maximus enters into will comply with the requirements of RFP Section 13. Maximus understands we maintain ultimate responsibility for the efforts of any subcontractor. For that reason, we only select subcontractors who meet our rigorous quality standards. We follow detailed corporate and project-level procedures to verify our subcontracts continue to meet applicable standards and service level agreements (SLAs).

16.b Subcontractor Performance

The Pathways for Aging Member Support Services program will only operate with support from rigorously vetted subcontracting partners that fully meet all requirements.



We review historical staffing and attrition data of staff augmentation subcontractors to assess their ability to recruit, screen, and select workers who meet our job requirements. We also consider the staff sourcing techniques subcontractors use to recruit and support a diverse candidate pool. In addition, we also:

- Confirm there is no conflict of interest, including working with MCEs now or in the future
- Verify their customer service experience responds to operational needs, including knowing to deliver disciplinary action and processing terminations in a timely fashion
- Provide customer service include answering their employees' questions and concerns
- Review the subcontractor's markup and billing rates
- Review their employee benefits offerings

16.c Subcontractor Auditing



Supporting Members Through Complex Programs

Pathways for Aging MSS will be staffed using our subcontractors with knowledgeable personnel who use clear communications to help members navigate a complex set of services, programs, and policies. To bring success to MSS, we will use our subcontracting management approach that includes routinely auditing

subcontractors for performance. We rigorously assess prospective subcontractors' past performance and qualify only those meeting our tough standards. Once a subcontractor meets the initial qualifications, we establish structured subcontracts informed by and based on the goals and requirements of our government partners.

We retain ultimate accountability for the actions of all subcontractors we engage with and will verify their compliance with our subcontractor standard regularly.

We will submit to FSSA at least annually, or upon request, a listing and description of all contracts with our subcontractors. This report includes the specific duties each subcontractor performs, their compliance, any corrective actions, and the outcomes of our monitoring activities. Whenever there are any changes in subcontractor arrangements, we will update the information and resubmit to FSSA, promptly.

16.d Policies and Procedures for Subcontractor Non-Performance

Our contracts with subcontractors include clear key performance indicators (KPIs) and SLA metrics for meeting timeliness, reporting, and quality standards. We meet with contractors quarterly to review performance against the KPIs. There are also several performance-related SLAs in our contract to track and measure factors such as employee retention rates and quality of placements.

Failure to meet those KPIs and SLAs does not always result in financial penalties. In some instances, we include performance incentives. We evaluate subcontractor performance against these KPIs and SLAs on an ongoing basis. Any patterns of negative trends could result in issuing corrective action plans or cancellation of the agreement if warranted.

Maximus has enforcement policies and corrective actions to address subcontractor performance that does not meet contractual standards. For example, in 2021, one of our subcontractors was not scheduling PASRR Level II assessments in a timely fashion in one of our assessment projects. To remediate the subcontractor's performance, we implemented process changes so the subcontractor scheduled more efficiently and met mandated timing requirements. This reduced the effort for Maximus and the subcontractor staff and resulted in faster assignment of assessments. By enforcing KPI and SLA metrics, we proactively addressed the subcontractor's performance without needing to issue a corrective action plan or cancel the agreement.

16.e Quality Goals and Performance Oversight Activities

Pathways for Aging Member Support Services will be supported with high-performing subcontractors that consistently deliver on timeliness and quality of services required. For MLTSS, we will develop specific Pathways for Aging Member Support Services QA tools to measure the quality goals and performance oversight activities that will be required of subcontractors providing direct services in this project. As discussed above, we monitor subcontractor's performance by verifying they consistently meet KPIs and SLAs specific to each project work being performed. They will be required to meet the established controls specific to their roles and duties, as described above, and will frequently report their performance during periodic status calls.

While specific subcontract arrangements can vary, our overall structure and process illustrates our management and communication with subcontractors. This is a formal procedure that clearly outlines and communicates the specific details of a statement of work.

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

[REDACTED]

[REDACTED]

Indiana will receive support from the high-performing subcontractors with whom we have fostered trust delivering excellent customer service to members over the years. We are confident our subcontractors will deliver outstanding services while helping Maximus and MSS incorporate process improvements.

17. Invoicing and Payments

Confirm your acceptance of the requirements in Section 15, and please describe your approach to meeting all the requirements identified in the Section 15 of the Scope of Work.

Maximus accepts the requirements in RFP Attachment K Section 15, Invoicing and Payments, as written. We describe our approach to meeting the requirements of Section 15 of the Statement of Work in our Technical Proposal's *Section 17: Invoicing and Payments* below.



Streamlined Collaboration Across MLTSS Landscape

Our government partners rely on accurate monthly invoicing for financial information. Our billing process supports fiscal integrity and financial stability, which are critical to administering public programs. We designed our efficient billing and invoicing approach to provide departments like FSSA with peace of mind.

17.a State-Approved Monthly Invoicing

As an industry leader in financial management, we commit to upholding compliance and the requirements of the State during our contract. Our extensive experience managing contingent and fixed price contracts, including our EB, Eligibility Support Services, and PASRR contracts in Indiana, enables us to bring an established invoice management process and billing guidelines that inform monthly invoice creation. We will invoice the state monthly at a fixed-fee rate for contract operations. Invoicing will include ongoing operations staffing, systems, and other operations costs. We understand and agree that the State will compensate implementation on a milestone basis. We will submit all invoices through a State-approved invoice form. We will clearly delineate respective costs as separate line items in invoices submitted to the State for reimbursement, including monthly fixed fees for operations and individual implementation costs.

17.b Withholding Adjustments

Our invoices will reflect any applicable withholding adjustments in accordance with the provisions of RFP Attachment K, Section 16. These withholdings provide a means for FSSA to uphold the integrity of taxpayer dollars.

17.c Maximus's Invoicing Integrity

Our Finance Manager, Karen Glance, will oversee all financial aspects of the Indiana Pathways for Aging Member Support Services project operations. Ms. Glance, in coordination with our Project Manager, Brian Robinson, will collaborate closely with FSSA to meet billing and invoicing requirements. Our Corporate Finance team will support the team by monitoring project financial requirements and verifying monthly billing information. Our Corporate Accounting team will also provide support by managing monthly payroll and invoice processing.

Our project-level and corporate-level financial resources provide FSSA with stable, reliable results. We achieve our results by applying stringent management across Maximus. Our principles involve planning, organizing, directing, monitoring, and controlling financial operations to establish accuracy and sustainability. We highlight the approach our financial experts use in *Exhibit 17.c-1: Industry-leading Financial Management*.

Forecasts & Reconciliation

Maximus creates monthly budget forecasts and reconciles corporate accounting records for the prior month

Transparency

FSSA will be kept in the know as we communicate overall financial processes, including anticipated monthly, quarterly, and annual billing

Efficiency & Accuracy

Industry-leading financial management systems, such as our electronic timesheet tool, enable us to track and provide efficient, accurate reports



Corporate Monitoring

Maximus provides close corporate monitoring of project adherence to forecasts

Variance Analysis

We investigate the variance between budget forecasts and budget actuals to provide more accurate billing forecasts

Accountability

As a public company, we are subject to federal auditing. Ernst & Young, our corporate auditor, sits on budget process calls and reviews forecasts

23-P21001.0178-17

Exhibit 17.c-1: Industry-leading Financial Management. *Our Financial Management team brings industry-leading financial values and benefits to FSSA, including transparency, efficiency, and accuracy.*

Establishing a mutual agreement on how we will bill before delivering invoices supports FSSA's quick review and approval, saving time and resources. Our current invoicing process for FSSA consists of a layered review to make sure that the invoice sent to the State is accurate. Each month, a Data Analyst reviews our billing report. If the Data Analyst discovers any discrepancies, the project leadership team investigates and reconciles the data. Once they have reconciled any discrepancies, the project leadership team validates the accuracy of the billing report. As a final check, the project's Senior Operations Director also reviews the billing report. This multilayered process validates the accuracy of our invoicing. Upon completing this review process, our finance team prepares the invoice for FSSA. We will use a similar process for the MSS program to produce invoices that accurately reflect services performed. Ms. Glance and her team will review financial metrics regularly to keep the financial aspects of the project on track. A regular review of billing data by our centralized operations and analytics team provides another layer of assurance that multiple entities review and sign off on the accuracy of our monthly invoices.

Accountability is a core tenet of our financial management and invoicing practices. FSSA will collaborate with a team focused on invoicing accuracy and integrity from day one. We will work hand in hand with FSSA to meet and exceed your expectations by delivering full transparency in our invoicing processes.

18. Key Performance Measures and Contractor Performance

Confirm your acceptance of the requirements in Section 16, and please describe your approach to meeting all the requirements identified in the Section 16 of the Scope of Work. Confirm your acceptance of the State's performance standards and describe:

- a. How you will meet the State's performance standards.
- b. In the event that performance standards are not met, your plan to allocate additional resources to prevent future lapses and resolve any issues affected by unmet standards.

Maximus accepts the requirements in RFP Attachment K Section 16, Key Performance Measures and Contractor Performance, as written. We describe our approach for meeting all the requirements of Section 16 of the Statement of Work in our Technical Proposal's *Section 18: Key Performance Measures and Contractor Performance* below.



Pathway to a Future State

We share in FSSA's commitment to timely, person-centered, and accurate services that prioritize member needs and preferences, and we will meet the requirements in the Scope of Work with those values in mind. We know that meeting the performance standards for this program will result in members receiving exceptional customer service from staff knowledgeable in complex

federal regulations and health plan rules, comprehensive education on the grievance and appeals processes, and accurate and clear guidance on their rights as they relate to the Pathways for Aging program. We will proactively work with FSSA to meet or exceed performance standards and SLAs.

18.a Meeting State Performance Standards

We will meet Indiana's performance standards through our performance management approach, focusing on meticulous planning and careful project oversight to meet our contractual obligations. Our approach stresses early detection and prevention of performance risks through methodical risk analysis. Our Project Manager will use our quality and risk management resources to consistently monitor performance to identify risks, proactively mitigate potential issues, and report performance metrics back to FSSA.

18.a.i Helpline and Electronic Availability



Supporting Members Through Complex Programs

Every day, our government partners in Indiana and across the country rely on Maximus to deliver helpline services supporting critical government programs. Our Genesys telephony system, ConnectionPoint CRM, and strategic staffing approach form the foundation of our approach to meeting MSS performance standards.

Members calling the helpline will go through the IVR which answers the call on the first ring, 24/7, and guides the caller through easy-to-understand options. The member can also connect directly to a Member Support Specialist at any point Monday through Friday, between 8:00 a.m. and 8:00 p.m. ET, without having to listen to our IVR options. Genesys has an automatic availability setting, meaning a Member Support Specialist will be connected to another caller immediately after they finish a call during peak call volume times. Our systems and staggered staffing model will help us meet the following performance standards:

- Telephonic support available between 8:00 a.m. and 8:00 p.m. ET without incurring an outage lasting longer than six hours. Genesys includes built-in IT monitoring to alert our team of IT experts of any outages. Our team will act quickly to work with Genesys to minimize outage time.
- 98% of all emails received from members, or a member's family member, legal guardian, informal caregiver, Supported Decision Maker, and/or Authorized Representative (as applicable and/or determined by the member), responded to within one business day. We will tailor our ConnectionPoint CRM with the logic to support this performance standard and work queues that will generate tasks for Member Support Specialists to meet the one business day response timeframe.

- Member website available and accessible 24/7 except when preannounced downtime has been approved by the State for routine maintenance or upgrades. Our website has built-in failsafe processes to monitor website outages and alert our digital team for prompt engagement to prevent downtime.
- 100% of voicemails responded to by the end of the next business day. As part of our daily operations management process, Member Support Specialists will be assigned to monitor voicemails around the clock. The date and time of each voicemail is recorded in our Genesys system, allowing us to commit to returning calls by the end of the day or no later than the next business day.

18.a.ii MCE Issue Resolution and Follow-Up

We recognize that members will rely on us to support them as they resolve issues with MCEs. We want members to feel heard and to know what options they have available to them. When they contact us to discuss a complaint, our staff ask questions to determine their perspective, request informed consent to investigate the complaint, and determine how to reach their desired outcome. Our person-centered interactions with members, supported by our technology, will result in our meeting or exceeding FSSA's performance standards:

- We will receive, triage, and assess 98% of issues each quarter within the approved Member Interaction Plan timeframe.
- We will resolve and close 98% of member contacts each quarter requiring issue resolution within the approved Member Interaction Plan timeframe.
- We will track 98% of case files each quarter correctly in ConnectionPoint.

We will serve as a resource to members as they navigate the complaint, grievance, and fair hearing processes. As a conflict-free entity, we prioritize the members interest above all other concerns. Member support through MCE issue resolution and follow-up can include any or all of the following elements as appropriate:

- Referrals to legal representation
- Referrals to supportive resources outside of the MCE
- Guidance regarding the timeframes for complaints, grievances, and fair hearings
- Guidance regarding the appeals process, including the reasons for the appeal and potential resolution
- Liaising between the member, legal representatives, the Indiana Office of Administrative Law Proceedings (OALP), and FSSA

We will provide additional support using a case management approach to member support services. We will work with members, their authorized representatives, and their legal representatives on possible solutions throughout the hearing process. Member Support Specialists will follow OALP's decisions, assisting individuals with receiving new documents or determinations. Our knowledgeable staff will help members understand regulations and reasons for an MCE's denial. We do not provide legal representation for individuals, but we can help connect them to those resources.

We will track all complaints received by the helpline in our ConnectionPoint CRM platform. The system automatically records the complaint's date and time and generates a tracking number, which we use for tracking and monitoring. Member Support Specialists enter details such as the name of the individual, the complaint reason, all actions taken to resolve a complaint along with the appropriate resolution or escalation code, and current status. ConnectionPoint uses automated workflow to route the complaint according to our defined escalation processes. The workflow includes escalation to FSSA, escalation to an outside entity, and follow-up action.

18.a.iii Reporting

Our reporting approach aligns with Indiana's commitment to transparency and quality. We combine State system data, member support interaction data, and other project data to provide near real-time visibility into contract performance and MLTSS trends. Our reporting integrates BI technologies and in-depth data analysis to drive informed decision-making and continuous program improvements for FSSA and enables Maximus to meet all reporting requirements:

- We will deliver 100% of reports, including ad hoc reports, in a timely and accurate manner.
- We will be fully prepared for readiness review as stipulated in Section 11 of the RFP's Scope of Work. We agree that we will be liable for the State's incurred costs should we fail readiness review.
- We welcome the State's monitoring for performance and compliance. We understand and agree that the State will enforce any remedies listed in Section 11 of the RFP's Scope of Work for non-compliance in general contract provisions and reporting. We will adhere to any remedies or corrective action the State mandates.

As a longstanding partner of FSSA, we are familiar with the interfacing requirements needed to facilitate data sharing between Maximus and the State's systems. DecisionPoint, our complementary reporting solution, will work in conjunction with the State's existing operational environment.

DecisionPoint, our robust reporting and analytics platform, integrates with our ConnectionPoint CRM system. Integration between these programs enables a complete view of our operational performance and customer service levels. We can use this technology to analyze data and generate reports and dashboards. DecisionPoint dashboards are configurable and provide an end-to-end view of all contacts our Member Support Specialists handle. The dashboards describe members' experience with us, including our adherence to performance standards, quality monitoring scores, and customer satisfaction scores.

We will generate weekly operational and management reports for internal use and for FSSA. We will work with FSSA during implementation to finalize specific reporting data and design elements. DecisionPoint presents near real-time performance data formatted as graphics and tables. It permits drill-down analytics on specific data and trends. Some commonly used dashboards include a monthly summary dashboard, weekly summary dashboard, and performance dashboard. We have provided samples of our dashboards in *Appendix F.2: Sample Performance Reports*.

18.a.iv Service Level Agreements

Corrective actions and payment withholdings provide FSSA a contractual structure for ensuring we meet program requirements. Despite our proactive efforts to meet all contract requirements, problems might still arise. As such, we accept that non-compliance with the standards listed in Section 16 of the Scope of Work may be subject to non-compliance remedies, as written in RFP Attachment F Section 16.2.2.d.

If the State requires us to put a corrective action plan in place, we will implement the following corrective action activities with the State's approval:

- **Problem Identification and Investigation Actions:** We identify problems before they reach an unacceptable level and develop preliminary containment actions. We conduct a root cause analysis of the potential problem.
- **Preventive and Corrective Actions:** Once we identify the root cause, we develop multiple solutions for corrective action and implement those that are most feasible.
- **Effectiveness Verification:** We determine the impact or outcome of the newly implemented solution. Staff verifies the effectiveness and timeliness of the corrective/preventive actions implemented to make certain the cause of the problem has been resolved or eliminated. We conduct intensive monitoring to evaluate the results and determine the effectiveness of the solution. If improvement is

insufficient, the process starts all over again. We document results to help build our management best practices.

- **Standardized Actions and Process Improvements to Support Process Improvements:** Our process workflows are subject to a continuous review cycle that results in further improvements to processes, performance, targets, and efficiency.
- **Conclusion/Notification:** Once we achieve desired performance and obtain agreement from FSSA that the corrective action plan is complete, we conclude the process and make appropriate notifications.

18.b Issue Resolution

In the event we fall short of performance standards, we will allocate additional resources to resolve the deficiency. The workforce management (WFM) functionality built into Genesys meshes with the data analytics from DecisionPoint to facilitate appropriate staffing. Our WFM system provides transparency into all aspects of staff management. This system provides staff levels and schedules, giving full visibility into operations. With this information, the Operations Supervisor will work closely with the program manager to fine-tune staffing.

Using Genesys, we combine historical call volume data with Member Support Specialist profile data to analyze and inform staffing forecasts. DecisionPoint provides near real-time data for continuous member contact monitoring, including current metrics and Member Support Specialist disposition. By analyzing call center volume data and case workloads for the Member Support Specialists, we manage staffing levels. As we note increasing demand, we adjust workloads accordingly. Data trends and analyses inform our future staffing models, so that we are prepared to ramp up or scale down during any unexpected changes in volume.

Genesys also has an automatic availability setting, meaning a Member Support Specialist will be connected to another caller immediately after they finish a call during peak call volume times. This automation decreases wait times for callers and allows them to receive the assistance they need quickly.

We will meet with FSSA's assigned contract manager regularly to assess and review our performance. These meetings will foster awareness and prevent unanticipated problems and risks for the first few months post go-live. During that time, we will analyze the impact and probability of any identified issues. We use a variety of tools to conduct a quantitative and qualitative risk analysis, including the best estimate of the event probability and a forecast of the event impact. Once we determine the potential impact of any problems identified, we will work in collaboration with FSSA to prioritize and implement resolution strategies.

Maximus confirms its commitment to the State of Indiana to fulfill the contractual requirements of the state's Pathways for Aging Member Support Services project. Because we know that failure to meet performance standards has a negative impact on those we serve, we will proactively work with FSSA to meet or exceed all performance standards and service level agreements.

Appendix F.1:

Resumes



Appendix F.1: Resumes

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

- [illegible]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

- [REDACTED]
- [REDACTED]

[REDACTED]

[REDACTED]

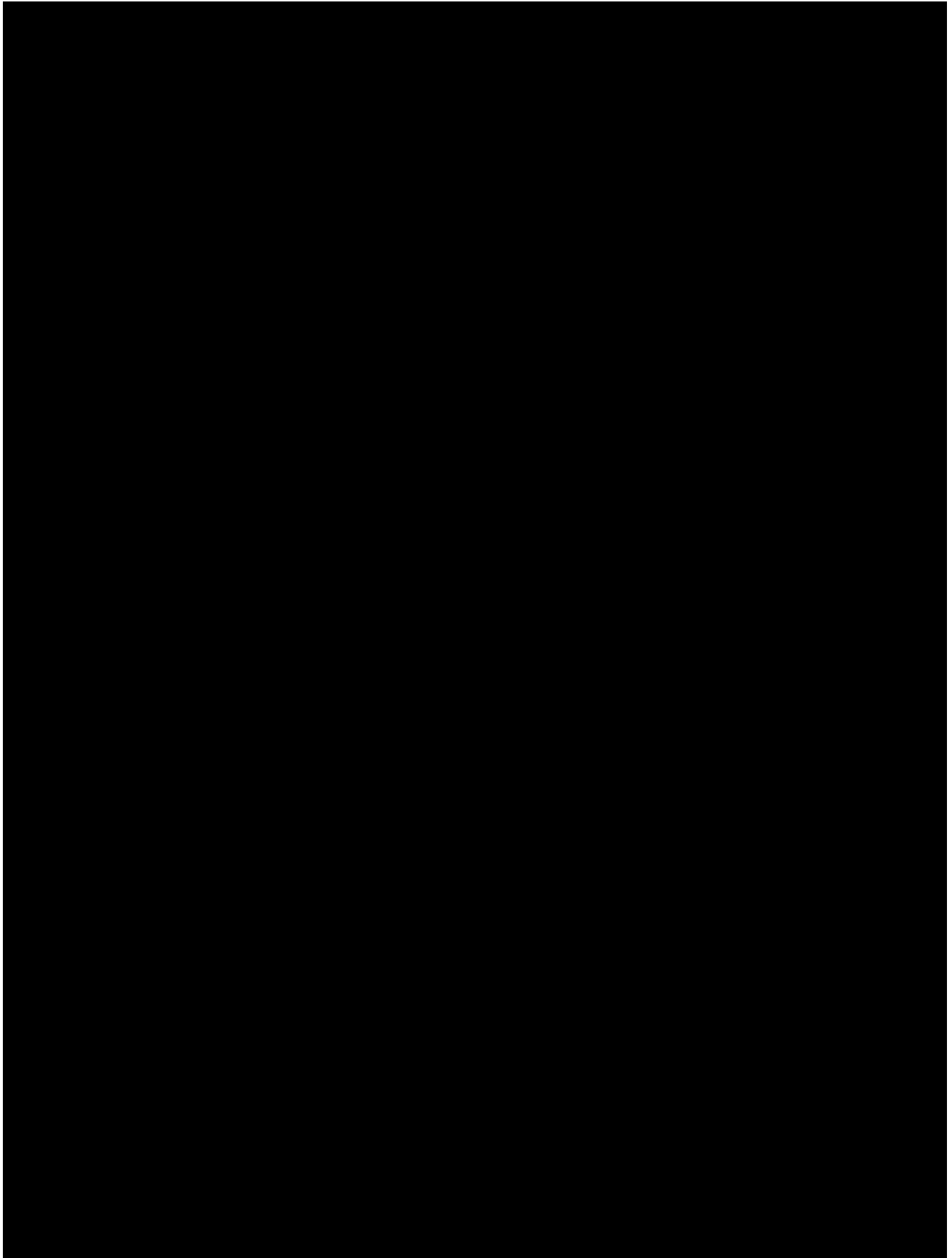
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]
- [REDACTED]

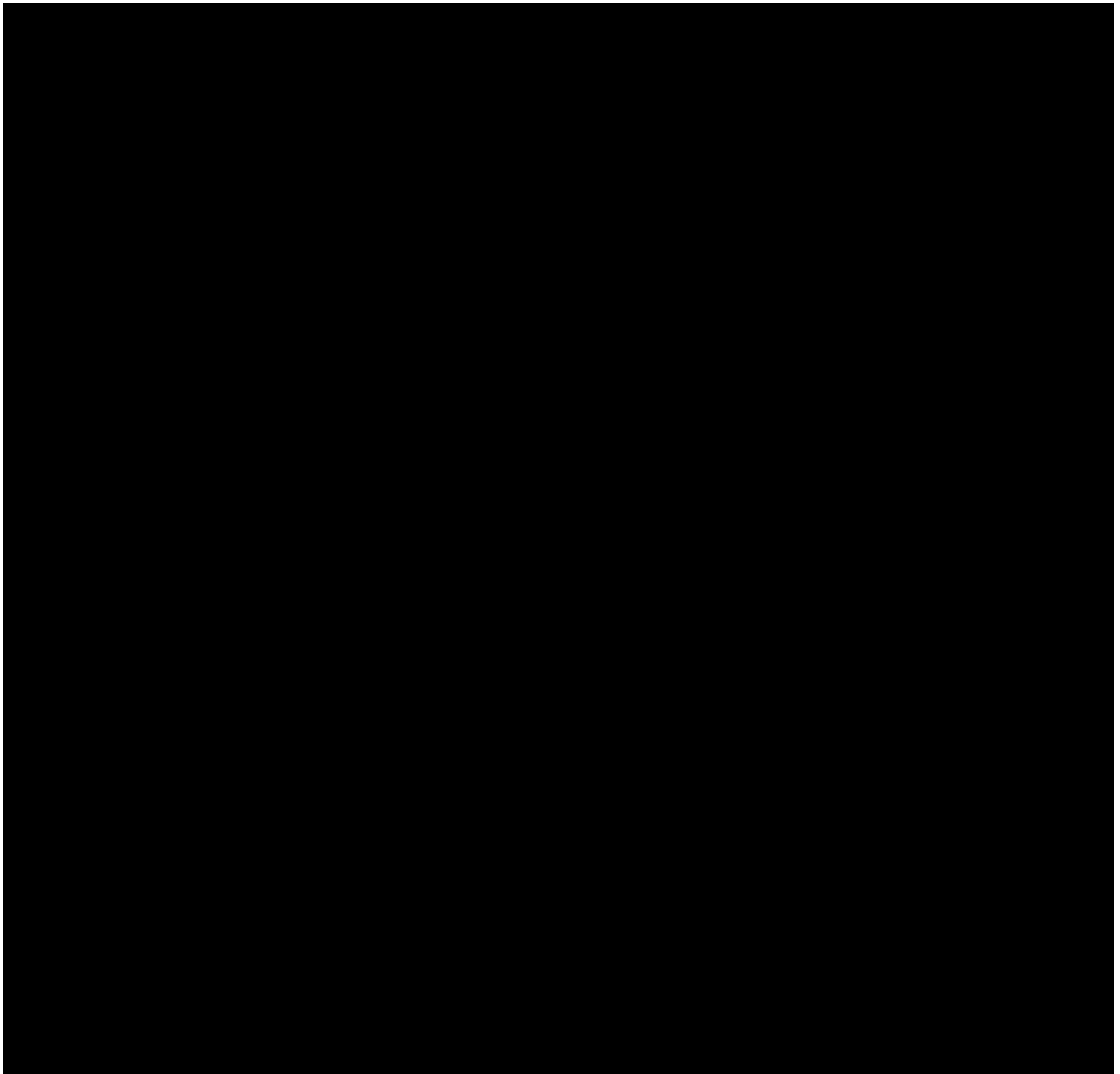
-
- | Category | Value (approximate percentage) |
|----------|--------------------------------|
| 1 | 95 |
| 2 | 98 |
| 3 | 96 |
| 4 | 94 |
| 5 | 99 |
| 6 | 97 |
| 7 | 93 |
| 8 | 91 |
| 9 | 96 |
| 10 | 92 |
| 11 | 100 |
| 12 | 94 |
| 13 | 90 |
| 14 | 100 |

Job Descriptions

[Redacted]

[Redacted]





Appendix F.2:

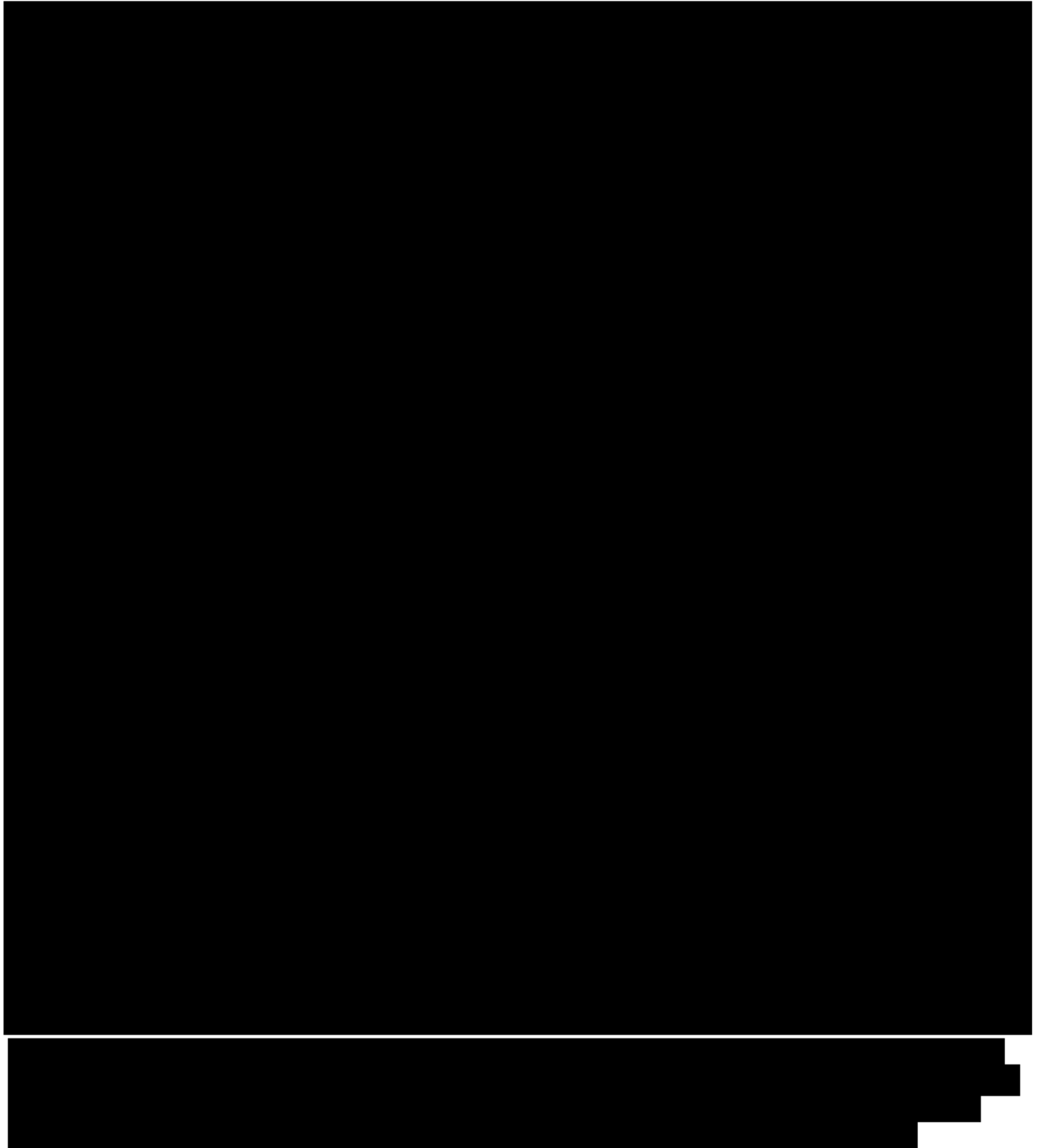
Sample Performance Reports



Appendix F.2: Sample Performance Reports

As requested in RFP Attachment F, Section 11: Monitoring and Reporting, Maximus provides in this appendix a sample report and dashboards.







[REDACTED]

[REDACTED]

[Redacted]

[Redacted]

Appendix F.3:

Corrective Action Plan and Penalty Details



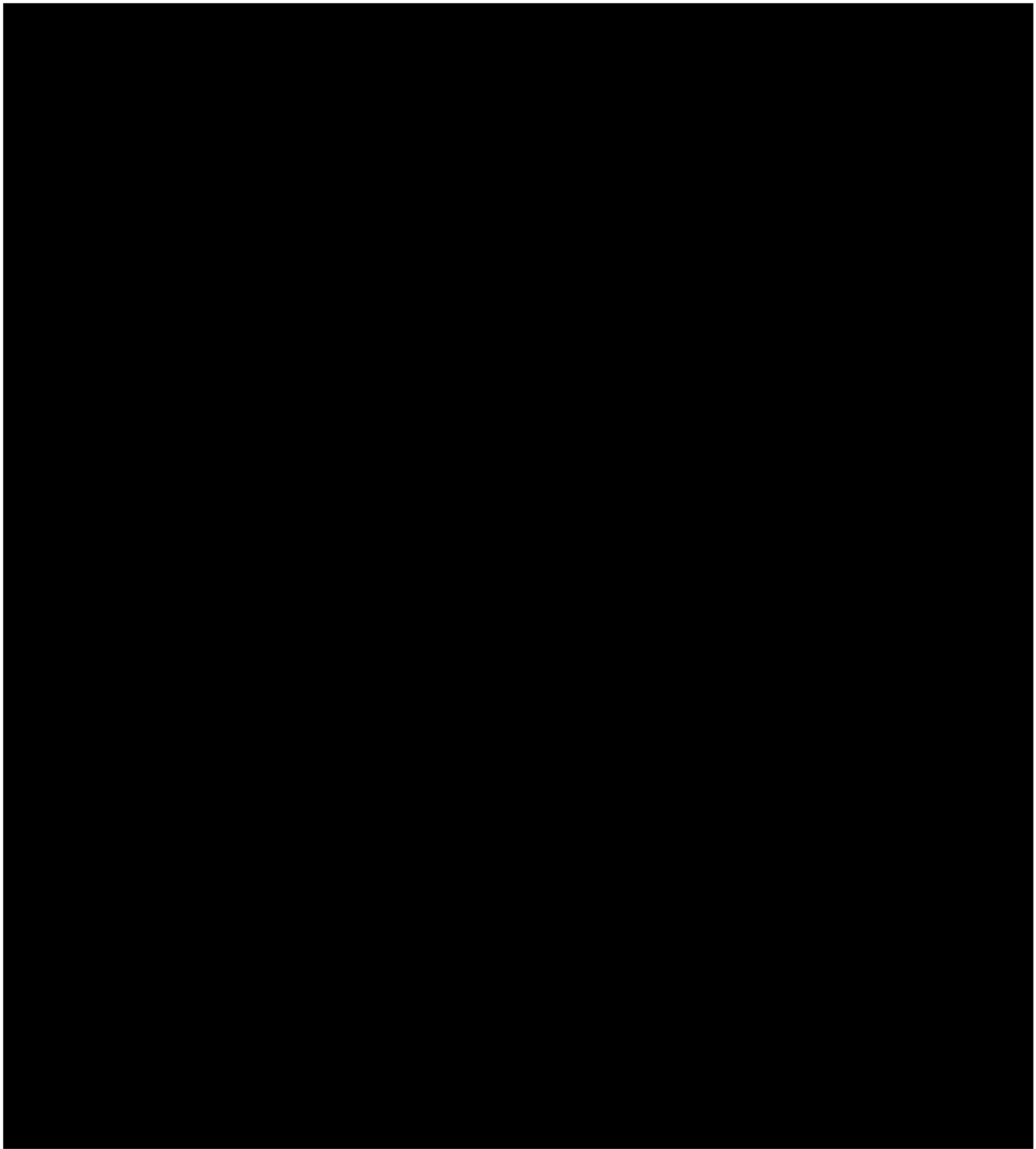
Appendix F.3: Corrective Action Plan and Penalty Details

Corrective Action Plan Details

While we strive to always deliver exceptional service to our state partners, there are instances where issues occur.

[REDACTED]

[REDACTED]



Financial Penalty Details

