



RFP 23-75072 – Member Support Services
Attachment F: Technical Proposal

Respondent:

Indiana Legal Services, Inc.

Instructions:

Request for Proposal (RFP) is a solicitation by the State of Indiana in which organizations are invited to compete for a contract amongst other respondents in a formal evaluation process. Please be aware that the evaluation of your organization's proposal will be completed by a team of State of Indiana employees and your organization's score will be reflective of that evaluation. The evaluation of a proposal can only be based upon the information provided by the Respondent in its proposal submission. Therefore, a competitive proposal will thoroughly answer the questions listed. The Respondent is expected to provide the complete details of its proposed operations, processes, and staffing for the scope of work detailed in the RFP document and supplemental attachments.

Please review the requirements in Attachment K, Scope of Work, carefully. Please describe your relevant experience and explain how you propose to perform the work. Please explain how you propose to execute each Section in its entirety, including but not limited to the specific elements highlighted below by Section, and describe all relevant experience. Respondents are strongly encouraged to submit inventive proposals for addressing the Program's goals that go beyond the minimum requirements set forth in Attachment K of this RFP.

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.

Respondents must organize their proposal in the exact order of questions provided in this document followed by their answers. While text boxes have been provided below, the Respondent may respond in the format of their choosing provided their response maintains the order proposed in this template. Diagrams, certificates, graphics and other exhibits should be referenced within the relevant answer field and included as legible attachments. Attachments and exhibits may be provided in a separate file; however, the technical proposal must contain an adequate description of the contents. In other words, the technical proposal should stand on its own and must contain enough information to understand separate exhibits and attachments **A Technical Proposal is a requirement for proposal submission. Failure to submit this form would impact your proposal's responsiveness.** Respondents should also submit a complete Attachment L – Case Scenarios.

Please submit your Technical Proposal in 10-point font with standard margins. If submitted in PDF format, the files should not be locked. A complete technical proposal, including attachments and exhibits, should not exceed 100 pages in 10-point font with standard margins.

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.

a. Brief Overview

- We intend to operate Pathways for Aging Member Services as a standalone operation within our organization with branding, identity, website, and technology that separates its database and phone operations from the rest of the work of Indiana Legal Services. We believe the branding needs to be coordinated with the State of Indiana's internal marketing plan to ensure no conflicts with other outreach efforts or the internal member services of the managed care entities.
- The primary contact for Pathway for Aging members to seek our assistance will be through a 1-800 hotline operating 8 a.m. to 8 p.m. Monday to Friday as well as a website with reliable information and the ability to contact us via email or chat.

- Our staffing model is based on several factors, including the need to cover the phone lines for 12 hours, five days a week. Our experience with similar services is that limiting the time a person spends answering the phones to 4 hours daily is optimal. Staff will use the additional 3 1/2 hours of their work day to provide follow-up services and mediation with the managed care entities. We are also concerned that the initial call volume will be higher than the estimated volume provided by the State based on the experience of our colleagues in North Carolina. Our experience working with elderly individuals and Medicaid recipients is that call lengths and the need for extensive assistance will dictate lengthy average time needed to be committed to a case.

b. Company and Staff Background

- Indiana Legal Services, Inc. (ILS) is a non-profit corporation that delivers free legal assistance in civil (non-criminal) matters to qualifying low-income individuals across Indiana. ILS operates from 8 offices in Merrillville, South Bend, Fort Wayne, Lafayette, Indianapolis, Bloomington, New Albany, and Evansville. ILS was established in 1966, and we serve clients in every county in Indiana. In 2022, ILS served over 15,000 low-income clients in households containing a total of more than 33,000 individuals.
- ILS has several specialized projects to address the needs of at-risk client communities, including the Senior Law Project, the Immigrants and Language Rights Center, the Low-Income Taxpayer Clinic, the Military Assistance Project, the Legal Assistance for Victimized Adults (LAVA) Project, the LGBT Project, and the Worker's Rights & Protection Project (WRAPP) addressing the need of migrant farmworkers, other workers, and survivors of human trafficking. More information about our office locations and links to our statewide projects can be found at <https://www.indianalegalservices.org/OfficeLocations>
- ILS will build on its experience with the Long-Term Services and Support (LTSS) Ombudsmen Program in implementing the services related to this proposal. ILS currently provides ombudsman services in 8 of Indiana's 16 regions, employing 8.5 FTE ombudsmen. ILS offers advantages not only because of its extensive experience with providing ombudsman services but also because it has no inherent conflicts of interest and can offer, in addition to standard ombudsman services, free legal assistance when appropriate for individuals residing in facilities.

c. Past Contractual or Legal Issues

- There are no instances in which ILS has been subject to any of the conditions listed above under subsections I, ii, iii, and iv over the past five (5) years for services related to those contemplated by this RFP.
- Unrelated to the scope of services related to this RFP, ILS has been party to two litigation cases (subsection iv) in the past five years relative to legal assistance.

2. Background (Section 1.0)

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

ILS confirms acceptance of all the requirements detailed in Section 1 of the Scope of Work.

a. Beneficiary Support

Our decades of experience working with low-income individuals in Indiana related to legal and medical issues informs our delivery approach to Pathways for Aging member services. We have also consulted with our counterparts in North Carolina, who have been providing similar services since 2019. Our approach emphasizes a person-centric philosophy that seeks to put the members first in understanding their concerns and helping them receive the services they need.

b. Service Older Populations

Most relevant, however, is ILS's work for seniors, including our ombudsman program. ILS receives funds from 8 Area Agencies on Aging that support 8.5 FTE long-term care ombudsmen. We receive separate funds from several AAAs that support several lawyers across the state who serve the legal needs of seniors. Our ombudsman program provides excellent services in part because of its close connection to our legal services, to which ombudsmen can refer clients and ILS's longstanding relationships with the Hoosier elder law community. These connections enrich the services our ombudsmen can provide, including information and advocacy that most seniors otherwise would be unable to access. ILS's expertise and connections are displayed annually when we provide a daylong training for lawyers and others on Medicaid changes and developments. This training attracts attorneys from across the state, including hundreds in private practice (and several state employees working for the Medicaid program). Dennis Frick, who directs our Senior Law Project (SLP), is past chair of the Elder Law Section of the state bar and active with the Indiana Chapter of the National Academy of Elder Law Attorneys. He and other SLP staff regularly train lawyers nationwide on Medicaid, advance directives, and other elder law topics.

c. Readiness Implementation

ILS is uniquely qualified to provide beneficiary support services duties as detailed in 42 CFR 438.1 and accepts the requirements detailed in Section 1 of the Scope of Work. ILS will be an independent, conflict-free entity providing Indiana Pathways for Aging members with direct assistance in navigating their Health Care coverage. ILS understands and accepts the timeline articulated in section 1.2 of the Scope of Work, including the State's approval of member-facing materials in the first quarter of 2024 and the Pathways for Aging roll-out to members in early third quarter 2024.

3. General Responsibilities (Section 2.1)

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:

- a. Advocating on behalf of a member according to the member's unique and expressed Issues, concerns, and/or needs
- b. Conducting analysis of complaints and Issues raised to the MSS Contractor related to MLTSS plans and aligned Duals-Special Needs Plans (D-SNPs)
- c. Identifying and reporting to State on systemic problems based on the Issues members are expressing
- d. 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

ILS accepts the requirements detailed in section 2.2 of the Scope of Work. We will apply our 57 years of experience assisting individuals in Indiana navigate complex legal and health environments, including Medicaid and Medicare issues for senior clients, to ensure a client-centered focus on helping individuals manage their pathway to aging care. Due to the extreme complexity of the issues with Medicaid and Medicare that the Pathways for Aging members will face, our helpline staff has sole responsibility for the Pathways Program.

a. Advocating

- Like the other programs and assistance offered by ILS, the Pathways for Aging staff will be selected based on a combination of subject area knowledge and the skills to advocate for individuals in complex environments.
- Much of ILS's current work is helping to mediate issues between our clients and organizations that they feel are not providing adequate services. Our experience will help us provide the member with the knowledge and tools to advocate for themselves and know when ILS can serve as a conduit to address the member's needs within the framework of the rules and procedures of the MCE.
- Our experience will help us know when referring members for other services is appropriate.
- Access to experienced legal staff in Medicare and Medicaid issues will also allow the helpline staff to effectively identify which problems may require legal intervention early in the process.

b. Analysis of Complaints and Issues

- Based on our own experience and the experience of our colleagues in North Carolina, we propose a Reporting Coordinator to be part of the Pathway for Aging Member Services Team to satisfy grant reporting requirements and identify trends and systemic issues.
- We propose Legal Server as a case-management system for the Pathways for Aging Member Services. ILS currently uses it for other programs, and it will be able to track all the data requested in the Scope of Work, entirely separate from ILS's other client data.
- Additional analysis of the case management system may need to be part of the implementation process as technology and the data requirements of this program may change.

c. Reporting on Systemic Problems

- The Reporting Coordinator will work with the Program Manager, Operations Supervisor, and legal counsel to identify trends and systematic issues related to the MLTSS plans and Duals-Special Needs Plans (D-SNPs)
- As ILS staff also covers two-thirds of the State as part of the LTSS Ombudsman Program, Pathway staff will also be able to confer with these colleagues on similar issues or concerns being raised by their clients.

d. Determining Baseline Knowledge for Staff

- ILS's experience with the LTSS Ombudsman Program will provide the basis for a systematic review of issues that will need to be addressed by the Pathways for Aging Member Services Staff.
- We anticipate continuing conversations with the NC Medicaid Ombudsman program to help guide the implementation and training program for the PFA helpline staff.
- ILS already possesses significant Medicaid and Medicare expertise and trains its staff and outside private lawyers on these concepts. These same training resources will be used with Member Services Staff.

4. Access Point for MCE Education & Member Issues (Section 2.2)

Confirm your acceptance of the requirements in Section 2.2 and please describe your approach to meeting all the requirements identified in 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 of 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

ILS accepts the responsibilities and requirements related to MCE education and member issues as detailed in section 2.2 of the Scope of Work. We understand that a Member Interaction Plan will be developed during implementation and submitted to the State for approval.

While much of the subject matter around the specifics of managed care for the Pathways program will be new for ILS, our extensive experience with helping individuals understand complex legal and health issues will be vital in developing a responsive and effective access point for Pathways members.

The following is a general outline of our approach:

a. General Education

- Building on ILS's knowledge of complicated procedural and legal issues related to Medicaid as part of its Senior Law Project and LTTS Ombudsman Program, ILS will focus on increasing its knowledge base by leveraging its connections in the legal and medical communities.
- Our plan to have the Project Manager and Operations Supervisor hired at the beginning of the implementation process is partly to allow for gathering information and procedures from all four of the MCE's and the Enrollment Broker.
- ILS will augment its extensive referral database with additional resources related to Pathways and provide warm hand-offs when appropriate, including many non-health-related community supports.
- ILS will curate the most informative materials in written and video formats that address the needs of Pathways members. Those materials will be available on the website or provided directly to the members.

b. Rights and Responsibilities of Members

- Each Member Services Representative will be able to provide education and information on members' rights and responsibilities under managed care, as enumerated in 42 CFR § 438.100, based on all-staff training and general protocols and FAQ's.

c. Education and Support for Changing MLTSS Health Plans

- Each Member Services Representative shall inform members of their ability to change their health plan under the guidelines listed in section 2.2.3. However, they will understand that they are not to recommend specific MCE's or conduct activities related to enrolling or disenrolling members. In consultation with the Enrollment Broker, ILS will develop a standard procedure for a warm hand-off.

d. Member Issue Resolution

- Members shall be informed of all their options in resolving their issues with their managed care entity or other provider.
- Member-centered focus requires an intentional articulation of the member's desired outcome that drives all decisions around a plan of action, including grievances and appeals.
- As advocates for the members, Member Services representatives will continually remind them of their rights, including those of a formal grievance or appeals process.
- Member services representatives will primarily be a support for the member taking the initiative to be an advocate for their own care.
- Based on the member's direction and informed consent, staff will inform additional family or other designated persons of the process to resolve the member's issue.
- If so desired by the member, the member services representative will act as a mediator between the member and their managed care entity or healthcare provider, following similar protocols as developed by the LTTS ombudsman program.
- Member services representatives will have ready access to a dedicated legal counsel for advice if a referral to legal services is warranted.

e. Member Issue Management

- As part of the implementation process, the Program Manager and Operations Supervisor will develop and provide to FSSA, within its Member Interaction Plan, all internal policies, procedures, and processes with associated timelines that guide the ILS in determining how identified Issues are managed.
- The staffing levels proposed are designed to allow a single contact person for each member to minimize the need to repeat their story to two other staff members. Our experience is that consistent communication with a single individual is essential for a senior target population.
- ILS acknowledges the data requirements concerning members' cases as outlined in Section 2.2.5. Our selection of Legal Server as a case management system will provide ILS with the necessary capabilities to track the required information and report to the State. North Carolina Manage Care Ombudsman also uses Legal Server.
- ILS will modify the current internal complaint tracking systems to include complaints about the member support services program.
- Our staffing plan includes a data analysis and reporting manager whose function will be to assure compliance with the data and reporting requirements of this RFP.

f. Provider Access Support

- ILS understands and will train all member services representatives to adequately address members issues with their health care providers and managed care entities.
- Appropriate actions will be to mediate with the member's care or service coordinator or provide the member access to a list of potential providers but will not recommend specific providers.

g. Care Coordination and Service Coordination Support

- As an independent, conflict-free entity working to develop the member's trust, ILS is uniquely positioned to serve as a mediator and member advocate in issues involving care coordinators, service coordinators, MCEs, Medicare Advantage Organizations, and/or providers.
- Similar to the role of an LTTS Ombudsman, the Member Services Representative will help the member understand who to contact to resolve their issue, coordinate meetings between care coordinators and the member if so directed by the member, provide constant follow-up and coaching to the member as they work to resolve their issues, and provide information on how to file a complaint or grievance or to formally appeal a decision.

h. Plan Change and Disenrollment

- ILS understands and will train all member services representatives on the level of education about changing plans and disenrollment. Representatives shall have written materials to share with the members that outline members' rights, the possible ramifications of disenrollment, the necessary forms, and a warm hand-off to the Enrollment Entity if requested.

5. Grievance and Appeals (Section 2.3)

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. Specifically describe:

- a. Your system and process for 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.
- b. How you will align or create seamless processes for supporting members with their grievances and/or appeals.

ILS accepts the requirements related to Grievances and Appeals as specified in section 2.2 of the Scope of Work.

a. System and Process

- ILS will modify existing Grievance and Appeals materials, processes, and standard procedure as necessary for the Pathway for Aging Member Services.
- Training of all Member Services staff will include instruction from a legal staff on Grievance and Appeals process, and a step-by-step guide for staff will be developed.
- Materials related to how to file a grievance or appeal will be readily available on the Member Services Website.

b. Supporting Members Through the Grievance Process

- The standard procedure will be that members will have one primary contact with Pathways for Aging Member Services, who will work with the member throughout the process to rectify their issues with their MCE, including the grievance and appeals processes.
- While additional staff may need to be involved in the appeals process, the primary contact will be the same.
- As directed by the member, staff will also engage the member's family and care team in the education around grievances and appeals and all their options.

6. Communications and Helpline (Section 3)

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

ILS accepts the communications and helpline requirements detailed in Section 3.

a. Methods of Interaction

- Initially, we intend to have three individuals answer the phone lines for three 4-hour shifts daily to operate the 8:00 a.m. to 8:00 p.m. required service hours. We anticipate that we will need to adjust the number of staff available based on actual call volumes at particular times of the day. This level of service will minimize hold times and the need to leave messages that require callbacks that can be difficult to manage, especially for individuals in LTC facilities who may not have ready access to a phone.
- We plan to operate the pathways for aging member services as a standalone operation within our organization with its branding, identity, website, and technology that separates its database and phone operations from the rest of the work of Indiana Legal Services.
- We understand the need to separate the Pathways for Aging Member Services work from the legal work of Indiana Legal Services. Non-pathway staff will not have access to the information contained in the pathways database and recorded phone system.

- We anticipate a hybrid model of remote work that will likely result in Member Services Representatives located in various parts of the State. This distribution will facilitate the offering of in-person services.
- When a personal visit is needed for a nursing home or assisted living facility resident, ILS will, with the member's consent, arrange for a Local Long Term Care Ombudsman (LLTC) to visit the member. ILS currently employs 9 and will soon employ 11 of the 22 LLTCs in Indiana. The ILS LLTC, including ILS' Ombudsman Team Leader, maintains regular contact and good relations with those ombudsmen not directly employed by ILS. The local ombudsmen are located throughout the state in the areas they serve. As the LLTC perform similar, though distinct, services, and as they regularly visit the facilities in their areas, the LLTC will be willing and able to assist with member visits.

b. Member Materials

- ILS Communications Director will work with the Project Manager to review current materials and determine gaps related to the Pathways for Aging members.
- With the State's approval, the ILS Communication Director will manage the development of new materials related to the Pathway members' significant needs that meet the standards of Section 3.2 of the Scope of Work.
- Based on feedback from members and staff, ILS will continue to modify, update, remove, change, or add materials, helpline scripts, enrollment or disenrollment procedures, website content, education materials, outreach activities, presentations, or other administrative or operational processes to improve the member experience based on feedback or broader changes to the Pathways for Aging Program.
- ILS has engaged translation services in the past for materials and likewise has included funding in the budget for translating Pathways materials.
- While the materials will be available for download from the website, ILS will mail materials to members upon request. The member's case notes will include any preferences for languages or braille.
- The ILS website (soon to be updated) includes materials that may also be included in the new Pathways for Aging Members Services website. <https://www.indianalegalservices.org/topics>.

c. Helpline

- ILS has six years of experience operating a legal call center that forms the basis of our approach to the Pathways for Aging Program.
- We intend to operate Pathways for Aging Member Services as a standalone operation within our organization with branding, identity, website, and technology that separates its database and phone operations from the rest of the work of Indiana Legal Services. Branding will be coordinated with the State of Indiana's internal marketing plan to ensure no conflicts with other outreach efforts or the internal member services of the managed care entities.
- The primary contact for Pathway for Aging members to seek our assistance will be through a 1-800 hotline operating 8 a.m. to 8 p.m. Monday to Friday as well as a website with reliable information and the ability to contact us via email or chat.

- Talkdesk CX Cloud Elite is currently our preferred communications platform. We intend to explore other options before implementation as technology is changing rapidly and the scope of work may be clarified.
- Our staffing model is based on various factors, including the need to cover the phone lines for 12 hours, five days a week. Our experience with similar services is that limiting the time a person spends answering the phones to 4 hours is optimal. Due to the issues that will arise with the members, staff will use the additional 3 1/2 hours of their work day to provide follow-up services and mediation with the managed care entities. We are also concerned that the initial call volume will be higher than the estimated volume provided by the State. The experience of our colleagues in North Carolina and our experience working with elderly individuals and Medicaid recipients is that call lengths and the need for extensive assistance will require a significant average time per case.
- ILS currently engages LanguageLine Interpreters to assist with non-English or non-Spanish speaking callers and Luna Translation Services to translate materials. We intend to further engage them in our work with Pathways to Aging Member Services.
- The helpline communication system we have selected includes the ability to record and store calls in alignment with the requirements of the Scope of Work.

d. Website

- ILS will model the website after our colleagues in North Carolina:
<https://ncmedicaidombudsman.org/>
- ILS Communication Director will work with the Program Manager and Operations Supervisor to create an accessible website that provides information about Member Support Services, Pathways for Aging, and managed care, and the different services available under the program and the MCEs' Provider Networks.
- The website shall meet all the requirements in Section 3.4 of the Scope of Work, including direct contact links to Pathways for Aging Member Services and information on communicating with Member Services in other languages, by phone, TTY services, or in person.
- The website will be designed with simplicity in navigation and content as the target population is aging.

7. Coordination with Other Contractors (Section 4)

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:

- MCEs
- Medicare Advantage/D-SNP Plans
- Level of Care and Intake Vendor, Enrollment Broker
- Providers and Community Resources, including Community Resource Referrals and Warm Hand-Offs

- e. Other State Vendors & Programs
- f. Joint Outreach

ILS accepts the requirements of Section 4 of the Scope of Work, including developing a communication and coordination plan. This aspect will be the responsibility of the Program Manager and Operations Supervisor during the implementation phase.

a. MCEs

- During the implementation phase, ILS will reach out to each of the four MCE's and develop individual communication and coordination plans.
- Staff training will include information on each of the entities noting similarities and differences in preferred interactions with the Member Support Services.

b. Medicare Advantage/D-SNP Plans

- ILS will expand its knowledge of Dual plans through current contacts and seeking information from other states' managed care programs that include Dual-enrolled members.

c. Level of Care and Intake Vendor, Enrollment Broker

- During the implementation phase, ILS will reach out to each of these entities and develop individual communication and coordination plans.
- Staff training will include information on each of the entities noting similarities and differences in preferred interactions with the Member Support Services.

d. Providers and Community Resources

- ILS will build on its already existing network of providers and community resources, emphasizing programs that could benefit Pathways members.

e. Other State Vendors and Programs

- During the implementation phase, ILS will contact each of these entities and develop individual communication and coordination plans.

f. Joint Outreach

- The Project Manager, supported by other staff members, including communications, will be responsible for coordinating joint outreach activities.

8. Technology Requirements (Section 5)

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.

ILS accepts the technology requirements detailed in section 5 of the Scope of Work.

- ILS is proposing to purchase Legal Server as the case management system for the Pathways Members Services Program. ILS currently uses Legal Server for case management in other programs but will purchase a separate standalone system to isolate the Pathways information from other ILS staff.
- ILS's database will be capable of capturing any information required in Section 8 Monitoring and Reporting Requirements or Section 16.2 Service Level Agreements.

9. Conflict of Interest (Section 6)

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.

ILS does not have a professional or financial relationship with any Medicaid Managed Care plan or Medicare Advantage or Duals Special Needs Plan. Additionally, the Contractor shall not be co-located with any Medicaid Managed Care plan, Medicare Advantage Organization, or any Medicare Advantage Special Needs Plan (D-SNP, C-SNP, or I-SNP).

ILS does not deliver other in-home and community-based health care services or have common ownership or control to any other organization, entity, or individual who also delivers other in-home and community-based services.

ILS will ensure that staff supported by funds for this program does not have or enter into any power-of-attorney, health care representative, guardianship, or other surrogate decision-making or financial relationship with any person referred to, enrolled, or participating in any FSSA program included in this Scope of Work. This does not include Authorized Representative status with the Division of Family Resources (DFR).

ILS will maintain separate telephone numbers, email addresses, and websites for each contract or subcontract the Contractor has with the State of Indiana.

10. Staffing (Section 7)

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 on-going policies and procedures for training all staff.

ILS accepts the requirements of Section 7 of the Scope of Work, including the required key staff positions, notification of vacancies, and training elements.

Our staffing model is based on various factors, including the need to cover the phone lines for 12 hours, five days a week. Our experience with similar services is that limiting the time a person spends answering the phones to 4 hours is optimal. Due to the issues that will arise with the members, staff will use the additional 3 1/2 hours of their workday to provide follow-up services and mediation with the managed care entities. We are also concerned that the initial call volume will be higher than the estimated volume provided by the State based on the experience of our colleagues in North Carolina. Our experience working with elderly individuals and Medicaid recipients is that call lengths and the need for extensive assistance will greatly increase the average time needed to be committed to a case.

Based on our own experience and the experience of our colleagues in North Carolina, we have developed a staffing plan for this project that includes the required program manager and operations manager along with a reporting specialist and 10 Pathways Member Services Representatives who will interact directly with the members by phone, email, and in person when necessary.

a. Recruitment Plan

- It was never easy to recruit qualified individuals with the dual strengths of being knowledgeable about Medicaid and Medicare issues and having the people skills to teach and advocate for persons in crisis. Since the pandemic, these issues have only magnified.
- Competitive Wages: the wages in our cost proposal are set to be competitive for similar positions inside and outside the organization. We have set the wages to align with our LTSS Ombudsmen.
- Internal Recruitment: we anticipate that some of our current staff on the legal hotline and the senior programming may be interested in focusing on a narrower set of issues and clients.
- Social Work: our colleagues in North Carolina noted that individuals with BSW or MSW degrees performed very well in these positions. We will include outreach to schools of social work and social work professional organizations. Social workers who already work for ILS can also assist in recruiting.

b. Key Staff Job Descriptions

- Job descriptions for the program manager, operations supervisor, reporting coordinator, and member services advocate are attached as Attachment F-1.

c. Staff Turnover

- ILS is keenly aware of the stressful nature of advocating for an individual facing a healthcare challenge.
- Based on our experience with other helplines and assistance programs, our staff plan limits the daily amount of time a staff person would be answering the phones to four hours to help decrease burn-out and allow individuals to provide follow-up and closure to open cases.
- ILS already offers its staff extensive time off (11 holidays, 17 leave days), an employee assistance program, four hours of wellness time monthly, including wellness programming and other elements to address work pressure and increase retention.

d. Staff Credentials

- ILS Director of Human Resources will assure that the staff hired have any required credentials.
- ILS will conduct background checks on all new hires to comply with any specific contract requirements.

e. Staff Training

- ILS's Director of Training and Senior Law Project Director will help the Program Manager design and direct an intensive training program for the Pathways Member Services Staff during the implementation phase.
- ILS will leverage internal experts to create content, train staff, and engage our community partners.
- The Program Manager will manage the on-going training and onboarding of new staff.
- The Training Plan will focus on:
 - All the elements detailed in section 7.4., explicitly dealing with Medicaid and Medicare rules and procedures
 - The roles of Pathways for Aging managed care entities and other partners
 - Health Equity and Cultural Competence
 - The ILS model of person-centered advocacy and support
 - Understanding Trauma and Poverty
 - Extensive Training on Dual Eligible Member Issues

11. Monitoring and Reporting Requirements (Section 8)

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

- a. Your plan to provide the reports described in the Scope of Work

- b. 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
- c. Additional data/reports you are capable of providing that can help the State evaluate the success of the MLTSS program and any recurrent Issues
- d. Your internal operational structure that will support the compilation of your own performance data

ILS accepts the requirements of Section 8 of the Scope of Work involving monitoring and reporting, including the responsibilities for clear communications and timely reporting. ILS also acknowledges the schedule of required reports with deadlines.

a. Plan to Provide Reports

- Recognizing the importance of timely reports and on-going quality control, we propose to include one position dedicated to reporting and database management. This person will assist the operations manager in identifying issues for quality control and work with the project manager and legal counsel to identify systematic trends affecting members care and identify potential solutions to those problems. This staff will also allow the organization to respond promptly to non-routine requests from FSSA.
- We propose Legal Server as a case-management system for the Pathways for Aging Member Services. ILS currently uses it for other programs, and it will be able to track all the data requested in the Scope of Work.

b. Sample Reporting and Trends

- As the Pathways for Aging Member Services will be a completely new business line for ILS, sample reports are not yet available.
- As part of the monthly reporting cycle, the Data Analysis and Reporting Manager will convene a meeting of senior project staff, legal counsel, and two or three designated Member Services Representatives to review the monthly reports and to identify any trends. More frequently, the Data Analysis and Reporting Manager will review case reports to identify emerging issues.

c. Additional Data/Reports

- ILS already systematically identifies recurrent issues for its client population as part of our legal practice. We identify these issues from a combination of data analysis, individual client interactions, and partner interactions. We will use these same tools to identify trends and problems amount the Pathways population.
- The selection of the Data Analysis and Reporting Manager will place importance on a candidate's experience with a wide variety of data analysis packages which will allow for completing the required reports as well as additional analysis and data visualization.

d. Operational Structure

- The Data Analysis and Reporting Manager will be the lead staff in this area, with support from the Operations Supervisor. The Pathways staff will also have access to other ILS staff in communications and grant management for support and advice.

12. Disaster Recovery (Sections 9-10)

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.

ILS confirms its acceptance of the disaster recovery requirements in Sections 9-10. Attached is the current ILS Disaster Plan (Attachment E-8 with the Business Proposal), which is currently under active review. An updated policy is expected to be announced in the next 4-8 weeks.

13. Incoming & Outgoing Transition Activities (Section 11)

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.

ILS accepts the Implementation and On-going Transition requirements detailed in Section 11 of the scope of work.

a. Implementation Approach

- ILS looks forward to partnering with FSSA throughout the implementation period to assure the best transition experience for the new members and a timely go-live of the program.
- ILS understands the high level of ambiguity in the transition to managed care and understands that implementation plans will need to be modified to serve the members better.
- Essential to assuring a successful implementation is hiring the primary managers of the program as soon as feasible based on the availability of State funds.
- High-Level Implementation Strategy
 - Cross-departmental Implementation Advisory Committee (3rd Quarter 2023)
 - Hiring Program Manager and Operations Supervisor (1/24)
 - Identification of Technology and Operations Needs (1st Quarter 2024)
 - Outreach to MCE's and Other Partners (2/24)
 - Preparing required policies and procedures for State review (2/24)
 - Hiring Strategies Developed by Operations Manager (2/24)
 - Training Plan Developed by Program Manager in (2/24)

- Purchasing of Communication Platform, Website Designer, and Case Management Database (3/24)
- Recruitment of Additional Staff (3/24)
- Website Development (4/24)
- Hiring of Additional Staff (4/24)
- Training of Staff (5/24)
- Readiness review (5/24)

b. Readiness Review Plan

- The Project Manager and Operations Supervisor's start dates will be in January 2024 at the latest. Two full-time individuals ensure the program is ready when the State goes live. In addition, the implementation budget includes other ILS staff time including individuals in Communications, Finance, IT, Human Resources, and Training.

c. Transition Plan

- During the implementation phase, ILS will submit a plan for outgoing transition activities demonstrating our understanding of the scope and complexity of the outgoing transition activities for the Scope of Work. ILS shall provide a high-level description of the plan for outgoing transition activities for the Scope of Work.
- ILS is committed to assuring the members served through the Pathway for Aging Program continue to receive services throughout the transfer of services to another entity.

14. Health Equity and Cultural Competency (Section 12)

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.

ILS accepts the requirements detailed in Section 12, including creating and submitting an Equity and Cultural Competency Plan during the implementation period that conforms to the Culturally and Linguistically Appropriate Services (CLAS) standards. Many of these standards closely align to ILS's Strategic Plan.

15. Quality Assurance (Section 13)

Confirm your acceptance of the requirements in Section 13, and please describe your approach to meeting all the requirements identified in 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:
- 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).
 - i. 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
 - ii. 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.

ILS accepts the quality assurance requirements detailed in Section 13, including program data review and quality improvement system development.

a. Approach

- Since 1966, ILS has strived to provide person-centered services to individuals and families facing legal and other challenges. Our success lies in our commitment to our vision of dignity, fairness, and equality for all people under the law.
- Recognizing the importance of timely reports and ongoing quality control, we propose to include one position dedicated to data analysis and reporting. This person will assist the operations manager in identifying issues for quality control and work with the project manager and legal counsel to identify systematic trends affecting members' care and identify potential solutions to those problems. This staff member will also allow the organization to respond promptly to non-routine requests from FSSA.
- The Operations Supervisor will manage the quality assurance and control process for Pathways Members Services. As the direct supervisor to the helpline staff, we anticipate that this individual will review case notes, review recordings as necessary and provide immediate feedback to the helpline staff in applying ILS's person-centered philosophy to the Pathways project.

b. Quality Goal Attainment

- ILS's proposed staffing plan is designed for quality interaction between the Pathways staff and the members. It allows ample time to develop trust and allow the member to fully explain their issues and desired outcomes. Adequate staffing allows leads to support that is person-centered, member-driven, and increases the involvement of family members, legal guardians, informal caregivers, Supported Decision Makers, and/or Authorized Representatives.

c. Client Satisfaction

- A process for determining client satisfaction will be developed during implementation and provided to the State for approval. We are currently in the early stages of using a satisfaction survey via text within Legal Server.
- Members with issues that are resolved within the initial phone call will be prompted to respond to an automated phone feedback system.
- Members with more complex issues requiring multiple contacts will be flagged to be part of a pool of follow-up satisfaction surveys. A random set of members will be selected from that pool to complete follow-up surveys.

- The anticipated number of members with complex issues may not be sufficient to apply standard formulas for a sample size that will provide statistically significant results.

16. Subcontracting (Section 14)

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:

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

ILS accepts the subcontractor requirements detailed in Section 14 as it applies to potential future subcontractors. ILS is not including any subcontractors in this proposal.

17. Invoicing and Payments (Section 15)

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.

ILS accepts the invoicing requirements detailed in Section 15. With annual revenue over \$16 million and more than seventy funding sources, ILS has the internal financial infrastructure to manage the monthly invoicing process as specified in the RFP.

18. Key Performance Measures and Contractor Performance (Section 16)

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.

ILS accepts the key performance measures and requirements as detailed in Section 16 of the Scope of Work.

a. Meeting Performance Measures

- Our staffing model is based on various factors, including the need to cover the phone lines for 12 hours, five days a week. Our experience with similar services is that limiting the time a person spends answering the phones to 4 hours is optimal. Due to the issues that will arise with the members, staff will use the additional 3 1/2 hours of their work day to provide follow-up services and mediation with the managed care entities. We are also concerned that the initial call volume will be higher than the estimated volume provided by the State based on the experience of our colleagues in North Carolina. Our experience working with elderly individuals and Medicaid recipients is that call lengths and the need for extensive assistance will significantly increase the average time needed to be committed to a case.
- Recognizing the importance of timely reports and ongoing quality control, we propose to include one position dedicated to data analysis and reporting which will include monitoring performance standards. This person will assist the operations manager in identifying issues for quality control and focus on addressing issues affecting our ability to meet performance standards. This staff will also allow the organization to respond promptly to non-routine requests from FSSA.

b. Plan for Corrective Action

- We have flexibility in how many Member Services Representatives answer the helpline at different times of the day. Shifting staff from other times of the day could improve our results.
- Member Service Representatives will be generalists and respond to issues of various levels of complexity. If performance does not meet the standard, we may revise the staffing plan to create specialists to decrease time to resolution.
- If call volumes, the need for in-person visits, or other factors affect our performance, we expect to work with the State to determine what additional resources may be needed to meet performance standards and to modify the contract accordingly.