**RFS 22-67778 BUSINESS PROPOSAL**

**ATTACHMENT C**

**Instructions: Please provide answers in the shaded areas to all questions. Reference all attachments in the shaded area.**

***Business Proposal***

* + 1. **General -** Please introduce or summarize any information the Respondent deems relevant or important to the State’s successful acquisition of the products and/or services requested in this RFS.

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| Columbus Medical Services, LLC dba The Columbus Organization (Columbus) is pleased to respond to Request for Services (RFS) 22-67778 to provide Case Management Services for the Indiana Department of Administration on behalf of the Bureau of Developmental Disabilities Services (BDDS) of the Division of Disability and Rehabilitative Services (DDRS) of the Family and Social Services Agency (FSSA).  For over nine years, Columbus has been designated as an Indiana statewide approved provider of case management services to individuals with intellectual and developmental disabilities in collaboration with the State of Indiana Division of Disability and Rehabilitation Services (DDRS). Since 2012, our Indiana staff, including 61 Case Managers, currently serve and advocate for 2,785 individuals receiving the Community Integration & Habilitation (CIH) waiver and Family Supports Waiver (FSW). We also have two Case Managers providing case management services to 85 individuals enrolled in the Aged and Disabled (A&D) waiver in collaboration with the State of Indiana Division of Aging (DA).  As a FSSA/DDRS-approved statewide case management company for the State, Columbus meets the following criteria:   * Enrolled as an active Medicaid provider. * FSSA/DDRS-approved. * Compliance with Indiana Administrative Code, 460 IAC 6, including but not limited to:   + 460 IAC 6-10-5 Documentation of Criminal Histories   + 460 IAC 6-12-1 and 460 IAC 6-12-2 Insurance   + 460 IAC 6-11-1 to 460 IAC 6-11-3 Financial Status of Providers   + IAC 6-19-1 through 460 IAC 6-19-9 Case Management, and 460 IAC 6-5-5 Case Management Services Provider Qualifications * Compliance with applicable FSSA/BDDS service standards, guidelines, policies and/or manuals, including FSSA/DDRS BDDS policies and the FSSA/DDRS HCBS Waivers module on the IHCP Provider Reference Materials webpage. * Maintain current accreditation (specific to Indiana programs) from The Commission on Accreditation of Rehabilitation Facilities (CARF) (more details below). * Carry professional liability insurance on all Columbus Case Managers. * Employ a Registered Nurse who maintains valid Indiana licensure. * Retain 63 full-time certified Case Managers (exceeding the requirement of two full-time Case Managers). * Require initially and annually, that each Case Manager employed by Columbus obtain certification/proof of competency demonstrated through successful completion of the BDDS-approved case management training curriculum, attaining a test score no lower than 80%. * Ensure, ongoing, that criminal background checks are conducted for every employee/partner hired or associated with Columbus. * Retain at least one full-time Compliance Officer to actively monitor all areas of compliance. * Approved by the DDRS and in ongoing compliance with any applicable BDDS service standards, guidelines, policies and/or documents, including minimum qualifications of Case Managers that include the following qualifications:   + Hold a Bachelor’s degree in one of the following specialties from an accredited college or university: Social work, Psychology, Sociology, Counseling, Gerontology, Nursing, Special education, Rehabilitation, or related degree if approved by the DDRS or OMPP representative.   + Be a registered nurse with one year experience in human services.   + Hold a Bachelor’s degree in any field with a minimum of one year full-time, direct experience working with persons with intellectual/developmental disabilities.   + Hold a Master’s degree in a related field may substitute for required experience. * Case Managers must meet the requirements for a qualified intellectual disability professional in 42 CFR 483.430(a). * Provide and maintain a 24/7 emergency response system that does not rely upon the area 911 system and provides assistance to all waiver individuals. The 24/7-line staff must assist individuals or their families with addressing immediate needs and contact the individual’s case manager to ensure arrangements are made to address the immediate situation and to prevent reoccurrences of the situation. * Maintain sufficient technological capability to submit required data electronically in a format and through mechanisms specified by the state. * Electronically enter all case information at the frequency specified by the State. * Ensure each Case Manager is properly equipped to conduct onsite processing and person-centered planning. * Ensure each Case Manager is properly equipped to conduct two-way mobile communications and is accessible as needed to the individuals he or she serves (has a cell phone, smart phone, or other similar equipment). * Maintain a sufficient number (no fewer than two) of qualified Case Managers in the approved service area. * Ensure that Case Managers are trained in the person-centered planning process. * Ensure that Case Managers meet with their individuals on a regular basis to develop and support the execution of Person-Centered Individualized Service Plans (PCISP). * Have a mechanism for monitoring the quality of services delivered by Case Managers and reporting on and addressing any quality issues that are discovered. * Specifically agree to comply with the provisions of the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq. and 47 U.S.C. 225). * Case Managers have the capability to effectively and efficiently communicate with each individual by whatever means is preferred by the individual, including accommodating individuals with Limited English Proficiency (LEP). * Case Managers have the ability to identify or assess potential cultural barriers that may exist for individuals in accessing services and supports and work to ensure individuals’ culture and value are respected and included in the person-centered planning process. * Compliance with Indiana’s conflict-free case management policy, which covers conflict of interest in terms of provision of services as well as in relationship to the individual being served.   Columbus has broad knowledge and extensive experience in providing services to individuals with developmental disabilities, including providing case management (including Traditional, Complex Medical, Behavioral, Acquired Brain Injury, Head and Spinal Cord Injury, and Aged and Disabled) services to more than 14,000 individuals with intellectual and developmental disabilities across the nation. Columbus currently provides case management services across seven states: Indiana since 2012 (2,870 individuals), Georgia since 2003 (4,227 individuals), South Carolina since 2015 (675 individuals), Delaware since 2017 (3,143 individuals), Kentucky since 2017 (492 individuals), New Jersey since 2018 (505 individuals), and Florida since 2019 (2,394 individuals). We also were recently approved as a Service Coordination Provider in Utah.  Columbus is a CARF-accredited, care coordination-focused company helping people understand the choices they have in the community and selecting the best options for that individual. We are dedicated to serving individuals with intellectual and/or developmental challenges and empowering them and their loved ones to achieve their hopes and dreams. Person-Centered Planning (PCP) is at the core of Columbus’ case management philosophy to assist the individuals that we serve in exercising independence, choice, and control over their lives, and the services and support that they receive.  Columbus employs trainers and staff mentors who are credentialed Person-Centered Thinking (PCT) trainers and Charting the LifeCourse Ambassadors*.* Our care coordination division promotes utilizing PCT and Charting the LifeCourse principles for discovery and planning in the services that we provide. All of Columbus’ case management staff are trained on PCT and Columbus’ overall mission to provide everyone we serve with a meaningful life. The State can be assured that our case management staff are experienced and will continue to meet all State requirements for employment to ensure participants receive effective, understandable, and respectful care provided in a manner compatible with their cultural health beliefs, practices, and preferred language.  **Quality Assurance Department**  Columbus is committed to providing services at the highest level of quality and compliance. We have a Quality Assurance Department, directed by our Compliance Officer, dedicating employees and processes to improving quality and outcomes for individuals with intellectual and/or developmental disabilities and the natural supports and resources in the community that support them. Columbus recently added two additional Quality Enhancement Coordinators (QECs) that expanded our Quality Assurance Department team to a total of ten QECs across the states where we provide care coordination.  The QECs review the Person-Centered Individualized Service Plans (PCISP) that are created by the Case Managers and the individuals they support to verify that the plans represent best practices, meet state standards, and satisfy the needs of the individual. Reviewing these plans as well as tracking outcomes against numerous metrics on the PCISP scorecards for each state allows Columbus to proactively determine which Case Managers are doing an exceptional job and which Case Managers need additional mentoring. As a result of these reviews, Columbus identifies specific areas that will be enhanced through additional training for the Case Managers to improve quality of service to the individuals.  Columbus maintains a hierarchy of councils to oversee these quality efforts. The Executive Quality & Compliance Committee (EQCC), which consists of six members of Columbus’ executive team, provides oversight of, and direction to, the company’s Quality & Compliance Program, and reviews monitoring reports/corrective actions every month. Reporting to the EQCC, the Compliance and Quality Council (CQC) comprises the Operational State Care Coordination management who have direct oversight of the provision of Care Coordination services. The CQC ensures that the company provides day-to-day operational oversight of and direction to all employees on the company’s Quality & Compliance Program.  Both the EQCC and the CQC are independent of the operations team; Columbus’ Compliance Officer reports directly to our President & CEO.  *Satisfaction Surveys:*  Columbus regularly sends out Satisfaction Surveys to understand, from the individual’s perspective, if they are living a satisfied and meaningful life or if there are areas that could benefit from changes or enhancements to services. A series of questions ask about the person’s satisfaction with the service provided by their Case Manager. A second set of questions in the surveys ask about outcomes related to choosing personal goals, safety, participation in meaningful activities in the community, choosing whether and where to work, and choosing where and with whom to live. The surveys help Columbus to understand whether the individual is satisfied with the support being provided and is living a meaningful life, as seen through their own eyes.  In addition to our internal processes, Columbus is validated from two outside entities: 1) The Commission on Accreditation of Rehabilitation Facilities (CARF), and 2) certified by the Centers for Medicare and Medicaid Services (CMS), Center for Clinical Standards and Quality, as a Quality Improvement Organization (QIO)-like entity.   * **CARF:** In 2021, Columbus was accredited by CARF International for a period of three years for its case management programs in all seven states where we provide services. This is the fourth, consecutive, three-year accreditation that CARF has awarded to Columbus. By pursuing and achieving this accreditation, Columbus has demonstrated that it meets international standards for quality and is committed to the pursuit of excellence. This accreditation decision represents the highest level of accreditation that can be awarded to an organization and shows Columbus’ substantial conformance to the CARF standards. Columbus’ CARF Accreditation can be found in Appendix G, “Columbus’ CARF Accreditation.” * **QIO:** Since 2014, Columbus has been certified by Centers for Medicare and Medicaid Services (CMS) as a QIO-like entity. Columbus was recently granted a renewal of its five-year certification by the CMS, Center for Clinical Standards and Quality, as a QIO-like entity for the Commonwealth of Pennsylvania. Working on behalf of the CMS, QIOs are an independent and objective force to help improve healthcare delivery, safety, and efficiency through a combination of collaborating with provider organizations, delivering targeted technical assistance, and providing direct intervention with Medicare beneficiaries and the healthcare community.   Columbus is a group of caring professionals whose mission is to assist children and adults with physical and intellectual disabilities achieve independence through a life that is meaningful to them. With a person-centered planning and thinking approach, it is our vision to be recognized as an organization that transforms individuals’ lives and provides families the peace of mind in knowing their loved one has a voice and a valued role in their community. We have built a national reputation for serving individuals with intellectual and developmental challenges through an outcomes-oriented approach coupled with a commitment to work closely with each individual. Throughout the years, our overall goal has remained to help each individual meet their personal goals, and we work diligently to do so. We would be honored and privileged to continue our case management efforts for the State of Indiana, providing exemplary services to those with intellectual and/or developmental challenges. |

* + 1. **Respondent’s Company Structure** - Please include in this section the legal form of the Respondent’s business organization, the state in which formed (accompanied by a certificate of authority), the types of business ventures in which the organization is involved, and a chart of the organization. If the organization includes more than one (1) product division, the division responsible for the development and marketing of the requested products and/or services in the United States must be described in more detail than other components of the organization. Please enter your response below and indicate if any attachments are included.

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| Headquartered in Blue Bell, PA, Columbus, a Delaware limited liability company, is a wholly-owned subsidiary of Columbus Organization Holdings, LLC, a Delaware limited liability company (COH). COH is in turn a wholly-owned subsidiary of HealthEdge-Columbus Holdings, LLC, a Delaware limited liability company (HCH).  Columbus was formed as a Delaware limited liability company in 1984. A copy of our 2021 Delaware Business License can be found in Appendix A, “Columbus’ Delaware Business License.” A copy of our organization chart can be found in Appendix B, “Columbus’ Organizational Chart.”  Columbus has three business units (Care Coordination, Quality Improvement Services, and Professional Clinical Staffing) with over 37 years of experience providing services to agencies, facilities, and community programs that serve people with intellectual and/or developmental disabilities. Our team members have experience in case management, clinical practice, designing and implementing active treatment programs, clinical research, staff training, forensic issues, litigation, recruiting professional staff for rural areas, and policy and procedure development. Our interdisciplinary team of professionals have collaborated with more states, state agencies, and school districts resolving hard-to-fill job placements than any other. Details of our Care Coordination, Quality Improvement Services, and Professional Clinical Staffing departments are outlined below. The division responsible for the development and marketing of the services described in this solicitation is our Care Coordination business unit.  **Care Coordination**  For over nine years Columbus has been a designated Indiana statewide approved provider of case management services to individuals with intellectual and developmental disabilities in collaboration with the State of Indiana Division of Disability and Rehabilitation Services (DDRS). Our Indiana staff, including 61 Case Managers, currently serve 2,785 individuals receiving the Community Integration & Habilitation (CIH) waiver and Family Supports Waiver (FSW). We also have two Case Managers providing case management services to 85 individuals enrolled in the Aged and Disabled (A&D) waiver in collaboration with the State of Indiana Division of Aging (DA). An overview of the services we offer include:   * Annual planning and assessment including initial and annual activities that support the individual in establishing an annual PCISP, developing a budget in support of the PCISP, and establishing eligibility for waiver services. * Ongoing case management support to include services that monitor implementation of the individual’s PCISP and provide for regular review and modification with the individual and their support team. * An outcome-oriented approach coupled with a commitment to work closely with the individual, their families/caregivers, state agencies, and other interested stakeholders. * Services designed to create, sustain, and support relationships. * A collaborative, cohesive process based on the needs of the individual and family. * Efficient and effective services with positive outcomes. * Multi-systemic treatment planning and service coordination designed for each client. * We employ bilingual staff and a Translation Service to better assist families where English is not their primary language. Currently in Indiana, bilingual services are offered to those speaking Bosnian, Punjabi, Hindi, and Urdu. * A treatment team with a broad view of services, service providers, and available community resources. * Teams that include family, school personnel, residential or day service providers, Case Managers, and other service providers, who meet to develop the initial individualized plan. * Experience that recognizes that outcomes-focused, personalized treatment plans will also change as the individual grows.   Our process is responsive to changing needs and ensures services and supports are based on the team working together. We pay close attention to outcomes and the achievement of specific, measurable goals to determine the level and type of service needed to maintain successes over the long term.  Columbus’ Case Managers are also familiar with entering case notes into the state’s Bureau of Developmental Disabilities Services (BDDS) portal. Case Managers access their individual consumer files through the BDDS portal and use this system to complete case notes, 90-day monitoring checklists, and Person-Centered Individualized Support Plans (PCISP). Both the Case Manager and Team Lead Supervisor view quality reports in the system. Case notes are entered into the portal within seven days of the activity, with at least one meaningful case note entered each month. Columbus also receives new clients from the state through the portal and is able to assign clients to Case Managers and monitor caseloads. For billing, Columbus uses both the state system BDDS and the Citrix Billing Module. Case notes are linked to the Citrix system. The Citrix billing module then extracts all eligible claims into a batch that is manually submitted to DXC (Indiana Medicaid).  As leaders and innovators working with individuals with intellectual and developmental disabilities, Columbus is pioneering a significant improvement in the way care coordination is delivered. The evidence-based inclusion of behavioral approaches to care coordination ensures excellent outcomes for the individuals we support. Columbus’ behavior team includes clinicians experienced in completing functional assessments and developing plans to address a wide range of behaviors. Our team provides training and consultation to our Case Managers, providing them the support they need to work with individuals who exhibit even the most challenging behaviors.  We are the country’s leading provider of Traditional, Complex Medical, Behavioral, Acquired Brain Injury (ABI), Acquired Brain Injury, Long Term Care (ABI LTC), Head and Spinal Cord Injury (HASCI), and Aged and Disabled (A&D) case management services to over 14,000 individuals with intellectual and/or developmental disabilities nationwide. As an organization that has over 400 case management staff members across seven states, Columbus is well prepared to continue to be a resource to families statewide in Indiana. Our employees are experts who have deep experience, along with new and creative ways of thinking, that is refined through predictive outcomes data analysis, and supported by resources that enable us to handle many types and sizes of challenges. We understand everyone is unique, and for those who require extra assistance and for those who serve them, we match/combine with a Case Manager who has the experiences necessary. Individuals and their families are always encouraged to ask questions as Columbus has a team of professional consultants who can respond in real time. We are deeply committed to ensuring the health and safety of all persons we serve, as well as their satisfaction and continuity of services. Columbus continues to enhance its services to members and maintain strong partnerships in the community by actively and regularly seeking input from our members, staff, providers, families/guardians, community supports, and other interested groups. We compile, review, and share these results with all stakeholders so that we can collectively identify strengths, weaknesses, and develop a strategic plan.  With thousands of individuals supported by Columbus, we provide a long history of success and the peace of mind that families are supported by a trusted and reputable organization.  **Quality Improvement Services**  As a CMS-certified Quality Improvement Organization (QIO) since 2014, Columbus provides Quality Improvement Services with an independent, objective approach to help our clients improve healthcare delivery, safety, and efficiency. Whether proactively improving existing programs or responding to a regulatory inquiry or request, Columbus has the experience and credentials to help get agencies or programs into compliance with best practices. When many state agencies engage with Columbus, they are under extreme pressure in the areas of regulatory compliance, service certification, and sometimes the threat of federal litigation. We also have helped agencies achieve re-certification under the Federal Intermediate Care Facility-Intellectual Disability (ICF-ID) program and assisted in the successful closure of Federal Department of Justice and Class Action litigation while vastly improving individual outcomes. Services include:   * Mortality Reviews * Consultation, training, and technical assistance to institutional and community service programs * Interim management of public/private sector organizations * US DOJ, CMS, and civil Class Action Litigation support and compliance monitoring * Comprehensive system reviews * Peer review systems * Risk Management * Transition Planning * Behavioral services   **Professional Clinical Staffing**  Columbus is a leading national provider of on-site professional clinical staffing services focusing on facilities that serve individuals with intellectual and/or developmental disabilities and mental health challenges. We have been providing experienced, knowledgeable, and caring professionals to our customers for more than 37 years. Specific service contracts have ranged from the recruitment and management of Psychiatrists, Physicians, Psychologists, Occupational Therapists, Physical Therapists, Speech-Language Pathologists, Board Certified Behavior Analysts, Nurse Practitioners, Registered Nurses, Social Workers, On-Site Administration, Special Education Teachers, School Counselors, etc., to continuing education programs, quality assurance programs, and both statewide and center systems development activities. Drawing from a full breadth of clinical disciplines, our philosophy is to ensure our clients’ staffing needs are uniquely met in the following ways:   * Rapid start-up and implementation timelines. * A rigorous identification, screening, and hiring process aligned with an ideal candidate profile. * Ongoing training and continuing education opportunities to grow professionally. * Integrated support through peer interaction, a clinical referral network, and a robust administrative infrastructure. * Regular on-site interaction and review. * Extremely high retention rates. * An embedded culture focused on finding life-long meaning in the work that we do. |

* + 1. **Company Financial Information** - This section must include documents to demonstrate the Respondent’s financial stability. Examples of acceptable documents include: most recent Dunn & Bradstreet Business Report (preferred) or audited financial statements for the two (2) most recently completed fiscal years. If neither of these can be provided, explain why and include an income statement and balance sheet, for each of the two most recently completed fiscal years.

If the documents being provided by the Respondent are those of a parent or holding company, additional information should be provided for the entity/organization directly responding to this RFS. That additional information should explain the business relationship between the entities and demonstrate the financial stability of the entity/organization which is directly responding to this RFS.

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| Columbus’ audited financial statements for 2019 and 2020 are located in Appendix C, “Columbus’ Audited Financial Statements.” |

* + 1. **Integrity of Company Structure and Financial Reporting** - This section must include a statement indicating that the CEO and/or CFO, of the responding entity/organization, has taken personal responsibility for the thoroughness and correctness of any/all financial information supplied with this proposal. The particular areas of interest to the State in considering corporate responsibility include the following items: separation of audit functions from corporate boards and board members, if any, the manner in which the organization assures board integrity, and the separation of audit functions and consulting services. The State will consider the information offered in this section to determine the responsibility of the Respondent under IC 5-22-16-1(d).

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| Columbus’ President & CEO, Jeff Klimaski, has taken personal responsibility for the thoroughness and correctness of any/all financial information supplied with Columbus’ proposal response. Mr. Klimaski, on behalf of Columbus, can ensure that all audit functions are kept separate from corporate boards and board members as well as our consulting services to ensure board integrity. Columbus has established an audit process which utilizes an independent, nationwide auditor, Withum, LLC. Withum performs periodic random testing of Columbus’ financial information during the course of the calendar year. At each calendar year end, Withum completes an audit in accordance with auditing standards generally accepted in the United States of America (GAAS). The objective of their audit is to obtain assurance about whether Columbus’ financial statements are free of material misstatement. Withum’s audit approach is directed at the evaluation of all significant aspects of the Company’s financial activity to reduce the risk of material misstatement. Withum operates independent of any management influence to ensure the integrity of reported financial information. Columbus maintains an independent Board of Directors (Board) where no member has direct or indirect influence over Columbus’ auditor, or the audit process. Columbus’ Board members have been specifically selected based on previous experience. |

* + 1. **Contract Terms/Clauses** - Please provide the requested information in RFS Section 2.3.5.

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| Columbus has read, understands, and agrees to comply with all requirements as listed in the Sample Contract, Attachment B, “Professional Services Contract.” |

* + 1. **Reserved**

**2.3.7 Registration to do Business -** Selected out-of-state Respondents providing the products and/or services required by this RFS must be registered to do business within the State by the Indiana Secretary of State and the Indiana Department of Administration, Procurement Division. The address contact information for this office may be found in Section 1.18 of the RFS. This process must be concluded prior to contract negotiations with the State. It is the successful Respondent’s responsibility to complete the required registration with the Secretary of State. Please indicate the status of registration, if applicable. Please clearly state if you are registered and if not provide an explanation.

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| Columbus is registered and in good standing with Indiana’s Secretary of State. We have provided a copy of our Indiana Business Entity Report for the years of 2021-2022 in Appendix D, “Indiana Business Entity Report.” Columbus is also registered with Indiana’s Department of Administration, Procurement Division. |

* + 1. **Authorizing Document -** Respondent personnel signing the Transmittal Letter of the proposal must be legally authorized by the organization to commit the organization contractually. This section shall contain proof of such authority. A copy of corporate bylaws or a corporate resolution adopted by the board of directors indicating this authority will fulfill this requirement. Please enter your response below and indicate if any attachments are included.

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| Mr. Jeff Klimaski, President & CEO, is Columbus’ authorized signatory and is authorized to commit Columbus contractually and has signed our Transmittal Letter. A copy of Columbus’ letter of signature authority is located in Appendix E, “Columbus’ Signatory Authority.” |

* + 1. **Subcontractors -** The Respondent is responsible for the performance of any obligations that may result from this RFS, and shall not be relieved by the non-performance of any subcontractor. Any Respondent’s proposal must identify all subcontractors and describe the contractual relationship between the Respondent and each subcontractor. Either a copy of the executed subcontract or a letter of agreement over the official signature of the firms involved must accompany each proposal.  
         
       Any subcontracts entered into by the Respondent must be in compliance with all State statutes, and will be subject to the provisions thereof. For each portion of the proposed products and services to be provided by a subcontractor, the technical proposal must include the identification of the functions to be provided by the subcontractor and the subcontractor’s related qualifications and experience. The combined qualifications and experience of the Respondent and any or all subcontractors will be considered in the State’s evaluation. The Respondent must furnish information to the State as to the amount of the subcontract, the qualifications of the subcontractor for guaranteeing performance, and any other data that may be required by the State. All subcontracts held by the Respondent must be made available upon request for inspection and examination by appropriate State officials, and such relationships must meet with the approval of the State.  
         
       The Respondent must list any subcontractor’s name, address, and the state in which formed that are proposed to be used in providing the required products and/or services. The subcontractor’s responsibilities under the proposal, anticipated dollar amount for subcontract, form of organization, and an indication from the subcontractor of a willingness to carry out these responsibilities are to be included for each subcontractor. This assurance in no way relieves the Respondent of any responsibilities in responding to this RFS or in completing the commitments documented in the proposal. The Respondent must indicate which, if any, subcontractors qualify as a Minority Business Enterprises or Women’s Business Enterprises under IC 4-13-16.5-1. See Section 1.21 and Attachment A for Minority and Women’s Business Enterprises information. Please enter your response below and indicate if any attachments are included.

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| Columbus will not be partnering with a subcontractor for this contract. |

* + 1. **Reserved**
    2. **General Information** - Each Respondent must enter your company’s general information including contact information.

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| **Business Information** |  |
| Legal Name of Company | Columbus Medical Services, LLC dba The Columbus Organization |
| Contact Name | Jeff Klimaski |
| Contact Title | President & CEO |
| Contact E-mail Address | jklimaski@columbusorg.com |
| Company Mailing Address | 350 Sentry Parkway, Suite 120, Building 620 |
| Company City, State, Zip | Blue Bell, PA 19422 |
| Company Telephone Number | (800) 229-5116 |
| Company Fax Number | (888) 379-2524 |
| Company Website Address | www.columbusorg.com |
| Federal Tax Identification Number (FTIN) | 75-2690132 |
| Number of Employees (company) | 571 |
| Years of Experience | 37 |
| Number of U.S. Offices | 11 |
| Year Indiana Office Established (if applicable) | 2012 |
| Parent Company (if applicable) | Columbus Organization Holdings, LLC |
| Revenues ($MM, previous year) | $49,373,210 |
| Revenues ($MM, 2 years prior) | $43,729,218 |
| % Of Revenue from Indiana customers | 27% |

* 1. Does your Company have a formal disaster recovery plan? Please provide a yes/no response. If no, please provide an explanation of any alternative solution your company has to offer. If yes, please note and include as an attachment.

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| No, Columbus does not have a formal disaster recovery plan. However, Columbus operates in a remote setting with a geographic redundancy of systems, and daily backups with a Recovery Time Objective (RTO) of less than two hours. Through Microsoft Office 365, Columbus houses Cloud backups of all company data, down to the individual workstation level. |

* 1. What is your company’s technology and process for securing any State information that is maintained within your company?

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| Columbus does not house any State-related information on our networks. Columbus’ Case Managers are not permitted to work on their personal computers for work-related tasks. They are provided equipment that is monitored by our IT Department in order to ensure secure working stations. Columbus utilizes multi-factor authentication for all employee email accounts as an added layer of security. Columbus’ policy of access control is the Principle of Least Privilege, where all users are given the minimum levels of access and permissions needed to perform his/her job functions. All case notes, billing, and trainings are completed in State systems, which are accessed with login credentials. All forms that consumers sign are uploaded to the State system, and then shredded. All decommissioned hard drives are shredded or deleted in a documented process. |

* + 1. **Experience Serving State Governments -** Please provide a brief description of your company’s experience in serving state governments and/or quasi-governmental accounts.

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| Since our inception in 1984, Columbus has strived to offer individuals with intellectual and/or developmental disabilities with a greater level of coordination and support. We have been a partner to states, federal authorities, and provider organizations offering diverse expertise across management with a culture focused on quality. We have held contracts for more than 150 state and local agencies in 45 states and currently manage over 75 Care Coordination, Quality Improvement Services, and Professional Clinical Staffing contracts nationwide. More details of the specific state agencies that Columbus serves can be found in the next section, “Experience Serving Similar Clients.” |

* + 1. **Experience Serving Similar Clients -** Please describe your company’s experience in serving customers of a similar size to the State with similar scope. Please provide specific clients and detailed examples.

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| Columbus has extensive experience in serving customers of similar size and scope to this RFS. As previously stated, we provide case management (both Traditional and Intensive) across seven states, serving and advocating for over 14,000 individuals. Columbus’ current contracts for Care Coordination are located in Appendix F, “Care Coordination Contracts.” Columbus’ detailed experience is outlined below in serving customers of a similar size to the State with a similar scope. Additionally, Columbus is familiar with and has access to multiple systems for entering and tracking case notes, case files, and billing.  **Georgia Support Coordination**  Columbus provides statewide Traditional, Intensive, and Behavioral Support Coordination services to 4,227 individuals with developmental disabilities through Georgia’s Comprehensive (COMP) Supports Waiver and New Options Waiver (NOW) in collaboration with the State of Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD), Division of Developmental Disabilities.  **Case Note System:** Columbus’ Case Managers use Georgia’s state system, IDD Connect, for case management documentation and case notes.  **Billing:** Columbus uses Georgia’s state system, the Georgia Medicaid Management Information System (GAMMIS), to bill. GAMMIS is linked to the clearinghouse system, Nitro Bill. Case Managers mark clients as ready to bill in Nitro Bill and Columbus’ billing team submits electronically.  **South Carolina Case Management**  In collaboration with the State of South Carolina Department of Disabilities and Special Needs (SC DDSN), Columbus provides case management services to over 675 individuals with developmental disabilities enrolled in the Intellectual Disabilities/Related Disabilities (ID/RD) waiver, the Head and Spinal Cord Injury (HASCI) waiver, and Pervasive Developmental Disorder waiver which includes Autism or Asperger’s Syndrome.  **Case Note System:** South Carolina’s Department of Disabilities & Special Needs (SCDDSN) utilizes two database systems for case management note documentation – Consumer Data Support System (CDSS) and Therap. CDSS is the previous system operated by SCDDSN which stores all demographics and basic information for all individuals supported. CDSS stores all required forms for all waivers and other related case management forms and directives. CDSS was the former method in which Case Managers completed annual assessments, support plans, and service/case notes. These case management activities are currently primarily completed in Therap. Ultimately, Therap will house all information currently stored in CDSS.  Therap is currently utilized in conjunction with CDSS. It is a web-based electronic documentation, reporting, billing, and communication system designed for organizations supporting individuals with Intellectual Disability/Related Disability (ID/RD) services. Providers and Oversight Providers who support people with developmental challenges use the Case Note option to record the details of the meeting between the Case Manager and the Guardians of an individual regarding the care provided to the individual over a specific period of time. Users/Administrators are also able to select the Case Note to be billable or non-billable, and Services can be linked to Case Notes for billing purposes.    **Billing:** Columbus utilizes South Carolina’s state site DDSN and Therap. Case notes are entered into Therap and linked to the DDSN system, where Columbus follows a multi-step process for creating and submitting invoices.  **Kentucky Case Management**  Columbus provides statewide case management services to 492 individuals supported through various waivers including the Supports for Community Living (SCL) and the Michelle P. Waiver (MPW) in partnership with Division of Developmental and Intellectual Disabilities (DDID).  **Case Note System:** All waiver applications, plans of care, and modifications are created in the Kentucky Medicaid Management Information System (MMIS). Case Managers receive electronic task alerts and plans are submitted electronically to reviewers for approval. The system interacts with the Division of Developmental and Intellectual Disabilities (DDID), Carewise, Medicaid, and the Department for Community Based Services (DCBS).  **Billing:** Columbus uses the state-mandated Medicaid Waiver Management Application (MWMA) to submit billing through the Kentucky MMIS.  **Delaware Community Navigation**  Working with the Delaware Division of Developmental Disabilities Services (DDDS), Columbus provides statewide community navigation services to 3,143 individuals through the Targeted Case Management waiver.  **Case Note System:** Columbus’ Community Navigators enter all documentation about an individual into the web-based Therap system, which houses the person’s complete record. The individual’s file is then accessed online for completion of monthly notes and Person-Centered Plans, and for viewing progress notes from provider agencies to ensure progress toward the person’s goals. A minimum of one meaningful note is entered each month. The system also provides limited reporting capabilities.  **Billing:** For billing the state portion of services, Columbus uses Therap to generate claims and coordinates directly with a state official to submit claims for approval and payment.  **New Jersey Support Coordination**  Columbus provides statewide case management services to 505 individuals through the Comprehensive Waiver (Supports Program) and the Community Care Program (CCP) waiver in collaboration with the Division of Developmental Disabilities (DDD). Columbus is a New Jersey Support Coordination Red Diamond Agency which means we have received authority from the Division to have our Support Coordinators’ Supervisors approve their own service plans. This signifies those agencies considered a red diamond agency do not have to submit service plans to the Division for review and approval because we have met a minimum standard for delivering quality service plans.  **Case Note System:** Columbus’ Support Coordinators enter case notes into the iRecord Portal (developed by the state). Support Coordinators are able to access their consumer files through the iRecord Portal. They also complete monthly and quarterly monitoring tools, Individualized Service Plans (ISP) and Person-Centered Planning Tools (PCPT). Support Coordinators and Support Coordinator Supervisors are able to view quality reports that show deadlines for the case notes, NJISP, PCPT, and monthly monitoring tools. Case notes are entered into the portal within seven days of the activity. There will be at least one meaningful case note entered into the portal each month no later than the last day of the month. The portal is also where we receive new clients from the state and are able to assign clients to Support Coordinators and monitor caseloads.  **Billing:** Columbus submits the appropriate forms electronically (Medicaid) or via paper copies (non-Medicaid) for processing through either the NJ Medicaid website or the Division of Developmental Disabilities (DDD), NJ.gov VPI system.  **Florida Support Coordination**  Columbus is a statewide Florida Medicaid waiver provider in collaboration with the Agency for Persons with Disabilities (APD) providing support coordination services to 2,394 individuals through the Home & Community-Based waiver and Targeted Case Management waiver.  **Case Note System:** Columbus’ Support Coordinators utilize iConnect to document all monthly contacts. iConnect is used in Florida as the client central record. The Support Coordinator uses iConnect to enter quarterly reviews, disaster plans, eligibility reviews, individuals cost plans for services, generate prior service authorizations, request additional funding based on significant needs, review state assessment tools, complete all contact notes, and complete individual person-centered support plans. Documentation must be completed by the end of the month the service was rendered. There must be evidence documenting ongoing education of rights, health and safety, abuse, neglect, exploitation, and choices within the monthly contact notes. Support Coordinator Supervisors and Directors review the monthly contacts notes prior to submission in the iConnect system. Columbus receives new cases through a selection packet provided to individuals new to the Medicaid Waiver or requesting a new Support Coordinator. The Agency for Persons with Disabilities assigns the individual to the Support Coordinator once they are chosen.  **Billing:** Columbus utilizes a third-party billing system, Nitro Bill, which is linked to Florida’s state system, FLMMIS. Clients are marked ready to bill by Support Coordinators in Nitro Bill, which are then submitted electronically by our billing team. |

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