**­­State of Indiana RFS 22-67778**

**Attachment D – Technical Proposal Template**

*Instructions:*

*Respondents shall use this template Attachment D to prepare their Technical Proposals. In their Technical Proposals, Respondents shall describe their relevant experience and explain how they propose to perform the work, specifically answering the question prompts in the template below.*

*Please review the requirements in Attachment A (Scope of Work) carefully – the requirements in the SOW should inform how Respondents complete their Technical Proposals in this template as the “Sections” referenced below correspond to the sections in the SOW.*

*Respondents should insert their text in the provided boxes which appear below the question/prompts. Respondents are allowed to reference attachments or exhibits not included in the boxes provided for the responses, so long as those materials are clearly referenced in the boxes in the template. The boxes may be expanded to fit a response.*

*Respondents are strongly encouraged to submit inventive proposals for addressing the Program’s goals that go beyond the minimum requirements set forth in Attachment A of this RFS.*

***For all areas in which subcontractors will be performing a portion of the work (except where prohibited), clearly describe their roles and responsibilities, related qualifications and experience, and how Respondent will maintain oversight of the subcontractors’ activities.***

OVERVIEW

*Please provide an overview of your proposal in the boxes below.*

*Company Background*

* 1. *Describe your experience providing Case Management Services*
  2. *Provide specific examples of how you have worked collaboratively with individuals and families, as well as state and waiver provider partners to address day to day issues, as well as changing program needs and priorities*
  3. *Describe any notable accomplishments for your company you feel would be relevant to this proposal.*
  4. *Describe any lessons learned from any sanctions, corrective actions, or formal complaints that you have been subject to (including for non-case management services), both in Indiana or other states*

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| A. Connections Case Management LLC was founded by Laura Fife and Michele Lohmeyer in January 2015. After both personal and professional experiences in Medicaid waiver, they embarked on a journey to change the manner in which waiver case management services were delivered in individual’s and family’s homes. The management team alone at Connections comprises over 140 years of waiver case management experience. In addition, the majority of the management team has been employed at other case management companies and holds just as dear the mission to build relationships with waiver individuals and families and partner with them to realize their vision of a good life.  Connections’ employees have collectively provided Family Support Waiver, Community Integration and Habilitation Waiver, Aged and Disabled Waiver, Traumatic Brain Injury Waiver, Nursing Facility, Rehab Facility, Hospice, Division of Family Resources, Department of Child Services, Division of Mental Health and Addiction, First Steps, and Adult & Child Health case management services across the State of Indiana and over 25 agencies, providers, or contractors.  B. Connections has worked extensively to collaborate with stakeholders and colleagues.   * Requested to sit down and collaborate as partner in providing comprehensive support to waiver recipients, not always joining the provider conglomerates * Collaborated on multiple occasions with DCS liaison particularly on one occasion to locate a child’s placement after transitioning unknowingly to a potential foster parent * Actively participated in technology development groups with DDRS/BDDS software development team * Partnered with Wayne Township School system, Janus Developmental center, ARC of Boone County, HBM Cooperative, and BDDS Districts to host waiver information sessions. Worked in partnership with DCS; ABA centers and various parent groups throughout the State to educate on waiver services and person- centered planning. * Facilitated dozens of facility to supported living waiver transitions across the state. * Elevated waiver program needs and priorities - in addition to requesting and contributing questions for CM certification exam, Connections Case Management created an internal comprehensive waiver manual assessment when CM exam was outdated and paused due to the pandemic * Participated with quarterly lunch and learn that brings together 50 partners in leadership from waiver providers, technology entities (SUNdata), home health agencies, DME providers and CMCOs * Contributed as Special Needs Living Magazine partner in monthly collaboration with community business partners, other service providers, housing authorities and are currently planning a resource event scheduled for 10/2/2021 in Johnson County.   C. Among Connections accomplishments are the following:   * Serves 30% CIHW as a small company and developing a niche to train, facilitate, and navigate more complicated and complex cases/scenarios * CARF accredited in first year (2015), subsequent accreditations through ISO 9001:2015 in 2018 and 2021 with zero non-conformities * Four employee graduates of the CtCL Ambassador Series through University of Missouri-Kansas City * Completed BDDS requirements for annual training, LOCSI completion, and CCB completion without late submission for over two years * Sustained growth to support competitive recruiting of qualified employees. Ability to offer insurance, 401k, technology, 15 days of PTO, paid holidays * Partnered with community outreach ministry at Northview Church to staff holiday party and Good Neighbor initiative * Collaborated with Journey organization to reach youth with I/DD. Monika Puskac, current Connections CM, is a journey scholar and completed *Sexuality Education for People with Developmental Disabilities*   + - 1. She is developing resource materials for individuals and families to reference       2. She will be completing an internal training on supporting individuals through puberty and sexual health * Developed robust training program and ongoing education for case managers * Hosted Music festival in 2019 featuring waiver individuals, partnered with the City of Greenwood and Opportunities for Positive Growth   D.  Connections has not served in other states but has participated in conferences and learning opportunities to pool knowledge and resources from other states to improve service delivery in Indiana. This includes NASDDDS conferences, NACM conferences and members, Charting the LifeCourse Showcase, and multiple NCAPPS training seminars.  Connections embraces the constant learning environment of waiver and has grown and gain knowledge every step of the way. One particular example, Connections had a corrective action for a CM who had not included a waiver participant in PCISP planning and development per the parent/guardian’s request. The parent/guardian was concerned that if the individual knew he had waiver supports and a case manager, that his anxiety would escalate to an untreatable level. Connections management team worked with both the case manager and the family to bring in person-centered conversations with the waiver participant, educating the group on dignified risk and choice. Connections used this as a training opportunity to improve and develop person centered thinking, planning and practices company-wide. Person-centered (and employee-centered) tools were revamped to build on strengths and assets, identify needed areas of support, training and education and ultimately engrain person centered practices across all quality assurance measures. |

*Compliance and Approach to Correction*

1. *What measures or steps would you take to address AND prevent corrective actions or findings issued by BQIS?*
2. *What quality assurance approaches would you employ to identify systemic issues? Please include supervision strategies as well as technical approaches*
3. *What quality assurance approaches would you put into place to timely address specific, limited situations as they arise?*
4. *Describe your company’s consideration of compliance requirements AND quality services in the delivery of case management.*
5. *Describe how you plan to provide ongoing comprehensive quality assurance. Please include how you will apply culture of quality concepts and data analysis as part of the quality assurance approach.*
6. *Provide a description of a proposed quality assurance plan, addressing the points outlined in Section 5.3.1, or provide a preliminary draft of your quality assurance plan.*
7. *Provide a narrative about your proposed Compliance Officer and the potential activities this role would oversee and/or conduct. Please also attach a resume or CV.*

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| A.  Connections takes exhaustive measures to prevent corrective actions or findings from BQIS including a robust training program, a collaborative monthly monitoring system, and open dialogue with BDDS and BQIS for learning opportunities.   * + Training program     - Initial training phase 60-90 days with training coordinator 1:1 support     - Secondary training phase after release from training coordinator with 1:1 weekly follow ups with executive management team, then weekly follow-up with supervisor ongoing as well as establishment of ongoing shadowing requirements     - Ongoing training that includes internal monthly training, monthly team call with supervisor and team on current topics in addition to required annual 20 hours of BDDS training (BDDS approved/internal and external combination)     - Providing community navigation and integrated supports training opportunities at quarterly company meetings in the past five years   + Collaborative Monthly Monitoring and Review Process     - Monthly 1:1 Supervision form and discussion     - Monthly Quality Assurance monitoring and reporting   + Open Dialogue     - Participation in BDDS/CMCO calls, BDDS/Provider/CMCO calls, active monitoring and attendance of DDRS Advisory Council, 1102 Task Force, additional BQIS and BDDS training opportunities as presented/available, engagement with DDRS leadership in individual person-centered discussions; HP representative meeting   B.  Connections takes a plan, do, check, act approach to quality assurance per our Quality Monitoring System. Systemic issues can be identified at any level or role within the structure and will be assessed, addressed, and mitigated.   * + Supervision includes maintaining small teams, requiring a minimum of monthly team meetings, monthly 1:1 supervision with each team member, integration with Coordinators and resources     - Supervisors maintain small teams of CMs (4-6) to ensure oversight and support     - Supervisors are required to meet with their collective team at least monthly to review current training topics, community resources in the service area, and recent updates/procedural changes if needed     - Supervisors are required to complete a monthly supervision form for each CM and facilitate an open conversation about the following areas:       * Professional Development/Successes       * Caseload Questions/Concerns/Issues       * Resources- Community; Training; Technology       * Random File Review/Quality monitoring       * Timeline Measures   C.  Connections uses their Quality Assurance Director and team to address limited situations as they arise. This follows the same plan, do, check, act process to ensure the situation is assessed, a plan discussed and reviewed and if possible, piloted. Then, monitor results and evaluate solutions for implementation.   * + Ex. BQIS informs CMCOs that ABC provider is closing in 30 days and individuals will need alternative solutions and supports.   1. QAD assesses the individuals impacted: service plan, location, case manager, options  2.QAD creates a plan with Case Management Operations Director and Crisis Intervention Coordinator  3. Impacted CMs are informed and expectations set. Crisis Intervention Coordinator provides additional support for individuals or CMs as needed for various reasons. Supervisors monitor status and report back.  4. Crisis Intervention Coordinator and Quality Assurance Director provide updates to BQIS and ensure conversion of supports for individuals.  D.  Connections ensures compliance with all federal and state laws, agency policies and procedures, and BDDS guidance and procedures. However, quality of case management services is the mark by which we measure success.   * Connections Mission Statement AND Quality Policy:​​ Connections Case Management, LLC’s mission is to empower people with disabilities to create purposeful and meaningful lives by connecting clients to services and supports based on each individual’s interests, strengths, and needs. * Connections fosters a culture of quality by hiring staff that are advocates; committed to empowering individuals to ideally not need case management/waiver services if possible; using monthly data to meet compliance standards; and providing continuous education for staff. * Connections prides itself for having individuals that have successfully signed out of waiver supports due to establishing natural supports and skills acquisition. * Connections focuses and encourages individuals to strive for independence and fulfillment in their lives, supporting their vision of a good life. * We understand the intricate relationship between compliance and quality, recognizing that they are both vital in successful service delivery.   E.  In April of 2021, CMCOs were asked the following questions from BDDS and Connections provided the listed feedback: The following questions focus on the characteristics of a systemic culture of quality. As we prepare for our next CMCO Touchpoint on April 20th, we would like for your company’s leadership (owner, director of case management, or quality director) to share responses to these questions with BDDS.   * *A systemic culture of quality includes a shared understanding of trust and learning. What steps can BDDS take to develop this shared understanding with case managers? What steps can case management companies take to support their case managers to develop this shared understanding with BDDS?*   + Open lines of communication and feedback have been an essential piece to successful navigation during the pandemic, this continued commitment to transparency and open communication would foster trust and learning.   + Increased partnership in development of quality measurement tools, training opportunities, and technology system integration would also be beneficial.   + Connections has always trained and educated on the responsibilities and advantages of partnering with BDDS districts and other agencies but changing the mindset and culture of working as a team is essential to building trust. * *A systemic culture of quality requires a deep commitment to partnership among all agencies and stakeholders. What collaborative efforts can BDDS and case management companies build upon or initiate?*   + Combined training opportunities fosters rapport. When completing the PCISP development and Life Course trainings, it is extremely helpful to have other stakeholders in the same setting.   + Expanding the Resource page in the portal to accommodate both BDDS and CMCO information in one platform with ease of access promotes cohesion and consistency.   + Updating the CM provider contract. * *The desire to understand what contributes to inadequate service quality is a necessary component of a systemic culture of quality. What recommendations do you have for improving BDDS and case management companies’ understanding of inadequate service quality?*   + Aligning regulations, policies, and procedures.   + Aligning expectations with LifeCourse framework and reflecting these expectations in required documentation.   + Setting clear expectations for service providers and supporting follow through for service outcomes, documentation and collaboration. * *A systemic culture of quality includes the recognition that mistakes happen and fixating on past issues can be counterproductive. In your opinion, what must BDDS and case management companies do to achieve this goal?*   + Mindset shifts are by nature difficult, fostering a culture that is education based, provides opportunities for active listening, and accepts constructive criticism is critical.   + Effecting change on the ground, in everyday tasks, would go a long way towards changing mindsets and culture. If CMs could have lower caseloads and spend quality time with individuals, cultural changes would be more organic. * *To be successful, a systemic culture of quality must include reciprocal feedback loops between BDDS and case management companies that supports learning, builds trust, and promotes the pursuit of excellence. What could this look like in practice?*   + BDDS SCs and CMs having the ability to communicate and collaborate on an initial intake file and transitions within the technology system.   + Having files assigned/relationship section reflecting the corresponding BDDS SC, reflecting them as a team member.   + A revamped CM certification process. * *Finally, shared responsibility among all team members for identifying and acting on opportunities for improvement is a necessary component of a systemic culture of quality. What should identification and action look like for BDDS? For case management companies? Could this be a collaborative process?*   + A collaborative process is essential for robust quality improvement.   + Working together to educate community members and integrate individuals receiving waiver services in more natural or organic process.   + Utilizing CM feedback to directly affect policy change and implementation.   + Continued and even increased transparency.   In consideration of that feedback, the executive leadership team assessed the current quality assurance approach and potential areas of growth and development:   * + Connections has historically implemented quality over quantity in basic structure. In late 2018, Connections implemented an internal caseload cap of 50 individuals and reserved the opportunity to reach this level of case management for CMs that were exemplary in their performance.   + Connections has used monthly data of required case management tasks to assess performance and set expectations for service delivery. Monthly reports include timeline measures for CCB/Service Plan submission, PCISP completion, LOCSI completion, case note completion, monitoring checklist submission, unannounced visit completion/status, and training completion. This compliance standard is reported monthly on 1:1 supervision forms and reviewed and monitored by both QAD and CO.   + Connections sets a standard of quality for education and training for employees at level higher than the required State minimum. All employees are required to complete ALL internal BDDS Canvas trainings, a minimum of 10 hours of external training that closely relates to service delivery as determined by Connections Training Coordinator, a monthly internal training for relevant topics, and annual Person-Centered Planning training.   F.  Connections Case Management, LLC has an ISO 9001:2015 accredited Quality Management System that empowers people with disabilities to create purposeful and meaningful lives by connecting clients to services and supports based on each individual’s interests, strengths, and needs. Connections utilizes data reports from the state system, a robust training program, a comprehensive monthly quality and compliance review system, annual reviews and performance evaluations, and quality and compliance matrices to assure the highest level of case management service delivery.   * Connections maintains an ISO 9001:2015 accredited Quality Measurement System that outlines and assesses these main processes: Intake/Onboarding Case Management and Ongoing Case Management delivery and Hiring Process.   + [Preliminary Draft Quality Assurance Plan](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EayFg7Um_cJAiQHGVAFGzzwBB-ejk3AXuBMQAdsdy-V61w?e=Fnjgiz) attachment * Annual Review and Evaluation * Reviews are completed at completion of initial training period and every January. * [Annual Evaluation](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/ERjWcbChLHhCuixI7CdyqWsBYouG4tajbHWOgMCiPEktOA?e=8wQaPB) attachment * Reviewing Case Manager Activity * Supervisor reviews case management monthly, after the 20th of each month, and is responsible for uploading to employee file and reporting to Case Management Operations Director. * [Monthly CM Supervision Form](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EWByHbm5tXNBnn1KaX2r-qsBJ9tM6gT0Xwi0ej_DNTlTbw?e=YXyemJ) attachment * Monthly Supervisor Supervision Form attachment * Connections maintains an ISO 9001:2015 accredited Quality Measurement System that outlines and assesses these main processes: Intake/Onboarding Case Management and Ongoing Case Management delivery and Hiring Process. * Verifying Employee Qualifications * Connections recruits, hires, and employs staff with personal and professional experience in the field of human services and specifically with the disability community. * Qualifications per 460 IAC 6 14, 15 and 16 as well as DDRS Waiver Manual Case Management Service Definition requirements are all reviewed prior to submission for state system credentials or employment agreement is signed. * [Hiring Flow Chart](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/ERIByIxrLUhNqUGdDkNTj3IBJ0on0Tf0F82o7RcqYXwtmw?e=YwJT5A) attachment * Individual Satisfaction Survey   + Connections provides a postage paid paper survey to every individual/family served at the annual team meeting. This survey provides the opportunity for individuals and families to share anonymous feedback or request contact from a member of Connections’ Management Team. Service standards are assessed on a Likert scale for case management functions. * Online Survey Connections Satisfaction Survey attachments   + Connections also provides a Microsoft Forms survey for ease of access for individuals, families and providers to assess case management performance and Connections service delivery. * Complaint Process   + Pursuant to Connections Operations Manual Section 1.2 Rights of Individuals: Individuals or families with complaints can inform any employee but complaint will be escalated to Executive Management Team for investigation and resolution. Individuals and families will be informed at minimum quarterly of their right to choose providers. Individuals and families will also be informed of BQIS complaint reporting contact information.   + Connections will report all complaints quarterly and as requested to BDDS/BQIS   G.   * [Becky Johnson Resume](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EWRydNpL1FlBtOfNbEc8-tYBVPxseP8JKGM1m682rUwDbw?e=IG7kiy) attachment * Connections Case Management, LLC Compliance Officer is Becky Johnson. Becky has been a waiver case manager for thirteen years and with Connections nearly five years. Becky’s passion and skill set reside heavily in reading, understanding and implementing regulations, policies, and procedures. Please see attached resume′. * The Compliance Officer does not carry ongoing full-time cases but will provide interim coverage and as needed case management. The CO completes monthly data analysis of quality trends to ensure compliance with state expectation of timeframes. The CO monitors and identifies any actual or potential violations of rules, regulations or requirements and reports as required.   + Reporting and trend tracking to monitor and maintain QMS   + Review of training, case management processes, manuals, HR processes, CAP implementation, regulations/policy updates   + Responding and verifying BDDS/BQIS requests   + Annual Management Review process   + Accreditation and ISO 9001:2015 |

SECTION 4. – Plan and Program Information

*Please explain how you propose to respond to Section 4 by answering the question prompts in the box below, if applicable.*

*Section 4.2.1 – Enrolled Medicaid Provider*

1. *Describe how you plan to comply with Medicaid provider enrollment requirements. Address the following aspects:*
   1. *Estimated timing*
   2. *Any structural changes for your company*
2. *Include a draft application for enrollment (see Bidder’s Library for application information).*

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| Currently enrolled as a Medicaid provider for Case Management in the State of Indiana, provider number 300033533   * + [Medicaid Waiver Provider Certificate](https://netorg164942-my.sharepoint.com/:b:/g/personal/lfife_connections-in_com/Efikd2gnpchMiupaup4tunoB4Am-Dsfw8_oDbrzWQsqRLw?e=GMkGEh) attachment |

*Section 4.2.2 – Commitment to Statewide Coverage*

1. *Describe how you will ensure statewide coverage of case management services. Address the following aspects:*
   1. *Your company’s approach to staffing that ensures adequate geographic statewide coverage and considers:*
      1. *How you assign Case Managers to Individuals. Be sure to address:*
         1. *What factors are considered*
         2. *How you plan to balance the varying complexities of individual cases for Case Manager caseload*
         3. *Process for Individuals to request specific Case Managers*
2. *If you currently do not provide statewide coverage, describe your plan to transition to do so.*
3. *Provide an overview of how you plan to fulfill your responsibilities overseeing your Case Managers and ensuring quality case management services.*
4. *Describe how your Case Managers will provide services and support with a person-centered approach and how you plan to encourage and ensure this, and monitor or measure for effectiveness.*
5. *Provide an overview of your current case management team, including number of employees, geographic coverage, and caseload.* 
   1. *Please share any timing concerns you may have with assuming and delivering case management services statewide within the stated timelines*

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| A. Connections currently provides case management services in all 92 counties in the State of Indiana. Geography, complexity of the case/file, CM experience, and caseload size are considered when determining available CMs for an onboard.   * + - Geography- CMs serve their county of residence and surrounding counties (with exceptions in rural areas). CMs are then familiar with waiver providers, community resources, and local natural supports.     - Complexity of the case file is considered, particularly in relation to the experience of the CM when determining available CMs. If an experienced CM is not available in that particular location, a less experienced will be offered with the ongoing support of supervisor and coordinators as needed. Connections provides additional support for intense or crisis situations via our Crisis Intervention Coordinator.     - Finally, Connections assesses performance of CMs and determines ability to maintain between 40-50 individuals on a CM caseload. Connections implemented a caseload maximum of 50 in 2018, effective date 1/2019 for case managers who have exemplary quality and timeline measures, acknowledging internally that quality performance is jeopardized when serving more than 50 individuals. * Should an individual or family request a specific CM, the factors above in addition to the request will be considered. The CM must live in the service area, have the capability to serve the individual or serve them with support, and maintain the caseload cap. If the CM does not have current availability due to caseload cap, the supervisor or other interim CM can serve or individual of course has choice.   Statewide Coverage/Balancing Case Manager capacity   1. Connections currently provides case management services statewide. Connections serves approximately the same percentage of CIH waivers as the overall Indiana average. (please see following slide) We accomplish this at our current size by using a team approach and ensuring the selected CM has ample support with access to not only their direct Supervisor, but also a Crisis Intervention Coordinator/s, Technology Coordinator/s, and Training Coordinator/s. These support coordinators can/will attend meetings, mitigate crises, assist with technology issues in the field, complete transition support, etc. 2. Complexity of case, CIHW and FSW, Geography, Experience and Performance Measures are all factored for case manager caseload size and availability.    * Some FSWs are as complex as CIHWs, so case is reviewed prior to onboard    * Maintain 30% or less ratio of CIHW to FSW for new CMs and ongoing CMs not at top performance level    * CMs serve their county of residence and surrounding counties, with a few exceptions in rural areas    * CMs must meet quality and compliance measures ongoing to maintain caseload size     Section 4.2.2 B- Not applicable, statewide coverage is already provided  C. Connections plans to continue the framework and functionality of the current structure. Connections will utilize small supervision teams augmented with a coordinators team for support to model team facilitation internally and monitor team facilitation and case management for individuals served.   * Quality monitoring is two-fold, education/training and setting expectations. Connections has developed a comprehensive training program and a structure that supports ongoing learning and collaboration for both data entry and work in the field. Connections sets the bar high, expecting person-centered planning and team facilitation for each individual served. We feel the most influential manner in which to change the culture of case management services is to model that behavior, thus the purposeful nature of Connections organizational structure, documentation, data tracking, and training program.   D. Connections recognizes, in our mission statement, the first and foremost aspect of person-centered thinking, empowering the person. We start by empowering the case manager with knowledge, resources, time, continuity, lateral access to support, and practice. When a CM “walks through the front door”, they work on developing a LifeCourse Basic profile on themselves. Foundationally, the importance of person-centered thinking is set. Through training, Connections builds on that principle. Through resources and field support, Connections builds on that skill set.  E. Connections’ current case management team includes 48 employees. We provide case management supports throughout the state of Indiana.   * Connections had implemented an internal cap of 50 individuals per caseload in 2019. With our current organizational structure, Connections is already in compliance with the State of Indiana’s 45-person caseload average. Our business practices for onboarding and CM assignment ensure that this quality metric will be perpetuated as we grow. * Connections has aggressively grown from 3 employees to 48 in 6 years. We have successfully recruited, trained, and integrated multiple case managers into our organization. We are confident in our ability to continue to do so. |

SECTION 5. – Description of the Contractor’s Responsibilities

*Please explain how you propose to execute Section 5 by answering the question prompts in the boxes below. In answering these questions, please provide any relevant experience you may have.*

*Section 5 – Description of the Contractor’s Responsibilities - Overview*

1. *Describe how you will support case managers to ensure functional, effective and positive Individualized Support Team dynamics (facilitation, coordination with other providers, collaboration with guardians, etc.) with a focus on working toward shared outcomes for the team in support of individuals’ wants and needs.*
2. *Describe how you will support case managers to deliver case management to be strength-based, person-centered, and offer opportunities for integrated supports to individuals in BDDS waiver services, as well as individuals transitioning into waiver services and how you plan to monitor these activities for effectiveness.*
3. *Provide specific examples of your proposed incorporation of all life domains and life stages within the context of a person, their family, and community in the delivery of person-centered case management, and the outcomes you believe your approach will have on individuals receiving services.*
4. *Provide a summary of how you will ensure complete, accurate and timely data entry into the state’s case management system and your approach for monitoring this.*

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| A. Connections Case Management, LLC provides comprehensive training on professional communication, meeting and team facilitation, and person- centered planning. In addition, Laura Fife/COO and Heather Groves/Case Management Operations Director do ongoing provider outreach and collaboration. COO and Becky Johnson/CO have organized several provider meetings focused on PCISP education and coordination of efforts to obtain buy-in from Direct Support Professionals and staff.  Connections models team building and facilitation in the infrastructure of the company. Connections has maintained a lateral organization that focuses on supporting the individual utilizing the skills, talents and strengths of multiple employees. Please see employee manual organizational chart. Just as ISTs are thoughtfully composed to support the individual, Connections’ management team is designed to support the case manager.  The case manager has a supervisor to guide and assist. The technology coordinator, training coordinator, and crisis intervention coordinator are also at the disposal of the CM should that case manager require supplemental information, technical support, additional facilitation support or help with resources.  As the case manager role continues to change and evolve, Connections is committed to regularly reviewing the need for coordinators that fill this function to best support the case manager to be effective and successful in their role.    B. Connections supports our case managers to support their individuals and families. We ensure that they are armed with technology and knowledge to use these tools to support their individuals and execute their job responsibilities efficiently and accurately.   * + Connections promotes individual CM’s strengths and knowledge. We recognize that experience with RFAs, Medicaid PA, Crisis Intervention, Transitions, Technology, BMRs and BRQs may vary greatly based on the CM’s longevity in the field. As such, we have designed our organizational structure to feature these strengths so that the organization can benefit from that breadth and depth of knowledge. Connections employs supervisors and coordinators within their structure. Supervisors focus on growth as a CM and basic case management skills, such as organization, communication, use of systems, etc. Coordinators have specialty knowledge and carry a smaller caseload so that they may provide support in their subject matter area(s) to CMs as needed.   + Connections has strong relationships with BDDS district offices, APS and DCS personnel, various DFR offices, IDR, and various advocacy groups, including Family Voices, INSource, Special Olympics, and FUSE. We encourage CM volunteerism and board membership in these arenas as well.   + Connections maintains a resource library internally that includes various links to state and national resources, foundations and funding sources, leisure/community opportunities, mental health initiatives, and support options.   + To monitor our activities and their effectiveness, Connections uses their internally developed, PCISP checklist tool (see attached) to review CM’s work and to further enable them to look at various ways to use integrated supports to support the individual. Connections CMs meet monthly to discuss their caseloads with the supervisor. If information necessitates additional team assistance or input from Connections, monthly review documents are reported and shared across the management team.   + Connections CMs are able to share success stories of individuals as well as fellow colleagues. Depending upon approval, this information can be shared in internal newsletters or via our internal Teams platform or also via social media.   + [Supporting Case Managers Integrated Support Star](https://netorg164942-my.sharepoint.com/:b:/g/personal/lfife_connections-in_com/EQoCQI9srSxBoiMQzQILGawBrTsr2HJFxoasPB13rD0vZQ?e=GKKNqs) attachment   C. Connections believes that in order to educate individuals and families and obtain buy in from individualized support teams, it is necessary to establish a level of comfort with LifeCourse principles and tools. We start with utilizing a person-centered planning tool at the initial intake meeting to help guide the individual and family in identifying their life trajectory and vision. Ongoing, CMs use the process of person-centered planning to continually assess and develop outcomes that will support the individual’s vision of a good life. Connections further uses LifeCourse tools and principles internally for interview preparation, monthly reviews, management orientation and training, and ongoing staff development.   * Applying and putting into practice the person-centered planning tools and further integrating them into all facets of the organization creates a culture of knowledge, application and implementation that directly and positively effects individuals receiving services. * Supporting CMs Life Domains attachment   D. Connections has a robust quality monitoring system as previously discussed in relation to SOW 5.3.1 which includes: monthly distribution of quality assurance reports pulled from state system and provided to entire management team; monthly 1:1 supervision form completion for each CM that includes monitoring for accuracy, completion and timeliness; weekly reports pulled from the state systems by Compliance Officer to review timely submission of data; and structure parameters that maintain small supervisory teams allowing for additional oversight and monitoring. |

*Section 5.1 – Recruitment and Hiring of Case Managers and Average Caseloads*

1. *Describe your plan for maintaining an average caseload per Case Manager that is manageable and ensuring an average caseload size of no more than forty-five (45) cases across full-time Case Managers who actively provide case management services to Individuals receiving waiver services. Describe how you will ensure the recruitment and hiring of Case Managers will be facilitated in a manner that ensures statewide coverage and maintains delivery of at least the minimum requirements of the case management service and maintains qualified case managers.*

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| Connections has small teams made up of one supervisor and 4-6 CMs. CMs have 40-50 individuals on their caseload once full-time, permanent employees. Supervisors and coordinators carry a minimum of 21 with flexibility to support interim case management individuals and assist in their complementing supportive roles within the Connections Case Management organization. Directors, CO, COO and CEO carry minimal caseloads to ensure their availability to respond and assist companywide. With this structure, the adherence to an average caseload of 45 individuals per case manager is not only managed but optimal for ongoing supports of the individuals we support.  Connections Case Management provides statewide case management coverage. As our clientele grows, we will continue to recruit, train, and support case managers in geographic areas as needed. |

*Section 5.2 – Management of Case Managers*

1. *Provide an overview for how you plan to manage Case Managers in accordance with the responsibilities outlined in Section 5.2.1 in the SOW, including any relevant experience and expertise.*
2. *Describe your support and supervision structure and how you plan to ensure adequate support for Case Managers, and their ability to collaborate and be responsive to BDDS/BQIS inquiries and support efforts.*
3. *Describe your management plan for ensuring that Case Managers are providing case management services in alignment with the Waiver Service Definition, and that services are delivered in accordance with conflict-free requirements for case management.*
4. *Describe how you will support Case Managers in their reporting duties as outlined in Section 5.2.2.2, including how you will track and collate their reported information.*

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| A. Onboards and re-entries are received from the state. Collateral information is reviewed to assess: CM experience level, complexity of case, waiver type targeted, geographic region currently residing and area where individual wishes to relocate (if applicable). CM uses this information to determine which CM is provided the individual’s case. All intakes/re-entries are reviewed on the CM monthly to determine if additional Connections resources are needed.   * Individuals may request a specific CM; however, many CMs have limited availability due to the responsibility of their current caseloads. When able, Connections will honor individual requests. If unable, Connections will inform the individual of the CM’s current full caseload status and offer choice among all CMCOs available or Connections’ ability to support the individual currently and allow them to transition to the CM of their choosing should a spot become available. Connections prides itself in working together as a cohesive team with internal supports so that when you choose us, you not only have the CM, but access to the knowledge and expertise of ALL in our organization. * Connections recognizes the additional responsibilities that are required of POCO settings and focuses on maintaining balances across all CM caseloads for equitable distribution of workload. * [Caseload Balancing Flow Chart](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EdzitkmThR5LiZfFuHbVTPUBB4S9vTOpPWnGCMR-_qL3Jg?e=qwh5Af) attachment * [Onboarding Flow Chart](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/ESJBv0WuYN5JokWKu73AW18BS_4uWmzNJgMJCYWCbMxwcQ?e=F2GNvK) attachment * [CM to CM Transfer Form](https://netorg164942-my.sharepoint.com/:b:/g/personal/lfife_connections-in_com/EQCr8tP3J-JJiqpjinfcbMEBUtjmknmlzeoPblk5kgbUtA?e=yINzdj) attachment     B. Connections supports case managers on various levels.   * + Caseload size - We truly believe and recognized years ago that person-centered case management cannot be done with over 50 people on a caseload. As an organization, we currently have an average caseload size under 40 for our full-time employees.   + Supervision - In the same thought process, we recognize that supervisors need to be privy to the circumstances in their areas and their CMs caseloads, thus our supervisors support small teams in order to be effective members of their teams as well.   C. Connections case managers are educated on their job responsibilities. Expectations are also clearly communicated in CM Monthly Duties policy and job description. Our training curriculum is comprehensive and includes 460 IAC, DDRS waiver, DDRS policy and procedures, and all BDDS policies and guidelines.   * Connections case managers are well acclimated with LifeCourse framework. They are educated on the various tools and the LifeCourse philosophy in their initial training. Annual training also ensures that our CMs remain knowledgeable of new tools and options that are available. Connections has invested resources to ensure that multiple key staff have completed ambassador series training through UMKC. Connections also requires all management personnel to complete the BDDS PCISP Basic Proficiency Certification. Connections expects that all staff enroll and complete PCISP trainings that are made available by BDDS. * Annual planning documentation reflects the facilitation of IST planning for the service plan year; however, LifeCourse philosophy and the PCISP are ongoing, living documents reflective of the continuous trajectory towards successful outcomes. They are ongoing records of meetings, dialogue, use of LifeCourse tools and discovery. They are the conglomeration of the individual’s hopes and dreams, but also of their IST meetings, provider reports, unannounced visits, dignified risk, trial and discovery of preferred activities (as well as non-preferred). * Completion of monitoring checklists, LOCSIs, unannounced visits, PCISP completion and updates, and case notes are monitored regularly. Outstanding items are shared with CMs so that deadlines are clearly identified and communicated. * Connections requires a Conflict of Interest form to be completed at time of hire and updated if and when potential conflict of interest status changes. Additionally, Connections strictly adheres to the State of Indiana’s conflict free case management regulations. We do not diversify or provide waiver services in any other capacity.   D. Connections provides, at minimum, weekly review and follow-up with new hires during the training period on reporting duties and case management task completion. Connections’ Training Coordinators and Supervisors will assist as needed to implement a tracking system for the new CM.   * Connections provides multiple tracking and organizational mechanisms for CM use during the training period and ongoing in CM resources. * Connections provides, at minimum, bi-monthly follow up and support from management team on required data tracking and collates all data trends for company-wide monitoring and oversight. |

*Section 5.4 – Training of Case Managers*

1. *Provide an overview of how you plan to organize and deliver your training operations, including but not limited to in-person training, on-demand web training, user manuals, and your proposed training schedule.*
2. *Describe how you plan to incorporate best practices into the training program and provide examples, specifically addressing team collaboration in working toward shared outcomes, fostering individuals’ independence, overall system navigation, and cultural competency concepts.*
3. *Describe how you will coordinate training for Case Managers on additional non-waiver Medicaid services to support Individuals, such as resources to access broader employment supports, housing accommodation needs, and transition services and resources to support successful transition from institutional settings to HCBS settings.*
4. *Describe how you will train Case Managers on researching and accessing available community services in their geographic region to support Individuals across life domains and across their lifespan.*
   * 1. *Describe your familiarity with the LifeCourse framework and how you may incorporate the principles and tools in your trainings*
5. *Describe your plan to keep training curriculum materials up to date, especially in coordination with BDDS and BQIS, as BDDS and BQIS continually updates resource materials.*
6. *Describe your approach to validating that the training operations are yielding desired outcomes associated with principles and concepts associated with and aligned with BDDS’ philosophical approaches to HCBS services.*

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| A. Training Program: Connections’ training program consists of four broad components: (1) new employee orientation/training; (2) ongoing monthly/annual training for current employees; (3) new supervisor orientation/training; and (4) documentation and resources to support all facets of training. New employee training takes place in the initial 60-90 day timeframe. New employee training involves a combination of in-person and virtual training sessions, job shadowing, hands-on practice, and individual assignments and/or trainings. The focus is to equip new case managers to learn the overall basic job functions of a waiver case manager. Ongoing training for employees consists of 11 virtual training sessions (every month except September) and one in-person training at a company-wide meeting in September. These trainings enhance the knowledge of current case managers to improve overall quality and service delivery. Supervisor training consists of a 2-day training meant to help equip new supervisors in leading and mentoring a team of case managers. Documentation and resources exist at all levels and include, but are not limited to, PowerPoint trainings, recorded trainings, training assessments, virtual training binder, cheat sheets, organizational templates, community resources.    B. Connections incorporates best practice in training and ongoing internal timeline expectations as well as quality expectations. We train all staff in team collaboration and reiterate the value of shared ideas, concepts, cultures, backgrounds and experiences. This philosophy is prevalent throughout our robust training program.   * PCISP Trajectory attachment * PCISP Checklist attachment   C.   1. Training Program- Connections External Training Requirements 2. [Connections' External Training Request Form](https://netorg164942-my.sharepoint.com/:b:/g/personal/lfife_connections-in_com/EYz-od1F5uxMuj_pLTNUZPgBMFZFGfQSFkD8eX5cUF6Mvw?e=TmIagS) attachment which requires attached certificate of attendance with attendee’s name present on certificate 3. Multiple sources for external training can be utilized and approved by Training Coordinator and Quality Department including but not always limited to: AmericanAssnIDD; ARCHealthMeet; EdWEB; FifthFreedom; INSource; LeadCenter; NACM; PacerCenter; NCAPPS 4. Training is due no later than December 1st each year, monthly and quarterly monitoring and status is reported to Supervisor team on the 20th of every month by Training Coordinator 5. Connections provides non-waiver services training via several platforms: internal website resource link and description, monthly training, and guest trainers at bi-annual company meetings. Webinar and recorded trainings are referenced above and outside live presenters have included but not limited to the following:   **9/22/2017**  Heather Dane, Family Voices of Indiana  Topic: Social Security    **6/8/2018**  Nikhil Gunale, Acme Home Healthcare  Topic: Medicaid PA    **9/14/2018**  Phillip Waddles, INvestABLE Indiana  Topic: ABLE Accounts    **3/8/2019**  Mimi Huybers, Insource  Topic: Insource 101    **6/7/2019**  Heather Dane/Jill Thornhill, BDDS  Topic: Overview of BDDS, roles, responsibilities, etc.    **10/8/2019**  Jonathan Kraeszig, Voc. Rehab  Topic: Transition Life Stage    **1/17/2020**  Adrienne Eller, State Eligibility Manager DFR 9  Topic: Medicaid/Social Security    **6/8/2020**  Angie Northrop, National Seating and Mobility  Topic: Specialized Medical Equipment and Supplies    **1/11/2021**  Nicole Hearns, Caregiver Homes  Topic: Structured Family Caregiving  D. LifeCourse Framework and tools are incorporated in training, development, daily operations, monthly quality assurance. We feel the more often they are utilized and presented, the more comfortable and proficient CMs become with using them in the field. The are present in our internal documentation, our hiring documentation, and required for person centered planning.  E. Connections already maintains a training tracker and has been compliant with BDDS regulations annually. Connections will utilize the Communication Coordinator position to assist with updating resource materials and distributing internally.  F. Connections has been aligned with HCBS services and BDDS philosophy from the beginning. Advocacy and empowerment are in the mission statement and quality standard for Connections. The vast experience and personal relationships of the employees exhibits our dedication to maintaining the principles and concepts. |

*Section 5.5 – Satisfaction Surveys*

1. *Describe your plan for soliciting Individual satisfaction surveys and for utilizing those findings. Address the following:*
   1. *How you will distribute this survey to all Individuals*
   2. *Topics to be covered by the survey*
   3. *How survey findings and feedback from Individuals and families will inform decision-making*

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| * Satisfaction surveys are distributed via postage paid hard copy at individual’s annual team meeting. An online Microsoft Forms link is also available at anytime for completion by individuals, families, and/or providers. * The following case management service delivery areas are covered/assessed by the survey: advocacy, availability/accessibility, communication, coordination of support/services, ethical behavior, follow through, knowledge of available resources, problem solving skills, quarterly meeting facilitation, respects you and your concerns. * Survey results are recorded on a quarterly basis with a quality measurement system expectation of client satisfaction at or above an average of 4.5 on 5 point scale. Annual averages: 2017 avg.= 4.78; 2018 avg.= 4.85; 2019 avg.= 4.91; and 2020 avg.= 4.9. In turn, feedback and results are utilized for training opportunities, professional growth and development, and potential adjustments to our quality measurement system.   + [Microsoft Forms Client Satisfaction Survey](https://netorg164942-my.sharepoint.com/:b:/g/personal/lfife_connections-in_com/EeCmZojQHwRLgXdaH9vtJdcBer9zcFg_9eqm0A6A_nJu5Q?e=xe3pcw) attachment   + [QA Survey\_Print](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/ESe0QsnXW2JGp-GMZ5wxHlwBvpSuRXiWNmZPcu25h7hDMw?e=cBl5xD) attachment   + [Satisfaction Survey Qt. Report attachment](https://netorg164942-my.sharepoint.com/:x:/g/personal/lfife_connections-in_com/EaRwE4wXw6pDoAm5jUgKCO0BanydQ5W969BKkCwAetR_gA?e=y2csyC) |

*Section 5.6 – Complaint Process*

1. *Describe the open feedback channel you plan to make available.*
2. *Describe your plan for investigating complaints or concerns that you may receive from Individuals regarding their case management services. Address the following:*
   1. *Case-specific process for addressing Individual’s concern*
   2. *Company-wide process for sharing learnings from complaints or concerns*

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| Connections Case Management, LLC has a complaint process in place that allows all individuals and/or families to any member of the management team, the managing partners, BDDS and/or BQIS.   * + Satisfaction Survey and/or request to speak to management team   + Written complaint/letter to co-owners   + Investigation process internally   + Public suggestion box on Connections’ website   The individual is supplied with client’s rights at minimum annually and as requested. Per Connections Operations Manual Section 1.2 Rights of Individuals   * + If the individual/family has a complaint, compliment or suggestion, Connections’ co-owners will investigate and mitigate resolution.   + Continual improvement plans or opportunities for improvement are generated from complaints or concerns. Leadership team then evaluates action steps to improve policy, procedure and/or training. |

*Section 5.7 – Mortality Reviews*

1. *Please confirm your understanding of the Contractor’s role in the mortality review process and your willingness to conduct those activities when required.*

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| Connections assures completion of the mortality review and will conduct a mortality review in accordance with 4601 IAC 6 and BDDS/BQIS policies when we are the primary provider of record pursuant to Connections Operations Manual Section 1.10.   * [Connections Death Investigation Flow Chart](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EYCRdQOc0l1MgR_NDj6KEEYBP93FL77CrRbAAzuyek33WQ?e=nMaDR1) attachment * [Connections Mortality Review Checklist](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EaVevEVqLJFNkcF0GTw4KNMBEFpAdxZP5Y8PAvAXeKwnDg?e=xu7chN) attachment |

SECTION 6. – Contractor Administrative Duties

*Please explain how you propose to execute Section 6 by answering the question prompts in the boxes below. In answering these questions, please provide any relevant experience you may have.*

*Section 6.1 – Contractor Staff*

1. *Provide an overview of your organizational leadership. Include relevant qualifications and experience.*
2. *Describe your proposed supervisory staff.*
3. *Please describe how your supervisory staff is equipped to provide supervision and subject matter-specific guidance to Case Managers. Please include their relevant experience.*
4. *Provide a narrative describing the Staff contemplated by Section 6.1. In your narrative, please describe whether they are a W-2 or IC / 1099 employee. Also in your narrative, please describe whether they are full-time or part-time and provide proof of certification. As applicable, please attach resumes of any specific proposed candidates.*

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| Connections has an accessible, lateral organization providing a comprehensive support to all employees. Relevant qualification and experience is included in attached resumes for Executive Leadership.   * [Laura Fife, COO Resume](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EfHxwE-7LwdDvw0-drEgCzcBF-jKT6-CzITlCnuNrGaeDg?e=Mgsz49) attachment * [Michele Lohmeyer, CEO Resume](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EXRktNhZsVZPuc_36fo30N8BADeV5c4SVQHXT92h6Dhrng?e=BnYdVe) attachment * [Heather Groves, Case Management Operations Director](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/ETlvlowATC5Nm555j86SAvkBFueAWxJYjZclwuf9kuBJtQ?e=eSUo0p) attachment * [Amy Noblitt, Quality Assurance Director](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/Ed9IvjLMiIBCke8FwUN1OesBGRGKEGBNIsb2NP5JypF7sQ?e=tYMilx) attachment * [Jessica Garber, Marketing Director](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EWID5hcMQ-BJrR6mzxpnZAkB_ySSoRHBLhRTir_Xh-1bPQ?e=EiseCw) attachment * [Abby House, Training Coordinator](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/Ed_2p25ymqxJvwU6jyMA3yIBfpExCqgOUNmIpOzKkgWnFw?e=BhIJbc) attachment * [Lindsey Walters, Technology Coordinator](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/EUkTnLMazGhJhGzQmVa1-ewBf-L-_RRu6dgfdhh9xgiOMw?e=06pkXX) attachment * Molly Russell, Crisis Intervention Coordinator attachment   Case Management Operations Director Achievement & Development Trajectory    Quality Assurance Director Achievement & Development Trajectory    Marketing Director Achievement & Development Trajectory    B. Being a supervisor is more than just managing people at Connections. Connections promotes and fosters the development of employees from every role within the company.   * Qualities that are sought in a supervisor:   + hard worker   + team player   + someone who shows competency in quality and timeliness   + responsive   + positive community relationships   + promotes the vision of Connections   + willingly assist and go above and beyond when needed   + mentor other CMs * Once a supervisor is promoted, Connections has implemented a new Supervisor Orientation. This is an ongoing and ever-changing program to grow and develop supervisors. The initial training includes a 2-day intensive education. There are monthly Supervisor Workdays that offers ongoing training to our team to better enhance their skills and increase their knowledge, inside and outside of waiver. The Management Team meets weekly to discuss upcoming changes, address issues of concern, build strong rapport amongst the team, and provide educational activities to better develop skills for themselves and their CMs. Connections supports supervisors in gaining knowledge, leadership, and mentoring skills with information that they can refer back to as needed. CMOD provides daily support to supervisors via phone, email, text, virtual, and in person. Connections has an open door for employees to seek knowledge in a collective group, that may involve the Training Coordinator, the Crisis Intervention Coordinator, and/or the Training Coordinator.   C. Meet our current supervisory team:   * **Rick Harden** brings a wealth of knowledge to the Connections supervisor team after working many years at Hamilton Center and with ResCare on the provider side of Supported Living and Supervised Group Living. He has extensive experience in transitions, especially individuals who are moving out of an institutional setting. His years as a director at ResCare gave him the foundation to lead others. * **Larinna Smith** joined our management team a year ago, bringing with her many years in leadership. She not only has worked in Supported Living as a Direct Support Professional at Companion Care and Dungarvin, but also with the Midtown STARS program as a Care Coordinator with individuals who were dual diagnosed. Her dedication to her work shines through the support that she provides to the case managers on her team. * After **Kelie Killu** worked at Hamilton Center, she started her career from the most influential role in an individual’s life by being a Direct Support Professional. After being promoted quickly through the ranks at TLC and Residential Services Inc, she found her home with case management 14 years ago. Kelie’s experiences, community connections, and leadership are quite valued by the case managers that she supports and the Connections management team. * **Amy Glaub** has been a part of the supervisor team for approximately 2 years. She brings extensive years of case management experience to Connections by previously working at New Horizons & Wee Care Service Coordination and with LifeTime Resources. Amy started working in the field in 1992 and has devoted her life to individuals with disabilities, from working in First Steps to being Director of Adult Guardianship Program with LifeTime Resources. * **Amanda Sparks** has been with Connections for 5 years, 2½ of which have been as a supervisor. She came to Connections with a personal tie to our service industry as her brother receives waiver services. She’s a fierce advocate and shares this advocacy with the case managers that she supports. She has experience working in home healthcare and prides herself on working through tough situations with others. * **Ed Herkless** brings years of experience to the supervisor team. He has been in waiver 16+ years, but has held many roles throughout his career, which brings years of knowledge to the supervisor team. Ed has been a supervisor with Connections for almost 3 years but has held other roles within Connections as well. He is a loyal and dependable leader. * **Rhe Bremer** came to Connections over 4 years ago from Outside the Box, a day service program. She leads her team with compassion and is always the encourager to all within Connections. She obtained her Master’s Degree a year ago and is a true asset to Connections with her experience and knowledge.   D.   * Full time Compliance Officer is Becky Johnson, resume and qualifications are linked in Approach to Compliance and Correction G. She is a full-time, W2 employee and has been working in Waiver Case Management since 2009. * Please reference qualifications and resumes of Executive Leadership team. Please note that certification exam does not produce a certificate, however, please see dates of certifications below as approved by BDDS.   + Michele Lohmeyer, State CM certified per Beckie Minglin on 3/20/19, no date from Advocare system   + Laura Fife, State CM certification 12/27/2013   + Becky Johnson, State CM certification 01/07/2013   + Heather Groves, State CM certification 02/16/2016   + Amy Noblitt, State CM certification 04/22/2015   + Jessica Garber, State CM certification 09/28/2018   + Molly Russell, State CM certification 09/28/2018   + Abby House, State CM certification 12/05/2018   + Lindsey Walters, State CM certification 01/12/2020 * Registered Nurse is Courtney Charboneau, resume and State of Indiana license is linked. She is a 1099 on-call employee.   + [Courtney Charboneau, RN Resume](https://netorg164942-my.sharepoint.com/:w:/g/personal/lfife_connections-in_com/ESQgvQQT1vdPvPcIpmg3W-wBjLklEz8TFUz9k3vCY2QTyQ?e=0UoCio) attachment   + [Courtney Charboneau RN License](https://netorg164942-my.sharepoint.com/:b:/g/personal/lfife_connections-in_com/Ec7zVrtZxoZEvvpEYvF-86ABDeyboJ_VKw0lE7B9ZJWzIA?e=qg6vDj) attachment |

*Section 6.2 – Reporting*

1. *Describe how you will meet the reporting requirements outlined in Section 6.2 of the SOW.*
2. *Please detail any additional reports to the ones mentioned in Section 6.2 of the SOW that you propose to provide as part of this Contract.*
3. *Describe how you will report up the information that Case Managers are expected to track in accordance with Section 5.2.2.2 of the SOW.*
4. *Describe your process for ad hoc report requests.*
5. *Provide any relevant example reports.*

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| Connections will provide quarterly status updates in the form requested or required in collaboration with BDDS/BQIS. We will include a data summary of all available data reports within the state system. We will be prepared to combine the current monthly quality monitoring reports into quarterly summaries and annual trend data per request. Connections will further provide any requested reports, one-time or ongoing at the request of the State within the expected timeframe.  Connections will report the status and historical trends of all Case Management Administrative duties as outlined in the Waiver Service definition utilizing the existing reporting mechanism and any developed resources and or requested reporting system after contract is awarded.   * Connections looks forward to partnering with BDDS/BQIS in utilization of the new BDDS Portal 2.0 and perfecting our process for data trend tracking and monitoring. * Connections currently monitors and assesses the following reports, functions, and processes. Connections will supply examples or actual reports upon request. * Facility transition tracking * Caseload balancing tracking * IR trend and compliance tracking * DEW report * CCB/Service plan alignments * Individual audit report * Training tracker * CRR Tracking * Random Quality Monitoring Review on Monthly 1:1 * Monthly QA: LOCSIs, CCBs, PCISPs, Unannounced, Monitoring Checklists, Meeting Date/Time/Location * Technology tracker- hardware and software * Recruiting/Staffing tracker * HR compliance tracker * Corrective Action Plans Matrix * Client Satisfaction Survey Matrix * Continuous Improvement Plan * Approved External Vendors Matrix * Risk Mitigation Matrix * Case Notes Tracking * [Example Supervisor Reports June](https://netorg164942-my.sharepoint.com/:x:/g/personal/lfife_connections-in_com/EXFzhl7J_ENLh4GmqnO8zWUB6VWf9OhsyMleci-EDTa_Jg?e=RZ7BcY) attachment |

*Section 6.3 – Meeting Requirements*

1. *Describe your commitment and ability to attend and actively participate in coordination, planning and collaborative administrative meetings with State staff. Describe any other proposed meetings, their purpose, and desired attendees for State consideration. Please describe your preferred approach to coordination with BDDS leadership, providers, individuals and families, and other stakeholders in these collaboration meetings, and other proposed meetings.*

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| Connections Case Management, LLC is committed to collaboration and partnership at all levels. Connections regularly attends meetings with State staff and CMCO collaboration and have not missed a requested meeting to date. Connections would like to have, at minimum, quarterly meetings with selected contractors and DDRS and BDDS staff to review updates and provide feedback. Connections would like to participate in councils and advisory boards on a rotational basis instead of enlisting a single CM entity. Coordination should be across multiple platforms and with all interested parties. |

*Section 6.4 – Corrective Action & Sanctions*

1. *Describe your process for preparing Corrective Action Plans (CAPs) and how you will ensure they are timely.*

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| Connections Case Management, LLC maintains a QMS matrix tracking system for all corrective action plans, internally and externally implemented. This matrix system utilizes a process to identify root cause, implement corrective procedures, check or verify successfulness, and update policy and/or policy implementation as a result. Continual improvement plans are frequently generated as a result of corrective actions.   * Progress and due dates are a component of the tracking system, monitored at each management review and annual survey. |

*Section 6.5 – Ethical Service Delivery & Billing*

1. *Describe your commitment to providing ethical service delivery and how you plan to ensure ethical billing practices.*

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| Connections provides essential supports for individuals that receive DDRS waiver supports. Various flowcharts and procedural information in this submission has been shared to illustrate the checks and balances implemented agency-wide to ensure quality and truth in reporting. We are committed to continued implementation of these safeguards as we grow and evolve.   * Connections only shall bill for services rendered. * If disputable, Connections delineates with other CMCOs at time of transition of the file to communicate which party shall bill for the current month’s CMGT unit. |

*Section 6.6 – Transition of Case Managers*

1. *Describe your commitment and ability to transition Case Managers at Contract start, if necessary.*
2. *Describe your commitment and ability to ensure smooth outgoing transition of activities and responsibilities to succeeding contractors (at the end of the Contract term), if this becomes necessary.*
   1. *Describe how you will ensure all Individual cases are current.*
   2. *In particular, describe how you plan to ensure a smooth transition of case management services (either at the end of the Contract term or if an Individual opts to change their Case Manager) for the Individuals you serve* 
      1. *Describe your approach to cases where there exists a strong relationship between Case Manager and the Individual.*

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| * Connections provides an essential waiver support service to individuals that have chosen us. We have access to the individual and their file through the State of Indiana. We have no proprietary rights to the person or their records. * Connections employs many talented and accomplished case management professionals. Employment is at will and we respectfully request 3-weeks notice should any CM wish to terminate employment. * Should Connections be chosen as a succeeding contractor, we recognize that preparation for rapid growth and hiring will be paramount to continuing case management supports for individuals that are displaced by the implementation of 1915(b)(4) waiver structure implementation.   + We pledge to recruit and interview with the same integrity and in the manner of which we have always done so for areas in need of case management personnel.   + We will ensure that incoming individuals that choose Case Management as their CMCO are onboarded timely and matched with a CM to assist them. Connections CM is the main contact for our individuals; however, they also have the support of our entire agency based on our deliberate and thoughtful structure. * Should Connections NOT be chosen as a succeeding contractor, we recognize that our individuals that we serve will be provided choice in remaining CMCO agencies. We will comply with any guidance put forth by the state of Indiana to ensure a smooth transition.   + We recognize that many of our case managers may pursue employment with another agency. We pledge to provide informed choice to their individuals and shall divulge where that CM will be employed should we have that information. We will provide reference information and verification of employment to future CMCO employers if requested.   + We will transition individuals to the CMCO they have chosen in a timely manner. We will share file information with the incoming CMCO in their preferred format (i.e., transition call, email of file information).   + Remaining personnel and management will provide CMGT supports in the interim during this transition period. Our owners and management are committed to ensure a smooth transition and eventual closure should that be the remedy in the implementation of 1915(b)(4) waiver structure implementation.   + We purposefully do not have a non compete component in hiring current documentation and find it counterproductive to the waiver choice process and person-centered case management service delivery. |

SECTION 8. – Service Levels and Non-Financial Incentives

*Please explain how you propose to execute Section 8 in its entirety, including but not limited to the specific elements highlighted below, and describe all relevant experience.*

*Section 8 – Non-Financial Incentive Structure*

1. *Affirm your commitment to and understanding of the Non-Financial Incentive Structure stated in Section 8.*

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| Connections employs case management professionals in a variety of roles and capacities. All employees are compensated with a salary commensurate with their experience and responsibilities. Should an individual be eliminated from a CM’s caseload due to their right to exercise choice, entry to facility placement, or death, the CM’s income remains unchanged. Inability to bill Medicaid for CMGT supports also does not impede payment to the case manager. |