

**RFP 25-79309
BUSINESS PROPOSAL
ATTACHMENT E**

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

Business Proposal

2.3.1 General (optional) - 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 RFP.

Founded in 1985, Health Management Associates, Inc. (HMA) is a leading independent, national research and consulting firm that provides technical assistance and training, facilitation and strategic planning, research and evaluation, policy development and recommendations, technical report writing, and analytical services with a focus on improving the administration and delivery of public health, healthcare, and social services programs. HMA's team includes approximately 800 consulting colleagues and more than 950 total employees across all HMA companies, who have provided services in all 50 states, the District of Columbia, and several US territories. Our offices are headquartered in Michigan, and we maintain offices in more than 20 states and Washington, DC.

What Distinguishes HMA

HMA has distinguished itself from other consulting companies by our decades-long tradition of hiring senior-level experts, such as former state and local public health leaders, directors of community-based organizations, and former senior officers from key federal agencies. We understand the complexity of designing and implementing change at more than just a theoretical level—we have walked in the shoes of our clients and understand how to provide insight that is meaningful, actionable, and realistic.

HMA team members are committed to the organizational focus on supporting local and state governments, nonprofits, and other agencies providing services through publicly funded programs. Moreover, we recognize the critical importance of cross-disciplinary, cross-sectoral collaboration and cooperation to address the complex issues and policies needed to optimize outcomes for individuals and populations affected by conditions arising from multiple influences, such as opioids and other substances.

2.3.2 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

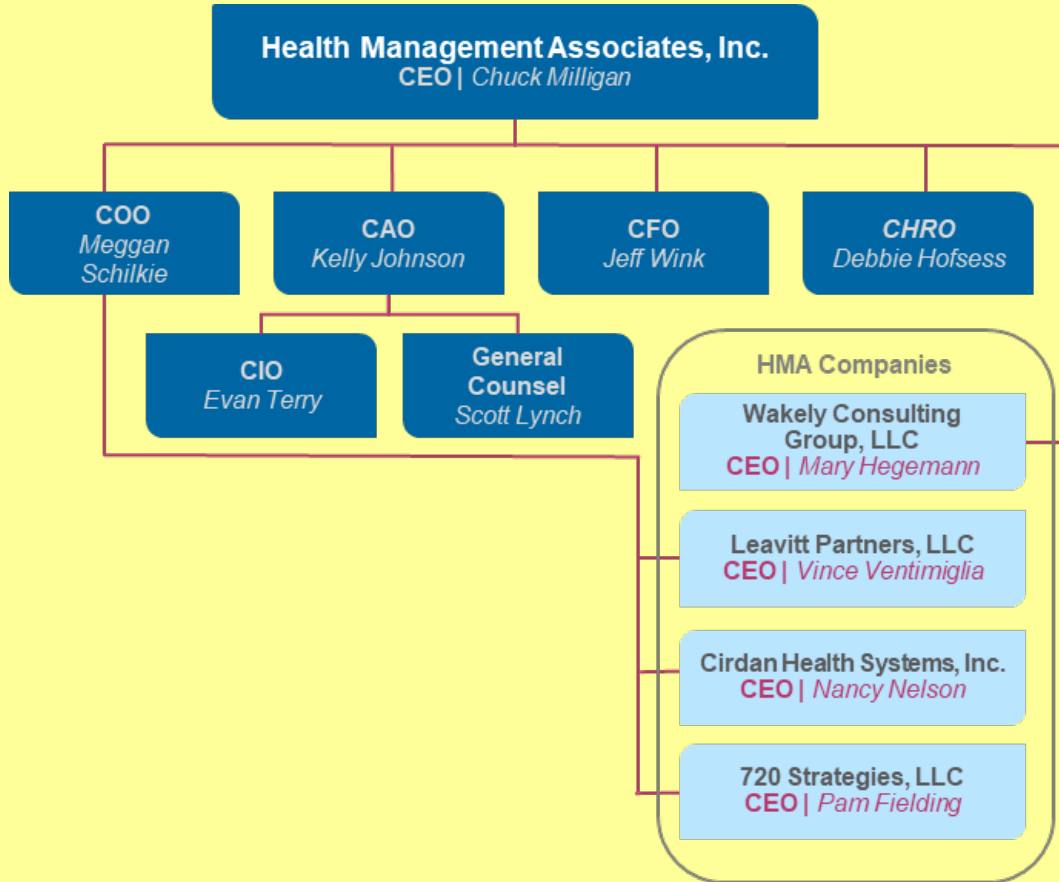
organization. Please enter your response below and indicate if any attachments are included.

HMA is a Michigan corporation that provides healthcare consulting services to both public and private entities nationwide. While HMA has several wholly owned subsidiaries, this work will be performed by HMA.

HMA's certificate of authority is included as part of this proposal under the following file name: Certificate of Authority_IN FSSA_HMA.pdf.

HMA's organizational chart is provided in exhibit 1 below.

EXHIBIT 1. ORGANIZATIONAL CHART



2.3.3 Respondent's Diversity, Equity and Inclusion Information - With the Cabinet appointment of a Chief Equity, Inclusion and Opportunity Officer, on February 1, 2021, the State of Indiana sought to highlight the importance of this issue to the state. Please share leadership plans or efforts to measure and prioritize diversity, equity, and inclusion. Also, what is the demographic composition of Respondents' Executive Staff and Board Members, if applicable.

HMA is committed to fostering, cultivating, and preserving a culture of diversity, equity, and inclusion (DEI).

Our colleagues are the firm's most valuable assets. The collective sum of the individual differences, life experiences, knowledge, inventiveness, innovation, self-

expression, unique capabilities, and talents that our colleagues invest in their work, and in HMA as a company, represents a significant part of not only our culture but also our reputation and achievements.

At HMA, we embrace and encourage our colleagues' differences in race, color, ethnicity, national origin, sexual orientation, gender identity or expression, age, disability, veteran status, religion, political affiliation, socioeconomic status, and other characteristics that make our colleagues unique.

We recognize and appreciate the importance of creating an environment in which all colleagues are valued, respected, and included, knowing this will enable them to do their best work for our clients, the populations our clients serve, and the firm.

HMA's commitment to DEI transcends traditional boundaries, weaving a rich tapestry of initiatives, partnerships, and educational programs that reflect our unwavering dedication to fostering a truly inclusive and diverse workplace. Each action we take is a step toward creating an environment where every individual feels valued, empowered, and respected.

At the heart of our DEI efforts is the DEI Advisory Council, a colleague-led group bolstered by CEO sponsorship. This council spearheads our initiatives, ensuring that our strategies are both impactful and resonant across all levels of our organization. The council epitomizes our belief in the power of collective action and leadership support to enact meaningful change.

Our firm has made measurable strides in enhancing racial diversity through hiring practices and promotional opportunities within the firm. HMA's colleagues are predominantly female, and we have an active LGBTQIA+ community. We continue to find ways to increase our disability and veteran staff populations as opportunities arise. These achievements underscore our dedication to cultivating a workplace that mirrors the rich diversity of the world around us, promoting equal opportunities for all.

Understanding the importance of collaboration, we have formed alliances with leading external diversity organizations, such as the National Association of Latin Healthcare Executives, the National Association of Healthcare Service Executives, and Health Career Connections. These partnerships extend our impact, enriching our DEI initiatives with invaluable insights and resources.

Our bimonthly table topic sessions and DEI in Action newsletters serve as platforms for education and celebration. Through these initiatives, we delve into crucial DEI topics and share the diverse experiences of our colleagues, fostering a culture of continuous learning and mutual appreciation. DEI topics include implicit bias, microaggressions, multigenerational workforces, disabilities in the workplace, code switching, and inclusion in the workplace.

Our comprehensive internal DEI website acts as a central repository of resources on DEI topics, cultural spotlights, and equity-related client work, empowering our colleagues to engage deeply with our DEI efforts. We also utilize an annual DEI survey to track our progress, assess the effectiveness of our initiatives, and adapt our strategies to meet evolving needs and objectives.

A key component of our comprehensive DEI strategy is our DEI initiative for consulting interns, conducted each summer in conjunction with our external DEI partners. This program is designed to immerse interns in a culture of healthcare consulting from the outset, providing them with hands-on experience in creating

inclusive solutions and understanding diverse perspectives. By integrating these principles into our internship program, we not only enhance the interns' learning experience but also contribute to the development of future leaders who are well-versed in the importance of diversity and inclusion in healthcare.

Our journey toward a more equitable, diverse, and inclusive workplace is ongoing, driven by the belief that there is always more we can do to foster an environment where everyone truly belongs. Through a combination of targeted initiatives and strategic partnerships and a commitment to continuous learning and improvement, we are dedicated to making a lasting impact on our firm and the broader community. In conclusion, our firm's DEI efforts represent a holistic approach to creating a workplace where diversity is celebrated, equity is pursued, and inclusion is the norm. From our colleague-led, CEO-sponsored DEI Advisory Council to our table topic initiatives and beyond, we are committed to advancing these values today and in the years to come.

The composition of HMA's executive staff is as follows:

- Gender
 - Male – 50 percent
 - Female – 50 percent
- Race
 - White – 90 percent
 - Black or African American – 5 percent
 - Hispanic or Latino – 5 percent
- Age
 - Under 55 years – 5 percent
 - 55 years and older – 50 percent

Currently, we do not share specific data on the percentage of individuals who identify as neurodiverse, LGBTQIA+, and/or gender nonbinary. There are various HMA leadership and consulting staff who openly identify as members of these groups. In HMA's own DEI journey, we are working toward improving our internal data collection and sharing measures with the overall goal of continuing to improve our diversity.

2.3.4 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 RFP. 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 RFP.**

HMA's most recent Dun & Bradstreet Business Report is included as part of this proposal under the following file name: DUNS Report_IN FSSA_HMA.pdf.

2.3.5 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 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).

A statement on the integrity of our company structure and financial reporting has been included as part of this proposal under the following file name: Integrity of Company Structure_IN FSSA_HMA.pdf.

2.3.6 Contract Terms/Clauses - Please provide the requested information in RFP Section 2.3.6.

HMA does not have any suggestions for alternative contract language.

2.3.7 References - Reference information is captured on **Attachment H** Respondent should complete the reference information portion of the **Attachment H** which includes the name, address, and telephone number of the client facility and the name, title, and phone/fax numbers of a person who may be contacted for further information if the State elects to do so. The rest of **Attachment H** should be completed by the reference and **emailed DIRECTLY** to the State. The State should receive three (3) **Attachment Hs** from clients for whom the Respondent has provided products and/or services that are the same or similar to those products and/or services requested in this RFP. **Attachment H** should be submitted to idoareferences@idoa.in.gov. **Attachment H** should be submitted no more than ten (10) business days after the proposal submission due date listed in Section 1.24 of the RFP. Please provide the customer information for each reference.

Customer 1	
Legal Name of Company or Governmental Entity	Indiana Department of Child Services
Contact Person	Aaron Atwell
Contact Title	Chief of Staff
Company Mailing Address	302 W. Washington Street, Room E306
Company City, State, Zip	Indianapolis, IN 46204
Company Website Address	https://www.in.gov/dcs/
Company Telephone Number	317-234-6910
Company Fax Number	N/A

Contact E-mail	aaron.atwell@dcs.in.gov
Industry of Company	State Agency
Customer 2	
Legal Name of Company or Governmental Entity	First Five Orange County
Contact Person	Kim Goll
Contact Title	President/Chief Executive Officer
Company Mailing Address	1505 E 17th St Ste 230
Company City, State, Zip	Santa Ana, CA 92705
Company Website Address	https://first5oc.org/
Company Telephone Number	317-234-6910
Company Fax Number	N/A
Contact E-mail	kim.goll@cfcoc.ocgov.com
Industry of Company	Child Advocacy Public Entity
Customer 3	
Legal Name of Company or Governmental Entity	Zero to Three
Contact Person	Christina Nigrelli
Contact Title	Senior Director of Programs
Company Mailing Address	2445 M St NW Suite 600
Company City, State, Zip	Washington, DC 20037
Company Website Address	https://www.healthysteps.org/
Company Telephone Number	Email preferred
Company Fax Number	N/A
Contact E-mail	cnigrelli@zerotothree.org
Industry of Company	Pediatric Primary Care Program

2.3.8 Registration to do Business – Per RFP 2.3.8, Respondents providing the products and/or services required by this RFP must be registered to do business by the Indiana Secretary of State. The Secretary of State contact information may be found in Section 1.18 of the RFP. 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.

HMA is in good standing with the Office of the Indiana Secretary of State. Our business ID is 2000020900370.

2.3.9 Authorizing Document - Respondent personnel signing the Executive Summary 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.

Kelly Johnson, chief administrative officer, is authorized to sign HMA's executive summary. A copy of a corporate resolution showing her authority is included in this bid packet under the following file name: Signature Authorization Document_IN FSSA_HMA.pdf.

2.3.10 Diversity Subcontractor Agreements

- a. Per RFP Section 1.21, Minority & Women's Business Enterprises (MBE/WBE), and 1.22 Indiana Veteran Owned Small Business Subcontractor (IVOSB), explain process followed to engage with potential MBE, WBE and IVOSB owned, Indiana certified businesses listed on Division of Supplier Diversity site. List the businesses invited to discuss the opportunity for potential partnership.
- b. If not proposing each MBE, WBE or IVOSB subcontractor partnership, explain the rationale for declining to do so. Complete this for each category not proposed.

We have entered into a partnership with a minority business enterprise (MBE), VECRA, Inc. (VECRA), which will provide support for compliance and provider agency monitoring. We have also entered into a partnership with an Indiana veteran-owned small business enterprise, Allied Business Solutions, LLC, which will provide project management and report-writing support. We did not pursue a partnership with a women's business enterprise since VECRA is already a women's business enterprise and a MBE. We were unable to identify a separate women's business enterprise for the purposes of this proposal.

2.3.11 Evidence of Financial Responsibility – Removed at the request of the agency.

This section will indicate the ability to provide the mandatory evidence of financial responsibility. See Section 1.25 of RFP for details.

Removed at the request of the agency.

2.3.12 General Information - Each Respondent must enter your company's general information including contact information.

Business Information	
Legal Name of Company	Health Management Associates, Inc.
Contact Name	Ann Filiault
Contact Title	Proposals Director
Contact E-mail Address	proposals@healthmanagement.com
Company Mailing Address	2501 Woodlake Circle, Suite 100
Company City, State, Zip	Okemos, MI 48864
Company Telephone Number	517-482-9236
Company Fax Number	517-482-0920

Company Website Address	https://www.healthmanagement.com/
Federal Tax Identification Number (FTIN)	38-2599727
Number of Employees (company)	974
Years of Experience	39
Number of U.S. Offices	40
Year Indiana Office Established (if applicable)	2018
Parent Company (if applicable)	HMA Holding Corporation
Revenues (\$MM, previous year)	\$311 million
Revenues (\$MM, 2 years prior)	\$249 million
% Of Revenue from Indiana customers	4%

- a. 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.

HMA has a formal disaster recovery plan. HMA's business continuity and disaster recovery process focuses on mitigating potential short-term and long-term outages or service disruptions. Our business continuity and disaster recovery manual outlines how HMA approaches business continuity planning, enabling us to recover and resume operations when unexpected disruptions occur. We have robust processes in place to minimize service interruptions, ensuring trust and confidence in HMA systems and business processes. Additionally, business continuity considerations are integrated into our overall business model to mitigate the risk of service disruptions. More information on our business continuity and disaster recovery process is included under the following file name: Security Statement_IN FSSA_HMA.pdf.

- b. What is your company's technology and process for securing any State information that is maintained within your company?

All HMA electronic data related to our projects are stored within folders that are accessible and visible to project team members only. All staff are granted access to sensitive data on a least-privilege principle. When necessary, sensitive electronic data and correspondence can be encrypted to provide greater security when transmitting. To aid in secure communications, HMA also utilizes security appliances to automatically encrypt sensitive data. All project-related data are backed up nightly. Additionally, all HMA employees working with protected health information have self-encrypting hard drives compliant with federal information-processing standards and can send or receive emails using advanced encryption standard 256-bit encryption. The information technology staff work closely with project managers to ensure strict compliance to our need-to-know policy when accessing confidential information. All relevant protected health information is deleted upon the completion of a project or per the terms of the business associate agreement. More information about our information technology processes is included under the following file name: Security Statement_IN FSSA_HMA.pdf.

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

HMA's experience with and service to the Indiana Family and Social Services Administration (FSSA) is extensive and goes as far back as 2010 through work from our partners Medicaid Market Solutions (a subsidiary of HMA formerly known as SVC, Inc.) and Burns & Associates, an HMA company. In partnership with Burns & Associates, HMA has served the State of Indiana as the evaluator of the Indiana FSSA's substance use disorder waiver. This work between HMA and FSSA initially began February 1, 2018, and extended through December 31, 2020. On January 1, 2021, the waiver was renewed for a five-year period that continues through December 31, 2025. It has been during this second contract period that HMA has delivered an approved substance use disorder waiver evaluation, an approved midpoint assessment report, and an approved interim evaluation report to the Centers for Medicare & Medicaid Services (CMS). HMA continues to provide technical assistance in delivering measures required by CMS quarterly to monitor Indiana's state substance use disorder implementation plan.

HMA, through our partners, has also conducted an annual review of Indiana's four managed care entities (MCEs) under contract with the Hoosier Healthwise, Healthy Indiana Plan, and Hoosier Care Connect programs. Every three years, we have completed a full review of each MCE functional area, including on-site interviews at each MCE and desk reviews of policies and procedures. Over the years, we have also conducted more than 30 focus studies, including a range of tasks such as desk reviews, reviews analyzing and interpreting medical claims data, reviews of case management records and practitioner credentialing, and/or physician office site reviews.

Examples of focus studies include the following:

- Review of the delivery of prenatal care (2016, 2019)
- Review of the delivery of well care and primary care visits (2016, 2019)
- Review of the prevalence of lead testing among Medicaid children (2017, 2018, 2020)
- Focus study on medication adherence (2017)
- Review of the initiation and engagement of alcohol and other drug treatment (2016)
- Review of mental health services utilization and care coordination (2012, 2013)
- Review of utilization of non-emergency medical transportation (2014, 2020)
- Analysis of the rate of potentially preventable hospital readmissions (2015, 2017, 2019)
- Analysis of the rate of potentially preventable emergency department visits (2015, 2019)
- Policies and procedures related to service authorization requests (2009, 2015)
- Review of disease, case, and care management practices and reporting (2010, 2017)
- Review of access and availability of providers (2010, 2016, 2018, 2019, 2020)
- Review of emergency room utilization and payment practices (2011)

- Audit of MCE provider directories (2016, 2019)
- Review of the utilization of and access to dental services (2016)
- Focus study on MCE claims adjudication and encounter submissions (2017, 2018, 2020)

2.3.14 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.

Listed below are examples of other engagements with states where HMA has delivered technical assistance and evaluation.

1. Assessment of the Impact of Proposition 206, the Fair Wages and Healthy Families Act, on Provider Network Adequacy for Arizona Health Care Cost Containment System Members

HMA conducted a baseline assessment of access to home and community-based services at the county level to predict potential employee retention trends due to changes in the minimum wage. The state of Arizona passed legislation that increased the minimum wage from \$10 per hour to \$12 per hour effective January 2017. The need for the study was influenced by home and community-based services providers' concerns that rates to deliver services to waiver-eligible individuals may be impacted by the change. A report was delivered to the Arizona Health Care Cost Containment System and the Arizona legislature on February 1, 2018.

2. Technical Assistance and Administrative Support for the Indiana FSSA's Direct Service Workforce Plan

HMA provides technical assistance and administrative support to Indiana's chief advocacy officer, who leads the development and implementation of Indiana's Direct Service Workforce Plan. The statewide plan focuses on the recruitment, training, retention, and support of unlicensed individuals who provide long-term services and supports in home and community-based settings. Current workstreams include providing technical assistance to the state's Direct Service Workforce Advisory Board and preparing briefing documents for the forthcoming public awareness campaign.

3. Independent Assessment of the Indiana Non-Emergency Medical Transportation Benefit in the Medicaid Fee-for-Service Program

The Office of Management and Budget hired HMA to assess the delivery of non-emergency medical transportation and the operations of the office's broker, Southeastrans. The project was conducted quickly from September to December 2019. In that time, HMA conducted on-site reviews at the local and national Southeastrans offices. Specific sectors reviewed processes implemented to track member trip requests, member and provider complaints, vehicle and driver compliance, trip dispatching procedures, transportation provider network management, provider compliance, claims processing, the prior authorization process, program integrity, and fiscal management. HMA delivered a report to the Indiana legislative commission on December 9, 2019.

4. Independent Study of Rates Paid for Services Delivered by the Division within the Delaware Department of Health and Social Services

HMA was solicited by the Department of Health and Social Services to conduct a comprehensive evaluation of rate methodologies paid for all services under the Department of Health and Social Services' scope. The department is responsible for 11 divisions, including Medicaid; mental health and substance use; aging and physical disabilities; intellectual and developmental disabilities; health; and additional, state-only services. The final report delivered a summary of each methodology utilized, existing rate increases, value-add opportunities, and recommendations to improve rate-setting outcomes across divisions. Upon finalization of the initial report, the HMA team was asked to continue efforts by developing a road map targeted toward uniform rate-setting techniques, monitoring, and stakeholder transparency. HMA delivered a report to the legislature on April 30, 2020.

5. Independent Assessment of Indiana's 1915(b) Waiver for Hoosier Care Connect

HMA was hired to conduct an independent assessment for renewal of the state's 1915(b) waiver. The independent assessment was accepted by CMS without question, and renewal was granted. In calendar year 2018, a state-requested amended waiver and individual assessment were completed by HMA and submitted to CMS. Both the initial and additional assessments addressed a review of access, quality, cost, monitoring, and additional recommendations for overall improvement of processes.

6. Independent Evaluation of the Indiana Children's Health Insurance Program

Upon authorization of the state-only portion of the Indiana Children's Health Insurance Program, an annual evaluation of the program is required by the legislature. HMA has conducted this evaluation annually from 2001 to 2020. With annual program expenditures exceeding \$274 million, yearly reviews examine both the Medicaid expansion and state-only portions of the program. The focus of the report is on access, quality, cost, and National Committee for Quality Assurance measures.

7. Independent Study of Provider Claims Submitted to Medicaid Managed Care Organizations in the Healthy Louisiana Program

The initial findings of HMA's independent study on provider claims in the Healthy Louisiana Program were delivered to the Louisiana legislature on October 31, 2018, with quarterly updates each quarter thereafter. HMA provided data relevant to turnaround time of claims adjudication from managed care organizations. After the initial report submission, Excel-based monitoring tools were implemented to provide validated quarterly updates for reporting.

8. Independent Report on the Healthy New York Program

The Healthy New York program served as New York's solution to expand insurance to low-income, uninsured workers who were not eligible for Medicaid. HMA delivered independent reports to the New York legislature

in December 2009 and December 2010. The independent reports focused on enrollment trends at the county and regional levels, cost of premiums, and medical loss ratios incurred by participating health plans. Annual survey results were also released to member health plans and employers who participated in Healthy New York.

9. Final Report to the Minnesota Legislature: Compilation of Findings on Provider Rate Evaluations and Availability of Services in the Medicaid Fee-for-Service Program

HMA conducted a series of reports to assess the adequacy and equity of Medicaid fee-for-service rates. The studies included the following: (1) a comparison of Medicaid's fee-for-service physician rates to those paid by Medicare and other Medicaid agencies, (2) an analysis of the equity of the payment rates paid to physicians and nonphysicians in the fee-for-service program, (3) an examination of access to physician services enrollees in Minnesota Medicaid fee-for-service, and (4) the results of surveys to Medicaid beneficiaries (access) and participating physicians (rates).

2.3.15 Indiana Preferences - Pursuant to IC 5-22-15-7, Respondent may claim only one (1) preference. For the purposes of this RFP, this limitation to claiming one (1) preference applies to Respondent's ability to claim eligibility for Buy Indiana points. **Respondent must clearly indicate which preference(s) they intend to claim. Additionally, the Respondent's Buy Indiana status must be finalized when the RFP response is submitted to the State.**

Approval will be system generated and sent to the point of contact email address provided within the Bidder Registration profile. This is to be attached as a screenshot (copied/pasted) for response evaluation.

Buy Indiana

Refer to Section 2.7 for additional information.

HMA does not qualify for this initiative.

2.3.16 Payment - Please provide the requested information in RFP Section 2.3.15.

HMA agrees to accept payment by credit card, though automated clearing house payments are preferred.

2.3.17 Extending Pricing to Other Governmental Bodies – Indicate your willingness to extend prices of awarded products and/or services to other governmental bodies per RFP section 2.3.17.

HMA agrees to extend the prices of awarded products and/or services to other governmental bodies.