

ACUTE CARE/CRS RFP CONSENSUS RANKING
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

SUBMISSION REQUIREMENT NO. 6	
Ranking No.	Offeror
1	Southwest Catholic Health Network dba Mercy Care Plan
2	UnitedHealthcare Community Plan
3	Care 1 st Health Plan Arizona
3	Health Net of Arizona
5	Maricopa Health Plan managed by University of Arizona
5	University of Arizona Health Plans, University Family Care
7	Health Choice Arizona
8	Bridgeway Health Solutions of Arizona, LLC
9	Phoenix Health Plan
10	Medisum Community Care Inc. dba BlueCross BlueShield of Arizona Community Care

Total Number of Bidders:
10

Totaled By Team Lead:	Signature	Date
Katrina Cope		2/20/13

Verified By Facilitator:	Signature	Date
Scott Wither		2/27/13


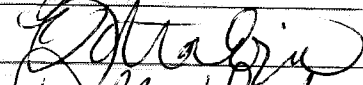
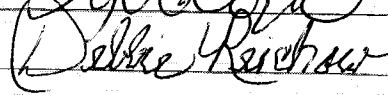
ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6


COMPONENT: PROGRAM

OFFEROR'S NAME: Southwest Catholic Health Network dba Mercy Care Plan

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	1

Rationale:
<p><u>Major Observations:</u></p> <p>Offeror has D-SNP experience.</p> <p>Offeror reports performance improvement resulting from coordination of Medicare and Medicaid benefits.</p> <p>Offeror provided a detailed description of innovative use of technology and analytics to support care coordination.</p> <p>Offeror described approaches to identify needs and coordinate care for aligned and non-aligned members.</p> <p>Offeror described a member-centered approach for care coordination.</p> <p>Offeror provided a detailed description of tailoring care coordination for program with special needs.</p> <p>Offeror described a comprehensive approach as well as specific strategies to attract and retain new members.</p>

Evaluation Team Member (Print Name)	Signature	Date
Immi Snyder		02/28/13
Katrina Cope		2/20/13
Debbie Reichow		3/1/13

Facilitator	Signature	Date
Scott Whitten		2/27/13

ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

OFFEROR'S NAME: UnitedHealthcare Community Plan

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	2

Rationale:

Major Observations:

Offeror has D-SNP experience.

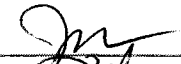
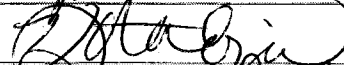

Offeror provided detailed description of approaches to coordinate care with providers.

Offeror provided a detailed description of innovative use of technology and analytics to support care coordination.

Offeror described innovative care coordination practices that demonstrate a member-centered, integrated approach.

Offeror described a comprehensive approach as well as specific strategies to attract and retain new members.

Offeror provided limited description of distinct approaches for coordinating care for aligned and non-aligned members.

Evaluation Team Member (Print Name)	Signature	Date
Terri Snyder		02/28/13
Katrina Cope		2/28/13
Debbie Reichow		3/1/13

Facilitator	Signature	Date
Scott Wether		2/27/13

ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

OFFEROR'S NAME: Care 1st Health Plan Arizona

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	3

Rationale:

Major Observations:

Offeror has D-SNP experience.



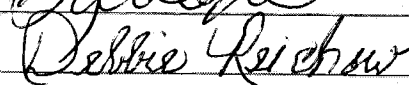
Offeror described approaches to identify needs and coordinate care for aligned and non-aligned members.

Offeror clearly described individualized and systemic approaches for maximizing care coordination.

Offeror described how it would leverage community resources to enhance care coordination.

Offeror described innovative approaches for attracting and retaining members, including offering supplemental benefits.

Offeror did not describe specific outreach activities for new members.

Evaluation Team Member (Print Name)	Signature	Date
Ismi Snyder		02/28/13
Kathna Cope		2/28/13
Debbie Reichow		3/1/13

Facilitator	Signature	Date
Scott Witter		2/27/13

ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

OFFEROR'S NAME: Health Net of Arizona

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	3

Rationale:

Major Observations:

Offeror has D-SNP experience in Arizona.



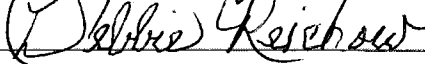
Offeror described approaches to identify needs and coordinate care for aligned and non-aligned members.


Offeror described a goal-oriented care planning process.

Offeror proposed the establishment of a medical home model that will be available for all members.

Offeror described a comprehensive approach as well as specific strategies to attract and retain new members.

Offeror provided a limited description of how technology would be used to support care coordination.

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/28/13
Katrina Cope		2/28/13
Debbie Reichow		3/1/13

Facilitator	Signature	Date
Scott Witten		2/27/13

ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

OFFEROR'S NAME: Maricopa Health Plan managed by University of Arizona

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	5

Rationales:

Major Observations:

Offeror has D-SNP experience.

Offeror provided a detailed description of innovative use of technology and analytics to support care coordination.




Offeror described detailed approaches to identify needs and coordinate care for members.

Offeror described innovative care coordination practices that demonstrate a member-centered, integrated approach.

Offeror described how it would leverage community resources to enhance care coordination.

Offeror provided limited description of distinct approaches for coordinating care for aligned and non-aligned members.

Offeror provided limited description of strategies to increase and maintain member alignment.

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/28/13
Katrina Cope		2/28/13
Debbie Reichow		3/1/13

Facilitator	Signature	Date
Scott Whitten		2/27/13

ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

OFFEROR'S NAME: University of Arizona Health Plans, University Family Care

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	5

Rationale:

Major Observations:

Offeror has D-SNP experience.

Offeror provided a detailed description of innovative use of technology and analytics to support care coordination.

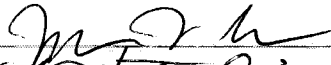
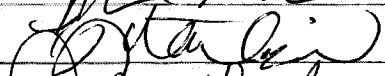
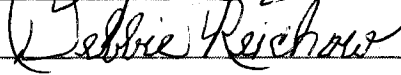
Offeror described detailed approaches to identify needs and coordinate care for members.

Offeror described innovative care coordination practices that demonstrate a member-centered, integrated approach.

Offeror described how it would leverage community resources to enhance care coordination.

Offeror provided limited description of distinct approaches for coordinating care for aligned and non-aligned members.

Offeror provided limited description of strategies to increase and maintain member alignment.

Evaluation Team Member (Print Name)	Signature	Date
Jani Snyder		02/28/13
Katrina Cope		2/20/13
Debbie Reichow		3/1/13

Facilitator	Signature	Date
Scott Wittner		2/27/13




ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

OFFEROR'S NAME: Health Choice Arizona

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	7

Rationale:
<p><u>Major Observations:</u></p> <p>Offeror has D-SNP experience.</p> <p>Offeror described a chronic care improvement plan for individuals with two or more chronic conditions.</p> <p>Offeror described a comprehensive approach as well as specific strategies to attract and retain new members.</p> <p>Offeror did not describe distinct approaches for coordinating care for aligned and non-aligned members.</p> <p>Offeror did not describe clear and comprehensive process for coordinating care.</p> <p>Offeror did not provide a detailed description of how care would be coordinated with providers.</p>

Evaluation Team Member (Print Name)	Signature	Date
Tami Snyder		02/28/13
Katrina Cope		2/28/13
Debbie Reichow		3/1/13

Facilitator	Signature	Date
		2/27/13

ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

OFFEROR'S NAME: Bridgeway Health Solutions of Arizona, LLC

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	8

Rationale:



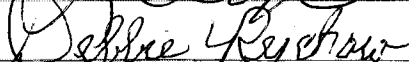
Major Observations:

Offeror has D-SNP experience.

Offeror described use of technology to maximize care coordination.

Offeror did not describe distinct approaches for coordinating care for aligned and non-aligned members.

Offeror provided limited description of strategies to increase and maintain member alignment.

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/28/13
Katrina Cope		2/28/13
Debbie Reichow		3/1/13

Facilitator	Signature	Date
Scott Witten		2/27/13

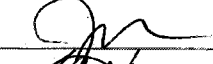
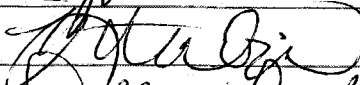
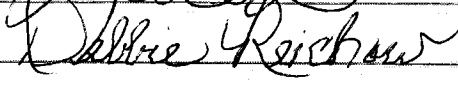
ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

OFFEROR'S NAME: Phoenix Health Plan

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	9

Rationale:
<p><u>Major Observations:</u></p> <p>Offeror has D-SNP experience.</p> <p>Offeror described use of technology and analytics to support care coordination.</p> <p>Offeror did not describe distinct approaches for coordinating care for aligned and non-aligned members.</p> <p>Offeror did not to describe detailed approaches for coordinating with providers.</p> <p>Offeror did not describe clear and comprehensive process for coordinating care.</p>

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/28/13
Katrina Cope		2/28/13
Debbie Reichow		3/1/13

Facilitator	Signature	Date
Scott Wetton		2/27/13


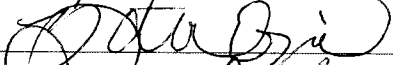

ACUTE CARE/CRS RFP CONSENSUS RATIONALE
SUBMISSION REQUIREMENT NO. 6

COMPONENT: PROGRAM

OFFEROR'S NAME: Medisun Community Care Inc. dba BlueCross BlueShield of Arizona Community Care

SUBMISSION REQUIREMENT No. 6	Total Ranking
Describe the Offeror's experience in Medicare Advantage and/or Medicare Special Needs Plans. Describe processes that will be utilized to enhance and maximize care coordination and improve member experience for members being served for both Medicare and Medicaid services by the Offeror and for members who will only be served for Medicaid by the Offeror. What strategies will be used to increase and maintain aligned Medicaid and Medicare enrollment	10

Rationale:
<p><u>Major Observations:</u></p> <p>Offeror reports Medicare Advantage experience in Arizona.</p> <p>Offeror described web-based system for member records, reporting and management.</p> <p>Offeror did not describe clear and comprehensive process for coordinating care.</p> <p>Offeror did not describe distinct approaches for coordinating care for aligned and non-aligned members.</p> <p>Offeror failed to describe detailed approaches for coordinating with providers.</p> <p>Offeror's approach for care coordination was not tailored to the Arizona model.</p> <p>Offeror provided very limited description of strategies to increase and maintain member alignment.</p>

Evaluation Team Member (Print Name)	Signature	Date
Jenni Snyder		02/28/13
Katrina Cope		2/28/13
Debbie Reschow		3/1/13

Facilitator	Signature	Date
Scott Witter		2/27/13