

COMPONENT: METHOD OF APPROACH - 01

OFFEROR'S NAME:

Crisis Response Network, Inc.

Proposals are evaluated based on the Offeror’s distinctive approach, method, and strategy for providing specialized services and requirements detailed in the Contract. The Offeror shall include Arizona experience, if applicable, in any response which requests the Offeror’s experience, as well as any other responses where experience is presented.

METHOD OF APPROACH - 01	TOTAL RANKING
Provide an overview and description of how the Offeror will implement the SMI Eligibility Determination process and clinical decertification process; include applicable workflows, charts, diagrams and written descriptions. [3 page limit for narrative portion, 5 page limit for workflows, charts, diagrams and written descriptions – Total of 8 page limit for this submission requirement]	1

RATIONALE:

Major Observations:

- The Offeror’s process/method for rendering SMI Eligibility Determinations and SMI Clinical Decertifications in Arizona is well described; processes and steps were thoroughly depicted in workflows/charts detailing Determination, Decertification, and appeals processes.
- The Offeror proposed a comprehensive plan to address SMI Clinical Decertification requests by incorporating the timeframes and processes used in SMI Eligibility Determinations to ensure a timely and appropriate decision is rendered. All SMI Clinical Decertification requests are staffed by the CMO.
- The Offeror provided a comprehensive description of the process for receiving assessments electronically (web portal) and manually and ensuring submission of all required Evaluation Packet elements. The Offeror detailed automated system checks and in-person review to ensure comprehensiveness/accuracy of submitted evaluation packets and emphasized the importance of effectively training providers and system stakeholders.
- The Offeror demonstrated a thorough understanding of the timeliness requirements for SMI Eligibility Determinations (3/20/90 days) and provided a detailed description of the SMI Eligibility Determination process for each timeline requirement.
- The Offeror’s communication plan includes extensive communication/outreach to members and providers to; obtain comprehensive records/supporting documentation and keep applicants apprised throughout the SMI Eligibility Determination process (e.g. unique submission codes for tracking purposes, assigned staff member with contact information, automated emails to referring provider/member). The Offeror addressed communication and coordination with AHCCCS, as appropriate.

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- The Offeror proposed additional outreach and coordination with members to assist in collecting mental health records/supporting documentation to support an SMI Eligibility Determination (20 day extension).
- The Offeror detailed a robust plan for statewide implementation and detailed its established infrastructure to meet the anticipated volume of SMI Eligibility Determinations and all system requirements (i.e. experience with system stakeholders and existing physical locations in three metropolitan areas and 19 satellite offices throughout Arizona).
- The Offeror has existing and experienced staff to implement the program statewide. Clinical team staff exceeds minimum credential requirements (Psychologists under the direction of an MD).
- The Offeror detailed its organizational structure and described how various teams will collaborate to ensure efficient operations and timely and clinically sound SMI Eligibility Determinations.
- The Offeror exceeds Grievance and Appeal process requirements and prioritizes member engagement in the appeals process (e.g. outreach to member via phone and mail, dedicated point of staff contact for each member, member involvement in informal conferences - see comment below).
- The Offeror detailed substantial efforts to ensure member participation in informal conferences (provides transportation to and/or video conferencing facilities available in 19 cities, a psychologist will participate in informal conference for face-to-face evaluation and staff will travel as necessary).
- The Offeror did not sufficiently address continuity of business operations.
- The Offeror's response includes the utilization of resource navigators to connect members not determined SMI to community services. A service which exceeds Contract requirements.

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OFFEROR'S NAME:

Maximus Health Services, Inc.

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RATIONALE:

Major Observations:

- The Offeror's response lacked sufficient process detail and specificity to Arizona's behavioral health system; an overview of the SMI Clinical Decertification and Appeals process was not included in workflow / process overviews.
- The Offeror did not discuss State-specific timeliness requirements or their SMI Eligibility Determination and SMI Clinical Decertification processes within those requirements (i.e. 3, 20, 90 day options).
- The Offeror detailed a process to receive assessments electronically but did not address an approach for receiving manual submissions. The Offeror emphasized its robust data system, data exchange requirements with AHCCCS, and privacy and security measures. The Offeror's response for receiving assessments and "MAX-SMI" system functionality lacked process detail.
- The Offeror described how it will ensure the comprehensive submission of SMI Evaluation packets via automated system checks and staff review. However, the response lacked sufficient detail, did not sufficiently describe packet requirements, and did not sufficiently detail a plan for provider outreach/education.
- An implementation plan was provided but statewide implementation and the Offeror's physical presence outside of Phoenix was not sufficiently addressed.
- The response demonstrated the Offeror's experience working with tribal communities and diverse populations. However, key Arizona stakeholders were not identified and stakeholder outreach was minimally addressed.
- The Offeror detailed its existing corporate structure with shared resources; identified some existing key staff; indicated its commitment to work with a local recruitment firm to hire qualified staff; and

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stated that clinicians will meet minimum credential requirements; however, the number of clinicians and specific credentials was not included. The response indicates the use of out of State consultants; it is unclear how ongoing staffing responsibilities or corporate resources will be utilized to support and sustain the program in Arizona.

- The Offeror's response lacks sufficient detail on how outreach and communication to members and providers throughout the SMI Eligibility Determination process will occur.
- The Offeror demonstrated clinical expertise, understands diagnostic challenges and relayed its commitment to ensuring culturally and socially competent SMI Eligibility Determinations.
- The Offeror demonstrated their commitment to complying with Grievance and Appeal requirements but did not clearly detail member engagement efforts and appeals processes.
- The Offeror did not sufficiently address continuity of business operations.

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OFFEROR'S NAME:

FasPsych, LLC

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RATIONALE:

Major Observations:

- The Offeror's response lacks understanding of Arizona's SMI Eligibility Determination program and frequently repeats the language contained in Contract and AHCCCS Policy documents.
- The Offeror's process and method for rendering SMI Eligibility Determinations is not clear and workflows contain significant process errors (e.g. Appendix A incorrectly states Evaluation Packet is not submitted if provider agency feels an individual is non-SMI; errors throughout Appendix B; Appendix C states an alternate process for members that require special assistance, which is not applicable; page 16, administrative hearing is not part of workflow when second decision is rendered).
- Timeframe requirements and process overview for SMI Eligibility Determinations (3, 20, 90 days) were inadequately addressed.
- The SMI Clinical Decertification process was not sufficiently addressed by the Offeror.
- The Offeror did not adequately describe a process for receiving SMI assessments manually.
- The Offeror did not sufficiently describe a process to ensure the comprehensive and accurate submission of SMI evaluation packets by providers. However, the Offeror did refer to provider training and outreach efforts.
- The Offeror's discussion of data exchange components with AHCCCS demonstrated a lack of understanding.
- The Offeror did not sufficiently address provider or member communication throughout the SMI Eligibility Determination process.

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- The Offeror identified Key Arizona stakeholders and provided a general outreach plan.
- The Offeror did not sufficiently describe staffing, credentials or numbers of qualified clinicians rendering SMI Determinations, or provide a sufficient plan for statewide implementation.
- The Offeror's Grievance and Appeal process detailed some member engagement practices; however, the response largely repeats language included in AHCCCS policy.
- The Offeror did not sufficiently address continuity of business operations.