

Submission Requirement 17

Offeror	Rank*
Magellan Complete Care of Arizona, Inc.	5
UnitedHealthcare Community Plan	3
Mercy Care	7
Banner - University Family Care Plan	6
Health Net Access, Inc.	2
Health Choice Arizona, Inc. (Steward Health Choice Arizona)	4
Care1st Health Plan Arizona, Inc.	1

*If Offeror omits a submission, the requirement rank for that offeror for that submission will be an "X"

Facilitator	Signature	Date
Andrew Cohen		2/16/18

COMPONENT: PROGRAMMATIC – NARRATIVE SUBMISSION REQUIREMENT 17

OFFEROR'S NAME: Care1st Health Plan Arizona, Inc.

NARRATIVE SUBMISSION REQUIREMENT 17	TOTAL RANKING
Describe, in detail, the steps the Offeror will take to engage and collaborate with tribes for the delivery of services to American Indian members. Include the process for identification, escalation and resolution of unique barriers to service delivery on and off tribal lands.	1

RATIONALE:

Major Observations:

Offeror presented a strengths-based approach to serving American Indian members that emphasized learning from tribal providers and stakeholders. Offeror addressed both physical and behavioral health components of the AHCCCS Complete Care (ACC) Program.

Offeror described extensive outreach activities, including listening tours, and described how the information was used to develop strategies to better serve American Indian members.

Offeror discussed entering into MOUs with tribes, although the MOU scope did not clearly extend beyond data sharing.

Offeror described an internal structure for supporting collaboration with tribes that extended beyond the required Tribal Coordinator position to include a multi-disciplinary team. The Tribal Coordinator position reports directly to the plan president.

Offeror discussed its experience identifying and addressing barriers to care. Offeror’s strategy for the ACC Program included using both data analytics and outreach to identify barriers and a Community Impact Model to address social determinants of health.

Offeror discussed its understanding of issues on and off tribal lands, and use of zip code-level data to identify care gaps, although Offeror did not describe clearly any differences in strategy for tribal (reservation) and non-tribal areas of the state.

Offeror described a strategy for improving access to transportation services for American Indians residing in rural areas.

Offeror described a process for involving tribal providers and stakeholders in its activities to identify and address barriers to care.

EVALUATION TEAM MEMBER		
NAME	SIGNATURE	DATE
Markay Adams		2/16/18
Elizabeth Carpio		2/16/18
Michelle Holmes	Michelle D Holmes	2/16/18

FACILITATOR		
NAME	SIGNATURE	DATE
Andrew Cohen		2/16/18

COMPONENT: PROGRAMMATIC – NARRATIVE SUBMISSION REQUIREMENT 17

OFFEROR'S NAME: Health Net Access, Inc.

NARRATIVE SUBMISSION REQUIREMENT 17	TOTAL RANKING
Describe, in detail, the steps the Offeror will take to engage and collaborate with tribes for the delivery of services to American Indian members. Include the process for identification, escalation and resolution of unique barriers to service delivery on and off tribal lands.	2

RATIONALE:

Major Observations:

Offeror presented a strengths-based approach to serving American Indian members that emphasized cultural respect in its interaction with the tribes. Offeror addressed both physical and behavioral health components of the AHCCCS Complete Care (ACC) Program.

Offeror discussed leveraging its success building relationships in the current program to develop strategies to better serve American Indian members in any new GSA(s).

Offeror discussed existing LOAs (MOUs) with tribes in the current program and described a three-step process for obtaining MOUs in any new GSA(s).

Offeror described an internal structure for supporting collaboration with tribes that extended beyond the required Tribal Coordinator position to include a multi-disciplinary team. Offeror did not describe clearly how the Tribal Coordinator position fits within the organization or whether the Tribal Coordinator reports directly to the plan president.

Offeror discussed identifying and addressing barriers to care and included examples of its experience in the current program. Offeror’s strategy for the ACC Program mentioned specific barriers but did not describe clearly how data analytics would be used to identify barriers.

Offeror discussed its understanding of issues on tribal lands and strategy for rural Arizona. Offeror mentioned urban clinics but did not otherwise describe clearly a strategy specific to non-tribal areas of the state.

Offeror mentioned transportation but did not describe clearly a strategy for improving access to transportation services for American Indians residing in rural areas.

Offeror described a process for involving tribal providers and stakeholders in its activities to identify and address barriers to care.

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NAME	SIGNATURE	DATE
Markay Adams		2.16.18
Elizabeth Carpio		2/16/18
Michelle Holmes	Michelle Holmes	2/16/18

FACILITATOR		
NAME	SIGNATURE	DATE
Andrew Cohen		2/16/18

COMPONENT: PROGRAMMATIC – NARRATIVE SUBMISSION REQUIREMENT 17

OFFEROR'S NAME: UnitedHealthcare Community Plan

NARRATIVE SUBMISSION REQUIREMENT 17	TOTAL RANKING
Describe, in detail, the steps the Offeror will take to engage and collaborate with tribes for the delivery of services to American Indian members. Include the process for identification, escalation and resolution of unique barriers to service delivery on and off tribal lands.	3

RATIONALE:

Major Observations:

Offeror presented a strengths-based approach to serving American Indian members that acknowledged the unique needs of each tribe. Offeror addressed both physical and behavioral health components of the AHCCCS Complete Care (ACC) Program.

Offeror discussed leveraging its experience in the current program, and taking best practices from its New Mexico plan, to develop strategies to better serve American Indian members in any new GSA(s).

Offeror described a process for obtaining MOUs by November 2018 and outlined possible MOU components.

Offeror discussed the required Tribal Coordinator position but did not describe clearly where this position would be located or whether the Tribal Coordinator reports directly to the plan president.

Offeror discussed identifying and addressing barriers to care and provided examples of its experience in the current program, including serving CRS members on tribal lands with non-tribal providers. Offeror's strategy for the ACC Program discussed using community coordinators to identify new barriers and addressing barriers through MOUs. Offeror's strategy mentioned sharing data with tribes through its CommunityCare platform but did not describe clearly how data analytics would be used to identify barriers.

Offeror discussed its understanding of issues on tribal lands and strategy for rural Arizona. Offeror discussed a pilot program with an urban FQHC but did not otherwise describe clearly a strategy specific to non-tribal areas of the state.

Offeror mentioned lack of transportation as a potential barrier to care but did not describe clearly a strategy for improving access to transportation services for American Indians residing in rural areas.

Offeror described a process for involving tribal providers and stakeholders in its activities to identify and address barriers to care.

EVALUATION TEAM MEMBER		
NAME	SIGNATURE	DATE
Markay Adams		2.14.18
Elizabeth Carpio		2/16/18
Michelle Holmes	Michelle D Holmes	2/14/18

FACILITATOR		
NAME	SIGNATURE	DATE
Andrew Cohen		2/16/18

COMPONENT: PROGRAMMATIC – NARRATIVE SUBMISSION REQUIREMENT 17

OFFEROR'S NAME: Health Choice Arizona, Inc. (Steward Health Choice Arizona)

NARRATIVE SUBMISSION REQUIREMENT 17	TOTAL RANKING
Describe, in detail, the steps the Offeror will take to engage and collaborate with tribes for the delivery of services to American Indian members. Include the process for identification, escalation and resolution of unique barriers to service delivery on and off tribal lands.	4

RATIONALE:

Major Observations:

Offeror provided examples of consulting with tribes but did not present clearly a strengths-based approach to serving American Indian members that emphasized learning from tribal providers and stakeholders. Offeror addressed behavioral health components of the AHCCCS Complete Care (ACC) Program more clearly than physical health components.

Offeror discussed its experience supporting behavioral health services in the current program but did not describe clearly how it would apply its experience to better serve American Indian members in the ACC Program.

Offeror identified its existing MOUs and its MOUs that are “in progress”. Offeror does not have an MOU with the largest tribe in its existing GSA (Navajo Nation).

Offeror discussed the required Tribal Coordinator position and referenced a tribal services team but did not describe clearly the role of the team. Offeror also did not describe clearly whether the Tribal Coordinator reports directly to the plan president.

Offeror discussed identifying and addressing barriers to care and included examples of its experience in the current program. Offeror’s strategy for the ACC Program mentioned tribal service team outreach but did not describe clearly how data analytics would be used to identify barriers.

Offeror discussed its understanding of issues on tribal lands and strategy for rural Arizona that included helping tribes to build capacity within their jurisdictions. Offeror did not describe clearly a strategy specific to non-tribal areas of the state.

Offeror did not address clearly lack of transportation as a potential barrier to care and did not describe clearly a strategy for improving access to transportation services for American Indians residing in rural areas.

Offeror described a process for involving tribal providers and stakeholders in its activities to identify and address barriers to care.

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Markay Adams		2/16/18
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Michelle Holmes	Michelle O Holmes	2/16/18

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NAME	SIGNATURE	DATE
Andrew Cohen		2/16/18

COMPONENT: PROGRAMMATIC – NARRATIVE SUBMISSION REQUIREMENT 17

OFFEROR'S NAME: Magellan Complete Care of Arizona, Inc.

NARRATIVE SUBMISSION REQUIREMENT 17	TOTAL RANKING
Describe, in detail, the steps the Offeror will take to engage and collaborate with tribes for the delivery of services to American Indian members. Include the process for identification, escalation and resolution of unique barriers to service delivery on and off tribal lands.	5

RATIONALE:

Major Observations:

Offeror presented a strengths-based approach to serving American Indian members that acknowledged the unique needs of each tribe. Offeror mentioned integrated care but did not address clearly its strategy for integration of behavioral and physical health services.

Offeror discussed its experience supporting behavioral health services in the current program but did not describe clearly how it would apply its experience to better serve American Indian members in the ACC Program.

Offeror described its experience with MOA's (MOUs) and mentioned leveraging its experience to execute MOUs but did not describe clearly its strategy for obtaining MOUs in any awarded GSAs.

Offeror discussed the required Tribal Coordinator position and referenced having other experienced staff but did not describe clearly the role of the staff. Offeror also did not describe clearly whether the Tribal Coordinator reports directly to the plan president.

Offeror presented a "feedback loop" illustration of its process for identifying and addressing barriers to care within 30 days. Offeror also provided examples from its RBHA contract but did not demonstrate clearly that the events described in the examples aligned with the feedback loop process.

Offeror's discussion of access issues did not describe clearly a strategy specific either to tribal or non-tribal areas of the state.

Offeror mentioned "building unique transportation options" but did not describe clearly what these options are or its strategy for implementing them to improve access to transportation services for American Indians residing in rural areas.

Offeror made a general commitment to working with tribes but did not describe clearly a process for involving tribal providers and stakeholders in its activities to identify and address barriers to care.

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Andrew Cohen		2/16/18

COMPONENT: PROGRAMMATIC – NARRATIVE SUBMISSION REQUIREMENT 17

OFFEROR'S NAME: Banner – University Family Care

NARRATIVE SUBMISSION REQUIREMENT 17	TOTAL RANKING
Describe, in detail, the steps the Offeror will take to engage and collaborate with tribes for the delivery of services to American Indian members. Include the process for identification, escalation and resolution of unique barriers to service delivery on and off tribal lands.	6

RATIONALE:

Major Observations:

Offeror discussed consulting with tribes but did not present a strengths-based approach to serving American Indian members that emphasized learning from tribal providers and stakeholders. Offeror addressed behavioral health components of the AHCCCS Complete Care (ACC) Program more clearly than physical health components.

Offeror discussed future activities but did not describe clearly its experience in the current program or how it would apply its experience to better serve American Indian members in the ACC Program.

Offeror discussed the need to obtain MOUs but did not describe clearly its strategy for obtaining MOUs in any awarded GSAs.

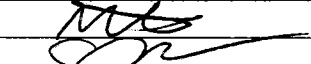

Offeror discussed the required Tribal Coordinator position at a relatively high level. Offeror did not describe clearly any other team members and did not describe clearly whether the Tribal Coordinator reports directly to the plan president.

Offeror discussed monitoring trends using multiple data sources. Offeror also discussed responding to barriers identified by outside entities but did not describe clearly a process for internal identification of barriers. Offeror discussed its experience responding to a natural disaster but did not describe clearly a process for addressing systemic barriers to care.

Offeror's discussion of access issues did not describe clearly a strategy specific either to tribal or non-tribal areas of the state.

Offeror mentioned its obligation to arrange transportation but did not describe clearly a strategy for resolving transportation barriers to improve access to transportation services for American Indians residing in rural areas.

Offeror made a general commitment to working with tribes but did not describe clearly process for involving tribal providers and stakeholders in its activities to identify and address barriers to care.

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COMPONENT: PROGRAMMATIC – NARRATIVE SUBMISSION REQUIREMENT 17

OFFEROR'S NAME: Mercy Care

NARRATIVE SUBMISSION REQUIREMENT 17	TOTAL RANKING
Describe, in detail, the steps the Offeror will take to engage and collaborate with tribes for the delivery of services to American Indian members. Include the process for identification, escalation and resolution of unique barriers to service delivery on and off tribal lands.	7

RATIONALE:

Major Observations:

Offeror discussed hiring within tribal jurisdictions but did not present a strengths-based approach to serving American Indian members that emphasized learning from tribal providers and stakeholders. Offeror addressed behavioral health components of the AHCCCS Complete Care (ACC) Program more clearly than physical health components.

Offeror discussed its experience in the current program at a relatively high level but did not describe clearly how it would apply its experience to better serve American Indian members in the ACC Program.

Offeror mentioned the MOU requirement and discussed its current status but did not describe clearly its strategy for obtaining MOUs in any awarded GSAs.

Offeror discussed the required Tribal Coordinator position and regionally based liaisons but did not describe clearly how the liaisons will interact with the Tribal Coordinator position. Offeror stated that the Tribal Coordinator has direct access to the plan president, although it did not describe clearly whether the individual reports directly to the plan president.

Offeror discussed monitoring trends to identify gaps and presented a behavioral health-related example.

Offeror's discussion of access issues did not describe clearly a strategy specific either to tribal or non-tribal areas of the state.

Offeror did not describe clearly a strategy for resolving transportation barriers to improve access to transportation services for American Indians residing in rural areas.

Offeror made a general commitment to working with tribes but did not describe clearly process for involving tribal providers and stakeholders in its activities to identify and address barriers to care.

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