

ACUTE CARE/CRS RFP CONSENSUS RANKING
SUBMISSION REQUIREMENT NO. 1

COMPONENT: ACCESS TO CARE/NETWORK

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

Total Number of Bidders:
10

Totalled By Team Lead:	Signature	Date
<i>[Signature]</i>	<i>[Signature]</i>	2/27/2013

Verified By Facilitator:	Signature	Date
<i>[Signature]</i>	<i>[Signature]</i>	2/25/13

ACUTE CARE/CRS RFP CONSENSUS SCORING TOOL

COMPONENT: ACCESS TO CARE/NETWORK

OFFEROR'S NAME: Care 1st Health Plan of Arizona

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p>	1
<p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	

Rationale:

Major Observations:




Offeror provided a comprehensive and detailed description of its process for analyzing data to determine network expansion needs and make staffing enhancements necessary to accommodate membership growth under various expansion scenarios.


Offeror described a process for interdepartmental collaboration and use of stakeholder input to identify network gaps and inform planning for membership growth.

Offeror described a detailed project plan for ensuring readiness and provided detailed timelines for network and staff evaluation and expansion activities.

Offeror's described methods for streamlined credentialing of providers during expansion.

Offeror proposed innovative methods for leveraging network and community resources to mitigate network gaps that may occur as the result of membership growth.

Evaluation Team Member (Print Name)	Signature	Date
Jim Jim Snyder		02/25/13
P.J. Schoenstene		2/27/2013
Concetta Williams		2-1-2013

Facilitator	Signature	Date
Andrew Cohen		2/25/13

ACUTE CARE/CRS RFP RATIONALE
SUBMISSION REQUIREMENT NO. 1

COMPONENT: ACCESS TO CARE/NETWORK

OFFEROR'S NAME: UnitedHealthcare Community Plan

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p> <p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	2

Rationale:

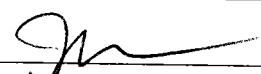


Major Observations:


Offeror provided a detailed description of how it will expand its network and make staffing enhancements to accommodate membership growth.

Offeror described methods for streamlined credentialing of providers during expansion and how it would expand the network through contracting activities.

Offeror proposed methods for leveraging network and community resources to mitigate network gaps that may occur as the result of membership growth.

Offeror failed to describe a formal process for incorporating data from multiple departments in the identification of potential network gaps.

Evaluation Team Member (Print Name)	Signature	Date
Jenni Snyder		02/25/13
Concetta Williams		3-1-13
P.J. Schoenstene		2/27/13

Facilitator	Signature	Date
Andrew Chan		2/25/13

ACUTE CARE/CRS RFP RATIONALE
SUBMISSION REQUIREMENT NO. 1

COMPONENT: ACCESS TO CARE/NETWORK

OFFEROR'S NAME: Health Net of Arizona

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p> <p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	3

Rationale:



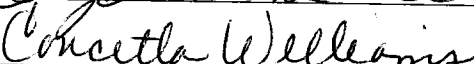
Major Observations:


Offeror provided a description of its process for analyzing data to determine network expansion needs and make staffing enhancements necessary to accommodate membership growth.

Offeror described methods for expedited and streamlined credentialing of providers.

Offeror described a process for interdepartmental collaboration as part of planning activities.

Offeror provided a limited description of how it will leverage network and community resources to mitigate network gaps that may occur as the result of membership growth.

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/25/13
P.J. Schoenstene		02/27/2013
Concetta Williams		3-1-13

Facilitator	Signature	Date
Andrew Cahn		2/25/13

ACUTE CARE/CRS RFP RATIONALE
SUBMISSION REQUIREMENT NO. 1

COMPONENT: ACCESS TO CARE/NETWORK

OFFEROR'S NAME: Phoenix Health Plan

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p> <p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	4

Rationale:




Major Observations:


Offeror provided a detailed description of its process for analyzing data to determine network expansion needs and make staffing enhancements necessary to accommodate membership growth.

Offeror described a process for interdepartmental collaboration to identify network gaps and inform planning for membership growth.

Offeror proposed to streamline prior authorization process to facilitate transition of care.

Offeror did not clearly describe methods for streamlined credentialing of providers or how it would expand the network through contracting activities.

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/25/13
P.J. Schoenstene		2/27/2013
Concetta Williams		3-1-13

Facilitator	Signature	Date
Andrew Green		2/27/13

ACUTE CARE/CRS RFP RATIONALE
SUBMISSION REQUIREMENT NO. 1

COMPONENT: ACCESS TO CARE/NETWORK

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

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p> <p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	4

Rationale:

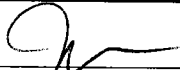
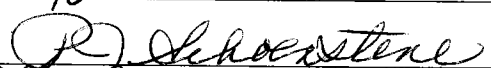

Major Observations:


Offeror provided a detailed description of its process for analyzing data to determine network expansion needs and make staffing enhancements necessary to accommodate membership growth.

Offeror proposed methods for leveraging network and community resources to mitigate network gaps that may occur as the result of membership growth.

Offeror proposed to streamline prior authorization process to facilitate transition of care.

Offeror did not clearly describe methods for streamlined credentialing of providers or how it would expand the network through contracting activities.

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/25/13
P.J. Schoenstene		02/27/2013
Concetta Williams		3-1-13

Facilitator	Signature	Date
Andrew Cohen		2/25/13

**ACUTE CARE/CRS RFP RATIONALE
SUBMISSION REQUIREMENT NO. 1**

COMPONENT: ACCESS TO CARE/NETWORK

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

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p> <p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	4

Rationale:

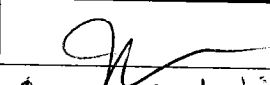
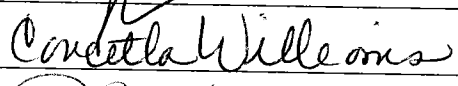
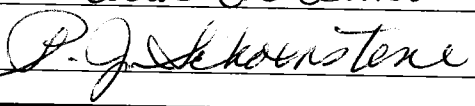
Major Observations:


Offeror provided a detailed description of its process for analyzing data to determine network expansion needs and make staffing enhancements necessary to accommodate membership growth.

Offeror proposed methods for leveraging network and community resources to mitigate network gaps that may occur as the result of membership growth.

Offeror proposed to streamline prior authorization process to facilitate transition of care.

Offeror did not clearly describe methods for streamlined credentialing of providers or how it would expand the network through contracting activities.

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		12/26/13
Concetta Williams		3-1-13
P.J. Schoenstene		2/27/13

Facilitator	Signature	Date
Andrew Chen		2/25/13

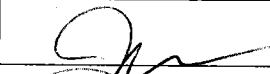
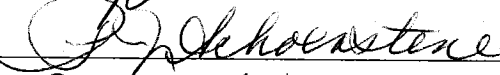

**ACUTE CARE/CRS RFP RATIONALE
SUBMISSION REQUIREMENT NO. 1**


COMPONENT: ACCESS TO CARE/NETWORK

OFFEROR'S NAME: Health Choice Arizona

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p> <p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	7

Rationale:
<p><u>Major Observations:</u></p> <p>Offeror described how it would analyze membership growth by population type and geographic area however, did not clearly describe a formal process from multiple departments to determine network expansion needs.</p> <p>Offeror provided a description of staffing enhancements necessary to accommodate membership growth.</p> <p>Offeror proposed to streamline prior authorization process to facilitate transition of care.</p> <p>Offeror proposed a method for leveraging network and community resources to mitigate network gaps that may occur as the result of membership growth.</p> <p>Offeror did not clearly describe methods for streamlined credentialing of providers or how it would expand the network through contracting activities.</p>

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/25/13
P.J. Schoenstene		02/27/2013
Concetta Williams		3-1-13

Facilitator	Signature	Date
Andrew Cohen		2/4/13


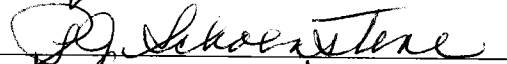

**ACUTE CARE/CRS RFP RATIONALE
SUBMISSION REQUIREMENT NO. 1**


COMPONENT: ACCESS TO CARE/NETWORK

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

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p> <p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	8

Rationale:
<p><u>Major Observations:</u></p> <p>Offeror proposed to streamline prior authorization process to facilitate transition of care.</p> <p>Offeror failed to describe in detail how it would enhance its network to accommodate membership growth and provided only a high level description of how it would analyze data to determine network sufficiency related to membership growth.</p> <p>Offeror proposed to increase frequency with which provider credentialing committee meets but failed to describe in detail how it would expand the network through contracting activities to accommodate membership growth.</p>

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/25/13
P.J. Schaeustene		02/27/2013
Concetta Williams		3-1-13

Facilitator	Signature	Date
Andrew Chen		2/25/13

**ACUTE CARE/CRS RFP RATIONALE
SUBMISSION REQUIREMENT NO. 1**

COMPONENT: ACCESS TO CARE/NETWORK

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

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p> <p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	9

Rationale:


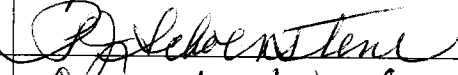
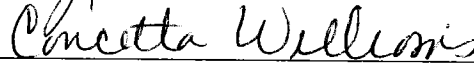
Major Observations:


Offeror provided a general description of its ability to enhance staffing to accommodate membership growth.

Offeror proposed to streamline prior authorization process to facilitate transition of care.

Offeror indicated generally that it would enhance its network but did not describe in detail a formal process for incorporating data from multiple departments to determine network expansion needs.

Offeror did not clearly describe methods for streamlined credentialing of providers or how it would expand the network through contracting activities.

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/25/13
P.J. Schoenstene		02/27/2013
Concetta Williams		3-1-13

Facilitator	Signature	Date
Andrew Cohen		2/25/13

ACUTE CARE/CRS RFP RATIONALE
SUBMISSION REQUIREMENT NO. 1

COMPONENT: ACCESS TO CARE/NETWORK

OFFEROR'S NAME: Medisun Community Care Inc. dba Blue Cross/Blue Shield of Arizona Community Care

SUBMISSION REQUIREMENT No. 1	Total Ranking
<p>AHCCCS anticipates that its membership will grow as a result of implementation of the Affordable Care Act (ACA). It is estimated that an additional 180,000 to 430,000 new members will be eligible and enrolled with AHCCCS in the first year of implementation. These growth figures are dependent on decisions made by Governor Brewer and Arizona lawmakers regarding the many options under the ACA. In addition to the increased AHCCCS enrollment, the implementation of the Health Insurance Exchange will increase demand for provider accessibility.</p> <p>What steps will the Offeror take to ensure access to care to support the influx of members? In addition to network management, how will the Offeror ensure its operational and administrative structure is sufficient to efficiently implement all program operations to accommodate the membership growth?</p>	10

Rationale:


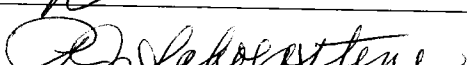
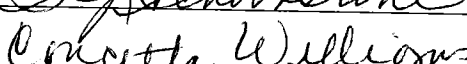
Major Observations:


Offeror described process for forecasting staffing needs to accommodate membership growth, including use of performance indicators within functional areas.

Offeror indicated generally that it would enhance its network but did not describe in detail how it would analyze its network to identify necessary enhancements to accommodate expected membership growth.

Offeror did not clearly describe methods for streamlined credentialing of providers.

Offeror failed to describe a process for interdepartmental collaboration and failed to address operational or administrative changes, other than staffing, necessary to accommodate membership growth.

Evaluation Team Member (Print Name)	Signature	Date
Jami Snyder		02/25/13
P.J. Schoenstene		02/27/2013
Concetta Williams		3-1-13

Facilitator	Signature	Date
Andrew Chan		2/25/13