

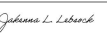



FPD RFP #19K-066 3-CORING TOOL
FINAL DRAFT (2/10/2023) (01)

FINAL PRESENTATION 2: It is the right of every individual to be free from abuse, neglect, and exploitation and it is critical for the services, health, and well-being of the program's vulnerable members. The State of Arizona has taken numerous measures to enhance prevention of abuse, neglect, and exploitation of members as well as to inform and improve abuse monitoring to ensure the safety of vulnerable persons residing in long-term care settings and/or receiving long-term care services in their home. Describe how the Offeror will commit to prevent, protect, and ensure the safety and security of its members.

Technical Evaluation Considerations:
 - Training and Communication
 - Incident Case Management Protocols
 - Prevention Strategies
 - Outreach Programs
 - Other Notable Considerations

ARIZONA PHYSICIANS PA, PC	BANNER HOSPITALITY CARE ADVANTAGE	KCNAZ HEALTH CHOICE	HEALTH NET ACCESS	MERCY CARE
NATIONAL AND IN-HOUSE OPERATIONS				
<p>Offeror described a process for internal training on abuse/neglect prevention, identification and reporting that included training of all staff on the responsibility to identify and report.</p> <p>Offeror mentioned training of both in-home and facility based providers but did not describe clearly its external training process. Offeror noted that it educates family caregivers to be aware of signs of potential hazard.</p> <p>Offeror described a culture of quality and accountability and invests the importance of prevention/being proactive.</p> <p>Offeror mentioned the Governor's Abuse and Neglect Prevention Task Force and stated it encourages NAC members to participate in related surveys.</p>	<p>Offeror described a process for internal training on abuse/neglect prevention, identification and reporting that included new employee orientations and monthly "touch and base" sessions.</p> <p>Offeror mentioned the need for education of the broader community but did not describe clearly its external training process.</p> <p>Offeror noted to invest AHCES policies and requirements and mentioned the importance of collaboration between case management and quality management but did not describe clearly how it instills a culture of quality and accountability.</p> <p>Offeror mentioned the Governor's Abuse and Neglect Prevention Task Force and stated it conducts member surveys and posts billboards regarding abuse/neglect prevention, identification and reporting.</p>	<p>Offeror discussed training of case managers on abuse/neglect prevention, identification and reporting but did not describe clearly an internal process for training all staff.</p> <p>Offeror stated that provider representation conduct education and perform due diligence prior to contracting but did not otherwise describe clearly its external training process.</p> <p>Offeror described a culture of quality and accountability, with an emphasis on the case manager's role in identifying signs of possible abuse/neglect. Offeror discussed quality management's role in monitoring through multiple data sources, including post-provider risk surveys and Clinix. (Health case-acquired conditions).</p> <p>Offeror mentioned the Governor's Abuse and Neglect Prevention Task Force but did not describe clearly any external public awareness campaign activities (in the event of contract award).</p>	<p>Offeror described a comprehensive process for internal training on abuse/neglect prevention, identification and reporting, including through biannual training sessions with all staff and quarterly training sessions with case managers.</p> <p>Offeror described a process for provider training that includes ongoing scenario likely to result in abuse or neglect. Offeror's approach includes both preventive training and ongoing quarterly monitoring and education after an incident. Offeror presented data on the impact of the post-incident monitoring/education process.</p> <p>Offeror described a culture of quality and accountability, with an emphasis on the case manager's duty to report suspected abuse or neglect. Offeror also emphasized multiple reporting channels available to members and its emphasis on encouraging reporting without fear of retaliation.</p> <p>Offeror mentioned the Governor's Abuse and Neglect Prevention Task Force but did not describe clearly any additional public awareness campaign activities.</p>	<p>Offeror discussed training of case managers on abuse/neglect prevention, identification and reporting but did not describe clearly an internal process for training all staff.</p> <p>Offeror described a process for provider training that includes use of simulated abuse/neglect scenarios, provider forums and case consultation calls with providers, among other activities.</p> <p>Offeror described a culture of quality and accountability, with an emphasis on the case manager's duty to identify and report possible abuse/neglect. Offeror discussed its outreach to various provider organizations (e.g., AAA and AHA) to promote open dialogues between providers and plan staff. Offeror also emphasized that it encourages members to report without fear of retaliation.</p> <p>Offeror described a multi-media public awareness campaign, including billboards and internet sites. Offeror discussed its overall strategy and efforts to complement AHCES public awareness efforts.</p>
<p>Offeror described how its PSP addresses identification of potential abuse/neglect, including the case manager's role in risk and caregiver additional support needs.</p> <p>Offeror discussed monitoring of both in-home and facility settings and provided examples of observable risk factors in facilities (e.g., urine odor, shoe requirement size to all lifts, lack of airway).</p> <p>Offeror discussed how it addresses potential caregiver burnout, including through respite and its caregiver support and training program.</p>	<p>Offeror described how its PSP addresses identification of potential abuse/neglect, including the evaluation of the member's environment, changes in behavior and refusal to accept services.</p> <p>Offeror mentioned monitoring of facilities and the importance of frequent availability but did not describe clearly its in-home or facility monitoring processes.</p> <p>Offeror did not describe clearly how it addresses potential caregiver burnout in its case or respite services.</p>	<p>Offeror described how its PSP addresses identification of potential abuse/neglect, including the evaluation of different types of risk and the role of the third-party in addressing risk.</p> <p>Offeror discussed monitoring of both in-home and facility settings and differences in types of risk between the two settings.</p> <p>Offeror discussed how it addresses potential caregiver burnout, including through its Caregiver Care. Offeror did not address clearly type of respite.</p>	<p>Offeror described how its PSP addresses identification of potential abuse/neglect, including the case manager's role in building a relationship with the member and serving in higher situations. Offeror discussed abuse/neglect risk factors and the higher potential for abuse/neglect among certain populations (e.g., non-English speakers).</p> <p>Offeror discussed monitoring of both in-home and facility settings and differences in types of risk based on the specific facility type.</p> <p>Offeror mentioned risk of caregiver burnout and availability of respite but did not otherwise describe in detail its strategy for addressing burnout. Offeror also mentioned its "Transitions Program" but did not describe clearly how it would work.</p>	<p>Offeror discussed how its PSP addresses identification of potential abuse/neglect, including the different types of abuse that can occur and the importance of cultural norms as a risk factor.</p> <p>Offeror discussed a detail how it monitors facilities for potential abuse/neglect (e.g., staffing, food in refrigerator, cleanliness, availability of appropriate activities) but did not describe clearly a corresponding process for in-home monitoring.</p> <p>Offeror discussed how it addresses potential caregiver burnout, including through its Truist platform. Offeror did not address clearly use of respite.</p>
<p>Offeror described proactive strategies for prevention/identification of abuse/neglect that emphasized the member case manager relationship. Offeror provided an example of monitoring with a non-verbal member.</p> <p>Offeror discussed use of data in monitoring member utilization and abuse/neglect AHCES requirements with respect to annual site visits.</p>	<p>Offeror described proactive strategies for prevention/identification of abuse/neglect that emphasized the member case manager relationship. Offeror provided an example involving third members. Offeror also provided an example involving a facility but did not distinguish clearly between in-home and facility settings.</p> <p>Offeror discussed use of data in monitoring member utilization and abuse/neglect AHCES requirements with respect to annual site visits.</p>	<p>Offeror described proactive strategies for prevention/identification of abuse/neglect that addressed multiple at-risk populations (e.g., non-English speakers and LGBTQ community) and cultural considerations. Offeror mentioned monitoring by setting type, although it did not describe clearly different approaches by setting.</p> <p>Offeror discussed how it monitors risk and service utilization including over- and under-utilization, through data analysis and on-site visits. Offeror did not address clearly annual/ on-site visits as a specific requirement.</p>	<p>Offeror described proactive strategies for prevention/identification of abuse/neglect that addressed multiple settings and populations. Offeror discussed partnering with the third-party and monitoring programs able for potential use in setting type, although it did not describe clearly different approaches by setting.</p> <p>Offeror discussed how it monitors service utilization (protocols for assessing signs through data analysis (e.g., pharmacy, unusual prior authorization requests) and during annual site visits).</p>	<p>Offeror described proactive strategies for prevention/identification of abuse/neglect that emphasized cultural considerations. Offeror discussed facility-based activities but did not address clearly its strategy for the in-home setting.</p> <p>Offeror discussed regular provider monitoring/auditing, and use of data to track reported/identified utilization, but did not otherwise describe clearly how data is used for proactive monitoring.</p>
<p>Offeror discussed trends analysis and data sharing with Peer Review and Member and Provider Advisory Committees but did not describe clearly the role of the OMR in data analysis or the Peer Review in responding to incidents.</p> <p>Offeror emphasized the importance of integrity collaboration and mentioned reporting of incidents to Adult and Child Protective Services.</p>	<p>Offeror discussed the role of the OMR in data analysis and Peer Review in responding to incidents.</p> <p>Offeror discussed internal collaboration, as well as sharing data with providers, but did not otherwise describe clearly any external communication/collaboration.</p>	<p>Offeror discussed the role of the OMR in data analysis and Peer Review in responding to incidents.</p> <p>Offeror mentioned reporting of incidents to Adult Protective Services. Offeror did not describe clearly any other external communication/collaboration.</p>	<p>Offeror discussed trends analysis and data analysis and Peer Review in responding to incidents. Offeror discussed activation of a "red team" in response to report incidents.</p> <p>Offeror mentioned reporting of incidents to Adult and Child Protective Services, as well as law enforcement (if applicable). Offeror described its CAP monitoring sub-committee and mentioned coordination with other program contractors.</p>	<p>Offeror discussed trends analysis, including use of data in identifying and mentioned its quality reviews but did not discuss clearly the role of the OMR in data analysis or Peer Review in responding to incidents.</p> <p>Offeror mentioned meetings with providers but did not describe clearly other external communication/collaboration.</p>
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