ACUTE CARE/CRS RFP CONSENSUS RANKING SUBMISSION REQUIREMENT NO. 14

COMPONENT:	PROGRAM
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SUBMISSION REQUIREMENT NO. 14		
Ranking No.	Offeror	
1	UnitedHealthcare Community Plan	
2	Southwest Catholic Health Network dba Mercy Care Plan	
31,400,311,400,300,41,400		

i	Total Number of Bidders:
	2

Totaled By Team L	ead:	Signature	Date
Auten	OHara	Kristen Hara	2-27-13

Verified By Facilitator:	signature	Date
Scott Withman	fulkeller.	2/27/13

ACUTE CARE/CRS RFP CONSENSUS RATIONALE SUBMISSION REQUIREMENT NO. 14

COMPONENT:

PROGRAM

OFFEROR'S NAME:

UnitedHealthcare Community Plan

SUBMISSION REQUIREMENT No. 14	Total Ranking
Describe the mechanisms that the Offeror will use to ensure that all providers, including those within the MSIC setting and those outside of the MSIC setting, have access to the data needed to appropriately coordinate care for the member.	

Rationale:

Major Observations:

Offeror described a broad array of the types of data that would be shared with providers.

Offeror described how data would be shared with providers to impact member-specific quality of care for individuals with complex conditions.

Offeror described its approach for sharing data to facilitate transition from a pediatric to adult system of care.

Offeror described its approach for enabling providers to access real-time, member-specific clinical information.

Offeror described a proactive approach for facilitating providers' ability to access electronic health records.

Evaluation Team Member (Print Name)	Signature	Date
Jakenna Lebsock	Gassenna Y Sebook	02/01/13
maureen Sharp	Traineen Sharp	02/27/13
Kristen O'Hara	dustan OHan	427/13

Facilitator	Signature	Date
Scott Withun	Australia	2/27/13

ACUTE CARE/CRS RFP CONSENSUS RATIONALE SUBMISSION REQUIREMENT NO. 14

COMPONENT:

PROGRAM

OFFEROR'S NAME:

Southwest Catholic Health Network dba Mercy Care Plan

SUBMISSION REQUIREMENT No. 14	Total Ranking
Describe the mechanisms that the Offeror will use to ensure that all providers, including	
those within the MSIC setting and those outside of the MSIC setting, have access to the	2
data needed to appropriately coordinate care for the member.	

Rationale:

Major Observations:

Offeror described a broad array of the types of data that would be shared with providers.

Offeror described how data would be shared to enable providers to monitor their performance against preestablished goals.

Offeror described its approach for sharing information with providers electronically, but did not clearly describe a system for providers to access comprehensive, member-specific clinical information.

Offeror described its current clinical support engine (ActiveHealth) as a claims-based system which creates a lag in the timeliness of data available to members of the care team.

Evaluation Team Member (Print Name)	Signature	Date
Kristen OHara	dusten Offara	a-a7-13
moveen Sharp	maureen Sharp	2-27-13
Jakenna Lebsock	Galerna y Strack	00/20/13

Facilitator	Siguature	Date
Scattlettum.	A collande	2/24/13
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