COMPONENT:

ORGANIZATION

	SUBMISSION REQUIREMENT NO. 9	
Ranking No.	Offeror Offeror	
1	Care 1st Health Plan Arizona	
2	Maricopa Health Plan managed by University of Arizona	٦
2	University of Arizona Health Plans, University Family Care	
4	Phoenix Health Plan	
5	UnitedHealthcare Community Plan	
6	Health Choice Arizona	
7	Southwest Catholic Health Network dba Mercy Care Plan	
8	Health Net of Arizona	
9	Medisun Community Care Inc. dba Blue Cross Blue Shield of Arizona Community Care	
10	Bridgeway Health Solutions of Arizona, LLC	
	is a second of the second of t	

Total Number of Bidders:	
10	

Totaled By Team Lead:	Signature	Date
Michelle Holmes	Michelle Holmes	9/24/13

Verified By Facilitator:	Signature	Date
A-his Chan	fel	2/26/13

COMPONENT:	ORGANIZATION
OFFEROR'S NAME:	Care 1 st Health Plan Arizona

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	1

Rationale:

Major Observations:

Offeror described in detail comprehensive and proactive processes to avoid providers having to file a claims dispute.

Offeror described in detail comprehensive and proactive processes that are in place to resolve disputes at the earliest possible stage.

Offeror's functions are based in Arizona and offeror empowers local staff to assist in resolution of provider claims issues and identification and implementation of process improvements.

Evaluation Team Member (Print Name)	Signature	Date
Terri Speaks	Jun & Dutto	2/26/13
Michelle Holmes	Mychelle Helmes	2/26/13
Gina Aker	Bieal	2/26/13

Facilitator		Signature	Date
Anhen	Cohen	Sula	2/26/13

COMPONENT:	ORGANIZATION
OFFEROR'S NAME:	Maricopa Health Plan managed by University

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	2

Rationale:

Major Observations:

Offeror described in detail comprehensive and proactive processes to avoid providers having to file a claims dispute.

Offeror described in detail proactive processes that are in place to resolve disputes at the earliest possible stage.

Offeror's functions are based in Arizona and offeror empowers local staff to assist in resolution of provider claims issues.

Evaluation Team Member (Print Name)	Signature	Date
Tem Sneaks	Sun Death	2/26/13
Michelle Holmes	Michelle Holmes	2/26/13
Gina Aker	Sie alu	2/26/13

Facilitator	Signature	Date
Anhew Chen	199	2/26/13

COMPONENT:	ORGANIZATION
	Mandado III da ano ano aliano da anomalia
OFFEROR'S NAME:	University of Arizona Health Plans, University Family Care

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	2

Rationale:

Major Observations:

Offeror described in detail comprehensive and proactive processes to avoid providers having to file a claims dispute.

Offeror described in detail proactive processes that are in place to resolve disputes at the earliest possible stage.

Offeror's functions are based in Arizona and offeror empowers local staff to assist in resolution of provider claims issues.

Evaluation Team Member (Print Name)	Signature	Date
Terri Spraks	Jun South	2/26/13
Michelle Itolmes	Michelle Helmes	2/26/13
Gina AKEr	Sia al	2/26/13

7- 2/26/13

COMPONENT:	ORGANIZATION
OFFEROR'S NAME:	Phoenix Health Plan

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	4

Rationale:

Major Observations:

Offeror described in detail comprehensive and proactive processes to avoid providers having to file a claims dispute.

Offeror described detailed processes that are in place to resolve disputes at the earliest possible stage.

Offeror's functions are based in Arizona and offeror empowers local staff to assist in resolution of provider claims issues.

Evaluation Team Member (Print Name)	Signature	Date
Terri Speaks	Len XDiaho	2/26/13
Michelle Holmes	mychelle Holmes	2/24/13
Gina Aker	Are Che	2/26/13

Facilitator		Signature	Date
Anhew	Cohen	2196	2/26/13
		1100	

COMPONENT:	ORGANIZATION
OFFEROR'S NAME:	UnitedHealthcare Community Plan

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	5

Rationale:

Major Observations:

Offeror described in detail comprehensive and proactive processes to avoid providers having to file a claims dispute.

Offeror described processes that are in place to resolve disputes at the earliest possible stage.

Offeror described processes for analyzing and making changes to its operational and administrative structures based on identified issues.

Offeror failed to describe in detail how the provider relations function participates in resolution of provider claims issues.

Evaluation Team Member (Print Name)	Signature	Date
Tem Speaks	Sur XDeath	abal 13
michelle Holmes	Michelle Holmes	2/24/13
Gine Aker	Baah	0/26/13

Facilitator		Signature	Date
Anher	Chan	NOR	2/26/13

COMPONENT:	ORGANIZATION
OFFEROR'S NAME:	Health Choice Arizona
i control of the cont	

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	6

Rationale:

Major Observations:

Offeror described in detail processes to avoid providers having to file a claims dispute.

Offeror described processes that are or will be put into place to resolve disputes at the earliest possible stage.

Offeror described processes for analyzing and making changes to its operational and administrative structures based on identified issues.

Offeror failed to describe in detail how the provider relations function participates in resolution of provider claims issues.

Evaluation Team Member (Print Name)	Signature	Date
Ten Sneaks	Der Death	2/26/13
michelle Holmes	Michelle Holmes	2/24/13
Gina Aker	De chi	2/26/13

Facilitator	Signature	Date
Anheu Chen	Ma	1/11/13
		/

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

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	7

Rationale:

Major Observations:

Offeror described in detail processes to avoid providers having to file a claims dispute.

Offeror's functions are based in Arizona and offeror empowers local staff to assist in resolution of provider claims issues.

Offeror failed to describe in detail processes in place to resolve disputes at the earliest possible stage.

Offeror discussed monitoring of claims dispute trends but failed to describe in detail processes for making changes to its operational and administrative structures based on identified issues.

Evaluation Team Member (Print Name)	Signature	Date
Tem Speaks	Sur Disko	2/26/13
Michelle Holmes	Mychelle Holmes	2/26/13
Gina Aker	It's aher	2/24/13

Facilitator		Signature	Date
Anten	Chon	Je	2/26/13

ORGANIZATION
Health Net of Arizona

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	8

Rationale:

Major Observations:

Offeror described in detail processes to avoid providers having to file a claims dispute.

Offeror failed to describe in detail processes in place to resolve disputes at the earliest possible stage.

Offeror failed to clearly describe a process whereby local staff are empowered to facilitate timely resolution of provider claims issues.

Evaluation Team Member (Print Name)	Signature	Date
Tern Speads 1	Jun Death	2/26/13
Michelle Holmes	michelle Holmes	2/26/13
Gina Akor	Haah	2/26/13

Facilitator	Signature	Date
Anhew Chan	1192	2/26/13
	- HA	1 / 26/17

COMPONENT:

ORGANIZATION

OFFEROR'S NAME:

Medisun Community Care Inc. dba Blue Cross Blue Shield of Arizona Community Care

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	9

Rationale:

Major Observations:

Offeror described compliance with standard program requirements and addressed proactive measures in general terms, but failed to describe in detail comprehensive and proactive processes to avoid providers having to file a claims dispute.

Offeror failed to describe in detail processes in place to resolve disputes at the earliest possible stage.

Offeror's functions are based in Arizona but offeror failed to describe in detail how local staff are empowered to assist in resolution of provider claims issues.

Evaluation Team Member (Print Name)	Signature	Date
Tem Sneaks	Sun Death	2/26/13
Michelle Holmes	Michelle Holmes	2/24/13
Gina Aker	Da Ohr	2/26/13

Facilitator	Signature	Date
Ashew Cohn		2/26/13
	TON	

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

ODG ANTIG A MIGHT

SUBMISSION REQUIREMENT No. 9	Total Ranking
Describe in detail the ongoing processes and strategies the Offeror will implement to minimize the need for providers to utilize the claims dispute process to obtain proper reimbursement. In addition, describe the interventions and strategies the Offeror will employ to resolve claims disputes without resorting to the hearing process.	10

Rationale:

COMPONIENTE.

Major Observations:

Offeror described compliance with standard program requirements and addressed proactive measures in general terms, but failed to describe in detail comprehensive and proactive processes to avoid providers having to file a claims dispute.

Offeror failed to describe in detail processes in place to resolve disputes at the earliest possible stage.

Offeror failed to describe in detail how local staff are empowered to assist in resolution of provider claims issues.

Evaluation Team Member (Print Name)	Signature	Date
Tem Socals	Jun Death	2/20/13
Michelle Holmes	Mychelle Holmes	2/26/13
Gina Aker	Wa alu	2/26/13

Facilitator	Signature	Date
Antrea Cohen	1119	426/13
11.000		906/