


**EPD RFP 1H24-0001 SCORING TOOL
FINAL RANKING AND RATIONALE - B7**


SUBMISSION REQUIREMENT B7: Describe the Offeror's network development strategy, including methods to build Home and Community Based Services (HCBS) providers and institutional capacity in rural areas and maximize available resources. Also discuss specifically how the Offeror will assist rural nursing facilities seeking to expand into community-based care. Provide action steps and a timeline for the first three years of the Contract, along with measurable outcomes to be achieved. The action steps should focus on the contract start (execution) date and shall illustrate how the Offeror's operational areas will work in an integrated fashion to identify and address network needs.

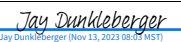
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Submission Evaluation Considerations:
 - Health Equity
 - Network Development Strategies
 - Other Notable Considerations

ARIZONA PHYSICIANS (PA, INC.	BANNER/UNIVERSITY CARE ADVANTAGE	HCBSAZ HEALTH CHOICE	HEALTH NET ACCESS	MERCY CARE
RATIONALE AND MAJOR OBSERVATIONS				
<p>Offeror identified specific access issues in rural areas and cited comparative data (e.g., primary care visits, inpatient hospital stays, behavioral health services, emergency room visits) to support its findings.</p> <p>Offeror described in detail its approaches for addressing capacity for HCBS and institutional services in rural areas, including its Health Equity Program incentive within VBP contracts, HCBS workforce investments, and technical/financial supports for Skilled Nursing Facilities.</p> <p>Offeror described innovative approaches for supporting caregivers, including grants to improve access to caregiver support groups and peer support resources for Hispanic families, and the use of caregiver coaches.</p> <p>Offeror described its experience in supporting SNFs to expand services and described its approaches for assisting rural nursing facilities seeking to expand into community-based care, including technical assistance and financial supports.</p>	<p>Offeror described its approach that considers the community and cultural uniqueness of each GSA. Offeror provided an example of a service shortage in the North GSA (Assisted Living Facilities) and its approach for addressing it.</p> <p>Offeror described its approaches for addressing capacity for HCBS and institutional services in rural areas, including provider partnerships, a VBP to incentivize whole-person care, telehealth and virtual clinics.</p> <p>Offeror described methods to increase providers' knowledge and skills, but did not describe clearly innovative approaches.</p> <p>Offeror generally described its approach for assisting rural nursing facilities seeking to expand into community-based care, including collaboration with the Arizona Health Care Association and technical assistance.</p>	<p>Offeror identified the need for additional direct care workers in rural areas and provided examples of programs to address access, including Northern Arizona Dementia Care Center of Excellence and the Northern Arizona BIV "Alliance ACO, but did not clearly describe the unique aspects of service areas.</p> <p>Offeror addressed the need for capacity for HCBS and institutional services in rural areas, including assignment for "in-network" status to preserve existing provider and facility relationships for at least one year, workforce development, VBP strategies, and financial supports. However, Offeror did not clearly describe how approaches address the needs of members in rural areas.</p> <p>Offeror described an innovative approach for addressing health equity and service capacity through scholarships for residents in rural communities and minority students.</p> <p>Offeror generally described its approaches for assisting rural nursing facilities seeking to expand into community-based care, including the Blue ALTCs Academy for education/training, investments and creation of NF Centers of Excellence for facilities that expand into community-based services.</p>	<p>Offeror described its approach that considers the community and cultural uniqueness of each GSA. Offeror provided examples of GSA-specific initiatives to address member needs, including a SNF-in-home pilot in the South GSA and specialized care for Hispanic members with dementia in Southeast Maricopa County.</p> <p>Offeror provided a detailed description of its approaches for addressing capacity for HCBS and institutional services in rural areas, including investments, technology-based tools, caregiver supports, transportation enhancements, and strategies for serving members with dementia, and strategies for supporting SNFs to provide specialized care.</p> <p>Offeror provided a detailed description in Network Development and Management Plan. Offeror described innovative approaches for addressing care gaps, including hotline for members and caregivers to request backup coverage and a dashboard that enables providers to track VIP targets.</p> <p>Offeror clearly described its approaches for assisting rural nursing facilities seeking to expand into community-based care, including collaboration with SNFs, technical support for SNFs to build respite service capacity, and development of a rural AZ SNF Center of Excellence that has expanded to community-based care.</p>	<p>Offeror described its network development strategy to address the needs of members across all settings and services but did not clearly describe unique aspects of service areas.</p> <p>Offeror described its approaches for addressing capacity for HCBS and institutional services in rural areas, including caregiver supports, specialty programs in SNFs/ALFs, community health worker supports, and provider supports/training.</p> <p>Offeror described innovative approaches for addressing health disparities and care gaps, including a bariatric program for SNF/ALF residents and supports for LGBTQ+ members.</p> <p>Offeror described its approaches for assisting rural nursing facilities seeking to expand into community-based care, including collaboration with SNFs and other stakeholders, and investments to support SNF efforts to expand to HCBS.</p>
<p>Offeror described strategies to monitor and address access to care and network adequacy, including stakeholder feedback and continuous network monitoring.</p> <p>Offeror identified data sources and analysis tools for monitoring access to care and network adequacy, including member/provider feedback, Quest Cloud analysis, Zellis Network 360°, state file review and competitive analysis.</p> <p>Offeror described strategies to address access to care in rural areas, including workforce development in Home Primary Care, mobile tools, e-consults, caregiver supports, and a SNF at Home pilot.</p> <p>Offeror described strategies to maximize available resources, including a pilot to divert avoidable ambulance and ER use, e-consults and the SNF at Home pilot.</p> <p>Offeror provided a three-year plan that included action steps and measurable outcomes, such as increases in the number of providers delivering new services and improvement in health disparities.</p>	<p>Offeror generally described strategies to monitor and address access to care and network adequacy, including community participation and governance and review of proactive/retrospective data sources.</p> <p>Offeror identified data sources and analysis tools for monitoring access to care and network adequacy, including member/provider feedback, and proactive/retrospective data sources and tools, such as the Revicore customized HCBS capacity tracker.</p> <p>Offeror generally described strategies to address access to care in rural areas, including workforce development, investment in health-related service needs of rural members, mobile tools and telehealth.</p> <p>Offeror generally described strategies to maximize available resources, including expansion of service delivery for existing providers, increasing mobile health, offering virtual clinics and contracting with providers in bordering states.</p> <p>Offeror provided a three-year plan that included action steps and measurable outcomes, such as contracting with additional providers and implementation of identified initiatives) but identified outcomes do not clearly address quality of care or systemic improvement.</p>	<p>Offeror indicated that it gathers and analyzes data as part of its approach for developing and maintaining its network but did not clearly describe how data is used.</p> <p>Offeror did not clearly describe data sources or analysis tools used to monitor access to care and network adequacy.</p> <p>Offeror described strategies to address access to care in rural areas, including workforce development, investments, mobile tools, and health insurance coverage for Self-Directed Attendant Care and other DCOs.</p> <p>Offeror described strategies to maximize available resources, including enhanced transportation reimbursement for providers, mobile tools and telehealth options.</p> <p>Offeror provided a three-year plan that included action steps and measurable outcomes, including metrics related to additional contracting, improved health outcomes and advancing health equity.</p>	<p>Offeror provided a detailed description of its plan to monitor and address access to care, that includes community collaboration, data analysis, review of AHCCCS program requirements, evaluation of its current network and other MCO network.</p> <p>Offeror fully described data sources and analysis tools for monitoring access to care and network adequacy, such as: feedback from members, the community, providers, and internal departments; geo-mapping; utilization data, health disparities data; appointment availability data, provider grievances and member grievances.</p> <p>Offeror described strategies to address access to care in rural areas, including workforce development, investments, mobile tools, caregiver supports, initiatives to address timely access to non-emergency transportation, and initiatives to provide care for members with specialized treatment needs, such as dementia, Substance Use Disorder and Traumatic Brain Injury.</p> <p>Offeror described strategies to maximize available resources, including initiatives to support provision of specialized care, mobile tools and caregiver supports.</p> <p>Offeror provided a three-year plan that included action steps and measurable outcomes, including metrics related to additional contracting, improved health outcomes and advancing health equity.</p>	<p>Offeror described strategies to monitor and address access to care and network adequacy, including community collaboration, extensive analysis of data and internal collaboration.</p> <p>Offeror identified data sources and analysis tools for monitoring access to care and network adequacy, including stakeholder feedback, utilization data, disparity data, electronic visit verification (EUV) information, member grievance data, satisfaction data, and social risk factor data.</p> <p>Offeror described strategies to address access to care in rural areas, including workforce development, caregiver and family supports, and development of SNF capacity to serve members with specialized needs.</p> <p>Offeror described strategies to maximize available resources, including a "Hospital and SNF at Home" program, virtual in-home care for members with complex conditions, mobile tools, and development of SNF capacity to serve members with specialized needs.</p> <p>Offeror provided a summary that generally described action steps in the first three years of the contract. Offeror identified measurable outcomes that it will monitor over the three-year period but Offeror did not clearly describe how outcomes relate to specific action steps.</p>
RANKING				
2	5	4	1	3

EVALUATOR FULL NAME (FIRST AND LAST): Christina Quast
EVALUATOR TITLE: Deputy Assistant Director of Managed Care Operations
DATE: Nov 9, 2023
SIGNATURE: 

EVALUATOR FULL NAME (FIRST AND LAST): Gini Britton
EVALUATOR TITLE: Operations Compliance officer
DATE: Nov 9, 2023
SIGNATURE: 

EVALUATOR FULL NAME (FIRST AND LAST): Jay Dunkleberger
EVALUATOR TITLE: Network Administrator
DATE: Nov 13, 2023
SIGNATURE: 
Jay Dunkleberger (Nov 13, 2023 10:35 AM)

FACILITATOR FULL NAME (FIRST AND LAST): Scott Wittman
DATE: Nov 13, 2023
SIGNATURE: 
Scott Wittman (Nov 13, 2023 10:35 CST)