

Amerigroup Iowa

Select Strengths

- 5.2 million members in 19 states
- Strong successful implementation experience
- Good pharmacy management plan
- Comprehensive approach to behavioral health, LTSS, and person-centered planning; LTSS Member satisfaction is >90%
- Recognition of the importance of social services like housing, employment, and transportation
- LTSS incentive programs including nursing facility transition incentives
- Good electronic access to after-hours care, web-based physician consultants as an alternative for members needing non-emergent care, 24/7 behavioral health consultation, and expanding telehealth; proposing enhanced services to fill the rural gap
- Goal of using habilitation to achieve outcomes in child welfare, juvenile justice, and education
- Comprehensive IT solution and strong suite of electronic tools and solutions to support care coordination, member services, providers, and members
- Demonstrate understanding of working with State institutions
- Broad VBP strategy
- Partnership with Wellmark BlueCross BlueShield in developing relationships with existing providers
- Network strategy demonstrates provider retention and includes providers in contiguous states
- Claims are processed daily and paid twice a week
- Alignment with Healthiest State Initiative
- UM focus on root cause
- Report strong PI results in other states
- Qualified and experienced interim leadership

Select Weaknesses

- Network development focus on physical health
- Low percentage of members in other states have SMI or IDD

UnitedHealthcare Plan of the River Valley, Inc.

Select Strengths

- 5.1 million members in 23 states
- Established network in IA
- Recognize social services are part of members' needs, including employment
- Good LTSS experience including utilization management and success in moving individuals from nursing facilities into the community; discuss providing in-lieu of services for facility transition and diversion
- Strong research capabilities
- Provided detailed insight on Iowa's initiatives
- Leverage hawk-i experience including IT and leadership team while bringing in national experts
- Waiver waitlist experience

Select Strengths and Weaknesses of Technical Proposals

- Comprehensive behavioral health approach including 24/7 crisis line
- Stated support for serving individuals in the most integrated setting
- Strategies for provider recruitment and work plans that include LTSS, behavioral health, and rural access
- Solid member and provider satisfaction results
- Strong demonstrated results of care coordination in other programs
- VBP experience including VIS and ACOs
- Experience with SUD block grants (IDPH)
- Comprehensive IT solution and strong suite of electronic tools and solutions including push notices and analytics
- Operational structure, business intelligence reporting team, and workflows support effective reporting

Select Weaknesses

- Unclear if understood DHS organizational structure
- LTSS experience is primarily with elderly
- 2 instances in which they failed to come to terms as part of contract negotiations

Wellcare Health Plans, Inc.

Select Strengths

- 2.3 million members in 9 states
- 8 offices in Iowa - headquarter in Des Moines with 2 regional offices and 5 locations using a welcome room concept with walk-in member services; open to support implementation
- Thoughtful approach to member services
- Member services help line available 30 days prior to go-live
- Preferred partnership with UnityPoint including care coordination strategy
- Strong successful implementation experience
- Acknowledge limited knowledge of IDPH
- Demonstrated an awareness of Iowa-specific health issues and proposed solutions; has begun coordination with regions and other community-based organizations
- Demonstrated understanding of integrating physical and behavioral health
- Facility transition success in other states and understand PASRR requirements
- Propose rural solutions including telemed and mobile health; leverage national agreements for ancillary services
- Multi-year plan for 100% VBP by 2018 with a blend of quality and cost efficiency measures
- Incentives for reduction of facilities and hospital use
- Provide special assistance for LTSS and members that cannot be reached by telephone
- Community liaisons will be staffed by Ticket to Work and Welfare to Work individuals as much as possible
- IT solution includes Medical Management Platform, extensive utilization analytics, and other comprehensive tools to integrate measurement, reporting, and care coordination; will incorporate VIS in MMP

Select Weaknesses

- 70% of member services staff located out of state

Select Strengths and Weaknesses of Technical Proposals

- Utilization management and prior authorization strategy lacked comprehensive detail for behavioral health and long term care

AmeriHealth Caritas Iowa, Inc.

Select Strengths

- Experience in 16 states and DC
- Headquarters and 3 community wellness centers in Iowa that provide in-person member services
- Let Us Know Program for providers to identify need for non-medical services
- Detailed staffing plan including PMO for implementation and readiness review
- 24/7 provider assistance line
- Good description of overall approach to behavioral health services
- Iowa specific research regarding LTSS; demonstrates understanding of current community care model; identifies Iowa specific issues and working with stakeholders to resolution; focus on comprehensive LTSS network
- Multiple opportunities for members, providers, and stakeholders to provide input and advice
- VBP experience including ACOs; VIS in 6 other markets
- Address rural strategy including telemed and mobile services
- Care plans are designed for member accessibility and success
- Good alignment with Healthiest State Initiative and MHDS system
- 24/7 utilization management decision reviews
- Comprehensive IT solution including dashboard and utilization reporting, mobile apps, telemonitoring, provider profiling and trending
- Strong analytics team and focus on data-driven change

Select Weaknesses

- Limited description of interface with other state agencies
- LTSS primarily emphasizes services for elderly
- Frequency of level of care reassessment in care coordination
- Nurse call line may require member call back for resolution
- No interim key personnel named and no details on how they intend to fill positions

Iowa Total Care, Inc.

Select Strengths

- Leadership and member-facing functions are local
- Successful implementation in other markets – dedicated corporate implementation and integration team
- Call center is open 30 days before go-live and pre-go-live member-focused presentations
- Behavioral health section is well rounded and has a foundation of good values
- Recognize social determinants of health as key
- Continuum of VBP models – experience with VIS in another state
- Regular care management meetings with members on waiver waitlist
- Addressed maximizing waiver access while managing costs
- Mobile crisis, telehealth, and telemonitoring for remote areas

Select Strengths and Weaknesses of Technical Proposals

- Strategies to align with Healthiest State Initiatives
- Well-developed member services strategy
- Strong QM/QI results with solid dashboards and provider reports
- HCBS assessment tool with predictive algorithm provides objective guidelines for services and units
- Report strong PI results in other plans
- Good IT solution including push messaging and alerts, dashboard reporting scorecards, data visualization tools, and drilldown capabilities

Select Weaknesses

- Did not fully reflect an understanding of key responsibilities including PASRR, working with SRCs, ADA, *Olmstead*, and critical incident reporting
- Limited recognition and detail on some provider types re: network
- Heavy corporate representation on the stakeholder advisory board
- Quality management program is primarily focused on physical health
- No interim key personnel named
- Several instances of PBM termination
- One instance where failed to come to terms on rates as part of contract negotiations

Aetna Better Health Iowa Inc.

Select Strengths

- 3 million members in 17 states
- Existing networks in Iowa and border states
- Current Qualified Health Plan in Iowa (Coventry)
- Detailed approach to implementation process and identified implementation director
- Proactively meeting with providers, community based organizations, and stakeholders
- Knowledge of community-based options and encouraging members to live in the least-restrictive environment
- VBP strategy includes pay-for-performance and pay-for-quality; designed for all providers to participate at some level
- Teen crisis text line; 24 hour behavioral health crisis hotline
- Well-written material for members
- Parking lot approach to prioritize care planning; simple, easy to understand care plans
- Strategies to align with state quality initiatives; SIM and multipayer experience in other states
- Technology solutions include automated prompts, telemonitoring, telemedicine, and remote monitoring (Safe at Home)
- Informatics and analytics team uses reporting engine to submit timely and accurate reports
- 16 of 18 key staff identified

Select Weaknesses

- Lacked Iowa focus in proposed solutions
- Incomplete description of interface with other state agencies
- Organizational structure and position minimum requirements do not align with expectations
- Limited success in other states at transitioning LTSS members to community settings

Select Strengths and Weaknesses of Technical Proposals

- Frequency of level of care reassessment in care coordination
- Do not address all claims submission standards and Encounter data issues in other states
- All named key staff are interim

Magellan Complete Care of Iowa, Inc.

Select Strengths

- Experience with 7 states
- Experience in BHIS, PMIC, HAB, IHH, consumer and family experience teams, provider integration committee, and Magellan senior connect help line
- Iowa IHH experience with encouraging results
- Experience with IDPH and block grant
- Existing administrative infrastructure, staff, and behavioral health network in Iowa including telemed
- Many key personnel established in Iowa
- 24/7 member services helpline and nurse line located in Iowa
- Identify support for Healthiest State Initiative including value-add with HyVee
- Phased approach to VBP – currently work with VIS
- Reported overall provider satisfaction is high
- Established technological interfaces with Iowa
- Member services staff have access to a variety of tools; care management system includes task management alerts and care plan history; provider profiling and dashboards; customer dashboard reporting
- Utilization management strategies that promote health literacy

Select Weaknesses

- Description of interface with other state agencies is not comprehensive
- Does not adequately address continuous integration/communication across all providers
- General lack of clarity and specificity around LTSS approach including CCO and community-based case management
- Frequency of LTSS assessment
- Lack detail on identifying gaps and credentialing providers who are not currently in Iowa network
- Member services approach lacks some essential consideration of member needs
- Critical incident reporting and management is lacking clarity and understanding
- Utilization management response lacks comprehensive strategy
- Limited description of data centers including scalability
- Do not address required Encounter data submission requirements
- Did not report HEDIS scores

Molina Healthcare Inc.

Select Strengths

- 3.2 million members in 12 states
- Describe several effective approaches to behavioral health recovery
- Telehealth, telemonitoring, and telepsychiatry; border contracting to supplement rural network
- Recognizes need to achieve quality of life outcomes for LTSS members

Select Strengths and Weaknesses of Technical Proposals

- 100% VBP by 2018
- Stakeholder training in 90 days prior to go-live
- Some positive demonstrated results for care coordination; disease management opt out is less than 1%
- Support Healthiest State Initiative, SIM, and ACO contracting
- Reported encounter submission process is almost 100% accurate
- Molina analyst forum for information sharing across the organization

Select Weaknesses

- Organizational structure, staffing details, and position minimum requirements are not aligned and do not meet expectations
- Approach to implementation and readiness review does not align with expected timelines
- Multiple case managers on a single case
- LTSS approach does not recognize Iowa specifics including some RFP requirements
- Limited detail regarding network development and adequacy
- Limited response to Iowa member services requirements
- Not clear if integrated care management will be offered across all populations
- Care coordination approach not tailored to Iowa
- Limited understanding of MHDS regional design and IDPH block grant
- Utilization management and prior authorization do not adequately address LTSS and behavioral health; limited knowledge of services available in Iowa
- Did not adequately address Program Integrity requirements
- Member financial participation monitoring/notification appears to be manual and retrospective; does not address Iowa requirements
- Named positions are all interim; did not provide a clear plan to staff program

Medica Health Plans

Select Strengths

- Experience in 1 state
- Ranked #11 in top 15 Medicaid insurance plans and received top NCQA ranking of “Excellent”
- Research team with 11 PhDs
- PMO for Readiness Review and implementation process
- Good understanding of behavioral health principles and values
- Currently using VBP models and has experience
- Text4Life program for teen suicide prevention
- Clinical management system tracks member communication and activity
- Method for promoting health literacy through UM process
- Report strong PI results

Select Weaknesses

- Unclear or incomplete response to many RFP requirements
- Does not clearly define an Iowa strategy
- Limited detail regarding readiness review and lack of alignment with state timeline
- Limited strategy for coordination with other state agencies

Select Strengths and Weaknesses of Technical Proposals

- No reference to *Olmstead*, ADA, or the importance of employment for LTSS
- General lack of detail related to network development; does not clearly address LTSS or behavioral health
- Critical incident remediation is unclear
- Do not meet prior authorization timeframe requirement per RFP
- Limited information on systems to suggest scalability
- Most staffing TBD

Meridian Health Plan

Select Strengths

- 700,000 members
- 3 plans in NCQA top 100
- Established network in 49 Iowa counties for physical health
- Some existing administrative infrastructure in Iowa including 18 full time employees
- Reference recovery oriented services and some evidence-based practices for behavioral health; subcontractor has proven experience in behavioral health
- CIO 100 award for 5 of the last 7 years
- Offer services and non-waiver supports to members on waitlist
- Focus groups and stakeholder engagement incorporated into QI/PI
- Strong demonstrated results for reduction of ER use, urgent care use and inpatient utilization
- Care plans are clear, easy to understand, and automatically identify short- and long-term goals
- Currently provide data to incorporate into VIS
- Strong in physical health and epidemiological analysis

Select Weaknesses

- Limited strategies for coordination with other state agencies including IDPH
- Do not address Agency Readiness Review
- Large number of subcontract relationships with lack of clarity on management or integration
- Lack detail and clarity in meeting some pharmacy requirements
- Lack of understanding of some behavioral health programs and interventions
- LTSS section does not include *Olmstead*, ADA, HCBS settings and rules, or employment
- Did not demonstrate understanding of distinct waivers and service types
- Not implementing cost sharing and waiving patient liability for institutional and waiver care
- Provider network focuses on physical health providers
- Limited implementation support for members
- Did not fully address quality management and improvement requirements as requested in RFP
- Provides limited detail about subcontractor utilization management and prior authorization criteria and do not fully address RFP requirements for utilization management/prior authorization
- Does not fully address RFP requirements for program integrity
- Several key positions are open and most of key personnel appear to be out-of-state