

VIA HAND-DELIVERY

Chief Legal Counsel
Lewis George, Esq.
ODJFS Office of Legal & Acquisition Services
30 East Broad Street, 31st Floor
Columbus, Ohio 43215-0423

Re: **Request for Applications – Ohio Integrated Care Delivery System (ICDS)**
RFA Number: JFSR1213078038

RECORDED 12 JUL 18 PM 0250

Dear Mr. George:

Pursuant to Section III.F of the Request for Applications JFSR1213078038 (“RFA”) UnitedHealthcare Community Plan of Ohio, Inc. (“UnitedHealthcare”) respectfully submits this protest and requests reconsideration of the scoring of its application.

I. INTRODUCTION

UnitedHealthcare is proud to have served vulnerable populations in Ohio since 2000 and is pleased to be among the highest scoring Applicants in five of the regions designated by the Ohio Department of Job and Family Services (“ODJFS”) in the RFA. UnitedHealthcare supports the objectives of ODJFS and its innovative approach to meeting the needs of Medicare and Medicaid enrollees through an Integrated Care Delivery System. Our team looks forward to helping these individuals live healthier lives by delivering high quality, cost effective, and coordinated services based on our experience and intimate understanding of the challenges facing this population.

UnitedHealthcare greatly appreciates ODJFS’s efforts to conduct this procurement in a fair and open manner and to comply with state and federal procurement laws. However, a review of UnitedHealthcare’s scores, as calculated by ODJFS, has revealed what we believe to be a discrepancy with our supporting materials. UnitedHealthcare further believes this discrepancy may materially impact the final award. Consequently, we respectfully request that ODJFS review UnitedHealthcare’s submitted materials in support of its bid and recalculate our scores in Appendices C, D, and E for the reasons outlined below.

II. APPENDIX C – CLINICAL PERFORMANCE

Appendix C of the RFA is the clinical performance component of the evaluation of UnitedHealthcare's application. The stated purpose of this Appendix is to evaluate an Applicant's success at improving and/or sustaining high levels of positive health outcomes.

In Appendix C, Section 1.a, UnitedHealthcare reported audited HEDIS/CAHPS Medicare Results for its experience in Arizona (H303). The scoring sheets reveal that full points were initially awarded but subsequently subtracted for being "Not Validated" for the measurements in 1,2,3,4,5,8 and 24 of Table 2.

The scoring instructions for Table 2 of this section state that each score contained therein is to be validated with 1) the final, auditor-locked IDDS data-filled workbook and audit designation table for self-reported audited HEDIS data; and 2) the Medicare-only CAHPS results with an attestation from the CMS-approved Medicare CAHPS vendor verifying the accuracy of each set of Medicare HEDIS results reported in Appendix C, which was due on June 4, 2012.

We believe that the loss of points in measurement 1 (*Pneumonia Vaccination Status for Older Adults ≥ 65 Years of Age (HEDIS CAHPS Medicare Health Plan Survey)*) and measurement 24 (*Rating of Health Plan (HEDIS CAHPS Medicare Health Plan Survey)*) may have been the result of a clerical error or oversight. Validation documentation of measurements 1 and 24 were in fact included in our response to the ODJFS Alert, Clarification and Revision to Appendix C, Clinical Performance, Section 1.a., Item 4, (see pages 34 and 68), which was properly submitted on June 4, 2012.¹ Accordingly, the determination in ODJFS's scoring resulted in UnitedHealthcare losing 282.8948 and 298.8948 points respectively, or a total of 565.7896 points.

UnitedHealthcare appreciates that ODJFS has full discretion whether or not to require that measurements reported by Applicants in RFA submissions be validated. In this case, validation of these measurements was a stated requirement of the scoring process. We believe that UnitedHealthcare's measurements were properly validated through the materials submitted and on file with ODJFS. Accordingly, since ODJFS had and still has the required information to validate these measures, UnitedHealthcare respectfully requests that ODJFS review these materials and award UnitedHealthcare an additional 565.7896 points in Section 1.a of Appendix C.

III. APPENDIX D – CARE COORDINATION

Appendix D of the RFA is intended to evaluate Applicants' success and experience in promoting a cohesive delivery system, where communication is clear and ensures that individual providers

¹ See 2011 Medicare Advantage CAHPS Results Report for: SecureHorizons by UnitedHealthcare (H0303).

have access to accurate and timely information in order to optimize care. UnitedHealthcare has the necessary experience and is prepared to play a pivotal role in the implementation of strategies that are designed to improve the health outcomes and experience of care for Medicare-Medicaid enrollees. However, UnitedHealthcare does not believe its score in Appendix D fully credits our experience as documented in Appendix D, Part A, Section 4.a, and as supported by our submitted materials.

Appendix D, Part A, Section 4.a evaluates the Applicants’ experience as of March 31, 2102 with assessing various domains for enrollees. UnitedHealthcare apparently lost points because ODJFS was unable to find validation documentation for specific domains. However, such validation documentation was included in our RFA response and was available to ODJFS at the time it scored the application. The domains in question and their point values include:

| Domain | State | Appendix D-4 Validation Page No. | Points |
|--|--------------|---|---------------|
| Medical & behavioral health history | AZ | 3,6 | 30 |
| Social needs | MA | 3 | 30 |
| | NM | 3 | 30 |
| Nutritional needs | AZ | 3 | 30 |
| Long term services and supports | AZ | 3 | 30 |
| Health and welfare | AZ | 5 | 30 |
| Natural supports, including family and community | AZ | 6 | 30 |

TOTAL 210

ODJFS’ scoring notes, which were handwritten at the bottom of Appendix D, Part A, Section 4.a, indicate that the “Review Team did not find validation” for any of the domains in the above table. Thus, UnitedHealthcare received zero points for these domains.

As we noted earlier, ODJFS has discretion as to when it chooses to validate an Applicant’s responses to RFA questions. However, when validation is a required component to scoring RFA questions, it is incumbent on ODJFS to conduct a thorough review of the documentation that the Applicant has provided. For the domains cited above, UnitedHealthcare provided ODJFS with all the necessary information. Accordingly, UnitedHealthcare requests that ODJFS review UnitedHealthcare’s submitted materials for this Appendix and award UnitedHealthcare an additional 210 points for its response to Appendix D.

IV. APPENDIX E – PROVIDER RELATIONS AND INCIDENT MANAGEMENT

UnitedHealthcare has dedicated significant resources to provider relations and has given great consideration to geographic accessibility and existing utilization patterns in developing our provider panel. In doing so, we have developed and can demonstrate more than adequate provider capacity to meet the Medicare-Medicaid Panel Adequacy requirements for the regions for which we have applied. However, we did not provide a responsive essay to Appendix E.1, as required, resulting in our score being reduced by 2500 points after these points were initially awarded. UnitedHealthcare respectfully requests that ODJFS reconsider this reduction in score for several reasons.

First, the RFA did not originally request a responsive essay to Appendix E.1. The RFA Scoring: Section E.1 states:

(1) ODJFS will award points only for LTC provider/service types for which the Applicant:

a. Enters an "X" to indicate, for each specific LTC provider/service type, more Than 12 months direct experience contracting with, and reimbursing, community-based long term care providers to serve Medicaid populations, AND

b. Enters appropriate information, for each specific LTC provider/service type, to indicate at least one State and Line of Business, Submitted in Appendix B, for which the Applicant had direct experience at contracting with, and reimbursing, the associated community-based long term care provider to serve Medicaid or dual eligible populations

(2) For services where both of the conditions above are met, ODJFS will award points as follows:

a. 150 points for each LTC provider/service types for which the Applicant indicates ONE State and Line of Business, Submitted in Appendix B

b. 313 points for each LTC provider/service types for which the Applicant indicates TWO States and Lines of Business, Submitted in Appendix B

(3) The total score for this question will be limited to 2,500 points²

Under these instructions, UnitedHealthcare met all of the requirements to achieve a maximum score of 2500 points in Appendix E.1 under the scoring methodology.

The requirement of a responsive essay to Appendix E.1 first appeared in the Q&A posted by ODJFS on May 10, 2012.³ Subsequent to the release of the Q & A, ODJFS then amended the

² RFA Appendix E., pg. 6.

³ RFA Q & A, No. 183, pg. 17.

RFA appendices based on the clarifications provided in all appendices *except Appendix E*. UnitedHealthcare then failed to respond to the added requirement of a responsive essay to Appendix E.1, causing its score to be reduced by 2500 points which had been previously awarded.

In addition, Section III.B.3 Essay Requirements, states:

*Essay answers must comply with the following requirements. Any answer that does not meet the requirements of this section will be excluded from consideration and **will be sent back to the Applicant for correction**; the correction must be submitted by 5:00 pm on the second business day following the day ODJFS returns the essay for correction.*

(emphasis added.)

UnitedHealthcare acknowledges that it had an obligation to take into account any information communicated by ODJFS in the final Q&A. Nevertheless, UnitedHealthcare did correctly respond to Appendix E.1 as it was originally drafted and as it is currently drafted today. Moreover, ODJFS has not updated Appendix E.1 to conform to the clarifications in the Q&A as it did with all other Appendices. Finally, ODJFS never afforded UnitedHealthcare the opportunity to amend its response to Appendix E.1, as required by Section III.B.3 of the RFA.

Accordingly, UnitedHealthcare respectfully requests that ODJFS consider UnitedHealthcare's compliance with Appendix E.1 as written and re-award UnitedHealthcare the 2500 points that it subtracted. In the alternative, UnitedHealthcare respectfully requests that ODJFS give UnitedHealthcare partial credit for responding to Appendix E.1 as written and award UnitedHealthcare points commensurate with its response.

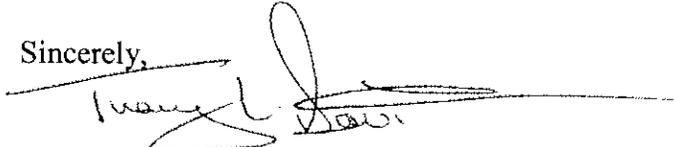
V. REQUEST FOR RULING & FORM OF RELIEF

UnitedHealthcare once again wishes to express our deepest appreciation to ODJFS for its efforts to conduct this procurement in a fair and open manner and to comply with state and federal procurement laws. We further look forward to working with ODJFS in providing much needed care and services to Ohio's MME population.

In order to best serve these populations and meet the goals of the RFA process, UnitedHealthcare respectfully requests a ruling on the foregoing facts. Specifically, UnitedHealthcare requests that ODJFS confirm the validation of the responses discussed herein, and grant the relief with an award of an additional (1) 565.7896 points in Appendix C, Section 1.a; (2) 210 points in Appendix D, Part A, Section 4.a; and (3) 2500 points in Appendix E.1. or an amount commensurate with UnitedHealthcare's response.

Thank you for your consideration. If you have any questions or require additional information, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Tracy L. Davidson", is written over a horizontal line. The signature is fluid and cursive, with a large loop at the end.

Tracy L. Davidson
President
UnitedHealthcare Community Plan of Ohio
9200 Worthington Road - 3rd Floor
Westerville, Ohio 43082
Office: 614-410-7474
Cell: 614-581-8512
Tracy_L_Davidson@uhc.com