

Nevada Division of Insurance

PY25 Network Adequacy Declaration Document

1. Carrier affirms that:
 - a. it will comply with Nevada’s Network Adequacy laws and regulations.
Yes No
 - b. any Qualified Health Plans (QHPs) offered will comply with 45 CFR § 156.230.
Yes No
 - c. it will maintain a network that is sufficient in number and types of providers to assure that all services will be accessible without unreasonable delay. This includes providers that specialize in mental health and substance related disorder services for all plans except dental plans.
Yes No
 - d. the providers listed in the annual submission are practicing within the specialty indicated.
Yes No
 - e. the providers listed in the annual submission have an open panel.
Yes No
 - f. it will provide the internal appointment wait time standards and provider to enrollee ratio standards as requested by the Division.
Yes No
 - g. network data provided is representative of contracts expected to be in place 01/01/2025 and that all data submitted is accurate and current as of the date of filing.
Yes No
 - h. it will maintain current provider directory links.
Yes No

If any response is “No”, a justification must be provided. Justifications will be reviewed by the Nevada Division of Insurance on a case-by-case basis in review of this form.

2. Please provide a detailed description of the company’s process for updating your provider directory to comply with NAC 687B.778.
3. Please provide a list of Telehealth services.
 - a. Please indicate the total number of providers offering telehealth.
 - b. Please attach a separate exhibit displaying telehealth utilization by specialty and county for your membership for Plan Year 2023. Utilization must provide a monthly breakdown for the entire year and reflect claim data received as of March 31, 2024. The exhibit must include utilization based on percentage of membership and the total number of visits.

Date

Signature/Title