

Nevada Division of Insurance
Department of Business & Industry



Network Adequacy Advisory Council

August 17, 2017

Nevada Division of Insurance
Department of Business & Industry



Network Adequacy

Medicaid Data



Provider Network Access Analysis

- Provider Access Metrics
 - Provider Capacity
 - Geographic Network Distribution
 - Appointment Availability



Provider Categories Included in the Network Analysis

Primary Care Physicians and Specialists		
Primary Care Providers	Geriatrics	Pediatric Physical Health Specialists
PCP Extenders	Infectious Disease	Psychiatry
Allergists	Maternal/Fetal Medicine	Pulmonary Medicine
Anesthesiologists	Mental Health Outpatient Services	Radiology
Cardiology	Nephrology	Rehabilitation
Dentists	Neurology	Rheumatology
Dermatology	OB/GYN	Urology
Ear Nose and Throat	Oncology/Hematology	Vision
Endocrinology	Orthopedic Medicine	Other Surgeries
Gastroenterology	Pathology	
General Surgery	Pediatric Mental Health Specialists	
Facilities and Specialty Providers		
Ambulatory Surgery Centers	Inpatient Hospital	Psychiatric Inpatient Hospital
Dialyses/ESRD Facility	Intermediate Care Facilities/ID	Rehabilitation
Home Health	Outpatient Hospital	Skilled Nursing Facility
Hospice	Personal Care Attendants (PCA)	

Source: SFY 2014-2015 Provider Network Access Analysis: Table 3-1



Medicaid Standards

Table 3-5 Access Standards for Appointment Availability	
Provider/Appointment Type	Appointment Availability Standard
Primary Care Providers	1:1,500
PCP Extenders	1:1,800
Dental (Routine)	1:1,500

Table 3-6 Access Standards for the Time/Distance Analysis	
Provider Category	Distance-Based Access Standard
Primary Care Providers	1 provider within 25 miles
PCP Extenders	1 provider within 25 miles

Table 3-7 Access Standards for Appointment Availability	
Provider/Appointment Type	Appointment Availability Standard
PCP Appointments (Routine)	2 weeks (or 14 calendar days)
Specialists (Routine)	30 calendar days
Dental (Routine)	30 calendar days
Prenatal Care – 1 st & 2 nd Trimester	7 calendar days
Prenatal Care – 3 rd Trimester	3 calendar days

Source: SFY 2014-2015 Provider Network Access Analysis

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CMS Toolkit

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CMS Toolkit

Table III.3 Quantitative network adequacy standards applicable to some Marketplace plans, January 2014

Network Standard	States
Maximum travel time or distance	23 states: AL,* AZ,* CA, DE, FL,* IL, KY, MI, MN,* MO,* MT,* NV, NH, NJ, NM, NY, OK,* PA,* SC,TN,* TX, VT, WV*
Provider-to-enrollee ratios	10 states: CA, DE, IL, ME, MT,* NV, NM, NY, SC, WV*
Maximum appointment wait times	11 states: AZ*, CA,* DE, FL,* MO,* MT,* NH, NJ, NM, TX, VT
Extended hours of operation	7 states: CA, IL, MN,* MO,* RI, VA, WI*

Source: Promoting Access in Medicaid and CHIP Managed Care: A Toolkit for Ensuring Provider Network Adequacy and Service Availability (CMS) , Giovanelli, Justin, Kevin W. Lucia, and Sabrina Corlette. "Implementing the Affordable Care Act: State Regulation of Marketplace Plan Provider Networks." Pub. 1814. The Commonwealth Fund, May 2015.

Notes: State network adequacy standards may apply broadly to all network plans or more narrowly to specified network designs (HMOs, for example) or plan types (Marketplace plans, for example). Standards identified in this exhibit and in the text are applicable to Marketplace plans in either of two ways: (1) through state action that specifically identifies the requirements for such plans; or (2) to the extent a Marketplace plan uses a network design (HMO, for example) regulated by the state standard.

* Standard applies only to specific types of network plans and does not regulate all Marketplace plans generally.

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Other State Standards

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Colorado Network Adequacy Regulations Regulation 4-2-53

Service Type	Time Frame	Time Frame Goal
Emergency Care – Medical, Behavioral, Substance Abuse	24 hours a day, 7 days a week	Met 100% of the time
Urgent Care – Medical, Behavioral, Mental Health and Substance Abuse	Within 24 hours	Met 100% of the time
Primary Care – Routine, non-urgent symptoms	Within 7 calendar days	Met ≥ 90% of the time
Behavioral Health, Mental Health and Substance Abuse Care – Routine, non-urgent, non-emergency	Within 7 calendar days	Met ≥ 90% of the time
Prenatal Care	Within 7 calendar days	Met ≥ 90% of the time
Primary Care Access to after-hours care	Office number answered 24 hrs./ 7 days a week by answering service or instructions on how to reach a physician	Met ≥ 90% of the time
Preventive visit/well visits	Within 30 calendar days	Met ≥ 90% of the time
Specialty Care - non urgent	Within 60 calendar days	Met ≥ 90% of the time

Provider/Facility Type	Large Metro	Metro	Micro
Primary Care	1:1000	1:1000	1:1000
Pediatrics	1:1000	1:1000	1:1000
OB/GYN	1:1000	1:1000	1:1000
Mental health, behavioral health and substance abuse disorder care providers	1:1000	1:1000	1:1000

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Colorado Network Adequacy Regulations

Specialty	Specialty
Primary Care	Psychiatry
Gynecology, OB/GYN	Psychology
Pediatrics - Routine/Primary Care	Pulmonology
Allergy and Immunology	Rheumatology
Cardiothoracic Surgery	Urology
Cardiovascular Disease	Vascular Surgery
Chiropracty	OTHER MEDICAL PROVIDER
Dermatology	Dental
Endocrinology	Pharmacy
ENT/Otolaryngology	Acute Inpatient Hospitals
Gastroenterology	Cardiac Surgery Program
General Surgery	Cardiac Catheterization Services
Gynecology only	Critical Care Services – Intensive Care Units
Infectious Diseases	Outpatient Dialysis
Licensed Clinical Social Worker	Surgical Services (Outpatient or ASC)
Nephrology	Skilled Nursing Facilities
Neurology	Diagnostic Radiology
Neurological Surgery	Mammography
Oncology - Medical, Surgical	Physical Therapy
Oncology - Radiation/Radiation Oncology	Occupational Therapy
Ophthalmology	Speech Therapy
Orthopedic Surgery	Inpatient Psychiatric Facility
Physiatry, Rehabilitative Medicine	Orthotics and Prosthetics
Plastic Surgery	Outpatient Infusion/Chemotherapy
Podiatry	OTHER FACILITIES



Washington Network Adequacy Standards

Appointment Wait Times	
Category	Standard
Primary Care Provider	10 Days
Specialist (Non-urgent)	15 Days
Urgent Appointment (No Prior Authorization Required)	48 Hours
Urgent Appointment (Prior Authorization Required)	96 Hours

Provider to Enrollee Ratios	Standard
Primary Care Provider	≥ Prior Year State Average



Washington Network Adequacy Standards

Distance Standards

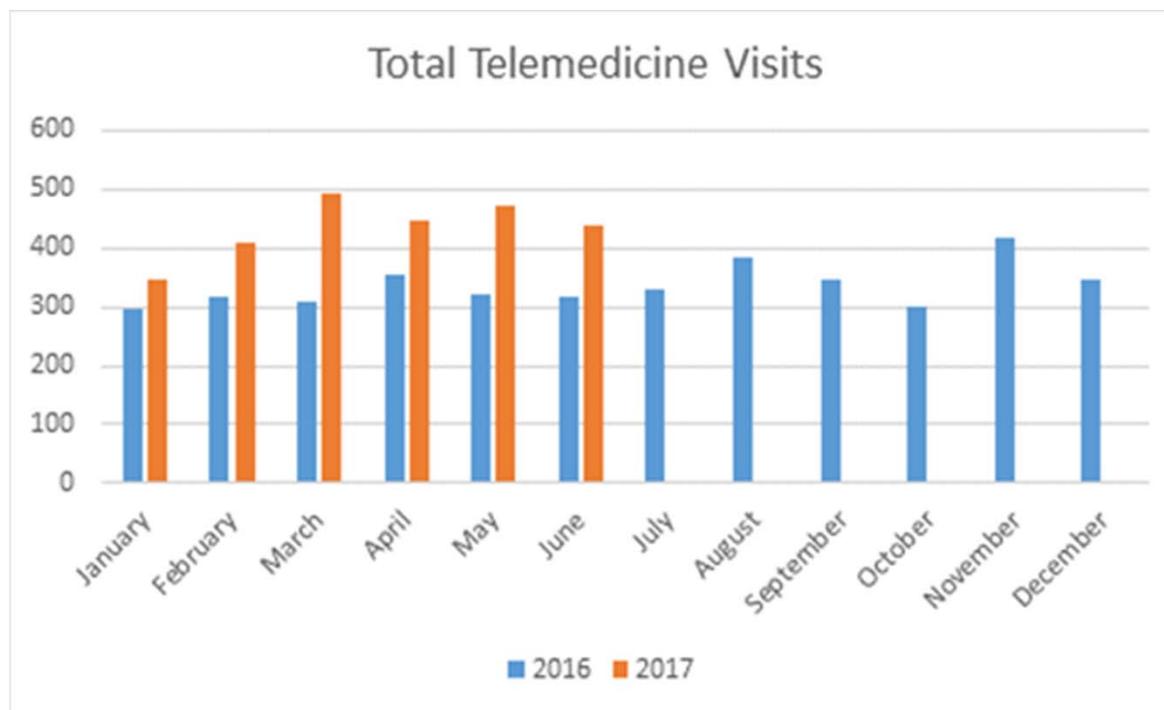
Provider Type	Urban	Rural	Population Requirement
	Miles	Miles	
Primary Care Provider	30	60	80%
Hospital and Emergency Services	30	60	100%
Mental Health Provider (General)	30	60	80%
Mental Health Provider (Specialty)	Adequate		80%
Pediatric Services (General)	30	60	80%
Pediatric Services (Specialty)	60	90	80%
Specialty Services (ABMS)	Adequate		80%
Therapy Services	30	60	80%
Home Health, Hospice, Vision, Dental Providers	Adequate		
Pharmacy dispensing services	Adequate		

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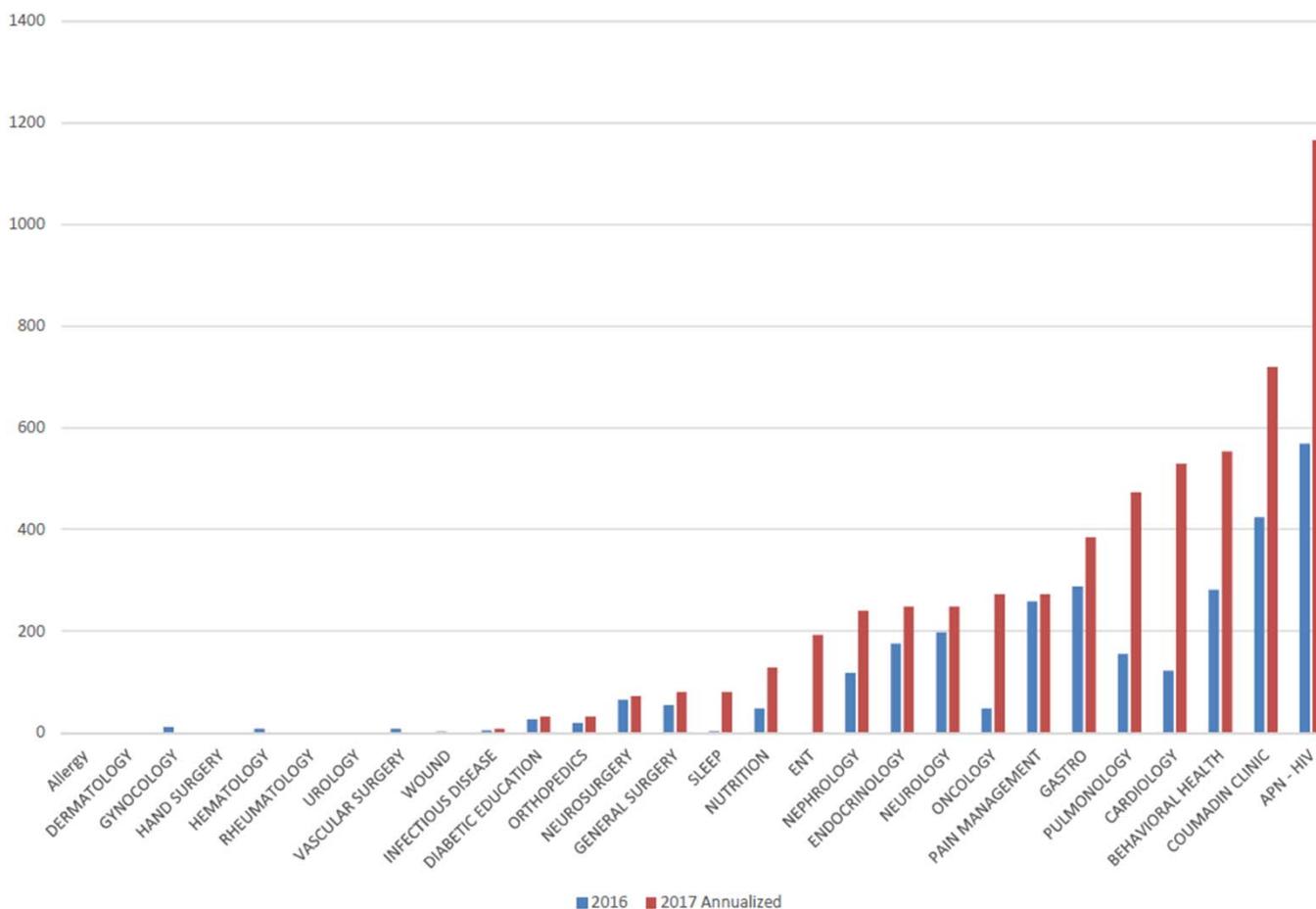
Telemedicine





Telemedicine

Referrals by Specialty





Questions

