

Report on the Plan Year 2018 Recommendations
For Network Adequacy Standards

Presented by:
The Network Adequacy Advisory Council

To:
Barbara Richardson
Commissioner of Insurance
Nevada Division of Insurance

Prepared by:
Deborah Loesch-Griffin, Ph.D.
NAAC Facilitator

September 12, 2016

Network Adequacy Standards for Plan Year 2018

Overview of the NAAC Recommendations Process. This section includes a description of the:

- 1) Commencement of the Network Adequacy Advisory Council (heretofore referred to as Council or NAAC)
- 2) Process of NAAC meetings
- 3) Timeline and significant discussions made at each of the five meetings.

The NAAC is comprised of nine individuals representing consumers across Nevada, providers of health care services, and health insurance carriers. The Council met first on June 15, 2016 as dictated by regulation RO49-14 and continued to meet through September 12, 2016 to finalize the recommendations for Plan Year 2018. The Council recommends these standards to achieve network adequacy for individual and small employer group health benefit plans.

At the June 15, 2016 meeting the Council created its vision for what it hoped to achieve during the 2016 sessions. The vision is:

- Standards are pragmatic, achievable and meaningful.

In addition, the Council wanted to ensure that conditions were created that would:

- 1) Maximize access to care and insurance for all consumers.
- 2) Ensure that services are affordable across the state.
- 3) Costs are contained for insurance carriers offering products to consumers.

The data that the Nevada Division of Insurance (DOI) was able to provide the Council assisted the Council to: 1) make some recommendations that aligned with its vision and 2) consider what the implications of such recommendations might be on the three conditions it had established as requisites for achieving its vision. It should be noted that the DOI was unable to provide some of the data that was requested by the Council. This will be discussed more fully in the section following the recommended standard.

A total of five public meetings were conducted. The result of these meetings is contained in this Report that will be submitted to the Commissioner of Insurance on September 15, 2016.¹

June 15th – At this meeting, the Council laid out the vision and process for subsequent sessions, using a workshop format. The Council established

¹ The video recordings of the meetings and supporting materials are available on the Division website at http://doi.nv.gov/Insurers/Life_and_Health/Network_Adequacy_Advisory_Council/. Included in the Appendix of this Report are the minutes of each meeting.

agreements for decision-making, communication, and consideration of multiple perspectives, from both within the Council and from the public.

July 22nd –At this meeting, the Council reviewed the data requested. The Council generated a series of nine recommendations and/or considerations and discussed the value, feasibility and practicality of each.

August 1st –At this meeting, the DOI presented the Council with additional findings from data analyses requested at the July 22nd meeting. The Council considered the impact of this information on its nine recommendations. Based on new information the Council eliminated some of the earlier recommendations.

August 17th –At this meeting, the DOI presented the Council with additional findings from data analyses requested at the August 1st meeting and the Council reconsidered the recommendations given this new information. The Council reviewed and revised the draft of this Report.

September 12th – At this meeting, the Council approved the final Report.

Council's Recommendation for Plan Year 2018.

From the outset, the Council has been aware of the fact that plan year 2017 standards are largely requirements mandated by Centers for Medicare & Medicaid Services (CMS). Any proposed changes to future standards must consider the ability of carriers to meet any changes to existing standards. At a minimum, a complete assessment of the impact of existing standards and proposed changes to plan year 2018 standards will require better data and a more comprehensive methodological approach to evaluating the impact of all network adequacy standards.

With these caveats, the Council recommends the following:²

1. Add pediatrics as a separate provider category with modification to time/distance criteria: changing METRO to 25 minutes/15 miles and Counties with Extreme Access Considerations (CEAC) to 105 minutes/90 miles.

The current NAAC recommendation for 2018 would be in addition to the requirements outlined in the CMS call letter for 2018.

² The recommendation was based on a Council vote with seven in favor and two against

2017 Network Adequacy Template based on CMS 2016 Call Letter

	Specialty	Specialty Codes	Metro		Micro		Rural		CEAC	
			Max Time (Mins)	Max Distance (Miles)						
Provider	Primary Care	001,002,003,005, & 006	15	10	30	20	40	30	70	60
	Endocrinology	12	60	40	100	75	110	90	145	130
	Infectious Diseases	17	60	40	100	75	110	90	145	130
	Mental Health	029, 102, & 103	45	30	60	45	75	60	110	100
	Oncology - Medical/Surgical	21	45	30	60	45	75	60	110	100
	Oncology - Radiation/Radiology	22	60	40	100	75	110	90	145	130
	Rheumatology	31	60	40	100	75	110	90	145	130
	<i>Pediatrics (recommended to be added in 2018)</i>	101	25	15	30	20	40	30	105	90
Facility	Hospitals	040 & 043	45	30	80	60	75	60	110	100
	Outpatient Dialysis	44	45	30	80	60	90	75	125	110

Rationale and Criteria for Recommended Standards. The recommendation above, based on extensive discussion by the Council, related to whether additional standards would have a positive impact on:

- Network adequacy
- Consumer access to high quality health services
- Affordability and the capacity of carriers to offer products to both individuals and small groups
- Expansion of the number of insured

Going forward, the Council agrees to maintain service areas as the geographic criteria for establishing network adequacy. County level data revealed that in many counties, network adequacy standards could not be met, based on the CMS floor for required provider categories and facilities. Further, the risk of carriers dropping coverage for a particular county, or withdrawing products from consumers was too great at this time to warrant a county level criteria for network adequacy.

The rationale for including pediatric services as a stand-alone category is based on state statute that requires insurance policies and plans to provide an option of coverage for screening and treatment of autism and the importance of pediatrics as a stand-alone category as an essential provider of primary care for children. The Council perceived that meeting this law would be challenging without a parallel standard to insure pediatricians are made available to consumers. Current time and distance criteria presented by DOI staff indicated that in two service areas, pediatrics did not meet these requirements. Therefore, the Council agrees that along with the recommendation to include it as a stand-alone category, it will also adjust the time/distance criteria to the level where networks in all four service areas can meet the requirement.

Future Considerations. Throughout the meetings, the Council identified numerous data and definitional issues associated with the assessment of existing standards, not to mention proposed changes to those standards. The primary concern with existing data is that it is inadequate for calculating the true impact of decisions to improve network adequacy and not have unintended negative consequences. Considerations for future action were discussed to prepare the Council with a better understanding of what additional standards might be added in 2019 and beyond. The timeframe for making recommendations for plan year 2018 was shortened, therefore the members believe it is critical to establish an ongoing meeting schedule to respond to CMS changes as information becomes available. In addition, the following considerations were put forth:

- 1) Explore whether data can be collected from other state departments or sources or added as categories of information to existing network submission forms for understanding what access/adequacy issues are at stake:
 - a. Wait time

- b. Provider/enrollee ratios (determining what provider categories in addition to primary care would be a meaningful addition)
- 2) Identify and operationalize opportunities for providers to systematically report on data useful to the Council.
- 3) Look at existing network adequacy across the state for all the different requirements imposed by different regulatory bodies (i.e., Medicaid/Medicare/ fully insured non-Affordable Care Act (ACA) products).
- 4) Advocate for workforce development in critical provider categories required for network adequacy.
- 5) Examine the impact of Network Adequacy regulations on the insurance market place for 2018 and beyond.
- 6) Work toward a data collection system that better represents provider counts based on the Full-Time Equivalent (FTE) of employed staff or their actual availability at a given site; currently the count is one provider per site regardless of how available they are to that site and its consumer base (FTE or days/week).
- 7) Improve data on provider availability on open/closed panels.
- 8) Further explore network adequacy as it pertains to Essential Community Providers (ECPs).
- 9) Explore further network adequacy of mental health and the necessity of separating out psychiatrists from other mental health professionals, given that psychiatrists are the only mental health professionals able to prescribe medication.
- 10) Request that the DOI provide a description of the existing data collected, their definitions, and how they are validated, if at all. Present this information at the first meeting of the 2019 plan year.

Appendix:
Draft Minutes from NAAC Meetings:
June 15, July 22, August 1, and August 17, 2016

COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

Minutes of Meeting Held June 15, 2016

The Commissioner's Network Adequacy Advisory Council held a public meeting on Wednesday, June 15, 2016, at 10:00 a.m. at the Nevada Division of Insurance Hearing Room, 1818 East College Parkway, Carson City, Nevada, which was simultaneously videoconferenced to Las Vegas at the Bradley Building, Division of Insurance Conference Room, Third Floor, 2501 East Sahara Avenue, Las Vegas, Nevada. Notice of the meeting was posted in compliance with Nevada's Open Meeting Law. The video recording of this meeting may be viewed on the Division website <http://doi.nv.gov/>.

Roll Call of Members:

The following committee members were present:

Dr. Howard Baron (LV)
Dr. Tracey Green (LV)
Nancy Hook (CC)
Jack Kim (CC)
Todd Lefkowitz (CC)
John Packham (CC)
Pete Sabal (LV)
Bill Welch (CC)
Trevor Rice (CC)

Division of Insurance Staff in Attendance:

Commissioner Barbara D. Richardson (CC)
Laurie Squartsoff (CC)
Amy Parks (CC)
Earl McDowell (LV)
Alexia Emmermann (CC)
Kimberly Everett (CC)
Jeremey Gladstone (CC)
Syed Rahman (CC)
Nanci Hoffman (CC)

1. Call to Order and Roll Call

Commissioner Barbara D. Richardson called the meeting to order at 10:07 a.m. Kimberly Everett took roll.

2. Welcome and Introductions.

Commissioner Richardson welcomed Council members, thanked the members for participating on this Council, and wanted to let everyone know that she is there for support. The Commissioner realizes that they are here to present recommendations to her on network adequacy, and that she will not influence their decision in anyway, but will engage in the process of this Council. The Commissioner then introduced Deputy Commissioner Laurie Squartsoff.

Deputy Squartsoff introduced Deborah Loesch-Griffin, the facilitator for the meeting, and Kimberly Everett, Assistant Chief of the Life and Health Section.

Ms. Everett, Assistant Chief for the Life and Health Section, presented a short overview of the location of the facilities, emergency exits, parking area, etc. She announced this Council meeting will be a working lunch. The Division staff is here to facilitate and help in any way. Since this is a Public Meeting, attendees have an opportunity to speak during the two public comment periods. The minutes, video recording of the meeting, and future agendas will be available and posted on the Division web-site page as soon as possible.

3. Public Comment—None.

The public was invited to provide public comment during the meeting to provide information the Council may need during the course of the discussion.

4. Presentations: Network Adequacy Overview: Presented by Division of Insurance:

- a. The Division’s Role in Determining Network Adequacy; *How We Got Here.*

Alexia Emmermann, Insurance Counsel, explained the Council requirements and reviewed the Council binder contents. Ms. Emmermann explained the Council’s obligation, set out in the regulations. Specifically, the standards established by CMS are considered the floor, along with state mandates. She also reminded everyone that the Council is to meet no less than 3 times each year with the first meeting on or before June 15th of each year; a reminder that the meetings are subject to Nevada’s Open Meeting Law; and the recommendation of the Council is due to the Commissioner by September 15th of each year.

- b. The Technical Side of Network Adequacy; *How Data Is Collected and Used to Make a Determination of Compliance*

Jeremey Gladstone reviewed:

- Nevada Statutes and Regulations
- Federally Facilitated Market Place FMM, CMS and ECP Network Adequacy Templates
- Service Areas
- Silver State Health Insurance Exchange

Syed Rahman reviewed the templates for each topic:

- CMS Network Adequacy Template
- Hospital Specialty Codes
- Included Provider Specialties
- Network Adequacy Summary

Other topics also covered by Mr. Rahman include:

- Service Area, County Designation
- Advisory Council Recommendation(s)
- Master Provider List

- Data Request Specifications

5. Working Lunch

6. Overview: See Attachment

- a. Council Discussion/Assignments

Deborah Loesch-Griffin (facilitator) took the floor and interacted with the Council. The Council reviewed the Open Meeting Law and rules of engagement, identified a timeline and dates for future meetings, and certain understandings and agreements to guide discussions. The Council identified goals and interests in the topic, as well as their vision relative to network adequacy. The Council identified information that would be helpful to know, as well as conditions to help it make its recommendations. The Council identified the starting point, or floor, of requirements.

- b. Division Staff Assignment

- c. Other Matters

7. Scheduling of Next Meetings and Agenda Items.

The Council identified dates for future meetings and what was required at meetings to meet the September 15th recommendation due date. The Council outlined its agenda for the next meeting. The Council identified assignments for both staff and others that may be able to provide information. Division Staff explained how documents and reports must be disclosed in order for the Council to properly consider the information.

The following dates were identified as potential future meeting dates (these meetings must be properly noticed as set out in Nevada’s Open Meeting Law (NRS chapter 241) :

- July 22, 2016
- August 1, 2016
- August 17, 2016: finalize the recommendation(s)
- September 12, 2016: approval final recommendation(s)

8. Public Comment—None.

9. Adjournment.

Respectfully submitted,
Nanci Hoffman

COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

Minutes of Meeting Held July 22, 2016

The Commissioner's Network Adequacy Advisory Council held a public meeting on Friday, July 22, 2016, at 10:00 a.m. at the Nevada Division of Insurance Hearing Room, 1818 East College Parkway, Carson City, Nevada, which was simultaneously video-conferenced to Las Vegas at the Bradley Building, Division of Insurance Conference Room, Third Floor, 2501 East Sahara Avenue, Las Vegas, Nevada. Notice of the meeting was posted in compliance with Nevada's Open Meeting Law. The video recording of this meeting may be viewed on the Division website <http://doi.nv.gov/>.

Roll Call of Members:

The following committee members were present:

Dr. Howard Baron (LV)
Dr. Tracey Green (LV)
Nancy Hook (CC)
Jack Kim (LV)
Todd Lefkowitz (LV)
John Packham (CC)
Pete Sabal (LV)
Bill Welch (CC)
Trevor Rice (CC)

Division of Insurance Staff in attendance:

Earl McDowell (LV)
Kimberly Everett (CC)
Jeremey Gladstone (CC)
Syed Rahman (CC)
Nanci Hoffman (CC)

Network Adequacy Advisory Council Meeting Facilitator:

Deborah Loesch-Griffin

1. Call to Order and Roll Call

Kimberly Everett, Assistant Chief of Life and Health section; called the meeting to order at 10:00 a.m. Ms. Everett took roll.

2. Review and Approve Minutes from June 15, 2016

Ms. Everett asked for approval of the minutes from June 15, 2016 meeting. Motion from Todd Lefkowitz, second from Tracey Green, motion carried; minutes approved without change.

3. Public Comment.

The public was invited to provide public comment during the meeting to provide information that is helpful to consider during the course of the discussion.

Public comment in Carson City was presented by Sandy Stamates who currently serves as President of the Nevada National Alliance on Mental Illness (NAMI) Nevada. A copy of her written testimony is provided on the Division of Insurance website.

Additional public comment was provided by Dr. Lesley Dickson, representing the Nevada Psychiatric Association, at the Las Vegas office. Dr. Dickson stated that she is there to support the testimony of Ms. Stamates, and reiterated to the Council the information in Ms. Stamates’ testimony. It is crucial to provide consumers with a network plan that meets their needs, especially for mental health and substance abuse treatments.

4. Review of Council’s Charge

- a. Review Council’s vision, conditions, and agreements

Ms. Everett gave a reminder and an overview of the Public Open Meeting Law and the Council’s charge.

Deborah Loesch-Griffin presented an overview of the Vision of the Council from the June 15th meeting.

- Maximize access for consumers with adequate workforce & providers cost containment if this works for all
- Validatable data about whether providers are available
- Access to care and access to insurance
- Access refers to clinical best practice, and maximize health and wellness

5. Recommendations Workshop

- a. Review previous data requests

Division staff reviewed facilitator’s outline of previous data requests.

- b. Presentation of findings from Council’s data requests from June 15, 2016 meeting.

Jeremey Gladstone presented data to the Council members on the *Nevada Covered Lives* for the HMO vs PPO. The figures for covered lives in Nevada are 231,631 impacted by the *Network Adequacy Standards*, 141, 411 in the Individual Market, and 90,220 in the Small Group Market.

Mr. Gladstone presented a chart in the following order:

- Age Demographics for Individuals
- Small Group and Overall Markets
- The Network Adequacy Analysis Based on 2017

- Network Adequacy Analysis by County
- Additional Provider Standards, Time/ Distance Failures
- Essential Community Provider

Syed Rahman presented:

- Actual Provider Counts Along with Adequate Provider Count
- Chart Comparing Actual Versus Adequate Provider Counts for Storey County
- Count of Autism Providers by Counties
- Nevada Declaration Document

Questions from the Council members were asked of presenters. See attached list marked 5b. The *Questions and Responses* are a transcription of the facilitator’s short hand notes.

At the June 15, 2016, meeting, Council member John Packham with the University of Nevada, School of Medicine, shared with the Council *Insights and Important Findings* on the background counts for licensures only, not employment. This information is per capita. Dr. Packham stated he will send the data to the Council members. A copy of the data information is located on the Division’s website.

- c. Identify and set goals:

See attached 5c. Post Data Presentation Workshop Goals facilitated by Deborah Loesch-Griffin.

- d. Affirm decision making process from making recommendations:

Deborah Loesch-Griffin reviewed decision making process with Council.

- e. Identify recommendations to populate the Network Adequacy for Plan Year 2018 template.

Ms. Loesch-Griffin reviewed a blank template, which the Council can use when making its 2018 recommendations.

- f. Determine additional information that is needed to support recommendations:

See attached 5f. Important Considerations are a transcription of the facilitator’s short hand notes.

6. Review agenda items for August 1, 2016 meeting

- a. Discuss meeting location

The decision is to have the location in Carson City for the August 1, 2016, meeting and in Las Vegas for the August 17, 2016, meeting.

b. Decision

Council discussed the agenda items for the August 1, 2016, meeting.

- Roll call
- Review and approve minutes
- Public comment
- Review of previous data requests and presentation of findings from Council’s data
- Create draft recommendations
- Item 4 review recommendations from previous two meetings
- Overview
- Scheduling of next meeting and agenda items
- Public comment

c. Data requirements:

Data requirements would be assigned during agenda item #7

7. Next steps

a. Council discussion / assignments

A long discussion was facilitated amongst the Council members. Please see attached 7a. Proposed Recommendations Criteria and Rationale are a transcription of the facilitator’s short hand notes.

Facilitator performed a mock vote on each of the recommendations.

b. Division Staff assignments:

- Research the experience of the other states for or against our recommendations. Look at how other states have handled provider directory updates.
- For Mr. Rice’s request, show network adequacy analysis based on service areas 1 through 4 for on exchange plan.
- Look at how language translation services are currently handled and if there is a gap that exists currently.
- Provide NAIC Network Adequacy model.

- Verify actual and adequate provider counts provided by the DOI.
- Research whether provider lists submitted by the carriers include open or closed doctors.
- Show by carrier the ECPs that are on their contracted provider lists.

c. Other matters

There were no other matters discussed.

8. **Public comment:**

- Jeanette Belz presented two comments for the Council to consider.

If the Division could analyze the three mental health specialty codes separately, this would be helpful to the consumers.

How this communication would be presented to Consumers if a network is not adequate to them.

9. **Adjournment:** Meeting adjourned at 3:00 pm.

Respectfully submitted,
Nanci Hoffman

COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

Minutes of Meeting Held August 1, 2016

The Commissioner's Network Adequacy Advisory Council held a public meeting on Monday, August 1, 2016, at 10:00 a.m. at the Nevada Division of Insurance Hearing Room, 1818 East College Parkway, Carson City, Nevada, which was simultaneously video-conferenced to Las Vegas at the Bradley Building, Division of Insurance Conference Room, Third Floor, 2501 East Sahara Avenue, Las Vegas, Nevada. Notice of the meeting was posted in compliance with Nevada's Open Meeting Law. The video recording of this meeting may be viewed on the Division website <http://doi.nv.gov/>.

Roll Call of Members:

The following Council members were present:

Dr. Howard Baron (CC)
Dr. Tracey Green (CC)
Nancy Hook (CC)
Jack Kim (CC)
Todd Lefkowitz (CC)
John Packham (CC)
Pete Sabal (CC)
Bill Welch (CC)
Trevor Rice (CC)

Division of Insurance Staff in attendance:

Imari Reed (LV)
Alexia Emmermann (CC)
Kimberly Everett (CC)
Jeremey Gladstone (CC)
Syed Rahman (CC)
Nanci Hoffman (CC)

Network Adequacy Advisory Council Meeting Facilitator:

Deborah Loesch-Griffin

1. Call to Order and Roll Call

Kimberly Everett, Assistant Chief of Life and Health Section; called the meeting to order at 10:04 a.m. Ms. Everett took roll. All Council members were present.

2. Review and Approve Minutes from July 22, 2016

Ms. Everett asked for approval of the minutes from July 22, 2016 meeting. A motion was made by Todd Lefkowitz to approve the minutes with noted corrections from the Council. The first correction was to Agenda Item number seven, bullet number two which needed an "s" added to the word "plan" and Doctor Baron asked for a correction to Ms. Dickson's name. The motion was seconded by Tracey Green, motion carried and the minutes were approved with indicated corrections.

3. Public Comment.

There was no public comment.

In addition to the agenda item for public comment, the public was invited to provide public comment during the meeting to provide information or expertise to help the Council during the course of the meeting.

4. Review of Previous Data Requests

a. Presentation of findings from Council’s data requests:

Jeremey Gladstone and Syed Rahman provided a presentation of the data requests from the July 22, 2016 Meeting to the Council.

- **Network Adequacy Analysis:** (Additional Provider Standards) a chart separating and covering Specialty, Specialty Codes, Maximum Time, Maximum Distance. These were broke down by Metro, Micro, Rural, and CEAC. The analysis on this chart was run using the master provider list for the on-Exchange service areas. Additional analysis was presented using six carrier networks which were submitted for the plan year 2017. Mr. Gladstone reviewed the adequacy of the additional providers based on the standards requested.
- **ECP Review:** Mr. Rahman reviewed the current Essential Community Providers “ECP” requirements for plan year 2017. Presented the average number of ECPs contracted by Carriers as well as the average ECPs available. Mr. Rahman indicated that currently all networks submitted for plan year 2017 meet the ECP requirements.
- **NAIC Network Adequacy Model Act:** Mr. Rahman discussed the NAIC network adequacy model law, noting similarities with Nevada’s regulations.

5. Review Recommendations from Previous Meetings * (For possible action)

The Facilitator (Deborah Loesch-Griffin) orchestrated an in depth discussion with the Council over the comments and suggestions from the July 22, 2016 meeting. The Council members asked Jeremey Gladstone if Division staff would do further research on certain recommendations that were presented at the previous meeting.

See attached list marked **Review Recommendations** included in the transcription of the facilitator’s shorthand notes.

6. Create Draft Recommendations *(For possible action)

After review and discussion, the Council identified potential recommendations. The Council expressed concern that drafting recommendations was difficult due to the unavailability of relative data and research for some of the proposed recommendations. Tracey Green raised a point for consideration, which is to add Division staff to assist in the ongoing necessary research, statistics, review and gathering of data for the Council. The collection of this information is a time-consuming process for Division staff, but a very necessary one for the Council to provide recommendations to the Commissioner.

Attached is a transcription of the Facilitator’s shorthand notes under the heading of **Report/Recommendations.**

7. Overview:

a. Council Discussion / Assignments:

The Council discussed Future Considerations and reviewed its goals to submit to the Commissioner for the next meeting. The Facilitator reviewed the Council’s charge. The Facilitator discussed with the Council the layout of the summary report and what information it would like to present to the Commissioner.

b. Division Staff Assignments:

The Division Staff was asked by the Council to review the items listed below for the August 17, 2016 meeting.

- Pediatrics for the minimum time and distance metrics which would allow carriers to meet network adequacy standards.
- ECP on- and off-Exchange data for contracted providers.
- Contact California and Medicaid to determine the methodology they used to determine provider wait times.
- Contact the Bureau of Health Care Quality & Compliance Licensure to determine definition of hospital.
- Using mental health standards, run the adequacy for each of the three mental health specialty codes. In addition run psychiatry, 029, using the endocrinology standard.

c. Other Matters

There were no other matters discussed.

8. Scheduling of Next Meeting and Agenda Items:

The agenda items were discussed and drafted by Council for the August 17, 2016 meeting. The agenda will be posted as soon as the location in Las Vegas is confirmed.

9. Public Comment:

Jeanette Belz, representing the Nevada Psychiatric Association, wanted to thank the Council for its hard work in developing the best solutions for analyzing the three mental health specialty codes which would be helpful for consumers.

Elisa Cafferata, representing Nevada Advocates for Planned Parenthood Affiliates, addressed the Council and also thanked it for its hard work. Her comments centered on

essential community providers. Ms. Cafferata supports a robust ECP standard and that the Affordable Care Act recognizes the importance of ECPs as they are the safety net in our health care system. Ms. Cafferata also discussed the provider work force issue, and stated that although there are barriers to growth for doctors, ECPs have the ability to grow, and add capacity. ECPs will help meet the goals of the ACA which is helping people not show up at the emergency room, helping people get care in appropriate time, at an appropriate level, and focus on prevention. Ms. Cafferata believes ECPs will help bring the cost of health insurance down, and that some states have increased the percentage of required ECPs. Ms. Cafferata suggested that the Council consider adding other types of providers, and that there may be an opportunity to look at the definition of a “good faith offer”.

Respectfully submitted,

Nanci Hoffman

COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

Minutes of Meeting Held August 17, 2016

The Commissioner's Network Adequacy Advisory Council held a public meeting on Wednesday, August 17, 2016, at 10:00 a.m., at the Silver State Health Insurance Exchange Conference Room, 150 N. Stephanie St., Suite 100, Henderson, Nevada, which was simultaneously video-conferenced to Nevada Division of Insurance Hearing Room, 1818 East College Parkway, Carson City, Nevada. Notice of the meeting was posted in compliance with Nevada's Open Meeting Law. The video recording of this meeting may be viewed at: http://doi.nv.gov/Insurers/Life_and_Health/Network_Adequacy_Advisory_Council//, which is located on the Division's website.

Roll Call of Members:

The following committee members were present:

Dr. Howard Baron (LV)
Dr. Tracey Green (LV)
Nancy Hook (LV)
Jack Kim (LV)
Todd Lefkowitz (LV)
John Packham (LV)
Pete Sabal (LV)
Trevor Rice (LV)
Bill Welch (LV)

Division of Insurance Staff in attendance:

Kimberly Everett (LV)
Rhonda Kelly (LV)
Jeremey Gladstone (CC)
Syed Rahman (CC)
Nanci Hoffman (CC)
Alexia Emmermann (CC)

Network Adequacy Advisory Council Meeting Facilitator:

Deborah Loesch-Griffin (LV)

1. Call to Order and Roll Call

Kimberly Everett, Assistant Chief of Life and Health section; called the meeting to order at 10:00 a.m., Ms. Everett took roll. All members were marked as being present.

2. Review and Approve Minutes from August 1, 2016

Ms. Everett asked for approval of the minutes from August 1, 2016 meeting. A motion was made by Dr. Howard Baron, seconded by Pete Sabal, motion carried; minutes approved without change.

3. Review of Council’s Charge.

Ms. Everett provided an overview of the Open Meeting Law and the Council’s charge.

4. Public Comment

There was no public comment.

5. Review of August 1, 2016 Data Requests

Jeremy Gladstone presented information on Network Adequacy Analysis pertaining to Pediatrics and Mental Health as well as a review of the Nevada Statutes and Regulations pertaining to medical facilities and licensure.

Syed Rahman presented information on the contracted Essential Community Providers for plan year 2017, Medicaid’s Network Adequacy requirements and how California and Medicaid in Nevada monitor wait times for Network Adequacy.

A copy of the presentation slides is available on the Division’s website.

6. Review of Council’s Vision and Recommendations from Previous Meeting *(For possible action)

Deborah Loesch-Griffin reviewed the Council’s vision.

7. Review and Revise Draft Report of the Plan Year 2018 Recommendations *

The Council reviewed the draft report and made suggestions as to what revisions needed to be made to solidify the recommendations for Plan Year 2018. It was agreed that the Council would email any additional comments after the meeting to the Division, with a copy to the facilitator. All iterations of the drafts with their comments would then be posted to the Division website prior to the next meeting.

Overview:

a. Council Discussion/Assignments

The Council members continued in-depth discussion of what future areas need to be considered for plan year 2019.

b. Division Staff Assignments

The Council made no data requests for the September 12, 2016 meeting.

c. Other Matters

There were no other matters discussed.

9. Scheduling of next meeting and agenda items

The agenda items were discussed and drafted by the Council for the September 12, 2016 meeting. The agenda will be posted within the proper timeframe and completed for posting to the website.

10. Public Comment

There was no public comment in Carson City or Las Vegas

11. Adjournment: Meeting adjourned at 2:12 pm.

Respectfully submitted,
Nanci Hoffman