

Report on the Plan Year 2021 Recommendations for Network Adequacy Standards

**Presented by:
The Network Adequacy Advisory Council**

**To: Barbara Richardson
Commissioner of Insurance, Nevada Division of Insurance**

**Prepared by: Jeremey Gladstone
Division of Insurance**

September 11, 2019

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NAAC Recommendations for Network Adequacy Standards for Plan Year 2021

Overview of the NAAC Recommendations Process.

This section includes a description of the:

- 1) Commencement of the Plan Year 2021 meetings of the Network Adequacy Advisory Council (hereinafter referred to as “Council” or “NAAC”)
- 2) Process of Plan Year 2021 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’s first meeting for Plan Year 2021 was held on February 7, 2019 (NAC 687B.770 subsection 4 requires that the first meeting of the NAAC must be held no later than June 15th). They continued to meet through September 2019, to finalize the recommendations of network adequacy standards for Plan Year 2021. The Council recommends these standards to achieve network adequacy for individual and small employer group health benefit plans.

At the February 7, 2019, meeting, the Council revisited and approved its vision for what it hoped to achieve during the Plan Year 2021 NAAC meetings. The vision is:

- Standards are pragmatic, achievable and meaningful.

In addition, the Council continues to be committed to creating conditions that ensure Nevada has:

1. Maximized access for consumers with adequate workforce and providers cost containment.
2. Validated data about whether providers are available.
3. Access to care¹.
4. Access to health insurance.
5. Maximized health and wellness.
6. Educate consumers so that, whether their health needs are emergent or non-emergent:
 - a. Consumers know how to use their network care;
 - b. Are informed; and
 - c. Access care appropriately.
7. Contribute to health literacy: transparent to consumer.
8. Provided care that is culturally and linguistically appropriate.
9. Influenced the other 93% of non-regulated plans.

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 conditions it had established as requisites for achieving its vision. This year the presentations included participation and data from both DOI and other NAAC member agencies. It should be noted that the Council continues to seek data which would provide greater insights into patient access and network adequacy in Nevada.

¹ Access to care—consumer can utilize their health plan benefits; Access refers to clinical best practice.

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 or before September 15, 2019.²

February 7th – At this meeting, the DOI reviewed the network adequacy standards for Plan Year 2020. The Council reviewed and confirmed their vision and future considerations from last year’s meetings. The Council discussed possible standards for plan year 2021 and brainstormed metrics and data that they would like to review in considering potential standards. The discussion included: average wait times for a patient to be seen, a comparison of what other states are doing, reasons why carriers are exiting the market, a review of what other entities are doing such as Medicaid, Medicare, the Exchange, etc. The topic of hospital definition as it relates to emergency room care and the trauma level of different hospitals was also brought up for discussion. The Council discussed additional information they would like to see before putting forth any recommendations.

June 18th – At this meeting, the Council reviewed the vision and agreements. Jeremy Gladstone from the Division of Insurance discussed the findings of the time and distance analysis for the additional provider specialties of dermatology, gastroenterology, general surgery, gynecology, nephrology, neurology, and pulmonology. Mr. Gladstone also provided information on 2019 Nevada Legislature and the bills which could potentially impact network adequacy. As part of the legislative discussion, the Division presented information and asked for Council feedback on SB 234 and the provider denial letter which the Commissioner is tasked with drafting. Further discussion included possible recommendations for plan year 2021 and the data they would like the Division to present for future meetings for consideration prior to making any recommendations.

July 23rd – At this meeting, the Council reviewed the data requested at the June 26th meeting. The Council considered the impact of this information and had further discussion on possible recommendations for plan year 2021. The Council discussed whether it would be appropriate to recommend maintaining the current network adequacy standards for plan year 2021. SB 234 and the denial letter was discussed and the topic was open to the public for comment. The Council made additional data requests for the Division and held off any decisions on recommendations until future meetings.

August 13th – At this meeting, SB 234 and the denial letter were discussed and the topic was open to the public for comment. After public comment on SB234, the Council reviewed the data requested at the July 23rd meeting. The information was discussed in great length. The information presented resurrected previous discussions surrounding the need for accurate workforce data and the Council discussed potential sources, which could be used to “smell test” the data to provide greater accuracy to the data. The Council discussed and made revisions to the draft Report which will include the plan year 2021 network adequacy recommendations. The consensus of the Council was to maintain the current standards and revise the future considerations to better reflect where they would like to

² 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.

focus their attention moving forward. The Division of Insurance will draft the revisions discussed and send out a revised draft which will be discussed and voted on at the September 10, 2019 meeting of the Council.

September 10th – At this meeting the council voted on their final recommendations which are included in this report. The Council ultimately voted to maintain the current standards for plan year 2021.

Council’s Recommendation for Plan Year 2021.

From the outset, as with prior years, the Council expressed that any proposed changes to Plan Year 2021 standards must consider the ability of carriers to meet any changes to existing standards. The Council acknowledged that few if any changes had occurred in the market place to warrant significant changes or reconsideration of existing criteria and standards. Generally, the same number of carriers are offering plans, although there has been a reduction in the health plans and products.

The Council’s ability to make decisions is hampered by the ongoing gaps in what and how data is collected by various outside entities, which restricts the Council’s ability to accurately evaluate the impact of any proposed changes to network adequacy standards. As with their discussion and review in past years, the gaps in the data for wait time and time to first visit for urgent or primary care requests continue to be areas of interest and urgency.

With these caveats, the Council recommends there be no change to the current network adequacy regulations as adopted by the state in regulation T005-18. Specifically, the Council recommends the following:³

³ Council vote was unanimous to maintain current standards for plan year 2021.

The Plan Year 2021 Recommendations are noted below in the Network Adequacy Time/Distance Standards Chart.

Network Adequacy Time/Distance Standards : Plan Year 2021 Recommendations								
Specialty	Metro		Micro		Rural		CEAC	
	Max Time (Mins)	Max Distance (Miles)	Max Time (Mins)	Max Distance (Miles)	Max Time (Mins)	Max Distance (Miles)	Max Time (Mins)	Max Distance (Miles)
Primary Care	15	10	30	20	40	30	70	60
Endocrinology	60	40	100	75	110	90	145	130
Infectious Diseases	60	40	100	75	110	90	145	130
Psychiatrists	45	30	60	45	75	60	110	100
Psychologist	45	30	60	45	75	60	110	100
Licensed Clinical Social Workers (LCSW)	45	30	60	45	75	60	110	100
Oncology - Medical/Surgical	45	30	60	45	75	60	110	100
Oncology - Radiation/Radiology	60	40	100	75	110	90	145	130
Pediatrics	25	15	30	20	40	30	105	90
Rheumatology	60	40	100	75	110	90	145	130
Hospitals	45	30	80	60	75	60	110	100
Outpatient Dialysis	45	30	80	60	90	75	125	110
Adequacy Requirement	90% of the population in a service area must have access to these specialties types with in the specified time or distance metrics.							
Plan Year 2021 Standards for ECPs:								
Contract with at least 30% of available Essential Community Providers (ECP) in each plan's service area								
Offer contracts in good faith to all available Indian health care providers in the service area								
Offer contracts in good faith to at least one ECP in each category in each county in the service area								
Offer contracts in good faith to all available ECPs in all counties designated as Counties with Extreme Access Considerations (CEAC)								

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

Future Considerations.

Throughout the meetings, the Council discussed numerous issues associated with the assessment of existing standards, including the absence of data, the sources of data collection, the manner in which data was collected, and the burden of requiring additional data collection by carriers. The primary concern with existing data remains: it does not provide support for the Council to look at standards beyond time and distance for network adequacy. Currently the data gathered and presented to the Council, per its requests, was not deemed sufficiently robust nor accurate to warrant changes in network adequacy standards without the possibility of incurring unintended negative consequences. DOI staff clarified that to achieve accuracy along the standards of interest to the council (i.e., wait time; provider ratios), the universe of all possible carriers and insurers in the state needs to be considered.

Considerations for future action were discussed to prepare the Council with a better understanding of what additional standards might be added for Plan Year 2022 and beyond. The Council maintains the stance that data collection and standards should not impose burdens that might compromise the adequacy of current networks. The following considerations were put forth:

- 1) Identify opportunities for providers and licensing agencies to systematically report on data useful to the Council.
 - a. Support efforts to develop a provider database similar to what was proposed in the 2019 Legislation under SB 170 and determine the impact this type of database could have on the Council's charge
- 2) Improve Workforce data to support the work and decisions of the Network Adequacy Advisory Council (e.g., Provider FTEs for patient care within network). Potential sources of data:
 - a. NV Bureau of Health Care and Quality Compliance (Facilities Data)
 - b. NV State Board of Medical Examiners, NV State Board of Nursing, and other NV State Boards of licensing for various providers
- 3) Work on building a communication channel with Governor's Patient Protection Commission ("Commission") and other similar task forces to allow for collaboration and to ensure consistency in data and to minimize duplication of efforts.
- 4) Review and consider other metrics for the determination of network adequacy e.g. appointments wait times, provider enrollee ratios, etc.

- a. Continue reviewing existing network adequacy models used by other state agencies and federal agencies
 - b. If feasible research the metrics and standards currently required by carriers when contracting with providers
- 5) Support efforts to expand the development of the health workforce in critical provider categories required for network adequacy.
- 6) Examine the impact of network adequacy regulations on the insurance market place (i.e., # of carriers, # of products and consumer costs) for Plan Year 2021 and beyond.
- 7) Improve data on provider availability on open/closed panels.

Appendix:

Minutes from NAAC Meetings:

February 7th, June 18th, July 23rd, August 13th and September 10th

COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

Minutes of Meeting Held

The Commissioner's Network Adequacy Advisory Council held a public meeting on, February 07, 2019 at 10:00 a.m. at the Nevada Division of Insurance Hearing Room, 1818 East College Parkway, Carson City, Nevada, which was video-conferenced to Las Vegas at the Nevada State Business Center, 3300 W. Sahara Avenue, Tahoe Room, Suite 430 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's website, http://doi.nv.gov/Insurers/Life_and_Health/Network_Adequacy_Advisory_Council/.

Roll Call of Members:

The following Council members were present:

Howard Baron (LV)

Jack Kim (LV)

Thomas McCoy (CC)

Trevor Rice (CC)

Pete Sabal (LV)

Bill Welch (LV)

The following Council members were not present:

John Packham

Devin Brooks

Jon Hager

Division of Insurance Staff in attendance:

Jeremey Gladstone (CC)

Mark Garratt (CC)

Alexia Emmermann (CC)

Nanci Hoffman (CC)

Meeting Facilitator:

1. Call to Order and Roll Call

The meeting was called to order at 10:10 a.m.

Nanci Hoffman proceeded with the roll call. There were six members present and two absent.

Jeremy Gladstone with the Division of Insurance (DOI) announced to the Council that Janice Wiggins resigned as a member last year, and Thomas McCoy was appointed by the Commissioner as the new member to fill her place on the Council.

2. Introductory Remarks

Alexia Emmermann, Legal Counsel for the Division of Insurance, reviewed the Council’s charge, along with other reminders and general information that may be relevant to the Council’s deliberations.

Mr. Gladstone, DOI staff, announced to the Council that Turning Point would no longer be facilitating the Council meetings and offered thanks to Turning Point, Deborah Loesch-Griffin, and her team for their service.

3. Public comment

There was no public comment from Las Vegas or Carson City.

4. Approval of the Minutes from the September 13, 2018 Meeting

A motion of approval of the minutes was made by Howard Baron and seconded by, Jack Kim, Motion carried.

5. Review vision, future considerations from Plan Year 2020, and set goals for plan year 2021.

Council reviewed their vision and future considerations from last year’s meetings. The Council members confirmed their vision and future considerations and did not make any changes with one exception.

Howard Baron noted that the vision needed to be updated to reflect the 93% of Nevada’s population outside of the authority of the Council rather than the 80% currently listed. The Council agreed and discussed the adjustment.

Howard Baron made a motion to adjust the figures in the vision and it was seconded by Jack Kim, motion carried.

6. Presentations: Network Adequacy Overview and Presentation: by Division of Insurance, Jeremy Gladstone, Assistant Chief Examiner

Mr. Gladstone presented an overview of network adequacy. The presentation included a review of plan year 2020 network adequacy proposed standards, essential community provider standards, and Nevada’s insurance market snapshot, plan offerings for PY 2019 by county, market changes, network adequacy methodologies and Medicaid standards.

7. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2021.

The Council discussed possible standards for plan year 2021 and brainstormed metrics and data that they would like to review in considering potential standards. Some of the additional items discussed were:

- Average wait times for a patient to be seen
- Looking at a comparison of what other states are doing
- Looking at reasons for why carriers are exiting the market
- Comparing what other entities are doing such as Medicaid, Medicare, the Exchange, etc.
- Emergency room care and the trauma level of different hospitals and how the DOI defines a hospital, as well as, the impact this has on balance billing

8. Discussion on Plan Year 2021 meetings.

a) Schedule of future meetings

The Council decided on the following future meeting dates:

June 18th, July 23rd, August 13th and September 10th.

b) Other matters related to meetings for Plan Year 2021

The Council requested that DOI staff present information related to:

- Trauma centers and the level of care that they provide;
- Wait times to get in to see a doctor
- Feedback on what the Silver State Health Exchange is doing related to Network Adequacy
- The Council requested analysis on various specialties and their current adequacy. These specialties include: Dermatology, Gastroenterology, General Surgery, Gynecology (OB/GYN), Nephrology, Neurology, and Pulmonology

9. Public Comment

Chris Bosse, Renown Health, wanted to follow up on the Council’s discussion on hospitals and network adequacy. She would like to encourage the Council to consider and identify services not only needed in an emergency but be aware of the components at a community level.

10. Adjournment. The meeting adjourned at 1:17.

Respectfully submitted,
Nanci Hoffman

COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

Minutes of Meeting Held

The Commissioner's Network Adequacy Advisory Council held a public meeting on, June 18, 2019 at 10:00 a.m. at the Nevada Division of Insurance Hearing Room, 1818 East College Parkway, Carson City, Nevada, which was video-conferenced to Las Vegas at the Nevada State Business Center, 3300 W. Sahara Avenue, Tahoe Room, Suite 430 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's website, [http://doi.nv.gov/Insurers/Life and Health/Network Adequacy Advisory Council/](http://doi.nv.gov/Insurers/Life_and_Health/Network_Adequacy_Advisory_Council/).

Roll Call of Members:

The following Council members were present:

Howard Baron (LV)

Jack Kim (CC)

Jon Hager (CC)

Thomas McCoy (CC)

Trevor Rice (CC)

Pete Sabal (LV)

The following Council members were not present:

Bill Welch

Devin Brooks

Division of Insurance Staff in attendance:

Jeremey Gladstone (CC)

Mark Garratt (CC)

Alexia Emmermann (CC)

Nanci Hoffman (CC)

1. Call to Order and Roll Call

The meeting was called to order at 10:00 a.m.

Nanci Hoffman proceeded with the roll call. There were five members present and three absent at the time of roll-call. Pete Sabal arrived shortly after roll call making it six in attendance. There were two members absent.

Jeremey Gladstone with the Division of Insurance (Division) announced to the Council that John Packham resigned as a member of the Council.

2. Introductory Remarks

Alexia Emmermann, Legal Counsel for the Division, reviewed the Council’s charge, along with other reminders and general information that may be relevant to the Council’s deliberations.

3. Public comment

There was one comment from Jeanette Belz from Carson City, representing’ The Nevada Psychiatric Association, provided comments on assembly bill 170 which adds provisions related to access to health care services. The bill requires reports to be submitted annually to the Consumer Health Assistance office related to access issues. She suggested the Council ask that the Consumer office present at a future meeting to report on the data collected under AB 170.

4. Approval of the Minutes from the February 7, 2019 Meeting

A motion of approval of the minutes was made by Thomas McCoy and seconded by, Treavor Rice, Motion carried.

5. Review vision and agreements. (For possible action)

Jeremey Gladstone reviewed with the Council their vision and future considerations from last year’s Councils meetings.

6. Presentations of Data, Presented by Division of Insurance, Jeremey Gladstone, Assistant Chief Examiner, Life and Health Section. (For possible action)

Jeremey Gladstone from the Divisions of Insurance discussed the findings of the time and distance analysis for the additional provider specialties of dermatology, gastroenterology, general surgery, gynecology, nephrology, neurology, and pulmonology. Mr. Gladstone also provided information on NV 2019 Legislature and on bills which could potentially impact network adequacy.

7. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2021. (For possible action)

a. Confirmations and/or additions to assignments and timeline

There was a lengthy discussion on the collection of data and getting the standards for each provider. The Council had many questions for the Division on these standards and how the data is counted. The Council discussed additional information they would like to see before putting forth any recommendations.

b. Direction to Division staff concerning request for information

The Council discussed several items which would be helpful in determining recommendations for network adequacy and requested the following data from the Division:

- A comparison of what other states are currently doing for network adequacy
- A comparison of the networks used in the individual and small group markets to those used for Medicaid
- An estimated impact of network adequacy on the insurance markets in other states when network adequacy requirements were introduced
- Update on the network adequacy complaints received by the Division and the office of Consumer Health Assistance

c. Other matters related to timely and relevant information and collection of specific data regarding network adequacy.

Jeremy Gladstone with the Division of Insurance wanted to bring to the attention to the Council the provider denial letter required under senate bill 234. The letter was discussed at length and the Council was advised that it would be discussed as an agenda item at the next meeting of the Council on July 23, 2019.

8. Scheduling of Next Meeting Agenda Items. (For possible action)

As stated above the provider denial letter will be an agenda item for the next Council meeting on July 23, 2019.

There were no other agenda items to discuss for future meetings.

9. Public Comment. (May include general announcements by Council Members)

There was no public comment in Carson City or Las Vegas.

10. Adjournment.

Jon Hager Motioned to Adjourn and Pete Sabal seconded to adjourn.

The Meeting adjourned at 11:20 a.m.

Respectfully submitted,
Nanci Hoffman

COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

Minutes of Meeting Held

The Commissioner's Network Adequacy Advisory Council held a public meeting on, July 23, 2019 at 10:00 a.m. at the Nevada Division of Insurance Hearing Room, 1818 East College Parkway, Carson City, Nevada, which was video-conferenced to Las Vegas at the Nevada State Business Center, 3300 W. Sahara Avenue, Tahoe Room, Suite 430 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's website,

http://doi.nv.gov/Insurers/Life_and_Health/Network_Adequacy_Advisory_Council/

Roll Call of Members:

The following Council members were present:

Howard Baron (LV)

Cris Carmona (LV)

Jack Kim (LV)

Thomas McCoy (CC)

Pete Sabal (LV)

Bill Welch (CC)

The following Council members were not present:

Jon Hager

Trevor Rice

Division of Insurance Staff in attendance:

Jeremey Gladstone (CC)

Mark Garratt (CC)

Alexia Emmermann (CC)

Nanci Hoffman (CC)

1. Call to Order and Roll Call

The meeting was called to order at 10:10 a.m.

Nanci Hoffman proceeded with the roll call. There were two members in Carson City, and two present in Las Vegas. Howard Baron and Pete Sabal arrived to make four members present in Las Vegas, leaving two members absent.

Jeremey Gladstone introduced Cris Carmona joining the Council, she is Chief Compliance Audit Investigator for the Nevada Consumer Affairs Unit. The Council members welcomed Ms. Carmona and took turns introducing themselves and shared who they represent and their background.

Jeremey Gladstone with the Division of Insurance (Division) announced that Devon Brooks was no longer on the Council, and advised that notice would be going out requesting applications for a interested parties to fill the provider position on the Council.

2. Introductory Remarks

Alexia Emmermann, Legal Counsel for the Division, reviewed the Council’s charge, along with other reminders and general information that may be relevant to the Council’s deliberations.

3. Public comment

There was no public comment at this time either from Carson City or Las Vegas

4. Approval of the Minutes from the July 23, 2019 Meeting

A motion of approval of the minutes was made by Howard Baron and seconded by, Thomas McCoy Motion carried.

5. Review vision and agreements.

Jeremey Gladstone reviewed with the Council their vision and agreements.

6. Solicitation of public comment related to the provider denial letter as detailed in SB234 of the 2019 Nevada Legislative Session.

Jeremey Gladstone recapped the discussion on the SB 234 and opened the meeting to public comment on the matter. There was a public comment from Jimmy Lau with Ferrari Public Affairs on behalf of Dignity Health; Saint Rose Dominican commented on the Denial letter. They will be interested in the denial reports that will be generated as required under SB234. They believe have the ability to contact the carrier is important and recommend including the carrier’s phone number. They also recommend include the NPI or Tax ID of the provider in the denial letter. They would also request clarification on if a waiting period will be required after a provider receives the denial letter.

7. Presentations of Data, Presented by Division of Insurance, Jeremy Gladstone, Assistant Chief Examiner, Life and Health Section.

Mr. Gladstone provided data requested at the June 18, 2019 meeting related to consumer complaints and network adequacy standards from other states. The presentation was interactive with the Council asking questions related to the presented data and having general discussions about network adequacy standards.

8. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2021.

The Council discussed possible recommendations for plan year 2021 and there was discussion as to whether there was sufficient data or cause to increase the current standards that exist. There was some agreement on this statement however the Council held off on making any formal vote until some of the additional data is presented during the next meeting. The topic of hospital services, specifically trauma service, was brought up by Mr. Welch and Mr. Gladstone asked that he provide a write up on the topic which could be shared with the Council. Ms. Carmona spoke to the number of carriers in the state and how to get more carriers in the market. The Council also discussed the desire to look at the impact that network adequacy standards have on the market and the Division indicated that this was a difficult item to measure given the numerous variables that impact the healthcare market.

9. The Council had the following items for the Division to address for the next meeting:

- Look at NCQA and URAC requirements for certification as it relates to network adequacy
- Complete the comparative analysis of the individual & small group networks against the MCO networks
- Provide the draft of the recommendation report based on last year’s report as a template
- Reach out to the states with metrics beyond time and distance to determine how they came up with their metrics

10. Scheduling of Next Meeting Agenda Items.

A brief discussion was had related to the upcoming meeting in August and potential agenda items. The Council was advised for email Mr. Gladstone with any agenda items they would like added.

11. Public Comment. (May include general announcements by Council Members)

There was one public comment from Las Vegas.

Jim Wadhams spoke in regards to the network adequacy data which was provided during the June 18, 2019 meeting related to the additional provider types and the adequacy analysis that the Division did. Mr. Gladstone provided a brief background on the information and advised Mr. Wadhams he would be happy to speak with him in more detail about the presentation outside of the meeting.

There was no more public comment from Carson City.

12. Adjournment.

Thomas McCoy Motioned to Adjourn and Bill Welch seconded to adjourn.

The Meeting adjourned at 11:24 a.m.

Respectfully submitted,
Nanci Hoffman

COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

Minutes of Meeting Held

The Commissioner's Network Adequacy Advisory Council held a public meeting on, August 13, 2019 at 10:00 a.m. at the Nevada Division of Insurance Hearing Room, 1818 East College Parkway, Carson City, Nevada, which was video-conferenced to Las Vegas at the Nevada State Business Center, 3300 W. Sahara Avenue, Tahoe Room, Suite 430 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's website, http://doi.nv.gov/Insurers/Life_and_Health/Network_Adequacy_Advisory_Council/

Roll Call of Members:

The following Council members were present:

Howard Baron (LV)

Jon Hager (CC)

Jack Kim (CC)

Trevor Rice (CC)

Pete Sabal (LV)

Bill Welch (CC)

The following Council members were not present:

Cris Carmona

Thomas McCoy

Division of Insurance Staff in attendance:

Jeremey Gladstone (CC)

Alexia Emmermann (CC)

Nanci Hoffman (CC)

1. Call to Order and Roll Call

The meeting was called to order at 10:03 a.m.

Nanci Hoffman proceeded with the roll call. There were four members in Carson City, and two present in Las Vegas.

2. Introductory Remarks

Alexia Emmermann, Legal Counsel for the Division, reviewed the Council’s charge, along with other reminders and general information that may be relevant to the Council’s deliberations.

3. Public comment

There was no public comment at this time either from Carson City or Las Vegas.

4. Approval of the Minutes from the July 23, 2019 Meeting

A motion of approval of the minutes was made by Jack Kim and seconded by, Bill Welch Motion carried.

5. Review vision and agreements.

Jeremey Gladstone reviewed with the Council their vision and agreements.

6. Discuss the draft of the denial letter as detailed in SB234 of the 2019 Nevada Legislative Session.

Public Comment was heard from the following individuals:

Tom Clark from the Nevada Association of Health Plans; stated that they were involved in discussion when the bill was being drafted by the Legislature. A topic of concern was how this letter was going to be easily electronically transmitted from the Carrier’s to the Division; and the other concern is when the carrier has to send the letter.

Jeremey Gladstone stated that the bill requires the letter to be sent to the Commissioner at the time it is submitted to the provider, and the data has to be up- loaded, but this will be explored more and the Division will determine if further clarification may be needed through a regulation.

Joanna Jacob representing Dignity Health reiterated that she would like to see the, Tax ID or NPI numbers..

7. Presentations of Data, Presented by Division of Insurance, Jeremey Gladstone, Assistant Chief Examiner, Life and Health Section. (For possible action)

The Division presented information on the Provider Counts (Individual/Small Group vs NV MCO) the Council had lengthy discussion, as to how the data was collected.

Jeremey Gladstone stated that that there are general flaws in the reported data. The Council discussed how to improve the data and collection process. Suggestions from the Council members included cross-referencing other data sets against the provider counts to get a sense of the accuracy of the data.

Agenda item number eight was discussed at this time and the Council’s Future Considerations are listed below:

- Discuss and determine impact of SB170

- Revise item 1 in the report to include licensing agencies for potential opportunities for reporting data
- Review other options for determining network adequacy

8. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2021. (For possible action)

The Council had a lengthy discussion on the network adequacy recommendations for plan year 2021 and the Council landed on making no change for plan year 2021 and the Council will vote on this recommendation at the meeting on September 10, 2019.

9. Review, discuss, and revise draft report of the Plan Year 2021 recommendations.

The Council provided several revisions to the draft report. The Division will update the report and provide a revised draft to the Council for final comment and approval for the September 10, 2019 meeting. Jeremey Gladstone presented to the Council Thomas McCoy and Cris Carmona in their absence the recommendations for the draft report.

10. Scheduling of Next Meeting Agenda Items.

No additional agenda items were added to the agenda.

11. Public Comment (May include general announcements by Council Members)

At this time there was no public comment from Las Vegas and Carson City.

12. Adjournment

The Meeting adjourned at 11:15 a.m.

Respectfully submitted,
Nanci Hoffman

Please note a complete recording of the Council’s meeting is available on the Division’s website at http://doi.nv.gov/Insurers/Life_and_Health/Network_Adequacy_Advisory_Council/

COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

Minutes of Meeting Held

The Commissioner's Network Adequacy Advisory Council held a public meeting on, September 10, 2019 at 10:00 a.m. at the Nevada Division of Insurance Hearing Room, 1818 East College Parkway, Carson City, Nevada, which was video-conferenced to Las Vegas at the Nevada State Business Center, 3300 W. Sahara Avenue, Tahoe Room, Suite 430 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's website,

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Roll Call of Members:

The following Council members were present:

Howard Baron (LV)

Cris Carmona (LV)

Jon Hager (LV)

Jack Kim (LV)

Trevor Rice (CC)

Pete Sabal (LV)

The following Council members were not present:

Bill Welch

Thomas McCoy

Division of Insurance Staff in attendance:

Jeremey Gladstone (CC)

Alexia Emmermann (CC)

Nanci Hoffman (CC)

1. Call to Order and Roll Call

The meeting was called to order at 10:03 a.m.

Nanci Hoffman proceeded with the roll call. There was one member present in Carson City and five members present in Las Vegas.

2. Introductory Remarks

Alexia Emmermann, Legal Counsel for the Division, reviewed the Council’s charge, along with other reminders and general information that may be relevant to the Council’s deliberations.

Jeremy Gladstone provided information on SB234 and noted that it was not included on the agenda but that the Division would be having a workshop to discuss any regulations related to the bill. Mr. Gladstone also spoke on the vacancy for the Network Adequacy Advisory Council and updated the Council on the application process and advised a new member would be selected in the near future.

3. Public comment

There was no public comment.

4. Approval of the Minutes from the September 10, 2019 Meeting

A motion to approve the minutes was made by Howard Baron and seconded by Trevor Rice which was approved by the Council.

5. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2021.

The Council did not have any further discussion for Plan Year 2021 and agreed to move forward with a vote on the network adequacy recommendations for Plan Year 2021.

A motion to approve the recommendations for plan year 2021 was made by Jack Kim and seconded by Howard Baron, the Council unanimously voted to maintain the current standards for plan year 2021.

6. Review, revise, and approve final Report.

The Council members were asked if they wanted any changes to the Draft Report and the Council members stated they did not have any changes, and to proceed to submit as is.

Jeremy Gladstone did review small formatting changes to the numbering on page 8 and updated the voting information on page 5 of the report. He stated that the Report along with the minutes from this meeting will be given to the commissioner for review and approval.

A motion to approve the final Report for plan year 2021 was made by Jon Hager and seconded by Pete Sabal consensus, the Council unanimously voted to maintain the current standards for plan year 2021.

7. Discussion, Deliberation, and Potential Direction by Council Regarding Plan Year 2022.

For plan year 2022 Pete Sabal would like to see the Division partner with licensing agencies to get workforce data by county.

Jeremey stated that he will reach out to John Packham to see if he would be available for a presentation on workforce data at the first meeting in February.

Trevor Rice stated he would like to see a current comparison of adequacy requirements for Medicaid MCO, Medicare, and Medicare Advantage against Nevada individual and small group requirements. He would also like the covered lives for these plans. Jack Kim requested that the comparison also indicate the counties in which these plans are offered.

8. Scheduling of Next Meeting Agenda Items.

The Council discuss two possible date for the first meeting of plan year 2022 and discussed possible times to avoid for the meetings in plan year 2022.

9. Public Comment (May include general announcements by Council Members)

There was no public comment.

10. Adjournment

The Meeting adjourned at 10:30 a.m.

Respectfully submitted,
Nanci Hoffman

Please note a complete recording of the Council’s meeting is available on the Division’s website at [http://doi.nv.gov/Insurers/Life and Health/Network Adequacy Advisory Council/](http://doi.nv.gov/Insurers/Life_and_Health/Network_Adequacy_Advisory_Council/)