

**Report on the Plan Year 2022 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**

**August 13, 2020**

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## NAAC Recommendations for Network Adequacy Standards for Plan Year 2022

### Overview of the NAAC Recommendations Process.

This section includes a description of the:

- 1) Commencement of the Plan Year 2022 meetings of the Network Adequacy Advisory Council (hereinafter referred to as “Council” or “NAAC”)
- 2) Process of Plan Year 2022 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 2022 was held on March 12, 2020 (NAC 687B.770 subsection 4 requires that the first meeting of the NAAC must be held no later than June 15<sup>th</sup>). They continued to meet through September 2020, to finalize the recommendations of network adequacy standards for Plan Year 2022. The Council recommends these standards to achieve network adequacy for individual and small employer group health benefit plans.

At the March 12, 2020, meeting, the Council revisited its vision for what it hoped to achieve during the Plan Year 2022 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 care<sup>1</sup>.
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 (Division) 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 Division and other relevant parties. It should be noted that the Council continues to seek data which would provide greater insights into patient access and network adequacy in Nevada.

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<sup>1</sup> 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.<sup>2</sup>

March 12<sup>th</sup> – At this meeting, the Division reviewed the network adequacy standards for Plan Year 2021. A presentation on Health Workforce Supply and Demand was made by M. Tabor Griswold, PhD, Director, Health Workforce Research, University of Nevada, Reno School of Medicine. The Council reviewed and confirmed their vision and future considerations from last year’s meetings. The Council discussed possible standards for plan year 2022 and brainstormed metrics and data that they would like to review in considering potential standards. The discussion included: telehealth as an option to address provider shortages, geographic criteria and adequacy of other specialties in the network adequacy template, and coordination with the Patient Protection Commission. The Council discussed additional information they would like to see before putting forth any recommendations.

June 11<sup>th</sup> – 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 included in the network adequacy template. Further discussion included possible recommendations for plan year 2022 and the data they would like the Division to present for future meetings for consideration prior to making any recommendations. There was discussion by some of the members to maintain the current standards given the current situation with the COVID-19 pandemic and the lack of data to support additional standards.

July 9<sup>th</sup> – At this meeting, Jeremy Gladstone from the Division of Insurance presented information on telehealth services for the individual market. The Council discussed recommendations for plan year 2022 and changes to the draft report. The Council moved to recommend to maintain the current standards, those in place for plan year 2021, and the motion was passed unanimously by all members present. The Council talked further on items to address in future meetings and looked at the timeline for submission of the report to the Commissioner. A suggestion was made to discuss dental network adequacy at the August meeting.

August 13<sup>th</sup> – At this meeting, Corie Nieto, Director of Telehealth Services, Nevada Health Centers gave a presentation on telehealth services. Mr. Gladstone from the Division of Insurance presented information on dental network adequacy and provided complaint information from OCHA. The Council discussed the presentations and the report for plan year 2022. The Council approved the report and requested it be submitted to the Commissioner by September 15, 2020. The Council talked further on items to address in future meetings and discussed the timing of the next meetings.

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<sup>2</sup> 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/](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.

## **Council's Recommendation for Plan Year 2022.**

From the outset, as with prior years, the Council expressed that any proposed changes to Plan Year 2022 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 maintaining the current network adequacy regulations as adopted by the state in regulation R067-19. Specifically, the Council recommends the following:<sup>3</sup>

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<sup>3</sup> The Council vote was unanimous for all members present at the July 9, 2020 meeting for the plan year 2022 recommendations. Council members Bill Welch and Sarah Fox were not present at the meeting.

The Plan Year 2022 Recommendations are noted below in the Network Adequacy Time/Distance Standards Chart.

<b>Network Adequacy Time/Distance Standards : Plan Year 2022 Recommendations</b>								
<b>Specialty</b>	<b>Metro</b>		<b>Micro</b>		<b>Rural</b>		<b>CEAC</b>	
	<b>Max Time (Mins)</b>	<b>Max Distance (Miles)</b>	<b>Max Time (Mins)</b>	<b>Max Distance (Miles)</b>	<b>Max Time (Mins)</b>	<b>Max Distance (Miles)</b>	<b>Max Time (Mins)</b>	<b>Max Distance (Miles)</b>
<b>Primary Care</b>	15	10	30	20	40	30	70	60
<b>Endocrinology</b>	60	40	100	75	110	90	145	130
<b>Infectious Diseases</b>	60	40	100	75	110	90	145	130
<b>Psychiatrists</b>	45	30	60	45	75	60	110	100
<b>Psychologist</b>	45	30	60	45	75	60	110	100
<b>Licensed Clinical Social Workers (LCSW)</b>	45	30	60	45	75	60	110	100
<b>Oncology - Medical/Surgical</b>	45	30	60	45	75	60	110	100
<b>Oncology - Radiation/Radiology</b>	60	40	100	75	110	90	145	130
<b>Pediatrics</b>	25	15	30	20	40	30	105	90
<b>Rheumatology</b>	60	40	100	75	110	90	145	130
<b>Hospitals</b>	45	30	80	60	75	60	110	100
<b>Outpatient Dialysis</b>	45	30	80	60	90	75	125	110
<b>Adequacy Requirement</b>	90% of the population in a service area must have access to these specialties types with in the specified time or distance metrics.							
<b>Plan Year 2022 Standards for ECPs:</b>								
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. Division staff clarified that to understand access and set adequacy standards (i.e., wait time; provider ratios), the Council needs data on all available providers and facilities in Nevada, in order to have a baseline on which to base their recommendations.

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:**

March 12<sup>th</sup>, June 11<sup>th</sup>, July 9<sup>th</sup>, and August 13<sup>th</sup>

## **COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL**

### **Minutes of Meeting Held**

The Commissioner's Network Adequacy Advisory Council held a public meeting on March 12, 2020 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, Sahara 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:**

Thomas McCoy (CC)

Jon Hager (CC)

Howard Baron (LV)

Jack Kim (LV)

Cris Williams (LV)

Sarah Fox (LV)

**The following Council members were not present:**

Bill Welch (CC)

Jon Bilstein (LV)

### **Division of Insurance Staff in attendance:**

Jeremey Gladstone (CC)

David Hall (CC)

Laura Adair (CC)

#### **1. Call to Order and Roll Call**

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

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

Mr. Gladstone noted for the record that Trevor Rice recently resigned and the vacancy for the consumer assistant will be posted on the website. Also he introduced new member Sarah Fox, Vice President of Network Development and Contracting at Silver Summit Health Plan.

**2. Introductory Remarks**

David Hall, Legal Counsel for the Division, reviewed the Council’s charge as well as open meeting law pertaining to transparency and clarity for the record.

**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 September 10, 2019 Meeting**

A motion of approval of the minutes was made by Jack Kim and seconded by Howard Baron, none opposed; motion carried unanimously.

**5. Review vision, future considerations from Plan Year 2021, and set goals for plan year 2022. (For possible action)**

Jeremy Gladstone reviewed with the Council their vision and agreements and asked the Council for input. The members agreed to maintain the current vision and agreements and no action was taken at this time.

**6. Presentations: Health Workforce Supply and Demand; by M. Tabor Griswold, PhD, Director, Health Workforce Research, University of Nevada, Reno School of Medicine.**

The presentation covered workforce demand in Nevada and factors related to the severe shortage in the delivery of care. Dr. Griswold noted that the data included in the presentation does not reflect the current rapid population growth in Nevada. The Council asked questions of the presenter related to the accuracy of the licensing data and the adequacy of other states. A discussion was had related to adequacy, workforce, and current recruiting efforts in the state. A copy of the presentation has been made available on the Division of Insurance website.

**7. Presentations: Network Adequacy Overview and Presentation; by Division of Insurance, Jeremy Gladstone, Assistant Chief Examiner Life and Health Section.**

A copy of this presentation has also been made available on the Division of Insurance website. The presentation gave an overview of the key components that make up network adequacy in Nevada, the current standards, and network adequacy for dental plans. Data was provided to the Council on the insurance market, plan offerings, DOI consumer complaints, and the available data sources. The information was discussed by the Council

along with other items that the Council should consider when deciding on their recommendations for plan year 2022.

**8. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2022. (For possible action)**

**Possible agenda items for next meeting;**

- Cris Williams suggested encouraging providers to use telehealth option to help with shortage. Jeremy Gladstone stated the requirement is already in statute but will research possible barriers, and what other states are doing and present for next meeting.
- Howard Baron suggested that it may be worth re-reviewing data collected previously on geographic distribution of specialists and criteria. Jeremy will run some time and distance standards to confirm and compare counties to present at next meeting.
- Jack Kim suggested telehealth relating to member experience when they are talking with provider directly. Jeremy responded that he will provide some information regarding this at the next meeting also.
- Howard Baron suggested the council coordinate with the Patient Protection Commission on determining the barriers. Jeremy will talk with the Commissioner to get feedback on what they are doing.

**9. Discussion on Plan Year 2022 meetings. (For possible action)**

- a. Schedule of future meetings. The next meeting is scheduled for June 11, 2020, 10-12 Noon. Future mtgs: 7/9/20, 8/13/20 and final meeting 9/10/20, all from 10-12 Noon. These dates will be posted on the website.
- b. Other matters related to meetings for Plan Year 2022.

**10. Public Comment (may include general announcements by Council Members)**

Chris Bosse from Renown Health wanted to stress to the group that they are very invested in workforce development including ongoing nurses training, providing space for expansion of training slots and bringing resources to recruiting as well.

Also she strongly urges the committee to focus on measuring capacity, and also partner more closely with GOVCHA regarding consumer complaints.

**11. Adjournment**

The Meeting adjourned at 11:15 a.m. Jon Hagar moved to adjourn, Thomas McCoy seconded, motion carried.

Respectfully submitted,  
Laura Adair

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/)

## COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

### Minutes of Meeting Held

The Commissioner's Network Adequacy Advisory Council held a public meeting on June 11, 2020 at 10:00 a.m. remotely via Webex. Notice of the meeting was posted in compliance with Nevada's Open Meeting Law. The 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:**

Thomas McCoy

Jon Hager

Howard Baron

Jack Kim

Cris Williams

Sarah Fox

Bill Welch

Jon Bilstein

### Division of Insurance Staff in attendance:

Jeremey Gladstone

David Hall

Laura Adair

#### 1. Call to Order and Roll Call

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

Jeremey Gladstone proceeded with the roll call. All members were present.

#### 2. Introductory Remarks

On behalf of David Hall, Legal Counsel for the Division, Jeremey Gladstone reminded members that the council charge is to make recommendations to the Commissioner by Sept 15, 2020 for network adequacy standards for plan year 2022, and reviewed open meeting law pertaining to transparency and clarity for the record.

Also Mr. Gladstone reminded the committee that the vacancy for the consumer representative is still open and directed interested persons to the website to submit their application.

**3. Public comment**

There was no public comment at this time.

**4. Approval of the Minutes from the March 12, 2020 Meeting**

A motion of approval of the minutes was made by Jack Kim (with correction to his name on page 3) and seconded by Howard Baron, none opposed; motion carried unanimously.

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

Jeremy Gladstone reviewed with the Council their vision and agreements and asked the Council if there was any discussion or revisions. The members agreed to maintain the current vision and agreements and no action was taken at this time.

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

Mr. Gladstone summarized the time and distance data analysis, as requested by council at the last meeting.

Mr. Kim asked how the data was analyzed and what methods were used to determine the average.

Mr. Gladstone provided an explanation of how the analysis was conducted. A sample of 5% of the population under 65 years old was pulled from Census data and run against the contracted providers in the individual and small group markets which were submitted for plan year 2020. Time and distance metrics were generated from this analysis. The average represents a weighted average and is heavily influenced by the population centers in Nevada.

Mr. Gladstone also noted from the last meeting the council’s request for telehealth information. He stated that due to the recent pandemic, there has been a push for emergency regulations at both the state and federal level related to telehealth. He is hoping to get better insight by collecting additional data to include new information from carriers on this for next meeting. Also, the Division has been making an effort to eliminate some of the duplicate data and hopes that this process that will, over a period of time, give a more accurate representation of the available providers in Nevada.

**7. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2022. (For possible action)**

A discussion was had by the members of the Council concerning access in Nevada and possible network adequacy recommendations.

- Tom McCoy asked if there were any information available based on legislation passed during the last session related to access complaints. Mr. Gladstone advised he would follow up on reporting requirements and will also contact OCHA for feedback on complaints.
- Jack Kim requested that a draft of the prior year report be made available and Mr. Gladstone indicated he will make it available to the Council members.
- Jack Kim and Howard Baron discussed recommending no changes to the current standards given everything going on with COVID-19 and the lack of data/complaints to support a need for further standards.
- Jon Bilstein and Sarah Fox both provided information on their experiences with adequacy in their respective fields. Mr. Bilstein indicated that currently there is not an access issue. Ms. Fox echoed similar experience about access but did note potential access issues in the northern part of the state related to dermatologists and allergists.
- Bill Welch brought up the expansion of telehealth under Medicaid and how telehealth was legislation was passed during the 2017 session.
- Jeremy asked Howard Baron if there were any updates from the Patient Protection Commission, and Dr. Baron provide an update on the activities.

**8. Discussion on Plan Year 2022 meetings. (For possible action)**

- a. Schedule of future meetings. The next meeting is scheduled for 8/13/2020, 10-12.
  - b. Other matters related to meetings for Plan Year 2022.

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

Jeannette Beltz spoke about telehealth and mentioned that there are limitations to telehealth and not all appointments could be carried out via telehealth. In office visits can offer advantages when assessing an individual.

Philip Ramirez with Prominence Health gave public comments on the NAAC meeting and the process for accessing the meeting.

**10. Adjournment**

The Meeting adjourned at 11:11 a.m. Jack Kim moved to adjourn, Howard Baron seconded, motion carried.

Respectfully submitted,  
Laura Adair

Please note that due to technical difficulties no recording of the Council’s meeting is available. Other complete recordings of past Council meetings can be found 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/)





## **COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL**

### **Minutes of Meeting Held**

The Commissioner's Network Adequacy Advisory Council held a public meeting on July 9, 2020 at 10:00 a.m. remotely via Webex. Notice of the meeting was posted in compliance with Nevada's Open Meeting Law. The 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:**

Thomas McCoy

Jon Hager

Howard Baron

Jack Kim

Cris Williams

Bill Welch

Jon Bilstein

#### **The following Council members were absent:**

Sarah Fox

Bill Welch

#### **Division of Insurance Staff in attendance:**

Jeremey Gladstone

Laura Adair

#### **Absent:**

David Hall

### **1. Call to Order and Roll Call**

The meeting was called to order at 10:06 a.m.

Jeremey Gladstone proceeded with the roll call and a quorum was established with six members present.

**2. Introductory Remarks**

On behalf of David Hall, Legal Counsel for the Division, Jeremy Gladstone reminded members that the council charge is to make recommendations to the Commissioner by Sept 15, 2020 for network adequacy standards for plan year 2022, and reviewed open meeting law pertaining to transparency and clarity for the record.

Mr. Gladstone reminded the committee that the vacancy for the consumer representative is still open and directed interested persons to the website to submit their application.

**3. Public comment**

Allison Genco of Ferrari Public Affairs read letter from Physicians for Fair Coverage (PFC), and requested that this be placed into the meeting record.

**4. Approval of the Minutes from the June 11, 2020 Meeting**

A motion of approval of the minutes was made by Howard Baron and seconded by Jack Kim, none opposed; motion carried unanimously.

**5. Review vision, future considerations from Plan Year 2021, and set goals for plan year 2022. (For possible action)**

Jeremy Gladstone reviewed with the Council their vision and agreements and asked the Council if there was any discussion or revisions.

All members were in favor of goals and recommendations for Plan Year 2021.

**6. Presentations: Network Adequacy Presentation; by Division of Insurance, Jeremy Gladstone, Assistant Chief Examiner, Life and Health Section.**

The meeting materials regarding this presentation were placed on the NV DOI website for review.

**7. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2022. (For possible action)**

- a. Identification of decisions around recommended changes to network adequacy criteria and/or recommendations for future consideration for Plan Year 2022.
- b. Confirmations and/or additions to assignments and timeline.
- c. Direction to Division staff concerning request for information.
- d. Other matters related to timely and relevant information and collection of specific data regarding network adequacy.

A discussion was had by the members of the Council concerning access in Nevada and possible network adequacy recommendations.

- Jack Kim requested discussion of dental requirements be added to the next meeting agenda before making a decision.

- Howard Baron suggested for future meetings an update on telehealth data for 2020 to see a more current and accurate status of the uptick in usage. He also requested feedback regarding complaints from the Consumer Health Assistance office.

8. Review, discuss, and revise draft report of the Plan Year 2022 recommendations (**For possible action**)
9. Scheduling of Next Meeting Agenda Items. (**For possible action**)

The next meeting is scheduled for 8/13/2020, from 10-12 via Webex.

10. **Public Comment (may include general announcements by Council Members)**

There was no additional public comment at this time.

11. **Adjournment**

The Meeting adjourned at 10:59 a.m. Jack Kim moved to adjourn, Howard Baron seconded, motion carried.

Respectfully submitted,  
Laura Adair

Please note that due to technical difficulties no recording of the Council’s meeting is available. Other complete recordings of past Council meetings can be found 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/)

# COMMISSIONER'S NETWORK ADEQUACY ADVISORY COUNCIL

## Minutes of Meeting Held

The Commissioner's Network Adequacy Advisory Council held a public meeting on August 13, 2020 at 10:05 a.m. remotely via Webex. Notice of the meeting was posted in compliance with Nevada's Open Meeting Law. The 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:**

Thomas McCoy

Howard Baron

Jack Kim

Cris Williams

Bill Welch<sup>1</sup>

Jon Bilstein

Sarah Fox

## Division of Insurance Staff in attendance:

Jeremey Gladstone

Mark Garratt

David Hall

Patti Flasch

### 1. Call to Order and Roll Call

The meeting was called to order at 10:05 a.m.

Jeremey Gladstone proceeded with the roll call and a quorum was established with all present.

Mr. Gladstone also announced that Jon Hager has stepped down as council member. The NV DOI is currently posting an official notice for a new carrier or industry representative.

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<sup>1</sup> Bill Welch was present intermittently throughout the meeting and advised that he would not be present for the entirety of the meeting.

An official notice is being posted on the DOI website. He asked if council is aware of anyone who would have an interest to feel free to reach out to him.

Also Mr. Gladstone reminded the committee that the vacancy for the consumer representative is still open, and directed interested persons to the website to submit their application. Jack Kim requested a copy of the application so he can forward to his health plan association.

**2. Introductory Remarks:**

David Hall, Legal Counsel for the Division stated that the NV Open Meeting Law has been modified slightly by the Governor’s Order to allow for meetings to be held virtually, as with this one today. Otherwise, the law still does apply as a result. Any deliberations must be done openly, must be available to the public and must be recorded by the Division of Insurance. The recordings will be made available to the public. He requested participants to please speak one at a time and perhaps pause a little before answering or making a statement, to help keep the recording clear.

**3. Public comment**

Mr. Gladstone offered the opportunity for public comment and there was no public comment at this time.

**4. Approval of the Minutes from the July 9, 2020 Meeting**

A motion of approval of the minutes was made by Jack Kim and seconded by Howard Baron, none opposed; motion carried unanimously.

**5. Presentation by Corie Nieto, Director of Telehealth Services, Nevada Health Centers.**

Corie’s presentation can be found on the NV DOI website link per below;

[http://doi.nv.gov/uploadedFiles/doinvgov/\\_public-documents/Insurers/Network\\_Access\\_Adequacy\\_Council\\_08132020.pdf](http://doi.nv.gov/uploadedFiles/doinvgov/_public-documents/Insurers/Network_Access_Adequacy_Council_08132020.pdf)

Howard Baron asked if Ms. Nieto could elaborate on the concerns about access once the emergency declaration has expired.

Ms. Nieto responded that their goal is to maintain the continuity of care. A lot of insurance carriers contract with other national organizations for telehealth, and their hope is that post-COVID there won’t be a struggle with reimbursement issues with the direct to consumer program.

Thomas McCoy asked if using the direct approach vs. the clinic is the co-pay the same.

Ms. Nieto stated that except for Medicaid, in general it would be the same primary co-pay.

Sarah Fox asked what Nevada Health Centers is doing for wellness visits via telehealth.

Ms. Nieto They are doing some wellness through telehealth but not through virtual care but they need direct contact with the patient. However there can be followup visits via telehealth. Currently during the pandemic, it is the healthy patients that can be seen more via telehealth. Sick patients need to be protected from employers and providers, however they need care as well.

Cris Williams asked what areas of Nevada are set up in schools.

Ms. Nieto responded that they are set up in Las Vegas, Carson City and Elko, and their hope is that in the future it will become mainstream through the schools.

Jack Kim asked what the hours are for the direct to consumer program.

Ms. Nieto responded these are basically office hours, M-F during the day. They are hoping to expand to nights and weekends.

Mark Garratt asked if they expect to continue to see more utilization by providers in the rural areas going forward.

Ms. Nieto responded that they do, as urban clinics are so busy and the rural providers don’t see as many patients in a day. If a provider is not available in the urban area, they can be seen by a provider in the rural areas.

6. Presentation on Network Adequacy by Jeremy Gladstone, Assistant Chief Examiner Life and Health Section, NV Division of Insurance.

Mr. Gladstone’s presentation can be found on the NV DOI website per link below;

[http://doi.nv.gov/uploadedFiles/doinvgov/\\_public-documents/Insurers/DOI\\_Data\\_Presentation\\_08.13.20.pdf](http://doi.nv.gov/uploadedFiles/doinvgov/_public-documents/Insurers/DOI_Data_Presentation_08.13.20.pdf)

Jack Kim asked if the dental standards have changed, or are they consistent within the last 4-5 years, and asked for clarification if dental is included as a part of the network adequacy standards.

Mr. Gladstone responded that the standards and guidance have remained consistent throughout the years. He also confirmed that dental plan standards will be provided to the council going forward to determine if any network adequacy recommendations need to be made.

As a follow up to the last meeting, per the request of Howard Baron, Mr. Gladstone provided additional information data from OCHA as a follow up to Mr. Baron’s request to get feedback on consumer complaints. For Fiscal Year 2020, they received 175 complaints related to access to care, and only about 17 complaints pertained to a network access issue that may be related to other issues such as wait time, etc. Mr. Gladstone will continue to work with OCHA and other agencies for additional data regarding overall access.

Howard Baron asked if the only dental standards requirement pertains to pediatric dental plans that are on the exchange, and how do plans meet adequacy if there are no small group options.

Mr. Gladstone responded that the only requirement for health plans is for pediatric dental on the exchange. Since there is no on exchange small group there is no requirement to offer pediatric dental.

Howard Baron asked if Mr. Gladstone sees any trends from the OCHA data.

Mr. Gladstone responded unfortunately this data did not include specialty information. The one specialty complaint was anesthesiology. He will follow up with OCHA, in addition to reviewing the DOI data to see if it can specify by location to better see if there are trends.

Howard Baron suggested a review of complaints on social media might be helpful. Mr. Gladstone will contact the DOI Public Information Officer to see if some of the data can be obtained through social media platforms.

7. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2022. **(For possible action)**

- a. Discuss network adequacy standards related to dental provider networks
- b. Review of decisions around recommended changes to network adequacy criteria and/or recommendations for future consideration for Plan Year 2022
- c. Review of any substantive changes to the draft report submitted by Council members
- d. Final voting on the recommended changes and recommendations for future consideration for Plan Year 2021

8. **Review, revise, and approve final Report Plan Year 2022 recommendations. (For possible action)**

- a. Review and substantive changes submitted by Council members
- b. Revise report based on agreed upon decisions related to network adequacy criteria and/or recommendations for future consideration for Plan Year 2022
- c. Voting and approval of Report

Jack Kim made a motion to approve a draft of the final report, updated with current date and inclusion of additional minutes/items as referenced by Mr. Gladstone, Howard Baron seconded. All were in favor, none opposed, motion carried unanimously.

9. Discussion, Deliberation, and Potential Direction by Council Regarding Network Adequacy Standards for Plan Year 2023. **(For possible action)**

- a. Discuss potential calendar of meetings



- b. Schedule first meeting
- c. Discuss goals for Plan Year 2023 and beyond
- d. Assignment of tasks for Division staff or Council Members

Howard Baron suggested cancelling the September meeting, in light of not yet having CMS guidelines and upcoming legislative session, in order to discuss plan year 2023.

A motion was made by Jack Kim to cancel the September 10<sup>th</sup> meeting and hold first meeting in 2021 to discuss plan year 2023, seconded by Howard Baron. All were in favor, none opposed, motion carried unanimously.

Mr. Gladstone will submit the report to the Commissioner by the September 15<sup>th</sup> deadline as required by regulation, and will work with the council members to schedule next meeting in February or early March of 2021. He stated if there are any sources of data or an organization that members would like to present at this meeting, please reach out to him.

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

The decision was made to delay scheduling of the next meeting at this time.

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

There was no additional public comment.

**12. Adjournment**

The Meeting adjourned at 11:23 a.m. Jack Kim moved to adjourn, Thomas McCoy seconded, motion carried.

Respectfully submitted,  
Laura Adair

This Webex meeting recording and previous complete recordings of past Council meetings can be found 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/)