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**Department of Health and  
Human Services**

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**Network Adequacy Standards**

Division of Health Care Policy and Financing

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*Helping people. It's who we are and what we do.*



# Agenda

1. Goal – Improved Recipient experience and health outcome
2. Current Standards and Measurement
  - Time and Distance Standards
  - Provider to Enrollee Ratios
  - Timely Access Standards
3. Improvement Considerations



# Time and Distance Standards



# Federal Requirements

- Current Federal Requirement (CFR): 42 CFR 438.68 – States must develop time and distance standards for the following provider types:
  - Primary Care Provider (PCP) (adult and pediatric)
  - OB/GYN
  - Behavioral Health (adult and pediatric)
  - Specialist (adult and pediatric)
  - Hospital
  - Pharmacy
  - Pediatric Dental
  - Long-term services and supports (LTSS) when an enrollee must travel to the provider
- The Centers for Medicare and Medicaid Services (CMS) proposed to allow any quantitative standard in 2018 Notice of Proposed Rule Making





# State Standards

## **Contractual Standards (minutes/miles)**

- PCP: 30/20
- Endocrinology: 100/75
- Infectious Diseases: 100/75
- Oncology Med/Surg: 60/45
- Oncology Radiology: 100/75
- Psychiatrist: 60/45
- Psychologist: 60/45
- LCSW: 60/45
- Pediatrics: 30/20
- Rheumatology: 100/75
- Hospitals: 80/60
- Outpatient Dialysis: 80/60

## **2019 DOI Standards (minutes/miles)**

- PCP: 15/10
- Endocrinology: 60/40
- Infectious Diseases: 60/40
- Oncology Med/Surg: 45/30
- Oncology Radiology: 60/40
- Psychiatrist: 45/30
- Psychologist: 45/30
- LCSW: none finalized
- Pediatrics: 25/15
- Rheumatology: 60/40
- Hospitals: 45/30
- Outpatient Dialysis: 45/30



# Considerations

- Historical alignment with the Department of Insurance (DOI) standards
- Maintain alignment, but potentially include additional provider types important to the Medicaid program
  - Licensed Clinical Social Worker (LCSW)
  - Applied Behavioral Analysis (ABA) providers
  - Other Behavioral Health Specialties
- Include an exceptions process when an Managed Care Organization (MCO) is unable to meet the standard
- Improve transparency of MCO networks through more standardized reporting





# Provider to Enrollee Ratios



# Requirements and Standards

- No specific federal standard requiring ratios
  - 42 CFR 438.68 requires network adequacy standards other than time and distance for LTSS provider types that travel to the individual's home
- Current standards:
  - 1:1,500 for PCP
  - 1:1,800 for PCP in conjunction with a health care professional
  - 50 percent of PCPs with open panels
  - 1:1,500 for Specialists (including behavioral health)



# Considerations

- Add a standard for LTSS providers that travel to an individual's home
  - Home health
  - Private Duty Nursing
  - Personal Care Services
- Ability to revise or add additional standards as more data is available
- Define specific Essential Community Providers and require contracting with all providers willing to accept MCO standard terms
  - Behavioral Health
  - Federally Qualified Health Center (FQHC)
- Enhanced reporting on provider networks including provider with open panels





# Timely Access



# Requirements and Standards

- 42 CFR 438.206 requires states to ensure all services covered under the MCO contract are available and accessible to individuals in a timely manner, but does not prescribe timely access standards
- Current standards:
  - PCP: same day, 2 calendar days, or 2 weeks for appointment based on urgency
  - Specialist: same day, 3 days, or 30 days for appointment based on urgency
  - Prenatal: 7 days or 3 days for appointment based on risk level and trimester



# Considerations

- Maintain existing industry norm standards
- Add standard for routine appointments with narrower timeframes based on medical effectiveness
  - Physical Therapy
  - Other appointment types as determined by DHCFP
- Standardize MCO conducted secret shopper survey for consistent measurement of appointment accessibility
- Greater transparency in reporting



# Questions?





# Contact Information

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# Acronyms

- ABA: Applied Behavioral Analysis
- CFR: Code of Federal Regulations
- CMS: Centers for Medicare & Medicaid Services
- DHCFP: Division of Health Care Financing and Policy
- DOI: Department of Insurance
- FQHC – Federally Qualified Health Center
- LCSW: Licensed Clinical Social Worker
- LTSS: Long-term Services and Supports
- MCO: Managed Care Organization
- OB/GYN: Obstetrician-Gynecologist
- PCP: Primary Care Provider