Network Adequacy Review and Regulation Planning Meeting

10:00 am-11:00 am Central June 25, 2019, Regulatory Health Link Division, Arkansas Insurance Department





Agenda



- Introductions & housekeeping
- PTNP data maintenance
 - Why do it?
 - How does it work?
- Mutual Expectations
- Errors to avoid

Slide 22



INTRODUCTIONS & HOUSEKEEPING





 For those attending online, please enter your full name and email-id at the appropriate location in the GoTomeeting dialog box.

₽ X GoToMeeting ▼ Screen) Audio ▼ Webcam ▶ Message from the organizer USA Toll free: (877) 102-9753 Access Code 60328 Audience view Attendees: 1 of 101 (max) AR Insurance Dept (me, presenter, or... 🗸 🛆 AR Insurance Dept (me, presenter, organizer): Mute Me Share My Webcam Edit Your Name and Email... Copy Email Address to Clipboard Chat

Intended Audience-1



• These meetings on Network Adequacy apply to all health and dental insurance carriers covered under Rule 106.

Intended Audience-2



- AID attempts to communicate with three roles involved in Network Adequacy
 - NA Subject Matter Expert (NA SME).
 - Associated IT personnel.
 - Associated compliance personnel.
- NA contacts known to AID are listed and grouped by organizations in Network Adequacy Industry Contact List.pdf on our NA website http://rhld.insurance.arkansas.gov/Default/NetworkAdequacy. Please communicate addition or removal of contacts in list to RHLD.DataOversight@arkansas.gov

New to Arkansas NA Regulation Program?



Network Adequacy

Last Edited: November 12, 2015

Two important documents to read

- Program details available at http://rhld.insurance.arkansas.gov/Default/NetworkAdequacy
 - "NA Review Process" This document lays out NA activities for the coming plan year
 - Meeting slides and notes maintained in chronological order
- Data specifications & templates updated at http://rhld.insurance.arkansas.gov/Info/Public/Templates
 - For data submission requirements refer "SERFF Network Adequacy Data Submission Instructions" Arkansas Insurance Department

New issuers call us for an overview with Q&A.



PTNP Data Maintenance

WHY DO IT?

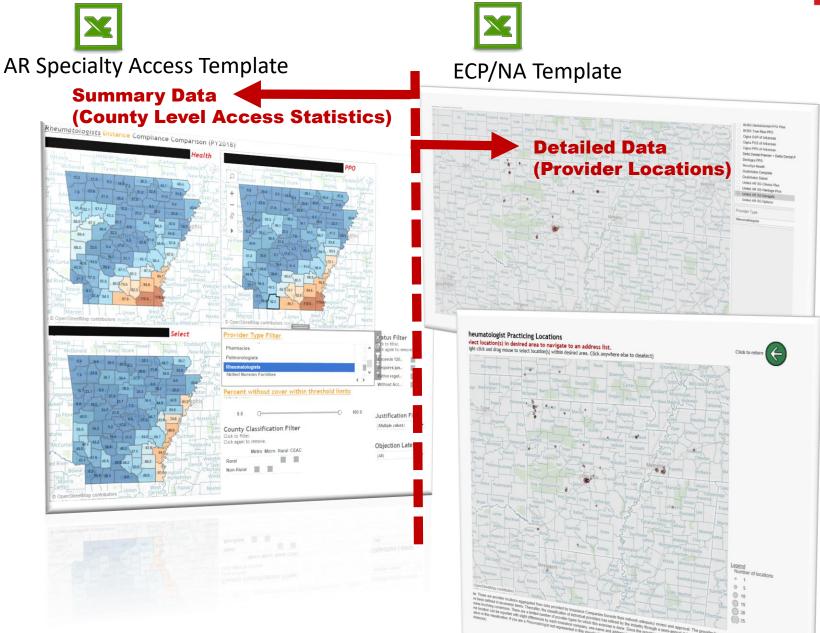


The goal of the Provider Type NPI Pool (PTNP) Data Maintenance process is for the industry to agree on the classification of individual providers and facilities, who treat Arkansans, into "Provider Types" defined by Arkansas.

This data maintenance is key to AID's evidence based Network Adequacy regulation. Besides protecting consumers, it enables AID to be fair and objective with insurance companies.

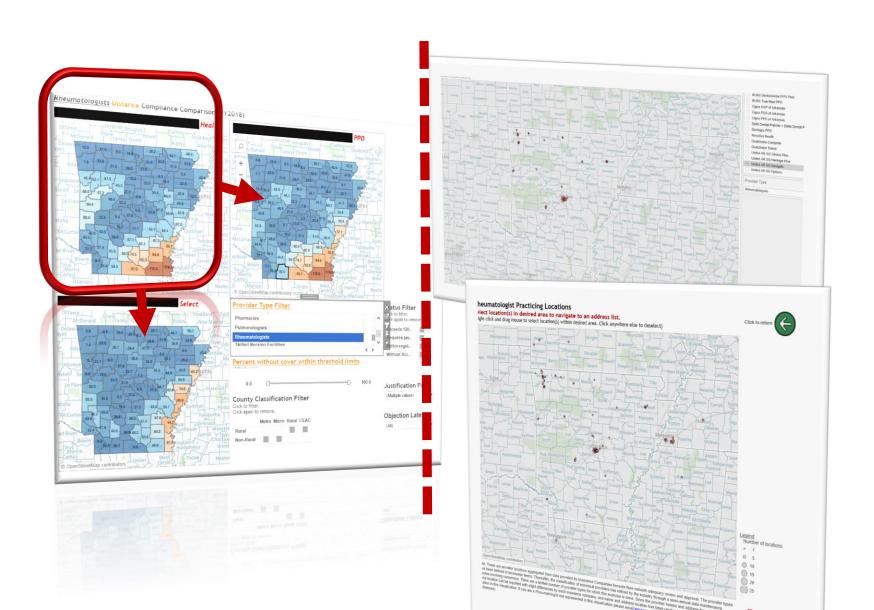
Rapid triangulation for problems





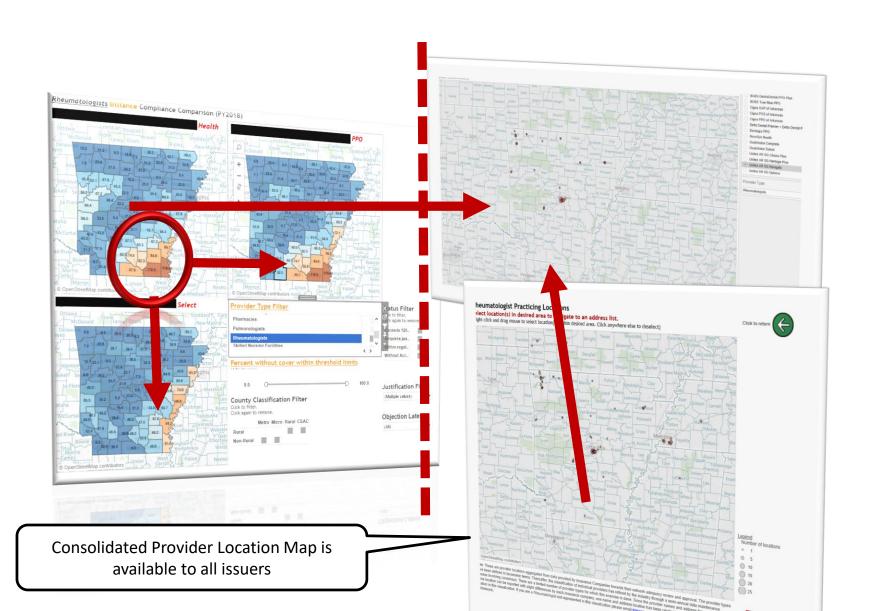
Rapid triangulation for problems





Rapid triangulation for problems





PTNP Data Maintenance What's in it for me?



Providers in your network may not get counted as belonging to a particular provider type if they are not agreed to by industry. AID does not see such providers in its reviews.

For instance;

 if your organization has certain Cardiologists that do not exist in the PTNP, those providers will not get included in AID's main review of Cardiologist Adequacy.



PTNP Data Maintenance

HOW DOES IT WORK?





There are two major types of processes within the NA review in Arkansas.

- 1) Provider-Type-NPI-Pool (PTNP) data maintenance.
- 2) NA data reporting and review.

PTNP Data Maintenance versus NA Data Reporting & Review

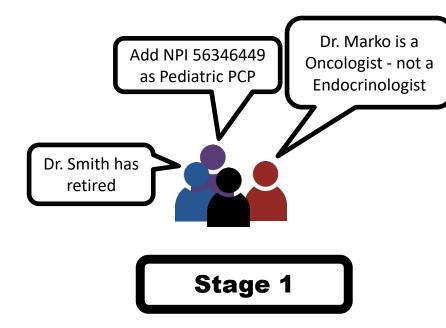


PTNP Data Maintenance	NA Data Submission & Review in SERFF
Twice yearly	Once yearly
Regulatory data pre-planning. Not regulatory data by itself.	Regulatory Data.
Not mandatory. But is highly recommended because it has direct bearing on the regulatory data submitted (Arkansas templates) and on analysis done by AID (on Federal ECP/NA templates).	Mandatory.
SERFF not used for data interactions. Data exchanges through AID public website and Issuer data submissions to AID's secure FTP server.	Only SERFF used.
Industry information drives outcomes.	Regulatory requirements drives outcomes.

PTNP Maintenance Process Overview (Provider Classification Maintenance)



- Annual review of Provider-Types
 - Sufficiency
 - Definitions
- Provider-Type pool data maintenance.
 - Two rounds a year
 - Two stage process
 - i. Suggestion for classification changes by industry
 - ii. Voting on each change by industry



PTNP Maintenance Process Overview (Provider Classification Maintenance)



- Annual review of Provider-Types
 - Sufficiency
 - **Definitions**
- Provider-Type pool data maintenance.
 - Two rounds a year
 - Two stage process
 - Suggestion for classification changes by industry
 - Agree Agree Disagree Add Dr. A Steel to OB/GYN

Agree

Provider Type Pool?

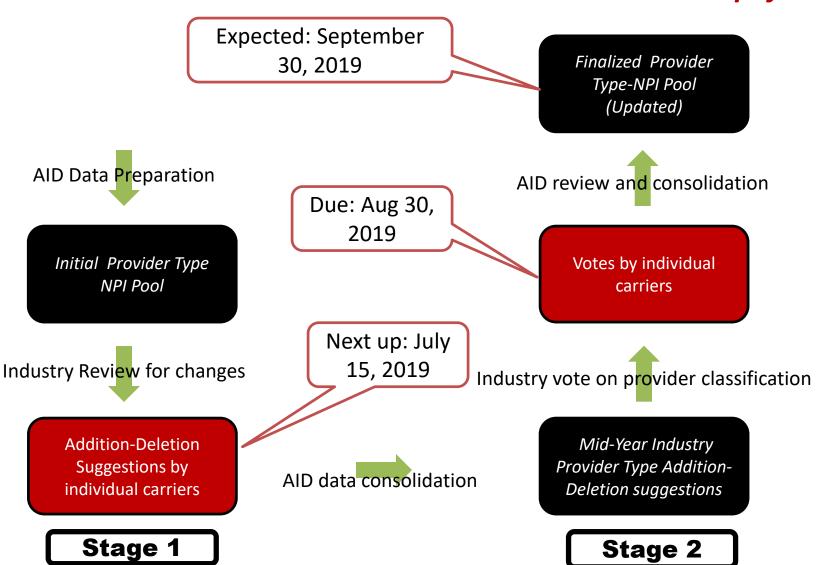
ii. Voting on each change by industry

Stage 2

PTNP data maintenance Round 2



Details available in NA Review Process.pdf





MUTUAL EXPECTATIONS

(ROUND 2 PTNP DATA MAINTENANCE)

How is data exchanged in the PTNP process?



From AID to issuers:

AID's Network Adequacy (NA) webpage (http://rhld.insurance.arkansas.gov/Default/NetworkAdequacy)

For file names refer *Network Adequacy Review Process.pdf* located in the same webpage.

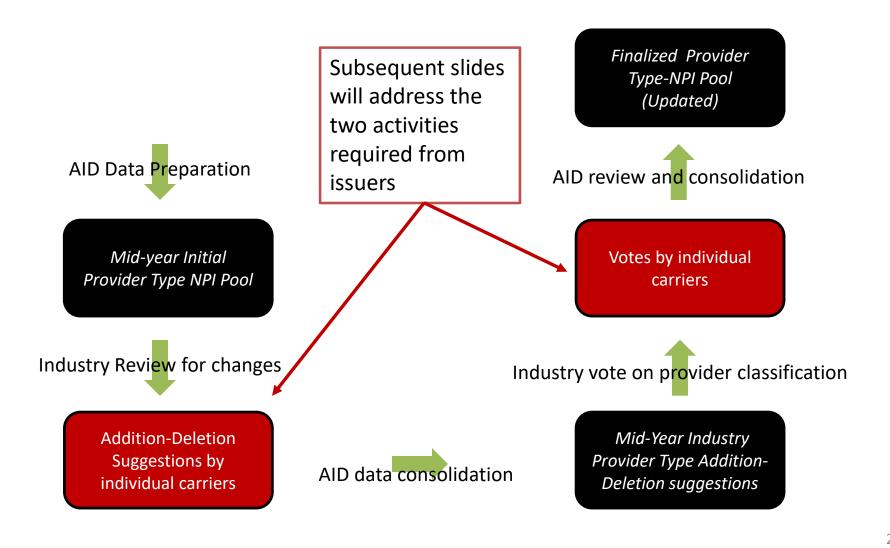
From issuers to AID:

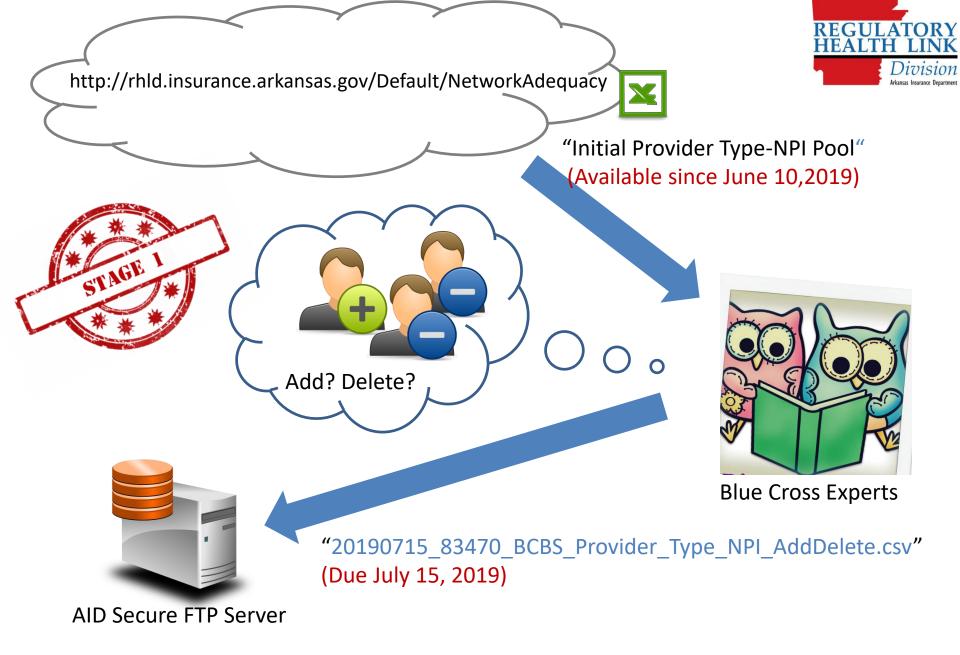
Delivery to AID's secure FTP servers following instructions in "General Data Submission Process to RHLD" located at http://rhld.insurance.arkansas.gov/Info/Public/Templates. For file naming conventions during the two stages of issuer feedback refer *Network Adequacy Review Process.pdf* located in AID's NA webpage.

Data submissions from issuers explained with examples in later slides.

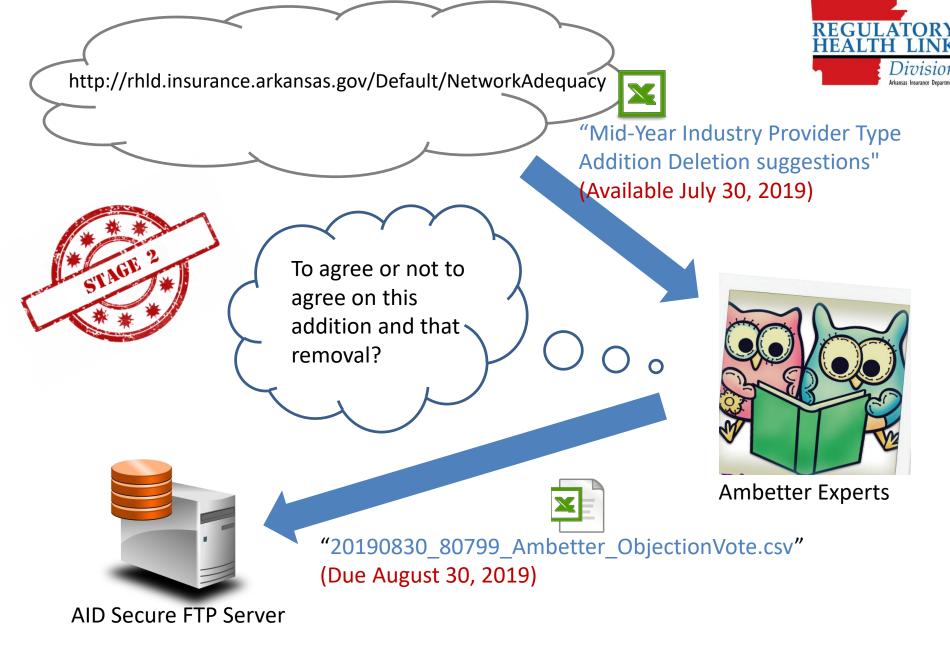
PTNP data maintenance Round 2







Stage 1: "Suggestion for changes" stage using BCBS as an example



Stage 2: "Voting" stage using Ambetter as an example





 Refer pdf document NA Review Process located in <u>http://rhld.insurance.arkansas.gov/Default/NetworkAdequacy</u> (NA website)



- Issuers provides suggestions for change. Due on July 15, 2019.
- AID collects these suggestions and posts the consolidated information on NA website on July 30, 2019.



- Issuers vote their agreement or opposition to suggested changes by others. Due on August 30, 2019.
- AID processes votes and updates the PTNPs on NA website on September 30, 2019.
- For Round 2, issuers are not expected to report on anything further using the updated PTNP that will be published September 30, 2019. AID will however use this updated data to review previously submitted NA detailed data through SERFF.



ERRORS TO AVOID

(DURING "SUGGESTION FOR CHANGE" AND "VOTING" STAGES)

Errors to avoid during Stage 1: "Suggestions for change" (1 of 2)



- Please understand that our PTNP development attempts to focus on actual provider practice rather than academic qualifications. For example an provider who is qualified in "Internal Medicine" but is known to work only in the ER of a hospital, should not be classified as a Primary Care Provider.
- Use the template "Initial Provider Type-NPI Pool" to suggest changes. Please do not fashion your own spreadsheet.
- Please remember we are communicating about correcting classifications of NPIs (i.e. Providers). Not whether a NPI (i.e. Provider) exists or is valid. Each line communicates either addition of an NPI to a "C-bucket" OR- removal of an NPI from a "C-bucket".
- A misclassified NPI *may* require two or more suggestions. One would be a removal from the incorrect "C-bucket" and if not already assigned to the applicable "C-bucket(s)", addition(s) to the correct "C-bucket(s)". Sometimes a misclassification may require only one suggestion- a removal from a "C-bucket" with no concomitant addition suggestions, since an appropriate "C-bucket" does not exist for the NPI.
- AID had observed significant feedback in the voting stage (that comes later) saying that a particular NPI should belong to some other bucket. Please understand that the "Suggestions for change" stage is the stage to add or remove from an classification. The voting stage that comes later, is not the place to make addition or removal suggestions.
- Try not to approach the PTNP data maintenance with an inclination towards one type of action (say an inclination towards either addition or deletion). AID tends to compare competitor networks before issuing an objection. Just focusing on say additions and not on removal of inaccurate NPI classifications may not help you in AID's comparative analysis. Please approach the PTNP data maintenance as an effort towards accurate classification.

Errors to avoid during Stage 1: "Suggestions for change" (2 of 2)



- While removing a misclassification for a provider be careful not to remove other classification for the same NPI that may be correct.
 - For instance while cleaning up misclassified Endocrinologist NPIs do not remove the correct association of those NPIs with Oncology.
- While adding a NPI to a "C-bucket", please pay heed to the taxonomic definition of the "C-bucket". Same consideration applies when looking for removals.
 - For instance the current definition of C250 (Access to Dental General) does not include Pediatric Dentists, so do not add them to "Dental General". Conversely if you know an NPI listed in "Dental – General" is an Pediatric Dentist by practice, ask for its removal.
- **Do** provide your most compelling reason for an addition or deletion. Each issuer's reasons behind an addition or removal is shown to all issuers during the voting round and may influence their feedback. During vote processing AID may overrule the direction of a vote based on the strength of an issuer's reason.
 - An example of a compelling reason for removal of a PCP can be a brief "Works only in emergency medicine in our 2016 claims data".
- While adding bordering state providers, please remember that AID does not have any
 "contiguous county" requirement. But bear in mind though that adding providers very
 far from the borders may not help with your average distance calculations. Add
 providers in bordering states that Arkansans do avail because your consumers are
 probably the best judge.

Errors to avoid during Stage 2: "Voting" stage (1 of 1)



- Please use the recommended template.
- Please remember that this stage is only to communicate your agreement or rejection of a suggested change of provider classification. It is not about communicating whether a NPI (i.e. Provider) exists — or — that the provider is miss-classified and should belong to a different bucket. While rejecting an addition suggestion, if you realize that the NPI belongs to a different C-bucket, your opportunity for suggesting the addition to the appropriate C-bucket(s) will be in future PTNP data maintenance rounds. Suggestion to add to a different C-bucket cannot be handled at this stage.
- Most network data considerations during the "add-remove" stage also apply to the "Voting" stage; Taxonomic definitions, Out-of-state provider distance considerations, etc. should be considered.
 - For example, before objecting to some other issuer's removal of an apparently valid NPI-"C bucket" combination, consider if the provider is out of state, and if all practicing locations are far from the border.
- Do provide your most compelling reason behind rejecting an addition or deletion. AID may use the strength of your reason to settle a tie, or even reverse the direction of a vote.
 - An example of a compelling reason for rejecting addition of a NPI as a PCP can be a terse "Works only in emergency rooms per claims data".

Next steps for industry



- Refer to slide titled "Expectations from Issuers"
- AID welcomes communication from Issuers on Network Adequacy on any issue
 - Clarifications or questions
 - One-on-one meetings for those new to the program
 - Suggestions for improvement

Questions?



Contact

RHLD.DataOversight@arkansas.gov



