Arkansas Network Adequacy Issue Log

(Maintained by Arkansas Insurance Department. If you wish to add or comment on this log please email RHLD.DataOversight@arkansas.gov)

SI# Limitations in Arkansas NA Review & Regulation	Status	AID Comment	Date	WIP Start	Resolution	Originator
			logged		Date	
1 Lack of uniformity in the interpretation of Provider type	in-progress		1/4/2016	9/15/2015		
2 Lack of uniformity in the description of individual Providers	in-progress		1/4/2016	9/15/2015		
(Individual or Facility). Is the provider a Pediatrician?						
Pediatrician gastroentrologist? Or both?						
3 The distance standards in Arkansas is required at a county level		AID feels that the geographic variation data needs	1/4/2016			Industry
but does not take into account inevitable geographic variation.		to be studied before thresholds and algorithms are				
Work is needed here otherwise it leads to unnecassry		applied. The Department feels that the NA data				
justification dialog overhead. Also transperancy and		gathering for PY2017 would be more accurate for				
predictibility diminishes.		study. The algorithm for thesholds may be based				
		on county urban/rural/metro classification or				
		other factors such as proximity to metro areas etc.				
		There may need to be a county by county classification based on the data.				
		classification based on the data.				
4 Data for providers who serve the entire state or provide		Providers of this type may be providing valuable	1/4/2016			AID
telemedicine not collected and does not figure into NA review.		services and not accounted for. This is especially	-, .,			
		problamatic for calculating inclusion percentage				
		for networks not covering the entire state				
5 Data for limited weekly availibility of providers (few days of a			1/4/2016			Industry?
week versus someone available all week) not collected and						
figured into NA review. An insurer's contracting with a provider						
available for 1 day/week is not the same as another contracting						
with a provider for the entire week.						
6 Nurses and PA s working for a Specialist may be flagged as a		AID	1/4/2016			ACHI/Industry
PCP. Does not reflect a true picture of PCP coverage and makes						, to the made of
it appear better than it is.						
7 Data on % of providers acceptance of new patients not being			1/4/2016			AID
analyzed						
8 After hours availibility not being captured or processed.			1/4/2016			AID
9 Timeliness and volume of provider directory changes not being			1/4/2016			AID
monitored						

10	Integration between AID's divisions in charge of regulating NA and division in charge of handling consumer complaints needs to be established at a systems level to ensure data capture and trend analysis over time.	AID will research current classification and data capture details of member complaints within AID's internal systems that would be most suitable for Network Adequacy monitoring.	1/4/2016		AID
11	Distance as a crow fly standard not drive distance. Drive distance is more accurate.	Rule 106 uses the term "radius" when it refers to 30 and 60 mile limits. This may need amendment to change to drive distance. Also carriers need to be polled for system capability to handle drive distance.	1/4/2016		AID
12	No regulation covering unexpected out-of-network charges for services in an in-network facility		1/4/2016		AID
13	No regulation for covering out-of-network charges from incorrect provider directory information		1/4/2016		AID
14	Claims Data not available or mined for discovering NA problems (High incidence of ER visits, ratio of OON to total encounters for various provider types, usage patterns among different provider types across geographies etc.)		1/4/2016		AID
15	Lack of NPI payment hierarchy may distort NA		1/4/2016		Qualchoice
16	Waiting time not being captured. Neither is there any regulation covering this. This may be a very important indicator of true network adequacy.		1/4/2016		AID
17	Percentage of enrollees covered within counties was not used to trigger justifications. The average distance to enrollees was only used.		1/4/2016		AID
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