

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 logged	WIP Start Date	Resolution Date	Originator
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 (Individual or Facility). Is the provider a Pediatrician? Pediatrician gastroentrologist? Or both?	in-progress		1/4/2016	9/15/2015		
3	The distance standards in Arkansas is required at a county level but does not take into account inevitable geographic variation. Work is needed here otherwise it leads to unnecessry justification dialog overhead. Also transparancy and predictibility diminishes.		AID feels that the geographic variation data needs to be studied before thresholds and algorithms are applied. The Department feels that the NA data gathering for PY2017 would be more accurate for 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.	1/4/2016			Industry
4	Data for providers who serve the entire state or provide telemedicine not collected and does not figure into NA review.		Providers of this type may be providing valuable services and not accounted for. This is especially problamatic for calculating inclusion percentage for networks not covering the entire state	1/4/2016			AID
5	Data for limited weekly availibility of providers (few days of a 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.			1/4/2016			Industry?
6	Nurses and PA s working for a Specialist may be flagged as a PCP. Does not reflect a true picture of PCP coverage and makes it appear better than it is.		AID	1/4/2016			ACHI/Industry
7	Data on % of providers acceptance of new patients not being analyzed			1/4/2016			AID
8	After hours availibility not being captured or processed.			1/4/2016			AID
9	Timeliness and volume of provider directory changes not being monitored			1/4/2016			AID

