



December 4, 2020

Ms. Lisa Larson
Director of Regulatory Affairs
Maryland Insurance Administration
200 St. Paul Place, Suite 2700
Baltimore, MD 21202
Sent via email: networkadequacy.mia@maryland.gov

Re: Proposed Action on 31.10.44, Network Adequacy Regulation

Dear Ms. Larson:

On behalf of America's Health Insurance Plans (AHIP), thank you for the opportunity to comment on the proposed revisions to the network adequacy regulations COMAR 31.10.44. We appreciate continued efforts by the Maryland Insurance Administration (MAI) to update [HB 1318](#) passed in 2016 to provide insight on the availability and timeliness of enrollees access to their health care needs.

The proposed changes are very concerning as they move well beyond the intention of the statute and other state's network adequacy requirements. Below are just a few of the challenges we've highlighted, as the extensive nature of the requirements will need more time to examine, and we look forward to future in-depth conversations.

Providers: One of the most concerning requirements is the amount of times health plans must be reaching out to providers to be updated on their availability. This will be extremely burdensome on providers as they respond to all the health plans whose networks they participate in on their accessibility multiple times during the year. This is also concerning for the health plans as providers have a very low response rate to health plans' inquiries. In California they addressed this issue – a provider who fails to respond in a timely fashion may receive penalties which may include removal from the carrier's directory or a delay in reimbursement.

In general, networks remain stable and when provider or provider groups leave a network, a health plan's provider relation department will review why it occurred and evaluate the impact that loss has on its system and react accordingly to meet the expectations of our enrollees, employers and the state's regulations. Forcing continuous reviews provides no benefit to the consumer with a very hefty price tag.

The regulation does not seem to consider shortages of provider specialists – health plans cannot recruit and add to networks when there are no providers physically located in the area. As of September 30, 2020, the U.S. Health Resources and Services Administration's *Designated Health Professional Shortage Statistics Report* stated Maryland has only met 34% of the need for mental health professionals and 55% for primary care providers. While health insurance providers progress innovative methods for attracting providers to specific regions, all stakeholders need to work towards addressing provider shortages by geographic region and specialty.

Cost: The California network adequacy regulations amended in 2015 by the Department of Managed Health Care and in 2016 by the California Department of Insurance cost each of the regulated health plans millions of dollars to enact and still costs half a million dollars to much more for companies to continue to adhere to the reporting requirements required annually. In some instances, Maryland requirements can be seen as more stringent, and therefore likely to be more expensive. To remain actuarially sound, this will have a direct impact to premium rates which are likely to increase as a direct result of this regulation.

Telehealth. Health plans continue to take a leadership role in addressing gaps in provider networks and any gaps in quality of care. Telehealth is an innovative and cost saving approach to assist in addressing some of the barriers mentioned above such as a lack of providers in rural locations. We appreciate the utilization of telehealth within the regulations and encourage MIA to continue the allowance for telehealth to be used to its fullest extent when clinically appropriate and count towards meeting access standards.

Network adequacy standards need to be flexible and not overly prescriptive and rigid, which threaten efforts to provide innovative ways of delivering and paying for high-quality affordable care.

We appreciate the opportunity the MIA has given to provide comments on the proposed revisions to the network adequacy regulations. AHIP and our members look forward to furthering discussions with you on this important matter. If you have any questions, please do not hesitate to contact me at khathaway@ahip.org or (202) 870-4468.

Sincerely,



Kris Hathaway
Vice President, State Affairs
America's Health Insurance Plans

America's Health Insurance Plans is the national association whose members provide insurance coverage for health care and related services. Through these offerings, we improve and protect the health and financial security of consumers, families, businesses, communities and the nation. We are committed to market-based solutions and public-private partnerships that improve affordability, value, access and well-being for consumers.