

LARRY HOGAN  
Governor

BOYD K. RUTHERFORD  
Lt. Governor



KATHLEEN A. BIRRANE  
Commissioner

GREGORY M. DERWART  
Deputy Commissioner

DAVID COONEY  
Associate Commissioner  
Life and Health

200 St. Paul Place, Suite 2700, Baltimore, Maryland 21202  
Direct Dial: 410-468-2170 Fax: 410-468-2204  
Email: david.cooney@maryland.gov  
410-468-2000 1-800-492-6116  
TTY: 1-800-735-2258  
[www.insurance.maryland.gov](http://www.insurance.maryland.gov)

January 10, 2022

Ms. Melissa Munster, Counsel  
Law and Regulatory Affairs  
Aetna  
151 Farmington Avenue, Mail Code RT63  
Hartford, CT 06156

Re: Aetna Health Inc. ("AHI")  
Network Adequacy Filing 2020

Dear Ms. Munster:

The Maryland Insurance Administration ("Administration") has completed its review of the AHI 2020 Network Adequacy Access Plan (the "AHI 2020 Access Plan") filed on July 1, 2020, supplemented with additional information and documentation on January 13, 2021, April 26, 2021, June 14, 2021, August 20, 2021, October 14, 2021, November 24, 2021, December 17, 2021, and January 5, 2022. This filing was made pursuant to § 15-112(c)(2)(i) of the Insurance Article and COMAR 31.10.44.

### ***AHI 2020 Access Plan***

The Administration's review of the AHI 2020 Access Plan has found that the access standards in COMAR 31.10.44.04 were not met for the following, based on the data self-reported by AHI. All other access standards in COMAR 31.10.44 were met.

#### Travel Distance Standards

1. Primary care providers met the required standard for 99.9% of suburban enrollees, leaving 21 members outside the travel distance standard of ten miles in one zip code.
2. Gynecology, OB/GYN providers met the required standard for 99.5% of urban enrollees, leaving 53 members outside the travel distance standard of five miles in one zip code. The standard was met for 99.6% of suburban enrollees, leaving 49 members outside the travel distance standard of ten miles in two zip codes.

3. Pediatrics-Routine/Primary Care providers met the required standard for 99.4% of urban enrollees, leaving 24 members outside the travel distance standard of five miles in one zip code. The standard was met for 99.5% of suburban enrollees, leaving 25 members outside the travel distance standard of ten miles in two zip codes.
4. Applied behavioral analyst providers met the required standard for 99.7% of suburban enrollees, leaving 76 members outside the travel distance standard of thirty miles in four zip codes.
5. Dermatology providers met the required standard for 99.5% of urban enrollees, leaving 111 members outside the travel distance standard of ten miles in one zip code.
6. ENT/Otolaryngology providers met the required standard for 99.9% of suburban enrollees, leaving 62 members outside the travel distance standard of thirty miles in one zip code.
7. Gynecology only providers met the required standard for 99.9% of suburban enrollees, leaving 27 members outside the travel distance standard of ten miles in one zip code.
8. Oncology-Medical and Surgical providers met the required standard for 99.5% of urban enrollees, leaving 111 members outside the travel distance standard of ten miles in one zip code.
9. Ophthalmology providers met the required standard for 99.5% of urban enrollees, leaving 111 members outside the travel distance standard of ten miles in one zip code.
10. Urology providers met the required standard for 99.5% of urban enrollees, leaving 111 members outside the travel distance standard of ten miles in one zip code.
11. Pharmacy providers met the required standard for 99.9% of suburban enrollees, leaving 21 members outside the travel distance standard of ten miles in one zip code.
12. Critical Care Services-Intensive Care Unit facilities met the required standard for 99.5% of urban enrollees, leaving 111 members outside the travel distance standard of ten miles in one zip code.
13. Diagnostic radiology facilities met the required standard for 99.5% of urban enrollees, leaving 111 members outside the travel distance standard of ten miles in one zip code.
14. Outpatient Infusion/Chemotherapy facilities met the required standard for 98.1% of urban enrollees, leaving members 1,105 members outside the travel distance standard of ten miles in four zip codes.
15. Skilled nursing facilities met the required standard for 99.5% of urban enrollees, leaving 111 members outside the travel distance standard of ten miles in one zip code.

16. Surgical services (outpatient or ambulatory surgical center) facility providers met the required standard for 99.6% of urban enrollees, leaving 111 members outside the travel distance standard of ten miles in one zip code.
17. Other behavioral health/substance abuse facility providers met the required standard for 99.5 % of urban enrollees, leaving 111 members outside the travel distance standard of ten miles in one zip code. The standard was met for 99.8% of suburban enrollees, leaving 64 members outside the travel distance standard of twenty-five miles in three zip codes.

### ***AHI 2019 Access Plan Consent Order***

On March 19, 2021, the Administration and AHI entered into a Consent Order to resolve matters related to the AHI 2019 Access Plan. The Administration had concluded in the Consent Order that that AHI violated § 15-112 of the Insurance Article and COMAR 31.10.44.03C by filing an access plan that failed to comply with required travel distance standards and appointment waiting time standards, by failing to include in the executive summary plan form the required information regarding certified registered nurse practitioners, and by filing an access plan that failed to demonstrate that at least 30 percent of the available essential community providers in each of the urban, rural, and suburban areas are included in the network. The Administration imposed an administrative penalty on AHI of \$75,000 for the violations, but suspended the penalty pending the Administration's (i) review of the access plan submitted by AHI in 2021; (ii) determination as to whether the 2021 access plan substantiates representations made by AHI related to its intent to adjust record keeping methodologies and to improve its compliance with the access standards; and (iii) based on such review and determination, decision on whether the administrative penalty should be paid, reduced, or rescinded.

In the 2019 Consent Order, AHI acknowledged the deficiencies in its self-reported data regarding appointment waiting time standards for urgent care behavioral health/substance use disorder services. In 2019, the appointment waiting time standard for urgent behavioral health/substance use disorder services was reported separately and measured using a 48-hour standard, which is more stringent than the 72-hour standard in COMAR 31.10.44.05C. AHI advised that that the 2019 survey tool used for this measurement did not allow measurement against the 72-hour standard. The AHI 2020 Access Plan showed that the survey tool used in 2020 by AHI was able to measure and report appointment waiting times for all urgent care combined (including medical, behavioral health, and substance use disorder services) and that the 72-hour appointment waiting time standard was met for 95% of enrollees, as required by COMAR 31.10.44.05A(1).

The AHI 2020 Access Plan executive summary plan form failed to include the required information regarding certified registered nurse practitioners. AHI stated that this was because the information that AHI reported in the AHI 2020 Access Plan did not include certified nurse practitioners in its calculations for travel distance standards since AHI's systems did not allow AHI to readily determine this information. AHI stated that the information reported in the

Ms. Melissa Munster  
January 10, 2022  
Page 4

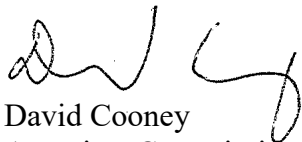
executive summary pursuant to COMAR 31.10.44.09A(1)(b) and (c), therefore, should have been zero. For future filings, AHI stated that it will include these providers in the calculations, if needed, to comply with the travel distance standards.

The data reported in the AHI 2020 Access Plan demonstrated that AHI met the requirement that at least 30 percent of the available essential community providers in each of the urban, rural, and suburban areas are included in the network. This information was added to the executive summary form filed on December 17, 2021.

The AHI 2020 Access Plan shows some improvement in compliance with the travel distance standards, but there continue to be areas where the access standards were not met, as noted above. The AHI 2021 Access Plan, submitted on July 1, 2021, is currently under review by the Administration. Upon completion of the review, a determination will be made on whether the administrative penalty should be paid, reduced, or rescinded.

AHI has the right to request a hearing on this determination letter in accordance with § 2-210 of the Insurance Article. A request for a hearing must be made in writing and received by the Administration within thirty (30) days of the date of this letter. The rules for requesting a hearing are set forth in COMAR 31.02.01.

Very truly yours,



David Cooney  
Associate Commissioner  
Life and Health