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December 12, 2022

Ms. Teresa Howard
Cigna Legal, U.S. Compliance Operations – Regulatory Reporting
Cigna Health and Life Insurance Company
900 Cottage Grove Rd
Bloomfield, CT 06152

Re: Cigna Health and Life Insurance Company (“CHLIC”)
2021 Network Adequacy OAP Access Plan
2021 Network Adequacy PPO Access Plan
2021 Network Adequacy POS Access Plan

Dear Ms. Howard:

The Maryland Insurance Administration (“Administration”) has completed its review of the Cigna Health and Life Insurance Company 2021 Network Adequacy Access Plans: (the “CHLIC 2021 OAP Access Plan,” the “CHLIC 2021 PPO Access Plan,” and the “CHLIC 2021 POS Access Plan,”) filed on July 1, 2021, supplemented with additional information and documentation on October 29, 2021, January 21, 2022, March 28, 2022, and May 9, 2022. These filings were made pursuant to § 15-112(c)(2)(i) of the Insurance Article and COMAR 31.10.44.

CHLIC uses three provider panels for health benefit plans in Maryland, the OAP network, the PPO network, and the POS network.

CHLIC 2021 OAP Access Plan

The Administration’s review of the CHLIC 2021 OAP 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 CHLIC. All other access standards in COMAR 31.10.44 were met.

Travel Distance Standards

1. In suburban areas, Applied Behavioral Analyst providers must be within 30 miles of enrollee residence. Applied Behavioral Analyst providers met the required standard for 99.9% of suburban enrollees, leaving 7 members outside the travel distance standard in one zip code.
2. In urban areas, Gynecology, OB/GYN providers must be within 5 miles of enrollee residence. Gynecology, OB/GYN providers met the required standard for 99.9% of urban enrollees, leaving 1 member outside the travel distance standard in one zip code.
3. In urban areas, Pediatrics-Routine/Primary Care providers must be within 5 miles of enrollee residence. Pediatrics-Routine/Primary Care providers met the required standard for 99.9% of urban enrollees, leaving 1 member outside the travel distance in one zip code.
4. In suburban areas, Other Behavioral Health/Substance Use facilities must be within 25 miles of enrollee residence. Other Behavioral Health/Substance Use facilities met the required standard for 99.9% of suburban enrollees, leaving 6 members outside the travel distance standard in one zip code.

In its January 21, 2022 supplement to the CHLIC 2021 OAP Access Plan, CHLIC stated that the reported network adequacy shortage for Applied Behavioral Analyst providers was closed on December 13, 2021, with 100% of suburban enrollees within the required travel distance standard.

Waiver Requests

The Administration has considered CHLIC's requests for waivers for the travel distance standard for Applied Behavioral Analyst, Gynecology OB/GYN, and Pediatric providers, and for Other Behavioral Health/Substance Use facilities. The waiver requests were made for the OAP network on July 1, 2021, with additional information to support this request filed on January 21, 2022.

The criteria that must be met in order to qualify for a waiver of a standard are set forth in COMAR 31.10.44.07. The Administration "may find good cause to grant the network adequacy waiver request if the carrier demonstrates that the physicians, other providers, or health care facilities necessary for an adequate network: (1) Are not available to contract with the carrier; (2) Are not available in sufficient numbers; (3) Have refused to contract with the carrier; or (4) Are unable to reach agreement with the carrier."

Please be advised that the Administration has found good cause to grant the requests for 1 year because additional providers are not available to contract with the carrier or not available in sufficient numbers, as evidenced by the following information which was presented by CHLIC:

- Efforts to locate any additional providers and provider types within the required distance standards in specific zip codes to meet the travel standards;
- Continued monitoring of deficient areas for available providers to recruit;
- Executed contracts with additional providers for Applied Behavioral Analysis services to cover members in the area previously outside of travel distance standards;
- With regard to the lack of Gynecology, OB/Gyn providers within the regulatory standard of 5 miles for the member in zip code 21052, CHLIC is contracted with the closest provider, which is 5.6 miles away;
- With regard to the lack of Pediatrics-Routine/Primary Care providers within the regulatory standard of 5 miles for the member in zip code 21052, CHLIC is contracted with the closest provider, which is 5.3 miles away; and

The Administration determined that zip code 21052 is associated with Fort Howard Post Office boxes and this zip code was designated as urban under the original population density classifications due to the large number of Post Office Boxes within a small geographic area. Based on updated information provided to the Administration by the Maryland State Department of Planning and the U.S. Census Bureau, the population density classifications for certain zip codes were changed for the 2022 access plan filings, and zip code 21052 was reclassified as suburban to match the surrounding zip codes. While the 21052 zip code was not officially reclassified as suburban for the 2021 access plan filing, the Administration determined that it was appropriate to apply the suburban standard of ten miles, rather than the urban standard of 5 miles, for this the zip code in 2021 for Gynecology OB/Gyn and Pediatric providers.

The Administration notes that, in accordance with COMAR 31.10.44.04A(1), “*The distances listed in §A(5) of this regulation shall be measured from the enrollee’s place of residence.*” Since Post Office boxes are unlikely to identify the physical location of an enrollee’s residence, the Administration expects CHLIC to demonstrate an effort to find a physical rather than post office address for enrollees in future access plan filings.

In granting the waiver requests for the only access plan standards in COMAR 31.10.44 where deficiencies were reported in the CHLIC 2021 OAP Access Plan, the Administration has determined that the CHLIC 2021 OAP Access Plan complies with § 15-112 of the Insurance Article and COMAR 31.10.44.03C.

CHLIC 2021 PPO Access Plan and 2021 POS Access Plan

The Administration’s review has found that both the CHLIC 2021 PPO Access Plan and the CHLIC 2021 POS Access Plans have met the standards in COMAR 31.10.44, based on the data self-reported by CHLIC.

Appointment Waiting Time Standards for Urgent Care

The data self-reported by CHLIC in the three 2021 access plans indicates that the appointment waiting time standard for urgent care was met for all three networks. While the Administration has determined that CHLIC provided sufficient explanation and documentation to demonstrate that the urgent care standard of 95% was met for 2021, it is expected that if CHLIC intends to combine telehealth claims with provider survey results when measuring appointment waiting time in future access plan filings, CHLIC will utilize a methodology that ensures a proportional, representative balance of surveys and actual claims data.

This determination letter is limited to review of the CHLIC 2021 OAP Access Plan, the CHLIC 2021 PPO Access Plan, and the CHLIC 2021 POS Access Plan and is independent of the Administration's review of any other Network Adequacy Access Plans and submissions in connection thereof which are filed by CHLIC.

CHLIC 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