

BEFORE THE MARYLAND INSURANCE ADMINISTRATION

MARYLAND INSURANCE ADMINISTRATION *
200 ST. PAUL PLACE, SUITE 2700 *
BALTIMORE, MARYLAND 21202 *

vs. *

GROUP HOSPITALIZATION MEDICAL *
SERVICES, INC. *
840 FIRST ST., NE *
WASHINGTON, DC 20065 *

CASE NO: MA-2021-05-017

NAIC# 53007 *

CONSENT ORDER

This Consent Order is entered into by the Maryland Insurance Commissioner and GROUP HOSPITALIZATION MEDICAL SERVICES, INC. ("GHMSI" or "Respondent") pursuant to §§ 2-108, 2-204, and 4-113 of the Insurance Article, Maryland Code Annotated, to resolve the matter before the Maryland Insurance Administration ("Administration").

I. RELEVANT REGULATORY FRAMEWORK

1. Each nonprofit health service plan ("NPHSP") that uses provider panels for health benefit plans offered in the State must assure that its provider panels meet certain adequacy standards. On July 1 of each year each NPHSP is required to file a report with the Administration demonstrating the NPHSP's compliance with those standards.

2. §15-112 of the Insurance Article provides, in pertinent part:

(a) (1) In this section the following words have the meanings indicated.

* * *

(5) (i) "Carrier" means:

* * *

2. a nonprofit health service plan;

(b) (1) Subject to paragraph (3) of this subsection, a carrier that uses a provider panel shall:

- (i) if the carrier is an insurer, nonprofit health service plan, health maintenance organization, or dental plan organization, maintain standards in accordance with regulations adopted by the Commissioner for availability of health care providers to meet the health care needs of enrollees;

* * *

(c) (1) This subsection applies to a carrier that:

- (i) is an insurer, a nonprofit health service plan, or a health maintenance organization; and
 - (ii) uses a provider panel for a health benefit plan offered by the carrier.
- (2) (i) On or before July 1, 2018, and annually thereafter, a carrier shall file with the Commissioner for review by the Commissioner an access plan that meets the requirements of subsection (b) of this section and any regulations adopted by the Commissioner under subsections (b) and (d) of this section.

3. The regulations referenced in § 15-112(c)(2)(i) of the Insurance Article are set forth in COMAR 31.10.44.

4. The network adequacy standards are set forth in COMAR 31.10.44.04 -.06 and consist of travel distance standards (COMAR 31.10.44.04), appointment waiting time standards (COMAR 31.10.44.05), and provider-to-enrollee ratio standards (COMAR 31.10.44.06) (collectively, the "Standards").

5. The access plan content and filing requirements are set forth in COMAR 31.10.44.03, which provides, in pertinent part:

.03 Filing of Access Plan.

C. Each annual access plan filed with the Commissioner shall include:

- (1) An executive summary in the form set forth in Regulation .09 of this chapter;

(2) The information and process required by Insurance Article, §15-112(c)(4), Annotated Code of Maryland, and the methods used by the carrier to comply with the monitoring requirement under §15-112(c)(5);

(3) Documentation justifying to the Commissioner how the access plan meets each network sufficiency standard set forth in Regulations .04—.06 of this chapter; and

(4) A list of all changes made to the access plan filed the previous year.

6. COMAR 31.10.44.07 allows a carrier to apply for a temporary waiver from compliance with one or more of the Standards provided that certain criteria are met.

II. FINDINGS

7. GHMSI holds a Certificate of Authority to act as a NPHSP in the State and uses provider panels for health benefit plans offered in the State. As such, it is subject to § 15-112 of the Insurance Article and the network adequacy standards set forth in COMAR 31.10.44.04 - .06. In addition, GHMSI is required to file a network adequacy plan in accordance with COMAR 31.10.44.03.

8. On July 1, 2019, CareFirst BlueCross BlueShield submitted a Network Adequacy Plan (the "BC 2019 Access Plan") to the Administration on behalf of GHMSI.

9. On the same date, GHMSI requested a waiver of the Appointment Wait Time Standards (the "Waiver Request"). The Waiver Request set forth proprietary and confidential information explaining the basis for the Waiver Request and describing the steps GHMSI had taken and planned to take to attempt to improve its network to meet this standard and to avoid future waiver requests as to this standard.

10. On October 29, 2019, the Administration issued an Order against GHMSI (the "Initial Order") finding that the BC 2019 Access Plan failed to include all of the information and documentation required by § 15-112 of the Insurance Article, COMAR

31.10.44.03, and COMAR 31.10.44.09. On the same date, the Administration directed GHMSI by letter to submit additional information necessary for the Administration to evaluate whether GHMSI was in compliance with the Standards.

11. On November 7, 2019, GHMSI requested a hearing to contest the Initial Order.

12. The Administration thereafter agreed with GHMSI that if, within 60 days of the Initial Order, GHMSI provided the additional information requested in both the Initial Order and the October 29, 2019 letter, the hearing request would be withdrawn, the Administration would continue its review of the BC 2019 Access Plan, and upon completion of the BC 2019 Access Plan review, the Initial Order would be rescinded.

13. On December 27, 2019, GHMSI submitted the additional information. The information included a revised executive summary form and several proprietary and confidential items, including details of the methodology GHMSI used to measure and assess its performance in meeting the network adequacy standards and the factors GHMSI used to build its network. The information also contained proprietary and confidential material intended to supplement the Waiver Request, including a description of outreach efforts to contract with providers and additional details regarding GHMSI's efforts to improve its network.

A. The Waiver Request

14. 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, which states, in pertinent part:

.07 Waiver Request Standards

- A. A carrier may apply for a network adequacy waiver, for up to 1 year, of a network adequacy requirement listed in this chapter.

B. The Commissioner 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.

C. A carrier seeking a network adequacy waiver shall submit a written request to the Commissioner that includes the following information:

* * *

- (2) A list of physicians, other providers, or health care facilities within the relevant service area that the carrier attempted to contract with, identified by name and specialty, if any, or health care facility type;
- (3) A description of how and when the carrier last contacted the physicians, other providers, or health care facilities;
- (4) A description of any reason each physician, other provider, or health care facility gave for refusing to contract with the carrier;
- (5) Steps the carrier will take to attempt to improve its network to avoid future network adequacy waiver requests;

15. The Waiver Request failed to include the information required by COMAR 31.10.44.07C(2)-(4). Even after additional information was provided on December 27, 2019, the Waiver Request failed to demonstrate that the physicians, other providers, or health care facilities necessary for an adequate network: were not available to contract with the carrier; were not available in sufficient numbers; refused to contract with the carrier; and/or were unable to reach agreement with the carrier.

16. Because GHMSI failed to satisfy the criteria for a waiver as set forth in COMAR, its Waiver Request must be denied.

B. The Access Plan-Travel Distance Standards

17. The data submitted by GHMSI in connection with the BC 2019 Access Plan failed to demonstrate compliance with the Travel Distance Standards.

18. COMAR 31.10.44.04 provides, in pertinent part:

.04 Travel Distance Standards

A. Sufficiency Standards.

(1) Except as stated in §B of this regulation, each provider panel of a carrier shall have within the geographic area served by the carrier's network or networks, sufficient primary care physicians, specialty providers, behavioral health and substance use disorder providers, hospitals, and health care facilities to meet the maximum travel distance standards listed in the chart in §A(5) of this regulation for each type of geographic area. The distances listed in §A(5) of this regulation shall be measured from the enrollee's place of residence.

* * *

(5) Chart of Travel Distance Standards.

	Urban Area Maximum Distance (miles)	Suburban Area Maximum Distance (miles)	Rural Area Maximum Distance Miles
Provider Type:			

* * *

Gynecology, OB/GYN	5	10	30
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* * *

Applied Behavioral Analyst	15	30	60
Cardiovascular Disease	10	20	60
Gastroenterology	10	30	60
Gynecology Only	15	30	75
Neurology	10	30	60
Oncology – Medical Surgical	10	20	60
Ophthalmology	10	20	60
Pulmonology	10	30	60
Urology	10	30	60

* * *

Facility Type:			
Acute Inpatient Hospitals	10	30	60
Critical Care Services – Intensive Care Units	10	30	100

* * *

Outpatient Dialysis	10	30	50
Outpatient Infusion/Chemotherapy	10	30	60
Skilled Nursing Facilities	10	30	60
Surgical Services (outpatient or Ambulatory Surgical Center)	10	30	60

19. The data self-reported by GHMSI disclosed the following deficiencies based on distance of a provider to an enrollee's residence:

- (a) Gynecology, OB/GYN providers met the required standard for 99.8% of urban enrollees, leaving 874 enrollees outside of the travel distance standard of five miles in five zip codes. The standard was met for 99.4% of suburban enrollees, leaving 1,142 enrollees outside of the travel distance standard of ten miles in six zip codes.

Urban zip codes:

- (i) Zip code 21403 has 227 members outside the standard.
- (ii) Zip code 20714 has 557 members outside the standard.
- (iii) Zip code 21767 has 65 members outside the standard.
- (iv) Zip code 22025 has 2 members outside the standard.
- (v) Zip code 22193 has 23 members outside the standard.

Suburban zip codes:

- (i) Zip code 20764 has 256 members outside the standard.
- (ii) Zip code 21913 has 33 members outside the standard.
- (iii) Zip code 20625 has 94 members outside the standard.
- (iv) Zip code 21716 has 436 members outside the standard.
- (v) Zip code 21777 has 174 members outside the standard.
- (vi) Zip code 21842 has 149 members outside the standard.

- (b) Applied Behavioral Analyst providers met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside of the travel distance standard of fifteen miles in one zip code, 20714.
- (c) Cardiovascular Disease providers met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside of the travel distance standard of ten miles in one zip code, 20714.

- (d) Gastroenterology providers met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside of the travel distance standard of ten miles in one zip code, 20714.
- (e) Gynecology Only providers met the required standard for 99.7% of suburban enrollees, leaving 568 enrollees outside of the travel distance standard of thirty miles in four zip codes.

Suburban zip codes:

- (i) Zip Code 21742 has 447 members outside the standard.
 - (ii) Zip Code 22401 has 117 members outside the standard.
 - (iii) Zip Code 22402 has 2 members outside the standard.
 - (iv) Zip Code 22404 has 2 members outside the standard.
- (f) Neurology providers met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside of the travel distance standard of ten miles in one zip code, 20714.
 - (g) Oncology providers met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside of the travel distance standard of ten miles in one zip code, 20714.
 - (h) Ophthalmology providers met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside of the travel distance standard of ten miles in one zip code, 20714.
 - (i) Pulmonology providers met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside of the travel distance standard of ten miles in one zip code, 20714.

(j) Urology providers met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside of the travel distance standard of ten miles in one zip code, 20714.

(k) Acute Inpatient Hospitals facilities met the required standard for 99.7% of urban enrollees, leaving 971 enrollees outside the travel distance standard of ten miles in two zip codes.

Urban zip codes:

- (i) Zip code 21114 has 414 members outside the standard.
- (ii) Zip code 20714 has 557 members outside the standard.

(l) Critical Care Services facilities met the required standard for 99.8% of urban enrollees, leaving 912 enrollees outside the travel distance standard of ten miles in two zip codes.

Urban zip codes:

- (i) Zip code 21114 has 355 members outside the standard.
- (ii) Zip code 20714 has 557 members outside the standard.

(m) Outpatient Dialysis facilities met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside the travel distance standard of ten miles in one zip code, 20714.

(n) Outpatient Infusion/Chemotherapy facilities met the required standard for 32.6% of urban enrollees, leaving 254,461 enrollees outside the travel distance standard of ten miles in two hundred-nine zip codes. The standard was met for 96.2% of suburban enrollees, leaving 7,874 enrollees outside the travel distance standards of thirty

miles in ten zip codes. The standard was met for 99.8% of rural enrollees, leaving 279 enrollees outside the travel distance standard of sixty miles in six zip codes.

Urban zip codes:

- (i) Zip code 20373 has 1 member outside the standard.
- (ii) Zip code 20000 has 1 member outside the standard.
- (iii) Zip code 20001 has 4,572 members outside the standard.
- (iv) Zip code 20002 has 7,366 members outside the standard.
- (v) Zip code 20003 has 5,125 members outside the standard.
- (vi) Zip code 20004 has 331 members outside the standard.
- (vii) Zip code 20005 has 1,544 members outside the standard.
- (viii) Zip code 20006 has 103 members outside the standard.
- (ix) Zip code 20007 has 3,102 members outside the standard.
- (x) Zip code 20008 has 4,805 members outside the standard.
- (xi) Zip code 20009 has 6,115 members outside the standard.
- (xii) Zip code 20010 has 2,870 members outside the standard.
- (xiii) Zip code 20011 has 6,298 members outside the standard.
- (xiv) Zip code 20012 has 2,276 members outside the standard.
- (xv) Zip code 20013 has 108 members outside the standard.
- (xvi) Zip code 20015 has 2,885 members outside the standard.
- (xvii) Zip code 20016 has 4,623 members outside the standard.
- (xviii) Zip code 20017 has 2,403 members outside the standard.
- (xix) Zip code 20018 has 2,052 members outside the standard.
- (xx) Zip code 20016 has 3,037 members outside the standard.
- (xxi) Zip code 20020 has 2,908 members outside the standard.
- (xxii) Zip code 20024 has 1,938 members outside the standard.
- (xxiii) Zip code 20026 has 127 members outside the standard.
- (xxiv) Zip code 20027 has 6 members outside the standard.
- (xxv) Zip code 20029 has 29 members outside the standard.
- (xxvi) Zip code 20030 has 34 members outside the standard.
- (xxvii) Zip code 20032 has 1,418 members outside the standard.
- (xxviii) Zip code 20033 has 7 members outside the standard.
- (xxix) Zip code 20035 has 12 members outside the standard.
- (xxx) Zip code 20036 has 741 members outside the standard.

- (xxxi) Zip code 20037 has 1,249 members outside the standard.
- (xxxii) Zip code 20038 has 20 members outside the standard.
- (xxxiii) Zip code 20039 has 25 members outside the standard.
- (xxxiv) Zip code 20040 has 15 members outside the standard.
- (xxxv) Zip code 20043 has 12 members outside the standard.
- (xxxvi) Zip code 20044 has 53 members outside the standard.
- (xxxvii) Zip code 20052 has 13 members outside the standard.
- (xxxviii) Zip code 20056 has 21 members outside the standard.
- (xxxix) Zip code 20057 has 1 member outside the standard.
- (xl) Zip code 20064 has 2 members outside the standard.
- (xli) Zip code 20065 has 21 members outside the standard.
- (xlii) Zip code 20077 has 6 members outside the standard.
- (xliii) Zip code 20090 has 77 members outside the standard.
- (xliv) Zip code 20091 has 13 members outside the standard.
- (xlv) Zip code 20201 has 2 members outside the standard.
- (xlvi) Zip code 20202 has 1 member outside the standard.
- (xlvii) Zip code 20208 has 1 member outside the standard.
- (xlviii) Zip code 20212 has 1 member outside the standard.
- (xlix) Zip code 20220 has 1 member outside the standard.
- (l) Zip code 20223 has 2 members outside the standard.
- (li) Zip code 20226 has 6 members outside the standard.
- (lii) Zip code 20229 has 1 member outside the standard.
- (liii) Zip code 20230 has 5 members outside the standard.
- (liv) Zip code 20233 has 3 members outside the standard.
- (lv) Zip code 20237 has 4 members outside the standard.
- (lvi) Zip code 20250 has 6 members outside the standard.
- (lvii) Zip code 20310 has 1 member outside the standard.
- (lviii) Zip code 20350 has 4 members outside the standard.
- (lix) Zip code 20375 has 1 member outside the standard.
- (lx) Zip code 20405 has 4 members outside the standard.
- (lxi) Zip code 20415 has 264 members outside the standard.
- (lxii) Zip code 20420 has 1 member outside the standard.
- (lxiii) Zip code 20425 has 1 member outside the standard.
- (lxiv) Zip code 20439 has 1 member outside the standard.
- (lxv) Zip code 20460 has 1 member outside the standard.

- (lxvi) Zip code 20510 has 8 members outside the standard.
- (lxvii) Zip code 20515 has 9 members outside the standard.
- (lxviii) Zip code 20521 has 81 members outside the standard.
- (lix) Zip code 20522 has 1 member outside the standard.
- (lxx) Zip code 20526 has 4 members outside the standard.
- (lxxi) Zip code 20527 has 4 members outside the standard.
- (lxxii) Zip code 20528 has 5 members outside the standard.
- (lxxiii) Zip code 20530 has 13 members outside the standard.
- (lxxiv) Zip code 20535 has 21 members outside the standard.
- (lxxv) Zip code 20540 has 1 member outside the standard.
- (lxxvi) Zip code 20543 has 4 members outside the standard.
- (lxxvii) Zip code 20548 has 4 members outside the standard.
- (lxxviii) Zip code 20573 has 4 members outside the standard.
- (lxxix) Zip code 20585 has 2 members outside the standard.
- (lxxx) Zip code 20586 has 1 member outside the standard.
- (lxxxi) Zip code 20591 has 5 members outside the standard.
- (lxxxii) Zip code 20593 has 1 member outside the standard.
- (lxxxiii) Zip code 20374 has 2 members outside the standard.
- (lxxxiv) Zip code 20376 has 1 member outside the standard.
- (lxxxv) Zip code 21402 has 26 members outside the standard.
- (lxxxvi) Zip code 21403 has 2,848 members outside the standard.
- (lxxxvii) Zip code 21114 has 4,116 members outside the standard.
- (lxxxviii) Zip code 20714 has 557 members outside the standard.
- (lxxxix) Zip code 21140 has 547 members outside the standard.
- (xc) Zip code 20810 has 3 members outside the standard.
- (xci) Zip code 20811 has 1 member outside the standard.
- (xcii) Zip code 20813 has 7 members outside the standard.
- (xciii) Zip code 20814 has 4,733 members outside the standard.
- (xciv) Zip code 20816 has 2,456 members outside the standard.
- (xcv) Zip code 20824 has 32 members outside the standard.
- (xcvi) Zip code 20889 has 5 members outside the standard.
- (xcvii) Zip code 20892 has 5 members outside the standard.
- (xcviii) Zip code 20815 has 4,607 members outside the standard.

- (xcix) Zip code 20825 has 11 members outside the standard.
- (c) Zip code 20877 has 1,732 members outside the standard.
- (ci) Zip code 20879 has 1,444 members outside the standard.
- (cii) Zip code 20884 has 4 members outside the standard.
- (ciii) Zip code 20896 has 221 members outside the standard.
- (civ) Zip code 20891 has 5 members outside the standard.
- (cv) Zip code 20895 has 2,587 members outside the standard.
- (cvi) Zip code 20886 has 2,000 members outside the standard.
- (cvii) Zip code 20847 has 27 members outside the standard.
- (cviii) Zip code 20848 has 13 members outside the standard.
- (cix) Zip code 20851 has 949 members outside the standard.
- (cx) Zip code 20852 has 5,573 members outside the standard.
- (cxi) Zip code 20853 has 3,132 members outside the standard.
- (cxii) Zip code 20900 has 1 member outside the standard.
- (cxiii) Zip code 20902 has 153 members outside the standard.
- (cxiv) Zip code 20906 has 2,329 members outside the standard.
- (cxv) Zip code 20907 has 48 members outside the standard.
- (cxvi) Zip code 20908 has 7 members outside the standard.
- (cxvii) Zip code 20910 has 3,889 members outside the standard.
- (cxviii) Zip code 20911 has 7 members outside the standard.
- (cxix) Zip code 20916 has 19 members outside the standard.
- (cxx) Zip code 20912 has 825 members outside the standard.
- (cxxi) Zip code 20913 has 16 members outside the standard.
- (cxxii) Zip code 20880 has 80 members outside the standard.
- (cxxiii) Zip code 20722 has 238 members outside the standard.
- (cxxiv) Zip code 20731 has 22 members outside the standard.
- (cxxv) Zip code 20743 has 2,551 members outside the standard.
- (cxxvi) Zip code 20790 has 1 member outside the standard.
- (cxxvii) Zip code 20791 has 76 members outside the standard.
- (cxxviii) Zip code 20747 has 2,860 members outside the standard.
- (cxxix) Zip code 20753 has 49 members outside the standard.
- (cxxx) Zip code 20781 has 60 members outside the standard.
- (cxxxi) Zip code 20782 has 668 members outside the standard.
- (cxxxii) Zip code 20783 has 158 members outside the standard.

- (cxxxiii) Zip code 20785 has 1,638 members outside the standard.
- (cxxxiv) Zip code 20706 has 574 members outside the standard.
- (cxxxv) Zip code 20712 has 475 members outside the standard.
- (cxxxvi) Zip code 20745 has 1,808 members outside the standard.
- (cxxxvii) Zip code 20750 has 48 members outside the standard.
- (cxxxviii) Zip code 20746 has 2,041 members outside the standard.
- (cxxxix) Zip code 20752 has 29 members outside the standard.
- (cxl) Zip code 20748 has 3,402 members outside the standard.
- (cxli) Zip code 20757 has 61 members outside the standard.
- (cxlii) Zip code 21767 has 65 members outside the standard.
- (cxliii) Zip code 22300 has 3 members outside the standard.
- (cxliv) Zip code 22301 has 2,542 members outside the standard.
- (cxlv) Zip code 22302 has 2,781 members outside the standard.
- (cxlvi) Zip code 22304 has 4,893 members outside the standard.
- (cxlvii) Zip code 22305 has 1,857 members outside the standard.
- (cxlviii) Zip code 22311 has 1,346 members outside the standard.
- (cxlix) Zip code 22313 has 80 members outside the standard.
- (cl) Zip code 22314 has 5,696 members outside the standard.
- (cli) Zip code 22320 has 19 members outside the standard.
- (clii) Zip code 22333 has 4 members outside the standard.
- (cliii) Zip code 22334 has 5 members outside the standard.
- (cliv) Zip code 22201 has 4,957 members outside the standard.
- (clv) Zip code 22202 has 4,193 members outside the standard.
- (clvi) Zip code 22203 has 2,855 members outside the standard.
- (clvii) Zip code 22204 has 4,459 members outside the standard.
- (clviii) Zip code 22205 has 3,236 members outside the standard.
- (clix) Zip code 22206 has 3,090 members outside the standard.
- (clx) Zip code 22207 has 5,918 members outside the standard.
- (clxi) Zip code 22209 has 1,354 members outside the standard.

- (clxii) Zip code 22210 has 46 members outside the standard.
- (clxiii) Zip code 22213 has 621 members outside the standard.
- (clxiv) Zip code 22215 has 44 members outside the standard.
- (clxv) Zip code 22216 has 29 members outside the standard.
- (clxvi) Zip code 22219 has 22 members outside the standard.
- (clxvii) Zip code 22226 has 5 members outside the standard.
- (clxviii) Zip code 20598 has 1 member outside the standard.
- (clxix) Zip code 22211 has 14 members outside the standard.
- (clxx) Zip code 22303 has 1,897 members outside the standard.
- (clxxi) Zip code 22306 has 2,444 members outside the standard.
- (clxxii) Zip code 22307 has 1,632 members outside the standard.
- (clxxiii) Zip code 22308 has 2,786 members outside the standard.
- (clxxiv) Zip code 22309 has 2,870 members outside the standard.
- (clxxv) Zip code 22310 has 4,000 members outside the standard.
- (clxxvi) Zip code 22312 has 2,397 members outside the standard.
- (clxxvii) Zip code 22315 has 4,451 members outside the standard.
- (clxxviii) Zip code 22003 has 5,422 members outside the standard.
- (clxxix) Zip code 22009 has 43 members outside the standard.
- (clxxx) Zip code 22015 has 5,565 members outside the standard.
- (clxxxi) Zip code 22027 has 407 members outside the standard.
- (clxxxii) Zip code 22031 has 3,107 members outside the standard.
- (clxxxiii) Zip code 22032 has 4,175 members outside the standard.
- (clxxxiv) Zip code 22034 has 2 members outside the standard.
- (clxxxv) Zip code 22037 has 3 members outside the standard.
- (clxxxvi) Zip code 22041 has 1,825 members outside the standard.
- (clxxxvii) Zip code 22042 has 2,770 members outside the standard.

- (clxxxviii) Zip code 22043 has 2,844 members outside the standard.
- (clxxxix) Zip code 22044 has 1,107 members outside the standard.
- (cxc) Zip code 22120 has 3 members outside the standard.
- (cxci) Zip code 22101 has 4,165 members outside the standard.
- (cxcii) Zip code 22106 has 13 members outside the standard.
- (cxciii) Zip code 22108 has 1 member outside the standard.
- (cxciv) Zip code 22116 has 81 members outside the standard.
- (cxcv) Zip code 22118 has 1 member outside the standard.
- (cxcvi) Zip code 22121 has 14 members outside the standard.
- (cxcvii) Zip code 22150 has 2,353 members outside the standard.
- (cxcviii) Zip code 22151 has 2,055 members outside the standard.
- (cxcix) Zip code 22152 has 4,220 members outside the standard.
- (cc) Zip code 22153 has 4,579 members outside the standard.
- (cci) Zip code 22161 has 8 members outside the standard.
- (ccii) Zip code 22180 has 2,881 members outside the standard.
- (cciii) Zip code 22040 has 41 members outside the standard.
- (cciv) Zip code 22046 has 4,937 members outside the standard.
- (ccv) Zip code 20108 has 7 members outside the standard.
- (ccvi) Zip code 22110 has 232 members outside the standard.
- (ccvii) Zip code 22025 has 106 members outside the standard.
- (ccviii) Zip code 22193 has 598 members outside the standard.
- (ccix) Zip code 22195 has 9 members outside the standard.

Suburban zip codes:

- (i) Zip code 20764 has 440 members outside the standard.
- (ii) Zip code 20625 has 94 members outside the standard.
- (iii) Zip code 20602 has 2,779 members outside the standard.
- (iv) Zip code 20603 has 3,791 members outside the standard.
- (v) Zip code 20604 has 168 members outside the standard.
- (vi) Zip code 21716 has 436 members outside the standard.
- (vii) Zip code 22079 has 45 members outside the standard.
- (viii) Zip code 22401 has 117 members outside the standard.

- (ix) Zip code 22402 has 2 members outside the standard.
- (x) Zip code 22404 has 2 members outside the standard.

Rural zip codes:

- (i) Zip code 20606 has 15 members outside the standard.
 - (ii) Zip code 20609 has 25 members outside the standard.
 - (iii) Zip code 20626 has 39 members outside the standard.
 - (iv) Zip code 20650 has 150 members outside the standard.
 - (v) Zip code 22534 has 13 members outside the standard.
 - (vi) Zip code 22551 has 37 members outside the standard.
- (o) Skilled Nursing facilities met the required standard for 99.7% of urban enrollees, leaving 1213 enrollees outside the travel distance standard of ten miles in six zip codes.

Urban zip codes:

- (i) Zip code 20714 has 557 members outside the standard
 - (ii) Zip code 20164 has 150 members outside the standard.
 - (iii) Zip code 20165 has 186 members outside the standard.
 - (iv) Zip code 20167 has 6 members outside the standard.
 - (v) Zip code 20108 has 7 members outside the standard.
 - (vi) Zip code 20110 has 307 members outside the standard
- (p) Surgical Services (outpatient or Ambulatory Surgical Center) facilities met the required standard for 99.9% of urban enrollees, leaving 557 enrollees outside the travel distance standard of ten miles in one zip code, 20714.

C. The Access Plan-Appointment Waiting Time Standards

20. The data submitted by GHMSI in connection with the BC 2019 Access Plan failed to demonstrate compliance with Appointment Waiting Time Standards.

21. COMAR 31.10.44.05 states, in pertinent part:

.05 Appointment Waiting Time Standards

A. Sufficiency Standards.

(1) Subject to the exceptions in §B of this regulation, each carrier's provider panel shall meet the waiting time standards listed in §C of this regulation for at least 95 percent of the enrollees covered under health benefit plans that use that provider panel.

(2) When it is clinically appropriate and an enrollee elects to utilize a telehealth appointment, a carrier may consider that utilization as a part of its meeting the standards listed in §C of this regulation.

* * *

C. Chart of Waiting Time Standards

Waiting Time Standards	
Urgent care (including medical, behavioral health, and substance use disorder services)	72 hours
Routine Primary Care	15 Calendar Days
Preventive Visit/Well Visit	30 Calendar Days
Non-Urgent Specialty Care	30 Calendar Days
Non-urgent behavioral health/substance use disorder services	10 Calendar Days

22. The data self-reported by GHMSI disclosed the following deficiencies:

- (a) Urgent Care (including medical, behavioral health and substance use disorder services) met the required standard of 72 hours for 93% of enrollees, representing a deficiency of 2 percentage points.
- (b) Routine Primary Care met the required standard of 15 calendar days for 79% of enrollees, representing a deficiency of 16 percentage points.
- (c) Preventive Visit/Well Visit met the required standard of 30 calendar days for 82% of enrollees, representing a deficiency of 13 percentage points.
- (d) Non-Urgent Specialty care met the required standard of 30 calendar days for 79.96% of enrollees, representing a deficiency of 15.04 percentage points.
- (e) Non-Urgent Behavioral Health/Substance Use Disorder Services met the required standard of 10 calendar days for 57.53% of enrollees, representing a deficiency of 37.47 percentage points.

23. GHMSI has acknowledged the deficiencies in its self-reported data regarding Appointment Wait Time Standards, but advised that its wait time standard measurements were based on a proprietary methodology which may have distorted the results by exaggerating the time from the initial request for health care services to the earliest date offered for the appointment for services.

**D. The Access Plan-Provider-to-Enrollee Ratio Standards;
The Executive Summary**

24. COMAR 31.10.44.06 states, in pertinent part:

.06 Provider-to-Enrollee Ratio Standards:

A. Except for a Group Model HMO's health benefit plan, the provider panel for each carrier shall meet the provider-to-enrollee ratio standards listed in §B of this regulation.

B. The provider-to-enrollee ratios shall be equivalent to at least 1 full-time physician, or as appropriate, another full-time provider for:

* * * *

(5) 2,000 enrollees for substance use disorder care or services.

25. COMAR 31.10.44.09 states, in pertinent part:

.09 Network Adequacy Access Plan Executive Summary Form

A. For each provider panel used by a carrier for a health benefit plan, the carrier shall provide the network sufficiency results for the health benefit plan service area as follows:

* * *

(3) Provider-to-Enrollee Ratio Standards

(a) This subsection does not apply to Group Model HMO health benefit plans.

(b) For all other carriers, list whether the percentage of provider-to-enrollee ratios meet the provider-to-enrollee ratio standards listed in Regulation .06[.]

26. The BC 2019 Access Plan failed to include a distinct provider-to-enrollee ratio for substance use disorder care or services.

27. The BC 2019 Access Plan executive summary failed to include a distinct provider-to-enrollee ratio for substance use disorder care or services.

28. GHMSI has advised that it had aggregated providers for substance use disorder care or services with mental health providers under the ratio for behavioral health care or services, in accordance with the definition of "behavioral health care" in COMAR 31.10.44.02B(2) and was unable to disaggregate providers for substance use disorder

care or services in order to report a distinct ratio for those providers for its 2019 data. GHMSI agreed to include the required ratio in its 2020 Access Plan.

III. CONCLUSIONS OF LAW

29. The Administration concludes that GHMSI violated § 15-112 of the Insurance Article and COMAR 31.10.44.03C by submitting an access plan that failed to comply with the required travel distance standards and appointment waiting time standards, and by failing to measure and report a required provider-to-enrollee ratio in both the access plan and the executive summary.

30. Section 4-113 of the Insurance Article states in pertinent part:

(b) The Commissioner may deny a certificate of authority to an applicant or, subject to the hearing provisions of Title 2 of this article, refuse to renew, suspend, or revoke a certificate of authority if the applicant or holder of the certificate of authority:

(1) violates any provision of this article other than one that provides for mandatory denial, refusal to renew, suspension, or revocation for its violation[.]

* * * *

(d) Instead of or in addition to suspending or revoking a certificate of authority, the Commissioner may:

(1) impose on the holder a penalty of not less than \$100 but not more than \$125,000 for each violation of this article[.]

ORDER

WHEREFORE, for the reasons set forth above, it is **ORDERED** by the Commissioner and consented to by the Respondent:

A. That the Initial Order is hereby rescinded;

B. That, pursuant to § 4-113 of the Insurance Article, based on consideration of COMAR 31.02.04.02, the Administration imposes an administrative penalty on GHMSI

of \$100,000 for the violations of § 15-112 of the Insurance Article and COMAR 31.10.44.03C identified here;

C. The obligation of GHMSI to pay the aforesaid administrative penalty is hereby suspended pending the Administration's (i) review of the access plan submitted by GHMSI in 2021; (ii) determination as to whether the 2021 access plan substantiates representations made by GHMSI related to its intent to adjust record keeping methodologies and to improve its compliance with the Standards; and (iii) based on such review and determination, decision on whether the administrative penalty should be paid, reduced, or rescinded.

OTHER PROVISIONS

D. The executed Order and any administrative penalty shall be sent to the attention of: David Cooney, Associate Commissioner, Life and Health, 200 St. Paul Place, Suite 2700, Baltimore, MD 21202.

E. For the purposes of the Administration and for any subsequent administrative or civil proceedings concerning Respondent, whether related or unrelated to the foregoing paragraphs, and with regard to requests for information about the Respondent made under the Maryland Public Information Act, or properly made by governmental agencies, this Order will be kept and maintained in the regular course of business by the Administration. For the purposes of the business of the Administration, the records and publications of the Administration will reflect this Order.

F. The parties acknowledge that this Order resolves all matters relating to the factual assertions and agreements contained herein and are to be used solely for the purposes of this proceeding brought by or on behalf of the Administration. Nothing herein shall be deemed a waiver of the Commissioner's right to proceed in an administrative

action or civil action for violations not specifically identified in this Order, including, but not limited to, specific consumer complaints received by the Administration, nor shall anything herein be deemed a waiver of the right of the Respondent to contest other proceedings by the Administration. This Order shall not be construed to resolve or preclude any potential or pending civil, administrative, or criminal action or prosecution by any other person, entity or governmental authority, including but not limited to the Insurance Fraud Division of the Administration, regarding any conduct by the Respondent including the conduct that is the subject of this Order.

G. Respondent has had the opportunity to have this Order reviewed by legal counsel of its choosing, and is aware of the benefits gained and obligations incurred by the execution of the Order. Respondent waives any and all rights to any hearing or judicial review of this Order to which it would otherwise be entitled under the Insurance Article with respect to any of the determinations made or actions ordered by this Order.


H. This Order contains the entire agreement between the parties relating to the administrative actions addressed herein. This Order supersedes any and all earlier agreements or negotiations, whether oral or written. All time frames set forth in this Order may be amended or modified only by subsequent written agreement of the parties.

I. This Order shall be effective upon signing by the Commissioner or his designee, and is a Final Order of the Commissioner under § 2-204 of the Insurance Article.

J. Failure to comply with the terms of this Order may subject Respondent to further legal and/or administrative action.

Kathleen A. Birrane
INSURANCE COMMISSIONER

signature on original

By: David Cooney 
Associate Commissioner
Life and Health

Date: 5/12/21

RESPONDENT'S CONSENT

RESPONDENT hereby CONSENTS to the representations made in, and to the terms of, the above Consent Order. On behalf of Respondent, the undersigned hereby affirms that he or she has taken all necessary steps to obtain the authority to bind Respondent to the obligations stated herein and does in fact have the authority to bind Respondent to the obligations stated herein.

Name: STACEY R BREIDENSTEIN

Signature: signature on original

Title: VP, Network M&T.

Date: 5/10/21