



May 8, 2017

Lisa Larson, Assistant Director of Regulatory Affairs  
Maryland Insurance Administration  
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Baltimore, MD 21202  
VIA EMAIL: [networkadequacy.mia@maryland.gov](mailto:networkadequacy.mia@maryland.gov)

Dear Ms. Larson,

Thank you for the opportunity to provide the following comments on the DRAFT Network Adequacy regulations posted for informal public comment.

As stated in our testimony during the February 2017 workgroup, Maryland's licensed dietitians and nutritionists are on the front lines of healthcare. We treat thousands of patients every day in multiple settings, providing multiple services for a range of chronic and acute care conditions.

We offer the following comments, clarification requests and recommendations to strengthen what has been proposed. We have organized the following based on the sections laid out in the draft regulations.

**Section .02 definitions:**

**Clarification requested:** The definition for (24) "Specialty Provider" is unclear. Would this include a licensed dietitian and nutritionist? Many licensed dietitians and nutritionists specialize in a particular area or condition, for example: diabetes, renal disease, pediatrics, metabolic genetics, oncology, GI, and eating disorders. *Dietitians hold a variety of specialty certifications, including certified diabetes educator (CDE), and certified nutrition support clinician (CNSC), as well as board certifications in Renal, Oncology, Pediatric, Weight Management, and Gerontological Nutrition through the Commission on Dietetic Registration .*

**Recommendation #1:** We suggest including a definition for "nonphysician specialist" as defined in Section 15-830 of the Insurance Article. Specifically, "nonphysician specialist" is defined as follows:

"means a health care provider who:

- (i) is not a physician;
- (ii) is licensed or certified under the Health Occupations Article; and
- (iii) is certified or trained to treat or provide health care services for a specified condition or disease in a manner that is within the scope of the license or certification of the health care provider."

Including this definition would help to clarify that specialty providers are not just physician specialists.

**Sections .04 Geographic Accessibility of Providers A. & B.**

**Recommendation #2:** .04A(1) and .04B(1) Insert "nonphysician specialists" after "specialty providers" in both sections.

**Recommendation #3:** .04A(2) and B(2): In the charts many specialties are delineated with a catch all titled “Other Medical Provider Not Listed”. This is where we presume licensed dietitians and nutritionists would be included.

Given the critically important preventive, acute and chronic care services we provide we ask that **LICENSED DIETITIANS AND NUTRITIONISTS** be specifically listed in the charts under .04A and .04B.

We also suggest that the corresponding geographic area distance requirements be similar to those standards for Physical therapy, Occupational Therapy and Speech Therapy.

### **Section .05 Waiting Times for Appointments with Providers**

**Recommendation #4:** in .05B. Insert “and non-physician specialists” after “specialists”.

### **Section .06 Provider-to-Enrollee Ratios:**

**Clarification requested:** Could additional services be included to require specific provider to enrollee ratios, such as those provided by licensed dietitians and nutritionists including but not limited to chronic care services, preventive health care services, etc?

We feel that the Draft regulations would benefit from the clarifications and recommendations requested above with respect to the essential health care services licensed dietitians and nutritionists provide. This will help make Maryland provider panels more robust and responsive to the needs of Maryland’s patients and accommodate the shifting focus of healthcare on preventive and chronic care.

We would like the opportunity to meet with you and others at the MIA to further discuss our questions and recommendations. Additionally, we strongly suggest another stakeholder workgroup meeting to allow for open discussion on the draft and comments and concerns that have been or will be submitted.

Thank you for your attention to this letter and we look forward to scheduling a time to meet.

Sincerely,



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