



May 5, 2017

Lisa Larson
Assistant Director of Regulatory Affairs
Maryland Insurance Administration
200 St. Paul Place, Suite 2700
Baltimore, MD 21202

RE: Network Adequacy Draft Regulations

Dear Ms. Larson,

Thank you for the opportunity to provide comments regarding the Maryland Insurance Administration's (MIA) proposed network adequacy regulations. I am writing on behalf of the National Multiple Sclerosis Society - an organization that supports nearly 12,000 people living with multiple sclerosis (MS) in the state of Maryland.

MS is an unpredictable, often disabling disease of the central nervous system that disrupts the flow of information within the brain, and between the brain and body. Symptoms range from numbness and tingling to blindness and paralysis. The progress, severity and symptoms in any one person cannot yet be predicted. Network *inadequacy* raises particular concerns for people living with MS and others with specialized and complex healthcare needs. People living with MS may require care from neurology, rehabilitation, radiology, mental health and other specialists, as well as treatments, services and products from pharmacies, DME providers, home care agencies and more to live their best lives.

The Society commends the MIA for developing regulations with strong geographic standards and acknowledging the need for different requirements for varying geographic areas and for requiring these standards apply to the lowest cost-sharing tier if a plan uses a tiered network of providers.

The Society is generally supportive of the established wait time standards. We would further recommend as the National Association for Insurance Commissioners (NAIC) model suggests that a consumer be able to access emergency care 24 hours a day as well as urgent care within 24 hours. The state of Colorado allows for a wait time no greater than 7 calendar days for primary care and behavioral health non-emergencies. Shorter wait times provide strong protections for consumers who, like those living with MS, may need to see a clinician for an urgent medical issue without an unreasonable delay.

Furthermore, we believe there is an opportunity to address the critical importance of accessibility within these regulations. It is essential that persons with physical disabilities, have reasonable access to primary care and specialist providers whose professional offices are accessible in accordance with the federal Americans with Disabilities Act of 1990 (ADA) standards for accessible design. The Society supports legislation in New Jersey which determines that if a covered person with a physical disability is unable to



reasonably access an in-network primary or specialty care provider whose professional office is accessible to the covered person, the carrier shall arrange for a provider that is accessible, and if that provider is out-of-network, with the same financial responsibility as the covered person would incur if the provider was in-network. Please consider adding similar language to support people living with disabilities.

The National MS Society looks forward to the final regulations and we appreciate the opportunity to participate in the process. If I can be of further assistance, please contact me at 804-591-3048 or ashley.kenneth@nmss.org

Sincerely,

A handwritten signature in black ink, appearing to read "Ashley Kenneth". The signature is fluid and cursive, with a prominent initial "A".

Ashley Kenneth
Sr. Manager, Advocacy
National MS Society