I. Executive Summary Form

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

(1) Travel Distance Standards.

(a) For each provider type listed in the Chart in Section D, the percentage of enrollees, for which the carrier met the travel distance standards in the following format:

ALIC	Urban Area	Suburban Area	Rural Area
Primary Care Provider	100%	99.9%	100%
Gynecology, OB/GYN	99.8%	99.8%	100%
Pediatrics	99.9%	99.7%	100%
Allergy and Immunology	100%	99.9%	100%
Cardiovascular Disease	100%	100%	100%
Chiropractic	100%	100%	100%
Dermatology	99.8%	100%	100%
Endocrinology	100%	100%	100%
ENT/Otolaryngology	100%	99.9%	100%
Gastroenterology	100%	100%	100%
General Surgery	100%	100%	100%
Gynecology Only	100%	99.9%	100%
Nephrology	100%	100%	100%
Neurology	100%	100%	100%
Oncology – Medical and Surgical	99.8%	100%	100%
Oncology – Radiation/Radiation Oncology	100%	100%	100%
Ophthalmology	99.8%	100%	100%
Physiatry, Rehabilitative Medicine	100%	100%	100%
Plastic Surgery	100%	100%	100%
Podiatry	100%	100%	100%
Pulmonology	100%	100%	100%

ALIC	Urban Area	Suburban Area	Rural Area
Rheumatology	100%	100%	100%
Urology	99.8%	100%	100%
All other licensed or certified providers under contract with a carrier not listed (Other Specialists)	100%	100%	100%
Pharmacy	100%	99.9%	100%
Acute Inpatient Hospitals	100%	100%	100%
Critical Care Services – Intensive Care Units	99.8%	100%	100%
Diagnostic Radiology	99.8%	100%	100%
Outpatient Dialysis	99.8%	100%	100%
Outpatient Infusion/Chemotherapy	98.4%	100%	100%
Skilled Nursing Facilities	99.8%	100%	100%
Surgical Services (Outpatient or Ambulatory Surgical Center)	99.9%	100%	100%
All other licensed or certified facilities under contract with a carrier not listed (Other Facilities)	100%	100%	100%
Psychiatrist	100%	100%	100%
Psychologist	100%	100%	100%
Applied Behavior Analyst	100%	99.6%	100%
Licensed Clinical Social Worker	100%	100%	100%
All other licensed or certified providers under contract with a carrier not listed	100%	100%	100%
Inpatient Psychiatric Facility	100%	100%	100%

ALIC	Urban Area	Suburban Area	Rural Area
Other Behavioral Health/Substance Abuse Facilities	99.8%	99.7%	100%

(b) List the total number of certified registered nurse practitioners counted as a primary care provider.

Response: The specific number of registered nurse practitioners counted as primary care is not included in the geo-access data.

(c) List the total percentage of primary care providers who are certified registered nurse practitioners.

Response: Our systems are unable to determine the percentage of registered nurse practitioners that practice as primary care. Within the systems, nurse practitioners are a broad provider type and we cannot drill down to determine in which specialty field they practice.

(d) List the total number of essential community providers in the carrier's network.

551 ECP providers are participating in our network

(e) List the total percentage of essential community providers available in the health benefit plan's service area that are participating providers.

ZipClass	All ECPs	ALIC-Contract	
	Count	Count	% Contracted
Rural	417	267	64%
Suburban	206	77	37%
Urban	563	207	37%
Grand Total	**1,186**	**551**	**46%**

(2) Appointment Waiting Time Standards.

(a) For each appointment type listed in the Chart in Section F, list the percentage of enrollees for which the carrier met the appointment wait time standards, in the following format:

Appointment Waiting time Standard Results	ALIC
Urgent care-within 72 hours	95%
Routine primary care- within 15 calendar days	100%
Preventive Visit/Well Visit - within 30 calendar days	100%
Non-urgent specialty care within 30 calendar days (OB/GYN – high-volume)	100%

Appointment Waiting time Standard Results	ALIC
Non-urgent specialty care within 30 calendar days (Oncologists – high-impact)	100%
Non-urgent behavioral health/substance use disorder services- within 10 calendar days	98%

(b) List the total percentage of telehealth appointments counted as part of the appointment waiting time standard results.

Response: Telehealth appointments are not factored into appointment waiting time standards results.

(3) Provider-to-Enrollee Ratio Standards.

A carrier must list whether the percentage of provider-to-enrollee ratios meet the provider-to-enrollee ratio standards listed in Section G for each of the following categories:

(i) 1,200 enrollees for primary care;

(ii) 2,000 enrollees for pediatric care;

(iii) 2,000 enrollees for obstetrical/gynecological care;

(iv) 2,000 enrollees for behavioral health care or service; and

(v) 2,000 enrollees for substance use disorder care and services.

Response: All provider types exceeded the provider-to-enrollee ratio standards as indicated in the chart below:

	Provider-to- Enrollee Ratio Standard	ALIC Results
Primary Care	1:1200	125:1200
Pediatrics	1:2000	310:2000
OB/GYN	1:2000	98:2000
Behavioral Health Care or Service	1:2000	366.8:2000
Substance Use Disorder Care & Services	1:2000	21.6:2000