

KAISER PERMANENTE INSURANCE COMPANY (KPIC)

NETWORK ADEQUACY ACCESS PLAN

EXECUTIVE SUMMARY

KAISER PERMANENTE INSURANCE COMPANY (KPIC)

(1) Travel Distance Standards

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

	Urban Area	Suburban Area	Rural Area
Provider Type:			
Primary Care Physician*	100	99.3	96.7
Gynecology, OB/GYN*	99.6	95.2	83.7
Pediatrics—Routine/Primary Care	99.5	98.3	93.5
Allergy and Immunology	100	100	100
Applied Behavioral Analyst	100	100	100
Cardiovascular Disease	100	100	99.7
Chiropractic	100	99.9	99
Dermatology	100	100	99.7
Endocrinology	100	99.9	99.2
ENT/Otolaryngology	99.9	98.2	100
Gastroenterology	100	99.9	98
General Surgery	100	100	100
Gynecology Only	100	100	100
Licensed Clinical Social Worker	100	100	100
Nephrology	100	100	100
Neurology	99	100	99
Oncology—Medical and Surgical	100	100	97.7
Oncology—Radiation/Radiation Oncology	100	100	100
Ophthalmology	100	100	100
Physiatry, Rehabilitative Medicine	100	100	100

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Continued	Urban Area	Suburban Area	Rural Area
Provider Type:			
Plastic Surgery	100	100	100
Podiatry	100	100	100
Psychiatry	100	99.5	98.5
Psychology	100	100	100
Pulmonology	100	99.8	95.7
Rheumatology	100	98.5	87.9
Urology	100	100	97.7
All other licensed or certified providers under contract with a carrier not listed	100	100	100
Facility Type:			
Pharmacy	6.4	0.4	7.3
Acute Inpatient Hospitals	99.8	96.6	92.5
Critical Care Services—Intensive Care Units	99.8	96.6	92.5
Diagnostic Radiology	100	100	99.7
Inpatient Psychiatric Facility	83.8	67.5	76.9
Outpatient Dialysis	100	99.8	98
Outpatient Infusion/Chemotherapy	100	100	99.5
Skilled Nursing Facilities	97.6	88.4	88.4
Surgical Services (Outpatient or Ambulatory Surgical Center)	100	99.9	98.2
Other Behavioral Health/Substance Abuse Facilities	75.7	38.6	73.9
All other licensed or certified facilities under contract with a carrier not listed	100	100	100

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

KPIC Response: Registered nurse practitioners are not categorized as primary care providers in the PHCS network.

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

KPIC Response: Registered nurse practitioners are not categorized as primary care providers in the PHCS network.

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

KPIC Response: There are 41 ECP locations in the MultiPlan and PHCS networks.

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

KPIC Response: MultiPlan and PHCS have 31% of the locations on the ECP list in network.

(2) Appointment Wait Time

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

Appointment Waiting Time Standard Results	
Urgent care- within 72 hours	42%
Routine primary care- within 15 calendar days	33%
Preventative Visit/Well Visit – within 30 calendar days	<i>no data</i>
Non-urgent specialty care – within 30 calendar days	36%
Non-urgent mental health/substance use disorder services – within 10 calendar days	28%

KPIC Response: After focused outreach, MultiPlan obtained the data from a statistically significant number of providers. MultiPlan does not, however, currently

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have a data category that corresponds to preventive visit/well visit. KPIC has requested that MultiPlan add such a category for 2020. For the remaining categories, MultiPlan has calculated the percentage of providers who have submitted appointment wait time data that meet the state's specified wait time standard.

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

KPIC Response: MultiPlan requested telehealth appointment waiting times from network facilities and practitioners. At the time of this filing, however, this information has not been provided from the facilities and practitioners.

(3) Provider-to-Enrollee Ratio

(b) List whether the percentage of provider-to-enrollee ratios meet the provider-to-enrollee ratio standards listed for each of the following categories:

- (i) 1,200 enrollees for primary care; Meet
- (ii) 2,000 enrollees for pediatric care; Meet
- (iii) 2,000 enrollees for obstetrical/gynecological care; Meet
- (iv) 2,000 enrollees for behavioral health care or service: Meet
- (v) 2,000 enrollees for substance use disorder care and services: Meet

KPIC Response: KPIC met the State's provider-to-enrollee standards. Please see file **MD Network Adequacy_KPIC_201906** page named *"Access Standards."*