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Lt. Governor



KATHLEEN A. BIRRANE
Commissioner

KORY BOONE
Acting Deputy Commissioner

DAVID COONEY
Associate Commissioner
Life and Health

200 St. Paul Place, Suite 2700, Baltimore, Maryland 21202
Direct Dial: 410-468-2170 Fax: 410-468-2204
Email: pamela.obrien@maryland.gov
410-468-2000 1-800-492-6116
TTY: 1-800-735-2258
www.insurance.maryland.gov

June 28, 2024

Ms. Teresa Howard
Cigna Legal, U.S. Compliance Operations – Regulatory Reporting
Cigna Health and Life Insurance Company
900 Cottage Grove Rd
Bloomfield, CT 06152

Re: Cigna Health and Life Insurance Company (“CHLIC”)
2023 Network Adequacy OAP Access Plan
2023 Network Adequacy PPO Access Plan
2023 Network Adequacy POS Access Plan
2023 Network Adequacy LCP Access Plan
(Collectively, “the CHLIC 2023 Access Plans”)

Dear Ms. Howard:

The Maryland Insurance Administration (“Administration”) has completed its review of the Cigna Health and Life Insurance Company 2023 Network Adequacy Access Plans filed on September 29, 2023, supplemented with additional information and documentation on January 19, 22, and 23, 2024 April 12, 2024, May 30, 2024, June 5, 2024 and June 11, 2024. CHLIC uses four provider panels for health benefit plans in Maryland, and filed a separate access plan for each provider panel. These filings were made pursuant to § 15-112(c)(2)(i) of the Insurance Article and COMAR 31.10.44.

The Administration’s review of the CHLIC 2023 Access Plans has found that the access standards in COMAR 31.10.44.05 and .06 were not met for the following, based on the data self-reported by CHLIC. All other access standards in COMAR 31.10.44 were met.

Travel Distance Standards

In addition to the specific provider and facility types listed in the chart in COMAR 31.10.44.04A(5), CHLIC reported separate travel distance metrics for 15 additional provider types, which, in previous reporting years, had been reported together under the categories “All Other licensed or certified providers under contract with a carrier not listed” and “All other licensed or certified facilities under contract with a carrier not listed.” Due to the wide variation of “All other...” provider types reported by different carriers, the Administration has provided additional guidance to carriers for the 2024 access plans to ensure greater uniformity in reporting across carriers. For the following provider types and geographic regions, CHLIC reported that less than 100% of enrollees had access to a participating provider with a practicing location within the applicable maximum travel distance standard:

CHLIC 2023 OAP Access Plan

Provider/Facility	Geographic Region	Percent of Enrollees within Standard
Addiction Medicine	Suburban	99.8%
Gynecology, OB/GYN, Nurse-Midwifery/Certified Midwifery	Urban	98.8%
	Suburban	99.9%
Pediatrics-Routine/Primary Care	Suburban	99.9%
Acute Inpatient Hospitals	Urban	99.8%
Ambulatory Infusion Therapy Centers	Urban	99.8%
Critical Care Services/Intensive Care Units	Urban	99.8%
Opioid Treatment Services Provider	Urban	80.2%
	Suburban	99.1%
Outpatient Substance Use Disorder Facility	Suburban	99.9%
Residential Crisis Services	Urban	14.3%
	Suburban	98.7%
Substance Use Disorder Residential Treatment Facility	Urban	48.5%
	Suburban	99%

Additionally, of the 15 additional provider types that were listed together in previous years under the “All Other...” categories, CHLIC reported a deficiency for 2 of the additional provider types in at least one zip code.

CHLIC 2023 PPO Access Plan

Provider/Facility	Geographic Region	Percent of Enrollees within Standard
Opioid Treatment Services Provider	Urban	72.2%
Residential Crisis Services	Urban	2.8%
Substance Use Disorder Residential Treatment Facility	Urban	22.2%

CHLIC 2023 POS Access Plan

Provider/Facility	Geographic Region	Percent of Enrollees within Standard
Opioid Treatment Services Provider	Urban	91.7%
Residential Crisis Services	Urban	8.3%
Substance Use Disorder Residential Treatment Facility	Urban	52.7%

CHLIC 2023 LCP Access Plan

Provider/Facility	Geographic Region	Percent of Enrollees within Standard
Opioid Treatment Services Provider	Urban	91.7%
Residential Crisis Services	Urban	8.3%
Substance Use Disorder Residential Treatment Facility	Urban	52.7%

The CHLIC 2023 LCP Access Plan listed 15 additional provider types that were listed together in previous years under “All Others...” categories. Of these 15, a deficiency was reported for one of them in at least one zip code.

Travel Distance Waivers and Other Mitigating Factors

CHLIC provided the information required by COMAR 31.10.44.09A for each unmet travel distance standard described above. The Administration has considered the information provided by CHLIC, and has found good cause to grant a waiver of the applicable travel distance standard for the CHLIC 2023 OAP Access Plan for the following provider and facility types: Addiction Medicine; Gynecology OB/GYN, Nurse-Midwifery/Certified Midwifery; Pediatric – Routine / Primary Care; Acute Inpatient Hospitals; Ambulatory Infusion Centers; Critical Care Services / Intensive Care Units; and Outpatient Substance Use Disorder Facility.

The Administration determined that CHLIC provided sufficient information with respect to the provider and facility types listed above to demonstrate that providers necessary to meet the travel distance standards were not available to contract with the carrier or were not available in sufficient numbers. The information provided by CHLIC included:

- Descriptions of efforts to locate any additional practicing providers within the required distance standard for each deficient service type and zip code using external sources such as the public provider directories of other carriers, analytics services, and online searches;
- Declarations that the efforts to locate additional providers revealed that CHLIC is already contracted with the nearest practicing provider for the other deficient provider types and zip codes listed above, and that there are no other providers currently available within standard.
- Mileage reports indicating that the failure to meet the travel distance standard for certain provider and facility types was the result of deficiencies of only a fraction of a mile.

The waivers of the travel distance standard for the providers and facilities listed above apply only to the access plan filings submitted in 2023.

For the remaining provider and facility types where CHLIC reported a deficiency, the Administration determined that the carrier failed to provide sufficient information to demonstrate that the conditions necessary for the granting of a waiver as described in COMAR 31.10.44.09B were satisfied. However, the Administration notes that these other deficiencies are related to new travel distance standards that were effective for the first time in 2023 under the revised network adequacy regulations. In Bulletin 23-8, issued on May 5, 2023, the Administration advised carriers that when reviewing the 2023 network access plan filings and evaluating compliance with the new standards, the Administration would take into consideration the fact that the reports were required to be filed shortly after the effective date of the revised regulations in determining deficiencies and the regulatory response to such deficiencies. Consequently, despite the low compliance percentages, the Administration has determined in its exercise of enforcement discretion, not to impose a penalty for the travel distance deficiencies for Opioid Treatment Services Provider, Residential Crisis Services, Substance Use Disorder Residential Treatment Facility, and the additional "All other" provider types referenced above where CHLIC reported a deficiency in at least one zip code for the CHLIC 2023 Access Plans, having considered that CHLIC provided a detailed description of the steps it will take to address the deficiencies and achieve compliance for the 2024 access plan filings and demonstrated that all reasonable good faith efforts to comply with the standards were undertaken following adoption of the final regulations. This included a description of CHLIC's efforts to identify available facilities to recruit, as evidenced by statements of attempts to identify, contact, and negotiate with relevant facility types in specific zip codes for these service types for which new travel distance standards were introduced in the 2023 revision of COMAR 31.10.44.

Essential Community Provider Standards

The data self-reported by CHLIC in its four 2023 access plans showed that the essential community provider (ECP) inclusion standard of 30% for each category of Medical, Mental Health, and Substance Use Disorder services in each urban, suburban, and rural geographic area was not met.

ECP Service Type	Standard	Urban Compliance Percentage	Suburban Compliance Percentage	Rural Compliance Percentage
Medical Services	30%	2.8%	.3%	3.2%
Mental Health Services	30%	5.9%	1.4%	3.2%
Substance Use Disorder Services	30%	.8%	.7%	1.2%

CHLIC provided the information required by COMAR 31.10.44.09A for each unmet ECP inclusion standard described above. The Administration has considered the information provided by CHLIC, and has determined that the carrier failed to provide sufficient information to demonstrate that the conditions necessary for the granting of a waiver as described in COMAR 31.10.44.09B were satisfied. However, CHLIC provided information demonstrating that the failure to meet the ECP inclusion standard for 2023, after CHLIC consistently reported exceeding the ECP standard in prior reporting years, was due to the regulatory changes to the definitions and methodologies for calculating the revised standard under the new network adequacy regulations. The extreme drop in the reported compliance percentages was not caused by a proportional loss of previously contracted ECPs.

As noted above, the Administration advised carriers in Bulletin 23-8 that the Administration would take into consideration the fact that the reports were required to be filed shortly after the effective date of the revised regulations in determining deficiencies and the regulatory response to such deficiencies. Consequently, the Administration has determined in its exercise of enforcement discretion, not to impose a penalty for the ECP inclusion standard for the CHLIC 2023 Access Plans. Based on the information provided by CHLIC, the Administration determined there was insufficient time between the finalization of the revised regulations and the due date of the 2023 access plan filings for CHLIC to identify, recruit, credential, and contract with a sufficient number of ECPs necessary to meet the inclusion standard under the revised methodology. CHLIC provided a description of the steps it will take to address the deficiencies and achieve compliance for the 2024 access plan filings and demonstrated that all reasonable good faith efforts to comply with the standards were undertaken following adoption of the final regulations. This included descriptions of unsuccessful efforts by CHLIC to contact and recruit 49 additional providers from the MHBE ECP listing, including the dates and the reasons each was unsuccessful, to support CHLIC’s contention that many providers on the MHBE list were

non-responsive, or did not contract with insurance companies. CHLIC also provided information about a large ECP recruitment campaign that began in the 4th quarter of 2023.

While the Administration determined that a penalty for failure to meet the ECP inclusion standard was not warranted for 2023, the Administration expects CHLIC's 2024 access plan to demonstrate significant improvement in compliance with the standard. The Administration has provided additional guidance to all carriers for the 2024 filing year to standardize the regional classifications and to standardize the inclusion criteria of available ECPs. CHLIC must demonstrate that it has made specific efforts to expand the number of ECPs in its networks and has reviewed its methodology to ensure that all contracted ECPs are included in its calculations.

Appointment Waiting Time Standards

The data self-reported by CHLIC disclosed that the percentage of available in-person appointments meeting the regulatory standard in the following service types was less than 90%:

Appointment / Service Type	Standard	% of Standard Met
Urgent care for medical services	72 hours	86%
Outpatient urgent care for mental health services	72 hours	60%
Outpatient urgent care for substance use disorder services	72 hours	63%
Non-urgent mental health care	10 calendar days	78%
Non-urgent substance use disorder care	10 calendar days	80%

For the other appointment waiting time categories of Inpatient Urgent Care for Mental Health Services, Inpatient Urgent Care for Substance Use Disorder Services, Routine Primary Care, Preventative Visit Care/Well Visit and Non-urgent Specialty Care, CHLIC reports meeting the required 90% standard based on provider survey results. Supporting documentation, including provider survey results, were included in the 2023 CHLIC access plans to validate the reported values.

CHLIC provided the information required by COMAR 31.10.44.09A for each unmet appointment waiting time standard described above. The Administration has considered the information provided by CHLIC, and has determined that the carrier failed to provide sufficient information to demonstrate that the conditions necessary for the granting of a waiver as described in COMAR 31.10.44.09B were satisfied. However, CHLIC provided information demonstrating that the failure to meet the applicable waiting time standards was due to the regulatory changes in the methodology for measuring appointment waiting time, and insufficient time to address previously unidentified deficiencies for new categories of appointments. In accordance with Bulletin 23-8, the Administration has determined in its exercise of enforcement discretion, not to impose a penalty for the appointment waiting time deficiencies for 2023 for the following reasons:

- CHLIC provided a description of the steps it will take to address the deficiencies and achieve compliance for the 2024 access plan filings and demonstrated that reasonable good faith efforts to comply with the standards were undertaken following adoption of the final regulations.
- The information submitted by CHLIC in accordance with COMAR 31.10.44.09A, while not sufficient to justify a waiver of the standards, did indicate that an insufficient number of providers willing to contract with CHLIC contributed partly to the failure to meet the standards, and CHLIC included a description of its efforts to locate additional in-person medical specialty providers and mental health and substance use disorder providers using external sources such as the public provider directories of other carriers, Maryland's Active Providers Directory, and online searches, and included listings of identified recruitment targets and the status of negotiations with additional providers.

This determination letter is limited to review of the CHLIC 2023 OAP Access Plan, the CHLIC 2023 PPO Access Plan, the CHLIC 2023 POS Access Plan, and the CHLIC 2023 LCP Access Plan and is independent of the Administration's review of any other Network Adequacy Access Plans and submissions in connection thereof which are filed by CHLIC. The enforcement discretion exercised for 2023 does not extend to access plan filings submitted for 2024, and the Administration expects to see significant improvement in compliance levels for the 2024 plans.

CHLIC has the right to request a hearing on this determination letter in accordance with § 2-210 of the Insurance Article. A request for a hearing must be made in writing and received by the Administration within thirty (30) days of the date of this letter. The rules for requesting a hearing are set forth in COMAR 31.02.01.

Very truly yours,

Pam O'Brien

Pam O'Brien
Network Adequacy Analyst III
Mental Health Parity and Network Adequacy
Life and Health