

Network Adequacy Executive Summary

Carrier Name Cigna Health and Life Insurance Company

Access Plan Name and Year OAP 2024

(1) Travel Distance Standards

This chart lists the percentage of enrollees for which the carrier met the required travel distance standard for each provider type included in the carrier’s network in each geographic area served by the carrier.

Provider Type	Urban Area	Suburban Area	Rural Area
Addiction Medicine	100%	100%	100%
Allergy and Immunology	100%	100%	100%
Applied Behavioral Analyst	100%	100%	100%
Cardiovascular Disease	100%	100%	100%
Chiropractic	100%	100%	100%
Dermatology	100%	100%	100%
Endocrinology	100%	100%	100%
ENT/Otolaryngology	100%	100%	100%
Gastroenterology	100%	100%	100%
General Surgery	100%	100%	100%
Gynecology, OB/GYN, Nurse-Midwifery/Certified Midwifery	99.9%	99.9%	100%
Licensed Clinical Social Worker	100%	100%	100%
Licensed Professional Counselor	100%	100%	100%
Nephrology	100%	100%	100%
Neurology	100%	100%	100%
Oncology – Medical and Surgical	100%	100%	100%
Oncology – Radiation / Radiation Oncology	100%	100%	100%
Ophthalmology	100%	100%	100%
Pediatrics – Routine / Primary Care	99.8%	99.9%	100%
Physiatry, Rehabilitative Medicine	100%	100%	100%
Plastic Surgery	100%	100%	100%
Podiatry	100%	100%	100%
Primary Care (non-pediatric)	100%	100%	100%
Psychiatry – Adolescent and Child, Outpatient	100%	100%	100%
Psychiatry – Geriatric, Outpatient	100%	100%	100%
Psychiatry – Outpatient	100%	100%	100%

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

1,349

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

11.1%

(c) List the total number of **essential community providers** in the carrier’s network in each of the urban, rural, and suburban areas providing the services below. Additionally, list the total percentage of essential community providers available in the health benefit plan’s service area that are participating providers for each of the nine categories shown in the chart.

	Urban number; percent	Suburban number; percent	Rural number; percent
(i) Medical services	44 ; 6.0%	12 ; 3.8%	48 ; 14.6%
(ii) Mental health services	60; 19.3%	35; 18.2%	56; 35%%
(iii) Substance use disorder services	133; 16.6%	78; 20.2%	131; 33.5%

(d) List the total number of **local health departments** in the carrier’s network providing the services in the chart below. Of all the health departments in the state providing the services below, list the percentage in the carrier’s network.

Service	Number Offering Service in the Network	Percentage of Maryland Health Depts. Offering Service
(i) Medical services	3	5.3%
(ii) Mental health services	2	5.7%
(iii) Substance use disorder services	2	1.9%

(2) Appointment Waiting Time Standards

(a) For each appointment type listed in the chart below, list the calculated median waiting time to obtain an in-person appointment with a participating provider, in the following format, with the appropriate unit of time (e.g. hours or calendar days):

	Median Appointment Waiting Time
Urgent care for medical services	21.1 hours
Inpatient urgent care for mental health services	10.9% hours
Inpatient urgent care for substance use disorder services	17.1 hours
Outpatient urgent care for mental health services	52.1 hours
Outpatient urgent care for substance use disorder services	43.8% hours
Routine primary care	2% days
Preventive care/Well visit	6.7 days
Non-urgent specialty care	5.7 days
Non-urgent mental health	5.4 days
Non-urgent substance use disorder care	3% days

(3) Provider-to-Enrollee Ratio Standards

(a) This subsection does not apply to Group Model HMO health benefit plans.

(b) For all other carriers, summarize the network performance for each provider-to-enrollee ratio standard listed in COMAR 31.10.44%7 by listing the calculated number of providers in the provider panel, rounded to the nearest whole number, for each of the following categories of enrollees:

Provider Service Type	Number of Providers per 1,200 Enrollees
(i) 1,200 enrollees for primary care;	320
Provider Service Type	Number of Providers per 2,000 Enrollees
(ii) 2,000 enrollees for pediatric care;	103
(iii) 2,000 enrollees for obstetrical/gynecological care;	82
(iv) 2,000 enrollees for mental health care or service; and	287
(v) 2,000 enrollees for substance use disorder care and services.	272

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