

# Network Adequacy Executive Summary

Carrier Name: Kaiser Permanente Insurance Company (KPIC)

Network Access Plan Name and Year: 2023 Maryland Access Plan. Updated June 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.

*[Carrier Filing Instructions: For each provider type listed in COMAR 31.10.44.05, list the percentage of enrollees for which the carrier met the travel distance standards. Lists should be in the following format, with provider types first in alphabetical order, followed by facilities in alphabetical order. Insert rows as needed for other providers and facility types included on the carrier's provider panel but not listed in the chart, including physical therapists and licensed dietitian-nutritionists, with the percentage met for the maximum standards of 15 miles for Urban Areas, 40 miles for Suburban Areas, and 90 miles for Rural Areas.*

*If the telehealth mileage credit described COMAR 31.10.44.08B was applied when calculating the percentage of enrollees for which the carrier met the travel distance standards, include an asterisk in the chart for each provider type and geographic area where the credit is being applied. Also include the required footnote below.]*

Provider Type	Urban	Suburban	Rural
Addiction Medicine	91.8*	98.7	100
Allergy and Immunology	100	100	100
Allied (hospital based) (Provider Other)	100	100	100
Anesthesiology (Provider Other)	100	100	100
Applied Behavioral Analyst	100	100	100
Audiology (Provider Other)	100	100	100
Blood Banking/Transfusion Medicine (hospital based) (Provider Other)	48.7	96.7	99.5
Cardiovascular Disease	100	100	100
Certified Nurse Anesthetist (Provider Other)	100	100	100
Chiropractic	100	100	100
Clinical Genetics (Provider Other)	97	100	100
Clinical Nurse Specialist (Provider Other)	100	100	100
Colon and Rectal Surgery (Provider Other)	98.6	100	100

Provider Type	Urban	Suburban	Rural
Critical Care Medicine (Provider Other)	100	100	100
Dermatology	100	100	100
Dermatopathology (Provider Other)	98.8	100	100
Developmental-Behav Pediatrics (Provider Other)	50.5	99.5	99.5
Diagnostic Radiology (Provider Other)	100	100	100
Diet/Nutrition (Provider Other)	99.7	100	100
Emergency Medicine (Provider Other)	100	100	100
Emergency Room (hospital based) (Provider Other)	99.9	100	100
Endocrinology	100	100	100
ENT/Otolaryngology	100	100	100
Foot &Ankle Orthopedic Surgery (Provider Other)	94	100	99.8
Gastroenterology	100	100	100
General Surgery	100	100	100
General Vascular Surgery (Provider Other)	100	100	100
Genetic Counselor (Provider Other)	82.3	100	100
Gynecology, OB/GYN, Nurse-Midwifery/Certified Midwifery	99.9	100	100
Hand Surgery (Provider Other)	100	100	100
Hematology (Provider Other)	100	100	100
Hospice and Palliative Medicine (Provider Other)	100	100	100
Infectious Diseases (Provider Other)	100	100	100
Interventional Radiology and Diagnostic Radiology (Provider Other)	100	100	100
Licensed Clinical Social Worker	100	100	100
Licensed Professional Counselor	100	100	100
Marriage and Family Counseling (Provider Other)	94.4	100	100
Maternal and Fetal Medicine (Provider Other)	100	100	100
Neonatal-Perinatal Medicine (Provider Other)	99.9	100	100
Neonatology (hospital based) (Provider Other)	82.2	98.9	99.5
Nephrology	100	100	100
Neurological Surgery (Provider Other)	100	100	100
Neurology	100	100	100
Neuroradiology (Provider Other)	100	100	100
Nuclear Medicine (Provider Other)	99.9	100	100
Nuclear Radiology (Provider Other)	99.9	100	100
Nurse Practitioner (Provider Other)	100	100	100
Occupational Medicine (Provider Other)	43	83.9	99.5
Occupational Therapy (Provider Other)	100	100	100
Oncology - Medical and Surgical	100	100	100
Oncology - Radiation/Radiation Oncology	100	100	100
Ophthalmology	100	100	100
Optometry (Provider Other)	100	100	100

Provider Type	Urban	Suburban	Rural
Oral and Maxillofacial Surgery (Provider Other)	95.7	100	99.8
Orthopedic Sports Medicine (Provider Other)	95.5	100	100
Orthopedic Surgery (Provider Other)	100	100	100
Orthopedic Surgery of Spine (Provider Other)	98.4	100	100
Other (hospital based) (Provider Other)	100	100	100
Pain Medicine (Provider Other)	100	100	100
Pathology (Provider Other)	100	100	100
Pediatric Anesthesiology (hospital based) (Provider Other)	80.2	100	100
Pediatric Critical Care Medicine (Provider Other)	98.5	100	100
Pediatric Emergency Medicine (Provider Other)	100	100	100
Pediatric Infectious Disease (Provider Other)	99.4	100	99.8
Pediatric Orthopedics (Provider Other)	98.3	100	100
Pediatric Radiology (Provider Other)	99.9	100	100
Pediatric Rehabilitation Medicine (Provider Other)	61.9	98.8	99.8
Pediatrics - Routine/Primary Care	99.9	100	100
Physiatry, Rehabilitative Medicine	100	100	100
Physical Therapy (Provider Other)	100	100	100
Physicians Assistant (Provider Other)	100	100	100
Plastic Surgery	100	100	100
Podiatry	100	100	100
Preventive Med/Public Health (Provider Other)	81	100	99.8
Primary Care (non-pediatric)	100	100	100
Psychiatry (hospital based) (Provider Other)	79.5	99.6	99.8
Psychiatry-Adolescent and Child, Outpatient	99.3	100	100
Psychiatry-Geriatric, Outpatient	88.5*	96.7	100
Psychiatry-Outpatient	100	100	100
Psychology	99.7	100	100
Psychosomatic Medicine (Provider Other)	95.7	100	99.8
Pulmonology	100	100	100
Radiology (hospital based) (Provider Other)	100	100	100
Rheumatology	100	100	100
Sleep Medicine (Provider Other)	100	100	100
Speech Therapy (Provider Other)	98.6	100	100
Spinal Cord Injury (sci) medic (Provider Other)	89.5	99.3	99.5
Sports Medicine (Provider Other)	100	100	100
Surgical Critical Care (Provider Other)	100	100	100
Thoracic Surgery (Provider Other)	100	100	100
Undersea/Hyperbaric Medicine (Provider Other)	41.2	94.7	99.2
Urology	100	100	100
Vascular Intervene Radiology (Provider Other)	100	100	100

Provider Type	Urban	Suburban	Rural
Vascular Surgery (Provider Other)	100	100	100
Facility Type	Urban	Suburban	Rural
Acute Inpatient Hospitals	99.9	100	100
Acute Rehabilitation (Facility Other)	100	100	100
Ambulance/Ground Transportation (Facility Other)	99.6	100	100
Ambulatory Infusion Therapy Center	71.3*	98.6	98.4
Clinic (Facility Other)	99.5	100	100
Critical Care Services - Intensive Care Units	99.9	100	100
Diagnostic Radiology	100	100	100
Dialysis (Facility Other)	100	100	100
Durable Medical Equipment (Facility Other)	100	100	100
Home Infusion Therapy (Facility Other)	100	100	100
Home Nursing Services (Facility Other)	100	100	100
Hospice (Facility Other)	94	99.5	99.5
Inpatient Psychiatric Facility	98.8	100	100
Medical Equipment (Facility Other)	86.7	99.6	99.8
Occupational Health (Facility Other)	99.5	100	100
Oncology (Facility Other)	100	100	99.8
Opioid Treatment Services Provider	43.7*	58.7*	94.6*#1
Orthotics/Prosthetics (Facility Other)	99.9	100	100
Outpatient Dialysis	100	100	100
Outpatient Mental Health Clinic	16.6*	42.8*	73.7*
Outpatient Rehabilitation (Facility Other)	49.3	100	99.8
Outpatient Substance Use Disorder Facility	0*	0*	23.9*
Physical Therapy (Facility Other)	100	100	100
Residential Crisis Services	31.9	55	90.6 #2
Respiratory (Facility Other)	59.1	100	99.7
Retail Treatment Clinic (Facility Other)	100	100	100
Skilled Nursing (Facility Other)	100	100	100
Skilled Nursing Facilities	100	100	100
Sleep Disorder (Facility Other)	97.8	100	100
Substance Use Disorder Residential Treatment Facility	39.1*	70.8	100
Surgical Center (Facility Other)	100	100	100
Surgical Services (Outpatient or Ambulatory Surgical Center)	100	100	100
Urgent Care (Facility Other)	100	100	100
Visiting Nurse (Facility Other)	100	100	100
Work Hardening (Facility Other)	33.8	99.1	99.5

***\*Targets were identified in certain zip codes for the geographical area.***

**#1 Note:** Note: this analysis is based on initial efforts to match the Opioid Treatment Providers list published by the state in June 2024, to MultiPlan’s participating providers. MultiPlan has not completed the analysis to determine whether these are true gaps with providers available for recruitment.

**#2 Note:** Note: this analysis uses the Residential Crisis Services list provided by the state as the closed set of available Residential Crisis Services. MultiPlan has not completed the analysis to determine whether these are true gaps with providers available for recruitment.

**KPIC’s Response:** MultiPlan measured each specialty against the Maryland Travel Distance Standards, based on the estimated driving distance from the employee location to the closest provider, applying the appropriate urban/suburban/rural standard based on the employee’s ZIP code. Please note that when the employee address provided is in a state other than Maryland, is a P.O. Box, or includes “care of,” that address was excluded from the calculation above because they do not align with actual member residences in Maryland.

The 14 orange highlighted deficiencies in the travel distance table above have potential targets available for recruitment; the 14 grey-highlighted remaining deficiencies in the travel distance results table do not have potential targets available.

MultiPlan’s analysis of the travel distance results identified 28 Population Category + Specialty combinations measuring travel distance at less than 100%. Of these potentially deficient combinations, 8 Population Category + Specialty combinations have no targets available to recruit into the network according to NPPES data. Efforts will continue to research other data sources to identify other potential targets.

Based on the current review, this leaves 14 Population Category + Specialty combinations where MultiPlan has identified targets at the ZIP code level. Each Population Category may cover multiple ZIP codes with potential deficiencies for the applicable specialty, and we may identify more than one target per deficiency. Multiplan reviewed NPPES, Google, [AHD.com](http://AHD.com), [Healthcarecompare.com](http://Healthcarecompare.com), [health.usnews.com](http://health.usnews.com), [healthgrades.com](http://healthgrades.com), [webmd.com](http://webmd.com) as sources to identify prospective providers or facilities, and will work to bring those available providers into the network. Multiplan expects that some of these targets could resolve gaps across multiple deficient ZIP codes per specialty.

For the “all other” categories, some of these providers or facilities may already be present in the required categories and included in the “all other” category based on additional facility service types offered or additional practitioner secondary specialties reported. The “all other” categories have been highlighted in yellow. As an example, although nurse practitioners are coded as primary care providers for the purposes of the provider directory, they are included as part of the “all other licensed or certified providers” when calculating network adequacy.

MultiPlan includes nearly 150 different types of providers into the catch-all category “All other” for licensed or certified providers under contract with a carrier not listed, ranging from Acupuncture to Vascular Surgery. This category encompasses practitioners who do not fall into the specialty categories

designated by the state. MultiPlan does not expect the vast majority of these “all other” provider and facility types to pass any network adequacy travel / distance standard based on the above information. Please see the updated document [“2023 MD KPIC Adequacy Details.updated.0624.xlsx”](#) for additional detail.

In 2022, the infusion-related category was “Outpatient Infusion/Chemotherapy,” which is inclusive of hospital-based infusion services. MultiPlan interprets “Ambulatory Infusion Therapy Center” to be specific to *non*-hospital-based infusion clinics. MultiPlan’s 2023 numbers do not include hospital-based infusion services, which reduced the number of facilities available for the travel distance measurement. KPIC will pay claims for covered services for any chemotherapy/infusion facility claims beyond the identified centers.

In 2022, MultiPlan showed 24 facilities with services that could be included in the category “Other Behavioral Health/Substance Use Facilities,” which included services for mental health care and various substance use disorder treatment, including opioid. The specific categories in the 2023 filing show smaller numbers because not all of those facilities (the 24 from our 2022 filing) offer the specific service types measured in 2023. The network did not lose participation from Behavioral Health/Substance Use Facilities from participating in our network.

MultiPlan recognizes the continual need for full-service data collection to present offerings for each participating facility in the data used for reporting; the network development team has been working to update this in the expectation that the network does have more participating facilities offering the applicable services than are currently included in the reporting data. For example, the network has hospital-based opioid treatment services available, but those are not currently included in the “Opioid Treatment Service Provider” facility type. MultiPlan is working to include hospital-based services in this category.

MultiPlan shows an increase in the number of uncategorized licensed or certified facilities listed in the “all other” category in 2023. MultiPlan is constantly working to recruit providers into the network, and accepts nominations from the clients, including Kaiser Permanente Insurance Company, year-round. Additionally, MultiPlan’s Provider Data Management team works diligently to confirm and update contact and specialty information about the providers. MultiPlan expects this increase may be attributed to the provider-reported specialties falling outside of the Maryland categories.

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

**KPIC Response:** Zero (0) registered nurse practitioners are counted as primary care providers in MultiPlan’s network for the purposes of travel/distance calculation. Although some nurse practitioners may be coded as primary care providers for the purposes of the provider directory, they are included as part of the “all other licensed or certified providers” when calculating network adequacy.

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

**KPIC Response:** Zero percent (0%) of primary care providers are certified registered nurse practitioners in MultiPlan’s network for the purposes of travel/distance calculation. Although some nurse practitioners may be coded as primary care providers for the purposes of the provider directory, they are included as part of the “all other licensed or certified providers” when calculating network adequacy.

(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.

	<b>Urban number; percent</b>	<b>Suburban number; percent</b>	<b>Rural number; percent</b>
<b>(i) Medical services</b>	28; 49%	3; 50%	30; 48%
<b>(ii) Mental health services</b>	7; 78%	0; 0%	0; 0%
<b>(iii) Substance use disorder services</b>	2; 50%	0; 0%	0; 0%

**KPIC Response:** MultiPlan contracts with 45 of 127 Maryland ECPs listed in the CMS-published file for 2024, which equals 35%.

(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.

<b>Service</b>	<b>Number Offering Service in the Network</b>	<b>Percentage of Maryland Health Depts. Offering Service</b>
<b>(i) Medical services</b>	1	4%
<b>(ii) Mental health services</b>	0	0%
<b>(iii) Substance use disorder services</b>	0	0%

**KPIC Response:** MultiPlan has completed outreach to all 23 Maryland public health departments on this list inviting them to participate in our network. MultiPlan is in active discussions with 6 entities.

## **(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:

<b>Median Appointment Waiting Time</b>
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<b>Urgent care for medical services</b>	76.13%
<b>Inpatient urgent care for mental health services</b>	81.25%
<b>Inpatient urgent care for substance use disorder services</b>	100%
<b>Outpatient urgent care for mental health services</b>	81.25%
<b>Outpatient urgent care for substance use disorder services</b>	94.74%
<b>Routine primary care</b>	89.18%
<b>Preventive care/Well visit</b>	95.50%
<b>Non-urgent specialty care</b>	96.86%
<b>Non-urgent mental health</b>	87.33%
<b>Non-urgent substance use disorder care</b>	94.74%

*[Carrier Filing Instructions: If the telehealth credit described in COMAR 31.10.44.08C was applied when determining whether the carrier’s provider panel met the required waiting time standards for at least 90 percent of appointments in any category, the carrier may include a statement on the executive summary disclosing the availability of telehealth appointments to supplement the in-person appointments for that category.*

*If the carrier arranges for telehealth services to be provided from participating providers beyond traditional office hours for an appointment type listed in COMAR 31.10.44.06, the carrier may include a statement on the executive summary disclosing the availability of those services]*

**KPIC Response:** MultiPlan’s data is not specific to KPIC members’ experiences or actual results booking individual appointments. MultiPlan documents its expectations for appointment wait times in the network provider handbook. The provider handbook obligates providers to supply data about their average appointment wait times annually.

MultiPlan collects and categorizes appointment wait time data from its network providers. MultiPlan asks network groups and providers to provide either their standard wait times or their averages (whichever they are willing to provide with a degree of certainty). MultiPlan collects this data from different contacts within the entities we communicate with so there is no standard way this is being communicated to Multiplan. This information is associated to provider locations when reported out, not individual providers.

The appointment wait time percentages provided above by MultiPlan are a calculation of the number of providers’ locations whose reported data would meet the Maryland standard, as a percentage of all provider locations that reported appointment wait time data. Providers who have not reported appointment wait time data for their locations are not included in this calculation.

Providers do not indicate what percentage of their appointments are provided via telehealth.

### (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 31.10.44.07 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:

<b>Provider Service Type</b>	<b>Number of Providers per 1,200 Enrollees</b>
(i) 1,200 enrollees for primary care;	4,887
<b>Provider Service Type</b>	<b>Number of Providers per 2,000 Enrollees</b>
(ii) 2,000 enrollees for pediatric care;	2,490
(iii) 2,000 enrollees for obstetrical/gynecological care;	1,877
(iv) 2,000 enrollees for mental health care or service; and	2,402
(v) 2,000 enrollees for substance use disorder care and services.	46