COMAR 31.10.44 .09 A (1) (a)

Network Adequacy Access Plan Executive Summary Form - Travel Distance Standards Results

Percentage Of Enrollees With Access Within Standards Identified In COMAR 31.10.44 .04 A (5)

_	COMAR 31.10.44 .04 A (5)		
Provider Type	Urban Area	Suburban Area	Rural Area
Primary Care Provider	N/A	N/A	N/A
Allergy and Immunology	N/A	N/A	N/A
Applied Behavioral Analyst	N/A	N/A	N/A
Cardiovascular Disease	N/A	N/A	N/A
Chiropractic	N/A	N/A	N/A
Dermatology	N/A	N/A	N/A
Endocrinology	N/A	N/A	N/A
ENT/Otolaryngology	N/A	N/A	N/A
Gastroenterology	N/A	N/A	N/A
General Surgery	N/A	N/A	N/A
Gynecology, OB/GYN	N/A	N/A	N/A
Gynecology Only	N/A	N/A	N/A
Licensed Clinical Social Worker	N/A	N/A	N/A
Nephrology	N/A	N/A	N/A
Neurology	N/A	N/A	N/A
Oncology - Medical and Surgical	N/A	N/A	N/A
Oncology - Radiation/Radiation Oncology	N/A	N/A	N/A
Ophthalmology	N/A	N/A	N/A
Pediatrics - Routine/Primary Care	N/A	N/A	N/A
Physiatry, Rehabilitative Medicine	N/A	N/A	N/A
Plastic Surgery	N/A	N/A	N/A
Podiatry	N/A	N/A	N/A
Psychiatry	N/A	N/A	N/A
Psychology	N/A	N/A	N/A
Pulmonology	N/A	N/A	N/A
Rheumatology	N/A	N/A	N/A
Urology	N/A	N/A	N/A
All other licensed or certified providers under contract with a			
carrier not listed	N/A	N/A	N/A
Facility Type			
Pharmacy	N/A	N/A	N/A
Acute Inpatient Hospitals	N/A	N/A	N/A
Critical Care Services / Intensive Care Units	N/A	N/A	N/A
Diagnostic Radiology	N/A	N/A	N/A
Inpatient Psychiatric Facility	N/A	N/A	N/A
Outpatient Dialysis	N/A	N/A	N/A
Outpatient Infusion/Chemotherapy	N/A	N/A	N/A
Skilled Nursing Facility	N/A	N/A	N/A
Surgical Services			
(Outpatient or Ambulatory Surgical Center)	N/A	N/A	N/A

Other Behavioral Health/Substance Abuse Facilities	N/A	N/A	N/A
All other licensed or certified facilities under contract with a			
carrier not listed	N/A	N/A	N/A

	<u>CO</u> Network Adequa		.44 .09 A (1 Plan Execut		ry Form		
#	%						
of Certified RNP as PCP	Certified RNP as PCP	# ECP Urban	% ECP Urban	# ECP Rural	% ECP Rural	# ECP Suburban	% ECP Suburban
895	21%	24	35%	30	47%	3	50%

COMAR 31.10.44 .09 A (2) (a-b)

Network Adequacy Access Plan Executive Summary Form - Appointment Waiting Time Standard Results

Appointment Type	Percentage Of Enrollees With Access Within Standards Identified In COMAR 31.10.44.05 C
Urgent Care -	
Within 72 Hours	99%
Routine Primary Care -	
Within 15 Calendar Days	99%
Preventative Visit / Well Visit -	
Within 30 Calendar Days	99%
Non-Urgent Specialty Care -	
Within 30 Calendar Days	98%
Non-Urgent Behavioral Health/Substance Use Disorder Services -	
Within 10 Calendar Days	94.66%
Total percentage of telehealth appointments counted as part of the appointment	
waiting time standard results	100%

COMAR 31.10.44 .09 A (3) (b) (i-v)

Network Adequacy Access Plan Executive Summary Form - Provider-To-Enrollee Ratio Standards Results

Primary Care 1:1,200 Pediatric Care 1:2,000 Obstetrical/Gynecological Care 1:2,000 Behavioral Health Care or Service	ovider-To- ollee Ratio
Pediatric Care 1: 2,000 Obstetrical/Gynecological Care 1: 2,000	
1 : 2,000 Obstetrical/Gynecological Care 1 : 2,000	N/A*
Obstetrical/Gynecological Care 1:2,000	
1:2,000	N/A*
•	
Behavioral Health Care or Service	N/A*
1:2,000	N/A*
Substance Use Disorder Care and Services	
1:2,000	N/A*

^{*}No Active Membership