CCO Network Adequacy Overview

August 31, 2022



Agenda

- Oregon Network Adequacy
 - What is Network Adequacy?
 - CCO Obligations
 - OHA Obligations
- Network Adequacy Improvement Efforts
 - Updated Standards
 - Updated Reporting and Monitoring
- Working Together for Improved Network Adequacy

Oregon Network Adequacy

What is Network Adequacy?

- CCO's ability to provide reasonable access to care for members.
 - Our North Star:
 Members get the right care, in the right place, at the right time.
- Current Network Adequacy Focus:
 - Travel time and distance to appointments
 - Wait time for an appointment
 - Language services
 - Physical accessibility

Oregon Network Adequacy – CCO Obligations

- Ensure network allows for timely and appropriate access to care based on member needs (including physical, oral, and behavioral health care and services). Anticipate member enrollment and adjust as needed and account for the cultural and linguistic needs of its membership.
- Monitor, document, report, and evaluate its provider network.
- Remedy deficiencies that are identified.
- Submit accurate and complete Quarterly Provider Capacity Report and Annual DSN Narrative Report information & data.

DSN – Annual Narrative Report

CCOs must submit this report in order to demonstrate they are meeting their obligations around network development and monitoring.

- Provide narrative responses to questions regarding how they are meeting their network-related obligations;
- Provide an analysis of their provider network against time and distance standards.

Health Services Advisory Group, Oregon's contracted External Quality Review Organization, incorporates the information gathered via this reporting into their annual evaluation of DSN activities – including feedback to OHA on areas for improvement.

Delivery System Network Reporting-Quarterly Provider Capacity Reporting

CCO Obligations:

 Provide information to OHA regarding the types, locations, and capacity of providers, facilities, clinics, and healthcare businesses and service providers within their network.

OHA Obligations:

 OHA analyzes this information, evaluates the supply of various provider types, and provides feedback to the CCOs.

DSN - Improvements

Updated CCO Reporting (effective in 2023):

- Revised reporting templates and instructions to support data quality and clarity in reporting.
- Using taxonomy codes and flags for more nuanced understanding of provider types available in CCO networks.
- More clearly defined reporting around "in" and "out of network" providers.

Updated OHA Analysis:

- Incorporating Provider to Member Ratios to better understand and track provider supply over time.
- Incorporating claims and encounter data to understand "active providers" within the network.

Network Adequacy Improvement Efforts

Time and Distance Standards:

- Identifies the maximum distance to the physical location of provider in miles.
- Identifies the maximum time of travel to the physical location of the provider in minutes.
- Identifies the percentage of adherence to the standards for compliance.

Current Time and Distance Standards

- Addresses all provider types and requires 100% adherence
 - Urban Areas: 30 miles or 30 minutes
 - Rural Areas: 60 miles or 60 minutes

Future Network Adequacy Standard Considerations:

- Breaking out specialists to consider different standards based on the provider-specialty type.
- Differing member needs based on demographic groups, like age, special needs, etc.
- Availability of telehealth
- Workforce realities

Questions and Discussion

Please submit follow-up questions to the Quality Assurance team at: HSD.QualityAssurance@odhsoha.oregon.gov

