
SUPPLEMENTARY RESPONSE: INCLUSION OF ESSENTIAL COMMUNITY PROVIDERS

SUPPLEMENTARY RESPONSE

Instructions for Submitting a Supplementary Response

Please answer the questions below regarding access to essential community providers in the issuer’s proposed service area(s). Please be as complete and specific as possible in each of your responses. In order to be considered complete, the supplementary response must contain an appropriate explanation for each applicable question. Please note that if the issuer is applying in multiple service areas, the response should address each service area.

Issuers that do not qualify for the alternate ECP standard should complete Section 1. Issuers that qualify for the alternate ECP standard should complete Section 2.

Section 1: Instructions for Issuers Subject to the General ECP Standard

For issuers that qualify for the General ECP standard: Please indicate which portion of the general ECP standard that the issuer does not meet (check all that apply), and respond to each applicable question:

Instructions for Issuers Subject to the General ECP Standard	Instructions	Check all that apply
A. Does not offer a contract to all Indian health providers in the service area.	Complete Question #1	
B. Does not offer a contract to at least one ECP in each available ECP category in each county in the service area.	Complete Question #2	
C. Issuer’s plan network does not include at least 30 percent of available ECPs in the service area.	Complete Questions #3-5	

1. The issuer does not offer a contract to all Indian health providers in the service area using the recommended Model Indian Addendum developed by HHS. How will the issuer’s provider network(s), as currently structured, provide adequate access to care for American Indians/Alaska Natives?
2. The issuer does not offer a contract to at least one ECP in each available ECP category¹ in each county in the service area. How will the issuer’s provider networks, as currently structured, provide access to a broad range of ECP types, including access for individuals with HIV/AIDS and individuals seeking women’s health and reproductive health services?

¹ ECP categories include: federally qualified health centers; Ryan White providers; family planning providers; Indian health providers; hospitals; and other providers, such as STD clinics, TB clinics, and hemophilia treatment centers.

If the issuer plans do not include at least 30 percent of available ECPs in the service area, please respond to questions 3-5.

3. Describe why the issuer is unable to achieve the 30% standard for ECPs. The response should address the issuer's efforts to contract with additional ECPs (including provider information and contract offer dates, as applicable) and why those efforts have been unsuccessful. Please be as specific as possible in your response. Please be sure to indicate:
 - a. Number of contracts offered to ECPs for the 2015 benefit year;
 - b. Names of the ECP hospitals and FQHCs to which the issuer has offered contracts, but an agreement with the providers has not yet been reached. [For example, the issuer may want to indicate whether contract negotiations are still in progress or the extent to which the issuer was not able to agree on contract terms with available ECPs (and if so, which terms)]
4. Describe how the issuer plans to increase ECP participation in its provider networks in the future. Identify the number of additional contracts issuer expects to offer for the 2015 benefit year and the timeframe of those planned negotiations.
5. Describe how the issuer's provider networks, as currently structured, provide an adequate level of service for low-income and medically underserved individuals. Please be specific in your response.
 - a. Describe how the issuer's current networks provide adequate access to care for individuals with HIV/AIDS and those with co-morbid behavioral health conditions.
 - b. Describe how the issuer's current networks provide adequate access to care for American Indians and Alaska Natives.
 - c. Describe how the issuer's current networks provide adequate access to care for low-income and underserved individuals seeking women's health and reproductive health services.

Section 2: Instructions for Issuers that Qualify for the Alternate ECP Standard

For issuers that qualify for the Alternate ECP standard: *If the number of the issuer's providers that are located in, or contiguous to, Health Professional Shortage Areas (HPSA) or zip codes in which 30 percent or more of the population falls below 200 percent of the federal poverty level is fewer than the equivalent of 30 percent of available ECPs in the service area, please respond to each question below.*

1. Describe why the issuer's plan does not meet the equivalent of the 30 percent threshold, and any plans to provide additional access to low-income and medically underserved consumers in the future.

-
2. Describe how the issuer's provider networks, as currently structured, provide an adequate level of service for low-income medically underserved individuals. Please be specific in your response.
 3. Describe how the issuer's current networks provide adequate access to care for individuals with HIV/AIDS and those with co-morbid behavioral health conditions.
 4. Describe how the issuer's current networks provide adequate access to care for American Indians/Alaska Natives.
 5. Describe how the issuer's current networks provide adequate access to care for low-income and underserved individuals seeking women's health and reproductive health services.