



South Carolina Department of Insurance

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HENRY McMASTER
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MEMORANDUM

TO: All Insurers Licensed to Transact Accident and Health Insurance Business within the State of South Carolina and All South Carolina Licensed Health Maintenance Organizations (collectively "Health Insurance Issuers" or "Issuers")

FROM: Kendall Buchanan
Deputy Director of Market and Consumer Services

SUBJECT: Network Adequacy Standards – Annual Certifications Due February 1st

DATE: January 3, 2020

I. PURPOSE

The purpose of this memorandum is to remind all Health Insurance Issuers of the upcoming due date for network adequacy annual certifications and required documentation.

II. DUE DATES

Access plans should be submitted with the initial filing for approval of the network plan and by February 1st of each year thereafter. After the first submission, the Issuer may certify annually that there have been no substantive changes in the network and attach a current provider directory.

III. PROVIDER NETWORK ADEQUACY GUIDELINES

In accordance with Bulletin 2013-04, Appendix C, Item 9 under the section titled Provider Network Adequacy Guidelines, each Issuer must file an access plan with the filing for initial approval of the network plan showing the provider network, and by February 1st of each year thereafter, that shows how it was determined that provider network meets the network adequacy requirements set forth in this Network Adequacy Standard. The guidelines outlined in Appendix C of Bulletin 2013-04 and the "Managed Care Plan Network Adequacy Model Act" should also be used for reference. The access plan should include a description of the network, referral procedures, ongoing monitoring, and any reasonable criteria used by the Issuer to determine network adequacy. The access plan should be labeled as "CONFIDENTIAL" and submitted as a separate user-added supporting document in the SERFF filing that is marked as not for public access. Radius maps must be included in the access plan. Use of "GeoAccess" or something similar is encouraged. The initial access plan should be accompanied by a certification by an officer of the Issuer that the requirements set forth in this Network Adequacy Standard have been met. After the first submission, the Issuer may certify annually that there have been no substantive changes in the network,

and attach a current provider directory (in lieu of a complete description analysis). This letter must come from an officer of the company and specify the addition or loss of any hospital providers.

IV. QUESTIONS

Please refer to Bulletin 2013-04, Appendix C for a complete list of the Network Adequacy Standards, Guidelines and Filing Requirements. This Bulletin can be found on the LA&H webpage (doi.sc.gov/lah) and by clicking the following link: (<https://doi.sc.gov/DocumentCenter/View/3040/2013-04-Process-for-Filing-Amendments-to-Forms-to-Comply-with-ACA>).

Questions regarding this notice, the filing process, or any related filing materials should be submitted via email to lahmail@doi.sc.gov and include the company name and primary point of contact (with phone number and email address) for follow up.