To: Issuers Participating in Maryland Health Connection

From: Maryland Health Benefit Exchange – Policy and Plan Management

Date: April 27, 2021

Re: Instructions on Meeting the Essential Community Provider Plan Certification Standard

Pursuant to COMAR 14.35.16.07, all issuers participating in Maryland Health Connection must submit Essential Community Provider (ECP) information to the Maryland Health Benefit Exchange (MHBE) as a part of plan certification. MHBE collects this information via proprietary templates that are shared annually with issuers prior to submission.

For the 2022 plan year there are no material changes to the submission and review processes. Issuers must submit all ECP related templates and documentation into their SERFF Binders for processing by MHBE Plan Management by June 7, 2021.

ECP Network Inclusion Standards

To meet the Network Inclusion Standard issuers must:

a. Contract with at least 30% of available ECPs in each plan's service area as part of each plan's provider network.
b. Issuers must offer contracts in good faith to the following provider types:
    -   All available Indian Health Care Providers in a service area
    -   Any willing local health department in the plan's service area, and
    -   At least one ECP in each ECP category in each county in the issuer's service area, where an ECP in that category is available and provides medical or dental services by issuer plan type.

MHBE List of ECPs:
MHBE's ECP list is sourced from two documents; the Final Non-exhaustive Health and Human Services list of ECPs for the current plan year and from a list provided by the Maryland Department of Health (MDH) that includes Expanded Essential Community Providers, as defined under 45 CFR §156.235(c).

The ECP list for plan year 2022 includes a total of 1,293 providers. Of that number, 258 are new records from last year's ECP list and 64 are Stand-Alone Dental Providers.

Submission of the MHBE ECP Templates:
Issuers will use the MHBE-developed ECP Templates to report to MHBE which ECPs they have contracted for their networks. The ECP Template will be submitted to SERFF.
Appendix A has detailed instructions on how to complete the ECP Templates. The templates can be found on the website at https://www.marylandhbe.com/news-and-resources/toolbox/carriers-shop-administration**.**

MHBE's ECP Calculation Methodology:
MHBE will count individual providers located at one physical location each as a provider for the denominator. Issuers may elect one of two different methodologies to meet the ECP Network Inclusion standard:

a. Standard denominator: MHBE will use the full list of providers as an issuer's denominator for evaluating compliance with the contracted ECP network inclusion standard. MHBE is confident that the ECPs on the provided ECP List will meet issuer credentialing standards. This is the default denominator method.

b. Credentialing standard adjusted denominator: In cases where issuers determine they are unable to contract with a significant number of ECPs, such that they will be unable to meet the network inclusion standard using the standard denominator, they may elect to use an adjusted denominator. The issuers must show that their differences in credentialing standards would adversely affect issuer network quality if they contracted with the ECP. Note that ECP credentialing standards/contracts are subject to MHBE review.

MHBE will use the equations below to determine whether issuers meet their ECP network inclusion standards:

For the standard denominator method:

$$Issuer_1\ (\%) = \frac{Number\ of\ contracted\ ECPs + "Write\ in"\ ECPs}{Total\ N\ of\ ECPs} \times 100$$

Example:
Insurance Company, LLC., contracts with 400 ECPs, out of the total 1,293 ECPs statewide, so their calculation would be**:**

$$\frac{400}{1293} \times 100 = 30.9\%$$

For the credentialing standard adjusted denominator:

$$Issuer_2\ (\%) = \frac{Number\ of\ contracted\ ECPs + "Write\ in"\ ECPs}{(Total\ N\ of\ ECPs - Uncontracted\ ECPs)} \times 100$$

Example:
Insurance Carrier, Inc., contracts with 380 ECPs and lists 49 ECPs on the "Uncontracted ECPs" tab with explanations of why they could not contract with them, so their calculation would be:

$$\frac{380}{1293 - 49} \times 100 = 30.5\%$$

To meet the Alternative ECP Standards when ECP Network Inclusion Standards are Unmet:
If an issuer cannot meet the ECP network inclusion standards, the issuer may satisfy the ECP requirement under the alternative ECP standard. To meet the alternative ECPS standard, an issuer must

submit a satisfactory narrative justification that the carrier includes access to sufficient ECPs within its network. Issuers must demonstrate through this narrative that low-income members receive appropriate access to care and satisfactory service. The narrative explanation should describe the extent to which the issuer's provider sites are accessible to, and have services that meet the needs of specific underserved populations including:

   a. Individuals with HIV/AIDS (including those with comorbid behavioral health conditions).
   b. American Indians and Alaska Native (AI/AN).
   c. Low income and underserved individuals seeking women's health and reproductive health services; and
   d. Other specific populations served by ECPs in their service area.

Issuers submitting a narrative justification must also submit to MHBE provider quality and patient satisfaction metrics such as current year and previous year issuer performance on the CAHPS including all CAHPS Composites against the 90th Percentile National Benchmark.

These metrics should be submitted in the same report as the narrative justification. Issuers may propose alternative metrics to report to MHBE for the provider quality and patient satisfaction metrics. Such alternatives may include a statistically rigorous CAHPS survey of cost-sharing reduction eligible members.

MHBE ECP Geographic Inclusion Calculation Methodology:
MHBE Plan Management will determine if issuers meet the geographic inclusion standard through the Contracted ECP List submission. Additionally, issuers must self-report the counties without a single ECP in each category and submit the MHBE IDs of the ECPs outreached to in good faith. Issuers must submit this information when they submit their Contracted ECP List. In such cases where MHBE identifies a county that does not meet the geographic ECP standard for a given issuer, the issuer must submit the same information requested in the self-report. Issuers should submit this information to MHBE within 3-5 business days. MHBE will use this information to verify an issuer's attempted good-faith effort to meeting the geographic standard.

Notice of ECP Standard Approval:
MHBE will notify issuers of their performance against the network inclusion standards within ten (10) business days of submission of their ECP Templates on June 7, 2021. Issuers that do not meet these standards and have not submitted the appropriate documentation should work to submit the information with five (5) business days after receiving notice.

Dental ECP Inclusion Standard:
MHBE will follow the FFM approach for evaluation of ECP Network Inclusion for SADPs. SADPs will be considered compliant with the ECP standard if, in their application, they offer a contract in good faith to at least 30% of available ECPs in each plan's service area to participate in the plan's provider network and offer a contract in good faith to all available Indian Health Care Providers in the plan's service area. MHBE considers the ECP category per county service area requirement not applicable to SADPs, but strongly encourages SADP issuers to contract with at least one Federally Qualified Health Center (FQHC)

and any willing Local Health Department (LHDs). MHBE will work with stakeholders to determine if an ECP category per county service area requirement should be imposed in future plan years.

SADPs are indicated on the MD QHP ECP List in column M "Dental Provider" and are aggregated on the tab "2022_SADP_ECP_List". **Please note** there is a separate Dental ECP Template available at this URL.

FAQs:

- Can I add ECPs that are not listed on the official ECP list or on the "Select ECPs" tab on the template?
    - Yes, per the instructions shown in Appendix A, you can add an ECP that is not listed on the official ECP list as a "Write-In" ECP by typing "Write-In" in the MHBE number column on the "Contracted ECP List" tab and then inputting the required information (i.e., provider name, organization name, type of ECP, specialty, address, etc.). We also request that you utilize the "Essential Community Providers Petition" found at this URL to submit any Write-In ECPs to be added to the official list.
- What if the information listed for an ECP we are contracting with is incorrect?
    - Please let us know! We do our best to maintain an accurate list but we realize there will be mistakes and we have created the "Update Existing ECP Request Form" exactly for this purpose. If you don't feel comfortable submitting the correct information via the form, please send the link to the ECP contact you have so they can update their information. The form can be found at this URL.
- I am unsure how to utilize the template, are there instructions?
    - Yes, the appendix A to this document contains step-by-step instructions for utilizing either the ECP or Dental ECP templates, including screenshots and common issues encountered. If you require further help, feel free to reach out to MHBE plan management directly for assistance at any time.
- Is there a way to identify only the Stand Alone Dental ECPs?
    - We have a separate template for the Stand Alone Dental ECPs that can be found at this URL. On the published official ECP list, you can identify the Stand Alone Dental ECPs by looking at the "2022_SADP_ECP_List" tab or by filtering column M "Dental Provider" on the "2022_QHP_ECP_List" tab.
- How do I show that we have attempted to contract with an ECP but were unable to?
    - Per the instructions in Appendix A, you can utilize the "Uncontracted ECP List" tab to indicate which ECPs you tried to contract with along with the reason you were unable to contract with them. If you attempted to contract with an ECP not listed on the "Select ECPs" tab or the official ECP list, please submit a response to the "Essential Community Providers Petition" form so we can review the provider for inclusion in the next plan year's ECP list.
- In previous years, we had a lot of errors due to the "Medical FTEs or Bed Count" columns. How do we input the correct number of FTE's/Beds? What if we do not know that information?

- o CMS has removed the FTE/Bed counts from this year's list and MDH had never provided this information, so both templates have been updated to remove these columns. This should cut down on the number of errors encountered on the template as this was a major sticking point previously.
- In previous years, we had encountered issues when copying and pasting content into the Facility and Individual ECP tabs, how can we avoid getting errors when we do this?
  - o We have revised the template significantly this year to address this issue. You can now copy and paste information into the "Contracted ECP List" tab (which has replaced the Facility ECPs and Individual ECPs tabs) and into the "Uncontracted ECP List" tab. If you encounter errors, please reach out to the Plan Management team as soon as possible for assistance.
- One of the ECPs we contracted with last year is not listed on the "Select ECPs" tab or the official ECP list. Where did they go?
  - o Our ECP list is a combination of the official CMS ECP list published each plan year and a list of ECPs we receive from the Maryland Department of Health. We have done our best to remove any duplicated records on the ECP list and ensure that every ECP listed is a valid entry with accurate information. It is possible that in the de-duplication process, a valid ECP was removed. If you encounter this issue, please reach out to us right away and submit a response to the "Essential Community Provider Petition" form so that we can add the ECP back to the official list. We have a full list of all removed duplicated ECPs and ECPs we determined to be invalid that we can check against to determine if the ECP was removed in error.

Appendix A: Template Instructions and Helpful Tips

Essential Community Providers Template Instructions

1. Introduction

This document provides instructions to QHP and SADP issuers on how to use the Essential Community Provider (ECP) Templates (standard or dental) to demonstrate that they meet the requirements of sufficient number and geographic distribution of ECPs. It also allows issuers to utilize the CMS Network ID Template to detail the network(s) associated with each QHP.

2. Data Requirements

To complete this template, issuers will need the following:

a. HIOS Issuer ID
b. Completed Network ID Template (provided by CMS on this page)[1]
c. Any Write-in ECPs (qualified ECPs not listed on the MD ECP List PY 2022)
d. A list of Uncontracted ECPs (if the issuer is unable to meet the reporting requirements using the general ECP standard calculation[2]) including a brief narrative explaining the steps taken to contract with the ECP and their response.

3. Detailed Section Instructions

A. User Control Tab

The first tab of the Essential Community Provider template is the **User Control** tab. This tab contains the issuer identifying information, instructions on the proper order to complete the template, a button to import the Network ID template (which must be completed ahead of the ECP template), a Validate button used to identify any errors, and the ECP counts and ECP contracting requirements calculation (generated by clicking on the "Calculate" button after completing the other steps listed).

User Control Tab	Steps
HIOS Issuer ID	Enter the five-digit HIOS Issuer ID.
Source System	Select the name of the system used to submit the QHP Application (for MD, this is always SERFF).
State	This is pre-populated with the correct state (Maryland).

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[1] NOTE: Network templates with only one network may result in blank lines being populated to the "Network ID" list for the drop-downs on the ECP tabs. Please keep this in mind and be sure to scroll up on the drop-down using the up arrow.

[2] NOTE: An issuer may not realize they need to be considered under the Alternate ECP Calculation until they have completed the template. Should you encounter this issue, please reference the first topic in the "Troubleshooting Common ECP Template Issues" section for a detailed guide on what to do including helpful tips that will prevent the issuer from having to duplicate previous efforts and significantly cut down on revision time.

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Is this an Alternate ECP Calculation Issuer?[2]	Choose from the following options: ❖ **Yes** – if the user issuer is unable to meet the general ECP standard and needs to be considered under the Alternate ECP Calculation standard. ❖ **No** – if the user is a general ECP standard issuer.
Import Network IDs	Click the **Import Network IDs** button to import data from the Network ID Template provided by CMS. Once the Network ID Template is imported, it will automatically populate networks into the **Network IDs** field as a drop-down menu in the **Contracted ECP List** tab. The confirmation message shown in **Figure 2** will display if the import was successful.

A sample completed **User Control** tab looks like **Figure 1**.

Figure 1 - Sample User Control Tab
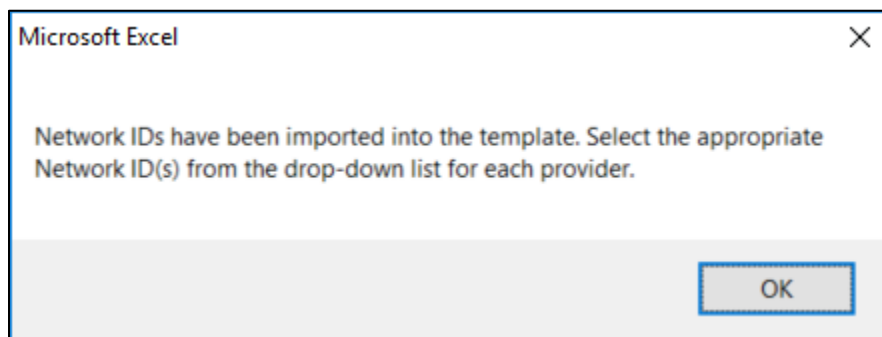
Figure 2 Successful import of Network IDs

B.   Select ECPs Tab

Select ECPs Tab	Steps
Filter ECPs	The columns on the **Select ECPs** tab can be filtered to make selecting ECPs easier. For example, filter the Site City column to only view ECPs in "Baltimore".
Add ECPs	Double-click anywhere on the row for the ECPs the user wants to add to the ECP tabs. Once selected, the row will be highlighted in blue and "ADD" will appear in the "Add ECP?" column. Continue selecting the ECPs until all contracted ECPs from the ECP list are selected. ❖ To unselect an ECP, double-click on the selected row. The blue highlighting will be removed, and the ECP will not be added to the ECP tabs. ❖ To clear *all* selected ECPs, click the **Clear All** button at the top of the tab, and all highlighted ECPs will be deselected and will not be added to the ECP tabs. ❖ To show only those ECPs that have been selected, click on the **Show Selected** button at the top of the tab, and all highlighted ECPs will be displayed. To undo this action and show all ECPs, click the **Show All ECPs** button.
Insert Selected ECPs	❖ Click the **Insert Selected ECPs** button. The selected ECPs will be added to the **Contracted ECP List** tab. The template will not populate duplicate ECPs into the tabs. The issuer must complete any field within the **Contracted ECP List** tab that is not populated from the **Select ECPs** tab before the template is validated. ❖ For each ECP that was selected and inserted from the **Select ECPs** tab, a record will be added to the **Contracted ECP List** tab that includes the following: the MHBE number, NPI[3], facility name, provider name, street address, city, state, ZIP, county, and all the ECP categories.

A sample **Select ECPs** tab looks like **Figure 3**.

Figure 3 Sample ECPs Tab

C. Contracted ECP List Tab

NOTE: Issuers will need to complete any field within the "Contracted ECP List" tab that is not populated from the "Select ECPs" tab by following the directions in the table below before the template is validated.

Contracted ECP List Tab	Steps
Physician/Non-Physician	Indicate the type of provider. Choose from the following: ❖ **Physician** – if the provider is a physician practitioner. ❖ **Non-Physician** – if the provider is a non-physician practitioner.
Specialty Type (area of medicine)	Select the appropriate specialty type for each ECP. Issuers may select multiple specialty type for each ECP, as applicable. If none of the facility type selections apply to the ECP, select **000 OTHER**. If the user makes a mistake in selection, they can click the cell to select it and press the "DELETE" button on their keyboard. The cell will be cleared, and the user can start over with their selection.
Network IDs	Select the network IDs for each ECP. Issuers may select multiple network IDs for each ECP, as applicable. Dual issuers must create separate network IDs for their medical and dental plans.
Remove Selected ECPs	If necessary to remove ECPs from the **Contracted ECP List** tab, double-click the record to be deleted in the Remove ECPs column. The provider will be highlighted in blue. Click the **Remove Selected ECPs** button to remove the ECPs from the template.
Add a Write-In ECP	If an issuer would like to add a **qualified ECP** that is not contained on the **Select ECPs** tab, please input all the required information for that ECP on the **Contracted ECP List** tab. In the MHBE Number column, input "Write-In" to indicate this is a write-in ECP that the issuer is requesting be added to the MD ECP list. You must then complete (or prompt the ECP themselves to complete) an

	entry of the "Essential Community Providers Petition" found at this URL to submit any Write-In ECPs to be added to the official list. Write-In ECPs will be evaluated by MHBE against the Write-In list provided by CMS on their QHP certification website (https://www.qhpcertification.cms.gov/s/ECP%20and%20Network%20Adequacy) and for General ECP Standard Issuers, only those providers who are listed on the ECP Write-In List will count as qualified ECP write-ins.

A sample completed **Contracted ECPs** tab looks like **Figure 4**.

Figure 4 Sample Contracted ECP List Tab

D. *Uncontracted ECP List Tab*

The **Uncontracted ECP List** tab will be used by issuers who selected yes in response to the "Is this an Alternate ECP Calculation Issuer?" due to being unable to meet the 30% threshold MHBE has set using the general ECP standard calculation. The first topic under the "Troubleshooting Common ECP Template Issues" section details some helpful tips for completing this section that issuers should consult along with the detailed steps listed in the table below.

Uncontracted ECP List Tab	Steps
MHBE Number	This column contains a drop-down that lists all the MHBE numbers for carriers on the "Select ECP" list. When the user selects a number, the corresponding details will be auto populated to the NPI and Provider Name columns. The user can either select each uncontracted ECP using the drop-down or copy and paste MHBE numbers from the **Select ECPs** tab.

Reason Unable to Contract	After entering the MHBE Number in Column B, the user will complete a brief narrative explaining the steps taken to contract with the ECP and the ECP's response or reason the issuer was unable to contract with them.
Remove Selected ECPs	If the user needs to remove an ECP from this list, they can double-click the "Remove ECP?" column, just like on the **Select ECPs** or **Contracted ECPs**, to highlight the entire row and click on the "Remove Selected ECPs" button at the top of the tab to delete that row.

A completed **Uncontracted ECP List** tab looks like **Figure 5**.

E. *Errors Tab*

The **Errors** tab displays any validation errors identified when a completed MD ECP Template is validated.

- ❖ Column A – "Tab" indicates the tab that produced the error.
- ❖ Column B – "Cell" indicates the cell location for the specific error and a hyperlink that allows the issuer to navigate to the exact cell in the correct tab.
- ❖ Column C – "Validation Error Message" describes the error.

F. *Reference Tabs*

Reference information is provided in the three tabs listed below:

- ❖ The **Specialty Type** tab contains the specialty/facility types that can be added into the MD ECP Template.
- ❖ The **County Names** tab contains the county names that are used and accepted in the MD ECP

Template.

❖ The **HPSA** tab contains the HPSA and low-income ZIP codes. The issuer can filter by Zip code.

G. *Validating and Finalizing the Template*

One the MD ECP Template is completed, issuers must validate, finalize, and upload the template to SERFF.[4]

Template Validation	Steps
Validate Template	Click the **Validate Data** button on the **User Control** tab. The validation process identifies any data issues that need to be resolved. If no errors are identified, finalize the template.
Errors	If the template has any errors, they will appear on the **Errors** tab showing the data element and cell location of each error. Correct any identified errors and click **Validate** again. Continue this process until all errors are resolved.
Save Template	Save the template. MHBE recommends that the issuer save the validated template on its computer as a standard Excel .XLSM file.
Submit Template	Submit the template in the SERFF binder with the other documentation listed in the instruction letter from MHBE.

4. Troubleshooting Common ECP Template Issues

Since the creation of this template in 2018, MHBE Policy and Plan Management has assisted carriers with common issues or questions about how to complete the template correctly. This section details the most common hurdles carriers have encountered and provides detailed steps to resolve the issue quickly and efficiently. **We highly recommend carriers read this section even if you have not encountered issues completing the template as it contains helpful usage tips that will improve your experience using the templates.**

I. *The user is unable to contract with enough ECPs to reach the designated 30% threshold using the general ECP standard calculation but has proof of their reasonable effort to contract with additional ECPs.*

MHBE Policy and Plan Management understands that there are scenarios where the issuer is unable to contract with enough ECPs to meet our threshold using the general ECP standard calculation, often due to the ECP not accepting their plan offerings or a breakdown in communication that is no fault of the issuer. In this scenario, we suggest following these detailed steps to demonstrate that the issuer did attempt to meet the general ECP standard and list out the ECPs they were unable to contract with. It may also be the case that a user does not realize this until they have finished

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[4] There may be some validation errors that are not resolvable by the carrier/issuer. If that is the case, please reach out to MHBE so we can advise you on how to proceed with submission.

completing the ECP Template or Dental ECP Template and the steps below include helpful tips to ensure the user does not duplicate effort they have already put in on filling out the template.

1. If the user has already completed the template:
   a. Go back and select and copy all the ECPs on the **Contracted ECP** tab (from cell A1, "REMOVE", to the last row in column W, "Network IDs") and paste this into a new workbook.
   b. Go to the **User Control** tab and change the dropdown to "Yes" for the question "Is this an Alternative ECP Calculation Issuer?". This will wipe all the ECP data on the Contracted ECP tab (hence why the first step asks the user to copy it to another workbook first).
   c. Copy and paste the ECP data from the new workbook to the Contracted ECP tab. Even fully protected, it should allow the user to do this.
   d. Go to the Select ECPs tab and clear all previous selections using the green "Clear All" button (if any ECPs are selected).

Before clicking "Clear All":

After clicking "Clear All":

2. If the user has NOT already completed the template:
   a. Go to the **User Control** tab and change the dropdown to "Yes" for the question "Is this an Alternative ECP Calculation Issuer?".
   b. Navigate to the "Select ECPs" tab and select the ECPs the issuer does not want to contract with by double clicking in the "Add ECP?" column.
   c. Click the "Show Selected" button on the top.

After clicking the "Show Selected" button:

3. This step is the same regardless of whether the user has or has not previously completed the template. Copy all the "MHBE Number" cells and paste them into the "MHBE Number" column on the "Uncontracted ECP List" tab. The NPI and name columns will auto populate with the correct info and then the user can fill in the "Reason unable to contract" column.

Copy:

Navigate to "Uncontracted ECP List" and paste:

The next two columns will auto populate when the user puts the MHBE numbers they copied into the "MHBE Number" column. The user can then fill in the "Reason unable to contract" column for

each uncontracted ECP. Lastly, navigate back to the "Select ECPs" tab and click "Clear all" to reset the tab and proceed with the steps outlined in the tutorial to insert ECPs into the "Contracted ECP List" tab.

II. *The ECP we have contracted with is not listed on the "Select ECPs" tab.*
We recognize that there can be times when a valid ECP has been left off either the source lists or was erroneously removed during de-duplication and as such we provide the option to "Write-in" an ECP on the **Contracted ECP List** tab. The procedure for this scenario requires the user to first input "Write-in" in the MHBE Number column so it is easy for MHBE Policy and Plan Management staff to identify the write-in ECPs, then fill in all required columns (as indicated by the red asterisk on the column heading). Even though the template is locked, it will still allow the user to input all required information. The user may then complete validation and finalize the template and the ECP(s) will be included in the denominator of the ECP standard calculation.

A write-in ECP will look like the last row in the figure below:

REMOVE	MHBE Number	National Provider Identifier (NPI)*	Name of Provider*	Suffix of Provider	Physician/Non Physician*	Specialty Type (area of medicine)*	Provider Entity Name*	ECP Type: Hospital	ECP Type: FQHC	ECP Type: Ryan White
	MD_65858187_EC	1093332595	A BRIGHTER DAY BEHAVIORAL HEAL		Non-Physician	Community Ment	A BRIGHTER DAY	0	0	0
	MD_24371560_EC	1851850044	ABOVE ALL ODDS		Non-Physician	Community Ment	ABOVE ALL ODDS	0	0	0
	MD_78120455_EC	1578182945	ABSOLUTE CARE INC		Physician	Family Planning F	ABSOLUTE CARE I	0	0	0
	MD_14107288_EC	1275978165	ADVANCED BEHAVIORAL HEALTH		Physician	Federally Qualifi	ADVANCED BEHA	0	0	0
	Write-in	(fill in NPI #)	(Fill in name)		Physician	Black Lung Clinics	(Fill in Entity Nam	0	1	0