

**Network Access Plan for Golden Rule Insurance Company (GRIC)
State of Texas Annual Waiver Renewal Filing
March 2017**

Texas Administrative Code, Title 28	Texas Administrative Code Detail	GRIC Response
§3.3704(f)(8)(A)	30 miles in non-rural areas and 60 miles in rural areas for primary care and general hospital care;	Please see attached GeoAccess maps for specific coverage by county of each specialty. GRIC enrollees will be directed to the nearest provider providing the specific services required.
§3.3704(f)(8)(B)	75 miles for specialty care and specialty hospitals;	Please see attached GeoAccess maps for specific coverage by county of each specialty. GRIC enrollees will be directed to the nearest provider providing the specific services required.
§3.3707(j)(1)	the geographic area within the service area in which a sufficient number of preferred providers are not available, including a specification of the class of provider that is not sufficiently available;	The service area is the entire state of Texas. Please see attached GeoAccess maps for specific coverage by county of each specialty. GRIC enrollees will be directed to the nearest provider providing the specific services required.
§3.3707(j)(2)	a map, with key and scale, that identifies the geographic areas within the service area in which such health care services and/or physicians and providers are not available;	Please see attached GeoAccess maps for specific coverage by county of each specialty. GRIC enrollees will be directed to the nearest provider providing the specific services required.
§3.3707(j)(3)	the reason(s) that the preferred provider network does not meet the adequacy requirements specified in §3.3704 of this title;	Providers are not currently available to contract.
§3.3707(j)(4)	procedures that the insurer will utilize to assist insureds in obtaining medically necessary services when no preferred provider is reasonably available, including procedures to coordinate care to limit the likelihood of balance billing; and	While investigating potential new providers, reaching out to recruit, finalizing necessary credentialing reviews and contracting processes, GRIC enrollees will be directed to the nearest provider able to provide the specific services required by the enrollee. GRIC adheres to our internal access policy and procedures which requires customer service agents to notify

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		<p>Network Management and Medical Management of any coverage issues. Medical Management will complete a letter of agreement to ensure timely access to care with a non-network provider. Network Management will work to complete contracts with available and qualified providers to resolve any access issue. If a non-network provider will not enter into a Letter of Agreement, then the Company will pay the non-network provider at the network provider level of benefits. If notified of “balance-billing” by the non-network provider, GRIC will ensure the member is held harmless for any amounts beyond the copayment, deductible, and coinsurance percentage that GRIC enrollee would have been responsible for in obtaining services from a network provider.</p>
§3.3707(j)(5)	<p>Procedures detailing how out-of-network benefit claims will be handled when no preferred or otherwise contracted provider is available, including procedures for compliance with §3.3708 of this title (relating to Payment of Certain Basic Benefit Claims and Related Disclosures) and §3.3725 of this title (relating to Payment of Certain Out-of-Network Claims).</p>	<p>Please see the information listed below.</p>
§3.3708(b)(1-3)	<p>When services are rendered to an insured by a nonpreferred provider because no preferred provider is reasonably available to the insured under subsection (a) of this section, the insurer must:</p> <p>(1) pay the claim, at a minimum, at the usual or customary charge for the service, less any patient coinsurance, copayment, or deductible</p>	<p>When paying an provider claim to a non-network provider based on an approved referral because a network provider is not reasonably available, GRIC will pay the claim at the network provider-based level of benefits and will credit any out-of-pocket "balance billing" amounts (in excess of the allowed amount) actually paid by the member to the member's (in-network) deductible and out-of-pocket maximums.</p>

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	<p>responsibility under the plan;</p> <p>(2) pay the claim at the preferred benefit coinsurance level; and</p> <p>(3) in addition to any amounts that would have been credited had the provider been a preferred provider, credit any out-of-pocket amounts shown by the insured to have been actually paid to the nonpreferred provider for charges for covered services that were above and beyond the allowed amount toward the insured's deductible and annual out-of-pocket maximum applicable to in-network services.</p>	
§3.3708(c)(1-5)	<p>Reimbursements of all nonpreferred providers for services that are covered under the health insurance policy are required to be calculated pursuant to an appropriate methodology that:</p> <p>(1) if based upon usual, reasonable, or customary charges, is based on generally accepted industry standards and practices for determining the customary billed charge for a service and that fairly and accurately reflects market rates, including geographic differences in costs;</p> <p>(2) if based on claims data, is based upon sufficient data to constitute a representative and statistically valid sample;</p> <p>(3) is updated no less than once per year;</p> <p>(4) does not use data that is more than three years old; and</p> <p>(5) is consistent with nationally recognized and generally accepted bundling edits and logic.</p>	<p>The methodology used by GRIC to calculate claim payments to non-network providers are generally based on a percentage of the published rates allowed by the Centers for Medicare and Medicaid Services (CMS) for the same or similar service within the geographic market. When a rate is not published by CMS for the service, a gap methodology is utilized that uses a relative value scale, which is usually based on the difficulty, time, work, risk and resources of the service. The relative value scale currently used is created by Ingenix, Inc. If the Ingenix, Inc. relative value scale becomes no longer available, a comparable scale will be used. When a rate is not published by CMS for the service and a gap methodology does not apply to the service, or the provider does not submit sufficient information with the claim to pay it under CMS published rates or a gap methodology, the non-network provider allowable amount is based on a percentage of the provider's billed charge. All non-network provider</p>

Texas Administrative Code, Title 28	Texas Administrative Code Detail	GRIC Response
		claim payment methodologies are consistent with nationally recognized and generally accepted bundling edits and logic.
§3.3725(b)	<p>If medically necessary covered services, excluding emergency care, are not available through a preferred provider upon the request of a preferred provider, the insurer must:</p> <p>(1) approve a referral to a nonpreferred provider within the time appropriate to the circumstances relating to the delivery of the services and the condition of the patient, but in no event to exceed five business days after receipt of reasonably requested documentation; and</p> <p>(2) provide for a review by a health care provider with expertise in the same specialty as or a specialty similar to the type of health care provider to whom a referral is requested under paragraph (1) of this subsection before the insurer may deny the referral.</p>	<p>If (non-emergency) medically necessary covered services are not available through a network provider, upon the request of a network provider, GRIC will approve a referral to a non-network provider within the appropriate timeframe (not exceeding 5 business days from receipt of reasonably requested documentation). GRIC will not deny such a referral request without first providing for a review by a health care provider with expertise in the same or a similar specialty.</p>
§3.3725(c)(1)	<p>An insurer may facilitate an insured's selection of a nonpreferred provider when medically necessary covered services, excluding emergency care, are not available through a preferred provider and an insured has received a referral from a preferred provider.</p> <p>(1) If an insurer chooses to facilitate an insured's selection of a nonpreferred provider pursuant to this subsection, the insurer must offer an insured a list of at least three nonpreferred providers with expertise in the necessary specialty who are reasonably available considering the medical</p>	<p>If GRIC chooses to facilitate a member's selection of an OON provider in this situation, it will offer the member at least three OON providers with expertise in the necessary specialty who are reasonably available considering the medical condition and location of the insured.</p>

Texas Administrative Code, Title 28	Texas Administrative Code Detail	GRIC Response
	condition and location of the insured.	
§3.3725(c)(2)	If the insured selects a nonpreferred provider from the list provided by the insurer, subsections (d) - (f) of this section are applicable.	Please see §3.3725(d-f) below.
§3.3725(c)(3)	<p>If the insured selects a nonpreferred provider that is not included in the list provided by the insurer, then:</p> <p>(A) subsections (d) - (f) of this section are not applicable; and</p> <p>(B) notwithstanding §3.3708(f) of this title (relating to Payment of Certain Basic Benefit Claims and Related Disclosures), the insurer must pay the claim in accord with §3.3708 of this title.</p>	Please see responses for §3.3708 above.
§3.3725(d)	An insurer reimbursing a nonpreferred provider under subsection (a), (b), or (c)(2) of this section must ensure that the insured is held harmless for any amounts beyond the copayment, deductible, and coinsurance percentage that the insured would have paid had the insured received services from a preferred provider.	When reimbursing an OON provider under an approved referral based on unavailability of a network provider, GRIC will ensure that the member is held harmless for any amounts beyond the copayment, deductible, and coinsurance percentage that the insured would have paid had the insured received services from an INN provider.
§3.3725(e)	Upon determining that a claim from a nonpreferred provider under subsection (a), (b), or (c)(2) of this section is payable, an insurer must issue payment to the nonpreferred provider at the usual and customary rate or at a rate agreed to by the insurer and the nonpreferred provider. When issuing payment, the insurer must provide an explanation of benefits to the insured along with a request that the insured notify the insurer if the nonpreferred provider bills the insured for amounts beyond the amount paid by the insurer.	When paying an OON provider claim in the scenarios addressed by subsections (a), (b), or (c)(2) of §3.3725, GRIC will pay the claim based on either the usual and customary rate, an agreed upon rate or the provider's billed charges. If paying less than billed charges, GRIC will request the member (in or along with the EOB) to notify us if the OON provider balance bills the member. If notified of "balance-billing" by the OON provider, GRIC will ensure that the member is held harmless for any amounts beyond the copayment, deductible, and coinsurance percentage that UHC

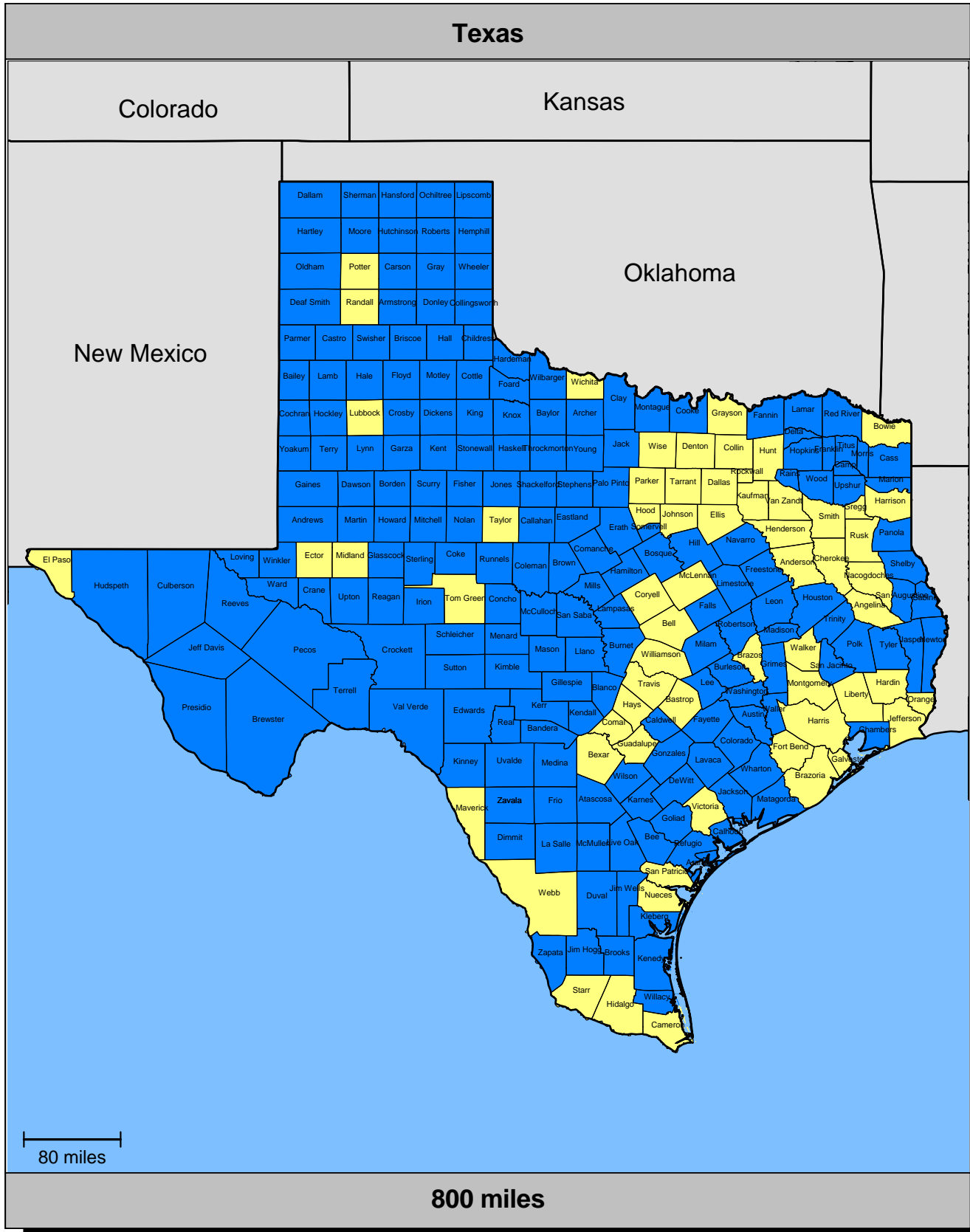
Texas Administrative Code, Title 28	Texas Administrative Code Detail	GRIC Response
		would have paid had the insured received services from an INN provider. The insurer will resolve any amounts that the non-network provider bills the insured beyond the amount paid by the insurer in a manner consistent with subsection (d) of this section.
§3.3725(f)	<p>Any methodology utilized by an insurer to calculate reimbursements of nonpreferred providers for services that are covered under the health insurance policy must comply with the following:</p> <ul style="list-style-type: none"> (1) if based on usual, reasonable, or customary charges, the methodology must be based on generally accepted industry standards and practices for determining the customary billed charge for a service and fairly and accurately reflect market rates, including geographic differences in costs; (2) if based on claims data, the methodology must be based on sufficient data to constitute a representative and statistically valid sample; (3) any claims data underlying the calculation must be updated no less than once per year and not include data that is more than three years old; and (4) the methodology must be consistent with nationally recognized and generally accepted bundling edits and logic. 	<p>The methodology used by GRIC to calculate claim payments to non-network providers are generally based on a percentage of the published rates allowed by the Centers for Medicare and Medicaid Services (CMS) for the same or similar service within the geographic market. When a rate is not published by CMS for the service, a gap methodology is utilized that uses a relative value scale, which is usually based on the difficulty, time, work, risk and resources of the service. The relative value scale currently used is created by Ingenix, Inc. If the Ingenix, Inc. relative value scale becomes no longer available, a comparable scale will be used. When a rate is not published by CMS for the service and a gap methodology does not apply to the service, or the provider does not submit sufficient information with the claim to pay it under CMS published rates or a gap methodology, the non-network provider allowable amount is based on a percentage of the provider's billed charge. All non-network provider claim payment methodologies are consistent with nationally recognized and generally accepted bundling edits and logic.</p>



March 2017

A report on the accessibility of the
Golden Rule Insurance Company
for the state of Texas

Geographic overview

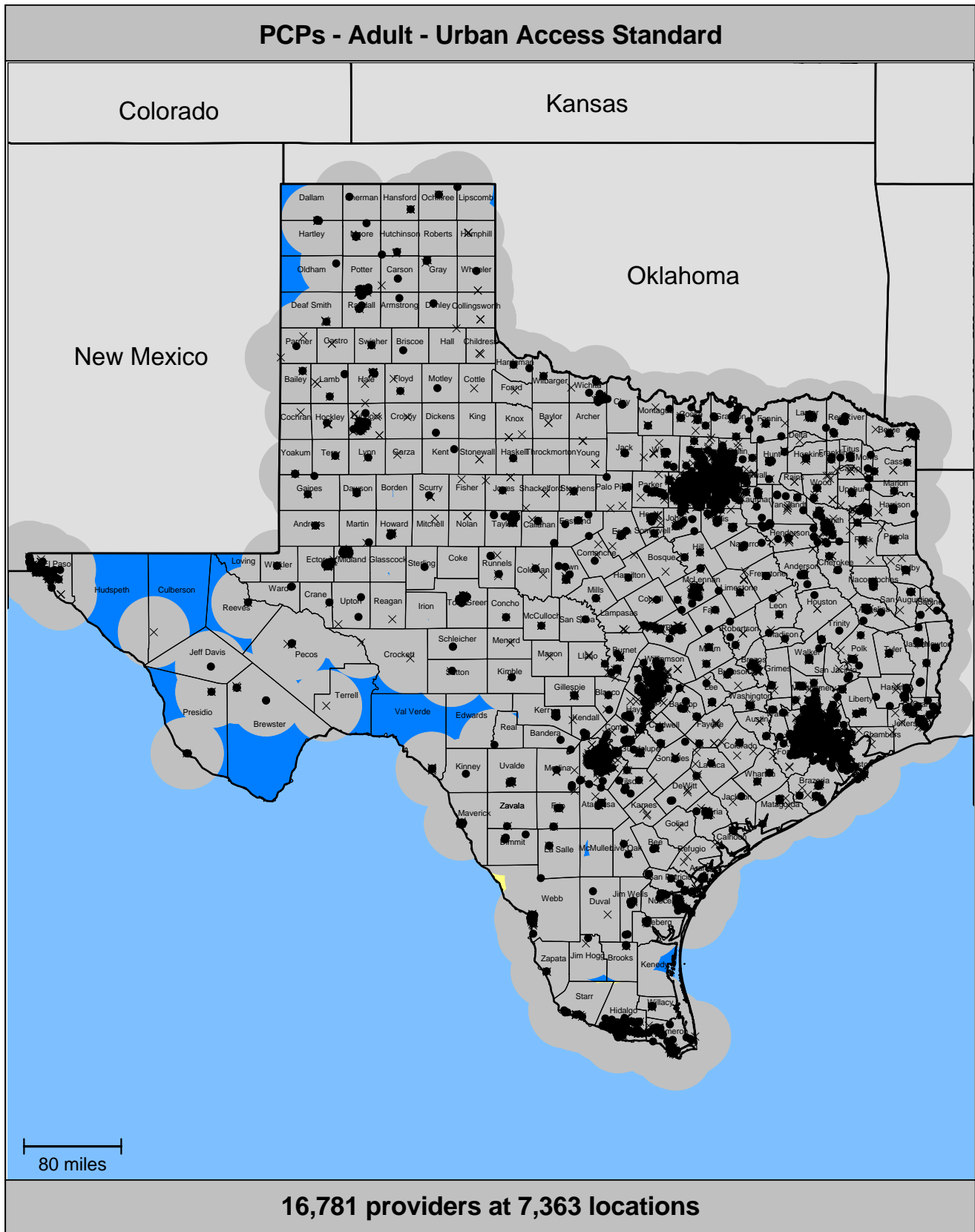


- Texas Rural Counties
- Texas Urban Counties

Primary Care Providers

March 2017

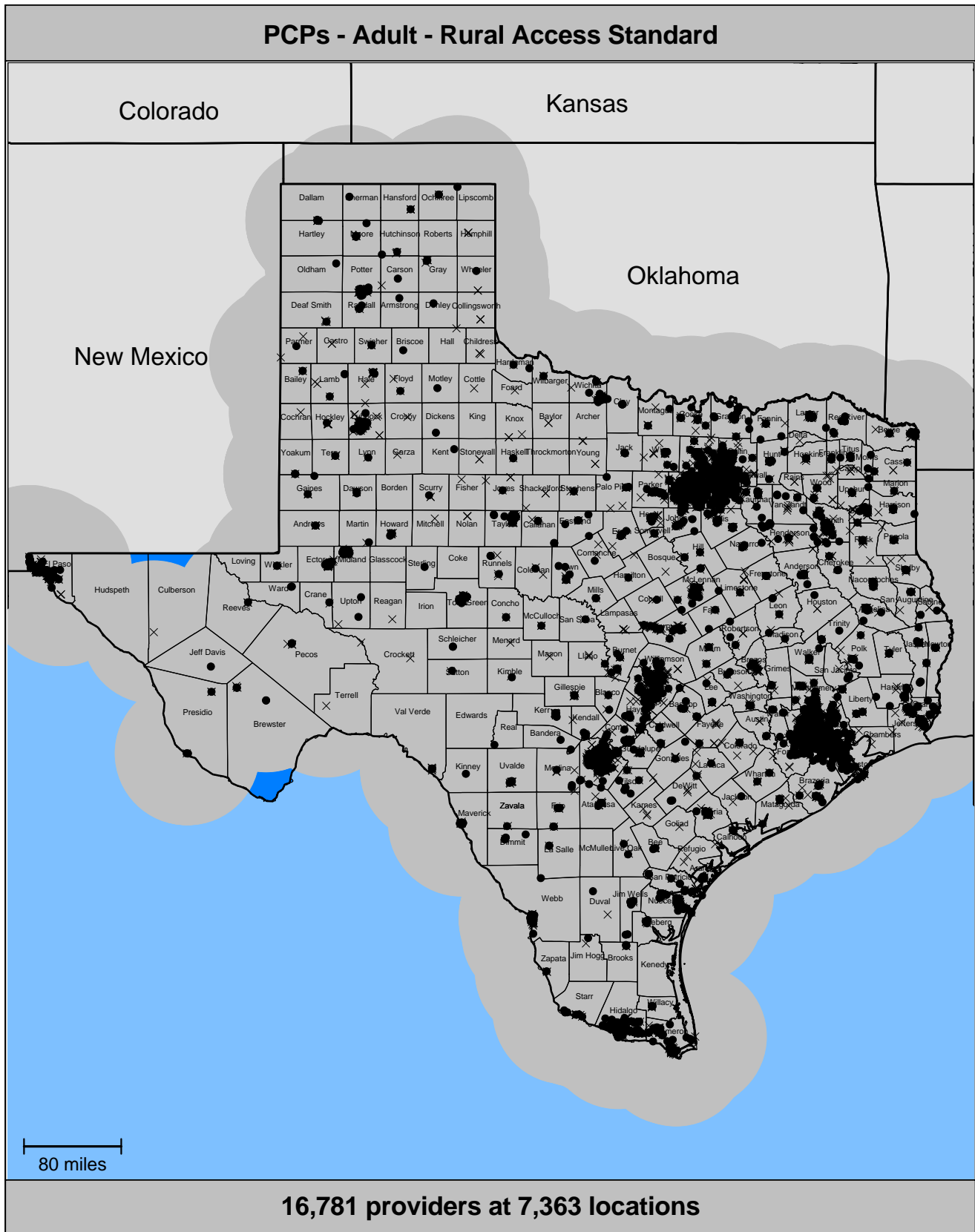
Provider Locations



- Single provider locations (3,571)
- × Multiple provider locations (3,792)
- Texas Rural Counties
- Texas Urban Counties

■ 30 mile radius

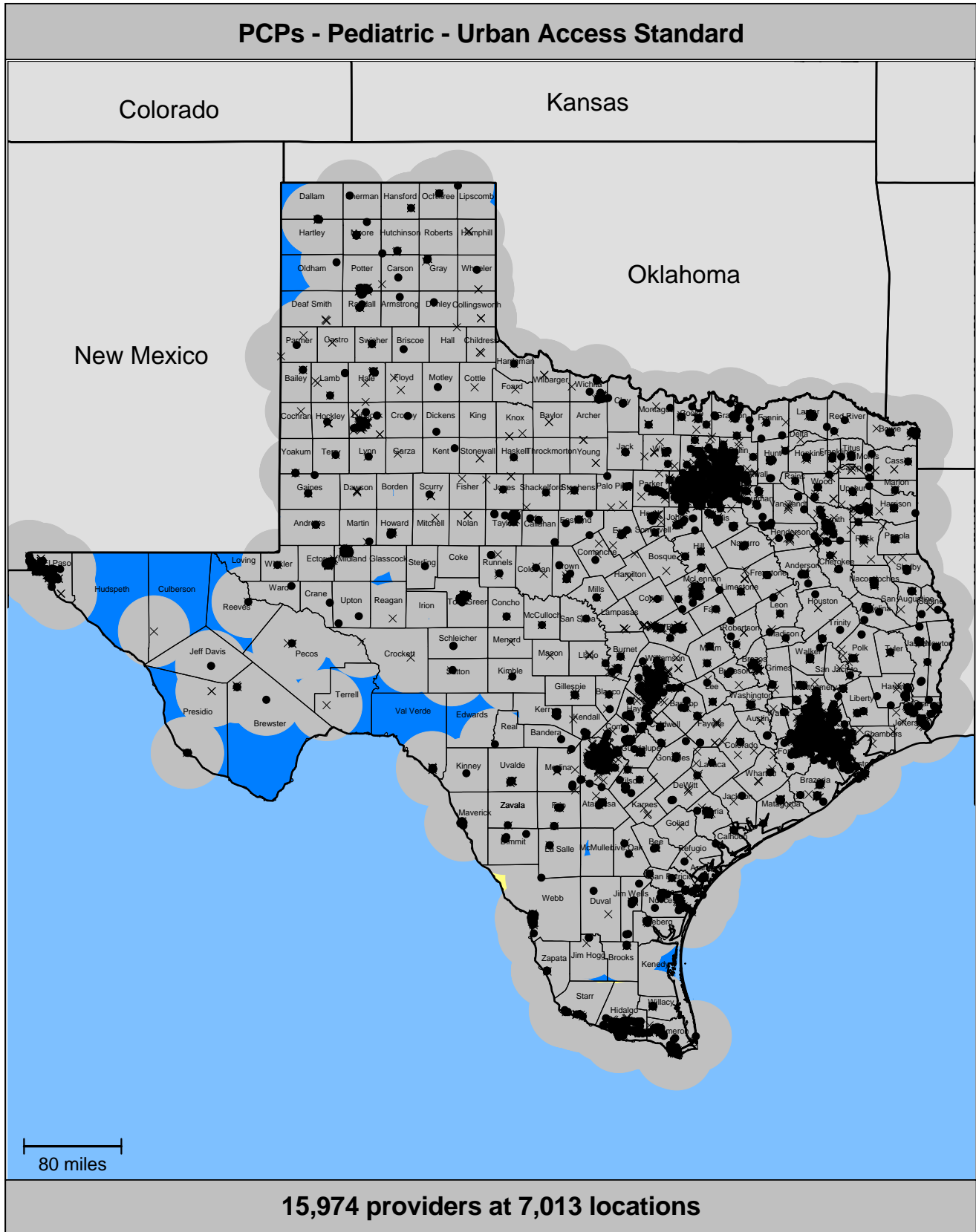
Provider Locations



- Single provider locations (3,571)
- × Multiple provider locations (3,792)
- Texas Rural Counties
- Texas Urban Counties

■ 60 mile radius

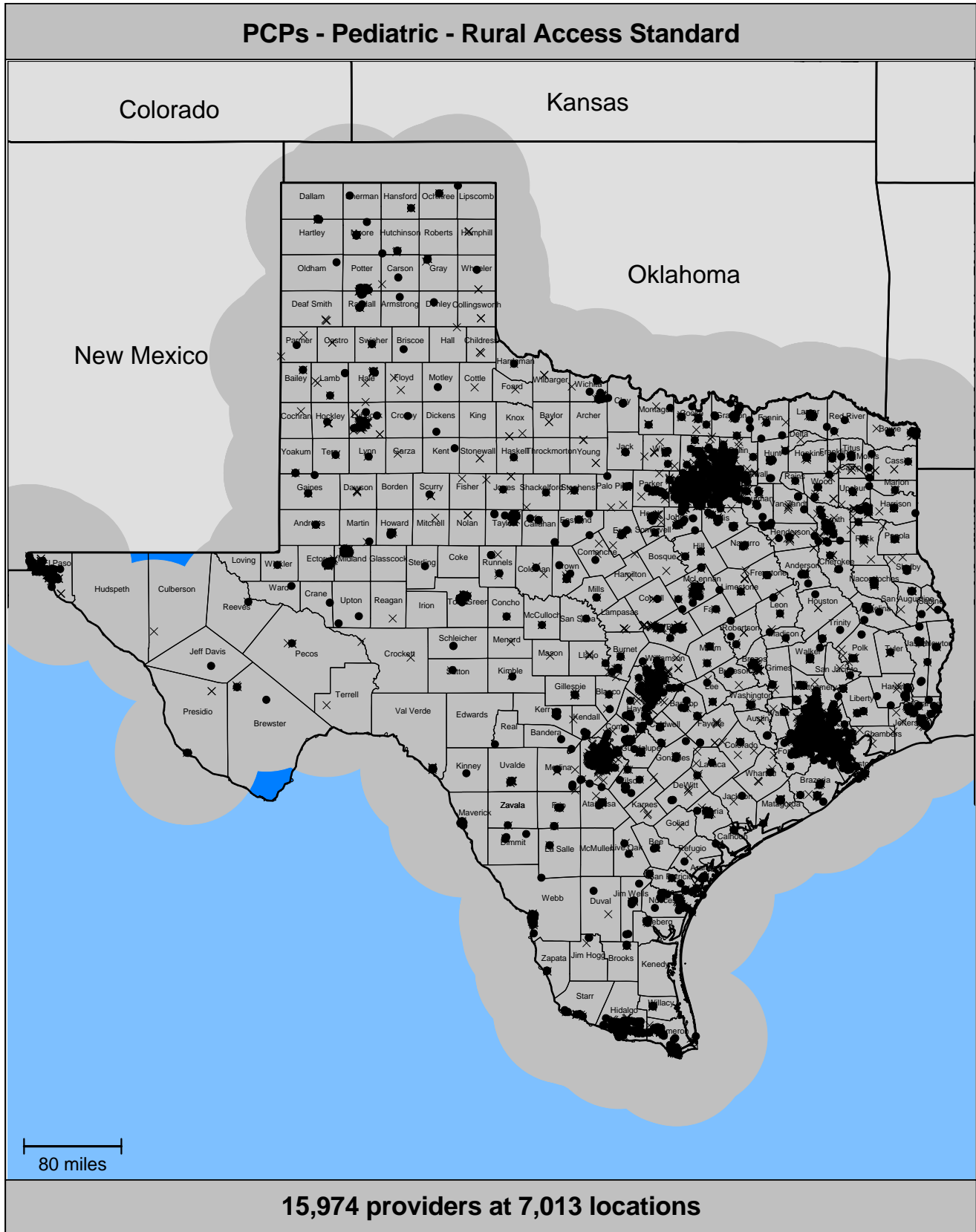
Provider Locations



- Single provider locations (3,314)
- × Multiple provider locations (3,699)
- Texas Rural Counties
- Texas Urban Counties

■ 30 mile radius

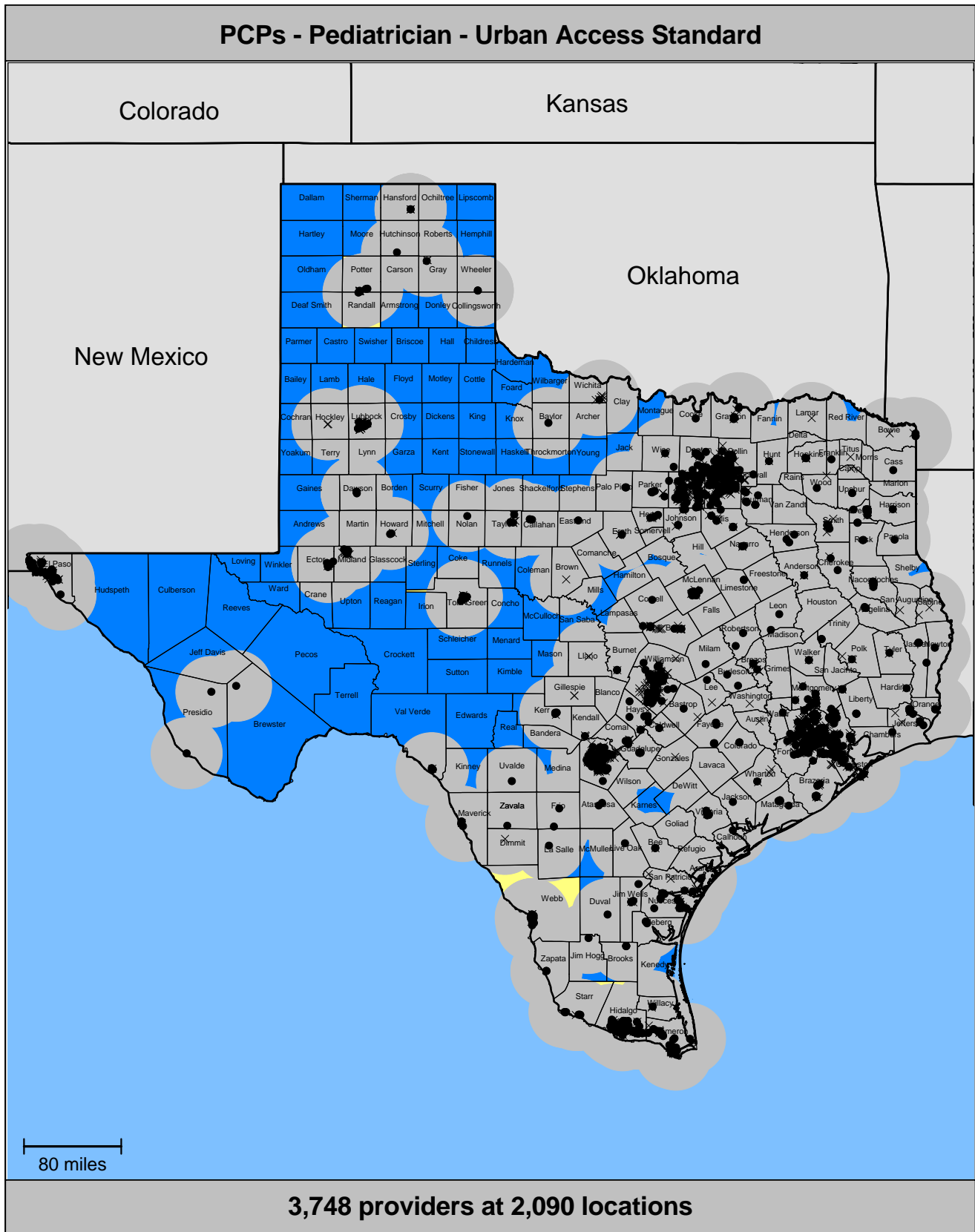
Provider locations



- Single provider locations (3,314)
- × Multiple provider locations (3,699)
- Texas Rural Counties
- Texas Urban Counties

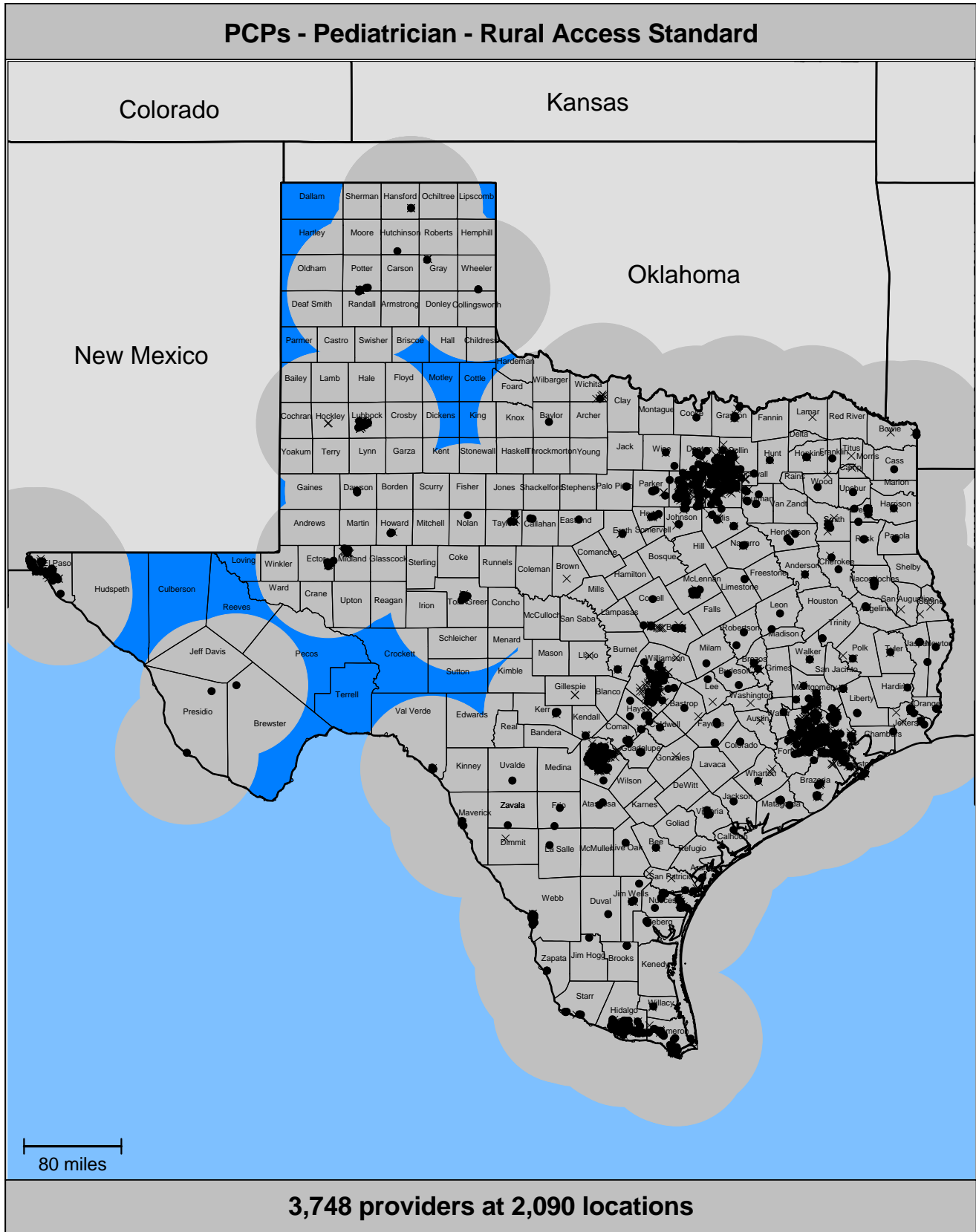
■ 60 mile radius

Provider locations



- Single provider locations (1,111)
- × Multiple provider locations (979)
- Texas Rural Counties
- Texas Urban Counties
- 30 mile radius

Provider locations

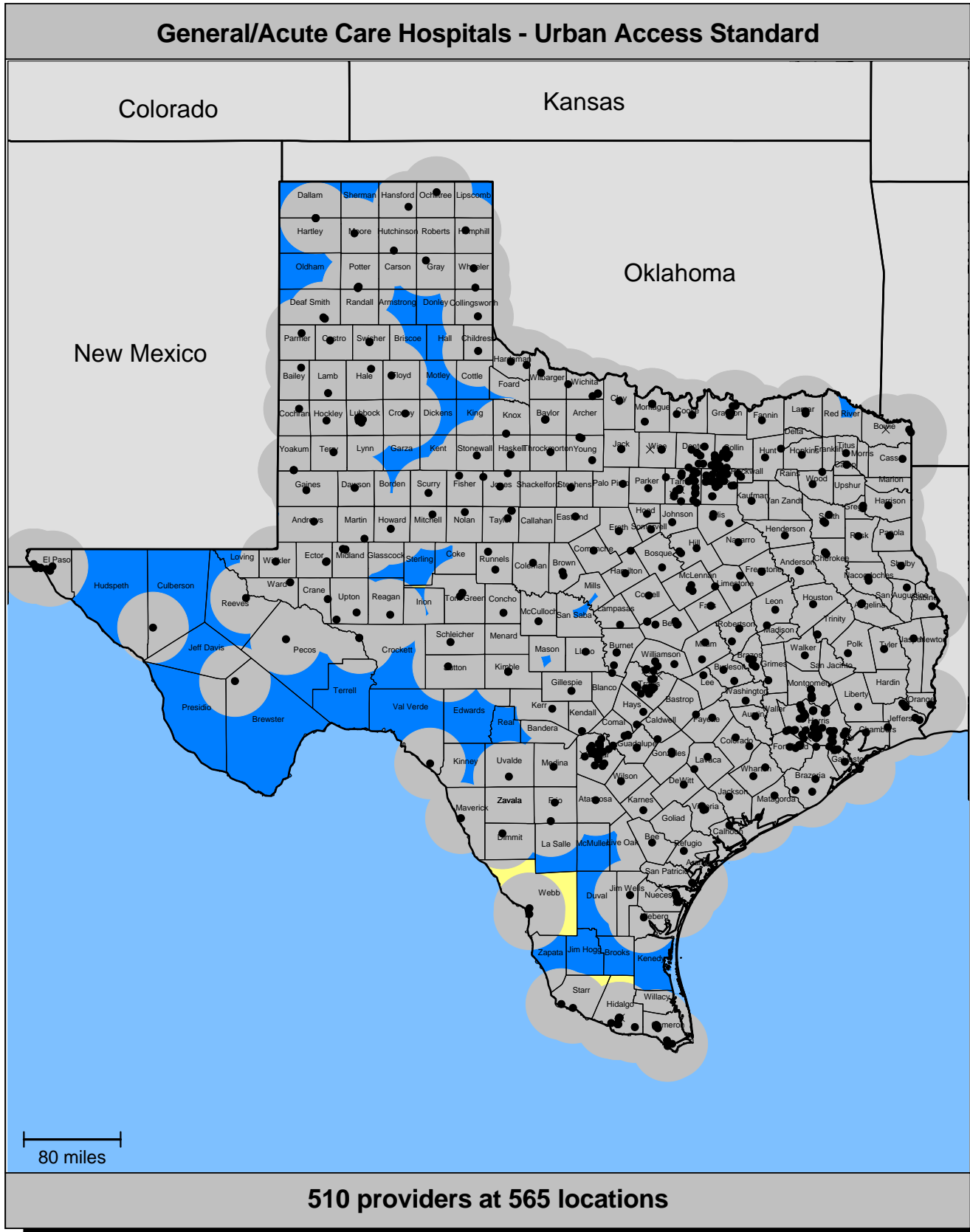


- Single provider locations (1,111)
- × Multiple provider locations (979)
- Texas Rural Counties
- Texas Urban Counties
- 60 mile radius

Facilities

March 2017

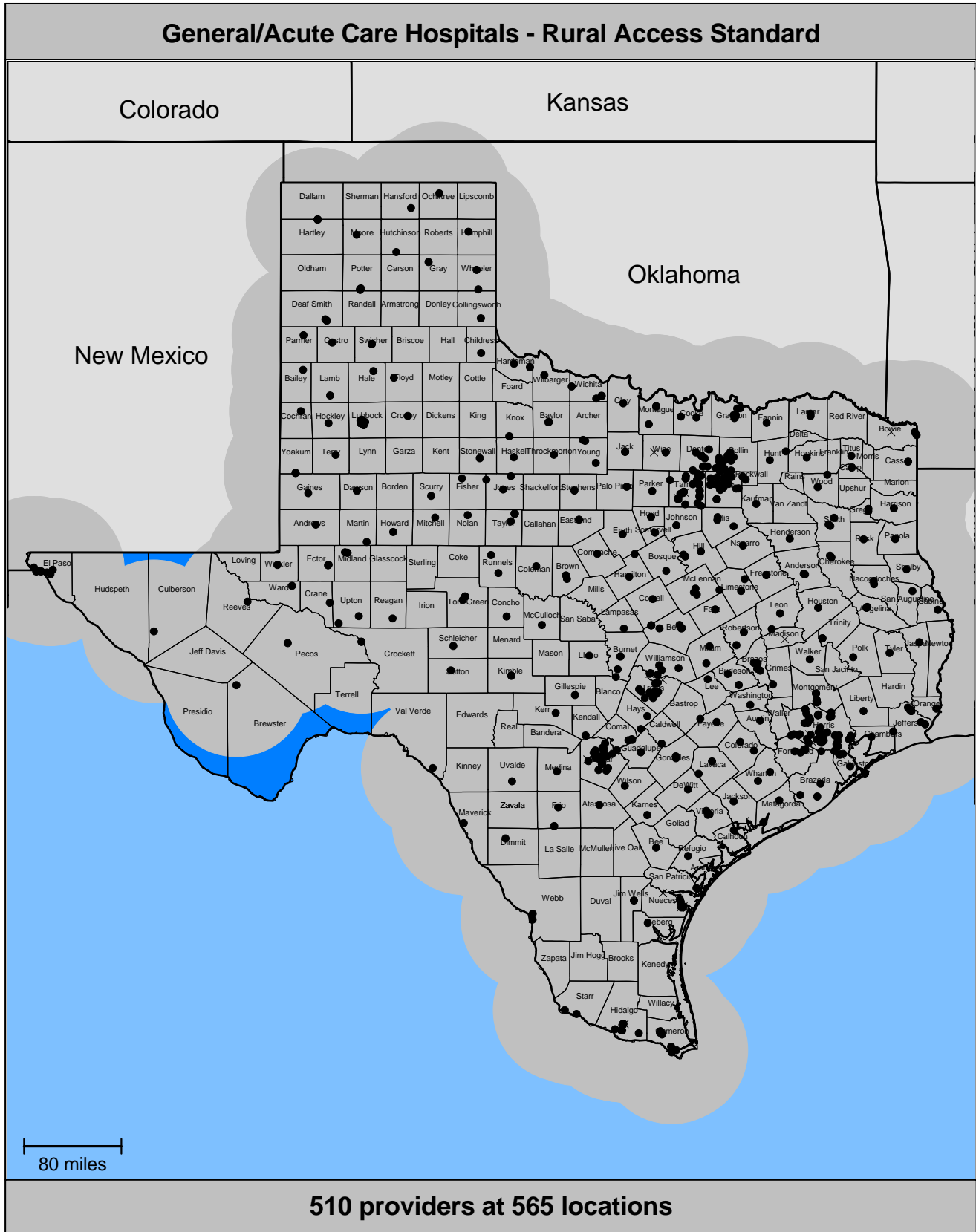
Provider locations



- Single provider locations (537)
- × Multiple provider locations (28)
- Texas Rural Counties
- Texas Urban Counties

■ 30 mile radius

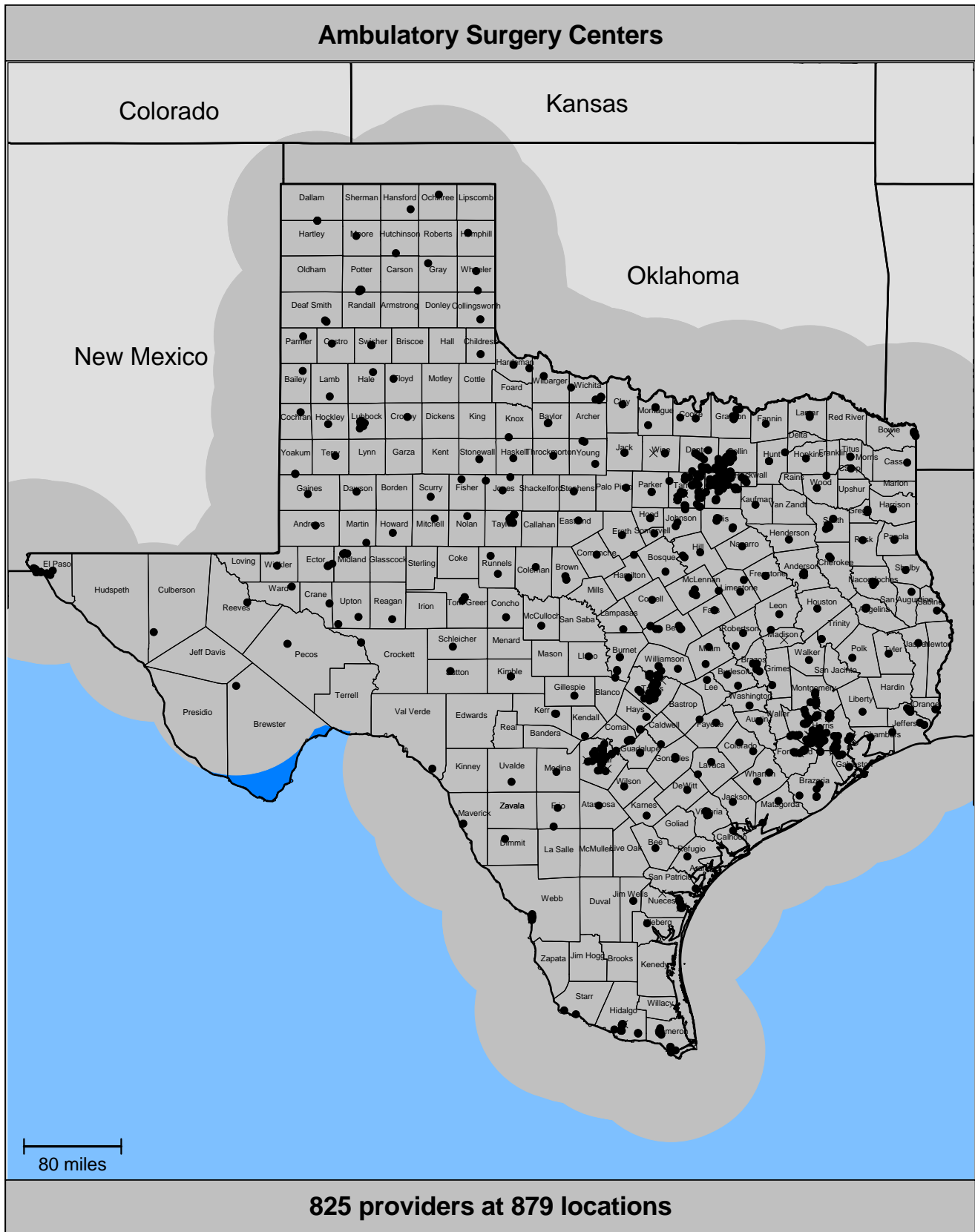
Provider locations



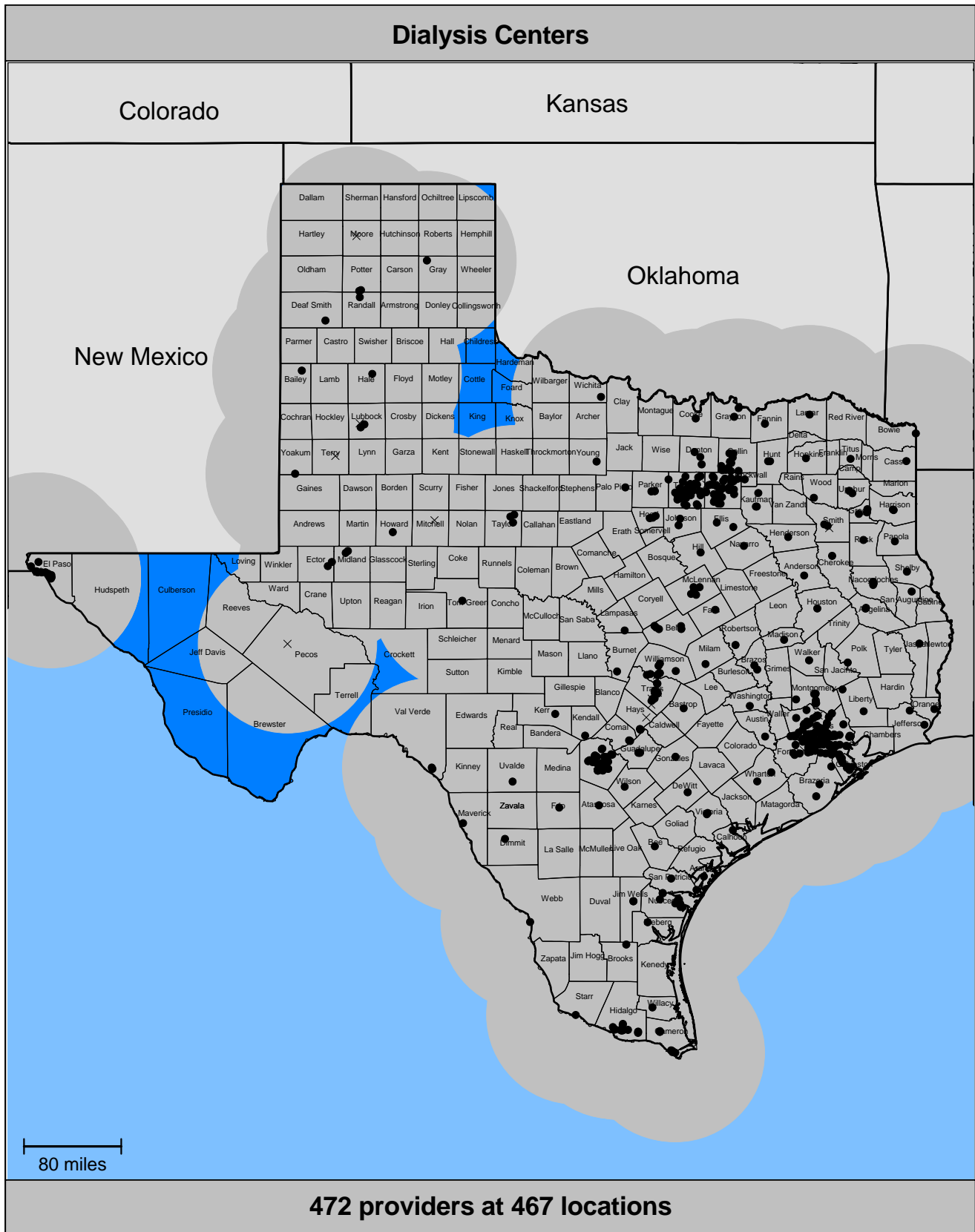
- Single provider locations (537)
- × Multiple provider locations (28)
- Texas Rural Counties
- Texas Urban Counties

■ 60 mile radius

Provider locations



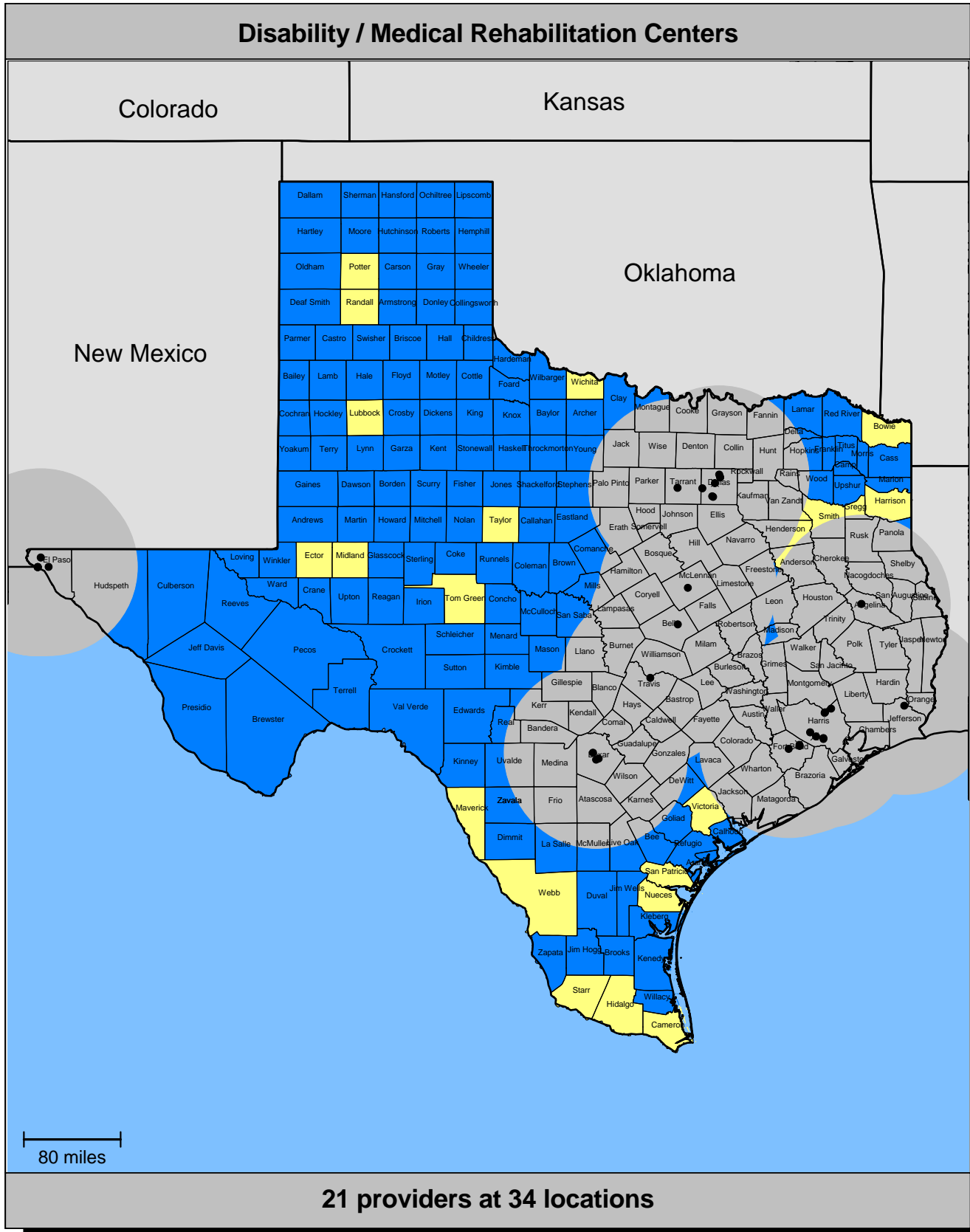
Provider locations



- Single provider locations (448)
- × Multiple provider locations (19)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

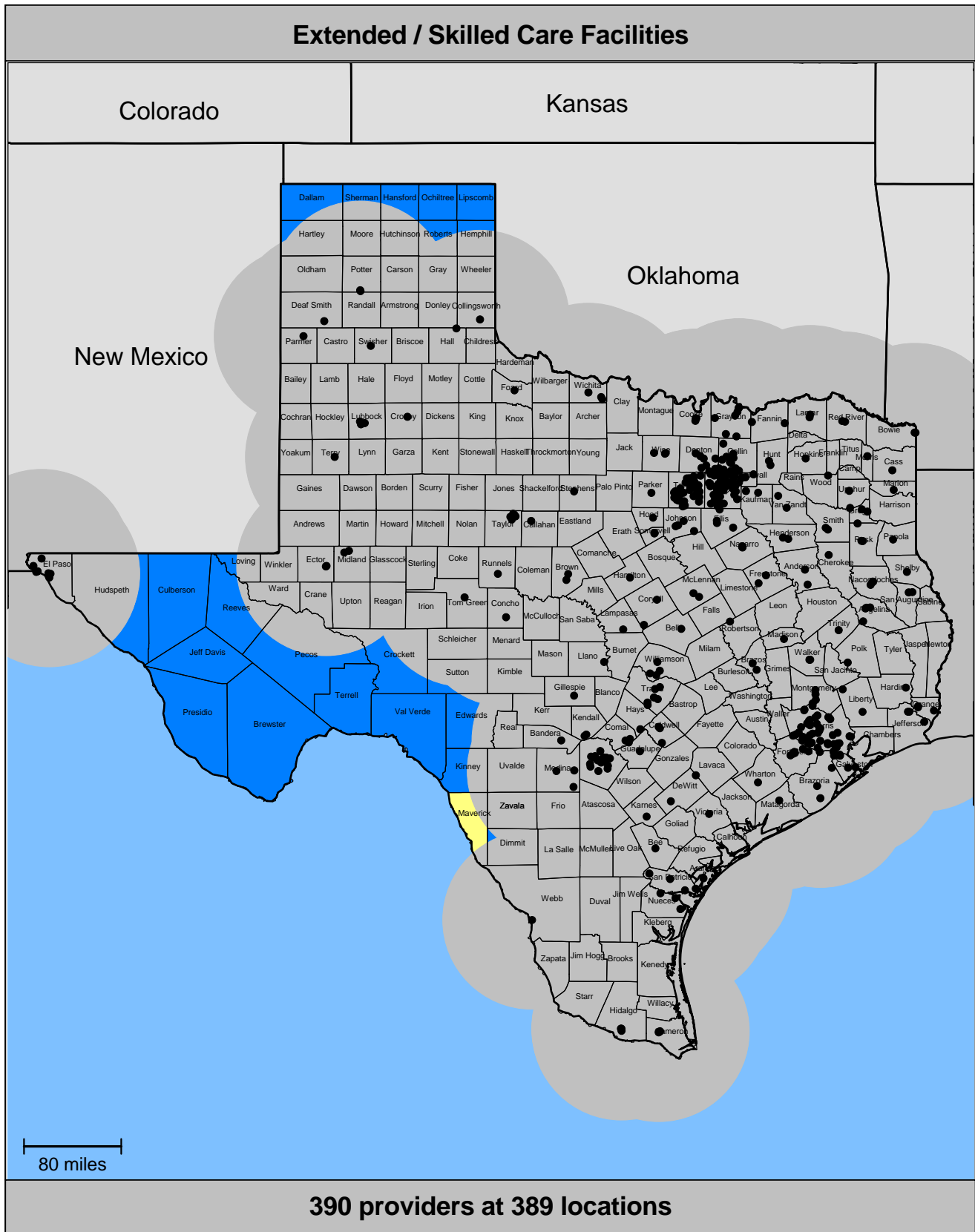
Provider locations



- Single provider locations (31)
- × Multiple provider locations (3)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

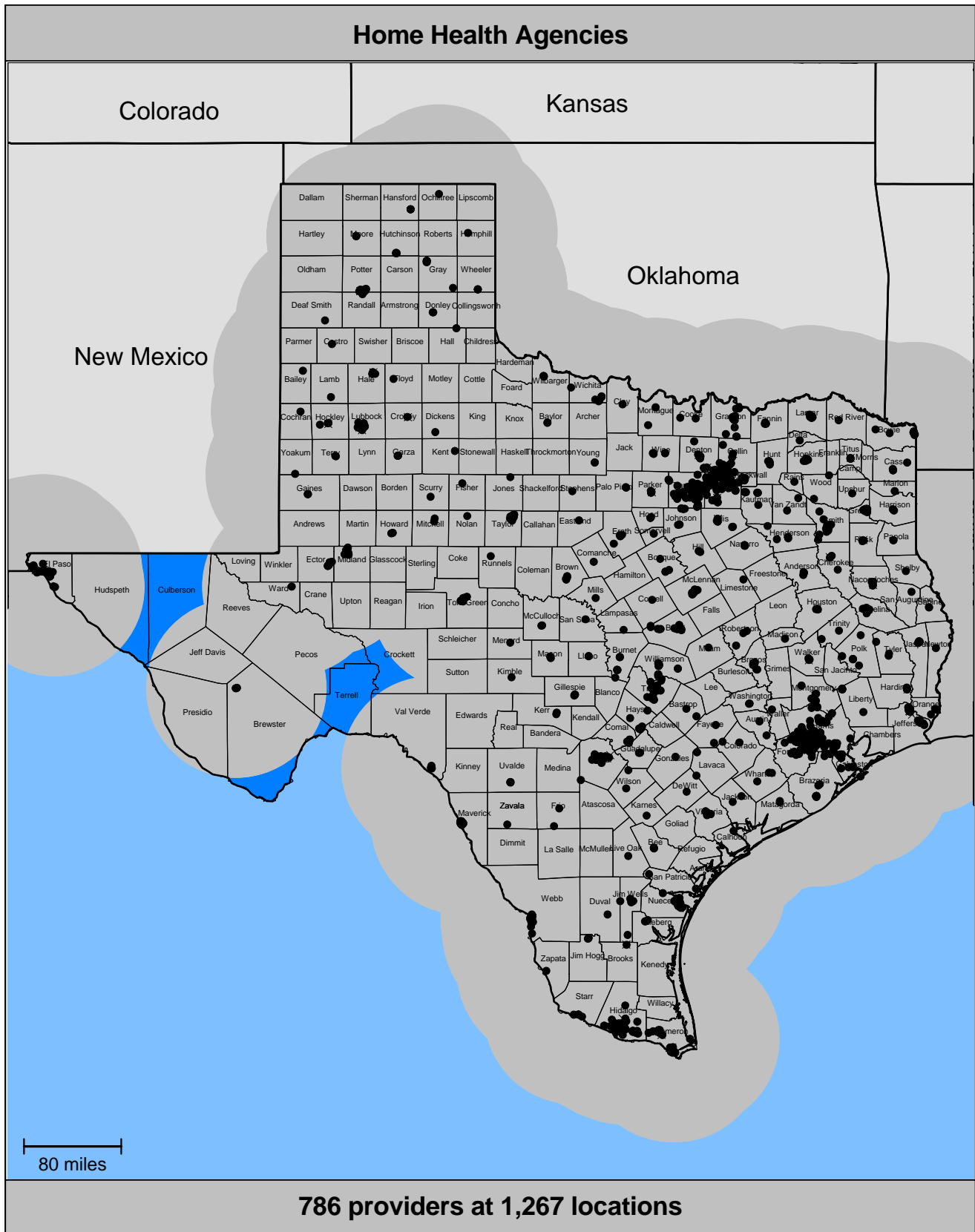
Provider locations



- Single provider locations (386)
- × Multiple provider locations (3)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

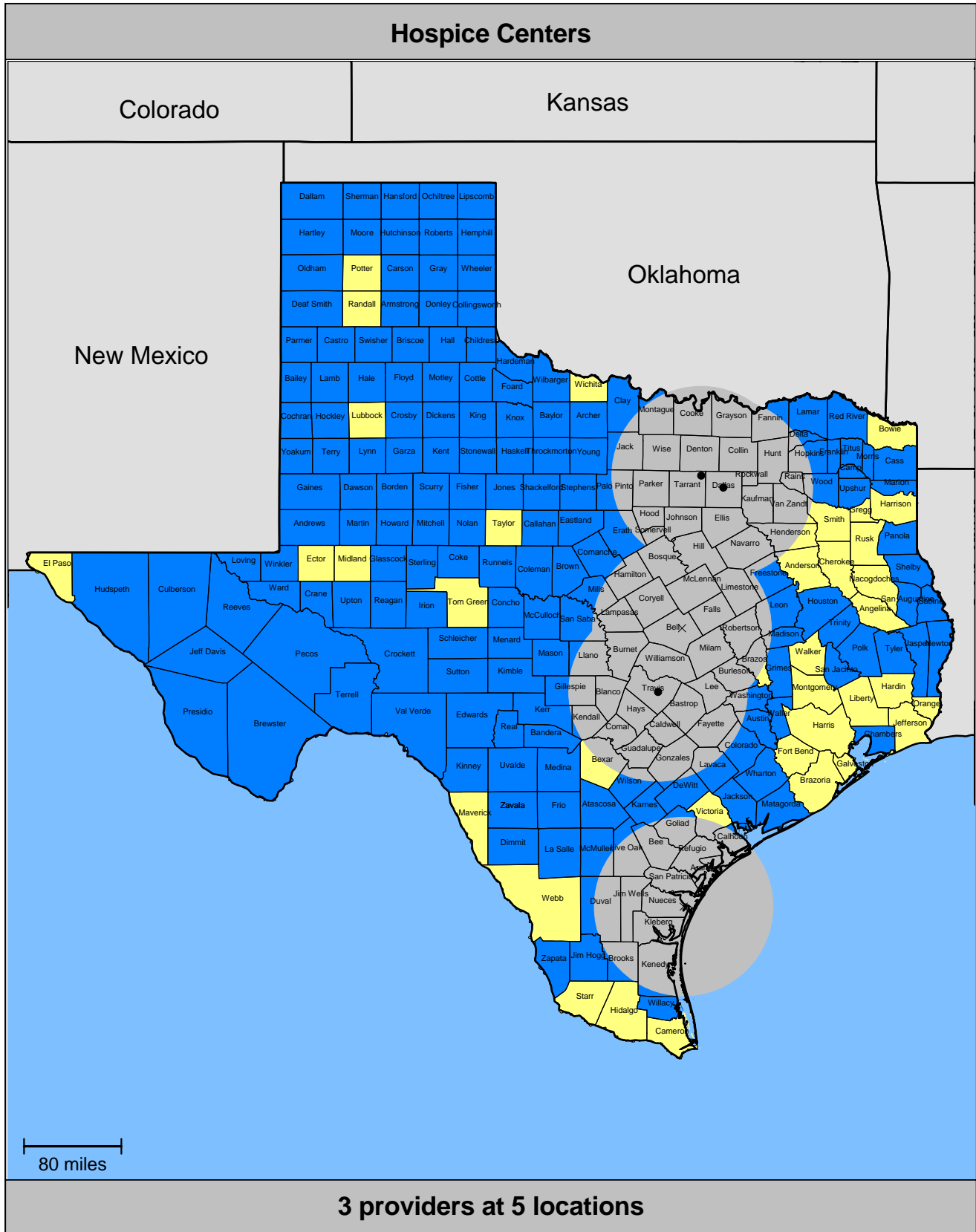
Provider locations



- Single provider locations (1,161)
- × Multiple provider locations (106)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

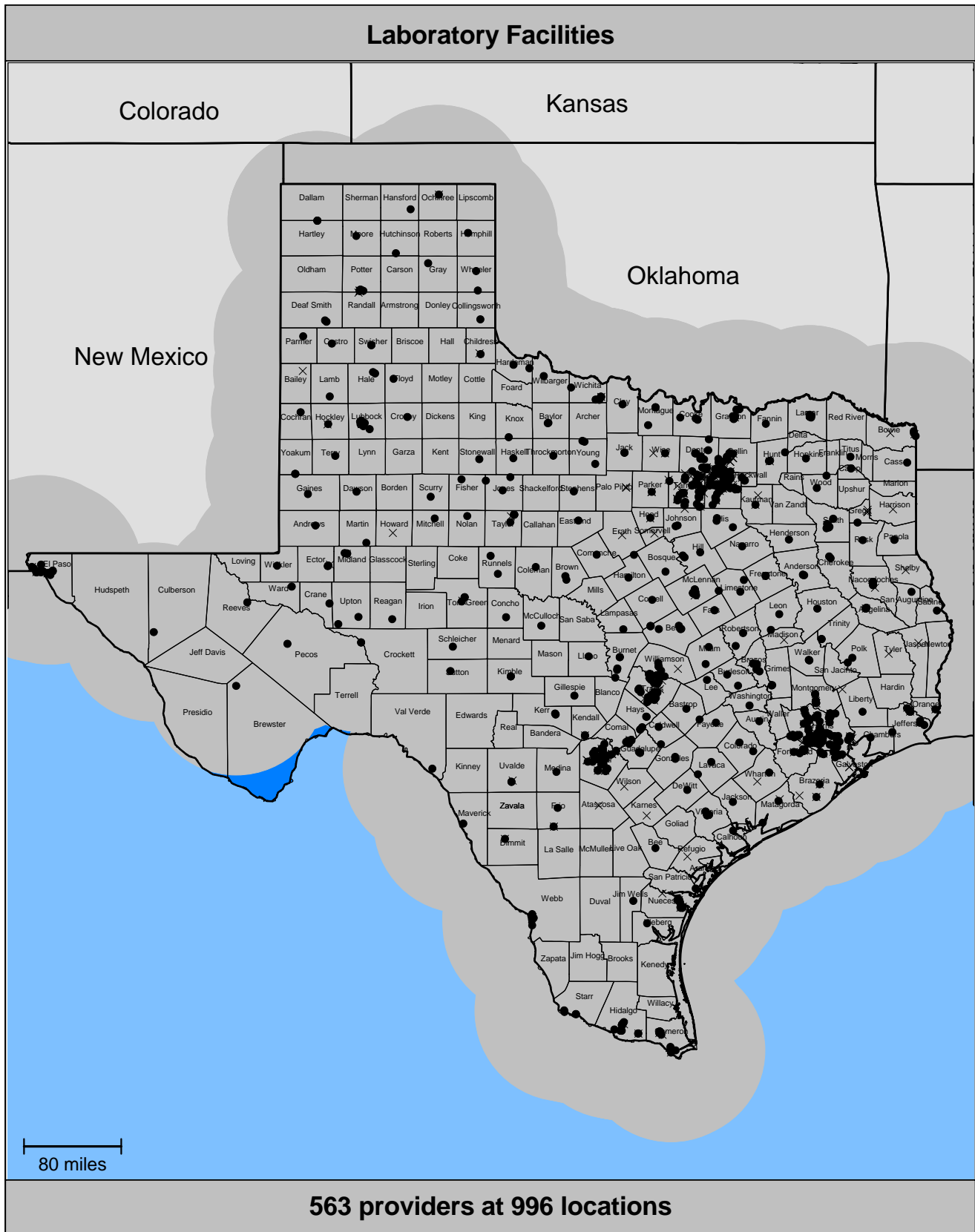
Provider locations



- Single provider locations (3)
- × Multiple provider locations (2)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

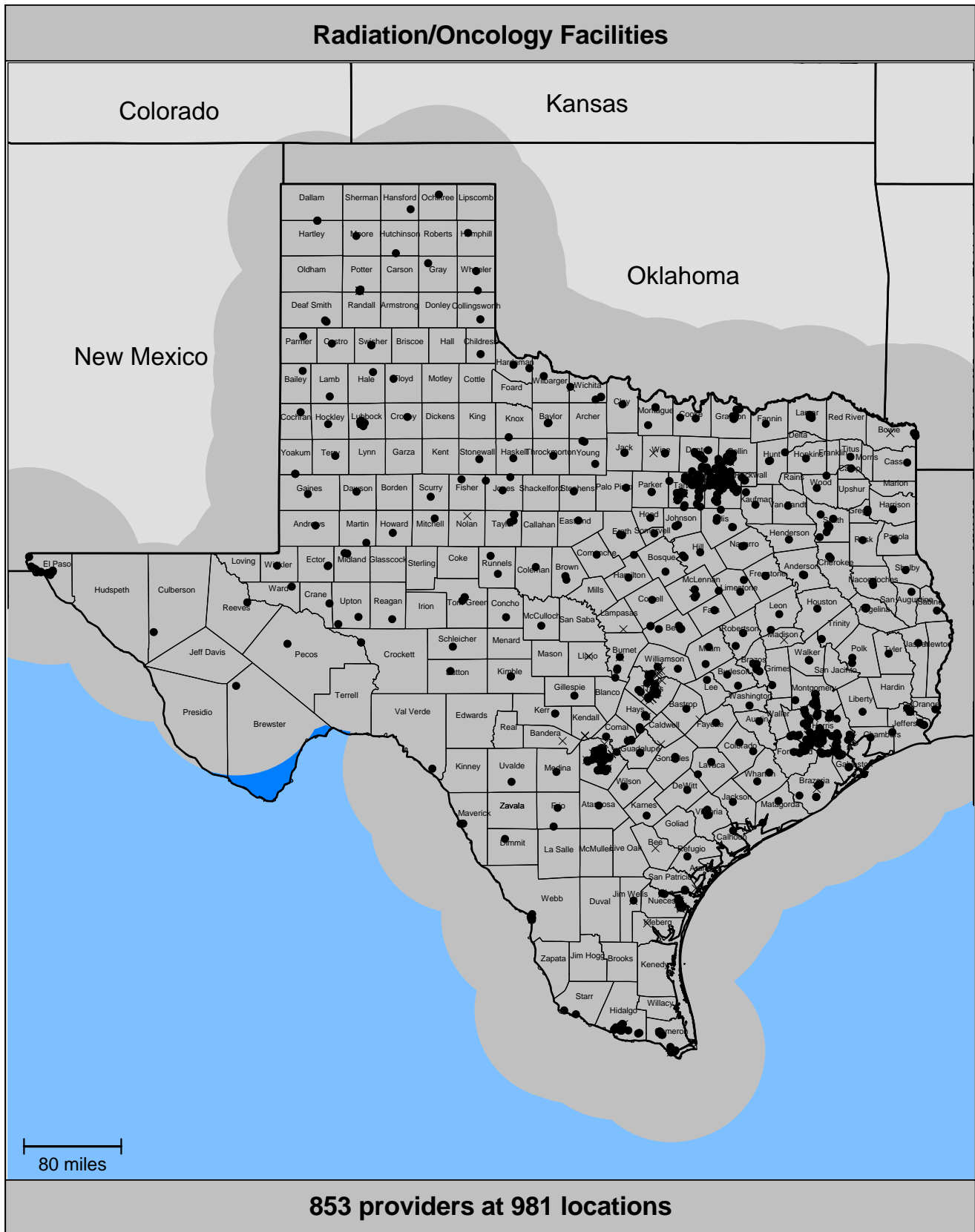
Provider locations



563 providers at 996 locations

- Single provider locations (767)
- × Multiple provider locations (229)
- 75 mile radius
- Texas Rural Counties
- Texas Urban Counties

Provider locations



853 providers at 981 locations

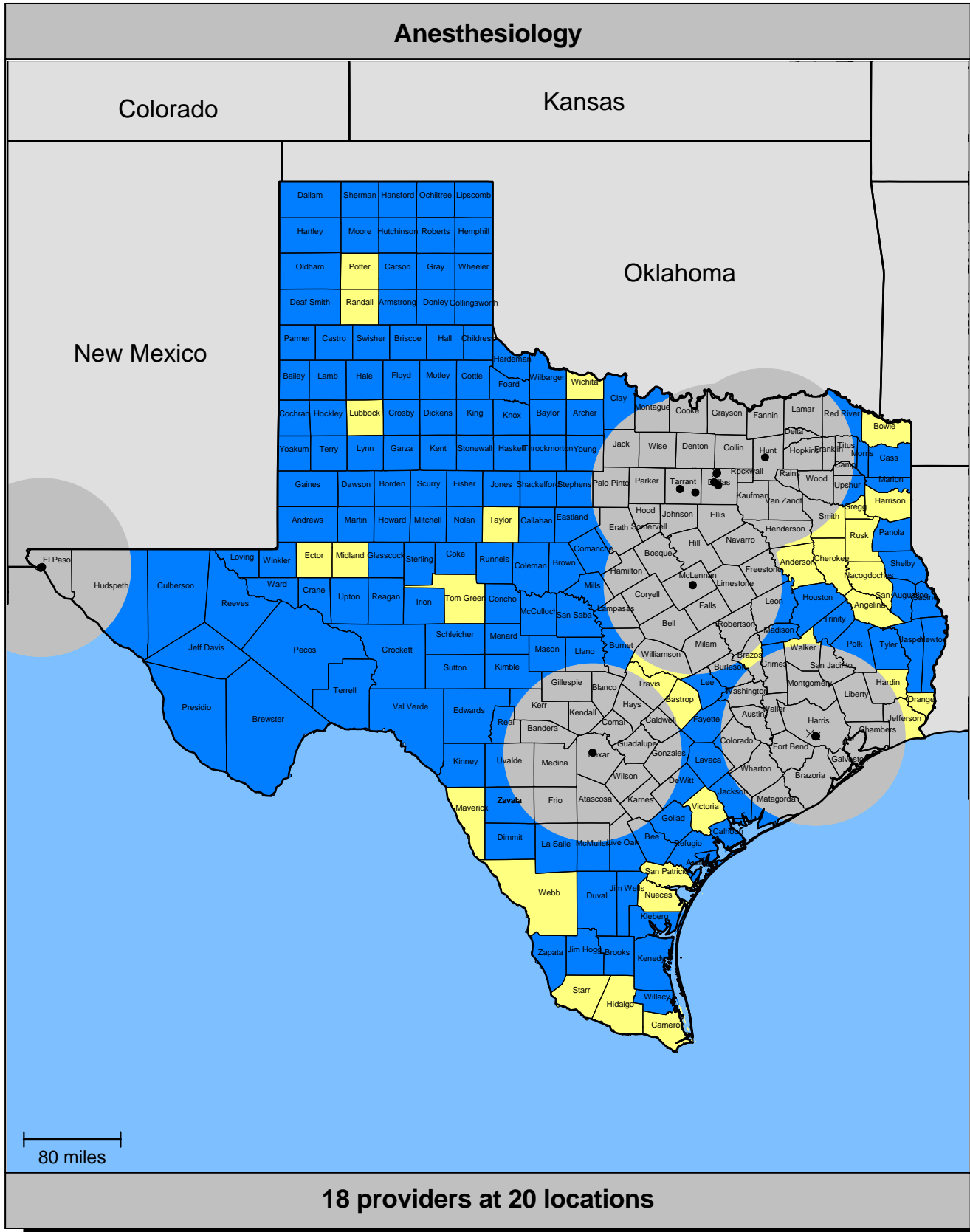
- Single provider locations (840)
- × Multiple provider locations (141)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

HBP Providers

March 2017

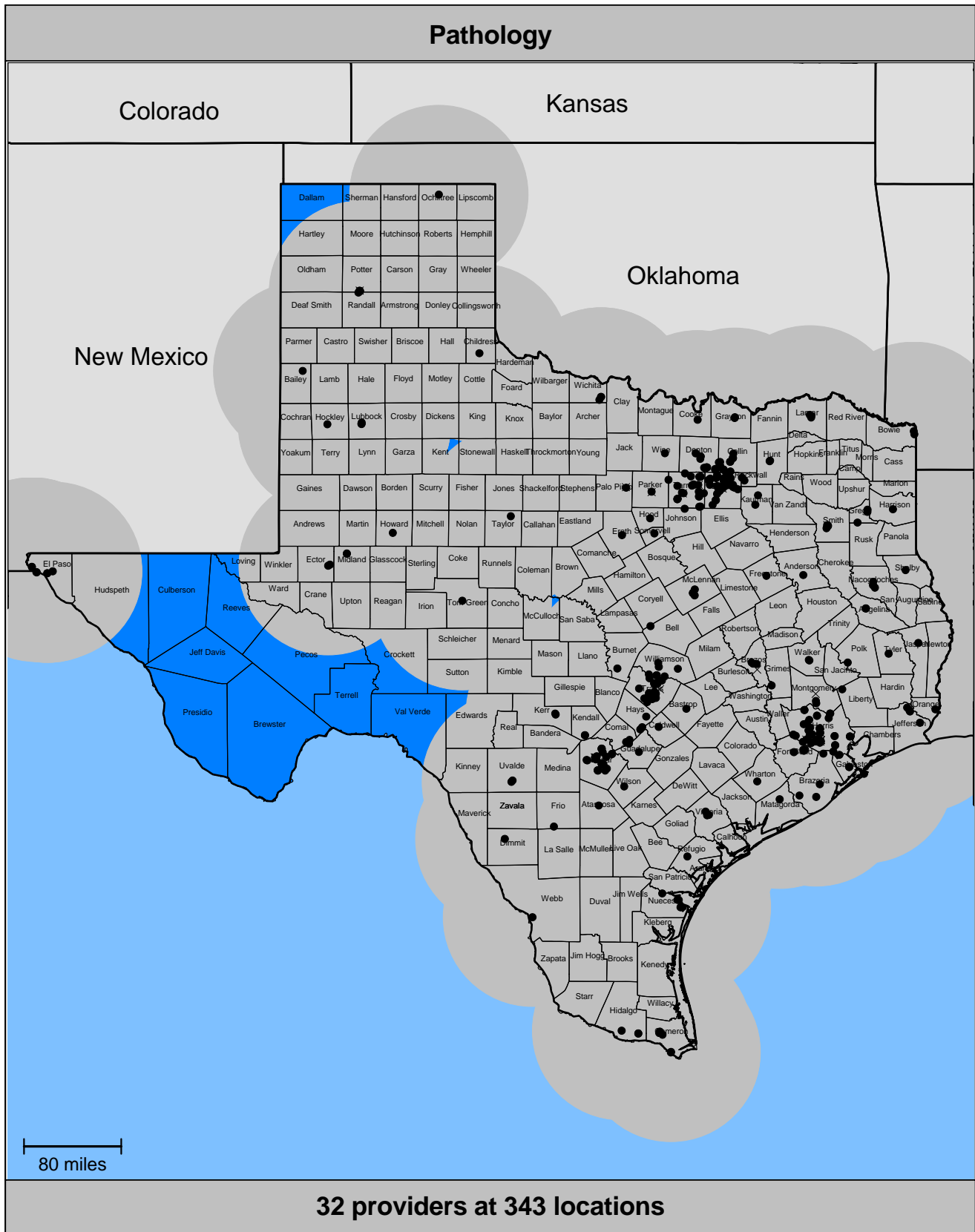
Provider locations



- Single provider locations (17)
- × Multiple provider locations (3)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

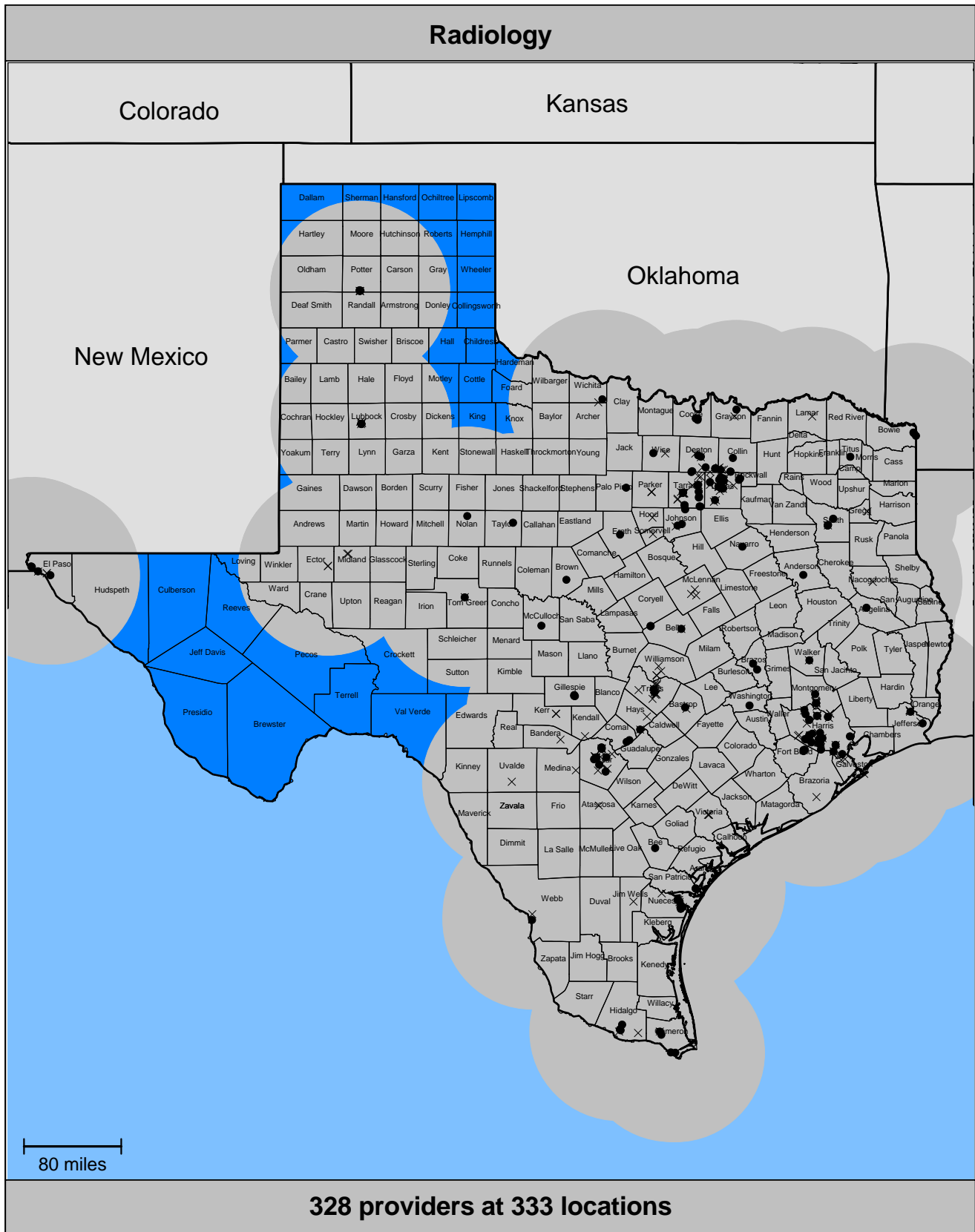
Provider locations



32 providers at 343 locations

- Single provider locations (320)
- × Multiple provider locations (23)
- Texas Rural Counties
- Texas Urban Counties
- 75 mile radius

Provider locations



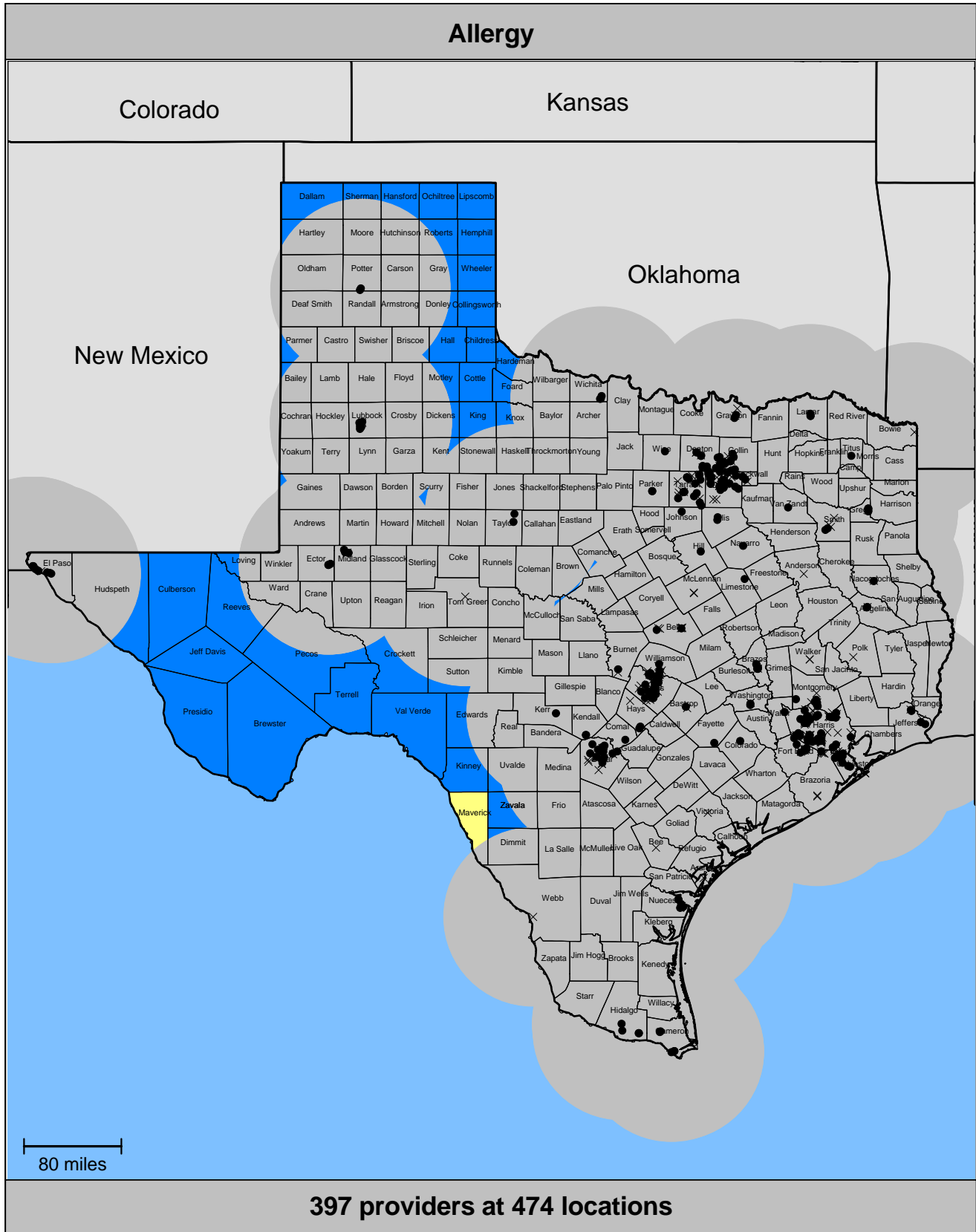
- Single provider locations (158)
- × Multiple provider locations (175)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

Specialty Providers

March 2017

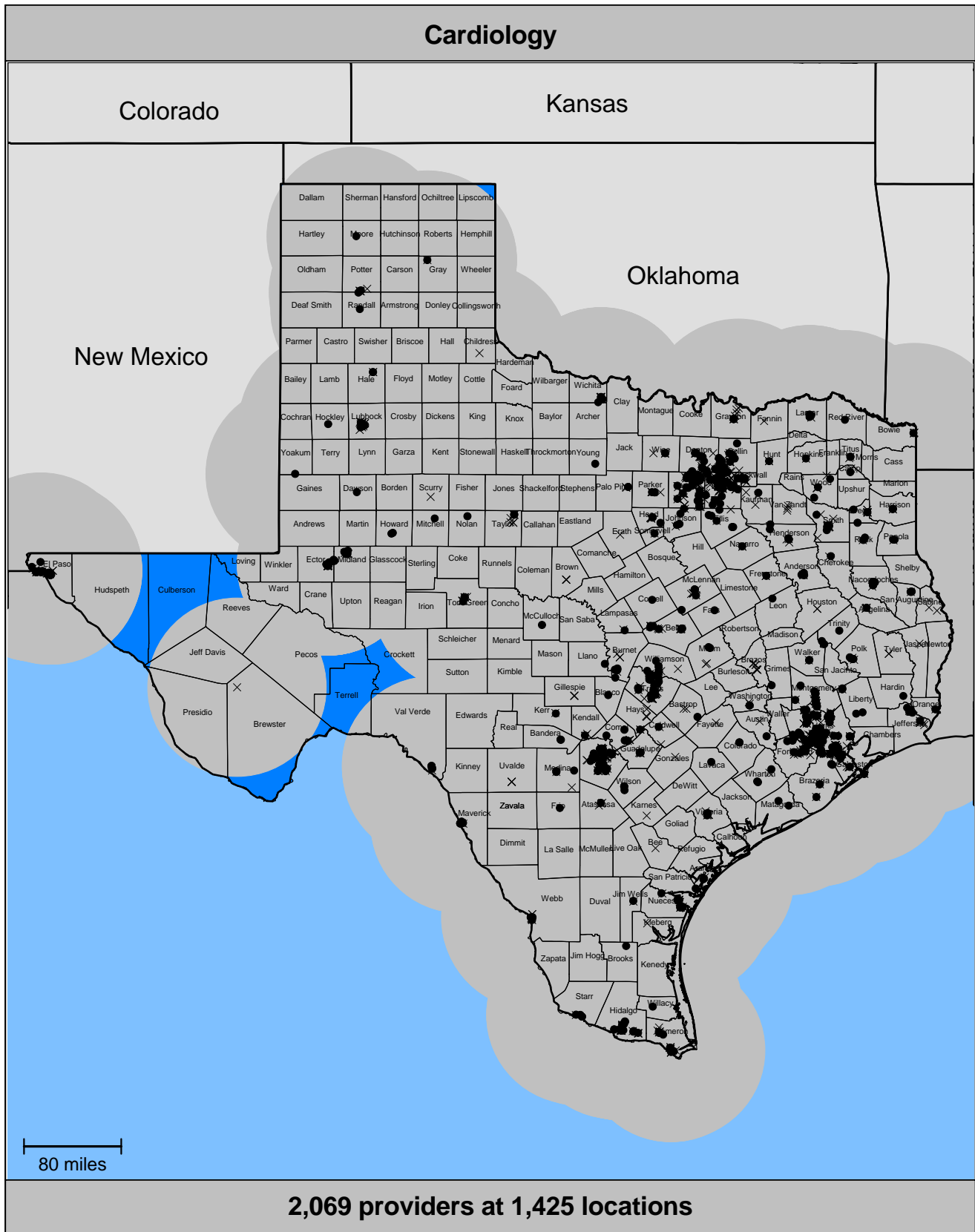
Provider locations



- Single provider locations (282)
- × Multiple provider locations (192)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

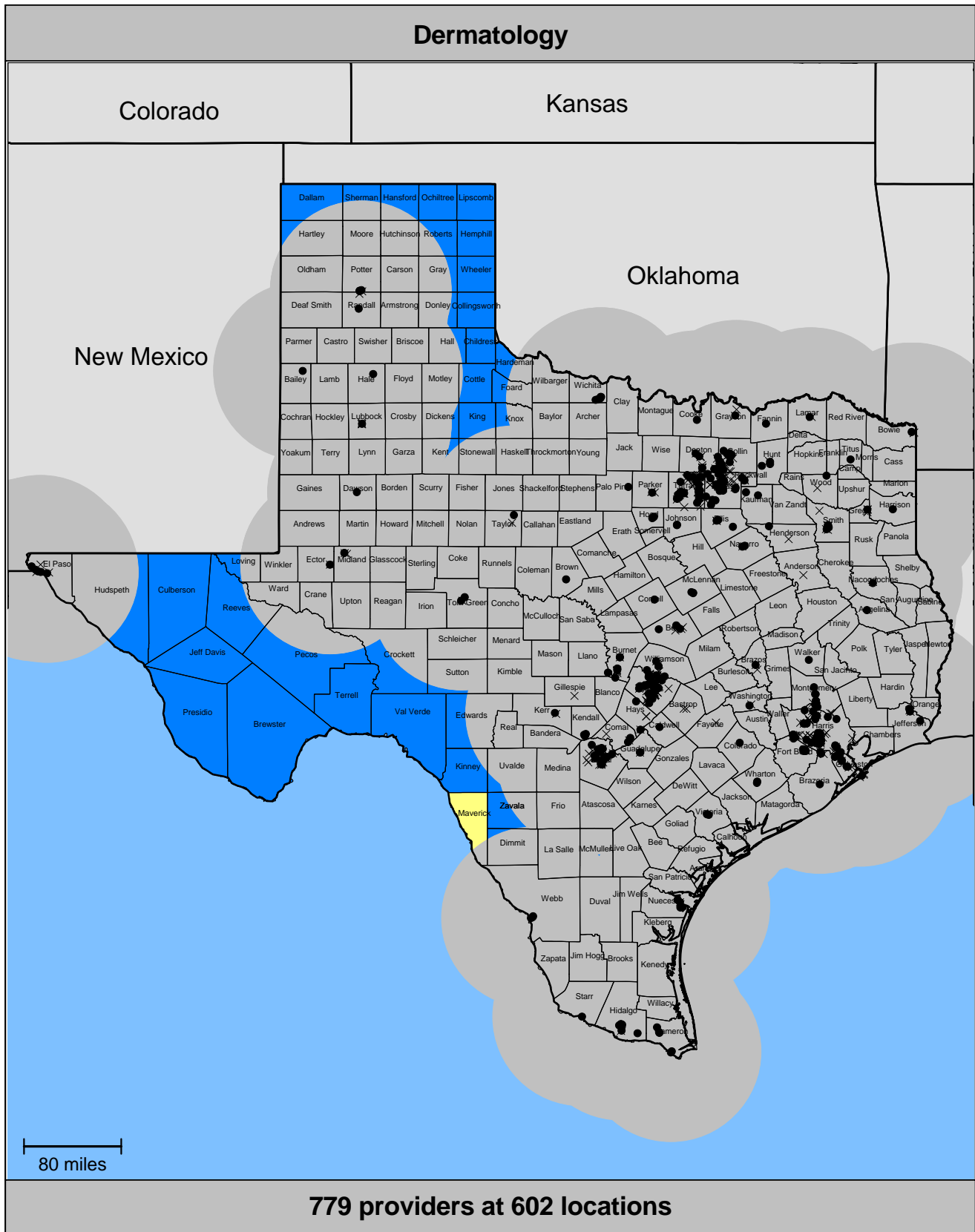
Provider locations



- Single provider locations (600)
- × Multiple provider locations (825)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

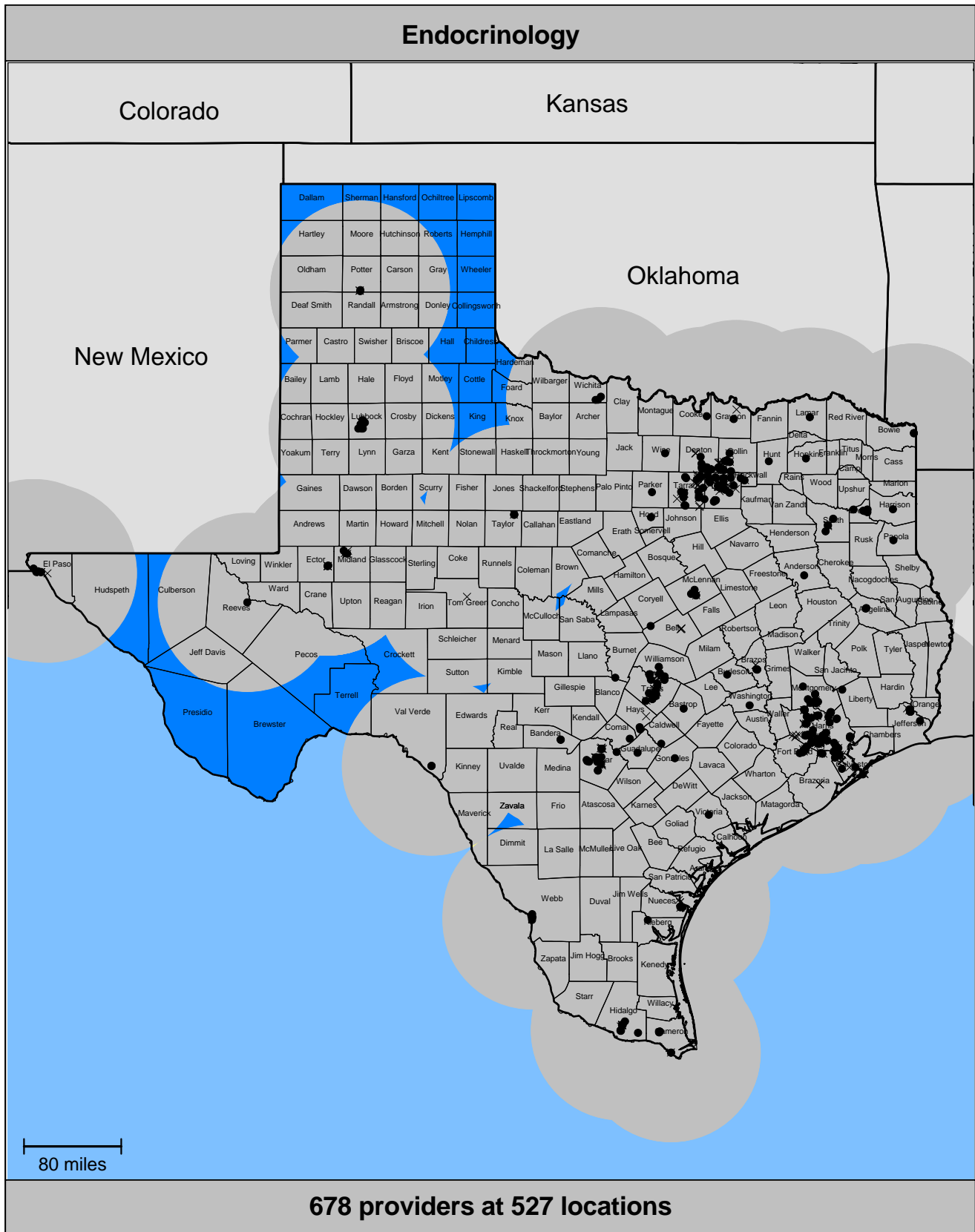
Provider locations



- Single provider locations (322)
- × Multiple provider locations (280)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

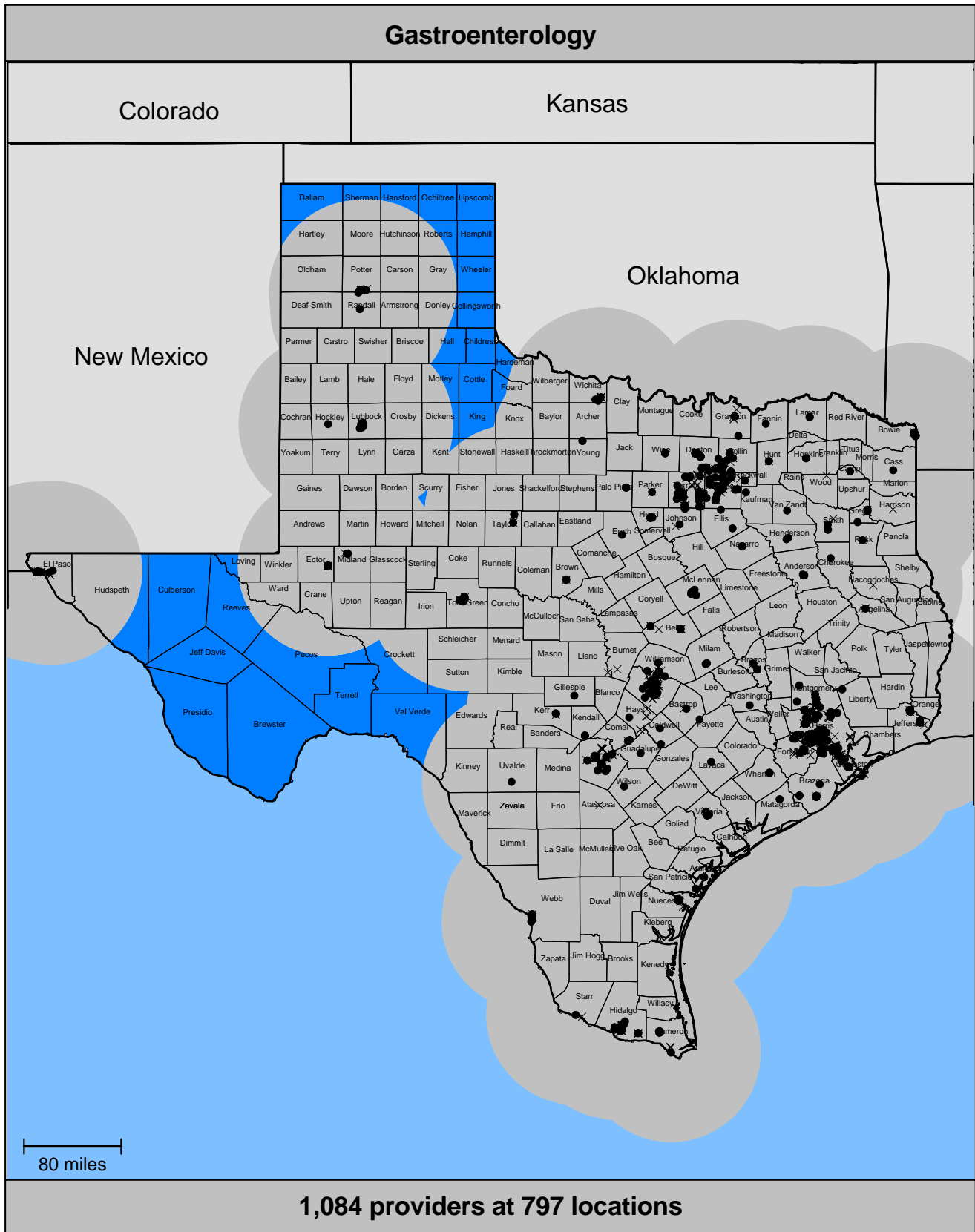
Provider locations



- Single provider locations (311)
- × Multiple provider locations (216)
- Texas Rural Counties
- Texas Urban Counties

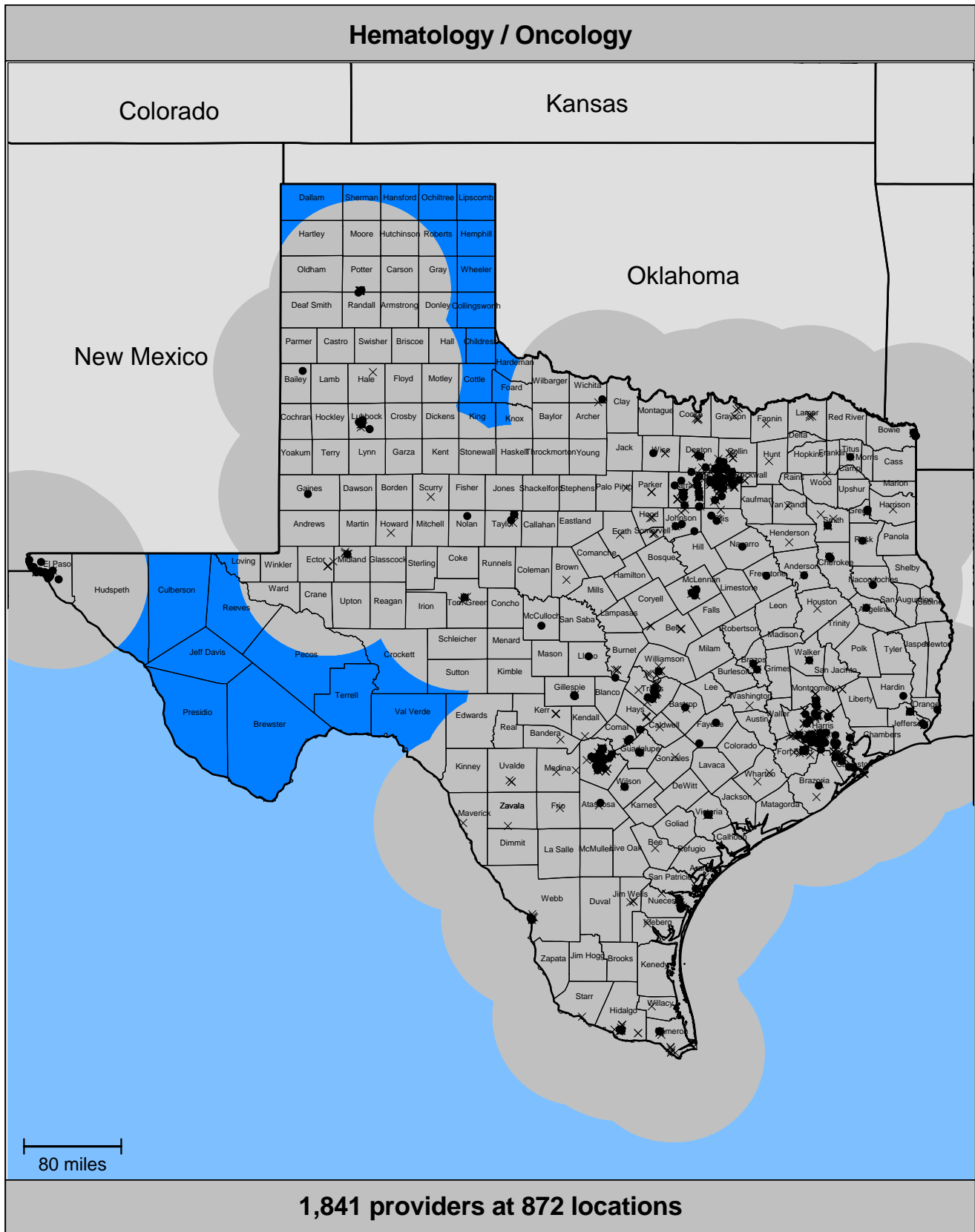
■ 75 mile radius

Provider locations



- Single provider locations (429)
- × Multiple provider locations (368)
- Texas Rural Counties
- Texas Urban Counties
- 75 mile radius

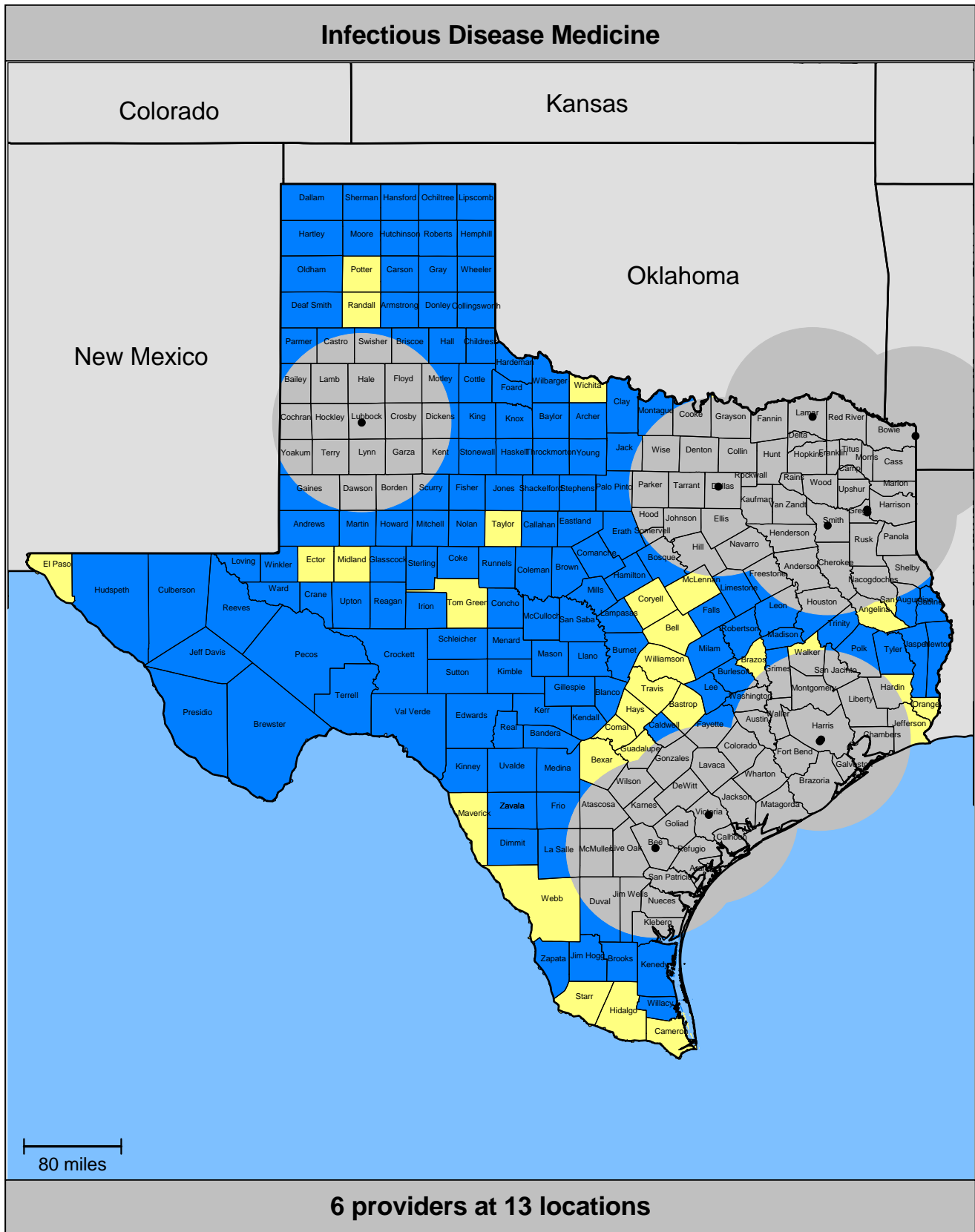
Provider locations



- Single provider locations (260)
- × Multiple provider locations (612)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

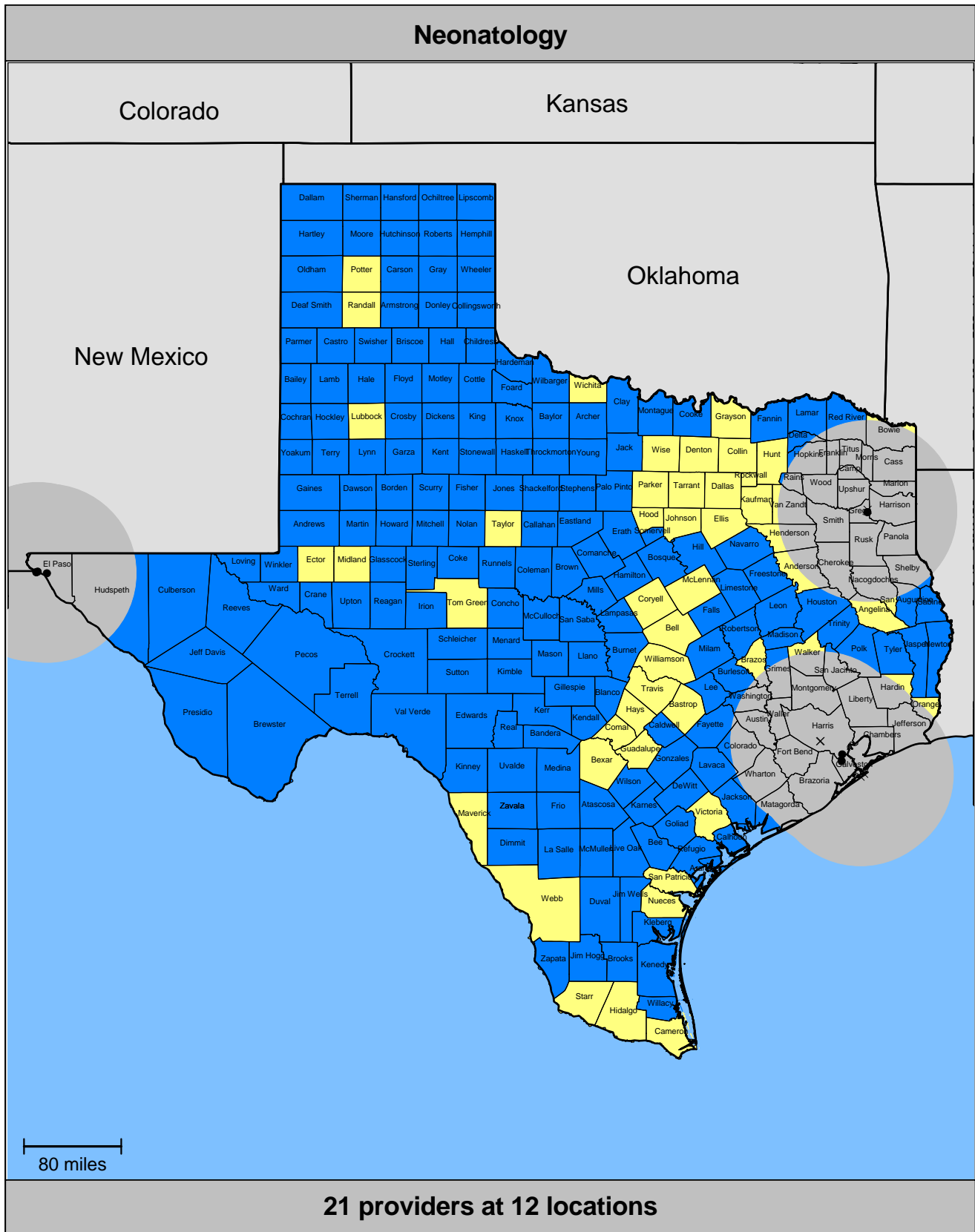
Provider locations



- Provider locations (13)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

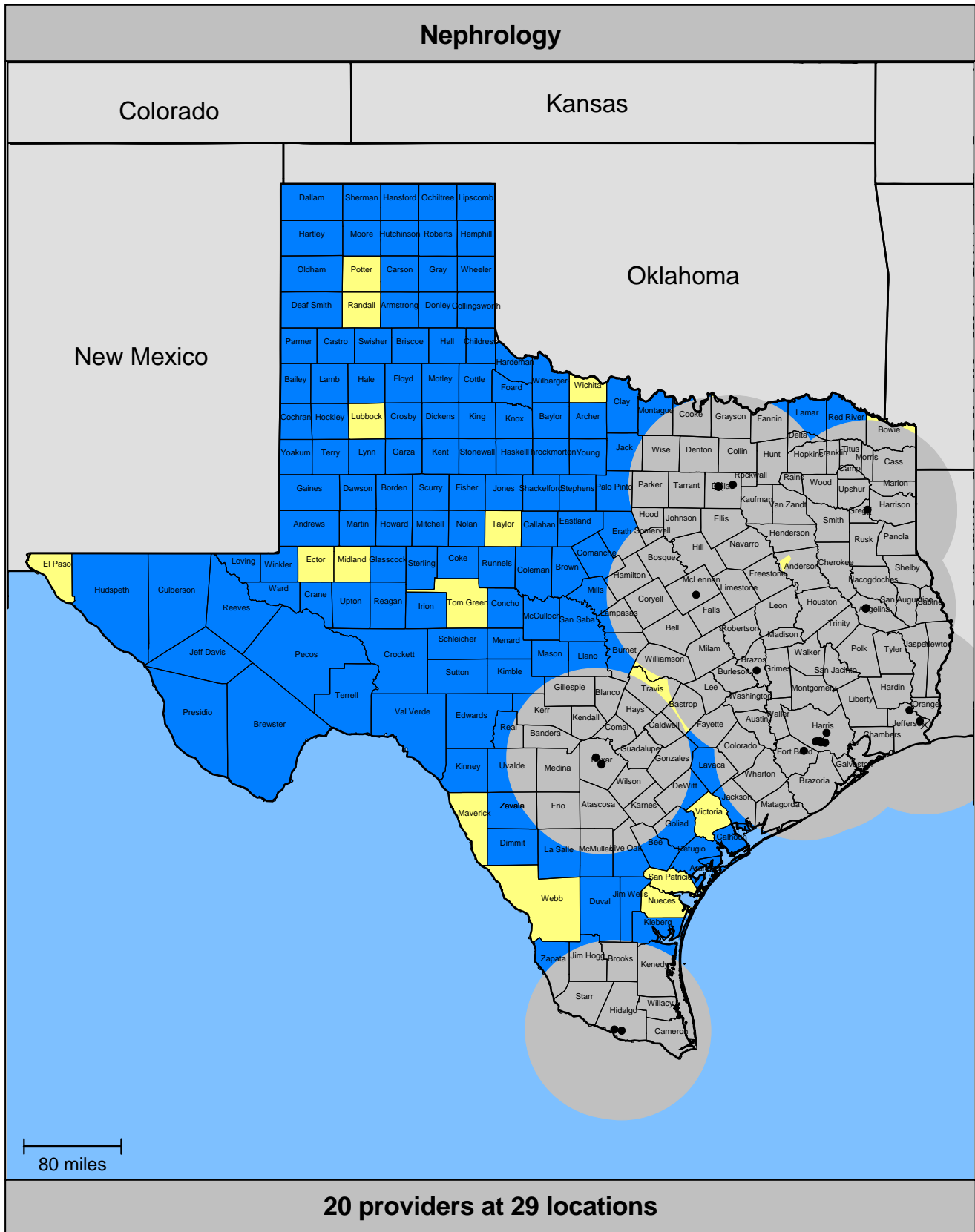
Provider locations



- Single provider locations (7)
- × Multiple provider locations (5)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

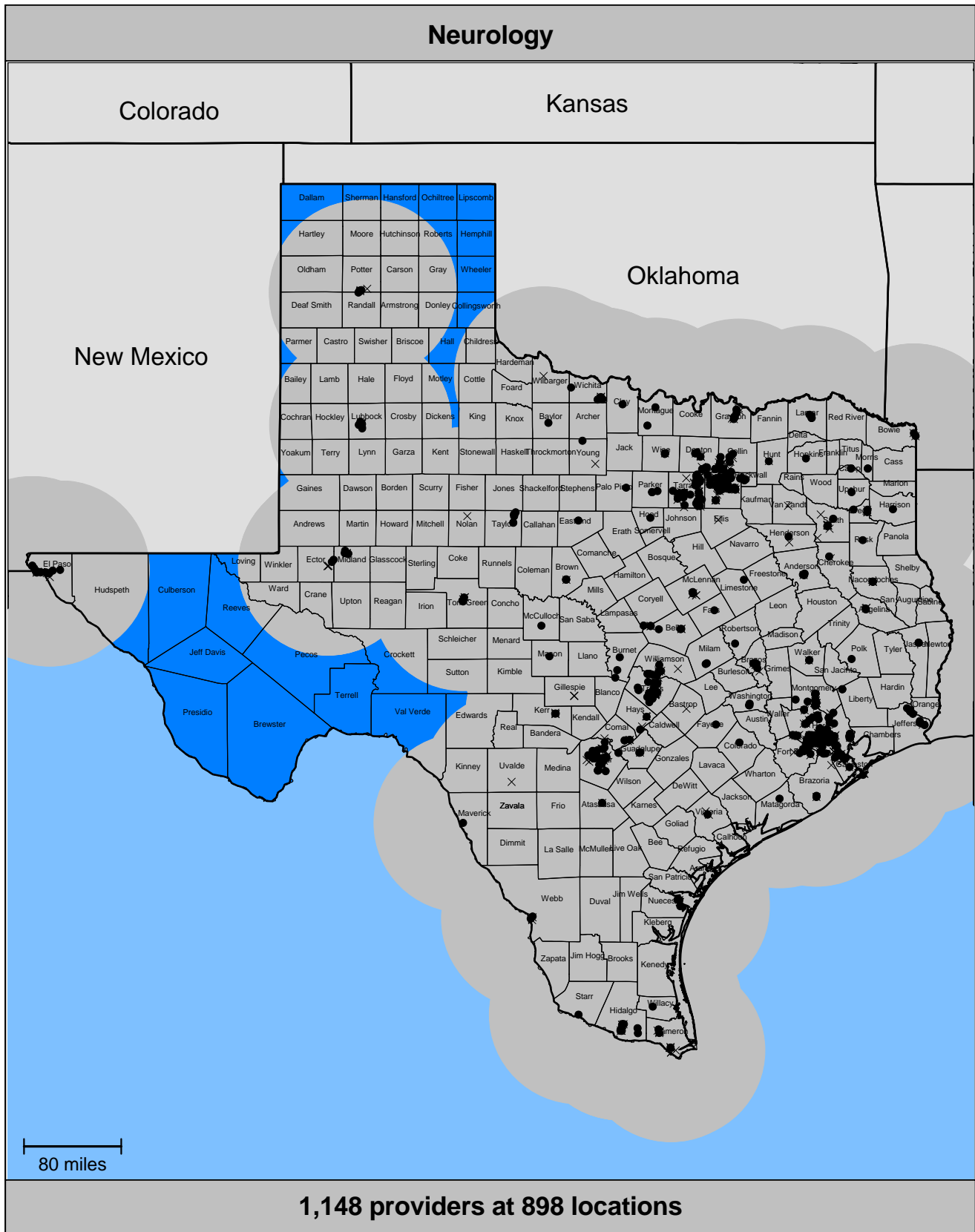
Provider locations



- Single provider locations (23)
- × Multiple provider locations (6)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

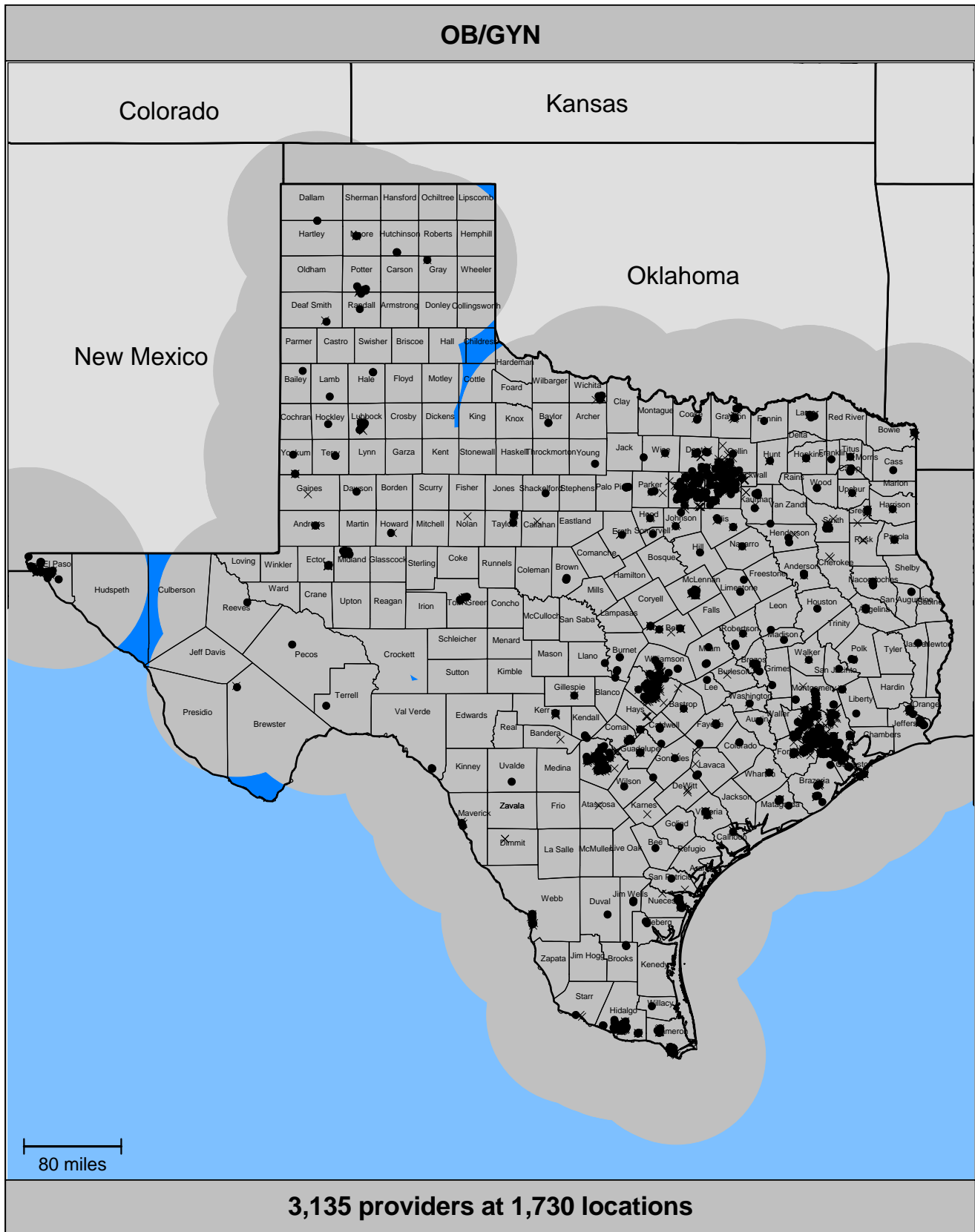
Provider locations



- Single provider locations (501)
- × Multiple provider locations (397)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

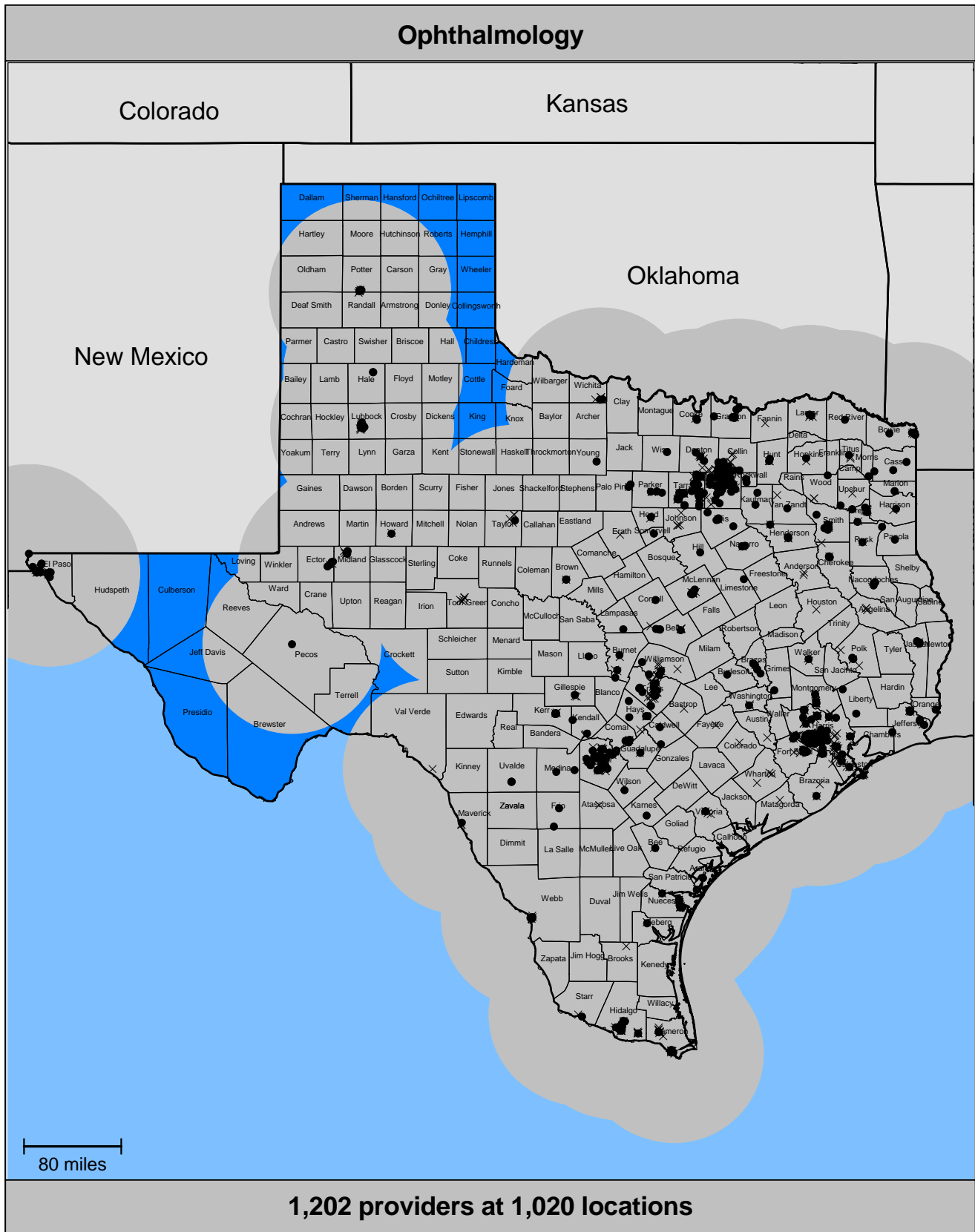
Provider locations



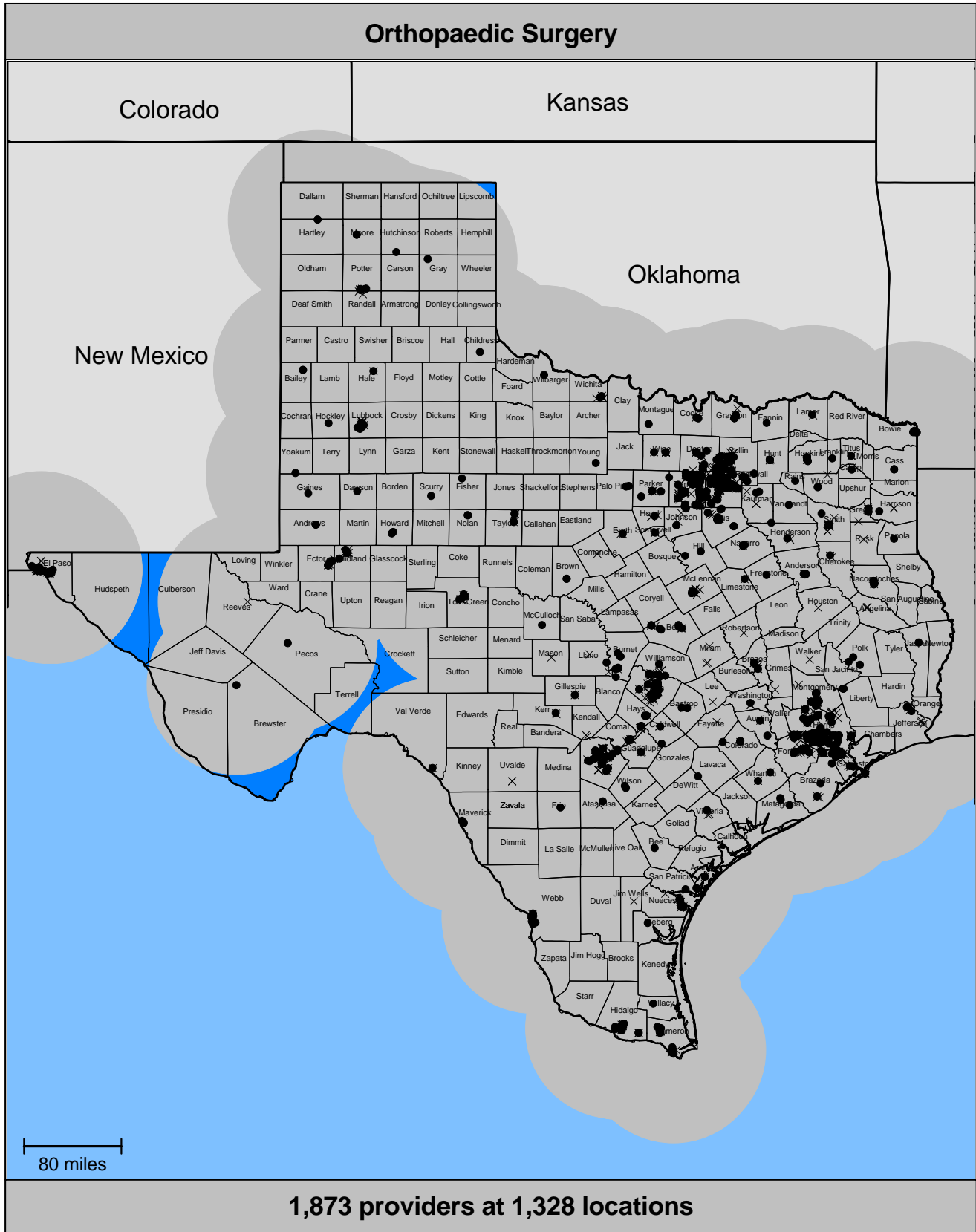
- Single provider locations (880)
- × Multiple provider locations (850)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

Provider locations



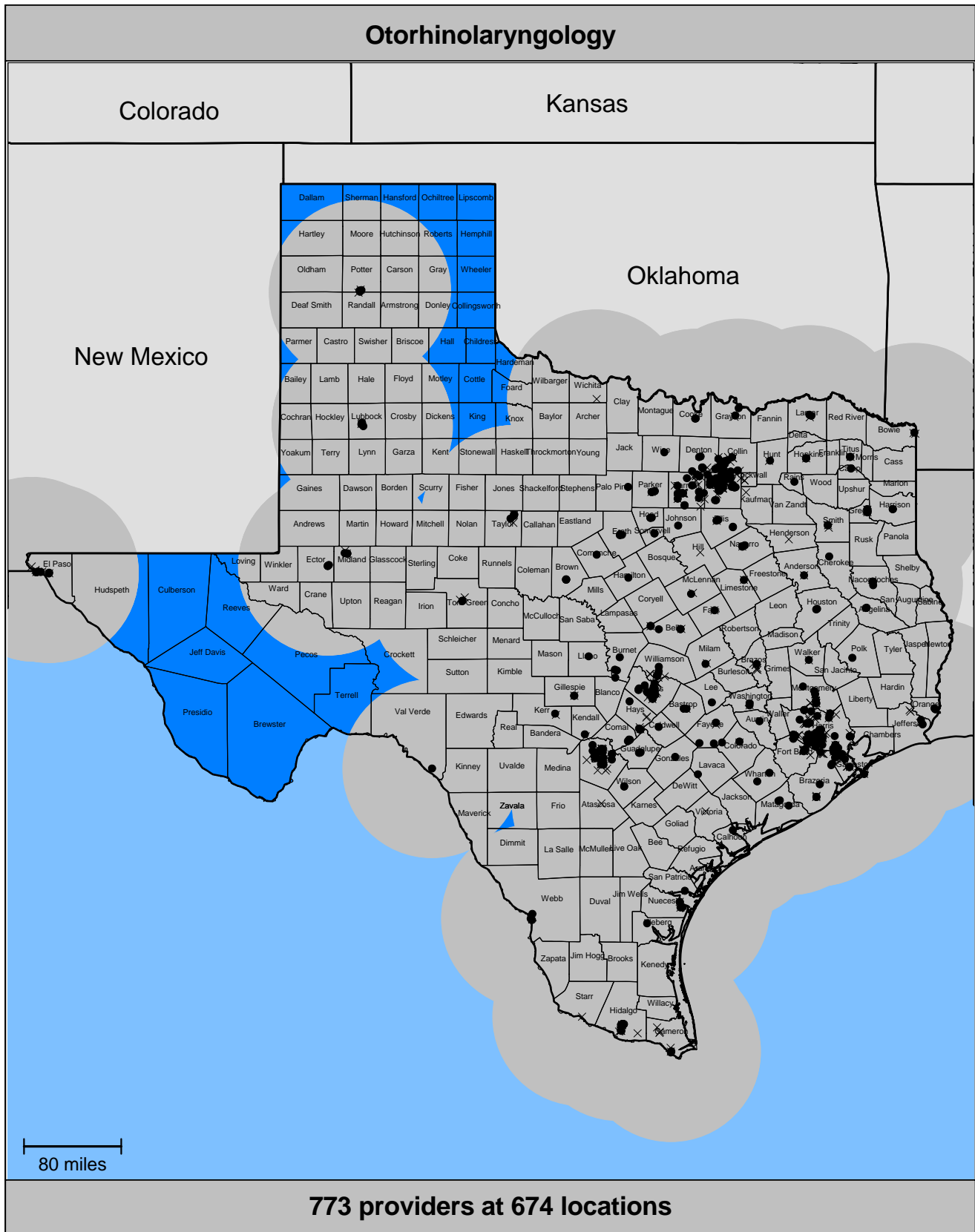
Provider locations



- Single provider locations (631)
- × Multiple provider locations (697)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

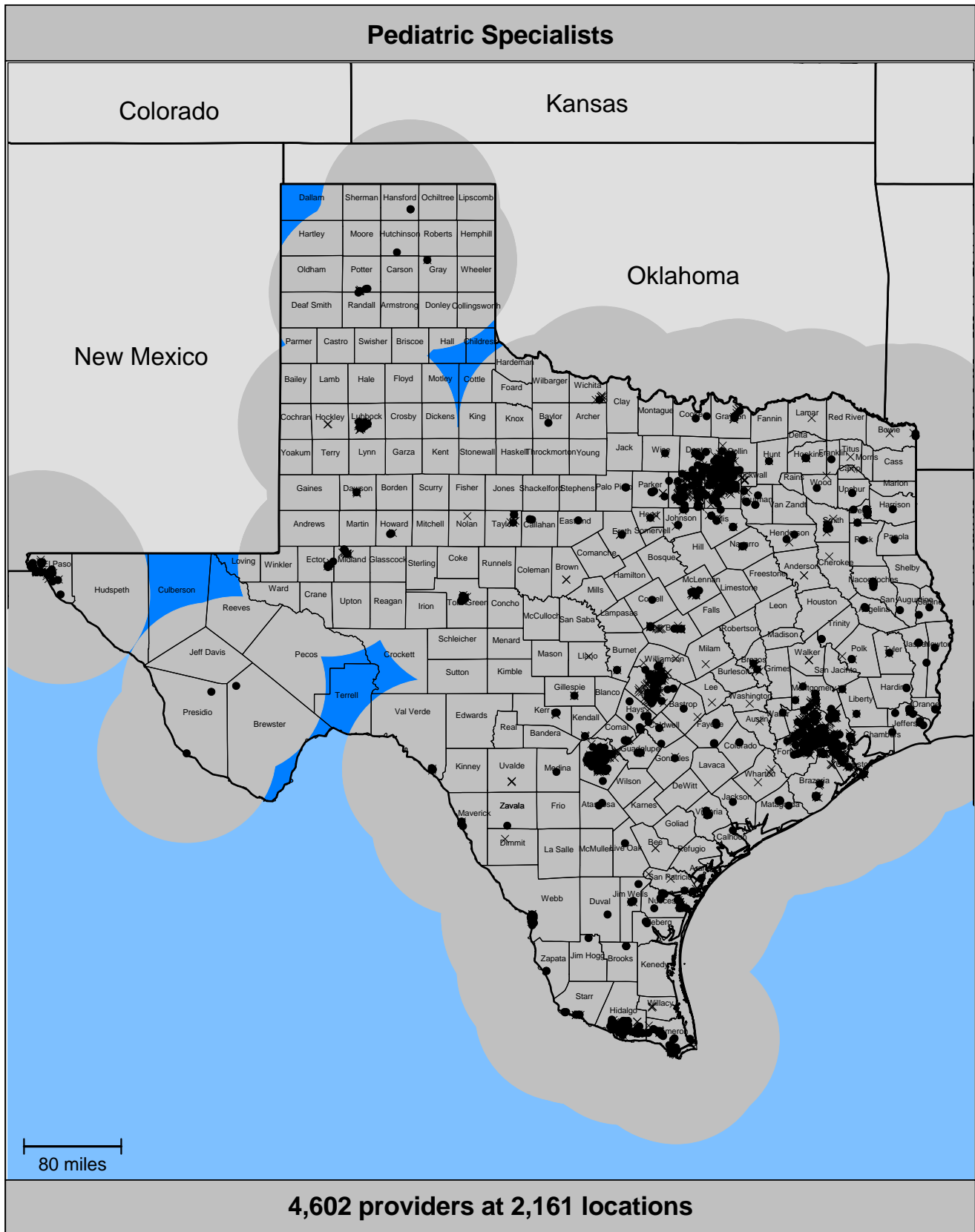
Provider locations



- Single provider locations (390)
- × Multiple provider locations (284)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

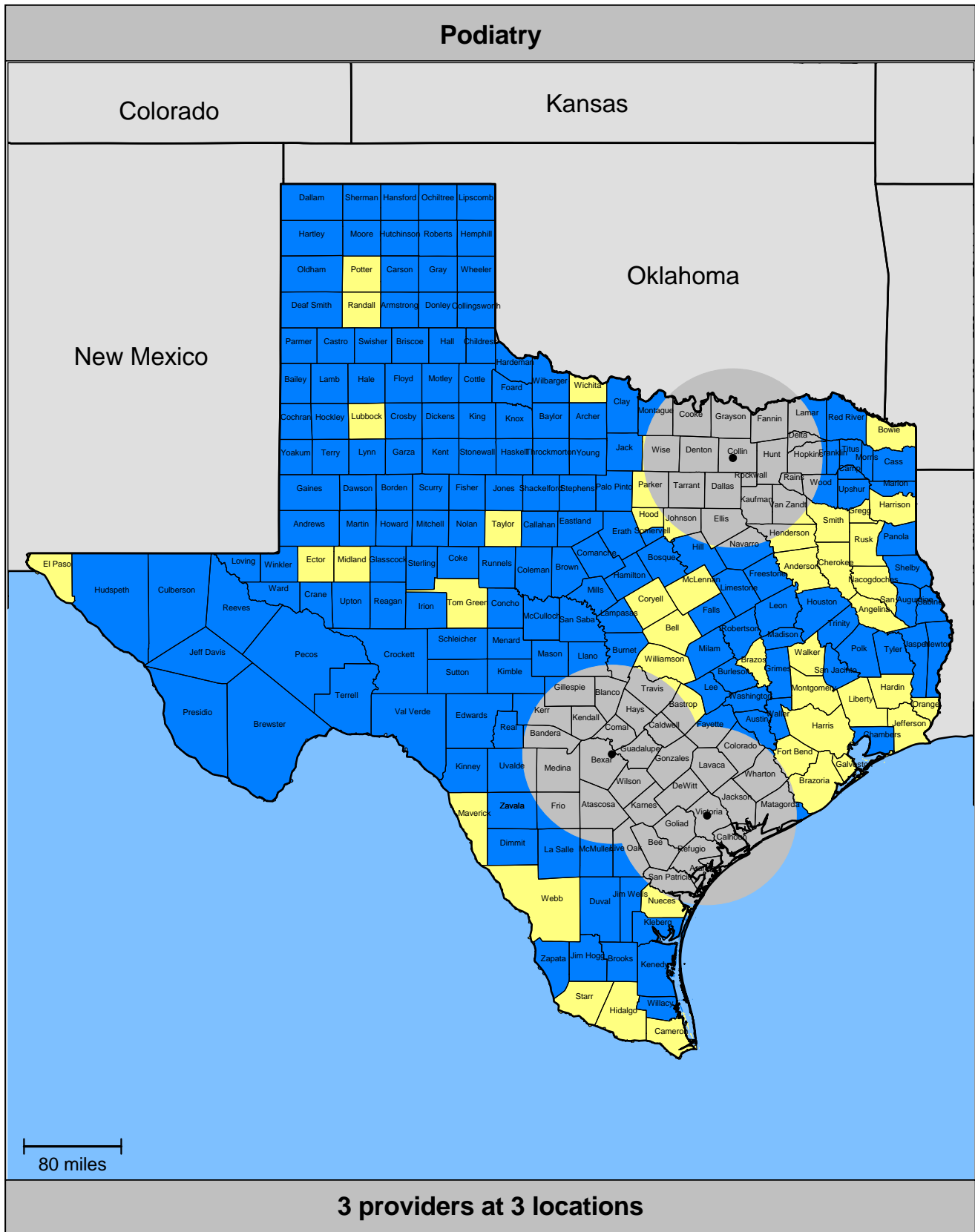
Provider locations



4,602 providers at 2,161 locations

- Single provider locations (954)
- × Multiple provider locations (1,207)
- Texas Rural Counties
- Texas Urban Counties
- 75 mile radius

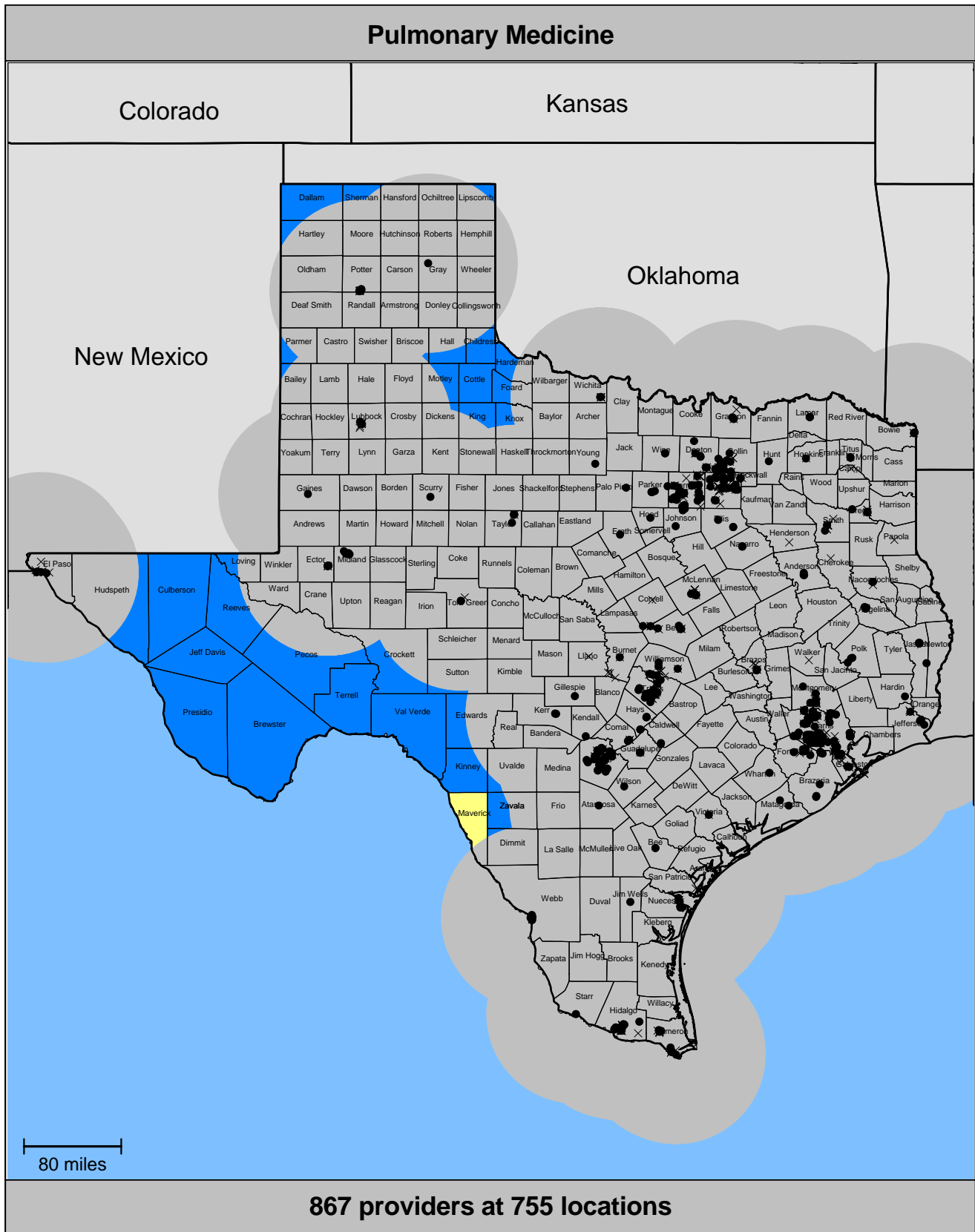
Provider locations



- Provider locations (3)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

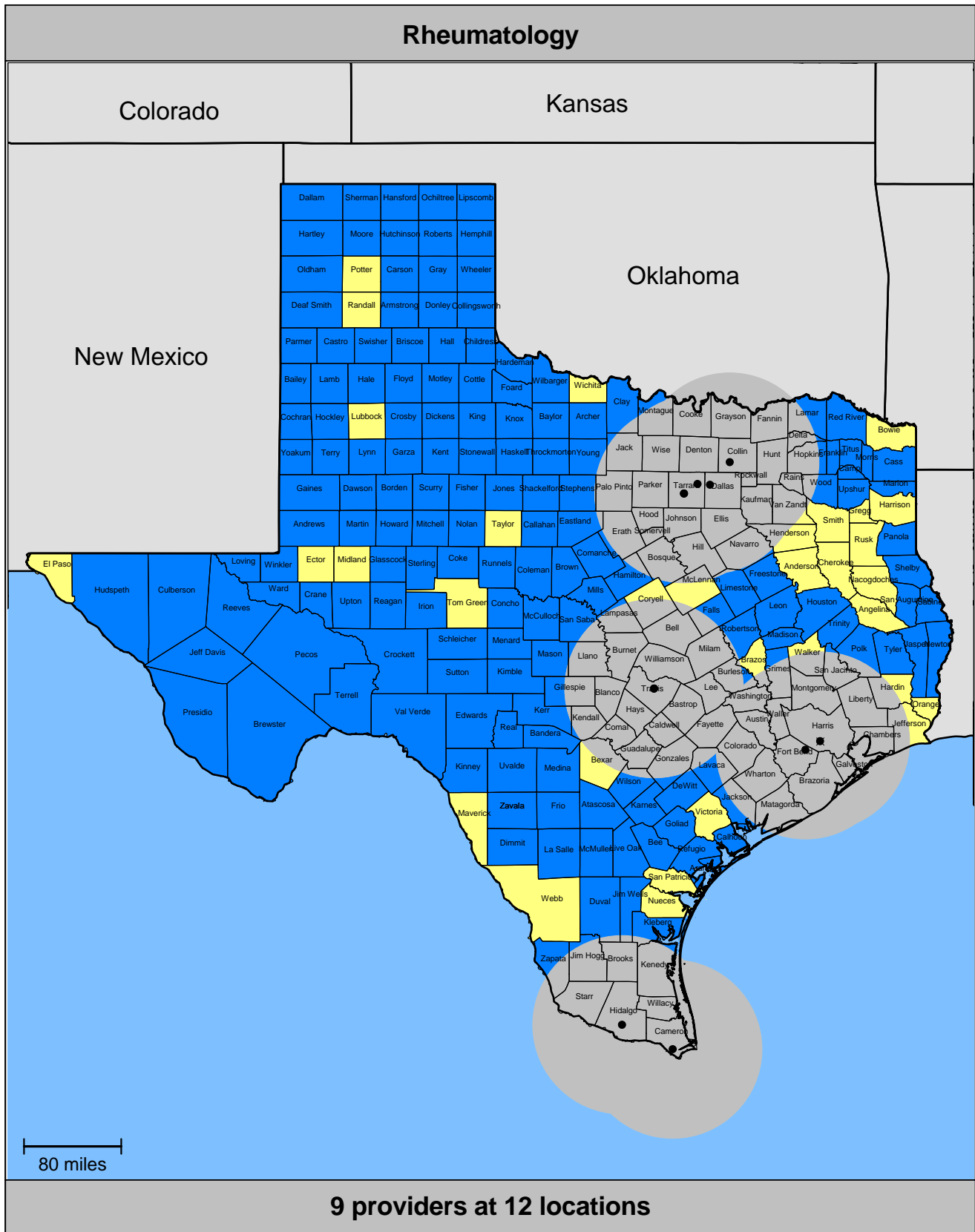
Provider locations



867 providers at 755 locations

- Single provider locations (447)
- × Multiple provider locations (308)
- Texas Rural Counties
- Texas Urban Counties
- 75 mile radius

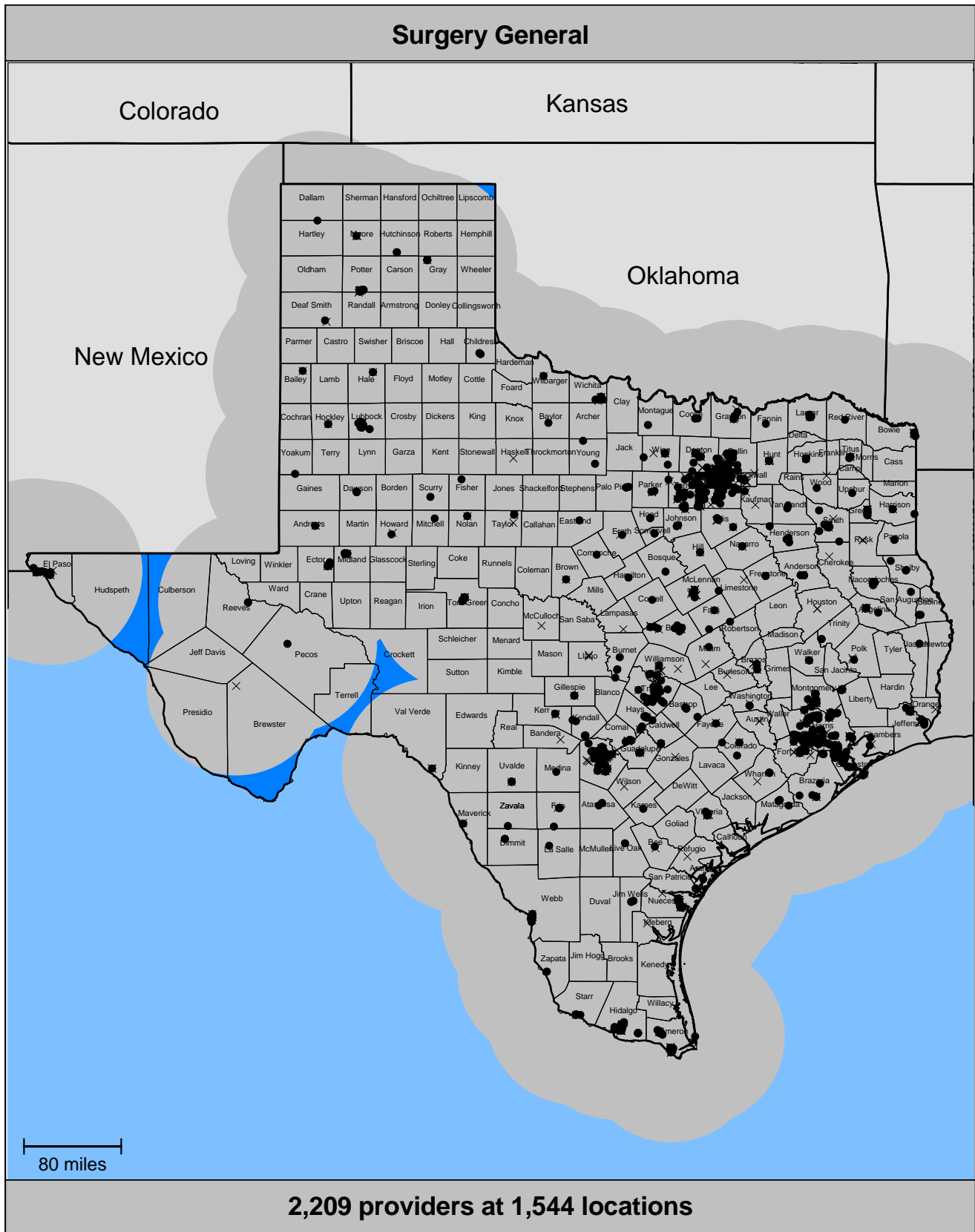
Provider locations



- Single provider locations (11)
- × Multiple provider locations (1)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

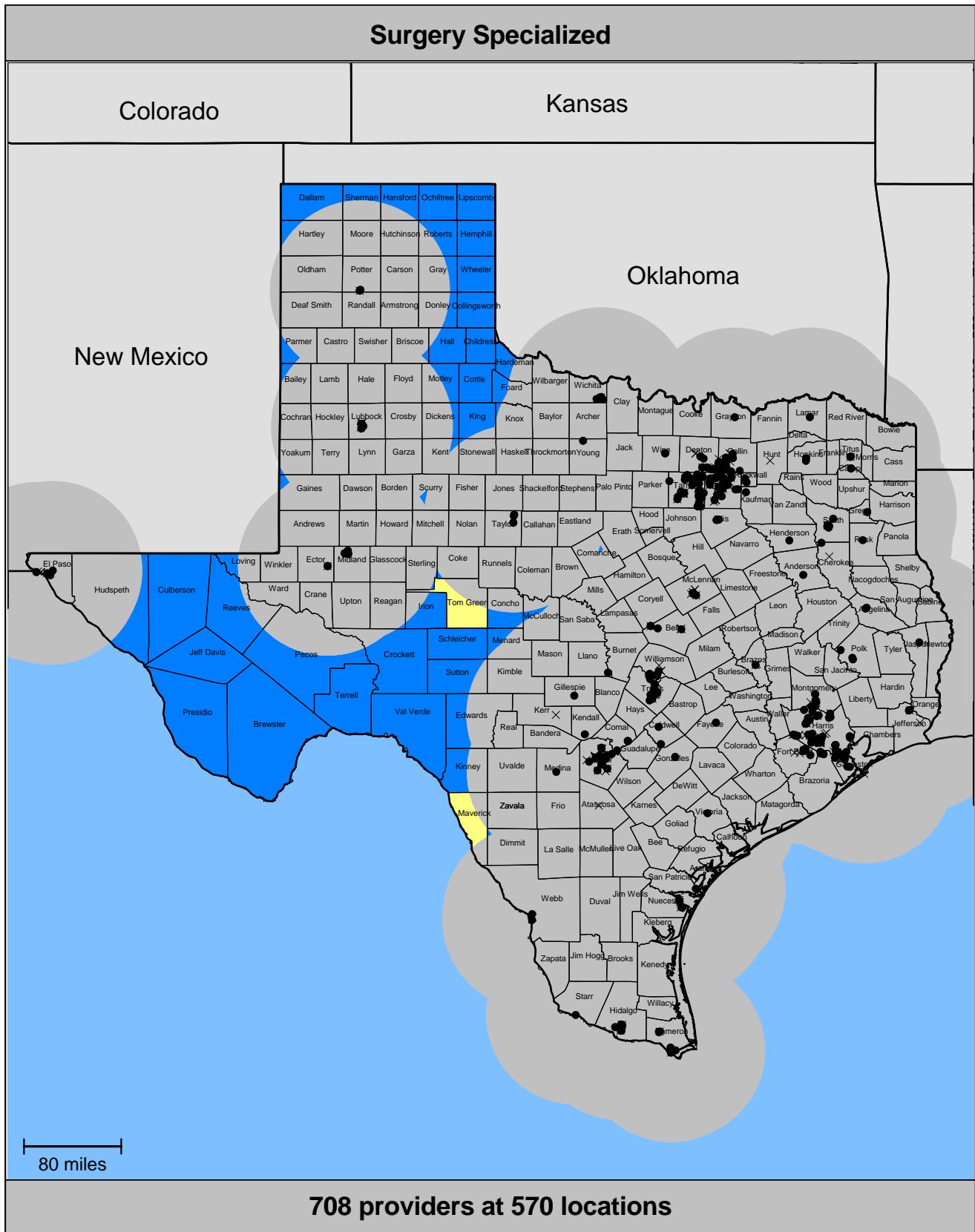
Provider locations



- Single provider locations (879)
- × Multiple provider locations (665)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

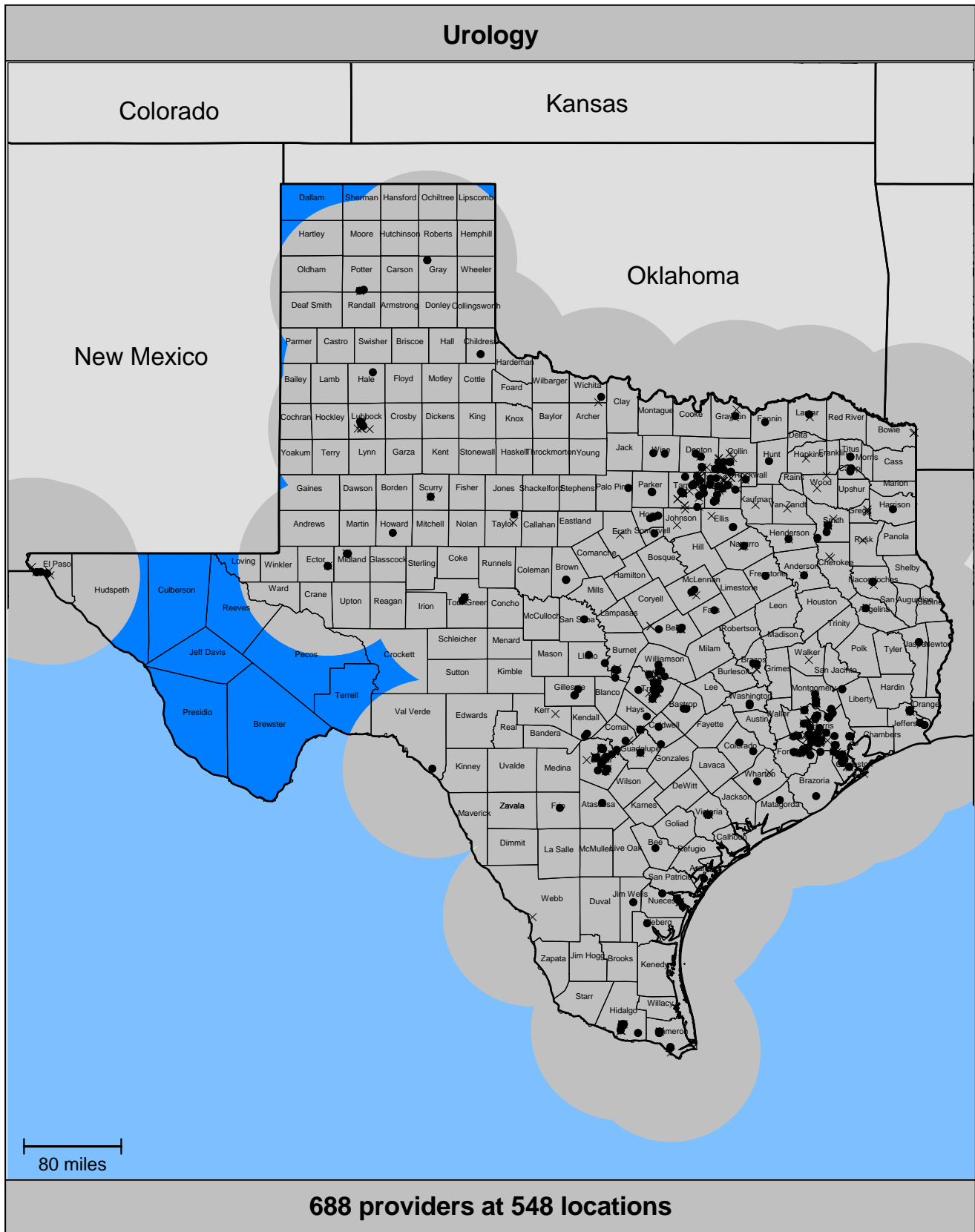
Provider locations



- Single provider locations (353)
- × Multiple provider locations (217)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

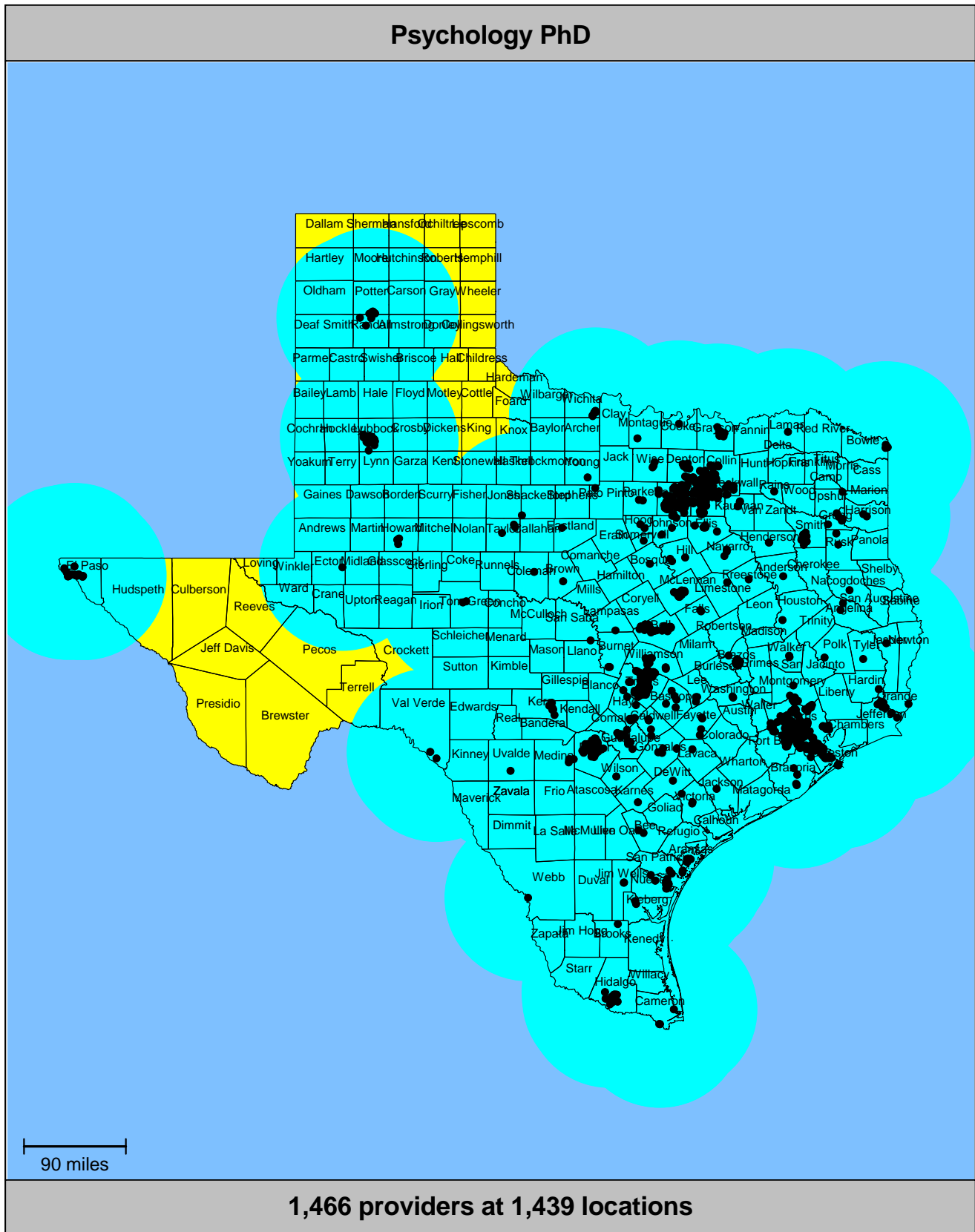
Provider locations



- Single provider locations (291)
- × Multiple provider locations (257)
- Texas Rural Counties
- Texas Urban Counties

■ 75 mile radius

Provider locations



90 miles

1,466 providers at 1,439 locations

- Single provider locations (1,436)
- × Multiple provider locations (3)
- UnitedHealthcare Choice EPO Service Area
- 75 mile radius