March 13, 2019

Request for Exception to Time/Distance Performance Standards

Instructions

1. A PHP must complete this form each time it requests an exception from the NC Medicaid time/distance performance standards. The PHP must submit this form for each exception requested.
2. The PHP must submit a completed request form as needed with the PHP’s Network Access Plan and revisions thereto and/or the annual network submission, forty-five (45) calendar days before an approved exception is set to expire if the exception continues to be needed, and at any other time as needed.
3. If DHHS approves the exception, the exception will be time limited. Forty-five (45) calendar days before an approved exception is set to expire, the PHP shall submit a new request for the exception (along with an updated version of the form and supporting documentation). If the exception is no longer needed, the PHP shall inform the Department by submitting an email to the PHP’s designated email at DHHS.
4. Only one Performance Standard (comprised of the specific distance standard (based on rural or urban county designation), the provider/service type, and the Member type (adult/pediatric, if applicable) may be submitted per each exception request form.
5. The PHP shall give each request a unique identifier. Insert this identifier in *Section I – Basic Information*. The PHP should use this identifier when communicating with DHHS relating to this exception request. This identifier must be included in the Exception ID Field found in PHP Report PRV001-J: Network Adequacy Exceptions Report.
6. In *Section I – Basic Information*, identify the county (or counties) and PHP Region (or PHP Regions) in which the Performance Standard is not met. Refer to the Provider Network Adequacy Instructions for a listing of all counties, their respective designation as urban or rural, and their PHP Region to use in completing Section I.
7. In *Section II – Time/Distance Performance Standard Information*, using Section VII – Attachment F of the PHP Contract, insert the Service Type and Time/Distance Performance Standard description, and select the Member type and county designation for which the exception request is made. For example, for Adult Primary Care in an urban county, the PHP would insert “Primary Care” and “≥ 2 providers within 30 minutes or 10 miles for at least 95% of Members”, and select “Adult” and “Urban”. Only the descriptions directly from Attachment F of the PHP Contract will be acceptable. If an exception is needed for both types of Members or counties, then a separate request must be submitted for each Member type and county type.
8. In *Section III – Exception Reason and Plan for Ensuring Access*, identify the reason(s) for the exception request by clicking the box for all reasons that apply.
9. In *Section IV – Review Criteria and Plan for Ensuring Access to Covered Services*, provide supporting information based upon the review criteria to support this request. Attach additional pages as necessary.
10. In *Section V – Additional Required Information*, provide the additional information requested in support of this request. Attach additional pages as necessary.
11. In addition to reviewing the information and documentation submitted with this request, DHHS may also consider the following information when determining whether to grant an exception:
    1. The PHP’s 24-month history of claims payment timeliness.
    2. The PHP’s 24-month history of consumer and provider complaints.

Technical Information

1. File Naming Convention: Refer to the most recent Inbound Deliverable Job Aid for instructions.
2. Submit to: Refer to the most recent Inbound Deliverable Job Aid for instructions.

Section I – Basic Information

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| --- | --- |
| PHP: |  |
| PHP Exception Request Identifier |  |
| County(ies) |  |
| PHP Region(s) (1-6) |  |
| Date Submitted |  |

Section II – Time/Distance Performance Standard Information

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| --- | --- | --- | --- |
| Service Type for which the exception is requested as found in Section VII – Attachment F of the PHP Contract. Refer to Service Type column.  *Example: Primary Care* | |  | |
| Description of Time/Distance Performance Standard for which the exception is requested as found in Section VII – Attachment F of the PHP Contract. Refer to appropriate Urban Standard or Rural Standard column.  *Example: ≥ 2 providers within 30 minutes or 10 miles for at least 95% of Members* | |  | |
| Member Type | | Designation of County(ies) | |
| Adult | Pediatric | Urban | Rural |

Section III –Reason(s) for Exception

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| --- | --- |
| **Reason Code for Exception**  **(Select all that apply to this request)** | 1. Lack of Providers in Service Area  2. Provider Fails PHP’s Objective Quality Standards for Contracting  3. Other (explain in number 4 in Section IV) |

Section IV – Review Criteria and Plan for Ensuring Access to Covered Services

As part of this exception request for all reasons, a PHP must demonstrate with specific data that the Time/Distance Performance Standard cannot be met in a particular service area or part of a service area and also state what steps were and will be taken to address the network inadequacy (Contract Section V.D.f.iii.).

|  |  |
| --- | --- |
| **DHHS Review Criteria for each Reason Code and PHP’s Supporting Information (Attach additional pages as necessary)** | 1. PHP has conducted a good faith search for providers and determined that there are no providers physically present in the service area of the type requested in the exception. DHHS will not grant an exception for this reason code unless the PHP demonstrates, with specific information, that there are no providers physically present in the part(s) of the service area for which the waiver is sought. Specific information may include provider directories and sources consulted, physical geography that affects the location of providers, or other information that affects the availability and location of providers. The PHP should describe how it will assess the availability of providers who begin practice in the service area where the standard cannot currently be met. |
| 1. Provider does not meet PHP's Objective Quality Standards for contracting as outlined in the PHPs Credentialing and Recredentialing Policy. PHP must cite the reason(s) provider does not meet PHP's Objective Quality Standards and the date the Standards were last approved by DHHS. If the approval is pending, identify the date the Policy was last submitted to DHHS. |
| 1. Other -Describe why geographic access standards cannot be met. Also describe how access will be provided for this provider type for the residents of the affected county or counties. |

Section V – Additional Required Information (attach additional pages as necessary)

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| 1. Explain how the PHP will provide access to the identified provider/service types either within or outside of the Performance Standard distance criteria. Telemedicine may be used as a means to provide access when there are no providers physically present to meet the standard. |
| 1. Explain how the PHP will remedy the network deficiency, including an estimated time line to close the network gap. |
| 1. Provide the PHP’s actual performance for the standard for which the exception is requested in each county including in this request. |
| 1. Provide the PHP’s history of overturned claims denials for the exception request provider/service type within the last 24 months within the Performance Standard distance criteria. |

Version

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| Date | Section Updated | Change |
| Jan. 31, 2019 | N/A | Initial document; dotx format |
| Mar 13, 2019 | Instructions, Section II | Updated instructions with finalized information; revised Section II to remove drop down menus and just require description of standard with references to Attachment F of the PHP Contract.. |