

MANAGED CARE SYSTEMS
P.O. Box 64882, St. Paul, MN 55164-0882
Telephone: 651-201-5100

Email: health.managedcare@state.mn.us

Request for Waiver

Plan Year: 2022

Please ensure that information contained on this waiver request coincides with information provided on the geographical access maps and provider list submitted with this application.

1. Name and Title of Person Submitting this Document:

Carrier	Name Network	Network Structure*
HealthPartners Inc (HPI)	CentraChoice SE	<select one=""></select>
Name	Title	Enrollees in Network*
Martin Michael	Sr Director Provider Relations & Network Management	

2. By submitting this form, the above-referenced confirms:

- A. That person submitting this request has personal knowledge of the network contracting process involved in this submission; and
- B. That access cannot be met for the following provider type(s). Include the county and reason(s) for not meeting the requirements.

Provider Type	County	Reason Code Notes	Affected Enrollees*	Percent Total Enrollees Affected	Percent Not Covered*	Percent Available Providers Included
Cardiac Surgery	Douglas,Kandiyohi,Todd,W adena	These counties are primarily rural and have small populations. Due to the smaller community size, the hospitals and clinics in these areas don't have the technology or equipment to handle complex procedures or specialized services. Patients have to travel to providers in the larger metropolitan areas where specialty providers work in large facilities where the technology and equipment needed for complex cases are available. There is a limited number of Cardiac Surgery providers in the state; the metropolitan areas of St. Paul/Minneapolis, St. Cloud, Duluth, Moorhead/Fargo/Grand Forks or Sioux Falls, SD. have services available through large care systems and consultations are also available through telemedicine. There are no additional Cardiac Surgery providers available in these counties. The following additional websites were searched for available providers: http://mhcpproviderdirectory https://www.medicare.gov/physiciancompare/ healthgrades.com These are websites updated by government sources with frequent data updates so we feel these are good sources for identification of new providers. If new providers are identified, the information is forwarded to the contracting department so they can pursue a contract. HealthPartners communicates routinely with providers through our newsletter every other month with reminders to keep information regarding their locations and providers up to date. Member complaints regarding access to care are monitored on a monthly basis. If trends in complaints regarding access to a particular type of provider are identified, the contracting department is notified and when new providers are identified, a contract is pursued. Gaps will be monitored on a quarterly basis and we will pursue contracts with new providers as they are identified. No additional providers have been identified to date. ENROLLEE ACCESS TO SERVICES IN 2020: Referral to metropolitan area clinics and facilities Complex cardiac surgery is performed at larger metropolitan care system hospitals and locations.				

		These counties are primarily rural and have small populations. Due to the smaller community size,		
		the hospitals and clinics in these areas don't have the technology or equipment to handle complex		
		procedures or specialized services. Patients have to travel to providers in the larger metropolitan		
		areas where specialty providers work in large facilities where the technology and equipment needed		
		for complex cases are available.		
		There is a limited number of Colon and Rectal Surgery providers in the state; the metropolitan areas		
		of St. Paul/Minneapolis, St. Cloud, Duluth, Moorhead/Fargo/Grand Forks or Sioux Falls, SD. have		
		services available through large care systems and consultations are also available through		
		telemedicine. There are no additional Colon and Rectal Surgery providers available in these		
		counties.		
		The following additional websites were searched for available providers:		
		http://mhcpproviderdirectory		
		https://www.medicare.gov/physiciancompare/		
		healthgrades.com		
		If new providers are identified, the information is forwarded to the contracting department so they can		
		pursue a contract.		
		HealthPartners communicates routinely with providers through our newsletter every other month with		
		reminders to keep information regarding their locations and providers up to date. Member		
		complaints regarding access to care are monitored on a monthly basis. If trends in complaints		
		regarding access to a particular type of provider are identified, the contracting department is notified		
		and when new providers are identified, a contract is pursued.		
		Gaps will be monitored on a quarterly basis and we will pursue contracts with new providers as they		
Colon and Rectal Surgery	Douglas,Kandiyohi,Todd,W	are identified. No additional providers have been identified to date.		
	adena,Morrison	ENROLLEE ACCESS TO SERVICES IN 2020:		
		Referral to metropolitan area clinics and facilities		
		Complex colon and rectal surgery services and surgery are performed at larger metropolitan care		
		system hospitals and locations. HealthPartners' contracted providers refer their patients to		
		metropolitan area providers who have access to large hospital facilities that provide colon and rectal		
		surgery services.		
		Provider clinics or outreach locations		
		For simple procedures and office visits, Alomere Health (Alexandria Clinic), Carris Health, Douglas		
		County Hospital and Clinics, CentraCare, and Sanford Health have satellite locations or provide		
		outreach services at other locations in the region. In addition, telemedicine is an option for office		
		visits, including consultations and post-operative visits.		
		Network Reviews		
		There were two reviews of our network conducted in 2020 instead of quarterly due to COV-ID and		
		not having staff or resources available to conduct the quarterly reviews we usually do. Networks		
		were reviewed on February 2, 2020 and June 8, 2020 and again March 1, 2021 for 2022 networks.		
		HealthPartners has resumed quarterly monitoring in 2021.		
		Sources used to check for new providers/locations		
		Healthgrades		
		Medicare Physician Compare		
		Minnesota Health Care Programs Provider Directory		
		National Institute of Health US National Library of Medicine MedlinePlus Directories		
		New providers identified		
Gastroenterology	Wadena	Wadena County is located in the north central part of the state and is mostly agricultural land. There		
		are numerous lakes in this County as well. There are smaller, rural communities located in Wadena		
		County. HealthPartners contracts with all known providers in the county. The closest metropolitan		
		area is Saint Cloud . HealthPartners also supports the use of telemedicine in these areas where no		
		providers are physically present.		
		The following additional websites were searched for available providers:		
		http://mhcpproviderdirectory		
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		healthgrades.com		
		If new providers are identified, the information is forwarded to the contracting department so they can		
		pursue a contract.		
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		regarding access to a particular type of provider are identified, the contracting department is notified		
		and when new providers are identified, a contract is pursued.		
		Gaps will be monitored on a quarterly basis and we will pursue contracts with new providers as they		

		ENROLLEE ACCESS TO SERVICES IN 2020:	
		Referral to metropolitan area clinics and facilities Complex gastroenterology services and surgery are performed at larger metropolitan care system hospitals and locations. HealthPartners' contracted providers refer their patients to metropolitan area providers who have access to large hospital facilities that provide gastroenterology services.	
		Provider clinics or outreach locations Alomere Health (Alexandria Clinic), Carris Health, Douglas County Hospital and Clinics, CentraCare, Sanford Health and Tri-County Hospital have satellite locations or provide outreach services at other locations in the region. In addition, telemedicine is an option for office visits, including consultations and post-operative visits.	
		Network Reviews There were two reviews of our network conducted in 2020 instead of quarterly due to COV-ID and not having staff or resources available to conduct the quarterly reviews we usually do. Networks were reviewed on February 2, 2020 and June 8, 2020 and again March 1, 2021 for 2022 networks. HealtIPPartners has resumed quarterly monitoring in 2021.	
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Genetics	Douglas,Kandiyohi,Todd,W adena 1	These counties are primarily rural and have small populations. Due to the smaller community size, the hospitals and clinics in these areas don't have the technology or equipment to handle complex procedures or specialized services. Patients have to travel to providers in the larger metropolitan areas where specialty providers work in large facilities where the technology and equipment needed for complex cases are available. There is a limited number of Genetics providers in the state; the metropolitan areas of St. Paul/Minneapolis, St. Cloud, Duluth, Moorhead/Fargo/Granf Forks or Sioux Falls, SD. have services available through large care systems and consultations are also available through telemedicine. There are no additional Genetics providers available in these counties. The following additional websites were searched for available providers: http://mhcpproviderdirectory https://www.medicare.gov/physiciancompare/healthgrades.com If new providers are identified, the information is forwarded to the contracting department so they can pursue a contract. HealthPartners communicates routinely with providers through our newsletter every other month with reminders to keep information regarding their locations and providers up to date. Member complaints regarding access to care are monitored on a monthly basis. If trends in complaints regarding access to area are monitored on a monthly basis. If trends in complaints regarding access to area are monitored on a monthly basis. If trends in complaints regarding access to area are monitored on a monthly basis. If trends in complaints regarding access to area are monitored on a monthly basis. If trends in complaints regarding access to area are monitored on a monthly basis. If trends in complaints regarding access to area are monitored on a monthly basis. If trends in complaints regarding access to a particular type of provider are identified, the contracting department is notified and when new providers are identified, a contract is pursued. Gaps will be monitored on	
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Reconstructive Surgery	Douglas	This county is primarily rural and has a smaller population. Due to the smaller community size, the hospitals and clinics in these areas don't have the technology or equipment to handle complex procedures or specialized services. Patients have to travel to providers in the larger metropolitan areas where specialty providers work in large facilities where the technology and equipment needed for complex cases are available. There is a limited number of Reconstructive Surgery providers in the state; the metropolitan areas of St. Paul/Minneapolis, St. Cloud, Duluth, Moorhead/Fargo/Grand Forks or Sioux Falls, SD. have services available through large care systems and consultations are also available through telemedicine. There are no additional Reconstructive Surgery providers available in this county. The following additional websites were searched for available providers: http://mhopproviderdirectory 1 https://www.medicare.gov/physiciancompare/healthgrades.com If new providers are identified, the information is forwarded to the contracting department so they can pursue a contract. HealthPartners communicates routinely with providers through our newsletter every other month with reminders to keep information regarding their locations and providers up to date. Member complaints regarding access to care are monitored on a monthly basis. If trends in complaints regarding access to a particular type of provider are identified, the contracting department is notified and when new providers are identified, a contract is pursued. Gaps will be monitored on a quarterly basis and we will pursue contracts with new providers as they	
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For additional rows, please see the "Additional" tab of this document. DO NOT add rows to this sheet.

For all reason codes, carriers must demonstrate with specific data that geographic access standards cannot be met. Carriers must state what steps were and will be taken to address network inadequacies (MN Statutes § 62K.10, subdivision 5).

Allowable Waiver Reason Codes and Guidelines for Initial Approval

Applications to waive the requirements in Minnesota Statutes 62K.10 Subd. 2 or 3 must fit one of the following reason codes. Waivers automatically expire after one year. The commissioner shall only approve a subsequent waiver application that satisfies the requirements in Minnesota Statutes 62K.10 Subd. 5, demonstrates that the carrier took the steps it proposed to address network inadequacy, and explains why the carrier continues to be unable to satisfy the requirements.

Reason Code 1:

Carrier has conducted a search for providers and determined that, for each county in the plan service area, there are no providers physically present of the type requested in the waiver.

Carriers must

- Provide a description of physical geography and/or other factors that affect the location of providers (as relevant)
- 2. Demonstrate consultation of at least two provider directories and/or data sources. Provide a description of the provider directories and/or data sources consulted,

including a brief explanation of why the sources are believed to be accurate and complete. Examples of acceptable provider directories and data sources include, but are not limited to:

a. NPPES NPI Registry
b. Medicare Physician Compare
c. Minnesotal Health Care Programs Provider Directory
d. Healthgrades
e. SAMHSA Behavioral Health Provider Directories
f. National Institute of Health (NIH) U.S. National Library of Medicine MedlinePlus Directories
g. Quest Analytics
3. For Primary Care, Pediatric Services (Primary Care), General Hospital and Mental Health provider types:

a. State the total number and percentage of estimated enrollees affected in the county not meeting the geographic standard as of the submission date of waiver. Select only one county per line.

State how access will be provided for this provider type for enrollees of the affected county.

For example, does the carrier provide transportation services/vouchers, in-home care options, virtual care services, and/or telemedicine services? i.

ii.

4. Describe how they will assess the availability of providers who begin practice in the service area where the standard cannot currently be met and agree to conduct this assessment quarterly

Assessment of availability must include consultation of at least two provider directories and/or data sources, as described in item 2, above

Reason Code 2:

Provider does not meet carrier's credentialing requirements.

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- Cite the reason(s) provider does not meet credentialing requirements
- 2. For Primary Care, Pediatric Services (Primary Care), General Hospital, and Mental Health provider types
- State the total number and percentage of estimated enrollees affected in the county not meeting the geographic standard as of the submission date of waiver. Select only one county per line. 3. State how access will be provided for this provider type for enrollees of the affected county. For example, does the carrier allow enrollees to receive out-of-network

care at in-network rates, provide transportation services/vouchers, in-home care options, virtual care services, and/or telemedicine services?

Reason Code 3:

Carrier has made a good faith effort to contract with provider and provider has refused to accept a contract.

Carriers must:

- Cite the reason(s) provider state(s) for refusing contract(s)
- 2. For Primary Care, Pediatric Services (Primary Care), General Hospital and Mental Health provider types
- State the total number and percentage of estimated enrollees affected in the county not meeting the geographic standard as of the submission date of waiver. Select only one county per line. 3. State how access will be provided for this provider type for enrollees of the affected county. For example, does the carrier allow enrollees to receive out-of-network

care at in-network rates, provide transportation services/vouchers, in-home care options, virtual care services, and/or telemedicine services?

Reason Code 4:

Network is an Accountable Care Organization (ACO) or Narrow Network.

Carriers must:

- 1. Specify the network structure: Accountable Care Organization (ACO) or Narrow Network
 - If the network is an ACO, provide a brief description of the major health systems participating in the network
 - h If the network is a narrow network, describe the features of the network that restrict access
 - For both ACOs and Narrow Networks, state what percentage of available Primary Care, Pediatric Services (Primary Care), General Hospital,
- and Mental Health providers are included in the county and of the provider type for which a waiver is requested
- 2. State what, if any, steps are taken to inform enrollees of restricted access
- 3. State the total number of estimated enrollees in the network as of the submission date of the waiver
- 4. State why the geographic access standards cannot be met. Explain why full geographic access is not possible with this network design
- 5. State how access will be provided for this provider type for the enrollees of the affected county. For example, does the carrier allow enrollees to receive out-of-network care at in-network rates, provide transportation services/vouchers, in-home care options, virtual care services, and/or telemedicine services?
- 6. For Primary Care. Pediatric Services (Primary Care), General Hospital and Mental Health provider types,
 - State the total number and percentage of estimated enrollees affected in the county not meeting the geographic standard as of the submission date of waiver. Select only one county per line.
 - State the estimated percentage of area in that county that is not covered

Allowable Waiver Reason Codes and Guidelines for Subsequent Approval (Renewals)

In accordance with 62K.10 Subd. 5 (d), waivers will automatically expire after one year.

Carriers seeking identical, subsequent waivers for plan year 2022 will be required to show steps taken to address network inadequacies in plan year 2021 (see below).

Reason Code 1:

Carrier has conducted a search for providers and determined that, for each county in the plan service area, there are no providers physically present of the type requested in the waiver

Carriers must: Meet all of the requirements set forth for initial approval

- 2. Provide a description of how access was provided for affected enrollees in the previous approval year
- 3. Show evidence of quarterly efforts to assess provider availability throughout the last calendar year. Did new providers become available in affected areas? If so, describe any efforts to pursue contracts. If new providers became available and new contracts were not pursued, explain why.

Reason Code 2:

Provider does not meet carrier's credentialing requirements.

Carriers must:

- Meet all of the requirements set forth for initial approval
- 2. Provide a description of how access was provided for affected enrollees in the last approval year

Reason Code 3:

Carrier has made a good faith effort to contract with provider and provider has refused to accept a contract

Carriers must

Meet all of the requirements set forth for initial approval

2. Provide a description of how access was provided for affected enrollees in the last approval year

Reason Code 4:

Network is an Accountable Care Organization (ACO) or Narrow Network.

- Carriers must:
 1. Meet all of the requirements set forth for initial approval
- 2. Provide a description of how access was provided for affected enrollees in the last approval year



form revised 2/24/2022

MANAGED CARE SYSTEMS P.O. Box 64882, St. Paul, MN 55164-0883 Telephone: 651-201-5101

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Request for Waiver

Plan Year: 2023

Please ensure that information contained on this waiver request coincides with information provided on the geographical access maps and provider list submitted with this application.

1. Name and Title of Person Submitting this Document:

Carrier	Name Network	Network Structure*
HealthPartners Inc (HPI)	CentraChoice SE	<select one=""></select>
Name	Title	Enrollees in Network*
Martin Michael	Sr Director Provider Relations & Network Management	

- 2. By submitting this form, the above-referenced confirms:
- A. That person submitting this request has personal knowledge of the network contracting process involved in this submission; and
- B. That access cannot be met for the following provider type(s). Include the county and reason(s) for not meeting the requirements.

Provider Type	County	Reason Code Notes	Affected Enrollees*	Percent Total	Percent Not	Percent Available
Cardiac Surgery	Douglas,Kandiyohi,Todd,V adena	maller community size, the hospitals and clinics in these areas don't have the technology or equipment to handle complex procedures or specialized services. Patients have to travel to providers in the larger metropolitan areas where specialty providers work in large facilities where the technology and equipment needed for complex cases are available. There is a limited number of Cardiac Surgery providers in the state; the metropolitan areas of St. Paul/Minneapolis, St. Cloud, Duluth, Moorhead/Fargo/Grand Forks or Sloux Falls, SD. have services available through large care systems and consultations are also available through telemedicine. There are no additional Cardiac Surgery providers available in these counties. The following additional websites were searched for available providers: http://mhcpproviderdirectory https://www.medicare.gov/physiciancompare/healthgrades.com These are websites updated by government sources with frequent data updates so we feel these are good sources for identification of new providers. If new providers are identified, the information is forwarded to the contracting				

			These counties are primarily rurar and have small populations. Due to the				
			smaller community size, the hospitals and clinics in these areas don't have				
			the technology or equipment to handle complex procedures or specialized				
			services. Patients have to travel to providers in the larger metropolitan areas				
			where specialty providers work in large facilities where the technology and				
			equipment needed for complex cases are available.				
			There is a limited number of Colon and Rectal Surgery providers in the state;				
			the metropolitan areas of St. Paul/Minneapolis, St. Cloud, Duluth,				
			Moorhead/Fargo/Grand Forks or Sioux Falls, SD. have services available				
			through large care systems and consultations are also available through				
Colon and Rectal Surgery	Douglas,Kandiyohi,Todd,W	1	telemedicine. There are no additional Colon and Rectal Surgery providers				
	adena,Morrison		available in these counties.				
			The following additional websites were searched for available providers:				
			http://mhcpproviderdirectory				
			https://www.medicare.gov/physiciancompare/				
			healthgrades.com				
			If new providers are identified, the information is forwarded to the contracting				
			department so they can pursue a contract.				
			HealthPartners communicates routinely with providers through our newsletter				
			Wadena County is located in the north central part of the state and is mostly				
			agricultural land. There are numerous lakes in this County as well. There are				
			smaller, rural communities located in Wadena County. HealthPartners				
			contracts with all known providers in the county. The closest metropolitan				
.			area is Saint Cloud . HealthPartners also supports the use of telemedicine in				
Gastroenterology	Wadena	1	these areas where no providers are physically present.				
			The following additional websites were searched for available providers:				
			http://mhcpproviderdirectory				
				https://www.medicare.gov/physiciancompare/			
			healthgrades.com These counties are primarily rural and have small populations. Due to the				
			smaller community size, the hospitals and clinics in these areas don't have the technology or equipment to handle complex procedures or specialized				
					services. Patients have to travel to providers in the larger metropolitan areas		
			where specialty providers work in large facilities where the technology and				
			equipment needed for complex cases are available.				
						There is a limited number of Genetics providers in the state; the metropolitan	
			areas of St. Paul/Minneapolis, St. Cloud, Duluth, Moorhead/Fargo/Grand				
			Forks or Sioux Falls, SD. have services available through large care systems				
			and consultations are also available through telemedicine. There are no				
			additional Genetics providers available in these counties.				
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			department so they can pursue a contract.				
Genetics	Douglas,Kandiyohi,Todd,W	1					
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			access to a particular type of provider are identified, the contracting				
			department is notified and when new providers are identified, a contract is				
			pursued.				
			Gaps will be monitored on a quarterly basis and we will pursue contracts with				
			new providers as they are identified. No additional providers have been				
			identified to date.				
			ENROLLEE ACCESS TO SERVICES IN 2020:				
			LININOLLEE AGGLOG TO SERVICES IIV 2020.				
			Referral to metropolitan area clinics and facilities				
			Genetics services are provided at larger metropolitan care system hospitals				
			and locations. HealthPartners' contracted providers refer their patients to				
			metropolitan area providers who have access to large hospital facilities that				
			provide genetics services.				

			This county is primarily rural and has a smaller population. Due to the smaller community size, the		
			hospitals and clinics in these areas don't have the technology or equipment to handle complex		
			procedures or specialized services. Patients have to travel to providers in the larger metropolitan		
			areas where specialty providers work in large facilities where the technology and equipment needed		
			for complex cases are available.		
			There is a limited number of Reconstructive Surgery providers in the state; the metropolitan areas of		
			St. Paul/Minneapolis, St. Cloud, Duluth, Moorhead/Fargo/Grand Forks or Sioux Falls, SD. have services available through large care systems and consultations are also available through		
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Reconstructive Surgery	Douglas	1	regarding access to a particular type of provider are identified, the contracting department is notified		
			and when new providers are identified, a contract is pursued.		
			Gaps will be monitored on a quarterly basis and we will pursue contracts with new providers as they		
			are identified. No additional providers have been identified to date.		
			ENROLLEE ACCESS TO SERVICES IN 2020:		
			Referral to metropolitan area clinics and facilities		
			Reconstructive surgery services are performed at larger metropolitan care system hospitals and		
			locations. HealthPartners' contracted providers refer their patients to metropolitan area providers		
			who have access to large hospital facilities that provide reconstructive surgery services.		
			Provider clinics or outreach locations		
			Patients would be able to have consultations with reconstructive surgery specialists in some case.		
			Alomere Health (Alexandria Clinic), Carris Health, CentraCare, and Sanford Health provide outreach		
			services via telemedicine, including consultations and post-operative visits.		
			Network Reviews		
			There were two reviews of our network conducted in 2020 instead of quarterly due to COV-ID and		
			not having staff or resources available to conduct the quarterly reviews we usually do. Networks		
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Reason Code 1:

Carrier has conducted a search for providers and determined that, for each county in the plan service area, there are no providers physically present of the type requested in the waiver.

- 1. Provide a description of physical geography and/or other factors that affect the location of providers (as relevant)
- 2. Demonstrate consultation of at least two provider directories and/or data sources. Provide a description of the provider directories and/or data sources consulted, including a brief explanation of why the sources are believed to be accurate and complete. Examples of acceptable provider directories and data sources include, but are not limited to:
 - NPPES NPI Registry
 - Medicare Physician Compare Minnesota Health Care Programs Provider Directory
 - Healthgrades
 - SAMHSA Behavioral Health Provider Directories

 - National Institute of Health (NIH) U.S. National Library of Medicine MedlinePlus Directories Quest Analytics
- 3. For Primary Care, Pediatric Services (Primary Care), General Hospital and Mental Health provider types:
 - State the total number and percentage of estimated enrollees affected in the county not meeting the geographic standard as of the submission date of waiver. Select only one county per line.
 - State how access will be provided for this provider type for enrollees of the affected county.
 - For example, does the carrier provide transportation services/vouchers, in-home care options, virtual care services, and/or telemedicine services?
- 4. Describe how they will assess the availability of providers who begin practice in the service area where the standard cannot currently be met and agree to conduct this assessment quarterly
 - Assessment of availability must include consultation of at least two provider directories and/or data sources, as described in item 2, above

Reason Code 2:

Provider does not meet carrier's credentialing requirements.

Carriers must:

- 1. Cite the reason(s) provider does not meet credentialing requirements
- 2. For Primary Care, Pediatric Services (Primary Care), General Hospital, and Mental Health provider types
- State the total number and percentage of estimated enrollees affected in the county not meeting the geographic standard as of the submission date of waiver. Select only one county per line. 3. State how access will be provided for this provider type for enrollees of the affected county. For example, does the carrier allow enrollees to receive out-of-network care at in-network rates, provide transportation services/vouchers, in-home care options, virtual care services, and/or telemedicine services?

Reason Code 3:

Carrier has made a good faith effort to contract with provider and provider has refused to accept a contract.

Carriers must:

1. Cite the reason(s) provider state(s) for refusing contract(s)

- For Primary Care, Pediatric Services (Primary Care), General Hospital and Mental Health provider types

 State the total number and percentage of estimated enrollees affected in the county not meeting the geographic standard as of the submission date of waiver. Select only one county per line.

 State how access will be provided for this provider type for enrollees of the affected county. For example, does the carrier allow enrollees to receive out-of-network
- care at in-network rates, provide transportation services/vouchers, in-home care options, virtual care services, and/or telemedicine services?

Reason Code 4:

Network is an Accountable Care Organization (ACO) or Narrow Network.

Carriers must:

- Specify the network structure: Accountable Care Organization (ACO) or Narrow Network
 - If the network is an ACO, provide a brief description of the major health systems participating in the network
 - If the network is a narrow network, describe the features of the network that restrict access
 - For both ACOs and Narrow Networks, state what percentage of available Primary Care, Pediatric Services (Primary Care), General Hospital,
 - and Mental Health providers are included in the county and of the provider type for which a waiver is requested
- 2. State what, if any, steps are taken to inform enrollees of restricted access
- 3. State the total number of estimated enrollees in the network as of the submission date of the waiver
- 4. State why the geographic access standards cannot be met. Explain why full geographic access is not possible with this network design
- 5. State how access will be provided for this provider type for the enrollees of the affected county. For example, does the carrier allow enrollees to receive out-of-network care at in-network rates, provide transportation services/vouchers, in-home care options, virtual care services, and/or telemedicine services?
- 6. For Primary Care, Pediatric Services (Primary Care), General Hospital and Mental Health provider types,
 - State the total number and percentage of estimated enrollees affected in the county not meeting the geographic standard as of the submission date of waiver. Select only one county per line.
 - State the estimated percentage of area in that county that is not covered

Allowable Waiver Reason Codes and Guidelines for Subsequent Approval (Renewals)

In accordance with 62K.10 Subd. 5 (d), waivers will automatically expire after one year.

Carriers seeking identical, subsequent waivers for plan year 2022 will be required to show steps taken to address network inadequacies in plan year 2021 (see below).

Reason Code 1:

Carrier has conducted a search for providers and determined that, for each county in the plan service area, there are no providers physically present of the type requested in the waiver.

Carriers must:

- 1. Meet all of the requirements set forth for initial approval
- 2. Provide a description of how access was provided for affected enrollees in the previous approval year
- 3. Show evidence of quarterly efforts to assess provider availability throughout the last calendar year. Did new providers become available in affected areas? If so, describe any efforts to pursue contracts. If new providers became available and new contracts were not pursued, explain why.

Reason Code 2: