

Comment Number	Source of Comment: (Company Name)	2024 MA Application 60 day or 30 day	Application Part	Application Section
1	United Healthcare	60 Day	N/A	N/A - HPMS Memo
2	United Healthcare	60 Day	N/A	N/A - HPMS Memo

3	United Healthcare	60 Day	N/A	N/A
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Application Text (If applicable)

N/A

N/A

N/A

Comments & Recommendation(s) from Source	Type of Suggestion (Insertion, Deletion, or Revision)
<p>UHC recommends CMS release the annual updated Reference Files and the Sample Beneficiary Files in early October. CMS's release of the updated Reference Files and the Sample Beneficiary Files currently occurs in January. This release date can create a situation where all the counties and specialties in a service area may be meeting the HSD criteria throughout the year leading up to the January release date, but then the updates by CMS lead to new network variations (HSD failures) due to changes in maximum time and distance criteria and shifts among the beneficiary sample being assessed.</p>	<p>Revision</p>
<p>UHC recommends that there be no revisions to the Provider Supply file at least 3 months prior to formal HSD table submissions. Medicare Advantage organizations need time to prepare HSD tables and exceptions leveraging the provider supply file.</p>	<p>Revision</p>

<p>Our organization recommends that CMS issue specific guidance this summer (2022) related to these two new flexibilities so we can better understand the process of using the "10% credit" and LOIs and how CMS will evaluate organizations who utilize these flexibilities (i.e., is the temporary 10% credit in addition to the credits allowed by CMS for the use of Telehealth providers, how will the ACC results appear/will there be a new column to identify CMS's application of the temporary 10% credit, how will the use of these flexibilities impact the timing of network exception request filings with CMS, when and how will organizations need to demonstrate they meet network adequacy standards without the use of the 10% credit and LOI, etc.).</p>	<p>Revision</p>
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SME Response	CMS Decision (Accept, Accept with Modification, Reject, Clarify)
<p>Network adequacy reviews occur at a point in time. CMS expects organizations to be compliant with network adequacy standards at all times. The Network Management Module is programmed throughout the plan year with current year network criteria, as such we are unable to release the following year's reference file in advance. As a reminder, organizations will be able to test their current networks using the Evaluate My Network tool using current year standards at any time, and during formal network reviews organizations will have an opportunity to resubmit revised networks.</p>	<p>Reject</p>
<p>Thank you for your comment. As a reminder, the provider supply file is a reference tool that may be utilized by organizations when they are preparing their network submissions. However, organizations should not rely solely on the supply file when establishing networks. Given the dynamic nature of the market, the database may not be a complete depiction of the provider and facility supply available in real-time. Additionally, the supply file is limited to CMS data sources – organizations may have additional data sources that identify providers/facilities not included in the supply file used as the basis of CMS's network adequacy criteria.</p>	<p>Reject</p>

<p>Thank you for your comment. Additional guidance and training regarding the changes to our network adequacy regulations as a result of the CMS-4192-F final rule is forthcoming.</p>	<p>Clarify</p>
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