

ConnectiCare Commercial Networks

In selecting and tiering, if applicable, participating providers in our Commercial networks, ConnectiCare does not:

- Discriminate against high-risk populations by excluding or tiering participating providers because they are located in a geographic area that presents a risk of higher -than-average claims, losses or health care utilization;
- Exclude participating providers because they treat or specialize in treating populations that present a risk of higher-than-average claims, losses or health care utilization;
- Discriminate against any health care provider who is acting within the scope of his/her license or certification under state law.

ConnectiCare maintains commercial networks that provide reliable and consistent access to a large number of physicians. The networks are designed to meet state adequacy standards, which include ensuring that the physicians and facilities are geographically accessible and have availability to treat ConnectiCare members. ConnectiCare conducts audits on an annual basis or more frequently when significant changes to the networks or membership are anticipated and/or have already occurred.

The number and type of providers considered for participation in the ConnectiCare networks is based on the volume of membership at the county level and the types of providers needed to ensure all services are available.

Generally, ConnectiCare strives to meet the following accessibility standards for its commercial networks:

Measure	Service Goal
Primary Care Physicians: <ul style="list-style-type: none">• Family practice• Internal medicine• Pediatrics• General medicine• Adolescent medicine• Geriatric medicine• APRNs with panels	90% of members have access to two (2) physicians within eight (8) miles

High Volume Specialists: <ul style="list-style-type: none"> • Cardiologists • Dermatologists • Obstetrics & Gynecologists • Orthopedic Surgeons • Otolaryngologists • Podiatrists 	90% of members have access to two (2) physicians within fifteen (15) miles
Facilities/Health Delivery Organizations (HDOs): <ul style="list-style-type: none"> • Hospitals • Urgent care/Walk-in centers • SNFs 	90% of members have access to one (1) provider within twenty (20) miles
Essential Community Providers (ECPs):	ECPs in CT shall be contracted in the Exchange network at a percentage determined by Access Health CT

In addition, ConnectiCare strives to meet the following capacity and appointment wait time standards for its commercial networks:

Measure	Service Goal
Ratio of commercial members per PCP	1 PCP per 2,000 members
Ratio of commercial members per provider (any type)	1 provider (any type) per 1,200 members
Percentage of providers (PCPs and specialists) accepting new commercial patients	75% of all PCPs and specialists accept new patients

Type of Appointment	Timeframe
Urgent care	Within 48 hours
Non-Urgent appointments for primary care	Within 10 business days
Non-Urgent appointments for specialist care	Within 15 business days
Non-Urgent for non-physical mental health	Within 10 business days
Non-Urgent for ancillary services	Within 15 business days

Any Provider or Health Delivery Organization (HDO) selected for inclusion in a network must be appropriately licensed and meet credentialing requirements.

Providers

To ensure the integrity of its participating provider panel, ConnectiCare has developed policies and procedures for the credentialing of new applicants for participation in the network and the recredentialing of providers currently in the network. ConnectiCare participates in the CAQH "Universal Provider Datasource" (UPD) to help streamline the initial application and recredentialing process for providers.

In most circumstances, ConnectiCare requires that all members of a group practice, including mid-level practitioners, participate with ConnectiCare in order for the group to participate. The status of an individual provider within a group practice may disqualify the rest of the group. ConnectiCare may, at its discretion, waive application of this requirement in order to meet member access standards or to meet other business needs.

ConnectiCare does not discriminate in the selection or termination of practitioners on the basis of sex, age, national origin, race, religion, color, marital status or sexual preference or orientation.

Facilities/Health Delivery Organizations (HDOs)

To ensure the integrity of its participating health delivery organization panel, ConnectiCare has developed policies and procedures for the credentialing of applicants for participation in the ConnectiCare network and for the recredentialing of current health delivery organizations currently in the network.

The credentialing requirements for participation in the ConnectiCare health delivery organization network include, but are not limited to, the following:

Organization	Credentialing Requirements
Home Health Agency	State License, as required JCAHO or CHAP Accreditation Medicare Certification
Hospital	State License JCAHO Accreditation Medicare Certification
Surgical Center (free-standing)	State License Medicare Certification JCAHO, AAAHC, ADD, or AAAASF Accreditation
Office-Based Surgical Center	State License, as required Medicare Certification or Accreditation
Skilled Nursing Facility	State License JCAHO, CARF or CCAC Accreditation Medicare Certification