



**Memo Date:** December 20, 2018

**Memo Topic:** HCBS Provider Network Adequacy Requirement Reduction

**To:** All Medicare-Medicaid Plans

**From:** Dustin Welch, MHA, PAHM - South Carolina Department of Health and Human Services (SCDHHS)

## Background Information

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MMPs must maintain a home and community-based services (HCBS) provider network sufficient to offer services to all members as appropriate and medically necessary. The MMPs must extend contracts to every HCBS provider willing to provide services to the Healthy Connections Prime population.

In 2015, SCDHHS and its External Quality Review Organization (EQRO), The Carolinas Center for Medical Excellence (CCME), defined HCBS network standards for each service type to ensure MMP networks met the demand for a service in a county. The standards were developed based upon historical service utilization patterns by county, service authorizations, and provider availability. SCDHHS also considered the MMPs' potential volume of waiver members. At that time, it was determined that at least three (3) providers by service type were required in each county to ensure member choice.

## 2019 Network Adequacy Update

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Based on enrollment data and evaluation of the demonstration experience to date, SCDHHS has reduced the HCBS network adequacy requirements for network submissions beginning with CCME 2018 reviews and beyond. **The reduction from three (3) to two (2) providers by service type in each county is applicable to all counties except for the higher member count counties of Anderson, Charleston, Florence, Greenville, Richland, & Spartanburg, which remain unchanged.** While the network adequacy requirement has been reduced for most counties, SCDHHS expects that efforts to establish networks with 'any willing provider' continue and MMPs continue to manage the needs of the beneficiaries.

## Contact Information

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If you have questions, please contact:

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