



August 5, 2021

Mandy Weeks-Green  
Washington State Office of the Insurance Commissioner  
P.O. Box 40260  
Olympia, WA 98504  
Submitted via email to: [rulescoordinator@oic.wa.gov](mailto:rulescoordinator@oic.wa.gov)

Re: R 2021-16 Implementation of ESHB 1477 Stakeholder Draft

Dear Ms. Weeks-Green,

On behalf of Cambia Health Solutions family of insurance companies, including Regence BlueShield, Asuris Northwest Health, and BridgeSpan Health Company, thank you for the opportunity to comment on the stakeholder draft of the implementation of ESHB 1477 rule as well as the opportunities to engage in stakeholder conversations prior to a CR-102 of the draft rule being published. We look forward to partnering with the OIC to ensure effective implementation of the new requirements mandated by ESHB 1477. To this end, our internal subject matter experts have reviewed the legislation itself and the OIC's stakeholder draft and would like to offer the following comments for your consideration.

**WAC 284-170-280 Network reports—Format.**

We are significantly concerned with the weekly reporting requirement proposed in this section. The draft rule appears to imply that members will contact their health plan to schedule next day behavioral health appointments. Sec. 106 of ESHB 1477 requires that health plans "...make next day appointments *available* to enrollees experiencing urgent, symptomatic behavioral health conditions to receive covered behavioral health services. (emphasis added). ESHB 1477 does not require health plans to schedule the appointments, for good cause. We do not have access to provider scheduling systems and provider appointment availability is not shared with health plans on a real-time basis. We believe it is the role of the health plan to create robust provider networks and provide access to covered services for our members, and it is the role of the provider to manage and schedule the appointments.

As currently drafted, carriers may not be able to comply with the data elements required in the weekly reporting. Specifically, we do not have access to the number of available appointments, the number of appointments where the scheduling timeframe was met within one day, and the number of appointments where the scheduling timeframe was not met within one day. We would be completely reliant on providers to share this data with us. A health plan will not know if a member calls a provider directly to request a next-day appointment, and we will not know when a member was unable to get an appointment

within one day unless the member contacts us with that information. We are concerned about reporting requirements which fails to recognize that carriers do not have access to this provider data. Additionally, it places a significant administrative burden on both providers and carriers to create new data collection, storage, and sharing processes to comply with the proposed reporting requirements.

Carriers are already required to comply with robust network adequacy standards, and the requirement from SHB1477 to make next day behavioral health appointments available should not be treated differently. As an alternative to the proposed weekly report, we recommend carriers be required to demonstrate how they will ensure access to next-day behavioral health appointments through their annual network access plans.

Thank you for considering our comments. Please feel free to contact me with any questions or to discuss our feedback. I can be reached at [Jane.Douthit@Regence.com](mailto:Jane.Douthit@Regence.com) or (206) 332-5212.

Sincerely,

A handwritten signature in black ink that reads "Jane Douthit". The signature is fluid and cursive, with a long horizontal stroke at the end.

Jane Douthit  
Cambia Health Solutions  
Sr. Public & Regulatory Affairs Specialist