

September 7, 2021

Mandy Weeks-Green
Washington Office of the Insurance Commissioner
P.O. Box 40258
Olympia, WA 98504-0258
Sent via email to: rulescoordinator@oic.wa.gov

**RE: R 2021-14 Health Insurance Discrimination and Gender Affirming Treatment
Stakeholder Draft**

Dear Ms. Weeks-Green:

Thank you for the opportunity to provide comments regarding the Office of the Insurance Commissioner's (OIC) stakeholder draft for the health insurance discrimination and gender affirming treatment rule. Providence Health Plan (PHP) appreciates the thoughtful dialogue on this important issue and offers the following recommendations.

WAC 284-170-260 Provider directories.

The OIC included draft language in WAC 284-170-260(5)(g) that requires health plans to identify in their provider directories any providers contracted with the plan who offer gender affirming treatment and, more specifically, what gender affirming services the provider offers. This draft language goes beyond the health plan requirements granted in SB 5313 (2021). PHP is concerned with this requirement because most health plans do not contract with providers at a service-level nor do they contract with providers solely to perform gender affirming treatment and services. Also, providers offering gender affirming treatment and services do not voluntarily offer this specific information, nor are they required to. It will take a considerable amount of time for health plans to obtain this level of detail from contracted providers and subsequently alter their provider directories. Maintaining that specificity over time may not be feasible. PHP recommends the OIC remove this language until there is a reciprocal requirement for providers to communicate this information to their contracted health plans.

If the OIC maintains the draft language requiring changes to health plan provider directories, PHP recommends the required information from health plans indicate generally, not service-level, which providers offer gender affirming services in addition to the opportunity for further assistance in connecting members to specific providers through case management.

WAC 284-170-280 Network reports – Format.

In WAC 284-170-280(3)(f)(i)(J), the OIC requires health plans to provide a map identifying an adequate number of providers and facilities offering gender affirming treatment and specific services in their network. This language goes beyond the defined health plan requirements in SB 5313 and will create significant compliance challenges for health plans in Washington. While PHP continues to make great efforts to contract with licensed providers who include gender affirming treatment and services in their portfolio, there is still a shortage of available providers to accommodate the geographic area in our networks.

As stated earlier in our comments, there is no requirement on providers to identify to health plans they contract with the specific gender affirming treatment and services they offer. PHP contracts based on the provider type, specialty or license. Providers choose which services they will offer within the scope of their granting license. Until there is a requirement for providers to regularly indicate all specific services they offer to the health plans they contract with, PHP recommends the OIC remove the map requirement language.

We appreciate your consideration of PHP's comments on the stakeholder draft language. Please contact me if you require additional clarification or would like to discuss the content of this letter.

Sincerely,

Jennifer Baker
Director of Government Affairs
Providence Health Plan