# ATTACHMENT F Provider Network Submission Instructions

# A. Participating Provider Network Reports:

The Provider Network Data System (PNDS) was implemented by DOH in December of 1996 to gather information about the provider and service networks contracted to manage care plans operating in New York State. PNDS is accessed through an Internet connection to the Health Commerce System (HCS), also known as the Health Provider Network (HPN), a secure Intranet site requiring an ID and password. The primary purpose for the PNDS is to collect data needed to evaluate the provider networks including physicians, hospitals, labs, home health agencies, durable medical equipment providers, etc., for all types of plans in New York State.

Exchange Participants shall submit electronically, to the Health Commerce System (HCS), an updated provider network report on a quarterly basis for all plan types offered through the Exchange. Exchange Participants shall submit an annual notarized attestation that the providers listed in each submission have executed an agreement with the Exchange Participant to serve the Participant's Enrollees. The report submission must comply with the Provider Network Data Dictionary. Networks must be reported separately for each county in which the Exchange Participant operates and on a product-by-product basis.

#### B. Uses of PNDS Data:

# 1. Provider eligibility assessment:

PNDS data is matched against information on professional licensing, Office of Professional Medical Care sanctions, and Medicaid and Medicare provider eligibility, to assure that only qualified providers are delivering health care to plan members. Facilities are checked for valid operating certificate numbers and that operating certificate numbers match the type of facility indicated.

#### 2. Comprehensive services assessment:

DOH conducts network assessments to assure that comprehensive health services are available as required under Section 4403 of the Public Health Law. The Office of the New York Health Benefit Exchange uses data from the PNDS to assess whether a plan has contracted with an appropriate range of primary care practitioners, clinical specialists and service facilities (hospitals, labs, etc.) within the plan's service area. Evaluations are completed on plans serving all populations.

# C. Connection to the Health Commerce System (HCS) and Provider Network Data System (PNDS)

Connection to the PNDS is through a secure connection to the HCS at

*https://commerce.health.state.ny.us/hcsportal/appmanager/hcs/*home. All users must have an HCS account and access to the PNDS page. The first time a user attempts to access the PNDS page they will be prompted with an access permission form, for which they must fill out. It takes about ten (10) days to obtain an HCS account once the notarized forms are received by the Department of Health. PNDS access forms are processed daily. Plans having difficulty accessing the PNDS page can contact the Provider Network / MEDS Data Compliance Unit at (518) 474-5050 for further assistance.

### D. Data Submission Schedule

The first provider network submission must occur on or around April 12, 2013 but no later than April 15, 2013. Thereafter provider network data is collected quarterly for all Exchange products offered.

Provider network submissions are a snapshot of the network taken the week of the quarter in which the last day falls. Quarters end March 31, June 30, September 30, and December 31. The snapshot week includes the last day wherever it falls in the week. For example, if the 31st is a Wednesday, the week would be the 29th through the 2nd.

Exchange Participants will have at least 15 business days after the end of each quarter, to submit their regular data files. Test submissions may be submitted at any time. Other submissions include corrections and service area expansions are submitted on an as needed basis and may be requested by contacting the Office of the New York Health Benefit Exchange at nyhxpm@health.state.ny.us.