

**Department of Managed Health Care (DMHC) Report on Anthem CC Network  
Summary of key findings relevant to SLO County and PHD's experience transitioning CMSP clients  
into Covered CA insurance plans and our own provider network survey.**

Source: SLO Public Health Dept. internal email dated 11/19/14 from Jennifer Shay to Dr. Penny Borenstein and Health Care Services Division staff.

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**SLO County Findings**

- 27 sample size (called 27 providers--unknown how many were PCP v Specialty)
- 2 don't accept CC
- 4 no longer practicing
- 20 accept CC (counted if they accept ANY of the CC plans, not necessarily all plans)
  - Of those, 16 accept new pts w/ CC, 4 not accepting new pts w/ CC
- 261 providers listed in directory

**Statewide Findings**

- 3,272 total sample size (1,740 in EPO/PPO all specialties category)
  - 12.8% providers don't accept CC
  - 12.8% providers not at location
  - 56% accept CC
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- Purpose of the DMHC survey was to "obtain confirmation of the physicians' contracting status and availability to take new patients."
  - Report concludes that Anthem misled consumers about the size of their provider networks, especially network coverage for Covered CA plans.
  - Good news is that this report serves to document the plan's violations and a follow up survey is planned in six months.
  - Survey was "designed to duplicate the consumer experience;" however, I think they missed several opportunities to realistically duplicate the consumer experience. In many ways, I think our survey of the SLO County provider network was better designed to duplicate the consumer experience and had the potential to yield more valuable information. Even though our survey efforts missed the mark on documenting and reporting our findings, I think we ultimately gained a better understanding of our CC provider network than what is provided in this DMHC report.
  - The DMHC telephone survey was conducted in June-July 2014 and was limited to the Anthem Blue Cross Covered CA Provider Network Directory (dated June 9, 2014). We conducted our survey in May-June 2014, which included both Anthem and Blue Shield Covered CA PPO provider networks.
  - The DMHC report doesn't clearly state if the provider network surveyed includes all types of providers or is limited to PCPs. Based on the survey methodology (p 44 Overview) Plan rosters were separated into three groups: (1) HMO-primary care; (2) HMO-any (non-primary care) specialty; and (3) EPO/PPO-all specialties(SLO County is Pathways PPO), therefore, it appears the survey probably included all provider types. Unfortunately though, the providers surveyed were taken from a random sampling of the groups listed above, and our group, EPO/PPO-all specialties, does not differentiate PCP or specialty type. Survey findings for the HMO plans, however, do separate PCP and Specialty providers, but not further by type of specialty.
  - Historically, DMHC does not monitor or enforce standards for access to specialty care. Outside the context of the survey, the report states (p 19) that DMHC reviews network adequacy based on the inclusion of PCPs.
  - "Resulting Sample" (defined on p 45) was comprised of the following: (1) *physicians willing to participate in survey;* (2) *physicians no longer practicing at the designated location;* and (3) *physicians whose offices did not answer numerous phone calls.*
  - I don't know enough to comment on how the sample size was obtained, but here's how they describe it (p 44): *Sample sizes for each group were selected to yield statewide sample precision levels of 2.5 % at the 95-% confidence level. All samples were stratified according to county. The final or "resulting" universe for sampling totaled 40,025 providers across all counties.*
  - Article in today's California Healthline: <http://www.californiahealthline.org/articles/2014/11/19/anthem-blue-shield-violated-state-law-dmhc-report-finds>