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The Inadequacy of Network Adequacy: When the Model Falls Short



Meet Grace

She's a 70 year-old immunocompromised woman living in a rural area. She doesn't drive anymore so she relies on her son for transportation. When she's able to schedule her medical appointments well in advance. he's able to take time off to drive her to them.



But what happens when she comes down with the flu?

According to CMS rules she's within 30 miles of a qualified primary care physician. In reality, she has to drive 45 miles each way to reach her PCP due to the unique geography of her rural area.

challenges & barriers



from the nearest town

A river separates her



alternative is an

expensive ER visit



in advance, Grace's son can't take off work



that crosses the river to get in-network care



suffering serious

complications and an avoidable hospital admission Why is this problematic?

Grace has healthcare coverage that meets the CMS definition



economic challenges, and the need to weigh immediate costs against long-term health outcomes result in not receiving the care she needs. Adequacy standards were designed to ensure patients receive quality care, but has clearly failed in a case like this. How can health plans

of adequacy but the reality of her life – transportation challenges,

At a baseline level, health plans should adopt geo-spatial computational models and data analytics to leverage dynamic,

address it?

true-to-life time/distance data to provide patients with real-world access to quality care. Implementing such an approach will reduce the need for patients like Grace to make tough choices that de-prioritize their health. Achieving superior health outcomes at comparable costs will give payors a distinct advantage in the highly competitive world of Medicare Advantage and other state Medicare and Medicaid contracts.

Learn more about how to build the next generation of provider networks in this new whitepaper from andros.