Washington State SERFF Carrier Provider Agreement and HCBM Contract Filing General Instructions

These instructions apply to Health Care Service Contractor, Limited Health Care Service Contractor, Health Maintenance Organization, and disability issuer (referred to collectively as "carriers") filings for all provider agreements, facility agreements, and contracts and contract amendments with Health Care Benefit Managers (HCBM).

<u>If you are a Health Care Benefit Manager</u>: Please see the "Washington State SERFF Health Care Benefit Management General Filing Instructions" for filing requirements.

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I. Filing Requirements for all Provider and Facility Agreements; Carrier Agreements with HCBMs

A. All Provider, Facility, and Carrier Agreements with HCBMs must be filed in SERFF:

RCW 48.43.730 and WAC 284-170-480 require participating provider and facility contract forms to be in writing and filed for prior approval for Health Care Service Contractors, Health Maintenance Organizations, and Disability Issuers.

RCW 48.43.731 and WAC 284-180-455 require all carrier contracts with Health Care Benefit Managers to be filed within 30 days of the contract's effective date.

- 1. If you are a **new carrier** in Washington or are filing a product, such as but not limited to a health plan, dental plan, vision plan, or pharmacy benefit plan, that uses a provider network you have not previously used, you must file <u>all</u> provider contracting materials subject to review and approval under RCW 48.43.730, as well as any currently executed contracts with HCBMs prior to or concurrent with filing rates and forms.
- 2. These filing instructions apply specifically to Provider and Facility Agreements filed under TOIs NA01.000 and NA01.003, as well as carrier contracts with HCBMs filed under TOI NA01.003.
- You must properly identify the type of agreement being filed by following the Product Name field requirements for TOIs NA01.000 and NA01.003 in the SERFF Submission Requirements.

- 4. Product names for filings must follow the SERFF Submission Requirements. Based on the Sub-TOI used, the Product Name field must **clearly state**, as appropriate, whether the filing is "for public" or "not for public".
- 5. In addition to the Product Name field requirements, Health carrier submissions with HCBMs filed under RCW 48.43.731 must prominently request the filing be kept "not for public" in the Filing Description field
- 6. Network Access reports <u>may not</u> be filed in SERFF. For instructions on filing these reports, please see "Network Access Report Submission Instructions" located at the OIC Website (<u>www.insurance.wa.gov</u>). Click on the "For Insurers and Regulated Entities" tab, then under "Filing Instructions" choose "Network Access".
- 7. It is <u>very important</u> to check your message center in SERFF for Notes to Filer and Objection Letters, as our Intake Unit uses this method to communicate requests for corrections and our Analysts use this to communicate issues during the review process.

B. General Provisions:

- 1. In your initial submission, all forms that comprise your filing must be in **final format** and attached on the Form Schedule tab.
 - a. All filed forms must be in PDF format.
 - b. You must list all filed forms in separate lines on the Form Schedule tab and enter form numbers correctly. Each form listed on the Form Schedule tab must have only one unique identifying form number.
 - c. Each form filed must have a unique identifying number (in the lower left corner of the document) and a way to distinguish it from other versions of the same form. For example, a version number or date may be used at the end of the form number. (WAC 284-44A-050(1)(a)(ii), WAC 284-46A-050(1)(a)(ii), WAC 284-180-425(1)(a)(ii))
 - i. A form retains the same form number throughout the review process.

- ii. A previously approved form which has undergone any revision outside the review process is a new form. This means you may not file a revised version of a previously approved form using the same form number.
- d. Please attach any supporting documentation for forms filed for review on the Form Schedule tab in SERFF, such as strikeout/redline documents and variability statements, under the Supporting Documentation tab.
- e. When a carrier modifies a previously filed and approved provider agreement, it <u>must</u> refile the modified agreement and submit it with a new unique form number and include a strikeout and/or underline (redline) version showing the changes to the documents (WAC 284-170-480(2)(a)(ii)). Strikeout and/or underline (redline) versions must be filed on the Supporting Documentation tab.
- f. When a carrier negotiates, amends, or modifies a previously filed contract or compensation agreement with an HCBM, it <u>must</u> refile the modified agreement and submit it with a new unique form number within 30 days following the effective date and include a strikeout and/or underline (redline) version showing the changes to the documents. (WAC 284-180-425(1)(a)(ii), WAC 284-180-445, WAC 284-180-455)
- g. You may not encrypt or otherwise electronically protect any document filed with OIC for review. We must be able to make a PDF copy of each of your forms.
- 2. Amending a filing:
 - a. You may make changes to your filing in response to a Note to Filer from our Intake Unit prior to acceptance of your filing.
 - b. You may make any changes to the forms in your filing that are required as the response to an Objection Letter. Those changes may be made at any time between receipt of the Objection Letter and the "respond by" date in the Objection Letter.
 - c. To coordinate making an amendment with your Analyst, you must send a Note to Reviewer in the filing requesting to make the change. The Note to Reviewer must be sent in the filing you are requesting to change and

include specific details of the change requested. Your Analyst will respond to your request in a Note to Filer. The Analyst may:

- i. Authorize you to make the change immediately;
- ii. Request that you make the change later during the review process;
- iii. Advise you of any specific compliance concerns about the change you requested;
 - or
- iv. Instruct you to withdraw the filing and refile once all issues are resolved.
- d. Do not make any modifications other than as specifically authorized by your Analyst in the Note to Filer. If a subsequent need to further amend your filing is discovered, please follow the Note to Reviewer process as outlined in step 2c.
- 3. "Corresponding Filing Tracking Number" field in SERFF:
 - a. You must complete the "Corresponding Filing Tracking Number" field if there is a required corresponding filing. (Note that this field can be changed via post-submission update if necessary.)
 - i. "Corresponding Filing Tracking Number" is the number for a filing that is required to be filed in relation to the current filing.
 - ii. A corresponding filing tracking number must be a SERFF tracking number. It cannot be a state tracking number, company tracking number, or form number.
- 4. To expedite your filing, you may include a completed copy of the <u>Provider and Facility</u> <u>Checklist</u> on the Supporting Documentation tab. You can find the checklist on our website, or within the "Filing Rules" section in SERFF.
 - a. For filings subject to review and approval under RCW 48.43.730: If you choose to include a checklist as a supporting document, please note that you may only include it in "for public" filings.
 - b. For carrier agreement filings with HCBMs filed under RCW 48.43.731: If you choose to include a completed checklist, you may attach the document under the Supporting Documentation tab.
- 5. You must make a separate submission for each contract template, negotiated agreement, provider contract (for intermediary network contract filings), and carrier agreement with an HCBM. You may not file multiple agreements (i.e., provider, facility, ancillary, etc.) in one SERFF submission (WAC 284-44A-020; WAC 284-46A-020; WAC 284-58-010; WAC 284-180-411).

- 6. For filings subject to prior approval: you must populate the "Effective Date Requested" field with either "On Approval," or a specific date pursuant to RCW 48.43.730(2) or RCW 48.43.730(2)(b).
- 7. **For carrier agreements with HCBMs**: The filing must include a common implementation date for all forms submitted in the filing. (WAC 284-180-450)

C. Variability Allowances:

- 1. **"For Public" template provider and facility agreements:** Limited variability in the filing will be accepted for the purposes of defining dates, time frames, liability insurance amounts, network participation and provider demographics. A variability statement must be included under the Supporting Documentation tab.
- 2. **"Not for Public" template provider and facility agreements:** Limited variability in the template filing will be accepted for the purposes of defining procedure codes compensation amounts, and compensation based on network participation. A variability statement must be included under the Supporting Documentation tab.
- 3. Intermediary Network Contract templates (see II.C): (includes leased networks, administrative service arrangements, and provider network management contracts) Limited variability in the intermediary's <u>downstream</u> provider contract template filing will be accepted for the purposes of defining dates, time frames, liability insurance amounts, network participation (RCW 48.43.730(7)), compensation, and provider demographics. A variability statement must be included on the Supporting Documentation tab. Bracketing and variability <u>will not</u> be accepted on the <u>upstream</u> agreement.
- 4. Service Contract filings (see III.B): Bracketing and variability will not be accepted.

II. Provider and Facility Agreement Filings (RCW 48.43.730)

A. Contract Templates:

- 1. Contract templates must be issued exactly as approved (WAC 284-170-480(2)(a)).
- 2. "For public" Filings:
 - a. A Washington State specific template must include all forms, exhibits, and appendices (minus the provider compensation schedule) filed on the Form Schedule tab.

- b. A national template with a Washington State Regulatory Appendix must include all forms, exhibits, regulatory appendix (minus the provider compensation schedule), etc., filed on the Form Schedule tab.
- c. If you are filing a "for public" document only, please provide a detailed explanation in the General Information section.
- d. A contract template addendum or amendment to the core agreement template must be filed for approval and include a copy of the core agreement and all subsequent addenda or amendments filed on the Form Schedule tab.
- 3. "Not for public" Filings:
 - a. The compensation schedule(s) must be filed on the Form Schedule tab.
 - b. Changes to a previously filed and approved provider compensation agreement modifying the compensation amount or terms related to compensation must be filed and are deemed approved upon filing if there are no other changes to the previously approved provider contract or compensation agreement (WAC 284-170-480(2)(a)(iii)).
 - c. If you are filing to update contract template compensation per WAC 284-170-480(2)(a)(iii), you are not required to refile the "for public" submission concurrently if there are no changes to the "for public" contract template agreement.
 - i. The Filing Description field must clearly state that no "for public" filing is required.
 - ii. The "Corresponding Filing Tracking Number" field in SERFF must point back to the most recent approved or deemed "for public" template filing (RCW 48.43.730(2)(b)).
 - d. Revised template compensation exhibits must have a unique form number. A strikeout and/or underline (redline) version is <u>not required</u> for compensation exhibits.

B. Negotiated Provider and Facility agreements:

- All negotiated contracts and compensation agreements must be filed with the commissioner for approval thirty calendar days prior to use and <u>include all</u> <u>contract documents between the parties</u> (WAC 284-170-480(2)(b)(i)). This means that if either a contract **or** a compensation agreement is negotiated (outside of approved variability), both the contract and compensation agreement must be filed and include a new, unique form number.
- 2. "For public" Filings:
 - a. The filing must include the provider– or facility- specific agreement documents that will include, but may not be limited to: core agreement, exhibits, and any regulatory appendices filed on the Form Schedule.
 - b. A contract addendum or amendment to the core agreement must be filed for approval and include a copy of the core agreement and all subsequent addenda or amendments (minus provider compensation exhibits) filed on the Form Schedule tab (WAC 284-170-480(2)(b)(i)).
 - c. Revised negotiated agreements must include a strikeout and/or underline (redline) version showing the changes to the documents (WAC 284-170-480(2)(a)(i)). This document must be filed on the Supporting Documentation tab.
 - d. If you are filing a "for public" document only, please provide a detailed explanation in the General Information section as to why a corresponding "not for public" filing is not required (e.g., changes only made to "for public" portion of contract).
- 3. "Not for public" Filings:
 - a. The compensation schedule(s) must be filed on the Form Schedule tab.
 - b. If the only negotiated change is to the compensation amount or terms related to compensation, it must be filed and is deemed approved upon filing (WAC 284-170-480(2)(b)(ii)).
 - i. The "Corresponding Filing Tracking Number" field in SERFF must point back to the most recent approved or deemed "for public" negotiated agreement filing (RCW 48.43.730(2)(b)).

Please note: WAC 284-170-480(2)(b)(i) requires that negotiated contract submissions must include all contract documents between the parties. If the provider or facility core agreement is a contract template, but you negotiate compensation outside of the compensation range in

the contract template filing, the filing is now fully negotiated, and you must submit both the entire contract for review including the requirements to submit a "for public" and "not for public" documents as negotiated. (See II.B.1)

Once you have a full negotiated contract on file per WAC 284-170-480(2)(b)(i), you may then update compensation filings per WAC 284-170-480(2)(b)(ii) and you will not be required to refile the fully negotiated contract with the "for public" submission if there are no changes to the core agreement.

c. Revised negotiated compensation exhibits must have a new unique form number. A strikeout and/or underline (redline) version is <u>not</u> required for compensation exhibits.

C. Intermediary Network Contracts (leased networks, administrative service arrangements, and provider network management contracts):

A carrier must file intermediary provider contracts (RCW 48.43.730(1)(b)(iv)) and Health Care Benefit Management provider network management contracts (RCW 48.43.731 and RCW 48.200.020(4)(a)(xi)). Effective January 1, 2022, the intermediary provider contract filing will be treated as confidential and not subject to public inspection per RCW 48.43.730(5), RCW 48.43.731(3), and RCW 48.200.040(3) if the filing is submitted through the SERFF system and it meets the general filing instructions. If a form filing does not meet the filing instructions and the Health Carrier **has** indicated in the SERFF Filing Description field that the filing is to be withheld from public inspection, then it shall be rejected. When a filing is rejected, it is not considered to be submitted to the OIC for review. If a form filing does not meet the filing instructions and the Health Carrier **has not** indicated in the SERFF Filing Description field that the filing is to be withheld from public inspection, the filing is to be withheld form public record and available for public review.

- 1. A **Washington State specific provider contract template** must include all forms, exhibits, appendices, and provider compensation schedule filed on the Form Schedule tab.
 - a. Provider contract templates must be filed exactly as executed in the marketplace.
 - b. A provider contract addendum or amendment to the core agreement must be filed and include a copy of the core agreement and all subsequent addenda or amendments filed on the Form Schedule tab.

- 2. A **National provider contract template with a Washington State Regulatory Appendix** must include all forms, exhibits, regulatory appendix, provider compensation schedule, etc., filed on the Form Schedule tab.
 - a. Provider contract templates must be filed exactly as executed in the marketplace.
 - b. A provider contract addendum or amendment to the core agreement must be filed and include a copy of the core agreement and all subsequent addenda or amendments filed on the Form Schedule tab.
- 3. **Negotiated provider contract filings** must include the provider- or facilityspecific provider contract documents that will include, but may not be limited to: core agreement, exhibits, provider compensation schedule and regulatory appendices filed on the Form Schedule tab.
 - a. All negotiated provider contracts and compensation agreements must be filed and include all contract documents between the parties. This means that if either a contract or a compensation agreement is negotiated (outside of filed variability), both the contract and compensation agreement must be filed.
 - b. The filing must include the provider or facility specific agreement documents that will include, but may not be limited to core agreements, exhibits, compensation, and any regulatory appendices filed on the Form Schedule tab.
 - c. A provider contract addendum to the core agreement must be filed and include a copy of the core agreement and all subsequent addenda or amendments and provider compensation exhibits filed on the Form Schedule tab.
 - d. Revised negotiated agreements must have a unique form number.
- 4. You must file a copy of the intermediary (network leasing, administrative service, or provider network management) agreement between the parties on the Form Schedule tab for review.
 - a. An intermediary agreement means all contracts (including amendments) between the Issuer and other parties that, together, form the contract between the Issuer and the intermediary.

III. Carrier Agreements with HCBMs (RCW 48.43.731):

A carrier must file the contracts between the carrier and the Health Care Benefit Manager (RCW 48.200.020(4)(a)). The filings will be treated as confidential and not subject to public

inspection per RCW 48.43.731(3) if the filing is submitted through the SERFF system and it meets the general filing instructions. If a form filing does not meet the filing instructions and the Health Carrier **has** indicated in the SERFF Filing Description field that the filing is to be withheld from public inspection, then it shall be rejected. A rejected filing has not been submitted to the OIC for review. If a form filing does not meet the filing instructions and the Health Carrier **has not** indicated in the SERFF Filing Description field that the filing is to be withheld from public inspection, the filing will be accepted as a For Public record and available for public review.

A. Provider Network Management Filings (see section II.C.)

B. Service Contract Filings (RCW 48.200.020(4)(a)(i)-(x) and (xii)):

- 1. You must submit service contracts under TOI NA01.003
- 2. Your complete submission must include all terms and conditions of the contract, contract amendment(s), and compensation within 30 days following the effective date of the contract or contract amendment. (WAC 284-180-455)
 - a. If you modify the contract or compensation in any manner, including negotiate, amend, or modify the contract or compensation, it must be filed within thirty days following the effective date of the modification.
- 3. The SERFF Product Name field must be populated using the specific type of service contract (RCW 48.200.020(4)(a)(i)-(xii)) first and the contracting party second. For example:
 - a. Correct Product Name: Outcome Measurement Contract with HCBM Company Name
 - b. Incorrect Product Name (will require correction): General Template

IV. Your Filing Will Be Rejected If

A. Incorrect Product Name:

1. Your filing must use the correct Product Name format on the General Information tab as set forth in these Instructions. You will be given an opportunity to correct this field if needed. The filing will be rejected if the field is not corrected.

B. You have failed to identify a required corresponding filing:

- 1. See Section I.B.3, II.A.3, or II.B.3 of these instructions above.
- 2. You will be given an opportunity to correct this field if needed. The filing will be rejected if the field is not corrected.

C. We cannot download your filing into our back-office system:

- 1. There are several reasons why we may not be able to download filings into our back-office system. The most common reasons include:
 - a. Attachments are not in PDF format.
 - b. An incorrect CoCode number is entered in the Filing Company Information, under the Companies and Contact tab. This CoCode number is the same number as your company's 5-digit NAIC number.
 - c. You include an incorrect Type of Insurance (TOI) or Sub-TOI as listed on the NAIC Uniform Life, Accident & Health, Annuity and Credit Product Coding Matrix.
 - i. The matrix <u>www.insurance.wa.gov/filing-instructions</u>. Choose "SERFF Filing Guidelines" under Filing Instructions.
 - d. You filed multiple provider agreements in one submission.

D. Public Disclosure Issues:

1. You filed "for public" documents in a "not for public" filing.

E. Incorrect TOI or Sub-TOI:

- 1. You filed an Intermediary Contract Agreement or a Service Contract using Sub-TOI NA01.000 instead of NA01.003
- 2. You filed using H21 or HOrg03 types of insurance.

F. Rejected filings will not be re-opened:

1. If the OIC Technical Support Unit rejects your filing, you must submit a new filing following the procedures in our Rejection Notice and General Instructions.

V. Requirements for Responses to SERFF Objection Letters

A. All attachments to responses must be in PDF format.

B. When responding to an Objection Letter, you must:

- 1. Amend your filing as necessary to respond to an objection.
- 2. When making changes to an already submitted form, attach a revised document on the Form Schedule tab.
- 3. Add a Schedule Item on the Form Schedule tab to add additional forms not previously submitted.

- 4. Revise exhibits and supporting documentation as necessary on the Supporting Documentation tab.
- 5. Add exhibits and supporting documentation as necessary to the Supporting Documentation tab.
- 6. Respond to each objection using the SERFF response letter process.
- 7. If a Form Schedule Item is no longer to be considered part of the filing:
 - a. Remove the PDF attachment from the Form Schedule tab.
 - b. Update the status for the affected item to show as "Withdrawn" in the action column of the Form Schedule tab.
- 8. If an Objection Letter indicates that your Analyst has listed examples of an issue that exists throughout the filing, you must correct **ALL** instances where that issue occurs. Do not correct the issue only in the places listed in the examples. You must review the entire form(s), identify each place the issue occurs, and correct it in each place. Failure to do so delays review. Review of your filing may be stopped while another Objection Letter is sent asking you to complete the corrections.
- 9. The Objection Letter response is not the place to ask questions. Any clarifying questions are better addressed through a Note to Reviewer or a telephone call to the Analyst reviewing the filing prior to submitting the Objection Letter response.
- 10. Forms attached on the Form Schedule tab must be submitted in their clean, final format.

VI. For Questions Related to SERFF Filing Procedures, Contact:

Rates, Forms & Provider Networks Help Desk

(360) 725-7111

rfhelpdesk@oic.wa.gov