

Network Adequacy and Access Assurances (NAAAR) Report for Georgia: Georgia Families

Submission name	Plan type	Reporting period start date	Reporting period end date	Last edited	Edited by	Status
Georgia Families	MCO	07/01/2024	06/30/2025	12/17/2025	Jay Perrault	Submitted

Section I. State and program information

A. State information and reporting scenario

Who should CMS contact with questions regarding information reported in the NAAAR? Follow-on communications related to this report will be made to the primary contact.

Use this section to report your contact information, date of report submission, and reporting scenario.

Number	Indicator	Response
IA.1	Contact name First and last name of the contact person.	Shanique Horne
IA.2	Contact email address Enter email address. Department or program-wide email addresses are permitted.	shanique.horne@dch.ga.gov
IA.3	State or territory Auto-populates from your account profile.	Georgia
IA.4	Date of report submission CMS receives this date upon submission of this report.	12/18/2025
IA.5	Reporting scenario Enter the scenario under which the state is submitting this form to CMS. Under 42 C.F.R. § 438.207(c) - (d), the state must submit an assurance of compliance after reviewing documentation submitted by a plan under the following three scenarios:Scenario 1: At the time the plan enters into a contract with the state;Scenario 2: On an annual basis;Scenario 3: Any time there has been a significant change (as defined by the state) in the plan's operations that would affect its adequacy of capacity and services, including (1) changes in the plan's services, benefits, geographic service area, composition of or payments to its provider network, or (2) enrollment of a new population in the plan.States should complete one (1) form with information for applicable managed care plans and programs. For example, if the state submits this form under scenario 1 above, the state should submit this form only for the managed care plan (and the applicable managed care program) that entered into a new contract with the state. The state should not report on any other plans or programs under this scenario. As another	Scenario 2: Annual report

example, if the state submits this form under scenario 2, the state should submit this form for all managed care plans and managed care programs.

B. Add plans

Enter the name of each plan that participates in the program for which the state is reporting data. If the state is submitting this form because it's entering into a contract with a plan or because there's a significant change in a plan's operations, include only the name of the applicable plan.

Plan names should match the plan names used in your Managed Care Plan Annual Report (MCPAR) for this program for the same reporting period.

Indicator	Response
Plan name	Amerigroup
	CareSource
	Peach State

C. Provider type coverage

If your standards apply to more specific provider types, select the most closely aligned provider type category and utilize the subcategory fields available in Section II. Program-level access and network adequacy standards under "Provider type covered by standard".

Number	Indicator	Response
N/A	Select all core provider types covered in the program	Primary Care Specialist Mental health OB/GYN Hospital Pharmacy Dental

D. Analysis methods

States should use this section of the tab to report on the analyses that are used to assess plan compliance with the state's 42 C.F.R. § 438.68 and 42 C.F.R. § 438.206 standards.

Number	Indicator	Response
N/A	<p data-bbox="313 107 704 180">Is this analysis method used to assess plan compliance?</p> <p data-bbox="313 201 678 359">Select “Yes” if the method is utilized to assess plan compliance with the state’s standards, as required at 42 C.F.R. § 438.68.</p>	<p data-bbox="813 138 992 170">Geomapping</p> <p data-bbox="813 191 911 218">Utilized</p> <p data-bbox="813 239 1089 266">Frequency: Quarterly</p> <p data-bbox="813 287 1328 340">Plan(s): Amerigroup, CareSource, Peach State</p> <p data-bbox="813 382 1247 413">Plan Provider Directory Review</p> <p data-bbox="813 434 964 462">Not utilized</p> <p data-bbox="813 501 1349 533">Secret Shopper: Network Participation</p> <p data-bbox="813 554 911 581">Utilized</p> <p data-bbox="813 602 1089 630">Frequency: Quarterly</p> <p data-bbox="813 651 1328 703">Plan(s): Amerigroup, CareSource, Peach State</p> <p data-bbox="813 743 1224 816">Secret Shopper: Appointment Availability</p> <p data-bbox="813 837 911 865">Utilized</p> <p data-bbox="813 886 1089 913">Frequency: Quarterly</p> <p data-bbox="813 934 1328 987">Plan(s): Amerigroup, CareSource, Peach State</p> <p data-bbox="813 1026 1263 1100">Electronic Visit Verification Data Analysis</p> <p data-bbox="813 1121 964 1148">Not utilized</p> <p data-bbox="813 1188 1360 1220">Review of Grievances Related to Access</p> <p data-bbox="813 1241 964 1268">Not utilized</p> <p data-bbox="813 1308 1154 1339">Encounter Data Analysis</p> <p data-bbox="813 1360 964 1388">Not utilized</p> <p data-bbox="813 1428 1268 1501">Focus Study of Sampled Provider Network</p> <p data-bbox="813 1522 911 1549">Utilized</p> <p data-bbox="813 1570 1256 1623">Description: Analyzed wait times throughout the Provider Network.</p> <p data-bbox="813 1644 1089 1671">Frequency: Quarterly</p> <p data-bbox="813 1692 1328 1745">Plan(s): Amerigroup, CareSource, Peach State</p>

Section II. Program-level access and network adequacy standards

II. Program-level access and network adequacy standards

Report each network adequacy standard included in managed care program contract for this program as required under 42 CFR § 438.68; select "Add standard" to report each unique standard. 42 § CFR 438.206 standards will be addressed in section III. Plan compliance.

Standard total count: 34

#	Provider	Standard type	Standard description	Analysis methods	Pop.	Region
1	Primary care; PCP	Maximum time or distance	Two (2) within eight (8) miles for 90% of members in county	Geomapping	Adult	Urban
2	Primary care; PCP	Maximum time or distance	Two (2) within fifteen (15) miles for 90% of members in county	Geomapping	Adult	Rural
3	Primary care; Pediatrician	Maximum time or distance	Two (2) within eight (8) miles for 90% of members in county	Geomapping	Pediatric	Urban
4	Primary care; Pediatrician	Maximum time or distance	Two (2) within fifteen (15) miles for 90% of members in county	Geomapping	Pediatric	Rural
5	Specialist	Maximum time or distance	One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county	Geomapping	Adult and pediatric	Urban
6	Specialist	Maximum time or distance	One (1) within forty-five (45) minutes or forty-five (45) miles	Geomapping	Adult and pediatric	Rural

			for 90% of members in county			
7	Dental; General Dental Providers	Maximum time or distance	One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county	Geomapping	Adult and pediatric	Urban
8	Dental; General Dental Providers	Maximum time or distance	One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county	Geomapping	Adult and pediatric	Rural
9	Dental; Dental Subspecialty Providers	Maximum time or distance	One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county	Geomapping	Adult and pediatric	Urban
10	Dental; Dental Subspecialty Providers	Maximum time or distance	One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county	Geomapping	Adult and pediatric	Rural
11	Hospital	Maximum time or distance	One (1) within thirty (30) minutes or thirty (30)	Geomapping	Adult and pediatric	Urban

			miles for 90% of members in county			
12	Hospital	Maximum time or distance	One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county	Geomapping	Adult and pediatric	Rural
13	Mental health	Maximum time or distance	One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county	Geomapping	Adult and pediatric	Urban
14	Mental health	Maximum time or distance	One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county	Geomapping	Adult and pediatric	Rural
15	Pharmacy	Maximum time or distance	One (1) twenty-four (24) hours a day, seven (7) days a week within fifteen (15) minutes or fifteen (15) miles for 90% of members in county	Geomapping	Adult and pediatric	Urban

16	Pharmacy	Maximum time or distance	One (1) twenty-four (24) hours a day (or has an afterhours emergency phone number and pharmacist on call), seven (7) days a week within thirty (30) minutes or thirty (30) miles for 90% of members in county	Geomapping	Adult and pediatric	Rural
17	Specialist; Therapy: Physical/occupational/speech therapists	Maximum time or distance	One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county	Geomapping	Adult and pediatric	Urban
18	Specialist; Therapy: Physical/occupational/speech therapists	Maximum time or distance	One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county	Geomapping	Adult and pediatric	Rural
19	Specialist; Vision providers	Maximum time or distance	One (1) within thirty (30) minutes or thirty (30) miles for 90% of	Geomapping	Adult and pediatric	Urban

			members in county			
20	Specialist; Vision Providers	Maximum time or distance	One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county	Geomapping	Adult and pediatric	Rural
21	Primary care; PCPs (adult routine visit)	Appointment wait time	Not to exceed 14 calendar days	Focus Study of Sampled Provider Network, Secret Shopper: Appointment Availability	Adult	Statewide
22	Primary care; PCPs (peds routine visit)	Appointment wait time	Not to exceed 14 calendar days	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Pediatric	Statewide
23	Primary care; PCP (adult sick visit)	Appointment wait time	Not to exceed 24 hours	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Adult	Statewide
24	Primary care; PCP (peds sick visit)	Appointment wait time	Not to exceed 24 hours	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Pediatric	Statewide

25	OB/GYN; Maternity Care	Appointment wait time	First Trimester – Not to exceed fourteen (14) Calendar Days Second Trimester – Not to exceed seven (7) Calendar Days Third Trimester – Not to exceed three (3) Business Days	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Adult and pediatric	Statewide
26	Specialist	Appointment wait time	Not to exceed thirty (30) Calendar Days	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Adult and Pediatrics	Statewide
27	Specialist; Therapy: Physical Therapists, Occupational Therapists, Speech Therapists, Aquatic Therapists	Appointment wait time	Not to exceed thirty (30) Calendar Days	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Adult and Pediatric	Statewide
28	Specialist; Vision Providers	Appointment wait time	Not to exceed thirty (30) Calendar Days	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Adult and Pediatric	Statewide

29	Dental; Dental Providers (routine visits)	Appointment wait time	Not to exceed twenty-one (21) Calendar Days	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Adult and Pediatric	Statewide
30	Dental; Dental Providers (urgent Care)	Appointment wait time	Not to exceed forty-eight (48) clock hours	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Adult and Pediatric	Statewide
31	Mental health	Appointment wait time	Fourteen (14) Calendar Days	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Adult and Pediatric	Statewide
32	Specialist; Urgent Care Providers	Appointment wait time	Not to exceed twenty-four (24) clock hours	Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Adult and Pediatric	Statewide
33	OB/GYN; Obstetric Providers	Maximum time or distance	Two (2) within thirty (30) minutes or thirty (30) miles for 90% of members in county	Geomapping	Adult and Pediatric	Urban
34	OB/GYN; Obstetric Providers	Maximum time or distance	Two (2) within forty-five (45)	Geomapping	Adult and Pediatric	Rural

minutes or
forty-five
(45) miles
for 90 % of
members in
county

Section III. Plan compliance

III. Plan compliance

Use this section to report on plan compliance with the state's standards, as required at 42 C.F.R. § 438.68. This section is also used to report on plan compliance with 42 C.F.R. § 438.206 standards.

Amerigroup

A. Assurance of plan compliance for 438.68

Indicator	Response
A. Assurance of plan compliance for 438.68 III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.	No, the plan does not comply on all standards based on all analyses or exceptions granted

Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

Non-compliant standards for 438.68

Total: 27 of 34

1 Maximum time or distance

Two (2) within eight (8) miles for 90% of members in county

Provider type(s)

Primary care; PCP

Analysis method(s)

Geomapping

Region

Urban

Population

Adult

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has seven urban counties that are out of compliance for PCPs.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

2 Maximum time or distance

Two (2) within fifteen (15) miles for 90% of members in county

Provider type(s)

Primary care; PCP

Analysis method(s)

Geomapping

Region

Rural

Population

Adult

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has five rural counties that are out of compliance for PCPs.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

3 Maximum time or distance

Two (2) within eight (8) miles for 90% of members in county

Provider type(s)

Primary care; Pediatrician

Analysis method(s)

Geomapping

Region

Urban

Population

Pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68**Description**

Amerigroup has four urban counties that are out of compliance for Pediatricians.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

4 Maximum time or distance

Two (2) within fifteen (15) miles for 90% of members in county

Provider type(s)

Primary care; Pediatrician

Analysis method(s)

Geomapping

Region

Rural

Population

Pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has four rural counties that are out of compliance for Pediatricians.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

5 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Specialist

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68**Description**

Amerigroup has three urban counties that are out of compliance for Specialists.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

6 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Specialist

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68**Description**

Amerigroup has fourteen rural counties that are out of compliance for Specialists.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

7 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Dental; General Dental Providers

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has fifteen urban counties that are out of compliance for General Dental Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

8 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Dental; General Dental Providers

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has two rural counties that are out of compliance for General Dental Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

9 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Dental; Dental Subspecialty Providers

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68**Description**

Amerigroup has three urban counties and that are out of compliance for Dental Subspecialty Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

10 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Dental; Dental Subspecialty Providers

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68**Description**

Amerigroup has eleven rural counties that are out of compliance for Dental Subspecialty Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

11 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Hospital

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has one urban county that is out of compliance for Hospitals.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

13 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Mental health

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has twenty-nine urban counties that are out of compliance for Mental Health Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

14 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Mental health

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68**Description**

Amerigroup has one hundred-fifteen rural counties that are out of compliance for Mental Health Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

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15 Maximum time or distance

One (1) twenty-four (24) hours a day, seven (7) days a week within fifteen (15) minutes or fifteen (15) miles for 90% of members in county

Provider type(s)

Pharmacy

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68**Description**

Amerigroup has thirty-nine urban counties that are out of compliance for Pharmacies.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

16 Maximum time or distance

One (1) twenty-four (24) hours a day (or has an afterhours emergency phone number and pharmacist on call), seven (7) days a week within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Pharmacy

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has one hundred twenty rural counties that are out of compliance for Pharmacies.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

18 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Specialist; Therapy: Physical/occupational/speech therapists

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has two rural counties that are out of compliance for Therapy: Physical Therapists, Occupational Therapists and Speech Therapists.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

20 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Specialist; Vision Providers

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Amerigroup has three rural counties that are out of compliance for Vision Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

21 Appointment wait time

Not to exceed 14 calendar days

Provider type(s)

Primary care; PCPs (adult routine visit)

Analysis method(s)

Focus Study of
Sampled Provider
Network, Secret
Shopper:
Appointment
Availability

Region

Statewide

Population

Adult

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

PCP Adult Routine visits are only 73.48% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

22 Appointment wait time

Not to exceed 14 calendar days

Provider type(s)

Primary care; PCPs (peds routine visit)

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

PCP Peds Routine visits are only 83.62% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

23 Appointment wait time

Not to exceed 24 hours

Provider type(s)

Primary care; PCP (adult sick visit)

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

PCP Adult Sick visits are only 70.54% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
Frequency of compliance findings (optional): Not answered, optional
Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

25 Appointment wait time

First Trimester – Not to exceed fourteen (14) Calendar Days
 Second Trimester – Not to exceed seven (7) Calendar Days
 Third Trimester – Not to exceed three (3) Business Days

Provider type(s)

OB/GYN; Maternity Care

Analysis method(s)

Secret Shopper:
 Appointment
 Availability, Focus
 Study of Sampled
 Provider Network

Region

Statewide

Population

Adult and pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

OB/GYN Statewide compliance for appointment wait time standards: Adult/Peds Maternity 1st Trimester are only 71.54% compliant; Adult/Peds Maternity 2nd Trimester are only 66.46% compliant. Adult/Peds Maternity 3rd Trimester are only 52.10% compliant.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
 Frequency of compliance findings (optional): Not answered, optional
 Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

26 Appointment wait time

Not to exceed thirty (30) Calendar Days

Provider type(s)

Specialist

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatrics

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Specialty visits were 88.07% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
Frequency of compliance findings (optional): Not answered, optional
Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

28 Appointment wait time

Not to exceed thirty (30) Calendar Days

Provider type(s)

Specialist; Vision Providers

Analysis method(s)

Region

Statewide

Population

Adult and Pediatric

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Applicable providers were not included in the secret shopper analyses.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

29 Appointment wait time

Not to exceed twenty-one (21) Calendar Days

Provider type(s)

Dental; Dental Providers (routine visits)

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Applicable providers were not included in the secret shopper analyses.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

30 Appointment wait time

Not to exceed forty-eight (48) clock hours

Provider type(s)

Dental; Dental Providers (urgent Care)

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Applicable providers were not included in the secret shopper analyses.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

31 Appointment wait time

Fourteen (14) Calendar Days

Provider type(s)

Mental health

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Mental Health Visits are only 74.35% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
Frequency of compliance findings (optional): Not answered, optional
Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

32 Appointment wait time

Not to exceed twenty-four (24) clock hours

Provider type(s)

Specialist; Urgent Care Providers

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatric

Plan deficiencies for Amerigroup: 42 C.F.R. § 438.68

Description

Urgent Care Providers Visits are only 83.16% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
Frequency of compliance findings (optional): Not answered, optional
Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

Exceptions standards for 438.68

Total: 0 of 34

B. Assurance of plan compliance for 438.206

Indicator	Response
<p data-bbox="311 107 634 178">B. Assurance of plan compliance for 438.206</p> <p data-bbox="311 205 727 474">III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.</p>	<p data-bbox="761 107 1357 218">No, the plan does not comply with all standards based on all analyses or exceptions granted</p>

Provide plan compliance details for the requirements at 42 C.F.R. § 438.206

Number	Indicator	Response
III.B.2	Delivery network-related requirements:	Does not maintain and monitor a sufficient network of appropriate providers
III.B.3	Furnishing of services; timely access-related requirements:	Does not meet and require its network providers to meet State standards for timely access to care and services taking into account the urgency of the need for services, as well as appointment wait times specified in § 438.68(e).
III.B.4	Other requirements:	Other, specify – N/A
III.B.5	Plan deficiencies: 42 C.F.R. § 438.206 description Describe additional plan deficiencies identified during the reporting period.	PCP Statewide, PCP Adult Routine visits are only 73.48% compliant for Amerigroup. Statewide, PCP Peds Routine visits are only 83.62% compliance for Amerigroup. Statewide, PCP Adult Sick visits are only 70.54% compliant for Amerigroup. OB/GYN Statewide, Adult/Peds Maternity 1st Trimester are only 71.54% compliant for Amerigroup. Statewide, Adult/Peds Maternity 2nd Trimester are only 66.46% compliant for Amerigroup. Statewide, Adult/Peds Maternity 3rd Trimester are only 52.10% compliant for Amerigroup. Therapists There were no findings for Therapist visits for Amerigroup. Specialties Statewide, Specialties visits are only 88.07% compliant for Amerigroup. Vision There were no findings for Vision visits for Amerigroup. Dental There were no findings for Dental visits for Amerigroup. Mental Health Statewide, Mental Health Visits are only 74.35% compliant for Amerigroup. Urgent Care Providers Statewide, Urgent Care Providers Visits are only 83.16% compliant for Amerigroup.
III.B.6	Plan deficiencies: 42 C.F.R. § 438.206 analyses used to identify deficiencies Indicate which analyses uncovered the deficiencies.	Secret Shopper Survey, Focus Study of Sampled Provider Network
III.B.7	Plan deficiencies: 42 C.F.R. § 438.206 description of what the plan will do to achieve compliance	The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Describe what the plan will do to achieve compliance.

III.B.8	Plan deficiencies: 42 C.F.R. § 438.206 monitoring progress Describe how the state will monitor the plan's progress.	The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.
III.B.9	Reassessment for plan deficiencies: 42 C.F.R. § 438.206 Indicate when the state will reassess the plan's network to determine whether the plan has remediated those deficiencies.	06/30/2026

CareSource

A. Assurance of plan compliance for 438.68

Indicator	Response
A. Assurance of plan compliance for 438.68 III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.	No, the plan does not comply on all standards based on all analyses or exceptions granted

Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

Non-compliant standards for 438.68

Total: 17 of 34

1 Maximum time or distance

Two (2) within eight (8) miles for 90% of members in county

Provider type(s)

Primary care; PCP

Analysis method(s)	Region	Population
Geomapping	Urban	Adult

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has three urban counties that are out of compliance for PCPs.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

2 Maximum time or distance

Two (2) within fifteen (15) miles for 90% of members in county

Provider type(s)

Primary care; PCP

Analysis method(s)	Region	Population
Geomapping	Rural	Adult

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has four rural counties that are out of compliance for PCPs.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

3 Maximum time or distance

Two (2) within eight (8) miles for 90% of members in county

Provider type(s)

Primary care; Pediatrician

Analysis method(s)

Geomapping

Region

Urban

Population

Pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has five urban counties that are out of compliance for Pediatricians.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

4 Maximum time or distance

Two (2) within fifteen (15) miles for 90% of members in county

Provider type(s)

Primary care; Pediatrician

Analysis method(s)

Geomapping

Region

Rural

Population

Pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has six rural counties that are out of compliance for Pediatricians.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

6 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Specialist

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has six rural counties that are out of compliance for Specialists.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

10 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Dental; Dental Subspecialty Providers

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has ten rural counties that are out of compliance for Dental Subspecialty Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

13 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Mental health

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has nineteen urban counties that are out of compliance for Mental Health Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

14 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Mental health

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has one hundred rural counties that are out of compliance for Mental Health Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

15 Maximum time or distance

One (1) twenty-four (24) hours a day, seven (7) days a week within fifteen (15) minutes or fifteen (15) miles for 90% of members in county

Provider type(s)

Pharmacy

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has twenty-one urban counties that are out of compliance for Pharmacies.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

16 Maximum time or distance

One (1) twenty-four (24) hours a day (or has an afterhours emergency phone number and pharmacist on call), seven (7) days a week within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Pharmacy

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has ninety-six rural counties that are out of compliance for Pharmacies.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

20 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Specialist; Vision Providers

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

CareSource has one rural county that is out of compliance for Vision Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

23 Appointment wait time

Not to exceed 24 hours

Provider type(s)

Primary care; PCP (adult sick visit)

Analysis method(s)	Region	Population
Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Statewide	Adult

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

PCP Adult Sick visits are only 85.12% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

25 Appointment wait time

First Trimester – Not to exceed fourteen (14) Calendar Days
Second Trimester – Not to exceed seven (7) Calendar Days
Third Trimester – Not to exceed three (3) Business Days

Provider type(s)

OB/GYN; Maternity Care

Analysis method(s)	Region	Population
Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Statewide	Adult and pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

Statewide OBG/YN Appointment Wait Time Standards: Adults/Peds Maternity 1st Trimester visits are only 85.39% compliant. Adults/Peds Maternity 2nd Trimester visits are only 32.81% compliant. Adults/Peds Maternity 3rd Trimester visits are only 18.87% compliant.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
 Frequency of compliance findings (optional): Not answered, optional
 Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

28 Appointment wait time

Not to exceed thirty (30) Calendar Days

Provider type(s)

Specialist; Vision Providers

Analysis method(s)	Region	Population
Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Statewide	Adult and Pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

Vision visits are only 85.82% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

29 Appointment wait time

Not to exceed twenty-one (21) Calendar Days

Provider type(s)

Dental; Dental Providers (routine visits)

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

Adult/Peds Routine visits are only 56.83% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

30 Appointment wait time

Not to exceed forty-eight (48) clock hours

Provider type(s)

Dental; Dental Providers (urgent Care)

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68

Description

Adult/Peds Urgent Dental visits are only 64.33% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
Frequency of compliance findings (optional): Not answered, optional
Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

31 Appointment wait time

Fourteen (14) Calendar Days

Provider type(s)

Mental health

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatric

Plan deficiencies for CareSource: 42 C.F.R. § 438.68**Description**

Mental Health visits are only 89.40% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
Frequency of compliance findings (optional): Not answered, optional
Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

Exceptions standards for 438.68**Total: 0 of 34****B. Assurance of plan compliance for 438.206**

Indicator	Response
<p data-bbox="311 107 634 180">B. Assurance of plan compliance for 438.206</p> <p data-bbox="311 205 727 474">III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.</p>	<p data-bbox="761 107 1357 218">No, the plan does not comply with all standards based on all analyses or exceptions granted</p>

Provide plan compliance details for the requirements at 42 C.F.R. § 438.206

Number	Indicator	Response
III.B.2	Delivery network-related requirements:	Does not maintain and monitor a sufficient network of appropriate providers
III.B.3	Furnishing of services; timely access-related requirements:	Does not meet and require its network providers to meet State standards for timely access to care and services taking into account the urgency of the need for services, as well as appointment wait times specified in § 438.68(e).
III.B.4	Other requirements:	Other, specify – N/A
III.B.5	Plan deficiencies: 42 C.F.R. § 438.206 description Describe additional plan deficiencies identified during the reporting period.	PCP Statewide, PCP Adult Sick visits are only 85.12% compliant for CareSource. OB/GYN Statewide, Adults/Peds Maternity 1st Trimester visits are only 85.39% compliant for CareSource. Statewide, Adults/Peds Maternity 2nd Trimester visits are only 32.81% compliant for CareSource. Statewide, Adults/Peds Maternity 3rd Trimester visits are only 18.87% compliant for CareSource. Therapists There were no findings for Therapist visits for CareSource. Vision Statewide, Vision visits are only 85.82% compliant for CareSource. Dental Statewide, Adult/Peds Routine visits are only 56.83% compliant for CareSource. Statewide, Adult/Peds Urgent visits are only 64.33% compliant for CareSource. Mental Health Statewide, Mental Health visits are only 89.40% compliant for CareSource.
III.B.6	Plan deficiencies: 42 C.F.R. § 438.206 analyses used to identify deficiencies Indicate which analyses uncovered the deficiencies.	Secret Shopper Survey, Focus Study of Sampled Provider Network
III.B.7	Plan deficiencies: 42 C.F.R. § 438.206 description of what the plan will do to achieve compliance Describe what the plan will do to achieve compliance.	The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.
III.B.8	Plan deficiencies: 42 C.F.R. § 438.206 monitoring progress	The state conducts adequacy calculations to validate health plan reports and monitors

Describe how the state will monitor the plan's progress.

quarter to quarter trends to ensure access and adequacy continue to improve.

III.B.9	Reassessment for plan deficiencies: 42 C.F.R. § 438.206 Indicate when the state will reassess the plan's network to determine whether the plan has remediated those deficiencies.	06/30/2026
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Peach State

A. Assurance of plan compliance for 438.68

Indicator	Response
A. Assurance of plan compliance for 438.68 III.A.1 Indicate whether the state assures that the plan complies with the state's standards, as required at § 42 C.F.R. 438.68 (i.e., the standards previously entered by the state) based on each analysis the state conducted for the plan during the reporting period.	No, the plan does not comply on all standards based on all analyses or exceptions granted

Select "Enter/Edit" to provide details on standards that were either non-compliant or for which an exception was granted

Non-compliant standards for 438.68

Total: 22 of 34

1 Maximum time or distance

Two (2) within eight (8) miles for 90% of members in county

Provider type(s)

Primary care; PCP

Analysis method(s)

Geomapping

Region

Urban

Population

Adult

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has four urban counties that are out of compliance for PCPs.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

2 Maximum time or distance

Two (2) within fifteen (15) miles for 90% of members in county

Provider type(s)

Primary care; PCP

Analysis method(s)

Geomapping

Region

Rural

Population

Adult

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has four rural counties that are out of compliance for PCPs.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

3 Maximum time or distance

Two (2) within eight (8) miles for 90% of members in county

Provider type(s)

Primary care; Pediatrician

Analysis method(s)

Geomapping

Region

Urban

Population

Pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has four urban counties that are out of compliance for Pediatricians.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

4 Maximum time or distance

Two (2) within fifteen (15) miles for 90% of members in county

Provider type(s)

Primary care; Pediatrician

Analysis method(s)

Geomapping

Region

Rural

Population

Pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68**Description**

Peach State has twelve rural counties that are out of compliance for Pediatricians.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

5 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Specialist

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68**Description**

Peach State has one urban county that is out of compliance for Specialists.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

6 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Specialist

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has sixteen rural counties that are out of compliance for Specialists.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

9 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Dental; Dental Subspecialty Providers

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has two urban counties that are out of compliance for Dental Subspecialty Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

10 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Dental; Dental Subspecialty Providers

Analysis method(s)	Region	Population
Geomapping	Rural	Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has fourteen rural counties that are out of compliance for Dental Subspecialty Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

13 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Mental health

Analysis method(s)	Region	Population
Geomapping	Urban	Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has twenty-one urban counties that are out of compliance for Mental Health Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

14 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Mental health

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has one hundred four rural counties that are out of compliance for Mental Health Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

15 Maximum time or distance

One (1) twenty-four (24) hours a day, seven (7) days a week within fifteen (15) minutes or fifteen (15) miles for 90% of members in county

Provider type(s)

Pharmacy

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has twenty-one urban counties that are out of compliance for Pharmacies.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

16 Maximum time or distance

One (1) twenty-four (24) hours a day (or has an afterhours emergency phone number and pharmacist on call), seven (7) days a week within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Pharmacy

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68**Description**

Peach State has ninety-five rural counties that are out of compliance for Pharmacies.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

18 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Specialist; Therapy: Physical/occupational/speech therapists

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68**Description**

Peach State has three rural counties that are out of compliance for Therapy: Physical Therapists, Occupational Therapists, and Speech Therapists.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

19 Maximum time or distance

One (1) within thirty (30) minutes or thirty (30) miles for 90% of members in county

Provider type(s)

Specialist; Vision providers

Analysis method(s)

Geomapping

Region

Urban

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has one urban county that is out of compliance for Vision Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

20 Maximum time or distance

One (1) within forty-five (45) minutes or forty-five (45) miles for 90% of members in county

Provider type(s)

Specialist; Vision Providers

Analysis method(s)

Geomapping

Region

Rural

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Peach State has two urban counties that are out of compliance for Vision Providers.

Analyses used to identify deficiencies

Geomapping

Frequency of compliance findings (optional): Not answered, optional

What the plan will do to achieve compliance

The plan will identify alternate methods for members to achieve access such as telehealth and single case agreements. The plans are also required to mitigate all areas of deficiency by identifying other providers in the county or state to meet access standards. The state will assess corrective action plans on the plans for non-compliance.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

21 Appointment wait time

Not to exceed 14 calendar days

Provider type(s)

Primary care; PCPs (adult routine visit)

Analysis method(s)	Region	Population
Focus Study of Sampled Provider Network, Secret Shopper: Appointment Availability	Statewide	Adult

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

PCP Adult Routine visits are only 78.53% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

22 Appointment wait time

Not to exceed 14 calendar days

Provider type(s)

Primary care; PCPs (peds routine visit)

Analysis method(s)	Region	Population
Secret Shopper: Appointment Availability, Focus Study of Sampled Provider Network	Statewide	Pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

PCP Peds Routine visits are only 72.50% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

23 Appointment wait time

Not to exceed 24 hours

Provider type(s)

Primary care; PCP (adult sick visit)

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

PCP Adult Sick visits are only 78.88% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

24 Appointment wait time

Not to exceed 24 hours

Provider type(s)

Primary care; PCP (peds sick visit)

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

PCP Peds Sick visits are only 88.81% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
Frequency of compliance findings (optional): Not answered, optional
Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

25 Appointment wait time

First Trimester – Not to exceed fourteen (14) Calendar Days
Second Trimester – Not to exceed seven (7) Calendar Days
Third Trimester – Not to exceed three (3) Business Days

Provider type(s)

OB/GYN; Maternity Care

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

OB/GYN Appointment Wait Time Standards: Adults/Peds Maternity 1st Trimester visits are only 63.86% compliant. Adults/Peds Maternity 2nd Trimester visits are only 57.58% compliant. Adults/Peds Maternity 3rd Trimester visits are only 49.74% compliant.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
Frequency of compliance findings (optional): Not answered, optional
Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

26 Appointment wait time

Not to exceed thirty (30) Calendar Days

Provider type(s)

Specialist

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatrics

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Specialties visits are only 78.19% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability
Frequency of compliance findings (optional): Not answered, optional
Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

31 Appointment wait time

Fourteen (14) Calendar Days

Provider type(s)

Mental health

Analysis method(s)

Secret Shopper:
Appointment
Availability, Focus
Study of Sampled
Provider Network

Region

Statewide

Population

Adult and Pediatric

Plan deficiencies for Peach State: 42 C.F.R. § 438.68

Description

Mental Health visits are only 71.25% compliant with appointment wait time standards.

Analyses used to identify deficiencies

Secret Shopper: Appointment Availability

Frequency of compliance findings (optional): Not answered, optional

Focus Study of Sampled Provider Network

What the plan will do to achieve compliance

The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.

Monitoring progress

The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.

Reassessment date

06/30/2026

Exceptions standards for 438.68

Total: 0 of 34

B. Assurance of plan compliance for 438.206

Indicator	Response
<p>B. Assurance of plan compliance for 438.206</p> <p>III.B.1 Indicate whether the state assures that the plan complies with the availability of services standards outlined in 42 C.F.R. § 438.206 the analyses the state conducted for the plan during the reporting period.</p>	<p>No, the plan does not comply with all standards based on all analyses or exceptions granted</p>

Provide plan compliance details for the requirements at 42 C.F.R. § 438.206

Number	Indicator	Response
III.B.2	Delivery network-related requirements:	Does not maintain and monitor a sufficient network of appropriate providers
III.B.3	Furnishing of services; timely access-related requirements:	Does not meet and require its network providers to meet State standards for timely access to care and services taking into account the urgency of the need for services, as well as appointment wait times specified in § 438.68(e).
III.B.4	Other requirements:	Other, specify – N/A
III.B.5	Plan deficiencies: 42 C.F.R. § 438.206 description Describe additional plan deficiencies identified during the reporting period.	PCP Statewide, PCP Adult Routine visits are only 78.53% compliant for Peach State. Statewide, PCP Peds Routine visits are only 72.50% compliant for Peach State. Statewide, PCP Adult Sick visits are only 78.88% compliant for Peach State. Statewide, PCP Peds Sick visits are only 88.81% compliant for Peach State. OB/GYN Statewide, Adults/Peds Maternity 1st Trimester visits are only 63.86% compliant for Peach State. Statewide, Adults/Peds Maternity 2nd Trimester visits are only 57.58% compliant for Peach State. Statewide, Adults/Peds Maternity 3rd Trimester visits are only 49.74% compliant for Peach State. Therapists There were no findings for Therapist visits for Peach States. Specialties Statewide, Specialties visits are only 78.19% compliant for Peach State. Vision There were no findings for Vision visits for Peach State. Dental There were no findings for Dental visits for Peach State. Mental Health Statewide, Mental Health visits are only 71.25% compliant for Peach State.
III.B.6	Plan deficiencies: 42 C.F.R. § 438.206 analyses used to identify deficiencies Indicate which analyses uncovered the deficiencies.	Secret Shopper Survey, Focus Study of Sampled Provider Network

<p>III.B.7</p>	<p>Plan deficiencies: 42 C.F.R. § 438.206 description of what the plan will do to achieve compliance</p> <p>Describe what the plan will do to achieve compliance.</p>	<p>The State is working with the health plans to give continuing education with providers and assess CAPS when necessary.</p>
<p>III.B.8</p>	<p>Plan deficiencies: 42 C.F.R. § 438.206 monitoring progress</p> <p>Describe how the state will monitor the plan's progress.</p>	<p>The state conducts adequacy calculations to validate health plan reports and monitors quarter to quarter trends to ensure access and adequacy continue to improve.</p>
<p>III.B.9</p>	<p>Reassessment for plan deficiencies: 42 C.F.R. § 438.206</p> <p>Indicate when the state will reassess the plan's network to determine whether the plan has remediated those deficiencies.</p>	<p>06/30/2026</p>