

Vision Network Compliance and Waiver Request Instructions Guide

General instructions

Adhering to the following key points will increase user experience when completing the Network Compliance and Waiver Request (NCWR) template.

Copy/Paste

To ensure data integrity, the following areas are restricted and cannot be edited or pasted into:

- Column headings
- TIC/TAC references
- Cells with a dark blue background
- When pasting data that is larger than the table, always follow this sequence:

Enter Paste/Sort Mode: Click the "Enter Paste/Sort Mode" button.

Enter Paste/Sort Mode

Perform Sort: Complete desired sorting action (e.g., sort by date, sort by name).

Paste Data: Paste data into the applicable column by right clicking and selecting Paste Options: "values."

Click Exit Sort Mode: Click the "Exit Paste/Sort Mode" button.

Exit Paste/Sort Mode

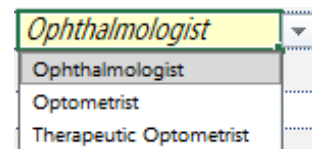
Confirm: Ensure the template is visually back to its normal state (the button will be green).

Continue Work: Only then is it safe to proceed with standard data entry or other actions.

If pasting over data that is already populated, such as the counties and specialties, it is not required to enter Paste/Sort Mode.

Drop down lists

- In cells with drop-down lists, confirm the pasted information is one of the options available within the list. **If there are discrepancies regarding spelling, extra spaces, or differing special characters, the cell will highlight yellow indicating an error.**
- Some functions may not work properly if the wrong case (such as ALL CAPS) is used. For best results, use the case that is given in the drop-down list.



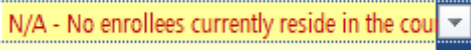
Delete row

- To delete a row, select a single cell in the row to be deleted and click the "Delete selected row(s)" button.

X Delete selected row(s)

Template acceptance policy - Templates with errors or modifications will not be accepted

- Modified templates- modifications include adding, deleting, removing, hiding, or unhiding any cells, rows, columns, tabs, or worksheets.
- Submission of a template with cells containing errors such as incorrect data, invalid data types, missing data, errors, or references to other tabs or spreadsheets.
 - Data entry errors will appear as a yellow cell with red text



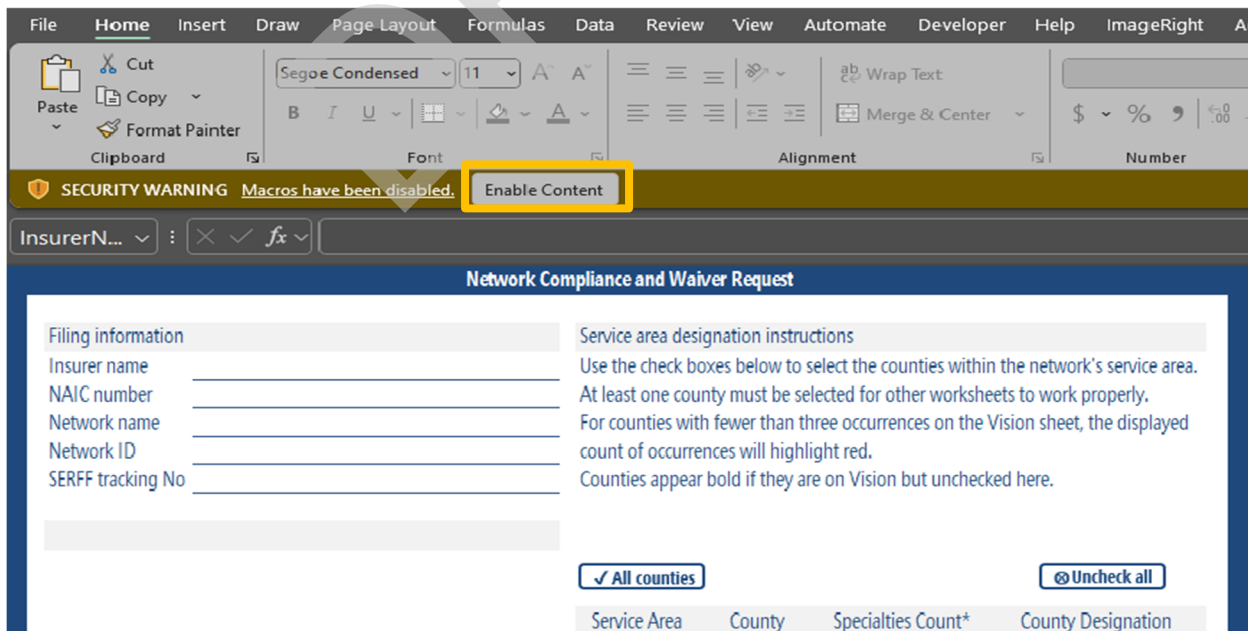
Workbook tabs

- Under Texas Insurance Code §1301.0055, when a network does not meet specified time and distance requirements prescribed in §1301.00553 in a county for a specific provider specialty type, an insurer must apply for a waiver to operate within its service area with the identified network gaps.
- The NCWR contains five worksheet tabs, the first two require data, and the remaining three are reference tabs.



Cover page

***Macros must be enabled for this workbook to function.



The screenshot shows the Microsoft Excel ribbon with the 'Enable Content' button highlighted in a yellow box. Below the ribbon is a form titled 'Network Compliance and Waiver Request'. The form has two main sections: 'Filing information' and 'Service area designation instructions'. The 'Filing information' section includes fields for Insurer name, NAIC number, Network name, Network ID, and SERFF tracking No. The 'Service area designation instructions' section includes text explaining the use of check boxes to select counties within the network's service area, with a note that at least one county must be selected for other worksheets to work properly. Below the instructions are two buttons: 'All counties' (checked) and 'Uncheck all'. At the bottom of the form is a table header with columns: Service Area, County, Specialties Count*, and County Designation.

1. Filing information

Complete all fields in the filing information section.

Filing information	
Insurer name	_____
NAIC number	_____
Network name	_____
Network ID	_____
SERFF tracking No	_____
Access plan	https:// _____

2. Service area designation

Individually select counties within the network's approved service area.

To select all counties, click "All counties."

To deselect all counties, click "Uncheck all."

***Service area must be selected for other worksheet to work properly.**

Service area designation instructions

Use the check boxes below to select the counties within the network's service area.

At least one county must be selected for other worksheets to work properly.

For counties with fewer than three occurrences on the Vision sheet, the displayed count of occurrences will highlight red.

Counties are bolded if they are unchecked but included in the Vision Sheet.

Service Area	County	Specialties Count*	County Designation
<input type="checkbox"/>	Anderson	N/A	Micro

Each county is required to report 3 specialties. If a county is referenced more or less than 3 times in the Vision tab, the number of occurrences will highlight red. A template displaying this error cannot be accepted for review.

<input checked="" type="checkbox"/> All counties		<input type="checkbox"/> Uncheck all	
Service Area	County	Specialties Count*	County Designation
<input checked="" type="checkbox"/>	Anderson	2	Micro

Vision

Information in this tab will determine the network’s adequacy. Any adequacy standard that is not met will require an access plan and waiver.

It is recommended to work from left to right and column by column to capitalize on the worksheet’s features.

- Click on the **Add counties** button. All the counties you selected on the cover page will auto-populate the first three columns with all 3 specialties/rows for each county.

*The first row will be left blank.

County designation	County	Specialty type
Micro	Anderson	Ophthalmologist
Micro	Anderson	Optometrist
Micro	Anderson	Therapeutic Optometrist

The county designation, county, and specialty will automatically be entered in the table.

2. Number of preferred providers within the county

Number of preferred providers within the county

Enter the number of contracted providers within the county.
If a county does not have any enrollees, please enter *unknown*.

The quantity of providers recorded here must be consistent with the provider count detailed in the Provider List template.
For instance: A report of three optometrists in Williamson County on the Network Compliance and Waiver Request template requires that the Provider List template also reflects three optometrists in Williamson County.

3. Percentage of enrollees with sufficient choice

- These two columns are interdependent, and both must be completed.

Percentage of enrollees with access to at least 1 preferred provider	Percentage of enrollees with access to 2 or more preferred providers

*If entered manually, please enter whole numbers only.

Adequacy standard:
For network adequacy to be satisfied, the following criteria must be met:
100% of enrollees need to have access to at least 1 preferred provider, **and** at least 90% of enrollees need to have access to 2 or more preferred providers.

4. Years a waiver for this deficiency has been granted

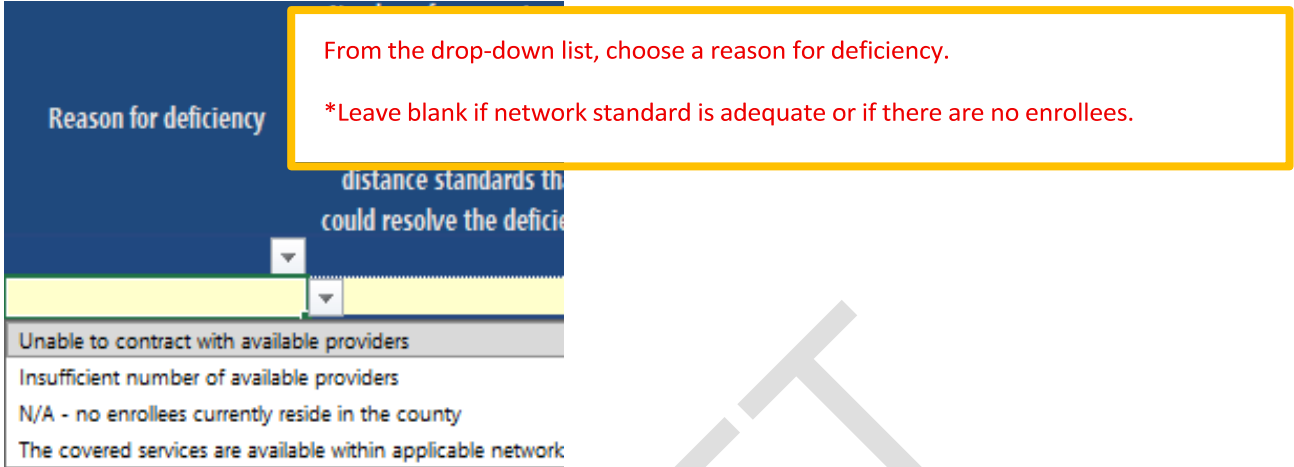
Years a waiver for this deficiency has been granted

2026
2027
2026, 2027
N/A

Enter the year a waiver for this deficiency has been granted.
For multiple years, list each year separated by a comma.

DRAFT

5. Reason for deficiency



The drop-down list offers the following options, explained below:

Vision	Explanation
Unable to contract with available providers	Use for any reason preferred providers are not available, that is not for insufficient number of available providers or no enrollees.
Insufficient number of available providers	Not enough qualified healthcare professionals are available to meet adequacy requirements.
N/A – no enrollees currently reside in the county	N/A – no enrollees currently reside in the county
The covered services are available within applicable network adequacy standards through a combination of preferred optometrists, ophthalmologists, and therapeutic optometrists.	Adequacy is met within the county through a combination of identical routine services between the three specialties. ***This reason is to be used in combination with the following access plan summary "Covered vision services are available within the time and distance network adequacy standards applicable to ophthalmology specialists under Insurance Code §1301.00553 through a combination of in-network optometrists, ophthalmologists, and therapeutic optometrists."



- 6. Report the count of non-contracted physicians and providers who are available within the service area and who meet the required time and distance standards and could therefore **resolve** the identified network deficiency.

Number of non-contracted physicians and providers available within the service area and applicable time and distance standards that could resolve the deficiency

Enter the number of non-contracted providers that could **resolve** the deficiency.

Only a numeric value will be accepted.

**Leave blank if the network standard is adequate or if there are no enrollees.*

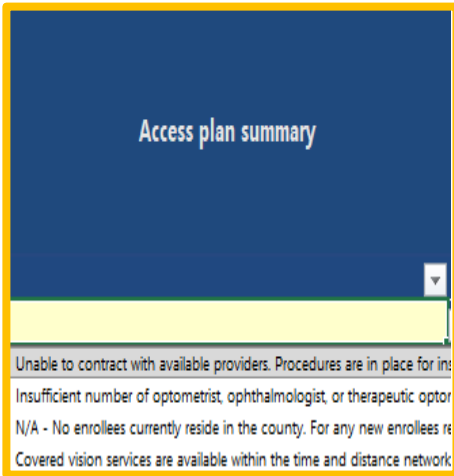
- 7. Source used to identify available physicians and providers

Source used to identify available physicians and providers

Enter the source or reference used to research non-contracted providers.

**Leave blank if network standard is adequate or if there are no enrollees.*

8. Access Plan Summary



From the drop-down list, select a single applicable access plan summary.

***Leave blank if the network standard is adequate or if there are no enrollees.**

The drop-down list offers the following options, explained below:

Vision	Access plan summary explanation
Unable to contract with available providers. Procedures are in place for insurer to comply with the access plan requirements in 28 TAC §3.3707	An access plan is available for enrollees due to the company's failure to contract with available physicians or providers. The company is required to demonstrate good cause and good faith to receive an approved waiver.
Insufficient number of providers delivering covered vision services are currently practicing within the applicable network adequacy standards. Procedures are in place for insurer to comply with the access plan requirements in 28 TAC §3.3707	An access plan is in place for enrollees due to the lack of physicians or healthcare providers in the affected county. A waiver is requested as there are no uncontracted physicians or healthcare providers in the area to meet the specific standard.
N/A - No enrollees currently reside in the county. For any new enrollees residing within the county, insurer will comply with the access plan requirements in 28 TAC §3.3707	An access plan is available in the event a new enrollee lives in this deficient county, or an existing enrollee relocates to this deficient county. In this situation, a waiver is being requested.
Covered vision services are available within the time and distance network adequacy standards applicable to ophthalmology specialists under Insurance Code §1301.00553 through a combination of in-network optometrists, ophthalmologists, and therapeutic optometrists	Through a combination of identical routine vision services provided, adequacy is met for this county. A waiver or access plan is not needed.

9. The Network adequacy status column is automatically populated according to the compliance data provided.

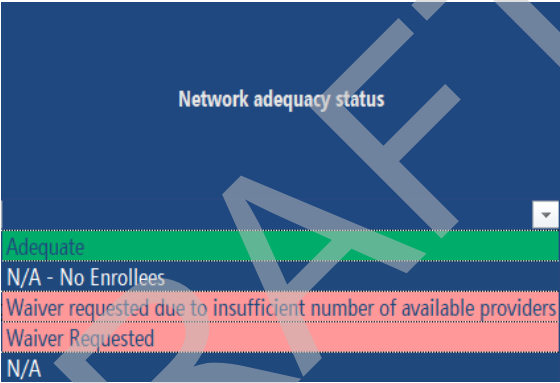
Green background indicates county is adequate and no waiver is requested.

Blue background with N/A or N/A – No Enrollees.

Note: N/A indicates the county is considered adequate through a combination of the three specialties and would not need a waiver. However, the specialty itself is still deficient.

Pink background indicates a waiver must be requested.

- The pink background can be waiver requested for multiple reasons including:
 - o Waiver requested due to insufficient number of available providers
 - o Waiver Requested





NA Standards

Network Adequacy Time and Distance Standards										
Maximum Time and Distance Standards (<i>Time is measured in minutes and distance is measured in miles</i>)										
Specialty Types	Large Metro County		Metro County		Micro County		Rural County		Counties with Extreme Access Considerations (CEAC)	
	Time	Distance	Time	Distance	Time	Distance	Time	Distance	Time	Distance
Ophthalmologist	20	10	30	20	50	35	75	60	95	85
Optometrist	NA	75	NA	75	NA	75	NA	75	NA	75
Therapeutic Optometrist	NA	75	NA	75	NA	75	NA	75	NA	75

Reference

Vision Reason for deficiency
Unable to contract with available providers
Insufficient number of available providers
N/A- no enrollees currently reside in the county
The covered services are available within applicable network adequacy standards through a combination of preferred optometrists, ophthalmologists, and therapeutic optometrists

Vision Access Plan Summary
Unable to contract with available providers. Procedures are in place for insurer to comply with the access plan requirements in 28 TAC §3.3707
Insufficient number of providers delivering covered vision services are currently practicing within the applicable network adequacy standards. Procedures are in place for insurer to comply with the access plan requirements in 28 TAC §3.3707
N/A - No enrollees currently reside in the county. For any new enrollees residing within the county, insurer will comply with the access plan requirements in 28 TAC §3.3707
Covered vision services are available within the time and distance network adequacy standards applicable to ophthalmology specialists under Insurance Code §1301.00553 through a combination of in-network optometrists, ophthalmologists, and therapeutic optometrists