

Network Adequacy and Access Assurances (NAAAR) Report for Washington: Apple Health Integrated Managed Care (IMC)

Submission name	Plan type	Reporting period start date	Reporting period end date	Last edited	Edited by	Status
Apple Health Integrated Managed Care (IMC)	MCO	01/01/2025	12/31/2025	08/13/2026	ALESIA SPRUILL MCKOY	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.	Jesica Mikesell
IA.2	Contact email address Enter email address. Department or program-wide email addresses are permitted.	Jesica.Mikesell@hca.wa.gov
IA.3	State or territory Auto-populates from your account profile.	Washington
IA.4	Date of report submission CMS receives this date upon submission of this report.	08/13/2026
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	Scenario 2: Annual report

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 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	Coordinated Care of Washington
	Community Health Plan of Washington
	Molina Healthcare
	United Healthcare
	Wellpoint

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 Substance Use Disorder (SUD) OB/GYN Hospital Pharmacy

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	Is this analysis method used to assess plan compliance? 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.	Geomapping Utilized Frequency: Quarterly Plan(s): Coordinated Care of Washington, Community Health Plan of Washington, Molina Healthcare, United Healthcare, Wellpoint Plan Provider Directory Review Utilized Frequency: Annually Plan(s): Coordinated Care of Washington, Community Health Plan of Washington, Molina Healthcare, United Healthcare, Wellpoint Secret Shopper: Network Participation Utilized Frequency: Varies by plan Plan(s): Coordinated Care of Washington, Community Health Plan of Washington, Molina Healthcare, United Healthcare, Wellpoint Secret Shopper: Appointment Availability Utilized Frequency: Varies by plan Plan(s): Coordinated Care of Washington, Community Health Plan of Washington, Molina Healthcare, United Healthcare, Wellpoint Electronic Visit Verification Data Analysis Not utilized Review of Grievances Related to Access Utilized Frequency: Varies by plan Plan(s): Coordinated Care of Washington, Community Health Plan of Washington, Molina Healthcare, United Healthcare, Wellpoint Encounter Data Analysis Utilized Frequency: Quarterly

Plan(s): Coordinated Care of Washington, Community Health Plan of Washington, Molina Healthcare, United Healthcare, Wellpoint

NPI Validation

Utilized

Description: N/A

Frequency: Quarterly

Plan(s): Coordinated Care of Washington, Community Health Plan of Washington, Molina Healthcare, United Healthcare, Wellpoint

Appointment Wait Times

Utilized

Description: N/A

Frequency: Annually

Plan(s): Coordinated Care of Washington, Community Health Plan of Washington, Molina Healthcare, United Healthcare, Wellpoint

Hours of Operation

Utilized

Description: N/A

Frequency: Annually

Plan(s): Coordinated Care of Washington, Community Health Plan of Washington, Molina Healthcare, United Healthcare, Wellpoint

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: 16

#	Provider	Standard type	Standard description	Analysis methods	Pop.	Region
1	Primary care	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Adult	Non-urban
2	Primary care	Maximum time or distance	2 in 10 miles, travel time not to exceed 30 minutes from the enrollee's primary residence. 90 minute maximum for public transit.	Geomapping	Adult	Urban
3	Primary care; Pediatric	Maximum time or distance	2 in 10 miles, travel time not to exceed 30 minutes from the enrollee's primary residence. 90 minute maximum for public transit.	Geomapping	Pediatric	Urban
4	Primary care; Pediatric	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Pediatric	Non-urban
5	Pharmacy	Maximum time or distance	2 in 10 miles, travel time not to exceed 30 minutes from the enrollee's	Geomapping	Adult & pediatric	Urban

			primary residence. 90 minute maximum for public transit.			
6	Pharmacy	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Adult & pediatric	Non-urban
7	OB/GYN	Maximum time or distance	2 in 10 miles, travel time not to exceed 30 minutes from the enrollee's primary residence. 90 minute maximum for public transit.	Geomapping	Adult & pediatric	Urban
8	OB/GYN	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Adult & pediatric	Non-urban
9	Hospital	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Adult & pediatric	Urban
10	Hospital	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Adult & pediatric	Non-urban
11	Mental health	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Adult	Urban & non-urban

12	Mental health	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Pediatric	Urban & non-urban
13	Mental health; Outpatient (BHA Only)	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Adult	Urban & non-urban
14	Mental health; Outpatient (BHA Only)	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Pediatric	Urban & non-urban
15	Substance Use Disorder (SUD); Outpatient (BHA Only)	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Adult	Urban & non-urban
16	Substance Use Disorder (SUD); Outpatient (BHA Only)	Maximum time or distance	1 in 25 miles, travel time not to exceed 60 minutes.	Geomapping	Pediatric	Urban & non-urban

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.

Coordinated Care of Washington

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: 6 of 16

2 Maximum time or distance

2 in 10 miles, travel time not to exceed 30 minutes from the enrollee's primary residence. 90 minute maximum for public transit.

Provider type(s)

Primary care

Analysis

method(s)

Geomapping

Region

Urban

Population

Adult

Plan deficiencies for Coordinated Care of Washington: 42 C.F.R. § 438.68

Description

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period.

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

4 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

Primary care; Pediatric

Analysis**method(s)**

Geomapping

Region

Non-urban

Population

Pediatric

Plan deficiencies for Coordinated Care of Washington: 42 C.F.R. § 438.68**Description**

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period..

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

6 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

Pharmacy

**Analysis
method(s)**

Geomapping

Region

Non-urban

Population

Adult & pediatric

Plan deficiencies for Coordinated Care of Washington: 42 C.F.R. § 438.68**Description**

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period..

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

8 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

OB/GYN

Analysis**method(s)**

Geomapping

Region

Non-urban

Population

Adult & pediatric

Plan deficiencies for Coordinated Care of Washington: 42 C.F.R. § 438.68**Description**

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period..

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

14 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

Mental health; Outpatient (BHA Only)

Analysis

method(s)

Geomapping

Region

Urban & non-urban

Population

Pediatric

Plan deficiencies for Coordinated Care of Washington: 42 C.F.R. § 438.68

Description

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period..

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

15 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

Substance Use Disorder (SUD); Outpatient (BHA Only)

Analysis

method(s)

Region

Population

Adult

Geomapping

Urban & non-urban

Plan deficiencies for Coordinated Care of Washington: 42 C.F.R. § 438.68

Description

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period..

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

Exceptions standards for 438.68

Total: 0 of 16

B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206 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.	Yes, the plan complies on all standards based on all analyses

Community Health Plan of Washington

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: 3 of 16

6 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

Pharmacy

**Analysis
method(s)**

Geomapping

Region

Non-urban

Population

Adult & pediatric

Plan deficiencies for Community Health Plan of Washington: 42 C.F.R. § 438.68

Description

The MCO fell below the 80% capacity threshold due to a pharmacy contracting issue with a non-responsive provider.

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO was required to provide routine updates on contracting activities with the pharmacy and utilized the HCA pharmacy team for assistance making contact with the non-responsive pharmacy. If the contracting issues were not resolved the MCO was subject to CAPs and additional liquid damages.

Monitoring progress

The MCO provided routine updates including with their provider network submissions until the contract was renewed.

Reassessment date

01/15/2026

8 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

OB/GYN

**Analysis
method(s)**

Geomapping

Region

Non-urban

Population

Adult & pediatric

Plan deficiencies for Community Health Plan of Washington: 42 C.F.R. § 438.68

Description

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period..

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

15 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

Substance Use Disorder (SUD); Outpatient (BHA Only)

Analysis

method(s)

Geomapping

Region

Urban & non-urban

Population

Adult

Plan deficiencies for Community Health Plan of Washington: 42 C.F.R. § 438.68

Description

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period..

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

Exceptions standards for 438.68

Total: 0 of 16

B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206 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.	Yes, the plan complies on all standards based on all analyses

Molina Healthcare**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: 1 of 16

11 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

Mental health

Analysis

method(s)

Geomapping

Region

Urban & non-urban

Population

Adult

Plan deficiencies for Molina Healthcare: 42 C.F.R. § 438.68

Description

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period..

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

Exceptions standards for 438.68

Total: 0 of 16

B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206 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.	Yes, the plan complies on all standards based on all analyses

United Healthcare

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: 1 of 16

4 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

Primary care; Pediatric

Analysis

method(s)

Geomapping

Region

Non-urban

Population

Pediatric

Plan deficiencies for United Healthcare: 42 C.F.R. § 438.68

Description

The MCO fell below the 80% capacity threshold but resolved the issue by the next reporting period..

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO resolved data errors affecting adequacy scores.

Monitoring progress

The MCO was given a notice outlining non-compliance with a nonperformance penalty and attended a technical assistance to discuss the root cause of the inadequacy. The inadequacy must be corrected by the following quarter or the MCO is put on a corrective action plan with additional liquid damages.

Reassessment date

01/15/2026

Exceptions standards for 438.68

Total: 0 of 16

B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206 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.	Yes, the plan complies on all standards based on all analyses

Wellpoint

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: 1 of 16

11 Maximum time or distance

1 in 25 miles, travel time not to exceed 60 minutes.

Provider type(s)

Mental health

Analysis

method(s)

Geomapping

Region

Urban & non-urban

Population

Adult

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

Description

The MCO had repeated erroneous data over two quarters resulting in a CAP with liquid damages.

Analyses used to identify deficiencies

Geomapping

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

What the plan will do to achieve compliance

The MCO was required to update policies requiring QA of network submissions to stop the repetition of errors in submissions.

Monitoring progress

The MCO must provide a corrective action plan and eliminate errors in submissions.

Reassessment date

04/15/2026

Exceptions standards for 438.68

Total: 0 of 16

B. Assurance of plan compliance for 438.206

Indicator	Response
B. Assurance of plan compliance for 438.206 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.	Yes, the plan complies on all standards based on all analyses