	Comparison of Plan Providers and the Offeror's Proposed Provider Network - RFP entitled: "Healthcare Program Administrative Services Only (ASO)"
NEW YORK STATE OF OPPORTUNITY. Department of Civil Service	

Comparison of 2020 Empire Plan Network Providers and the Offeror's Proposed Provider Network

INSTRUCTIONS/FILE LAYOUT:

The Department will provide a file to the Offeror that contains the existing Empire Plan Provider Network, Attachment 39 The Plan Provider Network File. The Offeror should perform a Provider Disruption to compare Attachment 39 to the Offeror's proposed network. Submit the completed **ATTACHMENT 36** in the Technical Proposal using Microsoft Excel. Do not password-protect the file or use any other security measures. The submission should be submitted in Excel in the following layout:

Column 1	Column 2	Column 3	Column 4	Column 5	Column 6	Column 7
Reference #	Practitioner/Facility Type	Provider Tax ID	Provider Name	Provider Zip Code	Network Indicator	Match Criteria

• The "**Reference #**" in Column 1 is a critical field to the analysis and should not be adjusted, deleted, or linked to any other row of data.

• Please input a **"Y", "LP"**, or **"N"** indicator in the **"Network Indicator"** field in Column 6, which is requested for each provider line. In addition, indicate your match criteria in the "**Match Criteria**" field in Column 7.

- Indicate "**Y**" if the provider is directly contracted in the network you are proposing for the Program.
- Indicate **"LP"** if the provider is in a rental, leased, or wrap network.
- Indicate **"N"** for providers who are not formally contracted into the network and/or who would not be listed in network directories but who offer some type of discounting from fees whether by a limited contract or by negotiation after incurral.
- Indicate **"N"** if the provider is out-of-network based on the network being proposed.

Note: By indicating **"Y"** or **"LP"** you are confirming that you have a high confidence match and the provider is in your network. Therefore, do not include weak matches as a **"Y"** response. Aon considers the following to be a strong match:

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- *NPI Only

- *TIN Only

- *Name, Address, City, State, and ZIP

- *Name, City, State, and ZIP

If you choose to report any other variation as a match, it is understood that your organization has full confidence that the provider or facility is in your network.

Any blank responses in the "**Network Indicator**" column will be counted as a **"N"**

If you are proposing multiple networks, please complete separate files (or append columns) for each network and specify the applicable network within your response.