

# PROVIDER Update



NEWS & ANNOUNCEMENTS

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5 PAGES

## 2022 Provider Appointment Availability and After-Hours Access Survey Results

### See how results compared to the previous year

The 2022 annual Provider Appointment Availability Survey (PAAS) and Provider After-Hours Access Survey (PAHAS) results are in. The results are from a random sample of participating primary care physicians (PCPs), specialty care providers (SCPs), ancillary providers, and non-physician mental health providers (NPMH) surveyed from August 2022 through December 2022.

The surveys comply with timely access regulations issued by the Department of Managed Health Care (DMHC) and the Department of Health Care Services' (DHCS) access requirements. The survey results are used to monitor physician and other provider compliance with timely appointment availability and after-hours access standards and evaluate the effectiveness of the network to meet the needs and preferences of Health Net\* members.

Failure to meet one or more timely appointment and after-hours access standards, as indicated, will result in a corrective action plan (CAP).

### 2022 Provider Appointment Availability Survey results

Availability and access requirements are designed to ensure that health care appointments are provided to patients in a timely manner appropriate for the nature of the patient's condition and consistent with good professional practice.

The results of the 2022 PAAS survey for DMHC and DHCS appointment access standards reflect a need for improvement in several areas. The following appointment access metrics did not meet the performance goal of 70%:

- Urgent care appointment with PCP within 48 hours.
- Urgent care appointment with a specialist within 96 hours.
- Non-urgent care appointment with a specialist within 15 business days.
- Preventive health or well-child appointment with PCP within 2 weeks.
- Initial prenatal appointment with specialist within 2 weeks

Refer to tables on pages 3–5 for the overall results and by county.

### Corrective action plan (CAP)

DMHC regulations (28 CCR §1300.67.2.2(d)(3)) require that health plans investigate and request corrective action when timely access to care standards are not met. To

#### THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Ancillary Providers

#### LINES OF BUSINESS:

- Medi-Cal
  - Kern
  - Los Angeles
  - Sacramento
  - San Diego
  - San Joaquin
  - Stanislaus
  - Tulare

#### PROVIDER SERVICES

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**Medi-Cal (including CS and ECM providers)**

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#### PROVIDER PORTAL

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comply with these requirements and meet the plan's compliance requirements as delineated by Health Net's Accessibility of Providers and Practitioners policy, a CAP will be issued to contracted participating physician groups (PPGs) and provider offices who fail any of the urgent or non-urgent metrics.

PPGs and providers who receive a CAP are required to:

- Submit a written improvement plan (IP) within 30 calendar days, including the actions taken to correct each deficiency.
- PPG attestation for not meeting Access to Care Standards for appointment availability and or after-hours and have notified the providers of the survey results.
- Attend an online provider training webinar, hosted online by Health Net, as part of their IP.
- Upon review of IP, Health Net may require additional information to validate that corrective action steps were taken.

Physicians and other providers with questions or concerns regarding their ability to meet these standards may contact Health Net by email at [DMHC\\_AccessIP@healthnet.com](mailto:DMHC_AccessIP@healthnet.com).

### **Improve Health Outcomes: A Guide for Providers toolkit**

Included with the CAP packets is the *Improve Health Outcomes: A Guide for Providers* toolkit. The toolkit includes information, support tools and resources that focus on drivers of patient satisfaction:

- Health Care Performance Measurement Systems.
- Quality Improvement Activities.
- Timely Appointment Access.
- Advance Access.

The toolkit is available online at [provider.healthnet.com](http://provider.healthnet.com), under Provider Quality Improvement, select *Quality Improvement*, the *Improve Health Outcomes: A Guide for Providers – Health Net Statewide (all LOBs) (PDF)* under Provider Resources.

### **Maintaining access standards**

The goal of reasonable access to care is essential for member safety and is monitored annually. Take the below actions to ensure your office meets standards:

- Review current office scheduling practices and after-hours protocol periodically to make sure they are accurate and meet current guidelines.
- Include the appointment access standards and after-hours procedures and scripts in the orientation for new staff, office staff and answering service staff.
- Test office appointment scheduling and after-hours practices by scheduling self-audits or secret shopper calls. This allows offices to verify appointment standards are being met and after-hours outbound messaging is appropriate and take steps to correct any issues identified.

For help in complying with appointment access standards, refer to the resources online in the Provider Library at [providerlibrary.healthnetcalifornia.com](http://providerlibrary.healthnetcalifornia.com). You can also find after-hours script templates in the Provider Library. The scripts are available in a variety of languages.

### **Additional information**

If you have questions regarding the information contained in this update, you may contact the Access and Availability Unit by email at [DMHCAccess\\_IP@healthnet.com](mailto:DMHCAccess_IP@healthnet.com) or Health Net Medi-Cal Provider Services at 800-675-6110.

**Measurement year (MY) 2022 – MY 2021 Medi-Cal provider appointment availability results – overall**

<b>Access measure</b>	<b>Appointment standard (wait time)</b>	<b>Performance goal</b>	<b>MY 2022 rate (%)</b>	<b>MY 2021 rate (%)</b>
<b>PCPs and specialists</b>				
Urgent care appointment with PCP	48 hours	70%	56.3↓	64.5
Urgent care appointment with specialist that requires prior authorization	96 hours		42.2	42.9
Non-urgent appointment with PCP	10 business days		81.3↓	85.3
Non-urgent appointment with specialist	15 business days		62.3↓	67.1
Preventive health or well-child appointment with PCP <sup>2</sup>	2 weeks		73.8↓	78.9
Physical exam/wellness check appointment with PCP <sup>2</sup>	30 calendar days		86.8↓	91.2
Initial prenatal appointment with PCP <sup>1</sup>	2 weeks		84.1	82.1
Initial prenatal appointment with specialist <sup>1</sup>	2 weeks		67.6	76.3
<b>Ancillary providers</b>				
Non-urgent ancillary appointment for magnetic resonance imaging (MRI), mammogram, physical therapy	15 business days	70%	89.2	97.6
<b>Behavioral health providers</b>				
Urgent care appointment with psychiatrist	96 hours	70%	36.9	46.0
Non-urgent appointment with psychiatrist	15 business days		65.3	79.1
Urgent care appointment with non-physician mental health provider (NPMH)	96 hours		61.6	54.2
Non-urgent appointment with NPMH provider	10 business days		83.2	70.1

↑↓ Statistically significant difference between MY 2022 vs MY 2021.

<sup>1</sup>First-Prenatal Visits standards are specific to DHCS regulations.

<sup>2</sup>Well-Child and Wellness Visits are health plan standards. Appointment scheduled through the provider for a preventive checkup will be dependent on the type of service, and a provider may recommend a different schedule depending on the need.

**MY 2022 – MY 2021 Medi-Cal provider appointment availability results – by county**

Standards	County													
	Kern		Los Angeles		Sacramento		San Diego		San Joaquin		Stanislaus		Tulare	
	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)
PCPs and specialists														
<b>Urgent Care Visit with PCP within 48 hours</b>	41.4	47.5	60.6	68.7	52.1	61.1	62.9	64.8	45.1	48.9	35.1	51.2	52.2	61.8
<b>Urgent Care Visit with Specialist That Requires Prior Authorization within 96 hours</b>	37.3	41.4	47.5	45.0	22.0	33.8	39.6	41.4	37.5	44.1	38.4	46.4	36.4	31.0
<b>Non-urgent Appointment with PCP within 10 business days</b>	59.5	67.8	86.0	89.6	70.7	66.9	86.3	84.6	66.7	84.8	64.5	70.3	82.6	90.5
<b>Non-urgent Appointment with specialist within 15 business days</b>	59.6	71.6	69.7	70.1	42.6	60.9	54.9	58.1	62.4	68.9	40.9	55.3	64.8	77.8
<b>Well-Child Visit with PCP within 2 weeks<sup>2</sup></b>	45.6	64.0	81.0	83.7	58.1	67.6	67.8	76.0	58.6	68.8	39.4	45.0	72.0	85.3
<b>Physician Exam/Wellness Checks with PCP within 30 calendar days<sup>2</sup></b>	65.5	85.1	92.2	93.8	75.0	79.7	81.9	89.7	83.1	94.4	48.4	66.7	88.8	96.7
<b>Initial Prenatal Visit with PCP within 2 weeks<sup>1</sup></b>	61.3	81.5	91.0	85.2	64.3	63.0	86.2	76.7	75.0	65.2	81.8	66.7	70.3	92.9
<b>Initial Prenatal Visit with SCP within 2 weeks<sup>1</sup></b>	52.9	58.3	76.9	93.3	40.0	60.0	40.0	53.3	66.7	33.3	42.9	38.5	100.0	100.0

<sup>1</sup>First-Prenatal Visits standards are specific to DHCS regulations.

<sup>2</sup>Well-Child and Wellness Visits are health plan standards. Appointment scheduled through the provider for a preventive checkup will be dependent on the type of service, and a provider may recommend a different schedule depending on the need.

## MY 2022 – MY 2021 after-hours access survey results

Overall results for MY 2022 PAHAS indicate only the *After-Hours Emergency Instructions* metric met the 90% performance goal. The *Contact on-call physician after hours (for urgent issues)* metric was not met. There is a statistically significant increase in the performance score compared to MY 2021. The following tables display the after-hours results overall and by county.

### MY 2022 – MY 2021 Medi-Cal provider after-hours availability results – overall

Access measure	Appointment standard (wait time)	Performance goal	MY 2021 rate (%)	MY 2020 rate (%)
After-hours emergency instructions	Appropriate instructions for emergency issues	90%	93.9↓	96.3
Contact on-call physician after hours (for urgent issues)	Callback within 30 minutes		83.7↑	79.9

↑↓ Statistically significant difference between MY 2022 vs MY 2021.

### MY 2022 – MY 2021 Medi-Cal provider after-hours availability results – by county

Standards	County													
	Kern		Los Angeles		Sacramento		San Diego		San Joaquin		Stanislaus		Tulare	
	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)	2022 rate (%)	2021 rate (%)
Appropriate after-hours emergency instructions	93.6	85.5	96.8	97.6	76.3	84.8	87.0	95.0	85.0	95.2	99.3	99.4	98.0	96.4
Ability to contact physician after-hours within 30 minutes	93.6	23.6	89.5	86.4	79.4	74.2	78.7	81.4	27.6	41.6	91.9	84.7	87.1	86.5