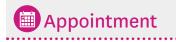


Improve Your Patients' Experience with Timely Access

MAKE APPOINTMENTS OR RESPOND TO PATIENTS WITHIN REGULATORY STANDARDS

Appointment wait time standards¹ must be met by primary care physicians (PCPs) or specialty care physicians (SCPs). Your patients have the right to appointments within these standards.

Access standard



Urgent care

Urgent care appointment with PCP	Within 48 hours of request
Urgent care appointment with SCP (prior approval needed)	Within 96 hours of request
Urgent care appointment with non-physician mental health provider	Within 48 hours of request
Non-urgent	
Non-urgent care appointment with PCP	Within 10 business days of request
Non-urgent care appointment with SCP	Within 15 business days of request
Non-urgent care appointment with non-physician mental health provider	Within 10 business days of request
Appointment for ancillary services	Within 15 business days of request
First prenatal visit	Within 2 weeks of request
Well-child visit	Within 10 business days of request
Wellness check	Within 30 calendar days of request



In-office wait time for scheduled appointments must not exceed 30 minutes.

(continued)

¹The Department of Health Care Services (DHCS), Department of Managed Health Care (DMHC), Centers for Medicare & Medicaid Services (CMS), and National Committee for Quality Assurance (NCQA) require health plans to assess and report availability by contracted providers.

Directing patients to the appropriate after-hours care can:

- Reduce improper use of emergency room services.
- Improve health outcomes.

Be sure to discuss after-hours and weekend access to care during your first visit with each patient and at least yearly.

• After-hours access	Standard
Emergency care	Call 911 or go to the emergency room.
Urgent care	Call the provider's office 24 hours a day, 7 days a week. Expect a call back from a provider within 30 minutes.

Scripts are available so you can tell your patients how to access timely care when they call after business hours. Sample scripts can be found in the Provider Library, which can be accessed using the instructions below.

C Phone response	Standard Standard
Phone answer time at provider's office	Answer calls within 60 seconds.
Phone call back during normal business hours for non-urgent issues	Call patients back within 1 business day.

Non-emergency timely access standards for behavioral health services through MHN

i Access type	Standard
Access to urgent care (that does not require prior authorization) with a behavioral health provider	Within 48 hours
Access to urgent care (that requires prior authorization) with a behavioral health provider	Within 96 hours
Access to non-urgent appointment with non-physician behavioral health care provider for routine care	Within 10 business days of request
Access to non-urgent appointment with psychiatrist for routine care	Within 15 business days of request

CalViva Health is a licensed health plan in California that provides services to Medi-Cal enrollees in Fresno, Kings and Madera counties. CalViva Health contracts with Health Net Community Solutions, Inc. to provide and arrange for network services. *Health Net Community Solutions, Inc. is a subsidiary of Health Net, LLC and Centene Corporation. Health Net is a registered service mark of Health Net, LLC. All other identified trademarks/service marks remain the property of their respective companies. All rights reserved.

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Reminder: Interpreter services must be available at the time of the appointment.

To request interpreter services for members, contact 888-893-1569.



Check out the Provider Library on the provider portal for more details. Follow these steps:

- 1. Log on to **provider. healthnetcalifornia.com.**
- 2. Select *Provider Library* under Quick Links.
- 3. Select your line of business > Provider Manual > Provider Oversight > Service and Quality Requirements > Access to Care and Availability Standards.