

PROVIDER Update



NEWS & ANNOUNCEMENTS

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7 PAGES

2024 Provider Access Survey Results

Tracking year-over-year performance in timely appointments and after-hours care

The results of the 2024 Provider Appointment Availability Survey (PAAS) and Provider After-Hours Access Survey are now available. These annual surveys, conducted between August and December 2024, assess how well providers meet state standards for timely access to care and after-hours services.

The Department of Managed Health Care (DMHC) collected data from participating primary care physicians (PCPs), specialty care providers (SCPs), ancillary providers, and non-physician mental health providers (NPMH).

Important: These surveys fulfilled regulatory requirements from both the DMHC and the Department of Health Care Services (DHCS). Providers who fall short of access standards are required to submit a corrective action plan (CAP).

2024 Provider Appointment Availability Survey results

Appointment access rules help ensure patients get care quickly. Care should match the urgency of the condition and follow good medical practice.

The 2024 PAAS survey results show that some areas need improvement. Several appointment access standards from DMHC and DHCS did not meet the 70% performance goal for provider availability.

These include:

- Urgent care appointment with a specialist -- that requires prior authorization -- within 96 hours.
- Non-urgent appointment with specialist within 15 business days.
- Urgent care appointments with psychiatrist within 96 hours.

Refer to the full results, including county level data on pages 4-7. The overall rates reflect data from all counties in Health Net's* network in 2024.

Corrective Action Plan

DMHC regulations (CCR T28 §1300.67.2.2(d)(3)) require health plans to take action when timely access standards are not met. If a provider group or office fails to meet urgent or non-urgent appointment standards, they will receive a CAP. Providers who receive a CAP must:

THIS UPDATE APPLIES TO CALIFORNIA PROVIDERS:

- Physicians
- Participating Physician Groups
- Ancillary Providers

LINES OF BUSINESS:

- Medi-Cal
 - Amador
 - Calaveras
 - Inyo
 - Los Angeles
 - Mono
 - Sacramento
 - San Joaquin
 - Stanislaus
 - Tulare
 - Tuolumne

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PROVIDER PORTAL

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- Submit a written improvement plan (IP) within 30 days. This plan must explain how each issue was addressed.
 - Provide a signed statement confirming two things:
 - 1 They did not meet access standards.
 - 2 They informed their providers of the survey results.
 - Share more details if requested by Health Net to confirm that corrective steps were taken.
 - Attend an online training webinar hosted by Health Net as part of their IP.

For questions or concerns about meeting these standards, contact Health Net via email at DMHC_AccessIP@healthnet.com.

MY 2024 Provider Appointment Availability Survey Champions

Providers that met the performance goals for the 2024 Provider Appointment Availability Survey are recognized and appreciated by Health Net for their dedication and commitment to their patients in making time available to see them when they need it most. To view the list of physicians who achieved excellence in 2024, please go to Health Net's dedicated *2024 Provider Appointment Availability Survey Champions* webpage at <https://bit.ly/AfterHoursAvailabilitySurvey>.

Improve Health Outcomes: A Guide for Providers toolkit

The *Improve Health Outcomes: A Guide for Providers* toolkit is included with the CAP packets. It offers helpful information, tools and resources to support patient satisfaction.

- Health care performance measurement.
- Quality improvement activities.
- Timely appointment access.
- Advance access.

You can find the toolkit online at provider.healthnet.com > Quality Improvement > Provider Resources > *Improve Health Outcomes: A Guide for Providers – Health Net* (PDF).

Maintaining access standards

Reminder: The 2025 PAAS and After-Hours Survey are now underway.

You will receive an email or fax with a link to complete the surveys online. Please respond within five business days. A phone survey will be done if:

- A physician or other provider does not respond within five business days.
- A physician or other provider's email address or fax number is not available.

Note: DMHC accepts telehealth as a valid next available appointment.

Timely access to care is important for member safety and is reviewed every year. To help your office meet standards:

- Review your scheduling and after-hours procedures regularly.
- Train new staff and answering service staff on access standards and scripts.
- Test your systems with self-audits or secret shopper calls to check appointment access and after-hours messaging.

For help, visit the Provider Library at providerlibrary.healthnetcalifornia.com. You can find after-hours script in a variety of languages.

You may not need to complete the PAAS in 2026

PCPs who qualify as Advanced Access Providers will automatically meet urgent and non-urgent appointment standards. This means they will not need to complete the PAAS survey for the next three years.

Do any of your PCPs offer same-day appointments?

If so, contact us at DMHCAccess_IP@healthnet.com.

Additional information

If you have questions regarding the information contained in this update, contact the Access and Availability Unit by email at DMHCAccess_IP@healthnet.com or call Health Net Medi-Cal Provider Services at 800-675-6110.

Measurement year (MY) 2024 – MY 2023 Medi-Cal Provider Appointment Availability Survey results – overall

Access measure	Appointment standard (wait time)	Performance goal	MY 2024 rate (%)	MY 2023 rate (%)
PCPs and specialists				
Urgent care appointment with primary care physician (PCP)	48 hours	70%	67.2	78.4
Urgent care appointment with specialist that requires prior authorization	96 hours		52.1	66.0
Non-urgent appointment with PCP	10 business days		79.7	86.2
Non-urgent appointment with specialist	15 business days		66.7	68.3
Preventive health or well-child appointment with PCP ¹	10 business days		68.7	70.7
Physical exam/wellness check appointment with PCP ¹	30 calendar days		87.9	87.1
Initial prenatal appointment with PCP ¹	2 weeks		84.2	80.4
Initial prenatal appointment with specialist ¹	2 weeks		69.2	73.8
Ancillary providers				
Non-urgent ancillary appointment for magnetic resonance imaging (MRI), mammogram, physical therapy	15 business days	70%	95.0	96.3
Behavioral health providers				
Urgent care appointment with psychiatrist	96 hours	70%	70.0	62.0
Non-urgent appointment with psychiatrist	15 business days		87.7	82.5
Urgent care appointment with non-physician mental health provider (NPMH)	96 hours		71.4	76.2
Non-urgent appointment with NPMH provider	10 business days		86.6	84.3
Non-urgent follow-up appointment with NPMH provider	10 business days	80%	85.5	88.0

¹First prenatal visits, 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 2024 – MY 2023 Medi-Cal Provider Appointment Availability Survey results – by county

Standards	County									
	Los Angeles		Sacramento		San Joaquin		Stanislaus		Tulare	
	2024 rate (%)	2023 rate (%)	2024 rate (%)	2023 rate (%)	2024 rate (%)	2023 rate (%)	2024 rate (%)	2023 rate (%)	2024 rate (%)	2023 rate (%)
PCPs and specialists										
Urgent care visit with PCP within 48 hours	69.0	77.9	59.4	71.1	48.8	54.3	52.1	73.0	81.5	84.8
Urgent care visit with specialist that requires prior authorization within 96 hours	55.4	68.2	35.0	64.3	62.4	65.4	44.1	56.4	49.5	64.3
Non-urgent appointment with PCP within 10 business days	86.8	90.0	75.0	75.2	53.4	68.1	66.0	79.8	90.0	95.6
Non-urgent appointment with specialist within 15 business days	71.6	75.5	52.5	64.6	67.0	71.6	65.1	51.0	72.6	82.5
Well-child visit with PCP within 10 business days ¹	73.8	80.7	63.2	70.0	0.0**	52.6	NR	63.2	71.4	75.0
Physician exam/wellness checks with PCP within 30 calendar days ¹	88.6	92.8	88.9	88.9	66.7**	76.5	NR	69.2	100.0**	94.1
Initial prenatal visit with PCP within 2 weeks ¹	92.3	75.0	83.3**	83.3**	NR	0.0**	60.0**	100.0**	60.0**	100.0
Initial prenatal visit with specialty care provider (SCP) within 2 weeks ¹	100.0**	66.7	66.7**	66.7	100.0**	100.0**	NR	100.0**	100.0**	75.0

¹First prenatal visits, 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.

NR – Not reportable

** – Denominator less than 10

MY 2024 – MY 2023 Provider After-Hours Access Survey results

Overall results for MY 2024 PAHAS indicate only the *After-hours emergency instructions* metric met the 90% performance goal. The *Ability to contact on-call physician after hours (for urgent issues)* metric was not met. The following tables display the after-hours results overall and by county.

MY 2024 – MY 2023 Medi-Cal Provider After-hours Access Survey results – overall

Access measure	Appointment standard (wait time)	Performance goal	MY 2024 rate (%)	MY 2023 rate (%)
After-hours emergency instructions	Appropriate instructions for emergency issues	90%	95.0	95.7
Contact on-call physician after hours (for urgent issues)	Callback within 30 minutes		75.7	78.4

MY 2024 – MY 2023 Medi-Cal Provider After-hours Access Survey results – by county

Standards	County									
	Los Angeles		Sacramento		San Joaquin		Stanislaus		Tulare	
	2024 rate (%)	2023 rate (%)	2024 rate (%)	2023 rate (%)	2024 rate (%)	2023 rate (%)	2024 rate (%)	2023 rate (%)	2024 rate (%)	2023 rate (%)
Appropriate after-hours emergency instructions	94.7	95.2	97.6	87.9	98.9	95.5	92.5	99.2	98.2	99.0
Ability to contact physician after-hours within 30 minutes	82.6	81.6	45.7	62.6	40.0	49.3	74.6	92.9	73.0	89.3

MY 2024 Telephone Access Survey

To monitor telephone access, the Medi-Cal Telephone Access Survey was administered in 2024. A random sample of PCPs were selected and contacted to assess performance for two metrics: (1) Appropriate answer time: percent provider offices were able to answer phone calls within 60 seconds, and (2) ability to call back members back for non-urgent issues within one business day.

Access measure	Standards	Performance goal	MY 2024 rate (%)	MY 2023 rate (%)
Telephone answer time	Within 60 seconds	90%	100.0	100.0
Provider call-back for non-urgent issues during normal business hours	Within one business day		82.2	19.7

MY 2024 member in-office wait time

In 2024, the plan monitored members' in-office wait time during an appointment at PCPs' and specialists' offices through a provider survey. The standard for this access survey is for members' wait time to not exceed 30 minutes upon arrival when waiting for a scheduled appointment. Survey results for PCPs exceeded the plan's performance goal of 70%.

Access measure	Standards	Performance goal	MY 2024 rate (%)	MY 2023 rate (%)
In-office wait time at PCPs' office	Wait time upon arrival after set appointment time not to exceed 30 minutes	70%	100.0	100.0