

Maximize Your Access and Availability: Join Our No-Cost Webinars!

KEEP INFORMED ABOUT REQUIREMENTS AND BEST PRACTICES

Learn about access and availability requirements. Get tips on how to meet performance goals.

Register to attend one of the webinars below for insight on ways to improve member satisfaction and survey outcomes. Refer to the Access Standards attached to ensure you meet requirements.



Webinar topics

- Overview of regulations on access and availability.
- Annual monitoring and reporting for the:
 - Provider Appointment Availability Survey.
 - Provider After-Hours Survey.
 - Timely Access Monitoring Survey.
- Resources to help meet your needs.



Presented by

Access and Availability Unit and Provider Network Operations.



Who should attend

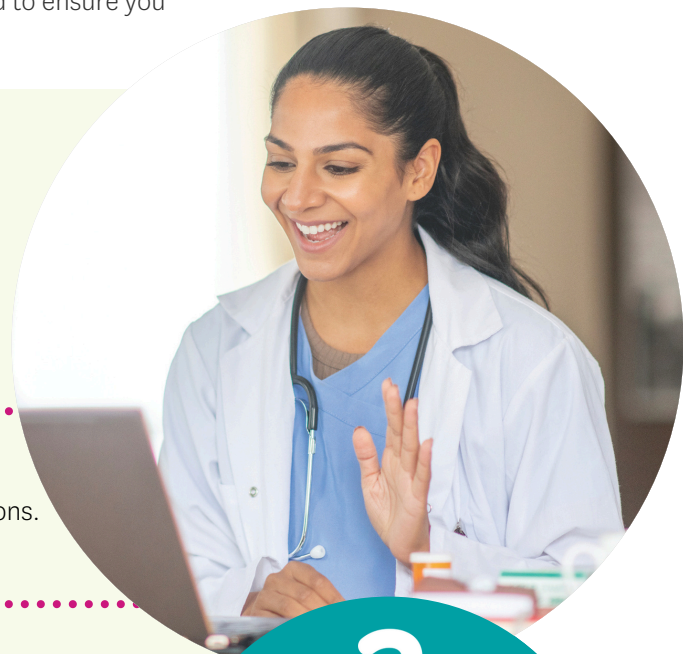
- Physicians and other providers, office managers and provider office staff members.
- Participating physician group (PPG) provider network administrators and PPG provider relations staff.



Dates, times (Pacific Time) and registration link

- July 23, 2025, at Noon
- August 6, 2025, 4 p.m.
- August 20, 2025, at Noon
- October 1, 2025, at Noon
- October 15, 2025, at Noon
- October 29, 2025, 4 p.m.
- November 12, 2025, at Noon
- November 19, 2025, 4 p.m.
- December 3, 2025, at Noon
- December 17, 2025, at Noon

Register today at: <https://bit.ly/access-availability>



Questions?

Email the Access and Availability Team at Access.Availability.PNM@healthnet.com.

Access Standards

Appointments	
Appointment type	Access standard
Urgent care	
Urgent care appointment with primary care physician (PCP).	Within 48 hours of request.
Urgent care appointment with specialist (prior approval needed).	Within 96 hours of request.
Non-urgent care appointments	
Non-urgent care appointment with PCP.	Within 10 business days of request.
Non-urgent care appointment with specialist.	Within 15 business days of request.
Appointment for ancillary services.	Within 15 business days of request.
First prenatal visit. ¹	Within two weeks of request.
Well-child visit. ¹	Within two weeks of request.
Preventive/wellness check. ¹	Within 30 business days of request.
Behavioral health appointments	
Urgent care appointment with non-physician behavioral health care provider or behavioral health care physician (psychiatrist) that does not require prior authorization.	Within 48 business hours of request.
Urgent care appointment with non-physician behavioral health care provider or behavioral health care physician (psychiatrist) that requires prior authorization.	Within 96 business hours of request.
Non-urgent care appointment with non-physician behavioral health care provider.	Within 10 business days of request.
Non-urgent appointment with behavioral health care physician (psychiatrist).	Within 15 business days of request.
Non-urgent care follow-up appointment with non-physician mental health care provider.	Within 10 business days of request.

¹Health plan standard. 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.

(continued)

Access Standards

Appointments	
Appointment type	Access standard
After-hours	
After-hours physician availability.	Call back within 30 minutes of call.
After-hours emergency room instruction.	Appropriate emergency instructions.
Provider office phone	
The survey evaluates provider compliance with the phone access standards as set forth by the California Department of Health Care Services (DHCS).	
Answer member calls (can be live or recorded).	Within 60 seconds.
Return member calls for non-urgent issues.	Within one business day.
In-office wait time	
In-office wait time for scheduled appointments (PCP and specialists).	Not to exceed 30 minutes for Medi-Cal. Not to exceed 15 minutes for HMO, POS and PPO.

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