

# Enhancing Patient Experience Through Timely Access

## MEETING APPOINTMENT WAIT TIME STANDARDS

*Primary care physicians (PCPs), practitioners and specialists<sup>1</sup> must follow rules about how quickly patients get appointments. It is important to ensure that appointments or responses to patients are made within regulatory guidelines.*

By following these requirements, physicians, practitioners and other providers help guarantee timely access to care and improve the overall patient experience.



Type of care	Standard
<b>Emergency care</b>	Immediately
<b>Urgent care visit with a PCP or specialist (no prior authorization)</b>	Appointment within 48 hours of request
<b>Urgent care visit with a PCP or specialist (requiring prior authorization)</b>	Appointment within 96 hours of request
<b>Non-urgent/routine care appointment with a PCP (includes OB-GYN acting as PCP)</b>	Appointment within 10 business days of request
<b>Non-urgent care appointment with a specialist (includes OB-GYN specialty care)</b>	Appointment within 15 business days of request
<b>Non-urgent ancillary services for MRI/mammogram/physical therapy</b>	Appointment within 15 business days of request
<b>Non-urgent appointment with a physician in a skilled nursing facility or intermediate care facility</b>	<p><b>Amador, Calaveras, Inyo, Mono, Tulare, Tuolumne counties:</b> Within 14 calendar days of request.</p> <p><b>San Joaquin, Stanislaus counties:</b> Within 7 business days of request</p> <p><b>Los Angeles, Sacramento counties:</b> Within 5 business days of request</p>
<b>After-hours care (PCP)</b>	<p>Ability to contact on-call physician after hours within 30 minutes for urgent issues</p> <p>Appropriate after-hours emergency instructions</p>
<b>In-office wait time for scheduled appointments (PCP and specialist)</b>	Not to exceed 30 minutes
<b>Provider office phone callback for non-urgent issues during normal business hours</b>	Provider callback within 1 business day
<b>Phone answer time at provider's office</b>	Within 60 seconds
<b>Rescheduling of appointments</b>	Must be promptly rescheduled in a way that ensures continuity of care and meets the patient's needs, consistent with professional standards

(continued)

<sup>1</sup>The 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.

## Behavioral health appointment access standards (applies to behavioral health providers only)

Type of care	Standard
Access for life-threatening emergency	Immediately
Non-life-threatening emergency	Within 6 hours
Urgent care appointment with non-physician mental health provider or mental healthcare physician (psychiatrist) that does not require prior authorization	Appointment within 48 hours of request
Urgent care appointment with non-physician mental health provider or mental healthcare physician (psychiatrist) that requires prior authorization	Appointment within 96 hours of request
Non-urgent care appointment with non-physician mental health provider for routine care	Appointment within 10 business days of request
Non-urgent appointment with mental healthcare physician (psychiatrist) for routine care	Appointment within 15 business days of request
Non-urgent follow-up appointment with non-physician mental health provider	Within 10 business days of request
Rescheduling of appointments	Must be promptly rescheduled in a way that ensures continuity of care and meets the patient's needs, consistent with professional standards

Check out the Provider Library for more details.

Follow these steps:

- 1 Go to [providerlibrary.healthnetcalifornia.com](https://providerlibrary.healthnetcalifornia.com).
- 2 Select a line of business.
- 3 Select *Provider Manual > Provider Oversight > Service and Quality Requirements > Access to Care and Availability Standards.*

## Qualified Advanced Access Providers are automatically compliant!

PCPs and other qualified primary care providers who become Qualified Advanced Access Providers with Health Net\* will automatically be compliant for urgent and non-urgent appointment standards for Health Net's annual Provider Appointment Availability Survey for the next three years!

Do you or your PCPs offer same-day scheduling? Contact us at [Access.Availability.PNM@healthnet.com](mailto:Access.Availability.PNM@healthnet.com).

**Reminder:** Interpreter services must be available at the time of the appointment. **To request interpreter services for your Health Net patients, contact:**

Behavioral health providers	800-647-7526	Monday through Friday, 8 a.m. to 5 p.m., Pacific time (not available after hours)
Employer Group HMO, POS, PPO	800-641-7761	Monday through Friday, 8 a.m. to 5 p.m., Pacific time
Individual & Family Plans (Ambetter HMO)	888-926-2164	Monday through Friday, 8 a.m. to 5 p.m., Pacific time
Individual & Family Plans (Ambetter PPO)	844-463-8188	Monday through Friday, 8 a.m. to 5 p.m., Pacific time
Medi-Cal	800-675-6110	Monday through Friday, 8 a.m. to 6 p.m., Pacific time. Press 1 after the voice prompt to bypass a representative and connect directly with an interpreter For after hours, select the member option
After-hours language assistance for Individual & Family Plans and Employer Group Plans	800-546-4570	Monday through Friday, 5 p.m. to 8 a.m., Pacific time, weekends and holidays



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