

# 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  |
|---|---|
| Emergency care  | Immediately   |
| Urgent care visit with a PCP or specialist (no prior authorization)                                 | Appointment within 48 hours of request  |
| Urgent care visit with a PCP or specialist (requiring prior authorization)                          | Appointment within 96 hours of request  |
| Non-urgent/routine care appointment with a PCP (includes OB-GYN acting as PCP)                      | Appointment within 10 business days of request  |
| Non-urgent care appointment with a specialist (includes OB-GYN specialty care)                      | Appointment within 15 business days of request  |
| Non-urgent ancillary services for MRI/mammogram/physical therapy                                    | Appointment within 15 business days of request  |
| Non-urgent appointment with a physician in a skilled nursing facility or intermediate care facility | <b>Imperial County:</b><br>Within 14 calendar days of request   |
| After-hours care (PCP)  | Ability to contact on-call physician after hours within 30 minutes for urgent issues<br>Appropriate after-hours emergency instructions      |
| In-office wait time for scheduled appointments (PCP and specialist)                                 | Not to exceed 30 minutes  |
| Provider office phone callback for non-urgent issues during normal business hours                   | Provider callback within 1 business day   |
| Phone answer time at provider's office  | Within 60 seconds   |
| 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 |

(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](http://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 **Community Health Plan of Imperial Valley patients**, contact Community Health Plan of Imperial Valley at **833-236-4141** and press **1**, 24 hours a day, 7 days a week.

Behavioral health providers should call **800-647-7526**, Monday through Friday, 8 a.m. to 5 p.m. Pacific time (not available after hours).