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News

20-791 Medi-Cal 2019 Provider Appointment Availability and After-Hours Access Survey Results

Date: 10/02/20

This information applies to Physicians, Participating Physician Groups (PPGs) and Ancillary providers.

For Medi-Cal, this information applies to Kern, Los Angeles, Sacramento, San Diego, San Joaquin, Stanislaus, and Tulare counties.

Summary

See how results compared to the previous year

The Department of Managed Health Care (DMHC) and Department of Health Care Services (DHCS) have requirements to ensure health care services are provided to patients in a timely manner appropriate for the nature of the patients' conditions and consistent with good professional practice. The Medi-Cal Provider Appointment Availability and After-Hours Access surveys measure how well providers comply with DMHC and DHCS availability and access requirements.

Areas for improvement

Based on 2019 survey results, the DMHC and DHCS metrics below did not meet the 80% performance goal:

- Urgent care appointment with PCP within 48 hours.
- Urgent care appointment with a specialist within 96 hours.
- Non-urgent care appointment with a specialist within 15 business days.

Go online for complete results

The complete provider update, 20-791, *Medi-Cal 2019 Provider Appointment Availability and After-Hours Access Survey Results* covers the content below in detail:

- Complete 2019 Provider Appointment Availability Survey (PAAS) and Provider After-Hours Access Survey (PAHAS) results (overall and by county).
- Corrective action plan (CAP) requirements for when timely access to care standards are not met.
- Resources to help comply with appointment availability and after-hours access standards.
- Tips to help maintain appointment access standards and after-hours messaging.

The complete update is available in the Provider Library at providerlibrary.healthnetcalifornia.com under *Updates and Letters*, then search for provider update 20-791. Providers who do not have access to the Internet may request a print copy of update 20-791 by contacting the Provider Communications Department by email (<mailto:provider.communications@healthnet.com>).

If you have questions about the information in this update, contact the Access and Availability Unit by email (mailto:Access_IP@healthnet.com) or Health Net Medi-Cal Provider Services at 1-800-675-6110.

Complete

See how results compared to the previous year

The 2019 annual Provider Appointment Availability Survey (PAAS) and Provider After-Hours Access Survey (PAHAS) results are in. The results are from a random sample of participating primary care physicians (PCPs), specialty care providers (SCPs), ancillary providers, and non-physician mental health providers (NPMH) surveyed from August 2019 through December 2019.

The surveys comply with the Department of Managed Health Care (DMHC) and the Department of Health Care Services (DHCS) access requirements. The survey results are used to monitor provider compliance with timely appointment availability and after-hours access standards, and evaluate the effectiveness of the network to meet the needs and preferences of Health Net* members.

Failure to meet one or more timely appointment and after-hours access standards, as indicated, will result in a corrective action plan (CAP).

2019 Provider Appointment Availability Survey results

Availability and access requirements are designed to ensure that health care appointments are provided to patients in a timely manner appropriate for the nature of the patient's condition and consistent with good professional practice.

The results of the 2019 PAAS survey for DMHC and DHCS appointment access standards reflect a need for improvement in several areas. The following appointment access metrics did not meet the performance goal of 80%:

- Urgent care appointment with PCP within 48 hours.
- Urgent care appointment with a specialist within 96 hours.
- Non-urgent care appointment with a specialist within 15 business days.

Refer to the tables on pages 2–3 for the appointment availability results overall and by county.

Measurement year (MY) 2019 and MY 2018 Medi-Cal provider appointment availability results – overall

PCPs and specialists

| ACCESS MEASURE | APPOINTMENT STANDARD (WAIT TIME) | PERFORMANCE GOAL | MY2019 RATE (%) | MY2018 RATE (%) |
|--|----------------------------------|------------------|-----------------|-----------------|
| Urgent care appointment with PCP | 48 hours of request | 80% | 72.8^ | 65.4 |
| Urgent care appointment with specialist that requires prior authorization | 96 hours of request | 80% | 58.0^ | 69.4 |
| Non-urgent appointment with PCP | 10 business days of request | 80% | 91.0^ | 80.6 |
| Non-urgent appointment with specialist | 15 business days of request | 80% | 79.6^ | 84.9 |
| Preventive health or well-child appointment with PCP | 10 business days of request | 80% | 85.3^ | 71.8 |
| Physical exam/wellness check appointment with PCP | 30 calendar days | 80% | 93.3^ | 84.4 |
| Initial prenatal appointment with PCP | 2 weeks of request | 80% | 92.0^ | 75.0 |
| Initial prenatal appointment with specialist | 2 weeks of request | 80% | 84.3^ | 93.5 |
| Non-urgent ancillary appointment for magnetic resonance imaging (MRI), mammogram, physical therapy | 15 business days of request | 80% | 96.6 | 100 |

Behavioral health providers

| ACCESS MEASURE | APPOINTMENT STANDARD (WAIT TIME) | PERFORMANCE GOAL | MY2019 RATE (%) | MY2018 RATE (%) |
|---|-----------------------------------|------------------|-----------------|-----------------|
| Urgent care appointment with PCP or Specialist | 48 or 96 hours of request | 80% | 65.0 | N/A |
| Non-urgent appointment with PCP or Specialist | 10 or 15 business days of request | 80% | 85.0 | N/A |
| Initial prenatal appointment with PCP or Specialist | 2 weeks of request | 80% | 90.0 | N/A |

Behavioral health providers

| ACCESS MEASURE | APPOINTMENT STANDARD (WAIT TIME) | PERFORMANCE GOAL | MY2019 RATE (%) | MY2018 RATE (%) |
|--|----------------------------------|------------------|-----------------|-----------------|
| Urgent care appointment with psychiatrist | 96 hours of request | 90% | 54.3 | 43.5 |
| Non-urgent appointment with psychiatrist | 15 business days of request | 90% | 78.0 | 88.9 |
| Urgent care appointment with non-physician mental health provider (NPMH) | 96 hours of request | 90% | 66.1↓ | 76.7 |
| Non-urgent appointment with NPMH provider | 10 business days of request | 90% | 77.1↓ | 91.4 |

↓ Statistically significant difference between MY 2019 vs. MY 2018, p < 0.05.

2019 Medi-Cal provider appointment availability results – by county

| STANDARDS | KERN 2019 RATE (%) | KERN 2018 RATE (%) | LOS ANGELES 2019 RATE (%) | LOS ANGELES 2018 RATE (%) | SACRAMENTO 2019 RATE (%) | SACRAMENTO 2018 RATE (%) | SAN DIEGO 2019 RATE (%) | SAN DIEGO 2018 RATE (%) | SAN JOAQUIN 2019 RATE (%) | SAN JOAQUIN 2018 RATE (%) | SAN JOAQUIN 2019 RATE (%) | SAN JOAQUIN 2018 RATE (%) |
|---|--------------------|--------------------|---------------------------|---------------------------|--------------------------|--------------------------|-------------------------|-------------------------|---------------------------|---------------------------|---------------------------|---------------------------|
| Urgent care visit with PCP within 48 hours | 64.2 | 76.0 | 75.0 | 62.5 | 55.3 | 51.9 | 77.4 | 64.5 | 67.8 | 63.6 | 57.1 | 51.9 |
| Urgent care visit with specialist that requires prior authorization within 96 hours | 42.2 | 59.4 | 62.7 | 74.4 | 51.4 | 66.7 | 48 | 60.3 | 57.1 | 66.7 | 62.7 | 62.7 |
| Non-urgent appointment with PCP within 10 business days | 85.1 | 84.0 | 93.3 | 73.3 | 78.3 | 65.5 | 93.4 | 87.3 | 84.1 | 80.0 | 76.6 | 76.6 |
| Non-urgent appointment with specialist within 15 business days | 73.5 | 84.8 | 84.0 | 86.6 | 71.0 | 82.4 | 71.2 | 84.8 | 80.4 | 82.8 | 76.6 | 76.6 |
| Well-child visit with PCP within 10 business days | 68.8 | 64.6 | 88.6 | 62.7 | 75.8 | 55.8 | 87.1 | 83.1 | 77.6 | 73.8 | 67.7 | 67.7 |

| | | | | | | | | | | | |
|---|------|------|------|------|------|------|------|------|------|------|----|
| Physician exam/wellness checks with PCP within 30 calendar days | 81.3 | 85.4 | 96.2 | 78.4 | 85.6 | 76.9 | 91.5 | 81.0 | 89.2 | 86.0 | 80 |
| Initial prenatal visit with PCP within 2 weeks | 78.3 | 68.8 | 95.6 | 33.3 | 78.9 | 63.6 | 88.8 | 95.0 | 76.2 | 66.7 | 90 |
| Initial prenatal visit with SCP within 2 weeks | 64.3 | 100 | 89.6 | 94.7 | 70.0 | 100 | 90.5 | 66.7 | 50.0 | 100 | 70 |

A new survey vendor was used for the 2019 PAHAS. Performance guidelines require 90% compliance for after-hours access. Overall results for 2019 PAHAS indicate both metrics were met. The following tables display the after-hours results overall and by county. The results indicate there is a statistically significant increase in the performance score compared to the previous year for both measures. 2019 After-Hours Access Survey results

MY 2019–MY 2018 Medi-Cal provider after-hours availability results – overall

| ACCESS MEASURE | APPOINTMENT STANDARD (WAIT TIME) | PERFORMANCE GOAL | MY2019 RATE (%) | MY2018 RATE (%) |
|---|---|------------------|-----------------|-----------------|
| After-hours emergency instructions | Appropriate instructions for emergency issues | 90% | 95.7 | 87.5 |
| Contact on-call physician after hours (for urgent issues) | Callback within 30 minutes | 90% | 92.0 | 65.7 |

MY 2019 – MY 2018 Medi-Cal provider after-hours availability results – by county

| STANDARDS | KERN 2019 RATE (%) | KERN 2018 RATE (%) | LOS ANGELES 2019 RATE (%) | LOS ANGELES 2018 RATE (%) | SACRAMENTO 2019 RATE (%) | SACRAMENTO 2018 RATE (%) | SAN DIEGO 2019 RATE (%) | SAN DIEGO 2018 RATE (%) | SAN JOAQUIN 2019 RATE (%) | SAN JOAQUIN 2018 RATE (%) | STATEWIDE 2020 RATE (%) |
|--|--------------------|--------------------|---------------------------|---------------------------|--------------------------|--------------------------|-------------------------|-------------------------|---------------------------|---------------------------|-------------------------|
| Appropriate after-hours emergency instructions | 90.9 | 85.7 | 96.4 | 88.5 | 83.9 | 91.7 | 95.0 | 60.0 | 97.3 | 100 | 97.0 |
| Ability to contact physician after-hours within 30 minutes | 100 | 50.0 | 92.7 | 73.2 | 93.8 | 50.0 | 90.1 | 50.0 | 100 | 100 | 75.0 |

– Statistically significant difference between MY 2019 vs. MY 2018, p < 0.05.

Corrective action plan (CAP)

DMHC regulations (28 CCR §1300.67.2.2(d)(3)) require that health plans investigate and request corrective action when timely access to care standards are not met. To comply with these requirements and meet the plan’s compliance requirements as delineated by Health Net’s Accessibility of Providers and Practitioners policy, a CAP will be issued to contracted PPGs and provider offices who fail any of the urgent or non-urgent metrics.

PPGs and providers who receive a CAP are required to:

- Submit a written improvement plan (IP) within 30 calendar days, including the actions taken to correct each deficiency.
- Attend an online provider training webinar, hosted online by Health Net, as part of their IP.

Providers with questions or concerns regarding their ability to meet these standards may contact Health Net by email (mailto:DMHC_AccessIP@healthnet.com).

Maintaining access standards

Providers should review current office scheduling practices and after-hours protocol periodically to ensure they are accurate and meet current guidelines. Orientation for new staff, office staff and answering service staff should include the appointment access standards and after-hours procedures and scripts. Providers can test their own appointment scheduling and after-hours practices by scheduling self-audits or secret shopper calls to verify appointment standards are met and after-hours outbound messaging is appropriate, and take steps to correct any issues identified. The goal of reasonable access to care is essential for member safety and is monitored annually. After-hours script templates can be found online (see Resources) and are available in a variety of languages.

Resources

Research shows that high patient satisfaction is linked to better health outcomes. For help in complying with appointment access standards, refer to the resources online in the Provider Library (<http://providerlibrary.healthnetcalifornia.com>).

Included with the CAP packet is the Improve Health Outcomes: A Guide for Providers toolkit for participating Medi-Cal providers. The toolkit includes information, support tools and resources that focus on drivers of patient satisfaction:

- Health Care Performance Measurement Systems
- QI Activities
- Timely Appointment Access
- Advance Access

Implementing just one practice intervention can make a big difference to an organization and a patient's experience. The brochure is available electronically through Health Net's Provider Portal (<http://provider.healthnet.com>). Go to the *QI Corner > Working with Health Net > Quality*. Under Provider Resources, select *Improve Health Outcomes: A Guide for Providers.pdf*.

Additional information

Providers are encouraged to access the provider portal online (<http://provider.healthnet.com>) for real-time information, including eligibility verification, claims status, prior authorization status, plan summaries, and more.

If you have questions regarding the information contained in this update, you may contact the Access and Availability Unit by email (mailto:DMHCAccess_IP@healthnet.com) or Health Net Medi-Cal Provider Services at 1-800-675-6110.

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