

Timely Access to Care

May 18, 2023

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Agenda

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3. After-hours call: Q&A
4. Appointment access
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Timely Access To Care

- **Department of Health Managed Care (DHMC) and the Department of Health Care Services (DHSC) requires providers to**
 - Provide members access to covered services 24/7.
 - Use an answering service/ answering machine if a staff member is not immediately available.
 - If an answering service/ machine is being used it **MUST** prompt members to dial 911 or go directly to the nearest hospital emergency room
 - Make appointments available to patients in a suitable manner based off the type of appointment being requested
- **Timely access to care is essential**
 - To improve patient outcomes
 - To show patients support and compassion
 - To remind patients we are here for them.



After-hours care

- Access includes the availability of a provider or a designated agent by telephone during:
 - Regular hours on weekdays
 - After regular office hours
 - Weekends
 - Holidays
- If unavailable providers MUST arrange for on-call coverage by another participating provider.
 - HEALTH NET: 1-888-624-3096
 - LA-CARE: 1-800-249-3619 (TTY 711)
 - ANTHEM BLUE CROSS: 1-800-977-0027
 - BLUE SHIELD: 1-800-775-2583



After-hours access to care script

Sample Answering Machine/Service Scripts

Hello, you have reached the <answering service/ centralized triage> for Dr. <Last Name>. If this is a medical emergency, please hang up and dial 911 immediately or go to the nearest emergency room. If you wish to speak with the on-call physician, please stay on the line and I will connect you.



Hello, you have reached the <answering service/ centralized triage> for Dr. <Last Name>. If this is a medical emergency, please hang up and dial 911 immediately or go to the nearest emergency room. If you wish to speak with the on-call physician, Dr. <Last Name> can assist you. Please <page/call> him/her at <telephone number>. You may expect a call back within 30 minutes.

After-hours call: Q&A

- **True or False: If a patient calls the answering service, after-hours personnel, or answering machine MUST ask the member if the call is an emergency?**

A: True, In the event of an emergency, the member **MUST** be immediately directed to dial 911 or to proceed directly to the nearest hospital emergency room.

- **Q: If a staff or answering service is not immediately available, an answering machine may be used. It must prompt members to dial 911 or go directly to the nearest hospital emergency room. What additional information MUST the answering service provide?**

A: The answering machine must also give members an alternative contact number so they can contact a live person and provide a 30 minute timeframe from hearing back from a provider

After-hours call: Q&A

- **True or False: In the event of an emergency, non-English-speaking members who call their PCP after hours should expect to get language-appropriate messages?**
- **A:** True, these messages should be able to direct Non-English-speaking members to dial 911 or proceed directly to the nearest hospital in case of an emergency. In addition, an alternative contact number should be provided so members can reach the primary care physician or on-call provider with medical concerns or questions.
- **True or False: In a nonemergency situation, non-English-speaking members should receive instruction on how to contact the on-call provider?**
- **A:** True, if an answering machine is used, the machine should explain how to contact a telephone interpreter. All calls taken by an answering service must be returned and provided with a specific call back time-frame.

Appointment access

- **Timely** refers to the availability of an appointment in a suitable manner based off the type of appointment being requested:
- **For example:**
 - Routine Primary Care Appointment (≤ 10 business days)
 - Non-Life-Threatening Emergency (≤ 6 hours of request)



Timely Access to Care Standards

APPOINTMENT TYPE	APPOINTMENT ACCESS STANDARDS
URGENT APPOINTMENTS	
Urgent care appointment with PCP	Within 48 hours of request
Urgent care appointment with Specialists	Within 96 hours of request
NON- URGENT APPOINTMENTS	
Non-urgent care appointment with PCP	Within 10 business days of request
Non-urgent care appointment with Specialists	Within 15 business days of request
Appointment for Ancillary Services	Within 15 business days of request
First prenatal visit with PCP of Specialists	Within 2 weeks of request
Well-child visit	Within 10 business days of request
Wellness visit	Within 30 calendar days of request

Continued: Timely Access to Care Standards

AFTER-HOURS ACCESS	
After-hours physician availability	Call back within 30 minutes
After-hours ER instructions	Appropriate emergency instructions
TELEPHONE ACCESS	
Telephone answer time during normal business hours	Answers calls within 60 seconds
Telephone call back for non-urgent issues	Calls patients back within 1 business day
IN-OFFICE WAIT TIME	
In-office wait time for scheduled appointments with PCP	Not to exceed 30 minutes

Continued: Timely Access to Care Standards

APPOINTMENT TYPE	APPOINTMENT ACCESS STANDARDS
BEHAVIORAL HEALTH APPOINTMENTS	
Urgent care appointment with non-physician behavioral health care physician (Psychiatrist) that does not require prior authorization	Within 48 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 hours of request
Non-Urgent appointment with non-physician behavioral health care physician (Psychiatrist)	Within 15 business days of request
Non-Urgent appointment with non-physician behavioral health care provider	Within 10 business days of request
Non-Urgent follow-up appointment with non-physician mental health care provider (NPMH)	Within 10 business days of request

Appointment access: Q&A

- **Q: How soon does a Mental Health appointment (no physician) need to be scheduled?**
- A: Within 10 business days of the request

- **Q: How soon does an Urgent Care (Authorization is not required) appointment need to be scheduled?**
- A: Within 2 days of the request

MCSHP: Message

**Thank you for your continued efforts in providing
our members with the highest level of quality
care by providing timely access.**

MSCHP: Health Education

Email: mcselectquality@memorialcare.org

Access to care standards

Participating providers are responsible for offering members access to covered services 24/7. Access includes regular office hours on weekdays and the availability of a provider or designated agent by telephone after regular office hours, on weekends and on holidays. When unavailable, providers must arrange for on-call coverage by another participating provider. Providers are also required to meet appointment access standards as described below.

After-hours calls:

- The answering service or after-hours personnel must ask the member if the call is an emergency. In the event of an emergency, the member must be immediately directed to dial **911** or to proceed directly to the nearest hospital emergency room.
- If staff or answering service is not immediately available, an answering machine may be used. The answering machine message must instruct members with emergency healthcare needs to dial **911** or go directly to the nearest hospital emergency room. The message must also give members an alternative contact number so they can reach the primary care physician (PCP) or on-call provider with medical concerns or questions.
- Non-English-speaking members who call their PCP after hours should expect to get language-appropriate messages. In the event of an emergency, these messages should direct the member to dial **911** or proceed directly to the nearest hospital emergency room.
- In a nonemergency situation, members should receive instruction on how to contact the on-call provider. If an answering service is used, the service should know where to contact a telephone interpreter. All calls taken by an answering service must be returned.

Appointment access

Healthcare providers must make appointments for members from the time of request as follows:

General appointment scheduling	
Emergency examination	Immediate access, 24/7
Urgent (sick) examination	Within 48 hours of request if authorization is not required or within 96 hours of request if authorization is required, or as clinically indicated
Nonurgent (sick) examination	Within 48 to 72 hours of request or as clinically indicated
Routine primary care examination (nonurgent)	Within 10 business days of request
Nonurgent consults/specialty referrals	Within 15 business days of request
Nonurgent care with nonphysician mental health providers (where applicable)	Within 10 business days of request
Nonurgent ancillary	Within 15 business days of request
Mental health appointment, nonphysician	Within 10 business days of request

Services for members under the age of 21 years	
Initial health assessments:	
Children from birth to 20 years of age	Within 120 days of enrollment
Preventive care visits	Within 14 days of request

<https://providers.anthem.com/ca>

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ACAPEC-2797-21 March 2021



Access to Care Quick Tips



L.A. Care
HEALTH PLAN®

Standard¹

Medi-Cal

L.A. Care Covered

Cal-MediConnect

Primary Care Providers (PCP) Accessibility Standards

Routine Primary Care Appointment (Non-Urgent) Services for a patient who is symptomatic but does not require immediate diagnosis and/or treatment.	≤ 10 business days of request		
Urgent Care Appointment - Services for a non-life threatening condition that could lead to a potentially harmful outcome if not treated in a timely manner.	≤ 48 hours of request		
Emergency Care - Services for a potentially life threatening condition requiring immediate medical intervention to avoid disability or serious detriment to health.	Immediate, 24 hours a day, 7 days per week		
Preventive health examination (Routine)	≤ 10 business days of request	≤ 30 calendar days of request	
First Prenatal Visit - A periodic health evaluation for a member with no acute medical problem.	≤ 14 calendar days of request	≤ 10 business days of request	≤ 14 calendar days of request

Specialty Care Provider (SCP) Accessibility Standards:

Routine Specialty Care Physician Appointment (including Behavioral Health Physician)	≤ 15 business days of request		
Urgent Care Appointment - Services for a non-life threatening condition that could lead to a potentially harmful outcome if not treated in a timely manner.	≤ 96 hours, if prior authorization is required		

Ancillary Care Accessibility Standards:

Routine Ancillary Appointment (Non-Urgent)	≤ 15 business days of request		
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Behavioral Health Care Accessibility Standards:

Routine Appointment	≤ 15 business days of request (Physicians) ≤ 10 business days of request (Non-Physicians)		
Urgent Care Appointment - Services for a non-life threatening condition that could lead to a potentially harmful outcome if not treated in a timely manner.	≤ 48 hours of request		
Life Threatening Emergency	Immediately		
Non-Life Threatening Emergency	≤ 6 hours of request		
Emergency Care	Immediate, 24 hours a day, 7 days per week		

After-Hours Care Standards:

After Hours Care - Physicians (PCPs, Behavioral Health, or covering physicians) are required by contract to provide 24 hours a day, 7 days per week coverage to members. *Clinical advice can only be provided by appropriately qualified staff, e.g., physician, physician assistant, nurse practitioner or RN.	<ul style="list-style-type: none"> Automated systems must provide emergency 911 instructions; and Automated system or live party (office or professional exchange service) answering the phone must offer a reasonable process to connect the caller to the PCP, Behavioral Health Provider, or covering practitioner Offer a call-back from the PCP, Behavioral Health Provider, covering practitioner or triage/screening clinician within 30 minutes. If process does not enable the caller to contact the PCP, Behavioral Health Provider, or covering practitioner directly, the "live" party must have access to a practitioner or triage/screening clinician for both urgent and non-urgent calls.		
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Practitioner Telephone Responsiveness:

In-Office Waiting Room Time - The time after a scheduled medical appointment a patient is waiting to be taken to an exam room to be seen by the practitioner.	Within 30 minutes		
Speed of Telephone Answer (Practitioners Office) - The maximum length of time for practitioner office staff to answer the phone.	Within 30 seconds		
Missed Appointments - The time after a missed appointment that a patient is contacted to reschedule their appointment.	Within 48 hours		

¹ Unless otherwise stated, the requirement is 100% compliance.



1.866.LACARE6 (1.866.522.2736)

lacare.org