

THIS CA UPDATE HAS BEEN SENT TO THE FOLLOWING:**COUNTIES:**

- Imperial
- Riverside/San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

LINES OF BUSINESS:

- Molina Medi-Cal Managed Care
- Molina Medicare Options Plus
- Molina Dual Options Cal MediConnect Plan (Medicare-Medicaid Plan)
- Molina Marketplace (Covered CA)

PROVIDER TYPES: **Medical Group/ IPA/MSO****Primary Care**

- IPA/MSO
- Directs

Specialists

- Directs
- IPA

 Hospitals**Ancillary**

- CBAS
- SNF/LTC
- DME
- Home Health
- Other

FOR QUESTIONS CALL**PROVIDER SERVICES:**

(855) 322-4075, Extension:

Los Angeles/Orange CountiesX111113 X123017
X127657 X120104**Riverside/San Bernardino Counties**X127684 X128010
X120618**Sacramento County**

x126232 x121360

San Diego Countyx121805 X121401
x127709 X121413**Imperial County**

x125682

TIMELY ACCESS REGULATIONS & SURVEY REMINDER

This is an advisory notification to inform our Molina Healthcare of California (MHC) network providers regarding the Timely Access Regulations and the upcoming Appointment Availability survey.

MHC will be administering an annual survey as required by the Department of Managed Care (DMHC) Timely Access Regulations. If your practice is selected as part of the provider sample group, you may begin receiving calls to assess the availability of appointments at your office. This survey helps us ensure compliance with the regulatory requirements for timely access waiting time standards.

The results must be reported to the DMHC by health plans annually. Your cooperation in completing the survey below is encouraged if your office is selected to participate.

Appointment Availability Survey: August 2018 – December 2018

Health Plans are required to ensure that health care services are provided to patients in a timely manner appropriate for the nature of the patient's condition, consistent with good professional practice. Exceptions to appointment wait times may apply if DMHC has found exceptions to be permissible.

Health Plans are also required to ensure that plan enrollees have appropriate access to language assistance in obtaining health care services.

The survey is expected to take approximately 10 minutes – please be advised to have your practice ready to complete the survey when contacted.

The 2018 Survey Process Methodology is outlined on the DMHC website located at

<https://www.dmhc.ca.gov/Portals/0/Docs/OPM/MY%202018%20PAAS%20Methodology.pdf>

If a patient is unable to obtain a timely referral to an appropriate provider, a contracting provider or enrollees can contact MHC to obtain assistance. Providers and enrollees can also file a complaint with the DMHC if they are unable to obtain a timely referral to an appropriate provider. The toll-free number for the DMHC is 1-888-466-2219.

To assist you with establishing appropriate scheduling practices based on the timeframes required under the Timely Access Regulations, we have included an outline of the appointment availability standards below. Please share this information with the appointment schedulers in your office. The full Timely Access Regulation standards can be found by visiting www.dmhc.ca.gov/.

We appreciate your cooperation, time, and participation in our provider Appointment Availability Survey. Thank you in advance for taking the time to complete this important and mandatory survey.

Appointment Type

Type of Care and Service	Molina Healthcare Standards
Emergency Care	Immediately
PCP Routine or Non-Urgent Care	Within 10 business days of the request
Specialist Routine or Non-Urgent Care	Within 15 business days of the request
Non-Urgent Care Appointment with a Non-Physician Behavioral Health Provider	Within 10 business days of the request
Telephone Screening/Nurse Advice	Not to exceed 30 minutes
PCP Urgent Care without prior authorization	Within 48 hours of the request
Specialist Urgent Care without prior authorization	Within 48 hours of the request
Urgent Care with a Behavioral Health Provider	Within 48 hours of the request
PCP Urgent Care with prior authorization	Within 96 hours of the request
Specialist Urgent Care with prior authorization	Within 96 hours of the request
Urgent Care requiring prior authorization with a Behavioral Health Provider	Within 96 hours of the request
Non-Urgent Care Appointments with a Behavioral Health Provider	Within 10 business days of the request
Non-Urgent Care Appointment for Ancillary Services	Within 15 business days of the request
Behavioral Health Non-life threatening emergency	Within 6 hours of the request
Children's Preventive Period Health Assessments (Well-Child Preventive Care) Appointments	Within 7 business days of the request

QUESTIONS

If you have any questions regarding the notification, please contact your Molina Provider Services Representative at (855) 322-4075.