

ACCESS TO CARE STANDARDS

The Department of Managed Health Care (DMHC) has released new regulations regarding timely access to care (Title 28 §1300.67.2.2). While there is still much discussion as to how these changes will be implemented, we want to keep our provider network informed of the coming changes.

CenCal Health has already adopted access to care standards for its provider network. The “new” standards required by the DMHC are similar in most cases. Please see the table below for a summary of the regulations. We have also periodically contacted our providers while conducting appointment availability and after-hours access surveys. We will continue to do this annually, though the format may change slightly as the details emerge. We appreciate the ongoing collaboration with our providers as we all strive toward the common goal of providing excellent care to the members we serve. If you have any questions, please contact Sheila Thompson at 805.562.1677.

Appointment Type	Standard Time Frame
Preventive Care Appointment	Within 30 calendar days
Non-urgent Specialist Appointment	Within 15 business days
Non-urgent Primary Care Appointment	Within 10 business days
Non-urgent (non-physician) Mental Health Care Appointment	Within 10 business days
Non-urgent Ancillary Services Appointment (for diagnosis or treatment)	Within 15 business days
Initial Prenatal Care Appointment	Within 14 calendar days (within 1 st trimester per ACOG)
Urgent Care Appointment	Within 48 hours
Emergency Care	Immediately
Primary Care Triage and Screening	Within 30 minutes
Mental Health Care Triage and Screening	Within 30 minutes
After Hours Care	24 hours a day
Telephone Access	24 hours a day

6/2010