MedPOINT MANAGEMENT
Pointing Healthcare In The Right Direction

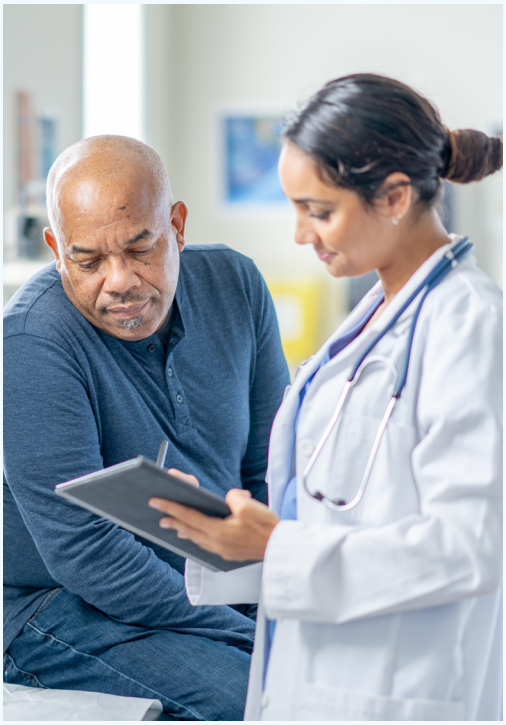
Primary Care and Specialist Providers

Access to Care Standards

Members have the right to receive timely access to care and services from their provider. Per DMHC requirements, providers are to ensure members proper availability within a specific number of days or hours for ...

EMERGENCY EXAM

If your patient is having a medical emergency, you should instruct them to go to the emergency room or have them call 911. If the issue is not life threatening, you should provide medical advice over the phone and schedule an appointment as shown below. (Only licensed staff with appropriate training should provide telephone assessments.)



APPOINTMENT AVAILABILITY STANDARDS

Type of Appointment:	Offer the Appointment within:
Primary Care Provider – Non-Urgent Appointment	Within **10 business days** of request
Specialist Providers – Non-Urgent Appointment	Within **15 business days** of request
Urgent appointments that do not require prior authorization	**48 hours** of request, or as clinically indicated. (Includes weekends and holidays)
Urgent appointments that require prior authorization	**96 hours** of request, or as clinically indicated. (Includes weekends and holidays)
Non-Urgent appointments for Ancillary services	**15 business days** of request
Non-Urgent appointments with a non-physician mental health care provider	**10 business days** of request

AFTER HOURS ACCESS REQUIREMENTS

Primary Care Providers must be available by telephone 24 hours per day/7 days per week.

If the primary care provider is not available on-call, there should be another provider or nurse triage available.

ANSWERING MACHINE RECORDING MUST PROVIDE THE FOLLOWING:

> "If this is an emergency, please hang up and dial 911 immediately or go to the nearest emergency room."

> "Hello, you have reached the *(Name of doctor/Office or Clinic Name)*. If you wish to speak with the provider on-call, ..."

Select one of the following three options to complete recording:

a) Please hold and you will be directly connected to the provider on call.

b) You may reach the on-call provider directly by calling *(provide number)*.

c) Please call *(provide number)*. The on-call provider will be paged and you may expect a return call within the next 30 minutes. If you do not hear from the provider within 30 minutes, please go to your nearest Emergency Room.

d) Our Urgent Care Center is located at *(give address and phone number)*.

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AFTER HOURS ANSWERING SERVICE SAMPLE SCRIPT:

Calls answered by a live voice – answering service or centralized triage

If the caller believes the situation is urgent, advise the caller to hang up and dial 911 immediately or proceed to the nearest Emergency Room.

If the member indicates a need to speak with a provider

a) Place the caller on hold and then connect them to the on-call provider, or page the provider and let the caller know the provider has been paged and he/she will return call within the next 30 minutes.

b) Ask the member for their call back information and advise a provider will call them back within the next 30 minutes.

OR

c) If a member indicated a need for interpreter services, facilitate the contact by accessing interpreter services. You can find interpreter information at www.medpointmanagement.com/provider-resources/. Select "**Cultural & LInguistic Information**" from the drop list, then expand "**General**" to find and download the "**MedPOINT Healthplan LEP Contact Grid**".

ACCESS TO CARE STANDARDS

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Note: The next available appointment date and time can be either in person or by telehealth services.

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

Primary Care Physician (PCP)	Standard
Emergency (Serious condition requiring immediate intervention)	Immediately (office, UCC, ER)
Urgent (Condition that could lead to a potentially harmful outcome if not treated)	Within 48 hours (office, UCC) (includes weekends and holidays)
Non-Urgent (routine) (visit for symptomatic but not requiring immediate diagnosis and/or treatment)	Within 10 business days Within 7 business days (Medicare)
Adult or Pediatric Health Assessment / Physical (Physical: periodic health evaluation with no acute medical problem) (Preventive: for prevention and early detection of disease, illness, condition)	Within 30 calendar days, unless more prompt exam is warranted
Routine Primary Care Examination (non-urgent)	Within 10 business days of request
Preventive Care Visits (21+ years)	Within 14 days of request
IHA (18 months and older) **IHA** (under 18 months)	Within 120 days of enrollment Within 60 days of enrollment
Waiting Time in physician office	15 minutes of scheduled appointment time
After hours Access • Enrollee with life threatening medical problem must have access to health care twenty-four (24) hours per day and 7 days per week. • After hours answering system or voice mail should instruct members that if they feel they have a serious acute medical condition, to seek immediate care by calling 911 or going to the nearest Emergency Room. • Member must be assured that a Health Care Professional (MD, Advice Nurse, PA, NP) will communicate with them within 30 minutes.	Answering Service or service w/ option to page Provider
Telephone Triage and Screening (urgent and routine) • Telephone triage is available 24 hours a day and 7 days a week	Within 30 minutes

Specialty Care Provider (SCP)	Standard
Urgent referral (includes Behavioral Health)	Within 96 hours
Non-Urgent / routine (includes Behavioral Health)	Within 15 business days from time of PCP request

Behavioral Health Provider (based on Plan contracts)	Standard
Urgent	Within 96 hours
Routine	Within 15 business days from time of PCP request

ACCESS TO CARE STANDARDS

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Ancillary Services	Standard
Urgent (for diagnosis and treatment)	Within 96 hours
Routine (for diagnosis and treatment)	Within 15 business days from time of PCP request

Prenatal and Postpartum Visits	Standard
First and second trimester	Within seven days of request
Third trimester	Within three days of request
High-risk pregnancy	Within three days of identification
Postpartum	Between 7 and 84 days after delivery

Compliance = 70%

Reminder that Los Angeles County providers are required to call to reschedule an appointment within 48 hours after a missed appointment. ***Ensure your office's policies and procedures and training are updated to include this requirement.*** *Providers may be surveyed on a random sample to ensure compliance with this standard.*