



Access to Care Quick Tips

Standard ¹	Medi-Cal	L.A. Care Covered	Cal-MediConnect
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Primary Care Provider (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 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 if no authorization is required ≤ 96 hours if prior authorization is required		
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		
Preventative 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	<ul style="list-style-type: none"> • ≤ 14 calendar days of request • ≤ 7 calendar days of request for Healthy Kids 	≤ 14 calendar days of request	
Staying Healthy Assessment Initial Health Assessment and Individual Health Assessment and Individual Health Education Behavioral Health Assessment (IHEBA)	≤ 120 calendar days from when the member becomes eligible. Members <18 months of age ≤60 calendar days of enrollment or within periodicity timelines as established by the American Academy of Pediatrics (AAP) for ages two and under, whichever is less.	≤ 90 calendar days from when the member becomes eligible.	
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		

Specialty Care Provider (SCP) Accessibility Standards:

Routine Specialty Care Physician Appointment	≤ 15 Business days of request		
Urgent Care Services for a non-life threatening condition that could lead to a potentially harmful outcome if not treated in a timely manner.	<ul style="list-style-type: none"> • ≤ 48 hours of request if no authorization is required • ≤ 96 hours if prior authorization is required 		

Ancillary Care Accessibility Standards:

Non-Urgent Ancillary Appointment	≤ 15 business days of request		
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¹ Unless otherwise stated, the requirement is 100% compliance.

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Behavioral Health Care Accessibility Standards:

Routine Appointment (includes non-physician behavioral health providers)	≤ 10 business days of request		
Urgent Care 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 Services	Immediate, 24 hours a day, 7 days per week		

After Hours Care Standards:

After Hours Care Physicians (PCP, Behavioral Health Provider and Specialists, or covering physician) are required by contract to provide 24 hours a day, 7 days per week coverage to members. Physicians, or his/her on-call coverage or triage/screening clinician must return urgent calls to member, upon request within 30 minutes. *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, Specialist or covering practitioner, or offer a call-back from the PCP, Behavioral Health Provider, Specialist, covering practitioner or triage/screening clinician within 30 minutes <p>If process does not enable the caller to contact the PCP, Behavioral Health Provider, Specialist or covering practitioner directly, the “live” party must have access to a practitioner or triage/screening clinician for both urgent and non-urgent calls.</p>		
Call Return Time (Practitioner’s Office) The maximum length of time for PCP, Behavioral Health Provider, Specialist offices, covering practitioner or triage/screening clinician to return a call after hours.	<p>≤ 30 minutes</p> <p>*Clinical advice can only be provided by appropriately qualified staff, e.g., physician, physician assistant, nurse practitioner or RN.</p>		

Practitioner Telephone Responsiveness:

Speed of Telephone Answer (Practitioner’s Office) The maximum length of time for practitioner office staff to answer the phone.	≤ 30 seconds		
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Member Services Department Call Service Standards:

Speed of Telephone Answer	<ul style="list-style-type: none"> The maximum length of time for Member Services Department staff to answer the telephone. Call Abandonment Rate 		
	<ul style="list-style-type: none"> 90% of calls ≤ 30 seconds NTE 5% in a calendar month 		

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

