



PROVIDER *bulletin*

August 24, 2010

Dear Provider:

The following summarizes California's newly promulgated Timely Access Regulation (28 CCR 1300.67.2.2) and its impact on KHS and its contracting providers.

Effective Date: KHS has until January 17, 2011, to fully implement the policies, procedures and systems necessary to comply with the regulation. In October 2010, KHS is required to submit a filing to the DMHC to demonstrate how it will meet the standards of the regulation.

Summary of regulation: KHS is required to show that its contracting provider network is large and varied enough to offer enrollees appointments that meet the following standards, or file a Material Modification to request DMHC approval of alternative (i.e., relaxed) standards for non-urgent care with reasons justifying the alternative standards, such as the non-availability of sufficient numbers and types of providers in Kern County. KHS plans to request approval of relaxed standards given that health care access in Kern County is the worst of the 101 metropolitan areas of the United States. KHS does not know if the DMHC will approve its proposed alternative standards hence, the following summarizes the existing standards. KHS will follow up with future correspondence regarding our request for relaxed standards.

- The clinical appropriateness standard requires that enrollees be offered appointments for covered health care services within a time period appropriate for their condition.
- Quality assurance standards requiring that enrollees be offered appointments within the following time-elapsd standards:
 - Within 48 hours of a request for an urgent care appointment for services that do not require prior authorization,
 - Within 96 hours of a request for an urgent appointment for services that require prior authorization,
 - Within 10 business days of a request for non-urgent primary care appointments. KHS will be requesting approval of two times the proposed standard.





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- Within 15 business days of a request for an appointment with a specialist. KHS will be requesting approval of two times the proposed standard.
- Within 15 business days of a request for a non-urgent appointment for ancillary services for the diagnosis or treatment of injury, illness, or other health condition. KHS will be requesting approval of two times the proposed standard.
- **It is essential to note the applicable waiting time for an appointment may be shortened or extended as clinically appropriate in the opinion of a qualified health care professional, and in cases of routine preventive care. If the waiting time is extended, it must be noted in the relevant patient record that a longer waiting time will not have a detrimental impact on the health of the enrollee.**
- In areas with provider shortages, plans are not excused from their obligation to arrange for enrollees to receive timely care as necessary for their health condition. If timely appointments are not available in Kern County, KHS and its contracting PCP's are required to refer enrollees to accessible contracted providers in neighboring service areas consistent with patterns of practice for obtaining health care services in a timely manner appropriate for the enrollee's needs.

The Timely Access Regulation also requires KHS to monitor network compliance with the standards, including surveying its enrollees and contracting providers, and must investigate and correct deficiencies.

If you have any questions regarding the new Timely Access Regulations, please feel free to contact our Provider Relations Department at (661)664-5446.

Sincerely,

Jake Hall
Provider Relations Supervisor
Kern Health Systems

