



Notice of Upcoming Provider Appointment Availability Survey

Dear Provider:

Kern Family Health Care (KFHC) is required to provide or arrange for the provision of covered health care services in a timely manner.

The Department of Managed Healthcare (DMHC) requires health plans to annually submit reports measuring their network's timely access to care. To meet this requirement, KFHC conducts an annual Provider Appointment Availability Survey. **This bulletin is to notify you that you may be randomly selected to participate**; if you are chosen to participate you will receive an initial outreach from KHS via e-mail or fax to answer a short survey regarding appointment availability in your office. If you are unable to respond to the initial outreach, your office will receive additional follow-up via email/fax and phone call to conduct the survey. If there are multiple providers in your office, you may receive multiple survey requests; please complete for each provider that receives a survey. To assist the plan in collecting this information, it is important you respond to the survey in a timely manner.

The purpose of the timely access standards is to ensure members receive necessary care in a timely fashion. KHS would like to remind providers the importance of our regulatory requirements. Below is a summary of the access standards for KHS and our provider network.

Appointment Waiting Time and Scheduling:

| Type of Appointment | Time Standard |
|---|---|
| Urgent care appointment for services that do not require prior authorization | Within 48 hours of a request |
| Urgent appointment for services that require prior authorization | Within 96 hours of a request |
| Non-urgent primary care appointment | Within 10 business days of a request |
| Non-urgent appointment with a specialist | Within 15 business days of a request |
| Non-urgent appointments with a physician mental health care provider | Must offer the appointment within 10 business days of request |
| Non-urgent appointments with a non-physician mental health care provider | Must offer the appointment within 10 business days of request |
| NEW FOR 2023 SURVEY Follow-up appointment with a non-physician mental health care provider when member undergoing a course of treatment for ongoing mental health condition | Must offer the appointment within 10 business days of the prior appointment |
| Non-urgent appointment for ancillary services for the diagnosis or treatment of injury, illness, or other health condition | Within 15 business days of a request |
| Pediatric CHDP Physicals | Within 2 weeks upon request |
| First pre-natal OB/GYN visit | The lesser of 10 business days or within 2 weeks upon request |





Office Waiting Time - Maximum

| Service | Required Care | |
|--|---------------|---------|
| | Urgent | Routine |
| Primary Care Services (including OB/GYN) | 1 hour | 1 hour |
| Specialty Care Services | 1 hour | 1 hour |
| Diagnostic Testing | 1 hour | 1 hour |
| Mental Health Services | 1 hour | 1 hour |
| Ancillary Providers | 1 hour | 1 hour |

Telephone Accessibility

| Nature of Telephone Call | Response Time |
|----------------------------------|--|
| Emergency medical | Member should be instructed to call 9-1-1 |
| Emergent mental health | Member should be instructed to call 9-1-1 or Kern County Mental Health Crisis Unit 661-868-8000 |
| Urgent medical | 30 minutes |
| Non-urgent medical/mental health | By close of following business day |
| Administrative | By close of following business day |

If an enrollee is unable to obtain a timely referral to an appropriate provider, contracted providers or enrollees can contact KFHC to obtain assistance. Please call our Member Services Department at 661.632.1590 (Bakersfield) or 800.391.2000 (outside of Bakersfield).

If an enrollee is unable to obtain a timely referral to an appropriate provider, the provider or enrollee may file a complaint with the DMHC; providers or enrollees can access the complaint form at https://www.dmhc.ca.gov/fileacomplaint.aspx or by contacting the DMHC at their toll-free number (888) 466-2219.

The entire policy, 4.30-P Accessibility Standards, can be located on our website at http://www.kernfamilyhealthcare.com/ under the "For Providers" tab, Policies and Procedures, Provider Relations. For additional access to care assistance, providers and members can use the website or call (661) 632-1590 (in Bakersfield) or toll free at (800) 391-2000 (outside of Bakersfield).

Thank you,

Gregory Panero Provider Network Analytics Program Manager (661) 664-5046