



PROVIDER *bulletin*

Notice of Upcoming Provider Appointment Availability Survey

Dear Provider:

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, Kern Health Systems (KHS) 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 its 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
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



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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

The entire policy, 4.30-P Accessibility Standards, can be located on our website at <http://www.kernfamilyhealthcare.com/> under the "For Providers" tab, KHS Policies and Procedures, Provider Relations.

Thank you,

Melissa Lopez
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