



Provider Alert

To: Sharp Health Plan Providers and Provider Office Staff
From: Sharp Health Plan
Date: August 8, 2022
Subject: Timely Access Tool Kit for Behavioral Health Providers

Sharp Health Plan's timely access tool kit below, outlines the Department of Managed Health Care's timely access standards.

For additional information on the timely access standards and procedures, please refer to the Commercial Provider Operations Manual (POM). You can find the POM online at sharphealthplan.com/pom.

Questions? Please contact Sharp Health Plan Provider Account Management by email at provider.relations@sharp.com or by phone at 1-858-499-8330. Thank you for your partnership.

Best regards,
Sharp Health Plan
Provider Account Management
Provider.Relations@sharp.com
Tel: 1-858-499-8330 | Fax: 1-858-303-9049

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Timely Access to Care Toolkit for Behavioral Health Providers

Access to Emergency Care

Maximum Wait Time:
Life-Threatening
Emergency Care
Immediately



Maximum Wait Time:
Non-Life-Threatening
Emergency Care
6 hours

Urgent Appointments

Psychiatrist


48
hours

**Non-Physician
Behavioral Health
Practitioner**

48
hours

Prior authorization **not required**

**Non-Physician
Behavioral Health
Practitioner**

96 
hours

Prior authorization **required**

Non – Urgent Appointments

Psychiatrist


10
business days



**Non-Physician BH
Practitioner**


10
business days

Follow – Up Appointments

Routine Care
Appointment with a
**Behavioral Health
Practitioner/Prescriber**

45
calendar days

Routine Care
Appointment with a
**Behavioral Health
Practitioner/
Non-Prescriber**

30
calendar days

Care with a
**Behavioral Health
Practitioner**
After Hospitalization

7 & 30
calendar days
after discharge



Provider Appointment Availability Survey (PAAS)

Sharp Health Plan evaluates and monitors appointment access annually through the PAAS to ensure that network providers meet regulatory standards as outlined by the Department of Managed Health Care.

Providers are first faxed or emailed the survey. If no response is received, provider offices are called.

The provider’s office is asked the following questions:

Questions	Compliant Answers
When is the next available appointment <u>date</u> and <u>time</u> with [Provider Name] for an urgent appointment?	A date and time that is within 48 hours (for appointments with no prior authorizations required) or 96 hours (for appointments with prior authorizations required).
When is the next available appointment <u>date</u> and <u>time</u> with [Provider Name] for a non-urgent appointment?	A date and time that is within 10 business days for non-physician mental health providers and 15 business days for specialists and ancillary services.

Three additional questions are added for non-physician mental health providers to monitor the new SB 221 10-business day follow-up appointment requirements. The provider’s office is asked if non-urgent appointments for new patients are scheduled differently than follow-up appointments for ongoing care. If answered “Yes”, then the following questions are asked:

Questions
When is the next available appointment <u>date</u> and <u>time</u> with [Provider Name] for non-urgent services for a new patient?
When is the next available follow-up appointment <u>date</u> and <u>time</u> for a patient being seen today by [Provider Name]?



After-Hours Survey

The After-Hours Survey ensures network providers meet regulatory standards for timely access. The annual survey measures and reports after-hours access to behavioral health providers and assesses the accuracy of emergent, non-emergent, and urgent instructions provided to members seeking information after-hours.

The provider’s office is asked the following questions:

Questions	Compliant Answers
What would you tell a caller who states he/she is dealing with a life-threatening emergency situation?	Hang up and dial 911 AND/OR Go to the nearest emergency room
If a patient expresses an urgent need to speak with a clinician, is there a way you can put them into contact with the provider, or an on-call provider or health care professional such as an advice nurse?	Yes
In what timeframe can the patient expect to hear from the provider or on-call provider?	Immediately OR 30 minutes or less

Provider Experience Survey

The Sharp Health Plan Provider Experience Survey includes the Provider Satisfaction with Access and Language Assistance Program Survey. This annual survey assesses provider satisfaction with access to Sharp Health Plan’s services and the availability and quality of interpreters. This electronic survey is distributed annually to all Sharp Health Plan provider partners. Your response to this survey is critical, as this survey is regulated by the Department of Managed Healthcare.

The provider’s office is asked the following questions:

Access Survey Questions
How satisfied are you with the referral and/or prior authorization process necessary for your patients to obtain covered services?
How satisfied are you with your patients’ access to urgent care services ?
How satisfied are you with your patients’ access to non-urgent primary care services ?



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How satisfied are you with your patients' access to **non-urgent specialty services**?

How satisfied are you with your patients' access to **non-urgent ancillary diagnostic and treatment services**?

How satisfied are you with your patients' access to **non-urgent behavioral health care services**?

Language Assistance Program Survey Questions

How satisfied are you with the health plan's coordination of **appointments with an interpreter**?

How satisfied are you with the health plan's **availability of an appropriate range of interpreters**?

How satisfied are you with the health plan's **training and competency of available interpreters**?

