SHARP Health Plan



Provider Alert

To: Sharp Health Plan Providers and Provider Office Staff

From: Sharp Health Plan

Date: June 16, 2023

Subject: Timely Access Tool Kit for Medical 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 timely access standards and procedures, please refer to the Commercial Provider Operations Manual which can be found at www.sharphealthplan.com/POM. Timely access to care requirements is also on the California Department of Managed Health Care (DMHC) website at www.dmhc.ca.gov or reached at 1-888-466-2219.

Thank you for your continued partnership in providing the best care possible for our members. If you have any questions, please contact a Provider Account Specialist at provider.relations@sharp.com or 1-858-499-8330. We are available to assist you Monday – Friday, 8 a.m. to 5 p.m.

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

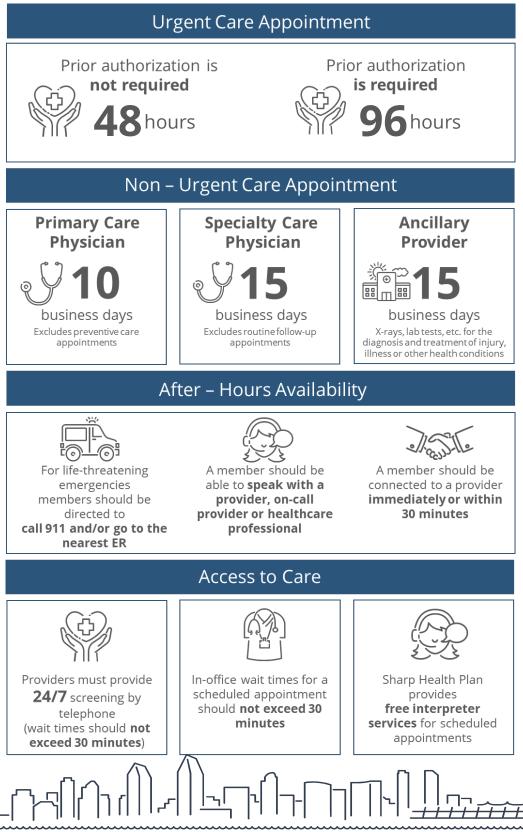
NOTICE: The information contained in this facsimile message may be privileged and confidential and is only for whom it was intended. If the reader of this message is not the intended recipient, or the employee or agent responsible to deliver the message to the intended recipient, the reader is hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If this communication has been received in error, please notify Sharp Health Plan at the telephone number listed below immediately and destroy all information received.

8520 Tech Way, Suite 200, San Diego, CA 92123 | 1-858-499-8300 | sharphealthplan.com

Page 1 of 1

SHARP Health Plan

Timely Access to Care Toolkit for Medical Providers





Timely Access to Care Toolkit for Medical Providers

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 [Provider or FQHC/ RHC Name] the next available appointment date and time for urgent services?	A date and time that is within 48 hours for PCPs or 96 hours for Specialist Physicians and Psychiatrists.
When is [Provider or FQHC/ RHC Name] the next available appointment date and time for non-urgent services?	A date and time that is within 10 business days for PCPs and 15 business days for specialists, psychiatrists, and ancillary services.

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



SHARP Health Plan

Timely Access to Care Toolkit for Medical Providers

In what timeframe can the patient expect to	Immediately
hear from the provider or on-call provider?	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 to rate their satisfaction with their patients' access to care:

Access Survey Questions
The referral and/or prior authorization process necessary for your patients to obtain covered services?
Your patients' access to urgent care services?
Your patients' access to non-urgent primary care services?
Your patients' access to non-urgent specialty services?
Your patients' access to non-urgent ancillary diagnostic and treatment services?
Your patients' access to non-urgent behavioral health care services

Language Assistance Program Survey Questions

Coordination of appointments with an interpreter?

Availability of an interpreter, based on the needs of the enrollee?

The ability of the interpreter to effectively communicate with the provider on behalf of the enrollee?

