



# News Flash



## Important Provider Update

**To:** Sharp Health Plan Providers  
**Attn:** Providers & Provider Office Staff  
**From:** Sharp Health Plan  
**Date:** July 5, 2018  
**Subject:** Timely Access to Care Annual Provider Notification

Attention Provider Partners,

### Timely Access to Care

Sharp Health Plan is obligated under California law to provide or arrange for timely access to care. Plan Provider shall provide appointments and telephone screening services to Sharp Health Plan’s Members according to the following guidelines:

#### Appointment wait times

Urgent Appointments	Maximum wait time after request
PCP, no prior authorization required	48 hours
Prior authorization required	96 hours

Non-Urgent Appointments	Maximum wait time after request
PCP (Excludes preventative care appointments)	10 business days
Non-physician mental health care provider (e.g. psychologist or therapist)	10 business days
Specialist (Excludes routine follow-up appointments)	15 business days
Ancillary services (e.g. x-rays, lab tests, etc. for the diagnosis and treatment of injury, illness, or other health conditions)	15 business days

#### Exceptions to appointment wait times

Plan Provider may extend the wait time for an appointment if Plan Provider has determined and noted in the Member’s record that a longer wait time will not be detrimental to the Member’s health.

Plan Provider may also schedule appointments in advance for preventative and periodic follow up care services (e.g. standing referrals to specialists for chronic conditions, periodic visits to monitor and treat





pregnancy, cardiac, or mental health conditions, and laboratory and radiological monitoring for recurrence of disease), consistent with professionally recognized standards of practice, and exceed the listed wait times.

**Telephone wait time**

Service	Maximum wait time
Triage or screening services (24 hours/day and 7 days/week)	30 minutes

**Interpreter services at scheduled appointments**

Sharp Health Plan provides free interpreter services for Members, whose primary language is not English, at scheduled appointments. Plan Provider may request interpreters by calling Customer Care: 1-800-359-2002.

Plan Provider must make requests for face-to-face interpreting services at least three (3) days prior to the appointment date. In the event that an interpreter is unavailable for face-to-face interpreting, Customer Care can arrange for telephone interpreting services.

**Concerns about timely referral to an appropriate provider**

Plan Provider or Member may contact Customer Care for assistance if a Member is unable to obtain a timely referral to an appropriate provider: 1-800-359-2002.

Plan Provider or Member may contact the Department of Managed Care to file a complaint about a timely referral to an appropriate provider: 1-888-466-2219.

If you have any questions, please contact our provider relations team at 1-858-499-8330, or email us at [provider.relations@sharp.com](mailto:provider.relations@sharp.com). We are available to assist you Monday – Friday, 8 a.m. to 5 p.m.

Warm regards,

Mary Betlejewski Manager  
Network Development & Performance

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