

CALOPTIMA STANDARDS OF CARE

CalOptima members have the right to get covered health services in a timely manner. Below is a list of covered services and standards for providing care.

| Covered Services | CalOptima Standards of Care |
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| Emergency Services | Immediately, 24 hours a day, 7 days a week |
| Urgent Care Services | |
| Urgent Care Services that do not need Prior Authorization | Within 24 hours |
| Urgent Care Services that need Prior Authorization | Within 96 hours |
| Non-Urgent Services | |
| Acute Care | Within 3 working days |
| Primary care | Within 10 working days |
| Routine Physical Exams and Health Assessments | Within 30 calendar days |
| Specialty Care | Within 15 working days |
| Ancillary Services | Within 15 working days |
| Exceptions to Time Frames for Appointments | Appointment time frames can be longer if your provider feels that a longer wait time will not be harmful to your health. |
| Initial Health Assessment (IHA) or Individual Health Education Behavioral Assessment (IHEBA) | Within 120 calendar days after becoming a CalOptima member |
| First Prenatal Visit | Within 14 calendar days |
| Subsequent Prenatal Appointments | All medically necessary services for pregnant members will be covered. Appointments shall be available to a member in accordance with applicable Department of Managed Health Care (DMHC) regulations and the American College of Obstetricians and Gynecologists (ACOG) standards and guidelines. |
| Certified Nurse-Midwife and Certified Nurse Practitioner Services | If certified nurse-midwife or practitioner services are not available, you may self-refer to out-of-network services. |
| Sensitive Services | If sensitive services are not available, you may self-refer to out-of-network services. |
| Minor Consent Services | Available to any CalOptima member under age 18 without parental consent |
| Family Planning Services | If family planning services are not available, you may self-refer to out-of-network services. |
| Behavioral Health Care | |

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| Emergency care for a Condition that is Not Life-Threatening | Within 6 hours |
| Urgent Care | Within 2 calendar days |
| Routine Care | Within 10 working days |
| Health Care Delivery Organization (HDO) Access and Availability | |
| Access to Health Care Delivery Organization (HDO) (Hospitals and Skilled Nursing Facilities) | Within 15 miles or 30 minutes of your home |
| Hospital Availability | Ratio of hospital to members is 1:25,000 or less |
| Skilled Nursing Facility Availability | Ratio of skilled nursing facility to members is 1:2,500 or less |
| Practitioner Access and Availability | |
| Total Physician Availability | Ratio of total physician to members is 1:1,200 or less |
| Non-Physician Practitioner Availability | Ratio of non-physician to members is 1:1,000 or less |
| PCP Availability | Ratio of PCP to members is 1:2,000 or less |
| Access to PCP | Within 10 miles or 30 minutes of your home |
| High Volume Specialist Availability | Ratio of specialist to members is 1:5,000 or less |
| Access to High Volume Specialist | Within 30 miles or 45 minutes of your home |
| Telephone Access Business and After hours | Available 24 hours a day, 7 days a week |
| Telephone Wait Time during Business Hours | Less than 30 seconds |
| Emergency Message during Business and After Hours | Return call with 5 minutes |
| Urgent Message during Business Hours | Return call within 30 minutes |
| Non-emergency and Non-urgent message during Business Hours | Return call within 24 hours |
| Telephone Triage or Screening Service | Available 24 hours a day, 7 days a week |
| Telephone Triage or Screening Wait Time | Less than 30 minutes |
| Interpreter Services | Available 24 hours a day, 7 days a week |
| Written Materials | Available in English, Spanish, Vietnamese, Farsi and Korean |
| Telecommunication Device for the Deaf (TDD) | Available upon request at no cost |
| Rescheduling Appointments | Appointments will be rescheduled to a time that meets your health care needs. |