

CalOptima Standards of Access to Care — 2019

A brief description of the access standards for CalOptima OneCare (HMO) and OneCare Connect Cal MediConnect Plan (Medicare-Medicaid Plan) members:

Access to Emergent/Urgent Medical Care and Telephone Access:

Covered Services	Standards of Care
Emergency Services	Immediately, 24 hours a day, 7 days a week
Urgent Care Services	Within 24 hours of request
Telephone Triage	Telephone triage shall be available 24 hours a day, 7 days a week. Telephone triage or screening waiting time shall not exceed 30 minutes.

Access to Primary Care:

Covered Services	Standards of Care
Urgent Appointments that DO NOT Require Prior Authorization	Within 48 hours of request
Non-Urgent Primary Care	Within 10 business days of request
Routine Physical Exams and Wellness Visits	Within 30 calendar days of request

Access to Specialty and Ancillary Care:

Covered Services	Standards of Care
Urgent Appointments that DO Require Prior Authorization	Within 96 hours of request
Non-Urgent Specialty Care	Within 15 business days of request
First Prenatal Visit	Within 2 weeks of request
Non-Urgent Ancillary Services	Within 15 business days of request

Access to Behavioral Health Care

Covered Services	Standards of Care
Routine Care with a Non-Physician Behavioral Health Provider	Within 10 business days of request
Follow-up Routine Care with a Non-Physician Behavioral Health Care Provider, i.e. Psychologists, Licensed Clinical Social Workers (LCSW)	Within 20 calendar days of initial visit for a specific condition
Follow-up Routine Care with a Physician Behavioral Health Provider	Within 30 calendar days of initial visit

Telephone Access Standards:

Covered Services	Standards of Care
Telephone Wait Time During Business Hours	A non-recorded voice within 30 seconds
Urgent Message During Business Hours	Returns the call within 30 minutes after the time of message.
Non-emergency and Non-urgent Messages During Business Hours	Returns the call within 24 hours after the time of message.
Telephone Access After Business Hours for Emergencies	The phone message and/or live person must instruct members to dial 911 or go to the nearest emergency room.
After-hours Access	A primary care provider (PCP) or designee shall be available 24 hours a day, 7 days a week to respond to after-hours member calls or to a hospital emergency room practitioner.

Cultural and Linguistic Standards:

Covered Services	Standards of Care
Oral Interpretation	Oral interpretation including, but not limited to, sign language, shall be made available to members at key points of contact through an interpreter in person (upon a member's request) or by telephone, 24 hours a day and 7 days a week.

Covered Services	Standards of Care
Written Translation	All written materials to members shall be available in threshold languages as determined by CalOptima in accordance with CalOptima policies MA.4002: Cultural and Linguistic Services and CMC.4002: Cultural and Linguistic Services.
Alternative Forms of Communication	Informational and educational information for members in alternative formats will be available at no cost in the threshold languages in at least 16-point font, audio format or braille upon request, or as needed within 21 business days of request or within a timely manner for the format requested.
Telecommunications Device for the Deaf	Telecommunications Device for the Deaf (TDD) or California Relay Services (CRS) and auxiliary aids shall be available to members with hearing, speech or sight impairments at no cost, 24 hours a day and 7 days a week. The TDD/TTY Line is 1-800-735-2929 .
Cultural Sensitivity	Practitioners and staff shall encourage members to express their spiritual beliefs and cultural practices, be familiar with and respectful of various traditional healing systems and beliefs and, where appropriate, integrate these beliefs into treatment plans.

Other Access Standards:

Covered Services	Standards of Care
Physical Accessibility	Members with disabilities shall have access that includes, but is not limited to, ramps, elevators, restrooms, designated parking spaces and drinking water provision.
In-office Wait Time for Appointments	Less than 45 minutes before being seen by a provider
Rescheduling Appointments	Appointments will be rescheduled in a manner appropriate to the member's health care needs and that ensures continuity of care is consistent with good professional practice.
Sensitive Services	A member may self-refer to an out-of-network provider to receive sensitive services without prior authorization.
Minor Consent Services	Available to a member under the age of 18 in a confidential manner without parental consent
Family Planning Services	A member shall have direct access to OB/GYN and family planning services, according to CalOptima Policy GG.1508: Authorization and Processing of Referrals.

OneCare (HMO SNP) is a Medicare Advantage Organization with a Medicare contract. Enrollment in OneCare depends on contract renewal. OneCare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Please call our Customer Service number at **1-877-412-2734**, 24 hours a day, 7 days a week. TDD/TTY users can call **1-800-735-2929**.