

From: [DMHC Licensing eFiling](#)
Subject: APL18 - 002 (OPM) - Timely Access Compliance
Date: Friday, January 19, 2018 11:54:55 AM
Attachments: [APL--MY 2018 Timely Access All Plan Letter FINAL.pdf](#)

Dear Health Plan Representative,
Please find the attached All Plan Letter regarding Timely Access Compliance Reports for measurement year 2018.
Thank you.



Edmund G. Brown Jr., Governor
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Health and Human Services Agency
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ALL PLAN LETTER

DATE: January 19, 2018

TO: All Full Service and Behavioral Health Plans Required to Submit Annual Timely Access Compliance Reports

FROM: Dan Southard
Deputy Director, Office of Plan Monitoring

**SUBJECT: APL 18-002 (OPM) TIMELY ACCESS COMPLIANCE REPORTS
MEASUREMENT YEAR 2018 (MY 2018)**

This All Plan Letter (APL) provides information regarding certain requirements health plans must take that utilize the Department of Managed Health Care (DMHC) mandatory Provider Appointment and Availability Survey (PAAS) Methodology in connection with the submission of Timely Access Compliance Reports for MY 2018.

1. All health plans are required to utilize an external vendor to review the health plan's Timely Access data and conduct a quality assurance review of the health plan's *Timely Access Compliance Report*, prior to submission of the report to the DMHC. Each health plan is responsible for securing its own agreement with an external vendor and ensuring its MY 2018 *Timely Access Compliance Report* is submitted no later than **March 31, 2019**.
2. Health plans must continue to take all steps necessary to maintain the appropriate level of administrative capacity and expertise needed to analyze, validate and rectify errors in Timely Access compliance data in accordance with the DMHC's mandatory methodology. Health plans must maintain an adequate level of staffing with the appropriate level of expertise required to carry out these functions.
3. Health plans with sufficient administrative capacity and expertise to follow the mandatory DMHC methodology may self-administer the PAAS. Health plans also have the option of utilizing an external vendor to conduct the PAAS. Any health plan that utilizes a vendor to administer the PAAS is responsible for securing its own agreement with an external vendor and ensuring its MY 2018 Timely Access Compliance Report is submitted no later than **March 31, 2019**.

4. Health plans will not be permitted to utilize the Industry Collaboration Effort (ICE), the ICE vendor (Call Logic, Inc.) and/or other vendors previously used by or coordinated through ICE in connection with surveying providers, data gathering, analysis, validation, report preparation or submission and/or other compliance activities pertaining to Timely Access Compliance Report for MY 2018 and thereafter.
5. Health plans with sufficient administrative capacity and expertise may self-administer the Provider Satisfaction Survey. Health Plans will not be permitted to utilize the ICE to conduct the Provider Satisfaction Survey. However, health plans may either self-administer the Provider Satisfaction Survey or utilize any vendor previously used by the ICE to conduct the MY 2015, MY 2016 and/or MY 2017 Provider Satisfaction Survey. If applicable, each health plan is responsible for securing its own agreement with an external vendor and ensuring its MY 2018 Provider Satisfaction Survey is submitted no later than **March 31, 2019**.

Quality Assurance Process and External Vendor Review

Each health plan must have a quality assurance process to ensure that it followed the PAAS Methodology and PAAS Template instructions, met all *Timely Access Compliance Report* statutory and regulatory requirements, and that all information in the *Timely Access Compliance Report*, submitted to the Department, is true, complete, and accurate, pursuant to Health and Safety Code section 1396.

As part of this quality assurance process and to ensure data accuracy and completeness, the health plan shall contract with an external vendor to conduct a review of the health plan's MY 2018 PAAS data and processes. This review and the quality assurance process shall be completed prior to submission of the report to the DMHC.

At a minimum, the external vendor's review must ensure all of the following:

- The health plan used the DMHC-issued required PAAS Templates for MY 2018.
- The health plan reported survey results for all Survey Provider Types that were required to be surveyed, as applicable, based on the composition of the health plan's network as of December 31, 2017.
- The *Timely Access Compliance Report* (including the *Provider Contact List Template*, the *Raw Data Template* and the *Results Template*) accurately reflects and reports compliance for providers who were under contract with and part of the health plan's DMHC-regulated network(s) at the time the *Provider Contact List* was generated.
- All rates of compliance and compliance determinations recorded on the *Raw Data and Results Template* are accurately calculated, consistent with, and supported by data entered on the health plan's *Raw Data Template* (including those calculations embedded in the *Results Templates*).

- The administration of the survey followed the mandatory DMHC PAAS Methodology for MY 2018, including, but not limited to, conducting the survey during the appropriate measurement year and ensuring adherence to all target sample sizes and other parameters required under the PAAS Methodology and PAAS Template instructions, in accordance with Health and Safety Code 1367.03, subd. (f)(3).

Quality Assurance Report

As part of the *Timely Access Compliance Report* for MY 2018, health plans shall include a *Quality Assurance Report*, prepared by the external vendor that outlines the results of the vendor's review and includes:

- Details regarding the vendor's review of each verification item identified in the previous section, Quality Assurance and External Vendor Review.
- A summary of the vendor's findings from the review, including completion of the DMHC-issued Addendum to the Quality Assurance Report.
- Identification of any changes and/or corrections made as a result of the data and quality assurance review.
- Any explanations for issues identified but determined to be compliant with the PAAS Methodology.
- For any identified errors or issues that the health plan does not correct or is unable to correct, the health plan must explain why it was unable to comply with the MY 2018 PAAS Methodology and identify steps to be taken by the health plan to ensure compliance during future reporting years.

Health plans must submit, through the DMHC e-filing portal, an Exhibit J-13 which identifies the external vendor retained by the health plan to validate data and conduct the quality assurance review for its MY 2018 Timely Access Compliance Report. If applicable, this filing must also identify the external vendor that will administer the MY 2018 PAAS and/or the external vendor that will administer the MY 2018 Provider Satisfaction Survey.

If you have questions or concerns regarding this APL, please contact Dan Southard, Deputy Director, Office of Plan Monitoring at (916) 327-6106 or dan.southard@dmhc.ca.gov.