

## TIMELY ACCESS ANNUAL COMPLIANCE REPORT INSTRUCTIONS<sup>1</sup>

| A. POLICIES AND PROCEDURES*             |   |
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| 1. Timely Access Time-Elapsed Standards | <p>Plans are required to file up to date Policies and Procedures for compliance with Rule 1300.67.2.2 in e-Filing. These Policies and Procedures must include how the Plan calculates its annual rate of compliance with the time elapsed standards included in Rule 1300.67.2.2(c)(5). This includes both the measures used to determine the Plan's rate of compliance as well as the survey tools or other appointment wait time tools used to measure wait times for the next available appointment. Timely Access Policies and Procedures must be filed as Exhibit J-13 in e-Filing.</p> <p>Under Section A of the Annual Report, the Plan must select the appropriate e-Filing number(s) from the available drop-down menu for the Policies and Procedures utilized by the Plan for the measurement year associated with the Annual Report. The selection should include the Plan's most recently submitted Timely Access Policies and Procedures and any other e-Filings that contain relevant Policies and Procedures. For example, if the Plan initially filed its Policies and Procedures in 2011 and then subsequently updated parts of those policies (but not all) in 2013 and 2012, then the Plan would need to select the 2011 policy and other appropriate e-Filing numbers.</p> <p>The Plan will not be able to complete its Annual Report submission until an e-Filing number is selected for this section. This e-Filing does not need to be closed in order to select it for purposes of the Plan's Annual Report. If the Plan has made changes to its Timely Access Policies and Procedures that are not captured in its latest e-Filing submission, the Plan should file an Amendment in e-Filing to update its Timely Access Policies and Procedures. If the revised Policies and Procedures is what the Plan used for the current Annual Report, the Plan may then select this filing number from the available drop-down menu. All policies and procedure must be approved by the Office of Plan Licensing in e-Filing.</p> |
| B. RATE OF COMPLIANCE*                  |   |
| 1. Methodology                          | <p>Include a narrative description of the Plan's methodology for determining the rate of compliance. If the Plan uses only a provider appointment availability survey to calculate its rate of compliance, then the Plan should state this and submit a copy of the survey methodology and survey questions/tool. If the Plan uses tools in addition to a provider appointment availability to survey to calculate its rate of compliance, the Plan's additional tools should be described here. Likewise, if the Plan uses actual appointment wait time data, an explanation regarding how the Plan calculates its rates of compliance based on that data should be included here. Please note, that this narrative description should match what is already in the Plan's Policies and Procedures. If the Plan's description does not match the Plan's Policies and Procedures in e-Filing, the Plan will be required to update e-Filing</p>  |

<sup>1</sup> Please note that submission of a document in the annual report does not imply approval by the Department. This report portal may not be used to request approval for an amendment or material modification to the Plan license.

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| 2. Rates of Compliance with the Time Elapsed Standards                                   | <p>Please file the rate of compliance with the time-elapsed standards set forth in Rule 1300.67.2.2(c)(5) in separately uploaded documents for each county (or equivalent area defined by zip code). Within each document, please report separately for each contracted provider group, broken down by the six categories of time-elapsed standards in Rule 1300.67.2.2(c)(5) (A)-(F).</p> <p>For each survey or data collection tool or method used, please provide the supporting or raw data under this section, except for enrollee and provider surveys, which are to be filed under Section F.</p> <p>If the Plan's sole method of measuring rate of compliance is the use of the provider appointment availability survey, please select the "no submission" link, select the appropriate section and provide the Plan's explanation for selecting no submission. The Plan then must include the results under the provider appointment availability survey results or actual appointment wait time data section.</p> |
| 3. Provider Appointment Availability Survey Results or Actual Appointment Wait Time Data | <p>Please use the Department's template to provide the supporting or raw data under this section as well as the results of the Plan's annual appointment availability survey.</p>  |
| 4. Other Indicator of Compliance: Provider Reporting                                     | <p>If the Plan is utilizing provider reporting that is in addition to the reporting related to the annual provider survey pursuant to 1300.67.2.2(d)(2)(c) (which is reported in section F) to develop data regarding rates of compliance, please provide the data resulting from this measurement.</p> <p>If the Plan did not use additional provider reporting, please select the "no submission" link, select the appropriate section and provide the Plan's explanation for selecting no submission.</p>   |
| 5. Other Indicator of Compliance: Grievance and Appeals                                  | <p>If the Plan is utilizing grievance and appeal information to develop data regarding rates of compliance, please provide the data resulting from this measurement.</p> <p>If the Plan did not use additional provider reporting, please select the "no submission" link, select the appropriate section and provide the Plan's explanation for selecting no submission.</p>  |
| 6. Other Indicators of Compliance  | <p>If the Plan is utilizing other information to develop data regarding rates of compliance that is not addressed as part of the above sections, provide the data resulting from these measurements. Please file separate documents for each additional method utilized.</p> <p>If the Plan did not use additional provider reporting, please select the "no submission" link, select the appropriate section and provide the Plan's explanation for selecting no submission.</p>  |

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### C. NON-COMPLIANCE DATA\*

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| 1. Methodology                                       | Please provide a description of the methodology for identifying and gathering and compiling non-compliance information. Include the following information: definitions; data sources and methodology for data gathering; processes and procedures for compiling the information; how the Plan used the data to identify patterns of non-compliance; etc. Please note, that the Plan's description under Section C.1 should match what it is already in the Plan's Timely Access Policies and Procedures in e-Filing. If it does not, the Plan will be required to update e-Filing.   |
| 2. Incidents of non-compliance with Rule 1300.67.2.2 | Please provide a report with the following information:<br><br>Whether the plan identified, during the reporting period, any incidents of noncompliance resulting in substantial harm to an enrollee and if so, a description of the identified non-compliance and the Plan's responsive investigation, determination and corrective action.<br><br>If this report contains protected health information, the Plan may identify this report as confidential if a redacted document is simultaneously filed.<br><br>Please only include information regarding <i>incidents on non-compliance resulting in substantial harm</i> with Rule 1300.67.2.2 in this section. Please do not include in Section C.2 patterns of non-compliance, as they must be reported separately under Section C.3. |
| 3. Patterns of non-compliance with Rule 1300.67.2.2  | Please provide a report with the following information: Whether the Plan identified, during the reporting period, any patterns of non-compliance, and if so, a description of the identified non-compliance and Plan's responsive investigation, determination and corrective action.<br><br>Please only include information regarding patterns on non-compliance with rule 1300.67.2.2 in this section. Please do not include in Section C.3 incident of non-compliance resulting in substantial harm, as they must be reported separately under Section C.2.   |

### D. ADVANCED ACCESS\*

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| 1. Methodology for Verification of Advanced Access Program | Please include the Plan's Policies and Procedures utilized to verify the Advanced Access programs reported by contracted providers, medical groups and independent practice associations to confirm that appointments are scheduled consistent with the definition of Advanced Access. Rule 1300.67.2.2(d)(2)(E).<br><br>If the Plan does not utilize advanced access, please select the "no submission" link, select the appropriate section and provide the Plan's explanation for selecting no submission. |
| 2. Lis of Advanced Access Providers                        | Provide a list of all provider groups and individual providers utilizing advanced access appointment scheduling.  |

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(D Advance Access.xls may be used to report provider groups)

If the Plan does not utilize advanced access, please select the “no submission” link, select the appropriate section and provide the Plan’s explanation for selecting no submission.

**E. PLAN AND CONTRACTOR USE OF TRIAGE, TELEMEDICINE HEALTH I.T.\***

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| 1. Triage       | Provide a description of the implementation and use by the Plan and its contracting providers of triage services to provide timely access to care.               |
| 2. Telemedicine | Provide a description of the implementation and use by the Plan and its contracting providers of telemedicine services to provide timely access to care.         |
| 3. Health I.T.  | Provide a description of the implementation and use by the Plan and its contracting providers of health information technology to provide timely access to care. |

**F. PROVIDER AND ENROLLEE SURVEYS\***

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| 1. Provider Satisfaction Survey Methodology | Please provide the Plan’s Policies and Procedures utilized to conduct an annual provider satisfaction survey. This should include a copy of the survey tool used to survey providers as well as a detailed explanation of the methodology used to conduct the survey. (Rule 1300.67.2.2(d)(2)(C).) Please note, that the Plan’s description under Section F.1. should match what it is already in the Plan’s Timely Access Policies and Procedures in e-Filing. If it does not, the Plan will be required to update e-Filing. |
| 2. Provider Satisfaction Survey Results     | Please provide the most recent results the Provider surveys and a copy of the survey tool utilized.<br><br>Please provide a narrative description that includes a discussion of how the current year’s survey results compare with results from prior year’s survey(s), including a discussion of the relative change in survey results. (Rule 1300.67.2.2(g)(2)(F).)   |
| 3. Enrollee Satisfaction Survey Methodology | Please provide the Plan’s Policies and Procedures utilized to conduct an annual enrollee satisfaction survey. This should include a copy of the survey tool used to survey enrollees as well as a detailed explanation of the methodology used to conduct the survey. (Rule 1300.67.2.2(d)(2)(B).) Please note, that the Plan’s description under Section F.3. should match what it is already in the Plan’s Timely Access Policies and Procedures in e-Filing. If it does not, the Plan will be required to update e-Filing. |
| 4. Enrollee Satisfaction Survey Results     | Please provide the most recent results of the Enrollee surveys and a copy of the survey tool utilized.<br><br>Please provide a narrative description that includes a discussion of how the  |

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|  | current year's survey results compare with results from prior year's survey(s), including a discussion of the relative change in survey results. (Rule 1300.67.2.2(g)(2)(F).) |

\* Please upload multiple documents and label. System will accept Word, Excel and PDF formats.