

	County of Sacramento Behavioral Health Services	Policy No.	QM-20-04
		Issued Date	07/01/2019
		Revision Date	
AREA:	TITLE:		
Federal Managed Care Regulations	Timely Access		
Approved by: (Signature on File) Signed version available upon request	Approved by: (Signature on File) Signed version available upon request		
Alexandra Rechs, LMFT Program Manager, Quality Management			

BACKGROUND

It is the policy of the Sacramento County Division of Behavioral Health Services (DBHS) and the Mental Health Plan (MHP) to comply with all state and federal statutory and regulatory requirements for timely access to services established by Title 42, Code of Federal Regulations (CFR), Part 438.68: Network Adequacy Standards, Part 438.206: Availability of Services, and Part 438.207: Assurances of Adequate Capacity and Services; Title 28, California Code of Regulations (CCR) § 1300.67.2.2: Timely Access to Non-Emergency Health Care Services; MHSUDS Information Notice No.: 18-011. Federal Network Adequacy Standards for Mental Health Plans (MHPS) and Drug Medical Organized Delivery System (DMC-ODS) Pilot Counties; and MHSUDS Information Notice No: 19-020. Client Services Information (CSI) Assessment Record.

DEFINITIONS

New Client - Any Medi-Cal beneficiary requesting a Specialty Mental Health Service that was not served within that system in the last 3 years.

Urgent Services - A request for service shall be considered urgent when the enrollee's condition is such that the enrollee faces an imminent and serious threat to his or her health, including, but not limited to, the potential loss of life, limb, or other major bodily function, or the normal timeframe for the decision making process, would be detrimental to the enrollee's life or health or could jeopardize the enrollee's ability to regain maximum function.

PURPOSE

This policy establishes the timely access to service standards and tracking requirements for Sacramento County Mental Health Plan (MHP).

DETAILS

Effective immediately, mental health and substance use disorder treatment providers in the Mental Health Plan (MHP) will comply with the network adequacy standards for timely access to services as specified in the table below. Timely access standards for outpatient services refers to the number of business days or hours in which a MHP provider must make an appointment available to a beneficiary from the date the beneficiary or a provider acting on behalf of the beneficiary, requests a medically necessary service. The initial assessment for outpatient services will begin with the Access Team or another designated entry point (e.g. Guest House, Intensive Placement Team) upon receipt of a service request.

Sacramento County MHP Timely Access Standards		
Type of Service	Non-Urgent	Urgent
Psychiatry	Within 15 business days from request to appointment	Within 48 hours of the request
Outpatient Services with a non-physician mental health providers where prior authorization is not required	Within 10 business days from request to appointment	Within 48 hours of the request
Outpatient Services with a non-physician mental health providers where prior authorization is required	Within 10 business days from request to appointment	Within 96 hours of the request

A. Tracking Requirements

For all new clients, providers who receive direct referrals from the public must track the following data in accordance with MHP procedures:

1. Date & Time of First Contact to Request Services
2. Urgency of the need for service (see definitions section for definition of Urgent Service)
3. Assessment Appointment First Offer Date & Time
4. Assessment Appointment Accepted Date & Time
5. Assessment Start Date
6. Assessment End Date
7. Treatment Appointment First Offer Date & Time
8. Treatment Appointment Accepted Date & Time
9. Treatment Start Date
10. Closed Out Date
11. Closure Reason
12. Referral Source
13. Referred To

B. Monitoring

The MHP will monitor the service delivery system for compliance with the timeliness standards and with this policy. MHP will also monitor each provider for compliance with timeliness standards, data collection and reporting, and issuing appropriate notices of action.

C. Non-Compliance with Timely Access Standards

1. If any timely access to service standard is not met for a beneficiary, the beneficiary will be sent a "Notice of Adverse Benefit Determination
2. NOABD-Timely Access shall be issued as follows:
 - a. The beneficiary or the parent or legal guardian will be sent a NOABD-Timely Access by the provider responsible for providing the services.
 - b. The issuing provider shall fax or send via US Mail a copy of the NOABD-Timely Access to Sacramento County Member Services immediately upon issuance to the beneficiary:

Mail: Sacramento County Member Services
 Quality Management
 7001-A East Parkway, Suite 300
 Sacramento, CA 95823
 Fax: (916) 875-0877

D. Non-Compliance with Timely Access Policy

Any failure to comply with this policy will result in a plan of correction

REFERENCES/ATTACHMENTS:

- CMS Medicaid and CHIP Managed Care Final Rule (Final Rule)
- California Health and Safety Code (HSC) §1367.01
- Title 42, Code of Federal Regulation-s (CFR), Part 438.68: Network Adequacy
- Standards, Part 438.206: Availability of Services, and Part 438.207: Assurances of Adequate Capacity and Services.
- Title 28, California Code of Regulations (CCR) §1300.67.2.2: Timely Access to Non-Emergency Health Care Services

RELATED POLICIES:

- No. 02-01 Notices of Action

DISTRIBUTION:

Enter X	DL Name	Enter X	DL Name
X	Mental Health Staff	X	Mental Health Treatment Center
X	Adult Contract Providers	X	Children Contract Providers

CONTACT INFORMATION:

- Quality Management Information
QMInformation@SacCounty.net