



Provider Appointment Availability Survey (PAAS)

Alameda Alliance for Health (Alliance) values our dedicated provider partner community. We are committed to continuously improving our provider and member customer satisfaction.

From **May to December of 2019**, the Alliance is conducting the **2019 Provider Appointment Availability Survey (PAAS)**. All health plans in California are required to survey providers to assess the availability of routine and urgent appointments.

About This Survey

Providers: Alliance network providers include primary care providers (PCPs) and non-physician medical practitioners, specialist physicians (cardiovascular disease, endocrinology and gastroenterology), psychiatrists, non-physician mental health (NPMH) providers, and ancillary providers (mammogram or physical therapy).

Methodology: The Alliance will contact a randomized sample (and oversample, as appropriate) of network providers contracted with the Alliance as of **Monday, December 31, 2018**. The Alliance will first fax/email the survey. If we do not receive a fax or email response, the Alliance will follow up with a phone call.

Questions: The survey solicits answers about the next available appointment date and time for:

1. Urgent and non-urgent services for PCP, specialist, psychiatrist, and NPMH providers.
2. Non-urgent services for ancillary providers.

Appointment dates and times are collected at the location level for those providers practicing at Federally Qualified Health Centers (FQHCs).

Your provider office is **contractually obligated** to complete the survey. Please note that non-responsiveness/refusal to comply with the survey may result in a corrective action plan.

On the next page, please find a table that outlines the required appointment time frames.

Thank you for your attention and assistance in completing the PAAS.

TIMELY ACCESS REGULATION*

All Providers are required to offer appointments within the following timeframes:

PRIMARY CARE PHYSICIAN (PCP) APPOINTMENT	
Appointment Type:	Appointment Within:
Non-Urgent Appointment	10 Business Days of Request
Initial OB/Gyn Pre-natal Appointment	2 Weeks of Request
Urgent Appointment that <i>requires</i> PA	96 Hours of Request
Urgent Appointment that <i>does not</i> require PA	48 Hours of Request

SPECIALTY/OTHER APPOINTMENT	
Appointment Type:	Appointment Within:
Non-Urgent Appointment with a Specialist Physician	15 Business Days of Request
Non-Urgent Appointment with a Behavioral Health Provider	10 Business Days of Request
Non-Urgent Appointment with an Ancillary Service	15 Business Days of Request
Initial OB/Gyn Pre-natal Appointment	2 Weeks of Request
Urgent Appointment that <i>requires</i> PA	96 Hours of Request
Urgent Appointment that <i>does not</i> require PA	48 Hours of Request

ALL PROVIDER WAIT TIME/TELEPHONE/LANGUAGE PRACTICES	
Appointment Type:	Appointment Within:
In-Office Wait Times	60 Minutes
Call Return Time	1 Business Day
Time to Answer Call	10 Minutes
After-Hours Telephone Access – Provide 24 Hours Coverage	
Emergency Instructions – Ensure Proper Emergency Instructions	
Language Services – Provide 24 Hour Interpretive Services	

* DMHC Regulations, Title 28 §1300.67.2.2(c)(5)

PA = Prior Authorization

Questions? Please call the Alliance Provider Services Department
 Monday – Friday, 7:30 am – 5 pm
 Phone Number: **1.510.747.4510**
www.alamedaalliance.org