

From: DMHC Licensing eFiling

Subject: APL 24-020 – RY 2026/MY 2025 Provider Appointment Availability Survey Manual and Report Form Amendments

Date: Wednesday, November 13, 2024 1:09 PM

Attachments: APL 24-020 - RY 2026 MY 2025 Provider Appointment Availability Survey Manual and Report Form Amendments.pdf, PAAS Manual for RY 2026 MY 2025 – Clean.docx, PAAS Manual for RY 2026 MY 2025 – Track Changes.docx, Timely Access Submission Instruction Manual for RY 2026 MY 2025 – Clean.docx, Timely Access Submission Instruction Manual for RY 2026 MY 2025 – Track Changes.docx, PAAS Report Forms – Notice of Changes for RY 2026 MY 2025.pdf

Dear Health Plan Representative:

The Department of Managed Health Care (DMHC) hereby issues: APL 24-020 (OPM) – RY 2026/MY 2025 Provider Appointment Availability Survey Manual and Report Form Amendments.

Thank you.



Gavin Newsom, Governor
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ALL PLAN LETTER

DATE: November 13, 2024

TO: All Full Service and Mental Health Care Service Plans

FROM: Nathan Nau
Deputy Director, Office of Plan Monitoring

SUBJECT: APL 24-020 (OPM) – RY 2026/MY 2025 Provider Appointment Availability Survey Manual and Report Form Amendments

The Department of Managed Health Care (DMHC) issues this All Plan Letter (APL) to provide notice to health care service plans (health plans) of amendments to Rule 1300.67.2.2 and the following reporting year (RY) 2026/measurement year (MY) 2025 Timely Access Compliance Report documents: Provider Appointment Availability Survey (PAAS) Manual, PAAS Report Forms and the Timely Access Submission Instruction Manual (TA Instruction Manual).^{1, 2, 3} Please note: this APL is applicable to reporting due in 2026 and does **not** make any changes to the Timely Access Compliance Report that is due on May 1, 2025.

I. Background

A health plan is required to monitor networks for compliance with the timely access standards set forth in Section 1367.03(a) and Rule 1300.67.2.2(c) and report the results to DMHC on an annual basis in the Timely Access Compliance Report. The Timely Access Compliance Report requirements are set forth in Rule 1300.67.2.2(h)(6) and (8) and in the documents incorporated into this rule, which are set forth above. Health plans

¹ This All Plan Letter applies to reporting health plans, as defined in Rule 1300.67.2.2(b)(17), and does not apply to plans licensed only to offer Medicare Advantage product lines or only Employee Assistance Program (EAP) products.

² The Knox-Keene Act is set forth in California Health and Safety Code sections 1340 et seq. References herein to "Section" are to sections of the Act. References to "Rule" refer to the California Code of Regulations, title 28.

³ The annual Timely Access Compliance Report requirements are set forth in Rule 1300.67.2.2(h)(6) and (8).

are required to include MY 2025 PAAS data in their RY 2026 Timely Access Compliance Report, due **May 1, 2026**.⁴

Senate Bill (SB) 221 (Wiener, Chapter 724, Statutes of 2021) and SB 225 (Wiener, Chapter 601, Statutes of 2022) provided the DMHC with two exemptions from the Administrative Procedure Act (APA). SB 221 provided the DMHC with the authority to develop and adopt timely access reporting methodologies until December 31, 2025. SB 225 provided the DMHC the authority to adopt standards to ensure enrollees have timely access to care until December 31, 2028. Pursuant to these exemptions, the DMHC amended timely access monitoring and reporting requirements in Rule 1300.67.2.2 and hereby directs health plans to use the following amended documents to demonstrate and report compliance for the submission due on May 1, 2026: RY 2026/MY 2025 PAAS Manual, RY 2026/MY 2025 PAAS Report Forms, and RY 2026/MY 2025 TA Instruction Manual.^{5,6}

II. Notice of Amendments to PAAS Manual, PAAS Report Forms and TA Instruction Manual

Health plans are required to use the version of the PAAS Manual, PAAS Report Forms, and TA Instruction Manual noticed on the DMHC's website at www.dmhc.ca.gov, on or before May 1 of each measurement year.⁷ The DMHC hereby provides notice of the amendments to documents for RY 2026/MY 2025. These documents shall replace the prior versions of these documents and forms after the RY 2025/MY2024 Timely Access Compliance Report has been submitted on May 1, 2025.

The Timely Access Compliance Report documents amended for RY 2026/MY 2025 include the following:

1. RY 2026/MY 2025 PAAS Manual
2. RY 2026/MY 2025 TA Instruction Manual
3. RY 2026/MY 2025 PAAS Report Forms
 - a. Primary Care Providers Contact List Report Form (Form No. 40-254)
 - b. Non-Physician Mental Health Care Providers Contact List Report Form (Form No. 40-255)

⁴ See California Health and Safety Code section 1367.03, sub. (f)(3) and California Code of Regulations, title 28, section 1300.67.2.2, subs. (b)(17), (f) and (h)(6)(B).

⁵ See Rule 1300.67.2.2, subs., (d)(2)(A)(iii), (f), (h)(4)(B) and (h)(6)(B). These documents have been incorporated by reference into incorporated in Rule 1300.67.2.2(f)(1).

⁶ Pursuant to Section 1367.03(f)(3) & (5), the DMHC circulated these documents for stakeholder feedback on September 10, 2024.

⁷ See Rule 1300.67.2.2(f)(1).

- c. Specialist Physicians Contact List Report Form (Form No. 40-256)
- d. Psychiatrists Contact List Report Form (Form No. 40-257)
- e. Ancillary Service Providers Contact List Report Form (Form No. 40-258)
- f. Primary Care Providers Raw Data Report Form (Form No. 40-259)
- g. Non-Physician Mental Health Care Providers Raw Data Report Form (Form No. 40-260)
- h. Specialist Physicians Raw Data Report Form (Form No. 40-261)
- i. Psychiatrists Raw Data Report Form (Form No. 40-262)
- j. Ancillary Service Providers Raw Data Report Form (Form No. 40-263)
- k. Results Report Form (Form No. 40-264)

The DMHC has attached the amended documents to this APL. Amendments to existing law are identified using underline for new text and deletions are identified by strikethrough. The overview of key amendments below is not an exhaustive list, but includes the most significant changes from RY 2025 to RY 2026.

RY 2026/MY 2025 PAAS Manual:

- Revised paragraph 8 to modify reporting instructions for subcontracted plan providers where a health plan has a plan-to-plan contract.
- Revised paragraph 68 and the Survey Tool to direct health plans to calculate compliance for urgent appointments using the 48 hour standard if no prior authorization is required or 96 hour standard if prior authorization is required for an enrollee assigned to that network to see the provider.
- Revised introductory language in the Survey Tool to clarify for participating providers that the survey is designed to assess the adequacy of a health plan's network.
- Updated references to “performance target” for consistency with the 80% rate of compliance for NPMH provider follow-up appointments added to Rule 1300.67.2.2(b)(12)(A).⁸

RY 2026/MY 2025 TA Instruction Manual, including the PAAS Report Form Field Instructions:

⁸ See APL 24-017 (OPM) – RY 2025/MY 2024 Provider Appointment Availability Survey NPMH Provider Follow-Up Appointment Rate of Compliance, published July 31, 2024.

- Revised the instructions for requesting a reporting waiver to direct health plans to submit a request for waiver prior to August 1st of the measurement year.
- Revised section III.D to reflect the reporting structure for corrective action included in the RY 2025 Web Portal.
- Added the “Applicable Urgent Care Standard” field and associated field instructions to Non-Physician Mental Health Providers, Psychiatrists and Specialist Physicians Contact List and Raw Data Report Forms in Section IV.
- Revised “Subcontracted License” and “Subcontracted Network ID” fields and associated field instructions to all Contact List and Raw Data Report Forms in Section IV
- Removed “Was a Subcontracted Network(s) Used to Determine Sample Size” and “Subcontracted Plan License Number(s) Used to Determine Sample Size” fields from all Raw Data Report Forms in Section IV.
- Removed instructions related to submission of the Annual Network Report.⁹
- Revised Question 3 (Question 4 for Non-Physician Mental Health Providers) field and associated field instructions for Primary Care Providers, Non-Physician Mental Health Providers, Psychiatrists and Specialist Physicians Raw Data Report Forms.

Fillable versions of RY 2026/MY 2025 PAAS Report Forms with field instructions will be available to health plans on the Resources section of the Timely Access and Annual Network Reporting Web Portal in early 2025.

If you have questions about this APL, please contact the DMHC’s Office of Plan Monitoring at TimelyAccess@dmhc.ca.gov.

⁹ This Timely Access Submission Instruction Manual was originally an excerpt of the Timely Access and Annual Network Submission Instruction Manual, incorporated by reference in 28 CCR § 1300.67.2.2 (as amended April 1, 2022). The DMHC amended the law and separated this manual into two distinct manuals due to timing concerns and reporting changes. The RY 2025 Annual Network Submission Instruction Manual is available within the Timely Access and Annual Network Reporting Web Portal, which includes instructions for reporting Annual Network data, including within Annual Network Report Forms and the Network Access Profile.

Attachments:

PAAS Manual – Notice of Changes for RY 2026/MY 2025:

- PAAS Manual for RY 2026/MY 2025 – Track Changes
- PAAS Manual for RY 2026/MY 2025 – Clean

Timely Access Submission Instruction Manual – Notice of Changes for RY 2026/MY 2025:

- Timely Access Submission Instruction Manual for RY 2026/MY 2025 – Track Changes
- Timely Access Submission Instruction Manual for RY 2026/MY 2025 – Clean

PAAS Report Forms – Notice of Changes for RY 2026/MY 2025:

- Primary Care Providers Contact List Report Form (Form No. 40-254)
- Non-Physician Mental Health Care Providers Contact List Report Form (Form No. 40-255)
- Specialist Physicians Contact List Report Form (Form No. 40-256)
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