

## HIGHMARK HEALTH OPTIONS DUALS (MEDICARE)

### Provider Access Standards and Annual Audit: Frequently Asked Questions (FAQs)

Question	Answer
<p><b>What are Accessibility Standards (Appointment Standards)?</b></p>	<p>Appointment Standards were established to ensure that Highmark Health Options members have timely access to Primary Care and Specialty Care (physical health and behavioral health) services, including: <a href="#">wait time to schedule appointments</a>, <a href="#">after-hours access to care</a>, and <a href="#">average wait time in the office waiting room before being seen by a practitioner in the office</a>.</p>
<p><b>Where can I view the Accessibility Standards (Appointment Standards)?</b></p>	<p>The Accessibility Standards and other provider access resources are located on the Highmark Health Options Duals website at <a href="https://www.highmarkhealthoptions.com/providers/provider-resources/accessibility-to-care-standards">https://www.highmarkhealthoptions.com/providers/provider-resources/accessibility-to-care-standards</a></p>
<p><b>Why does Highmark Health Options Duals conduct an annual provider access audit?</b></p>	<p>To monitor your practice site's adherence to the established accessibility standards to ensure our members have timely access to primary care, specialty care, and behavioral health care services; to meet federal regulatory requirements.</p>
<p><b>When does Highmark Health Options Duals conduct the annual provider access audit?</b></p>	<p>Normally, in the 2<sup>nd</sup> Quarter of each year.</p>
<p><b>What method of communication is used to conduct the provider access audit?</b></p>	<p>The provider access audit is conducted <a href="#">telephonically</a>.</p>
<p><b>Who conducts the provider access audit?</b></p>	<p>A contracted vendor (Press Ganey) conducts the provider access audit on behalf of Highmark Health Options Duals.</p>
<p><b>How many call attempts will be made to reach our practice site to conduct the provider access audit?</b></p>	<p>Press Ganey call agents will make up to <a href="#">3 call attempts</a> to reach your practice to complete the appointment audit.</p>

<p><b>How long will the provider access audit take?</b></p>	<p>It takes approximately <b>5 minutes</b> to complete the audit.</p>
<p><b>Who at my practice site should complete the provider access audit?</b></p>	<p><b>Associates</b> in your practice or call center <b>that schedule patient appointments</b> or have access to the appointment calendar.</p> <p>If a <b>call center</b> schedules your patient appointments, your practice site's phone recording should identify the phone number option to press to schedule patient appointments. The audit call agent will follow the prompts to get to the appropriate line to conduct the audit.</p> <p>In addition to audit questions regarding patient wait times to schedule appointments, all practice associates should be kept informed about your practice site's average office wait time for patients so that the audit questions are answered accurately.</p>
<p><b>Is our practice site required to participate in the provider access audit?</b></p>	<p><b>Yes</b>, your practice site is contractually required to participate in the provider access audit. Highmark Health Options Duals uses the audit results to identify provider access barriers and develop initiatives to improve access.</p>

<p><b>Will our practice site receive documentation indicating the provider access audit results?</b></p>	<p><b>Yes</b>, if your practice site participated in the provider access audit and failed one or more standards, your site will be mailed a letter along with a report card detailing your audit results.</p> <p>The letter will be directed to the attention of Office Administrator/Corporate Compliance. It will indicate that your site failed the audit and must complete the actions identified in the letter and submit to Highmark Health Options Duals via the <a href="#">Provider Access Corrective Action Plan Online Submission Form</a> within in 45 days.</p> <p><b>Actions include:</b> submission of a corrective action plan (CAP) for failed standards, completion of staff training, and completion of a practice self-assessment.</p>
<p><b>What happens if our practice site fails one or more standards in the provider access audit and does not submit a corrective action plan showing intent to mitigate non-compliance with the access standards, when requested by Highmark Health Options Duals?</b></p>	<p>Providers are contractually required to adhere to and remain compliant with the Highmark Health Options Duals Accessibility Standards. Practice sites who are not compliant with our administrative procedures may be further reviewed for education and remediation.</p>
<p><b>What steps should our office site take to ensure that our site is meeting the provider accessibility standards?</b></p>	<ol style="list-style-type: none"> <li><b>1)</b> Review the access standards.</li> <li><b>2)</b> Share the standards with all staff that schedule patient appointments, including call center staff.</li> <li><b>3)</b> Complete a practice self-assessment.</li> <li><b>4)</b> Contact your provider representative if you have additional questions regarding the access standards and/or audit.</li> </ol> <p>The access standards, practice self-assessment tool and other provider access audit resources are located on the Highmark Health Options Duals provider website at <a href="https://www.highmarkhealthoptions.com/providers/provider-resources/accessibility-to-care-standards/">https://www.highmarkhealthoptions.com/providers/provider-resources/accessibility-to-care-standards/</a></p>



<b>How often will our practice site be audited?</b>	Your practice site may be contacted by phone <b>annually</b> to complete the provider accessibility audit.
<b>What is the purpose of the "Practice Self-Assessment Tool" and where can I find it?</b>	The tool can be used by practice sites to determine if they are meeting the Highmark Health Options Duals accessibility standards. You can access the tool on the Highmark Health Options Duals provider website at <a href="https://www.highmarkhealthoptions.com/providers/provider-resources/accessibility-to-care-standards/">https://www.highmarkhealthoptions.com/providers/provider-resources/accessibility-to-care-standards/</a>
<b>What is the most common reason that practice sites fail the accessibility audit? How can it be corrected?</b>	<p>Practice site and call center associates that schedule member appointments do not have a clear understanding of the accessibility standards and answer audit questions inaccurately; and/or do not have access to data related to member wait times in the office waiting room/exam room.</p> <p>This could be corrected through associate education of the accessibility standards as part of new employee onboarding and continuous education for existing associates; and providing scheduling staff with office wait time data.</p>

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