Timely Access to Covered Health Care Services

Landmark will provide or arrange for the provision of covered health care services in a timely manner appropriate for the nature of a member's condition consistent with good professional practice.

If a member needs language interpretation services, these services will be coordinated with scheduled appointments without delaying the scheduling of such appointments.

Landmark's appointment wait time standards are as follows:

Urgent Conditions: Appointment must be scheduled within forty-eight hours from the time of contact.

Routine Non-Urgent Conditions: Appointment must be scheduled within five (5) business days from the date of contact.

Rescheduling Appointments: if it is necessary for the provider or member to reschedule an appointment, the appointment shall be promptly rescheduled in a timely manner appropriate for the nature of an enrollee's condition consistent with good professional practice and that ensures continuity of care. Rescheduled appointments shall not exceed those defined appointment time frames for a routine non-urgent care or urgent care appointment as applicable to the member's health care needs.

Walk-ins: The member must be treated or interviewed immediately to determine the urgency of the condition. If the condition so warrants, the member must be given the first available appointment or, if the condition is urgent, the member must be seen immediately.

Appointment Waiting Times: The member must not wait more than fifteen (15) minutes from the appointed arrival time at the practitioner's office, provided the member arrived on time for their appointment.

Landmark will arrange for the provision of a non-network provider if covered services are not available from a network provider. Contact Customer Service at the number given below if you need assistance in this regard.

To obtain assistance in locating a provider near you, call Customer Service at 800 298 4875. Providers and members may file a complaint with the Department of Managed Health Care if they are unable to access a provider in a timely manner.

The Department's toll-free number is 888 466 2219. Information about how to file a complaint is available on the Department's website at https://www.dmhc.ca.gov/FileaComplaint.aspx.