

NOTICE OF ERRATA
Issued on February 13, 2024

APL 23-028 (December 22, 2023)
Amendments to 28 CCR § 1300.67.2.2

The Department of Managed Health Care hereby provides notice of the following typographical errors in Amendments to title 28 Cal. Code Regs § 1300.67.2.2, attached to the All Plan Letter (APL) 23-028 (OPM) – RY 2025/MY 2024 Provider Appointment Availability Survey Manual and Report Form Amendments (Issued on December 22, 2023):

Within the amendments to Rule 1300.67.2.2(h), the language should read as follows:

(h) Filing, Implementation and Reporting Requirements.

[...]

(6) Timely Access Compliance Report. A plan shall submit the items set forth in subsections (h)(6) and (h)(8) of this Rule, as part of its Timely Access Compliance Report for each applicable measurement year, as defined in (b)(4)(A) of this Rule. Each item shall be submitted in accordance with the requirements set forth in the Timely Access Submission Instruction Manual. The following items shall be included in the plan's Timely Access Compliance Report:

[...]

C) Non-Compliance Information and Description of Corrective Action

(i) The Department issued filing number for the plan's efile containing a description of the plan's procedure for identifying any incidents of non-compliance resulting in substantial harm to an enrollee, as defined in Civil Code section 3428, and patterns of non-compliance, as defined in subsection (b)(12) of this Rule. The policy and procedure shall include:

- a. The plan's definition of an incident of non-compliance resulting in substantial harm to an enrollee, which at a minimum shall include the definition set forth in Civil Code section 3428;

- b. The plan's definition of patterns of non-compliance, which at a minimum shall include the definitions set forth in subsection (b)(12) of this Rule; and
 - c. The plan's monitoring mechanism and the sources of information or data the plan uses to identify any patterns of non-compliance and incidents of non-compliance resulting in substantial harm to an enrollee.
- (ii) Information describing whether the plan identified:
- a. Any incidents of non-compliance resulting in substantial harm to an enrollee that occurred during the measurement year; ~~and~~
 - b. Any patterns of non-compliance that occurred during the measurement year; and
 - c. Any other evaluation or information regarding compliance that is required to be reported, including the requirements set forth in sections III.D and III.H. of the Timely Access Submission Manual and paragraphs 2, 67, 77, 78 and 85 of the Provider Appointment Availability Survey Manual.
- (iii) A description of the identified non-compliance, set forth in subsection (h)(6)(C)(ii) of this Rule, and the plan's responsive investigation and determination.
- (iv) A corrective action plan, which shall include the following information with respect to each identified incident of non-compliance resulting in substantial harm to an enrollee, ~~and pattern of non-compliance, and other compliance concerns required to be reported pursuant to subsection (h)(6)(ii) of this Rule:~~
- a. The steps the plan has taken or intends to take with respect to each issue of non-compliance in order to address the non-compliance and to bring its network into compliance with the Knox-Keene Act; and
 - b. Any follow-up actions the plan has taken or intends to take to ensure compliance with the Knox-Keene Act and the plan's timeframe for completion of investigation, development of corrective action, implementation of corrective action, follow-up actions, and other requirements as outlined in subsection (h)(6)(C)(ii)-(iv) of this Rule.
- (v) If the plan did not submit the information set forth in subsection (h)(6)(C)(ii)-(iv) of this Rule in a prior reporting year, the plan shall include the omitted information in the current reporting year.

[...]

If you have any questions about this notice, please contact the Office of Plan Monitoring at timelyaccess@dmhc.ca.gov.