To ensure that services are accessible and available to recipients in a timely manner, Medi-Cal managed care plans will need to maintain a network of providers that are located within a specified time or distance from patients’ homes. This publication discusses the time and distance standards for certain types of providers.

1. What are the time and distance standards for medical care?

For standard medical care, the following standards apply as of January 1, 2018:

---

1 For information on Medi-Cal managed care plans, see our publication Medi-Cal Managed Care Health Plans: What are they? What do I need to know about them? “Return To Main Document”

2 See California Welfare & Institutions Code Section §14197. “Return To Main Document”

3 For more information about appointment standards for certain services, see our publication, Timely Access to Medical Care, “Return To Main Document”

4 W&IC §14197(b) “Return To Main Document”
Primary care providers (pediatric and adult) must be located within **ten (10) miles or thirty (30) minutes** of your home.

Hospitals must be located within **fifteen (15) miles or thirty (30) minutes** of your home.

Dental services covered by Medi-Cal managed care plans must be located within **ten (10) miles or thirty (30) minutes** of your home.5

Obstetrics and gynecology primary care providers must be located within **ten (10) miles or thirty (30) minutes** from your home.

2. What are the time and distance standards for specialized medical care?

As of July 1, 2018, Medi-Cal managed care plans must maintain a network of specialists6 (pediatric and adult) with standards dependent on the county you live in.7 If you live in:

Alameda, Contra Costa, Los Angeles, Orange, Sacramento, San Diego, San Francisco, San Mateo, or Santa Clara counties: Medi-Cal will maintain a network of providers located up to **fifteen (15) miles or thirty (30) minutes** from your home.

5 For more information see [All Medi-Cal Dental Managed Care Plans](#).

6 “Specialist” means a professional who practices any of the following: Cardiology/interventional cardiology, Nephrology, Dermatology, Neurology, Endocrinology, Ophthalmology, Ear, nose, and throat/otolaryngology, Orthopedic surgery, Gastroenterology, Physical medicine and rehabilitation, General surgery, Psychiatry, Hematology Oncology, Pulmonology, HIV/AIDS/infectious diseases. “Return To Main Document”

7 WIC 14197(c) “Return To Main Document”
Marin, Placer, Riverside, San Joaquin, Santa Cruz, Solano, Sonoma, Stanislaus, or Ventura counties: Medi-Cal will maintain a network of providers located up to **thirty miles (30) or sixty (60) minutes** from your home.

Amador, Butte, El Dorado, Fresno, Kern, Kings, Lake, Madera, Merced, Monterey, Napa, Nevada, San Bernardino, San Luis Obispo, Santa Barbara, Sutter, Tulare, Yolo, or Yuba counties: Medi-Cal will maintain a network of providers located up to **forty-five (45) miles or seventy-five (75) minutes** from your home.

Alpine, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Imperial, Inyo, Lassen, Mariposa, Mendocino, Modoc, Mono, Plumas, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, or Tuolumne counties: Medi-Cal will maintain a network of providers located up to **sixty miles (60) or ninety (90) minutes** from your home.

There are exceptions to these standards. When either the specialist is accessed primarily through a hospital or hospital-associated clinic setting, or when the specialist does not need a face-to-face patient visit to perform the service (e.g. pathology or radiology), a standardized time and distance requirement need not apply.  

In addition, some unique specialties were deliberately excluded from the list, as these types of standards would not reasonably apply.

---


9 Id. “Return To Main Document”
3. What are the time and distance standards for pharmacy services?

As of July 1, 2018, for pharmacy services, Medi-Cal managed care plans must maintain a network of providers located up to ten (10) miles or thirty (30) minutes from your home.\textsuperscript{10}

4. What are the time and distance standards for outpatient mental health services?

As of July 1, 2018, Medi-Cal managed care plans must maintain a network of outpatient mental health services for recipients.\textsuperscript{11} If you live in:

- Alameda, Contra Costa, Los Angeles, Orange, Sacramento, San Diego, San Francisco, San Mateo, or Santa Clara counties: Medi-Cal will maintain a network of providers located up to fifteen (15) miles or thirty (30) minutes from your home.
- Marin, Placer, Riverside, San Joaquin, Santa Cruz, Solano, Sonoma, Stanislaus, or Ventura counties: Medi-Cal will maintain a network of providers located up to thirty miles (30) or sixty (60) minutes from your home.
- Amador, Butte, El Dorado, Fresno, Kern, Kings, Lake, Madera, Merced, Monterey, Napa, Nevada, San Bernardino, San Luis Obispo, Santa Barbara, Sutter, Tulare, Yolo, or Yuba counties: Medi-Cal will maintain a network of providers located up to forty-five (45) miles or seventy-five (75) minutes from your home.
- Alpine, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Imperial, Inyo, Lassen, Mariposa, Mendocino, Modoc, Mono, Plumas, San

\textsuperscript{10} WIC §14197(c)(2) “Return To Main Document”

\textsuperscript{11} WIC §14197(c)(3) “Return To Main Document”
Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, or Tuolumne counties: Medi-Cal will maintain a network of providers located up to sixty miles (60) or ninety minutes (90) from your home.

5. What are the time and distance standards for outpatient substance abuse treatment and opioid treatment programs?

As of July 1, 2018, standards for outpatient treatment for substance abuse disorders (other than opioid treatment programs) also depend on the county you live in:

Alameda, Contra Costa, Los Angeles, Orange, Sacramento, San Diego, San Francisco, San Mateo, and Santa Clara counties: Medi-Cal will maintain a network of providers located up to fifteen (15) miles or thirty (30) minutes from your home.

Marin, Placer, Riverside, San Joaquin, Santa Cruz, Solano, Sonoma, Stanislaus, and Ventura counties: Medi-Cal will maintain a network of providers located up to thirty (30) miles or sixty (60) minutes from your home.

Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, El Dorado, Fresno, Glenn, Humboldt, Imperial, Inyo, Kern, Kings, Lake, Lassen, Madera, Mariposa, Mendocino, Merced, Modoc, Monterey, Mono, Napa, Nevada, Plumas, San Benito, San Bernardino, San Luis Obispo, Santa Barbara, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tulare, Tuolumne, Yolo, and Yuba counties: Medi-Cal will maintain a network of providers located up to sixty (60) miles or ninety (90) minutes from your home.

12 WIC §14197(c)(4)(A) “Return To Main Document”
As of July 1, 2018, opioid treatment program standards also depend on the county you live in:\(^\text{13}\):

- **Alameda, Contra Costa, Los Angeles, Orange, Sacramento, San Diego, San Francisco, San Mateo, and Santa Clara counties**: Medi-Cal will maintain a network of providers located up to **fifteen (15) miles or thirty (30) minutes** from your home.

- **Marin, Placer, Riverside, San Joaquin, Santa Cruz, Solano, Sonoma, Stanislaus, and Ventura counties**: Medi-Cal will maintain a network of providers located up to **thirty (30) miles or sixty (60) minutes** from your home.

- **Amador, Butte, El Dorado, Fresno, Kern, Kings, Lake, Madera, Merced, Monterey, Napa, Nevada, San Bernardino, San Luis Obispo, Santa Barbara, Sutter, Tulare, Yolo, and Yuba counties**: Medi-Cal will maintain a network of providers located up to **forty-five (45) miles or seventy-five (75) minutes** from your home.

- **Alpine, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Imperial, Inyo, Lassen, Mariposa, Mendocino, Modoc, Mono, Plumas, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, and Tuolumne counties**: Medi-Cal will maintain a network of providers located up to **sixty (60) miles or ninety (90) minutes** from your home.

A county Drug Medi-Cal organized delivery system shall provide an appointment within three business days to an opioid treatment program.\(^\text{14}\)

\(^\text{13}\) WIC §14197(c)(4)(B) “Return To Main Document”

\(^\text{14}\) *Medicaid Managed Care Final Rule*, p. 7 “Return To Main Document”
6. What are the time and distance standards for nursing or intermediate care facility services?

Skilled nursing or intermediate care facility services standards are also based on residence location:

For Alameda, Contra Costa, Los Angeles, Orange, Sacramento, San Diego, San Francisco, San Mateo, and Santa Clara counties: the managed care plan must make this service available within **five (5)** business days of your request.\(^{15}\)

For Marin, Placer, Riverside, San Joaquin, Santa Cruz, Solano, Sonoma, Stanislaus, and Ventura counties: the managed care plan must make this service available within **seven (7)** business days of your request.\(^{16}\)

For Amador, Butte, El Dorado, Fresno, Kern, Kings, Lake, Madera, Merced, Monterey, Napa, Nevada, San Bernardino, San Luis Obispo, Santa Barbara, Sutter, Tulare, Yolo, and Yuba counties: the managed care plan must make this service available within **fourteen (14)** business days of your request.\(^{17}\)

For Alpine, Calaveras, Colusa, Del Norte, Glenn, Humboldt, Imperial, Inyo, Lassen, Mariposa, Mendocino, Modoc, Mono, Plumas, San Benito, Shasta, Sierra, Siskiyou, Tehama, Trinity, and Tuolumne

\(^{15}\) WIC §14197(d)(2)(A) “Return To Main Document”

\(^{16}\) WIC §14197(d)(2)(B) “Return To Main Document”

\(^{17}\) WIC §14197(d)(2)(C) “Return To Main Document”
counties: the managed care plan must make this service available within fourteen (14) business days of your request.  

7. Are there any exceptions to these standards?

If a Medi-Cal managed care plan cannot meet the time and distance standards, it can request different standards from the Department of Health Care Services (DHCS), the single state agency that oversees the Medi-Cal program (including Medi-Cal managed care plans) in California. The Medi-Cal managed care plan will need to show that it has exhausted all reasonable options to get providers. It will also need to show why different standards are necessary. If DHCS approves different standards, these standards must be posted on the department's website.

Also, DHCS will consider other time and distance standards when the provider travels to the Medi-Cal recipient and/or a community-based setting to provide services.

If you are receiving services from your Medi-Cal managed care plan through an out-of-network provider, the same timely access requirements for in-network providers apply.

18 WIC §14197(d)(2)(D) “Return To Main Document”
19 WIC §14197(e)(1) “Return To Main Document”
20 WIC §14197(e)(3) “Return To Main Document”
21 Medicaid Managed Care Final Rule, p. 24 “Return To Main Document”
22 Id. at p. 16 “Return To Main Document"
8. Can a managed care plan use telehealth, other telecommunications technology, or pharmacy mail order to provide care?

Yes, the DHCS may allow for the use of clinically appropriate telecommunications technology as a method of complying with time and distance standards.23

What can I do if my Medi-Cal managed care plan does not comply with these standards?

You can file a grievance with your Medi-Cal managed care plan24, and/or with the Medi-Cal Managed Care Office of the Ombudsman25.

Additional resource

See, CA Dept. of Health Care Services, Medicaid Managed Care Final Rule: Network Adequacy Standards (2017).

23 WIC §14197(e)(4) “Return To Main Document”

24 See our publication, Medi-Cal Managed Care: Appeals and Grievances. “Return To Main Document”

We want to hear from you! Please complete the following survey about our publications and let us know how we are doing! [Take the Survey]

For legal assistance call 800-776-5746 or complete a request for assistance form. For all other purposes call 916-504-5800 (Northern CA); 213-213-8000 (Southern CA).

Disability Rights California is funded by a variety of sources, for a complete list of funders, go to http://www.disabilityrightsca.org/Documents/ListofGrantsAndContracts.html.