

Volume 5 of 5
Drug Medi-Cal
Organized Delivery System
External Quality Review
Technical Report
Contract Year 2024–25

Alternative Access Standards Reporting

California Department of Health Care Services

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Table of Contents

Drug Medi-Cal Organized Delivery System Plan Name Abbreviations	iii
Commonly Used Abbreviations and Acronyms	v
1. Introduction	1
Overview	1
Reporting Elements	2
2. Methodology	3
Data Sources	3
Analysis	3
Analytic Considerations	3
3. Results	5
Alternative Access Standards Requests, Approvals, and Denials	5
Reasons for the Approval or Denial of Alternative Access Standards Requests	5
Distance and Driving Time Between Nearest In-Network Provider and Farthest Member	7
Time Frame for Approval or Denial of Requests	8
Consumer Complaints	9
Process of Ensuring Out-of-Network Access	9
Contracting Efforts	10
4. Conclusions and Considerations	11
Conclusions	11
Considerations	12
5. Alternative Access Standards Tables	14
Table 5.1 and Table 5.2—Reporting Elements 1, 3, 4, and 6 (Plans Not Affiliated with the Regional Model)	14
Table 5.3 and Table 5.4—Reporting Elements 1, 3, 4, and 6 (Regional Model)	21
Table 5.5—Reporting Element 9 (Plans Not Affiliated with the Regional Model)	44
Table 5.6—Reporting Element 9 (Regional Model)	45
Table 5.7—Reporting Element 10—Grievances	46

Table of Tables

Table 5.1—Driving Distance, Driving Time, Number of Members Impacted, and Final Disposition for Adult Services in Alternative Access Standards Requests by DMC-ODS Plan, ZIP Code, and Service Modality—Plans Not Affiliated with the Regional Model 15

Table 5.2—Driving Distance, Driving Time, Number of Members Impacted, and Final Disposition for Children/Youth Services in Alternative Access Standards Requests by DMC-ODS Plan, ZIP Code, and Service Modality—Plans Not Affiliated with the Regional Model..... 15

Table 5.3—Driving Distance, Driving Time, Number of Members Impacted, and Final Disposition for Adult Services in Alternative Access Standards Requests by DMC-ODS Plan, ZIP Code, and Service Modality—Regional Model 21

Table 5.4—Driving Distance, Driving Time, Number of Members Impacted, and Final Disposition for Children/Youth Services in Alternative Access Standards Requests by DMC-ODS Plan, ZIP Code, and Service Modality—Regional Model 27

Table 5.5—Time Frame for DHCS Approval or Denial of Alternative Access Standards Requests, by DMC-ODS Plan—Plans Not Affiliated with the Regional Model 44

Table 5.6—Time Frame for DHCS Approval or Denial of Alternative Access Standards Requests, by DMC-ODS Plan—Regional Model 45

Table 5.7—Consumer Complaints to DMC-ODS Plans Regarding Access to Care, by DMC-ODS Plan and County..... 46

Drug Medi-Cal Organized Delivery System Plan Name Abbreviations

Health Services Advisory Group, Inc. (HSAG) uses the following abbreviated Drug Medi-Cal Organized Delivery System (referred to as “DMC-ODS plan” or “plan”) names in this volume.

Plans denoted with an asterisk (*) operate as part of the regional model and subcontract with Partnership HealthPlan of California (Partnership) in this collaborative effort.

- ◆ **Alameda**—County of Alameda
- ◆ **Contra Costa**—County of Contra Costa
- ◆ **El Dorado**—County of El Dorado
- ◆ **Fresno**—County of Fresno
- ◆ **Humboldt**—County of Humboldt*
- ◆ **Imperial**—County of Imperial
- ◆ **Kern**—County of Kern
- ◆ **Lassen**—County of Lassen*
- ◆ **Los Angeles**—County of Los Angeles
- ◆ **Marin**—County of Marin
- ◆ **Mariposa**—County of Mariposa
- ◆ **Mendocino**—County of Mendocino*
- ◆ **Merced**—County of Merced
- ◆ **Modoc**—County of Modoc*
- ◆ **Monterey**—County of Monterey
- ◆ **Napa**—County of Napa
- ◆ **Nevada**—County of Nevada
- ◆ **Orange**—County of Orange
- ◆ **Placer**—County of Placer
- ◆ **Riverside**—County of Riverside
- ◆ **Sacramento**—County of Sacramento
- ◆ **San Benito**—County of San Benito
- ◆ **San Bernardino**—County of San Bernardino
- ◆ **San Diego**—County of San Diego
- ◆ **San Francisco**—County of San Francisco
- ◆ **San Joaquin**—County of San Joaquin
- ◆ **San Luis Obispo**—County of San Luis Obispo

- ◆ **San Mateo**—County of San Mateo
- ◆ **Santa Barbara**—County of Santa Barbara
- ◆ **Santa Clara**—County of Santa Clara
- ◆ **Santa Cruz**—County of Santa Cruz
- ◆ **Shasta**—County of Shasta*
- ◆ **Siskiyou**—County of Siskiyou*
- ◆ **Solano**—County of Solano*
- ◆ **Stanislaus**—County of Stanislaus
- ◆ **Tulare**—County of Tulare
- ◆ **Ventura**—County of Ventura
- ◆ **Yolo**—County of Yolo

Commonly Used Abbreviations and Acronyms

Following is a list of abbreviations and acronyms used throughout this volume.

- ◆ **AAS**—Alternative Access Standards
- ◆ **BHIN**—Behavioral Health Information Notice
- ◆ **BHP**—behavioral health plan
- ◆ **CalAIM**—California Advancing and Innovating Medi-Cal
- ◆ **CAP**—corrective action plan
- ◆ **CA WIC**—California Welfare and Institutions Code
- ◆ **CMS**—Centers for Medicare & Medicaid Services
- ◆ **CY**—contract year
- ◆ **DDG**—DHCS Data De-identification Guidelines
- ◆ **DHCS**—California Department of Health Care Services
- ◆ **DMC-ODS**—Drug Medi-Cal Organized Delivery System
- ◆ **EQR**—external quality review
- ◆ **EQRO**—external quality review organization
- ◆ **HSAG**—Health Services Advisory Group, Inc.
- ◆ **MHSUDS**—Mental Health and Substance Use Disorder Services
- ◆ **NACT**—Network Adequacy Certification Tool
- ◆ **NR**—not reported
- ◆ **OTP**—Opioid Treatment Program
- ◆ **SCA**—single case agreement
- ◆ **SFY**—State Fiscal Year

1. Introduction

Overview

The California Department of Health Care Services (DHCS) is responsible for the ongoing monitoring and oversight of its contracted Medi-Cal Drug Medi-Cal Organized Delivery System (DMC-ODS) plans, including the assurance that DMC-ODS plans' provider networks are adequate to deliver services to Medi-Cal members. If a DMC-ODS plan is unable to meet provider network time or distance standards set by the State, the plan may submit an alternative access standards (AAS) request for specified provider scenarios (e.g., provider type, geographic area).

The DHCS Behavioral Health Information Notice (BHIN) 24-020¹ provides DHCS' clarifying guidance regarding network certification requirements, including time or distance AAS requests.

DHCS allows DMC-ODS plans to offer telehealth services to members to meet time or distance standards, consistent with California Welfare and Institutions Code (CA WIC) section (§)14197(f)(1).² If at least 85 percent of members in an area have access to in-person care within usual standards and a DMC-ODS plan has telehealth services available in its network, the DMC-ODS plan may propose to come into compliance utilizing telehealth services. This 15 percent "telehealth allowance" permits DMC-ODS plans to meet standards without having to submit an AAS request. Although DHCS permits DMC-ODS plans to use telehealth to meet time or distance standards, these plans must meet the required standards while also facilitating in-person care for members who request it.

CA WIC §14197.05³ requires DHCS to publish information related to DMC-ODS plans' AAS requests. DHCS uses its annual external quality review (EQR) technical report to present this information. As such, DHCS requested its external quality review organization (EQRO), HSAG, to process and report on data related to AAS for provider networks. In addition, DHCS has asked HSAG to report on instances wherein DMC-ODS plans have met time or distance

¹ California Department of Health Care Services. Behavioral Health Information Notice 24-020. Available at: [BHIN 2024 Network Certification Requirements for County Mental Health Plans and Drug Medi-Cal Organized Delivery Systems](#). Accessed on: Jan 14, 2026.

² California WIC §14197(f)(1). Available at: https://leginfo.legislature.ca.gov/faces/codes_displayText.xhtml?lawCode=WIC&division=9.&title=&part=3.&chapter=7.&article=6.3. Accessed on: Jan 14, 2026.

³ California WIC §14197.05. Available at: https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=WIC§ionNum=14197.05. Accessed on: Jan 14, 2026.

standards using a 15 percent telehealth allowance consistent with CA WIC §14197.05 on AAS requests. The measurement period for this study is August 1, 2024, through June 30, 2025.

Reporting Elements

The following reporting elements are defined by CA WIC §14197.05 for inclusion in the annual EQR technical report:

1. The number of requests for AAS in the plan service area for time or distance, categorized by all provider types, including specialists, and by adult and children/youth.⁴
2. The number of allowable exceptions for the appointment time standard, if known, categorized by all provider types, including specialists, and by adult and children/youth.
3. Distance and driving time between the nearest in-network provider and ZIP Code of the member farthest from that provider for requests for AAS.
4. The approximate number of members impacted by AAS.
5. Percentage of providers in the plan service area by provider and specialty type that are under a contract with a Medi-Cal DMC-ODS plan.
6. The number of requests for AAS approved or denied by ZIP Code and provider and specialty type, and the reasons for the approval or denial of the request for AAS.
7. The process of ensuring out-of-network access.
8. Descriptions of contracting efforts and explanation for why a contract was not executed.
9. Time frame for approval or denial of a request for AAS by DHCS.
10. Consumer complaints, if any.

⁴ Adults are persons 18 years of age and over, and children/youth are persons 0–17 years of age.

2. Methodology

Data Sources

To compile information for each reporting element, HSAG used the following datasets and background information supplied by DHCS:

- ◆ Extracts from the database used by DHCS to store and organize AAS requests received from DMC-ODS plans and DHCS’ determinations (approvals and denials) regarding the disposition of those requests.
- ◆ Grievance data, including DMC-ODS plan name/county name and counts of grievances related to geographic access and other aspects of access to care. DMC-ODS plans are required to submit appeals and grievances quarterly to DHCS under the terms of an agreement with the Centers for Medicare & Medicaid Services (CMS).⁵

Analysis

HSAG reviewed each data source for completeness and internal consistency. Reporting elements were computed as described under the Reporting Elements heading in Section 1 of this volume (“Introduction”), subject to the analytic considerations described below. A summary of results is presented in Section 4 of this volume (“Results”), detailed tables are presented in Section 5 (“Alternative Access Standards Tables”), and methodological details for each data element are presented in both sections.

Analytic Considerations

DHCS does not currently grant exceptions to the appointment wait time standard for DMC-ODS plans; therefore, no data are reported for Reporting Element 2 (the number of allowable exceptions for the appointment time standard).

Reporting Element 5, the percentage of providers in the plan service area that are under contract with a DMC-ODS plan, requires a count of all providers practicing in each plan service area. HSAG and DHCS joined efforts but were unable to identify a data source for the denominator of Reporting Element 5, the total number of providers in the service area. DHCS agreed that HSAG would not include Reporting Element 5 in the 2024–25 EQR technical

⁵ California Department of Health Care Services. BHIN 23-062. Available at: [BHIN 23-062 1915\(b\) Quarterly Appeal and Grievance Report Requirements.pdf](#). Accessed on: Feb 19, 2026.

report volume and that DHCS and HSAG will explore data source options for future AAS reporting.

Reporting Element 10 relates to consumer complaints. For this report volume, the terms “consumer complaints” and “member grievances” are used interchangeably. The data used in reporting were member expressions of dissatisfaction with provider or plan services collected by DMC-ODS plans and submitted quarterly to DHCS on multiple categories of grievances. The category presented in this report is “Access to care/services from plan or provider,” which includes “complaints about difficulties finding qualified in-network providers, excessive travel or wait times, or other access issues,” and is limited to “grievances resolved during the reporting period that were filed for a reason related to access to care.” Note that some of the grievances counted may be beyond the scope of this report, including complaints about timely access.

In addition to reporting elements defined in CA WIC §14197.05, HSAG reports on telehealth when it is used in lieu of in-person care to meet network adequacy standards. If any submitted AAS requests had indicated that telehealth coverage would be applied to compensate for deficiencies in the availability of in-person care, those requests would have been presented in this volume. No such requests were submitted in State Fiscal Year (SFY) 2024–25 (i.e., July 1, 2024, through June 30, 2025).

3. Results

This section contains a summary of results. Full details for the quantitative reporting elements (i.e., all available reporting elements except Reasons for Approval or Denial of Alternative Access Standards Requests, Process of Ensuring Out-of-Network Access, and Contracting Efforts) may be found in Section 5 of this volume (“Alternative Access Standards Tables”).

Alternative Access Standards Requests, Approvals, and Denials

For this summary of results, HSAG first tabulated the number of requests, approvals, and denials for all plans combined, and then tabulated them separately for the plans comprising the regional model and the plans not affiliated with the regional model. Approvals included AAS requests for which the DHCS determination was “Approval,” and denials included requests for which the determination was “Denial.”

During the measurement period, DMC-ODS plans submitted 429 AAS requests to DHCS. Of these, DHCS approved 46 (10.7 percent) and denied 383 (89.3 percent). On behalf of the seven DMC-ODS regional model plans (Humboldt, Lassen, Mendocino, Modoc, Shasta, Siskiyou, and Solano), 346 requests were submitted by Partnership, of which DHCS approved 17 (4.9 percent), and denied 329 (95.1 percent).⁶ For the 31 plans not affiliated with the regional model, 83 requests were submitted by four plans (Mariposa, Merced, Sacramento, and Tulare), of which DHCS approved 29 (34.9 percent) and denied 54 (65.1 percent).

Notably, most of the requests submitted (80.9 percent) were related to services for children/youth. The majority of requests concerned opioid treatment services (73.4 percent), and the remainder concerned outpatient services (26.6 percent).

A complete tabulation of requests submitted, including approval and denial status, are presented in Section 5 of this volume (“Alternative Access Standards Tables”).

Reasons for the Approval or Denial of Alternative Access Standards Requests

DHCS typically requires, as part of the process of developing an AAS request, that DMC-ODS plans identify the name and location of the nearest in-network provider outside the

⁶ While ZIP Codes were provided for the areas served by the regional model plans that were impacted by network deficiencies, county names were not provided.

time/distance standard, as well as the names and locations of the two nearest out-of-network providers.⁷ DMC-ODS plans are also typically required to demonstrate that they have attempted to contract with the identified out-of-network providers if they are closer to affected members than the identified in-network provider. (See additional information under the Contracting Efforts heading in this section of the volume.) DHCS approvals and denials relate to the appropriateness and completeness of AAS requests, the DMC-ODS plans' selection of providers, and the DMC-ODS plans' documented contracting efforts. According to SFY 2024–25 data and information provided by DHCS, the most common reasons for approval or denial of an AAS request include the following:

- ◆ **Approval reasons** (more than one may apply to a single request). The plan:
 - Demonstrated that it was contracted with a provider that resolved the identified network deficiency.
 - Showed that while a network deficiency continued to exist, the plan was contracted with the closest provider.
 - Provided evidence that it had exhausted all in-network and out-of-network options that would have brought the plan into compliance with DHCS standards prior to proposing a new standard.
 - Proposed new time and distance standards that are reasonable for a member to travel.
 - Identified first and second out-of-network providers and agreed to enter into a single case agreement (SCA) with an out-of-network provider.
 - Agreed to coordinate transportation for members requesting in-person appointments.
 - Provided sufficient justification on its inability to contract with out-of-network providers.
 - Documented that an existing opioid treatment services provider contract for adult services also included provisions for serving youth (when the network deficiency is for youth providers).

- ◆ **Denial reasons** (more than one may apply to a single request). The plan did not:
 - Provide sufficient evidence or sufficient details demonstrating why the plan could not meet standards with its current network.
 - Include detailed information in the list of contracted providers regarding the nearest in-network provider named in the plan's AAS request.
 - Submit a complete list of contracted providers including all service modalities provided and age groups served.

⁷ See instructions in BHIN 24-020, Attachment C. Available on request from DHCS; see [2024 Behavioral Health Information Notices](#). Accessed on: Jan 14, 2026. Additionally, DHCS recognizes certain circumstances where it is unnecessary for a DMC-ODS plan to identify in-network and/or out-of-network providers in an AAS request. For example, if a plan does not have any in-network providers, it can indicate this when submitting AAS requests. Similarly, if a plan has multiple in-network providers that are closer in time or distance than any available out-of-network providers, the plan is not required to report out-of-network providers.

- Ensure that each in-network provider included in an AAS request was among the providers in the plan's provider list delivering the service modalities and/or serving the age group required for the AAS request.
- Include the name of or other information on a provider the plan proposed to contract with or enter into an SCA with as an AAS.
- Provide information or sufficient details on what the plan would do when an impacted member presented with a need for services.
- Identify two out-of-network providers or propose new time and distance standards.
- Propose time and distance standards that are reasonable for member travel.
- Provide information on coordination of transportation for in-person service requests.

Distance and Driving Time Between Nearest In-Network Provider and Farthest Member

When a DMC-ODS plan submits an AAS request, it is required to report the distance and drive time between the nearest in-network provider and the member farthest from that provider within the impacted service area (ZIP Code).⁸ The distance and drive time are indicators of the hardship faced by impacted members if the network deficiency is not addressed. In addition, DHCS computes the number of members impacted by the network deficiency. For this section, HSAG summarized the reported distances, drive times, and number of members impacted in submitted AAS requests by computing the shortest and longest driving time and distance and the smallest and largest number of impacted members across all requests.

Across all requests, the shortest driving distance was 2.2 miles, which was reported in two different AAS requests submitted by a regional model plan for ZIP Code 96087. The shortest driving time was two minutes for the same requests. The longest driving distance was 315 miles for ZIP Code 95318 in Mariposa County, and the longest driving time was 322 minutes for the same ZIP Code in Mariposa County.

ZIP Code 93623 in Mariposa County and ZIP Codes 93262 and 93641 in Tulare County were tied for the smallest number of members impacted. The largest number of impacted members was 21,303 members, for ZIP Code 93257 in Tulare County.

Missing data on driving time, driving distance, and the number of impacted members was prevalent. Of the 429 AAS requests submitted, 192 (44.8 percent) of those requests did not have information on driving time, 192 (44.8 percent) did not have information on driving distance, and 329 (76.7 percent) did not have information on the number of impacted members.

⁸ This is operationalized in the instructions for BHIN 24-020, Attachment C, as the driving distance or time "between the identified nearest in-network provider and the ZIP Code border."

The next two paragraphs highlight minimum and maximum results for regional model plans and plans not affiliated with the regional model where they differ from the results presented above, respectively.

For regional model plans, the longest driving distance and driving time were 145.2 miles and 132 minutes for ZIP Code 96109. ZIP Code 94512 had the smallest number of impacted members, while ZIP Code 94533 had the largest number of impacted members (12,089). Of the 346 AAS regional model requests submitted, 166 requests (48.0 percent) did not have information on driving time or distance, and 329 requests (95.1 percent) did not have information on the number of impacted members.

Among plans not affiliated with the regional model, the shortest driving distance and driving time were six miles and 10 minutes, respectively, for Tulare County and ZIP Code 93215. For the 83 AAS requests submitted, 26 requests (31.3 percent) did not have information on driving time or distance, but all requests included the number of members impacted. The ZIP Codes with the smallest and largest numbers of members impacted are the same as those described above for all DMC-ODS plans.

A complete tabulation of AAS requests submitted, including driving distance, driving time, and number of impacted members, is presented in Section 5 of this volume (“Alternative Access Standards Tables”).

Time Frame for Approval or Denial of Requests

In accordance with CA WIC §14197(f)(4), DHCS must approve or deny an AAS request within 90 days of submission. DHCS may stop the 90-day review time frame as needed if an incomplete DMC-ODS plan submission is received or if additional information is needed from the DMC-ODS plan. Upon submission of the additional information to DHCS, the 90-day time frame would resume at the same point in time it was previously stopped, unless fewer than 30 days remain. In these instances, DHCS must approve or deny the AAS request within 30 days of submission of the additional information.

For each request, HSAG calculated the number of days between the date the DMC-ODS plan submitted the AAS request and the date DHCS made the decision to approve or deny the request. Please note that days when DHCS paused its review awaiting further information from the plan are not excluded from this count, so the number of days can exceed 90 without indicating that DHCS failed to meet the 90-day standard. After calculating the number of days to approve or deny each request, HSAG calculated the median number of days to approve or deny for each DMC-ODS plan, the median across DMC-ODS plans (i.e., the median of the DMC-ODS plan medians), and the range of medians across DMC-ODS plans.

For requests submitted in SFY 2024–25, the median number of days to approval or denial across DMC-ODS plans was 68 days. The shortest median number of days to a decision was 41 days for the regional model plans. The longest median number of days to a decision was 106 days for Tulare.

Detailed results for the analysis of the time between an AAS request and approval or denial are presented in Section 5 of this volume (“Alternative Access Standards Tables”).

Consumer Complaints

In this report volume, the terms “consumer complaints” and “member grievances” are used interchangeably. DHCS provided HSAG with quarterly counts of grievances related to access to provider and plan services for SFY 2024–25. DMC-ODS plans are required to collect complaints expressed by members either orally or in writing and submit them to DHCS along with information on how the grievances were addressed.

In total, 67 complaints were received across four quarters by DMC-ODS plans and reported to DHCS. Among the 18 DMC-ODS plans that received any complaints, the Humboldt, Los Angeles, Merced, Nevada, Santa Barbara, Solano, Stanislaus, and Tulare plans received the fewest, while the Kern and Orange plans received the most. Note that some of the DMC-ODS plans that received complaints operate as part of the regional model—all regional model plans report their grievances to DHCS independently.

Complete counts of consumer complaints by DMC-ODS plan and quarter are presented in Section 5 of this volume (“Alternative Access Standards Tables”).

Process of Ensuring Out-of-Network Access

DMC-ODS plans must facilitate access to adequate and timely out-of-network care if their network is unable to provide medically necessary covered services with a contracted provider.^{9,10} If the nearest out-of-network provider is not within time or distance standards, DMC-ODS plans may provide the option of telehealth services. If those are unavailable or the member declines the telehealth option, plans must ensure that transportation is available for access to out-of-network providers. Additionally, DMC-ODS plans must provide for the completion of covered services by a terminated or out-of-network provider at the request of a member in accordance with the transition of care requirements in the California Health and Safety Code §1373.96. Furthermore, DMC-ODS plans that fail to meet time or distance standards must ensure subcontractors and delegated entities adhere to the out-of-network access requirements, submit a policy or procedure to ensure there is a consistent process for

⁹ California Department of Health Care Services. BHIN 24-020. Available at: [BHIN 2024 Network Certification Requirements for County Mental Health Plans and Drug Medi-Cal Organized Delivery Systems](#). Accessed on: Jan 14, 2026.

¹⁰ California Department of Health Care Services. MHSUDS 19-024. Available at: [Federal Out of Network Requirements for Drug Medi-Cal Organized Delivery System \(DMC-ODS\) Pilot Counties](#). Accessed on: Jan 14, 2026.

out-of-network access compliance, and demonstrate their ability to effectively provide information about out-of-network access to members.

Contracting Efforts

Except when the nearest in-network provider is closer to members than any identified out-of-network providers, DMC-ODS plans submitting AAS requests are required to document their attempts to contract with the two closest out-of-network providers and, when the efforts are unsuccessful, to provide a justification for not contracting. HSAG reviewed data supplied by the DMC-ODS plans on their contracting efforts for SFY 2024–25, and the available information was often very general, not relating to specific providers with which the plans attempted to contract.¹¹ The following bullet points summarize the information provided by the plans required to submit AAS requests:

- ◆ Mariposa, Merced, and Sacramento did not provide information about contracting efforts or justifications for failing to contract with the first two out-of-network providers.
- ◆ Tulare indicated that it had been contracted with a provider in another county, and while the provider terminated the contract, the provider indicated willingness to continue serving members via SCAs when needed.
- ◆ Partnership did not detail contracting efforts, but it indicated that at least one provider terminated its contract with the regional model plans “due to low census.” It also provided the following justifications for not having contracted with new providers where network deficiencies were identified by DHCS:
 - Opioid treatment service providers were reluctant to contract to deliver services to children/youth due to “challenges with federal laws related to dosing of OTP [Opioid Treatment Program] medications” for persons under the age of 18 years.
 - There is a “lack of providers within the region,” making contracting difficult.
 - “Capacity needs have not required additional contract[s] to support needs within the community.”

¹¹ DHCS indicated that it should be able to make additional information about plan contracting efforts available in the future. HSAG will work with DHCS to obtain this information for 2025–26.

4. Conclusions and Considerations

Conclusions

Only a minority of plans were required to submit AAS requests for SFY 2024–25 due to provider network deficiencies identified by DHCS’ time and distance analyses. This includes the seven plans that collaborate as a regional model (Humboldt, Lassen, Mendocino, Modoc, Shasta, Siskiyou, and Solano) and four plans not affiliated with the regional model (Mariposa, Merced, Sacramento, and Tulare). Findings from the plan requests and DHCS determinations for the submitted requests include the following:

- ◆ A total of 429 AAS requests were submitted by DMC-ODS plans for SFY 2024–25, with 83 requests from plans not affiliated with the regional model and 346 requests from regional model plans.
- ◆ Notably, most of the requests submitted (80.9 percent) were related to services for children/youth. The majority of requests concerned opioid treatment services (73.4 percent), while the remainder concerned outpatient services (26.6 percent).
- ◆ Of the 429 requests, 383 were denied, and 329 of the denied requests were for regional model plans.
- ◆ The reasons provided by DHCS for denials frequently pointed to the failure of plans to provide required information in their requests (Attachment C) or the failure of plans to provide complete information about their contracted providers in their contracted providers list (the NACT).
- ◆ Missing information on driving distance, driving time, and the number of impacted members was prevalent. Information on driving time was missing from 44.8 percent of requests, 44.8 percent of requests did not have information on driving distance, and 76.7 percent of requests did not have information on the number of impacted members.
- ◆ Details were scarce regarding the efforts of plans with network deficiencies to address the deficiencies through contracting with out-of-network providers. Partnership, representing the regional model plans, reported difficulties contracting with providers willing to deliver opioid treatment services to children/youth due to complex regulations, indicating that, more generally, providers were scarce within the areas the regional models serve. Partnership also suggested that affiliated plans did not need additional contracted providers.
- ◆ The median number of days across DMC-ODS plans (i.e., the median of the DMC-ODS plan medians) between the submission of an AAS request and DHCS’ delivery of an approval or denial was 68 days. Note that in accordance with CA WIC §14197(f)(4), DHCS must approve or deny an AAS request within 90 days of submission.
- ◆ All DMC-ODS plans were required to report a count of member grievances concerning access-related issues. DMC-ODS plans received 67 complaints in total.

Considerations

HSAG identified the following considerations for DHCS that may improve access to care and AAS reporting:

- ◆ A large percentage of requests were missing important pieces of information that are required by CA WIC §14197.05 for AAS reporting and are required by DHCS in its instructions to DMC-ODS plans. For example, BHIN 24-020 indicates that “[A] BHP [behavioral health plan] must provide the nearest in-network provider as well as the driving time or distance to that provider from the furthest [*sic*] members’ location in each ZIP Code.” The large number of denials issued by DHCS for SFY 2024–25 citing missing information indicates that DHCS takes this issue seriously. However, there may be contingencies specific to the types of services covered by DMC-ODS plans that were not anticipated by State law, such as a DMC-ODS plan not having a nearest in-network provider because it has not succeeded in securing a particular type of provider service for any of the areas it serves, or a plan being able to secure services for individual members through SCAs but not being able to negotiate a general contractual agreement. HSAG suggests the following:
 - DHCS indicated to HSAG that the number of members impacted was not calculated for a large number of rural Partnership requests due to the special data processing arrangements used for corrective action plan (CAP) resubmissions. DHCS should consider investigating whether procedures could be changed to include computation of this reporting element, potentially increasing the completeness of AAS reporting in 2025–26.
 - DHCS should consider revising its AAS data request collection tool (Attachment C) to explicitly accommodate contingencies not anticipated in State law. For example, if DHCS prefers that plans use “N/A” to indicate that the plan does not have any in-network providers of a particular type, this preference can be made explicit in the instructions for the AAS data request collection tool. This could ease confusion among the DMC-ODS plans submitting information and facilitate accurate reporting.
- ◆ The reporting elements listed in CA WIC §14197.05 indicate that AAS data must be provided by ZIP Code, but they do not indicate that the data must also include the county. However, CA WIC §14197.05(a)¹² requires the EQRO to report the data by county, which in turn requires that DHCS provide the data by county for EQRO reporting. For DMC-ODS plans not affiliated with the regional model, this is not an issue because they all serve individual counties; however, it is an issue for the regional model, where submitted AAS requests are associated with a ZIP Code but not a county. Because ZIP Codes occasionally cross county boundaries, a ZIP Code-to-county crosswalk is not sufficient. HSAG recommends that Attachment C be revised to include the county for each request.

¹² California WIC §14197.05(a). Available at: https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=WIC§ionNum=14197.05. Accessed on: Jan 14, 2026.

- ◆ DHCS agreed that HSAG would not include Reporting Element 5 (the percentage of providers in the plan service area that are under a contract with a Medi-Cal DMC-ODS plan) in the 2024–25 EQR technical report volume because it requires a count of all providers practicing in each plan service area, and DHCS and HSAG are not currently aware of a suitable source for that information. HSAG suggests that DHCS investigate whether any other State departments or internal DHCS units have access to relevant data.

5. Alternative Access Standards Tables

The tables in this section present key reporting elements defined in CA WIC §14197.05 regarding AAS requests for provider networks.

Table 5.1 and Table 5.2—Reporting Elements 1, 3, 4, and 6 (Plans Not Affiliated with the Regional Model)

Table 5.1 and Table 5.2 present all submitted AAS requests for the age group served (adults or children/youth, respectively) for plans not affiliated with the regional model by plan/county, ZIP Code, and service modality. Table 5.1 is limited to AAS requests for providers serving adults. For each request, the table includes the distance in miles and drive time in minutes between the nearest in-network provider and the member farthest from that provider within the specified ZIP Code, as well as the estimated number of members impacted by the network deficiency and the request’s approval status. Table 5.2 has the same structure as Table 5.1 but is limited to requests for providers serving children/youth. Requests were submitted to DHCS during the measurement period of August 1, 2024, through June 30, 2025.

Note the following regarding Table 5.1 and Table 5.2:

- ◆ Adults are persons 18 years of age and older. Children/youth are persons 0–17 years of age.
- ◆ Final dispositions listed as “Approval” in the DHCS data are reported as “Approved”; and final dispositions listed as “Denial” in the DHCS data are reported as “Denied.”
- ◆ S = HSAG suppressed the Number of Members Impacted to satisfy the DHCS Data De-identification Guidelines (DDG) v3.0 de-identification standard.¹³
- ◆ N/A = Not applicable because the DMC-ODS plan had no in-network providers.

¹³ Please see the following regarding DHCS statistical disclosure control procedures: California Department of Health Care Services. November 13, 2025. Available at: [DHCS Data De-identification Guidelines \(DDG\)](#). Accessed on: Mar 16, 2026.

Table 5.1—Driving Distance, Driving Time, Number of Members Impacted, and Final Disposition for Adult Services in Alternative Access Standards Requests by DMC-ODS Plan, ZIP Code, and Service Modality—Plans Not Affiliated with the Regional Model

Plan/County	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Mariposa	95311	Opioid Treatment Services	45	56	S	Approved
Mariposa	95318	Opioid Treatment Services	67	88	S	Approved
Mariposa	95389	Opioid Treatment Services	85	112	137	Approved

Table 5.2—Driving Distance, Driving Time, Number of Members Impacted, and Final Disposition for Children/Youth Services in Alternative Access Standards Requests by DMC-ODS Plan, ZIP Code, and Service Modality—Plans Not Affiliated with the Regional Model

Plan/County	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Mariposa	93601	Opioid Treatment Services	260	259	S	Denied
Mariposa	93623	Opioid Treatment Services	267	274	S	Denied
Mariposa	93653	Opioid Treatment Services	256	257	S	Denied
Mariposa	95306	Opioid Treatment Services	274	265	107	Denied
Mariposa	95311	Opioid Treatment Services	304	308	208	Denied
Mariposa	95318	Opioid Treatment Services	315	322	22	Denied
Mariposa	95325	Opioid Treatment Services	286	281	S	Denied

Plan/County	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Mariposa	95329	Opioid Treatment Services	293	290	142	Denied
Mariposa	95338	Opioid Treatment Services	286	281	1,204	Denied
Mariposa	95345	Opioid Treatment Services	293	288	84	Denied
Mariposa	95389	Opioid Treatment Services	275	286	S	Denied
Merced	93610	Opioid Treatment Services	N/A	N/A	23	Approved
Merced	93620	Opioid Treatment Services	N/A	N/A	2,344	Approved
Merced	93622	Opioid Treatment Services	N/A	N/A	S	Approved
Merced	93635	Opioid Treatment Services	N/A	N/A	10,467	Approved
Merced	93665	Opioid Treatment Services	N/A	N/A	13	Approved
Merced	95301	Opioid Treatment Services	N/A	N/A	7,910	Approved
Merced	95303	Opioid Treatment Services	N/A	N/A	134	Approved
Merced	95312	Opioid Treatment Services	N/A	N/A	61	Approved
Merced	95315	Opioid Treatment Services	N/A	N/A	2,670	Approved
Merced	95316	Opioid Treatment Services	N/A	N/A	S	Approved
Merced	95317	Opioid Treatment Services	N/A	N/A	158	Approved
Merced	95322	Opioid Treatment Services	N/A	N/A	1,988	Approved

Plan/County	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Merced	95324	Opioid Treatment Services	N/A	N/A	745	Approved
Merced	95333	Opioid Treatment Services	N/A	N/A	549	Approved
Merced	95334	Opioid Treatment Services	N/A	N/A	3,307	Approved
Merced	95340	Opioid Treatment Services	N/A	N/A	8,866	Approved
Merced	95341	Opioid Treatment Services	N/A	N/A	8,970	Approved
Merced	95348	Opioid Treatment Services	N/A	N/A	7,419	Approved
Merced	95360	Opioid Treatment Services	N/A	N/A	24	Approved
Merced	95365	Opioid Treatment Services	N/A	N/A	1,308	Approved
Merced	95369	Opioid Treatment Services	N/A	N/A	129	Approved
Merced	95374	Opioid Treatment Services	N/A	N/A	421	Approved
Merced	95380	Opioid Treatment Services	N/A	N/A	138	Approved
Merced	95388	Opioid Treatment Services	N/A	N/A	3,664	Approved
Sacramento	95630	Opioid Treatment Services	N/A	N/A	3,386	Approved
Sacramento	95683	Opioid Treatment Services	N/A	N/A	173	Approved
Tulare	93201	Opioid Treatment Services	21	28	27	Denied
Tulare	93207	Opioid Treatment Services	58	92	22	Denied

Plan/County	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Tulare	93208	Opioid Treatment Services	65	98	S	Denied
Tulare	93212	Opioid Treatment Services	32	38	28	Denied
Tulare	93215	Opioid Treatment Services	6	10	83	Denied
Tulare	93218	Opioid Treatment Services	16	23	364	Denied
Tulare	93219	Opioid Treatment Services	14	22	4,251	Denied
Tulare	93221	Opioid Treatment Services	63	93	2,698	Denied
Tulare	93223	Opioid Treatment Services	44	51	3,083	Denied
Tulare	93227	Opioid Treatment Services	42	40	141	Denied
Tulare	93230	Opioid Treatment Services	47	56	S	Denied
Tulare	93235	Opioid Treatment Services	56	58	1,367	Denied
Tulare	93237	Opioid Treatment Services	78	82	S	Denied
Tulare	93244	Opioid Treatment Services	70	72	63	Denied
Tulare	93247	Opioid Treatment Services	38	47	5,467	Denied
Tulare	93256	Opioid Treatment Services	16	19	1,943	Denied
Tulare	93257	Opioid Treatment Services	29	40	21,303	Denied
Tulare	93258	Opioid Treatment Services	30	41	533	Denied

Plan/County	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Tulare	93260	Opioid Treatment Services	52	91	S	Denied
Tulare	93261	Opioid Treatment Services	10	15	22	Denied
Tulare	93262	Opioid Treatment Services	80	113	S	Denied
Tulare	93265	Opioid Treatment Services	56	80	396	Denied
Tulare	93267	Opioid Treatment Services	32	39	1,853	Denied
Tulare	93270	Opioid Treatment Services	21	27	1,485	Denied
Tulare	93271	Opioid Treatment Services	94	132	87	Denied
Tulare	93272	Opioid Treatment Services	25	27	1,067	Denied
Tulare	93274	Opioid Treatment Services	33	37	18,087	Denied
Tulare	93277	Opioid Treatment Services	39	39	8,703	Denied
Tulare	93286	Opioid Treatment Services	53	65	2,589	Denied
Tulare	93291	Opioid Treatment Services	41	48	12,268	Denied
Tulare	93292	Opioid Treatment Services	49	50	7,963	Denied
Tulare	93603	Opioid Treatment Services	61	91	24	Denied
Tulare	93615	Opioid Treatment Services	43	52	1,851	Denied
Tulare	93618	Opioid Treatment Services	35	48	8,454	Denied

Plan/County	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Tulare	93631	Opioid Treatment Services	29	38	237	Denied
Tulare	93633	Opioid Treatment Services	85	126	S	Denied
Tulare	93641	Opioid Treatment Services	48	65	S	Denied
Tulare	93646	Opioid Treatment Services	34	40	50	Denied
Tulare	93647	Opioid Treatment Services	50	61	3,229	Denied
Tulare	93654	Opioid Treatment Services	28	34	56	Denied
Tulare	93666	Opioid Treatment Services	38	48	S	Denied
Tulare	93670	Opioid Treatment Services	42	53	57	Denied
Tulare	93673	Opioid Treatment Services	31	38	270	Denied

Table 5.3 and Table 5.4—Reporting Elements 1, 3, 4, and 6 (Regional Model)

Table 5.3 and Table 5.4 present all submitted AAS requests for the age group served (adults or children/youth, respectively) for regional model plans by ZIP Code and service modality. Table 5.3 is limited to AAS requests for providers serving adults. For each request, the table includes the distance in miles and drive time in minutes between the nearest in-network provider and the member farthest from that provider within the specified ZIP Code, as well as the estimated number of members impacted by the network deficiency and the request's approval status. Table 5.4 has the same structure but is limited to requests for providers serving children/youth. Requests were submitted to DHCS during the measurement period August 1, 2024, through June 30, 2025.

Note the following regarding Table 5.3 and Table 5.4:

- ◆ Adults are persons 18 years of age and older. Children/youth are persons 0–17 years of age.
- ◆ Final dispositions listed as “Approval” in the DHCS data are reported as “Approved”; and final dispositions listed as “Denial” in the DHCS data are reported as “Denied.”
- ◆ S = HSAG suppressed the Number of Members Impacted to satisfy the DHCS DDG v3.0 de-identification standard.¹⁴
- ◆ N/A = not applicable because the DMC-ODS plan had no in-network providers.
- ◆ NR = not reported because the Number of Members Impacted was not computed for these requests.

Table 5.3—Driving Distance, Driving Time, Number of Members Impacted, and Final Disposition for Adult Services in Alternative Access Standards Requests by DMC-ODS Plan, ZIP Code, and Service Modality—Regional Model

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	95428	Opioid Treatment Services	46.2	42	NR	Denied
Partnership (Rural)	95437	Opioid Treatment Services	37.4	34	NR	Denied

¹⁴ Please see the following regarding DHCS statistical disclosure control procedures: California Department of Health Care Services. November 13, 2025. Available at: [DHCS Data De-Identification Guidelines \(DDG\)](#). Accessed on: Mar 16, 2026.

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	95460	Opioid Treatment Services	30.8	28	NR	Denied
Partnership (Rural)	95488	Opioid Treatment Services	50.6	46	NR	Denied
Partnership (Rural)	95511	Opioid Treatment Services	56.1	51	NR	Denied
Partnership (Rural)	95514	Opioid Treatment Services	48.4	44	NR	Denied
Partnership (Rural)	95519	Opioid Treatment Services	14.3	13	NR	Denied
Partnership (Rural)	95521	Opioid Treatment Services	8.8	8	NR	Denied
Partnership (Rural)	95542	Opioid Treatment Services	58.3	53	NR	Denied
Partnership (Rural)	95545	Opioid Treatment Services	37.4	34	NR	Denied
Partnership (Rural)	95546	Opioid Treatment Services	39.6	36	NR	Denied
Partnership (Rural)	95551	Opioid Treatment Services	11.0	10	NR	Denied
Partnership (Rural)	95554	Opioid Treatment Services	42.9	39	NR	Denied
Partnership (Rural)	95555	Opioid Treatment Services	44.0	40	NR	Denied
Partnership (Rural)	95556	Opioid Treatment Services	49.5	45	NR	Denied
Partnership (Rural)	95558	Opioid Treatment Services	39.6	36	NR	Denied
Partnership (Rural)	95559	Opioid Treatment Services	52.8	48	NR	Denied
Partnership (Rural)	95568	Opioid Treatment Services	93.5	85	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	95585	Opioid Treatment Services	59.4	54	NR	Denied
Partnership (Rural)	95589	Opioid Treatment Services	61.6	56	NR	Denied
Partnership (Rural)	96001	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96002	Opioid Treatment Services	11.0	10	NR	Denied
Partnership (Rural)	96003	Opioid Treatment Services	11.0	10	NR	Denied
Partnership (Rural)	96007	Opioid Treatment Services	15.4	14	NR	Denied
Partnership (Rural)	96008	Opioid Treatment Services	23.1	21	NR	Denied
Partnership (Rural)	96011	Opioid Treatment Services	45.1	41	NR	Denied
Partnership (Rural)	96013	Opioid Treatment Services	51.7	47	NR	Denied
Partnership (Rural)	96014	Opioid Treatment Services	57.2	52	NR	Denied
Partnership (Rural)	96016	Opioid Treatment Services	59.4	54	NR	Denied
Partnership (Rural)	96017	Opioid Treatment Services	37.4	34	NR	Denied
Partnership (Rural)	96019	Opioid Treatment Services	6.6	6	NR	Denied
Partnership (Rural)	96022	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96023	Opioid Treatment Services	100.1	91	NR	Denied
Partnership (Rural)	96025	Opioid Treatment Services	46.2	42	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96027	Opioid Treatment Services	67.1	61	NR	Denied
Partnership (Rural)	96028	Opioid Treatment Services	64.9	59	NR	Denied
Partnership (Rural)	96031	Opioid Treatment Services	61.6	56	NR	Denied
Partnership (Rural)	96032	Opioid Treatment Services	79.2	72	NR	Denied
Partnership (Rural)	96033	Opioid Treatment Services	9.9	9	NR	Denied
Partnership (Rural)	96034	Opioid Treatment Services	63.8	58	NR	Denied
Partnership (Rural)	96037	Opioid Treatment Services	74.8	68	NR	Denied
Partnership (Rural)	96038	Opioid Treatment Services	73.7	67	NR	Denied
Partnership (Rural)	96039	Opioid Treatment Services	40.7	37	NR	Denied
Partnership (Rural)	96040	Opioid Treatment Services	61.6	56	NR	Denied
Partnership (Rural)	96044	Opioid Treatment Services	99.0	90	NR	Denied
Partnership (Rural)	96047	Opioid Treatment Services	19.8	18	NR	Denied
Partnership (Rural)	96050	Opioid Treatment Services	99.0	90	NR	Denied
Partnership (Rural)	96051	Opioid Treatment Services	25.3	23	NR	Denied
Partnership (Rural)	96056	Opioid Treatment Services	77.0	70	NR	Denied
Partnership (Rural)	96057	Opioid Treatment Services	57.2	52	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96058	Opioid Treatment Services	94.6	86	NR	Denied
Partnership (Rural)	96059	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96062	Opioid Treatment Services	22.0	20	NR	Denied
Partnership (Rural)	96064	Opioid Treatment Services	86.9	79	NR	Denied
Partnership (Rural)	96065	Opioid Treatment Services	36.3	33	NR	Denied
Partnership (Rural)	96067	Opioid Treatment Services	56.1	51	NR	Denied
Partnership (Rural)	96069	Opioid Treatment Services	29.7	27	NR	Denied
Partnership (Rural)	96071	Opioid Treatment Services	60.5	55	NR	Denied
Partnership (Rural)	96073	Opioid Treatment Services	15.4	14	NR	Denied
Partnership (Rural)	96076	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96084	Opioid Treatment Services	34.1	31	NR	Denied
Partnership (Rural)	96085	Opioid Treatment Services	92.4	84	NR	Denied
Partnership (Rural)	96086	Opioid Treatment Services	103.4	94	NR	Denied
Partnership (Rural)	96087	Opioid Treatment Services	2.2	2	NR	Denied
Partnership (Rural)	96088	Opioid Treatment Services	36.3	33	NR	Denied
Partnership (Rural)	96094	Opioid Treatment Services	62.7	57	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96096	Opioid Treatment Services	36.3	33	NR	Denied
Partnership (Rural)	96097	Opioid Treatment Services	86.9	79	NR	Denied
Partnership (Rural)	96105	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96109	Opioid Treatment Services	145.2	132	NR	Denied
Partnership (Rural)	96113	Opioid Treatment Services	133.1	121	NR	Denied
Partnership (Rural)	96114	Opioid Treatment Services	116.6	106	NR	Denied
Partnership (Rural)	96117	Opioid Treatment Services	133.1	121	NR	Denied
Partnership (Rural)	96121	Opioid Treatment Services	124.3	113	NR	Denied
Partnership (Rural)	96123	Opioid Treatment Services	133.1	121	NR	Denied
Partnership (Rural)	96128	Opioid Treatment Services	122.1	111	NR	Denied
Partnership (Rural)	96130	Opioid Treatment Services	103.4	94	NR	Denied
Partnership (Rural)	96136	Opioid Treatment Services	127.6	116	NR	Denied
Partnership (Rural)	96137	Opioid Treatment Services	84.7	77	NR	Denied

Table 5.4—Driving Distance, Driving Time, Number of Members Impacted, and Final Disposition for Children/Youth Services in Alternative Access Standards Requests by DMC-ODS Plan, ZIP Code, and Service Modality—Regional Model

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Medium)	94510	Opioid Treatment Services	N/A	N/A	1,151	Approved
Partnership (Medium)	94512	Opioid Treatment Services	N/A	N/A	S	Approved
Partnership (Medium)	94533	Opioid Treatment Services	N/A	N/A	12,089	Approved
Partnership (Medium)	94534	Opioid Treatment Services	N/A	N/A	2,202	Approved
Partnership (Medium)	94535	Opioid Treatment Services	N/A	N/A	64	Approved
Partnership (Medium)	94571	Opioid Treatment Services	N/A	N/A	542	Approved
Partnership (Medium)	94585	Opioid Treatment Services	N/A	N/A	3,386	Approved
Partnership (Medium)	94589	Opioid Treatment Services	N/A	N/A	4,489	Approved
Partnership (Medium)	94590	Opioid Treatment Services	N/A	N/A	5,972	Approved
Partnership (Medium)	94591	Opioid Treatment Services	N/A	N/A	5,128	Approved
Partnership (Medium)	94592	Opioid Treatment Services	N/A	N/A	27	Approved
Partnership (Medium)	95620	Opioid Treatment Services	N/A	N/A	2,353	Approved
Partnership (Medium)	95625	Opioid Treatment Services	N/A	N/A	S	Approved
Partnership (Medium)	95687	Opioid Treatment Services	N/A	N/A	5,260	Approved

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Medium)	95688	Opioid Treatment Services	N/A	N/A	3,541	Approved
Partnership (Medium)	95690	Opioid Treatment Services	N/A	N/A	25	Approved
Partnership (Medium)	95694	Opioid Treatment Services	N/A	N/A	66	Approved
Partnership (Rural)	95410	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95415	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95417	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95420	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95425	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95427	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95428	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95428	Outpatient Services	46.2	42	NR	Denied
Partnership (Rural)	95429	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95432	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95437	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95437	Outpatient Services	37.4	34	NR	Denied
Partnership (Rural)	95445	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	95449	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95454	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95456	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95459	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95460	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95460	Outpatient Services	30.8	28	NR	Denied
Partnership (Rural)	95463	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95466	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95468	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95469	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95470	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95482	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95488	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95488	Outpatient Services	50.6	46	NR	Denied
Partnership (Rural)	95490	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95494	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	95501	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95501	Outpatient Services	N/A	N/A	NR	Denied
Partnership (Rural)	95503	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95503	Outpatient Services	6.6	6	NR	Denied
Partnership (Rural)	95511	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95511	Outpatient Services	56.1	51	NR	Denied
Partnership (Rural)	95514	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95514	Outpatient Services	48.4	44	NR	Denied
Partnership (Rural)	95519	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95519	Outpatient Services	14.3	13	NR	Denied
Partnership (Rural)	95521	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95521	Outpatient Services	8.8	8	NR	Denied
Partnership (Rural)	95524	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95524	Outpatient Services	6.6	6	NR	Denied
Partnership (Rural)	95525	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95525	Outpatient Services	19.8	18	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	95526	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95526	Outpatient Services	42.9	39	NR	Denied
Partnership (Rural)	95528	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95528	Outpatient Services	27.5	25	NR	Denied
Partnership (Rural)	95536	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95536	Outpatient Services	24.2	22	NR	Denied
Partnership (Rural)	95537	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95537	Outpatient Services	6.6	6	NR	Denied
Partnership (Rural)	95540	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95540	Outpatient Services	16.5	15	NR	Denied
Partnership (Rural)	95542	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95542	Outpatient Services	58.3	53	NR	Denied
Partnership (Rural)	95546	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95546	Outpatient Services	39.6	36	NR	Denied
Partnership (Rural)	95547	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95547	Outpatient Services	19.8	18	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	95549	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95549	Outpatient Services	18.7	17	NR	Denied
Partnership (Rural)	95550	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95550	Outpatient Services	20.9	19	NR	Denied
Partnership (Rural)	95551	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95551	Outpatient Services	9.9	9	NR	Denied
Partnership (Rural)	95553	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95553	Outpatient Services	47.3	43	NR	Denied
Partnership (Rural)	95554	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95554	Outpatient Services	42.9	39	NR	Denied
Partnership (Rural)	95555	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95555	Outpatient Services	44.0	40	NR	Denied
Partnership (Rural)	95556	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95556	Outpatient Services	49.5	45	NR	Denied
Partnership (Rural)	95558	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95558	Outpatient Services	39.6	36	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	95559	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95559	Outpatient Services	51.7	47	NR	Denied
Partnership (Rural)	95560	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95560	Outpatient Services	53.9	49	NR	Denied
Partnership (Rural)	95562	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95562	Outpatient Services	24.2	22	NR	Denied
Partnership (Rural)	95564	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95564	Outpatient Services	3.3	3	NR	Denied
Partnership (Rural)	95565	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95565	Outpatient Services	27.5	25	NR	Denied
Partnership (Rural)	95568	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95568	Outpatient Services	51.7	47	NR	Denied
Partnership (Rural)	95569	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95569	Outpatient Services	38.5	35	NR	Denied
Partnership (Rural)	95570	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95570	Outpatient Services	26.4	24	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	95571	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95571	Outpatient Services	40.7	37	NR	Denied
Partnership (Rural)	95573	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95573	Outpatient Services	31.9	29	NR	Denied
Partnership (Rural)	95585	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95585	Outpatient Services	59.4	54	NR	Denied
Partnership (Rural)	95587	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95589	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	95589	Outpatient Services	61.6	56	NR	Denied
Partnership (Rural)	96001	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96001	Outpatient Services	N/A	N/A	NR	Denied
Partnership (Rural)	96002	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96002	Outpatient Services	11.0	10	NR	Denied
Partnership (Rural)	96003	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96003	Outpatient Services	11.0	10	NR	Denied
Partnership (Rural)	96006	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96006	Outpatient Services	35.2	32	NR	Denied
Partnership (Rural)	96007	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96007	Outpatient Services	15.4	14	NR	Denied
Partnership (Rural)	96008	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96008	Outpatient Services	23.1	21	NR	Denied
Partnership (Rural)	96009	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96009	Outpatient Services	44.0	40	NR	Denied
Partnership (Rural)	96011	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96011	Outpatient Services	45.1	41	NR	Denied
Partnership (Rural)	96013	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96013	Outpatient Services	51.7	47	NR	Denied
Partnership (Rural)	96014	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96014	Outpatient Services	30.8	28	NR	Denied
Partnership (Rural)	96015	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96015	Outpatient Services	22.0	20	NR	Denied
Partnership (Rural)	96016	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96016	Outpatient Services	58.3	53	NR	Denied
Partnership (Rural)	96017	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96017	Outpatient Services	37.4	34	NR	Denied
Partnership (Rural)	96019	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96019	Outpatient Services	6.6	6	NR	Denied
Partnership (Rural)	96022	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96022	Outpatient Services	N/A	N/A	NR	Denied
Partnership (Rural)	96023	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96023	Outpatient Services	36.3	33	NR	Denied
Partnership (Rural)	96025	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96025	Outpatient Services	47.3	43	NR	Denied
Partnership (Rural)	96027	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96027	Outpatient Services	25.3	23	NR	Denied
Partnership (Rural)	96028	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96028	Outpatient Services	64.9	59	NR	Denied
Partnership (Rural)	96031	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96031	Outpatient Services	53.9	49	NR	Denied
Partnership (Rural)	96032	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96032	Outpatient Services	18.7	17	NR	Denied
Partnership (Rural)	96033	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96033	Outpatient Services	9.9	9	NR	Denied
Partnership (Rural)	96034	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96034	Outpatient Services	23.1	21	NR	Denied
Partnership (Rural)	96037	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96037	Outpatient Services	24.2	22	NR	Denied
Partnership (Rural)	96038	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96038	Outpatient Services	15.4	14	NR	Denied
Partnership (Rural)	96039	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96039	Outpatient Services	41.8	38	NR	Denied
Partnership (Rural)	96040	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96040	Outpatient Services	61.6	56	NR	Denied
Partnership (Rural)	96044	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96044	Outpatient Services	15.4	14	NR	Denied
Partnership (Rural)	96047	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96047	Outpatient Services	19.8	18	NR	Denied
Partnership (Rural)	96050	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96050	Outpatient Services	17.6	16	NR	Denied
Partnership (Rural)	96051	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96051	Outpatient Services	25.3	23	NR	Denied
Partnership (Rural)	96054	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96054	Outpatient Services	29.7	27	NR	Denied
Partnership (Rural)	96056	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96056	Outpatient Services	77.0	70	NR	Denied
Partnership (Rural)	96057	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96057	Outpatient Services	55.0	50	NR	Denied
Partnership (Rural)	96058	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96058	Outpatient Services	44.0	40	NR	Denied
Partnership (Rural)	96059	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96059	Outpatient Services	N/A	N/A	NR	Denied
Partnership (Rural)	96062	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96062	Outpatient Services	22.0	20	NR	Denied
Partnership (Rural)	96064	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96064	Outpatient Services	19.8	18	NR	Denied
Partnership (Rural)	96065	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96065	Outpatient Services	36.3	33	NR	Denied
Partnership (Rural)	96067	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96067	Outpatient Services	56.1	51	NR	Denied
Partnership (Rural)	96068	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96068	Outpatient Services	49.5	45	NR	Denied
Partnership (Rural)	96069	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96069	Outpatient Services	29.7	27	NR	Denied
Partnership (Rural)	96071	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96071	Outpatient Services	60.5	55	NR	Denied
Partnership (Rural)	96073	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96073	Outpatient Services	15.4	14	NR	Denied
Partnership (Rural)	96076	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96076	Outpatient Services	N/A	N/A	NR	Denied
Partnership (Rural)	96084	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96084	Outpatient Services	34.1	31	NR	Denied
Partnership (Rural)	96085	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96085	Outpatient Services	17.6	16	NR	Denied
Partnership (Rural)	96086	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96086	Outpatient Services	33.0	30	NR	Denied
Partnership (Rural)	96087	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96087	Outpatient Services	2.2	2	NR	Denied
Partnership (Rural)	96088	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96088	Outpatient Services	36.3	33	NR	Denied
Partnership (Rural)	96094	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96094	Outpatient Services	25.3	23	NR	Denied
Partnership (Rural)	96096	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96096	Outpatient Services	36.3	33	NR	Denied
Partnership (Rural)	96097	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96097	Outpatient Services	N/A	N/A	NR	Denied
Partnership (Rural)	96101	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96101	Outpatient Services	N/A	N/A	NR	Denied
Partnership (Rural)	96104	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96104	Outpatient Services	22.0	20	NR	Denied
Partnership (Rural)	96108	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96108	Outpatient Services	23.1	21	NR	Denied
Partnership (Rural)	96109	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96109	Outpatient Services	57.2	52	NR	Denied
Partnership (Rural)	96110	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96110	Outpatient Services	28.6	26	NR	Denied
Partnership (Rural)	96112	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96112	Outpatient Services	35.2	32	NR	Denied
Partnership (Rural)	96113	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96113	Outpatient Services	35.2	32	NR	Denied
Partnership (Rural)	96114	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96114	Outpatient Services	31.9	29	NR	Denied
Partnership (Rural)	96115	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96115	Outpatient Services	24.2	22	NR	Denied
Partnership (Rural)	96116	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96116	Outpatient Services	17.6	16	NR	Denied
Partnership (Rural)	96117	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96117	Outpatient Services	20.9	19	NR	Denied
Partnership (Rural)	96119	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96119	Outpatient Services	40.7	37	NR	Denied
Partnership (Rural)	96121	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96121	Outpatient Services	33.0	30	NR	Denied
Partnership (Rural)	96123	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96123	Outpatient Services	40.7	37	NR	Denied
Partnership (Rural)	96128	Opioid Treatment Services	N/A	N/A	NR	Denied

Plan (Urbanicity)	ZIP Code	Service Modality	Driving Distance (mi)	Driving Time (min)	Number of Members Impacted	Final Disposition (Approved or Denied)
Partnership (Rural)	96128	Outpatient Services	23.1	21	NR	Denied
Partnership (Rural)	96130	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96130	Outpatient Services	N/A	N/A	NR	Denied
Partnership (Rural)	96132	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96132	Outpatient Services	26.4	24	NR	Denied
Partnership (Rural)	96134	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96134	Outpatient Services	69.3	63	NR	Denied
Partnership (Rural)	96136	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96136	Outpatient Services	26.4	24	NR	Denied
Partnership (Rural)	96137	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	96137	Outpatient Services	31.9	29	NR	Denied
Partnership (Rural)	97635	Opioid Treatment Services	N/A	N/A	NR	Denied
Partnership (Rural)	97635	Outpatient Services	39.6	36	NR	Denied

Table 5.5—Reporting Element 9 (Plans Not Affiliated with the Regional Model)

Table 5.5 presents the number of AAS requests submitted and the median number of days between the submission of an AAS request and the delivery of an approval or denial by DHCS for each DMC-ODS plan not affiliated with the regional model that submitted AAS requests between August 1, 2024, and June 30, 2025.

In accordance with CA WIC §14197(e)(3), DHCS must approve or deny an AAS request within 90 days of the initial submission. DHCS may stop the 90-day review time frame on one or more occasions as necessary if an incomplete submission is received or if additional information is needed from the DMC-ODS plan. During this time, the 90-day review window is paused until DHCS receives the updated submission, and these days are not counted as a review day. Upon submission of the additional information to DHCS, the 90-day time frame would resume at the same point in time it was previously stopped, unless fewer than 30 days remain. In these instances, DHCS must approve or deny the AAS request within 30 days of submission of the additional information.

Note the following regarding Table 5.5:

- ◆ This table is limited to AAS requests from DMC-ODS plans not affiliated with the regional model.
- ◆ Days when DHCS paused its review awaiting further information from a plan are not excluded from this count, so the number of days can exceed 90 without indicating that DHCS failed to meet the 90-day standard.

Table 5.5—Time Frame for DHCS Approval or Denial of Alternative Access Standards Requests, by DMC-ODS Plan—Plans Not Affiliated with the Regional Model

Plan/County	Number of Requests	Median Days
Mariposa	14	77
Merced	24	75
Sacramento	2	47
Tulare	43	106

Table 5.6—Reporting Element 9 (Regional Model)

Table 5.6 presents the number of AAS requests submitted and the median number of days between the submission of an AAS request and the delivery of an approval or denial by DHCS for each DMC-ODS region of the regional model (medium or rural) for which AAS requests were submitted between August 1, 2024, and June 30, 2025.

In accordance with CA WIC §14197(e)(3), DHCS must approve or deny an AAS request within 90 days of the initial submission. DHCS may stop the 90-day review time frame on one or more occasions as necessary if an incomplete submission is received or if additional information is needed from the DMC-ODS plan. During this time, the 90-day review window is paused until DHCS receives the updated submission, and these days are not counted as a review day. Upon submission of the additional information to DHCS, the 90-day time frame would resume at the same point in time it was previously stopped, unless fewer than 30 days remain. In these instances, DHCS must approve or deny the AAS request within 30 days of submission of the additional information.

Note the following regarding Table 5.6:

- ◆ This table is limited to AAS requests from DMC-ODS plans affiliated with the regional model.
- ◆ Days when DHCS paused its review awaiting further information from a plan are not excluded from this count, so the number of days can exceed 90 without indicating that DHCS failed to meet the 90-day standard.

Table 5.6—Time Frame for DHCS Approval or Denial of Alternative Access Standards Requests, by DMC-ODS Plan—Regional Model

Plan (Urbanicity)	Number of Requests	Median Days
Partnership (Medium)	17	41
Partnership (Rural)	329	61

Table 5.7—Reporting Element 10—Grievances

Table 5.7 summarizes counts of consumer complaints related to access to providers that were collected in DHCS' quarterly grievance reports from SFY 2024 Quarter 3 through SFY 2025 Quarter 2 (i.e., January 1, 2024, through December 31, 2024). Each DMC-ODS plan is required to collect complaints from members and report them quarterly to DHCS using a standardized grievance reporting tool. Grievance collection methods may include but are not limited to telephone calls, logs, letters, emails, verbal/in person, or complaint forms.

Note the following regarding Table 5.7:

- ◆ The table includes grievances submitted by plans in the category “Access to care/services from plan or provider.”
- ◆ Plans denoted with an asterisk (*) operate as part of the regional model and subcontract with Partnership in this collaborative effort.
- ◆ A dash (—) indicates no grievances were reported by the plan.

Table 5.7—Consumer Complaints to DMC-ODS Plans Regarding Access to Care, by DMC-ODS Plan and County

DMC-ODS	County	Number of Complaints				Total
		Q3 2024	Q4 2024	Q1 2025	Q2 2025	
Alameda	Alameda	—	—	—	—	0
Contra Costa	Contra Costa	—	—	—	—	0
El Dorado	El Dorado	—	—	—	—	0
Fresno	Fresno	—	—	—	—	0
Imperial	Imperial	—	—	—	—	0
Kern	Kern	3	2	3	7	15
Los Angeles	Los Angeles	—	1	—	—	1
Marin	Marin	—	—	—	—	0
Mariposa	Mariposa	—	—	—	—	0
Merced	Merced	—	—	—	1	1
Monterey	Monterey	—	—	—	—	0
Napa	Napa	—	—	—	—	0
Nevada	Nevada	—	—	1	—	1
Orange	Orange	3	3	4	5	15
Humboldt*	Humboldt	—	—	—	1	1

DMC-ODS	County	Number of Complaints				Total
		Q3 2024	Q4 2024	Q1 2025	Q2 2025	
Lassen*	Lassen	—	—	—	—	0
Mendocino*	Mendocino	—	—	—	—	0
Modoc*	Modoc	—	—	—	—	0
Shasta*	Shasta	—	—	—	—	0
Siskiyou*	Siskiyou	—	—	—	—	0
Solano*	Solano	—	—	1	—	1
Placer	Placer/Sierra	—	—	—	—	0
Riverside	Riverside	—	—	1	2	3
Sacramento	Sacramento	—	1	1	2	4
San Benito	San Benito	—	—	—	—	0
San Bernardino	San Bernardino	—	2	—	—	2
San Diego	San Diego	1	1	—	2	4
San Francisco	San Francisco	—	1	2	—	3
San Joaquin	San Joaquin	—	—	—	—	0
San Luis Obispo	San Luis Obispo	—	—	—	—	0
San Mateo	San Mateo	1	—	4	1	6
Santa Barbara	Santa Barbara	—	—	1	—	1
Santa Clara	Santa Clara	—	—	1	4	5
Santa Cruz	Santa Cruz	—	—	—	—	0
Stanislaus	Stanislaus	—	—	—	1	1
Tulare	Tulare	—	—	—	1	1
Ventura	Ventura	—	—	—	—	0
Yolo	Yolo	—	1	—	1	2