



State of California—Health and Human Services Agency
Department of Health Care Services



2021 Annual Network Certification Approved Alternative Access Standards Report

**Drug Medi-Cal Organized Delivery System
(DMC-ODS)**

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1. Background and Overview

Welfare and Institutions Code (WIC) section 14197 requires the Department of Health Care Services (DHCS) to post on its website the requested Alternative Access Standards (AAS) it has approved for the certification year. The approved AAS are listed in the county-specific tables at the end of this report. Drug Medi-Cal Organized Delivery Systems (DMC-ODS) may submit AAS requests and/or DHCS may notify for instances where the DMC-ODS is unable to meet time or distance standards for the following provider types:

- Outpatient Services (Adult)
- Outpatient Services (Children/Youth)
- Opioid Treatment Program Services (Adult)
- Opioid Treatment Program Services (Children/Youth)

For DHCS to approve DMC-ODS AAS requests, the DMC-ODS must demonstrate that they have exhausted all reasonable options to meet the applicable standard. DHCS-approved AAS requests were valid for fiscal year July 1, 2021 through June 30, 2022. AAS requests must be resubmitted to DHCS for approval annually, or any time a network change results in the DMC-ODS no longer meeting time or distance standards.

DMC-ODS that receive AAS approval from DHCS must inform their affected beneficiaries of all approved AAS by posting approved AAS, specified by county, on the DMC-ODS internet website. Each DMC-ODS must post the approved AAS on its website no later than 30 days after DHCS publishes the statewide AAS approvals on the DHCS website.

Further, when any DMC-ODS county is unable to refer a beneficiary to a network provider for the appropriate level of care as determined by an American Society of Addiction Medicine (ASAM) assessment, it is the county's responsibility to make a referral to an Out-of-Network (OON) provider in a timely manner. With beneficiary consent, telehealth may be used to meet this requirement.

2. DHCS Review and Validation Process

DMC-ODSs must detail the name of the two nearest identified OON providers, the date the DMC-ODS contacted the providers to discuss contracting with the DMC-ODS, and the number of contracting attempts the DMC-ODS made. Through the AAS validation, DHCS will request evidence of contracting efforts, which must include supporting documentation demonstrating contract efforts via email/letter, scheduled phone calls, good faith negotiations, contract records, marketing materials and advertisements, and follow-up attempts after initial contract efforts or outreach. The evidence of contracting efforts must reflect contracting efforts conducted since the DMC-ODS's last annual Network Adequacy Certification submission. DHCS will focus on validating AAS requests that have potential contracting options. After DHCS approves the AAS request by zip code and provider type, Plans shall post the approved AAS to their website. The supporting documentation submitted must be dated

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prior to the AAS request in question taking effect.

DHCS approves or denies an AAS request based on an analysis of zip code and provider type.¹ The review process includes 1) verifying the AAS Request is submitted on time, 2) verifying if the AAS request is complete, and 3) verifying the DMC-ODS's efforts to identify the nearest in-network and OON providers. Additionally, DHCS compares the identified providers submitted by the DMC-ODS to the Network Adequacy Certification Tool (NACT) and to other resources.

DHCS reviews the AAS request and all supporting documentation to assess the facts and circumstances provided by the DMC-ODS. DMC-ODS must maintain documentation of their efforts to contract with nearest OON providers and must provide all documentation to DHCS upon request. DHCS may request additional evidence of contracting efforts if DHCS identifies more than two nearer OON providers during the review process.

The use of clinically appropriate telehealth may be considered in determining compliance with the applicable standards and/or for the purpose of approving an AAS request. However, DMC-ODS cannot require a beneficiary to access services via telehealth only. DMC-ODS must inform the beneficiary about options for accessing covered non-emergency medical transportation to an in-network provider within time or distance and timely access standards for medically necessary services, when an in-person visit is requested by a beneficiary.

On an annual basis and at DHCS' request, the DMC-ODS must demonstrate how it arranges for the delivery of services such as Medi-Cal covered transportation or telehealth, if beneficiaries needed services from a provider or facility located outside of the time or distance standards specified in WIC Section 14197(c).

3. Alternative Access Standards Results

Observations and Trends

DHCS may consider different factors when approving AAS requests. Due to the State's varied county population densities and geographical attributes, many AAS requests come from geographically remote regions, which lack specialists in both rural and urban counties within time or distance standards. Many DMC-ODS listed in this report resulted in an approved AAS specifically due to a lack of providers willing to serve Opioid Treatment Program services to the Youth (0-17) age group.

On-going Monitoring

For all approved AAS request, DHCS will monitor beneficiary access to the service type covered by the AAS request on an on-going basis and report DHCS' findings to Centers for Medicare & Medicaid Services (CMS).²

¹ WIC § 14197, subd. (e)(3) (2020).

² 42 C.F.R. section 438.66 (e) requires DHCS to submit a report to CMS annually on each managed care program the Department administers. 42 C.F.R. sections 438.68(d)(2) and 438.66(e)(2)(vi) require the Department to include the results of the monitoring in that report.

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If DHCS rejects a DMC-ODS's request for AAS, DHCS shall inform the DMC-ODS of the reason for rejecting the request. DHCS will post any approved AAS request on its website.³ After DHCS approves the AAS request by zip code and provider type, Plans shall post the approved AAS to their website.

The status of each DMC-ODS AAS by zip code are detailed in this report. The status of each county's AAS is current as of May 2022.

Questions regarding the contents of this report can be directed to:
NAOS@dhcs.ca.gov

³ WIC, § 14197, subd. (e)(3).

Alameda Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|--|
| Adult (18+) Opioid Treatment Services | 94551 | 60 | 90 | The basis for this approval is Alameda's terrain, proposed time or distance standards and Federally Qualified Health Center (FQHC) that will ensure that beneficiaries have accessibility to services. |
| | 94550 | 60 | 90 | |
| | 94539 | N/A | N/A | |
| | 94566 | N/A | N/A | |
| | 94568 | N/A | N/A | |
| | 95391 | 60 | 90 | |
| | 95377 | 60 | N/A | |
| | 94538 | N/A | N/A | |
| Youth (0-17) Opioid Treatment Services | 94551 | 60 | 90 | |
| | 94550 | 60 | 90 | |
| | 94539 | N/A | N/A | |
| | 94566 | N/A | N/A | |
| | 94568 | N/A | N/A | |
| | 95391 | 60 | 90 | |
| | 95377 | 60 | N/A | |

Contra Costa Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 94806 | 60 | N/A | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. The plan will utilize Harmonic Solutions as In-network contracted provider to be used as the youth NTP provider for zip codes that do not meet time or distance standards. The plan is prepared and will allocate funds for transportation costs to be reimbursed if the travel to the facility does not meet the time or distance standards. |
| | 94801 | 28.2 | 35 | |
| | 94804 | N/A | N/A | |
| | 94531 | N/A | N/A | |
| | 94513 | 27.3 | 35 | |
| | 94561 | 25.8 | 35 | |
| | 94509 | N/A | N/A | |
| | 94805 | 25.6 | N/A | |
| | 94530 | 6 | N/A | |
| | 94505 | 30.9 | 40 | |
| | 94803 | 17.9 | N/A | |
| | 94514 | 32 | 45 | |
| | 94564 | 21.9 | N/A | |
| | 94548 | 26.2 | 35 | |
| | 94707 | 18.6 | N/A | |
| | 94708 | N/A | N/A | |
| | 94511 | 29.7 | 40 | |
| 94517 | 14.2 | N/A | | |
| 94551 | 24.2 | 35 | | |
| 94549 | 5.6 | N/A | | |

El Dorado Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|--|
| Adult (18+) Opioid Treatment Services | 96150 | 65.4 | 82 | The basis for this approval is the remote geographical terrain and lack of closer providers. The Plan will provide transportation and/or telehealth services to beneficiaries when needed. |
| | 96142 | 100 | 89 | |
| | 95735 | 49.6 | 94 | |
| Youth (0-17) Opioid Treatment Services | 95634 | 59.6 | 125 | |
| | 95636 | 71.4 | 119 | |
| | 95667 | 50 | 81 | |
| | 95684 | 59.3 | 99 | |
| | 95721 | 107.6 | 89 | |
| | 95726 | 61 | 77 | |
| | 95735 | 49.6 | 94 | |
| | 96142 | 131.7 | 127 | |

Fresno Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Opioid Treatment Services | 93702 | N/A | N/A | The basis for this approval is Seasonal road closures and/or weather conditions, memorandum of understanding (MOU)'s with Managed Care Plan CalViva Health for referral to in-person MAT services, telehealth options, and use of Medi-Cal transportation benefit for eligible who request in person services. |
| | 93722 | N/A | N/A | |
| | 93706 | N/A | N/A | |
| | 93727 | N/A | N/A | |
| | 93703 | N/A | N/A | |
| | 93726 | N/A | N/A | |
| | 93705 | N/A | N/A | |
| | 93662 | N/A | N/A | |
| | 93654 | N/A | N/A | |
| | 93657 | N/A | N/A | |
| | 93725 | N/A | N/A | |
| | 93612 | N/A | N/A | |
| | 93704 | N/A | N/A | |
| | 93701 | N/A | N/A | |
| | 93630 | N/A | N/A | |
| | 93611 | N/A | N/A | |
| | 93728 | N/A | N/A | |
| | 93710 | N/A | N/A | |
| | 93648 | N/A | N/A | |
| | 93720 | N/A | N/A | |
| 93640 | N/A | N/A | | |
| 93646 | N/A | N/A | | |
| 93210 | 75 | N/A | | |
| 93711 | N/A | N/A | | |
| 93622 | N/A | N/A | | |

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|--|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Opioid Treatment Services | 93631 | N/A | N/A | The basis for this approval is Seasonal road closures and/or weather conditions, memorandum of understanding (MOU)'s with Managed Care Plan CalViva Health for referral to in-person MAT services, telehealth options, and use of Medi-Cal transportation benefit for eligible who request in person services. |
| | 93656 | N/A | N/A | |
| | 93609 | N/A | N/A | |
| | 93660 | N/A | N/A | |
| | 93625 | N/A | N/A | |
| | 93234 | 75 | N/A | |
| | 93619 | N/A | N/A | |
| | 93650 | N/A | N/A | |
| | 93723 | N/A | N/A | |
| | 93721 | N/A | N/A | |
| | 93242 | N/A | N/A | |
| | 93616 | N/A | N/A | |
| | 93675 | N/A | N/A | |
| | 93602 | N/A | N/A | |
| | 93668 | N/A | N/A | |
| | 93667 | N/A | N/A | |
| | 93608 | N/A | N/A | |
| | 93730 | N/A | N/A | |
| | 93652 | N/A | N/A | |
| | 93620 | N/A | N/A | |
| | 93651 | N/A | N/A | |
| 93621 | N/A | N/A | | |
| 93641 | N/A | N/A | | |
| 93626 | N/A | N/A | | |
| 93624 | N/A | N/A | | |
| 93618 | N/A | N/A | | |

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|--|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Opioid Treatment Services | 93627 | N/A | N/A | The basis for this approval is Seasonal road closures and/or weather conditions, memorandum of understanding (MOU)'s with Managed Care Plan CalViva Health for referral to in-person MAT services, telehealth options, and use of Medi-Cal transportation benefit for eligible who request in person services. |
| | 93628 | 75 | 100 | |
| | 93634 | 75 | 100 | |
| | 93664 | 75 | N/A | |
| | 93605 | 75 | 100 | |
| | 93606 | N/A | N/A | |

Kern Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 93560 | 90 | 60 | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. To assist the clients with obtaining these services, the plan will also provide transportation when needed. |
| | 93501 | | | |
| | 93523 | | | |

Los Angeles Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 90008 | 82 | 106 | The basis for this approval is Los Angeles DMC-ODS' recent contracting efforts to expand Youth Opioid Treatment Services. To assist the clients with obtaining these services, the plan will also provide transportation when needed. |
| | 90011 | | | |
| | 90016 | | | |
| | 90018 | | | |
| | 90034 | | | |
| | 90035 | | | |
| | 90037 | | | |
| | 90043 | | | |
| | 90044 | | | |
| | 90045 | | | |
| | 90047 | | | |
| | 90049 | | | |
| | 90056 | | | |
| | 90062 | | | |
| | 90064 | | | |
| | 90066 | | | |
| | 90094 | | | |
| | 90230 | | | |
| | 90232 | | | |
| | 90245 | | | |
| 90250 | | | | |
| 90254 | | | | |
| 90260 | | | | |
| 90265 | | | | |

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|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 90266 | 82 | 106 | The basis for this approval is Los Angeles DMC-ODS' recent contracting efforts to expand Youth Opioid Treatment Services. To assist the clients with obtaining these services, the plan will also provide transportation when needed. |
| | 90272 | | | |
| | 90274 | | | |
| | 90275 | | | |
| | 90277 | | | |
| | 90278 | | | |
| | 90290 | | | |
| | 90291 | | | |
| | 90292 | | | |
| | 90293 | | | |
| | 90301 | | | |
| | 90302 | | | |
| | 90303 | | | |
| | 90304 | | | |
| | 90305 | | | |
| | 90401 | | | |
| | 90402 | | | |
| | 90403 | | | |
| | 90404 | | | |
| | 90405 | | | |
| | 90501 | | | |
| 90503 | | | | |
| 90505 | | | | |
| 90704 | | | | |
| 90710 | | | | |
| 90717 | | | | |

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|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 90731 | 82 | 106 | The basis for this approval is Los Angeles DMC-ODS' recent contracting efforts to expand Youth Opioid Treatment Services. To assist the clients with obtaining these services, the plan will also provide transportation when needed. |
| | 90732 | | | |
| | 91006 | | | |
| | 91008 | | | |
| | 91010 | | | |
| | 91016 | | | |
| | 91301 | | | |
| | 91350 | | | |
| | 91354 | | | |
| | 91384 | | | |
| | 91387 | | | |
| | 91390 | | | |
| | 91702 | | | |
| | 91706 | | | |
| | 91711 | | | |
| | 91722 | | | |
| | 91723 | | | |
| | 91724 | | | |
| | 91740 | | | |
| | 91741 | | | |
| 91744 | | | | |
| 91748 | | | | |
| 91750 | | | | |
| 91765 | | | | |
| 91766 | | | | |
| 91767 | | | | |

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|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 91768 | 82 | 106 | The basis for this approval is Los Angeles DMC-ODS' recent contracting efforts to expand Youth Opioid Treatment Services. To assist the clients with obtaining these services, the plan will also provide transportation when needed. |
| | 91773 | | | |
| | 91789 | | | |
| | 91790 | | | |
| | 91791 | | | |
| | 91792 | | | |
| | 93243 | | | |
| | 93510 | | | |
| | 93532 | | | |
| | 93535 | | | |
| | 93536 | | | |
| | 93543 | | | |
| | 93544 | | | |
| | 93553 | | | |
| | 93563 | | | |
| 93591 | | | | |

Monterey Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 93905 | 45 | N/A | The basis for this approval is that Monterey DMC-ODS will use single case agreements, and provide transportation to youth beneficiaries who require methadone treatment if criteria is met. |
| | 93906 | 45 | | |
| | 93927 | 45 | | |
| | 93955 | 45 | | |
| | 93960 | 45 | | |
| | 93901 | 45 | | |
| | 93930 | 60 | | |
| | 93907 | 45 | | |
| | 95012 | 45 | | |
| | 95076 | 45 | | |
| | 93933 | 45 | | |
| | 93926 | 45 | | |
| | 93940 | 45 | | |
| | 93908 | 45 | | |
| | 93950 | 45 | | |
| | 93923 | 45 | | |
| | 93924 | 45 | | |
| | 95039 | 45 | | |
| | 95004 | 45 | | |
| | 93450 | 90 | | |
| 93426 | 90 | | | |

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|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 93953 | 45 | 60 | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. The Plan will provide transportation and/or telehealth services to beneficiaries when needed. |
| | 93932 | 60 | | |
| | 93920 | 60 | | |
| | 93925 | 60 | | |
| | 93451 | 100 | | |
| | 93954 | 60 | | |
| | 93921 | 45 | | |
| | 93962 | 45 | | |
| | 93943 | 45 | | |

Nevada Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 95945 | 59 | 60 | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. The Plan will provide transportation and/or telehealth services to beneficiaries when needed. |
| | 95959 | | | |
| | 95949 | | | |
| | 95946 | | | |
| | 96161 | | | |
| | 95602 | | | |
| | 95975 | | | |
| | 95977 | | | |
| | 95960 | | | |
| | 96111 | | | |
| | 95986 | | | |
| | 95728 | | | |

Riverside Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Opioid Treatment Services | 92201 | 65 | 70 | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. The plan will provide transportation to beneficiaries when needed. |
| | 92203 | 68 | 75 | |
| | 92210 | 64 | 70 | |
| | 92211 | 56 | 65 | |
| | 92225 | 168 | 150 | |
| | 92234 | 60 | 90 | |
| | 92236 | 68 | 70 | |
| | 92239 | 111 | 100 | |
| | 92241 | 55 | 65 | |
| | 92253 | 68 | 70 | |
| | 92254 | 84 | 90 | |
| | 92260 | 53 | 70 | |
| | 92264 | 48 | 65 | |
| | 92270 | 55 | 70 | |
| | 92274 | 78 | 75 | |
| | 92276 | 56 | 70 | |
| | 92282 | 60 | 90 | |
| | 92536 | 60 | 90 | |
| | 92539 | 60 | 90 | |
| 92561 | 60 | 90 | | |
| 92592 | 60 | 90 | | |

San Bernardino Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|---|
| Youth (0-17) Opioid Treatment Services | 92285 | 47 | N/A | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. The plan will use single case agreements, and provide transportation to youth beneficiaries who require methadone treatment if criteria is met. |
| | 92284 | N/A | N/A | |
| | 92397 | N/A | N/A | |
| | 92365 | 70.7 | 83 | |
| | 92339 | N/A | N/A | |
| | 92268 | 39.6 | N/A | |
| | 92256 | N/A | N/A | |
| | 92314 | N/A | N/A | |
| | 92338 | 93 | 99 | |
| | 92356 | N/A | N/A | |

San Diego Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Opioid Treatment Services | 91901 | 60 | 65 | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. The plan will provide transportation to beneficiaries when needed. |
| | 91902 | 50 | 60 | |
| | 91905 | 95 | 100 | |
| | 91906 | 85 | 90 | |
| | 91910 | 50 | 60 | |
| | 91911 | 55 | 60 | |
| | 91913 | 55 | 65 | |
| | 91914 | 60 | 65 | |
| | 91915 | 60 | 65 | |
| | 91916 | 75 | 75 | |
| | 91917 | 65 | 75 | |
| | 91931 | 75 | 80 | |
| | 91932 | 55 | 65 | |
| | 91934 | 100 | 100 | |
| | 91935 | 55 | 65 | |
| | 91941 | 45 | 60 | |
| | 91942 | 45 | 60 | |
| | 91945 | 45 | 60 | |
| | 91948 | 80 | 90 | |
| | 91950 | 45 | 60 | |
| 91962 | 75 | 80 | | |
| 91963 | 75 | 95 | | |
| 91977 | 50 | 60 | | |
| 91978 | 50 | 60 | | |
| 91980 | 75 | 90 | | |

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| Youth (0-17) Opioid Treatment Services | 92004 | 70 | 105 | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. The plan will provide transportation to beneficiaries when needed. |
| | 92009 | 30 | 60 | |
| | 92014 | 30 | 60 | |
| | 92019 | 50 | 60 | |
| | 92020 | 45 | 60 | |
| | 92021 | 50 | 60 | |
| | 92024 | 30 | 60 | |
| | 92025 | 30 | 60 | |
| | 92026 | 30 | 60 | |
| | 92027 | 30 | 60 | |
| | 92028 | 40 | 75 | |
| | 92029 | 30 | 60 | |
| | 92036 | 65 | 85 | |
| | 92037 | 30 | 60 | |
| | 92040 | 35 | 60 | |
| | 92059 | 30 | 60 | |
| | 92060 | 30 | 60 | |
| | 92061 | 30 | 60 | |
| | 92064 | 30 | 60 | |
| | 92065 | 30 | 60 | |
| | 92066 | 60 | 80 | |
| | 92067 | 30 | 60 | |
| | 92070 | 45 | 60 | |
| 92071 | 35 | 60 | | |
| 92082 | 45 | 75 | | |
| 92086 | 55 | 75 | | |

**2021 Annual Network Certification:
DMC-ODS Approved Alternative Access Standards Report**

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Opioid Treatment Services | 92091 | 30 | 60 | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. The plan will provide transportation to beneficiaries when needed. |
| | 92101 | 40 | 60 | |
| | 92102 | 45 | 60 | |
| | 92103 | 40 | 60 | |
| | 92104 | 40 | 60 | |
| | 92105 | 45 | 60 | |
| | 92106 | 40 | 60 | |
| | 92107 | 40 | 60 | |
| | 92108 | 35 | 60 | |
| | 92109 | 35 | 60 | |
| | 92110 | 35 | 60 | |
| | 92111 | 30 | 60 | |
| | 92113 | 45 | 60 | |
| | 92114 | 45 | 60 | |
| | 92115 | 40 | 60 | |
| | 92116 | 40 | 60 | |
| | 92117 | 30 | 60 | |
| | 92118 | 45 | 60 | |
| | 92119 | 45 | 60 | |
| | 92120 | 40 | 60 | |
| | 92121 | 30 | 60 | |
| | 92122 | 30 | 60 | |
| | 92123 | 35 | 60 | |
| 92124 | 40 | 60 | | |
| 92126 | 30 | 60 | | |
| 92127 | 30 | 60 | | |

**2021 Annual Network Certification:
DMC-ODS Approved Alternative Access Standards Report**

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Opioid Treatment Services | 92128 | 30 | 60 | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider. The plan will provide transportation to beneficiaries when needed. |
| | 92129 | 30 | 60 | |
| | 92130 | 30 | 60 | |
| | 92131 | 30 | 60 | |
| | 92134 | 40 | 60 | |
| | 92139 | 45 | 60 | |
| | 92140 | 40 | 60 | |
| | 92154 | 55 | 60 | |
| 92173 | 55 | 65 | | |

San Mateo Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|---|
| Adult (18+) Opioid Treatment Services | 94019 | 25 | 35 | The basis for this approval is pending contract approval with closest out-of-network provider, and lack of provider network. The plan will provide transportation to beneficiaries when needed. |
| | 94020 | 20 | 65 | |
| | 94021 | 26 | 56 | |
| | 94038 | 19 | N/A | |
| | 94074 | 35 | 52 | |
| | 94060 | 31 | 47 | |
| | 94062 | 34 | N/A | |
| Youth (0-17) Opioid Treatment Services | 94019 | 16 | N/A | |
| | 94020 | 31 | 51 | |
| | 94021 | N/A | 57 | |
| | 94038 | 22 | 36 | |
| | 94060 | 37 | 55 | |
| | 94062 | 21 | N/A | |
| | 94074 | N/A | 44 | |

Tulare Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|---|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Outpatient Services | 93265 | N/A | N/A | The basis for this approval is Tulare DMC-ODS' implementation of telehealth services for outpatient services. The plan will provide transportation to beneficiaries when needed. |
| | 93260 | | | |
| | 93207 | | | |
| | 93208 | | | |
| Adult (18+) Opioid Treatment Services | 93260 | N/A | N/A | The basis for this approval is telehealth services and single case agreements that will ensure that beneficiaries have accessibility to services. The plan will provide transportation to beneficiaries when needed. |
| | 93633 | | | |
| Youth (0-17) Opioid Treatment Services | 93257 | N/A | N/A | |
| | 93274 | | | |
| | 93291 | | | |
| | 93277 | | | |
| | 93292 | | | |
| | 93618 | | | |
| | 93247 | | | |
| | 93647 | | | |
| | 93219 | | | |
| | 93223 | | | |
| | 93221 | | | |
| | 93286 | | | |
| | 93256 | | | |
| | 93267 | | | |
| | 93615 | | | |
| 93270 | | | | |
| 93235 | | | | |

**2021 Annual Network Certification:
DMC-ODS Approved Alternative Access Standards Report**

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Opioid Treatment Services | 93272 | N/A | N/A | The basis for this approval is telehealth services and single case agreements that will ensure that beneficiaries have accessibility to services. The plan will provide transportation to beneficiaries when needed. |
| | 93258 | | | |
| | 93265 | | | |
| | 93631 | | | |
| | 93271 | | | |
| | 93215 | | | |
| | 93218 | | | |
| | 93244 | | | |
| | 93654 | | | |
| | 93646 | | | |
| | 93201 | | | |
| | 93201 | | | |
| | 93212 | | | |
| | 93673 | | | |
| | 93666 | | | |
| | 93261 | | | |
| | 93207 | | | |
| | 93260 | | | |
| 93208 | | | | |
| 93603 | | | | |
| 93262 | | | | |

Yolo Drug Medi-Cal Organized Delivery Systems

| Service Type | Zip Code | Approved Max Dist. (miles) | Approved Max Time (minutes) | Justification for Approval |
|--|----------|----------------------------|-----------------------------|--|
| Youth (0-17) Opioid Treatment Services | 95695 | N/A | N/A | The basis for this approval is the lack of providers willing to serve the Youth (0-17) age group closer than the contracted provider and single case agreements that will ensure that beneficiaries have accessibility to services. The plan will provide transportation to beneficiaries when needed. |
| | 95691 | | | |
| | 95605 | | | |
| | 95776 | | | |
| | 95616 | | | |
| | 95694 | | | |
| | 95618 | | | |
| | 95627 | | | |
| | 95937 | | | |
| | 95645 | | | |
| | 95612 | | | |
| | 95653 | | | |
| | 95698 | | | |
| | 95607 | | | |
| | 95637 | | | |
| | 95697 | | | |
| | 95620 | | | |
| 95606 | | | | |
| 95912 | | | | |
| 95679 | | | | |