

# Completing the Provider Access Audit Corrective Action Plan Online



1. **Your practice site should have received a Provider Report Card detailing your site's Provider Access Audit Results, including the standards your site failed.**
2. **Your practice site must have completed the following actions identified in the cover letter of your Provider Report Card:**
  - Staff education
  - Practice self-assessment

**Click here** to view the access standards, practice self-assessment tool, and other access resources.
3. **The below data is needed to complete the online form.** (All data is listed on the provider report card mailed to your practice site.)
  - Practice Site NPI Number (required)
  - Practice Site ID Number (optional)
  - Practice Site Name (required)
  - Practice Site Address Full Address (required)

**Note:** The Provider Access Audit is practice address specific.

  - Provider Type/Specialty (required)
  - Line of Business-Medicaid or Medicare (required)
4. **Practice description related to the scheduling of patient appointments.** How would you describe your practice?
  - Practice location that schedules patient appointments on-site.
  - Large Group Practice that uses a call center to schedule patient appointments.
  - Hospital Affiliation Practice that uses a call center to schedule patient appointments.
5. **Identify Barrier(s)** that prevented your practice site from meeting the access standards.
6. **Identify Action(s)** your practice site has taken to meet the access standards.



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