

APPOINTMENT ACCESSIBILITY STANDARDS

Appointment Accessibility standards for Primary Care Physicians (PCP's), Specialists and Behavioral Health Providers are:

Access Standard Description	Standard
Hours of Operation	<ul style="list-style-type: none"> • 20 hours per week for a one physician practice • 30 hours per week for a two or more physician practice
Medically Necessary Services	<ul style="list-style-type: none"> • 24 hour per day, 7 days per week
Emergency Care Visit	<ul style="list-style-type: none"> • Same day or immediate to within 24 hours, depending on severity of symptoms
Urgent Care Visit (symptomatic)	<ul style="list-style-type: none"> • Within 24-48 hours, depending on severity of symptoms
Non-urgent Office Visit (symptomatic)	<ul style="list-style-type: none"> • Within one week
Routine Office Visit (non-symptomatic)	<ul style="list-style-type: none"> • Within 30 days
Routine Physical	<ul style="list-style-type: none"> • Within 30 days
Waiting Time in Office	<ul style="list-style-type: none"> • Reasonable for scheduled appointment. (e.g., 30 minutes)
Appointments Conducted per Hour	<ul style="list-style-type: none"> • 5 limited or routine visits per hour (average) for adult medicine • 6 limited or routine visits per hour (average) for pediatric medicine

AVAILABILITY STANDARDS

Availability standards for travel time between member's homes/work sites and healthcare provider are:

Availability Standard Description	Standard
Geographic Distance (Location) to PCP's for Members	<ul style="list-style-type: none"> • At least 90% of the Plan's members will have 2 PCP's within 30 minutes of the member's residence or as required by state. For rural areas, at least 90% of the Plan's members will have one PCP within 60 minutes of the member's residence or as required by state.
Geographic Distance (Location) to High Volume Specialists for Members	<ul style="list-style-type: none"> • At least 90% of the Plan's members will have high volume specialists available within 30 minutes of the member's residence (travel distance may vary by specialty) or as required by state. For rural areas, at least 90% of the Plan's members will have high volume specialists available within 60 minutes of the member's residence or as required by state.
PCPs and Specialist per member	<ul style="list-style-type: none"> • 1:1000
PCPs accepting new members	<ul style="list-style-type: none"> • 90%
Tertiary Care	<ul style="list-style-type: none"> • Tertiary care will be available within 1 hour of member's residence for at least 90% of the Plan's members or as required by state. Examples of tertiary care include neurosurgery, neonatal intensive care (levels III and IV), extracorporeal shock wave lithotripter. Excluded: organ transplant, burn care.

- Exceptions may be made if the usual travel patterns for medical care exceed any of the above standards, i.e. in rural areas.
- Primary Care Practice (PCP) is defined as Family Practice, Internal Medicine, Pediatrics, and General Practice.
- High Volume Specialists are determined by the Health Plan through annual High Volume Specialist Reports. OB/GYN and Mental Health Providers are considered mandatory High Volume Specialist providers and will be added to the annual High Volume Specialist listing.
- When developing the network, Plan staff takes into account the linguistic and cultural preferences of health plan membership.

MONITORING OF STANDARDS

As part of the Quality Improvement process the Provider Relations staff will annually monitor network provider access and availability to ensure that the sufficiency of its network will meet the health care needs of members for both Primary Care Physicians (PCPs) and specialists, as appropriate.

To monitor compliance with the Access and Availability Standards the Provider Relations staff will:

- Review annual results of the Geo-mapping reports, completed by utilizing industry-standard software, to monitor compliance with the Availability standards.
- Review the annual results of the Consumer Assessment of Health Plans Study (CAHPS), a member satisfaction survey, to monitor compliance with the Accessibility standards.
- Monitor member complaints.
- Monitor after-hour telephone accessibility through member complaints and member and/or provider surveys or after hours phone audits to ensure that the Physician or an associate is available 24 hours per day, 7 days per week.

Resolution of Insufficiencies

- Physicians out of compliance will be monitored until they become compliant.
- If any insufficiencies are identified through the annual Geo-mapping review, applications or requests for participation will be sent to non-contracted facilities or providers in the affected service area(s).
- The Plan shall monitor and trend any member complaints regarding accessibility and availability of providers by product and will geo-map as trends are identified.