

**Access to Care Standards:
 Dual Eligible (Medi-Medi) and Special Needs Plan (SNP) Members**

Service	Access Standard
Appointment making systems	A written or computerized appointment making system, which includes following up on missed appointments
Appointments for routine primary care services for a member who is symptomatic but does not require immediate diagnosis and/or treatment	30 calendar days maximum
Appointments for routine prenatal care	<ul style="list-style-type: none"> • Within two weeks from request during the 1st and 2nd trimester • Within three working days from request during 3rd trimester
Appointments for routine preventative care	Physical exam/preventative services – four (4) weeks maximum for appointment
Appointments for urgent care	Within 24 hours
Routine specialty referral appointment	Within 10 working days
Availability of interpreter service	24 hours/7 days a week
Availability of primary care physician – time requirements	24 hours/7 days a week
Preventative Exams A periodic health evaluation for a member with no acute medical problem, including: <ul style="list-style-type: none"> • Initial Health Assessments and Behavioral Risk Assessments 	Children under the age of 18 months – within 60 calendar days of enrollment or within the AAP periodicity timelines for ages two and younger, whichever is less 18 months of age and older – within 120 calendar days of enrollment EPSDT/CHDP or preventative health examination within four weeks from request
AAP periodic screenings	As prescribed by AAP Periodicity guidelines

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Emergency appointment: Services for a potentially life threatening condition requiring immediate medical intervention to avoid disability or serious detriment to health	Immediate, 24 hours a day/7 days a week
Non-emergent telephone appointment responsiveness	45 minutes
Office waiting time: The time a member with a scheduled medical appointment is waiting to see a doctor once in the office	5 – 45 minutes
Telephone waiting time: The maximum length of time for office staff to answer the phone	30 seconds
Call Return Time (After Hours): The maximum length for PCP or on-call provider to return a call	30 minutes
Services for members with disabilities	Compliance with all provisions of the Americans with Disabilities Act: <ul style="list-style-type: none"> • At least one designated handicapped parking space • A handicapped bathroom or alternative access which is equipped with handrails in the bathroom • A wheelchair access ramp • A handicapped water fountain or alternative provisions • An elevator
Availability of ancillary services	Available within a reasonable distance from the primary care physician
Availability of hospitals	Travel time and distance standards of 15 miles travel distance or 30 minutes travel time from their residence or workplace
Availability of primary care physician distance requirements (PCP Geo Access Reports)	Travel time and distance standards of 10 miles travel distance or 30 minutes travel time from their residence or workplace

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Availability of specialty care	Travel time and distance standards of 15 miles travel distance
Member requested primary care physician changes	Members can request a PCP change monthly. Health Plans will process the member requested PCP change
Routine specialty referral authorization	Within 10 working days