



ACCESS TO CARE STANDARDS

Access Criterion	Network Medical Management Standard
Primary Care Provider (PCP) Accessibility Standards:	
Routine Primary Care Appointment (Non-Urgent)	Within 10 business days of request
Urgent Care Appointment	Within 48 hours of request
Emergency Care	Immediate, 24 hours a day, 7 days per week
Preventive Care	Within 10 business days of request- 30 calendar days for Medicare
First Prenatal Visit	Within 10 business days of request
Specialty Care Provider (PCP) Accessibility Standards:	
Routine Specialty Care Appointment (Non-Urgent)	Within 15 business days of request
Urgent Care Appointment	Within 96 hours of request
Ancillary Care Accessibility Standards:	
Routine Ancillary Care Appointment (Non-Urgent)	Within 15 business days of request
Behavioral Care Accessibility Standards:	
Routine Behavioral Care Appointment (Non-Urgent)	Within 15 business days of request (Physicians) Within 10 business days of request (Non-Physicians)
Urgent Care Appointment	Within 48 hours of request
Life Threatening Emergency	Immediately
Non-Life Threatening Emergency	Within 6 hours of request
Emergency Care	Immediate, 24 hours a day, 7 days per week
After-Hours Care Standards:	
After-Hours Care	<ul style="list-style-type: none"> • Automated systems must provide emergency 911 instructions • Automated system or live party (office or professional exchange service) answering the phone must offer a reasonable process to connect the caller to the PCP or covering physician • Offer a call-back from the PCP, covering physician, or triage/screening clinician within 30 minutes
Physician Telephone Responsiveness:	
In-Office Waiting Room Time	Within 30 minutes
Speed of Telephone Answer	Within 30 seconds
Missed Appointments	Within 48 hours to reschedule

For additional information regarding Access to Care, please refer to your provider manual or you may contact your Network Medical Management Provider Relations Department.