

ACCESS TO CARE GUIDELINES

AmeriHealth Caritas District of Columbia (DC) providers must meet standard guidelines as outlined in this document to help ensure that enrollees have timely access to care. These guidelines may also be found in the Provider Handbook.

AmeriHealth Caritas DC endorses and promotes comprehensive and consistent access standards to assure enrollee accessibility to health care services. AmeriHealth Caritas DC establishes mechanisms for measuring compliance with existing standards and identifies opportunities for the implementation of interventions for improving accessibility to health care services for enrollees.





APPOINTMENTS

Providers are required to offer hours of operation to AmeriHealth Caritas DC enrollees that are equal to the hours of operation offered to patients with commercial insurance. Appointment scheduling and wait times for enrollees should comply with the access standards defined below. The standards below apply to medical care services and medical providers; please refer to the Access to Care Guidelines: Behavioral Health document for the standards that apply to behavioral health care services and behavioral health providers.

AmeriHealth Caritas DC monitors the following access standards on an annual basis per District of Columbia's Department of Health Care Finance (DHCF) guidelines.

If a provider becomes unable to meet these standards, he/she must immediately advise his/her **Provider Network Account Executive** or the **Provider Services** department at **202-408-2237** or toll free at **1-888-656-2383**.

ACCESS TO MEDICAL CARE



Emergency medical care (life threatening)	Immediately at the nearest facility
Urgent medical care	Within 24 hours of request
Routine primary or special care (including appointments for HealthCheck Services that are due, IDEA Services, and/or physical exams)	Within 30 days of request
Initial appointments for new enrollees under age 21	Within 60 days of becoming an enrollee
Initial appointments for new enrollees ages 21 and older	Within 30 days of request OR within 45 days of becoming an enrollee, whichever is sooner
Initial appointments for pregnant women or family planning services	Within 10 days of request
Waiting time in a provider office	Not to exceed 45 minutes for enrollees arriving at the scheduled appointment time
Use of free interpreter services	As needed upon enrollee request during all appointments



MISSED APPOINTMENT TRACKING

If an enrollee misses an appointment with a provider, the provider should document the missed appointment in the enrollee's medical record. Providers should make at least three documented attempts to contact the enrollee and determine the reason. The medical record should reflect any reasons for delays in providing medical care as a result of missed appointments and should also include any refusals by the enrollee.

Providers are encouraged to advise AmeriHealth Caritas DC's **Rapid Response** team at **1-877-759-6224** for outreach assistance when an enrollee does not keep an appointment and/or when an enrollee cannot be reached.



AFTER-HOURS ACCESSIBILITY

AmeriHealth Caritas DC enrollees must have access to quality, comprehensive health care services 24 hours a day, seven days a week. Primary Care Providers (PCPs) must have an answering machine or an answering service for enrollees during afterhours for non-emergent issues. The answering service must forward calls to the PCP or on-call provider or instruct the enrollee that the provider will contact the enrollee within 30 minutes. When an answering machine is used after hours, the answering machine must provide the enrollee with a process for reaching a provider. The after-hours coverage must be accessible using the medical office's daytime phone number.

For emergent issues, both the answering service and answering machine must direct the enrollee to **call 911** or **go to the nearest emergency room**. AmeriHealth Caritas DC will monitor access to after-hours care on an annual basis by conducting a survey of PCP offices after normal business hours.



MONITORING APPOINTMENT ACCESS AND AFTER-HOURS ACCESS

AmeriHealth Caritas DC will monitor appointment availability, waiting times, and after-hours access using various mechanisms, including:

- · Reviewing provider records during site reviews;
- · Monitoring administrative complaints and grievances; and
- Conducting an annual Access to Care survey to assess enrollee access to daytime appointments and after-hours care.

Non-compliant providers may be subject to corrective action and/or termination from the network, as follows:

- A non-compliance letter will be sent to the provider; and
- The non-compliant provider will be re-surveyed within three to six months after the infraction.