

Appointment availability and after-hours access requirements

To ensure members receive care in a timely manner, primary care providers (PCP), specialists and behavioral health (BH) providers must maintain the following appointment availability and after-hours access Standards as required by the Department for Medicaid Services and Anthem Blue Cross and Blue Shield Medicaid.

General appointment scheduling (PCPs and all specialists)	
Emergency examination	Immediate access 24/7
Urgent examination	Within 48 hours of request
Routine examination	Within 30 calendar days of request
Voluntary family planning Members under 18 years of age	Within 30 calendar days of request If complete medical services cannot be provided on short notice, counseling and a medical appointment shall be provided right away, if possible, or within 10 calendar days of request
Prenatal	Within 14 calendar days of request
Third trimester	Within five calendar days of request
High risk pregnancy	Within 14 calendar days of request
Postpartum exam	4 to 8 weeks after delivery
Behavioral health appointment standards	
Life-threatening emergency	Immediately
Crisis stabilization	Within 24 hours of request
Urgent behavioral health services	Within 48 hours of request
Outpatient treatment post-psychiatric inpatient care	Within seven calendar days from the date of discharge
Routine behavioral health visits, including the initial visit and follow-up visits	Within 10 calendar days of request
Dental care appointment standards	
Urgent examination	Within 48 hours of request
New patient exam (dental)	Within 21 calendar days of request
Routine exam after initial diagnosis (dental)	Within 21 calendar days of request



<https://mediproviders.anthem.com/ky>

Anthem Blue Cross and Blue Shield Medicaid is the trade name of Anthem Kentucky Managed Care Plan, Inc., independent licensee of the Blue Cross and Blue Shield Association. Anthem is a registered trademark of Anthem Insurance Companies, Inc.
AKY-NU-0240-20 June 2020

After-hours access requirements

PCPs are required to abide by a set of standards to ensure access to care for Anthem Blue Cross and Blue Shield Medicaid members. PCPs must:

- Offer members access to quality, comprehensive health care services 24/7.
- Have either a recording or an answering service for members during after-hours for assistance.
- The answering service forwards calls to the PCP or on-call physician, or instructs the member that the provider will contact the member back within 30 minutes.
 - When a recording is used after hours, it will provide the member with a process for reaching a provider after hours.
 - For emergent issues, both the answering service and answering machine will direct the member to call 911 or go to the nearest emergency room.
- Be available to provide medically necessary services or from another physician.
- Follow the referral/precertification guidelines. This is a requirement for covering physicians.

Additionally, we strongly encourage offering after-hours appointments in the evenings and on Saturdays. For additional information regarding access and availability, please reference the provider manual on the provider page at <https://mediproviders.anthem.com/KY/Pages/Home.aspx>.

What if I need assistance?

If you have questions, contact your local Network Relations Consultant or call Provider Services at **1-855-661-2028**.