





> Availability Standards & Auditing Procedure



Annually, Meridian assesses the appointment availability and after-hours access of its Primary Care Provider (PCP) offices to ensure members are served based on their level of need.

Each year, our Quality Improvement team conducts a telephone audit using the standards below set forth by NCQA, CMS and/or State regulations. These audits are conducted in an effort to monitor provider compliance with Illinois Medicaid contract requirements. The process of conducting the annual audits is outlined below.

-  **IDENTIFY** - Meridian audits a sample of its contracted PCPs
-  **OUTREACH** - Conducted by the Quality Improvement team via phone, three attempts are made to reach a live person
-  **ANALYZE** - Analysis is performed based on all data collected
-  **REPORT** - Letters are mailed to offices indicating the results of the audit. Any offices who did not meet the standards are placed on a corrective action plan and are asked to identify ways to improve their appointment availability

Appointment Availability Standards

APPOINTMENT TYPES	POPULATION	STANDARD
MEDICAID		
Preventive/Routine Care	Child < 6 Months	2 weeks
Preventive/Routine Care	Child > 6 Months	5 weeks
Preventive/Routine Care	Adult	5 weeks
Routine/Symptomatic	Adult or Child	48-72 hours
Urgent/Non-Emergent (Medically Necessary Care)	Adult or Child	1 business day (24 hours)
Non-Urgent/Non-Emergent Conditions	Adult or Child	3 weeks
Initial Prenatal w/o Problems (First Trimester)	Female Enrollees	2 weeks
Prenatal (Second Trimester)	Female Enrollees	1 week
Prenatal (Third Trimester)	Female Enrollees	3 days
Office Wait Time	----	Less than 30 minutes
Scheduled Appointments per Hour	----	< 6 per hour
Hours Different for Medicaid Recipients	----	No; must be same
MEDICARE		
Preventive/Routine Care	Adult	5 weeks
Routine/Symptomatic	Adult	48-72 hours
Urgent/Non-Emergent Conditions	Adult	3 weeks
Urgent/Non-Emergent (Medically Necessary Care)	Adult	24 hours
Emergency	Adult	Immediate
Initial Prenatal w/o Problems (First Trimester)	Female Enrollees	2 weeks
Prenatal (Second Trimester)	Female Enrollees	1 week
Prenatal (Third Trimester)	Female Enrollees	3 days
Office Wait Time	----	Less than 30 minutes
Scheduled Appointments per Hour	----	≤6 per hour
Medical coverage 24 hours a day, 7 days a week		

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After-Hours Standards

All primary care physician contracts require physicians to provide enrollees with access to care 24 hours a day, seven days a week.

ACCEPTABLE AFTER-HOURS ACCESS MECHANISMS INCLUDE:

- Answering service
- On-call beeper/cellular
- Call forwarded to physician's home or other location
- Recorded telephone message with instructions for urgent or non-life threatening conditions must direct enrollees to a practitioner. The message should not instruct enrollees to obtain treatment at the Emergency department for non-life-threatening emergencies



Please utilize the convenient checklist below to ensure that your after-hours process is compliant. Meridian recommends checking your after-hours messaging regularly to ensure that members have access to appropriate care and resources.

MESSAGE COMPONENTS	MET
Message MUST direct members in a medical emergency to call 911 or go to the nearest Emergency Room or Urgent Care.	
MESSAGE MUST CONTAIN <u>ONE</u> OF THE FOLLOWING	MET
Message forwards to on-call physician	
Message forwards to an answering service	
Message gives the on-call physician's number	
Message gives the on-call physician's beeper	
Message refers member to another office, physician or on-call service	
Message may not only direct member to Emergency Room. The member must be able to leave a message for an on-call doctor, speak with an on-call doctor or be forwarded to an on-call doctor.	



For any questions, please contact your designated Meridian Provider Network Development Representative or Provider Services at 866-606-3700.