

Senior Preferred has set standards for appointment access availability for members. All participating practitioners and providers are expected to comply with the standards described below for Senior Preferred HMO members:

SERVICE	ACCESS STANDARD*
Primary Care	Within 2 weeks of date of call for appointment
Specialist	Within 4 weeks of date of call for appointment
Primary Care and Specialist for Minnesota providers	Must have regularly scheduled appointment during normal business hours
Behavioral Health – routine	Within 10 working days of call for appointment A member has telephone access to screenings and triage, if applicable; Members reach a non-recorded voice within 30 seconds and; Abandonment rates do not exceed 5 percent at any given time.
Urgent care	48 hours
Life threatening emergency	Immediate

^{*}All standards are based on calendar days.

All providers are required to:

- 1. Follow appointment wait time standards:
 - Wait times for scheduled appointments should not be twenty (20) minutes beyond scheduled appointment time.
 - When care is unavoidably delayed, members must be notified of the delay and given the opportunity to reschedule their appointment. Attempts will be made to reschedule the appointment as medically appropriate and as close to the original date as possible.
- 2. Provide services 24 hours per day, 7 days per week.
 - All providers should have an appropriate after-hours phone message available for patients calling in after normal business hours. We recommend provider's answering machines include their name and office hours and the name and phone number of a hospital or emergency services provider where a member can obtain after-hour care or emergency care.
- 3. Have accessibility for handicapped members as defined by the Americans with Disabilities Act (ADA), the Civil Rights Act, and any state or federal requirements to meet special and cultural needs.
- 4. Ensure that interpreter services are available for members with language & hearing impairments.

Senior Preferred shall ensure that members have reasonable access to the care and services they require. Established geographic access standards as follows (Minnesota providers are evaluated based on miles only):

- Thirty minutes or 30 miles to primary care;
- Sixty minutes or 60 miles to specialty care;
- Sixty minutes or 60 miles to behavioral health care (30 miles for Minnesota providers);
- Sixty minutes or 60 miles to institutional health care (30 miles for Minnesota providers);
- In rural areas, determination will be based on normal travel patterns.