

August 5, 2025

Participating Provider Office Standards for Access and Availability

The Quality Management (QM) department, in collaboration with Provider Network Management, establishes an annual access and availability plan to address the sufficiency of the plan's provider network in number, type, and geographic location of practitioners who practice primary and specialty care, in accordance with relevant regulatory and accreditation standards. The cultural needs of the plan members are taken into consideration, and mechanisms are implemented to provide adequate access to primary and specialty care practitioners. Availability of practitioners is assessed annually by the Provider Network Management department.

Through the QHP Member Experience survey, the QM department also establishes and measures the accessibility of services, such as regular and routine appointments, urgent care appointments, after-hours care, emergent care, and access to customer service.

We collect and analyze this data to identify opportunities for improvement. Interventions are implemented to improve performance.

Access standards for PCPs and specialists are as follows:

Appointment availability

PCPs

- Emergent/immediate — 24 hours per day, seven days per week
- Urgent — One (1) business day
- Routine and regular (well or preventive) care — Fifteen (15) business days

Specialists/chiropractors/podiatrists

- Emergent/immediate — Members should call 911 or go to the nearest emergency room
- Urgent — One (1) business day
- Routine appointment — Thirty (30) business days
- OB/GYN routine appointment — Thirty (30) business days

AmeriHealth Next and First Choice Next are individual and family health plans offered by certain companies within the AmeriHealth Caritas Family of Companies. AmeriHealth Caritas Next is offered by AmeriHealth Caritas VIP Next, Inc. in Delaware; AmeriHealth Caritas Florida, Inc. in Florida; AmeriHealth Caritas North Carolina, Inc. in North Carolina; and First Choice Next by Select Health of South Carolina, Inc. in South Carolina.

**Mental health providers** (non-medication prescribers and medication prescribers)

- Emergency — Within fifteen (15) minutes of presentation at a service delivery site
- Urgent, nonemergency — Within one (1) hour of presentation at a service delivery site or within 24 hours of telephone contact with the provider or contractor.
- Non-life-threatening emergency — Within six (6) hours
- Routine mental health services (in follow-up to intake assessment and upon determination) — Within 21 calendar days of the request for an appointment
- Initial visit for routine care — Ten (10) business days

Internal Waiting Time

Patients should be seen within 30 minutes of the time of the scheduled appointment.

Availability

Coverage must be provided 24 hours per day, seven days per week, for our members. Covering practitioner must be a participating provider. Providers who use answering machines for after-hours services are required to include the following in the outgoing message:

- Urgent/emergent instructions as the first point of instruction
- Information on contacting a covering provider
- Telephone number for after-hours provider access

After Hours Phone Response

For an urgent/emergent problem, the provider should respond within 30 minutes. Auto-response messages should direct callers with emergent needs to dial 911 or go to their nearest emergency room.

Questions:

Thank you for your participation in our network and your continued commitment to the care of our members. If you have questions about this communication, please contact your Provider Account Executive or the Provider Services Department for your state.

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