

FREQUENTLY ASKED QUESTIONS

Connecticut Access Standards

Q1. Does the state of Connecticut have any requirements related to timely access to care?

A1. Yes. The state of Connecticut establishes guidelines and requirements for Providers related to access to care. Optum follows the CT accessibility requirements.

Q2. Where can I find information about these requirements?

A2. The Optum National requirements are posted on our provider website, providerexpress.com, you can look at the <u>National Network Manual</u>. Additional information can be found in your Participation Agreement. Are the state requirements posted anywhere? A state website or uhcprovider.com?

Q3. Does Optum monitor these requirements?

A3. Yes. Optum is required to ensure that all Members have access to appropriate treatment as needed. We do this by deploying a survey annually to assess access. Compliance with this survey is required in accordance with your Agreement.

Q4. Do you want to know if I have openings in my schedule?

- A4. There are times when identifying an available appointment is difficult, especially for urgent appointments. If you find that your schedule has openings and you would like to receive referrals, please contact:
 - The Intake Department of the Care Advocacy Center that you work with the most
 - Provider Relations Advocate or Associate
 - National Provider Service Line (1-877-614-0484)

Q5. What should I do if I am unable to meet these appointment access standards?

A5. You should notify Optum so that staff may assist the member in finding alternatives. You can quickly and easily update this information by logging into the Secure Transaction section of <u>providerexpress.com</u> and selecting [My Practice Info] or by contacting Network Management.



TIMELY ACCESS TO CARE			
Appointment Type	Definition		Standard
Emergency	A serious situation that arises suddenly and requires immediate appointment care and treatment to	Life Threatening: A situation requiring immediate appointment availability in which there is imminent risk of harm or death to self or others due to a medical or psychiatric condition.	100% of members must be seen immediately.
		Non-life Threatening: A situation requiring appointment availability within six hours in which immediate assessment or care is needed to stabilize a condition or situation, but there is no imminent risk of harm or death to self or others.	100% of members must be offered an appointment within 6 hours.
Urgent	A situation in which immediate care is not needed for stabilization, but if not addressed in a timely manner could escalate to an emergency situation.		100% of members must be offered an appointment within 48 hours for MH/SUD of the request for the appointment or as mandated by state law.
Routine Office Visit: Non-Urgent	A situation in which an assessment of care is required, with no urgency or potential risk of harm to self or others.		100% of members must be offered an appointment within 10 business days of the request for the appointment
Employee Assistance Program (EAP)	Services that are designed for brief intervention, assessment, and referral. These services are short-term in nature.		90% of the time the initial EAP appointment must be offered within three business days
Post Discharge Appointment	Members should attend an outpatient appointment with a behavioral health clinician within seven (7) days of being discharged from mental health inpatient treatment		Within 7 days of being Discharged
Routine Office Visit Wait Time	In-office wait time will not exceed fifteen minutes		90% of the time within 15 minutes
Timely Response to Messages	Providers shall respond to member messages for routine issues within 24 hours		90% of the time within 24 hours
After Hours: Answering System and Messaging	Messaging must include instruction for obtaining emergency care		100% of the time
Specialist Care	A health care provider who (A) focuses on a specific area of physical, mental, or behavioral health or a specific group of patients, and (B) has successfully completed required training and is recognized by the state of Connecticut to provide specialty care		Must be offered within 15 days