

Access to Medical Care Requirements

The following time frames for member access to care have been established by the Family and Social Services Administration (FSSA), Office of Medicaid Policy & Planning (OMPP) for Hoosier Healthwise (HHW) and Healthy Indiana Plan (HIP) members.

Appointment Category	Appointment Standards
Urgent/Emergent Care Triage	24 hours/day
Initial Appointment Well Child	Within 1 month of date calling to schedule an appointment
Routine Physical Exam	3 months
Initial Appointment (Non-pregnant Adult)	3 months
Routine Gynecological Examination	3 months
New Obstetrical Patient	Within 1 month of date attempting to schedule an appointment
Non-Urgent Symptomatic	72 hours
Children with Special Health Care Needs	1 month

OMPP REQUIREMENTS

PHYSICIAN RESPONSE TIME

- For emergencies and urgent situations, MDwise members must be able to reach their Primary Medical Provider (PMP) or designee by telephone within 30 minutes, 24 hours per day, 7 days per week.
- For non-urgent routine telephone messages, a return call should be made to the member within one working day.

Office Appointment Waiting Times

- For all appointments except emergency, the physician should see each patient within 60 minutes of the scheduled appointment time.

Office Telephone Answering Time

- The office telephone should be answered within four rings or 30 seconds. The length of time to be answered by a live voice to schedule an appointment should be less than three minutes.

Specialist Access to Standards

HHW and HIP also require the following standards to be maintained regarding patient accessibility for specialist referrals:

Appointment Category	Appointment Standards
Emergency	24 hours
Urgent	48 hours
Non-Urgent Symptomatic	4 weeks