

Appointment availability and after-hours access requirements

Tennessee | Medicaid

Background: To ensure members receive care in a timely-manner, PCPs, specialty providers, and behavior health providers must maintain the following appointment availability standards.

Requirements for PCPs and specialists	
Appointment type	Appointment standard
Emergency visits — all provider types	Immediately
Urgent visits — all provider types	Within 48 hours
Routine or preventive visits — PCPs	Within three weeks
Routine visits — specialists	Within 30 days of referral
Optometry visits, regular visits	Within three weeks
Wait time	Should not exceed 45 minutes for scheduled appointment
OB/prenatal care	Within three weeks

Requirements for behavioral health providers	
Outpatient (non-MD services)	Within 10 business days; urgent within 48 hours
Intensive outpatient services	Within 10 business days; urgent within 48 hours
Substance use, outpatient services	Within 10 business days; for detoxification: within 24 hours
Intensive community-based treatment services	Within seven calendar days
Crisis services (mobile)	Face-to-face contact within two hours for emergencies; within four hours for urgent
Crisis stabilization	Within four hours of referral

provider.wellpoint.com/tn

Medicaid coverage provided by Wellpoint Tennessee, Inc.

We comply with the applicable federal and state civil rights laws, rules, and regulations and do not discriminate against members or participants in the provision of services on the basis of race, color, national origin, religion, sex, age, or disability. If a member or a participant needs language, communication, or disability assistance or to report a discrimination complaint, call 833-731-2154. Information about the civil rights laws can be found at tn.gov/tenncare/members-applicants/civil-rights-compliance.html.

TNWP-CD-069816-24-SRS69816 | October 2024

After-hours access requirements for PCPs

To ensure continuous 24-hour coverage, PCPs must maintain one of the following arrangements for their members to make contact after normal business hours:

- Have the office telephone answered after hours by an answering service that can contact the PCP or another designated network medical practitioner. All calls answered by an answering service must be returned within 60 minutes.
- Have the office telephone answered after normal business hours by a recording in the language of each major population groups served by the PCP to direct the member to call an alternative number to reach the PCP, or another provider designated by the PCP. Someone must be available to answer the designated provider's telephone; another recording is not acceptable.
- Have the office telephone transferred after office hours to a different location where someone will answer the telephone and be able to contact the PCP or a designated Wellpoint network medical practitioner who can return the call within 60 minutes.
- Have an automated answering machine that directs the member to the practitioner or appropriate covering practitioner.

The following telephone answering procedures are not acceptable:

- Office telephone that is only answered during office hours
- Office telephone that is answered after hours by a recording that directs members to go to an emergency room for any services needed
- After-hours calls that are answered outside of 60 minutes

What if I need assistance?

If you have any questions about this communication or need assistance with any other item, contact your local provider relationship management representative or call Provider Services at **833-731-2154**.