Timely Access to Care

Senate Bill 1135 (SB1135) has established the following standards to ensure members are able to obtain treatment in a timely manner.

Standard	Criteria	Time Frame
Urgent	A situation in which immediate care is not needed for stabilization but, if not addressed in a timely way, could escalate to an emergency situation	Beneficiaries must be offered an appointment within 48 hours of the request for the appointment
Routine (non-urgent) –	A situation in which an	Beneficiaries must be offered
Mental Health Professional - (Psychologist, Therapist)	assessment of care is required, with no urgency or potential risk of harm to self or others	an appointment within 10 business days of the request for the appointment
Routine (non-urgent) - Psychiatrist	A situation in which an assessment of care is required, with no urgency or potential risk of harm to self or others	Beneficiaries must be offered an appointment within 15 business days of the request for the appointment

Please note:

The time for a particular, non-emergency appointment may be extended if it is determined and documented that a longer waiting time will not have a detrimental impact on the member's health. Rescheduling of appointments, when necessary, must be consistent with good professional care and ensure there is no detriment to the member.

Additional Information:

➤ Interpreter Services are available to beneficiaries at the time of their appointment. If an interpreter is needed the request should be made by the beneficiary when scheduling their appointments with the provider. The provider will complete necessary steps to obtain Interpreter Services.