



# NETWORK *Notification*

**Notice Date:** January 21, 2021  
**To:** Indiana Providers  
**From:** CareSource  
**Subject:** Annual Access & Availability Standard Requirements

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## Summary

To ensure optimal access to healthcare for Indiana members, CareSource has established the following requirements for optimal access and availability standards:

### Primary Medical Providers (PMPs)

Patients with...	Should be seen...
Emergency Needs	Immediately upon presentation
Urgent care	Not to exceed 48 hours
Adult sick visit	Not to exceed 24 hours
Pediatric sick visit	Not to exceed 24 hours
Regular and routine care	Not to exceed 14 calendar days

### Non- PMPs

Patients with...	Should be seen...
Emergency Needs	Immediately upon presentation
Urgent care	Not to exceed 48 hours
Regular and routine care	Not to exceed 30 calendar days

### Behavioral Health

Patients with...	Should be seen...
Emergency Needs	Immediately upon presentation
Non-life threatening emergency	Not to exceed six hours
Urgent care	Not to exceed 48 hours
Initial visit for routine care	Not to exceed 10 business days
Follow-up routine care	Not to exceed 30 calendar days based on the patient diagnosis and condition

A member should be seen as expeditiously as the member's condition warrants based on severity of symptoms. It is expected that, if a provider is unable to see the member within the appropriate timeframe, CareSource will facilitate an appointment with a participating provider or a non-participating provider, if necessary.

### **Questions?**

For questions on how access and availability requirements, please contact Provider Services at:

- Marketplace: **1-866-286-9949** (Monday through Friday, 8 a.m. to 6 p.m. Eastern Standard Time)
- MA/D-SNP: **1-833-230-2176** (Monday through Friday, 8 a.m. to 6 p.m. Eastern Standard Time)

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