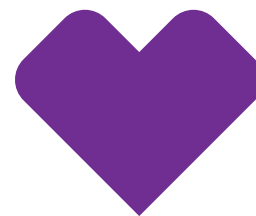


Appointment and availability standards



Helping our members get the care they need — when they need it

Aetna Better Health® of Illinois appointment and availability standards are based on Illinois Department of Health and Family Services (HFS) and the National Committee for Quality Assurance (NCQA) standards for timely access to care and services.

Our Provider Manual defines appointment and availability standards for each type of care and specialty. Providers who cannot offer an appointment within the specified time frames should refer the member to our Member Services team at **1-866-329-4701 (TTY 711)**.

Emergency care	Immediately
Urgent care	Within 24 hours
Routine preventive care	Within five (5) weeks For infants under six (6) months; within two (2) weeks
Pregnant woman visits	First trimester: 2 weeks Second trimester: 1 week Third trimester: 3 days
Post-discharge follow up	Within 7 days
Office wait times	Not to exceed 1 hour
After hours	24/7 coverage (voicemail only not acceptable)
Behavioral health	Non-life threatening urgent: within 6 hours Urgent (no immediate danger): within 48 hours Routine care: within 10 business days

Please note the following options are **not compliant** for after-hours requirement:

- No answer
- Listed number not in service
- On-hold time exceeds 5 minutes
- Instructing caller to leave message
- Instructing caller to go to ER regardless of situation, without allowing caller to speak with a provider

Download our provider manual at AetnaBetterHealth.com/Illinois-Medicaid/providers

Reminders

- ✓ Providers are required to notify Aetna Better Health of Illinois within three calendar days if they are not able to comply with appointment wait times.
- ✓ Our Provider Relations team routinely monitors compliance and seek Corrective Action Plans (CAPs) from providers that do not meet accessibility standards.

Questions?

Contact your assigned Provider Relations representative.

AetnaBetterHealth.com/Illinois-Medicaid/providers

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