

NETWORK ADEQUACY STANDARDS

If you need this document or any document in large print, Braille, other formats or languages, or read aloud, or need another copy, call 800-511-5010. For TDD/TTY, call 888-803-4494. Call Monday to Friday, 8 a.m. to 5 p.m. The call is free.

Si necesita esta documento o cualquier documento en letra grande, Braille, otros formatos o idiomas, o se lea en voz alta, o necesita otra copia, llame al 800-511-5010 (llamada gratuita). Para TTY/TDD llame al 888-803-4494. Llame de lunes a viernes, de 8 a.m. a 5 p.m. La llamada es gratis.

Access to Care Standards

Our network is designed to meet the requirements for every member's access to care to:

- Serve all primary care and care coordination needs;
- Serve all behavioral health needs; and
- Allow for adequate member freedom of choice among providers.

We provide the same standard of care to all members, regardless of eligibility category.

Our provider network is sufficient to support minimum hours of provider operation to include service coverage from 8:00 a.m.-5:00 p.m. Mountain Time, Monday through Friday.

Our network shall provide for extended hours, outside the hours from 8:00 a.m.-5:00 p.m., on evenings and weekends and alternatives for emergency room visits for after-hours urgent care. These evening and weekend support services for members and families shall include access to clinical staff, not just an answering service or referral service staff.

Our provider directory is updated daily and can be found here: coadirectory.info/search-member

Appointment Standards

We expect our providers to get you an appointment within the following timeframes:

- **Urgent Care** - within 24 hours after the initial identification of need.
- **Outpatient Follow-up Appointments** - within seven days after discharge from a hospitalization.
- **Non-urgent, Symptomatic Care Visit**- within seven days after the request.
- **Well Care Visit**- within one month after the request; unless an appointment is required sooner to ensure the provision of screenings in accordance with the Department's accepted Bright Futures schedule.
- **Emergency Behavioral Health Care** - by phone within 15 minutes after the initial contact, including TTY accessibility; in person within one hour of contact in urban and suburban areas, in person within two hours after contact in rural and frontier areas.
- **Non-urgent, Symptomatic Behavioral Health Services** - within seven days after a member's request. Administrative intake appointments or group intake processes are not considered a treatment appointment for non-urgent, symptomatic care.
- **Providers shall not place members on waiting lists for initial routine service requests.**

NETWORK ADEQUACY STANDARDS

Primary Care Provider (PCP) Network Time and Distance Standards						
	Urban County		Rural County		Frontier County	
Required Providers	Maximum Time (minutes)	Maximum Distance (miles)	Maximum Time (minutes)	Maximum Distance (miles)	Maximum Time (minutes)	Maximum Distance (miles)
Adult Primary Care Providers	30	30	45	45	60	60
Pediatric Primary Care Providers	30	30	45	45	60	60
Gynecology - OB/GYN	30	30	45	45	60	60

Behavioral Health Network Time and Distance Standards						
	Urban County		Rural County		Frontier County	
Required Providers	Maximum Time (minutes)	Maximum Distance (miles)	Maximum Time (minutes)	Maximum Distance (miles)	Maximum Time (minutes)	Maximum Distance (miles)
Hospitals (acute care)	30	30	60	60	90	90
Psychiatrists and other psychiatric prescribers, for adults	30	30	60	60	90	90
Psychiatrists and other psychiatric prescribers, serving children	30	30	60	60	90	90
Mental health provider, serving adults	30	30	60	60	90	90
Mental health provider, serving children	30	30	60	60	90	90
Substance use disorder provider, serving adults	30	30	60	60	90	90
Substance use disorder provider, serving children	30	30	60	60	90	90

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Practitioner to client ratios and distance standards:

- Adult primary care providers: One practitioner per 1,800 adult members.
- Mid-level adult primary care providers: One practitioner per 1,200 adult members.
- Pediatric primary care providers: One PCP Provider per 1,800 child members.
- Adult mental health providers: One practitioner per 1,800 adult members.
- Pediatric mental health providers: One practitioner per 1,800 child members.
- Substance use disorder providers: One practitioner per eighteen hundred 1,800 members.

Indian or tribal members eligible to receive services from an indian or tribal provider in the PCP network are permitted to choose that indian or tribal provider as their PCP, as long as that provider has the capacity to provide services.

Colorado Access complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex.