

Appointment availability and after- hours standards

UnitedHealthcare Community Plan of New Jersey

Overview

We want to support you and your staff to achieve the best possible health outcomes for our members by offering timely access to their covered services. Ensure your patients have convenient access to high-quality care, according to the appointment availability and after-hours standards set by the New Jersey Division of Medical Assistance and Health Services (DMAHS).

Appointment availability standards

Please review the following to help ensure your practice is meeting the appointment availability standards. You may be contacted by a third-party surveyor requesting appointment availability for your patients. These requests are random and are meant to confirm if practices meet the state's access and availability standards.

Appointment type	Appointment completion timeframe
Primary care providers (PCP) - Adult	
Urgent care visit	Within 24 hours of member appointment request
Acute care visit	Within 72 hours of member appointment request
Preventive health/physical exam	Within 28 days of member appointment request
Routine care visit	Within 28 days of member appointment request
Baseline physicals for new adult members	Within 180 days of new member appointment request
Baseline physicals for new Division of Developmental Disabilities (DDD) members	Routine within 90 days of new member appointment request
Primary care providers (PCP) - Children	
Urgent care visit	Within 24 hours of member appointment request
Acute care visit	Within 72 hours of member appointment request
Preventive health/physical exam	Within 28 days of member appointment request
Routine care visit	Within 28 days of member appointment request
Baseline physicals for new adult members	Within 90 days of new member appointment request
Baseline physicals for new Division of Developmental Disabilities (DDD) members	Routine within 90 days of new member appointment request
Obstetrics	
First-trimester care visit	Within 3 weeks of member appointment request
Second-trimester care visit	Within 7 days of member appointment request
Third-trimester care visit	Within 3 days of member appointment request
High-risk care visit	Within 3 days of member appointment request

Appointment type	Appointment completion timeframe
Specialist	
Urgent care visit (with PCP referral)	Within 24 hours of PCP referral
Non-emergent or routine care visit (with PCP referral)	Within 28 days of PCP referral
Dental	
Emergent care visit	Within 48 hours of member appointment request or PCP referral
Urgent care visit	Within 3 days of member appointment request or PCP referral
Preventive, routine or non-asymptomatic care visit	Within 30 days of member appointment request or PCP referral
Behavioral Health	
Urgent care visit	Within 24 hours of member appointment request
Routine care visit	Within 10 days of member appointment request
Lab/Radiology	
Urgent appointment	Within 48 hours of member appointment request
Routine appointment	Within 3 weeks of member appointment request

After-hours or 24/7 access standards

Some are required to have after-hours or 24/7 access for urgent medical matters. A medical director must approve coverage that varies. Primary care providers (PCP), obstetricians and primary care dental providers must be available to members after-hours, or 24/7 days a week. Members should be able to speak with a live person directly for any urgent matters. PCP and obstetricians are expected to respond to after-hour patient calls within 30-45 minutes for non-emergent symptomatic conditions and within 15 minutes for crisis situations.

Care provider responses

The following are examples of acceptable responses for care providers requiring 24/7 or after-hours access:

- The telephone is answered by the care provider, office staff, answering service or voicemail
- The answering service:
 - Connects the caller directly to the care provider
 - Contacts the care provider and the care provider returns the call
 - Provides a telephone number where the care provider or covering care provider can be reached
- The voicemail provides a phone number to contact after-hours coverage
- At the beginning, voicemail instructs to dial 911 for life-threatening emergencies or go to emergency room.

The following are examples of unacceptable responses for 24/7 or after-hours telephone access:

- Office or answering service hangs up
- The care provider's voicemail system:
 - Instructs the caller to go to the emergency room for non-emergent situations
 - Instructs the caller to leave a message for the care provider in an urgent situation
- There is no answer
- The caller is placed on hold for longer than 5 minutes
- The telephone lines are persistently busy despite multiple attempts to contact

We follow up on all instances of PCP and obstetrician unavailability. We conduct periodic access surveys to help ensure all access and availability standards are met. You can find detailed information about **appointment availability and after-hours access** standards at UHCprovider.com/NJcommunityplan > Care Provider Manuals > New Jersey > [View the UnitedHealthcareCommunity Plan of New Jersey Care Provider Manual](#).

We're here to help

Email uhccpnj@uhc.com or call Provider Services at **888-362-3368**, Monday–Friday, 8 a.m.–6 p.m. ET.



