

Access & Availability Standards Training for Behavioral Health Providers

Provider Education & Training

Agenda



**Regulatory
Requirements**



**Timely Access
to Care**



**Appointment
Availability
Standards**

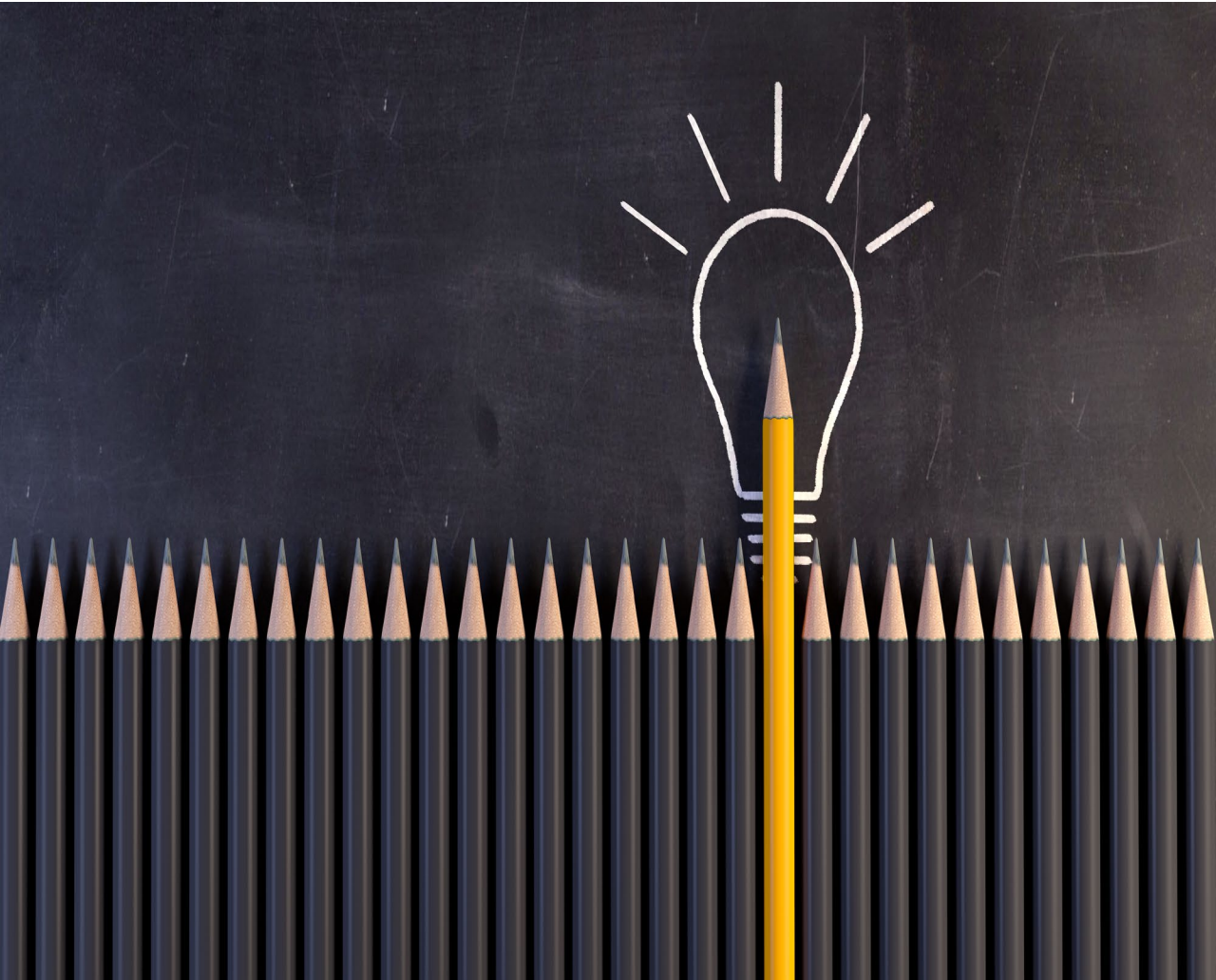


**After-hours
Access
Standards**



Resources

Training objectives



- Review Access to Care, Appointment Availability Standards, and after-hours Access Standards.
- Ensure Providers are adhering to these Access & Availability Standards.
- Make recommendations and provide resources to help better prepare providers to be compliant with access surveys conducted by MetroPlus**Health** and governmental regulators.

Regulatory requirements

MetroPlusHealth has an obligation to regulators to ensure that network providers comply with timely access requirements, and that monitoring is done regularly to determine compliance. Some regulators are listed below.





Access to care

Providers are required to deliver timely Access to Care by scheduling appointments in accordance with the Access & Availability Standards.

Providers ***cannot*** require a new patient to provide prerequisites to schedule an appointment, such as a copy of their medical records, a health screening questionnaire, and/or an immunization record.

Monitoring of compliance will be conducted through periodic surveys led by MetroPlusHealth and government regulators for all our Behavioral Health Providers.

To access the Behavioral Health Access and Availability Standards, please click [here](#).

NOTE: See the **Provider Manual** for more in-depth information on access to care requirements for behavioral health providers.

Knowledge check

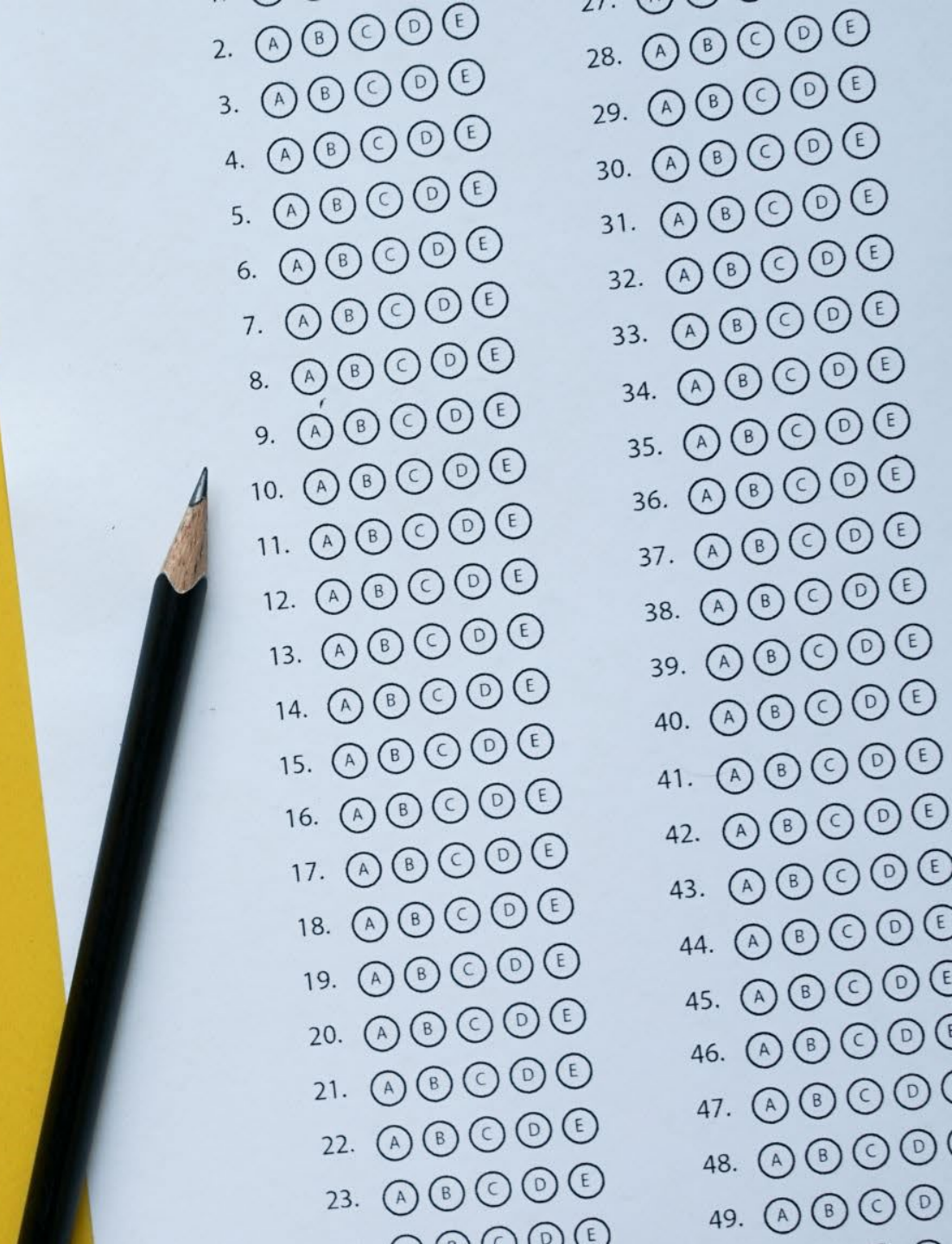


Lately, Dorothy has been quite worried about her husband John. For example, he doesn't want to get out of bed when it's time to go to work and he only seems to be happy when he engages in risky, life-threatening behavior. When she confronts him about this, he stares at her blankly and states, "Life is too short, anyone of us could go at any time." Dorothy is worried and reaches out to John's behavioral health provider. Upon hearing the details about John's behavior, the BH provider should see John:

- Immediately upon presentation
- Within 24 hours
- Within 72 hours
- Within 1 week

The correct answer is...

**Within 24 hours for urgent
care**



Knowledge check

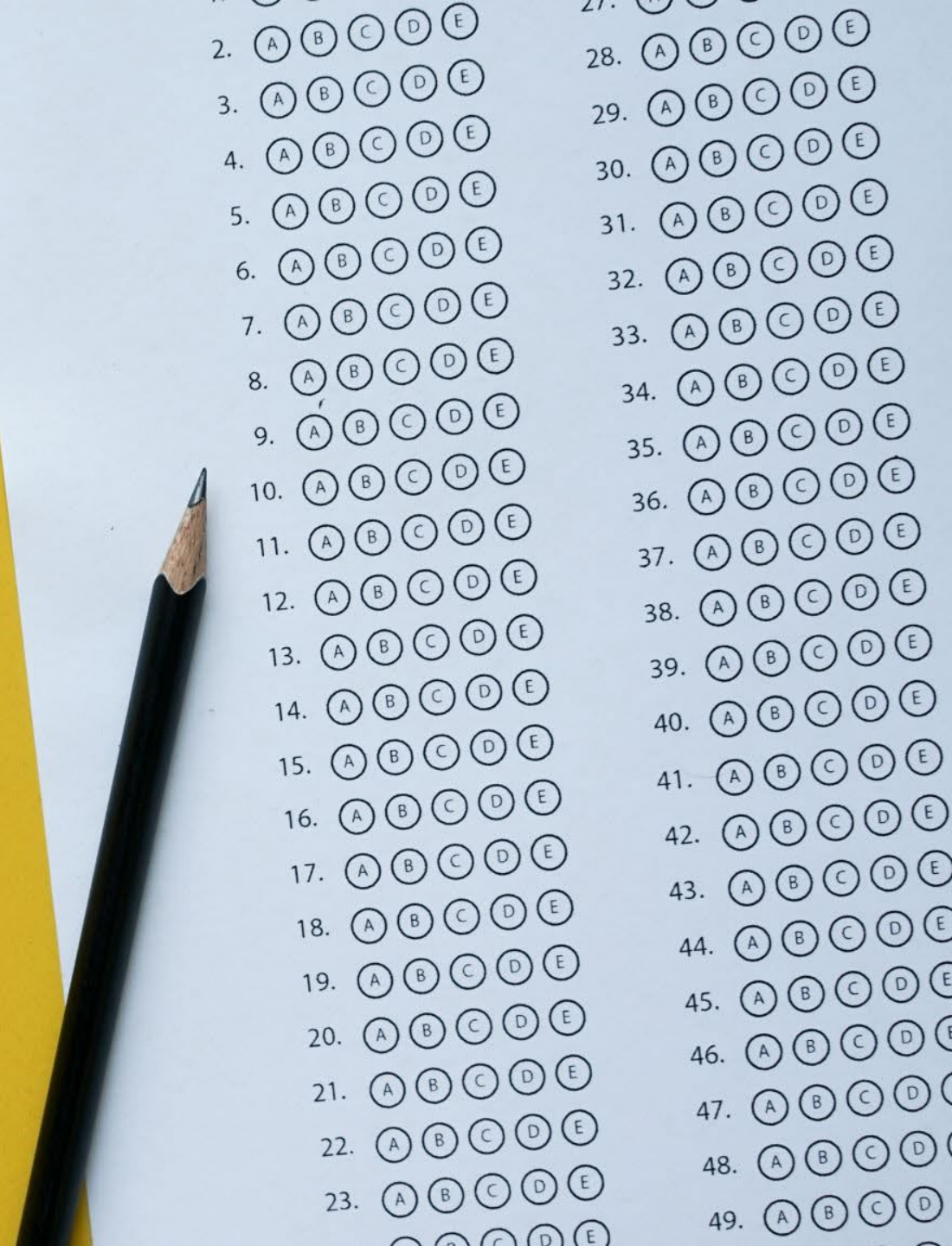


For the following Children MAP Services: MH outpatient clinic/PROS clinic and opioid treatment program that fall under Children Residential Services, Detention Discharge, or Discharge from Justice System, BH providers should follow up:

- Within 24 hours
- Within 5 days of request
- Within 5 business days of request
- Within a timeframe to be determined

The correct answer is...

Within 5 business days of request



After Hours Access Standards 1

- An after-hours contact number at which a live person can be reached must be provided at the time of credentialing.
- An after-hours recording must have a message referring members to a live person able to make a direct connection or alternative arrangements.
- The answering service should instruct members who cannot receive a return call to remain on the telephone while the service attempts to reach the participating behavioral health provider. If this service is not available, providers must establish alternative arrangements.
- On-call Providers must return all phone calls within 30 minutes.

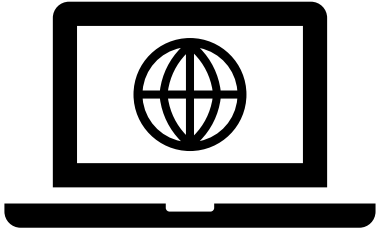


After Hours Access Standards 2



- Providers are responsible for ensuring that members have access to services 24 hours per day, 7 days per week.
- Providers must be on-call or designate a participating behavioral health provider to provide on-call coverage to respond to member concerns after hours, on weekends, and during short and long-term leaves of absence.
- Behavioral Health Providers must have primary responsibility for serving as an after hours “on-call” telephone resource to members with medical problems.
- Under no circumstances can a provider routinely refer calls to an emergency room.

Resources



Visit www.metroplus.org to access information 24/7

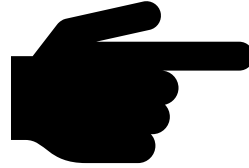
Provider Manual

Provider newsletters

Formularies

Benefits Provider Search

Provider Directory (PDF)



Once you register, you can access the Provider Portal to:

- Check member eligibility
- Check status of submitted claims
- Check member authorization status
- Access provider orientation, benefit changes, & clinical guidelines
- Access membership rosters
- Obtain MetroPlusHealth reports: Membership reports, Utilization reports, Provider Performance Profiles, Diagnosis Code lists



To register, go to:

[Provider | MetroPlusHealth Plan](#)



...for attending this
***MetroPlusHealth Access
& Availability Standards
Training for Behavioral
Health Providers.***

For general questions or concerns, contact the
Provider Call Center at
800.303.9626 to connect with a
Provider Education Trainer.



Metro
Plus
Health
metroplus.org