

# Practice Site Standards

## Purpose

Harvard Pilgrim expects network providers to adhere to specific practitioner office site standards and medical records standards, established by the Harvard Pilgrim Medical Management and Quality Committee.

Site visits are initiated as a response to any member complaints about a practitioner's office as it relates to these standards.

## Site Standards

Requirement	Standards
<b>Telephone Accessibility</b>	<ul style="list-style-type: none"> <li>Reasonable time between pickup and connection with appropriate party</li> <li>Documented process for logging patient calls and returning calls</li> <li>There is telephone coverage with specific practitioner access instructions whenever the office is closed</li> </ul>
<b>Handicapped Accessibility</b>	<ul style="list-style-type: none"> <li>Parking</li> <li>Wheelchair ramps</li> <li>Widened doorways</li> <li>Accessible examination rooms</li> <li>Handicapped-accessible rest room</li> <li>Special arrangements made to see patients if office cannot be made handicapped-accessible (arrangements to be specified)</li> </ul>
<b>Waiting Room</b>	<ul style="list-style-type: none"> <li>Adequate seating and lighting</li> <li>General cleanliness/professional appearance</li> <li>Provisions for confidentiality of patient conversations, in person, and by telephone</li> </ul>
<b>Office Appearance</b>	<ul style="list-style-type: none"> <li>General cleanliness/professional appearance</li> <li>Adequate storage for supplies, equipment, and files</li> </ul>
<b>Signage</b>	<ul style="list-style-type: none"> <li>Patient rights statement available</li> </ul>
<b>Restrooms</b>	<ul style="list-style-type: none"> <li>Rest room available to patients</li> <li>Clean and presentable</li> <li>Easy access for patients</li> </ul>
<b>Examination Rooms</b>	<ul style="list-style-type: none"> <li>General cleanliness/professional appearance/adequate lighting</li> <li>Properly equipped</li> <li>Provides patient privacy</li> <li>Protective equipment for staff (gloves)</li> </ul>

Requirement	Standards
<b>Exposure Control</b>	<ul style="list-style-type: none"> <li>Facilities readily available to staff for hand washing (inside examination room or directly outside)</li> <li>Contaminated sharps placed in appropriate containers that are labeled “biohazard,” leak-proof, and replaced routinely</li> <li>Soiled linens kept separate and labeled biohazard</li> <li>Specimens kept in leak-proof, labeled containers</li> <li>Specimens stored away from food and drink</li> </ul>
<b>Sterilization</b>	<ul style="list-style-type: none"> <li>Separate clean and dirty work area or effective method to prevent cross-contamination</li> <li>Food and drink kept separate from where potentially infectious materials are present</li> </ul>
<b>Medications</b>	<ul style="list-style-type: none"> <li>Medications and samples rotated regularly</li> <li>All medications including samples are secured and inaccessible to patients</li> <li>Expired medications are disposed of through appropriate methods</li> <li>Controlled substances in the office are kept locked as required by federal schedules ii–v</li> </ul>
<b>Emergency Planning</b>	<ul style="list-style-type: none"> <li>Refrigerated medications kept separate from food and drink</li> <li>Posted exit plan</li> <li>Exit signs are clearly posted, and exits are free of obstacles</li> <li>Emergency medications, if applicable, are appropriate and current</li> <li>Staff awareness and training</li> </ul>
<b>Laboratory (if applicable)</b>	<ul style="list-style-type: none"> <li>Universal precautions, as defined by osha, are followed</li> </ul>
<b>Clinician Availability</b> In general, PCPs should not keep members with a scheduled appointment waiting an unreasonable length of time. (For Maine PCPs, an unreasonable length of time means more than 45 minutes.) Office hours are clearly posted.	
<b>Primary care provider</b>	<ul style="list-style-type: none"> <li>Urgent visit within 24 hours</li> <li>Non-urgent appointments for primary care within 10 business days</li> <li>Symptomatic office visit available within seven days</li> <li>Non-symptomatic office visit available within 30 days</li> <li>Emergency coverage available on a 24-hour basis for all covered services</li> <li>Acceptable telephone coverage available after office hours</li> <li>Preventive services within 90 days (ME)</li> </ul>

Requirement	Standards
<b>Specialist care Non-physical mental health</b>	<ul style="list-style-type: none"> <li>• Non-urgent appointments for specialty care within 15 business days</li> <li>• Non-urgent appointments for non-physical mental health within 10 business days</li> </ul>
<b>Specialty adult &amp; pediatric provider</b>	<ul style="list-style-type: none"> <li>• Initial non-urgent visit within 14 days</li> <li>• Initial urgent visit within seven days</li> <li>• Maine—urgent visit within 24 hours</li> </ul>
<b>Behavioral Health/Substance Use Disorder Treatment</b>	<ul style="list-style-type: none"> <li>• A member with life-threatening and non-life-threatening needs must be seen immediately in the emergency room</li> <li>• Urgent care must be available within 24 hours of a member's request. Any Harvard Pilgrim BH/SUD provider may provide this care.</li> <li>• Nonurgent care must be available within 10 calendar days of a member's request. Any Harvard Pilgrim BH/SUD provider can provide this care.</li> </ul>
<b>Medical Records</b>	<ul style="list-style-type: none"> <li>• Records stored in a location accessible only to authorized staff and protected against unauthorized access</li> <li>• Records are organized in a system allowing for easy retrieval/legible file-markers</li> <li>• Records completed and maintained for all Harvard Pilgrim members containing documentation of services rendered by provider</li> <li>• There is a policy in place to ensure patient confidentiality consistent with federal regulations, and Harvard Pilgrim policy</li> <li>• Allergy/adverse reaction status is prominently flagged and routinely updated</li> <li>• There is a consistent method to record a problem list used to document major illnesses and operations</li> </ul>

#### PUBLICATION HISTORY

10/15/15	reviewed; no changes
10/24/16	added clinical availability information for CT
06/15/17	reviewed, no changes
11/02/20	administrative updates for clarity
01/01/23	reviewed; administrative edits
09/11/23	updated for behavioral health insourcing effective on 11/01/23

01/01/24 removed references to Connecticut  
10/07/24 updated Clinician Availability section