

Medical Appointment Standards for Texas Medicaid



Primary care providers and specialists must meet standards for appointment scheduling to help ensure members have timely access to medical care and services. The Consumer Assessment of Healthcare Provider and Systems (CAHPS®) survey asks patients several questions related to access to timely care, such as:

- How often was it easy to get the care, test, or treatment you needed?
- When you needed care right away, how often did you get care as soon as you needed it?
- How often did you get an appointment for a check-up, routine care at a doctor’s office or clinic as soon as you needed?

Appointment Accessibility Standards

Please refer to the table below for CHIP, Texas STAR, and Texas STAR Kids medical appointment accessibility standards. We encourage you to share these appointment accessibility standards with your patients to set expectations.

Texas Medicaid Appointment Availability Standards	
Visit Type	Access Standards
Urgent Care	Within 24 hours
Routine Primary Care	Within 14 calendar days
Preventive Health Services for New Child Members	No later than 90 calendar days after enrollment
Initial Outpatient Behavioral Health Visits	Within 14 calendar days
Preventive Health Services for Adults	Within 90 calendar days
Prenatal Care	Within 14 calendar days
High-Risk Prenatal Care	Within 5 calendar days
Prenatal Care for New Members in the Third Trimester	Within 5 calendar days
Vision Care (ophthalmology, therapeutic optometry)	Access without primary care provider referral

Resources:

Please refer to the [Medicaid Provider Manuals](#) for more information on appointment accessibility standards.

1 [Bright Futures Guidelines](#) (Hagan JF, Shaw JS, Duncan PM, eds. Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents. 4th ed. American Academy of Pediatrics; 2025).

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