Provider Directory Checklist

( ) KRS 304.17A-510(1)(a) Managed care plans must disclose providers by provider category or specialty and by county. The professional office address of each provider should be listed.

( ) KRS 304.17A-510(1)(b) General information about financial incentives.
& KRS 304.17A-590(1)(c)

( ) KRS 304.17A-510(1)(c) Managed care plans standard for customary waiting times for appointments for urgent and routine care.

( ) KRS 304.17A-590(1)(a) Must list all participating providers including anesthesiologists and radiologists.

( ) KRS 304.17A-505(1)(j) Information about drug formularies and their restrictions, limitations, and procedures for authorization outside the formularies.

( ) KRS 304.17A-535(4) Must list exception policy if they do not cover non-formulary drugs.

( ) KRS 304.17A-505(j) Must list the availability of the drug formulary.

( ) KRS 304.17A-590(e) Grievance procedures

( ) KRS 304.17A-505(k) Any willing provider disclosure

Prohibited Provisions

( ) KRS 304.17A-580(2) The definition of emergency medical condition cannot conflict with this section. (Prudent layperson and Presenting Symptoms)

06/04/02