

Application Guidelines for Temporary After-Hours Urgent Care Clinic Program

Purpose of the Program:

Provide a semi-annual lump sum payment to Saskatchewan Medical Association (SMA) and Ministry of Health (Ministry) approved fee-for-service clinics that provide after-hours urgent care services and meet the following eligibility criteria:

- Advertise and operationally offer extended hours 7 days per week, minimum of 350 days per year; and
- Provide in-person urgent care services weekday evenings (starting at 5pm), and during weekends and statutory holidays at any time; and
- See all patients, whether attached or unattached/walk-ins; and
- Satisfy all clinical services and other criteria listed in the "Application Form for Temporary After-Hours Urgent Care Clinic Program".

Payment Calculations and Thresholds:

Eligible fee-for-service clinics will receive a semi-annual lump sum payment based on the level of clinic activity and days of after-hours operation detailed in Table 1.

For the purposes of administering payments:

- Claims system billing data will be used to determine the number of after-hours services and number of operational after-hours days by the clinic.
- Eligible services counted towards the program include:
 - In-person services that are eligible to be billed with the 891B Extended/After-hours office-based visit payment,
 - Virtual care services that are eligible to be billed with the 899B Extended/After-hours virtual care visit payment,
 - F-premium eligible services (as per the payment schedule).
- After-hours days counted towards the program include:
 - "Dates of service" that correspond to above services will be counted towards the after-hours days of the clinic.
- Review of service volumes will occur 30-days following the end of each of the semi-annual assessment periods. Ministry review periods will start May 31 and November 30 of each year.
- It is the responsibility of physicians to submit billings in a timely manner. **Billings submitted after 30-days following the end of assessment periods will not be included in determination of service counts.** Please see "Applications Deadlines and Assessment Periods" section for more information.

Table 1 – Service and Day Counts and Payment Ranges for Clinics Providing Urgent Care Services

Tier	Semi-Annual After-Hours Tier Thresholds			Annual After-Hours Tier Thresholds		
	Services	Days	Payment	Services	Days	Payment
1	15,000+	175+	\$175,000	30,000+	350+	\$350,000
2	11,500 to 14,999	175+	\$140,000	23,000 to 29,999	350+	\$280,000
3	8,000 to 11,499	175+	\$100,000	16,000 to 22,999	350+	\$200,000
4	5,000 to 7,999	175+	\$60,000	10,000 to 15,999	350+	\$120,000
5	3,000 to 4,999	175+	\$35,000	6,000 to 9,999	350+	\$70,000

- There are four assessment periods that are considered for program payments:
 - Assessment Period 1: May 1, 2023 to October 31, 2023,
 - Assessment Period 2: November 1, 2023 to April 30, 2024,
 - Assessment Period 3: May 1, 2024 to October 31, 2024,
 - Assessment Period 4: November 1, 2024 to April 30, 2025.
- For each annual cycle outlined below, the cumulative total of service volume and days of service will be used to determine the total payment for that annual cycle.
 - Assessment periods 1 & 2 make up the first annual cycle.
 - Assessment periods 3 & 4 make up the second annual cycle.
- For each annual cycle, the cumulative total of service counts and days of service will be used to determine the Tier placement and corresponding payment. This means that a clinic that does not qualify for a semi-annual payment (i.e., a 6-month payment) can still qualify for the annual payment if the annual eligibility criteria is met.
- Conversely, a clinic may qualify for a semi-annual payment, but not the annual payment (i.e., the clinic only meets thresholds for one of the semi-annual payments).
- The annual payments outlined in Table 1 represents the maximum total annual payment amount that a clinic can receive through this program.

Program Parameters:

- Program effective date is **May 1, 2023 to April 30, 2025.**
- Eligible clinics will receive payments based on the eligible service volume and day counts of operational after-hours care detailed in Table 1.
- Payments will be calculated and administered by the SMA, based on billing data provided by the Ministry.
- The Ministry and the SMA reserve the right to mutually agree to reduce, suspend or cancel these items, and/or make changes to the rates/amounts paid to ensure financial accountability and effectiveness. Physicians and clinics will be provided a minimum of a 3-month notice of any of these mutually agreed-to amendments, if/when applicable.

Application Process:

- Interested clinics must apply to the SMA for approval by completing the “Application Form for Temporary After-Hours Urgent Care Clinic Program”. Based upon this information the SMA will make a determination of eligibility and will notify the clinic.
- Clinics may be asked to provide additional information (e.g., hours of operation) to substantiate their declaration on the SMA or the Ministry's request.
- Clinics must submit their application 15 days in advance of each assessment period, but only once over the duration of the program.
- Clinics can apply to the program anytime per the application deadlines. Only the assessment periods following clinic application will be considered for payment. For example, all four assessment periods will be considered for clinics that apply by May 15, 2023. For clinics that are applying for the first time by the October 15, 2023 deadline, only the assessment periods 2, 3 and 4 will be considered for payment.

Application Deadlines and Assessment Periods:

There are four assessment periods that are considered for payment:

2023-24:

Assessment Period 1:

Dates: May 1, 2023 to October 31, 2023

Clinic application deadline: May 15, 2023

All claims, corresponding to the assessment period 1, must be submitted before the Ministry review date of November 30, 2023.

Assessment Period 2:

Dates: November 1, 2023 to April 30, 2024

Application deadline: October 15, 2023 (clinics already part of the program do not need to re-apply)

All claims, corresponding to the assessment period 2, must be submitted before the Ministry review date of May 31, 2024.

2024-25:

Assessment Period 3:

Dates: May 1, 2024 to October 31, 2024

Application deadline: April 15, 2024 (clinics already part of the program do not need to re-apply)

All claims, corresponding to the assessment period 3, must be submitted before the Ministry review date of November 30, 2024.

Assessment Period 4:

Dates: November 1, 2024 to April 30, 2025

Application deadline: October 15, 2024 (clinics already part of the program do not need to re-apply)

All claims, corresponding to the assessment period 4, must be submitted before the Ministry review date of May 31, 2025.

Billings submitted after 30-days following the end of assessment periods will not be included in determination of service counts.