The purpose of this bulletin is to reinforce your obligation for the provision of extended hours (After Hours) sessions as set out in the Physician Block Coverage Undertaking of your Comprehensive Care Model (CCM) Agreement and to ensure that you understand the ministry expectation with respect to the provision of comprehensive care to your rostered patients, including educating your patients with respect to the availability and locations of after hours services.

After Hours Services is an important component of many Primary Care Agreements and is an essential element in providing comprehensive care to enrolled patients. By offering pre-booked and walk-in visits during scheduled evening/weekend or statutory holidays After Hours sessions, enrolled patients have greater access to their primary care physician thus ensuring greater continuity of care. Further, the provision of After Hours Services will benefit the health care system by reducing visits to the local hospital Emergency Departments.

The extended hours requirements are set out in the undertaking of your CCM Agreement. You should review the provisions within the agreement and ensure that your extended hours are in compliance with the stated requirements. Further, you should take steps to ensure that your rostered patients are aware of the times and locations of your after hours sessions and encouraged to utilize this service. The ministry will be increasing its efforts to monitor the provision of after hours services and you may be contacted to verify your schedule and/or locations of extended hours services.
Education of Patients

In order for the extended hours to be effective, patients must be informed of their availability. The Physician Block Coverage Undertaking of your CCM agreement requires that physicians advise their patients of the office hours and locations for extended hours by posting a notice in a prominent place in your office and/or by leaving a message on your answering machine. Through promotion and delivery of these services, the ministry hopes to promote comprehensive care in the rostering physician’s practice and divert patients from accessing care in emergency departments. The ministry will be developing tools to assist you in advertising these services to your rostered patients. Further details will be communicated as these tools become available.

Q1. What are the principles governing the provision and billing of After Hours Services?

A1. The After Hours Services principles are as follows:

- The After Hours premium refers to the appropriate Q016A primary health care fee code. This code can only be billed during scheduled After Hours sessions for which rostered patients have been provided appropriate notification (see Q &A #2). The code, when billed with a service included on the list of authorized after hours fee codes, pays a premium of 20% of the fee value of the authorized fee code (for rostered patients).
- No claims for After Hours premiums may be made for services rendered between 8:00 a.m. and 5:00 p.m.
- While any patient can be seen at these scheduled After Hours sessions, the premium is available for only enrolled patients.
- Scheduled After Hours Services must be accessible for all your enrolled patients. Notice of where and when the After Hours sessions are held must also be available to your patients.
- The After Hours Services must be available for both pre-booked and walk-in patient visits. The services must be provided during regularly scheduled 3 hour time blocks outside of regular office hours and each physicians is responsible for ensuring that his/her patients are consistently made aware of all After Hours sessions.
- Physicians cannot alter their regular daytime hours solely for the purposes of billing the Q016A After Hours premium.
- Physicians must be available during regular office hours to provide comprehensive care to his/her enrolled patients. This obligation is specified in section 1 of your CCM agreement.
Q2. How do I make my patients aware of my office hours?

A2. Subject to any specific requirements in your Primary Care Agreement, any reasonable method of informing your patients is acceptable provided there is sufficient notice to all your patients and that pre-booked and walk-in visits are available.

Some methods physicians have used include: posting hours in the waiting room(s), leaving a message on the answering machine(s), producing a practice newsletter with the hours included or sending patients letters or emails. The notice should advise patients where and when you are providing After Hours Services. The ministry will be developing tools to assist you in advertising your after hours services; details to follow.

Q3. My regular clinic runs from 10:00 a.m. to 5:00 p.m. If my office runs overtime and I see my last patient at 5:30 p.m., can I bill the After Hours premium for the patients I saw between 5:00 p.m and 5:30 p.m.?

A3. No. After Hours premiums can only be billed for pre-booked and walk-in patients seen at a regularly scheduled 3-hour session of After Hours sessions. After hours premiums should not be billed for patients seen after 5:00 p.m. because the physician’s clinic is behind schedule.

Q4. I am responsible for providing a 3-hour block on a Saturday. I decide that I will regularly be available for a 5-hour block at that time. Can I bill the After Hours premium for all 5 hours?

A4. Yes, as long as you meet all the requirements for After Hours coverage as outlined in your CCM agreement. Furthermore, you need to ensure that your patients are aware of these hours (see Q&A # 2) and that you offer both pre-booked and walk-in visits during that time period.

After Hours Services must be accessible for all your patients.

Q5. If I decide to have an evening office from 5:00 p.m. to 8:00 p.m. every Monday from November 1 to March 1 because of increased patient volumes during the cold and flu season, can I bill the After Hours premium during those times?

A5. Yes, as long as you meet all the requirements for After Hours coverage in your agreement. You need to ensure that your patients are aware of these hours and locations (see Q&A #2) and that you offer both pre-booked and walk-in visits during these scheduled After Hours sessions. The After Hours session must be for a regular 3-hour block of coverage.

It is recognized that there may be seasonal variation. The key is that your patients must be informed at all times of when and where the After Hours service is available.

Scheduled After Hours Services must be accessible to all your patients.
Q6. Am I required to provide after-hours services on a recognized holiday?

A6. No. Physicians are not required to provide after hours services on the following defined recognized holidays: New Year’s Day, Good Friday, Victoria Day, Canada Day, August Civic Holiday, Labour Day, Thanksgiving, Christmas Day and Boxing Day.

A physician who willingly provides after-hour sessions on a recognized holiday is entitled for the Q016A code so long as the session is offered in a 3-hour time block for both pre-booked and walk-in visits and that patients are made aware of these hours and locations in advance of the session held.

If the holiday falls on a Saturday or Sunday either the Friday before or the Monday before will be recognized as the holiday and the physician can bill the after-hours premium for enrolled patients.

Q7. Is it acceptable for physicians to deduct/reduce hours from their regular office hours and then provides the 3-hour After Hours Services in the evening/early morning?

A7. No. It is not acceptable to alter office hours solely for the purposes of billing the After Hours premium. Please refer to in section 1of your CCM agreement for providing comprehensive care services to your patients.

Q8. If my regular office hours are between 12 noon and 8:00 p.m., am I entitled to receive the After Hours premium between 5:00 p.m. and 8:00 p.m.?

A8. Yes. Individual physicians may bill this premium between 5:00 p.m. and 8:00 p.m. if the services provided between 5 p.m. and 8 p.m. are available for pre-booked and walk-in group patients. However, the physician must ensure that sufficient and convenient coverage is provided to their patients during morning hours and that all patients are aware of the times and locations of the After Hours Services after 5:00 p.m.

Patients must be provided notice and permitted access to the After Hours Services.

Q9. My office hours are scheduled from 8:30 a.m. to 5:30 p.m. Monday to Thursday, and Friday 8:30 a.m. to 7:00 p.m. Would my present hours on Friday be sufficient to meet the requirements of Block Coverage, or would I have to stay open until 8:30 p.m. on Friday?

A9. No. Scheduled After Hours services must be in a regular 3-hour block, after 5:00 p.m. on weekdays or anytime on Saturdays, Sundays or on statutory holidays.

The Friday Block Coverage and entitlement to the After Hours premium would have to be a 3-hour block beginning no earlier than 5:00 p.m. If the After Hours Services commence at 5:00 p.m., the office would have to stay open until 8:00 p.m. and satisfy the After Hours principles including appropriate patient notification (see Q & A #2).
Q10. What do I do if block coverage is advertised say for Friday 5:00 p.m. to 8:00 p.m. and patients do not book any appointments say past 6:00 p.m.?

A10. In order to fulfill the requirements of your contract you must provide a regular 3-hour session of After Hours coverage to remain in compliance with the terms of your CCM agreement. As a result, you are expected to be available for any walk-in patient(s) that may present at any time during the scheduled 3-hour After Hours session. Times during which there are neither pre-booked nor walk-in patients can be used for other clinic activities.

Q11. Is it acceptable that my office is by appointment only for after-hour services, no walk-ins?

A11. No. You need to ensure that you offer all patients both pre-booked and walk-in visits during your scheduled After Hours sessions.

Q12. Are there any guidelines on the ratio of pre-booked to walk-in appointments for the Block Coverage requirement?

A12. Physicians are free to arrange pre-booked appointments as well as have availability for walk-in patient visits during scheduled evening/weekend or statutory holidays after hour sessions in a manner that would sufficiently and conveniently serve their enrolled patients.

Q13. What are reasonable hours to provide After Hours Sessions for patients? Are there any restrictions on when I can offer them e.g. 5:00 a.m. to 8:00 a.m. or 8:00 p.m. to 11:00 p.m.?

A13. The After Hours premium cannot be billed between 8:00 a.m. and 5:00 p.m. (with the exception of Statutory Holidays and weekends). You may consider it reasonable that the regular 3-hour block of scheduled After Hours Services during the weekday begins anytime between 5:00 p.m. and 7:00 p.m.; however, reasonableness of one’s office hours depends, in part, on the demands and needs of the patients in your group.

Physicians must be available during regular and reasonable office hours to provide comprehensive care to their patients. Your agreement states that evening and weekend After Hours Services, shall be provided in a 3 hour block one day per week Monday to Thursday night or a minimum of a 3-hour block of coverage on the weekend or on statutory holidays.

Physicians can choose to offer scheduled After Hours Services on either Saturday or Sunday in place of their weekday evening hour block requirements.
Q14. Where can Block Coverage be provided?

A14. Block Coverage for After Hours Services should be provided at a physician’s office provided that patients are made aware of the times and locations (see Q&A#2) of all After Hour services and that both pre-booked and walk-in patients can access these sessions.

After Hours Sessions must be accessible to all patients.

A14. Block Coverage for After Hours Services should be provided at the location you originally provided in your CCM agreement. If you wish to change this location, you must contact your Ministry representative at 1-866-766-0266 and immediately advise your patients of the new location where you will be providing after hours.

After Hours sessions including information on the times and location must be accessible to your patients.

Q15. Does Block Coverage/After Hours have to be provided in a 3-hour block? Can I divide the Block?

A15. Scheduled After Hours Services must be provided as a regular 3-hour block of coverage. You cannot divide the block but you are permitted to extend it beyond 3 hours. You are eligible for payment of premiums beyond the 3-hour block but notice to your patients must be provided (see Q&A #2). Furthermore, all the principles of the provision of After Hours Services must be met.