

Facility Standards for Urgent Care Centers

Each Urgent Care Center must maintain compliance with the Blue Cross and Blue Shield of Nebraska (BCBSNE) Facility Standards for Urgent Care Centers to provide a safe and confidential environment that is conducive to the delivery of effective patient care for members as well as the protection of the facility staff.

The Urgent Care Center facility is a location distinct from a hospital emergency department, office, or clinic, whose purpose is to diagnose and treat illness or injury for unscheduled, ambulatory patients seeking immediate medical attention.

The standards have been approved by the BCBSNE Credentialing Committee and Quality Management Committee.

CATEGORY	STANDARD
Facility	<ul style="list-style-type: none"> • The facility must meet BCBSNE On-Site Review Program Facility Standards for Practitioner Offices and the following Facility Standards: <ul style="list-style-type: none"> - The facility is in compliance with applicable federal, state and local laws and regulations. - The facility is a legally constituted entity, or an organized sub-unit of a legally constituted entity or is a sole proprietorship in this state. - The facility maintains adequate malpractice liability insurance. • The following must be available during all posted hours of operation for the facility: <ul style="list-style-type: none"> - Radiology, laboratory and ECG services on-site. - Licensed MD, DO, APRN, PA on site with the appropriate state licenses and resources to: <ul style="list-style-type: none"> - Obtain and read results of laboratory, ECG and X-ray performed on site. - Administer PO, IM & IV medication/fluids on-site. - Perform minor procedures (e.g., sutures, cyst removal, incision and drainage, splinting) on-site. - At least two exam rooms, separate waiting area and restricted-access patient restrooms.

Accreditation is required through one of the following:

- The Joint Commission (TJC)
- Urgent Care Association of America (UCAOA)
- Accreditation Association for Ambulatory HealthCare (AAAHC)
- American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF)
- National Association for Ambulatory Care (NAFAC)
- The American Academy of Urgent Care (AAUCM)
- Notify Blue Cross and Blue Shield of Nebraska of any accreditations or certifications.

Credentialing and Oversight

- Medicare Certification and a Participating Medicare Provider is required.
- The facility must have a licensed physician (MD/DO) designated as Medical Director for the facility, who is responsible for overall clinical quality.
- The Medical Director will be board certified in Family Practice, Internal Medicine, or Emergency Medicine (or Pediatrics, if a Pediatric specialty center).
- There is a written policy and procedure in place that requires review of credentials of each employee and there is enough information to support that the health care practitioner has the necessary knowledge, training and licensure(s) to provide such care within the scope of their license.
- The healthcare practitioner (MD, DO, APRN, PA) privileges are reviewed and approved by the Medical Director of the facility at least every three years.
- Practitioners must maintain adequate security by malpractice liability insurance or by participation in an inter-indemnity trust.
- All practitioners (MD, DO, APRN, PA) working at the facility must be individually credentialed and approved by BCBSNE, except for locum tenens, who will follow BCBSNE established policies.
- During hours of operation, at least one physician (MD,DO) is either present or immediately available to staff by phone.

Emergency Response

- The facility has a written policy and procedure in place to evaluate, stabilize and transfer emergencies.
 - Staff are available on-site and qualified to provide, at a minimum, Basic Life Support (BLS), during all hours of operation, as evidenced by current certifications.
 - A minimum of two staff persons must be on the premises, one of whom must be either a licensed physician or a licensed healthcare professional if a patient is present who has not been discharged from supervised care.
 - The following equipment and staff trained in its use are available on-site during all hours of operation:
 - Automated External Defibrillator (AED) or more advanced device.
 - Working phone to dial 911
 - When the facility is not open, directions are provided to the public about where to access 24-hour healthcare.
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Access and Availability

- Facility must accept and advertise that walk-in patients of all ages are accepted for a broad spectrum of illness, injury and disease during all hours the facility is open to see patients. (Pediatric specialty centers are exempt from this age requirement IF pediatric-only specialization is included in the name of the facility).
- Minimum hours of operation (must meet at least three of the following criteria):
 - Extended hours in evenings and on weekends for patients to receive treatment when their personal physician is not available.
 - 7 days/week (not including national holidays)
 - 4+ hours each day
 - 3000 hours per year
- The facility's hours of operation are clearly defined and communicated to the public and relevant organizations. (NAFAC)

Continuity of Care

- When the need arises, the facility assists patients with the transfer of their care from one health care professional to another, including adequate and timely transfer of urgent care center medical record information to the patient's primary or specialty care providers.
 - When clinically indicated, patients are contacted for follow-up regarding abnormal laboratory or radiological findings that have been identified and documentation of the follow-up is completed. Policy should delineate a routine system for notifying patients of test results.
 - Written discharge criteria must exist.
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