

 Saskatchewan Ministry of Health	Regional Health Services Policy & Procedure Manual	Status: Current
		Effective Date: December 14, 2010
	Approved By: Acute and Emergency Services Branch	Page: 1 of 3
	Section: Acute and Emergency Services	Branch Contact: 787-3204
	Title: ROAD AMBULANCE FEES	

INTENT:

The intent of this policy is to establish the maximum allowable rates to be charged by road ambulance services based in Saskatchewan, for road ambulance service.

LEGISLATIVE AUTHORITY:

The Ambulance Act, Section 43(a)
The Ambulance Regulations, Part II

POLICY:

Regional Health Authorities determine, within the maximum rates (fee ceilings) established by the Province, ambulance fees for road ambulance operators based within their regions.

1. The maximum allowable rates for road ambulance services for Saskatchewan residents effective December 14, 2010 are as follows:
 - (a) For ambulance services based in Regina, Saskatoon, Moose Jaw, Prince Albert, North Battleford, Nipawin, and Spiritwood (serving those cities and surrounding areas):
 - maximum basic pick-up charge of \$325 per call
 - maximum kilometer charge of \$2.30 per km.
 - no increase to waiting time charges (range from \$50 to \$100 per hour), with no charge for the first half hour.
 - Effective August 2007, other road ambulance services may be eligible to access this basic pick-up charge, based on established criteria and the RHA's priorities for enhancements to emergency medical services. The criteria for accessing the higher rate can be found in the "Procedure" section of this policy.
 - (b) For all other areas of the province:
 - maximum basic pick-up charge of \$245 per call
 - maximum kilometer charge of \$2.30 per km.
 - no increase to waiting time charges (range from \$50 to \$100 per hour), with no charge for the first half hour.
 - (c) The Ministry of Health has programs in place to assist Saskatchewan residents with the cost of road ambulance services, including such programs as the Senior Citizen's

Ambulance Assistance Program, the Supplementary Health Program, and the Children's Benefit Program. Details of these programs can be found in the "It's For Your Benefit" brochure, which can be accessed online at:

<http://www.health.gov.sk.ca/adx/asp/adxGetMedia.aspx?DocID=1066,94,88,Documents&MediaID=702&Filename=health-coverage-booklet.pdf>

2. The maximum allowable rates for road ambulance services for out of province or out of country residents effective July 1, 2006 are as follows:
 - maximum basic pick-up charge of \$330 per call
 - maximum kilometer charge of \$2.90 per km.
 - waiting time charges of \$100 per hour, with no charge for the first half hour.
3. Rates for other services (e.g. stand-by time and incomplete calls) as set out in The Ambulance Regulations are determined by the Regional Health Authorities and are subject to prior approval by the Minister.

PROCEDURE – CRITERIA FOR ACCESSING THE HIGHER (PARAMEDIC) RATE:

1. The ambulance service provider (operator) must:
 - Through the service agreement with the health region and/or in the Ministry/Regional Health Authority (RHA) accountability document;
 - Commit to maintaining continuous patient access (24 hour per day, 365 days per year) to EMT-paramedic-level service for emergency calls,
 - Provide an EMT-paramedic as part of the team responding to the patient,
 - Provide EMT-paramedic staff through regular staffing arrangements (scheduled or on-call); and,
 - Demonstrate historical ability to recruit and retain EMT-paramedic staff.
 - Inform the RHA/Ministry of any potential gaps in EMT-paramedic-level service. If the operator must suspend EMT-paramedic-level service (e.g. due to staffing), beyond a specific time period (e.g. 7 days), access to the EMT-paramedic rate would be suspended and future access to the rate would be reviewed by the RHA/Ministry.
2. The Regional Health Authority (RHA) must:
 - Review region-wide priorities for enhancements to emergency medical services;
 - Within available resources, prioritize the development of EMT-paramedic-level service;
 - Through preparation of a business case establish an assessed need for development of an EMT-paramedic-level service considering the following:
 - Total historical call volume and volumes of high acuity and emergency calls;
 - Demographics of the geographic core area covered by the ambulance service

(Note: if the service has a call volume below which establishment of an EMT-paramedic-level service might generally be recommended, the following may also be considered);

- The distance of the ambulance base from the nearest hospital.
 - Determine priorities for use of any increased revenue generated by a fee increase (e.g. to cover operating costs, vehicle replacement, etc.).
3. The Ministry will:
 - Review the business case provided by the RHA including historical call volumes, a retrospective review of both patient care reports and dispatch records identifying specific cases where an EMT-paramedic would be required, information on the scheduling of frontline personnel and the staff roster of the service by level of EMS registration for up to a 24 month period;
 - Consult with the RHA regarding the review; and
 - Confirm that additional funding is not required from the Department.
 4. If there is Ministry and RHA agreement to proceed, the RHA/service provider agreement and the Ministry/RHA accountability document will be amended to include the relevant service commitments.
 5. Once all above criteria are met, the Regional Health Authority must provide written notice of its intention to increase fees for a particular service to the Ministry at least 30 days prior to implementing the fee increase.