



National Urgent Care Center Accreditation

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INTRODUCTION

National Urgent Care Center Accreditation (NUCCA) is an organization that provides accreditation to properly qualified Urgent Care Centers throughout the United States. The National Urgent Care Center Accreditation program is recognized by leading medical organizations to provide such accreditation.

National Urgent Care Center Accreditation (NUCCA) has developed a program of survey and accreditation specially designed for Urgent Care Centers. National Urgent Care Center Accreditation has been able to refine previously proven survey criteria and methods and have created a program of accreditation that is more streamlined, emphasizing the most important elements of quality for Urgent Care providers and facilities. Accreditation is meant to be a learning process for those who undertake it. Once successfully completed, the accreditation is to symbolize – to patients, payers, and colleagues – the highest level of commitment to one's patients and the practice of Urgent Care Medicine.

The assurance that healthcare providers and facilities maintain adequate levels of quality is of vital importance to patients and those who pay for their care.

BENEFITS OF ACCREDITATION

The benefits of accreditation are many. The process itself should prompt the operators of an Urgent Care Center to closely examine their facility and the way in which they care for patients. Areas needing improvement can be identified and addressed during the preparation period. Knowledge of, and close adherence to, the survey standards provide basic assurances to patients and payers that the care provided at a center is state-of-the-art and that a center's policies and practices provide for ample safety and privacy. Accreditation demonstrates the highest level of commitment to providing the highest quality medical care and symbolizes medical practice that is consistent with the highest ideals of the specialty of Urgent Care Medicine.

WHY ACCREDITATION IS IMPORTANT

Urgent Care organizations value accreditation as a measure of professional achievement and quality of care. Urgent Care Centers welcome the National Urgent Care Center Accreditation survey as a constructive learning experience. The NUCCA certificate of accreditation is a benchmark of quality, not only to those involved in the health care industry, but to the general public as well. Because of the excellence of National Urgent Care Center Accreditation standards and the thoroughness of its survey procedures, many third-party payers, commercial insurance carriers, local and state agencies will recognize Accreditation as a value and/or a requirement. In addition, professional liability carriers acknowledge that accreditation is a valuable indication of quality and frequently consider it in evaluating an organization applying for coverage.

THE ACCREDITATION PROCESS

Once an Urgent Care Center has decided to become Accredited, they can begin the accreditation process by downloading the Accreditation Application from ucaccreditation.org/apply-for-accreditation.html.

The Step-By-Step Guide will walk you through the accreditation process. For an overview of accreditation, and the standards of accreditation, see the Handbook for Accreditation. The Self-Assessment Guideline is a comprehensive overview of all the standards of compliance for Accreditation. Centers applying for Accreditation are encouraged to utilize the Self-Assessment Guideline to prepare for the on-site review. Preparing for the survey is important because it is meant to be as much a learning experience as a preparation for assessment. An order form to purchase the Self-Assessment Guideline can be downloaded from ucaccreditation.org/apply-for-accreditation.html.

On the survey date, the surveyor will examine the facility, personnel qualifications, records and other important documents, policy and procedure manuals, etc. Following the on-site review, the reviewer will complete a survey report for NUCCA which will include any recommendations (if any) and/or other pertinent information (if applicable), and make a recommendation pertaining to your accreditation. If the reviewer has noted any areas of improvement, you will receive a letter and/or email from NUCCA indicating which items need to be corrected and instructions for submitting documentation to demonstrate improvement and compliance.

THE ACCREDITATION SURVEYOR

The accreditation surveyor is an advocate for the Urgent Care Center, providing advice, knowledge and guidance for the center to improve quality and achieve accreditation. The on-site survey is meant to be as much a learning experience as an assessment of the standards of accreditation. The on-site review is an assessment of your medical practice's compliance with applicable standards and adherence to the policies and procedures of the accreditation program. During your on-site visit the reviewer will be reviewing the following areas:

- Rights of Patients:** The clinic recognizes the basic human rights of patients.
- Governance:** The clinic has a governing body that sets policy and is responsible for the facility.
- Administration:** The clinic is administered in a manner that ensures the provision of high-quality health services and that fulfills the organization's mission, goals and objectives.
- Quality of Care Provided:** An accreditable clinic provides high-quality health care services in accordance with the principles of professional practice and ethical conduct, and with concern for the costs of care and for improving the community's health status.
- Quality Management and Improvement:** In striving to improve the quality of care and to promote more effective and efficient utilization of facilities and services, an accreditable organization maintains an active, integrated, organized, peer-based program of quality management and improvement that links peer review, quality improvement activities, and risk management in an organized, systematic way.
- Clinical Records and Health Information:** The clinic maintains clinical records and a health information system from which information can be retrieved promptly. Clinical records are legible, documented accurately in a timely manner, and readily accessible to health care practitioners.
- Professional Improvement:** The organization strives to improve the professional competence and skill, as well as the quality of performance, of the health care practitioners and other professional personnel it employs.
- Facilities and Environment:** The clinic provides a functionally safe and sanitary environment for its patients, personnel, and visitors.

- Immediate/Urgent Care Services: The clinic implies by its activities, advertising, or practice that it provides medical care of an urgent or immediate nature on a routine or regular basis such care meets the needs of the patients and is provided in accordance with ethical and professional practices and legal requirements.

- Pharmaceutical Services: Pharmaceutical services provided or made available by an accreditable clinic meet the needs of the patients and are provided in accordance with ethical and professional practices and legal requirements.

- Pathology and Medical Laboratory Services: Pathology and medical laboratory services provided or made available by an accreditable clinic meet the needs of the patients and are provided in accordance with ethical and professional practices and legal requirements.

- Diagnostic Imaging Services: Diagnostic imaging services provided or made available by an accreditable clinic meet the needs of the patients and are provided in accordance with ethical and professional practices and legal requirements.

DURATION OF ACCREDITATION

Accreditation is awarded for a term of three years when an organization is in substantial compliance with the standards of accreditation. Urgent Care centers applying for accreditation under the Early Survey Program are eligible for up to a maximum of a one-year term of accreditation. Please see information about the Early Survey Program below.

An Urgent Care Center is awarded accreditation for one year when a portion of the organization's operations are acceptable, however other areas need to be addressed and the organization requires sufficient time to achieve compliance. The organization must have an on-site review one year from the previous survey date to avoid a lapse in accreditation. Such an on-site review will be conducted by the surveyor in a visit to the organization at the prevailing fee (see accreditation fees).

EARLY SURVEY PROGRAM (ESP)

It is not uncommon for many insurance carriers to mandate accreditation of a medical practice before that entity may begin any dialogue for providing coverage or reimbursement. The Early Survey Program (ESP) is a survey program developed for medical practices that are newly constructed and require accreditation for health insurance, managed care, or third-party reimbursement and/or require accreditation for the purposes of state regulations that mandate some form of accreditation before a facility can legally begin operations. An Urgent Care Center may apply for accreditation up to eight months before the clinic becomes operational. The clinic will need to have all policies and procedures in place in order to meet the standards of accreditation. Urgent Care centers applying for accreditation under the ESP are eligible for up to a maximum of a one-year term of accreditation from the initial on-site review.

ACCREDITATION FEES

1 clinic: \$3,500

2 or more clinics: \$3,500 for the first location + \$500 per location for each additional location

For groups with 50 or more clinic locations, the price per location for 51 or more locations is \$3,500 for the first location + \$450 per location for each additional location. For groups with 100 or more clinic locations, the price per location for 101 or more locations is \$3,500 for the first location + \$350 per location for each additional location.

The application fee must accompany the accreditation application. The clinic is also responsible for travel expenses for the surveyor (airfare, hotel, car rental, meals, parking, tolls, etc.) [to be invoiced to the clinic after completion of the on-site review(s)].

REACCREDITATION

When a clinic is due for re-accreditation, the Accreditation Coordinator will send a renewal notice and invoice via email and postal mail to the clinic 90 days ahead of the renewal date. The Accreditation Coordinator will coordinate with the clinic and the reviewer to schedule which locations will be reviewed and the dates of each review to ensure a smooth review process.

REACCREDITATION FEES

1 clinic: \$3,000

2 or more clinics: \$3,000 for the first location + \$450 per location for each additional location

For groups with 50 or more clinic locations, the price per location for 51 or more locations is \$3,000 for the first location + \$400 per location for each additional location. For groups with 100 or more clinic locations, the price per location for 101 or more locations is \$3,000 for the first location + \$300 per location for each additional location.

CONSULTATION SERVICES

Consultation services with an accreditation surveyor are available for any Urgent Care center that needs assistance preparing for their on-site Accreditation review. Because the review is meant to be as much a learning experience as an assessment of the clinic's operations, a consultation prior to the official review is a great way for clinics to learn first-hand from the surveyors. The surveyor will outline what the clinic can anticipate during the assessment, providing advice and insight, identify common pitfalls and pinpoint any areas where the center may be deficient. The surveyor will also provide suggestions and recommendations for areas of improvement. This will assist with preparation for the official review.

Consultation services are available for \$1,000 per day (plus travel expenses).

If a clinic needs minor guidance prior to their on-site review, but is not in need of a consultation visit, phone consultations with the surveyor are available. Phone consultations are available for \$200 per hour (price will be pro-rated if a full hour is not used or needed).

REFUND POLICY

Urgent Care Centers have 14 days from the date the application and application fee is received by National Urgent Care Center Accreditation (confirmation of receipt of payment is sent via email by the Accreditation Coordinator) to request a refund of their application fee (less \$500 processing fee to be retained by National Urgent Care Center Accreditation) if they elect not to seek accreditation. Notification of non-pursuit of accreditation and request for refund must be submitted in writing (via postal mail or email). After 14 days all fees are non-refundable. If a clinic submits an application and application fee but never schedules an on-site, all fees will be retained by NUCCA

Urgent Care Centers have up to six months from receipt of the application for accreditation by National Urgent Care Center Accreditation (confirmation of receipt of the application is sent via email the, Accreditation Coordinator) to complete the accreditation review. During that six-month period, a clinic is designated as "Accreditation Eligible". If the accreditation review is not completed within six months of submission of the application for accreditation, the clinic will no longer be "Accreditation Eligible" and the application for accreditation will be purged from NUCCA records. All accreditation fees paid will be retained by NUCCA. If a clinic chooses to pursue accreditation after the six-month period, the clinic will need to submit a new application and application fee and the review will need to be scheduled within six weeks of receipt of the new application and fees.

Purchase of any documents such as the Self-Assessment Guideline, Operations Manual Template, Urgent Care Center Quality Assurance Checklist, or any documents purchased from the Documents Database are non-refundable.

RESCHEDULING POLICY

If an Urgent Care Center has an on-site review scheduled and needs to postpone the date of the review, the Urgent Care Center must contact the Accreditation Coordinator no less than 14 days prior to the date of the scheduled review to make a change to the review date. There will be a \$100 rescheduling fee assessed to the Urgent Care Center (payable to NUCCA at the time the review date change is requested by the Urgent Care Center). Any travel change fees incurred by the surveyor will be included in the travel expenses which are invoiced to the clinic after completion of the on-site review.

Two reschedules of the review appointment are permitted. There is a \$100 deferment fee for the each reschedule (payable to NUCCA at the time the review date change is requested by the Urgent Care Center). No additional reschedules will be permitted after the second reschedule.

Limitations and Rights

The applicant and its affiliates agree to hold harmless the National Urgent Care Center Accreditation, its members, officers, directors, governors, examiners and agents of each of them, free and harmless from any damage, expense, complaint, or cause of action whatsoever by reason of any action they, or any of them, may reasonably take in connection with the application, the investigation of same, the failure of the National Urgent Care Center Accreditation to admit the center to the accreditation process.

The information contained in this booklet is accurate as of the date of publication. Clinics are reminded that requirements, policies and fees may change and are encouraged to contact National Urgent Care Center Accreditation for more information. A 3% processing fee will be added for all credit card payments.

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