

# NON-INSURED HEALTH BENEFITS (NIHB) AFTER HOURS MEDICAL TRANSPORTATION ACTIVITY REPORT - SK

DCI Number/Fiscal Year: HC-P051 (2023-2024)

**NOTE:** This document is a representation of the reporting requirements for DCI HC-P051. It is not a reporting template or a data collection tool. Where applicable, reporting templates, guides and data collection tools that will assist you to complete your reporting requirements will be provided by your Regional Office. Please contact your [ISC-FNIHB Regional Office](#) if you have not received a copy of the documents, if you have questions, or require assistance.

## Program Reporting Requirements:

### Annual Report

Fiscal Year: \_\_\_\_\_ Recipient: \_\_\_\_\_

Annual Funding Level: \_\_\_\_\_ Funding Agreement Number: \_\_\_\_\_

Number of after-hours requests: \_\_\_\_\_

Number of after-hours requests approved:

\_\_\_\_\_

Number of after-hours requests resulting from hospital discharges:

\_\_\_\_\_

Number of after-hours exceptions requested: \_\_\_\_\_

Number of after-hours approved: \_\_\_\_\_

Number of after-hours requests resulting from need for urgent medical attention:

\_\_\_\_\_

Number of after-hours appeals:

\_\_\_\_\_

Number of after-hours favourable appeals:

\_\_\_\_\_

The Recipient shall submit to the Minister a report which includes the following information:

1. How are the benefits being provided: (i.e., contracted drivers, van system, individual approvals to clients, private mileage etc.);
2. Major accomplishments in the program during the reporting period;

3. Major challenges in delivering the program during the last reporting period;
4. Identification of factors that may be impacting the budget (i.e., high needs Clients, change in service pattern);
5. Identify any trends in the utilization of after-hours benefits (i.e., geographic areas that use the program most, dates or times of highest use, etc.); and
6. Other relevant observations, comments or information.