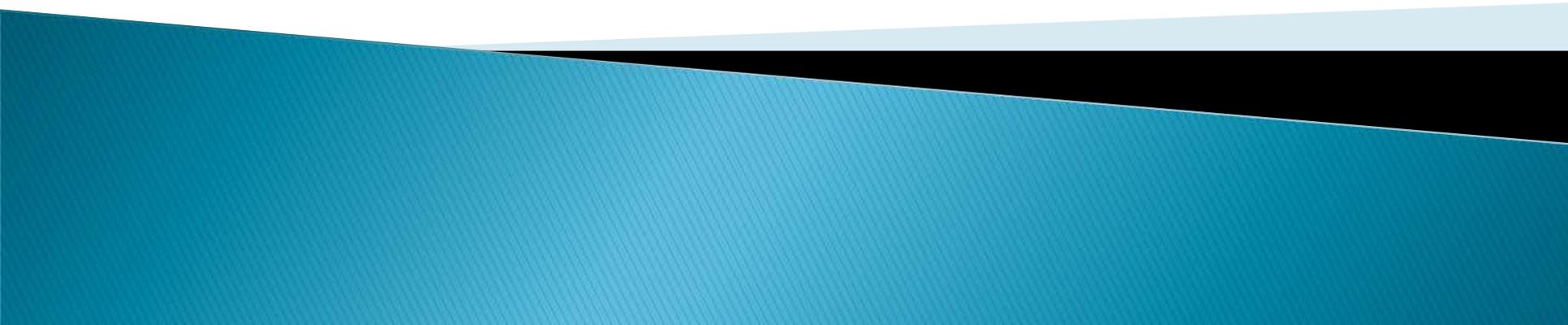


CHS 101

Contract Health Services

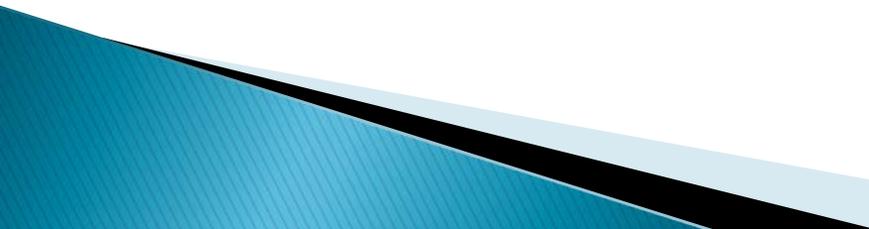
An Overview



CHS Funds



CHS Funds

- ▶ Federally Appropriated
 - ▶ Includes amount for CHEF
 - ▶ Increases last year and current year
 - ▶ Indian Health Care Improvement Act
 - ▶ Finite amount each year
 - ▶ Funds used for referred care and emergency services provided outside IHS/tribal facilities.
- 

CHS Funds

May be used for eligible Indian patients due to:

- ▶ **Unavailability** of Needed Service exists, such as specialty care
 - ▶ **Inaccessibility** of Service, i.e. lack of IHS facility to meet need
 - ▶ **Patient's liability**, such as Private Insurance (in the form of deductibles, co-insurance and co-payments)
- 

CHS Funds

May be used to purchase an array of healthcare services including, but not limited to:

- ▶ Physician services
 - ▶ Inpatient / Outpatient
 - ▶ Renal dialysis services
 - ▶ Vision services, surgery
 - ▶ Services –Dental, Pharmacy, Diagnostic, Rehabilitation services, Patient Transportation
- 

CHS Eligibility

- » Federal Regulations govern the eligibility criterion for CHS

CHS Eligibility Requirements

- ▶ To be eligible for CHS you must first be eligible for Direct Care by providing proof of Indian descent from a member of a federally recognized tribe, and you must;
 - ▶ Reside in the United States, on an Indian Reservation, or within a Contract Health Service Delivery Area (CHSDA), and
 - ▶ Be a member of the Tribe/s located on that reservation or
 - ▶ Maintain close economic and social ties with that tribe/s.
- 

Contract Health Services Delivery Area CHSDA

- ▶ The list of CHSDAs is contained in the *Federal Register*, June 21, 2007, Geographic Composition of CHSDA.
- ▶ CHSDA is defined as the geographic area, made available by the IHS to members of an identified Indian community who reside in the area. [42 CFR Part 136. 22]
- ▶ Residence within a CHSDA by a AI/AN creates no legal entitlement to contract health services but only potential eligibility for services.

Contract Health Services Delivery Area

CHSDA

- ▶ Certain CHSDAs are designated States CHSDAs and certain counties within a state as a CHSDA.
- ▶ Alaska, Nevada, and Oklahoma are designated as CHSDA States.
- ▶ Other CHSDAs are designated based on counties which includes all or part of a reservation, and any county or counties which have a common boundary with the reservation.
- ▶ IHClA passed by Congress in 2010, designates the entire State of Arizona as a CHSDA, but did not provide the needed funding.

Determining Close Economic and Social Ties



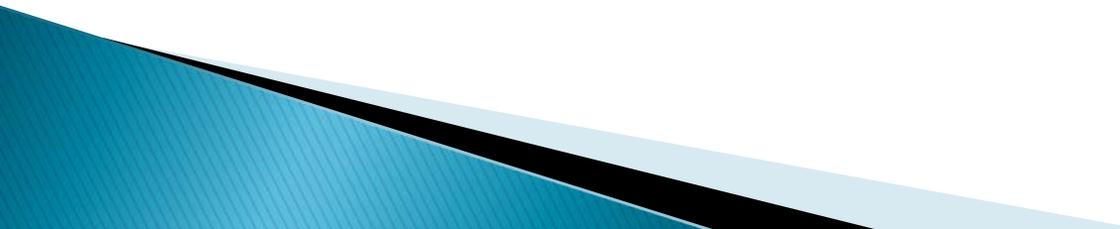
Close Economic & Social Ties

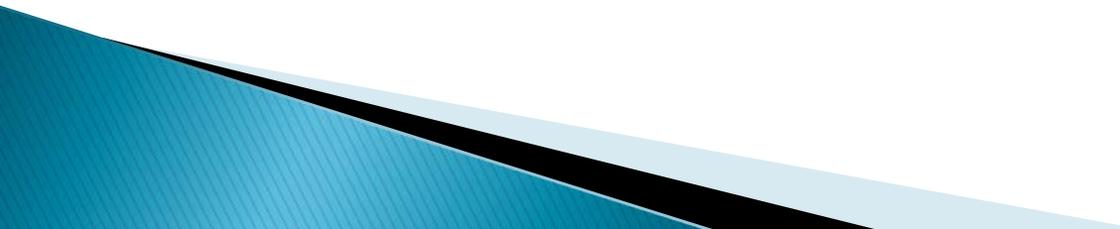
- ▶ AI/AN persons who do not live on a reservation, but reside in the CHSDA must prove close economic and social ties with a tribe/s whose reservation is in the CHSDA. For example:
 - ▶ Married to, or being a minor child under 19 years of age of an eligible tribal member.
 - ▶ Employed by a tribe whose reservation is located within a CHSDA where you live.
 - ▶ Married to, or being a minor child under 19 years of age of an eligible tribal member.

Other Eligibility Rules



Boarding School Student

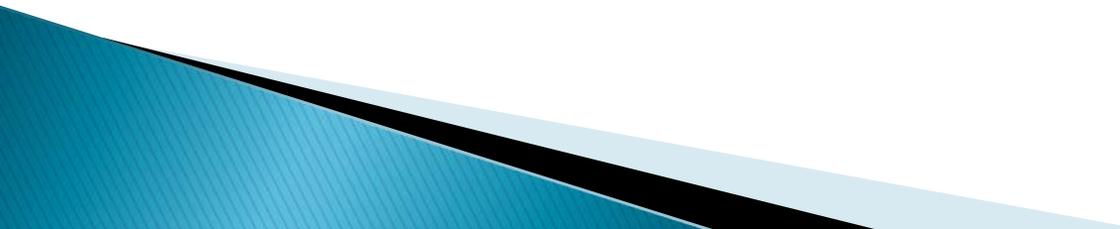
- ▶ Students do not have to be eligible for CHS prior to attending an Indian boarding school.
 - ▶ CHS is provided during a student's full-time attendance by the Area where the Indian boarding school is located.
 - ▶ Phoenix Area/CHS covers students at the Sherman Indian Boarding School in Riverside, California.
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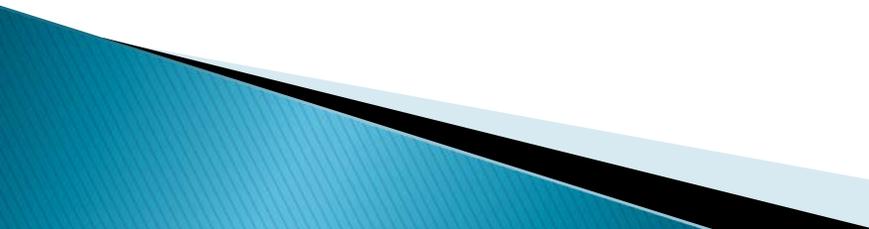
3. Students continue to be eligible for CHS during school breaks, holidays, and 180 days after leaving school.
 4. A student's permanent area of record is responsible to make CHS payment decisions.
- 

Transients

- ▶ A transient is a person who is eligible for CHS in their Area of record, however, they are temporarily on travel, or temporarily employed such as a seasonal or migratory worker.

Be a Student or Transient

1. Students must be eligible for CHS PRIOR to attending college or a technical school, and must be a full time student and provide proof from the school registrar's office .
 2. The Phoenix Area Service Units require students to complete an application form for CHS prior to attending college or a technical school.
- 

- ▶ Children under 19 years of age whether or not they are of Indian descent and are the natural, adopted, step, foster, legal ward, or orphan of an eligible Indian, and are not otherwise eligible.
 - ▶ Non-Indian woman – pregnant with an eligible Indian's child and she must reside in the CHSDA of the eligible Indian.
 - ▶ Non-Indian living in an eligible Indian's household – to control a public health hazard, or an acute infectious disease.
- 

Other CHS Eligibility Considerations

- ▶ Persons who leave the CHSDA where they are eligible for CHS remain eligible for 180 days.
- ▶ Adopted Indian children – by non-Indian parents must meet all CHS requirements such as reside in a CHSDA, apply for alternate resources, etc.
- ▶ Foster and custodial children – continue to be eligible when placed in foster care outside their CHSDA, if they were eligible prior to placement by a court of competent jurisdiction.

The CHS Referral Process



CHS Referrals & Notifications

- ▶ Notifications received from Hospital/ER
- ▶ IHS Physician initiates referral in Electronic Health Record
- ▶ IHS/CHS Committee determines :
 - Patient CHS eligibility,
 - Available payer source,
 - Medical priority level,
 - Estimated cost of service,
 - Alternate resource eligibility potential
 - Disposition: Approvals or Denials referral/notifications

CHS Service Authorization

- ▶ Appointment Coordination with provider and patient
 - ▶ Provider, Dates of Service, and approved follow up appointments are entered in RCIS
 - ▶ To authorize payment, a Service Authorizations is entered into CHS/MIS
 - ▶ Copy of CHS Purchase order sent to provider
- 

CHS Referrals & Notifications

- ▶ IHS uses RCIS (Referred Care Information System) to manage referrals
 - ▶ Every referral or notification from provider are entered into RCIS
 - ▶ Approvals are entered into RCIS
 - ▶ Denied Cases – letters are sent to the client and provider
- 

Service Delivery & Payment



Service Delivery

- ▶ Service delivered by private sector provider
 - ▶ Discharge planning by hospital
 - ▶ Case Management may be available
 - ▶ Private Sector Provider sends bill to IHS Fiscal CHS Intermediary, BCBS of New Mexico
 - ▶ On approved referrals, Provider cannot bill patient – No Recourse Against Patient
- 

CHS Payment Process

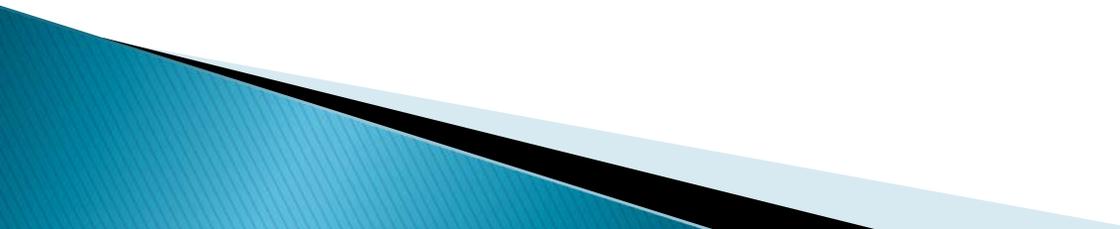
IHS/CHS Fiscal Intermediary

- ▶ FI system interfaces with CHS and IHS financial systems for service authorization and payment obligation
 - ▶ FI coordinates benefits and determines CHS payment amount, sends payment and remittance advice providers
 - ▶ FI sends electronic copies Explanation of Benefits Reports (EOBRs) to providers and IHS facilities
 - ▶ EOBRs are processed at IHS facility, and payments are posted in CHS system
- 

CHS Payment Rules

CHS Payment Rules

- ▶ Prior authorization is obtained from the IHS for non-emergency care. IHS physician makes the referral and is approved by the CHS Managed Care Committee.
- ▶ Emergency Services – The IHS must be notified within 72 hours after the patient receives emergency treatment or hospitalization; and must be approved by the CHS Managed Care Committee

- ▶ The elderly and disabled are allowed 30 days to notify the IHS of emergency treatment or hospitalization.
 - ▶ Medical services must be within the IHS CHS Medical Priorities Levels for CHS payment.
- 

Payor of Last Resort

- ▶ The IHS is the payor of last resort for patients who are CHS eligible notwithstanding any State, or local law, or regulation to the contrary.
 - ▶ The Patient has an alternate resource available to pay for medical services.
 - ▶ The Patient would be eligible for alternate resources if he/she completed the application process.
- 

Medicare Like Rates



CHS Appeal Process

CHS DENIAL and APPEAL PROCESS

- ▶ If CHS payment is denied the patient or provider must appeal within 30 days upon receipt of the notice.

THREE LEVELS of the APPEAL PROCESS

- ▶ 1ST Level – Service Unit CEO
- ▶ 2nd Level – Area Director
- ▶ 3rd Level – Director, IHS

Title I and Title V appeals are processed by
the Tribal Health programs.



**THE
END**