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Indian Health Programs: Payment for Physician and Other Health Care Professional Services and Medical Charges Associated with Non-Hospital-Based Care

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General Comment

I would like to address a concern I have regarding this proposed rule, specifically the following part of the rule that states: "The rule caps the rate that I/T/Us are authorized to pay non-I/T/U health care providers and suppliers for services and leaves no discretion for the I/T/U and the health care provider to negotiate higher rates.... a patient who receives authorized contract care may not be held liable for the payment of any charges. If the medical provider or supplier does not agree to accept the payment rate as payment in full, the I/T/U is effectively precluded from authorizing the care or paying the health care provider or supplier for services rendered to a beneficiary...the patient may be held financially responsible by the provider or supplier of care for the charges." I believe that this will place an undue burden on our PRC eligible patients and will ultimately affect the delivery of patient care. If it becomes common practice for these providers/suppliers of care to not accept the payment rates as payment in full and they in turn start either billing our patients or sending them to the collection agency, 1. The providers will no longer want to treat our PRC patients, and 2. Our patients will be hesitant to seek out necessary medical care for fear of the financial responsibility incurred. The Lake County Tribal Health Consortium clinic is located in a rural area where access to specialty care is extremely limited. We only have a few specialists around the county and it has taken many years for us to build a good working relationship with them. If this proposed rule ultimately becomes regulation as is, many of these relationships that have taken years to build will collapse, and access to specialty medical care in our area will become even more limited or inaccessible all

together. There needs to be some oversight by either CMS or other appropriate agency written in to the regulation that includes a way in which all Medicare-participating medical providers have to, by law, accept our PRC patients and accept these rates. There must be a way to enforce the regulation so that the providers of care DO NOT hold our PRC patients financially responsible.