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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

After personal review of this proposed regulation, please accept this submission as my opinion. These views do not reflect that of the Lassen Indian Health Center (LIHC) as an Organization. I am a Purchased and Referred Care Specialist here at LIHC. Our office processes Medicare-Like Rate claims on a daily basis. We also handle all of our Health Facility's medical, dental, and mental health referrals.

Our location is somewhat remote, being that we are forced due to our geographic location, to send many of our Patients to urban population centers for their specialized medical needs. We are extremely limited here in Lassen County, California. Managed Care here in California has already placed a cumbersome burden on our office in regards to effectively processing our Medicaid patients.

I believe the passing of this kind of regulation for our private insurance patients will have similar, if not, worse effects on our ability to get our patients seen. Most Medical Offices are already cautious about dealing with IHS patients. If these same Offices are forced to take cut rates for our patients because of Federal Regulation, it's safe to say that our already limited roster of Providers will dwindle even more.

The financial benefits to IHS organizations and patients seem obvious; but, in my experience quality Specialists will refuse our patient load. This will greatly diminish the continuity of care for those that are in great need of necessary medical care. I do not want to see this proposal placed into regulation.