Can PRC pay for your referral medical care? Find out in 3 stages.

Manual Exhibit 2-3-B

Coordination and Payment

Stage 1 You are eligible <u>if</u>:

Individual Qualifications

a) You are a member or descendent of a Federally recognized Tribe or have close ties acknowledged by the PRCDA Tribe*

and

b) You live on the reservation or, if you live outside the reservation, you live in a county of the PRCDA

Each Purchased/Referred Care Delivery Area (PRCDA) covers a single Tribe or a few Tribes local to the area.* You are ineligible for CHS elsewhere.

and

c) You get prior approval for each case of needed medical service or give notice within 72 hours in emergency cases (30 days for elders & disabled)

No for the above

Application is denied.

* There are a few narrowly defined exceptions. Ask PRC staff for more specifics about individual eligibility, PRCDA, or prior notice.

Stage 2 Payment may be approved <u>if</u>:

Relative Medical Priorities

- **a)** The health care service that you need is medically necessary
- as indicated by medical documentation provided

and \

b) The service is <u>not</u> available at an accessible IHS or Tribal facility

and

Yes

for

all

c) The facility's PRC review committee determines that your case is within the current medical priorities of the facility

Unfortunately, PRC funds often are not sufficient to pay for all needed services. When this happens, the committee considers each individual's medical condition to rank cases in relative medical priority. Cases with imminent threats to life, limb, or senses are ranked highest in priority. ***

and

d) PRC funds available are sufficient to pay for the service to be authorized

No for the above

Application is deferred.

** Ask PRC staff for more specifics.

Stage 3 Approval, Billing, Payment

a) You must apply for any alternate resources for which you may be eligible
Medicare, Medicaid, insurance, etc.

then

b) A PRC purchase order is issued to a provider authorizing payment for services

then

Yes

for ∎all

c) IHS or Tribal staff and the authorized provider coordinate your medical care

then

d) The authorized provider bills and collects from your alternate resources

then

e) The authorized provider bills any unpaid balance to PRC for payment – because PRC is payer of last resort, it pays only for costs not paid by your alternate resources

Steps are completed in order

Provider is paid.

Specific services authorized within relative medical priorities may vary from time-to-time in response to changing supply and demand, especially to stretch diminished funds over the remainder of the fiscal year.