Amendment #4

AGREEMENT
BETWEEN
DEPARTMENT OF VETERANS AFFAIRS
VETERANS HEALTH ADMINISTRATION
AND
DEPARTMENT OF HEALTH AND HUMAN SERVICES
INDIAN HEALTH SERVICE
FOR
REIMBURSEMENT FOR DIRECT HEALTH CARE SERVICES

In accordance with paragraph E. of Section X. GENERAL PROVISIONS and notwithstanding Amendments 1, 2 and 3. The below sections shall be amended, effective on March 1, 2020.

I. Section IV. DEFINITIONS, the paragraph beginning with “Direct Care Services:” shall be replaced with the following:

Direct Care Services: The term “direct care services” means any health service that is provided directly by Indian Health Service (IHS), including services delivered through telehealth. “Direct care services” does not include care or service provided by IHS through the IHS Purchased/Referred Care program for care provided outside of the facility. This term does not include travel expenses incurred by eligible Veterans. [Note: Telehealth includes clinical interactions between the patient and the physician or practitioner at a distant site using synchronous telehealth (i.e., video/audio communications)].

II. Section VI. QUALITY, section A, shall be replaced with the following:

Certification and Accreditation: In order to receive reimbursement, each facility of the IHS facility must meet conditions and requirements for participation in Medicare or Medicaid, as demonstrated by enrollment or certification in Medicaid or Medicare, or by maintaining accreditation with an organization recognized by the Centers for Medicare and Medicaid Services, such as the Joint Commission or Accreditation Association for Ambulatory Health Care. Each IHS facility shall submit enrollment/certification or accreditation information to the Department of Veterans Affairs (VA) upon request during the effective period of this Agreement and notify VA within 15 days of any disenrollment or loss of certification or accreditation.

III. Section XII. PERIOD OF AGREEMENT, shall be modified with the following:

This Agreement shall be effective through June 30, 2024. VA obligations under this Direct Care Services Reimbursement Agreement shall be subject to the availability of appropriated funds.
The below sections shall be added, effective on March 1, 2020.

XIII. During the coronavirus (COVID-19) emergency period ONLY, the Secretary for VA shall reimburse for care or service provided by IHS through a contract established by IHS (Purchased Referred Care) for care provided outside of the facility, when that care consists of: 1. items and services as described in section 6006(b) of division F of the Families First Coronavirus Response Act (or the administration of such products) for eligible American Indian/Alaska Native Veterans; or 2. hospital care and medical services for covered Veterans for the treatment of the virus SARS–CoV–2 or COVID-19.

VA will reimburse at the rate paid by the United States to a provider of services (as defined in section 1861(u) of the Social Security Act (42 U.S.C. 1395x(u))) or a supplier (as defined in section 1861(d) of such Act (42 U.S.C. 1395x(d))) under the Medicare program under title XI or title XVIII of the Social Security Act (42 U.S.C. 1301 et seq.), including section 1834 of such Act (42 U.S.C. 1395m), for the same care or services. IHS will seek payment from all other liable payers, as permissible by law, prior to billing VA. VA is responsible only for the balance remaining after other third-party reimbursements. The term ‘COVID-19 emergency period’ means the emergency period described in section 1135(g)(1)(B) of the Social Security Act (42 U.S.C. 1320b 5(g)(1)(B)).

ACCEPTED:  
DEPARTMENT OF VETERANS AFFAIRS  
VETERANS HEALTH ADMINISTRATION  
/Richard A. Stone, M.D./  
Executive in Charge  
September 28, 2020

ACCEPTED:  
DEPARTMENT OF HEALTH AND HUMAN SERVICES  
INDIAN HEALTH SERVICE  
/RADM Michael D. Weahkee/  
Director  
September 30, 2020