
Health Care Solutions Coalition Update

Medicaid Tribal Consultation
July 2017

CMS Policy Change

February 26, 2016: HHS changed national Medicaid funding policy to cover more services for IHS eligibles with 100% federal funds.

- More services now considered provided “through” IHS.
- No longer limited to services provided in IHS facilities only.
- May apply to more than specialty care services, including transportation, pharmacy, hospital and long term care services.
- Maintains IHS responsibility to provide health care to American Indians.

100% Federal Funding Policy Requirements

1. Participation by individuals and providers must be voluntary.
2. Services outside IHS must be provided via written care coordination agreement.
3. IHS must maintain responsibility for the patient's care.
4. Provider must share medical records with IHS.

Implementing New Federal Policy Requires Changes

- Providers:**
 - Sign care coordination agreements with IHS;
 - Share medical records with IHS.
- IHS:**
 - Sign care coordination agreements with providers;
 - Maintain responsibility for patient care;
 - Accept medical records.
- State:**
 - Track care coordination agreement status and ensure appropriate billing.

SDHSC Recommendations / Next Steps

- ❑ Continue to work on:
 - ❑ Continued expansion of tele-health services
 - ❑ Increase capacity for mental health and chemical dependency services through tribal programs and I.H.S.
 - ❑ Supporting tribes who elect self-administration.
- ❑ Plan to start with care that originates at IHS and is referred to non-IHS providers.
- ❑ Savings leveraged will be used to fund several previous coalition recommendations including:
 1. Develop a Community Health Worker program in Medicaid

SDHSC Recommendations / Next Steps

2. Add Medicaid eligible behavioral health and substance use disorder providers
 - ❑ Licensed marriage and family therapists
 - ❑ CSW working toward PIP and LPC working toward MH providers
3. Cover substance abuse treatment for adults currently eligible for Medicaid (current coverage limited to adolescents and pregnant women)
4. Innovation grants for primary and prenatal care
5. If there are additional savings available after these items are funded: uncompensated care/shared savings

SDHSC Recommendations / Next Steps

Next Steps:

- Two subgroups formed
 - Shared Savings
 - Alternative Service Delivery