

VA Office of Tribal Government Relations



15th Biennial Board of Directors Meeting

Thunder Valley Resort

July 17, 2019

Lincoln, CA





VA Communications with Tribes

Mission Act

- Sep 2018 Office of Academic Affiliation (OAA) held Q&A NIHB Oklahoma City, OK
- Oct 2018 OAA presented to the Tribal Self-Governance Advisory Committee in DC
- Mar 2019 Office of Community Care (OCC) invited Alaska Tribal Leaders to participate in Tribal Self-Governance Conference in Traverse, MI
- Apr 2019 OCC presented to National Tribal Self-Governance Conference, Traverse City, MI
- Apr & May 2019 DTLL Office Enterprise Integration, VA compiling feedback w/anticipation of release to tribes
- Jun 2019 DTLL OTGR sent key information on implementation of Mission Act
- Jun 2019 SECVA taping with national syndicated radio show "Native American Calling" to discuss Mission Act



VA Communications with Tribes

Reimbursement Agreements

- Mar 2019 Office of Community Care (OCC) met with Alaska Native Tribal Health Consortium
- TBD DTLL seeking nominees for the Care Coordination Workgroup



VA Communications with Tribes

On the Horizon - FYI

- Jun 2019 D TTL from HUD regarding expanding Tribal HUD-VASH responses due by July 3, 2019
- 2019 Senators Tester (D-MT), Sullivan (R-AK), Udall (D-NM) and Murkowski (R-AK) introduced legislation for a VA Tribal Advisory Act of 2019 - to establish a VA Advisory Committee on Tribal and Indian Affairs

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Regional Update

Highlights

- Tribal Veteran Representative Training – 3 events, 1 OR, 2 CA anticipate 1 CA and 1 WA - these training are in collaboration with State Departments of Veterans Affairs and hosted by tribes
- Claims Events – 3 so far and 2 more scheduled - connecting Veterans to benefits and services in Indian Country
- Working with Urban Indian Health Programs to connect with VA programs
- Working with Senior Tribal Programs to connect with VA programs
- Working on National "I am Not Invisible Campaign" featuring Native Women Veterans who have served in the military
- VA will be releasing 2018 Executive Summary Report on VA Claims Events in Indian Country – Guide for Best Practice
- VA released its 2018-2024 Strategic Plan updated May 2019 – see link: <https://www.va.gov/performance/>

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VA ~ Office of Tribal Government Relations

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VA Indian Health Service (IHS) / Tribal Health Program (THP) Reimbursement Agreement Program

6/1/2019

Kara Hawthorne,
Program Manager




U.S. Department of Veterans Affairs

Background

- The VA- IHS/THP Reimbursement Agreements Program provides a means for IHS and THP health facilities to receive reimbursement from the VA for direct care services provided to eligible American Indian/Alaska Native (AI/AN) Veterans.
- This program is part of a larger effort set forth in the VA and IHS Memorandum of Understanding signed in October 2010 to improve access to care and care coordination for our nation's Native Veterans.
- The National VA-IHS Reimbursement Agreement signed in December 2015, and we began executing individual THP Agreements at that time.
- The National Agreement and THP Reimbursement Agreements with individual THPs and Alaska THPs extended to June 30, 2022.




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IHS/THP Milestones

- October 1, 2010: the VA Under Secretary for Health and the IHS Director signed a Memorandum of Understanding (MOU).
- March-May 2012: VA, IHS, and THPs initiated tribal consultation on a draft national agreement.
- June 2012: Confirmed the approach of one National Agreement with IHS and individual sharing agreements under 38 USC 8153 for THPs due to their sovereign nature.
- August 24, 2012: VA Under Secretary for Health signed and distributed the Dear Tribal Leader Letter with program guidance.
- December 5, 2012: VA-IHS National Agreement signed.
- June 28, 2018: VA-IHS National Agreement was extended through June 30, 2022.
- June 2018 - present: Most THPs Agreements were extended through June 30th, 2022.
- Present: Ongoing coordination and onboarding of THPs.




5/1/2019

Benefits

- **Collaboration** - Promotes quality health care through collaborative relationships both intergovernmental by sharing resources and with the community
- **Choice of Provider and Access** - Eligible AI/AN Veterans can choose to receive their health care from the IHS/THP facility and/or VA facility closer to their homes in a culturally sensitive environment.
- **Pharmacy** – facilities will be reimbursed for outpatient medications dispensed by the facility that are on the VA’s formulary. This is not limited to emergent prescriptions
- **No Copayment** – Pursuant to section 405(c) of the Indian Health Care Improvement Act (IHCIA), VA copayments do not apply to direct care services delivered by the IHS or THP healthcare facility to eligible AI/AN Veterans under agreements with VA.

Benefits Continued

- **No Outstanding Balances**
 - For United States lower 48 states, IHS and THP medical facilities bill third parties prior to billing VA. This means VA is only responsible for the balance remaining after third party reimbursements.
 - For Alaska Tribal Facilities, VA reimbursement payment under this agreement is considered as payment in full. Alaska THPs or other organizations cannot be reimbursed for such care from entities or individuals other than the VA.

Direct Care Services

- Reimbursement is for Direct Care Services
- Direct Care Services are defined as any health service that is provided directly by IHS/THP. This does not include Contract Health Services, unless those services are provided within the walls of the IHS or THP facility.
- VA will not reimburse for any services that are excluded from the Medical Benefits package or for which the eligible AI/AN Veteran does not meet qualifying criteria.

Payment Methodologies and Fees

- **Inpatient** hospital services are based on Medicare Inpatient Prospective Patient System (IPPS) for Lower 48 and All Inclusive Per diem Rate for Alaska.
- **Outpatient** services are based on the IHS All Inclusive Rate published in the Federal Register.
- **Critical Access Hospitals** are reimbursed at the established rate as determined by Medicare.
- **Ambulatory Surgical Services** are reimbursed at Medicare rates.
- **Administrative fees** applied to the following claims:
 - Except for Pharmacy, paper claims will incur a \$15 fee for the duration of agreements

Eligibility and Enrollment

- VA, IHS and THP are responsible for determining eligibility for health care services within their respective programs.
- The eligible Veteran must also meet IHS eligibility requirements and be eligible for services in accordance with 42 C.F.R. Part 136.
- Veterans must be enrolled in the VA system before a claim can be processed and reimbursed.

Status

- To date, VA has reimbursed over \$96 million for direct care services provided by IHS & THPs covering over 10,100 eligible AI/AN Veterans.
- IHS:77 Implementation plans signed.
- THP: Currently 114 signed agreements, with ~40 tribes in progress.



VA MISSION Act: An Overview Of Key Elements

<p>What is the MISSION Act?</p> <p>The VA Maintaining Internal Systems and Strengthening Integrated Outside Networks (MISSION) Act of 2018 will fundamentally transform VA's health care system. It will fulfill the president's commitment to provide Veterans with more choice in their health care providers. The Act includes four main pillars:</p> <ol style="list-style-type: none"> 1. Consolidating VA's community care programs. 2. Expansion of Caregivers Program 3. Flexibility to align its asset and infrastructure 4. Strengthening VA's ability to recruit and retain health care professionals. 	<p>Key Elements</p> <p>Community Care - Consolidates VA's multiple community care programs into one that is easier to navigate for Veterans and their families, community providers and VA employees.</p> <p>Caregivers Program - The Act expands eligibility for VA's Program of Comprehensive Assistance for Family Caregivers (PCAFC) by including eligible Veterans from all eras of service.</p> <p>Asset and Infrastructure - The Asset and Infrastructure Review (AIR) process in the Act will provide VA the necessary flexibility to align its infrastructure footprint with the needs of the nation's Veterans.</p> <p>Recruit and Retain - The Act will allow for additional, improved recruitment efforts, including a new scholarship program, greater access to VA's education debt-reduction program and improved flexibility for providing bonuses for recruitment, relocation and retention.</p>
<p>What is it NOT?</p> <p>The MISSION Act is not a step toward privatization. It's about significantly improving Veterans' experience and enhancing their access to care.</p>	

Veteran Community Care: Key Changes

<p>New for Veterans</p> <p>Veterans receive new benefits under the Veteran Community Care Program. These benefits include:</p> <ul style="list-style-type: none"> • Access to urgent care • Expanded eligibility for community care • Scheduling by the Veteran and VHA • Technology that streamlines communication
<p>New for Community Care Providers</p> <p>Establishment of the Community Care Network and Veteran Care Agreements. Community providers must now:</p> <ul style="list-style-type: none"> • Undergo an industry standard credentialing process • Be subject to an exclusionary process • Complete mandatory training • Technology that streamlines bidirectional communication
<p>New for VA Staff</p> <p>Introduction of new and modernized IT systems and business processes that will result in:</p> <ul style="list-style-type: none"> • Fewer manual process / increased automation • Increased availability of performance metrics • Broader options for care coordination • Faster, easier, auditable information sharing

Only direct impact to the IHS/THP reimbursement program is section 101, which allows for the continuation of the program

